

CBC Newsworld Television
February 18, 2006

National News Weekend Edition
Québec promises hip and knee replacements

Guests: Michael McBane and Brian Day

Transcript

JACQUIE PERRIN (CBC): Well it was an announcement about hips and knees, but to some it was a foot in the door for private health care. Quebec promised to provide hip and knee replacements and cataract surgery within six months of diagnosis. If the public system can't, they'll pay private clinics to do it. Dr. Brian Day is medical director for the Cambie Surgery Centre and a crusader for private clinics. Michael McBane is concerned about privatization in the system; he's with the Canadian Health Coalition. Hello to both of you.

DR. BRIAN DAY (Medical Director, Cambie Surgical Centre): Hello.

MICHAEL MCBANE (Spokesperson, Canadian Health Coalition): Hello.

PERRIN: Let me ask you first of all how significant is this Quebec ruling? Let me start with you Michael McBane.

MCBANE: Well I think it's very significant. It comes as a result of a Supreme Court ruling which challenged public health insurance in Canada. So it's very significant. It is probably more that meets the eye in the decision because I think governments in Canada are afraid to really tell Canadians that they want to privatize the health care system or at least the parts of the system that are profitable and so they'll use all kinds of code words like innovation et cetera and downplay the significance. So this decision doesn't have widespread privatization. It kind of has an erosion around elective surgery and they've previously eroded MRIs and diagnostics. So you can see the trend line is to take the profitable services out of the public system and put them into private for-profit clinics.

PERRIN: Okay Dr. Brian Day what are your thoughts.

DAY: Well I don't think this was a decision the Quebec government had a choice in. Actually they probably haven't gone as far as the Supreme Courts said they have to and this is essentially a discussion paper. But here are the facts. We have two million Canadians waiting for health care. We're ranked 30th in the world of the universal health systems around the world, we're the most expensive and there's something wrong with that equation. I think that the reason it's been so is that we've had a state-run monopoly. I don't think the private sector in any way is a panacea for the woes of our health care system, but I think it can help. It doesn't need to be a big component and I think here is an example. They're using... they're suggesting it as if the public system doesn't perform, then the patients will get treated elsewhere. And actually, six months is quite a long time to wait if you're in severe pain. So I think that this is a beginning. It's an evolutionary process. Quebec didn't make this decision unilaterally. It was the court, the Supreme Court of Canada, the same court that legalized abortion, same-sex marriage and gave the prisoners the right to vote. This is not a right-wing court. They said that Canadians were suffering and dying on wait lists and the governments had to do something about it.

PERRIN: Michael McBane, do you think this is going to significantly change health care in this country?

MCBANE: Well it's a question of an erosion so it's a gradual thing. I do agree that wait lists in some areas are way to long. I think the government of Alberta is an example of how to fix that. The hip and knee replacements in Alberta have gone from 47 weeks to 4.7 weeks in the public system. We have problems; we can fix it. These wait lists are created by politicians who have cut budgets. They've cut the number of hours that a physician can work and operate and obviously the way to clear the backlog is put the resources back in and let the physicians and the surgeons and the nurses work the hours required in the operating rooms. It's not going to get solved by letting our doctors leave the system and go work in a private system.

PERRIN: So do you think -

DAY: Well -

PERRIN: Just let me jump in. Do you Michael McBane that this is going to make a deterioration of the quality being offered those who are not part of the system?

MCBANE: Yes. I'm worried about the fact that they're not committing to fixing the problem in the public system. They are talking about the satellite for-profit clinics and the question is well if they have money for that, why don't they just fix the public system?

PERRIN: Okay. Dr. Day you have something to say about that?

DAY: Well it's like saying a monopoly is the way to go. And interesting that Michael should use the Alberta example, because they use the private clinics to help reduce the wait lists. But I mean there's a perfect example in British Columbia where under the NDP government our clinic and other clinics evolved actually... that the Workers Compensation Board. Injured workers don't wait to see a doctor. They don't wait for a test like an MRI. It's all funded. And they don't wait for surgery. And it's a mixed public-private system and it's proven to work in Canada. The leader of the NDP Jack Layton used a private clinic. There is nothing immoral about using the private sector when the public system is not delivering and I think that it will help the public system improve.

PERRIN: And just before we go we've only got a few seconds left. How likely is it that Canadians will be able to buy this private health insurance as a result of this? Michael McBane let me start with you.

MCBANE: Well I mean we have... Canadians are pretty naïve if they think private health insurance are going to fix public wait times. The way the insurance companies work is if you're sick and you need a knee replacement or need a heart replacement, you're not eligible for insurance. So the Supreme Court judges got it wrong. It was an atrocious decision to say that the solution for wait times in the public system is to allow people with money to buy private insurance. They obviously don't understand how insurance works. Insurance is for the healthy.

PERRIN: Okay. And Dr. Day just... last 10 seconds here.

DAY: Well Michael McBane and all of the people in the building at Canadian Labour Congress where he houses himself have private health insurance. We just happen to call it extended health insurance. But it covers the drugs and the physiotherapy and the dentistry that those 30 percent that don't have it aren't covered for.

PERRIN: Okay. Thank you both. This story will continue for awhile and we appreciate your input today. Michael McBane and Dr. Brian Day thank you.