

Canadian Press (June 17, 2005)

# Romanow says Supreme Court ruling may kill Canada Health Act

By Dennis Bueckert

OTTAWA (CP) - Roy Romanow says last week's Supreme Court ruling on private health insurance in Quebec may kill the Canada Health Act, the legal foundation of medicare.

The former Saskatchewan premier, who headed the 2002 royal commission on health care, has sharply stepped up his criticism of the ruling since it was first brought down. Last week he said the verdict would not have a major impact, but since then, he said, he has read it twice.

He now calls the ruling "confusing, contradictory and in many ways just not consistent with any of the evidence - in fact, it's based on no evidence."

By guaranteeing Quebecers the right to private insurance for medically necessary services, he said, the majority ruling implicitly undermines the Canada Health Act. The act requires insured services to be provided "on uniform terms and conditions."

"I would not be surprised if somebody would take the logic of the majority of the court and try to apply it to knock off the Canada Health Act. It may be knocked off now by virtue of the decision itself," he said

In a 4-3 ruling, the high court struck down Quebec's ban on private health insurance for medically necessary services, saying the ban violated guarantees of life and personal security under the Quebec Charter of Rights.

The majority ruled that plaintiff George Zeliotis had been forced to wait an unreasonable time for a hip replacement. Yet the court did not define what a reasonable wait would be, said Romanow.

Provincial health ministers and high-level officials held a conference call Thursday to discuss the ruling.

David Spencer, a spokesman for Ontario Health Minister George Smitherman, chairman of the meeting, described it as a highly productive discussion in which participants discussed efforts to reduce wait times.

An official from another province, who spoke on condition of anonymity, said nothing substantive came of the discussion.

In the Commons, Prime Minister Paul Martin said the federal government has already taken action to deal with long wait times through last year's \$41-billion federal-provincial health accord.

"What we are doing is strengthening the public (system)," said Martin.

Health Minister Ujjal Dosanjh has said all provinces are working to shorten wait times and the Liberal government will fight all efforts to privatize health care.

*more ...*

Globe and Mail  
June 10, 2005

## **Now is the time to stand up for Medicare**

By ROY ROMANOW

Canadians should be optimistic that the nation-building values of Canada's public health system were reaffirmed by yesterday's Supreme Court ruling, with all of the court's contributing members recognizing the need to maintain the integrity of our public medicare plan.

That said, the decision certainly creates the appearance that the slide to privatization has increased in the province of Quebec. It is also fair to say that evidence of creeping commercialization is showing up in other parts of our country as well.

All of this means that the not-for-profit/profit debate that has been around since the beginning of medicare has picked up impetus once again.

There are those who have already seized on aspects of the court's decision to claim victory for selling something old as something new. They advocate for a return to premedicare days and, with their strong advocacy for a pure market approach to health care, they have gleefully proclaimed the death of medicare, just as they have done in the past.

Not so fast.

The evidence is overwhelming and clear: The two-tiering of health care represents a march backward in time, to when good health care depended on the size of one's wallet -- to a situation like that which currently prevails in the United States, where last year, more than 50 per cent of all personal bankruptcies were due to health care expenses. If anyone doubts the impact of the U.S. approach, talk to the directors of General Motors. They just eliminated 25,000 jobs in the United States, largely due to the company's burden of health-care costs.

Cherry-picking great examples of American health-care practices while ignoring the millions of the uninsured who get sick just worrying about getting sick does not make the case. It is a false economy to advocate for transferring the costs of health care from the public purse to the private purse. We will pay one way or the other.

The simple fact is that the yearly percentage of GDP spent on total health care in Canada is about 9.6 per cent as compared to nearly 15 per cent in the United States. That's more spending in the United States, yet the result is less coverage and worse health outcomes. And don't forget the millions whose coverage is totally inadequate.

Because the U.S. model is so unacceptable to Canadians, modern-day advocates of privatization are now cherry-picking various bits and pieces from Europe. But their concocting European/Canadian hybrids are just the latest Trojan Horse for treating health care as a commodity.

The Supreme Court has provided a wakeup call to all of us, especially those charged with fixing our single-tier medicare program. This judgment must serve to hasten the progress of real reform. As a result of last September's first ministers' health-care deal, money is no longer an excuse.

Many elected officials say that they are "standing up for medicare." They understand the clear evidence regarding the cost-effectiveness of a public-good approach over the market alternative. And perhaps some leaders also publicly extol the virtues of our single-tier approach because they know that's what an overwhelming number of Canadians want. Either way, the rhetoric must be backed up by more urgent and tangible progress.

The blueprint for change is there -- it's just waiting to be put into practice. But we must apply the entire blueprint: An integrated approach is critical. To take on the problem of wait times in an isolated way, without implementing reforms to primary and home care, will not work over the long haul. Dealing with some wait times may pay dividends, but other serious problems, such as acute care, will keep popping up if an ad hoc style rules over an integrated approach. What's vital to real progress is investing more money in health promotion, increasing the role of nurses and other health professionals, and committing to the kind of rigorous and transparent accountability that remains elusive.

Medicare needs fixing, not scrapping. Canadians overwhelmingly favour this approach over one (however disguised) that allows those with wealth to purchase health care, draw off doctors from our universal system and, at the same time, does nothing to reform, strengthen, and sustain the system for all Canadians.

The progress and pace of health-care reform will either prevent or fuel a myriad of further court challenges. It will take strong, determined, and visionary leadership to achieve a modernized medicare system and, in doing so, a better nation. This is one of those moments when the Canadian people must stand up for medicare and declare that reports of its death have been greatly exaggerated.