

Ottawa Citizen
February 8, 2009

The hip bone's connected to the wallet

Three good reasons why for-profit clinics don't work

By Julie Mason

Last summer, the Man of the House became the proud owner of a shiny new titanium hip. He hobbled around for a few months while he waited for his surgery. Wait time in Ontario is listed as 174 days, and he probably was in the queue about that long. He had a top-notch surgeon, great care in a good hospital and a steady recovery. While his golf game didn't improve, his quality of life sure did.

Just as important, he didn't have to pull out his credit card, mortgage the homestead or sell our firstborn to get it.

So the Man of the House doesn't have much sympathy for Dr. Brian Day. The good doctor has just launched a constitutional challenge to our public health-care system. Dr. Day, the former president of the Canadian Medical Association, is owner of the Cambie Surgery Centre -- a provider of for-profit surgical services in British Columbia -- and spokesman for the Canadian Independent Medical Clinics Association, a group of private clinic operators who brought the legal challenge in January.

In what they are calling a "Charter of Rights issue," the private clinics in British Columbia are basing their case on the 2005 Supreme Court of Canada decision in favour of Dr. Jacques Chaoulli. A fierce advocate of for-profit health care, Dr. Chaoulli, together with a patient who had to wait a year for a hip replacement, challenged the Quebec government to allow patients to buy insurance for medically necessary services from a private clinic if access to public services was seen as too slow.

The Quebec government's response was Bill 33, which took steps to improve access in the public system while allowing private medical insurance to cover medically necessary procedures in only three areas: total hip and knee replacement and cataract surgery.

Medicare advocates worried about the Chaoulli case opening the door to more for-profit clinics and private medical insurance across the country. There are rumblings from Alberta, but it's no surprise that the latest challenge came from British Columbia where there are at least 25 surgical clinics selling medically necessary services.

The Ontario Health Coalition, a pro-Medicare group based in Toronto, released a compelling case against private medical services last fall. In a comprehensive report on for-profit health services, the coalition took on the main arguments made by the private clinics:

1. Private clinics mean shorter wait times.

The theory is that when wealthy patients pay for private services, it shortens wait times for the rest of us. Not so, says the coalition. In fact, wait times are highest in the areas with most privatization. Private clinics poach scarce doctors and highly trained health-care workers from the public system, which results in longer waits for those of us in the public queue.

2. Private clinics improve access to health care.

Most of us can't afford for-profit clinics. Physicians' clinics routinely charge up to \$3,000 a year for "elite" services, and the clinics can charge up to \$18,000 for a procedure like a knee replacement compared to the public cost of \$8,000 in a public hospital. In addition, private clinics usually set up in urban areas where more people can afford their services, leaving rural and poor communities under-served.

3. Private clinics save money for the public system.

To survive financially, many for-profit clinics are finding ways to bill the public system, patients and their insurers for medically necessary services. Procedures in for-profit facilities cost more than the same procedures done in public hospitals. A new hip for the Man of the House is estimated to cost up to \$21,000 in a private clinic compared to the public cost of about \$10,000. In addition, private clinics want patients with no complications -- a practice called "cream skimming" -- that leaves the difficult, risky (that is, expensive) patients to the public system and treats only the easiest and highest-profit patients.

The coalition's report details many more compelling economic reasons why private clinics and for-profit services don't work. Still, this public policy issue just won't die, no matter how many times we drive a stake through its heart. Using phrases like "consumer-driven" and "patient choice," the Dr. Days of the world will keep dangling for-profit services as the cure for our Medicare ills.

But there's something more than economics at stake. Canadians built a first-class public health system -- and believe in it -- because most of us find it repellent to allow anyone to buy their way to the head of line for health care. In spite of its many flaws and frustrating delays, our public health system is still the best way to make sure all of us get fair access to quality care.