

Winnipeg Free Press
December 4, 2005

For-profit model is wrong one

BY TIM SALE

PUBLICLY funded health care is a sacred trust with a simple principle: if you need access to care, you can get it without having to reach into your pocket. This is one of the wonderful characteristics of this country: a place where the size of your wallet does not determine your level of care.

Our publicly funded health-care system makes Canada one of the top countries in the world and is a defining feature of who we are. But sometimes we are faced with pressure to adopt a two-tier, user-pay system. Concerns about timely access and aging systems can make for-profit care seem an attractive quick fix.

While a diagnosis for system change might be correct, the prescription of for-profit, user-pay health care is not the right one. There is no argument that health care must be reformed. The question is how to do it. The provincial opposition parties have publicly supported a user-pay approach. Rather than improve the public system, they appear ready to turn their backs on patients and leave it up to clinics to charge people for service.

We think there is a better, more common-sense approach to solving our challenges. Good health care cannot be achieved with just good intentions. We need to invest more in key initiatives, implement better management, reduce waste, and increase innovation.

One of the key challenges is to reduce waiting lists. Provinces and the federal government, led by Manitoba's Dr. Brian Postl, the federal wait times adviser, have made this a top priority and are working together to bring down waits. In Manitoba, we have initiated reforms with positive results. Since 1999, we have recruited more nurses, doctors, and other health-care professionals. We have invested in more equipment and staff, and we have seen wait times reduced dramatically in areas such as cardiac surgery and cancer treatment. Our strategies are working, but there is more to do.

We are moving to replicate those successes in areas such as diagnostic testing, hips and knee surgery, and eye surgery. Over the next few years we will meet our federal commitments by spending \$155 million on a strategy to build on this progress.

We are also innovating, taking advantage of new technologies, new procedures, and more efficient ways to deliver care. Pan Am clinic is a world-class facility with a state-of-the-art MRI machine that can perform more than 4,000 scans a year at a cost cheaper than what a for-profit clinic can offer. How? By simply eliminating the profit charged by private clinics and capitalizing on system efficiencies, Pan Am can offer an MRI for between \$200 and \$300 and can do more of them than a for-profit clinic using the same equipment.

We must also recognize that there is a role for the private sector in health care. Private

clinics can offer important services to Manitoba Public Insurance, Worker's Compensation Board, and the military. The government also maintains contracts with private laboratories for testing and other services where they negotiate specific prices for services that complement the system as a whole. And of course, doctors remain private operators. These are important roles that help improve patient care.

What we need are partnerships that work. Unfortunately, there is no evidence that supports the claim that a parallel for-profit system reduces wait lists. Instead, wait lists go up. Our critical need is staff and when for-profit clinics poach technicians and other professionals from public hospitals, people who cannot afford the procedure at a for-profit clinic will wait longer. We don't think that's the best way to care for patients.

I remember life before medicare. Those without money got substandard care if they got any care at all. Many people lost houses because they couldn't afford their medical bills. Although today we might only be talking about an MRI scan, tomorrow it could be a \$50,000 to \$100,000 cardiac bypass operation. In the end, for-profit medicine will cost everyone more in higher costs and longer wait times. Medicare is a great asset here in Manitoba and one I think worth preserving.

.....

Tim Sale is Manitoba's Minister of Health