

Mr. Olson: The answer to that, Mr. Chairman, is that we are making this money available to thousands and thousands of farmers with all sizes of operations.

Mr. Bigg: Mr. Chairman, my experience has been that there are many smaller farmers who are unable to qualify for loans because the supply of money runs out. Preference is given to the larger, more efficient—I put that in brackets—farming units.

The Chairman: Order, please. So that the house may proceed to the consideration of private members business, shall I rise, report progress and request leave to sit again at the next sitting of the house?

Some hon. Members: Agreed.

Progress reported.

Mr. Deputy Speaker: Order. It being five o'clock the house will now proceed to the consideration of private members business as listed on today's order paper, namely notices of motions, public bills.

EXPROPRIATION ACT

AMENDMENT RESPECTING TREATMENT OF PROPERTY OWNERS

On the order: Private members notices of motions:

No. 5—Mr. Chappell—September 18, 1968

That, in the opinion of this House, the government should consider the advisability of giving immediate consideration to amending the Expropriation Act so that an owner whose property is expropriated will be dealt with in a more business-like and just manner, and more particularly so as to provide for a notice before the expropriation takes place, for a substantial advance of money at the time of taking property, for the spelling out of measures of compensation, for the change of interest rate to the bank rate of interest, and, finally, to provide that if property is affected or invaded in part by an act on the part of expropriating authorities, the owner may call upon authorities to take all his land or property.

Mr. Hyliard Chappell (Peel South): Mr. Speaker, I am ready to proceed with the motion but the Minister of Justice (Mr. Turner), who wishes to be present to speak to it, is absent on government business. Therefore I ask that the house grant unanimous consent to allow the motion to stand until the house next deals with private members notices of motions, and that the motion retain its position.

Mr. Deputy Speaker: Is the house agreed?

Some hon. Members: Agreed.

Motion stands.

● (5:00 p.m.)

HEALTH AND WELFARE

WITHHOLDING OF SHARED COST PAYMENTS FOLLOWING IMPOSITION OF UTILIZATION FEES

Mr. Les Benjamin (Regina-Lake Centre) moved:

That, in the opinion of this House, the government should give consideration to amending the Hospital Insurance and Diagnostic Services Act and the Medical Care Act to provide that the imposing by any province under its own hospitalization and medical care plans of deterrent or utilization fees upon recipients of these services, will disqualify such province from receiving any share of costs from the Government of Canada.

He said: Mr. Speaker, as the house is aware the purpose of the resolution is that this government should give consideration to amending the Hospital Insurance and Diagnostic Services Act and the Medical Care Act and, as Your Honour read, to provide that where any province imposes utilization or deterrent fees upon hospital or medical care services under its own provincial hospital or medical care plan, it be disqualified from obtaining any share of the costs of its hospitalization and medical care plan from the federal government. This would apply whether the deterrent fee is a co-insurance fee, utilization fee, or anything else that one may want to call it.

Universal public hospitalization and medical care plans in theory imply, and in fact require, that the total population prepay the cost of hospital and medical care benefits that any citizen may incur in the event of illness. Despite organized opposition from some individuals and groups, the fact remains that the overwhelming majority of Canadians wish to participate in a collective way to protect themselves and their families from being faced with large financial obligations at the time of or immediately after illness strikes.

During many years of experience—much of it bitter—which led to a demand by the people for a method of insuring themselves against the day when sickness or injury might strike, various organizations, then municipal governments and then provincial governments moved to implement plans that gave a citizen this kind of protection and service. In other words, Mr. Speaker, the consumers of medical and hospital services decided, through their governments, to prepay the costs of their hospital and medical care needs.

Underlying these measures is the principle that good health is a right—I emphasize—is a