

Medicare

[English]

Mr. H. A. Olson (Medicine Hat): Mr. Speaker, the bill before us asks this house to adopt the principle of the federal government making contributions toward the cost of insured medical services incurred by the provinces. In my opinion that is the only principle we are being asked to adopt.

This bill is not a comprehensive medical care plan, if I may put it that way, because it states very specifically that federal payments will be made to a province or provinces where a medical care insurance plan is established, or plans are established, by act of provincial legislatures. It is such provincial acts that constitute the medical services care plan. They may not all be identical, but they are what set up the plan. Therefore the only principle we are being asked to consider is that of the federal government making a contribution to the cost of plans set up by provincial governments.

At this stage I do not believe we need worry ourselves about whether we are for or against the principle of medical services plans set up and operated by public bodies such as provincial governments, because this is something which has already been done. It has been done in Saskatchewan, in Alberta, in British Columbia and in Ontario. Whether or not provincial legislatures pass such acts and set up the plans is entirely up to them. Granted, it will be substantially easier for them to do so after this bill is passed, which provides for a contribution from the federal government of 50 per cent of the cost of any plan which meets the criteria set out in Bill C-227. Therefore it is an academic question whether we accept the principle of medical care service plans because, so far as I am concerned, this was accepted by at least four of the provinces a long time ago.

We in this party disagree with some of the provisions of the bill, particularly those dealing with the criteria as outlined in clause 4, and when we reach committee stage we intend to argue in favour of some changes that we believe will improve the bill. But so far as the question of voting for or against the amendment that is before the house is concerned, I do not think we should be confused as to whether the principle is for or against a federal medical care service plan, or the establishment of such a plan.

• (5:30 p.m.)

The question is simply whether or not the federal government should participate in the

financial support of those medical service plans. For example, the amendment says that this house should set aside this legislation until the co-operation of the governments of the provinces is secured. Well, if one reads all the bill carefully, and particularly clause 4, it is perfectly obvious there can be no medical care or health services care plan in any province unless the province does agree; not only that, but even if the province agrees, it must pass an act through its legislature setting up such a plan. It seems to me therefore that it is almost foolishness to suggest that we must secure the co-operation of the provinces before the federal government offers to make a financial contribution, because as I said, it is pretty obvious that the provinces will have to agree before the people in the provinces will have a medical services plan available to them.

The amendment also says that we should wait until there is adequate prior provision for sufficient medical research, the training of adequate numbers of doctors and other medical personnel. Mr. Speaker, I fail to see how it is going to require more medical personnel to administer a medical services plan, whether or not the federal government makes a contribution to the payment of that plan. I say this because in British Columbia, Alberta, Saskatchewan and Ontario, where medical service plans already are set up, whether or not the federal government pays half of the cost is not going to add any work load, in my opinion, to the medical personnel which will be required to perform these services.

The amendment also says that we should wait until there is provision for those persons who are unable for financial reasons to provide medical services for themselves. Well, clearly the provision of medical services for people who are unable to pay for those services, either by way of premiums or by whatever method is used, is up to the provincial legislatures. In Alberta, for example, anyone who qualifies under a means test—and I presume this is what is meant—and for financial reasons is eligible for social welfare of any kind, whether it be that in respect of senior citizens, mothers allowances, widows allowances, invalid allowances, or what have you, is also provided with a medical services card which gives him 100 per cent coverage in so far as medical services are concerned.

In many cases, in addition to the medical services which are provided to these people who are unable financially to provide their