

Income Tax Act

that these schemes give them hospital insurance, when the people selling the insurance have not hospitals to put them in. That situation exists right across this country.

I do not think the government can pass in this house legislation in respect to income tax for a small section of the population. In the second place, I do not believe income tax can be optional. I think income tax must be firm and must be applicable to everybody in the country in exactly the same way. This legislation, if it is passed, would be class legislation, as it applies only to those who can afford to enter into a hospital insurance scheme such as those sold today by the various insurance companies and other organizations across the country. For that reason I oppose it.

This resolution is proposed by a member of the house who is opposed to national health insurance. I heard him on a television news-cast, and he emphatically made it clear that he is not favourable to national health insurance as discussed in this house on many occasions. In my opinion this resolution is merely an attempt to justify the present schemes and get the contributions to these schemes as tax offsets. If we were honest in the opinions we have expressed about national health insurance, I think we would see that something was done about it. I think the people of Canada today from coast to coast, expect the government within the foreseeable future to indicate a comprehensive scheme of national health insurance. If they do not get it within a reasonable time I think most people in this country are going to be badly disappointed.

The mover of the resolution is a medical doctor. I respect his opinions in these matters. I think he will agree with me that if there is a need in the country today, that need is to bring medical science within reach of the average person in this country.

Mr. Trainor: I suggest it is there already. I suggest it is within reach of the average person.

Mr. Gillis: I hazard a guess that one-third of the wage-earners and salary earners in this country are working below the income tax levels as far as salary and income are concerned. I am certain the hon. gentleman will agree with me that those people cannot pay present medical costs. There is only one way to get medical science to them, and that is by having those who can afford to pay taxes to support a national health scheme make medical science available to them. There is no other way in which they are going to get it.

[Mr. Gillis.]

We just cannot go on buying health insurance from private companies and then standing in queues at hospitals waiting to get in. I do not think anyone has a right to sell something they do not possess. Hospitalization is not the prerogative of private companies. They do not have hospitals. The citizens of the community, with contributions by governments, build hospitals. Many of them across the country are kept up on a subscription basis by the citizens who built them. The private companies will go into these communities and sell this type of insurance without any guarantee at all that you can get into a hospital. In every town across the country there is a waiting list of those who are buying this type of insurance.

If we are honest about this matter, I think the thing we should be discussing is, first, the abolition of the floor on medical expenses. I think people should have the right to write off the amount of those expenses. You can write off a great many things that could not be justified on as good grounds as those upon which you can justify the abolition of that 3 per cent floor. The 3 per cent floor is all right if you can write a cheque for \$500 or \$1,000. If you can do that it does not mean very much to you. But if you are in a bracket under which you are paying \$50, \$75 or \$100 in taxes and you get a medical bill of \$25, \$30 or \$45, it means much more to you; that 3 per cent relief would be of much more advantage than to the fellow who could write a cheque without any difficulty. This step would mean a great deal to the lower income groups.

I think that is the thing we should be definite about. I believe a resolution on this subject should be on that particular point, namely the abolition of the floor. Then I think we should be putting all our vocal chords to work in urging the government to try to bring medical science to the thousands of people across this country who cannot afford it.

If you are living in Winnipeg, Halifax, Vancouver, Montreal or Toronto, you have very good medical facilities. But if you are living down in the maritimes, particularly in the lower end of them 300 miles east of Halifax, or are living in some sections of New Brunswick, or on the prairies or in the far west where those facilities are not available, this is what happens. You have hundreds and hundreds of people in those communities where you have just ordinary practitioners. If you get any kind of disability that requires expert attention you are obliged to go from door to door, from neighbour to neighbour, attempting to borrow \$400, \$500 or \$1,000 to send people over to some clinic