

Mr. Caouette: In French, we say "yeah, yeah".

Some hon. Members: Oh, oh.

[*English*]

Mr. Knowles: La même chose.

Mr. Caouette: The hon. member for Winnipeg North Centre speaks very good French. He says "la même chose". Apparently "yeah, yeah" in French is the same as in English.

[*Translation*]

Therefore, Mr. Chairman, I support the amendment of the hon. member for Winnipeg North Centre who is not asking for any special consideration, either in the case of podiatrists or of opti...—I was going to say optimists—oculists in our country, but that equal and fair consideration be given to them.

Mr. Chairman, I accept and strongly support this amendment, and I am asking my colleagues to do likewise. I am asking the government and the responsible minister who is not here at the moment—I see former ministers and others who are here, for instance the Minister of Veterans Affairs (Mr. Teillet), but it is not quite the same thing—I am asking the Minister of National Health and Welfare to accept this amendment so that oculists or optometrists and podiatrists may be recognized as are general practitioners. A general practitioner is not competent as concerns eyesight. He is competent in medicine. However, oculists and optometrists, like podiatrists, are not now included. I would like to hear the minister say that, if a province includes them in its legislation, because this Bill No. C-227 will unavoidably relate to a bill introduced in a provincial legislature, the federal government will undertake to include optometrists or oculists, podiatrists, just like medical practitioners or specialists. Then, we will have nothing to say against that and we will not be opposed to Ontario, Manitoba, Saskatchewan, Alberta, British Columbia or the maritimes. But what we want is this: when the premier of the province of Quebec decides to introduce a bill or legislation on medical care insurance, then the federal government should not be an obstruction, but it should accept the decision of any province whatsoever with the greatest respect for provincial autonomy and for the good of the Canadian nation as a whole.

[*English*]

Mr. Knowles: Mr. Chairman, I should like to return to the point of order raised by the

Medicare

Minister of National Health and Welfare. I thank him for the compliment he paid me when he suggested that this amendment was drafted with some ingenuity; I assume he meant that as a compliment.

I should like you to consider the two points the minister sought to make against my amendment. The first point is that it goes beyond the terms spelled out in the resolution which preceded the bill. The second point is that it would involve an additional charge. I think he gave the figure of \$18 million. I might question that figure, but even if it were \$1 million it would involve the same procedural point. At any rate, these are the minister's two contentions: first, that my amendment goes beyond the terms of the resolution and, second, that it involves an additional expenditure of money. The minister contends that on these two grounds it is out of order.

• (9:00 p.m.)

With respect to the first contention of the minister, to the effect that my amendment goes beyond the terms of the resolution preceding the bill, may I echo what the hon. member for Fraser Valley said when he spoke to the point of order, namely, are we talking about the insuring of services or the insuring of practitioners? Subclause (d) by its first two words says that it is a definition of "insured services". We already accept, for the purposes of this amendment, the proposition that what we are talking about is insured services of a medical nature. That is what the preamble to the bill says; that is what was said in the resolution preceding the bill.

We are talking, therefore, about medical services and not about the persons who may perform them. We are suggesting in this amendment that the definition of "medical services" simply be made clear to spell out that if the medical services are performed by persons who in doing so are performing services that would be performed by medical practitioners, they should be covered as insured services. I submit, therefore, that on that count the minister's argument fails.

But, of course, I believe the minister was actually relying more heavily on his second argument, namely, that, after all, if this amendment is allowed it will cost extra money and therefore a private member cannot move such an amendment. It is a debatable question whether it would cost extra money if you force people to go to an ophthalmologist rather than an optometrist. It may cost the