Proceedings on Adjournment Motion

PROCEEDINGS ON ADJOURNMENT MOTION

A motion to adjourn the House under Standing Order 40 deemed to have been moved.

HEALTH—INCLUSION OF PARAMEDICAL SERVICES
UNDER MEDICARE

Mr. Randolph Harding (Kootenay West): Mr. Speaker, on November 18 I directed the following question to the Minister of National Health and Welfare (Mr. Munro):

How many provinces must agree to the inclusion of paramedical services under medicare before these services will be accepted by the federal government as a cost-shared item?

The minister replied that a consensus must develop before there would be any extension of coverage. He also said this question was "never seriously considered until every province had entered medicare and that was just about the case now." I also asked the minister if the federal government was considering cost-sharing of paramedical services with any province which would include these services in its medical care program. His answer was evasive and I welcome this opportunity to clarify the situation.

May I briefly sketch the problem which exists in British Columbia? When the B.C. medical plan was set up several years ago it covered all paramedical services up to a set amount each year. These services included those of chiropractors, podiatrists, optometrists, naturopaths, physiotherapists and osteopaths. In July of this year the B.C. government cut in half the set amount of paramedical services which an individual could obtain under its medical plan. This cut was entirely the responsibility of the provincial government because it never had any costsharing agreement with the federal government concerning these paramedical services. The provincial government knew this when it set up the plan. However, it also knew that the federal plan made provision for the inclusion of these services on a cost-shared basis, without the consent of all the provinces which is apparently now being demanded by the federal government.

We now see this ridiculous situation in respect of the various paramedical services. Each group must bargain individually with each province for inclusion in its medical care plan. I presume if agreement is reached with all provinces, then the federal government will consider the cost-sharing of the particular paramedical service with the province. This process is time-consuming and can delay for years the inclusion of all these necessary services in our provincial medical care plans. I might add that this is one bad result of getting away from a single national medicare plan to cover all Canadians.

I believe the federal government should share all these paramedical costs with the provinces. If any province wishes to include these services under its plan, then the cost should be shared. I should like to bring to the attention of the Minister of National Health and Welfare how essential it is to include all paramedical services in every medicare plan. In respect of many individuals who

have back trouble and require chiropractic treatment, we find this is perhaps the only type of health treatment required. Why should this treatment be denied, or paid for on a limited scale as is the case in British Columbia? Why should treatment by an optometrist be denied those who need it? Again, we find this is often the only health requirement of an individual. The same applies to physiotherapists and other paramedical services. To deny these as cost-shared services under medicare would often put them out of reach of those who need them most.

Since paramedical services were cut in half by the government of British Columbia last July I have received a large number of letters from throughout my riding urging that the federal government share these services and that they be made available to those requiring them. I fully endorse this position. I point out that many of those receiving these services are senior citizens and the curtailment of the services in British Columbia has been especially hard on them. I have received letters from every senior citizen group in my riding urging that immediate action be taken. These citizens do not have the money required for treatment beyond the treatment presently allowed. We should make certain that this type of health care is not denied the people of British Columbia or those of any other part of Canada.

I again urge the minister and the government to immediately review this important aspect of health care and bring it into the area of cost-sharing. There can be no valid excuse for delaying action on this issue. The health of our people should be one of our prime responsibilities and paramedical services plan a vital role. This is why we are requesting complete clarification of the issue.

[Translation]

Mr. Gaston Isabelle (Parliamentary Secretary to Minister of National Health and Welfare): Mr. Speaker, would it not be possible for the hon. member for Vancouver-Kingsway (Mrs. MacInnis) to make her remarks now, as they deal with the same subject to which the hon. member for Kootenay West (Mr. Harding) has just referred, so that I can reply to both at the same time?

The Acting Speaker (Mr. Laniel): Order. The Parliamentary Secretary will understand that the Standing Orders of the House provide that a representative of the government must answer every question put to him, but if the hon. member for Vancouver-Kingsway agrees, I think we may allow the Parliamentary Secretary to give one answer to both questions.

Mrs. MacInnis: Mr. Speaker, I had hoped to hear the Parliamentary Secretary to the Minister of National Health and Welfare, since I shall not deal with exactly the same subject as my colleague.

Mr. Isabelle: Mr. Speaker, I wish to point out that the health insurance plan was not designed, at the time of its inception, to cover all personal health care expenses. Indeed, the Right Hon. Mr. Pearson specified, in 1965, as