

*Health Insurance*

like to lay before the house at this time in connection with this bill and this amendment, which I think is out of order. Nevertheless, it affords me an opportunity to say that the house should not forget that under the proposal made by the federal government last January we indicated that once six provinces accepted the proposal we would take the necessary legislative authority to carry out our portion of the proposal.

As I pointed out, we have not got six provinces now, we have only five. Nevertheless the federal government has considered it desirable, notwithstanding the terms of its proposal, to bring forward legislation at this time, anticipating, as I think we have every reason to, that before too long we shall have at least one, if not two more provinces. But whether or not that eventuates, the fact is that we have taken a step which goes beyond what we told the provinces we would do; we have acted although six provinces have not come in, so that the legislation, once it receives third reading, will be on the statute books and will be our authority for paying out considerable sums of money on a sharing basis with the provinces in respect of hospital and diagnostic insurance schemes.

It should also be noted that we have been able to reach this particular proposal as a result of the co-operative effort between provincial governments, ourselves, voluntary agencies and others throughout the country during the period of the last eight years, in the steps that have been taken to improve the general public health and to improve the health facilities of the nation, to an extent that we now have facilities which justify our embarking upon the important step that now confronts us. Together with the provinces and voluntary bodies which have borne the greater brunt of the load, we have built some 70,000 hospital beds which represents a considerable achievement and in the language of the premier of Ontario it was the national health program which spearheaded this whole program.

Very little has been said about one feature of the bill which is extremely important and that is the diagnostic services feature. All provinces will not take advantage of the diagnostic services feature to the same extent. For instance, we have been told by Ontario that they propose to take advantage of the moneys made available by the federal government for diagnostic, radiological and other services of that character only in so far as they apply to in-patients, and this despite the fact that the bill provides for diagnostic services for out-patients as well. Some provinces will take advantage of that proposal

and others, as I have said, will not, but it is very important to recognize the significance of that phase of the proposal covering diagnostic services concerning which there has been very little mentioned here today or throughout the debate.

The advantages of this bill are very considerable. I have not suggested in any way that as a result of the action of the federal government alone we are going to have hospital insurance. I have clearly indicated time and time again in answer to my friend the hon. member for Winnipeg North Centre (Mr. Knowles) that in a matter of this sort co-operation with the provinces was an essential prerequisite to action. Premier Frost has indicated that he cannot begin his scheme until January 1, 1959 but when the scheme does get into operation in a number of provinces the co-operative effort that has taken place will result in making available to all persons a simple method of budgeting the unpredictable costs of essential hospital care in Canada. That will be the first result.

Second, no one will be denied the benefits of the plan because of age, health or economic circumstances.

Third, no time limit will be placed on the number of days of care so the individual will be protected against the catastrophic cost of protracted illness requiring hospitalization over a long period.

Fourth, no dollar limit has been placed on the specific services in hospitals that may be required.

Fifth, because one-half of the national cost of hospitalization will be paid out of the federal treasury—indeed in the case of some provinces over 60 per cent—it will be possible for the provinces to offer premiums that will be more attractive than those charged under any existing plan in Canada.

Sixth, the individual will be free to purchase any additional protection he may require in terms of private or semi-private care or other special benefits through regular commercial or voluntary insurance plans.

Finally, in addition to insuring patients against their hospital bills this program will provide an organized system of financial support for hospitals and will thus largely eliminate the problem of hospital deficits that are now plaguing so many Canadian municipalities.

This measure which is being supported by all sides of the house and which I hope every hon. member will have an opportunity of voting for—

**Mr. Knowles:** Hear, hear.

**Mr. Martin:** —is one that does represent a very significant step and is an extremely important measure affecting the health and