

*Health and Welfare*

Many provinces in Canada have developed programs of health services for special needy groups of persons. The province of British Columbia, the province of Alberta, the province of Saskatchewan, the province of Manitoba and the province of Ontario have developed programs by which they have made per capita allowances into pooled funds. Out of these funds services are provided. The medical profession bills the fund, usually on a fee for service basis, for services rendered. If the funds are insufficient to meet the claims as billed by the professional men, there is a formula for taxing the claims, pro rating them and administering them out of the funds. This is to safeguard both the professional man, the provider of the service and the recipient of the service and is in the interests of the public in that it makes sure that funds which are committed in this area are used wisely and effectively, with a minimum of waste.

If it is the intention of the mover of the resolution that such funds should cease to operate, I think he should say so. If it is his intention to extend this type of coverage, province by province, to those parts of the country in which such benefits are not now enjoyed, I think he should frame a totally different kind of resolution to place before this house. I for one do not believe it is the responsibility of the federal government to intrude upon fields which have been developed and are now being exercised as provincial responsibilities, in the form of adopting this kind of resolution, without a great deal of prior consultation to make sure that, whatever moves are made, they are made with the consent of those affected and with due regard to our constitutional arrangements. I find it difficult to believe that the mover of the resolution can speak so strongly of provincial rights in one respect one day and then make a motion of this nature which would, in a very revolutionary manner, set aside provincial rights and intrude the federal government into areas in which the federal government has not so far been regarded as having a primary responsibility.

When we talk about the provision of these services I think there are two or three very fundamental principles involved. If the object is to provide free medical, surgical, dental and ophthalmological care, we have to make sure there are the necessary facilities for the provision of such care. Traditionally there have been two approaches. One is for the federal government to provide such services, in the manner, for example, in which the Department of Veterans Affairs provides services. The last annual report of the Department of Veterans Affairs that for the fiscal year 1962-63, which was tabled in this house, shows

[Mr. Francis.]

for example that 182,713 men and women are receiving service-connected pensions, benefits as a result of pensions which have been awarded from war service. A wide measure of care is provided to such persons through hospitals operated by the federal government, through medical practitioners who work for the federal government, and others and who perform services under an established tariff for the federal government. A broad range of health services is provided of a standard that I am proud to say makes Canada rate very highly with regard to other nations of the world. Certainly a tremendous amount has been done by way of providing services to veterans that certainly goes far beyond the record of previous wars and the record of many other countries associated with us in our military efforts. But this type of provision is an expensive one. I for one do not quarrel with expense as such—although as public representatives we must always be aware of expense—but I am concerned with an approach which selects certain groups of the population for preferred benefits and does not provide a general, across the board approach, which I think is the healthier one and one that we must set as an objective.

In regard to hospital insurance, one of the conditions the government of Canada required of every province signing an agreement before it could claim federal grants in aid was that services must be universally available within the province. "Universally available" meant there should be no arbitrary or categorical distinctions; that citizens of Canada or people who met the residence requirements, regardless of age, regardless of sex, regardless of any other social attributes that may or may not have been the basis of discrimination in other countries, would be eligible for services as a matter of right within the framework developed. I think it is wrong to pick out one category of citizens. The category the mover of the resolution has in mind may be people who happen to have been employed by the government of Canada. Perhaps he has in mind that they should qualify under a means test administered for one of the various aid programs. It is not clear from his statement what he had in mind. Regardless of what he has in mind, I personally feel that the objective in the extension of these services should be on a universal basis, or at least a basis which is spelled out clearly to allow broader sections of the population to benefit.

One of the methods of determining it could be, of course, the means test. That is the basis of eligibility for the category of programs to which reference was made a little while ago. But to set up a category of the population, a large group of persons,