

Medicare

do, we are merely saying that the bill does not prohibit them from doing certain things. Perhaps the minister will give me an answer in this regard, because I am sure that if doctors decide not to practise under the plan the cost of services will be less to the Crown.

Mr. MacEachen: Mr. Chairman, my reaction to the suggested amendment is simply this. The bill makes possible what the hon. member has in mind and the amendment is, therefore, unnecessary. What the member suggests is possible without adding this particular clarification. I am satisfied that what he has suggested is possible, so far as provinces are concerned, and that really we must decide whether this clarification is necessary. My view is that it is unnecessary.

Mr. Brand: I thank the hon. minister for his assurance, and I am prepared to accept his word that in respect of these two points the provinces will have complete freedom to decide as to what arrangement will be made between those rendering and those receiving the services.

Mr. MacEachen: I thank the hon. member and repeat the assurance I gave earlier. If there was any doubt in my mind that this would not be possible, I would be ready to accept an amendment.

Mr. Johnston: Mr. Chairman, I have not previously entered this debate but some remarks the hon. Minister of National Health and Welfare made last night prompt me to do so at this time. In reply to a question posed by the hon. member for Kamloops regarding the possibility of amending the bill, the minister said that the hon. member for Simcoe East had posed an amendment which was voted on and rejected during the debate on second reading. Later on the minister said, as recorded on page 10542 of *Hansard* for yesterday:

I said that the committee is not competent to alter the principles that were accepted on second reading. That is what I am saying.

That answer gives me some concern because, on checking *Hansard*, I found that the minister, in arguing against the amendment to which he referred last night, suggested it was totally irrelevant to the bill. Those remarks appear in *Hansard* for October 13 at page 8624. It seems strange to me that an amendment which in his opinion was irrelevant then, should become significant in preventing amendments during the committee stage. It also seems that this amendment moved during second reading has functioned in an extraordinary way, by preventing any amendment to

[Mr. Brand.]

the bill at this time, as the minister now argues that any amendment put forward would be out of order. Let me suggest that he re-read his arguments as to relevancy of the amendment proposed during second reading.

● (3:30 p.m.)

It may have been partly because of that argument that I said I could support the principle of the bill on second reading. How else could we, coming from British Columbia or Alberta, approach a bill on medical health services when those two progressive provinces had already established legislation to provide medical health services to their people, and when the principle of the bill before us is simply to make a federal contribution to schemes already in operation in those two provinces? It would be strange indeed to argue against federal assistance for something that was already implemented in each case by a government of the same persuasion as the members of this party in the House of Commons. I was not alone in the assumption that the amendment at that time might be a dangerous thing. We have the words of the hon. member for St. John's West, as reported at page 8879 of *Hansard*:

The amendment if carried, would have that effect.

He was referring to the effect of killing medicare, and accused the official opposition of wanting to kill it. Again, what an awkward position in which to be placed, if it could be assumed that supporting an amendment would kill a contribution to schemes already established in the provinces of British Columbia and Alberta. However, when the minister spoke to wind up the debate on second reading, he with great care changed the ground somewhat at the last moment and argued that we were voting, not on the principle of the bill, which was a straightforward financial contribution of the federal government to provincial schemes, but rather on what he called the principles—in the plural—of the bill. He repeated this and said, in essence, that a vote for second reading of this bill was a vote for the four basic principles set out in the bill, namely, universality, comprehensive coverage, public administration and portability.

I would argue that those were not the principles of the bill; they were the conditions laid down by the federal government for the bill they had presented. The principle was a singular one, namely, a federal contribution to provincial health schemes whether they were in effect at the time of that vote or whether they would be implemented in the future.