

*Medicare*

and medical care. This has been the sum and substance of some of the decisions made by the Chair. I would not attempt to question the judgment of the Chair, but I would certainly question the judgment of the minister in proposing this to the chair. As I continue reading what the minister said it will become clear, I think, beyond any doubt that the minister equates the two as being one and the same thing. I do not intend merely to interpret what the minister said; I will read his words and hon. members can make their own interpretation. As reported at page 9,106 of *Hansard* the minister said:

—of providing what are known as health care services to persons in need.

He went on to say:

Health care services include medical, surgical, obstetrical, optical, dental and nursing services.

It is interesting, is it not, to note the separation of medical and surgical services here? When I suggested to the minister last night that there was this difference, he said there was no difference between surgical and medical services. Then the minister said:

Health care services include medical, surgical, obstetrical, optical, dental and nursing services.

He went on to say:

The definition includes drugs, dressings, prosthetic appliances and any other items of health services necessary to, or commonly associated with, the provision of the specified service. It is clear, therefore, that the Canada Assistance Plan makes comprehensive provision for all health services that may be required by persons in need.

That is very laudable indeed. Then the minister stated that the Canada Assistance Plan is effective as of April 1, 1966. Many provinces are not aware of this, as we know, but that is neither here nor there in this debate. The minister continued:

It might also be mentioned that there is a special provision in the act which enables the provinces to claim for the costs of health care services provided to persons who receive assistance under any one of a series of acts, notably the Old Age Assistance Act, the Blind Persons Act, the Disabled Persons Act or the Old Age Security Act. This section provides that costs for such persons may be claimed retroactively to April 1 provided—and I now reply to the question of the hon. member for Ontario (Mr. Starr)—that a test of need is applied at any time prior to March 31, 1967. This provision will be helpful to the provinces in alleviating the burden of providing health care services.

I deliberately emphasize these words:

The health provisions of the Canada Assistance Plan carry out the intent and the spirit of paragraph (d) of the amendment disposed of by the house.

The minister was there referring to the amendment of the hon. member for Simcoe

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East suggesting the immediate provision of health care services for those who by reason of financial inability were unable to pay. Once again we are equating medical care and health care. The minister went on to say:

I would also point out that in the implementation of the Canada Assistance Plan the federal government has secured the co-operation of all the provinces, and the extent to which these health services will be provided is a matter of decision for the provinces.

This, of course, is exactly what the hon. member is proposing in the amendment he moved a few minutes ago. The minister continued:

So, Mr. Speaker, the opportunity now exists through the Canada Assistance Plan to provide health care for persons in need. I make that point because it is a principle of the law already passed.

If that was not enough, he went on to say:

We on this side of the house regard the health provisions of the Canada Assistance Plan as an interim measure until a universal medical care system is in effect.

What does that mean? Surely its intent is that the health care services are to be supplanted by medical care services. If this is the case, how can the minister say that health care and medical care are not the same thing? I would emphasize that the minister said:

Health care services include medical, surgical, obstetrical, optical, dental and nursing services.

How can one justify a difference in these services? The minister quotes from the report of the Hall Commission and with your permission, Mr. Chairman, I will read what the minister quoted because I think it is very important in this debate. As reported at page 9106 of *Hansard* the minister said:

I want to remind the House of Commons that the Hall Commission considered this aspect of medical care insurance very carefully. They asked themselves whether it was good public policy to attempt to meet the health needs of the Canadian people on this basis.

He was referring, of course, to universal coverage such as is being proposed in the bill before the committee. I will read only one paragraph from the conclusions of the Hall Commission. At page 743 of their report the following statement appears:

Our reasoning is as follows:—

That the number of individuals who would require subsidy to meet total health services costs is so large that no government could impose the means test procedure on so many citizens or would be justified in establishing a system requiring so much unnecessary administration.