

*Medicare*

This medicare bill is discriminatory. Clause 2(d) reads:

"insured services" means all services rendered by medical practitioners that are medically required

This means that the services of ophthalmologists will be covered but not the services of optometrists. In like manner oral surgeons and other dentists are not included, but if a physician performs the same services then those services will be covered. This I feel is quite discriminatory.

• (9:40 p.m.)

It has been pointed out, Mr. Speaker, that somebody else is blasting the government. Second, this will also impose an undue hardship on those citizens of the country who dwell in rural areas and small centres. Ophthalmologists tend to locate in larger urban areas which have hospitals in which they may work. Optometrists on the other hand, not needing such facilities, tend to practice in smaller semi-rural areas. By not making the services of the optometrists available to people dwelling in such areas, these people will be forced to pay doubly, either to engage a local optometrist outside the coverage of Bill C-227 or by having to absorb the cost of lost time from work, and the cost of having to travel to the large centre where the ophthalmologist is located. In addition he will have the loss of the inalienable right of Canadians to the choice of practitioner.

Another aspect to be considered is the fact that optometrists constitute the largest body of legally qualified practitioners in the vision care field. Already they are performing their services at all levels of government and are serving over five million Canadians, or 70 per cent of all Canadians seeking visual care. At the present time 1,500 optometrists are available, compared to 300 ophthalmologists. Thus, to cut off the public from the optometrists, as in Bill C-227 as it now stands, would be detrimental to public health and would produce chaos in this field.

The solution to the problem lies in the definition of the term "medical practitioner", as it appears in clause 2, subclause (f) of Bill C-227. This definition is as follows:

"medical practitioner" means a person lawfully entitled to practice medicine in the place in which such practice is carried on by him.

If this definition were broadened to include all duly qualified—legally and professionally—practitioners, whose services are covered by Bill C-227, these problems I have mentioned would be solved. In other words,

[Mr. MacInnis (Cape Breton South).]

where one profession performs a service that another profession legally is licensed and qualified to perform, and which is covered by the terms of the act, then the second profession also should be covered.

Again I have pointed out only one very discriminatory aspect of this particular bill. In the area from which the minister comes he should know the ratio of patients to doctor. He should know this also from the information provided to him by other speakers in this house. Today we do not have and cannot possibly have available in this country, in order to make medicare work effectively, the trained doctors, nurses and technicians required to carry on a successful program. This should be known to the minister, because in his own home town and own area it has been pointed out to him by qualified people—people in the medical profession—that there are areas where there are over 2,000 persons for each available doctor.

I should like to suggest to the minister that he give every consideration to the appeal made last evening on national television, I think by the president of the Medical Association of Canada, that medicare be implemented at once for those in need or those who cannot afford to pay. This is very acceptable to them and they are prepared to service this type of program. Bear in mind also that the medical profession, those who should have access to this information, have made it quite clear that they do not have the personnel to service the over-all program when it is implemented. The minister also is aware that we have had a certain form of medicare in our own area of industrial Cape Breton for a number of years now.

In order to substantiate my arguments, I suggest to the minister that it might not be a bad idea for him to go into the mining areas of Nova Scotia, where he will find out that those who are hard pressed for assistance cannot anywhere near keep up with the demands made upon them. He should be very much aware of the fact that not only throughout this country but in our own neighbourhood there is a great need for more trained personnel, in order to make the present facilities function as they should, let alone handle those which will be in effect once the medicare legislation is brought to fruition.

I should like to appeal to the minister that he give every consideration to those persons who cannot afford the needed services. I am quite sure he would get a lot of support from