

*Health Insurance*

by the number of patients who are today confined in tuberculosis hospitals, sanatoria and in hospitals and institutions for the mentally ill who exceed the number of all patients in general hospitals. I do not propose to retrace the ground which has been covered by the hon. member for Lanark in his speech on March 25. He gave the house the clearest possible picture of the extent of the problem, the very large number of persons in this country who are confined in institutions of the kind I have mentioned which are to be excluded from the scope of the scheme. If the house is content to pass the bill in its present form, it means the house is either closing its eyes to a major problem or deliberately denying such benefits as this bill may bring to that large number of Canadians who are confined in institutions of the type that are to be excluded from the bill.

There is yet another aspect of this matter. I do not propose at this stage to attempt to retrace the ground or review the arguments on the terms upon which the whole scheme, in its present limited form, is to be brought into effect, namely when six provinces containing more than half of the Canadian population signify their intention of participating in the scheme. This aspect of the matter is directly relevant to the point I am submitting to the house now. One of the shortcomings of the present proposal of the federal government embodied in the present bill which has had so much to do with the fact that only five provincial governments have so far indicated their adherence to the scheme is that the scheme is of such limited effect and the federal government does not propose to share hospital costs of patients who are confined in institutions of the type to which the government bill refers as tuberculosis institutions and those for the mentally ill. If those institutions were brought within the scope of the definition of a hospital in the present bill the whole proposal would be very much more attractive to provincial governments and much less forbidding to those provinces which are suffering so acutely from financial difficulties that they do not feel they can afford to come into the scheme in its present form. The minister knows very well and the whole government knows that if it were not for the exclusion of institutions providing hospital care for tubercular patients and mentally ill patients more provinces would have found the proposal much more attractive than at the present and undoubtedly a majority of the provincial governments would have indicated their adherence to the plan if it had been on a wider basis.

We say, therefore, that this measure is not a comprehensive measure. It cannot pretend to be comprehensive as long as there are

excluded from the definition of hospitals under this measure those hospitals and institutions that provide care for tubercular patients and the mentally ill. When the measure was before the committee of the whole I introduced an amendment to clause 2 subclause (e), to make a simple change in the wording of line 8 on page 2. It would have changed the words which now read "but does not include" to "and does include". The purpose of the amendment was to make it very clear, by way of a direct reversal of the provisions of the bill, that the definition of the word "hospital" should include: (1) tuberculosis hospitals and sanatoria; (2), hospitals and institutions for mentally ill; (3), nursing homes and home for the aged where persons are receiving custodial care.

This amendment was ruled out of order by the chairman of the committee on the ground that in its direct form it would involve an increase in expenditure in excess of the royal recommendation preceding the introduction of this bill. Having regard to the provisions of the amendment which was introduced two evenings ago by the hon. member for Winnipeg North Centre (Mr. Knowles), and which I had hoped would have been upheld this afternoon as a proper amendment to be introduced on third reading, I had purposed to seek to give effect to the argument I am now submitting to the house by moving an amendment in the following form:

That Bill 320 be not now read the third time, but that the said bill be referred back to the committee of the whole for the purpose of reconsidering the provisions to exclude tuberculosis hospitals and sanatoria and hospitals and institutions for the mentally ill in clause 2 (e) thereof.

Within the last few minutes, Mr. Speaker, you have confessed to some doubt as to whether an amendment in that form might be in order. Therefore, having regard to the course followed by you, Mr. Speaker, with the unanimous approval of the house but a few moments ago on the amendment moved by the hon. member for Winnipeg North Centre, I now wish to submit my amendment in the following form:

That Bill 320 be not now read the third time, but that the said bill be referred back to the committee of the whole for the purpose of reconsidering clause 2 (e) thereof.

My purpose is to ask the house to refer the bill back to the committee of the whole in order that this same clause which contains this unjustifiably narrow definition of the word "hospital" may be reconsidered. I put before the house the ground that there can be no justification in good sense or in principle or in humanity or in the existing facts of life as applied to the financial difficulties of the provinces