The Address-Mr. Douglas

I agree completely with that statement.

Mr. Speaker, on July 19 and 20 last a federal-provincial conference was held to discuss medicare. At that time the Prime Minister (Mr. Pearson) laid down four excellent principles. The first was that at this stage medicare was to apply to physicians services, both general practitioner and specialist.

Second, the program was to have universal coverage. In his excellent speech, which I will not take the time to read extensively, the Prime Minister rejected the principle of "need theory"; he said he rejected it because it set up an undesirable distinction according to income level. The Prime Minister said no extension of private plans would meet all the needs. He said this plan should be universal on the same basis as hospital insurance coverage.

The third principle was that the plan should be administered by the provincial governments-that they must take full responsibility. He said it was necessarily a replacement of existing plans of other types.

The fourth principle was transferability. The Prime Minister pointed out that, like hospital insurance, medicare must be available to Canadians as they move from province to province and from place to place.

All of us were pleased by this statement from the Prime Minister, which was fully in accord with the recommendations of the Hall Commission. But we were disappointed when in Calgary on October 20 the Prime Minister seemed to waffle on the principles of universality and government administration, faced as he was by the aggressive opposition of the Premier of Alberta. I want to say to the Prime Minister that in the opinion of this party nothing could be more disastrous than a phony medicare program based on a division of patients into those who can pay the premium under private plans on one hand and those who are required to pass a humiliating means test in order to receive medical assistance, on the other hand. We believe medical care must be free to all without regard to physical or financial condition and that to adopt any other kind of program would set medicare back a quarter of a century.

Some hon. Members: Hear, hear.

Mr. Douglas: The Government has received an excellent blueprint from the Hall Commission. I hope it will have the courage to follow that report and to believe that the great bulk of the Canadian people will support it if courageous steps are taken. I am nothing in the Prime Minister's statement

[Mr. Douglas.]

disturbed, however, by a sentence in the Speech from the Throne which says:

When discussions with the provinces have been sufficiently advanced, legislation to carry out these proposals will be placed before you.

Does this mean that unless the federal government can reach agreement with the provinces this plan will not be placed before the House in legislative form?

The reason I am fearful is this: The House will recall that in 1957 the Liberal government introduced the Hospital Insurance and Diagnostic Services Act. In that Act there was a provision that it would not become operative unless six provinces representing more than half the population of Canada agreed. Not a dollar was ever paid out under that act. I doubt if we would have hospital insurance today, if we had waited until all the conflicting groups had reached some agreement. Though on the hustings the Liberal party often takes credit for having brought in hospital insurance, the fact is that not one nickel was ever paid out under the legislation while they were in office. I must give to the Leader of the Opposition (Mr. Diefenbaker) the credit to which he is entitled. One of the first things his government did was to remove that provision and to allow the provinces to come in as soon as they were ready. Two provinces, Saskatchewan and British Columbia, already had hospital insurance plans which had been in operation for many years. When they came in, other provinces decided to come in and it was only a short time before all the provinces decided to avail themselves of the legislation.

I wish to urge the Prime Minister on this question of medicare, which is so vital to the people of Canada, to speak for the Canadian people and not to allow any premiers who may have been influenced by special privileged groups, who want to retain private plans, to obstruct the introduction of medicare in Canada. I want to urge the Prime Minister to follow the gleam which was lit by the Hall Commission. Take, for instance, the statement made yesterday by the Premier of Ontario, who said the plan was not acceptable because while the federal government would give \$98 million to Ontario it would cost the province an additional \$182 million. When someone asked one of his aides to explain how this figure of \$182 million was arrived at, he said: "It will cost forty dollars per capita for medicare."

• (9:30 p.m.)

In the first place, Mr. Speaker, there is