

Some hon. Members: Hear, hear.

Mr. Starr: Talk of hypocrisy.

Mr. Knowles: Wouldn't the best way for it to be brought into effect as quickly as possible be to leave the bill as it is?

Mr. Speaker: Order, please. The question is argumentative.

HEALTH AND WELFARE

MEDICARE—AUTHORIZATION OF CONTRIBUTIONS TOWARD COST OF INSURED MEDICAL CARE

The house resumed, from Friday, October 14, consideration of the motion of Mr. MacEachen for the second reading of Bill No. C-227, to authorize the payment of contributions by Canada toward the cost of insured medical care services incurred by provinces pursuant to provincial medical care insurance plans, and the amendment thereto of Mr. Rynard.

Mr. Eldon M. Woolliams (Bow River): Mr. Speaker, I am happy to take part in the debate on medicare. I think it can be said at the outset that every member of parliament, wherever he sits in the house, is in favour of a national health insurance scheme. As a Liberal member pointed out, it is only as to the kind of program we are to get or to have forced upon us that members of the house may differ.

• (3:30 p.m.)

It might be well at this time to review the definition of the words "compulsory" and "universal" when applied to a national health scheme. "Universal" means applicable to all, and "compulsory" means tending to compel, a compulsory obligation. It can therefore be said at the outset that the universal, compulsory medicare plan of this federal government is, under the bill which is now before us, a plan forced on all the ten provinces. Of course we have heard the Prime Minister say that amendments may be introduced between second and third reading. We do not know what amendments the government has in mind, but we may be sure that this plan will be enforced in all the provinces.

At the time of the grandiose medicare conference at Ottawa just before or after the election, when the provincial premiers of health met with the federal authorities, it became known at that time that Alberta did not wish to support a universal compulsory plan. The former lady minister of health said

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at that time, as reported in the press, that either the province will accept the national plan or if they do not they will be taxed for it anyway. That will really be the result of a universal, compulsory national health plan. Even if a province does not agree to it, the people of that province will still be taxed for it if a sufficient number of provinces accept the plan. Therefore it does seem to me that, in spite of the urging of the hon. member for Winnipeg North Centre (Mr. Knowles), the first step that should have been taken was to have a meeting of the provinces whereby agreement could have been reached among them before presenting a universal plan.

This question arises: Will all the provinces succumb to this force, this duress, this compulsion? I suggest, and I think most hon. members will agree, that this sort of enforcement is a violation of the constitutional rights of the provinces because implementation of medicare is, under our constitution, under the jurisdiction of the provinces. The government is saying they will not implement the plan for two years. As I see it, the most important problem facing the government today is the high cost of living. Yet parliament is debating a plan which the government says will not be implemented for another two years, and I even question that because it is uncertain whether the provinces will agree to this plan. It seems to me that it is superfluous for us to debate the medicare plan at the present time. All we can do is to express our viewpoints on the bill which has been brought before the house even though the plan will not be implemented for at least two years.

Will this government allow some of the provinces to opt out of the plan? Will Quebec opt out of it, and will the federal government force other provinces to subscribe to it either directly or indirectly by saying to them: We now have a majority who agree to this plan? The government may say to a smaller province such as Alberta: Take it and like it. That would be a way of forcing a province through compulsion, through duress and through financial measures, to subscribe to the plan.

When the hon. member for Winnipeg North Centre said the other day that he speaks for all Canadians and he cries and mourns for all Canadians because the medicare plan is being delayed for one year—of course it may be longer because in 1968 there may be a recession and not an inflation and that may be a reason for further delay—what Canadians was he speaking for? I know a number of Canadians in my own area who would not go