



PROTECT MEDICARE: NATIONAL STANDARDS

Canadians want equal access to health care, not two-tier care. For-profit health care providers are growing, working around and sometimes in direct violation of the law. User fees, extra billing and other *Canada Health Act* violations are on the rise. The federal government is failing to enforce the *Act* or even properly monitor. To protect universality and other *Canada Health Act* standards, the federal government must actively identify and penalize law-breakers.

We need the federal government to uphold health care rights

Anywhere in Canada, medically necessary services – whether at a doctor's office, a hospital, a surgical centre or a diagnostic clinic – are 100 per cent paid for by government. Patients cannot be charged user fees or extra billed for government-paid care. These and other rights – public administration, comprehensiveness, universality, accessibility and portability – are protected under the *Canada Health Act*.¹ The federal government is responsible for safeguarding these rights.

Patients across the country are denied their Medicare rights, and the federal government does next to nothing.

- In 2008 alone, 89 suspected violations of the *Canada Health Act* were identified in five provinces.² Since that time, private clinics have expanded in number and size.³
- Illegal health care billing is on the rise, creating financial barriers to health care and more inequality.⁴ Recent examples:
- Quebec private clinics are charging patients for “nursing accompaniment” during an operation, “teaching services” and post-op phone calls.⁵ Some have separate waiting rooms and phone

CUPE calls on the federal government to:

Enforce the *Canada Health Act*, including the ban on user fees and extra billing, and correct gaps in monitoring and reporting under the *Act*.

lines for elite clients who pay membership fees of \$1,000 or more a year.⁶ In 2010 alone, the Quebec government identified \$829,607 in illegal fees – double the previous year.⁷

- Two Vancouver clinics, the BC government ruled, have charged patients illegally “on a frequent and recurring basis,”⁸ and the owners have still not been penalized or stopped.
- Many more patients are billed illegally, but are afraid to come forward.
- Provinces* continue to delist, underfund and cut services, failing to provide comprehensive, universal, accessible and portable health care. Quebec's failure to adequately provide ultrasounds and medical imaging in the public system is a case in point.⁹
- Doctors are double-dipping (billing the patient and government for the same procedure),¹⁰ giving private clinic patients preferential access¹¹ and accepting bribes for faster care.¹²
- The federal government has imposed only minor penalties. Between 2006 and 2010, it deducted \$361,174 from transfers to the provinces.¹³ During that same period, public spending exceeded \$858 billion.¹⁴

* In this fact sheet, for brevity, we use “provinces” to mean “provinces and territories.”



The current government goes further by encouraging the for-profit industry – what Stephen Harper euphemistically calls “experimenting with alternative service delivery.”¹⁵

The erosion of Medicare rights hurts some more than others. Canadians marginalized by income, geography, gender, sexual orientation, race, ethnicity, language and disabilities suffer most when national standards are weakened.¹⁶

We need stronger monitoring and reporting

To uphold our health care rights, the federal government needs information on what patients are paying, to whom and for what – and how provinces spend federal health dollars. Currently, that information is patchy.

The federal government must strengthen the *Canada Health Act* by requiring provinces to report the number of private for-profit facilities, the services they provide, and the payments they receive – and making that information public.

Every year, the *Canada Health Act* annual report falls short, ignoring entirely the transfer of Medicare to for-profits in certain provinces, or giving paltry details for others.

According to reports of the Auditor General of Canada, the Minister of Health is unable to tell Parliament the extent to which health care delivery in each province and territory complies with the *Canada Health Act*.¹⁷ Parliament should not approve the transfer of health care funds without evidence that Canadians’ health care rights are secure.

We need public solutions

We want a federal government that defends Canadians’ hard won health care rights, not one that sides with for-profits. Before Medicare, access to health care was dictated by geography and wealth. Canadians do not want to return there.

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No. 2 in a series of fact sheets on CUPE’s health accord proposals

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