

{ HEALTH CARE }

The Current Situation

Canada's universal public health care system was created over 50 years ago with a promise that services are available to meet health needs regardless of ability to pay.

In Alberta, advocates recently saw an end to 44 years of a government that had created many of today's problems through privatization and underfunding.

This led to a change in direction, with planned health cuts reversed. Privatization stopped for Edmonton Laboratory Services and Medicine Hat's laundry services, and the first plans in years were made to build public long-term care beds; however, challenges remain. Private delivery and for-profit care continue to flourish in Alberta.

The principles of Medicare have yet to be expanded to key areas. Canada is the only country with a universal public health system that does not include prescription medication coverage. One third of Alberta's workers do not have health benefits, and one in five Alberta households say they experience financial barriers to getting their prescribed medications.

Our drug costs continue to rise, with the United States being the only developed country with higher costs than Canada. Drug approvals favour drug company profits over efficacy and patient well being.

Momentum is growing for a co-ordinated national approach to adding prescription drugs to our Medicare system. At the same time, if we do not see this change at the federal level, we need Alberta to be leaders and show that we can provide prescription medication coverage here as an example for the rest of Canada to follow.

We continue to see the proliferation of private clinics that conflict with the core values of Medicare. Membership fees to concierge clinics of thousands of dollars and service fees for diagnostics go against the spirit, if not the letter, of the Canada Health Act. While improvements are needed in the public system, relying on the private sector will not get us there. Private delivery provides incentives for excessive referrals and unnecessary procedures which are becoming a growing contributor to health care spending and wait times.

We need to improve our public health care system, which will reduce demand for private care and ensure everyone, not just the wealthy, gets the care they need. It is a myth that Canada is over-reliant on public health care funding. Only 71 per cent of our health costs are publicly paid, making us more privatized than many countries including Germany, France, and Japan.

Provincially, Alberta has been consistently one of the lowest spending provinces on health care when measured as a percentage of our economic production. At the same time, failed health accord negotiations with the federal government mean that Alberta and all provinces will be losing out on much-needed sustained growth in federal transfer payments.

While we must always recognize that any funding increases that are lower than combined population growth and inflation amount to a cut, it is not good enough to simply hold the line. The promise of Tommy Douglas' vision for Medicare where services like pharmacare, dental, vision, and seniors care are covered for all are still not realized and will require more investment in the health of Albertans, not less.



Priorities for Advancing the Public Interest

The Vision: Expand our public health care system to ensure all medically necessary care is covered by the public system. Alberta should move away from private corporations and organizations providing care and instead expand public delivery of care.

The Government of Alberta should adopt the following priorities to ensure residents of our province have access to the best care, regardless of their ability to pay:

1. Implement universal prescription drug coverage for all Albertans (and Canadians)

- Work with other provinces and negotiate with the federal government for a cost-shared national universal prescription drug plan
- Base coverage on an evidence-based formulary of what is medically necessary with no co-pays or dispensing fees
- Establish a made-in-Alberta pharmacare plan if the federal government is unwilling

2. Address concerns with private clinics

- Establish a moratorium on new private clinics while we improve the public system
- Monitor and enforce the Canada Health Act
- Identify gaps in regulation that allow the spirit of the Canada Health Act to be broken
- Expand the audit of the Copeman clinic to all for-profit concierge clinics in Alberta

3. Increase public funding for health care

- Engage the public in the need for tax revenue reform
- Allocate additional funding to support wellness initiatives and tackle social determinants of health
- Expand the Medicare umbrella to include coverage for dental care, vision, mental health services, and seniors care