Ontario Health Coalition

15 Gervais Drive, Suite 305, Toronto, Ontario M3C 1Y8
Phone (416) 441-2502 Fax (416) 441-4073 email ohc@sympatico.ca

Save Public Medicare!

Urgent Issue Brief

For distribution:
28 April, 2006

Reaction to Government Health Funding Announcement Today

The McGuinty government announced $222.5 million targeted to its five wait times priority areas today.

Their release states that the $222.5 million announced today will result in 154,000 more procedures, including:

- 9,000 more hip and knee joint replacements
- 25, 850 more cataract surgeries
- 105,200 more MRI exams
- 4,700 cancer surgeries
- 9,000 more cardiac procedures

This is a sizeable increase and will make a difference. We are pleased this funding is going into the public non-profit health system to improve access to care.

The issues of concern are:

1) The government is obligated to provide comprehensive medically necessary care, not a short list of targeted items. In Britain, where the Blair government has already experimented with this type of targeting, doctors complained that the targeting resulted in shifts of resources away from clinical priorities to target priorities. While this works for PR, it does not work for all patients. See: for British docs on targets - http://www.bma.org.uk/ap.nsf/Content/measureper for public commentary -- http://observer.guardian.co.uk/nhs/story/0,1480,706309,00.html http://observer.guardian.co.uk/business/story/0,6903,1363708,00.html

2) Wait times cannot be settled without a clear human resources plan and funding to deal with shortages of health professionals, nurses, doctors and others.

3) We are extremely concerned about the price-based competition (competitive bidding) that is being used in the government's wait time strategy. Hospitals that bid under a certain price levels are to get the funding for procedures while hospitals that do not bid under this price levels do not. This competitive bidding removes services from local communities and centralizes them in regional centres. Patients pay by having to travel further for services and the administrative costs of the system increase dramatically. (One of the chief differences in costs between Canadian and US hospitals is that Canadian hospitals have lower administration costs, not having all of the inefficient pricing requirements etc. of the private market. In the UK, administrative costs shot up after this

competitive bidding was introduced).

4) Hospitals across the province are cutting services and laying off staff in an attempt to balance their budgets. It would be more possible to get a whole picture of the results of targeting and reducing the scope of services in hospitals if the Accountability Agreements signed between the provincial government and our hospitals were to be made public. So far they are secret.

For questions, please call Natalie Mehra 416-441-2502.

Ontario Health Coalition
15 Gervais Drive, Suite 305
Toronto, Ontario M3C 1Y8
tel: 416-441-2502
fax: 416-441-4073
email: ohc@sympatico.ca