Ontario Health Coalition

Briefing Note: The Ford Government's Privatization of Ontario's Public Hospital Services

July 21, 2026

THE LATEST:

In Dec 2025, the Ford government announced licences for 4 new private orthopedic centres to be opened in 2026, paying $125 million over two years in public money to "create" them. The plan is to privatize 20,000 orthopaedic surgeries. The corporations receiving the licences are Toronto's OV Surgical Centre, Academic Orthopaedic Surgical Associates of Ottawa (AOAO), the Windsor Orthopaedic Surgical Centre, and the Schroeder Ambulatory Centre in Richmond Hill.

For 100 years, Ontario has built our system of local public hospitals that operate on a non-profit basis, in the public interest. Under cover of the pandemic, the Ford government made plans to begin privatizing Ontario's core public hospital services -- including surgeries and diagnostics -- to private for-profit hospitals and clinics.

In Jan 2021, Ford announced new licences for private clinics to perform eye surgeries instead of public hospitals. The Ministry of Health issued a "call for applications" and said applicants could be a "corporation" rather than a doctor. In July 2021, they increased funding to private clinics by $24 million.

On Jan 16, 2023, they announced a plan to open new for-profit day hospitals and shunt tens of millions to private clinics and hospitals. Premier Doug Ford said 50% of the surgeries done in public hospitals could be cut and privatized. They awarded thousands of surgeries to private clinics: TLC Laser Eye Centres in Waterloo, Herzig Eye Institute and Focus Eye Centre in Ottawa, and Windsor Surgical Centre.

In June 2024, they opened applications to issue more licences for private MRI and CT clinics in the fall. Once again, corporations were invited to apply. In August 2024, the Ministry announced more applications for licences to privatize 60,000 gastrointestinal endoscopies and planned to issue licences in early 2025.

In June 2025, they announced licences to 57 new private clinics, 35 for MRIs/CTs and 22 for endoscopies at a public cost of $155 million over two years to "create" the clinics. In July 2025, they invited private companies to bid for orthopaedic surgeries. In Dec 2025, they announced licences for four new private orthopaedic centres.

Cut the public, expand the private:
At the same time, Ontario's public hospitals are underfunded, pushing them into deficit and forcing staff and service cuts. The majority of our public hospitals have operating rooms and MRIs that are underused (sitting unused for entire shifts, evenings, weekends, sometimes all the time due to underfunding) while the Ford government is using our money to open redundant private clinics.

For-profit privatization is a threat to Public Medicare for all of us

The Canada Health Act is like a patients' bill of rights. It says no patient can be charged for medically needed hospital and physician care. Health care is provided based on need, no matter where you live, and no matter how rich or poor you are. This is what Canadians won when we achieved Public Medicare.

For-profit hospitals/clinics routinely violate the Canada Health Act and charge patients thousands of dollars for medically needed services. Not only is it illegal to do so, but their prices are also exorbitant.

- Shoulder surgery in a private clinic can be more than four times the cost in the public health system, from $15,000 to $23,000.
- Private MRI clinics charge $2,000 for an MRI, more than five times the public cost.
- For-profit cataract clinics charge patients up to $8,000, sixteen times the OHIP-covered cost.

To be clear, these charges are illegal. You CANNOT be charged for medically needed diagnostic tests and surgeries under our medicare protection laws.

Private for-profit clinics also maximize their profits by selling medically unnecessary add-ons, often manipulating patients into thinking they are necessary such as extra eye measurement tests for $200.

Auditors have caught the clinics for double billing. That means they billed the provincial health plan, such as OHIP, and charged the patient as well -- for the same surgery or diagnostic test.

Higher costs: The Ford government is paying more than double for surgeries at a private for-profit hospital

Our local public hospitals are funded $508 per cataract surgery, but the Ford government is using public funding to pay Don Mills Surgical Unit $1,264 for the same surgery. That funding would have provided far more surgeries in public hospitals. The evidence from the United States and around the world is that for-profit privatization costs more. Governments do it to give contracts to corporations with whom they have connections. It is not in the public interest and it is far more expensive both for us as taxpayers and as patients.

Ontario banned for-profit hospitals 50 yrs ago for good reason

For more than 100 years, communities across Ontario have donated, volunteered, and helped to build our local hospitals as non-profit and public entities to operate in the public interest, not for profit.

Private for-profit hospitals were banned in Ontario in 1973 - 50 years ago - shortly after OHIP was formalized. The Ford government's attempts to privatize our hospital services is the dismantling of literally 100-years of effort by Ontarians to build local hospitals and improve their services in the public interest.

For-profit privatization takes away funding & resources from all local public hospitals -- particularly devastating to smaller, rural & northern communities.

Virtually all of the for-profit clinics/hospitals we have called in our research locate their facilities in large cities and wealthy neighbourhoods where there is a "market" of wealthy people from whom they can take extra money to make profits.

For-profit clinics & hospitals are not an "add on". They are a take-away.

For-profit clinics only serve the profitable patients -- that is, the quickest and easiest-to-care-for patients in order to maximize profits. For example, they do not take people who are obese, have diabetes, and co-morbidities that might put them at risk of coding on an operating table.

Canada has no surplus of health care labour. We have always had limited supplies of nurses, health professionals, and physicians. Operating rooms, MRIs, CTs, and surgical and medical hospital units all rely on having enough health professionals, nurses, and physicians to provide care. For-profit clinics do not create a single new staff person. In fact, they take health professionals and staff out of local public hospitals, making shortages worse and leaving the public hospitals to deal with the most costly and complex patients with less staff and less funding.

For-profit hospitals skimp on care to maximize profits

Data covering thousands of hospitals and millions of patients show that the quality of care in the for-profits is much poorer than in public and non-profit hospitals and clinics. In fact, for-profit hospitals and clinics cause the avoidable deaths of thousands of patients every year. This is their record:

- For-profit hospitals have significantly higher death rates because they skimp on trained staff to maximize profits. You are 9.5% more likely to die in a private clinic or hospital than a public hospital.
- For-profit dialysis clinics have significantly higher death rates than public/non-profit clinics because they use shorter dialysis times to push patients through faster and use less trained staff.
- For-profit colonoscopy clinics have resulted in more missed cancers.
- Poor safety practices have been an issue in a number of clinics. For example, in one private clinic in Ottawa, almost 7,000 patients were potentially exposed to HIV/hepatitis contamination because of faulty sterilization.

The Ford government is choosing not to fund public hospital capacity & instead to privatize

Virtually every public hospital in Ontario has operating rooms that are closed for days, weeks, months, or even permanently due to lack of funding. Ontario has nearly the fewest hospital beds per person left of any province in Canada. Ontario also funds our hospitals at the lowest rate in Canada. Yet the Ford government cut real dollar hospital funding leading into the pandemic and did so again in 2023-2024. It capped the wages of nurses, health professionals and support staff for years– worsening the staffing crisis and angering staff who had risked their lives and worked so hard for all of us throughout the pandemic. The Ford government is making a CHOICE to use our public dollars to privatize these services to for-profit clinics rather than funding our public hospitals to do them.