



# Ontario Health Coalition

## Fact Sheet: For-Profit Clinics & Privatization of Health Care

March 1, 2022

### Canada Health Act Principles

The [1984 Canada Health Act](#) is rooted in the core principles of equity and compassion. Its primary objective is “to protect, promote, and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to health services without financial or other barriers.”

The Canada Health Act is like a bill of rights for patients. It requires needed health care to be provided without user fees and extra-billing of patients – needed hospital & physician care must be covered by OHIP. Our hospitals are public and non-profit. They are run in the public interest. Governments have been handing over more services to private for-profit clinics in recent years. Now, the Ford government has announced their intent to bring in new private hospitals.

Privatization threatens these foundational principles of our public health care system.

### Five Facts About Two-Tier Medicare

1. Private clinics increase wait times for the 99%.
2. Private clinics provide an inferior quality of care.
3. Private hospitals are less efficient.
4. Public-Private-Partnerships cost more, deliver less.
5. Patients are subject to pay more through taxes and out-of-pocket.

### What’s Wrong with Private Clinics & Two-Tier Medicare?

It is a system for the rich. It widens the gap between the 1% and 99%. People who can afford to pay to jump the queue, even when they have less need or no medical need & are buying unnecessary care, [pushing back others with greater need](#).

[Profit is valued](#) over patient health, care & outcomes.

It drives up costs. Prices for private two-tier care are often double, triple, even 5x the cost under OHIP.

Two-tier Medicare [violates the Canada Health Act](#), which protects patients from financial harm when they are sick, elderly, and least able to pay.

Private clinics also use manipulative tactics to find [loopholes](#) in the Canada Health Act to charge patients for medically unnecessary care.

Two-tier Medicare takes needed financial and human resources out of our public hospitals into the private clinics & hospitals that treat only the light care. “Profitable” patients, leaving heavier care patients behind with less staff and funding to care for them.

### COMPARISON OF PRICES: Private Clinics vs. OHIP – publicly covered services

Canada's private clinics offer cataract surgeries, MRI/CT scans, colonoscopy/endoscopy procedures, and ‘boutique’ physician clinics. In 2017 the Health Coalition investigated 136 private clinics in 9 provinces and found [88 clinics in 6 provinces](#) to have been charging patients extra user fees and medically necessary services, even in violation of Canada’s public Medicare laws. The prices are exorbitant. Here is a sampling:

Type of Service	Cost
Physician-Led Care	Private: \$1500-\$4000 per year for <a href="#">‘boutique’ physician clinics</a> Public: \$0 for <a href="#">family physicians or walk-in clinics</a>
Magnetic Resonance Imaging (MRI)	Private: \$1000 per scan Public: \$0 for patients with a <a href="#">requisition</a> signed by a certified CPSO physician
Surgical/Colonoscopy/Endoscopy Procedures	Private: Charge <a href="#">“block fees”</a> , administrative fees, and extra user-fees Public: \$0 for colon cancer <a href="#">screening</a>
Cataract Surgery	Private: <a href="#">\$1000-\$5000</a> and additional consultation fees Public: \$0 for patients with a <a href="#">specific medical condition</a>
Cancer Care Treatment	Private: <a href="#">\$500 more per procedure</a> than Ontario’s public cancer treatment centres Public: The <a href="#">New Drug Funding Program</a> covers the cost of most injectable cancer drugs for patients who meet the eligibility criteria