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## Calling Ford's plans to privatize Ontario's public hospital surgeries a "fatal threat" and a "terrible blow" to our public hospitals, health advocates vow major fightback

Toronto – The Ford government's plans to privatize our public hospitals' vital services are a fatal threat to the core tenet of Canadian Public Medicare that extra user fees are forbidden and patients will not be faced with user charges in their time of need. Already existing private for-profit clinics routinely extra-bill patients thousands of dollars, often illegally, as well as charging patients hundreds or thousands of dollars for extra medically unnecessary add-ons. Moreover, private clinics take scarce staff out of public hospitals to serve lighter-care profitable patients, leaving those with more complex care needs to public hospitals with less funding and staffing to provide for them. This, in the context of an unprecedented staffing shortage is a reckless and damaging idea, warned the Coalition.

"What Ford announced today is a fatal threat to our public health care system," said Natalie Mehra, executive director of the Ontario Health Coalition which has for decades been on the front-lines of advocating to protect patients. "If they turn over a significant portion of our public hospitals' surgeries to for-profits, we will not be able to protect patients against extra charges of thousands of dollars for needed care and from manipulative extra upselling. The fact is that no one has been able to control the private for-profit clinics where they have sprung up in Canada, and Ontario has done a particularly terrible job of controlling for-profit health care companies in long-term care and other sectors. Ford's claims today are patently false."

"Already, the existing for-profit clinics in Ontario are charging patients thousands of dollars for surgeries. They routinely upsell medically unneeded services to elderly patients. They pressure and manipulate patients into paying hundreds or thousands of dollars that they should never have to pay in our public health system," Ms. Mehra noted. The Coalition has repeatedly called all the private for-profit clinics in Ontario and across Canada and caught the majority of them extra-billing patients. In the most recent study done by the Coalition <u>published in a front-page series</u> in the Globe and Mail, clinics were caught double-billing, charging patients thousands of dollars and charging the <u>public health system at the same time for the same procedure</u>. Patients are routinely charged *ten times* the public health system cost for private for-profit shoulder surgeries, *four or five times* the cost for private cataract surgeries, *three times or more* the cost for private MRIs.

"For-profit privatization of hospitals is a rip-off for patients and a threat to everything we hold dear," said Ms. Mehra. She noted, "The Ford government has done nothing to stop the extra billing of patients in the existing private forprofit clinics in their four-and-a-half years in office. Frankly they have zero credibility on this. This is all about Ford handing over profits from our public health system to for-profit companies."

The Coalition expressed anger that the Ford government has done shockingly little to resolve the staffing crisis in public hospitals, and after helping to create the crisis, is posing privatization as if it is a "solution". Large public hospitals across Ontario have operating rooms that are underused – closed for weeks or months each year, or even permanently-- due to lack of funding and staffing. Instead of using existing public capacity and supporting public hospitals, the Ford government underspent on health care by almost \$1 billion last year, did very little to address the staffing crisis in our public hospitals, and has done nothing to open public hospital operating rooms to capacity. Ford also did nothing to address the public health crisis this fall and winter, eschewing even masking protections. The Coalition vowed to do everything in its power to stop the province from privatizing our public hospitals.