



June 16, 2025

The Honourable Marjorie Michel, P.C., M.P.

Minister of Health

House of Commons

Ottawa, ON K1A 0A6

By email: marjorie.michel@parl.gc.ca

Dear Minister,

We are writing to express our deep concern about patients in Ontario being subject to user fees and extra-billing in violation of the [Canada Health Act \(1984\)](#) and to ask you to take all possible measures to protect patients in our province. The fundamental principle that health care be provided based on a patient's medical need, not according to their wealth, is a deeply held value. It is part of what defines us as Canadians, and when it is breached, the consequences for patients are significant.

As you know, under the Canada Health Act, provincial governments are required to ensure that medically necessary hospital and physician services – including surgeries, diagnostic tests and physician services – are covered under the provincial health care plan (OHIP). Canadians have the right to this health care on equal terms and conditions without financial barriers. Patients are to be protected from extra-billing and user fees.

Despite this, we have gathered complaints from fifty patients which we have sent to the Ontario Ministry of Health and Health Canada. We are asking that you take all action possible to enforce the Canada Health Act in Ontario where the Ford government has failed to uphold its obligations under the Canada Health Act. They are aware of the issue. We have sent in evidence repeatedly and there has also been widespread publicity about patients subjected to thousands of dollars in such charges. In this letter we will outline the most common violations.

In Ontario, the government has moved forward with a significant redirection of resources away from public hospitals to private for-profit cataract surgery clinics. The most common types of complaints happen in these private clinics and they include:

Extra-billing: Patients are reporting that private clinics have flagrantly extra-billed them. They were told to pay to get surgery without having the option to receive the service free of charge. Some have been told that the clinic does not do "OHIP-covered surgery". Others are told that the clinic only does laser cataract surgery, so they were required to pay. These claims are false. As you know, medically necessary surgeries are covered regardless of the setting in which they are performed. Patients cannot be required to pay for unnecessary things in order to get the medically needed surgery. Cataract surgery is covered by OHIP when provided using any method, including laser. In addition, many patients are subjected to mandatory charges for eye measurements with no option to receive the OHIP-covered measurements. Again, medically needed diagnostic tests including eye measurements, are covered and patients should not be subject to user fees for them.

Manipulative charging: Private clinics routinely extra-bill patients by manipulating them into paying for medically unnecessary services, such as extra eye measurements and lenses when they go in for cataract surgery. Patients are reporting they were told that OHIP-covered eye measurements were "basic", "old-fashioned", substandard, or not as accurate as ones that OHIP does not cover. The patients were led to believe their outcomes would be inadequate if they did not pay for these extra measurements. This is beyond "upselling". It is manipulating a patient in order to extra-bill them. Often the patients have no idea that they are

being charged for things that are for other types of vision correction unrelated to the cataract surgery for which they went to the clinic.

Charging for medically unnecessary services as a condition of receiving medically necessary services: As noted above, patients are frequently being told that they have to pay for medically unnecessary measurements, lenses, other add ons, or methods of surgery in order to get cataract surgery. If they do not pay for the unnecessary things, they cannot get the cataract surgery at that clinic.

Telling the patients one thing but the receipt shows something else: Patients are also telling us about a growing form of extra-billing cover up in which private clinics tell patients that they need to pay for medically necessary cataract surgery but record the charges on the invoice or receipt as being for medically unnecessary services, such as extra eye measurements and special lenses. As far as the patient knows, they are paying for what they understand is cataract surgery. By providing records that say the payment is for something medically unnecessary, the clinics are covering up their extra-billing.

Queue jumping/Lies about wait times: To persuade patients into paying extra user fees for their surgery, private clinics frequently lie to them about wait lists in public hospitals and claim that they can get surgery faster at a private clinic. In some cases, these clinics tell them that they need to pay for medically unnecessary add-ons or that “OHIP-covered” surgery is not performed at the clinic but if they do not pay, they will face wait times of a year to four years, or more. In other cases, they are being charged outright for queue-jumping for cataract surgery. In reality, when we receive the query from the patients and we go and look at the wait times, they are not anywhere near what the patients are being told. Currently, the highest priority patients in Ontario are getting their specialist appointments within 28 days and get their surgery within 2-3 months, according to the Ministry of Health’s [wait time tracking website](#), and the patients with the least urgent medical need get their specialist appointment within 101 days and their surgery within 105 days (total less than 7 months).

To be clear, this complaint to you includes only patients whose reports about the user fees and extra-billing involve things that are illegal under Ontario laws and a violation of the Canada Health Act. Those who bought medically unnecessary add ons told us they only did so because they were led to believe it was a requirement for cataract surgery, that their outcomes would be inadequate or substandard if they did not, or because they were sold queue-jumping.

In context, we have tracked extra-billing and user fees for decades. What we are seeing now is the worst we have ever seen. The cost of the user fees and extra-billing has increased sharply. Elderly patients are now being charged up to \$11,000 when they go in for cataract surgery. Some describe these charges as taking their entire savings, months’ worth of income, their grocery money. Others have had to return to work when they are more than seventy years old, in order to pay their bills for cataract surgery. This should never happen in Canada.

Please safeguard and uphold the Canada Health Act and take all possible actions to bring Ontario into compliance so that patients are protected.

Thank you for your attention to this important matter.

With kind regards,



Natalie Mehra
Executive Director