Extra billing as Premier sees it

I would like to acknowledge your letter of January 21, 1986 regarding the proposed study of the health care system in Ontario and the role of representatives of the Ontario Medical Association in that study.

You are quite correct in describing the study as being aimed towards maintaining the current high standards of care in difficult economic times. In fact, we are dedicated not only to maintain but also to improve care, in a wide range of areas such as the special needs of the elderly, the impact of technological change, the growing pressures of utilization, the balance of institutional and community care as well as the appropriateness of funding mechanisms, and the availability of resources to meet the particular needs of special groups in society.

I made a special effort to invite a senior physician from the OMA to have a pivotal role in this Government initiative in recognition of the paramount place of the physician in health care.

I am sure that you are aware that I informed the Executive Director of the OMA on Oct. 4, 1985 that the Government intended to conduct this fundamental review of the health care system. In addition, at that meeting I was unequivocal in outlining to the Executive Director this Government's commitment to proceed with legislation to ban extra-billing. Thus the invitation to participate in the study was made within the context of a complete understanding of our legislative intentions.

The Minister of Health and I called the first meeting to consider the organization and objectives of the health care system study three weeks later on Oct. 31, 1985. The senior physician from the OMA attended that meeting and participated in planning for the study. At that meeting it was agreed that the system of remuneration for the medical profession would be an integral part of the work of the committee.

The Minister of Health and I left that meeting believing that all members of the committee understood the tasks which lay ahead as well as the Government's intentions on extra-billing. Within the next 24 hours I and the members of the committee were disappointed to learn that the physician, I understand on the advice of the OMA, had decided to withdraw from participation presumably to express disapproval of the proposed extra-billing legislation. Evidently the OMA had not comprehended the earnestness of my Government's commitment on this matter.

On Nov. 12, you, the Executive Director and the Chairman of the OMA met with me to outline conditions to the OMA participation on the health care study. It was at that meeting that you made the proposal outlined in the second paragraph of your January 21 letter. Further, you indicated that the OMA participation was conditional on withholding the Bill to ban extra-billing and your suggestions regarding the financially disadvantaged were offered as a quid pro quo for the Bill's withdrawal.

You will recall that I had two concerns with these proposals. First, the proposal regarding the financially disadvantaged is not substantially different from what you claim is current practice for medical practitioners. Second, the Government's intentions regarding extra-billing have been crystal clear since my initial ministerial statement on July 2, 1985. A delay on extra-billing legislation would be regarded by the public as a failure to honour both an election and a governmental promise to implement our assurances of unhindered access to health care in this province. In fact, we delayed the introduction of the legislation until in the fall sitting to provide us both with an opportunity to negotiate terms for its smooth introduction. Any further delay would be viewed as backing out of a clear and unequivocal commitment.

I continue to believe that the participation of the Ontario Medical Association in the study of our health care system would be valuable both to the people of Ontario and to your Association. We stand ready to accept your participation in the study at this time. We agreed that a collaborative arrangement can achieve much for health care in the Province. However, linking the withdrawal of the current Bill as a condition to your participation is not acceptable.

We believe that the practices for remuneration of the medical profession must receive a thoughtful and searching re-examination to find approaches which will serve both Ontario, society and the individual members of the medical profession. This can most successfully be achieved if we work together on the project as well as as on the terms and conditions needed to adjust the method of physician remuneration consistent with the principles of the Canada Health Act.

> David Peterson, Premier



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United Church rummage sale

St. Paul's United Church, Midland, will be the scene of a rummage sale on April 19. The doors to the church auditorium will open at 10 a.m. The St. Paul's United Church Women are putting on



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