

LEGISLATIVE ASSEMBLY OF SASKATCHEWAN
First Session - Sixteenth Legislature
37th Day

Wednesday, April 10, 1968.

The Assembly met at 10:00 o'clock a.m.
On Orders of the Day.

ADJOURNED DEBATES

SECOND READINGS

The Assembly resumed the adjourned debate on the proposed motion of The Hon. G.B. Grant (Minister of Public Health) that Bill No. 39 — **An Act to amend The Saskatchewan Hospitalization Act** be now read a second time.

Mr. T.M. Weatherald (Cannington): — Mr. Speaker, it is a short time since this Bill was being debated. But I want to go back over some of the comments that have been made about it and some of the fears that have been expressed by Members opposite and many people of this province.

I am not going to spend too much time, Mr. Speaker, on what the Opposition has said. But I am going to attempt to show that a number of the fears that have been expressed by the public at large, in my opinion, are largely unfounded. The first, Mr. Speaker, has been that many people will suffer financial disaster because of the utilization fees which have been imposed, the second fear that a number of people in this province will not receive the required medical treatment that they deserve and that they need.

Mr. Speaker, any method of employing or using utilization fees we accept as being unpopular. But utilization fees have been levied to ensure that the financial solvency of both Hospital and Medical Plans be maintained. The simple facts are that, if these costs are not controlled, then it is inevitable that financially our Province will have little or no funds to spend on such other important priorities as education, agriculture, municipal affairs and various other Governmental departments.

If, Mr. Speaker, we used all of our financial resources to provide medical care and hospitalization, then we will simply not have any financial means to carry out our responsibilities in other areas. I want to review the situation that has brought about the problems which the plans now face.

Firstly, we have hospital boards throughout our province that, although they do a worthwhile job in most cases, in order to receive Saskatchewan Hospital Service Plan payments, must keep patients in their hospitals up to approximately their rate of capacity. If they operate below this capacity, then these hospital boards are facing a deficit.

Secondly, Mr. Speaker, besides being in the interest of the hospital board to keep the hospital operating with a certain number of patients in it, it is also in the financial interest of many doctors to have patients in hospital, simply because these patients are easily looked at and the doctor would receive

April 10, 1968

a financial payment under the Medical Care Plan for servicing that patient.

Thirdly, Mr. Speaker, the third cause which is forcing a number of patients to be in hospitals and resulting in a number of patients in hospitals that should not be there, is a simple fact that there are a number of citizens in our province who like to be in hospital both for the companionship and the care which they are receiving, which sometimes is better than their previous living conditions were.

These are three distinct factors which are resulting in heavy hospital use. Firstly, it is in the interest of local hospital boards sometimes to keep patients in. Secondly, some patients themselves prefer to be in hospital because of the previous living conditions that they had. Thirdly, in the interest of some doctors, Mr. Speaker, it is financially to their advantage.

Utilization fees, Mr. Speaker, can improve this situation, firstly, by increasing the rate of patient turnover. Undoubtedly, Mr. Speaker, the utilization fee will result in a higher rate of patient turnover by putting some onus on people who are in hospitals to make provision for going home at the earliest possible date. This will make more beds available for the people on the waiting lists. Certainly it is not difficult to come across people today who would like to be able to take advantage of a hospital bed. By increasing the rate of turnover of the patients in our hospitals through the utilization fee, definitely there would be more beds available to those requiring them and inevitably in the longer term, will result in less need for more and more additional beds to take care of the people that should be in hospital.

Here has also been a major abuse. In the long run, Mr. Speaker, the less demand for construction of more and more hospital beds will result in less financial demands for our hospital system. The NDP have cried long and loud about the financial ruin per patient. Mr. Speaker, I want to point out that the average stay per patient in hospital is about 9.5 days. The cost to the patient will be approximately \$24. The limit, of 90 days will be a maximum cost of approximately \$165 per person.

Mr. Speaker, I hope that the Government will consider — and it has already been mentioned by the Premier — that negotiations are under way to place a maximum amount of cost per family. This is already being considered but due to the Federal regulations at present it cannot be effective. However, in the future this may well be overcome. Once a financial limit is placed, Mr. Speaker, for each family, then again the financial responsibility that is placed on any one family will be brought within limits.

Much has been said by the Members opposite about the cost to the elderly people. Again, Mr. Speaker, I would like to show that the financial responsibility by any elderly person will not be nearly so severe as the Opposition have claimed that it would be. I believe that this financial responsibility has been grossly exaggerated. Firstly, it has been overlooked that a person can stay in hospital today at absolutely no cost. Surely there is something wrong with this system when it is cheaper to be able to live at the hospital, Mr. Speaker, than it is to live at home. There are few healthy people who live from day

to day at home, Mr. Speaker, for \$2.50. I can see no reason why it should be cheaper to live in a hospital than it is at home. In actual fact until now many people have saved money by being in the hospital. The \$2.50 in actual fact is less than the cost of living if they had not been there. It is a well known fact that there are many senior citizens who end up with more money when they get out of the hospital than they ever had in their life, simply because of the payments of their old age pension going into a fund.

Hon. C.P. MacDonald (Milestone): — Check the estates.

Mr. Weatherald: — If you look at the estates it is very easily found out. In summary, Mr. Speaker, there are several factors which I would like to point out. Firstly, Saskatchewan must have a financially sound Medical and Hospital Plan. The utilization fees will result in a quicker turnover of beds, making beds available to other patients, resulting in less pressure for more beds to be built. Mr. Speaker, I suggest that in this precise example that the Province can concentrate on a much higher quality of care of the beds that it is providing for the people of Saskatchewan. Despite the cries of financial ruin by the Members opposite, it is evident, Mr. Speaker, that the Government is making provision so that no individual citizen will have any too severe financial burdens to bear. It has also been stated that no person in this province will be denied medical care or hospital treatment because of lack of financial resources.

The Province cannot continue to withstand the rapidly rising costs of hospital and medical care, without taking measures to hold these costs in line. I ask, Mr. Speaker, that the people of Saskatchewan give these proposals of the Government a fair trial. If the proposals are found wanting in the coming year. I for one will assure the people of Saskatchewan that I will be one of the first to ask for their modification. However, I am convinced that this is a step which will prove to not only bring our Medical and Hospitalization Plans to be financially sound, it will also prove to be well within reasonable limits of what the people of Saskatchewan can afford. I am also convinced, Mr. Speaker, that no person in this province will be deprived of either medical or hospitalization treatment. Nor will too severe financial burdens be placed on these people who will be using these services.

Some Hon. Members: — Hear, hear!

Hon. W.S. Lloyd (Leader of the Opposition): — Mr. Speaker, it was almost three weeks ago that the Member for Cannington (Mr. Weatherald) asked leave to adjourn the debate on Bill No. 39. He gave at that time, two reasons for doing so as I recall. One was that being a bachelor he had need of using the weekend for other purposes, and secondly, he wanted to prepare some arguments with respect to statements of the Opposition. All I can say is that if it takes him as long to pop the one question as it did to answer the other, he is going to be a bachelor for a long time I am afraid.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — I wish him much more luck in that search than he in finding answers to the Opposition on deterrent fees in the

April 10, 1968

Province of Saskatchewan.

I found the argument this morning intriguing to say the least. Speaking of hospital over-utilization, he found all sorts of people to blame. He said that hospital boards are to blame because this is the only way that they can balance their budget by getting more people in the hospital. He said that doctors are to blame because this is the way they make more money. One wonders why then, why not fine the doctor rather than the patient if that is the reason.

He said that a number of people are to blame because they would rather be in hospital because they like company. And he said also that a number of people were in hospital just for the sake of making money. We have now a new form of agriculture in Saskatchewan called 'Hospital farming by old people.' I really don't think anybody could possibly take seriously these kind of comments with respect to this problem. I hope the Government has better reasons than that to justify to the people this rather extreme action.

May I turn to the arguments that have been advanced by Government speakers generally in this debate. I would point out that these arguments deal almost exclusively with the dollar aspects of the problem. They choose the dollars to which they wish to refer. I submit that they indeed ignore the assessment of the long-time dollar effect of this proposal. They have not said moreover where the dollar drain is. They have not said who is responsible for this dollar drain. They have not given any evidence that their proposals will reduce the dollar drain without harming the people in the process. And most important of all, they have almost completely ignored the effects of this proposal on the health and the well-being of Saskatchewan people.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — I know that the Premier in his comments spent some time in trying to justify this aspect in that way. He told us and you may remember that this would leave doctors a lot more time to devote to the really sick people. May I submit that that argument is as sterile and as stereotyped, as discredited and unproven as his hundred-time repeated statement about 20 years of Saskatchewan stagnation and his claims about the great growth of population under the Liberals since 1964.

The Liberal protest that no harm is intended to the public plans for hospitalization and medical care is indeed very hallow. The fact is that these measures in themselves cause harm to these programs.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — But it is important too to notice that the harm is not complete with the proposals themselves. I suggest that these proposals open the door to further pressures for further destruction of these public plans. I suggest that these proposals actually invite pressures which in the end would destroy the basic features of hospitalization and medical care, as we now know it in the province. The Hon. Members must have noticed in recent days discussions held by doctors in various parts of the province. I recall the press reports for example of a discussion of doctors in the North Battleford area. As I understand

it they decided that they would bill the patients directly through the reimbursement method. Not only would they do that but they would bill the patients for 100 per cent of the fee schedule. In other words this procedure, if it were accepted in the wholesale way across the province, would add something in excess of \$500,000 to the amount that the Saskatchewan people would be called on to pay for medical services. This is the sort of thing which the Government invites and suggests and indeed in some cases makes much more necessary in a way than the present situation.

I don't think the end is even there. I suggest that there is a very predictable next request with respect to changes in medicare. This next request may very well be that there be no medical care payments whatsoever for home and office and other calls of that kind. The suggestion will be, since there is a deterrent fee which is a fair part of the cost of some of these, why not do away with payments under the plans for services of this kind altogether? Why not restrict the payments just to surgery and other costly procedures together admittedly with some way of paying for those who may be indigents? That, Mr. Speaker, is where the Liberals wanted to go in 1962, that is what I suggest they are aiming at in 1968.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — We need to note the long time dangers to medicare and hospitalization as we have known them and like them in this province, when we are discussing this particular legislation. With the hospital deterrent, they put pressure on hospitals to require payment in advance. There has already been some discussion in this Legislature with regard to that. I have intimations from several hospital areas that the boards are going to say, 'As the patient crosses the threshold it is necessary to make a payment in advance.' We are going back some 20 years in this province as a result of this particular legislation.

With these deterrent proposals this Government continues its walk backwards into history. It is attempting to do now by taxation what it was unable to do by kicking at the door of the Legislature a few years ago.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — The target of this Government is not tomorrow; it is instead yesterday.

I want to comment on some six aspects of this measure. 1. The Minister's remarks when he was moving Bill 39. 2. The way in which the Minister, the Provincial Treasurer (Mr. Steuart) and the Premier (Mr. Thatcher) have used and misused relevant and irrelevant statistics, the way in which they have talked about that which has been called the economics of health care. 3. We need to look at the alternatives which the Government should be considering. There are actions which would improve the returns from our health dollar and improve the quality of health care at the same time. 4. There is the failure of the Government spokesmen to justify deterrent fees in any way whatsoever. 5. There are some very unfortunate consequences for the medical profession which need to be discussed. 6. There is the public reaction to the deterrent fees and the public request, and a very determined request, for some different kind of

April 10, 1968

action.

In discussing these I raise some five questions which I hope someone on the Government side will answer. 1. Having known the Minister for a number of years, both inside and outside of this Legislature, and indeed before either of us ever came here, I find it hard to believe that he really believes what his words expressed when he introduced the Bill. And I do hope that he can clarify his reasoning for us. 2. There is this question: has the Government done any research; has it examined any experience as to the economic or health effects of deterrent fees? 3. Has the Government examined any alternatives to correct the abuses it claims? 4. Has the Government thought of the effects on the medical profession, particularly on the general practitioner, the family doctor? 5. Is the Government now prepared to examine public reaction to its proposals?

So I turn to the first of those aspects that I wanted to examine, namely, the Minister's remarks when he was moving second reading on March 14. First I draw attention to this statement of the Minister:

Utilization fees on medical care based on the recommendation of authority.

I ask him what authority? What authorities recommend utilization fees? Certainly in his address he failed to identify them. Certainly since his address some whom he inferred to be supporting it have been shown to be in a different position. Was the College of Physicians and Surgeons one of his authorities? He so inferred I am afraid. It is very unlikely that this is the situation based on what has been said and what has been heard since. Is the Saskatchewan Hospitalization Association one of the authorities in favor of hospital deterrent fees? I am afraid that the Minister so inferred this. Certainly there can be no doubt as to the position of The Saskatchewan Hospital Association anymore. I refer again to the letter which was sent to the Minister under date of March 20, by the Chairman of the Board of Governors of the Saskatoon City Hospital:

When I attended upon you and your two colleagues on the afternoon of March 11, as a member of the executive of the Saskatchewan Hospital Association, I intended to convey at that time the foregoing views of the Board of Saskatoon City Hospital. I did not think that Mr. Glass, President of the Saskatchewan Hospital Association, Mr. Barton, Executive Director of the Saskatchewan Hospital Association and myself had left any doubt as to the opposition to the imposition of the utilization or the deterrent charges and the reasons for the opposition.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — Mr. Speaker, if the Minister has authorities he should trot them out into public view. Why try to kid the public that such authorities are lurking in the bushes when indeed they aren't there? I invite him to note the comment of some other people who have studied this matter. Let him look for example, at the book "Medical Care Programs and Issues" written by Dr. W.P. Thompson and published in 1964. It will be granted I suggest, that Dr. W.P. Thompson is as objective a man as we can possibly have. He has developed a very high degree of application of scientific discipline to analysis of other matters. In

this book, Dr. Thompson reviews the opinions of many people. He presents the pros and cons of deterrent fees. He says, for example:

The average citizen is often not in a position to know whether he should seek a doctor's advice. He does not know whether his ailment is serious. He should not be discouraged from seeking medical attention. It is especially important that he seek advice in the early stages of an illness and that is precisely when he is likely to be deterred.

And he goes on to say:

Although it is very difficult to obtain reliable information about the proportion of requests that are really frivolous, the available information indicates that it is really quite small.

And I wish that the Member for Cannington (Mr. Weatherald) might have stayed to hear that statement.

Of the National Health Service in Great Britain he says:

Several surveys were made by interviewing samples of practitioners and, while the estimates varied, the general consensus was the problem was not very serious.

Finally he concludes in this way:

The balance of the arguments appear to be heavily against the use of utilization fees. In order to justify their use, (a) it would be necessary to produce much more and better evidence that a large proportion of calls are unnecessary or frivolous, and (b) the income from them would have to be badly needed.

In addition to that there are statements made by the Chairman of the Federal Royal Commission on Health Services, Mr. Justice Emmett Hall. He rejected deterrent fees on the basis of no evidence for, and much evidence against. He said in these words, "They are a tax on the poor." I submit the Saskatchewan Government hasn't produced any evidence that a large proportion of calls were unnecessary or were frivolous. I submit moreover that it has not even tried to produce such evidence. It has acted on impulse rather than on reason.

Secondly the Minister had this to say. I quote, "The greatest abuse of health services is in the use of hospital services." Now let us be reminded for the umpteenth time that it is the doctor that sends the patient to the hospital and the doctor that keeps the patient in the hospital. In spite of that, to cut down on the use of hospitals, the Government proposes to fine the patient for following the advice of the doctor. This he says is necessary in order to stiffen "Patient resistance" to something or other. He goes on to add this, "Utilization fees allow a beneficiary to know that he is participating in his recovery." He appears to argue that the patient will get well quicker if he is paying \$2.50 a day. You get the scene, Mr. Speaker. Every morning when the nurse comes in to wake you up so nice and early with a thermometer or other sorts of things, the patient is reminded 'Another day, another \$2.50, I'm getting well faster. I'll do some positive thinking and because I am paying \$2.50 a day I'll get better at the rate of a day and half today

April 10, 1968

rather than just one day, if I weren't paying \$2.50.' The Members opposite suggest that this is also good for society. Because a man could live more cheaply at home than he could in the hospital, so we must save money in that way too. If this be logic, Mr. Speaker, what the Government ought to do is charge not \$2.50 a day, but ought to charge \$5 a day. Then the patient would participate twice as much and he would get better twice as fast, and so the argument goes.

Thirdly, the Minister explained this. He said, if there is no per diem utilization fee, there is no patient resistance to doctor over-utilization. Now in reality when he makes that statement, he is calling on people to diagnose their own illness and to prescribe their own treatment. So presumably the next step of the Minister is to issue a booklet. This booklet will be entitled, "How to argue with your doctor about your health needs." I expect to see a companion volume, paperback edition on all the newsstands for 95 cents. This will be entitled "Father Grant's Manual for Self-diagnosis." Deterrent fees — let there be no doubt about it — deterrent fees are an invitation to self-diagnosis. As such they surely represent the poorest possible practice of medicine.

Again, let me ask the Minister to look at the situation. Here is somebody who has a pain in the stomach. He has to ask himself; is this just an ordinary garden variety of stomachache, or is it the first warning of a diseased appendix? In order to get the answer, you pick up the Minister's Manual on Self Diagnosis, volume 11, page 36, and there you see the subheading, "How to tell a stomachache from appendicitis in three easy lessons." If you decide it's a stomachache it gives you a remedy. It says take a dose of salts or some castor oil and go to bed. Now there is obviously some risk in this, but it does deter you from going to the doctor. At least for the time being. Remember this after having done it you have participated. Remember that the free enterprise system believes that courageous and independent people must be prepared to take risks. The system is based on it. If you live you will be a better man and you will have demonstrated the moral fibre of the nation.

So says the Government's proposal that invites people to diagnose their own illness and argue with their doctor about going to the hospital. May I say this. Better to take the child to the doctor several times and discover that the discomfort is only a bad stomachache than to fail to take that child once and discover too late that it was indeed appendicitis.

There is already a very substantial deterrent to most people going to the doctor. For many people, it means time off work, for others it means getting a baby sitter. For many people in the country, it means travelling 20 or 30 or even more miles. Surely this is an adequate deterrent without adding more as the Government proposes.

Fourthly, the Minister wonders why we say that Saskatchewan Liberals don't believe in people. Note his own words which explain why we must so wonder. He claims for example that the absence of deterrent fees encourage the attitude of "I'll pay my share, so I'll make sure I'll get my money's worth." Well there may be some people like that. Certainly there is no evidence of a significant number of such people. Most definitely there are not enough such people to warrant a \$7 million fine on the whole populace. He suggests in effect that there are great numbers of people who probably break their own legs,

puncture their own appendix, rupture themselves, poison their tonsils, plan a baby every year. Why? Just because they pay the medicare and hospitalization premium. He suggests that people are compelled by some inner drive to get their money's worth to rush to the doctor's office and having got there to insist that the doctor send them to the hospital. Now what he should do is cut the premium in half and there would only be half as much money to get value for. Thus he would decrease the pressure on hospital and medical service.

The Minister suggests, and I quote his words, "Those who have no immediate health needs express their resentment in indiscriminate utilization." This argument, if it is to be believed, says that he suspects people, distrusts people and disdains people. It says that the majority of people emerge just as masses of the great unwashed, ever-ready to take predator's advantage of a public plan. To keep them from doing that his remedy is to make them pay a fine if they get sick. I don't think the Minister believes that, but that's the logic of his words to justify this Bill.

Fifthly, he calls one witness admittedly to support his argument that deterrent fees are good. He calls on Mr. Enoch Powell, a former Conservative Minister of Health in the United Kingdom. What he fails to note about Mr. Powell's history, having quoted him, is a very obvious fact. He fails to note that even Mr. Powell, his authority, did not at any time introduce or suggest the introduction of deterrent fees on medical or hospital care.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — It's significant I think that this Government should choose somebody like Mr. Powell as an authority. He is not only a Conservative, he was too conservative for most of the Conservatives in Great Britain. He has been described as being "Against planning, against regional subsidies, against capital gain for taxation." He has been quoted in these words, "With Labour in power he has advised industry not to co-operate with the Government." It has been said of him that his political philosophy often looks like "A more sophisticated Goldwaterism." To the writings of such a man and only to such a man, the Minister goes for support of this particular Bill. Let it be noted that even this Goldwaterish, ultra-conservative type didn't introduce deterrent fees. It's left for a Saskatchewan Liberal Government to do that.

I draw, sixthly, the attention of the Minister to what may be a minor contradiction, but it should be noted, and I hope he can clear it up.

In the document tabled the Minister reported that the utilization fee for Treaty Indians would be paid by the Department of Indian Affairs and Northern Development. But in the Legislative Hansard report of his speech he said: "These will be handled in the usual way, we hope." That "we hope" is the phrase on which I must question him. It is a matter of great importance for many hospitals and many Indian people. I hope the Minister tells us which of his statements we are to accept, the one in the tabled department, or the one which says, "We hope these will be handled in the usual way." Will he table correspondence from the Federal Government giving an undertaking to

April 10, 1968

pay this deterrent fee? Or will he claim like the Premier, in his arrangements for Asiatic people to come to Saskatchewan that the correspondence was privileged and we have no right to know about it. I must say to the Minister if he doesn't or if he won't or if he can't table such documents, he must understand our reluctance to be assured. I regret, with regard to the whole argument of the Minister, one comes to the inescapable conclusion that never was there weaker support for a worse cause than that which he presented in the second reading of the Bill.

I turn now to some comment on the Government's use and misuse of statistics both relevant and irrelevant. The way in which the Minister of Health, the Provincial Treasurer and the Premier have used statistics in an attempt to justify utilization fees is extremely misleading. Since it is misleading, it is unfair and it is discriminatory with respect to public health services. As such I submit that it reflects its own prejudices rather than the facts of the situation with regard to costs of public plans. It uses the statistics in such a way as to put the entire blame for the increased use and costs of doctors and hospitals on the backs of so-called irresponsibility of people and at the door of public health programs. This reflects of course its general philosophy and its approach to the real problems of real people. Its use of public health statistics is designed to prejudice rather than to explain. As a result its explanation becomes part of the problem rather than part of the solution. I suggest that the Government has not examined the real reasons for the increase of costs of doctors' services and hospital care. Had it done so, this would have refuted its own arguments for deterrent fees.

Let me refer to an interview which was reported in US News and World Report on May 25, 1964. The interview was with Dr. Roy E. Brown, who was director of the Graduate Program and Hospital Administration at Duke University. Dr. Brown was also a past president of the American Hospital Association:

Question: How much of the rise on hospital costs is accounted for by the fact that people are making greater use of hospitals than formerly.

Answer: Very little. When you look at the figures you find that the great hue and cry about over-use of hospitals simply isn't true.

Do hospital-insurance plans themselves lead to over-use of hospitals? That seems the common belief.

I don't think that's an important factor. It probably has caused a small increase in the use of hospitals. I'd say it would be a bad thing if it hadn't caused some increase.

Why is that?

The very purpose of hospital-care plans is to remove the financial worry about going to the hospital, if the patient really needs hospital treatment. To say that we have created ways to help prepay hospital bills and then to add that this hasn't improved the patients' ability to use hospitals would mean we have wasted a lot of effort.

What does all this add up to?

Simply that more frequent use of hospitals over the years hasn't added much to the cost of hospital care over that time.

The same study shows the following factors are being the most impressive ones in influencing USA hospital costs. It seems logical to presume that the same factors have been operative in Canada. 1. The number of persons required to provide one day of hospital care today is 59 per cent more than in 1946. The deterrent fee isn't going to have any effect whatsoever on that. 2. The average wage cost in hospitals has risen substantially, 274 per cent since 1946 in the United States. Deterrent fees aren't going to affect that. We know that hospital workers are still far from being among our high-paid workers in Saskatchewan. 3. Much more intricate specialized equipment is required in today's hospitals. Deterrent fees aren't going to influence the costs of equipment. 4. Many drugs are now provided at a much higher unit cost. Hospital deterrent fees aren't going to affect that cost factor, either.

Now the Minister turns for comfort to some comparison of utilization rates in Saskatchewan with those of the Canadian average. He finds justification for his judgment there that deterrent fees are good. He satisfies from these Canadian averages his suspicion that Saskatchewan people are bad. There is a magic in averages at times, which also, Mr. Minister, can be tyranny. Let me suggest to him, let me urge him to note that the Canadian average reflects a great deal of under-servicing of Canadian people. When we are comparing ourselves with these averages, we are comparing ourselves with a number of jurisdictions in which hospital care and doctor care in Canada are just not good enough. The Minister is suggesting that's the direction we ought to be aiming. It includes for example the situation in Newfoundland, New Brunswick, Prince Edward Island, in Nova Scotia and in Quebec. It includes the situation in British Columbia where they have had a large population increase, and hospital construction has certainly not kept up to it. It is important that we note that we are comparing here with areas in which there is a very noticeable and known and recognized degree of under-servicing of people's health needs.

Two Canadian provinces have utilization fees for hospital services. In Alberta, the patient pays \$1.50 or \$2.00 a day depending on the size of the hospital. In British Columbia there is a flat charge of \$1 a day. Until now Saskatchewan had none. On April 15th, I understand we are going to have the highest in Canada. Let us look at what the situation was in Saskatchewan in the days when we had none as compared to those in other provinces in the days when they had a deterrent fee. In 1962 Alberta had the highest rate of utilization of all provinces, British Columbia I believe ranked fifth. Alberta's rate of utilization has increased, so far as I can get figures, faster than Saskatchewan. Let's go back to 1963. Let's look at discharges since that time for 1,000 population. Since that time the number of discharges per 1,000 in Saskatchewan has declined. In Alberta the number of discharges has increased. In spite of that the Minister wants to feed us Alberta's medicine even though utilization rates have been increasing there. British Columbia's rate of utilization has tended to remain fairly constant, part of this I submit is because the construction of new hospital beds has barely kept up with population growth.

April 10, 1968

Certainly the Saskatchewan Government has already made its contribution to slowing down the use of hospital beds. It's made it by decreasing the amount of money made available for hospital construction grants. The last three years of the previous Government, \$9.5 million was paid out in hospital construction grants. In the first three years under the present Government, only \$7.7 million was paid out or almost \$2 million less for hospital grants.

Now I have said, Mr. Speaker, that the Government has used statistics in a misleading way in an attempt to justify deterrent fees. I want to ask Members opposite to look at the annual reports of our own agencies. They will find there that the increases are not of the shock nature described by the Government. I have to ask the question: why are we being misled on this? I can only answer, that we are being misled in order to prejudice us against public plans. Let's look first of all at the average length of stay in hospitals. It was less in 1967 than it was 20 years before in 1947. During the last five years it has stayed almost constant at 9.5 or 9.6 days. So there is one component of use which seems to have improved over the long run and stayed steady during the last five years. Is the Minister expecting to cut this down by deterrent fees?

Let us look at the total days of care given Saskatchewan people in hospital. We will note that there are 83,500 fewer days in 1967 than there were in 1964. There is another aspect of hospital care where the situation seems to be under control.

Let's look at the increase in per capita costs of medicare. There has been some increase: 5.75 per cent in 1964, down to 2.4 per cent in 1965, up to 4.52 per cent in 1966, down to 3.69 per cent in 1967. There is an increase undoubtedly, but the per capita costs of doctor's care under MCIC in Saskatchewan have risen less rapidly than have the per capita costs of voluntary plans in other parts of Canada, which include substantial deterrents built in.

I draw the attention of the Minister to some statistics which he can find in the March 25th issue of Hansard of the House of Commons. This gives a report as to the estimates of cost of physicians' services for 1968. That report shows that there are six other provinces in Canada in which the cost per capita will be higher than in Saskatchewan. That means there are only three in which the cost per capita will be less and those three are New Brunswick, Newfoundland, and Prince Edward Island. I submit this picture is not the kind of picture the Government has decided to paint to the people of Saskatchewan.

Let's look fourthly at the relationship between hospitalization and medicare costs as a percentage of the net value of commodity production in the Province of Saskatchewan. Surely this is a basic measurement to be used. During the last five years, two years we have been under five per cent of the value of production; in two years the costs of these plans were between five and six per cent and in one year they were about six per cent.

That's a substantial cost admittedly. I submit it is not a catastrophic cost, I submit there is nowhere in the real statistics evidence about the giant increase in the burden described by the Treasurer (Mr. Steuart) and the Minister of Health, (Mr. Grant).

There is a lot of money involved admittedly. It is a lot of money for important services to a lot of people, for maintaining the health and restoring the health and relieving the pain and besides saving lives among about one million people.

Let the Government and let the Minister be reminded of something else. It isn't just plans of this kind that cost money, it is bad health and poor health which also cost money. Every balance sheet has two sides. The Government draws attention only to the expenditure; never the economic benefit side. Sickness costs money. Time loss through sickness costs money because of lost production, because of lost income, because of less expenditure on other items of consumption. The time loss costs the individual money and it costs the total economy money. Sick people don't produce. People in poor health produce in less capacity. People in poor health have less money to put into the economy for other purposes.

Now the Minister of Health has referred at times to the economics of health care. I wish he would really take a look at the economics of health care. In his present proposal, he takes a very superficial glance at it. He looks at it through a selected key hole in the half light of political and economic prejudice, and on this he makes a recommendation for legislation.

You know he should at least try to get on the other side of the key hole, try to see the picture from the taxpayer's side, from the sick person's side, not just from the side of the tax collector. As Mr. Justice Hall said in his October 16th, 1964 speech to the Saskatchewan Hospital Association: "There is another side to health care. They are the gains made by keeping Canadians healthy and able to work".

I suggest to the Minister that better even than looking through a key hole from both sides would be to open the door and pull up the blinds and turn on the lights. The view would be much different. The Minister should look at the economics of health care. He should look at all of it and he shouldn't kid the public by claiming as a clear picture that which he sees through a key hole in the half light of economic and political prejudice.

Even his key hole view fails to answer 'yes' to pertinent and important questions. Will his proposal designate and curb abuses? There is no evidence for and there is much against. Will his proposal save money? There is little evidence at best that it will do so. It may indeed cost more. What it does do, of course, and their pamphlet distributed the other day admits this, is to shift the cost. It shifts the costs from the Treasury of all the people to the pocketbooks of the sick people, and that's not a saving of the health dollar.

Thirdly, is his proposal even an efficient economic device for tax collection? It's the least efficient of all tax collecting procedures. Saskatchewan people will pay over \$7 million. The Saskatchewan Treasury gains or benefits from the effect of some \$5 million. We lose almost half of the Saskatchewan advantage gained. Added to this dollar shrinkage, are the collection costs of hospitals and doctors. Added to this further is the unavoidable loss of uncollectible fees. This proposal fails to give any answer or fails to give an answer 'yes' to these important questions.

This Saskatchewan Liberal Government's proposal for

April 10, 1968

deterrent fees fails every social test. It fails every test on the basis of good health practice. It fails every test of economic efficiency. It fails every test of economic fairness. It ought to be abandoned. If the Government won't abandon it, private Members on the Government side and this side ought to join and defeat it.

The people most likely to be deterred by the requirement of additional cash payment for service are the low-income earners and as I have said, they are already very substantially deterred. May I make reference to a recent report, March 7, 1968, in the New England Journal of Medicine. If we need any evidence as to the way in which people of low income are deterred from getting services they need and deserve, the evidence is in that statement.

It shows that people earning \$3,000 a year or less see a doctor three times a year; people earning \$10,000, see a doctor five times. Three times a year if you are poor, five times a year if you are somewhat better off. It shows that 59 per cent of low-income families see the doctor in any given year, but 73 per cent of those earning \$10,000 or more a year see the doctor in the given year. It shows that 7 per cent of poor children in cities see a pediatrician, a specialist, in a given year; 33 per cent of the well-to-do children in cities see a pediatrician in a given year.

Added deterrent fees will keep more poor people and more chronically ill people away from medical services they need. In the long run, surely this means more people more seriously ill, needing more complicated medical and hospital care for longer periods of time. It means added costs to individuals and society. This proposal of the Government is false economics. It taxes the wrong people; it attacks the wrong programs; it deters those it shouldn't deter. It's a bad deal, it ought to be withdrawn or defeated.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — I turn to the third aspect of my comments, and that is; has the Government considered any alternatives? Has it considered alternatives to correct abuses? Has it considered alternatives by way of possible qualitative controls? Well if it has, it hasn't said so. The Government has made one study, this with respect to effects of deterrent fees in the Swift Current Health Region. Of this study, it says to the people, "You have no right to know." The Government says, it was said again this morning by the Member from Cannington, (Mr. Weatherald), "Well we are going to try it for awhile and see if it works." How does it propose to measure the effects may I ask? It hasn't said. My guess is it hasn't even thought about how it is going to measure the effects. My guess is that because it really believes in the principle and practice of deterrent fees. Never has a \$7 million tax increase been applied with so little thought as to consequence. Never has a \$7 million tax increase been applied with so little attempt to justify. This Government makes decisions, not on the basis of thought and study. It makes them on the basis of the impulses and the prejudices of the Premier and a few of his Cabinet. It's afraid of research. Instead of relying on research it relies rather on a congenital and almost sadistic distrust of public plans.

Is there some evidence available as to qualitative controls? I submit there is a lot of it. Has, for example, the Government considered the beneficial results of encouraging and making possible more group practice? Let me refer to a submission made in 1967 to the Committee on Healing Arts; that's a Government Committee in the Province of Ontario. This submission was made by the Sault Ste. Marie and District Group Health Foundation combined with the St. Catherines and District Community Group Health Centre Foundation. I quote from it.

The Sault Ste. Marie and District Group Health Centre has demonstrated a remarkably significant reduction in hospital bed utilization.

In 1946, for example, they showed that admissions per thousand of their patients were 95 as compared to 136 for the general population. They showed that the number of days of care per thousand was considerably less than for a general population of that community or that particular province. There is much evidence of that kind — evidence to demonstrate lower hospital utilization as a result of group practice.

The same demonstration of lower utilization is found repeatedly in such comparisons in the United States. For the sake of the record here today, I refer to the Health Information Foundation's study which showed that hospital admissions for group practices were 63 as compared to 110 in general. The Health Insurance Plan of New York's study showed that their admissions were 77 as compared to 96 with the more general group. The Kaiser Foundation of California's study showed that their group health patients had 98 days of admission as compared to 135 of the general group. The Washington D.C. study showed a comparison of 76 to 122. Over and over again there is this kind of demonstration. An important document, which the Minister mentioned last evening, a report to the President on medical care prices made by the secretary of Health Education and Welfare of the US Government recommends and I quote:

That group practice should be encouraged.

The report says this and I quote further:

Groups of doctors practising together can make more efficient use of equipment and ancillary personnel and consultation than doctors practising alone. Where the patient has paid in advance for comprehensive medical care, less incentive exists to use high-cost hospital services where lower-cost alternative needs meet the patient's needs just as well.

Has the Government encouraged or even investigated? The regretful answer is no. They slap on deterrents instead. The submission of this Ontario group goes on. It said:

Having personal health services organized in a convenient, a central and attractive health centre with a full-time multi-specialty and general practice group, adequate ancillary services, readily available community hospital beds provides high-quality, comprehensive medical care using manpower effectively and efficiently. It has repeatedly demonstrated lower hospital utilization and surgical rights. And it recommends that public policy should encourage the development of high quality personal health

April 10, 1968

services which show efficiency in costs and utilization of our health manpower.

Mr. Speaker, the Saskatchewan Government should sponsor such studies and experiments. It should particularly do so before slapping a tax on sick people without any evidence that such a tax will curb costs.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — The only evidence is that this tax will work a hardship on many and will cause the deterioration of health care for some.

The second question is of this same kind. Has the Government considered the possibility of saving physician's time and hospital use by including the cost of say medical social workers as one of the benefits supported by the public plan. I draw attention to an article in the Canadian Medical Association Journal of May 27th of last year. I read from that article:

The intervention of medical social service at the level of primary medical care could conceivably reduce the length of some hospital stays, could eliminate the need for certain hospital admissions, and could direct patients to other sources of needed help.

I submit the Government hasn't considered this method of reducing costs while improving the quality of care. Instead it shut its eyes, slaps on deterrents, doesn't reduce costs, does reduce the quality of care.

Has the Government considered the effects of more home-care nursing programs to decrease demands on physicians and hospital beds? The answer I suggest is no, or if yes, only in a very limited way. Instead it just slaps a fine on people for being sick. I urge the Government to at least postpone the Bill and consider all alternatives which would have controls and quality benefits as well.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — Let me turn to my fourth point which is the matter of Government justification for these proposals. The Government tries to justify deterrent fees, these taxes on sick people, these taxes which apply cruelly on poor people, by four kinds of claims. It says, first, that there are abuses. It says, secondly, costs will be curbed by deterrent fees. It suggests, thirdly, that it costs less if a service is paid for directly out of the personal pocket rather than out of the collective pockets of the Province's production. It even argues some cures of power of deterrents by allowing its beneficiary to know he's participating in his own recovery. And the fourth claim, it says is that we needed the money. You know this is the answer Jesse James gave when somebody asked why he robbed the bank. He needed the money. This is the only claim it has substantiated.

Let me look at them, one, two, three, four. Abuses, undoubtedly there are some abuses. But who's abusing? Where are these abuses? Under what circumstances do they happen? Why are they made? Whose responsibility are they? The Government supplies no evidence whatsoever to clarify this matter of

claimed abuses. Not only that, the evidence is that the Government hasn't looked for evidence with regard to where and why abuses do exist. The Government's answer is simply to fine everybody for the possible misdeeds of an undetermined and unidentified few people. It's like having one student who comes late to class and as a result you keep the whole class in. It's like finding one wrong-doer in a village and as a result you cut off the heads of everybody in the village, like the pacification program in Vietnam. The Minister quotes Enoch Powell as I mentioned before. It is very significant that the Minister should turn to a Conservative whom even the Conservatives in the United Kingdom found hard to take. All of this helps to define Saskatchewan Liberals. If the present Government had any real respect for the word liberal it would stop using it. And I'm going to be amazed if the new Premier of Canada doesn't take out an injunction against this Government to prevent it from using the word liberal in describing their activities.

Some Hon. Members: — Hear, hear!

Mr. Lloyd: — Now, I agree we may accept the inevitability of some limited abuse. Certainly the Government has not proven its case in regards to the extent or the real effect of the abuse. Moreover the Government hasn't really tried.

Secondly, are costs going to be curbed by deterrents? Again, the Government presents no evidence. Again the Government doesn't even pretend to present evidence. Evidence against the chances of curbing costs in this way is indeed given by the Minister in his address to this House. He made reference to medicare deterrents in Swift Current. He pointed out that these have increased hospitalization rates there so he moves on to the next situation. The question is; can deterrents curb or prevent people going to the hospitals? Well, his remedy for all of this is to fine people for going to the doctor first. Then, when they comply with the doctor's orders, his further remedy is to fine them again for going to the hospital on the orders of the doctor. He fines them further the longer they stay in the hospital. I submit there is further evidence, that costs don't curb by deterrents, available to the Government. The former Minister of Health must have had some evidence when in September 5, 1964, he said that "Studies to date show that deterrents fail to prove an effective way of curbing costs". Chief Justice Hall must have had some evidence when on October 16, 1964, he reminded us that Alberta had a deterrent fee and then said, "The length of stay in hospital in Alberta was higher than in Saskatchewan." Dr. W.P. Thompson had some evidence when he said:

Utilization fees tend to deter persons who should not be deterred from seeking medical attention.

Just the matter of a year ago, there was a statement in the Star Phoenix, February 2, 1967, by the Manitoba Health Minister, C.H. Whitney: The headlines said.

Deterrent fees ineffective says Manitoba Minister.

Are costs curbed by deterrents? Certainly the case is not proven. The Government supplies no evidence. I submit again the Government hasn't looked for evidence. This claim of curbing costs is simply part of the sales pitch. It's the prize in the partly filled box made to look bigger. It's a prize for

April 10, 1968

which you pay more than it's worth. Cost curbing is a claim being used by the Government to try to get away with shoving deterrent fees onto Saskatchewan people. It's a by-product of the political hucksters of the Liberal party rather than any thinking about the health of people of Saskatchewan.

Thirdly, there is the claim that health services are going to cost measurably less if a sick person pays more, and pays it personally. This claim also is not proven. Again the Government produces no evidence, again it doesn't even try to produce evidence. It has said only this. It has said that the Provincial Treasury will pay less, but it does not say that the people of Saskatchewan are going to pay less. What it says is that the Government is prepared to shift \$7 million of this cost to individuals in the province. It is prepared to shift \$7 million in order to save some \$5 million to the Treasury. The third claim is not proven. Indeed this claim would be better not put. At the root of this claim, that we save money if people pay for it personally, is the case of those who distrust and who dislike public services on principle. In the words of Galbraith in a book which caused quite a stir in Canada a few years ago, this is the statement. "Of those who believe that at best public services are a necessary evil." This is the argument of those who at worst "claim public services are a malign tendency against which an alert community must exercise eternal vigilance." The Saskatchewan Liberal Government plainly views public services as a malign tendency.

The fourth claim we'll admit it has proved, that is the Jesse James claim that the Government needs money. It told us, however, that this money would be available from the burgeoning industrialization of Saskatchewan. The Government proved itself wrong on that claim. The need for more money remains. The method it chooses to get more money is further definition of the Saskatchewan Liberal party. They choose to get it from the sick people. All Members will know before you pay an income tax you'll qualify by some measured economic ability to pay. The qualification selected for this tax by this Government is the misfortune to get sick and a reduced ability to pay. It's a simple qualification admittedly. It's also an uncivilized one.

In summary of this part, the Government has based its case on four claims: one, the existence of abuses; two, that taxes on sick people will curb costs; three, that it costs less to pay directly, in part; four, that it needs money. It proves one of those claims, only the need for money. It fails to prove, indeed doesn't even try to prove the others. It has not justified the Bill. The Bill should be defeated.

The fifth aspect of this program which is being proposed which I said I wanted to examine was the unfairness of the deterrent fees, in the unfortunate results of these deterrent fees within the medical profession itself. This method of getting payment creates a special problem for the family doctor, the general practitioner who works in that way. Most of the fees of the family doctor come from visits to his office or visits he makes to homes rather than from surgery or procedures. Let me give these examples from an actual 1967 experience. A surgeon deciding not to collect deterrent fees would have lost \$2,000 of his income in 1967. But a general practitioner, a family doctor, deciding not to collect deterrent fees would have lost \$6,000 of a much smaller income. In addition to that, a general practitioner's operating costs are higher than the

surgeon's. We have within the profession already an income relationship which is already unfortunate and this Bill makes it more unfortunate, makes it worse. At the very best, the deterrent fee fails to strengthen and support the role of the general practitioner, and any change in pay pattern ought to be designed to do this. The deterrents are going to add to divisive forces with the profession. These fees are going to tend to drive doctors out of general practice and general practitioners out of the province. The Government proposal not only fails to correct relationships within the profession: it aggravates existing differences.

And I turn now to one more question which I raised at the beginning, one more aspect of this problem, and that is the public reaction to these proposals. I suggest to the Premier and his Ministers that they read the papers, that they listen to other news media, they might even get around to reading their mail. I can only summarize the mail that has come to my office and the views which I get from the news of the day. It is an understatement to say that people are shocked and that people are worried. People do see in this proposal a threat to their personal well-being. This shocked and worried reaction crosses all political lines. Let there be no doubt about it. The expressions which come from these people are not just of opposition. They are also expressing alternatives which to them would be preferable. Many of these people, many of these groups want a chance to be heard. They want a chance to try and influence the decision of the Government.

Let's just see who is represented in this growing group of people who are opposing this action and would like a chance to be heard. The Saskatchewan Hospital Association has already been referred to and I note it only in that way at this time. Secondly, Saskatchewan doctors, some of them individually, some in groups, have expressed concern. You know, Mr. Speaker, and Mr. Minister, this Legislature should have an opportunity to hear the proposals and understand the problems of the Hospital Association and of the doctor groups. Thirdly, the Saskatchewan Association of Housing and Nursing Homes, in a letter dated March 15, put themselves on record. The Pensioners and Senior Citizens' Organization presented their opposition in a letter of March 16, and one section is worth reading:

Senior citizens prefer less worry and a more peaceful existence in their declining years that deterrent fees would seem to impose.

I recommend the statement to the Member from Cannington (Mr. Weatherald), who suggests that too many of these people go to hospital, because they want to be there, because they can live more cheaply there and they want to make some money out of "farming" hospital beds.

Fifthly, the Saskatchewan Association of Rural Municipalities in its annual convention voted decisively against deterrent fees. There are press statements which indicate the opposition expressed of the Canadian Association of Consumers meeting recently in Saskatchewan, (Leader-Post dated March 27). The City Council in Saskatoon criticized the utilization fee. Farm women of Saskatchewan, meeting in Saskatoon last week, in a wire under date of April 2, declared its intention of opposing the deterrent fees: "This will be a hardship on citizens who are ill and in many instances least able to pay." A great many other large province-wide organizations have taken the same

April 10, 1968

position. The Saskatchewan Government Employees Association, the Saskatchewan Wheat Pool Employees Association, the Saskatchewan Psychiatric Association has stated their opposition. Local governments, such as, the City Council of Regina, the City Council in Saskatoon, and some rural municipalities.

I've had in my office, copies of communications sent to the Government from about 30 trade unions in the province. Trade unions from Biggar, Moose Jaw, Swift Current, Yorkton, Estevan, Melville, Prince Albert, Weyburn, Saskatoon, Regina, have contacted me and I'm sure more of them have contacted the Government.

I have been asked, Mr. Speaker, to draw the attention of the Government to a number of petitions, petitions for example, from the town of Delisle and community, with over 200 names on it; from the town of Coleville, with 340 names on it; from Viscount, with 182 names on it, from Wilkie and community, with 320 names on it; from Kindersley, with 900 names on it.

I received copies and notification of similar petitions sent to the Government from other areas. They include thousands of names from all across the country — 5,000 from Saskatoon, 6,000 from Regina. My colleague from North Battleford (Mr. Kramer) has one with over 2,000 names on it, and my colleague from Turtleford (Mr. Wooff) has one, and so on and so forth.

I've received in addition, as I'm sure every Member has, letters from a large number of individual citizens. Mail comes in every day asking for support in opposing deterrent fees.

I raise one final question in this regard. Can the Government name one organization that has given any degree of public support for the imposition of deterrent fees? Can it say any group at all in this province who has either asked for deterrent fees or who has stood up and supported it? I say again, Mr. Speaker, that many of these organizations and individuals to whom I have referred would like to be heard. Maybe, who knows, if we were to have a chance to hear them, the Government might even find somebody to support deterrent proposals. But in order that we might get a chance to see who wants to be heard and what they have to say, I move, Mr. Speaker:

That all the words after the word "That" be deleted and the following substituted therefor:

this House declines to proceed with this Bill until the subject matter thereof has been investigated by a Select Special Committee of this Legislature with provisions for public representations to said Committee and a report of such investigation is tabled in this Legislature.

Some Hon. Members: — Hear, hear!

Mr. W.E. Smishek (Regina North East): — Mr. Speaker, I rise to speak in support of the amendment introduced by the Leader of the Opposition (Mr. Lloyd). As you have noted the amendment asks that second reading of this Bill be discontinued and the subject matter be referred to a Special Select Committee of this Legislature for investigation, that Committee to have power to receive representations from the public and to report on its studies and investigation to this

Legislature.

Mr. Speaker, I recognize that I have already spoken to the main motion and therefore I propose to confine my remarks to the amendment that is before us and I propose to be brief.

Mr. Speaker, everyone here on this side admits that the deterrent fees proposed by the Government, if adopted, will have a far-reaching effect on the people. Secondly, there is strong opposition from the public to the establishment of deterrent fees in our health plans. If for no other reasons than the two that I have just expressed, it is desirable that the matter be fully investigated and reported on by a Committee of this Legislature. But, Sir, there are many additional reasons for this investigation.

Mr. Speaker, let me first suggest to the Government as possible composition of such a committee. Since both the Saskatchewan Hospital Services Plan and Medical Care Insurance Plan were introduced by the former Government, there is naturally a special interest we, the Opposition Members, have in these plans. We want to ensure their maintenance and their improvement. I would, therefore, suggest that the Special Select Committee proposed by the Leader of the Opposition (Mr. Lloyd) be composed of equal representation from the Government and the Opposition.

Some Hon. Members: — Hear, hear!

Mr. Smishek: — On the Government side, Mr. Speaker there are two Cabinet Ministers with health portfolio experience — the Hon. Member for Regina South (Mr. Grant) present Minister of Health, and the Hon. Member for Prince Albert West (Mr. Steuart), the former Minister of Health. Both of them may be placed on the Committee.

On the Opposition side we also have two former Health Ministers, the Hon. Member for Regina Centre (Mr. Blakeney) and the Hon. Member for Moose Jaw South (Mr. Davies). Both of them may be placed on such a Committee.

Mr. Speaker, on the Government side the Hon. Member for Regina South West (Mr. McPherson) served on the Thompson Committee and has gained some knowledge on health services. From the Opposition, I also served on the Thompson Committee and have gained some knowledge and experience. Both of us might be considered to be Members of such a Committee.

This is balancing things fairly evenly, Mr. Speaker. However, there is one important thing lacking in such a committee structure. Neither side would have rural representation which I believe is important to have placed on such a body. I would, therefore, suggest that at least two rural members from each side be named to such a Committee for a total of ten members, five from each side of the House. Mr. Speaker, this is merely a suggested structure. We on the Opposition would be prepared to discuss a different composition with the Government.

The desirability of a Committee on this important matter is self-evident. There is a dark area of what the proposed deterrent fees will cost and who of our citizens will have to pay most. Will the people be deterred from seeking health services when they need them? The Committee could investigate these

April 10, 1968

matters. The Committee should investigate the administrative costs of deterrent fees. The Provincial Treasurer (Mr. Steuart) told us that deterrent fees as proposed will cost the people \$7.4 million; but the estimated saving to the province will only be \$5 million. There is a 33 per cent leakage or cost of administration. Is there a better way of doing it? This should be investigated and reported upon.

Some Hon. Members: — Hear, hear!

Mr. Smishek: — Mr. Speaker, the Provincial Treasurer predicts that the cost of medicare will rise from \$26 million in 1967 to \$31.2 million in 1968, an increase of 20 per cent in one year. Yet in the five-year period the total payments for insured services rose 21 per cent. Why such a sharp rise in one year? It does not make sense. Is it because the Federal Government is offering to contribute \$10.7 million towards medicare? This should be investigated. This Committee should study why such a sharp increase. It is true we have heard that some additional people may be covered. But, Mr. Speaker, I do not see why there will be a 20 per cent increase in the coverage of the population. Nor do the studies that have been made so far indicate that the inclusion of optical services should increase the cost of medical care by that amount. Our estimates are that the inclusion of optical services for eye examinations will cost not much more than \$350,000 as the Provincial share.

Such a committee should investigate other plans where deterrent fees exist. Do they really achieve the results that they are designed for? Who is mostly deterred? We should carefully study their application. What are the true experiences of the Swift Current Health Region No. 1? There are presently two different opinions. The Government argues, and has one opinion; we have a different view of that experience. References have been made, Mr. Speaker, to the Norwegian and the Swedish plans having deterrent fees. There is a difference of opinion as to how they work. When I was overseas visiting these countries in 1961 with the Thompson Study Group, we found no deterrent fees applied in respect to hospitals. We found that no deterrent fees applied in respect of specialist services. Only limited deterrent fees applied in the case of general practitioner services. A factual report should be received on their practices and their experiences.

Mr. Speaker, Government spokesmen tell us our plans are in danger and through deterrent fees they propose to save them. If the plans are in financial trouble then are there better ways of resolving the problem, Mr. Speaker? Should we be increasing other taxes rather than imposing deterrent fees? Mr. Speaker, personally I would favor an increase in income tax and sales tax, if that were necessary, and I stress the point, if that is necessary. I am opposed to increasing individual premiums and placing deterrent fees of any kind. The best alternatives can only be determined by a body who has carefully examined the problem.

The Committee should have the authority to receive representations from organizations and individuals; farm groups, teachers, labor, business organizations, the medical profession, hospital boards and regional health boards, senior citizens and others. Groups, the Leader of the Opposition has pointed out, might want to make representations. The Committee should have the power to call witnesses. It should have the authority to

engage independent consulting actuaries to help determine accurate total costs of deterrents and on whom will the deterrent charges fall most heavily. The cost of their administration — speculative figures are not good enough and to this point, Mr. Speaker, that is all that we have had — this is just not good enough.

Mr. Speaker, a person who might be considered as a consulting actuary to assist such a committee is Mr. Byron Straight, who did a superb job of cost estimates for the Advisory Planning Committee on Medical Care. The cost estimates and projections he made remained undisputed for period of 5½ years.

Some Hon. Members: — Hear, hear!

Mr. Smishek: — I draw attention that Byron Straight did cost estimates on medicare, including and excluding possible deterrent fees. The difference in the initial cost of the plans was \$1.8 million. That is the difference in the two possible plans, one with deterrent fees and one without deterrent fees. The difference was only \$1.8 million. The Provincial Treasurer tells us that medicare deterrent fees will cost \$4 million. This is more than double the 1961 actuarial estimates. The Committee might examine the accuracy of both these figures. I appreciate the Thompson Committee's recommendations in the application of deterrent fees limiting them to three office calls only. However, the disparity in the figures is much too great and should be examined, Mr. Speaker.

The Premier told us two weeks ago, Mr. Speaker, that he had made up his mind and that he is prepared to have us stay here until July and debate the issue of deterrent fees. He tells us that his position is unchangeable and unalterable. Well, Sir, I suggest to you that the Premier has already changed his mind three times on deterrent fees since the Budget was introduced, and I would hope that a committee investigation and report might change his mind again, because he would be able to make a judgment on fact based on the Committee's findings, rather than on his prejudice.

Let me point out how the Premier wavered from his original position. Mr. Speaker, the first deterrent fee announcement had no exclusions or no limitations. Because of the pressure of the opposition to the deterrent fees from the public the Government announced that newborns would be excluded.

Hon. L.P. Coderre (Minister of Labour): — On a point or order. The Hon. Member is referring to something the Premier had said. Having spoken in the debate before, he is now speaking on the amendment and I believe that he should confine his debate to the amendment and not on matters that have been discussed before.

Mr. Speaker: — Well I suppose it would be just as well if I clarify the position in regard to Members who have previously spoken. Members who have not spoken before on this Bill at all, once the amendment was moved, speak to the motion and the amendment concurrently. Members who spoke previously on the motion for the second reading of the Bill, now speak to the amendment only.

April 10, 1968

Mr. Smishek: — Mr. Speaker, I believe that I followed that rule quite carefully. I read the statement in a newspaper and I am entitled to quote, Mr. Speaker.

As I have said, because of the pressure of opposition from the public, the Government has already changed its mind three times and particularly the Premier. 1. Newborns were excluded. 2. A 90-day limitation was announced, and 3. We heard this announcement made by the Premier and let me quote: “We would hope that some formula may be found to place an annual family ceiling on utilization fees.” Mr. Speaker, perhaps the Committee that is suggested could find that formula. Perhaps the Committee could find more equitable formulas that would ease the burden without the imposition of deterrent fees. Perhaps the Committee might find or might want to consider further exclusions, the exclusion of the young and the old, who are most in need of hospital and medical care, and perhaps they might want to consider further limitations which would ease the burden.

Mr. Speaker, as I have said we are opposed to deterrent fees in any form, in any amounts. But we are prepared to be fair and to give the people and such a committee a fair hearing. If the people of Saskatchewan, through their organizations, through their representations to the Committee prove that they want deterrent fees, prove that by a substantial majority the people of Saskatchewan would agree to the Government’s formula, we will respect the wishes of the people, Mr. Speaker.

Some Hon. Members: — Hear, hear!

Mr. Smishek: — But, Mr. Speaker, up to now we are not convinced that the people of Saskatchewan want deterrent fees. In fact everything to this point proves to the contrary that the people of Saskatchewan don’t want deterrent fees. Mr. Speaker, the Committee can start work immediately. In fact, Mr. Speaker, had it not been for the Government not calling this Bill for discussion earlier — we have been waiting for two weeks — we could have done a lot of work or such a committee could have done a lot of work. We could have taken advantage of last week’s adjournment. Mr. Speaker, if the Committee study and report is not completed before this session is ready to prorogue, we on this side of the House will be prepared to come back for a special session to deal with the matter once the Committee report is tabled. Mr. Speaker, in addition to that we give this commitment to the Government — that we will be prepared to come back here without any additional costs to the Government and stay as long as necessary to debate the issue.

Mr. Speaker, I support the amendment.

Some Hon. Members: — Hear, hear!

Mr. W.G. Davies (Moose Jaw South): — Mr. Speaker, I have not heard personally all of the speeches that have been made on this Bill, but I have followed most of them in one way or another. A number of the Members from this side of the House have already spoken to expose the harmful and disastrous consequences that are implicit in this proposed legislation. I think that they have done an excellent job of presenting this position and in presenting the position of the people of the province, since the last time that this Bill was debated, (I believe on March 22nd, 19 days ago), when

the Government deferred this debate.

Now, Mr. Speaker, what is the public reception to this deterrent fees Bill? What are the citizens of the province thinking about it? Mr. Speaker, everywhere you go since March 1st, when the Provincial Treasurer (Mr. Steuart) read his Budget Speech and told us of the kind of prospect that we are going to face now pictured in the Bill before us, there has been a spontaneous outcry from every region of Saskatchewan. I don't need to inform the House on every detail. It is sufficient to say that not a day goes by but that one can read the accounts in the press, hear stories over television and radio, almost unanimously condemning the principle of this Bill. The Leader of the Opposition (Mr. Lloyd), in speaking this morning has given a list of the organizations and bodies that are in opposition to this Bill. Two of them, of course, are the Saskatchewan Association of Rural Municipalities, the rural parliament of Saskatchewan and the city council of the largest city of this province, the Regina City Council, who have gone on record against the Government's latest health policy.

Mr. Speaker, on March 14th, the Minister of Health (Mr. Grant), when introducing this Bill gave the Government rationale. I must say that he did his valiant best to defend the Bill's appalling contents. But no one can examine the statement that he made at that time without coming to the conclusion that the Government's case for deterrent fees is inhumane and harsh. The Government does not really set out to say that this isn't so. The Government says, however, that its remedies are logical and realistic. The Premier says that he is trying to save medicare and hospitalization. And I believe that many citizens will be dubious about their prospects for salvation in this connection.

Mr. Speaker, in perspective, the Government remedies are not logical, not realistic. The remedies rest on a foundation of quicksand. Now let's look at what the Minister of Health (Mr. Grant) told us. He said that a large unidentified group of Saskatchewan citizens are misusing or abusing the hospitalization and the medicare programs. He added, "It is regrettable that when a Government program is acted on unwisely by some, all must suffer." Surely, Mr. Speaker, this viewpoint embraces some pretty muddled thinking. Surely, also, the thesis that is expressed is contrary to every just consideration that governs conduct in a civilized society.

Our society, because it must always try to be just, seeks to establish the sources of blame if there is blame. It must discover the fundamental causes of any problem, any problem situation that concerns the community, before elaborating means to overcome it. And the glaring anomaly of this Bill is that it contradicts the rational and scientific approach, which is the very basis of good health care, and which I say governs the professional and the administrative people in this whole field. It doesn't concentrate on the real areas of difficulty. It hasn't even identified them. It assumes a solution without having the facts. The Government says that there are innocent and guilty, offending and unoffending persons, but its solution is to penalize everybody.

The Minister of Health's speech in introducing this Bill, contained I thought some positively Orwellian statements. He said:

It is very easy to excuse ourselves by saying that only

April 10, 1968

a doctor can admit or discharge. This is true. But because there is no demand control there is no patient resistance to doctor over-utilization . . .

What the Minister, Mr. Speaker, has told us here is peculiar indeed. He tells us that the Government feels that doctors are at fault in sending people to hospitals. It says that deterrent fees are going to cause a patient to resist a doctor's efforts to put him into a hospital. The Minister's statement implies that the net result will be a reduction in the hospital usage by patients. Mr. Speaker, it is abundantly evident that the layman patient is being asked to challenge the professional judgment of the practitioner. How he is equipped to do this is simply beyond me. The Government's position demands that the great majority of patients who are confined to hospitals for good reasons should suffer along with those that it considers are malingerers and abusers of the service. But the kernel of the Government case is that it blames the doctors. There is simply no doubt about that.

Mr. Speaker, if the Government is correct in this, why is the patient being used to shoulder the burden? We know that in any event the well-to-do patients are not going to be deterred — deterred in any appreciable way — from using the hospital and medical services of this Province. The rich hypochondriac and his indulgent doctor won't see any obstacles in their way. The ordinary patient, and worse, the poor, will. Many who should go to the doctor won't go because of the dreaded extra charges. The consequences for health over a period are bound to be very badly damaging for the Province.

The whole approach to cancer prevention for example, Mr. Speaker, is summed up in the phrase "Early detection brings early cure." This means in turn that patients should have regular doctors' examinations. This means that where necessary hospitalization should be effected immediately. Our cancer program is now subject to interference and damage. Those, who because of the economic position that they are in, fear added costs will tend not to see their doctor who is the intermediary that discovers the disease initially before it is treated by the Cancer Commission physicians.

Mr. Speaker, the more you ponder the Government's deterrent fee policy the more it reminds you of the actions of the robber giant of Greek mythology. Members will perhaps know that the name of this robber giant was Procrustes. He placed his captives on an iron bed. He cut off the limbs of those who were too long for it and he stretched the limbs of those who were too short until they fitted. The result was the same. His patients all died.

This Government has imposed its own Procrustean policy on the people of this Province. Their hospital bed policy is made not to fit the needs of the people. They are stretched to fit that policy.

Members on our side of the House and many citizens outside of it have constantly asked for the tabling of any statistical evidence that guides the Government in its present policy. We are told the main fact on which the Government relies is that the Saskatchewan hospital-use rates are 30 per cent higher than anywhere else in Canada.

Well, Mr. Speaker, we have nothing before us to show

conclusively that this is because of so-called patient over-utilization. No one suggests that the people of Saskatchewan are using doctors 30 per cent more than the citizens of other parts of Canada. We do not know whether the hospital use in this province is caused by over-utilization or whether it is due to numerous other factors.

To begin with we all know that our Saskatchewan population is widely dispersed and I think that this fact must inevitably cause more use of hospitals. Many residents have to travel considerable distances for doctor and hospital care. They can't be treated in their homes because the physician that they need is residing in a distant centre.

Further, Mr. Speaker, it may very well be that some Provinces do not have enough hospital beds to adequately service their residents. There is good reason to believe, in fact many facts support it. But our health services are far away from a desirable standard in Canada and no one, as far as I know, has ever suggested that we have enough properly equipped hospitals all over Canada at this time. So, therefore, any higher usage of hospital services in Saskatchewan may only be higher in relation to an absence or a lack of facilities elsewhere in Canada.

The Leader of the Opposition (Mr. Lloyd) in his talk this morning produced a number of comparative figures that I think bear out the point that I have just made. I am not going to take the time of the House in repeating those figures. They are present, however, in DBS Hospital Statistics of 1966, catalogue No. 83217. The same bulletin also reveals the fact that the revenue fund expense per patient day (for adults and children) that is, the true operating costs of operation and maintenance of hospitals has actually in Saskatchewan been the lowest of any Province from 1961 to 1966 in terms of the actual increase in costs in that six-year period. The Saskatchewan increase was \$7.44 per day over this period. The average for the whole of Canada was \$12.90.

Also, in 1966, Saskatchewan had the second lowest daily charges of any Province — \$28.60. Prince Edward Island was the only Province lower with a rate not too far from this — \$26.61. For these kinds of reasons, Mr. Speaker, the Government's assumption in respect to over-utilization of hospital beds rests on an extremely doubtful foundation. Mr. Speaker, if there is patient misuse, if there is a sore need to consider it as a main problem, then it would be sensible to begin by getting all the requisite information on precisely where this situation exists and why. At that point and at that point only, can any intelligent appraisal be made, and only at that time I suggest can steps be taken that would humanely, justly and fairly, assure an equitable solution. We are being asked now to proceed with deterrent taxes on the sick without knowing the facts. We've also been denied certain important information that might have aided us in that search and furthermore we have learned the Government has not undertaken suitable and proper studies to get the relevant facts.

Mr. Speaker, I think there is a strong suspicion that this Government has rushed to expedients after having come to the hasty conclusion based, not on exact information, but on its own inherent opposition to what it considers to be costly welfare plans.

April 10, 1968

Some Hon. Members: — Hear, hear!

Mr. Davies — Mr. Justice Emmett Hall, Chairman of the Royal Commission on Health Services, when he spoke to the Thomas More Guild at Toronto, in September of 1964, dealt with the kind of prejudices that this Government seems to be laboring under when it concocted the deterrent concept. The Chief Justice countered these misconceptions with the abundant research of his Commission. He said at that time:

You hear about and you read frequently for instance that hospital costs are going up and up and where the spiral ends nobody knows . . .

“And this is put forward with some innuendo that there is something amiss, and this upward trend in hospital costs appears immoral in some way . . .” Then later in his speech he went on to say and I am again quoting him verbatim:

To listen to some one would think that costs are rising because hundreds of thousands of people are rushing to the hospital unnecessarily and staying there days too long, and that this abuse could be eliminated by some more or less nominal per diem patient day charge of \$1 or \$2 at most per day . . .

Then after analyzing the nature of hospital cases, Mr. Justice Hall said:

It is not through abuse that costs will rise in the future. Hospital costs are going to rise whether or not any recommendations we made are implemented . . .

He went on at that time to speak out very strongly against the idea, which I suggest is the underlying principle of this Bill, to regard spending on health as ‘staggering costs’, without relating them to the overall social and economic dividends for the whole country. In this regard he had this to say finally:

Health expenditures are not welfare expenditures. They like investments in education are investments in human capital . . .

Mr. Speaker, if the Liberal Government of this Province had followed the thinking of the Chairman of the Royal Commission on Health Services, I suggest that it would never have come up with a tax expressed in hospital and medical service deterrents. If it had studied the voluminous research of the Commission it would have seen, it would have realized, that this action was completely unacceptable, completely unwise. Mr. Speaker, perhaps the most reprehensible part of the Government’s action has been the summary way in which deterrent fees have come before us. For remember not the slightest hint was given to us or the people of this Province before the last October provincial election that these odious charges would be imposed.

Last August, the Minister of Health was reported in the Leader Post as saying that medical care and hospitalization rates would remain the same for 1968. The whole intimation without the slightest reservation at that time was that the people of this Province would not be subjected to any new charges.

Some Hon. Members: — Hear, hear!

Mr. Davies — All through this session, we have been listening wearily to Government speakers, Government Ministers, talking about how responsible they have been in calling for a variety of new taxes, especially these on hospital and medical services. Mr. Speaker, what a travesty of the truth this claim is. A real exercise of responsibility would have been for the Minister and his colleagues to have used 1967 to warn citizens that in their opinion there was a crisis in health costs. But not a word; all was apparently well. The rates would stay. It was only when he and his fellow Ministers were safely back in their seats of power that they descended on the Saskatchewan people with cries of austerity and shouts about staggering costs.

If the Government had exercised responsibility, Mr. Speaker, it would have launched an investigation, now proposed in some ways by the amendment, into all the positive ways and means of meeting higher costs. It could then have discovered the real extent to which there exists overuse, if any, of hospitals and doctor services. It could have looked at the alternatives that were indicated by the real facts, the true facts. It didn't do this. Now why it didn't do it is curious. If it was interested in getting public co-operation to control alleged abuses, surely the production of facts, the appointment of an impartial study body, would have helped it overcome what it claims to be the prime problem.

One is tempted to conclude that it already knew which direction the Frazier Commission proposals would take and it feared that any corresponding investigation of its hospital and medical care policies would have revealed items which it preferred to keep from the public gaze. It is hard to escape the conclusion, Mr. Speaker, that what facts it did have did not support deterrent fees and that it was afraid also that any scrutiny by an unbiased agency or tribunal would have recommended against them. Why then the insistence on deterrent fees? Mr. Speaker, this Government has no essential sympathy in regard for health plans of the public variety.

Some Hon. Members: — Hear, hear!

Mr. Davies — This Government was anxious to avoid the implications of a public drug program at the same moment that it received an additional \$10.5 million from the Federal Government, an amount that will be \$14 million in a whole year. Mr. Speaker, the decision of this Government to impose deterrents was not so much because it was its unpleasant task to control hospital and medical costs. Basically it was because it wanted to head off the demand of the voters to proceed with improvements like a drug program; another promise in which incidentally this Government betrayed completely the confidence of the people of this Province. By instituting deterrent fees, Mr. Speaker, this Government hopes to reduce the popularity and the public demand for all public health programs.

Mr. Speaker, we have all seen many instances where the House has been denied vital information on public questions by the Government on your right. I have spoken about its attitude, as has been expressed, in terms of supplying central facts on the prime questions in this Bill. Now I point out that the Government will, by a passage of this legislation, delay the receipt by Members of the Legislature of more valuable facts that they have a right to be informed upon. By extending by one month

April 10, 1968

the date on which the annual report on the Saskatchewan Hospital Services Plan is to be tabled — that is by the end of March rather than by the end of February — Members will be further embarrassed by a lack of crucial information on one of the biggest spending areas of this Government. The Minister says on this, and I am quoting him:

This amendment will not in any way jeopardize the position of Members of this Assembly because the Assembly is usually in session at the end of March.

Mr. Speaker, this is an incredible statement coming from a Minister of the Crown. The House is usually well on its way to prorogation by the end of March. Bills on hospital matters will in most cases have long since been introduced. Many health estimates may either be under current discussion or may have already been dealt with in any given year. In any case Members will have had no opportunity to pre-study of the report so as to properly evaluate amendments or proposed expenditures. Mr. Speaker, this particular amendment is in keeping with the cloistered, secretive and clandestine way that this Government pursues its activities and denies valuable information to the public of Saskatchewan.

Some Hon. Members: — Hear, hear!

Mr. Davies — Mr. Speaker, the common sense course for any Government that genuinely wanted to cut health costs without injuring prime services, would have been to launch a detailed study of such costs and to call for public co-operation in cases where abuses were well known enough to be outlined. I have remarked that the absence of this obviously indicated investigation is a significant measure of the Government's insincerity and the Government's ineptitude. It is also, in my opinion, an expression of Government contempt for the electorate.

Mr. Justice Hall, along with many other health authorities in Canada, has informed us about some of the reasons for increases in the cost of health services. Of course, these included health and medical services. Most of these increases have probably been necessary and inevitable. But, Mr. Speaker, this is not to say that some positive controls on costs would not be considered by the Legislature.

Let me cite for example home-care programs. The previous CCF Government has undertaken an important beginning in sponsoring this class of program; and I am very happy to say that the pilot program was in my own constituency of Moose Jaw where it has received most gratifying public and professional support. Mr. Speaker, programs of this kind will have to be substantially expanded as part of an integrated health services program. How much emphasis is the present Government placing on it? I think the indications that we have had, all of the indications, say that this is far, far from enough. At this moment, it is virtually impossible to exclude some residents from hospitals because of the lack of such services. But they are necessary, both as a means of preventing ill health, as well as offering cheaper, less expensive, alternatives to hospital bed use.

And what about rationalization? What about efficiency in hospitals? Now, Mr. Speaker, I think that a great number of our hospitals are already engaged in activities that are trying to co-relate, trying to co-ordinate, their functions. One of the

ways in which they have done this quite successfully at least to groups of hospitals, is to engage in the common purchasing of drugs, in other hospital goods, to improve hospital administration function and so forth. The ultimate has not been reached by any means in this endeavor. I think it is certainly true that it must and can be pursued far more actively with the assistance of the Government. It is another path that the Government should have followed more energetically. The actual functioning of the individual hospital is another matter in which more thought, more planning needs to be given. How can the most modern and expert service be given to patients in the most economical manner without bad results for the community or for the patients? Are we keeping abreast of present day developments and considering all the possibilities in this regard.

I think a crucial subject for consideration is surely one involving the members of the medical profession, because we all know here you get into and out of a hospital through the advice of a doctor. Equally, after one's first visit to a doctor, you are generally advised on whether to return again, or otherwise. I say no one can abuse hospital utilization it is plain, without the doctor being involved.

The government claims that there is widespread abuse. In advancing this claim it has squarely involved the members of the profession. Now what is the Government doing to identify the professional people who they say caused the problem? How is it proposing to act in concert with the profession? Mr. Speaker, I say that all of these considerations are involved in our study of this Bill. I submit that on none of them has the Government given the House anything like adequate and convincing answers. The government's failure to do so adds strength to the public consensus that these unjust levies are unwarranted and undesirable in every sense of the word.

My friends on this side of the House have commented on other situations that will be created by this Bill. Hospitals will have to devote time, money, energy, more employees, to the detested and unrewarding job of collection of fees, even as will physicians. The Province will lose millions of dollars of Federal money because we will not be able to claim deterrent charges as part of the cost of operations of medical and hospital plans. The aggregate cost of collection, the loss of Federal money will be, of course, very large, offsetting to a very considerable degree the assumed total value of deterrent fees imposed.

Another item that has to be considered is what the new fees are going to do to our programs for attracting new health professionals to this province. I don't think it can be denied that our Medical Care Plan, coupled with our Hospital Plan, have been important factors in bringing new physicians and auxiliary professionals to Saskatchewan. But the institution of deterrent charges is bound to have a significant, dampening effect on their decision to engage in practice in this Province.

Looming over all such important considerations it seems to me is the final, the eventual effect on the health of people. The Hall Commission in 1960 said that there were 30 million man days lost in that year because of illness and I think the figure today is almost certain to be very much higher. The loss in wages, the loss in the value of production, in services, is probably, I suggest, close to 2 billion dollars each year; or about

April 10, 1968

twice the value of a health services plan that was envisaged by the Commission. I am not claiming complete accuracy for this estimate, but it is probably not too far from the actual. In any case, certainly, no reasonable person would dispute that lost production, lost services, lost earnings, because of sickness result yearly in an immense monetary loss to the whole of Canada. The significance of this in our debate on this Bill is plain enough. People who face the prospect of paying deterrent fees may well decide to decline from using doctor and hospital services that could have prevented illness from occurring as well as having prevented a long stay in hospital and many visits to the doctor. I think that in turn the aggregate figure for monetary loss to the province could be very much higher than what it is said we are going to save by deterrent charges. In the long haul I think you can only come to one basic conclusion, that deterrents will not save, deterrents will cost the community dearly. You know when Chief Justice Hall spoke in Toronto in 1964, in a talk to which I have already referred, he made this statement. It's a short one, Mr. Speaker, and it is well worth repeating. He said:

The field of health services illustrates perhaps better than any other the paradox of our age, which is the enormous gap between our scientific knowledge and skills on the one hand and our organization and financial arrangements to apply them to the needs of man on the other . . . What the Commission recommends is that this gap be closed, that as a nation we now take the necessary legislative, organizational and financial decisions and make all the fruits of the health sciences available to all of our residents without hindrance of any kind. All our recommendations are directed towards this objective. We believe that there can be no greater challenge to a free society of free men . . .

Mr. Speaker, since Mr. Justice Hall spoke, there has been a steady lobby on the part of privileged groups to avoid the objectives to which he has so steadfastly pointed. Since that time many Governments in Canada have by devious means, subject to the influence of many groups, edged away from this objective. And this Government has been one of them!

Some Hon. Members: — Hear, hear!

Mr. Davies — Since 1964, when this Government took office, it has not kept their promises on health services. Since that time it has been remiss in its obligations to our citizens in meeting the challenge of developing full health programs for citizens. Now in this Bill it has betrayed its promises again; worse, it has undermined the grand principle enunciated by Chief Justice Hall, including the foremost one of making the fruits of health sciences available to all residents without, in the language of the Chief Justice, hindrance of any kind. This Bill is not only a backward movement; it is injurious to the progress of Saskatchewan. It reverses the trend of leadership that Saskatchewan has held for many years in matters of health. It does this without adequate evidence and without a truly scientific basis for its actions. It is not too late for this Government to reverse itself. Its present attitude is headstrong, it's arrogant, it's unreasonable. I ask the Government to withdraw this Bill, to institute an impartial study of alternatives, to proceed on lines thereafter that will not impose a tax upon people who can least afford to bear the burden that this Bill imposes.

Mr. C.G. Willis (Melfort-Tisdale): — May I call it 12:30, Mr. Speaker.

Mr. Speaker: — No, you've got a minute to go yet.

Mr. Willis: — Mr. Speaker, we'll have to make use of that minute to try and convince the Government across the way that this is indeed one of the most unjust taxes which have been imposed in this session, which will go down as the session of most taxes ever imposed in the history of Saskatchewan. Deterrent fees on the sick, deterrent fees of \$2.50 a day; if you are unfortunate enough to be sick, Mr. Speaker. Deterrent fees of \$1.50 if you are unfortunate enough to have to go to a doctor, Mr. Speaker. These are what the people ought to have done. These are what the people opposite have done. These are what the people opposite seem to be proud of. They sit in their seats and listen to us on this side of the House condemn them for their careless action. They take no part in this debate, Mr. Speaker.

Is it 12:30 now, Mr. Speaker?

The Assembly recessed until 2:30 o'clock p.m.

WELCOME TO STUDENTS

Mr. J.J. Charlebois (Saskatoon City Park-University): — Mr. Speaker, I beg leave to draw to the attention of all Hon. Members to a fine group of students in the west gallery. They are the boys and girls from Brunskill school in Saskatoon and they are here under the direction of their teacher, Mr. Frasz. I am sure all Members will wish to join with me in extending to them a very warm welcome to the Legislature of our Province and to wish them a safe journey home.

Some Hon. Members: — Hear, hear!

Mr. Charlebois: — Mr. Speaker, while I am on my feet I think that we have been reminded that there is more to education than just the classroom. In this regard I would like to recognize a man in the Speaker's gallery who has done a great deal of work in this province with young people. This is Mr. Al Ledingham, the coach for the very finest football team, junior football team, that Saskatchewan has ever known, the Saskatoon Hilltops.

Some Hon. Members: — Hear, hear!

Mr. H.H.P. Baker (Regina South East): — I will endorse part of the words that the Member has brought from Saskatoon, I recognize him as a very good coach, but I think the best is in Regina.

Some Hon. Members: — Hear, hear!

Hon. C.L.B. Estey (Saskatoon Nutana Centre): — Mr. Speaker, the students from my constituency have not arrived yet.

April 10, 1968

The Assembly resumed the interrupted debate on Bill No. 39 — **An Act to Amend The Saskatchewan Hospitalization Act.**

Mr. Willis: — Mr. Speaker, at this morning's session I started to speak on the Saskatchewan Hospitalization Act, as I recall, one minute and thirty seconds before 12:30. I didn't say very much this morning, except to reiterate the fact that we on this side of the House are opposed to deterrent fees of \$2.50 per day if you're in hospital or \$1.50 per visit if you go to see a doctor, with a maximum amount payable of \$165, Mr. Speaker. I call this a most unjust tax on the sick, this tax which is greater the sicker you are. I am very sorry, Mr. Speaker, to have to report that the Members on the opposite side of the House do not appear to be concerned about this Hospitalization Act amendment. They don't seem to be concerned about the taxes which are being levied by the callous Government opposite on the sick people of Saskatchewan. Last Friday, not last Friday, but about two weeks ago, the Member from Regina North East (Mr. Smishek) started the debate on this motion. He continued again on Monday, Mr. Speaker, Monday at 8:45 p.m. I put the time down because I am very impressed with the fact that no sooner had the Member started to get up, Mr. Speaker, than there was a veritable exodus of Members from the opposite side. The seats were filled when the session started, but by 8:45 the exodus of Members opposite began from this Chamber and by 8:46 we had left in the House a scant 14 Members on the Government side, Mr. Speaker. It certainly shows the great interest which the people opposite have in this question of deterrent fees. Then I kept a record, Mr. Speaker, because I didn't have very much else to do even though I was enjoying the fine remarks, the fine address which the Member for Regina North East was delivering, I kept a record of the movement of Government Members in and out of the door, at the rear of their seats, Mr. Speaker. They came and went like lost souls wandering around with nothing much to do. I didn't know at that time that there was a speaker in the lounge at the back, but I don't think this influenced them very much, because they were out of the door, in the door, just in a veritable stream. Fourteen by 8:46, and three minutes later one other person left, that was down to 13. Then by 8:50 there were 12 in the House, and by 8:51 there were 11, not in the House, Mr. Speaker, but on the other side of the Chamber, on the Government side of the Chamber. There were 11 by 8:51 and then one person came back in, 8:52, making it 12, then 11 people were left as one left at 8:52½, then one person came in again 2 minutes later and that made it 12. We continued with 11 and 12, 12 and 11, minute by minute until we got down to 9:15. The Member was clearly finishing his speech and the Chamber began to fill up again. But during this period when the Member was speaking, the Member from Regina North East, the Members opposite found fit to be out of their seats and when they were in the House they were either coming into the House or going from the House. This has continued, Mr. Speaker, regardless of who is speaking on this side of the House. Shortly after this, the Premier (Mr. Thatcher) rose and gave a very fine address, Mr. Speaker, as to why we should submit to deterrent fees. He spoke for about 20 minutes, very logical it sounded. He finished and sat down and the Member for Riversdale (Mr. Romanow) got up, Mr. Speaker, I must admit that I enjoyed the speech from the Member for Riversdale much better than the speech of the Premier. In fact I thought the Member for Riversdale had the better of the argument. I think the Members opposite did too, because here, Mr. Speaker, the Members opposite showed not only they weren't interested in the speech by the Member from Riversdale, but they

showed that they couldn't take it anymore as the attendance on the other side of the House got down to six Members, which is certainly disgraceful any time, Mr. Speaker. When an important issue like this is before the House, when an important issue like this is being debated, it is very disgraceful that Members opposite sit in their seats or don't sit in their seats. They walk out of the Chamber, not paying any attention to what is being said.

Hon. L.P. Coderre (Gravelbourg): — Mr. Speaker, may I ask the Hon. Member a question. Is he referring to the amendment or what? I just haven't noticed anything in the debate.

Mr. Willis: — Mr. Speaker, have I not got the floor? Can't I speak of what I want to speak about here in this debate, this debate about hospitalization? Surely the Member for Gravelbourg doesn't have to ask if I'm speaking about the amendment, I haven't mentioned the amendment yet, Mr. Speaker. I didn't think I was under the compulsion to mention it. Mr. Speaker hasn't called me to order and I'm sure that, just because the Member for Gravelbourg had to get up and start talking, this doesn't mean that I am out of order. I don't think as long as the Speaker has remained in his seat, I certainly don't have to start talking about the amendment. I can say, Mr. Speaker, that if the Member for Gravelbourg wishes to take part in this debate, he'll have ample opportunity.

Some Hon. Members: — Hear, hear!

Mr. Willis: — I am certainly glad he says he will take part in this debate. I want to congratulate him. Not very many people opposite have had the courage to stand up and say where they stood on this important question. The Member for Cannington (Mr. Weatherald) stood up this morning and made some remarks. I imagine that his constituents if they heard about them would probably wish that he had stayed in his seat. But if the Member for Gravelbourg wants to get up and speak, he can certainly take the opportunity following me. It won't be very hard. I can assure you, Mr. Minister, you will probably have a full audience over here and anyone on this side of the House would be pleased to hear what you have to say, along with the other Members of your party. You people have been very, very quiet this debate regarding this issue, and this I think is one of the most important issues to come up in this session of the Legislature. It is bad enough that we have been taxed, and I can very easily say taxed to death, Mr. Speaker. It is bad enough we have been taxed as grossly as we have, but when this Government opposite starts putting taxes on the sick, then they have gone too far.

I couldn't help but think when I was listening to the Member for Saskatoon City Park-University, or whatever the constituency is, Mr. Speaker, welcoming the students in the gallery. I couldn't help but think when he not only welcomed them, but wished them a safe journey home, that he should have also wished that they remain healthy in the coming year, that they don't have to go in hospital and pay an extra \$2.50 a day, every day they are in the hospital.

It could be, Mr. Speaker, that the Members opposite aren't speaking in this debate, because their minds have been made up, have been made up for them. Not by them, but for them. They

April 10, 1968

have been told how they have to vote, when this vote comes up. It could be, Mr. Speaker, if a few of the Members opposite got up to speak that they would find it difficult to agree with the action which has been taken by the Government in imposing deterrent fees on people who are sick. I hope that other people follow the example that has been set by the Member for Yorkton (Mr. Gallagher) who is never at a loss to show his courage whenever anything comes up like this. The Member for Cannington (Mr. Weatherald) spoke, the Member for Maple Creek (Mr. Cameron) spoke, now the Member for Gravelbourg tells us that he is going to speak. I think he is out of the Chamber, it is quite likely he is out preparing a short address on this topic. I certainly hope that the rest of you people opposite take the opportunity to tell us just where you stand on this important question. I think, Mr. Speaker, that there is a need for the people opposite to take part in this debate, even though they have been told by the boss just how they must vote. No matter when the vote comes up later — the recorded vote that is — it will probably be 34 to 24, 34 people on the other side voting for this tax measure, 24 on this side voting against. It is important that the people opposite before they vote should take the opportunity to stand up and tell just what they are voting for and why they are voting for a tax on the sick. Undoubtedly, Mr. Speaker, even though the people opposite are not in favor of the measure they will vote for it. Though there will be a majority vote in this House for the tax measure which the Government imposed, this does not reflect the thinking throughout the country as a whole.

The people of Saskatchewan are overwhelmingly opposed to this gross, unjust tax on the sick. The great majority of people oppose these deterrent fees and, Mr. Speaker, if the Government had the courage to call an election on this issue they would find out that this was true, that they would be voted out of power, if they did have the courage to call an election. They wouldn't call an election even though they should, Mr. Speaker. This was not an issue in the last election. The people were not told that when the Government came back into power that there would be a tremendous increase in taxes. They were not told that there would be taxes on the sick. The Government opposite owes it to people to do one of two things. First of all, to call an election, if it hasn't got the courage to call an election and put this issue directly in front of the people, then it should do as the Leader of the Opposition (Mr. Lloyd) suggested and appoint a committee which would look into this matter and come up with the feeling of the people of Saskatchewan.

Some Hon. Members: — Hear, hear!

Mr. Willis: — I am sure, Mr. Speaker, that I am speaking for the people of Melfort-Tisdale when I say that the people of Melfort-Tisdale oppose this deterrent fee this tax on the sick. I have in front of me here a basket full of letters from people in my constituency, who have expressed dissatisfaction with the actions of this Government. I want to say that the people of Melfort-Tisdale are not alone in this. One Member on the opposite side of the House told me that he was carrying around or had received a petition with a thousand names on it, from people in his constituency opposing deterrent fees. Of course he said these people who signed the petition are CCF or NDP, there is no doubt about it, they are New Democrats, but they signed it. They sent the petition in to the Member and I think that the Member should, before this debate is over, rise in his seat and tell the people of this House that he has such petitions, that he has a petition

with a thousand names on it who are opposed to deterrent fees, and he should tell this House just what he is going to do regarding these deterrent fees. I am certain that if every other Member on the opposite side got up on this they too would tell of letters received protesting the action of the Government. They too could tell about petitions which they have received from people in their constituency and probably signed by many people who are not New Democrats. At some time later in my address, Mr. Speaker, I hope to not only tell you that the people of Melfort-Tisdale are opposed to deterrent fees, I want to tell you in their own words, I'll be taking the opportunity some time this afternoon to give you most of the material which I have in the basket here.

I would certainly urge the Members opposite to do the same with any letters or any petitions which they have received regarding the acceptance of deterrent fees throughout the country. Mr. Speaker, I neglected to mention that I also played Madame Dufarge this morning when the Leader of the Opposition was speaking. Again we found the same results, lack of interest on the other side, there were a few people who stayed in their seats, but not very many, Mr. Speaker. Up and down, at one time we got down as low as 11 this morning and all during the speech of the Leader of the Opposition, the future Premier, the Leader of the Opposition now, all through his speech, the greatest number who were sitting on the opposite side was 18, but that was only for one minute, I think the Premier came in looked around and went back out again. I have him down here as being in the House for three minutes during that stretch. He didn't get down as far as his seat. He only got part way, he saw that we weren't going along very well so he went back some place where it was cooler and probably more comfortable.

I want to say that the captain of this crew across the way and their first mate have certainly neglected to perform their duties, Mr. Speaker. They hope to weather the squall which is developing in the Legislature now by absenting themselves from the Chamber. I don't know what they are achieving. I think their place is here in the House finding out what the Members of this Legislature think about their regressive tax measures and adding their presence and helping in the debate as it progresses, and probably urging some of the back benchers opposite to get up and say something regarding issues which are being discussed at this time, Mr. Speaker. In place of the Members opposite getting up and saying anything, they get up on points of orders, about whether you are speaking to the amendment or the motion. Too at this time — he might be looking for the amendment some place out in the hallway, Mr. Speaker. Probably he is looking for himself, could be lost out there in the other corridors. They wander in out here like lost sheep. The debate goes on, the Members opposite wishing that the time would go faster, that we get to the vote that much sooner. Well I'll tell you, Mr. Speaker, that the four years which are coming up are going to seem very, very short to the people opposite. These four years will go very, very quickly. The people in the country are not going to forget the tremendous tax burden which has been placed upon them, and they are not going to forget deterrent fees which have been levied on them. Four years from now, you people on the opposite side of the House, will be out of the Chamber. Some of you who are left will probably be a corporal's guard sitting over here on this side, but on the other side will be a government of the people, by the people and for the people. Mr. Speaker,

April 10, 1968

I can't help but think in this regard of the chamber downstairs, or the gallery downstairs, the corridor downstairs just off the cafeteria. As I go once or twice a day into the cafeteria I glance into the corridor and I see pictures of Members of Legislatures. Some of us will be hanging up there from this Legislature, some of the new Members from the opposite side will be there.

Mr. B.D. Gallagher (Yorkton): — Mr. Speaker, on a point of order, I would like to know what the Member for Melfort-Tisdale is trying to prove. The last ten minutes he hasn't said anything about the contents of this Bill.

An Hon. Member: — He is waiting until he gets an audience.

Mr. Willis: — Thank you, Mr. Member for Yorkton, I appreciate very much the remarks which you have made. Now, if you will let me go on, regarding this gallery downstairs, which is hung with pictures. I have heard it referred to as the gallery of the ghosts, past, present and future. I want to predict that come next election there will be a lot of you people who will be classed as ghosts, past, down in that gallery in the basement. I predict too that many of you will not be here, Mr. Member for Yorkton, because of your attitude towards this deterrent fee.

Mr. Speaker: — I just heard the Member for Melfort-Tisdale recently eulogize the speech by the Leader of the Opposition. I want to draw his attention to the fact that the Leader of the Opposition stayed strictly on the subject all through his speech and I wish the Member for Melfort-Tisdale would do the same.

Some Hon. Members: — Hear, hear!

Mr. Willis: — Thank you, Mr. Speaker, I'm trying hard to do this. I'm talking about the taxes which have been levied by this Government, I'm talking about the effect of the taxes levied by this Government throughout the country, I'm talking about the effect which this Black Friday of March 1, last, will have on the coming election. I have mentioned, Mr. Speaker, that after the next election there won't be very many people opposite who will be sitting in this Chamber. Many Members when they come back as visitors will see themselves on the pictures down in the gallery of the ghosts, present, past and future, and most of them will be classed as Members of the ghosts past. If the Members opposite don't believe that this is so, Mr. Speaker, I would ask the Premier to call an election on this issue, and put the issue directly to the people, as to whether or not they are in favor of the tremendous taxes which have been levied on them, particularly this deterrent tax on the sick. We know, Mr. Speaker, that the deterrent tax was levied on the people of Saskatchewan because the people opposite, the Government opposite needed money. There is no doubt it needed money, because it has been spending it in the last four years since it has been in office like drunken sailors. Not content with the tremendous increase in the Highways Budget, Mr. Speaker, it even had to borrow \$6 million last year in order to complete the highway program, \$6 million which was borrowed last year that it could have more money to spend. Well it doesn't like borrowing money evidently, Mr. Speaker. It thought of an easier way to get money, and the

easier way it found after looking around was to get it from the sick. This, Mr. Speaker, is a fine solution to the problem which faced the Government opposite. It needed money, needed \$5 to \$7 million and it thought the only way it could get it and the easiest way it could get it was by putting a tax on the sick. There could have been other ways of economizing, Mr. Speaker, some of us on this side of the House have pointed out that in place of spending like drunken sailors that it could have cut back on some of the programs which it has, that it didn't have to have such a tremendous program for highways. It could have even cut back on some of the waste which it had in Highways and saved the \$5 to \$7 million which it hopes to get from the sick of this province. Just to show its regard for the sick people of this Province, Mr. Speaker, I notice in the Estimates that the Highways capital budget this year is \$42,400,000. Last year's capital budget was \$36 million, Mr. Speaker, an increase from last year to the present year, the one we are in now of \$6,400,000 on highways. It had to get this money somewhere, Mr. Speaker, and it decided that the best way to get it was by putting a tax on the sick. I hope the Minister of Labour, the Minister of Co-operatives (Mr. Coderre), the Minister who just came into the Chamber now, Mr. Speaker, gets up to speak in this debate. He will tell us whether or not he thinks that this increase in highway capital programs was justified at the cost of the sick people of this province.

The Government opposite calls itself a responsible Government. It is not responsible, Mr. Speaker, to increase capital programs in highways as they are today and to get money to pay for this increased capital expenditure, by taxing people who are flat on their back in a hospital. March 1st was indeed a black Friday. This session will be one of the blackest sessions we have ever had. The future of the people of Saskatchewan, Mr. Speaker, is black indeed for a great number of our citizens who are unable to afford this tax on themselves when they are in hospital. I would urge the Members opposite not to just sit in their seats in this important debate, but to get up and tell the people here, tell the people in their constituency whether they are for this deterrent fee or whether they are against this deterrent fee. We know they are going to vote for it, but are they for it actually in their minds. But for goodness sake don't just sit over there like sheep and every time the boss raises his hand or signals that you are supposed to do a certain thing then do it. This is not what you were elected for, you were elected to represent people back in the constituency and you should be representing them in this debate, telling the people of the province, the people in this Legislature what your stand is and what the people back in the constituency think of the efforts of the Government in building highways by taxing sick people in the Province. Well there is no doubt about it, Mr. Speaker, that the people opposite are under attack, under attack first for the tremendous increase in taxes which they have brought about in this province, under attack for taxing all sick people who are in hospital, people who can't fight back, Mr. Speaker, who can't stand up. The people opposite should stand up and tell us what they believe in, whether they are for this tax or against this tax. They should let the people of Saskatchewan know why they are voting for deterrent fees. The Member for Yorkton has said that he believes that this is a responsible Government and because it's responsible he's voting for the deterrent tax. He told us that this tax was necessary to keep the medicare program solvent. Well, those are two very good reasons, Mr. Speaker, but I don't think either one of them is according to the facts. The people opposite, if they are for

April 10, 1968

deterrent fees, should say so. They should get up and tell us whether they are for or against medicare. The people in the constituencies which we represent have told us in no uncertain terms that they are opposed to deterrent fees. I've mentioned that I have all these letters which I hope to present to the House later on as proof that the people of Melfort-Tisdale are opposed to this. But we didn't want to take the words of the people in the constituencies. We could have theorized before you brought in this tax. We should have known by reports which were presented by the Thompson Committee, by the Hall Committee Report, that deterrent fees were not the answer here and that we should not have put them on. But now that we have them you should know that the people back in the constituencies are opposed to the tax, are opposed to what you people have done over there on the other side of the House.

You brought in the greatest tax Budget in the history of Saskatchewan. I have here a list of the taxes which you have brought in, new taxes, increased taxes and of all the taxes which you have brought in, the blackest one here, the most callous is the one of the tax on the sick. A person lying in the hospital bed is asked to provide \$2.50 for each day he spends in the hospital or \$1.50 if he has to visit a doctor. These new taxes, Mr. Speaker, are inexcusable here in Saskatchewan in what the Government opposite calls "most buoyant times." This is the greatest spending Government in the history of Saskatchewan and now I'm suggesting to you, Mr. Speaker, that with this long list of taxes which were brought in along with the tax on the sick, that it is now singing its swan song. Come another four years from now it will be out of office where it deserves to be because of their inhuman, callous treatment of the people of Saskatchewan.

And I might mention, Mr. Speaker, that it has sought money for its spending sprees from those people who are least able to fight back. It has put the 2 cents farm fuel tax on gasoline. The Provincial Treasurer says that this is an equitable tax, that he is only levelling out the tax-load of the people of Saskatchewan. He says the same thing about deterrent fees, Mr. Speaker, deterrent fees on one section of the population alone and that one section of the population is the sick of Saskatchewan, Mr. Speaker. Mr. Speaker, the one group of our citizens who are least able to pay any such tax. This Government in its frenzied effort to raise taxes, to raise more and more taxes, enters the sick room with one hand outstretched. I have already drawn to the attention of the people in this House the fine cartoon which lampoons the Provincial Treasurer for his attitude towards the sick. I'm sure that all Members here have seen the cartoon in the Commonwealth showing the Provincial Treasurer standing in the middle of a sick room with his hand outstretched to a sick person asking for \$2.50 for each day he's in the hospital. In the corridor back in the cartoon, there is the Premier with his hand outstretched to a person on crutches asking for \$2.50 in order that the Government of Saskatchewan can keep up its high level of spending here in the province. Mr. Speaker, we've heard a great deal in the last while emanating from Ottawa regarding a just society. Now these words have a very fine sound, Mr. Speaker. I'm sure the Attorney General (Mr. Heald) understands that just and justice go together. I'm wondering, Mr. Speaker, if the Attorney General thinks that there is justice in this tax on the sick, whether he thinks that this tax on the sick is helping to bring about a just society here in Saskatchewan. The Attorney General who is the supporter of the man who talks about a just society at Ottawa should be speaking up here

in Saskatchewan against an unjust society here, an unjust treatment of the people of the province who are sick.

The tax on the sick, Mr. Speaker, more than any other of the deluge of taxes by this Government has shocked and stunned the people of Saskatchewan. It is contrary to the moral fibre of our way of life, Mr. Speaker. It is contrary to co-op principles which have grown up in this province. Fifty, sixty years ago, pioneers came into this great space which is now Saskatchewan. They settled on farms often far away from their neighbor. And in case of sickness, in case of need, they were the first ones to stretch out their hands to their neighbors and help them whichever way they possibly could. Here what a change, Mr. Speaker, in 1968. The pioneers were willing to help the less fortunate. Those in need received the greatest consideration in time of fire and sickness. Here in Saskatchewan in 1968 a Government opposite says if you are in need, if you are sick, if you go to hospital, you have to pay greater taxes than your neighbor. You have to pay \$2.50 a day for the 30 days which you are in hospital. This tax on the sick, Mr. Speaker, is a new principle to the people of Saskatchewan, a new principle to the co-operatively-minded people of Saskatchewan, to the pioneers who settled this province of ours, Mr. Speaker. The pioneers who settled this province of ours, Mr. Speaker. The pioneers didn't believe that when you were down and out, the person down and out should be hit harder. And this kind of thinking strikes, Mr. Speaker, at the very root of our society.

I mentioned earlier, Mr. Speaker, that the Member from Yorkton (Mr. Gallagher) agreed with the Provincial Treasurer (Mr. Steuart) when he said that this was a responsible Budget. The Provincial Treasurer of course outlined the difficulties he had in balancing his Budget and he too made the statement that this was a responsible Budget. He stated that, if the original requests of all Government departments and agencies had been approved, the Government would be facing a \$61 million deficit. So what's new, Mr. Speaker? Deficits were faced by governments in the past, if they had given into all the requests which have been asked for by various departments. But the Provincial Treasurer says we've cut down from \$61 million, we only need about \$30 million, we weren't able to get it from the taxes which we were able to increase so we had to put a tax on the sick. The former Government the Government of the NDP-CCF, Mr. Speaker, at budgeting time faced requests from departments and agencies considerably in excess of estimated revenue. But at that time that Government took the responsible way out of its dilemma during those years we were in office. We agreed on the revenue we could expect and we fashioned our expenditures to suit that revenue. If we didn't have enough revenue we cut back. We did not put a tax on the sick. That, Mr. Speaker, was the action of a responsible Government, responsible to the people of Saskatchewan. This is certainly not the course of the present Government or the present Provincial Treasurer, who, Mr. Speaker, has been out of his seat for the most part of this day. Many programs submitted to the previous Government at Budget time had merit, Mr. Speaker. We would have liked to proceed with them but our responsibility to the taxpayers and the electors of the province came first. But this present Government has abrogated the responsibility to the people of Saskatchewan. The Provincial Treasurer mentioned the dilemma he was in and said the only way he could get out of it, Mr. Speaker, was by putting a tax on the sick. He increased his revenue over last year, his estimated revenue over last year, by \$32 million. He expects to spend in this coming year \$32 million more than he

April 10, 1968

spent last year. Reducing the estimated expenditures from \$61 million as requested to \$32 million was a 50 per cent decrease, Mr. Speaker, but hardly enough particularly since he had to raise a substantial portion by putting a tax on the sick.

Yet, Mr. Speaker, this Government with its wasteful programs, many wasteful programs, its high expenditures, prides itself on being a business-like government. No wonder the Province is facing a crisis, a financial crisis, Mr. Speaker. This Government seemingly has a mania for spending money, taxpayer's money, money taken from the sick. In the four years which the Government opposite has been in office, expenditures have risen from \$229 million in 1964-65 to \$338 million in this coming year. This is an increase in expenditures of \$109 million in four years. Mr. Speaker, almost 43 per cent in that period, an increase for each year of 11 per cent. Mr. Speaker, unless this Government adopts a more reasonable or more responsible attitude to spending, this Government is on a collision course with disaster. We can't afford this Government much longer, Mr. Speaker, and I would ask the Government opposite to call an election and put their program in front of the people of Saskatchewan. Since their Members are not able to get up in this House and defend themselves in this Budget debate, they should go out in the country and defend their actions before the people of Saskatchewan. We are waiting to hear what the Member for Gravelbourg has to say and it won't be long before he's telling us whether he is for deterrent fees or against deterrent fees, Mr. Deputy Speaker.

And last year, Mr. Speaker, in the year just finished, the Government found itself facing a deficit of \$6.5 million. It didn't put a tax on the sick at that time, it didn't decrease its Budget, it merely borrowed \$6.5 million. But this year it wasn't able to borrow or didn't want to borrow, probably the interest rate was too high, so it had to put a tax on the sick to increase its revenue by the \$5 to \$7 million which it needed. It was able to put a tax on the sick thinking that this would be the easiest way to get the money. It could raise the money for people do become sick, Mr. Speaker, and it would teach the people of Saskatchewan a lesson. If they got sick, they would pay for it. This seems to be the attitude of the people opposite. It made no difference that the people of the province thought that they had paid for their medicare, by paying their medicare premium and other taxes, which they have been paying over the years, Mr. Speaker. The Government has said to the people who are sick that, if you insist on being sick, the Provincial Treasurer says that, if you insist on being sick and go to hospital or to a doctor, you will be taxed for that. Being sick, Mr. Speaker, is fast becoming a luxury. The people of Saskatchewan cannot afford to become sick. The Provincial Treasurer informs the people of Saskatchewan that they have to stay out of hospitals or they will be paying extra taxes to help him increase the programs which he has built up here in the Province of Saskatchewan.

The Premier too, Mr. Speaker, says that deterrent fees should impose no hardships on anyone. I'm glad to see the Premier has finally gotten back into the House, Mr. Speaker.

Some Hon. Members: — Hear, hear!

Mr. Willis: — He says he's not going to be here very long and this we expect. In again, out again. The Premier has said that

a deterrent fee shouldn't impose a hardship on anyone. He says when you are up and around, you can't expect to get by on \$2.50 a day at home. If you go to hospital, then you are just paying what it takes to keep you at home. You are getting a bargain, the Premier says. This certainly will give some comfort to the hospital patient when he considers his position from his hospital bed, Mr. Speaker. There he is lying flat on his back unable to get out of bed and he thinks, "Well all I have to do today is raise \$2.50 to pay for my keep in the hospital." At the same time, Mr. Speaker, he is probably thinking his salary cheque is cut off because he isn't working and he is probably thinking that he has extra bills to pay for the support of his family. They are piling up whether he is in the hospital or not and on top of this he has to worry about finding \$165 in cash providing he is in hospital for 90 days. Very consoling, very comforting, Mr. Speaker, to all but the sick. Surely the Premier can't be serious when he says that this doesn't work a hardship on anyone. Mr. Speaker, I'm sure that this sick person will agree with the Member for Saskatoon Riversdale (Mr. Romanow) who last Friday questioned the priorities of this Government when he said that surely \$5 million could have been cut off highway expenditures by slowing down the program, or better still, Mr. Speaker, by eliminating some of the waste built into the highway program, waste resulting from decisions of this Government, crash programs, etc. that this Government could have done without — \$5 million extra.

This is not a responsible Government, Mr. Speaker. The people of Saskatchewan don't believe it is responsible. The Member for Yorkton (Mr. Gallagher) of course when he rose in his seat last said that it was responsible. He supported deterrent fees. I couldn't help but think, Mr. Speaker, whether or not the Hon. Member was speaking for the members of his constituency or not. I'm sorry he is not in his seat now or I would have asked him that question, whether he was speaking for his constituents or whether he was speaking for himself or whether he was speaking for the boss. I sort of think that he was probably speaking for the boss. For surely his constituents are no different than mine, surely his constituents are against taxes on the sick. Why don't we hear from more of the Members opposite. We haven't heard yet from the Member for Saskatoon Nutana Centre (Mr. Estey). He certainly has a number of people in his constituency who are sick, probably in the hospital now, probably people who will be in the hospital before long, people who are concerned about the plight they find themselves in when they are sick? I must say again I'm very pleased the Member from Gravelbourg (Mr. Coderre) is going to rise and speak. I only wish that the Member for Moosomin (Mr. Gardner) would follow his example. Probably he will once the Member for Gravelbourg has broken the ice. We might have more people on the other side of the Chamber, Mr. Speaker, getting up in this debate and telling us whether they are for deterrent fees, whether they are opposed to deterrent fees, whether their constituents are for deterrent fees, whether their constituents are against deterrent fees. The people opposite were elected to represent the people in their constituencies. They were not elected, Mr. Speaker, as rubber stamps for an irresponsible Government.

Some Hon. Members: — Hear, hear!

Mr. Willis: — And as I mentioned, the Member for Yorkton (Mr. Gallagher) defended deterrent fees. I imagine the Member for Gravelbourg (Mr. Coderre) will do so too here in the Chamber,

April 10, 1968

whether he will back in his constituency or not, Mr. Speaker. At least the people back in the constituency of Yorkton know where their Member stands. But to date, not many people represented by people opposite know where their Member stands. They know where they sit. They are very good at sitting, and they are very good at walking out of the Chamber. There are about 12 in the Chamber now, Mr. Speaker. I don't blame them for leaving when I'm speaking, but at least they could have shown interest in this debate by sitting in their seats by not moving out of the Chamber here. And the people back home deserve to know where their Member stands or where their Member sits. They should speak in the places where they are sitting. If this Government believes it is being responsible, it should have told the people, Mr. Speaker, prior to October 11th what they could expect after October 11th. It didn't do so. At no time did we hear that deterrent fees would be imposed, before October 11th. The Government knew full well that if it returned to power there would be deterrent fees put on. Even in the boom period prior to October 11, there was no mention of deterrent fees. Mr. Speaker, this is an irresponsible Government sitting to your right. But those Members who have spoken so far, the Member for Yorkton (Mr. Gallagher), the Member for Cannington (Mr. Weatherald), the Member for Maple Creek (Mr. Cameron), since these people have performed their duties, and since they are out of the Chamber, and since they are finished with this debate, have the right probably to be out of this Chamber. But there are quite a number of people who are out of the Chamber this afternoon who haven't spoken in this debate yet. I can't urge the them to speak, but I can urge the ones who are sitting in the Chamber now to speak on this debate and say just where they stand so that their people back home would know just what their attitude is towards this deterrent charge.

Mr. Speaker, the Member for Yorkton (Mr. Gallaher) also went on and said that the Government by being responsible is only ensuring the solvency of our health program. Now, Mr. Speaker, no statement is farther from the truth. The Government has no intention of ensuring the solvency of health programs. The Government when in Opposition opposed medicare and this Government now at the present time is taking steps to discredit hospitalization and medicare programs. Four or five, six or seven years ago, KOD were popular initials around the province. At that time KOD meant "Keep our doctors." Now KOD has become popular again, Mr. Speaker, KOD with a little different inflection this time, KOD meaning not keep our doctors but "Keep out deterrents." This is a cry which we hear all through the province from the people who have elected us. I'm sure the Members opposite have heard this too, Mr. Speaker.

I'm certain that the Member for Last Mountain (Mr. MacLennan) will get up in his place sometime before this debate is over, Mr. Speaker, and tell us his stand on this, whether or not the people back in his constituency are for deterrent fees or against deterrent fees.

Mr. D.G. MacLennan (Last Mountain): — They are all for them George, they are all for them.

Hon. D.G. Steuart (Provincial Treasurer): — He's for them.

Mr. Willis: — Well, if you are for them,

you should have the courage to get up and say so, so that you'll be quoted in the paper, so that the people back home would know. The Provincial Treasurer of course has already said he was for them. He imposed them.

Mr. Steuart: — If we put them on mental sickness, you're in trouble, George.

Mr. Willis: — Well, Mr. Speaker, when the Federal Government brought about or brought in legislation claiming that it was going to put into effect medicare by July 1st, this year, it was ensuring the solvency of our medicare program. At least the people in the Province of Saskatchewan thought it was ensuring the solvency of our programs. The Federal Government will be paying this Government \$10,900,000 come July 1st and the people of Saskatchewan thought and had every right to think that this \$10 million, almost \$11 million, Mr. Speaker, would be paid over to medicare, it would help to ensure the solvency of our medicare program. But in place of that, what happened? This \$10,900,000 comes into the hands of the Provincial Treasurer and what does he use it for — for medicare? Oh, no, Mr. Speaker, he doesn't use it for medicare, he uses it to build roads evidently; he uses it to finance liquid refreshments at Government functions probably. He uses it to operate executive airplanes, Mr. Speaker, but the people of the province had thought that this \$10,900,000 would have been used to ensure the solvency of our medicare programs. They did not anticipate that the Government would be using this money other than what it was intended for. The people of the province had expected medicare fees would come down, not up, and I'm sure, Mr. Speaker, that the Prime Minister of our country probably thinks the same thing. The people at Ottawa will be very much disappointed if they ever find out that the Government opposite is going to use \$10,900,000 paid over because Saskatchewan has a medicare plan, to build roads, to finance liquid refreshments at cocktail parties, to finance airplanes, executive airplanes. I'm sure the people at Ottawa will take a dim view of this, Mr. Speaker. The people of Saskatchewan expected that there would be no deterrent fees, that there would be no tax on the sick. They expected this, first, because there was no mention by the Government as to deterrent fees before October 11th last year and secondly, because the Federal Government is coming in on July 1st with a Federal program.

The people of my area as I mentioned, Mr. Speaker, oppose tax on the sick and, as I mentioned, I have all these letters here which I hope to read before the afternoon is over or before the day is done, to put on the records the feelings of the people of Melfort-Tisdale in regard to what this Government has done. And I'm sure that the people of Melfort-Tisdale are not telling the Government of Saskatchewan that it is a responsible Government. In fact many of these letters say to the Government of Saskatchewan that they want me to tell the Government of Saskatchewan that this \$10,900,000 which has come from the Federal Government should have been used to lower medicare and hospitalization fees, not increase them.

Some Hon. Members: — Hear, hear!

Mr. Willis: — I've mentioned many times, Mr. Speaker, that the people of the province should know the stand taken by their Members on

April 10, 1968

this question. I'm glad to see that the Minister of Highways (Mr. Boldt), the Member for Rosthern, who has just come in is leaving now. Perhaps I could ask him if he is going to take part in this debate before it is over, Mr. Speaker, whether he is going to let the people here know what stand his people take. Oh, it's too late, Mr. Speaker, he's out the door.

Some Hon. Members: — Hear, hear!

Mr. Willis: — The other people opposite should take advantage of the opportunity sometime in this debate, whether it is today, tomorrow, Friday, or Saturday, or next Monday, to get up and tell whether or not they are in favor of the taxes on the sick. If you are, say so, whether or not you are opposed to the taxes on the sick. If you are opposed say so. Get up and say whether you are for medicare. Get up and say whether you are for hospitalization, whether you oppose medicare or whether you oppose hospitalization. You should also state whether you are in favor of the \$10,900,000 federal payment being used to pay medicare and hospital commitments. If you believe this, you should say so, so that the Provincial Treasurer can hear you. If you are not in favor of this, if you are in favor of the Federal payment for medicare being used to build roads, then say so. I'm sure the Minister of Highways (Mr. Boldt) who has left the Chamber would be glad of your support.

I haven't gotten around yet, Mr. Speaker, to start in on these letters which have come from my constituency and I must do so before the afternoon wears away because I have quite a bundle here.

The Members opposite, Mr. Speaker, instead of taking the opportunity to inform the House and through the House their electors back in their constituencies of their stand on these important questions, either sit quietly in their seats or sit yapping in their seats or are out of the Chamber. This is certainly not being responsible Members, Mr. Speaker. You can't get away with this so easily. You can't get away from your responsibilities as Members. As Members of this Legislature it is your responsibility to state your position on these various matters, not only for the edification of the Government, for the edification of the Provincial Treasurer (Mr. Steuart) as he would certainly like to know just what your feelings are. I am sure that he will come back into the House one of these times. You will be able to talk when he is here, and I am sure that, if he knows that any of you Members are talking, he would certainly be around to listen, particularly if you were going to tell the truth about the way your constituents feel about medicare. You should face up to your responsibilities and explain why deterrent fees are imposed on the sick, by this Government. And your explanations had better be good, Messrs. Members, as four years pass very quickly.

I found it exceedingly difficult, Mr. Speaker, to follow the reasoning of the Provincial Treasurer when he presented his Budget on March 1st, on Black Friday. On page 29 of his Budget Speech he listed the overall cost of the Government's health programs — and he mentioned Saskatchewan Hospital Services Program and Medical Care Program, Mental Health, additional amount for the Frazier Report recommendations, hospital building, pension funds, other health-spending programs, capital works budget for health. He listed all of these and gave a figure for each one of them and he said:

I would ask Hon. Member to note that the total cost for these programs in this coming year will be up by \$16.8 million over the current fiscal year.

Up \$16.8 million over the current fiscal year, Mr. Speaker!

He intimated that we can't afford this increase. Well, Mr. Speaker, since 1947 we afforded a hospitalization program in this province under the so-called stagnation days of the former Government. We were able to afford it at that time and we were able to afford a Medical Care Program under the former Government. But now we seemingly can't afford these health programs under this private enterprise Government which we have opposite.

We instituted taxes on all the people. All the people paid when they were well, Mr. Speaker, so that they could receive services when they were sick. I would also quote that this sentiment is expressed in the annual report of the Department of Health. They have almost the same sentiment in their report of the year ending March 31, 1967. They discuss the Hospital Insurance Program on page 68 and they say:

The purpose of the program is to spread the total cost of hospital care over all of the population of the province, in order that care may be provided on the basis of medical necessity and not be affected by the individual's ability to pay for the care.

This is what they say in their report which was sent around to our addresses before the House met. Since the House met the Provincial Treasurer says we can't afford to become sick, and if they do become sick then individuals must pay an increased amount. I find it difficult to follow the reasoning of the Treasurer when he presented his Budget here, Mr. Speaker.

The people of the province under the former Government had no objections to the premium fees or the increase in education or hospital taxes imposed back in 1961. They knew that they were getting value for their money, Mr. Speaker. They knew they were getting security and had a feeling of being one of a team. But this year, 1968, the cost of our health programs listed on page 29, of the Budget Speech by the Provincial Treasurer increased some \$16.8 million according to him. Yet later on in the same speech, the Provincial Treasurer says that the Government received some \$10.9 million from Federal Government. At the same time the Provincial Treasurer announces that he was imposing, or re-imposing rather, the one per cent on education and hospital tax which the CCF-NDP originally put on to pay for medicare.

The total five per cent educational-hospitalization tax, Mr. Speaker, will raise as estimated over \$65 million in the coming year. This means that the one per cent increase for medicare and hospitalization will bring in \$13 million. An extra \$13 million in this education-hospitalization tax, plus the \$10.9 million which the Government received from the Federal Government, means that this Government will receive from these two items alone \$23.9 million, Mr. Speaker. Our total health plan, and not just these two of medicare and hospitalization, the Provincial Treasurer tells us, will increase in cost in the coming year only \$16.8 million. Surely, Mr. Speaker, this proves that deterrent fees are not necessary. This proves that the Government has used taxes on the sick, first to finance

April 10, 1968

other programs or second to discredit our hospitalization and medicare programs. By re-imposing the one per cent sales tax which was put on originally for medicare, along with the Federal payment of \$10.9 million, this Government will receive, Mr. Speaker, \$7 million more than the estimated increased cost in our total health plan for this year. From this, Mr. Speaker, it is apparent that this Government could, and this Government should have reduced medicare premiums. But no! In place of reducing it chose to consider the sick as a source of extra revenue to finance their extravagance and inefficiency in government.

To make matters even worse, Mr. Speaker, this Government talks and the Provincial Treasurer in particular, about the sky-rocketing health costs, in order to generate fear in the minds of people in the province that they can't afford medicare and hospitalization.

This year, the Provincial Treasurer says medicare and hospitalization will cost \$105 million. "But the worst is yet to come," he warned. "We can expect that the cost of these two programs alone," he tells us, "will total \$200 million in seven years." "Imagine," he says, "only two programs in one Department costing the people of Saskatchewan over \$200 million."

We agree, Mr. Speaker, if costs of medicare and hospitalization go up so drastically that it will work a hardship on the people of Saskatchewan. But I say that if it is inevitable that costs have to increase, it is better that all the people carry the burden rather than this load be placed only on the backs of the sick.

Some Hon. Members: — Hear, hear!

Mr. Willis: — I would say further, Mr. Speaker, that the co-operatively minded people of Saskatchewan are not to be deterred from sharing each others burden just because rich provinces like Alberta and Ontario are extremely reluctant to institute comprehensive medical care coverage, as the Provincial Treasurer (Mr. Steuart) declares. Further, Mr. Speaker, it is our belief that these costs, these sky-rocketing costs, can be controlled.

Hon. A.R. Guy (Athabasca): — Save your breath. No press, George!

Mr. Willis: — The Minister of Public Works, Mr. Speaker, evidently feels a speech coming on. He is beginning to talk. We can anticipate that sometime in this debate, sometime today or tomorrow or Friday, or Saturday, or next Monday, that he will be speaking in this debate. But in the meantime, if he would turn the fan on I would certainly appreciate it, Mr. Speaker. It is getting very, very warm in this Chamber and there is no doubt that the Department of Public Works has some measure of responsibility for what happens in this Chamber. This is one of the things that it should be doing — controlling the thermostat. And if you haven't, Mr. Minister, get someone in your Department who goes around checking the thermostats regularly, I would suggest that you could go and do that little duty right now.

Some Hon. Members: — Hear, hear!

Mr. Willis: — But in the meantime if you

work on your speech, we will be pleased to listen to it sometime when you get up to tell the people of Saskatchewan how you feel about deterrent fees.

As I was saying, Mr. Speaker, it is our belief that medicare and hospitalization costs can be controlled. Of the many means that can be followed to control costs of these programs, in our opinion the least likely of success is that of taxing the sick. If there are abuses, and the Minister of Health (Mr. Grant) speaks of abuses — I am sorry that he too has found it necessary to be out of the Chamber this afternoon. Perhaps the climate is a little bit too warm for some of the older Members, Mr. Minister. I know that I am beginning to feel the effects of the heat in here myself.

The Minister of Health, when he introduced this amendment on this Bill, talked about the great abuse of health privileges as occurring in the use of hospital services. I would remind the Minister and the Government, Mr. Speaker, that sick people do not decide whether or not they go to hospital. They don't decide how long they stay in hospital. They don't decide when they leave hospital. If there are abuses here — and we will have to take the Minister's word for it that there are — then the Minister should have consulted with the College of Physicians and Surgeons and worked out ways and means of controlling such abuses, if such abuses exist. This should be done, Mr. Speaker, in preference to taxing the sick. Imagine the situation where, Mr. Speaker, a person doesn't feel well, perhaps the room is too hot or something. If he is able he consults his doctor and the doctor after examining him says, "I am sorry you are sick. You should go to the hospital." And the patient follows his doctor's advice. And then immediately the Government steps in and puts a deterrent fee on him. He is in the hospital and the Government says to him, "You owe us \$2.50." It tries to keep the patient out of the hospital by taxing him after he gets in. It says in effect to the patient, "Your doctor is wrong. Don't go to the hospital. Don't stay in the hospital." By imposing deterrent fees on doctor's services it says in effect, "Don't go to your doctor."

Mr. Speaker, this is not the way to control costs of these two programs. For people do get sick and when they do they should get the best hospital care, so that they are back on their feet as soon as possible. They should get this without the extra worry of meeting extra taxes when they are sick. It seems to me, Mr. Speaker, that taxes on the sick are deterrent fees in reverse. Has it ever occurred, I wonder, to this Government that if deterrent fees are to work, it would be better to put the deterrent fees on the doctor? Some countries, I have heard, have a scheme whereby doctors are given responsibility for keeping people well. And the doctors would be paid a basic payment for each individual as long as those in their care are well. But if a person were sick or hospitalized the payment to the doctor would cease until the patients were well again. Now perhaps this scheme has faults, Mr. Speaker, and couldn't be adopted, but it makes more sense than taxing a person when he is sick and least able to pay.

Some Hon. Members: — Hear, hear!

Mr. Willis: — Perhaps a better way or better plan, would be to make visits to the doctor compulsory every six months or at least once a year. Such checks would undoubtedly uncover many

April 10, 1968

illnesses which later on become serious and costly. This would tend to keep down over-utilization and then would benefit not only the plan but the individual as well. But surely, Mr. Speaker, some better way can be found to keep down costs than by making it compulsory for a sick person to pay an extra tax. Yet the Minister says that it is a token payment only, to remind the user that a substantially larger amount comes out of the Provincial coffers. Very thoughtful, Mr. Speaker, very thoughtful. The sick person should be grateful to be reminded that the insurance scheme which he has already paid the premium on is helping to pay his time in hospital.

Just what does the Minister expect a sick person in hospital to do in this regard, Mr. Speaker? Does he think that worrying over \$2.50 a day will get him home earlier? Or does he think that knowing that he may be liable for an extra \$2.50 a day, will keep him well and therefore keep him out of hospital? What kind of a person is this Minister of Health (Mr. Grant)? I see he is back in his seat. I can now ask him the questions and I can look across and see what kind of a person this Minister of Health is who thinks that the people of Saskatchewan adopt the attitude of "I pay my share so I'll make sure I'll get my money's worth."

Imagine a well person complaining about some fictitious ailment just so he could be admitted to hospital, Mr. Speaker. I want to be among those who censure the Minister for such an assessment of the people of Saskatchewan. But even if this were so, even if his assessment of the people of Saskatchewan were true, Mr. Speaker, this tax on the sick would not keep people out of the hospital according to the Premier. The Premier stated that a person couldn't keep himself at home with \$2.50 a day. So this isn't going to deter anyone. If he can get by as cheaply in the hospital as at home, then he will probably go to the hospital, according to the Premier. Imagine, Mr. Speaker, a hospital being used as a sort of honeymoon hotel.

Let us admit that this is not a deterrent. Let us admit that what this really is is a tax on the sick, a callous, hardened attempt by a hard-pressed, inefficient Provincial Treasurer to increase revenue. This, Mr. Speaker, is part of the payment that the people of Saskatchewan must pay for the luxury of having a Liberal Government.

Some Hon. Members: — Hear, hear!

Mr. Willis: — Of course, the ultimate aim is so to discredit medicare and hospitalization that these programs can be abandoned as a Government program. That this Government is opposed to medicare and hospitalization can be read in the statement by the Minister of Health (Mr. Grant) when he said last March 14th:

Whenever a government undertakes to assume responsibility for providing a service for people, abuses and over-use seem to be almost automatic.

A revealing statement, Mr. Speaker. If our Government's hospital plan is being abused or misused, then the Government must find ways of controlling these abuses. I must stress again, Mr. Speaker, that you can't control abuses of this plan by taxing the sick. People who are sick are not abusing or misusing medicare and hospitalization. It is their right to use these services. They pay their premiums and they pay their taxes.

When they are sick and forced to use these services, then they shouldn't be taxed extra. We ask this Government; who requested deterrent fees? We haven't been told yet of anyone requesting deterrent fees. Doctors were seemingly surprised and also disappointed at the announcement of deterrent fees. Hospital officials were not in favor of the tax on the sick. Never has there been such an outcry from all parts of Saskatchewan and all the people of Saskatchewan, as there has been in the last few weeks. I am certain that the people in Rosthern too are opposed to this tax on the sick. The Minister will be up on his feet before too long, and he will be able to tell us whether or not his people are for or against this deterrent fees. It is quite likely too that the eloquent Minister from Milestone (Mr. MacDonald) will give us a few words about his constituents' feelings . . .

Some Hon. Members: — Hear, hear!

Mr. Willis: — and about his own and whether the two jibe or not; whether he agrees with his people or whether he is opposed to the thinking of his people. It is certain, Mr. Speaker, that the ordinary people of Saskatchewan didn't request this inhuman, callous tax. The only people who support this measure are the Liberal Government opposite and maybe the smug minority who support them. The Government decided to raise revenue, to support their programs by taxing the sick. It is responsible. Did it want to improve our Hospitalization Plan, Mr. Speaker? Did it wish to improve our Medicare Plan by imposing deterrent fees? The answer is no. Decidedly not! This tax on the sick is not an improvement. It is not a betterment. It is a callous calculation designed for one main purpose. The sick are being taxed in order to bail this Government out of its tax difficulties. There is a subsidiary reason, Mr. Speaker, namely, to discredit medicare and hospitalization, so that the people will rise up in their anger and demand that we follow the lead of Ontario and Alberta and decide that the public health care is too expensive and too difficult for government administration.

Well, Mr. Speaker, the people are angry. The people will be rising up and the people will be telling this Government that they are not opposed to medicare and hospitalization, but that they do oppose the action of this Government in placing deterrent fees on sick people. When that time comes, Mr. Speaker, as I predicted earlier, the people opposite will find themselves down in that gallery of the ghosts, among the ghosts past, and those who are left will find themselves on this side of the House.

The Liberals in this province, Mr. Speaker, don't like medicare and they don't like hospitalization programs. They don't like public health programs. They have no use for a just society. It is against their independent sector or their smug minority theory of leaving each individual to fight his battles alone, and the private independent wealthy sector or the smug minority, will take care of the stragglers. Mr. Speaker, this tax on the sick is indeed an attack on medicare and hospitalization and should be condemned by the people of this province.

Now, Mr. Speaker, I come to the basket which I have in front of me here. It contains a large number of letters. I hope to read them because they were sent to me with the intention of bringing them to the notice of the Government opposite, that there are people in my constituency as you can see, a large number of people in my constituency who oppose this tax on the

April 10, 1968

sick. I am sure if I just sent these over to the Provincial Treasurer or to the Premier, that they would end up where all such letters end up, not in a basket like this where they are saved, but in the paper basket where they are taken and dumped out. Perhaps reading them into the records of the House will have some effect on the Government opposite. I have one here from Tisdale:

Please bring to the attention of the Liberal party . . .

I won't read the first part as it would take too long to read everything that it says here, but it has my name, date, Tisdale, Saskatchewan, and it says:

Dear Mr. Willis:

Evidently from a constituent that thinks highly of me.

Some Hon. Members: — Hear, hear!

Mr. I.H. MacDougall (Souris-Estevan): — He should be here this afternoon. He would go home and throw up.

Mr. Willis: — I didn't hear what the Member for Souris-Estevan said. But I am sure if he said that he was going to speak on this debate, then we will all be anxious to hear what he has to say. He will have time either tomorrow, Friday or Saturday or next Monday, to say something in this debate. And it wouldn't be because we want to close off this debate. We want everyone in the House to have an opportunity to say what they think about the action of the Government opposite in putting taxes on the sick. Getting on with this letter, it says:

Please bring to the attention of the Liberal Government in Regina that we object very strongly to the introduction of deterrent fees. This is another case of taxing the least able to pay, namely, the sick. And certainly the vast majority of aged, who through no fault of their own, are unable to pay deterrent fees. We were happy with the Medical Care Plan as it was. If this is the best that the Liberals can do, they should resign.

So say we all!

Some Hon. Members: — Hear, hear!

Mr. Guy: — I wonder if he would table the letter or at least give us the name of the writer.

Mr. Willis: — The letter is tabled. And now I have another one from Runciman. This is a copy to me. The person sent a copy of the letter to Mr. Thatcher and a copy to me.

Dear Mr. Thatcher:

They evidently don't know Mr. Thatcher.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

It is with a feeling of unbelief that we have heard your Government's announcement that deterrent fees are to be levied against the sick. We felt that things like this only happened to places behind the Iron Curtain, not in Saskatchewan, which has led this continent in care of the sick. This municipality of Connaught was blessed with municipal health services long before any government could be moved to take steps to protect our sick. Now with one foul blow your Government have moved to destroy all that has been achieved. This can only add to the fear of your Government and smear the reputation of Saskatchewan.

Some Hon. Members: — Hear, hear!

Mr. Willis: — Another one from my constituency:

We would like to ask you on our behalf to protest the deterrent fees that the Liberal Government has added, also the tax increase on gasoline, etc.

And it doesn't mention the ones that are included in that 'etc.,' but if the Members want information I have a list of the etc's., here, I could give it to the House. If you don't want to have these tabled it's okay with me but they are all available for tabling. Another one from Melfort:

Just a reply to all the critics of the NDP. Well, Mr. Willis, I am a war veteran and a married man with three children and a wife at home. I was in the army a number of years. I served in Canada and also overseas and have been sick a lot and living on pills which don't help anymore. I sure need to have some medical care. I myself get coverage through DVA at Saskatoon but the wife and children have to get their MSI cards and also their hospital cards for the year and also pay for their pills. The allowance I receive is war veterans' allowance and this is \$245 a month. I sure can't live on this amount with the price of food, clothes and the cost of pills. I am sending you some papers of my army history and also a letter which I received.

I have returned those papers. This letter is available for tabling. Another letter from Melfort from the Pioneer Lodge:

Just a few lines. I very much object to act on just deterrent fees. I know for myself I would not be able to meet it without help as my pension has to meet other expenses.

Now that is part of the letter. Another letter from a young person. It says:

Mr. Willis, I am young but I still can see when a person has had enough and it is more than enough without this new tax when we are sick. Down the drain with the deterrent tax on the sick.

And another letter from Ridgedale this time:

I am a teenager and still in high school but listen and

April 10, 1968

take an interest in politics, etc., at times. So I would like to send in my objection to the new tax on the sick. I think the deterrent fees to be charged soon is ridiculous, I think something else could have been done.

Some Hon. Members: — Hear, hear!

Mr. Willis: — And another, a grade 12 student:

My personal opinion of the deterrent fees is that it is unjust and plain terrible. After having fought for the new Medicare Plan to be brought into effect and finally getting it we are now confronted with this fee. It is not right, we are supposed to be living in a democratic country.

So says a grade 12 student.

I am pleased to have this opportunity to express my opinion in regard to deterrent fees which will be imposed on the sick of Saskatchewan when the new legislation becomes effective. My first objection is that in many cases deterrent fees prevent people in the low income bracket from calling the doctor when it is necessary. This legislation . . .

Mr. Coderre: — We have noticed in this letter it says when this legislation comes into effect. It shows the inadequacy and the inability of the Opposition . . .

Mr. Willis: — Has the Member started on his speech already, Mr. Speaker? If that's the extent of the speech I'll have to say we expected more.

Mr. Speaker: — I shan't consider that the Member has spoken.

Mr. Willis: — In getting back to this letter from Tisdale:

. . . also implies that doctors have been admitting patients to the hospital on the basis of availability of accommodation rather than the urgency of their medical needs. This utilization fee discriminates against those who are in need of medical assistance more often than those who are not in need of it.

Is another person making a speech?

Mr. J. Charlebois (Saskatoon City Park-University): — I am having difficulty listening.

Mr. Willis: — Then another letter:

It is a sad day for the people of Saskatchewan who have heard about all the new taxes we are to have to pay for what. I almost feel like the over 20 years I worked to make the hospital medicare plan be a success will be given a death blow. Surely the people of Saskatchewan

won't stand by and let a hoax of a Government defeat the purpose of what it was intended for.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

I would like to send this letter of objection to remove the tax from our hospitalization. I am writing to protest against deterrent fees put on recently by this Government. My husband has been ill a lot the last few years and apart from hospital bills there would be now drugs, too, have been terrific. He is nearly 78 years of age and is in the geriatric centre at this time. I have been fortunate as it has been 32 years since I was in hospital and only for three days.

But this person expects that because of her age that she will be using hospital services and she protests.

Referring to the new deterrent tax fee, I don't like it . . .

says this teenager:

. . . taxes are high enough without being taxed when you are sick.

And another letter:

The new tax on the sick is outrageous. We have shaken hands with the depression for the last four years but now we are shoulder deep and even more. Can't the Liberal Government do anything else but tax, tax, tax, tax?

Some Hon. Members: — Hear, hear!

Mr. Willis: — Then another letter protesting deterrent fees:

Instead of going ahead for a new Saskatchewan, we are going backwards with the new Saskatchewan. Saskatchewan has been a leader in so many things under the CCF now it is all being destroyed by the Liberals. My object in writing you is to protest against introduction of deterrent fees. I am concerned with the new tax for the sick. If you have to pay for the stay in hospital I figure they can soon close all hospitals.

I want to ask the Minister if this was its intention. Does it want to do away with people going to hospitals so that it can close these hospitals? When he closes the debate I would like to have some comment, I am sure this person would like to have some comment on this too.

I would like to strongly protest these deterrent fees the Government is imposing on Saskatchewan people. The serious effect of this will of course be felt by the low-income brackets who with the constant rising cost of living cannot possibly afford this added expenditure.

Then in another letter:

What does the Government hope to gain by these deterrent

April 10, 1968

fees? Those who manage to scrape by and pay their own way are again being doubly punished. They must pay their own plus those who aren't able to. This letter is to protest the so-called deterrent fee. The only people to be affected by these charges are the people who are the least able to pay. We were told that a new Saskatchewan would be brought in here. I think it is daylight robbery and should never be allowed. We have had medical and hospital care for the past years which I understand they still made a profit. All they are trying to do is put us smaller operators out of business.

I am writing you with regard to these . . .

And the word is a three lettered word starting with "d", Mr. Speaker.

. . . deterrent fees which our present Government are working at. I think it is too bad they got in such a predicament after being in power so short a time that they now have to stoop so low as to tax the sick when they are down on their backs in hospital. These unjust deterrent fees have had a great bearing on my postponement of major surgery in University Hospital in Saskatoon until last fall, when we hope to have a better crop. As you know farming conditions are very grim, no quota since the first of January, 1968. Poor crop in 1967, wheat payments over two months later than last year. A sour situation, a black Friday, indeed.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

A few lines to protest against these tax increases, especially the deterrent fees. This is to inform you that I am against the \$2.50 being charged for hospital treatment. We are farmers and taxpayers and with all the extra taxes that have been added recently, after all the pre-election promises our taxes would not go up, and above all our hospitalization and medicare would remain the same or go down. They not only put the premiums up, they added deterrent fees which we feel is most unfair. Both myself and my wife are objecting to deterrent fees. The Liberal Government say when you ask for service you have to pay for them. We say you can keep the homeowner grant, we never asked for that bait.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

I am a person with a son five years old with sugar diabetes. He has spent considerable time in the hospital as he continues to grow requiring changes in diet and medication. These utilization fees as instituted would cost us approximately \$200 a year for medical attention.

Just a line in protest of the legislation recently passed in Regina. We all call March 1st Black Friday. Sorry to be only one name in this letter, but even one may help. If you have 99 it will make 100. I have given your address to some of my neighbors that didn't have it and want to send something in to you themselves. They

all object to deterrent fees. It is a most unfair thing as it hits the old, the very young and the sick the most.

We feel the medicare program introduced in 1962 to Saskatchewan people is slowly being demolished and trust that you along with fellow NDP Members of the Legislature will oppose the introduction of deterrent fees on hospital and medicare. Surely of all the tax increases they can leave our medicare program as it was. I strongly object to these deterrent fees our Saskatchewan Government is taxing Saskatchewan people with. It is unjust, etc.

I am a farmer in the Sylvania district and I am certainly against deterrent fees and the tax on gas added on by the Liberals. I would like to say that these fees and taxes are not a necessity. Regarding Black Friday concerning deterrent fees and utilization of hospital fees that the Government has loaded us down with, we are not in favor of these fees.

A long time no see . . .

He's a friend of mine.

I have just received a letter asking me to write my opinion about deterrent fees legislation. I am very much opposed to them. It places a heavy burden on those least able to bear them and because they are not necessary. The CCF would have provided funds if necessary some other way.

I am a neighbor in Tisdale, and I am against these deterrent fees and tax on gasoline put on by the Liberals. It is especially hard on those who use their cars as part of their job. It is my sincere wish that the Government will consider these unfortunate people, the sick, and do not put a tax on medicine and hospitalization. I am very disgusted with our Provincial Government with their introduction of the unjust deterrent fee. In regards to the \$2.50 per day for anyone going to hospital, old age pensioners or people who are on social aid, they cannot afford to pay \$2.50 per day. No one goes to hospital unless the doctor thinks that they are sick enough so what are the Liberals thinking about. Are they trying to get rid of the old folks and social aid people by keep them out of the hospital?

I would like to write a few lines to enforce my opinion on new deterrent fees the Government is imposing on those who are unlucky enough to have to go to the hospital or visit a doctor. I am sure you, Mr. Willis, as our representative, will not be in favor of this action.

And I want to assure the people of this House that I am not in favor and I would like to know just what the opinion of the various Members opposite is before this debate is over. I hope that they all take the opportunity to get up and say whether or not they are in favor of these deterrent fees. Oh, this is a long one. There are four or five pages here. It's lucky I started to put that one down. I remember that was a very hot letter. In a letter accompanying a homeowner grant, this person says:

Mr. Thatcher said the grant was made possible by the

April 10, 1968

increase in revenue from expanding industry. If this was so why were the increase in taxes warranted especially deterrent fees?

I should send this one over to the Provincial Treasurer (Mr. Steuart) — I see he is in his seat — and have him answer it personally.

I am very much against deterrent fees for hospital care and to visit the doctor. As a mother of six children this could run into a vast amount of money as a year passes. When children go to school they are always getting hurt or catching diseases.

I am sure that the people opposite would say that the solution to this person's problem is to see that her children do not go to school.

As a citizen of the Province of Saskatchewan I am disgusted with the unjust tax levied by our money-grabbing Provincial Government. The deterrent fees will be paid by those most unable to do so, the middle class, low-income bracket class, old age pensioners and those on welfare. Why charge us twice. One more cent tax on your dollar plus the deterrent fee. Let us stamp out this injustice to the few and let us take more and more from the rich. Then and then only will co-operation take place.

And then here is a petition signed by 20 names:

We the undersigned wish to direct a strong protest against the proposed hospital and deterrent fees.

And that is part of a group of letters that I have.

An Hon. Member: — Do you need a basket, George?

Mr. Willis: — This one is from Tisdale:

We attack the tax on the sick. We strongly protest this action by the Government. They have no feeling for the sick. It is going to be quite a change. Before we had no worry about having to pay when we were sick. It's just like using the farmers who are helping them, they tax them a little more. I hope this will wake up those who voted for the Liberals.

As I mentioned earlier, if this Government had the courage of its convictions and wanted to call an election, I am sure that it would find out that the majority of the people in the province are opposed to this Government and its actions in taxing the sick, especially.

I am ready to object about your introduction of the unjust deterrent fees. I am ready to express my opposition against deterrent fees or taxing the sick. I feel the Liberals are trying to undermine the medical insurance scheme. I object to this taxing of the sick because it will keep people who are very sick from going to the doctor. Please do all you can do help rid the sick and the aged of these unfair taxes.

I wish to protest against deterrent fees or utilization

fees imposed upon the people of Saskatchewan by the present Government. They are both cruel and unjust and especially so to the aged who are dependent upon their old age pension.

Is the Member for Souris-Estevan (Mr. MacDougall) wanting to make a speech? He's making the speech he usually does, in his seat. Now you'll have an opportunity soon, because I can assure you I won't be here much longer, about another hour and a half and we should be finished here.

It is my sincere wish that the Government will reconsider these unfortunate people, the sick and the old who have not enough means to carry on with. We'd like to add our voice to the many who feel the injustice of the deterrent fees that are levied. I'm writing this letter to protest against the \$2.50 per day deterrent fee. This is a protest in regard to the deterrent fees. We are sure not happy about your deterrent fees.

Your deterrent fees? I'll have to write this person and tell him I'm not responsible for this.

Because we are satisfied with our own wonderful medicare plan so why should the Government change it for us. I wish to add my letter to the hundreds you have undoubtedly received asking you to protest deterrent fees imposed upon us by the Liberal Government. I wish to inform you of my disdain for the imposition of deterrent fees as placed on us by Premier Thatcher. I object to the introduction of the unjust deterrent fees. I strongly object to the imposition.

And here is one with a little different angle from Tisdale:

The enclosed letter from the Star Phoenix draws attention to the problem that has been troubling me. Surely deterrent fees are not legal.

The letter from the Star Phoenix is from a person in the western part of the province. The letter says:

I must respectfully submit that the present Liberal Government is guilty of breach of contract. When the people of Saskatchewan paid their medical premiums last November, they made a contract with their Government ensuring that the expenses for the illnesses in the 12 months to come would be paid. Any individual who breaks faith with any other member of our society or with the Government itself, leaves himself open to legal action. How then can our Government justify this breach of contract? I'm writing this letter in protest of the \$2.50 per day to be put on everyone staying in the hospital. Both me and my wife are old age pensioners. At our age our health is not the best. We need medical checkups quite often. We therefore object to the unjust deterrent fees which the present Government has placed on the people of Saskatchewan. I just can't help but write to express my opinion on taxes just introduced, just what has happened to Saskatchewan. To me it seems like a big storm has hit and it is hopeless to shovel or just crawl. When a Government

April 10, 1968

can get so low as to tax the people for getting sick, this I strongly protest. It is going to lead back to the thirties. I very much oppose the medical and hospital deterrent fees. In regard to legislation regarding extra charge for hospital and doctors, this will make a hardship on people like ourselves who are trying to pay as we go.

In reference to the Liberals putting on these extra charges on the hospital plans, we think it is a little too much as the young and old will now have to do without things they should have without paying extra.

And then there's a letter which says quoting from the Liberal slogan:

At the end of 20 years of stagnation, we were still able to look after the sick people, but now with the new Saskatchewan with everything booming, we'll let them die, they are only people anyhow. Yes, we do object very, very much to the Liberal Government putting these awful taxes on the people, most of all the tax for sick people. It is merely a crime. Talk about bearing one another's burdens. They don't know what that means.

I'm writing about this new deterrent tax fee of \$2.50 per day. We would like to protest the introduction of deterrent fees for the year 1968. Enclosed is a copy of a resolution passed at the monthly meeting of the Ridgedale Branch of the Royal Canadian Legion. Resolved that we request our MLA, G.C. Willis, to resist vigorously to the proposed application of deterrent fees on hospital patients and people making use of our doctors also.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

We would like you to know we object very much to the unjust deterrent fees put on by the present Government and think it is the edge of the wedge to wreck medicare. I'm writing you in regard to the way our Government is handling our medical service and hospitalization. I've been in the Connaught council for 14 years and yet have had to find one person that agrees with their policy. We all agree medical cost is going up, yet the Government raised the fee. All to whom I have spoken to agree with this. In reference to our latest taxes I think deterrent fees are the worst and most likely to cause damage to more people, especially people with families. I'm sure the Government of this Province knows that not many well people go to hospitals. So this deterrent fee is just another expense for people who are already taxed to the limit.

I object to the new hospital tax of \$2.50 a day. I wish to register the strongest disapproval of Thatcher's deterrent fees on the grounds it will be a hardship on those least able to bear the extra cost of hospitalization. I'm against the deterrent fees of medical or hospitalization because we have already paid our \$72 and thought we were covered for the year. I'm giving you my reasons why deterrent fees should not be imposed. One, the Government

made a contract, we paid the medical care fee and they should honor it. The load falls on those least able to pay, and three, some of us will suffer rather than go in debt.

We are writing to say we are certainly opposed to the deterrent fee of \$2.50 a day. I'm extremely angry at the imposition of medicare deterrents. It is an unjust, unfair and unwarranted tax on the sick and a hardship on the poor. We very much oppose the charges the Liberal Government has imposed on people who become ill and have to stay in hospital. Returning to our new Government tax, I think the Government's hospital deterrent fees are the worst.

I am writing in regard to deterrent fees placed on the citizens of this province. I think they are unjust as there are many people in this area who can ill afford such a tax. The undersigned as well as myself and this letter is signed by seven people who wish to register most strongly their objection to hospitalization and doctors' deterrent fees.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

It is an unfair and irresponsible method which could be devised to obtain necessary and extra monies required to finance the plans.

I'm writing to object to the introduction of the unjust deterrent fees. We cannot let any Government destroy or make hypocrisy of anything sound and beneficial. Saskatchewan proudly boasted a good beneficial and truly sound medicare plan. To impose deterrent fees, the Liberal Government is saying it wouldn't work. They must be stopped, to destroy is wrong, to build is right. We have the wrong Government and we can't let them win. I strongly object to this so-called utilization fee.

I'm writing you at this time to voice my protest against the Government's introduction of utilization fees. I'm writing you in hope that you will let the Government know how I and many other people to whom I have talked feel about the utilization fee which is to be implemented. Please convey my feelings to the Government.

And I'm sorry that the Premier is not in his seat.

In regard to the utilization fee which is to be implemented. I hope you will voice my protest to the Government in regard to the introduction of so-called utilization fees. Dave Steuart said on television that doctors have said that many people in the hospital really aren't sick and it is hoped that people like this will be discouraged from putting pressure on the doctors to put them in the hospital.

Quoting Dave Steuart, the Provincial Treasurer.

Is this the Government's main excuse for taxing the sick in such an unjust way? If so the Government is as stupid

April 10, 1968

as any doctor who would put in a patient in the hospital that isn't physically sick, and as sick in the head as the person who wishes to lie in a hospital who is physically well.

Well, I am glad that the Provincial Treasurer is in the House to hear that comment.

Mr. Steuart: — Would you read it again, I was talking to somebody?

Mr. Willis: — It quotes the remark which the Provincial Treasurer, Dave Steuart, said on television that doctors have said that many people are in the hospital that really aren't sick, and it is hoped that people like this will be discouraged from putting pressure on the doctors to put them in the hospital. This person asked if this was the Government's main excuse for taxing the sick in such an unjust way. This is the point I want you to hear.

Mr. Steuart: — I won't miss it George.

Mr. Willis: —

If so then the Government is as stupid as any doctor who would put a patient in the hospital that isn't physically sick, and as sick in the head as a person who wishes to lie in a hospital who is physically well.

I object to the introduction of deterrent fees because it falls on the ones the plan should help the most. We would like to add our protest to all the others that are against the new utilization fee. I must say we've been lucky as my husband has only been in the hospital for X rays. I was in for six days when Rob was born and that will be eight years ago. Rob was in for tests which was a stay of two days but we felt very secure in the knowledge that we had medicare and were covered if we should need it.

I object to the introduction of deterrent fees. I wish to protest most vigorously to the placing of deterrent utilization fees. Think what this will do to our hospital and medicare plans. I would just like to tell you that I am deeply against having to pay this extra money in the hospitals. When you have a family this would be a stupid thing because when you earn only \$2,800 a year it takes it all to pay for the things we need with the price of things at what they are now.

It's too bad that the Premier isn't here to hear this comment about free meals in the hospitals.

If that is what they are going to do we will just forget about paying the hospitalization because what good is it going to be doing now. I think we have enough taxes already.

Well, that's about one-third or one-quarter of the letters which I have here. I'm sure that the Members opposite could reproduce letters like this and put before this House the feelings of people in their constituencies regarding utilization fees and deterrent fees. I'm sure this would happen if they were honest. I'm sure

that if they were honest that they too would protest regarding the hospitalization. Going on with these letters. I think we still have time this afternoon:

We welcome this opportunity to write you concerning deterrent fees. If the Liberals want to put this other payment on for paying the hospital, okay, we won't bother to pay our hospitalization.

Now think that one over, Mr. Provincial Treasurer.

I object very much to the introduction of the unjust deterrent fees.

In a similar letter:

I wish to express my dissatisfaction about the deterrent fees being thrust upon the old, helpless and sick in body and mind. I'm very proud of my province the way it protects its people. I think that Saskatchewan should wake up after four years of blunders, sell outs and general disorders.

I'm writing you at this time to vigorously protest the use of deterrent fees in hospitals. I think it is a crime the taxes that this Government has placed on its people, especially past 88, myself 88 and the wife 78. We've had a lot of sickness this last year. We do not wish to have these deterrent fees imposed upon us. I'm writing to inform you of my objections in the introduction to deterrent fees the Liberal Government is introducing.

This is a personal letter:

Hi George;

I suppose things are almost red hot in Regina.

I don't know what he means by that.

Mr. Steuart: — That's your night life, George. Red Hot George!

Mr. Willis: —

It looks like spring here but could get worse . . . I'm also one more person who is against the unjust deterrent fees. I'm very much against deterrent fees. I just want to let you know I very strongly protest against the new tax, I greatly oppose the possibility of paying deterrent fees. Please accept this as a protest to change any principles of the present medicare system. Black Friday, March 1, 1968 was a shock to us. Most everybody we talk to is talking about it. It is awful how the Saskatchewan Liberal government is taxing the people. Amen.

Thank you for the opportunity to have written to voice my opposition on many of the unfair tax burdens the Saskatchewan Government has imposed on us. I object to the Saskatchewan Government's introduction of so-called utilization fee for the reason that they'll deter people of meagre income from seeking medical and hospital care when needed. Secondly, the introduction of this

April 10, 1968

legislation casts a reflection on the integrity of the doctor. The implication here is that doctors have over-utilized hospital beds by admitting patients on the basis of availability of accommodation rather than the urgency of the medical problems.

I must admit to the Provincial Treasurer, I know how he felt after that weekend in Ottawa. My voice is beginning to sound to myself just like his sounded last Monday. Another letter from Melfort:

I think it is about time the people of Saskatchewan had a little to say about what is going on in this country. It belongs to us just as much as the people who pass all of these bills which are making it harder and harder for us to live.

And on reading down further I see she protests the unjust deterrent taxes. She wasn't getting after her Member.

I'm writing you at this time protesting use of deterrent fees in hospitals. I object to the introduction of the unjust deterrent fees. I'm asking you to do everything in your power to prevent the Thatcher Government from imposing deterrent fees on the people of this province.

I'm an old age pensioner, 81 years of age, having resided in Saskatchewan for the past 50 years. Please accept this as a protest of any change in our present system of medicare. I've been thinking of writing to the Minister in the Saskatchewan Legislature regarding the so-called hospital deterrent charge. But who do I write to?

I would imagine that I should tell this person if he had written to any of the Ministers, the letter would have found its way into the wastepaper basket. Now it is being read because he has written to his Member. I would ask all Members opposite to put on the records any letters, any petitions which they received from constituents regarding this unjust, cruel, callous treatment of the people of Saskatchewan.

I'm definitely opposed to the hospital deterrent charge. We do not wish to have the deterrent fees imposed upon us.

I'm writing in regard to hospital deterrent fees which we object very much to. I'm in favor of the medicare plan as it was, but definitely against the new tax on the sick. I strongly protest the action of the Provincial Treasurer.

I hope that it was effective.

I object to the introduction of the unjust deterrent fees. I feel that it is wrong to charge these fees for doctors, hospitals, etc. I hereby protest the introduction of deterrent fees. We object to the introduction of deterrent fees put on hospital patients. I wish to protest vigorously the placing of deterrent utilization fees on doctors and hospitalization. I protest against having to pay \$2.50.

And a petition:

We as citizens of the Province of Saskatchewan hereby strongly protest what we feel is unfair and unjust to the taxpayers of Saskatchewan. We feel the \$2.50 a day to hospital patients and \$1.50 a day to doctors is unfair and unjust. We feel that one solution to our economy would be to spend a few less billion dollars at election time, do less campaigning and settle down to solid government business.

There are six pages, 121 names in protest.

I strongly object to deterrent fees; I strongly protest the utilization fees; these deterrent fees which are to come into effect. Do you really think this is hitting the right people? We are not going to the hospital on our own freewill, we go only because we are sent by a doctor. As a representative from our area, I do hope you can stop the deterrent fee for medical care and hospitalization. I cannot pay these deterrent fees as I get \$84 pension, my room costs \$75, I have left, \$9.

This old age pensioner writes from Tisdale:

And this has to pay drugs which come to \$16.20 and other drugs per month, \$16.65 — \$32.35 in drugs besides living expenses. I'll add my voice to object to the Government's intention to enforce so-called deterrent fees.

We strongly object to the unjust deterrent fees. If Saskatchewan cannot afford to leave medical and hospital plans as it was, the way the CCF put it in, then Saskatchewan cannot afford to have a Liberal Government.

So say I. And then another group of letters came back on March 25.

I doubt if you will be able to read all the letters which you have received.

Mr. Guy: — Oh, you're sure trying.

Mr. Willis: —

I didn't think of writing as I didn't think that it would have done any good until my neighbor, Mr. Hauk, came over last and told me that he spoken to numerous people and all felt as he did that action was necessary.

This person, this Mr. Hauk is a seasonal employee and I was informed about his condition when I was up in Melfort about two weeks ago. It gives his story here as told by this school teacher from Melfort:

Mr. Hauk is a seasonal employee who can't work in winter because of his asthma so between December and April he is on unemployment insurance. His doctor keeps him on pills which cost him around \$10 per week on the reference of the doctor. Twenty-four pills yesterday cost him \$5.80. Each prescription carries an automatic \$2 professional fee. Mr. Hauk claims that he seldom earns \$3,000 per year. So the imposition of the deterrent fee on everybody is not only ridiculous, but absolutely lunatic. I may be able to afford both the additional hospital and

April 10, 1968

doctor's levy . . .

And this person who is writing has just had a heart attack sometime last year.

I may be able to afford both the additional hospital and doctor's levy but those who can least afford it are hit the hardest.

Judge Hughes' appearance over CFQC TV Saturday and Sunday evening speaking against this assessment will certainly help and encourage others to apply pressure. It indicated that the opposition is not entirely by a political party, wishing to capitalize on this unfortunate situation. Just what do you think of this co-called utilization tax? Why would any Government tax the sick whose problem is already great enough.

I wish to voice my opposition to hospital deterrent tax on the sick. We are very much against this new tax on the sick. Having enjoyed the privileges of a good Saskatchewan Hospitalization Plan for a number of years, I'm very disappointed to hear of the deterrent fees being added to our hospitalization by the Thatcher Administration. I'm not too well informed on political dogma, . . .

This lady writes

. . . but where it touches on the welfare of our people and I'm convinced these new fees and surplus taxes are not to the lasting benefit of Saskatchewan people. They would rob the old, the sick and the needy to add to the benefit of head officials and to crafty, rich industrialists.

I'm sure that this lady will remember four years from now or five years from now if she has to wait that long when there's an election.

I am a diabetic and have to check with my doctor regularly. This extra charge we will be asked to pay will be beyond my means and I'll suffer through it. I certainly am against it in every way.

From Sylvania in Melfort-Tisdale constituency:

I strongly object to deterrent fees. I have two children to take care of by myself. Any size of doctor or hospital bill would make it very difficult for me. Sure, Mr. Thatcher says, "Nobody will be turned away." He wants a have-not to beg for charity at his mercy.

I'm writing to protest the deterrent fees. I think it's a backward step in our medicare plans. We sure do protest strongly the introduction of unjust deterrent fees.

I object to the deterrent fees. I wish to protest utilization charges. I know the Government has to get money somewhere but I think this is not the way to do it. Under the plan in the past, the well had been sharing with the sick. And I think they are still willing to do so. I'm greatly opposed to the hospital deterrent fees and sincerely hope to make my wishes known.

April 10, 1968

We both most earnestly protest against the rising taxes and most of all the deterrent fees being charged to those who cannot afford to pay. The voice of doom and despair has finally come to Saskatchewan.

Will somebody wake the Provincial Treasurer up, please — I want him to hear this part particularly. This letter says:

The voice of doom and despair has once again come to Saskatchewan with the raising of taxes, but above all with deterrent fees for hospitalization. We were able to boast to the rest of the country that our sick were taken care of and do not have the dreaded fear of death when leaving the hospital. The day after the Budget Speech, the fear and dread of going back to the hospitals and doctor bills was on the lips of everyone you spoke to against any such tax.

I'm getting down to the bottom of my basket. These other ones here will keep me on into Friday, I'm afraid. A letter from Sasko Park Lodge in Tisdale objecting to the fees and taxes and saying that they had circulated a petition in the Sasko Park Lodge. And this is it:

We the undersigned as pensioners and pioneers having endured many hardships protest strongly to the introduction of deterrent fees. We with failing health in our declining years will have added financial worry and anxiety with hospital and doctors' fees and the high cost of living. We feel secure and free from anxiety with the wonderful medicare plan.

They must be talking about the past wonderful medicare plan.

These fees that are imposed on the sick who are unable to work for a living are most unjust.

And this is signed by 20 people in the Sasko Park Lodge. And another part of these same petitions with another 20 names on it:

I'm writing this protesting deterrent fees. Yes, I do object to the introduction of the unjust deterrent fees.

With regard to deterrent fees the Government has put forward for legislation, I strongly oppose any such action. A friend just called asking our opinion on taxes such as deterrent fees or utilization taxes. We are two oldsters who have been on the sick list for over three years and do not want to lose our medicare plan. We know what more taxes could mean to so many like ourselves, so we both strongly object to the introduction of deterrent fees. We object, we feel that we are paying enough as it is.

Regarding deterrent fees, I feel that it is outrageous, we are paying enough as it is.

Writes the husband of the wife whose letter I just read. And a letter which is unsigned — I won't read it, I have enough without that.

I'm very pleased with the medicare plan as it has been. Our families have been fortunate in not having to use it very much but we do not mind paying our share to help

April 10, 1968

others. I am definitely opposed to this unfair tax on people who are less fortunate. Please add our letter to the list objecting strongly to deterrent fees. When the medicare plan was put into operation there was nothing more secure for the sick as well as the non-sick. Now we have a Government trying to wreck the plan by taxing the sick in order to collect money to cover the foolish spending they did. In regard to deterrent fees I strongly protest. It seems to me that the Government is trying to upset the medicare plan.

We would like to make it known that we object very much to these deterrent fees. I'm sending in my protest against medical deterrent fees. I'm writing, George, to object to the unjust deterrent fees.

Another letter written by a brother in the same wording:

I'm against taxing the sick, against deterrent fees. I do object to the unjust deterrent fees. This is just like coming back to the dirty 30s. I'm very much against the new hospital and medicare tax that has been put on.

I must write a few lines in regard to deterrent fees which the Government has put on our people. I'm very pleased with our medicare plan as it has been. Our family has been fortunate at not having to use it very much. We do not mind paying our share to help others.

I object to the introduction of the unjust deterrent fees. Why tax the sick? They are the ones that are least able to pay for it.

I object to the introduction of the unjust deterrent fees. Mr. Thatcher said in the TV news he can thank all the young folks that vote for him, otherwise he would not have won the election. But we must excuse the young folks, they did not know how to vote. They were under 21 years of age. When we paid our hospital and medical bill last fall, we did not expect to pay deterrent bills to keep us from using what we had paid for.

I'm asking you to put pressure on the present Government against the introduction of the unjust deterrent fees of hospital and medicare.

Mr. Speaker, I ask you how could a person put pressure on a Government which has no compassion in its heart, which has no care for the people of Saskatchewan, a Government whose Members at one time this morning were absent from their seats, from the front benches. I think there were two Ministers in the House but none of them in the front row of seats this morning when one of our speakers was speaking. How can you put pressure on a Government when one persons says to all the people sitting over there, "Do this" and they do it? How can you put pressure on people like that? I have to admit that it is hard, but I want to remind the people opposite that the people of Saskatchewan can and will put pressure on the Government opposite — four years from now.

I'm writing to protest against imposing deterrent fees and if the Provincial Treasurer thinks that the people of Saskatchewan have short memories, he doesn't know the people of Saskatchewan. They will remember four years from now. They protest now with their letters, they'll

protest four years from now with their votes against this callous Government. And I protest against the hospital deterrent fees and also doctors' deterrent fees and the farm fuel taxes. Where's all the revenue from all those industries the Liberals crow about? It seems like they want the money from the sick and working people. The recent announcement by the Saskatchewan Government of its intentions re this so-called utilization tax is less than deplorable to say the least. Firstly, it is completely contrary to recommendations of the Hall Commission — that is universal coverage for the cost of a minimal annual premium. Secondly, and perhaps most important, it creates a financial burden on the sick who often through no fault of their own are those least able to pay. Statistics show that children and senior citizens are the largest consumers of service and care from MCIC. This further substantiates the fact that utilization fees are nothing more than a tax on the sick.

I was reading this letter particularly for the benefit of the Provincial Treasurer and the Minister of Municipal Affairs. I feel that I'm wasting my time unless I get it through to them. Do you think they will listen eventually? We could wait until they are through with their conversation. I did want the Provincial Treasurer and the Minister of Municipal Affairs to hear this letter particularly, that's why I was reading it all. If I had known that you weren't listening I wouldn't have started, Mr. Minister. Yes, I'm sure you haven't heard it because I have been speaking to you for the last five minutes and there's been no response. It's worse than having you sit there sleeping. I can understand a man falling asleep, but when a man turns his back on the problems of the people of Saskatchewan and pays no attention, this is much worse.

Some Hon. Members: — Hear, hear!

Mr. Willis: — This letter goes on:

Thirdly, adoption of utilization fees has no regard for the ability to pay as would increased provincial income tax rate or corporation taxes. Fourthly, Saskatchewan Hospital Association have gone on record opposing said fees in favor of increased premiums. These people should have been consulted by the Government in this regard. The recent Budget brought down by the Saskatchewan Government has much more against it than for it. The very fact that taxation in so many areas has been increased so drastically and yet corporation taxes held the lines, speaks for itself. The Saskatchewan Government has no thoughts of placing financial burdens where they justly belong. I urge you, our elected representative, to do your utmost to block the adoption of deterrent fees.

I want to thank the Provincial Treasurer for the time which he has given me to read that letter to him. I'm sure he heard everything I said. I read from that, which I think was a very important letter. I'll go on to the rest of them now if the rest of the Members will give me their attention.

This letter to you is to express my objection to the new deterrent fees which have been imposed on the people of this province in April. I hope you'll do all you can to stop the deterrent fees the Government is trying to put over the sick people. I have an aunt in the hospital who

April 10, 1968

is dying of cancer. What a shame if she should have to pay before she passes on.

I probably should send over the name to the Provincial Treasurer so he could visit her while she is still in hospital after 30 days.

I'm asking you to put pressure on the present Government against the introduction of the unfair deterrent fees.

I'm writing against these deterrent fees or utilization as the Liberals call it. I'm very much against it. I'm certainly very much opposed to this deterrent fee.

I'm writing regarding this terrible hurtful tax on us people. How many old people and families with a big family can afford to go to hospital. As I say it comes to the old times, when you get sick you stay at home and die.

I'm writing you as our MLA in regard to the legislation before you now regarding deterrent fees to be charged by doctors and hospitals to sick people who have no say in the matter. The doctor says you have to go to the hospital, you have to go.

Just a few lines to express my strongest protest against the deterrent tax. I strongly object to the introduction of the unjust deterrent tax. I truly object to the introduction of the unjust deterrent fees.

Just a few lines as I for one object to this new unjust affair. I truly object to the introduction of the unjust deterrent fees, especially the new tax on the sick.

I object to the introduction of the unjust tax. I would like to give my opinion on the unjust deterrent fees. It is high enough as it is without further cost. I for one object very strongly.

Just a line to say that I for one object to this introduction of this unjust deterrent fees. We all know that the medicare plan introduced was half the cost of what it is now. And I don't see why it is not all right as it is now. Why put extra costs on those that are unfortunate enough to have to go into hospitals.

Regarding the introduction of deterrent fees on the sick, I feel this to be one of the most unfair things the Government of Saskatchewan has put forward until now.

In another group of letters received March 21:

As one of your constituents I'm taking the privilege of sending this brief note. I would like you to speak up on the deterrent fees bill. For instance in my own case I'm seeing my doctor on call. He's been treating me for probable cancer for two years. With these high prices and taxes, I shall not be able to continue. Others seem to be in the same category.

I'm pleased that the Minister of Health is in his seat. I'm sure that he will feel for this person, not only suspecting cancer but not enough money to continue going to a doctor to

have tests made. An old age pensioner writes:

We wish to strongly protest the excessive tax increases put upon us by the Saskatchewan Liberal Government. Like a great many more, I am greatly offended by Liberal Government's imposition of deterrent fees on medical and hospital services. Utilization fees imposed on the sick and aged in Saskatchewan by the Liberal Government point up the disregard that people are held in by this said Government.

This is what I have been saying all this afternoon, Mr. Speaker, that the people across the way hold the people of Saskatchewan in disregard.

We wish to tell you that we object to the deterrent fees introduced by the Government. I have been unable to work for the past six and half years due to a stroke and a heart condition. During this period I have had to go to either doctor's offices or call them to my home. I also had to be hospitalized many times. You understand how I feel about this new tax on the sick.

With regard to deterrent fees just recently announced by the Hon. Member for Prince Albert (Mr. Steuart, who I see has again left his seat), I wish to strongly object and ask you to convey my objections with regards to same. I object very strongly. I hereby object to deterrent fees and I understand that they will soon be in effect. Please do all in your power to stop this terrible tax which goes into effect and will be unjust to the sick people of our province.

I am sincerely against deterrent fees Thatcher has produced. It will be hard on the middle man and the very poor. They all need the Medical Care Plan.

We would like to let you know that we object to the introduction of deterrent fees by the Saskatchewan Liberal Government. I am sorry to bother you in a letter, but I feel that I must let you know that I object very strongly.

Just a few lines of protest against deterrent fees or so-called utilization fees.

Someone took the trouble to cut an ad out of the paper, signed her name to it and said:

I request your Government not to proceed with the proposed medicare and utilizations fees. I have been requested to write to you regarding deterrent fees. Medicare has been a wonderful help to Saskatchewan families. Hope to see it continue as it has been and not interfered with. It is my sincere wish that the Saskatchewan Government will consider these unfortunate people, the sick, and do not put a tax on medicare.

We wish to congratulate yourself and the rest of the NDP Members for the fight that you are putting up against deterrent fees. I strongly protest this tax-gouging Saskatchewan Liberal Government. It is imposing hardships on all low-income families, pensioners and all sick and needy.

April 10, 1968

Written by a widow from Melfort:

As a Member of our constituency I would like to let you know that I and many others I have talked to are very much against this new deterrent fee brought in by the Liberal Government. I most earnestly protest against the rising taxes at the present time and especially deterrent fees aimed at the sick. I strongly oppose the introduction of the utilization fee. I am sincerely against deterrent fees that Thatcher has put upon us. It will be hard for the middle man and the very poor.

Another letter:

We paid our hospitalization tax since the beginning and greatly appreciated it when we needed it. But now another slap in the face if we are hospitalized. At this time I would like to state that I am firmly opposed to the new deterrent fees. I hereby wish to register my objection for the proposed new law covering utilization tax. In regard to the \$2.50 payment for hospital bed, I certainly disagree with that and hope that something can be done about it. In regards to this \$2.50 a day which we would have to pay, I don't agree with it at all. I am an old age pensioner also a diabetic and it takes a lot of my cheque for pills and doctors.

Here is another person objecting to the \$2.50:

Hope that there will be something done about it. My sincere wish that this Government will consider the unfortunate people, the sick, and do not put tax on medicare and hospitalization.

And another letter with the same sentiment and again:

Just a few lines about this new plan paying \$2.50 and \$1.50 and \$4.50 house calls. I think that it is just ridiculous. I am an old lady of 75. I had to leave my farm home about four years ago and live in town. The way it was before was more satisfactory. So here's hoping something can be done.

I am not in favor of the new fees. As our representative of Melfort-Tisdale I ask you to let the Liberal Government know how mothers and wives feel about the new deterrent fee. When they increased taxes they didn't increase my husband's income. And the cost of living is crazy.

I object most strongly to the new deterrent fees. My husband and I are very much against these fees. I think Mr. Steuart's whole tax bill stinks (if you will pardon the expression) but especially the deterrent fees.

Deterrent fees in this modern age would be a disgrace. In our enlightened times education is the ambition of the majority of our young people like yourself. For this Government to impose deterrent fees on the sick is a barbaric action.

I am writing to see if anything can be done about the taxes proposed in the Legislature, particularly the levy on medicare. I am certainly not in favor of the deterrent fee.

I would like to put in a protest against the Liberal Government's new deterrent fee on the sick. As a laborer I am not making much more than \$2,000 a year. Besides, having been a patient under the Medical Care Plan, I certainly protest deterrent fees being levied. We are protesting the extra hospital tax and the \$1 doctor fee.

Further on in my letters I notice one correspondent claims that we have paid our medicare and hospital fees for 1968. The Government cannot change that until the year has run out. That looks like a good point to me and maybe worth working on. I am just now sorry that the Attorney General (Mr. Heald) is not in his seat just now, and the other lawyer on the other side isn't in his seat either. Oh, pardon me, the third Member is in his seat. I would certainly like to bring this point which I have raised earlier to the attention of the Attorney General, that the Government has a contract with medicare and hospitalization and to the people who have paid their premiums and they certainly would hope that the Attorney General would check into this and let the Provincial Treasurer (Mr. Steuart) know whether or not what he is doing is legal. Most of the people in the province seem to think that this is not a legal action of responsible government.

Mr. Guy: — Won't you acknowledge a speech writer in the gallery?

Mr. Willis: — Oh, I am sorry, Sir, if you have any objection to people in the gallery you will have to speak to the Sergeant-at-Arms.

Some Hon. Members: — Hear, hear!

Mr. Willis: — The Minister of Public Works might have some control over instruments to project voices, but I don't think he has any control over galleries or people who sit in them. If he feels he has to he should do something about it.

Mr. R.A. Heggie (Hanley): — Mr. Speaker, I rise on a point of order. In the absence of the Attorney General (Mr. Heald) I wish to state to the Hon. Member for Melfort-Tisdale that we are not governed under a contract form of government where every law passed is a contract with the citizens. We are governed under the British Parliamentary system, which is a sovereign type of government where the Legislature is supreme. Now I am not saying or taking a stand on that at the moment except to say that the illegality is ruled out because we are not bound by any contract form of government.

Mr. Willis: — I want to thank the new Member for Hanley for his opinion. I think that I would still like to check with the Attorney General if the Member for Hanley doesn't mind. If he wishes to expound further on this when he gets into his speech on this matter, I would certainly ask the Member for Regina Centre (Mr. Blakeney) and the Member from Riversdale (Mr. Romanow) to be in their seats, so that they could consider the logic of his reply. As a non-lawyer I am not able to fathom the intricacies of the matter. But I think that this is something that the Attorney General should certainly check into. People have paid \$72 thinking that they were paid up for a year. Now

April 10, 1968

the Government comes along and changes this contract, or according to the Member for Hanley it is not a contract. I am sorry that the Member for Lumsden is not in his seat. I am sure that he would have expressed an opinion one day or another or probably he could when he comes up to speak in this debate later on.

Another letter I have:

I am certainly not satisfied with this new tax on the sick. I'd like to put in my protest on the policy of the Liberal Government to increase hospital taxes. I hope that this letter will be of some help to try and stop deterrent fees on hospitals.

Now before I go any further I want to thank the Member for Hanley (Mr. Heggie) for rising. I can assure you that when I sat down for only two seconds I felt much better after getting up.

Some Hon. Members: — Hear, hear!

Mr. Willis: — I want to say thank you again for giving me an opportunity to rest for that brief moment.

I am writing this letter to voice my objection to deterrent fees. As one who has benefited several times from the Medical Care Plan I am certainly protesting deterrent fees. On behalf of my 98 year-old mother and my six children. I strongly object. I object to deterrent fees because medicare was put in to pay for services when well, not a source of revenue when sick. I think that it is high time that we did something about the tax levy that the Liberal Government has dropped onto the people of Saskatchewan. The people who can least afford the doctor and hospital tax are the sick and the aged.

And here is a line in regard to Black Friday taxes:

How does the present Government think we can stand all these tax increases?

I am positive that I will finish before 5:30 p.m. if the Members will bear with me.

Just a line to you as our MLA for Melfort district to protest the Government introduction of deterrent fees. I am certain that many other people in the Province of Saskatchewan have written to their Members protesting and I would certainly appreciate it, if sometime in the future if you have the opportunity that you get up and give these protests to the Government who sits opposite. I am sure that you haven't had the opportunity to protest in caucus. I am positive that this was just as much of a surprise to you on Black Friday as it was to the rest of us. And this would give you a wonderful opportunity to do some protesting where it would do the most good.

Another letter:

I hereby object to the introduction of the unjust deterrent fees. I wish to express my views, not in favor of the deterrent fees.

I am writing this as I am strongly against and object to these deterrent fees. I am a pensioner of 71. I have to see a doctor often and have a drug bill that I can hardly keep up with. I am just home from hospital after a spell of gastritis. Have asthma that I have to visit the doctor often. His extra charge is going to go hard with me as it will so many extra elderly people. So please fight this tax on health as hard as you possibly can.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

The introduction of the very unjust deterrent fees prompt this letter from me. I have a very personal protest on this matter. I know what the Medical Care Plan really means to a sick person. Four years ago I was rushed to University Hospital for heart surgery where I was a patient for seven weeks.

Another letter:

In view of the fact that the new tax will fall heavily upon the sick, aged, and the thousands in the low-income bracket, we feel compelled to drop a line of protest. In reference to the Government's recent deterrent fee on medicare, I would like to inform you of the overwhelming opposition of the public in this area. Every person that I questioned on this subject expressed their complete objection to this idea.

Another letter:

This is to say that we object very strongly to the Government trying to introduce deterrent fees. I strongly object to this new tax to do with the Medical Care Plan. I feel that they should put this tax on some luxury. This way it would hit the people that could afford it. We went backwards with our farming \$1,000 per year for the last two years due to poor crops and high expenses. And we have a lot of sickness in our family. With this new utilization fee put on the patient in hospital, we won't even be able to take our family to the hospital when needed. Surely there must be some compassion felt by the people opposite for those unfortunates of Saskatchewan.

Just a note to say that I am against the deterrent fee charges. The introduction of deterrent fees is about the worst thing that the Government could have done.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

I object to this deterrent fee which has been imposed on us and has made a farce out of our wonderful hospitalization. I protest vigorously to deterrent fees imposed upon us by our Government.

I am writing you in regard to the announcement of deterrent fees to visit the doctor or go into hospital. And the 2 cent tax on diesel fuel and purple tax.

April 10, 1968

Another:

I am writing about deterrent fees. We sure are against it very much. If they think the people bribe the doctor, why not tax the doctor?

I strongly protest the deterrent fee being levelled on the sick in the province.

I received a letter regarding the deterrent fees on hospitalization. In regard to these fees I am certainly not in favor of them, but under the circumstances it looks like we are going to have to put up with them as they are going to be put into effect. It doesn't matter what you and I try to do about it. So it seems to me that Mr. Thatcher's Liberals have us under their power for the next four years.

But at the end of four years, Mr. Speaker, there will come a reckoning.

I think deterrent fees are a disgrace. It only penalizes old people and also imposes a heavy financial burden.

I want to protest the new deterrent fees on the sick. The \$2.50 a day on hospital calls and \$1.50. I would like to put in my personal objection to the Government's unfair deterrent fees.

I am greatly concerned over the new deterrent fees charged by the hospital and the doctor.

I hear that you are definitely against deterrent fees for hospitals and physicians. So am I and so are thousands of others. Can nothing be done? Will you try? I am behind you.

I think the taxes that have been imposed upon us are outrageous especially deterrent fees for hospitals and visits. I greatly protest the proposed deterrent fee. A gall bladder operation is scheduled for me come Easter holidays and it concerns me greatly to think about the \$2.50 per day fee. One can certainly sympathize with the seriously ill.

Just a few lines to say that I am not in favor of the unjust deterrent tax.

I am writing in regard to deterrent fees which are about to be taxed. It is cruel to think of taxing the sick and aged in order to find money to run the country.

Just a little note to let you know how I feel about taxing the sick and the aged. I would like to make a protest against the new deterrent tax fee. How in this world will we be expected to make a living if things keep going at this rate?

I would like to protest additional charges added to hospital services. I think that it is an unfair way of taxing the sick rather than the healthy people.

I hope that something can be done against the unjust deterrent fees being introduced in the Legislature.
No

one that I have talked to is happy about them.

I wish to protest the deterrent fees. I am very much opposed to the new Government deterrent tax fee just out.

I strongly oppose the new deterrent fees which the Government has seen fit to introduce.

I wish to raise an objection in the introduction in the unjust deterrent fees. Hospitalization Plan as most of us have used., has probably saved thousands of dollars for us. Some unfortunate people probably would never be able to pay their bill.

A few lines to let you know that I am sure protesting against the unjust deterrent fees. I am very, very much against deterrent fees. The amount that I pay now every month is all that I can do without more taxes.

We are letting you know that we certainly oppose deterrent fees recently put on by the Liberal Government.

And one from Nipawin. This is a member of my constituency. The Member for Nipawin (Mr. Radloff) doesn't have to worry about this.

I am wholeheartedly against deterrent fees on the sick. It is most unjust. How is one to pay these fees especially if one is unable to work?

We object very much to the unjust deterrent fees. We strongly protest the deterrent fees.

We want to register our opposition to the Bill before the House. The new taxes have been a blow and I still haven't recovered. It makes our present Government inhuman.

I very strongly protest the utilization fees and hope that you will be able to make the Liberals drop this bad legislation.

Some Hon. Members: — Hear, hear!

Mr. Willis: —

This will be a letter of protest regarding the \$2.50 that all citizens are going to have to pay. The way I see it, the middle man who is trying to make ends meet will be the hardest hit. The old will be taken off, the poor will have to beg for more help. Mr. Thatcher must like the aged, the poor and the helpless.

I certainly object to the broken election promises of the Liberal party, most of all to the deterrent fees. I do not make a practice of writing to MLAs, but I think that I should let you know how I feel about the proposed utilization fees. The idea just does not make sense to me. I can't imagine how anyone would want to go to the hospital unless it is necessary. Forty-five years ago I came to Canada from Ireland. And after working out on farms for two years, I got a quarter section farm east of Arborfield and spent 40 years of my life there, 36 miles from a hospital. The Lord was good to me and I

April 10, 1968

never needed the doctor or hospital in those years. However, I have gotten to believe that to go into debt or owe money was a sin. During those depression years I often wondered what I would do if a serious illness would overtake me. I never could determine which would be the best course to follow, to go to hospital or acquire a debt that I couldn't pay, or just lie down and die. With the coming of the Saskatchewan Government plan that worry was ended. Today I am well in the 60s. Although I am still working and enjoying good health, I do not know how long it may last. But when it comes to the time when I have to depend on old age pension alone, the old worry will be back again. Go to hospital or die, if this legislation comes into effect. If you can do anything to persuade the Government that it should abandon this idea, or failing that, to reduce the amount of fees paid by one-half, I am sure that all the people in Saskatchewan would appreciate it.

Some Hon. Members: — Hear, hear!

Mr. Willis: — Mr. Chairman, I regret to say that I have run out of letters. I want to finish, Mr. Speaker, by saying that I realize that this effort has probably been in vain, that we are probably running into a stone wall. The powers-that-be who are not in their seats at the present time have decided that this tax is going to go ahead. The rest of the people who sit opposite will have no say whether or not this tax goes in. If they vote against it, then they will be treated accordingly. They don't dare vote against it, Mr. Speaker. There is no sense in appealing to them. Those who have gotten up have voiced their concern about the people of Saskatchewan and have said they were in favor of the plan, but they called it the action of a responsible Government, a responsible Government which has seen fit to put up Medicare and Hospitalization Plan costs, even though the income which it gets from the Federal Government plus the increases it gets from special taxes put on more than offsets the increased cost of medicare or hospitalization.

I don't expect that the Government will change its mind and do what these hundreds of people want it to do, to go back to a tax-free, deterrent-free, hospitalization utilization scheme.

Before I take my seat, I want to suggest one plan or one idea which could be a compromise idea. The big objection to this plan, as I see it, is not only the fact that it is going to be hard on those people who can't afford it. It is the part that they have to pay taxes when they are lying in hospital. And they can't do anything about it. They are in hospital not because they want to be there, but because they are sick. They are put there. And they see the \$2.50 a day adding up. The Minister has said, or someone in the debate previously said, that the main concern is the doctor's visits. I would think that this is right, Mr. Speaker. You can't do anything about keeping people out of hospital once they are in hospital. Now if you want to keep people from going to the hospital, people who are sick, who think they can't afford to go to hospital, who want to take the chance of being at home and becoming sicker and probably contracting a terminal illness, then that is your responsibility. As a compromise plan, Mr. Speaker, I would suggest that the Government drop the utilization fee on hospitalization. This would make some sense and would be appreciated by the people in the country as a whole. I wouldn't say that this

would save them, come the next election, Mr. Speaker, but I still think that four years from now they will go down in defeat because of their callous disregard for the people of Saskatchewan.

Some Hon. Members: — Hear, hear!

Mr. Willis: — But there is no doubt about it that it would help many people who have to put up with this Government for the next four years. In concluding I would make an appeal to the Government that it do drop utilization fees on hospitalization.

Some Hon. Members: — Hear, hear!

Hon. D.V. Heald (Attorney General): — Mr. Speaker, I wonder if the Hon. Member who just took his seat would permit a question.

Mr. Willis: — Definitely.

Mr. Heald: — Just a minute ago before you sat down you suggested this compromise proposal. Did I hear you correctly that you are endorsing the continuation of deterrent fees on the medical side?

Mr. Willis: — I am glad that you asked that question, Mr. Minister. If I didn't make myself clear, I certainly want to make myself clear now. I said earlier that I think that this Government is going to go ahead with both these deterrent fees, that the decision has been made and that the rest of you people have to fall in line with this decision. But as a compromise measure I think the people of Saskatchewan would give you some credit if you took off the hardest, the deterrent fee which hit them hardest, and that is the one which has to do with paying \$2.50 when they are lying on their backs sick in a hospital. They would object as I would to utilization fees on doctor's visits, but I would accept this as a compromise as something thrown to the hard-hit, the hard-pressed people of Saskatchewan. I don't expect this to be done, but if the Government gives consideration and does come up with it, there is no doubt that it would ease the situation somewhat in the Province as a whole.

An Hon. Member: — Then you'll support it, will you, George?

Some Hon. Members: — Hear, hear!

Mr. R. Romanow (Saskatoon Riversdale): — Mr. Speaker, I spoke on the original motion and pursuant to your ruling earlier today, I shall try to confine my remarks to the amendment that has been put forward by the Hon. Leader of the Opposition.

May I just be permitted one small privilege in congratulating the Hon. Member from Melfort-Tisdale in putting forth a very eloquent plea on behalf of his constituents.

Some Hon. Members: — Hear, hear!

Mr. Romanow: — Mr. Speaker, my remarks as

April 10, 1968

I said were going to confine themselves to the matter of the amendment which says one thing only. It says to this House, set up a Special Committee of the Legislature so as to allow the people of the Province of Saskatchewan to make their views known to Government and to the Legislators of this Province.

Some Hon. Members: — Hear, hear!

Mr. Romanow: — Now there is nothing in this amendment, Mr. Speaker, that is a political determination of the issue on deterrent fees. As Members vote for the proposed amendment, as I hope that all Members will, they will not be voting for or against the issue of deterrent fees. What Members will be doing simply is affording the people of Saskatchewan their democratic rights to present their views and arguments on deterrent fees to this Government. Now as elected representatives of the democratic society, surely one cardinal principle that all of us would subscribe to is the one of giving easy and ready access to Members of this Province to make their views known. That concept is not surely one that's in the private domain of the New Democratic party. It's a concept of all Legislators and I would hope all Members of this Legislature would certainly subscribe to it too. After all, this is the highest court in the land and this is where the case should be pleaded by the average citizen. Now, Mr. Speaker, I say that the conditions of this proposed Bill and the circumstances of its introduction are so peculiar and so particular as to warrant throwing the matter back to the consideration of the public at large. One important reason for doing so is that in the October 1967 election the people of the Province of Saskatchewan had no opportunity to say either yes or no to the matter of deterrent fees on hospital and medicare. Deterrent fees on hospitalization and medicare were introduced, as we all know, only after the Liberal Government got back into power. Surely, one of the basic important democratic tenets that we all subscribe to (I would hope) is that government, once it has put a particular issue to the people, is elected and thereby given a mandate to do something, or if you will, not to do something. I simply ask this question, Sir: what mandate was given to the Liberal party to hospitalization and medicare deterrent fees when the issue never was debated on the hustings for the people to decide?

Some Hon. Members: — Hear, hear!

Mr. Romanow: — It is a basic error in the democratic process on the part of the Liberal Government and Liberal party, purposely perpetrated on the people. I say that the only democratic way, Mr. Speaker, that this error can be cured or can be remedied, is to set up what the amendment suggests: a Special Committee of this Legislature, a committee of those particular legislators who have either the skill or the knowledge in health services, much along the suggestions made by my desk mate, so that the voice of the public denied at election time can now be heard on the question of deterrent fees.

Some Hon. Members: — Hear, hear!

Mr. Romanow: — Mr. Speaker, I shall want to say a few more words on the amendment and I wonder if I might beg leave to adjourn the debate.

Mr. Speaker: — The Member from Saskatoon has asked leave to adjourn debate. Is leave granted?

Motion to adjourn negatived.

Mr. Speaker: — Now you've lost your adjournment motion. Now why on earth didn't you call it 5:30, after you have been in this trap twice already.

Mr. Romanow: — I am sorry, Mr. Speaker, I didn't catch your remarks.

Mr. Speaker: — You've just lost an adjournment motion so you can't speak again. Now you have been caught in that trap twice and why in the name of heaven did you get caught in it the third time? Those are the rules of the House and the adjournment motion was negatived.

An Hon. Member: — Democracy!

Mr. Speaker: — Just a minute, order, order! I think that the House in its wisdom and possibly in its mercy might be willing to overlook it on this occasion and allow the Member to call it 5:30. This must be done by leave of the House. The Member from Saskatoon Riversdale would like to call it 5:30?

Some Hon. Members: — No.

Mr. Speaker: — Leave requires unanimous consent and it has been denied.

The Assembly adjourned at 5:30 o'clock p.m.