

## EVENING SITTING

## ADJOURNED DEBATES

## SECOND READINGS

The Assembly resumed the adjourned debate on the proposed motion by the Hon. Mr. McLeod that Bill No. 34 — **An Act to amend The Prescription Drugs Act** be now read a second time.

**Mr. Trew:** — Thank you, Mr. Speaker. Before I was so rudely interrupted by the 5 o'clock time, I had been trying to describe to the Conservative members opposite the unfairness of this Bill 34, of this drug tax, or tax on prescription drugs, this tax on sick people. I believe I had covered a fair number of points briefly, to present the unfairness picture. I was describing how the changes to The Prescription Drugs Act are simply attacks on poor people and attacks on sick people.

I had outlined, Mr. Speaker, how unfair the \$125 deductible is because, as I pointed out, it is not a deductible or a tax on everybody. It is only a tax on people who require prescription drugs during that year. And for that reason, it's a tax on the sick, primarily, and it leaves the people who are well scot-free, if you like, in this particular instance. And that has some very serious ramifications for people that are on long-term prescription drugs. I am of course referring to the many people in Saskatchewan that are on heart medication or high blood pressure medication, diabetics, and people with similar medical problems.

I outlined how drugs are being misused, how prescription drugs are indeed being misused — not abused like the government would have us believe. They are trying to paint a picture, I believe, of the citizens of Saskatchewan using prescription drugs just at random or at will and taking more prescription drugs than they need. I pointed out that doctors prescribe the drugs; the patients don't prescribe the drugs. A patient goes to a doctor when the patient is feeling ill and the doctor then prescribes whatever is needed. Sometimes they prescribe simply exercise; sometimes they prescribe a change in diet; sometimes they prescribe medication. And if the doctor prescribes medication, I don't think it's up to any of us in this legislature who are not medical doctors to try and second guess that prescription. Indeed, I just don't think that any of us are qualified to second guess the medical profession.

I also outlined how illnesses are going to result from the misuse of medication. By misuse I mean when people have a monthly supply and they know they aren't going to have money at the end of the month to buy the next month's prescription. So rather than taking, for example, if the prescription called for a pill a day, rather than taking the pill a day they would take one pill perhaps every second day and try and stretch it out until they thought they might have the money on hand to renew their prescription.

Those were just some of the things that I outlined before

the 5 o'clock supper break. Some of the things that I didn't get to, Mr. Speaker, are the election promises of the members opposite. Where are the election promises? Where did they go? As soon as the election is over, it's just gone like so much smoke. It's not much wonder that the people — not just of Saskatchewan but of Canada, and I suspect it's even more widespread than that — it's not much wonder that the people hold politicians in general in such disdain and disregard when we have a government that makes promises. They promised we're going to eliminate the dispensing fee. Well technically they did; technically they eliminated the dispensing fee on prescription drugs but they replaced it with a 20 per cent cost of every single prescription. Every prescription where there used to be a maximum charge of \$3.95 per prescription, now in many cases that cost has gone up.

Indeed I outlined one instance in my own constituency where the total drug costs are now up front \$359 per month. I have another case that I'll get to a little bit later, but the 20 per cent of the drug costs for another family works out to \$87 per month. That's after they get the rebates all back. I'll be dealing a little bit further with that, but their prescription drug costs have gone from something like \$20 to nearly \$90 just at the stroke of a pen. These are the points that I'm trying to make to the Conservative members opposite. When you make a promise, it should be kept. The people of Saskatchewan deserve that. They deserve that when you give them your word that you're going to eliminate the gas tax, that you will eliminate it. You won't impose like we've got in this present budget, a 7-cent-a-litre gas tax.

The people of Saskatchewan have been hit recently . . . well a month ago, they were hit with virtually a doubling of the registration fee for their vehicles, followed just scant days ago with a 10 per cent increase in the cost of purchasing their automobile insurance through SGI (Saskatchewan Government Insurance). Two hits. The first one cost the taxpayers \$18 million; the second one cost them \$20 million; total \$38 million from the motoring public.

The motoring public, Mr. Speaker, also are in many instances some of the people that require prescription drugs from time to time. So it's the same well that this government is going back to time after time after time, and I tell you that the people are fed up with nothing but taxes piled on taxes piled on taxes. And at the same time what do we have? One point seven billion dollars and growing daily that the government is giving to the oil industry in foregone royalties and tax holidays — \$1.7 billion — 560 times what this Bill is going to save the government.

They're saving \$34 million by your own figures — \$34 million per year, and every single one of those dollars is saved on the backs of sick people. That's why my colleagues on this side of the House are so adamant. We desperately want the government to withdraw this Bill. It is just affecting the wrong people, the sick people and the elderly and people that are on long-term medication.

While we see the cost of our prescription drugs increasing so dramatically, we also have the spectacle where the

people of Saskatchewan have been hit with a 40 per cent increase in the 5 per cent E&H tax. And they've been hit with a 50 per cent increase in the flat tax — all of that this year alone. And it just does not jibe with any of the promises, and it certainly does not fit with the promise that prescription drug costs would be eliminated.

Mr. Speaker, my apologies for taking the time but I'm struggling with a cold, as I mentioned earlier.

I outlined a problem, a concern with one of my constituents, a lady earning \$495 a month with \$359 up front prescription drug costs. And I've outlined her total income and her total drug costs, and of course, she has to pay her rent, her power, her telephone, her food bill — all of those things on that scant income. She does not qualify for social service . . . social assistance because her earnings, her income, is too great. And it's a real tragedy. This woman has to make a choice, a hard choice, every day, time after time — is it going to be medication, my prescription drugs that I need, or is it going to be food which I also need? Those are the cruel choices that are facing her.

I have one other example that I want to record. There is a young family in Regina North, my constituency, that have total drug costs of \$435 per month, Mr. Speaker, \$435 per month. And the drug costs are a result of a medical problem that two of their children have. It's a very, very rare problem. There is only a handful of people with that problem in all of Saskatchewan. Surely, surely there should be some exemptions for extreme cases such as this one.

This young couple, in addition to having to put out the \$435, has to wait sometimes . . . Well we don't know, but we know there are people that have waited two months for the rebate to come back from this cash-starved government, and they are waiting and waiting and waiting. How in the world is a young family supposed to . . . How is a young family supposed to raise their children and provide for them and to see that they are involved in some of the extra-curricular activities, some of the sports, that sort of thing? It is desperate enough to raise a family today without having to wonder about the prescription drugs and the medication that's needed.

Mr. Speaker, there is a better future for the prescription drug area. There can indeed be a future where again Saskatchewan government . . . And of course unfortunately, I think it's going to come after the next election, when we again have a government that really genuinely cares about the people of Saskatchewan, a government that will share in the costs of prescription drugs in a meaningful manner — meaningful being totally or at very least, or at very worst, with a small dispensing fee such as we had before. That is part of the future of the medicare system in our great province that we will see again. Rest assured we will see it again.

And I ask the government members opposite to do two things: first, one of you, if just one of you has got the courage to stand up and speak to this Bill, do so. When I sit down, stand up; speak to this Bill. You're given the same opportunity that we are on this side of the House. Try and defend your tax on the sick people; try and

defend it. The reason that nobody will stand up is because it is indefensible. But if you can't defend it, if you can't stand up in this House and defend this drug Bill, then at least have the decency to withdraw it. It is patently unfair. It is a tax on the sick.

I see some of the government smiling and shaking their heads. Obviously, Mr. Speaker, many of them are beyond reach. Many of the members opposite simply won't recognize a baseball bat unless it hit them right between the eyes. That's the tragedy that Saskatchewan people are apparently stuck with for the next number of years. They're apparently stuck with that at least until the next election.

In the meantime, have at least an iota of decency, withdraw this insane drug Bill — withdraw it. Take it away, or have to courage to speak on it.

Mr. Speaker, I am obviously opposed to Bill 34. I will proudly take my place and vote against it unless the government withdraws it, and then I will proudly stand up and congratulate the government for having the guts to realize that they've made a mistake and that they're hurting the people of Saskatchewan. I will be the first person to congratulate them if they withdraw it; otherwise I will proudly vote against the Bill.

**Some Hon. Members:** Hear, hear!

(1915)

**Mr. Hagel:** — Thank you very much, Mr. Speaker. It is with a tinge of sadness that I enter into this debate tonight, Mr. Speaker.

I notice that after my colleague from Regina North had finished his words and had challenged the members opposite to stand in their places and to defend this Bill that has been put forward by the government opposite, that after he had concluded, Mr. Speaker, that you turned and you looked to the government side to see if there was anyone on that side who was going to address this Bill, and there was nary a move, not a twitch — not a twitch, not an indication of anyone on that side having the courage to stand and defend the Bill put forth and introduced to this House by the Minister of Health.

Now the Minister of Health, I see he's there and he's with us this evening. And he likes to comment on this factor. And I have to . . . let me pay a small compliment to the Minister of Health, Mr. Speaker. I think, in light of the fact of the performance of the rest of his caucus, that he must feel himself under an extreme burden because he and he alone has had the courage on the government side to stand and speak to this Bill, albeit briefly, albeit briefly — stood and introduced this Bill to this House and quietly mumbled into his chin as he announced that it would be before the Legislative Assembly of Saskatchewan that the prescription drug plan was going to begin the dismantling process in this province.

And I noted with interest the member from Wilkie, as I've stood her, he's been chirping from his seat — chirping like a dodo bird in mating season. And does he have the courage to stand in this House and to put his wisdom, put

his untapped and misunderstood wisdom on the record for the people of Saskatchewan? He stands and applauds.

I don't know, Mr. Speaker, does he applaud from his seat right now because he agrees with what I am saying, or does he do this as a sign of mockery? A sign of mockery, mockery for the rights of his constituents — for the rights of his constituents in this province who have been used to good quality, security in their health care system. And I invite the member from Wilkie to enter into this debate.

I invite the member from Regina Wascana who chirped with us this afternoon; he had lots of comments from his seat. And the member from Saskatoon, the only Tory from Saskatoon, he chirps from his seat. And has he had the courage, has he had the courage to stand and make his position clear on this prescription drug plan dismantling that we're seeing?

And I wonder, Mr. Speaker, as the Tory representative from Saskatoon, if he would care to put his words forward for everyone in Saskatoon to understand as they prepare at some point in time to make a electoral decision in a by-election of Saskatoon Eastview. Can we hear from the member from Saskatoon?

The member from Yorkton chirps, and the member from Arm River chirps, the member from Thunder Creek — but not one, Mr. Speaker, not one has the courage to stand in this Assembly and say that they stand with the Minister of Health, that they stand with their Premier in the introduction of this devastating Bill to the people of Saskatchewan.

Now, Mr. Speaker, as I address my remarks to this Bill this evening, I won't bring into this Assembly examples of sad cases of people who have been affected, many of them seniors. I think the word devastated is not too strong a word to use in many of those cases because I know that many of my colleagues on this side have done that, and done it quite adequately.

In standing here this evening, Mr. Speaker, I want to offer some reflections on the significance of this Bill, and I'd like to put them into the context of what's going on in Saskatchewan today. Because the Bill cannot be fully understood simply in isolation. This Bill is yet another symptom, yet another symptom of the betrayal of the sacred trust to Saskatchewan people, the sacred trust in this province more than anywhere else, the sacred trust of medicare. It's a betrayal of that.

And it is also, Mr. Speaker, it is yet another expression of a commitment, a blind ideological commitment of the members opposite to a process of privatization. It can be seen clearly as that and in many ways, Mr. Speaker, can be interpreted no other way. And as I enter into this debate with a tinge of sadness in my heart, because I would much prefer, Mr. Speaker, not to be debating, not to be debating because the Bill would not be before us. But I think, as a member of the opposition, of her royal Majesty's opposition, I have an obligation to present the view to the people of Saskatchewan as to what is happening and what is the process, because I think many people, Mr. Speaker, across Saskatchewan, are feeling that it's an attack; it's an attack on their security and their

faith in medicare; and that somehow it's happening in isolation. And it's not. Its happening is a part of a process, a calculated definitive political process that is being thrust on the people of Saskatchewan by the members opposite.

I notice the former minister of Health has taken his seat. He's chirped occasionally as we debated this Bill, and maybe the former minister of Health would care to share his wisdom. Maybe he would care to share, not only with his constituents but the people of Saskatchewan, how he sees this Bill as being in the best interest of Saskatchewan people.

Let me make it clear as well, Mr. Speaker, that I don't place the entire blame on the Minister of Health. I don't place the entire blame on the Minister of Health. He's acting according to orders. He's following the orders of the Premier of this province, the orders that are dictated to him. He's been given a difficult job to somehow convince the people of Saskatchewan that what they believe to be an undeniable trust in the security of medicare can no longer be for them — can no longer be for them. And I don't place the entire blame on the Minister of Health; he's following the orders from the boss. And the person who in this province has to bear the cross, has to bear the political cross for the dismantling of the prescription drug plan and other similar thrusts in this province, can be no one other than the Premier of Saskatchewan. That's where the orders are coming from, and that's where the burden must lie.

**Some Hon. Members:** Hear, hear!

**Mr. Hagel:** — Well, Mr. Speaker, on July 1 of this year many of us, perhaps all of us in this Assembly, were involved in celebrations for Canada Day. And on July 1, 1987, in our own communities all across this province, literally thousands of Saskatchewan people came out to celebrate their Canadian citizenship. And we stood in our places and in many cases reflected on one of the most beautiful gifts, the most beautiful gifts that any province could give to this nation and to our people; for July 1, 1987, Mr. Speaker, was the 25th anniversary, the 25th anniversary, the golden anniversary of the introduction of medicare to the province of Saskatchewan.

And there are literally, I would suggest, hundreds, tens if not hundreds of thousands of Saskatchewan people who look back at 1962, July 1, 1962, and reflected on that on July 1 this year, and stood with their heads held high and their chests puffed out because they were proud of the gift of the people of Saskatchewan that the province of . . . the gift to the people of Canada that the province of Saskatchewan made 25 years ago.

And how did the Government of Saskatchewan choose to celebrate the 25th anniversary of medicare? Those who were active and around in those days, Mr. Speaker, will remember the struggles to have won the victory of health security to all the people of Saskatchewan. They will remember the forces of the Conservatives and the Liberal parties that were mounted back in 1962, who said socialized medicare was a move into the dark ages — all the threats and the fears that they tried to inject into the hearts of Saskatchewan people. And today, Mr. Speaker,

25 years later, we have two generations of young people in our province who cannot imagine, they cannot imagine a province and a nation without medicare; people who have assumed, and quite correctly assumed, that medicare and all the security that it provides to each of us is a right that comes with our Saskatchewan and our Canadian citizenship.

And how did the Saskatchewan government, how did the Saskatchewan government choose to celebrate the 25th anniversary? Were there grand, gala celebrations with great recognitions and tributes to the pioneers of medicare, many of those pioneers who came from well beyond this Legislative Assembly? No, no, we didn't have any of that. Were there tributes to the dedicated professionals who work in our health care system today and some of the outstanding professionals who have worked in our health care system over the past 25 years? No, there weren't.

What we had instead, Mr. Speaker, on July 21, we had the 25th anniversary of medicare celebrated in Saskatchewan by dismissing 400 dental therapists — 400 employees case aside from our dental therapy program. And I realize that that's not the item on your debate today. And at the same time, on July 1, 1987, our government introduced the first stages in the privatization, the dismantling, the privatization of our prescription drug plan. What an irony.

What an irony that people called to serve their constituents and to serve all the people of Saskatchewan with the privilege of coming into this Legislative Assembly on the 25th anniversary of medicare would say, we'll celebrate that anniversary by making it tougher for people who are sick.

You know, Mr. Speaker, I watched with interest as the debate has carried on and one of the members opposite who has chirped frequently with great enthusiasm, the catcalls to the members of the opposition who have stood in the defence of the prescription drug plan and in opposition to Bill 34 — the member from Qu'Appelle, from Qu'Appelle-Lumsden.

And I looked back, Mr. Speaker, and I found a certificate. I know that we're not able to display and I don't intend to do that, but let me quote it verbatim; it doesn't take long. It's in big print and it's in very simple terms.

A guarantee, it says — and this is in the 1978 provincial election when part of that election was fought on the protection of medicare. And the Conservative Party of Saskatchewan said, oh no, if you elect us, medicare is safe. In fact, it'll be even better than it was before. We're going to go from number one to number one A plus.

And so they found themselves feeling obliged, obliged to make the guarantee in writing to the people of Saskatchewan. A guarantee in writing. They said, we will go beyond saying, our word is our bond. We know there is lots of reason not to trust our word; we're going to put it down in writing for you, folks. And along came the certificate to every Saskatchewan household. And what did the certificate in the riding of Qu'Appelle read? In big letters at the top, Mr. Speaker, it said, guarantee —

guarantee, you can count on this one, it's in writing from the Tory party of Saskatchewan. And it said . . . And let us reflect on those words because how sinister they seem today:

The Progressive Conservative Party of Saskatchewan is committed to continue the medicare system in our province.

And then it said:

The Progressive Conservative Party of Saskatchewan rejects any form (any form) of deterrent fees or health insurance premiums.

And then it said . . . Number three, Mr. Speaker, it said, and I quote:

The Progressive Conservative Party of Saskatchewan will abolish the unfair deterrent fees for prescription drugs.

The written guarantee to the people of Saskatchewan, people who doubted whether the PC party would stand firm in defence of the sacred trust of medicare. And it was signed, it would be signed by the member from Qu'Appelle whose initials are G.L. The same member from Qu'Appelle-Lumsden who sits and estimates his deficits to the nearest \$846 million today. And his initials are still G.L. — G.L. from Qu'Appelle. He offered the guarantee, the guarantee to the people of Saskatchewan . . . of Qu'Appelle.

And then it was signed by the then leader of the Conservative party, Dick Collver — Dick Collver, the man in charge of the computerization of medicare. Dick Collver, Progressive Conservative Party of Saskatchewan. And I ask, I ask: what kind of a guarantee can you take on face value from the Progressive Conservative Party of Saskatchewan? They say, you can't take us at face value; you can't take us for our word, so we'll put it into writing and we'll hope that you forget. We'll hope that you forget.

(1930)

Well I say, Mr. Speaker, that the people of Saskatchewan have not forgotten, and the people of Saskatchewan will long remember this breaking of a promise, the promise to protect and enhance the sacred trust of the people of Saskatchewan. And the members opposite, I believe, Mr. Speaker, will face their day of reckoning come the next election when the people of Saskatchewan say, we expect the promises to be kept.

**Some Hon. Members:** Hear, hear!

**Mr. Hagel:** — So here we come, Mr. Speaker. We stand in this Assembly debating a Bill, the effect of which has already been introduced on July 1, on the 25th anniversary of medicare.

And why are we told, why are we told that it's happening? Do we take the words of the Minister of Health? I think not. He's only saying what he's told to say; he's doing what he's told to do. The Minister of Health knows that if he doesn't push this Bill through the legislature his job is

gone, because he's got to report to the boss. He's got to report to the boss. He's got to report to the Premier of Saskatchewan.

And what does the Premier of Saskatchewan tell us is the reason why we have to have this privatization of the prescription drug plan? He says it's because it's being abused. It's being abused. Now, Mr. Speaker, if a program is being abused, somebody's got to be abusing it. So I ask, who is abusing the prescription drug plan? Is the Premier saying it's the doctors of Saskatchewan who are abusing the prescription drug plan? If that's what he's saying, did he talk to the doctors about that? I've never heard anyone even suggest that the Premier of Saskatchewan spoke with the doctors in this province about his concerns for their abuse of the prescription drug plan.

And so if he's saying that it's not the doctors — somebody's abusing it. And if it's not the doctors who are abusing it, Mr. Speaker, then it must be the people. And can we believe that? You know, Mr. Speaker, it seems to be a wild sort of notion. Now I can attest, with 100 per cent certainty, in my constituency there is not a band of renegade senior citizens who are running around with stolen doctors' prescription pads and writing out their own and getting them filled at the pharmacy. I know that's not happening in Moose Jaw North.

**An Hon. Members:** — It's not happening in Quill Lakes either.

**Mr. Hagel:** — The member says it's not happening in Quill Lakes. I don't think it's happening in Quill Lakes either.

**An Hon. Member:** — Not in Regina North West.

**Mr. Hagel:** — Regina North West, it's not happening there either.

**An Hon. Member:** — Not Duck Lake either.

**Mr. Hagel:** — Not in Prince Albert-Duck Lake, not in Saskatoon Mayfair, not in The Battlefords.

Well, Mr. Speaker, where in this province are these bands of wild senior renegades trotting around with stolen prescription forms from doctors' offices, filling out their own prescriptions and just having a gay old time living on drugs?

Are they happening . . . Is this what goes on in Tory ridings? It's not going on in any of the ridings of the members of this side. They just spoke. And I don't believe, I don't believe . . . Maybe the member from Yorkton. He stands and he sits, sits looking glum. I don't know, maybe there's some renegade seniors with those prescription drug pads in Yorkton.

**An Hon. Member:** — Not here.

**Mr. Hagel:** — No, he says, there aren't. He says there aren't in Yorkton. Well I don't know where they are, Mr. Speaker.

So if we have a Premier, a Premier who is saying we have

to change this plan because it's being abused, but the doctors aren't abusing it, and the people aren't abusing it, I ask who in the world's abusing it. Because this is the rationale that we're being told. We have to have this plan to get rid of this abuse.

Well, Mr. Speaker, when we look behind those closed cabinet doors, those closed cabinet doors that became entrenched into the institution of government at 1:30 in the morning on December 24, on Christmas eve, when it was passed in this House, Bill 5, that gave the authority — passed into the clandestine dark of the night by the members opposite — Bill 5, so that they could function behind closed cabinet doors . . . And what went on behind those closed cabinet doors that led to the inspiration for the dismantling, the privatization of the prescription drug plan?

Can we imagine, Mr. Speaker, the conversation as the Premier of this province sat and consulted, told his Minister of Health his latest idea, his latest brainstorm for the good of Saskatchewan people. Can you imagine, Mr. Speaker, the two of them sitting there saying we've got to make some changes here; we've given Bruce all the snooze we can give him and it's not helping the prescription drug plan. My goodness we've not said whoa in a mudhole, we've been open for business — and all the lingo — and my goodness we all know there's so much more we can be, they're saying to each other. And saying we got a problem, we got a problem in Saskatchewan because we've got some kind of demented form of socialized medicine.

You see in Saskatchewan, Mr. Speaker, what was happening with the prescription drug plan. The people of Saskatchewan had this strange socialized medicine experience. They'd get sick; they'd go to see their doctor; their doctor would give them a prescription. They'd go to the pharmacist and they'd pay their \$3.95 or less. They'd take their medicine and they'd get better. What a strange demented socialized medicine.

Now that's not acceptable. That's not acceptable to the members opposite who are bound and determined to carry the Saskatchewan people, kicking and screaming, into the Dirty Thirties through a plan of privatization. They said there is nothing that is so effective, whether it be socialized medicine or whatever else, that cannot be better if it's privatized. And so they said, you know we've got to have a better plan than this one. We've got to have a better plan because Saskatchewan people keeping going through this crazy series of events: they get sick, they go to their doctor, they get a prescription, they get it filled for \$3.95 or less, they take their medicine, and they get better. What an odd notion.

They said, we can do it better. We can do it better. We'll put in a new system. It starts the same, Mr. Speaker. You get sick, you go to the doctor, you get a prescription, but then the fun begins. Now, in Saskatchewan, after you got the prescription, thanks to the Premier of Saskatchewan, you get to contemplate the meaning of life because people in Saskatchewan — far too many people in Saskatchewan when they get to that step, Mr. Speaker — are asking themselves: do I go to my pharmacist and get

the prescription filled out, or do I eat?

And I ask: has the quality of life for Saskatchewan people been improved because of this privatized, socialized, privatized prescription drug plan? And over and . . . Oh, the member from Maple Creek, she's here in the House tonight, and we're glad to have her. She says it's stupid. She says it's stupid. Is it stupid, I ask you, that people get sick, go to the doctor, get a prescription, get it filled up, take it and get better? Is that your definition of stupid? I ask you, the member from Maple Creek. You have cast yourself a plan, Madam, and the plan is privatization at any cost, and let the people of Saskatchewan beware. We are seeing before us a Bill, a sinister Bill introduced by your Premier, by your Premier because he doesn't believe, your Premier does not believe in the concept of socialized medicine where people get sick and go to their doctor and get a prescription and get it filled out and take their medicine and get better.

So they said, you know, there's nothing so good as socialized medicine that can't be approved by privatization. Now this is the kind of advice that comes from the Fraser Institute, that has in the board of directors, Peter Pocklington. There is a good socialized medicine defender — Peter Pocklington. The board of the Fraser Institute, that's who's giving advice to the Premier of Saskatchewan. And what's the advice? The advice is, if you want to have a new improved prescription drug plan, you put it in place so that people go to the doctor, get their prescription, and then they make the decision. They make the decision as to whether they get it filled out. And it's called user-pay, Mr. Speaker, it's called user-pay. This is the great principle of privatization.

People in Saskatchewan, hundreds of thousands of people in Saskatchewan, remember the battle for medicare based on the principle and the belief that simply because people are citizens of this province that they have a right to security in their health care and that they should contribute to that security in their health care, Mr. Speaker, based on their ability to pay. Nobody has ever suggested that health care is free; it's not. It has to be paid for. Health care is paid for in many ways, Mr. Speaker.

Mr. Speaker, I understand that one of my colleagues would like to introduce some guests that we have in the House, and I'll just pause, Mr. Speaker, to allow for that.

**Mr. Solomon:** — Thank you, Mr. Speaker. If members permit, I'd like to introduce some visitors.

### INTRODUCTION OF GUESTS

**Mr. Solomon:** — Mr. Speaker, I'd like to introduce to you, and through you to all members of this Assembly, 22 Girl Guides from the Centennial School, the 105th company. They're in the Speaker's gallery. They are accompanied by their leaders: Sheila Neal, Debbie Smith, and Annette Deis, as well as a parent, I believe, by the name of Darlene Zummack.

I would welcome you to the Assembly this evening, and I look forward to meeting with you after a few moments to discuss some of the issues that you've been talking about

in school and with your family and friends. I'd ask all the members in the Assembly to join with me to welcome them this evening.

**Hon. Members:** Hear, hear!

### ADJOURNED DEBATES

#### SECOND READINGS

The Assembly resumed the adjourned debate on the proposed motion by the Hon. Mr. McLeod that Bill No. 34 — **An Act to amend The Prescription Drugs Act** be now read a second time.

**Mr. Hagel:** — Thank you, Mr. Speaker. I join my colleague in welcoming the girls here this evening. In many ways, Mr. Speaker, I think it's appropriate that what sits before them as they come to the Assembly to see what goes on in the Legislative Assembly, your government, that we have before us, the Bill that deals with the security of the prescription drug plan and security for their health.

In many ways, Mr. Speaker, maybe it's a positive omen that we've had these young ladies here as guests as we debate this Bill because it helps to put for me — and I would hope for all — the consideration of this Bill into the context of the protection of the health, not just for those of us who are getting on in years, but for the future generations of Saskatchewan as well.

Well, Mr. Speaker, through this privatization of the prescription drug plan and the battle cry of the privatizers as user-pay, many of these young ladies who are here tonight, of course, it will be only in their history books — the battle that Saskatchewan people went through to ensure the protection to safe and secure health care that's there for everyone.

As I was saying, Mr. Speaker, and I would want these young citizens to know that health care is not free. Health care is not free. Because there's no charge for health care, that doesn't mean it's free. It's paid for in many kinds of ways. It's paid for through the income that comes to our government from our natural resources, and that's an important factor in being able to provide good quality health care. It's paid for through the sales tax, which is referred to as the E&H tax, the education and health tax, Mr. Speaker, and it's paid for, as well, by all of us through the payment of our income tax.

Now all of those, those are other topics for debate, and I won't comment on those because those are getting more hefty too, Mr. Speaker, but the point is this, the point is this: is that Saskatchewan people have considered it to be a sacred trust that our health care is there for us to use when we're sick, not when we're sick and have money, but when we're sick. Health care is there to use when you're sick — that's why you have it.

What we're doing with this Bill, Mr. Speaker, is attacking that fundamental principle of health care that is so sacred, so close to the hearts and the souls of Saskatchewan people. And now we have in Saskatchewan a plan which doesn't say any longer you get sick, you go to the doctor, you get your prescription, you go to the pharmacist and

pay your \$3.95 or less, you take your medicine, and you get better. It says that you take your medicine if you can afford it, and in your family you pay every dollar through the first \$125, and then after the first \$125, Mr. Speaker, you pay every dollar again, but when you collect them, then you can send some in. A month or two later you get a rebate for four-fifths of that amount.

And so what we are seeing, Mr. Speaker, is the introduction of user-pay health care in the province of Saskatchewan — in the province of Saskatchewan, which gave the people of Canada the beautiful gift of no-cost medicare, Mr. Speaker.

(1945)

I think that may help to explain somewhat why I say that I'm saddened to stand here this evening to debate this Bill. And while I feel it is a sinister move by the Government of Saskatchewan to introduce this prescription drug plan that we have now, a user-pay prescription drug plan for the people of Saskatchewan, a privatized — the privatization of the prescription drug plan.

And is it any less expensive? Because we're told we can't afford, you know, we can't afford to care any more, we're told by the Premier of the province. And I don't believe that, Mr. Speaker. We're not saving one single penny. There is not one single penny being saved through the introduction of the prescription drug plan.

All that's happening, Mr. Speaker, is that instead of the cost of the prescription drug plan paid through the collection of resources and revenues that the provincial government has, the costs will now be borne proportionate to how sick people are. It's a shifting of the cost of health care from that collective solution, that co-operative solution that is so much a part of the culture and the nature of Saskatchewan people, a shifting of the burden to the backs of the sick, Mr. Speaker. And most cruel of all, Mr. Speaker, most cruel of all is the shifting of the burden to the backs of the sick who are poor in the province of Saskatchewan.

Now the Premier and the Minister of Social Services, he's here and grinning like a Cheshire cat too. They say, oh, no, no, no, that's not true, because people who are on social assistance still have the same rules as before. And I admit that's correct, Mr. Speaker — thank God. I think God for that. But there are many people in Saskatchewan, many people in Saskatchewan who are the working poor, who are not eligible for social assistance, and whose lives are being absolutely devastated by the introduction of the prescription drug plan.

I had a conversation just today, Mr. Speaker, with an individual in my constituency, a family with a total income of \$850 a month who are faced with drug costs of \$550 a month, who are just desperate, Mr. Speaker, for a solution. Now hopefully some things will happen to help reduce that load for them. But even under the new plan, Mr. Speaker, even under the new plan at its best, it is going to cost those folks with their \$850 a month income — and they're not eligible for social assistance — it's still going to cost them, after they've paid that first \$125, an additional amount in excess of \$100 a month on an

income of \$850. And I ask: where is the caring? Where is the compassion in that, Mr. Speaker?

So it's not less expensive; it's only less expensive if you have some kind of nefarious sort of idea in your mind that the government is something other than the people. And there are those who believe that the government is the people, and that when the government bears the cost of socialized medicine and socialized health care, it bears that cost for all the people, and all the people contribute to that. So we're not saving a single penny; not a single penny is being saved in the province of Saskatchewan. All that's happening is that increasingly the cost of prescription medicine in Saskatchewan is being borne by the sick.

And I'm proud to say, Mr. Speaker, that I stand in my seat in this Assembly firmly in defence of the belief that all people in Saskatchewan have a right to expect from their government the security of health care regardless of their income and regardless of their ability to contribute. And that comes, Mr. Speaker, merely as a statement of their citizenship. Whether their citizenship means that they're 8 years old or whether it means that they're 80 years old, we all have a right to that same basic protection for the security of health care in our province. And I'm proud to say, Mr. Speaker, that I stand firm in defence of that principle, and I see it being eroded today with Bill 34 — Bill 34 to privatize, to privatize, to user-pay the prescription drug plan of Saskatchewan.

Well, Mr. Speaker, this prescription drug plan has given a whole lot of folks in Saskatchewan a new experience. Many people have been forced to reflect on the meaning of life and their priorities and values, and in a way that's never happened before. And isn't it sad as well, Mr. Speaker, that one of the spin-off effects is that we're making beggars out of sick people — beggars out of sick people. You see, Mr. Speaker, when the prescription drug plan is available to everyone, we're all the same. When we all paid that fee of \$3.95, or in some pharmacies, less, we were all the same. And we got our prescriptions filled out, we got our medicine, and we were all dealt with the same way. None of us felt that we were better or worse when we got our prescription filled out.

But what happens today now under this new, improved prescription drug plan introduced by the Premier of Saskatchewan? What we have today then, Mr. Speaker, are people having to make the decision: (a) do they get their prescription filled out? And the (b) if they can't, what do they do? Do we have a plan in place to automatically help people for whom this imposes an unbearable burden?

No, what we have is a hare-brained scheme brought to this legislature by the Minister of Health, as the messenger boy for the Premier, who said, you know folks, if you've got a bit of difficulty paying for your medicine now, all you have to do, all you have to do is get down on your knee and ask for help. We're going to make a little committee, a little committee, and we're going to pretend that it's nothing to do with the government's decisions. And if you're really in dire straits, what you do is this — you fill out a form, you fill out a form that says, number one, you have to state what your income is. You

have to declare that you're poor. You have to declare that you're poor to get help on the prescription drug plan, and then you have to say, not only are you poor, you've got high prescription drug costs — high prescription drug costs.

Ah, and the Minister of Health, he chirps here. Maybe he's got some of those renegade seniors up in Meadow Lake who are running around filling out their own prescription drug . . . prescriptions on their pads, stolen from doctors' offices. I don't know. I don't think so. But he knows, he chirps, Mr. Speaker, because he knows what he's doing is not right. He knows that it is wrong in the province of Saskatchewan to say to people, you've got to state that you're poor and you've got to state that you've got an unbearable burden, and then we'll give you some help. And that's the help we'll give you? We'll give you a blue envelope. What a breakthrough! You're poor. You've got high medicine costs, and we'll give you a blue envelope.

And what does the blue envelope do? Well the claim is you'll get your rebate if you've been able to find a way to pay those medicine costs. You'll get your rebate back in a couple of weeks if we're really speedy.

And I ask, Mr. Speaker, where in there is the defence of the principle that all people in Saskatchewan, regardless of their income and regardless of their age and regardless of their circumstances, have a right to be treated equally by our health care system? Can we endorse a health care system that says, there is a system for the rich and a system for the poor? Surely we can't. Surely we can't, Mr. Speaker.

Some of the other help that you can get if you've been able to prove that you're really poor and your costs are really high, well, maybe we can make an arrangement here that you just pay the 20 per cent. You don't have to pay it all and get this hurry-up envelope to get back the 80 per cent rebate.

And there is not a single person in Saskatchewan, not a single family in this province that is better off because of that. There is not a single individual or a single family in the province of Saskatchewan that is paying less for their medicine to get better today than they were before the introduction of the dismantling and the privatization of the prescription drug plan on July 1, the 25th anniversary of medicare. Not a single family in Saskatchewan is better off and is feeling more secure in their health care system, Mr. Speaker.

I also wonder, Mr. Speaker, why it is that the Minister of Health doesn't allow those of us in this Assembly to even facilitate the access to this committee that he's created. And I wonder, Mr. Speaker, why it is that when my office contacted the office of the Minister of Health and said, could we at least get some of these application forms for people to send into the committee to ask for special help for the prescription drugs? Why were we turned down? Why in the world would a government that is dedicated to quality and accessible health care to all its citizens make it . . .

**An Hon. Member:** — Impossible.

**Mr. Hagel:** — I don't know if it's impossible . . . my colleague says impossible — but more difficult to get hold of the forms because now you've got to contact the Minister of Health and then they'll send you out a form, then you fill out the form and send it in. And it doesn't jibe, Mr. Speaker. It doesn't jibe. Even when you look at the futile and the minuscule attempts to provide help for those who are most devastated by these changes, when members of the Legislative Assembly ask for something as simple as the form so that we can give them to people and let them get moving, we're denied. And it doesn't wash, it doesn't wash.

Well, Mr. Speaker, when I started out this evening, I said that I wanted to cover some items related to the debate in this Bill that are different from the kinds of propositions that have been put forth by the members opposite. And I wondered aloud why all the members of the government, all of them under the same orders from the Premier of Saskatchewan, as the Minister of Health, why none of them has had the courage to stand in this Assembly and to put on record why they think that this is better for their constituents and the people of Saskatchewan. Not a single one, not a single one.

I can only assume . . . (inaudible interjection) . . . Oh, we get the member from Rosthern, he's chirping here now, and any month now he could get in on the debate. I see him screwing up the courage. If this debate goes on for a month or two, he may no longer be able to resist the urge to enter the debate. And I'm sure the people of Rosthern would like to know why their member thinks that this is better for them.

You know what I think, Mr. Speaker? I think we will not hear from a single member opposite, I'm sad to say, because the Premier of Saskatchewan has got their lips locked — the lock is on. Their lips are locked by the Premier of Saskatchewan who has said we are bent for leather on this exercise of privatization. We're going to ram it through the legislature, and I don't want a single one of you to stand and say what you think. Because you know, Mr. Speaker, I think there is a little conscience over there. Every now and then you see a little light go on. Every now and then you see a little heartbeat.

And maybe over there is, maybe over there there is a little compassion. And the Premier of Saskatchewan knows that if the members of his government stood and said what they thought, what might sneak through those locked lips are the words that say, we think this is wrong, we think this is wrong.

**Some Hon. Members:** Hear, hear!

**Mr. Hagel:** — We have grown up in this province, those members opposite will say, and we know about the sacred trust of medicare, and we believe in our heart of hearts that what our constituents tell us, when we have the nerve to go home, when our constituents tell us we're doing the wrong thing, we believe that what those constituents tell us is right.

But the Premier's got the lock on. The lips are sealed, Mr. Speaker. And I don't believe, I don't believe that there's a



member opposite who's got the courage to face the Premier of Saskatchewan and to stand in this Assembly and to express their disapproval for Bill 34 and to express their support for the people of Saskatchewan and to express their support for the sacred trust of medicare for all the people of Saskatchewan.

(2000)

And I unfortunately, Mr. Speaker, find myself standing here and believing that when this debate comes to an end, every member of the opposition will stand for what is right, and every member of the government — having uttered not a peep — will stand and do what the Premier tells them that they have to do. And what a sad statement, what a sad statement for the members opposite and the Government of Saskatchewan and, most seriously of all, the Premier of this province.

Mr. Speaker, it will be no secret to anyone that I will be standing in opposition to Bill 34. I will be standing for the interests of my constituents, and I will be standing, Mr. Speaker, for the interests of the constituents of those members opposite as well — for their constituents who also believe and have a right to believe that the sacred trust of medicare is a trust that was won with a lot of battle and a lot of hard work and not won easily. But it is a sacred trust, which must be fought for and defended in the province of Saskatchewan, which gave to the people of Canada the gift of medicare 25 years ago.

Mr. Speaker, I will be voting clearly in opposition to Bill 34. Thank you.

**Some Hon. Members:** Hear, hear!

**Mr. Koskie:** — Well thank you very much, Mr. Deputy Speaker. I want to start by saying that this is one of the most important Bills before this legislature, and the only amount of speaking from the other side was a two and a half minute short dissertation by the Minister of Health. And here is a government that says they are improving the health care in Saskatchewan, and not a single one have the nerve or the decency to stand and try to support what they have done to the drug program and to medicare in Saskatchewan.

And I say to you, Mr. Deputy Speaker, that this is an important Bill. It's important because what at least has come out of the closet is the real Tory government philosophy, and that is the undermining of the health care system in this province, and that's what it's about.

And I'm going to take a little time here to indicate to the people out in the various cities and towns across this province, who have been phoning our office and indicating and asking us to continue to fight this Bill . . . People, old people, and those that have children who need medication, are phoning our office and saying to all of our MLAs, stand up, fight this vicious cut in the drug program. And I'll tell you, I don't care what this smiling member — used to be from North who left and went to the South — indicates. He may think it's funny but to the people who needed the drug program as it was, it is now no laughing matter, my friend.

**Some Hon. Members:** Hear, hear!

**Mr. Koskie:** — And I want to say to you here that basically what they've done is to destroy an outstanding drug program that we had here in Saskatchewan. And first of all what they did is to place on a premium. For every . . . You have to pay up to the \$125 before you get any assistance, and then thereafter what they have required the people of this province to do is to pay the whole cost of the drug thereafter and to wait — and to wait for a rebate.

Last night I talked to some seniors who have said that they have, shortly after the program came into effect under this new method of payment, paid the full amount for the drug, submitted to this government for the refund of the 80 per cent, and they are still waiting. And they are waiting weeks, and they're waiting, and they can't afford not to have that money refunded to them. And I'll tell you, the strain that has been placed on those who are sick, to our seniors who built this province, who are the in need mostly of drugs, the pioneers who built this . . . And the Tories attack them and they put a tax on the sick. They taxed every other ordinary Saskatchewan person and they said, we've forgotten one; we've forgotten to tax the sick, and that's what they did in this Bill.

And I'll tell you that the people of this province are concerned and they are speaking out against this Bill. And I'll tell you they are speaking out and they are phoning us and they have signed petitions indicating their concern. And there are people from every political party who are joining in this fight to stop this vicious Tory attack on medicare and our drug plan.

**Some Hon. Members:** Hear, hear!

**Mr. Koskie:** — What callousness; how callous and how deceitful. How do you look in the mirror after you've promised the people of this province . . . as my colleagues from Moose Jaw North said, sending out certificates, if you could believe it, that they were going to improve it. And I'll tell you, every one of you on the other side gave that commitment to the people of this province, and you deceived them.

And they did it in the drug program, and they did it in the dental program, and they have the callousness to put ads in the paper. The new dental program — if you could feature it — as though it was improved. And I'll tell you, they don't have the guts or the decency to stand up and explain why they're . . . put a tax on the sick. They just won't do it.

And so I say to you, this is a very, very important Bill, and I think we have to take time . . . And we don't apologize for debating this important Bill on behalf of the thousands of people across this province. And I'll tell you, you're not going to deny us the right to continue to debate it either with your half-truths and deception that you're trying to pour out to the public. I'll tell you, you're the ones that are incompetent; you're the ones that deceived the people of this province. And I'll tell you, we'll be here and debating this Bill as long as it takes that every individual citizen in this province know how you have raped the drug program which was assisting those who needed it.

I say to you, Mr. Deputy Speaker, that we are continuing to communicate with the citizens across this province. Thousands of them are joining in petitions to demonstrate their concern and respect to this here. And for that reason, we are indicating and urging the government to come to its senses, to realize that the last group of people in society that you should tax are those that are sick. Just imagine, that's what they're doing, putting a tax on those people that are sick, that need drugs. And the little fellow from Regina South laughs; he thinks it's funny. Yes, he really thinks it's funny to put a tax on those who need medication. Very funny, I'll tell you.

But as I said, Mr. Deputy Speaker, that really what we have here is an exposure of a true Tory philosophy. And I'll tell you it's consistent, because here you have them undermining the drug program and placing extra burden of cost onto the individuals using the drugs. And it's a consistent Tory approach because in Ottawa they're doing the same thing; they're extending the patent laws so that the drug companies can make more money and charge more to those who are using the drugs.

And I'll tell you, the people of Saskatchewan, you might fool them, but you can't continue to deceive them. And the reckoning day is coming. You can't continue to deceive the people of Saskatchewan because I'll tell you, when the next election comes, most of you won't even have an opportunity to return to this legislature.

But if we take a look, Mr. Deputy Speaker, at the unbelievable deceit — deceit — to the people of this province, just imagine that they promised to improve the drug program, and after they're re-elected, the first thing they do is to erode one of the best programs in North America. Saskatchewan had a great reputation. Saskatchewan was the social laboratory of North America. Saskatchewan pioneered medicare. And Saskatchewan built the best dental program and the best drug program in all of North America.

And the people of this province, I'll tell you, we're proud of that tradition. And the pioneers who built this province were proud to have been able in a co-operative way build the greatest health care system in North America.

And today what we see is new priorities, priorities by the PC government. Corporate taxes in the recent budget have been cut, but taxes have been increased and placed on those who are sick. That's Tory philosophy. That's the true Tory position. And I'll tell you, the people of Saskatchewan will never forget.

I want to say, Mr. Deputy Speaker, that it's easy to govern for the rich and the powerful. It takes no genius to govern for the rich and the powerful and to be puppets and mouthpieces for them. But I'll tell you, it takes integrity and decency to build a society where individuals in that society, in a co-operative way, build social program and a health care program that will help those who are sick.

Yes, this PC government said in their last budget they were going to build, they were going to diversify, and they were going to protect. Well I'll tell you, Mr. Deputy Speaker, go back to your constituency, each of you, and

ask whether the people of Saskatchewan are agreeing with the fact that you're protecting them. And I'll tell you by the phone calls and the letters that we are getting they're not in agreement with the vicious policies that you have put in place. These are just hollow words, rhetoric, no longer believable. And the Premier of this province is the steward of this vicious attack on our health care program.

And I say to you, Mr. Deputy Speaker, there is a better way of doing it. There was a better way of doing it. People in society can join together, can join together to share the responsibilities of helping to pay the cost of those who are sick. And what we're doing here is the reverse. We're saying if you're sick, what you're going to do is to be taxed now by this Tory government.

And I say, Mr. Deputy Speaker, what priorities? As I said, corporate taxes are down. They have millions of dollars for self-serving advertising. They have millions of dollars for their patronage. They have millions of dollars for the Peter Pocklington, but to the pioneers and to those who are in fact requiring the use of drugs they say, no, we don't have it, you've got to pay now.

(2015)

So, Mr. Deputy Speaker, I want to relate to you a report that was made by one of the most distinguished lawyers here in Saskatchewan. And I remember when he was attending an old gentleman's 100th birthday. It was J.M. Goldenberg, who had been the lawyer for this gentleman that was having . . . Mr. Clark Wilson, who are having his 100th birthday. And he spoke at that birthday celebration with friends and neighbours, and one of things that Mr. Goldenberg, who had a very successful law practice, said to that crowd of friends of Mr. Clark Wilson's who was celebrating his 100th birthday, and he said, I just want you all to remember what a great medicare system that we have here in Saskatchewan. He said, do you realize that I was sick recently, and he said, I went to the hospital. I received pretty good care, he said, well attended to. But he said, what a remarkable system, whether you're a distinguished lawyer or just an ordinary truck driver, mechanic or . . .

**An Hon. Member:** — Horse doctor.

**Mr. Koskie:** — Or hose doctor. He said there was equality. Every citizen in society was allowed to be given the same degree of treatment. And that is a tribute, that is a tribute by a distinguished lawyer, a distinguished pioneer of this society.

And what is happening now? We see the vicious erosion of the drug program. But not only are they . . . not only are they charging people more but they're also cutting back in the basic programs and the coverage and the drugs that are under the program.

Some of the drugs are being taken off, can no longer be purchased under the prescription drug program, and indeed they're charging people more. And so, Mr. Deputy Speaker, what separates the New Democratic Party from the government opposite, the Premier's PC government, is that we want, in our party, to build a

society of compassion and of caring for our people who are sick.

And so therefore, Mr. Speaker, we're of course not going to be supporting this Bill. And we have a lot more that we're going to be saying on this Bill, Mr. Deputy Speaker. And at this time I beg leave to adjourn the debate.

**Some Hon. Members:** Hear, hear!

**Mr. Speaker:** — The member's asked for leave to adjourn debate. Is that agreed?

Leave not granted.

**Mr. Speaker:** — Debate continues.

**An Hon. Member:** — Point of order. Point of order.

**Mr. Shillington:** — ... (inaudible interjection) ... No, he didn't. No, he did not. He moved the debate adjourn.

**An Hon. Member:** — I moved that the debate adjourn.

**Mr. Speaker:** — The member asked leave, but it is a motion of adjourned debate. Call in the members.

(2041)

Motion negatived on the following recorded division.

**Yeas — 12**

Blakeney	Mitchell
Brockelbank	Upshall
Shillington	Solomon
Koskie	Kowalsky
Tchorzewski	Atkinson
Rolfes	Hagel

**Nays — 29**

Muller	Klein
Duncan	Meiklejohn
McLeod	Toth
Andrew	Sauder
Berntson	McLaren
Lane	Hopfner
Taylor	Petersen
Swan	Swenson
Muirhead	Martens
Maxwell	Baker
Schmidt	Gleim
Hodgins	Neudorf
Gerich	Kopelchuk
Hepworth	Britton
Hardy	

**Mr. Koskie:** — Thank you, Mr. Speaker. As I said before moving to adjourn the debate, Mr. Speaker, I indicated that this was a very important Bill, one of the most

important Bills before this legislature. Because what it is, it's a clear betrayal of the PC government opposite, in accordance with their election promises to the people of Saskatchewan.

I say, Mr. Speaker, that we can approach this Bill, and we are going to continue to debate it, because we feel that it's a Bill that is bad for the people of this province. It places a tax on the sick, and I say to you that we will here pledge to the people of Saskatchewan that we will continue to debate this Bill because it's a bad Bill; it's a betrayal; it's a destruction of medicare.

**Some Hon. Members:** Hear, hear!

(2045)

**Mr. Koskie:** — And I ask the back-benchers on the government side to screw up their courage at least, and to confront the people of Saskatchewan and try to justify these cruel cuts and the wrecking of the drug plan. And I say to you, Mr. Speaker, that we are going to continue to debate, while the government ultimately can win because of the majority. On behalf of the people of this province we are going to put up speaker after speaker to indicate our scorn for the betrayal of the people of this province.

**Some Hon. Members:** Hear, hear!

**Mr. Koskie:** — Members on our side have consistently stood and indicated the pledges that the members opposite gave to the people of Saskatchewan. And in pieces of literature, time after time they indicated that they were going to improve the drug program. Well I'll tell you, this is a Tory improvement of a drug program, but the people of Saskatchewan don't believe that they improved it. In fact, they have placed a tax on the sick.

So we're going to do our job here, and we're going to debate this Bill. And as I said, we're going to have speaker after speaker debate it. And I'm saying to the people of Saskatchewan, we are on your side in this fight, and we're going to stand shoulder to shoulder with the people of Saskatchewan to try to drive some sense into this government.

**Some Hon. Members:** Hear, hear!

**Mr. Koskie:** — This government with its false priorities, a government that can cut corporate taxes, a government that can hand out to Pocklington \$10 million, but a government so callous, so deceitful that they turn on the pioneers — many of our pioneers who built this province — and lay and destroy the drug program and make them pay.

I say to the people of Saskatchewan as we enter this debate, we're prepared to join shoulder to shoulder to shoulder with you to try to get the Premier of this province to keep his trust with the people of this province. Unless he changes this Bill and does away with it, he has breached every commitment in respect to health care. And he got elected on it, and many of you over there did the same thing.

I can go through brochures, but we have done it. I don't

know how you can look in the mirror having deceived the people of this province to the extent that you have. But I know that you're having trouble out at your ridings because the people of Saskatchewan are rising in revolt against this massive destruction of medicare. And I say to you, Mr. Speaker, that we are going to do our job here, and what we are asking the people of Saskatchewan to do is to join with us on an attack against this vicious Bill undermining the drug program.

**Some Hon. Members:** Hear, hear!

**Mr. Koskie:** — We pledge to the people of Saskatchewan to do our share, and we will debate it, and we will urge the government to reverse this vicious Bill. In turn I ask the people of this province to join with us also and to communicate through petitions, but more than that to join in a massive campaign of letter writings to their MLAs who refuse to stand in this House and to justify this vicious Bill that is destroying a significant part of medicare. So I'm asking the people of the province to join the pioneers, those with a social conscience, those who helped to build the best health care in North America. I ask the people to join with us in a massive writing protest to the Premier of this province. It was the Premier's decision. The buck stops with the Premier. He is the one that betrayed the people of Saskatchewan. Those people, many of them ran believing that the Premier what his word was good. But the people of Saskatchewan have found that you can't believe the Premier.

And I'm going to take a look at some of the advertising that these boys did in indicating how well their program was. And we have list after list of them, indicating how good . . . how they were going to improve it. And here's one here: "Continue medicare at no extra cost and upgrade health care." "Eliminate dispensing fees on all drugs prescribed for senior citizens." That is a promise, a commitment, by the Tory candidate, endorsed by the Premier of this province, saying, "Eliminate dispensing fees on all drugs prescribed for senior citizens." Well, I'll tell you, the seniors didn't get what was promised, Mr. Speaker. They got the real Tory medicine, a total wrecking of our medicare, a tax on the sick. And I say to you, to the Premier of this province, shame on him for betraying the trust of the people of this province.

Mr. Speaker, those are not the only ads that members of the Progressive Conservative Party put out during the election campaign. They say here: "Expand drug plan to include all prescription drugs." And you know what they did, Mr. Speaker? They have cut back on the number of drugs that are covered under the drug program.

And so I say, Mr. Speaker, the New Democratic Party . . . and I think the people of this province have a great trust in the New Democratic Party in being the steward and the caretaker of the health care system in this province. And that is why so many people now are turning to the New Democratic Party and saying, if only we had known. If only we had known that this Premier would betray the people of this province, we would never have trusted him again. And I'll tell you, once this Premier loses the trust of the people of the province — and he has — he will never be Premier again. That is my prediction.

One thing that is sacred to the people of this province is the quality of health care that was built over the years. Here in Saskatchewan we can take claim of building the finest and first medicare in all of Canada and in North America. Here in Saskatchewan we gave protection to our people of our society. And now after four years, five years in government, we had another re-election. And again the people of Saskatchewan were told that their health care was safe but little did they know, Mr. Speaker. Little did they know that this Premier, once elected again, would deceive the pioneers who built that program, and that's what he has done.

And so I say, Mr. Speaker, what is happening here in this Bill is really that the true philosophy of the Tory party opposite is coming to the forefront. They don't believe in having a sharing and caring society. They say, let the rich look after themselves and let the poor struggle in their poverty. But I'll tell you, that's not the philosophy of the New Democratic Party, and that in the hearts of Saskatchewan people is not the philosophy. They know that the health care that we have grown accustomed to using was the best.

And what they have done here is an erosion of medicare. They have denied accessibility to drugs to the poorest and those who are sick. Now that has to be callous and that is the true philosophy of the government opposite.

And so, in closing my remarks, Mr. Speaker, I again urge the people of this province that we . . . And we give this commitment, that here in this House we are going to stand and debate it, and we are going to indicate and explain that every single individual in society know the seriousness of the massiveness of the cuts in this drug program. And again I ask the people of this province to join with us to fight this Bill, and unless it's changed, I say to them, this government can no longer deserve their trust. This Premier has betrayed young people, middle-class people, seniors, pioneers. He destroyed the trust he had built up during the first three or four years of his mandate.

And so, Mr. Speaker, what we need to do here is to urge the members, the back-benchers, to take some courage to stand up for the ordinary Saskatchewan people, to ask your Premier and your Minister of Health, who is the puppet for the Premier in this instance, ask him to change this here. If we have millions of dollars for advertising self serving, surely we have money to help those to purchase drugs. The last time I . . . The last thing that I think we should be doing is those who are sick, who are under prescription drugs, to cast and to place upon them yet another burden — a financial burden during the period of time that they're sick. But that's what it's done. It's a tax, Mr. Speaker, on the sick; it's a tax on those who need medication. And I say that's a wrong priority. I say to you, to change this Bill. We ask the government to revert back to what we had, but go further to keep their commitments to remove all of the dispensing fees included on the seniors, as they had promised. That's what we're asking. And again, I challenge members opposite to pucker up their courage, stand up and be counted, stand up and defend your vicious acts.

And so, Mr. Speaker, naturally what I will be doing then is voting against this Bill, and, as I say, we will continue the debate and we're going to ask the people of this province to join us.

**Some Hon. Members:** Hear, hear!

**Mr. Solomon:** — Mr. Speaker, I rise this evening with some hesitation. I was hoping that the members opposite, whether they be front-benches, or middle-benches, or back-benches, whether they be from the urban area or from the rural area, or whether they represent young people, old people, families, farmers, workers, to see if they would get up and speak on this Bill.

I've had some patience, our caucus colleagues here have patience, and we're wondering where the members opposite stand on Bill 34 — an Act to gut the prescription drug plan. And we see, Mr. Speaker, that the members of the government, in the cabinet, and the private members in the back-benches don't have the balls to stand up. They don't have the guts to get up and talk about this Bill, which is a clear attempt on the part of the government, Mr. Speaker, to destroy medicare.

I notice the member from Melville, I notice the member from Melville, Mr. Speaker, is silent in his chair. The others are squirming and squealing and whimpering and whining from their seats. They won't stand up and tell the people of this province why they're gutting the prescription drug plan and hurting people who are sick and can least afford the plan that's required for their health.

**Some Hon. Members:** Hear, hear!

**Mr. Solomon:** — When I was in Melville, Mr. Speaker, on Tuesday evening I talked to about 30 or 40 individuals that I had a chance to speak to out of the 150 that were at this meeting that I attended. And the 30 or 40 that came up to me after the meeting told me very clearly, Mr. Speaker, that the member for Melville, who is the minister in charge of Labour and Social Services, will be serving his last term as the representative from Melville, because they feel, Mr. Speaker, very clearly that he has betrayed the trust that they have put in him.

I had spoken to people, Mr. Speaker, that I have never seen in a New Democratic Party meeting before, in Melville, tell me these things. They are embarrassed with the member from Melville for his position and the stand with respect to medicare, not to mention his comments that he's made throughout the province that have totally embarrassed hundreds of people, including his own caucus.

But I want to get back to Bill 34. This Act which will destroy and gut the prescription drug plan. Mr. Speaker . . .

**Mr. Speaker:** — Order, please. Order, please. I recognize the member from Melville.

**Hon. Mr. Schmidt:** — There is certain parliamentary language, and we have the member from Regina North West referring to matters that are not before the Assembly.

This member does not use unparliamentary language in this Assembly. I think, Mr. Speaker . . .

**Mr. Speaker:** — Order, please. Order, please. I'm having difficulty hearing the member because the member to my left is interrupting.

**Hon. Mr. Schmidt:** — Mr. Speaker, you should review the record and consider all the remarks of this member, that there are certain vulgar forms of language that are not acceptable in this Assembly.

I believe that the member opposite has used such language and that the Speaker should consider the nature of the language of this particular . . .

**Mr. Speaker:** — Order, please. Order, please. I think the hon. member has the right to raise his point of order without being interrupted, and if any other member wishes to speak to the point of order he raises, I will give them that opportunity.

**Hon. Mr. Schmidt:** — Mr. Speaker, I think you should review the record and look at the way the member from Regina North West refers to the anatomy of men in this Assembly and that you should consider the language that he is using here and rule accordingly. And I ask you to examine the record for tomorrow.

(2100)

**Mr. Speaker:** — I've heard the member's point of order, and I will take note of it.

**Mr. Solomon:** — Mr. Speaker, just to clear the record. What I meant to say was they don't have the courage and I apologize if it was taken the wrong way. Mr. Speaker, the member from Melville obviously doesn't have the courage to stand up and speak on the Bill. He doesn't have the virility to stand up and tell his constituents where he stands on the prescription drug plan amendments, the gutting of the plan, under Bill 34.

But this Bill, Mr. Speaker, is a typical Tory, a typical Conservative Bill. It's a tax which is an unfair tax. It's a tax on the sick, as my colleagues have indicated, and it's a tax not only on the sick, Mr. Speaker, but on those who have the least ability to pay, the ones that are the most vulnerable in society, the most powerless. And this government, time after time, since October 20, 1986 has introduced legislation, has introduced cut-backs which affect the powerless the most in this society.

And this action, Mr. Speaker, this Bill is another example of betrayal with respect to their commitments in the past. They have double-crossed the people of this province, in my view, and I believe, Mr. Speaker, that the people of Melville and the people from all parts of this province are going to look upon this Bill as another double-cross by the Conservative government and the members opposite.

**Some Hon. Members:** Hear, hear!

**Mr. Solomon:** — The government opposite, Mr. Speaker, has promised . . . And you've seen the promises in writing, and I'll just go over a couple of them. They promised and

guarantee “that the Progressive Conservative Party of Saskatchewan rejects any form of deterrent fees or health insurance premiums, that the Progressive Conservative Party of Saskatchewan will abolish the unfair deterrent fees for prescription drugs.” It’s been signed by the member for Qu’Appelle-Lumsden. It was signed by the leader of the Conservative Party. It was distributed to thousands and thousands of individuals across this province. It was a commitment not in word but in writing. And as we go around the province, Mr. Speaker, talking to people and listening to what they have to say about this incompetent government of antonyms, what we hear, Mr. Speaker, is that this guarantee was not wroth the paper it was written on. And that’s what people are telling me. And they’re telling me because they have every reason to believe that to be the truth. And you know that, and the members opposite know that. But they made that commitment; they made that commitment in writing, and they have delivered the opposite.

This is a government, in my view, Mr. Speaker, of opposites. It’s a government of antonyms. Whatever they do, whatever they say . . . I should say, whatever they say, they do the opposite. Whatever they promise, they break. Whatever they suggest one day, they deny the next. This is not a Progressive Conservative government. It’s an antonym government.

You get the Premier up here in the House talking about the benefits of free trade. We all know it means the opposite. There is no benefits to free trade. They get up and talk about the benefits of their new prescription drug plan. We know there is no benefits. We know there is no benefits to the prescription drug plan, Mr. Speaker. Not on your life.

My colleague from Saskatoon South, earlier this afternoon, talked about the four basic underlying corner-stones of medicare: that medicare be universal, that it be accessible, comprehensive, and that public funding is the major element. But this government of antonyms, when it comes to health care and prescription drugs, Mr. Speaker, this double-crossing, deceitful government, what they have in terms of four underlying principles — their four underlying principles are not universality or accessibility or comprehensibility or public funding. Their four principles are patronage, massive corporate give-aways, gross mismanagement, and cut-backs. That’s the four corner-stones of the Conservative antonym government opposite.

When the government opposite is in a difficult situation, Mr. Speaker, they don’t bear down and work harder and try to find positive things to do to resolve the problems. What they do is they resort to self-indulgence and patronage; they start giving away our resources and our cash to out-of-province corporate friends, or out-of-nation corporate friends; or they mismanage programs. We’ve heard example after example on, including the drug plan, where they cut one program or 10 programs or 20 programs. Rather than bear down and accept the responsibility and obligation of government, they desert it and they get eaten alive with their four corner-stones of patronage, give-aways, and cut-backs and mismanagement.

Mr. Speaker, in December of ’86, when we were first elected, at least in this House when I was re-elected, we talked about the drug patent Act and at that time I suggested that the proposed changes to the federal drug patent legislation, if it were to take place, would mean very simply that there would be less competition between pharmaceutical manufacturers, that there would be increased prices in drugs. I predicted an erosion of medicare in Saskatchewan and in Canada and, as well, hundreds of millions of dollars more leaving the country, stifling economic development, job creation and, of course, massive increases in taxes.

And I predicted at that time if the proposed changes to the federal drug patent legislation took place, that that would mean as well that profits of U.S. and European drug manufacturers would sky-rocket beyond their high prices right now and record levels. And in terms of Bill 34, Mr. Speaker, I predicted as well that Saskatchewan people would pay a great deal more for drugs.

And now we’ve seen . . . with this following of what I predicted, we see the prescription drug plan being gutted. We see, Mr. Speaker, not only that, but we see very clearly who the hand that pushed the pen that signed the agreement is . . . (inaudible interjection) . . . And I’m asked: who is the hand that pushed the hand that signed the agreement in the drug patent legislation? Well, Mr. Speaker, it’s the same group that is the hand that pushes the pen that is signing the agreement to gut the prescription drug program.

And that same hand, Mr. Speaker, is the hands of the Conservatives and their friends, the drug companies. And who’s benefiting from this, Mr. Speaker? Who is benefiting from the changed Bill 34, the gutting of The Prescription Drugs Act? You know who’s benefiting? Well I just happen to have a couple of names of organizations that are benefiting. We have the Smith Kline French Pharmaceutical Company as benefiting; we have Merck Frosst, a large multinational, benefiting; we have Lilly Pharmaceuticals, all of those from out of the country; we have Desbergers; we have all kinds. And these are a short list, Mr. Speaker, of the hand that’s pushing the pen that’s changing the legislation to fill the pockets.

The reason these are instrumental people in terms of the Conservative legislation tonight that we’re debating is because they contribute money to the Conservative Party. They provide the grease to oil the machine, the public relations machine of the Conservative Party. I predict, Mr. Speaker, that the people of Saskatchewan will reject out of hand this external influence in our society, in our province, in our economy. They will reject that at the very first opportunity that they have, and hopefully it’ll be sooner than the next election, but I predict for certain at the next election.

Mr. Speaker, the Pharmaceutical Drug Association is very pleased with what the Tories are doing opposite. They represent 65 multinational drug companies operating in Canada — 65 multinational drug companies. They have hired a lobbyist firm in Ottawa with strong Tory connections to press the government for the patent amendments and to press this government for changes to

the Prescription Drug Plan Act. The name of that is Government Consultants International. The name of that company is Government Consultants International, Mr. Speaker, and it's run by Frank Moores, a former Conservative premier of Newfoundland, Gerald Doucet the former Conservative member from Nova Scotia is in the group, and Gary Ouellet, a Quebec city lawyer who helped organize the Conservatives in that province in the last election. Here is a little influential lobby group that has worked with the federal Tories to change the drug patent legislation.

Now we're seeing the drug companies as well influence these members in this government, this so-called government, to change the way people are served in this province. It's an attack on medicare, Mr. Speaker; it's an undermining of the four corner-stones of medicare. It certainly isn't an undermining of the four corner-stones of the Conservative government of patronage and give-aways and cut-backs and mismanagement. It's basically fuelling those four corner-stones of the Conservatives.

But, Mr. Speaker, what we see is a very sad amendment to a very prominently successful plan in this province. This government has ripped medicare; they are hurting the people who can least afford it.

And I want to share, with you and others, one or two letters that I have received from constituents and others about their concern. The government has lost its sensitivity. They disregard correspondence from concerned residents and citizens of this province. They refuse to respond to most of them. They disregard the problems that these people are having, and they are negligent in their carrying out of government obligation. And I ask the Speaker and other members opposite, if they're so negligent and they really don't want to provide better services for our people or enhance programs, why do they want to be government? Why don't they go back to the private sector and do what they were doing in the private sector? If they don't want to improve government and make it an operation that serves people rather than multinational corporations, then maybe they should leave. I'm sure the happiest people in the world will be the people in Saskatchewan.

Mr. Speaker, I have one letter here which I'll just . . . very short one:

Dear Sir: Prior to the changes in the drug plan, my wife had been granted exceptional status for the drug histmanol. Her doctor has told her to make two tablets or to take two tablets per day to counteract the effects of some very bad allergies. This is going to cost our family over \$700 under your new plan. My purpose in writing is to request that special status be granted for this particular care. Yours sincerely,

And, Mr. Speaker, this letter was sent; a response was received. We acknowledge receipt of your letter; can't help you. They've made an appeal to the Minister of Health requesting reconsideration, and the only response that they've got is maybe, just maybe, we'll give you a blue envelope. We're not going to help you, but maybe

we'll give you a blue envelope, but we haven't decided that yet. But I can understand, Mr. Speaker, that it's only been probably, oh, five or six weeks since the second or third letter was sent. But that's one example, Mr. Speaker, of the insensitivity of this government. They refuse to respond and assist those in need. People who are suffering, that require prescription drugs on the advice of their doctors are having great difficulty. They're making a choice of whether they obtain medication or whether they buy food that day. It's a choice, Mr. Speaker, which comes right out of the Dark Ages. It's a program that only right-wing conservative elements would introduce and wish on people.

(2115)

I find it very puzzling that a government of that colour and of that insensitivity would want to even be around. Why don't they just leave and do us all a favour and do the people of Saskatchewan a big favour?

I have another letter here, Mr. Speaker, and I'd like to read it into the record if I may. It's to the Minister of Health, with a copy to me. And it says:

Dear Mr. McLeod: I can no longer sit back and watch silently at the contemptuous manner in which you and your government are treating the people of this province.

Your most recent announcement of cut-backs in the drug plan and dental plan show that you have no compassion for humanity in general. Those in our society who will suffer due to your arrogant decisions are the poor, the sick, the elderly, the children, and those who are now recently unemployed.

The basic reason given for the cuts was one of financial restraint. Mr. McLeod, you are not dealing with an unthinking public. You say that you are saving . . . (a) million in rearranging the dental plan, but you have not told the public what the costs of unemployment, welfare, re-education, and incalculable waste of existing dental equipment and facilities will amount to. I'm sure it will surpass the \$5.5 million mark. What you have robbed from 419 families you have bestowed on 300 dentists who already enjoy lifestyles that surpass that of most people in our society.

And it goes on to talk about the drug plan and:

The confidence and trust given to you by the people of this province in the last election has been totally destroyed by your changes to the health privileges (such as the dental plan and the drug plan) . . . in the past. You have made the same mistake the Liberal government of 19 years ago made with they imposed deterrent fees on medicare. The result was political suicide.

And that was from the little concerned person.

**An Hon. Member:** — Might as well shoot yourself down.

**Mr. Solomon:** — A great deal of concern, Mr. Speaker.

Mr. Speaker, I have another one, and this is a very long letter, and I'd like to read it except there are some comments here that don't pertain to the prescription drug plan — but I have outlined those; I would like to read them into the record. And this is from an elderly person, and it's regard to the prescription drug plan, and this is page 4, and she has talked about a couple of other concerns in terms of cut-backs.

And this is where I can put forth a very person view (she says). My situation is not unique. Many others in the same boat, just a different chronic ailment, but still requires continuous medication. I have chronic asthma — a hereditary condition in my case — well controlled but only due to continuous advice and interest by Dr. Hopkins over the years. I do not take any unnecessary medication, so I nor my husband or family abuse this service, but appreciate it. I have enclosed an estimate on my costs, and I'd like to have your comments on same.

I have to take one drug that I had the exemption for — please, why did you eliminate that service? Do you think it is by choice to be different that I take these drugs? I cannot take any ventolin-related medication because of a severe reaction, so I have to take alupent — not under the formulary — but until now at least covered under the exemption. Now I have to pay either \$28 or \$32 every week for this medication that I cannot do without. There are others that could be substituted for the other medications, but not this one. Now if I happen to require any other prescriptions such as an antibiotic which often is the case for asthmatics, then I pay again and again.

Now that is just my case — then there is my husband, who had to retire on medical grounds eight years ago due to, primarily, a heart condition. So he has heart pills, et cetera, not more than necessary, as he tries to keep himself in reasonably good shape, so he does not have worse health problems, so you can add X number of dollars to my list attached (she says).

His problems stem largely (and I ask the members opposite to listen to this point) from World War II wounds — he fought and suffered for this country and for you too. Never forget this . . .

And she underlines “never forget this.” He fought for all of us, including the Minister of Health who has introduced this gutting of the prescription drug plan and Bill:

. . . and for our children and grandchildren to have the best in life.

We also fought hard for our (Saskatchewan) . . . medicare, and now by “unthoughtful, misinformed” members, as yourself, we are very definitely losing what the rest of Canada has looked to and patterned their care after.

And just because others are taking this all the way, why should Saskatchewan be the same? If they cut their heads off would you too?

And she goes on:

Even though I'm still working, for a short time anyway, my job does not carry any medical/dental benefits. We, and other pensioners cannot go out and get a job to earn extra money, so what answer can you give to us to pay for all this extra? Most keep their pride and will not, or cannot, ask for help. We have worked all our lives and just when we think we could take it easy, and have looked forward to (retirement, we are faced with) . . . extra dollars (that has to) . . . be used for services that we had appreciated, at a low cost previous to this.

And, Mr. Speaker, what this letter says — and I know you've been listening intently, and I appreciate that — what this letter says is that here is a family who is in a low-income situation, the male spouse a World War II veteran who has fought for this country, has sacrificed his good health so that we in this Assembly can stand here and produce laws which hurt him. I mean, it doesn't make any sense. It doesn't make any sense.

New Democratic party members are not in this Assembly to injure people of this province. We are here to provide whatever assistance that we can. What this person has indicated in writing, in longhand, is that she is suffering as a result of this amendment to Bill 34 — Bill 34, this amendment to the prescription drug plan, which will injure her and many others. And they are very proud people. They fought for this country. Those who lived are now witnessing the enemy right here in Saskatchewan that they helped elect. And that wasn't the case. They have been betrayed, Mr. Speaker. They have been betrayed by people who came to their door in writing and said, here is what we are going to do. You vote for us, and we'll do this for you.

And what has happened, Mr. Speaker, is that this government who has promised to do away with prescription drug plan premiums of \$3.95 or less, they, in fact, have raised the premiums. They've done away with the \$3.95 cost, and for most people it's going to cost them hundreds of dollars every year in prescription drugs that are absolutely necessary for their comfort or control of a major disease.

I don't know what to say about this, Mr. Speaker. I don't think any more needs to be said. I think the members opposite, the member from Shellbrook-Torch River, the member from Regina South, the member from Wilkie . . . The member from Wilkie will know and appreciate something like this because he probably has a lot of people in his constituency of the same age and of the same experience. And they're fairly proud people. We're all fairly proud people who are Canadians and living in Saskatchewan. And I think it's just dismal and incredulous that the Government of Saskatchewan would introduce a program to purposely inure the most powerless in our society when the obligation, the mandate of government, is to assist and help the most



powerless in our society.

I have here, Mr. Speaker, some examples of commitments that the Conservative members have made in writing — and those of you that will remember me making a speech on other issues, including taxes, will recall the examples I raised — the members opposite, the Conservative members who make commitments in writing and broke them as soon as they possibly could.

But I have some others, Mr. Speaker, dealing with prescription drugs. And I have one here from the member from Regina Wascana, the Conservative member. And in his important notice to all senior citizens, he says:

A Progressive Conservative government will eliminate dispensing fees on all drugs prescribed for senior citizens. (He says) A Progressive Conservative government will continue medicare at no extra cost and upgrade health care in the province of Saskatchewan.

This was done by the member from Regina Wascana, former member Gordon Currie. And I find this particularly incredible, Mr. Speaker.

The former member from Wascana I hear — I never met him personally myself — but I hear the former member from Wascana, who was a Conservative member, was a relatively well respected individual in the Conservative caucus, which I can't say for many others. But even he, even he broke his word. He had a reputation, this Mr. Currie, around the province for being a sportsman, for being involved with sports, for basically saying things that he believed in. And even he misled the people of this province, Mr. Speaker.

I find that incredulous. I'm sure that people in Regina Wascana and other parts of this province who know Gordon Currie will be shocked, will be shocked at that information, but certainly not shocked at the Conservative Party for what they've done.

I have here some more handwritten information. The member from Last Mountain-Touchwood,

... revitalize and improve health care (was the promise). A new PC government will place great emphasis on improving the delivery of health services by providing more adequate financing to our hospitals, by expanding the drug plan, by guaranteeing first-rate ambulance service ... (and so on) and by ensuring that all areas of the province have access to the best in medical care without medicare premiums to the people of Saskatchewan.

This saddens me too, Mr. Speaker, because I've had a great deal of respect for the member from Last Mountain-Touchwood. And I find that it's another Conservative commitment and it really doesn't do a lot to enhance one's position in politics.

I have here, Mr. Speaker, one from the member from Saltcoats, a Progressive Conservative pamphlet, and it says, "It's time for a change; a PC government will do all

the things they promised that they didn't deliver." And they did the opposite. But it also says here on the bottom that — in the green — it says it "will extend drug plan coverage, a plan to include all prescription drugs."

What does that mean, Mr. Speaker? It means that these individuals who were elected on the basis of their word, to deliver a service, to improve a program, to introduce something which is of benefit to the general population, they have gone and said they're going to do these things and they have double-crossed the people that they have made these commitments to.

How do you think people will relate to you and deal with you on other matters? The "antonym" government — whatever you say, you do the opposite, whatever you promise, you break; and whatever you say, you deny. I can't believe it. This government, Mr. Speaker, is not only a government of antonyms, but it's not a government at all. It shouldn't even be here.

I have another one, Mr. Speaker, it's from the candidate from Morse. The Conservative candidate from Morse promised in his literature and writing that:

The PCs have an awareness for the people in the province. We will expand the drug plan to include all prescription drugs. We have an awareness.

Well I wonder where the member from Morse is right now. I wonder if he's aware of how the people in his constituency believe the program that he is not supporting, or at least he's not opposing — the gutting of the prescription drug plan — I wonder how they feel. I wonder if he's aware of their feelings and whether or not he is going to do something about that.

He's here this evening, Mr. Speaker, and he's looking fairly forlorn, and he's looking betrayed himself. I think he's a bit shocked at what this government is doing, too. And I believe he is; I truly believe that he's as shocked as many of the other people around this province.

(2130)

I have here, Mr. Speaker, of course, the member from Kindersley, his literature. This is the member who gets up in the House and squeals and whines about freedom of information in opposition. And when he gets elected he introduces Act after Act, Bill after Bill, behind closed doors to make information more difficult to get, he does the opposite. He's one of the antonym members. And in this leaflet, Mr. Speaker, we have a title: "Vote Bob Andrew," it says, right there.

**Mr. Speaker:** — Order, please. Order, please. Order, please, order. The hon. member has broken two rules. He used the hon. member's name, number one, and from what I can gather, he is attempting to use his advertisement as an exhibit. So I would ask him to refrain from that.

**Mr. Solomon:** — Thank you, Mr. Speaker, a point well taken. The member from Kindersley, the antonym MLA, says,

A new PC government will place a great emphasis on improving the delivery of health services by providing more adequate financing to our hospitals and by expanding the drug plan.

And he goes on to make other commitments, which of course have not only been not kept but they have cost people more in this province.

Mr. Speaker, I'd like to end my remarks now by saying that, with respect to Bill 34, an Act to gut the prescription drug plan, that this government is introducing, that whether it's the promise of balanced budgets, whether they promise to balance budgets, or whether it's the promise to never reimpose the gas tax, or whether it's the promise to eliminate the E&H tax, or whether it's the promise to cut person income tax by 10 per cent, or whether it's the promise to protect our health care system and to improve our drug plan, Mr. Speaker, the Progressive Conservative government has broken every one of those promises. Not one promise have they kept. Whatever they say, they do the opposite. This government of antonyms, this opposite government, whatever they promise, they break; and whatever they suggest, they deny.

A warning should go out from this Assembly this evening, Mr. Speaker, a warning that the Progressive Conservative government in this province and in this country is trying to change the fabric of Saskatchewan society. They're trying to change people's reliance and confidence in government. They're trying to change how our economy runs by making people less confident in some of the financial institutions that we have. They're trying to change people's reliance and involvement and consistency in government programs to less reliance on government and more reliance on a few powerful, rich individuals and corporations like the drug companies and the multinational oil companies.

I think what is happening, Mr. Speaker, that this warning should go out, because what happens when we go down the road and people are now becoming more concerned about their survival for tomorrow, that they're becoming more concerned about putting bread on the table and having a job than they are about their neighbour, their community, or their province. When they become more concerned — and that's the objective of this government — they lose sight of where the government is going or where the government wants to take them. And that's very dangerous, Mr. Speaker, because this government is taking us down a very difficult path, a very wrong road. People are telling me all over this province that it's the wrong way to go.

In the first week in June, before the legislature sat, I was called in one evening by two pharmaceutical employees. And they produced a document which the Conservative government had sent out telling the pharmacists what plans or what changes were coming in the prescription drug plan. And they were worried, Mr. Speaker. They were very worried, not because — and these were two unrelated individuals — they were worried because this government is trying to rip apart a program, and they have indeed ripped this program apart, which has become a very important program to all of the people in

this province. And they're also very concerned because what happens once the government starts getting their fingers involved with the pharmaceutical drug companies is that certain pharmaceuticals on the shelves become preferred — higher cost drugs are there and the generics are not there.

We're seeing, Mr. Speaker, a concern by these two individuals that the government was destroying a program that had sorted itself out over the years and provided a service that was second to none on the North American continent.

In summary, Mr. Speaker, or in finishing my remarks, those with chronic health problems like asthma or high blood pressure or arthritis or heart problems or allergies that require medication to exist, are people who are now going to be paying significantly more for their drugs. They are on prescription drugs not because they want to be but because their doctors have prescribed them and it's required for them to keep a basic level of health.

And this is a very sad thing, Mr. Speaker, because once you start taxing the sick, once you start transferring the deficit from where it should be in the hands of cabinet to the sick, you have a society, Mr. Speaker, that is changing in terms of its fabric. And they are now trying to survive as individuals in this province so that they can make it till tomorrow, and that they can make it till the week after and the month after.

But I'll tell you this, Mr. Speaker, that what these people are trying to do is they want to make it to the next election because they want to tell this government what they believe they should be doing with respect to the drug plan. And I'll tell you, they won't be casting their votes for that government opposite. Thank you.

**Some Hon. Members:** Hear, hear!

**Hon. Mr. Hepworth:** — Thank you, Mr. Speaker. Mr. Speaker, we've heard a great deal said in debate on this particular Bill that's before the House — many words. And I would argue, Mr. Speaker, a fair amount of licence in so far as what this Bill really means and what it's all about in terms of the health care for the people of this province.

And earlier tonight I was reading an interesting piece that I'd . . . actually that dated back to 20-25 years ago. And sometimes the arguments are made in politics that the weaker the case, the deeper the pile of paper, or the more verbose the rhetoric. When I listened to speaker after speaker after speaker using this endless rhetoric, Mr. Speaker, the speeches are no different than we heard three or four months ago in this House. Nothing new has come forward, but for the most part, simplistic analysis.

And I thought that stands . . . all this talk, Mr. Speaker, stands in sharp contrast to really some of the great documents in history, and how some people throughout history have been consistently able to put a lot of meaning in a few words. And a few examples, for example — Lincoln's address at Gettysburg used only 266 words, Mr. Speaker, and yet that's been a memorable document and

one that people know throughout history. The Ten Commandments, Mr. Speaker, use only 297 words, and certainly, Mr. Speaker, they have left their mark on society and are with us to this very day.

And yet the NDP have gone on and on and on about what this Bill means and have not come up with any solutions. They somehow think, Mr. Speaker, that by endless debate that somehow they're going to make their case better. Such is not the case.

I want to start tonight, Mr. Speaker, I want to talk, first of all . . .

**Mr. Speaker:** — Order, please. Order.

**Hon. Mr. Hepworth:** — I want to talk about three things, Mr. Speaker, tonight. First of all, why are we making these changes to the drug plan, Mr. Speaker? What is society really facing? And what really has been the commitment to health care in Saskatchewan, Mr. Speaker, by this Minister of Health and by this government?

Well why are making these changes to the drug plan, Mr. Speaker? First of all, anyone who would suggest that making change of any sort is easy, Mr. Speaker, would be sadly mistaken, for such is not the case. It is never easy to make change. The status quo is always the easiest, Mr. Speaker. It's always the easy way out — don't make waves; don't make change. The status quo people get used to it and somehow it will always be all right.

Mr. Speaker, as well in making these changes, the other thing that was absolutely and first and foremost in our minds is that we did not want to jeopardize the quality of health care in this province. At the same time, Mr. Speaker, we are faced as a government by making decisions not always that are easy, but ones that must be responsible. They must be right for the province, they must be right for the people, and the must be right for the health care in this province — but not necessarily easy.

And let me explain, because this is a classic situation, Mr. Speaker. The easy way out of this is to make no change. But are we, as legislators, taking the right course if we stand back and say that we can let our . . . that we can afford to not put our economic house in order? Are we making the right decision for the people of this province by saying, Mr. Speaker, that we don't have to put our economic house in order? And I would argue, Mr. Speaker, that we, as legislators, would not be making the right decision if we took that decision. And why do I say that? Because, Mr. Speaker, would it be right for us, as legislators, to merely let the deficit rise, to let the deficit rise and get ourselves to the point where we're spending several hundreds of millions of dollars a year, Mr. Speaker, merely servicing the debt, paying the interest bills on that accumulated deficit, Mr. Speaker? All we would be doing, Mr. Speaker, would be mortgaging our children's future. Nobody will be well served if we got to the point in this province where it took hundreds of millions of dollars a year to service the debt.

And so, Mr. Speaker, we were faced with making some decisions and making some changes. And the NDP have come out with the simplistic analysis. They've said

simply, we are against these changes. They have not proffered up one solution, Mr. Speaker. They have not given one example of how we, as legislators, collectively, could approach our task responsibly and reasonably about how we can put our economic house in order without making changes. They have been against everything, Mr. Speaker. They are the change resisters, second to none.

They say, Mr. Speaker, the deficit must not be allowed to rise; they say that. Then in the second breath they say, but don't cut back on programs, don't make changes. And then, Mr. Speaker, they say, don't raise taxes, don't increase spending. You can't have it all ways, Mr. Speaker. You can't on one hand say, don't let the deficit go up, but don't cut programs. You can't say, don't let the deficit go up, but don't increase taxes.

Mr. Speaker, the fundamental issue that we're facing in this legislature tonight is not whether . . . is not a simplistic analysis. We have to face the choices. And I believe that this is a responsible way to go, Mr. Speaker, because in so doing not only will we not jeopardize health care this day in this province, but we will not jeopardize it in the future when our children and our grandmothers and our grandfathers will still want to access this system.

We cannot go unhooked from reality, Mr. Speaker. We must address the reality of today. We cannot get ourselves into a situation where it takes hundreds of millions of dollars to pay the debt — that is hundreds of millions of dollars, Mr. Speaker, that should be going to fund health care down the road. To take any other course, Mr. Speaker, would be absolutely irresponsible. And you cannot, the opposition cannot cop out on this. Either they come up with a solution or they look at the inconsistency of their approach. They're against the deficit; they're against increased taxes; and they're against decreased spending. You can't have it all ways, Mr. Speaker. You can't have it all ways.

(2145)

But as I said, Mr. Speaker, as well we do not want to see quality health care jeopardized. And although the NDP will trot examples out — and I would argue, Mr. Speaker, rare examples — about the change in the drug plan. If one picks up some of the articles that have been written in the various daily and weekly media from across this province over the last few weeks — I've got some from Prince Albert, September. This one here is, as well, around in September. This one's from the *Star-Phoenix* in July. And just to give you an example, Mr. Speaker, of how this Minister of Health and how this government is on the right track with these changes, some of the headlines read like this: "Revised drug plan forces pill prices down," "Revised Saskatchewan drug plan remains best in Canada," Mr. Speaker. Another headline says: "Drug plan generally working well — pharmacists." And I'll read from that one, Mr. Speaker. It's the *Prince Albert Daily Herald*, September 3. And on the paragraph here goes:

A lot of people are no longer buying or taking drugs they don't really need says Roses Mamchur, president of the Prince Albert District

Pharmaceutical Association, (Mr. Speaker).

Some inherent public responsibility, Mr. Speaker. Another example in one of these articles is how the tendering system used by Saskatchewan Health has seen one pharmaceutical drop by 70 per cent, Mr. Speaker. Saving the taxpayers money already.

So, Mr. Speaker, I say that by making changes, we can make change responsibly and still have the best health care, the best drug plan in Canada, as this article refers to, Mr. Speaker.

The other point that we have to address here, Mr. Speaker, is that to not make these changes what were we faced with? We were faced with drug bills that were escalating and escalating rapidly. I think the track we were on would have seen us at 125 million and certainly within half a decade, or a decade at most, probably something close to a quarter of a billion dollars, Mr. Speaker.

It seems to me if we had got to that point then we put the entire system in jeopardy, that would be spending more, then, on the drug part of our health care program than probably we're spending on the entire health care system just a few short years ago, Mr. Speaker.

The other reason why you have to address health care, why you have to stand back and ask yourself the hard questions and not merely engage in simplistic analysis, Mr. Speaker, is what else to this very day do we know about in Canada and in Saskatchewan's population that's going to be a major change that we must deal with and that we're going to face, and in fact are now starting to face it, Mr. Speaker. And that is that we are dealing with an increasingly ageing population.

You cannot turn your back on that, Mr. Speaker. You cannot somehow pretend that it does not exist. You cannot come in this House and merely say we want no changes in anything, that somehow these problems will all work themselves out, for that would be, Mr. Speaker, irresponsible and once again forsaking the future. Because the thing that we know about an ageing population is that the health care costs go up as the population ages, in fact there's some rather startling statistics that point out the costs that one faces as one gets older, and certainly the numbers over 65 are significant, and numbers over 85 are even that much more significant.

That is an irrefutable fact, Mr. Speaker, and it's one that must be faced up to if we're going to approach our job responsibly in this legislature. We can all engage in political rhetoric and political debate and try and score our points, Mr. Speaker, but at the end of the day we have to face up to some realities. That is one of them, Mr. Speaker, and really it's one that should cause us some very, very sober thought.

It's not going to go away, Mr. Speaker, and it has been always in this province that we have cared for those who broke the soil in this province some several years ago, those who pioneered this province. We have an obligation to them and if we are not good stewards today,

Mr. Speaker, we will not be able to look after our children. By every measure, Mr. Speaker, we've got to face up to the future. We have to face up to the future, Mr. Speaker, in health care or we won't have a future, Mr. Speaker.

Some three or four years ago, a fellow by the name of James Laxter who did a fair amount of research work for the NDP, Mr. Speaker, wrote a rather damning critique of the NDP and how they had become high-bound in their ideology. And one of the comments that he made, Mr. Speaker, one of the comments that he made, Mr. Speaker, read like this:

The time has come for Canadian social democrats to put the issue of rebuilding the Canadian economy first so that the human ends we all share can be achieved.

That is the fundamental point, Laxter had it right, Mr. Speaker. They yet have not realized this, that you cannot have a good health care system, a good social safety net if you don't have some economic engines to pay the bills, Mr. Speaker. You cannot be totally preoccupied with income redistribution, Mr. Speaker, if you don't have somebody creating the income, Mr. Speaker.

**Some Hon. Members:** Hear, hear!

**Hon. Mr. Hepworth:** — He then went on to say, Mr. Speaker:

By concerning themselves with distribution much more than production, Canadian social democrats have stood on the sidelines as far as this great debate about the future is concerned. It is a time for them to face the future and enter the debate (end of quote, Mr. Speaker).

And that's classic here tonight again, Mr. Speaker. They are resisting change because they don't have any other answer, Mr. Speaker. It's very easy to say, no, do not make change. In fact it's probably even, in their minds, extremely politically palatable to take that route because it's very easy to go out there and either be inaccurate in your examples, Mr. Speaker — and if you're not being inaccurate, then all I can argue is that they are creating uncertainty and, perhaps, some fear where it need not be created.

We have to face up to some overwhelming fiscal and health facts and population demographics, Mr. Speaker, that are staring us in the face. And to not deal with them would be totally irresponsible.

The other point, Mr. Speaker, I would like to make is that this government, unlike any other, has probably recognized this all along. It was this government that sensed the increasing ageing population and what it would mean for nursing home care, for example, and the demands there that led to the very aggressive programming in that area.

We've heard a lot of rhetoric tonight. I know the hon. members talked about promises made by the government members and trotted through several examples. Well I

want to . . . (inaudible interjection) . . . The hon. member from Regina North East says, let's talk about it. And I would like to talk about it. Because, Mr. Speaker, I happen to come from one of those constituencies where there were a lot of promises made to the residents of Fillmore and Stoughton, Saskatchewan, not just in 1981, Mr. Speaker, and not just in 1980, and not just before the '78 election. But I want to tell you, promises that were made 17 years ago by the ministers of Health that yes, you would get a hospital and yes, you would get a nursing home.

Thirteen years, Mr. Speaker — 13 years after that promise had first been made, I was elected and met with these communities. And they had been bounced around right, left, and centre, promised to death, Mr. Speaker. And you talk about betrayal and the lack of commitment. I'll tell you, those people have been betrayed. I would say lied to, Mr. Speaker, but that might be unparliamentary. But I'll tell you they have been jerked every which way on the issue of health care.

In fact it shouldn't surprise me that they've never had a nursing home and a hospital built, Mr. Speaker, because on July 11, '77, the minister of the day then, the member who today from Saskatoon South was the minister of Health, sent letters to those communities wanting nursing homes across this province, talking about a moratorium on nursing homes, Mr. Speaker. Well I want to tell you, Mr. Speaker, this very next month Fillmore will open up their brand new hospital-nursing home complex.

**Some Hon. Members:** Hear, hear!

**Hon. Mr. Hepworth:** — And more than that, Mr. Speaker — and more than that, Mr. Speaker, it is one of the finest nursing home-hospital complexes that you will find anywhere in the world.

And you talk about maintaining rural Saskatchewan, Mr. Speaker. You talk about maintaining it, that's exactly how you maintain it is with a fine centre like that you can keep the senior citizens in their home communities. And, Mr. Speaker, it's only about a year ago or so now that we opened up one of the finest nursing home complexes in North America in Stoughton, Saskatchewan.

**Some Hon. Members:** Hear, hear!

**Hon. Mr. Hepworth:** — And I'll tell you, Mr. Speaker, that stands in sharp contrast, in sharp contrast to moratoriums that we put in place in 1977 and people being jerked around for 17 years, Mr. Speaker. That stands in sharp contrast. That's dealing with some of the demographic pressures that we're talking about and that stands in sharp contrast to a headline in the *Hospital Products and Technology* journal, August-September '85, and the headline reads, Mr. Speaker, "Building more institutions for aged is road to disaster, says Romanow." Mr. Speaker, that's what they thought . . .

**Mr. Speaker:** — Order please! Order! Order please. The hon. member knows that he cannot refer to other members in the House by their name.

**Hon. Mr. Hepworth:** — Thank you, Mr. Speaker, I meant

to say the member from Saskatoon Riversdale, but I'll repeat the headline so there's no mistaking what he said: "Building more institutions for aged is road to disaster, says member from Saskatoon Riversdale", the NDP member, the man who would be leader of this province if people would be silly enough to let him, Mr. Speaker. And they will not. And I'm sure the NDP themselves are having second thoughts about that member after his stance on the free trade, Mr. Speaker. I have no doubt about that at all. Well, Mr. Speaker . . .

**Mr. Speaker:** — What is the member's point of order?

**Mr. Solomon:** — Mr. Speaker, the member from Weyburn is insulting the people of this province by calling them silly and I would ask him to withdraw that remark. Thank you.

**Mr. Speaker:** — I'm sorry but I didn't catch the last part of your point of order. Would you please repeat that?

**Mr. Solomon:** — Let me repeat that, Mr. Speaker, then. I rise, Mr. Speaker, on a point of order, because the member from Weyburn has referred to the people of Saskatchewan as being silly, and I would ask him to withdraw that remark.

**Mr. Speaker:** — The point of order is not well taken. The debate continues.

**Hon. Mr. Hepworth:** — Mr. Speaker, if I've offended somebody, then I certainly would apologize. The point I was making, Mr. Speaker, is this, and I'll rephrase my words. What we have, Mr. Speaker, with that story, is the opposition's view, as much as they would try and suggest that they and they alone understand the health care needs of this province, that they and they alone are not prepared to make changes to deal with the pressures that we deal with, and one of those pressures, Mr. Speaker, is an ageing population. And not that . . . (inaudible) . . . is the only answer or the only tool that one would use in dealing with an ageing population in terms of the health care, Mr. Speaker, but certainly it is one that we have to give some consideration.

Similarly, on the other end of the scale, Mr. Speaker, in dealing with the ageing population, the Minister of Health is addressing, it seems to me, what ultimately is even the larger and better solution and the solution that can perhaps do more for our seniors than all the nursing homes in the world can do, and that's the whole question of keeping them fit; the whole question of wellness; the whole question of gerontology, Mr. Speaker, of proper nutrition for our older people; the whole issue, Mr. Speaker, of physical exercise for that ageing population; the whole question of keeping them ambulatory and out of nursing homes and in their communities and in their homes, Mr. Speaker.

And it seems to me there's an exciting area of hope and promise. It's the area of preventative medicine, Mr. Speaker. I had an example related to me shortly after I was elected, where the local Rotary Club in Weyburn gathered up the funds, Mr. Speaker, to help buy a whirlpool bath for the nursing home. And you know what they told, that the director of nursing came from that

nursing home to the Rotary Club to tell them of the success of their project. You know what the story was that she related, Mr. Speaker? That they had dropped their prescriptions for sleeping pills for these senior citizens by one-third, just because they could have that soothing and relaxing effect of physical therapy — hydrotherapy, Mr. Speaker.

And yet the NDP want to cling to the past and somehow say, fill them up with drugs; that we ought not make any changes; that we ought to ignore the demographic changes, Mr. Speaker, when such is not clearly the case, and there are other options, and those are the kinds of solutions that should be put forth. Those are the kinds of solutions that are being put forth by this Minister of Health, and I'll tell you why, Mr. Speaker: not because these changes are easy, but because they are right, and they're responsible, and they're right for the future of this province, Mr. Speaker, that why, and that's why I support this Bill.

**Some Hon. Members:** Hear, hear!

The Assembly adjourned at 10 p.m.