

The Assembly met at 2 p.m.

ROUTINE PROCEEDINGS

PRESENTING PETITIONS

Mr. Neudorf: — Thank you very much, Mr. Speaker. I rise today, Mr. Speaker, to present to the legislature petitions signed by many, many, literally thousands of people in the province. And I would like to read the preamble and the prayer of this petition, Mr. Speaker.

To the Honourable Legislative Assembly of Saskatchewan in legislature assembled:

The petition of the undersigned citizens of the province of Saskatchewan humbly sheweth:

that back pain and other highly prevalent neuro-musculo-skeletal disorders are extremely costly to the Canadian economy;

that scientific evidence clearly illustrates that chiropractic treatment is the most effective and efficient therapy for such disorders;

that in the face of an ever increasing pressure to adopt expensive new forms of high technology treatment, chiropractic care has proven to be a low technology, low cost, conservative, and safe form of treatment, consistent with the true wellness model of health care;

that the government publicly asserts it remains committed to the basic principles of medicare, namely universality, comprehensiveness, accessibility, portability, and public administration;

that the government is acting to destroy these principles as they apply to chiropractic patients;

and that the government's proposed restrictions on this therapy will clearly cost more in both dollars and in patient disability.

Wherefore your petitioners humbly pray that your Honourable Assembly may be pleased to cause the government to reverse its decision to eliminate full coverage and universal access to chiropractic treatment and that your Honourable Assembly withhold consent from any government proposal to discriminate against chiropractic patients by charging them fees not assessed for any other medical treatment.

And as in duty bound, your petitioners will ever pray.

Mr. Speaker, I have close to a thousand petitions here. My colleagues will also be handing in many. This will bring it to about 6,000 petition names that we have handed thus far only on the chiropractic practices of this government.

Mr. Swenson: — Thank you, Mr. Speaker. I also have

many petitions to present today. And because they're on the same topic as my colleague from Rosthern, I will just read the prayer.

Wherefore your petitioners humbly pray that your Honourable Assembly may be pleased to cause the government to reverse its decision to eliminate full coverage and universal access to chiropractic treatment and that your Honourable Assembly withhold consent from any government proposal to discriminate against chiropractic patients by charging them fees not assessed for any other medical treatment.

And I have over a dozen pages here, Mr. Speaker, a couple of hundred names. Places like Melfort, Porcupine Plain, Canora, Pathlow, Fosston, Paddockwood, Zenon Park, Melfort, Tisdale, Annaheim, Naicam, Prud'homme, Creighton, Archerwill, St. Benedict, Mistatim, Porcupine Plain, Bruno, Asquith, Prince Albert — lots of Prince Albert — Hudson Bay, Wadena, St. Brieux, Nipawin, Birch Hills, a whole page of Saskatoon, Morse, Kyle, Swift Current, Ernfold, Hodgeville, Allan, Eston. I would say, Mr. Speaker, that just about the entire province is represented in the 12 pages that I present to the legislature today. I do present.

Mr. Devine: — Thank you, Mr. Speaker. I want to join with my colleagues in presenting a petition with respect to chiropractic care. I will just read the prayer:

Wherefore your petitioners humbly pray that your Honourable Assembly may be pleased to cause the government to reverse its decision to eliminate full coverage and universal access to chiropractic treatment and that your Honourable Assembly withhold consent from any government proposal to discriminate against chiropractic patients by charging them fees not assessed for any other medical treatment.

And as in duty bound, your petitioners will ever pray.

There are 15 pages, 16 pages of petitioners here, Mr. Speaker, about 230 to 240. People come from Lumsden, Strasbourg, Findlater, Regina, Craven, Bethune, Tuxford, Silton, Melville, Spy Hill, Yorkton — several from Yorkton — MacNutt; we find several from the Saltcoats area; and more and more from Yorkton; a large number from Regina, from all parts of the city, couple, three, four pages; Aberdeen, Saskatchewan; we have some more from Saskatoon; several from various constituencies there, Langham, North Battleford, again a large number from Saskatoon, Blaine Lake. I received several more from the area of Saskatoon and in Saskatoon and Langham; Radisson, Saskatchewan; Watrous; and more from the city of Saskatoon; a large number from Hague; Elrose; Warman; several from Langham; Saskatoon again; Radisson. I see also Limerick, Saskatchewan; from Moose Jaw, a large number coming in from various addresses; some more from Limerick; and Gravelbourg.

I'll table these, Mr. Speaker.

Mr. Martens: — Thank you, Mr. Speaker. I want to also table these petitions that have been sent in as a result of changes in the chiropractic care, and I want to provide them to the Assembly at this time.

They are from all over Saskatchewan, and I will not read the names, but there are significant from my own city of Swift Current.

Mr. Britton: — Thank you, Mr. Speaker. I have also about 14 pages of petitions, and I will not read the preamble, I'll just maybe read the prayer:

Therefore your petitioners humbly pray that your Honourable Assembly may be pleased to cause the government to reverse its decision to eliminate full coverage and universal access to chiropractic treatment, and that your Honourable Assembly withhold consent from any government proposal to discriminate against chiropractic patients by charging them fees not assessed by any other medical treatment.

And as in duty bound, your petitioners humbly pray.

Mr. Speaker, these also come from a wide area — Kenosee, Wawota, Parkman, Kenosee Lake; Windthorst, I think it is. Kennedy, Kinley, Carlyle, Kipling, some more from Carlyle, and Kenosee again. Oxbow, Kennedy, Arcola, Viceroy, Corning, a lot from Regina, Mr. Speaker. I will not give you the addresses. There are several pages right from the city of Regina.

And also, into Southey, Butterfield, Broadview; a lot more Regina. Regina, a lot of Regina. Osler, Southey again; a lot more Regina people; another full page of Regina, Saskatoon, Hepburn. It's all across the province, Mr. Speaker. I'd like to table these at this time.

Mr. Toth: — Thank you, Mr. Speaker. Mr. Speaker, I believe it's fitting that we have these petitions to present to the Assembly in light of the debate that has been taking place regarding the health issue and the fact that there are many people, as we see in the petitions, have indicated that they are very unhappy with the way the government has dealt with the health and the chiropractic services.

And at this time I would like to read the prayer on the petitions that have been presented to me to present to this Assembly:

Wherefore your petitioners humbly pray that your Honourable Assembly may be pleased to cause the government to reverse its decision to eliminate full coverage and universal access to chiropractic treatment, and that your Honourable Assembly withhold consent from any government proposal to discriminate against chiropractic patients by charging them fees not assessed for any other medical treatment.

And as in duty bound, your petitioners will ever pray.

And as my colleagues have indicated, petitions have

come from right across the province. I have petitions signed here from Regina, people from Broadview and Lipton and Climax. Mr. Speaker, from Rhein and Kamsack, Canora, Wadena, Wroxtton, Buchanan, Churchbridge, Fort Qu'Appelle, Hyas.

Mr. Speaker, in fact one of the petitions here, obviously must have run out of room and they turned it over and they filled it up on the back as well, so there's an indication that there's a strong feeling out there, that people are very dissatisfied with the process. So, Mr. Speaker, I present these petitions.

Mr. D'Autremont: — Thank you, Mr. Speaker. I too have a number of petitions to present about chiropractic care. I'll just read the prayer:

Wherefore your petitioners humbly pray that your Honourable Assembly may be pleased to cause the government to reverse its decision to eliminate full coverage and universal access to chiropractic treatment and that your Honourable Assembly withhold consent from any government proposal to discriminate against chiropractic patients by charging them fees not assessed for any other medical treatment.

And as in duty bound, your petitioners will ever pray.

Mr. Speaker, to read through the names of the locations from where all these petitions come from is like reading a road map of Saskatchewan: Weyburn, Yellow Grass, Colgate, Carlyle, Manor, Fillmore, Tyson, Ogema, Saskatoon, Rosetown, Dundurn, Cochin, Regina, Crane Valley, Swift Current, Prince Albert, Madison, Domremy, Snowden, Meskanaw, Albertville, Weirdale, Christopher Lake, Borden, Eston, Moose Jaw, Briercrest, Avonlea, Caronport, Craik, Mortlach, Fir Mountain, Chaplin, Limerick, North Battleford and Battleford, Hafford, Handel, Unity, Cut Knife, Luseland, Macklin, Wilkie, Senlac, Scott, Major, Landis, Yorkton, Saltcoats, Wroxtton, Stornoway, Sturgis, Tonkin, Ituna, Bankend, Endeavour, Langenburg, and Churchbridge. All told, Mr. Speaker, there are 21 pages of petitions I wish to present to the Assembly.

Mr. Goohsen: — Thank you, Mr. Speaker. I have as well many petitions to present to the Assembly today:

Wherefore your petitioners humbly pray that your Honourable Assembly may be pleased to cause the government to reverse its decision to eliminate full coverage and universal access to chiropractic treatment and that your Honourable Assembly withhold consent from any government proposal to discriminate against chiropractic patients by charging them fees not assessed for any other medical treatment.

And in duty bound, your petitioners will ever pray.

We have from the towns of Denzil, Saskatoon, Macklin, Kendal, Unity, Wilkie, Biggar, Landis, Balcarres, Indian Head, Fort Qu'Appelle, Glenavon, Vibank, Buchanan, Calder, Wynyard, Ogema, White City, Regina, Yorkton,

Melville, Grayson, Saltcoats, Wroxton, Canora, Esterhazy, Churchbridge, Sheho, and Ituna. Many, many pages to present today, Mr. Speaker ... (inaudible interjection) ... Lots of Churchill Downs.

The Speaker: — Order, order.

READING AND RECEIVING PETITIONS

Deputy Clerk: — According to order, the following petitions have been reviewed, and pursuant to rule 11(7) they are hereby read and received:

Of citizens of the province of Saskatchewan humbly praying that your Honourable Assembly may be pleased to cause the government to reverse its decision to eliminate full coverage and universal access to chiropractic treatment.

NOTICES OF MOTIONS AND QUESTIONS

Ms. Haverstock: — Thank you. I give notice that I shall on Tuesday next ask the government the following question:

Regarding community-based land trusts as a possible solution to the farm debt problem facing rural Saskatchewan: (1) Is the government currently considering this as a potential solution to the farm debt crisis? (2) If so, provide the names of the individuals with whom the government has consulted. (3) Provide the names of the persons who have made submissions concerning the establishment of community-based land trusts as a solution to the farm debt crisis. And (4) what is the present status of the government's community-based land trust policy?

Mr. D'Autremont: — Thank you, Mr. Speaker. I give notice that I shall on Tuesday next ask the government the following question:

Regarding the employment practices of the minister responsible for Saskatchewan Government Insurance: what are the names, positions, and salaries of all persons hired since November 1, 1991?

Mr. Goohsen: — Thank you, Mr. Speaker. I give notice that I shall on Tuesday next ask the government the following question:

Regarding the employment practices of the minister responsible for Saskatchewan Transportation Company: what are the names, positions, and salaries of all persons hired since November 1, 1991?

Mr. Toth: — Thank you, Mr. Speaker. I have two questions. I'll read them both consecutively. I give notice that I shall on Tuesday ask the government the following question:

Regarding the employment practices of the minister responsible for Saskatchewan Forest Products: what are the names, positions, and salaries of all persons hired since November 1,

1991?

And my second question, Mr. Speaker, is I give notice that on Tuesday next I ask the government the following question:

Regarding the employment practices of the minister responsible for Saskatchewan Development Fund Corporation: what are the names, positions, and salaries of all persons hired since November 1, 1991?

Mr. Britton: — Thank you, Mr. Speaker. I too have a couple of questions. I shall give notice on Tuesday next, ask the government the following question:

Regarding the employment practices of the minister responsible for Saskatchewan Energy Holdings Ltd.: what are the names, positions, and salaries of all persons hired since November 1, 1991?

And the second question, Mr. Speaker, I shall give notice ... I give notice that I shall on Tuesday next ask the government the following question:

Regarding the employment practices of the minister responsible for Saskatchewan Power Corporation: what are the names, positions, salaries of all persons hired since November 1, 1991?

Thank you.

Mr. Martens: — Thank you, Mr. Speaker. I give notice that I shall on Tuesday ask the government the following question:

Regarding the employment practices of the minister responsible for Sask Water Corporation: what are the names, positions, and salaries of all persons hired since November 1, 1991?

Mr. Devine: — Mr. Speaker, I give notice that I shall on Tuesday next ask the government the following question:

Has the government through any department or Crown corporation, including Executive Council, made any payment by salary, contract, per diem, or honorarium to a Mr. Thomas Brooks, and what has the total amount of such payments been since November 1, 1991?

Mr. Swenson: — Thank you, Mr. Speaker. I give notice that I shall on Tuesday next ask the government the following question:

Regarding the assertion in the Speech from the Throne that the government is negotiating with over 700 firms interested in relocating to Saskatchewan: provide a list of those firms, the nature of their business, and their current head office location.

Mr. Neudorf: — Thank you, Mr. Speaker. I give notice that I shall on Tuesday next ask the government the

following question:

Regarding the employment practices of the minister responsible for Saskatchewan Economic Development Corporation: what are the names, the positions, and salaries of all persons hired since November 1, 1991?

INTRODUCTION OF GUESTS

Hon. Mr. Penner: — Thank you, Mr. Speaker. I'd like to introduce to you and through you to the Assembly, a good friend of mine who is sitting in your gallery, Mr. Speaker, Mr. Jake Klippenstein who used to live in Swift Current, now lives in Regina. Please welcome him.

Hon. Members: Hear, hear!

Mr. Lautermilch: — Thank you, Mr. Speaker. I'd like to introduce to you and through you to members of the Assembly, a number of guests in your gallery.

We have some folks from our home community, from my home community, Prince Albert, Brian and Trudy Sklar, along with their sons Aaron and Damen. You will be familiar, I'm sure, with Brian, a well-known entertainer in Saskatchewan. He heads a band called Prairie Fire. And one of his band members are with us today, Ken Tranthen from Bakersfield, California.

I would as well ask members to give the folks a warm Saskatchewan welcome to the legislature.

Hon. Members: Hear, hear!

ORAL QUESTIONS

Meeting with Business Community

Mr. Swenson: — Thank you, Mr. Speaker. My question today will be to the minister responsible for Economic Development. Mr. Minister, the list of groups and sectors within our society who are disillusioned with your government in a short 10 months begins to grow each day. We've had farmers, pensioners, diabetics, chiropractors and their patients, optometrists and their patients. Mr. Minister, the list goes on and on. And now I understand that you and the Premier have met with a large coalition of our business groups in the province to try and answer their questions about not having an economic plan.

My question to you, Mr. Minister, is: can you tell the House today, specifically what plans, what detailed economic strategy, was presented to these groups who represent hundreds of thousands of people in our province?

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Mr. Speaker, I'm pleased to respond to the member that the meeting held yesterday in Saskatoon was positive and very constructive, unlike many of the discussions and points made by the members opposite.

The meeting was very useful and was one of many hundreds of meetings we've had with business people since we came to government. The main point made by the business people was this: that given the \$14 billion in debt that we were faced with when we came to government, they were very encouraged by the fact that we were trying to get that debt under control. And I think implied in that that they were very pleased that those members opposite were no longer in government. That was the main point of the . . .

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Having said that, obviously with \$14 billion in debt hanging over our head, it is a very, very difficult task that we have in front of us. That's obvious. But I want to say clearly to the members opposite, that exciting projects like the expansion of Hitachi in Saskatoon . . . when under their administration, that plant was set up to do Shand one, and then there was great expectation it would shut down.

Not only are they keeping it open, but they're expanding the size of it. And they plan to lead to hundreds of jobs in the city of Saskatoon that weren't there when we took over because that plant wasn't determined to do that.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. Question to the same minister. Mr. Minister, that response you gave is why these people are feeling so frustrated. This group of people is serious, Mr. Minister, and they simply don't accept the fact that you like to blame everyone else in the world for your problems.

I quote, Mr. Minister:

. . . the business community is feeling increasingly overwhelmed and frustrated by your government's legislative agenda . . .

Once again, Mr. Minister, I ask the question: do you have anything concrete to tell this legislature today in regards to the meeting with the business people yesterday? They're asking, where is the beef, Mr. Minister?

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Mr. Speaker, I think it's clear that the business people of the province were very, very concerned and frustrated with the lack of economic development over the past 10 years in Saskatchewan. They were also very concerned about the large amount of taxpayers' money that was being invested in bad business deals here in the province of Saskatchewan.

In today's editorial in the *Leader-Post*, I want to quote from it, but it deals with that issue. It says:

Left unresolved are the plans, announced last year by the previous government to mate the expertise . . .

This speaking of Westank-Willock. It goes on to say:

The former Tory government prided itself on hard-nosed business acumen. In reality, it poured taxpayers' money into a number of projects that were either dying or stillborn. GigaText and Westank-Willock come to mind, while Promavia, which proposes to build jet trainers in Saskatoon . . .

The Speaker: — Order. Next question. Next question.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. Once again from the minister we don't get answers. We hear platitudes, we hear evasion, we hear excuses.

Mr. Minister, and I quote again. The private sector folks are saying:

We have all been frustrated by your government's 'consultation' process to date and the lack of balance in recognizing the vital role of our private wealth-creating sector in a mixed economy.

That's what they're saying to you, Mr. Minister. Now beyond blaming someone else for your problems, can you tell this Assembly today the portions of the economic blueprint which you laid down to the business community in Saskatoon, so that the rest of the people in this province can feel comfortable with it? Give it to us today, Mr. Minister.

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Mr. Speaker, I want to indicate to the members opposite that the meeting that was held yesterday, and which the Premier attended and other members of cabinet, that the business people there who expressed that they were very concerned about the high debt in the province as a result of the previous government's bad management — and they wanted to make that clear — want to have more involvement in terms of the white paper on the economy that's being developed by the government. And we gave a firm commitment that their involvement was not only needed but very much wanted and that we would deal with it as quickly as possible.

The other point they made is that they wanted to have input into the legislative agenda in the future, which they didn't have with the previous government, and we made a commitment to allow them input into our legislative agenda. I think the other thing that is clear by many business people is they're upset with the childish attitude of the members opposite in holding up the . . .

Some Hon. Members: Hear, hear!

The Speaker: — Order.

Mr. Swenson: — Thank you, Mr. Speaker. Mr. Minister, chamber of commerce, the mining association, the construction association, the Canadian Federation of Independent Business, home builders, hoteliers — I mean they've all said, shape up, Mr. Minister. Shape up, Mr. Premier. Give us a plan. We let you off the hook in last

year's election; now we've got to have a plan.

My question, Mr. Minister: do you have to get to the point, Mr. Minister, where every person in this province is negatively affected by your legislative agenda before you will wake up and come forward with a plan that deals with the economics of 18,000 less jobs than last year? Mr. Minister, give us part of that plan today. Give us some of those jobs.

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Well, Mr. Speaker, what the members are saying flies in the face of reality, where housing starts across the province are up significantly. Statistics Canada indicates in their most recent report that there are 5,000 more people employed in Saskatchewan this month than last month. That's the fact.

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Mr. Speaker, what's clear is that the business people in Saskatchewan didn't take us off the hook at the last election, but in fact put those members in the opposition on the hook at the time of the last election when they kicked them out. That's what is clear here.

Jobs and employment is up in Saskatchewan. The members opposite simply don't realize that the most recent statistics show that there are 5,000 more people working in Saskatchewan in July than there were in June as a result of the economic development in the province. Housing, jobs in Hitachi, many hundreds of jobs being created across the province, not as a result of GigaText, that's true . . .

The Speaker: — Order, order. Next question.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. Question to the same minister. Mr. Minister, I can understand your frustration with the lack of a honeymoon that you supposedly were going to have with Saskatchewan people, but the problem is, Mr. Minister, that the failings are evident to everyone. I mean headlines like: the first nine months in office disappointing, are all around this province. And that, Mr. Minister, from someone who wasn't a big fan of the previous administration.

Now I say to you . . . my question, Mr. Minister, is: does your Premier's version of economic development simply consist of cancelling AECL (Atomic Energy of Canada Ltd.), shutting down Westank-Willock, shutting down Saska Pasta, shutting down Promavia, failing to attract Piper? Is that your government's economic plan? Because if it is, Mr. Minister, we face a very bleak future. Is that your economic plan?

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Well I say again to the members opposite who are gloom and doom since the day of the election . . . and one would think that they still can't get over the loss. They're wishing for frost so that the

farmers are disappointed; they want drought; they want people to be without employment, even though we have the lowest unemployment rate in Canada. Also Saskatchewan labour force, as indicated by StatsCanada, grew by 8,000 over the period from June to July 1992. That's confidence.

If you look at many of the events across the province, the numbers are going up, the debt is coming under control, and employment is being created. The members talk about the lack of a honeymoon here in the province of Saskatchewan. What we're saying is we're here to do work, not to make rhetoric the way the members opposite are doing. And we'd like to get down to work here in the legislature and get some of the Bills passed and get the budget passed.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. Question to the same minister. Mr. Minister, the business community were very specific with you and your Premier. They talked about your legislative agenda. They talked about the projects being put on hold. They talked about the impossibility of drawing private capital to this province because of that regressive agenda.

Did your Premier and yourself, Mr. Minister, yesterday tell the business community which of these projects you would be asking them to project and bring ahead because you were willing to drop certain parts of that regressive agenda? Did you give them that assurance yesterday, Mr. Minister?

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — I want to say again that the meeting held yesterday was very productive and I think everyone went away feeling very good about the meeting.

What was clear, that we told them certain things were going to change in doing business in Saskatchewan, that we were going to quit taking hundreds of millions of dollars from business people and private citizens and pouring it into things like GigaText and Peter Pocklington and Joytec and Supercart, and we're going to quit doing that. And they were very pleased with that commitment.

We also said that the new style of management in Saskatchewan was going to be to allow the private sector to take a lead role in economic development, unlike what was happening under the previous administration, particularly the member from Estevan who believed he personally had to have his finger in every business deal that was made.

Some Hon. Members: Hear, hear!

Mr. Swenson: — Thank you, Mr. Speaker. A question to the same minister. Mr. Minister, that is not what your Premier said yesterday. And even though, Mr. Minister, you might like to be premier some day, your Premier of today said that the government's legislative agenda would have to be changed.

Now which one is it? Is it the unprecedented power of bureaucrats to search and seize property? Is it occupational health and safety? Is it the minimum wage policy? Which ones, Mr. Minister, did your Premier give the commitment to the business community yesterday so that they can get on with bringing jobs to the province when you won't. Which ones were it, Mr. Minister?

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Mr. Speaker, I want to indicated to the members that the charter on environmental rights, I believe — that may not be the exact title of the Bill — but we indicated when we introduced it that we would be using that as a white paper. That will probably stay on the order paper.

But in terms of getting the work of the House done, we would like to get a number of Bills done this afternoon, if the filibuster of the opposition would end. But we have intent of getting through our legislative agenda, but the childish nature of the members opposite and their wasting of time leads . . .

The Speaker: — Order, order. Next question.

Mr. Swenson: — Thank you, Mr. Speaker. My question is to the same minister. Mr. Minister, I quote once more from the business community:

"Clearly, we're not happy with the consultative approach because it doesn't exist in a lot of cases . . ."

That's the people that you met with yesterday, Mr. Minister.

Now, I would think given the fact that your Premier, your Premier, your leader, gave the business community some confidence yesterday, according to you, that that won't be the process that is followed any more, that the first 10 months has been sham and that you're going to change your ways, will you now tell this Legislative Assembly and the people it represents those commitments that you gave yesterday so that everyone in this province clearly understands that you've changed your ways, and we're on a new agenda?

Some Hon. Members: Hear, hear!

Hon. Mr. Lingenfelter: — Mr. Speaker, I want to indicate to the members that the business people who were met with yesterday were very pleased with the consultative process and the quickness that the meeting was being arranged.

I want to say clearly to the members opposite that when the national unemployment rate is 11.6 per cent under a federal Tory government and ours is running much lower than that, that would give an impression that we're doing not badly — not perfect, but not badly.

I want to say that the recent negotiations on NAFTA (North American Free Trade Agreement) which are very near to conclusion, like the Free Trade Agreement, will be yet another nail in the economy of Canada. And the

members opposite would be helpful if they would get a hold of their buddies in Ottawa and tell them to wait on the NAFTA agreement until the details and implications on Saskatchewan's economy are figured out.

That's a positive thing you could do rather than all of your gloom and doom and crepe-hanging that we see here in the House today.

Some Hon. Members: Hear, hear!

Changes to GRIP

Ms. Haverstock: — Thank you, Mr. Speaker. My question is to the Minister of Agriculture. Mr. Minister, your GRIP (gross revenue insurance program) Bill does more to confirm the worst fears of farmers; it exceeds them. Your hack job leaves farmers who . . . what farmers rely upon for income up to the whim of someone who sits behind a government desk.

Now what comfort is there for farm families in need of cash when you can change regulations to increase premiums and reduce pay-outs any time you want?

Hon. Mr. Wiens: — Mr. Speaker, the member from the Liberal Party possibly doesn't quite understand the Bill about which she spoke a few days ago, nor the process by which it came to be.

The fact is that the program that was established last year, carelessly, had major construction difficulties in it. A broad, consultative process made up of people that I hope that the member opposite respects brought forward a report. I have read the recommendations of the report here to the House — I will do it again if the member has not heard them — that suggested the precise changes that were made this year, that these changes are made within the context of the provisions of the federal-provincial agreement which allows these kinds of changes. And the federal-provincial agreement then provides for options for people who do not want to participate in a program if changes are made.

It was . . . There were conflicting provisions in this carelessly constructed piece of legislation last year that required a specific deadline which did not make sense in a long-term, three-year program, and so the legislation we have introduced simply removes the requirement for that very specific notice and replaces it with a more rational notice . . .

The Speaker: — Order. Next question.

Some Hon. Members: Hear, hear!

Ms. Haverstock: — Thank you, Mr. Speaker. To the same minister. Twenty-four per cent of the people of this province happened to vote for this little party, and they have a right to have their questions answered, sir.

You had the nerve to take away the legal rights of farmers, and put it in black and white in your Bill. You had the nerve to change things retroactively and put that in black and white in this Bill. So why won't you have the courage to lay out in black and white what farm families can

expect for income, and how much they will have to pay for it through premiums.

Hon. Mr. Wiens: — Mr. Speaker, the member from Saskatoon Greystone needs to be aware that the construction of the program, as designed in 1992, is the construction exactly as recommended by the advisory committee that was put in place to recommend the farm income program for this year.

With respect to the premium concern, again the member opposite, if she hasn't heard the explanation before, I will give it to her. You may be aware that last year the federal government, as a carrot to get farmers involved and get the provincial government involved and to get the previous administration a little political room, paid 25 per cent of the premiums for the program in Saskatchewan and paid 10 per cent of the province's premiums. So it should then not be astounding that the premiums this year would rise not by 25 per cent but by 33 per cent, which is 25 over 75 . . .

The Speaker: — Order. Next question.

Some Hon. Members: Hear, hear!

Ms. Haverstock: — Mr. Minister, it's fairly obvious that your colleagues didn't listen to that answer or they wouldn't be applauding it.

The reality for these people is that they have to plan, sir. It's become obvious that your government . . . that that's a word that you quite can't comprehend. For a program like this that was designed to provide long-term, foreseeable income for Saskatchewan farmers . . . And it's ironic that as the Minister of Agriculture you do not have the decency to guarantee GRIP pay-outs and premiums by spelling them out for people.

Mr. Minister, will you not agree that you are undermining whatever predictability is left in GRIP by leaving it to the mercy of you and your department, whose only aim it appears to be is to save money regardless of how many farm families it may affect?

Some Hon. Members: Hear, hear!

Hon. Mr. Wiens: — Mr. Speaker, I'm not sure where the member opposite is with respect to her understanding of the program. The premiums are very clearly definable. The farmers will very soon have their premium statements in the mail. The farmers were given estimates of their premiums when they signed up for the program, and they are higher because of the premium methodology established by the federal government. If the member opposite does not understand that very basic and simple fact, then the member opposite ought to first understand the program before getting into it.

With respect to the income projections, they are also predictable according to the design of the program. Farmers have 80 per cent crop insurance coverage if they have below average yields, and they have a deficiency payment based on the area average of crops that are produced relative to the world prices and then indexed for their individual productivity. The individual

productivity of a farmer is reflected in the payments they receive for their long-term average yields. This is a very definable income program.

Some Hon. Members: Hear, hear!

Ms. Haverstock: — Mr. Speaker, Mr. Minister, an NDP (New Democratic Party) lawyer does not believe you. People who are from Ridgedale and Moosomin do not believe what you are saying. And what you are . . .

The Speaker: — Order, order . . . (inaudible interjection) . . . Order. That has not stopped other members in the House either, I believe.

Ms. Haverstock: — Thank you, Mr. Speaker. Mr. Minister, there are people in this province who are wanting to know what to do with their lives. And the reality of your Bill, sir, is that in spite of all the things that you say, you have the right to change regulations at whim. You have the right to change, retroactively, regulations at whim. That is within your Bill and anybody can read it, and people have read it.

You did not try to deal with civil servants fairly in your government when you broke contracts with them, took away their legal rights — all under the guise that every single one of them had a George Hill contract. You didn't even try to hide your heavy-handedness when you took away the legal rights of bulk fuel dealers in this province. Now you've stripped the rights of families, farm families . . .

The Speaker: — Order, order. I want to remind members that the minister has taken at least two or three times the amount of time that she has taken asking the question, in asking the question. I want the members to allow her to ask the question. And while I'm on my feet, I'll ask the member to put her question directly.

Ms. Haverstock: — Thank you, Mr. Speaker. My question to the minister is: why would anyone in the province of Saskatchewan, why would anyone in Canada or internationally, sign a contract with your government?

Hon. Mr. Wiens: — Mr. Speaker, the member from Saskatoon Greystone clearly indulges more in cheap politics than in research.

The member opposite, if she were to first spend some time trying to understand the program and how it came to be brought forward, would understand that it was brought forward by broad consultation. If the member opposite would try and do a little research and find out about what the pay-outs were and look at one farmer's contract and exactly find out that the premiums are definable and the returns are predictable and that they are bankable, contrary to everything she said in debate the other day, it would be instructive and not destructive kind of discussion she would get into.

The member opposite needs to recognize that the Bill very simply cleans up an administrative incompatibility between two programs that were meshed together carelessly last year.

I think if the member wants to work for farmers, the member ought to look at the facts and bring forward positive suggestions like the rest of the farming community does in discussions with us.

Some Hon. Members: Hear, hear!

Ms. Haverstock: — Thank you, Mr. Speaker. Mr. Minister, your government is the one that's betting a thousand on cheap politics. You either don't understand the seriousness of what you are doing, or what is even more scary, you do. There is no long-term stability provided in the '92 GRIP. At any time, you can change the regulations at will, even retroactively, and you can wipe out farm income. That is in black and white in your Bill.

How can farmers feel confident when you now have that kind of power to alter this program?

Hon. Mr. Wiens: — Mr. Speaker, the member opposite enjoys taking cheap political shots without doing enough research to understand what it is she's talking about. The member opposite, if she believes in the future of agriculture, if she believes in programs that are affordable by Saskatchewan taxpayers and programs that help farmers do a better job of farming, rather than the serious design flaws of the previous program, the member opposite would take the approach of bringing forward positive suggestions.

Nobody has begun to pretend that the GRIP program is in any way a perfect program. I said before that GRIP, you can't make a silk purse out of a sow's ear. Of that there's no doubt.

The Speaker: — Order, order.

Some Hon. Members: Hear, hear!

The Speaker: — Why is the member on her feet?

Ms. Haverstock: — Mr. Speaker, I ask for leave of the Assembly to make a brief, personal statement.

Leave granted.

ANNOUNCEMENTS

Member's Absence

Ms. Haverstock: — Thank you, Mr. Speaker. I wish to inform my colleagues, the legislative staff who've been so supportive, and my constituents, that I will be absent from this Assembly next week. My husband has been fighting a difficult medical problem and I will be accompanying him to the Mayo Clinic. I wish all of you well in your important deliberations, and I hope to be back in my seat soon.

Some Hon. Members: Hear, hear!

GOVERNMENT ORDERS

COMMITTEE OF THE WHOLE

Bill No. 71 — An Act to amend The Saskatchewan

Medical Care Insurance Act

Clause 1

Mr. Neudorf: — Thank you very much, Mr. Chairman. Madam Minister, we spent pretty well three hours this morning going through this Bill 71, which purports now to set up two levels of health care in this province, basically for those that can and for those that cannot afford to pay your massive increases in costs and delivery of the health care system.

Specifically we spent a lot of time on the optometric portion thereof. The optometrists are very upset; the people are very upset. There has been, as is evidenced, virtually no consultation whatsoever by you with these people before you implemented your program.

And in question period just ended we saw ample evidence of that, that this is a pervasive problem within your government. We just heard about the various business community leaders finally, after threatening your government, your Premier, that things had to change around, they finally got a meeting.

An Hon. Member: — Is that relevant?

Mr. Neudorf: — Certainly it's relevant, Madam Minister. It forms the picture of what I'm trying to paint. Since the chamber of commerce had said, clearly we're not happy with the consultative approach because it doesn't exist in a lot of cases, Madam Minister. That is the conclusion of the business community. And there are 15, I would say, 15 community organizations, business organizations, in the province that signed that letter of condemnation and saying we have to have a meeting with the Premier.

Now you say, Madam Minister, that in the optometric services, in Bill 71, that you followed a consultative approach. I'm saying to you . . . no it's not just me saying it, it's the care givers and the care receivers in the province that are telling me as Health critic, Madam Minister, that you're not doing that. This is a unilateral decision on your part to make these changes. It's a unilateral decision on your part.

Now, Madam Minister, we have tabled in this House already close to 10,000 petitions: chiropractic services will amount to virtually 6,000; optometric services are at 4,000. And they're rising on a . . . you can laugh with your official there, that's all right. Let's take this seriously now. Let's take this seriously. I'm talking about 10,000 people, although all of them have not, I grant you right now, been tabled, but we have them in our office getting them ready.

We have 10,000 of these petitions that people have signed. Now that takes an effort for people to go and to sign a petition saying, we're not happy with the process and particularly we're not happy with the end result that you've come up with. Those are significant numbers. Now I know they're coming into our office right now — I asked my secretary — to the tune of about 500 petitions a day that are coming in. That's rather significant and it must say something to you.

During the course of the afternoon I'm going to give you a

few options whereby you can, if you're still determined to go off in the direction, maybe we can divert it somewhat so that the impact on the citizens of this province is going to be less.

Now just prior to the noon break, I asked you the question: how much is this new project of yours going to save the Saskatchewan taxpayer? And you indicated to me that for the year 1992-93 we were going to save four and a half million dollars, and the years thereafter, about \$5.9 million in savings to the Saskatchewan taxpayer with this program that you have unilaterally decided to follow.

Then I asked you the question . . . and you were saved by the bell. Unfortunately for you that's not the case now. I will repeat that question seeing that you've had two hours to contemplate it.

What is the other side of that equation? You saved \$4.5 million, but have you given any consideration at all, Madam Minister, on the flip side, the other costs — the hidden costs, perhaps, as it were — for diseases that have gone undetected; for people whose vision has been unnecessarily deteriorated further than if they would have had a timely examination; and other factors. I'm sure that you have an analysis where you did a cost-effective analysis. I'd like you to give that and share that with the people of the province now.

Hon. Ms. Simard: — That matter was considered. There's no evidence there's a flip side.

Mr. Neudorf: — Well, Madam Minister, what you're telling me now is that there will be absolutely no negative effect at all. What you're telling me now, that the optometrists are totally wrong, totally wrong, because there will not be one person who will miss an eye examination because of the \$50 that they're going to have to pay. There will be not one diabetic, not one diabetic who will miss one of their two annual examinations that they're going to have to pay for, and particularly diabetics that are so vulnerable for disease.

You are telling me now that there is no costs.

Hon. Ms. Simard: — There's no evidence there will be an increased medical cost.

Mr. Neudorf: — What about human cost?

Hon. Ms. Simard: — People who can't afford services will be helped under the safety nets.

Mr. Neudorf: — What about those who can barely afford and have to make a choice whether they're going to buy food, in your terminology, or have an eye examination. What about those?

Hon. Ms. Simard: — If people can't afford the eye examination and are entitled to coverage under the safety nets they'll be taken care of.

Mr. Neudorf: — We went through the safety net this morning with SIP (Saskatchewan Income Plan), FIP (Family Income Plan), and SAP (Saskatchewan Assistance

Plan). Those 90,000 people are covered. I'm concerned about the 910,000 other people in this province, the other 91 per cent that are going to have to make choices. Madam Minister, are you not concerned about them?

Hon. Ms. Simard: — The people who are close to the line are entitled to coverage under the Family Income Plan and they will get total coverage.

Mr. Neudorf: — Madam Minister, I'm trying to be very serious about this because it's a serious topic. Please don't be arrogant or flippant on this. I'm asking you a question about low income earners that do not qualify for FIP. They are still going to have to make choices. They are still not in a position where \$50 twice a year, if they're diabetic, does not mean something to them. It's rather significant.

I'm also talking about seniors, Madam Minister, for whom you have just added a \$211 a month surcharge in their living accommodation. You've just taken \$211 out of their pocket. Many of those seniors are now going to be with \$200 in their pocket, maybe \$300 in their pocket, for a month. This is going to be rather traumatic on them I assure you, Madam Minister. Is this not a concern of yours?

(1500)

Hon. Ms. Simard: — This government enhanced the SIP program in this budget. The seniors who need income supplement will qualify under SIP, and if as a result of requiring optometric exams they qualify for SIP, then they will receive help from the government.

So people who are working and are poor can get their income supplemented under FIP and SIP programs. These are what these programs are for.

Mr. Neudorf: — Madam Minister, to me you're coming across now as a callous individual, because you're not addressing and answering my question.

There are people out there who are going to have to make choices. The vulnerable people, those are the ones that I'm concerned about. And I have identified a number of them for you already. I'm not talking about those that qualify for SIP and for FIP and for SAP. I know that. I'm talking about the next generation, as it were. They are the vulnerable; they are the ones that are going to be having to make choices. You're telling me that they're automatically going to spend \$50 on an eye examination. I question that and I have concerns about that.

Why not reconsider, at least partially, your program here, that would accommodate those that are vulnerable in our society? That's what I'm asking you to address.

Hon. Ms. Simard: — I have said on numerous occasion this morning, that these programs are always under review.

Mr. Neudorf: — I guess what I'm after, Madam Minister, is some more specific commitment on your part than that. That's kind of a wide-ranging statement that doesn't really say anything. Can you be more definitive in terms of what

precisely are you going to be doing? What precisely do you have in mind?

Hon. Ms. Simard: — I indicated these programs are under review. The situation's being monitored. After this is done, over a period of time, it gives us an opportunity to make an adequate assessment. We will make decisions.

Mr. Neudorf: — What's an adequate period of time, Madam Minister, so that people who are watching and listening have an idea of what they can expect from your government?

Hon. Ms. Simard: — We will be doing this on an ongoing basis in the months to come and I don't have a deadline as to when we will be coming forward with all the information. The fact of the matter is the programs are under review and as we move into the next budget cycle, the results of that will be taken into consideration.

Mr. Neudorf: — Madam Minister, is it true that optometrists get referrals right now from doctors because doctors' offices are not equipped to do the job of optometrists?

Hon. Ms. Simard: — Routine eye exams are not covered.

Mr. Neudorf: — What about those eye examinations referred to by a doctor and the doctor's office does not have the equipment in order to do a proper evaluation? And I'm led to believe — and these are my own words now — most doctors' offices would not be properly equipped to do an effective eye examination such as this and the doctor then would refer them to an optometrist to do the thorough job that they think that this individual needs.

Hon. Ms. Simard: — Routine eye exams are not covered, whether a doctor does it, whether an ophthalmologist does it, whether an optometrist does it. And it is true that optometrists are better equipped to perform routine eye exams.

Mr. Neudorf: — So what's going to happen then when people stop going to optometrists?

Hon. Ms. Simard: — There is no evidence people will stop going to optometrists.

Mr. Neudorf: — Well, Madam Minister, that's what I was trying to tell you this morning. There is evidence. Optometrists are telling us right now that there is a drop in the utilization rate. There is a drop. The evidence is there if you'd be only willing to see it. The utilization rate is dropping, Madam Minister, and what I'm telling you and what optometrists are telling you . . . and what about the 4,000 petitions that we have in already? Are these people all wrong? Are these people all blind that they don't see and share your vision?

Hon. Ms. Simard: — There was a substantial increase in usage in May. The optometrists indicate that usage has dropped in June, which is understandable because many people went in May. And that's the fact. There is no evidence that there is going to be a substantial drop in use of optometric services over a long-term period. You can't

rely on one month after there's been a substantial blip, or increase in services, the month following that as being evidence of a decrease in services.

Mr. Neudorf: — Well I agree with you that there certainly is a blip in this program somewhere. I'm going to, for the record, just read in a short statement that I received from an optometrist, an optometrist that is rather upset with the government's program and some of the effects that this program is going to have. And this optometrist entitled it, "A Vision Program Without Vision".

Madam Minister, this is what the service deliverers out there think of your program. And this optometrist writes to me:

These recent optometric program changes fail to recognize primary eye care for what it truly is. As the government itself has stated, this change was for fiscal reasons only. They will be saving on coverage for routine eye exams. (And the example given is refractions). However, someone is misinformed. An eye exam is not just a refraction.

In addition to their qualifications to treat refractive anomalies and binocular problems, optometrists have established credibility to recognize, diagnose, and participate in the management and treatment of ocular diseases and ocularly manifested systemic problems.

Now, Madam Minister, it continues on:

In the absence of early detection, diseases such as glaucoma, which is a leading cause of blindness in Canada, (as you must be aware, Madam) will flourish. Macular degeneration is the number one cause for central vision loss in those that are 50 years and over. These will not be diagnosed in many.

Diabetic retinopathy and undiagnosed diabetes itself will be unrecognized in many. What the government feels they will save on so-called refractions will be spent in the ultimate rehabilitation of those with eye disease progress to a more advanced stage.

And that's the point I've been trying to make with you as well, Madam Minister. This optometrist goes on. And I would ask you, Madam Minister, to respond to these concerns that this optometrist is expressing. And if after I'm finished, I'd be pleased to repeat any of the portions that you fail to grasp or understand what they were trying to get at.

Almost 15 per cent of patients seen by optometrists are referred for eye diseases and other health conditions that are not only identified but recognized as requiring secondary care. The optometrist of the '90s is not merely a refractionist . . .

And that's why they have been felt insulted by some of your answers that you have been giving thus far this morning and afternoon. I'll restate that after my

interruption there.

The optometrist of the '90s is not merely a refractionist but provides such services as dilated fundus examination to check the retina, tonometry, and visual field tests to evaluate for glaucoma, retinal and anterior segment photography in the evaluation of eye disease, and countless other diagnostic tests and therapies.

Madam Minister, note this.

The vast majority of these tests have never been paid for by medicare, an actual cost savings to our government that will now often be done at government expenses or perhaps unfortunately not get done at all.

This optometrist goes on:

Does our government recall several years ago when parts of our eye care system were burdened by ridiculously long waiting lists? No one wishes to return to this scenario.

The ophthalmologist's skills must be utilized effectively. This secondary and tertiary eye care level cannot continue to serve those truly in need if burdened by unnecessary referrals.

That's also something that I had been pointing to your attention. And this optometrist continues:

This is already happening. This is not an effective use of manpower, nor an effective cost saving. There are almost 100 optometrists serving 83 primary locations and 44 secondary locations in Saskatchewan. They are the form of eye care in most rural parts of Saskatchewan. Their annual vision care project serves old age, special care homes, pre-schools, day cares, and our remote northern communities and reserves.

Optometrists under the previous medicare coverage were the only profession whose patients were subject to time limits for their coverage. Does this sound like a system that would be or could be abused?

The system as it exists now does not provide a minimal safety net of care to Saskatchewan residents.

That's what I brought out this morning. The Saskatchewan Association of Optometrists believes at the very least the safety net should include — should include, Madam Minister — medical referrals from physicians, those with eye diseases, diabetics, and senior citizens. The many phone calls, the petitions signed — our unfortunate testimonials — tell us that many of the residents of Saskatchewan feel the same way.

I would be interested, Madam Minister, in your response or responses to some of the concerns brought out, not by myself, but rather through me as a conveyance to express the concerns of your professionals that are out there

delivering this eye care service.

Hon. Ms. Simard: — I have answered this question numerous times today already. I am aware of their concerns. We have heard the concerns that are expressed, and we are reviewing the situation on an ongoing basis.

Mr. Neudorf: — Madam Minister, you are not being forthright and honest with the people of Saskatchewan. Either that, Madam Minister, or you just couldn't be bothered to put a proper effort into answering the concerns of the optometrists.

Is this a sign of arrogance? Is this a sign of unconcern about what these professionals are stating? These are not my words, Madam Minister. These are, in my opinion, legitimate concerns that are being brought forward, and they wanted a response.

Now there were a lot of issues there, and I told you that if there was something there that you couldn't remember or didn't pick up quite fully, I would be prepared to reread that for your edification so that you would be prepared to give it some thought before you made a flippant answer that I've answered that already and don't bother me by asking me questions like that.

I don't think it's good enough for the people of Saskatchewan, Madam Minister. I think they deserve more attention from you.

Hon. Ms. Simard: — We've spent three hours this morning discussing many of the issues that were raised in that letter. The fact of the matter is, is I've indicated that we are monitoring the situation, that we are reviewing the programs, and we will be consulting with optometrists and other health care professionals in the months to come. I have said that repeatedly. My position hasn't changed since this morning.

(1515)

Mr. Neudorf: — That's exactly ... you're right, Madam Minister, and your colleagues are encouraging you by saying, that's right, that's right. They don't want you to change your position.

Madam Minister, that's the point. That's why I'm standing here. That's why we're still in this legislature. That's why the people of this province are disturbed with you; your position hasn't changed.

There's nothing that we seem to be able to say or do in this legislature that will change your mind. And when we are persistent, when we keep at you, then we have your colleague there, the House Leader, getting up and making motions that put closure on everything.

I suppose from your attitude right now you are prepared to call it a day. I don't know whether you want to join the rest of your colleagues, wherever they are. But I think what is happening here, what is happening here is that you are thumbing your nose. I rest my case. I rest my case, Mr. Chairman.

It's amazing, it's amazing, Mr. Chairman, how such a handful of people can make so much noise — a handful of people can make so much noise. And that is in response, Mr. Chairman, that is in response to our insistence that the people of Saskatchewan deserve answers.

You, Madam Minister, got up and said, we have already spent three hours on this and that's enough and I don't want to talk any more about it. I read you a very legitimate statement by the health care giver, the optometrists, entitled "A Vision Program without Vision." And it was chock-full of legitimate concerns. What did you do when you got up? You said, I spent three hours on that already and I think I've answered those and I'm not going to say any more. And you sat down.

Madam Minister, that's not good enough. We want you not to be like Julius Caesar, constant as the northern star, but to be willing to listen to suggestions and ideas and make some alterations. But you just finished saying, I haven't changed my mind. I haven't changed my mind. And that's why we're here. It's not me that is asking for these changes. It's the people out there that are delivering the services and that are receiving the services that are asking me to make my point as emphatically as I can.

And that is exactly what I'm doing, trying to make myself heard over your colleague from Meadow Lake. But I think you're hearing me. And I'm saying to you, Madam Minister, the concerns expressed in that "A Vision Program without Vision" needs more of a response than you have been willing to give so far.

Now I'll give you one more opportunity, but if you insist in refusing, then I will pass that message on to them.

Hon. Ms. Simard: — The fact of the matter is, is the member has asked these same questions throughout the morning and they have been answered in detail. The fact of the matter is, is we've heard the concerns of the optometric association and we're continuing to consult with them and other people across the province. And we will be monitoring and reviewing the situation.

We've heard what has been said and we are continuing to consult. That's the fact of the matter, Mr. Speaker.

Mr. Neudorf: — Well, Madam Minister, we've brought in petitions. We've read the prayers that those petitions are based on. I've given you some very, very serious questions that have been passed on to me and are being asked by people out there. I read to you that "Vision Program Without Vision."

There are other letters here and I want to put this in the record, Madam Minister, letters that I am assuming that you received as well because it's basically addressed by saying "Dear Member of the Legislative Assembly." And thereby I also assume that all of your colleagues will have gotten a copy of this letter. I'm not quite sure whether any of your colleagues have bothered reading it or whether they have answered it. I'm assuming because they're all hon. members of this Assembly, that they will have forthrightly answered them.

But I want to put this letter on record as well. And it says, and I quote, Mr. Chairman:

Since June 1, 1992, our government has chosen to de-insure optometric coverage for all types of vision services for those over the age of 17. Although there is still limited coverage for those on supplementary income plans, SAP, SIP, and FIP, many will fall between the cracks (Madam Minister). Of most concern are those who are unable to afford care, particularly some of our residents, example: seniors, who have a higher incidence of eye problems and eye disease. Many of these conditions can be only properly treated by early detection. The optometrist in most Saskatchewan communities is the only readily accessible health practitioner able to check for some of these conditions.

And what of those already diagnosed with actual eye diseases, or those who have one of the many health problems which have a visual repercussion? Too bad if you're diabetic with two children on a fixed income. Since I must now pay to visit the person who has always taken care of my eyes, I may have no choice but to put off my eye care.

Madam Minister, I want you to pay attention to that line that this person has said:

Since I must now pay to visit the person who has always taken care of my eyes, I may have no choice but to put off my eye care.

There's a name attached to the bottom of this letter, Madam Minister. This is not a figment of my imagination. It's a concerned person out there. And she continues:

For our government to believe they are allowing all our citizens access to the same sort of health care is a mistake. For our government to believe this decision is in our best visual welfare, is a mistake. I believe that this may ultimately prove to be a deterrent for some in keeping their good visual status. Eye examinations are necessary to maintain our health. Good vision adds not to the quantity of life but most definitely to the quality of life (Madam Minister).

I wish to voice my opposition to the cutting of optometric vision services from medicare. I appreciate your consideration of my concerns and trust you will reconsider this decision.

Madam Minister, that's why we spent three hours this morning. I have lots of letters like this. These are in addition to the petitions and so on. It's a concern that these people have. And I want you then, Madam Minister, because you did not feel it warranted your time or effort to respond to the optometrists, maybe you would want to respond to this individual whose name is signed here at the bottom but I will not make public. Maybe you will respond to her, Madam Minister.

Hon. Ms. Simard: — If the person cannot afford to pay for

an eye exam, they should get in contact with the government. If there's some way of helping that person, because they cannot afford to and they qualify under the programs, we will do it.

Mr. Neudorf: — And the ones who can't afford, if they leave out their food, and again I use your own terminology, then they will make that decision whether to buy a gift for their child for Christmas, again your terminology, or to buy sufficient food, or to have an eye examination. What you're saying then, Madam Minister, is that it is up to them to make that choice.

Hon. Ms. Simard: — There are programs available for people with inadequate income.

Mr. Neudorf: — I'm glad we had this opportunity this afternoon, Madam Minister, because I hope there are a substantial number of people who are watching and listening. Because what is being revealed, I believe, from my perspective . . . and I stand to be corrected because I'm not sure how this thing is going across — but I think what we have here is a revelation for many people.

I'm sure that many people out there in voters' land, if you will, in October of '91 rejected us . . . and they did; I'm the first one to admit that — but I still maintain that they rejected us because they thought that they were voting for something better. I sincerely believe that the people out there voted for you because you said that you would do more in health. You said that — that you would spend more on health. You said that.

Now you're pretending to . . . whoops, my goodness, you open your eyes and you find out that the deficit is higher than you thought it was. Madam Minister, that is not so. That is not a fact. You knew. You knew prior to the election. You knew while you were running your election strategy the fiscal position of this province.

We were out there trying to tell you. We were saying to the people, if you vote for us it means an expanded GST (goods and services tax), expanded PST (provincial sales tax). We said that. We said to the folks, you're going to be taxed 7 per cent extra, because we understood that. We also understood how the province would benefit by the \$280 million that would be coming in from federal coffers if we harmonized.

And you made a conscious effort, Madam Minister, as a government, and you said no, we can get the Tories on this issue because the people hate the GST. And if we get them into a corner, the people will reject the Tories because nobody likes the GST. Oh yes, member from Humboldt there is very smug on that.

We were upright, forthright, honest with the people, and said, if you vote for the Tories it'll mean higher taxes. We said that. Because that's the only way on that particular side, other than increase income through expanded economic activity, which was AECL. And we said, this is another area that we're going to address in order to attack the problem.

But they liked your story, and I don't blame them. They liked your story because it sounded

easy, it sounded painless, Madam Minister. And they voted for you. They voted for you on that basis because they trusted you. They had never seen you in government before, Madam Minister, and you made a good picture on the television tube. And they said yes, that member is someone that I can believe in. And so they voted for you across the province indirectly because they liked what they saw in you.

Now, Madam Minister, I am not hearing that much positive right now about you and your plans. This is not a personal attack, this is what you're doing as a government and as a minister. They don't like that. There are 10,000 people on these two issues alone that are supporting us. Now that may not seem like a high figure to you, but those are there. The care givers are also there.

And they're telling us, Madam Minister, that there's got to be a better way. Efficiency, savings, yes. But there are other ways in which we can do that. And you're coming up now by saying, well so be it. We're not going to do anything about it. You just finished saying, I haven't changed my mind. So we've spent now four hours or whatever it is on this particular topic, and you're saying you're not going to change your mind.

And I suppose if I dare talk another hour on this, your colleague, the House Leader, will say, well that's enough of that. Closure — bang; that's enough, you can't ask any more questions.

That's what we're experiencing in this House.

An Hon. Member: — There's no substance here.

Mr. Neudorf: — Oh, this is not substance. The Minister, Mr. Chairman, thinks that this is not substance. I think it goes right to the core; I think it goes to the heart of the problem.

The motivation for what you are doing is deficit driven, budgetary driven. Your Finance minister is putting the screws to all of you ministers saying, do it.

And the problem that we're having, Madam Minister, is that you're doing it but you're not consulting prior. You make a big show about consultation. And I'm suggesting to you, Madam Minister, that that consultation is not there. It is not there.

You're doing these things first, and then you're going around, after it's been found out, basically saying to the organization, this is the way it's going to be. You've got X number of dollars to spend; we'll negotiate with you; we'll consult with you. But after that \$8 million, how are you going to spend it? That's all you've got. That's all you've got. If they're lucky, this is what you will admit to.

Madam Minister, we've got a lot of other ground to cover in this whole topic. But what I'm going to do now is give you an opportunity to at least indicate to the people that you are prepared and that you are really willing to listen to the people. That it's not just a lot of fluff. That it's not just a lot of rhetoric about the fact that you are consulting.

I'm going to propose an amendment to The

Saskatchewan Medical Care Insurance Act that will allow you to do precisely that. And I hope that what you will do is give it some careful consideration before you reject it out of hand.

(1530)

This is a proposed House amendment, moved by myself, that says, clause 11 of the printed Bill:

amend clause 11 of the printed Bill by adding immediately after clause . . .

The Chair: — Order, order. Order, order. I'm not clear here now. Is the member moving an amendment at this time?

I don't mind if the member wants to make mention of an amendment or to discuss possible amendments that might be necessary, but I don't think it's necessary for him to indicate the precise wording of the amendment and who's going to be seconding the amendment. That can wait till the specific clause.

Mr. Neudorf: — Thank you. I never did say who was going to be seconding.

What I'm saying, Mr. Chairman, is I'm giving notice to the Minister of Health that I'm going to be making an amendment. You're telling me I cannot read an amendment — a proposed one?

This is the amendment, Madam Minister:

Adding immediately after clause (i.3) as being enacted therein the following: . . .

The Chair: — Why is the minister on her feet?

Hon. Ms. Simard: — What I would hope is the member would provide us with a copy of the proposed amendment, and when we get to the relevant clause — because it's my understanding that under clause 1 we don't deal with specific sections — when we get to the relevant clause we can then discuss the amendment.

The Chair: — It's up to the member whether he wants to provide the minister with a copy of the amendment prior to moving the amendment. The Chair has no control over that.

But again I would tell the member that clause 1 provides an opportunity for general discussion of all aspects of the Bill, but that if he has a specific amendment to move at a later clause, then he should wait till that time. Although I don't object to him generally discussing the need for an amendment later on, I don't think it is necessary or incumbent on him to read the specific amendment as such at this point.

Mr. Neudorf: — Well thank you, Mr. Chairman, for that ruling. I have certainly no objection to giving the minister a copy of my proposed amendment. Because what I've been talking about so far is the need for a consultative process. And you know, Mr. Chairman, what I would really like to see is that there be something here:

requiring the minister to seek advice and provide a reasonable opportunity for receiving advance public consultations and recommendations on any proposed regulation or any proposed amendment to a regulation made under clauses (i.1) through (i.3).

That's what I want you to consider, Madam Minister. And I think if you take a look at what I have just read to you, that you will look favourably upon it, because this will give the opportunity for people to really have the consultative approach that you're so fond of talking about.

I have one further thing, Mr. Chairman, that I would like to add to the discussion. And again I want to read this into the record because what this basically is is further concern being expressed by the Saskatchewan Seniors Association, resolution passed by the Seniors Association Incorporated, and it's entitled: Emergency Resolution presented to and approved by the board of the Saskatchewan Seniors Association, Madam Minister, and it deals with the topic, health eye program.

Whereas the importance of good vision is obvious to all and the fact that visual abilities decrease with age is well known, and whereas early detection of eye disease as well as early detection and treatment of declining visual abilities can result in the preservation of good vision and more independent life-styles and a better quality of life, and whereas with the high incidence of cataracts, glaucoma, macular degeneration and other chronic eye diseases and because optometrists presently provide 90 per cent of all initial or primary eye examinations, and whereas de-insurance of these vital optometric services will present a financial barrier to accessing this important service to many with the greatest need, therefore be it resolved the Government of Saskatchewan be requested to follow their wellness program and restore full optometric vision coverage for senior citizens of Saskatchewan to save much more expensive later treatment.

This is an emergency resolution presented and passed by the board of directors and totally supported by the Saskatchewan Association of Optometrists. Madam Minister, this is a fax that I received from the Saskatchewan Seniors Association.

Now you said . . . you will probably say, I'm not going to respond to that because I've talked about it before. Well if you want to just ignore another group of people in this province . . . now I'm dealing with the seniors. They're saying the same thing.

Madam Minister, they have expressed a series of concerns, and if you want, I can reread so that you can fully understand their concerns. And then I would like you to respond in more than just a flippant, offhand, I've-covered-that-already type of an attitude because this is what I'm going to have to report to the seniors' organization, whatever your response is going to be.

Madam Minister, how will I respond to the senior citizens?

Hon. Ms. Simard: — I have answered questions of this nature for some three or four hours. I've pointed out the fact that we have a deficit in this province that is crippling us as a result of actions taken by the former government when they were in power. They went from a \$140 million surplus to a \$15 billion debt.

As a result, there are tough decisions that have to be made and difficult decisions. They are not easy decisions to make. And I have said this morning on several occasions that we wish we could pay for everything. We wish we did not have to de-insure optometric services. We wish we didn't have to do that.

We are concerned about people who tell us they may have difficulty paying, so we've established safety nets to try and deal with that. And if there are seniors who are having difficulty and who are on the SIP program, they will be fully covered.

So the fact of the matter is, is that what we hope is that a 50 to \$60 charge per year is manageable for people. I have said that we regret having to take decisions to try and get the Tory deficit under control. I regret that we're put in that position. And the seniors know that. The seniors themselves say that this government was put between the devil and the deep blue sea.

Now the fact of the matter is, is we will be reviewing the impact of these changes in the months to come. We will be talking to groups and organizations and consulting with groups such as the seniors' group and the optometric association. And through these consultations and a reviewing of the programs, we will be developing policies for future years.

Mr. Martens: — Thank you, Mr. Chairman. I want to ask the minister a couple questions. It's interesting, Madam Minister. My father-in-law is 85 years old and in order for him to listen to the church service on a Sunday morning, because he does it from his home, his charge went from \$11 — or I think it's \$12 — to \$27 a month. Those are the kinds of increases you're asking for individuals across this province.

I think that that's a little outlandish, but I want you to know that that's the cost that these services that seniors require to be a part of the wellness that you have said that is a part of all of the things that you want it to be. These are services that they need to have as individuals, to provide themselves not only entertainment, Madam Minister, but also an involvement in the community.

The power rates have gone up, telephone rates have gone up, insurance rates have gone up. And, Madam Minister, you have a surplus in every one of them. You have a surplus in every one of them. Why don't you give the diabetics a bit of a help?

I never, ever realized, Madam Minister, until I had a diabetic in my own family what the costs of these really are. And the diabetic in my own family is not a serious

one, although he has to take insulin every day. But he only has to take it once. His insulin costs have gone from \$1 a month to \$20 a month. If he was a regular user, under normal care, he would have to have three of those per month which is \$60 a month.

Now on top of that, they need . . . every six months they need optometric care to see what's going on with their eyes because that is how the diabetic becomes. I have a lady in my constituency who is a registered nurse and works in the O.R., operating room, in the Swift Current Union Hospital, and she has a machine that she has on her belt that provides insulin on a regular basis for her. And her costs are going way up because of her need to deal with each one of the things that you have raised. What about her optometric care? You want to talk about wellness?

I had reason to go to an ophthalmologist just recently because I was referred in Swift Current, and we're very fortunate to have one there. And he said, you know what this whole wellness program means? It means, Madam Minister — and this is his words — you keep the pressure on and pressure on and as you reach the conclusion of it, it balloons. And then you have kept them well and kept them well and kept them well. But some day, Madam Minister, you're going to have to deal with them. And that is exactly what we're talking about here.

If you don't take the optometric care and allow the people to have access to it, you will have that — as we've pointed out here over and over again — you will have that accented by those people requiring extra care, way above and beyond what they will require as a cost in relating to the optometric services. And that's the point that we want to raise.

Diabetics across this province have to have the opportunity to be a viable part of their community. I have a gentleman I played hockey with that was a diabetic since he was five years old. And his brother gave him a kidney, so that he could live, two years ago. And the member from Swift Current probably taught school with his sister. And that, Madam Minister, is the extent to which people go to maintain their health care in the province of Saskatchewan, making sacrifices, one right after the other. And that, Madam Minister, is what we're trying to say to you. If you cut those services, you reduce the opportunity for them to have the drive and the initiative to continue.

I can give you another case of a diabetic, a young girl who's 21 years old, and she has gone blind in the last three years. She's been to ophthalmologists, she's been to Vancouver four or five times. And that, Madam Minister, is exactly what can happen in every one of these optometric cares.

An Hon. Member: — Wasn't she insured?

(1545)

Mr. Martens: — She was . . . right, she was insured. But the process was shortened in that young lady's life. The process was shortened. That's exactly the problem that we've got with allowing the optometric care to be

de-insured. And that, Madam Minister, is exactly what we're talking about. And we think these optometrists are right. You're going to increase the costs.

Now the other point I want to make is this. A lady called me and said she had migraine headaches. The doctor said to her, come and see me. She went to see the doctor . . . (inaudible interjection) . . . I could talk about the member from Humboldt and how a fellow tore up his NDP card because of his attitude, but I won't do it at this point, Mr. Chairman.

I will point that out probably next week when you, sir . . . I'll tell the member from Humboldt that next week you should be at the meeting that the hog board is having at Humboldt, Saskatchewan in the Bella Vista hotel at 10 o'clock. And that, Mr. Member, is where you should be.

Now going back to health care, Mr. Minister, Mr. Member. Mr. Chairman, and Madam Minister, this lady was told by her doctor to come see her. She went to see her doctor and he said, you go to the optometrist and see whether it is your eyes that are causing the problem for the migraine headaches. Is that, Madam Minister, covered by medicare?

The Chair: — Why is the member for Humboldt on his feet?

Mr. Upshall: — With leave, Mr. Chairman, to introduce guests.

Leave granted.

INTRODUCTION OF GUESTS

Mr. Upshall: — Thank you, Mr. Chairman. It's with pleasure and pride today that I introduce to this Assembly and the members, my three children who are seated in the Speaker's gallery — one who just ducked behind the centre podium. My daughter always tells me a father's role is to embarrass you, and I'm probably succeeding again. I'd just like all members to welcome them here today.

Hon. Members: Hear, hear!

COMMITTEE OF THE WHOLE

Bill No. 71 (continued)

Clause 1 (continued)

Hon. Ms. Simard: — Thank you. If the individual is going to an optometrist to get a routine eye exam, perhaps she needs glasses. Maybe that will correct her headaches. If she's going for a routine eye exam, it is not covered.

Mr. Martens: — Madam Minister, if she is going there on the doctor's recommendation and transfer, is the care covered?

Hon. Ms. Simard: — If she's going for a routine eye exam, it is not covered. If she has . . . if the physician detects that she has an eye disease and refers her to an ophthalmologist, it is covered.

Mr. Martens: — You didn't answer my question. If she's referred by a doctor to an optometrist . . .

Hon. Ms. Simard: — For a routine eye exam, it's not covered.

Mr. Martens: — Well, Madam Minister, this is where the problem is coming in and this is where the people are starting to ask the questions. The referral is by a doctor to an optometrist for an eye examination because of a headache. Is that covered?

Hon. Ms. Simard: — No, it's not covered. Many people go to optometrists with headaches to see whether or not they need eye wear.

Mr. Martens: — What I'm asking, Madam Minister . . .

Hon. Ms. Simard: — I said no. The answer is, it's not covered. No.

Mr. Martens: — If she's referred by a doctor?

Hon. Ms. Simard: — For the sixth time, no.

Mr. Martens: — Actually, it was the fifth time. One of the things that I wanted to ask you about, Madam Minister, is why the optometrists and why the dentists and why the chiropractors got the hit when in the pre-election budget or pre-budget survey that you did, the question was asked this way:

Saskatchewan Government is currently preparing its '92 budget in which it will outline its economic plans for the coming year. Using a scale from one to five, where one means somewhat important, five means extremely important, please tell me how important it is that the budget includes each of the following measures.

Maintaining health care was a question. And if you go from one to five and you take three, and go to extremely important, Madam Minister, it comes out at 95.8 per cent of the people said maintaining health care was extremely important — 95.8 per cent. It's in fact, Madam Minister, the highest in that volume, in that whole questioning, it's the highest volume of any presentation made. It is higher than increasing economic opportunity for jobs. That's the only one that's close to it.

Madam Minister, what we're asking you, Madam Minister, is how you rationalized . . . because of all of the history that I have heard you and the member from Saskatoon Broadway over the years tell us over and over again, you're not doing enough in health care. In fact, Madam Minister, you stood in your place in this Assembly and said, put more beds into Saskatoon, Madam Minister, over and over and over again.

I can recall a waiting-list of 9,000 people, or 11,000 people, and you said, put more nurses to work. Madam Minister, do you know what we did? Two million, five hundred thousand dollars went into more nurses in Saskatoon, Madam Minister. That's what went into nursing care to get rid of the bulge in those referrals to those hospitals in health care. That, Madam Minister, is

exactly what happened.

You talk about deficit. Would you explain what \$460 million of that deficit, in the deficit that you wrote off this year, was a part of? It was in health care facilities in my constituency, Madam Minister, and constituencies around this province.

That's what we're here to talk about. You want to maintain health care. People think it's important. That's why, Madam Minister, the people in the province of Saskatchewan are letting you know through petitions, both through the optometric care and through chiropractic care and, Madam Minister, I suspect that when we get to the dentists, which are also included in this Bill, that we will hear from them too. And that, Madam Minister, is what we're here to ask about.

The health care issue in another question that you asked: each year the Saskatchewan government must determine how much money to spend on many different programs and services. Can you tell whether you believe that the Government of Saskatchewan should spend a lot more, about the same, or a lot less in the following areas? Madam Minister, if you take and include the lot more or about the same in health care, it's 92.8 per cent said that you should maintain or do more in health care.

And, Madam Minister, that is what we're here to talk about. The people of the province — we're just conveying the message to you — the people of the province of Saskatchewan said, do more in health care. They want efficiency, Madam Minister, in health care, and that's in here too. And it's strong there too.

But, Madam Minister, tell me, tell me in the diabetics who need optometric care and your chiropractic care, whether that isn't the cheapest way to defer or to exclude the real health care costs that are going to be incurred and the costs on society for this young lady who is blind now and can't do anything and other diabetics who have that same problem. You tell me whether you don't think that this care given here isn't better than in two years or three years or four years, giving them every care they need for eye transplants or anything . . . retina transplants or whatever they do with eyes. That, Madam Minister, is exactly what we're referring to here.

The member from Rosthern read you a list of all of those things that happened to the eyes. Madam Minister, we're here to ask you, not why you don't care, but why you didn't put the money in there where it belonged, to defer on the basis of wellness. Wellness is what we're talking about here, maintaining what they've got, not trying to cure what they should have been cured with before they were determined that they had serious eye diseases.

Madam Minister, can you explain that?

Hon. Ms. Simard: — We have explained this on numerous occasions. The exaggeration the member opposite has engaged in is not substantiated by any evidence, no evidence at all. And they've de-insured optometric services in Newfoundland and other places, and that evidence doesn't exist. It is speculation on your part. And I said that we would be monitoring and

reviewing that whole situation to determine whether or not any of the exaggeration you've engaged in has truth to it.

Now the fact of the matter is, if you in government had not blown some \$5.5 million on GigaText we could have paid for \$110,000 worth of eye examinations in this province. The fact of the matter is, we paid this year \$760 in interest on your deficit. The annual deficit in this province is only 517 million this year. There would have been a \$243 million surplus, but for your interest on your debt. We would not have had to engage in any budgetary reductions at all, but for the interest on your debt, but for the interest on your debt.

And at election time, we campaigned on getting a handle on the deficit. That was our major thrust in the campaign — to balance the books and try and get a handle on the deficit. And that's what people wanted to see done.

Now with respect to health care, we believe in maintaining quality health care services for Saskatchewan people, and we're going to do that. In fact in this budget there were a number of initiatives that improved health care services for people, such as almost a 20 per cent increase for home-based services in Saskatchewan to provide safety nets for people who will be taken out of hospitals sooner, for example.

Because right across this country, people know that by moving people through the hospital system more quickly, there is a saving. So there will be a repriorization of expenditures in health care. That is taking place. And we will attempt to put our money in places where we get higher-quality health care at a cheaper cost for the taxpayers. That is what we are attempting to do.

There were a number of initiatives in this budget that tried to reduce some of the inequities that were out there. So health care is extremely important to our government. We are attempting to do what we can to save medicare by eliminating the annual deficit that is created as a result of your \$15 billion deficit that you've left as a legacy to the people of this province.

The seniors of this province built it up with sweat and toil. They built a future for their grandchildren which you destroyed in nine and a half years. And now everybody in this province has to pay a share of your debt to try and preserve medicare for future generations.

Some Hon. Members: Hear, hear!

Mr. Martens: — Well, Madam Minister, that was fairly pompous, I do declare . . . (inaudible interjection) . . . Madam Minister, I didn't say anything when you were up.

One of the things that I would like to ask you about, is you said you're going to do all of these things in spite of the debt. Well fine. But I know that in spite of the debt, I got five new schools in my constituency. I got a new health care facility that you want to shut down. That, Madam Minister, is a fact. Another one that you want to close down, where people have been begging, Madam Minister, seriously begging, to have a level 4 care facility, you turn around and you unload respite care on that

facility. Madam Minister, I have another facility that you want to shut down that's a level 2 care facility.

And that, Madam Minister, is exactly what we're talking about. I want to tell you what wellness means to the optometrists, to the people who need eye care. I want to tell you what wellness means to the chiropractic care and the dental care. And, Madam Minister, those are all three identified in this Bill.

And I want to raise with you the fact that if you protect it at the beginning, the health care, that's what I perceive your wellness to be. I perceive your wellness program to be where we look after it so we can get through life as well as we can, so that we reach an age when we need maximum care that we can have it at that time. I accept that.

But, Madam Minister, the services that are provided on the trip to that end are not being adequately met. We have petitions by the thousands, Madam Minister, on chiropractic care. It is the least-cost service that you could ever hope to get.

(1600)

And I'm talking from experience, Madam Minister, on chiropractic care. My mother had to deal with that for 25 years because of arthritis. And she lived by herself, containing herself all her life, and was never a burden to the society of the people of the province of Saskatchewan. That, Madam Minister, is a fact because wellness was a part of the process that she got old in.

And that, Madam Minister, is not what I see in this. You're contradicting absolutely, totally contradicting what you're talking about. Wellness is not a part of this. How can you say that wellness is reducing optometric care when you're saying seniors can't have it; diabetics can't have it. It's a necessity for them, absolutely a necessity.

Chiropractic care . . .

An Hon. Member: — You're exaggerating.

Mr. Martens: — Madam Minister, I'm not exaggerating at all. Why do you think they send in petitions, Madam Minister? Why do you think they send in petitions? And, Madam Minister, Madam Minister, they're getting service, but they're having to pay for it, Madam Minister. And that is the problem that these people are seeing over and over and over again.

And, Madam Minister, as the member from Rosthern said, there are 91 per cent of the people of the province of Saskatchewan are not getting that care; 90,000 people in the province get it for nothing. And what's the matter with the taxpayers getting it?

Madam Minister, why don't you take 150 million out of the Liquor Board, that is a surplus in the Liquor Board, and why don't you put it into this health care process right here? And why don't you take the 118 million surplus, plus the 115 million retained earnings in Sask Power and use it right here? Madam Minister, why don't you take SaskTel, the \$50 million profit in SaskTel, and use it right here, or the surplus in SaskTel and use it right here?

Madam Minister, what you are doing, what you are doing is doing what the Finance minister told you to do. And you are not basing this on wellness; you're only basing it on the one single item that you think is going to be the one that's going to solve the problem. And, Madam Minister, that is exactly the wrong thing to do. You've got to have a balance between what people can pay and what people can receive for service. And that, Madam Minister, we think you're out of balance. And that is where we draw the line.

People have come in over and over again and said to us, they're wrong — they're wrong on a number of areas. They don't provide the service as it was; number two, they didn't even consult about what it was that they were doing.

And that, Madam Minister, we've heard over and over and over again from optometric people, from chiropractic people. And that, Madam Minister, is where this whole thing is at.

We want to know, Madam Minister — I think it's been asked four or five times — we would like to have a list of the people you consulted with to give you this reason to change this program in this way.

Hon. Ms. Simard: — I've answered that question this morning. The answer is, is that there were consultations going on of a very general nature from some time back in February by the Department of Health. There were consultations going on as we moved up to the budget. There are continuing to be consultations. I tabled in this House a document with a whole list of names of people that we have met with.

We will continue to consult as we develop budgetary measures. There has been a lot of consultation by this government.

Mr. Martens: — Well, Madam Minister, that doesn't hold true. Because when we discovered prior to the budget, through the optometrists, that they were not getting any results from you, they came to us and told us that we weren't . . . we started asking questions in this Assembly. And that was just prior to the budget, Madam Minister. They hadn't been consulted with at all. They heard rumours. And so they came to us and they said, what's going on?

And, Madam Minister, I'd like to have a list, because it wouldn't be long. Because you haven't had the consultation that you said you had. And we would like to have a list of those people in optometric care and chiropractic care that you have consulted with.

Hon. Ms. Simard: — I told the member on several occasions, we do not consult on budget items. There is a budget secrecy policy and we don't consult on budget items. We have however consulted even on the issue of optometric and chiropractic services several days before the budget was released and subsequently. We've also consulted in a general manner with many, many people. And we've provided that list to you, if you would take the time to read it.

We do not consult on specific budget items because it goes against the policy with respect to budget secrecy. I've said it . . . if I've said it once, I've said it a hundred times.

Mr. Martens: — Well, Madam Minister, the guys who smoke got an extra notice that they were going to have 88 cents on a pack of cigarettes. And that, Madam Minister, was not delivered by this opposition; that was delivered by probably the Minister of Finance himself.

So you had an opportunity for the smokers of the province of Saskatchewan to have them be able to go to the tobacco shop and pick up some extra cigarettes before they had an opportunity to know what optometric care was and chiropractic care. That, Madam Minister, is what we're talking about.

So the people who sell tobacco can bolster up their supplies . . . people can go and get tobacco. But when it comes to care and wellness, Madam Minister, you say, well we've got the budget to deal with — can't do it. I was a minister once too, and that, Madam Minister, that, Madam Minister, that, Madam Minister, is not necessarily so. You do not have to deal with that.

You didn't want to. You didn't want to deal with that any sooner. As a matter of fact, Madam Minister, the reason the House Leader is so snappy about getting out of here quickly is you want to introduce your wellness program, and you don't want to do it in the House. And you don't want to do it when the House is sitting because you haven't the courage to do it in the House. And that, Madam Minister, is the truth.

Now why can't you give me a list of the names of the people who you consulted with about optometric and chiropractic care?

Hon. Ms. Simard: — We'll provide you with that information.

Mr. Martens: — Thank you, Madam Minister. How long will it take for us to get it?

Hon. Ms. Simard: — You can have it on Monday.

Mr. Martens: — I beg your pardon, ma'am.

Hon. Ms. Simard: — Monday.

Mr. Devine: — Thank you, Mr. Chairman. I have a couple of questions to the Minister of Health with respect to the overall budget. Could you just summarize what the growth in your overall budget is from 1991 to 1992? In the overall health care budget, could you give us the size of the increase in the budget from last year?

The Chair: — Before the minister answers, I'd like the member from Prince Albert Northcote to restrain himself, and other members as well, and pay attention to those who are asking the questions and those who are providing the answers. Thank you.

Hon. Ms. Simard: — You will have to ask that question of

the Minister of Finance when you're into Finance estimates.

Mr. Devine: — Well, Madam Minister, I'm just asking what you plan to spend in health care in this budget, and could you give us some indication of whether it's more or less than last year?

Hon. Ms. Simard: — Okay, I don't have the specific figures here. There's a decrease of 3.6 per cent overall.

Mr. Devine: — A decrease of 3.6 per cent, 3.6 per cent, 3.6 per cent on your budget. Your budget would be about 1.5 to \$1.6 billion, and you've decreased it 3.6 per cent. So that's a 50 to \$60 million decrease in your budget.

The reason that I ask that is that I was reviewing some of the observations of the NDP leader and the now Premier of the province of Saskatchewan prior to the election. And on a radio talk show on CBC (Canadian Broadcasting Corporation) on October 9, 1991, Mr. Romanow says: there will always be a growth in health care just by virtue of inflation.

Now we've had modest inflation, I would acknowledge. It's 1 to 2 to 3 per cent. But let's say it's 2 to 3 per cent — it has been in the last year — and yet we find in the province of Saskatchewan that you have decreased the budget by 3.6 per cent. So essentially for the poorer people, those on the lower income scale in the province of Saskatchewan, they've experienced a 5 — modestly a 5 — maybe 6, maybe 7 per cent decrease in health care services or an increase in health care costs. Would you say that's an accurate reflection of the health care situation in the province of Saskatchewan?

Hon. Ms. Simard: — An accurate reflection of the health care situation in the province is this, is that the former government had tried not once but twice unsuccessfully to amalgamate hospitals in Saskatoon and spent millions and millions of dollars in changing their plans with respect to renovation, and your former Health minister was not able to achieve that. Within three or four months of being in office this government achieved amalgamations of hospitals in Regina and Saskatoon that have produced substantial savings to the taxpayers and that are producing more efficient services for the taxpayers of this province.

The fact of the matter is the reality in health care is this: that this government is taking measures to introduce efficiencies that will contain health care costs. And it will be a transitional period where we will move towards more community-based services. We will contain costs, and in the end we will be providing a higher quality of health care costs.

As a result of a number of those measures that have been taken, we have been able to contain health care costs in this province to date.

Some Hon. Members: Hear, hear!

Mr. Devine: — Well, Madam Minister, you have just acknowledged that you have cut the budget in health care by 3.6 per cent. And if we add to that 2 to 3 per cent rate of

inflation for 1991-92, or '92-93, we see people who are on fixed income, like low income families, single parents. Seniors are looking at a 6 per cent cut in health care services or, turn it around, a 6 per cent increase in costs.

Now my colleagues in here have been itemizing those costs. And you said it's efficiency. And the problem we're running into is that you are asking people to pay, say the working poor, to pay very large increases for their services. Not only have you cut the total budget by 50 or \$60 million and you add inflation on to that which is another 50 or \$60 million, the equivalent of \$100 million cut in services, but for low income people and individuals who have children, on top of that we look at the deductible.

Could you tell us what the family deductible is in the prescription drug . . . what kind of increases that you have in dollars and percentages. If you are a man, a wife, and you have three children, what your deductible used to be and what it is under your new budget.

Hon. Ms. Simard: — The fact of the matter is, is there have been a number of services introduced in this province to help the working poor. We see increases in northern Saskatchewan — I forget what the figure is; I think it's 9.6 per cent — which we never saw under your government. Why? Because there are health inequities in the North, and this government has made a commitment to try and reduce those inequities. This government has made a commitment to that.

There have been increases under the social services department to help the working poor, for example. There have been a number . . . The safety net has been broadened and has been brought to the attention of the public through correspondence with respect to the drug plan, which never occurred under your government.

There has been an attempt by this government to deal with the problems of the working poor. People under FIP are covered fully for chiropractic and optometric services. With respect to the drug plan, we have an extensive safety net that I've spoken about at some length in this legislature and to the public.

And today the deductible is \$380 per family under the drug plan, \$100 for single seniors, and \$150 for senior families. And the deductible is to be calculated on a semi-annual basis at January 1 and July 1.

(1615)

Mr. Devine: — Madam Minister, just so we confirm, you're saying that the deductible for a family is \$380 per year for prescription drugs? Is that accurate?

Hon. Ms. Simard: — Yes, but it's done on a semi-annual basis — 190 every six months.

Mr. Devine: — And, Madam Minister, is it true that it used to be \$125 for the same family?

Hon. Ms. Simard: — That is correct.

Mr. Devine: — Well, Madam Minister, could you get one

of your officials to calculate the increase in the cost in going from 125 deductible for a family to \$380 per family, so we have some indication of how that relates to the rate of inflation in the province of Saskatchewan?

Hon. Ms. Simard: — Well I can get that calculation for you. But I'm also going to ask the Chair why we are giving estimate questions on the drug plan when we're dealing with Bill 71 that has nothing to do with the drug plan.

Mr. Devine: — What we're trying to find out . . .

The Chair: — Order. I've listened to both the Leader of the Opposition and the Minister of Health, on the one case asking questions about prescription drug plan, and the other case answering questions about the prescription drug plan. And although it's interesting and an interesting exchange, I'm having difficulty in relating it to the Bill that's before us.

Although I don't have difficulty in members bringing attention to items outside the Bill, strictly speaking, they should begin to relate what it is that they're saying to the Bill that's before us and that pertains to both those who ask the questions and those who answer the questions.

Mr. Devine: — Thank you, Mr. Chairman. The point is that we are dealing with a situation where this part of health care has obviously been subject to tax increases or severe cuts. And people are being charged very large amounts of money and particularly the working poor or low income or single parents or seniors. And they're being charged for eye examinations.

And what we're finding out is that this is just the tip of the iceberg. And I'm going to relate it to the kinds of increases in health care costs and the decrease in services in the entire health area because what we're going to find out is that there are serious and significant increases in the burden of living in the province of Saskatchewan under this health care minister and the NDP administration.

And I point that out to the hon. member because in this Bill the Minister of Health has passed an awful lot of the burden of this cost of living onto those that can't pay or those that find it extremely difficult to pay.

Now my calculations on some of these increases are in the neighbourhood of 2 or 300 per cent or maybe a thousand per cent increases. Some things were never even charged before are now being charged, whether it's \$50 and it used to be nothing, or it used to be \$125 deductible. It's up to 180 — a 300 per cent increase.

So I'm asking the minister then if she would give me, in relation to this Bill, the specific service fee costs, the fees that she charges and the percentage increases in each of the categories so that we can go through them one at a time and find out how that relates to the cost of living, inflation, and to other parts of her health budget. Because the Minister of Finance and obviously the Minister of Health is going to have to put all this together in their so-called wellness program, which is cutting pretty deeply into people's lives.

So people are starting to add it up. As we're on television

now, they have their papers out and say, well I didn't know I had to pay for this or this or this, or the increase was 200 per cent or 300 per cent.

We want all those numbers, and this Bill is a perfect place to get them, in the categories that we're discussing here now. So if she could give us the fee increases and the percentage increases in each one of those associated with this Bill, we'll go on with the others when we get to Health estimates.

Hon. Ms. Simard: — The burden that people are facing, Mr. Chair, is a burden of nine and a half years of Tory government. That's the burden that people are facing in this province. And that's what they're having to deal with.

With respect to this particular Bill, chiropractic services, there will be a co-payment by the consumer — \$7.50 per visit will be paid by the government. The fact of the matter is, is chiropractic services were not even insured before 1973.

With respect to optometric services, under 18 will be covered. People on Family Income Plan supplement, supplementary health benefits, senior income supplements, will be covered fully. Other people are de-insured with respect to optometric services.

Mr. Devine: — Mr. Chairman, I just asked the minister, and through you, Mr. Chairman, if we can talk about . . . and she's raised it several times here, she has to do these things. The minister is saying, she has to charge and de-insure all these people because she says there's a deficit. Now she's talked about this on several occasions, because when we've asked about why are you doing this, she says, well there's a deficit.

And when I ask the minister, that obviously you have choices on how you deal with the deficit, I'm asking you, why are you picking on the sick? I'm asking the minister, if you have to address the deficit, you can increase taxes and you can do some other things. And Lord knows, you've done enough of that. Why are you picking on the sick to address the deficit?

And she's raised this point, Mr. Chairman, I'll bet you at least a dozen times since this morning or last night. She has to do this because there was a deficit. Well if there's a deficit, she has choices. And my argument and the people's argument is, why would you pick on the sick? Why would you charge the sick more? It's not their fault if they've got headaches or eye problems or dental problems, and you've de-insured them and you're charging them. Why would you do that to address a deficit? Why wouldn't you look at some other ways to get at it, rather than tax the sick?

Because I was under the impression that when you campaigned for the CCF (Co-operative Commonwealth Federation) or the NDP, you wouldn't tax the sick. There would never be user fees. And these are user fees. And the minister says, well I have to charge user fees on the sick if they've got poor teeth or bad eyes, because there's a deficit problem. I didn't think the NDP campaigned that way.

In fact I'm going to read you quotes where your leader said he would never have user fees even though he just finished saying there was a \$14 billion deficit in the fall of 1991. He says, you can count on us not doing user fees.

Well if that's the case, how does the minister square this circle where she is charging the sick user fees and significant increases, as we all know, significant increases because she's de-insured those that were sick to compensate for the fact that she's got a deficit. How does she justify taxing the sick and applying user fees because she's got a deficit?

Hon. Ms. Simard: — The member opposite engages in gross exaggeration — de-insuring the sick. That's ridiculous. People can go and see their doctors and they're covered, and there's no co-payment. They can go into the hospital; they don't pay anything to go into the hospital.

User fees in the health care system have been there for years and years and years. The drug plan was a form of user fee under your jurisdiction. And the member opposite knows that, but he's involved in a gross exaggeration here. There's no question about it — de-insuring the sick — that's a gross exaggeration.

The fact of the matter is, is when you move to require a co-payment with respect to chiropractors, when you de-insure optometric services for those people who can afford it who are over 18, you are not de-insuring the sick. What you are doing is there's certain routine exams that are not covered. With respect to chiropractic services, you're asking for a co-payment. It's not nearly in the category that you're talking about.

We still maintain in this province a high quality health care system, very high quality health care system where access to doctors and hospitals are available to people and are covered under our health care plan.

Now with respect to the deficit situation, the member opposite knows that in order to get a handle on a \$15 billion debt . . . mind you he probably doesn't know; he probably doesn't understand the magnitude of the damage that he's done to this province. He probably doesn't understand that this province is on the verge of bankruptcy because of his misjudgement in the last nine and a half years. Because he just continued to do it.

The fact of the matter is, is we have to get a handle on that and there's only one way to do it. And that means that everything in government has to be examined, including health and education and other programs, social programs. Everything has to be examined. And the only way we can get a handle on the Tory government deficit is through program reductions, increased taxes, and some control on the spending, the absolutely crazy spending that the government opposite engaged in in such an irresponsible fashion over nine and a half years.

Mr. Devine: — Mr. Chairman, I want to quote the NDP leader in early October of '91. And he was on a radio station, CBC, and he says, on the question of user fees, the answer is no user fees. Period. User fee for medicare has been tried. Thatcher and the Liberals tried it; didn't

change utilization rate at all — utilization rate. Now the Minister of Health is chirping from her seat because she doesn't like to hear the fact that she's charging people and raising their fees several hundred per cent.

And if you have a headache, if you have got dental problems, and if you've got health problems related to your eyes, she is now going to charge you if you're sick because she's going to de-insure you. And it's a user fee, any way you want to look at it. And she's using that for low income people, single parents, seniors, because she has a deficit.

And in the same interview, the Leader of the NDP acknowledges there's a \$14.2 billion deficit in the province of Saskatchewan. This is prior to the election. And he says, well I'll tell you what we're going to do. We're going to cut taxes and we'll balance the budget and we'll increase health care money, and at the same time there'll never be increases in fees. And he's on the radio saying this 10 days prior to the election. He's talking about the fact that they have to deal with the deficit, but he is going to cut taxes by 2 or 3 or \$400 million, and he is not going to increase user fees.

And here's what we have, Mr. Chairman. We've been in here asking the minister, why are you de-insuring people that are sick. Why are you taxing the sick to address the deficit when the deficit is the same size as it was in October, acknowledged by the Leader of the NDP — 14-something billion dollars.

And now we find out the truth is the NDP plan to tax the sick and have user fees to address the deficit, because the only way they can find the money is they said, well let's see, what'll we do to get elected? We'll promise to cut taxes and increase health care. And the people will believe us because we're NDP and we always stick up for those that are sick.

And guess what an education they're getting today, Mr. Chairman. Guess what an education they're getting today. They have increased taxes on the low income people. They have now increased user fees for people who are sick. They are taxing those that are sick to pay for their campaign promises that were hollow, hollow, hollow.

And they've left the minister here out to dry, like the Agriculture minister, to say, well, Madam Minister, you'll have to take it on the chin because we got elected making these promises, but we can't afford them. Therefore we're going to have to tax the sick, close hospitals, close level 1 and 2 nursing homes. We're going to have to break contracts. We're going to have to be as miserable and mean as we can to save some money.

And do you know what, Madam Minister? After all your rhetoric about the deficit, you still have a \$500 million deficit. You had an \$800 million deficit last year. You're over 1.3 billion in the hole. Your credit rating is falling through the floor. And you're taxing the sick at the same time, thinking the 50 bucks out of some poor senior or \$50 out of a poor family is going to balance your budget and is going to fix the deficit you've got here. What a pathetic excuse for economic planning, let alone

wellness.

Is this a wellness model? This is a joke. This is a sham. You did whatever you had to to get elected. You promised whatever you had to do. You said you were going to have the cost of production for farmers. You were going to balance the budget; 4.5 billion in a budget was enough. You've increased it to 5.1. You've increased taxes over and over and over again. And now you're taxing people and charging them if they've got bad eyes, if they've got bad teeth, if they've got headaches. Even if they need prescription drugs it's up 300 per cent.

(1630)

And, Madam Minister, I can remember when we had a deductible of up to 125, you said the working poor, Madam Minister, would have to sacrifice food and have to sacrifice Christmas presents to pay the deductible. Well what in the world do you think they're going to have to sacrifice if it's gone from 125 to \$380? What hypocrisy, Madam Minister — what hypocrisy.

How can they let you hang out to dry like this when you have to eat all of those campaign words and fly in the face of Tommy Douglas, fly in the face of all those brilliant arguments there was for medicare. You don't seem to care. You are taxing the people who voted for you because they believed in you. And you are charging them when you said you wouldn't. And they said, at least an NDP member of the legislature as Minister of Health wouldn't do this.

So, Madam Minister, you have choices, and the problem that you've run into is you've chosen the wrong things to address your deficit. You've decided to go back to the people who can't afford it and to hit them the hardest. Because \$50 on a low income family is a lot more than \$50 on a lawyer or a business person or somebody else. But you've gone to the working poor to address your deficit.

And every time we address these problems in this Bill, you say, but I have a deficit. I'm saying, Madam Minister, if that's your excuse, it's not valid. You don't have to tax the sick and the poor to address the deficit. And your leader said he wouldn't do it, and you campaigned and said you wouldn't do it — that you'd increase the money for health care, you'd make it more accessible, you'd open it up.

So, Madam Minister, I'm asking you, given all the choices that you have, would you stand in here and justify why these low income people have to pay more and more and you've de-insured all these services in the face of all the alternatives you could have to provide money for your deficit? Can you justify to these people that have to pay why their \$50 or their \$25 is absolutely necessary?

Your leader has said it never deters the use. Utilization doesn't go down. So if utilization doesn't go down and they have to pay, you're getting more money from them. You're getting more and more and more money because he says utilization doesn't go down, you're charging them more. Therefore, Madam Minister, you are using your power now, once in power, to help address your deficit

problem on the backs of the poor.

Would you just again justify to the poor, the low income, the seniors, the single parents, why you think this is a good idea.

Hon. Ms. Simard: — I've told this Assembly on numerous occasions, all morning and this afternoon, that low income people are provided with a safety net program. If they have difficulty paying for their drugs, or if they need chiropractic or optometric services, there's a safety net there. I've explained it in detail on a couple of occasions at least this morning. If you had . . . Well never mind.

The other fact of the matter is, is that high income people have also received fairly substantial tax increases in this budget. At the same time, we are attempting in the budget to protect low income people.

Mr. Devine: — Well, Madam Minister, see, we're right into it, and I'm sure that you can appreciate this. You keep going back that you're protecting low income people and that you've taxed higher income people. You have choices. And what my point will be, on this Bill you don't need to de-insure people and to tax them when in fact you have alternatives.

Let me give you a couple or three examples. You have taken low income people and you have charged them up to 30 per cent increases in utilities. What in the world choice do they have? They have to pay their power bill; they have to pay their telephone bill; they have to pay their insurance bill. They have no choice. It's like when you're sick, you have to pay.

Now that's not a CCF way; that's not an NDP way; that's not a socialist way. That isn't a caring way regardless of your politics. People who are poor and up against it know that if you don't pay your power bill, it's cut off. If you don't pay your telephone bill, they take it out. And if you don't pay your bill now, if you've got bad eyes, you can't get them checked.

Now you have choices, you've had choices and you have hit the low income people.

Right now you said, well you're going to protect the poor. If you go to Canadian Tire, you'll find that the taxes are up 15 per cent on every item in there. And you've raised it 15 per cent. Low income person goes in to buy something from Canadian Tire, you've raised the sales tax 15 per cent. What protection for low income?

You have raised sales taxes, you have raised utilities, you have raised fees, and you have raised the taxes on low income people, so that in fact they are worse off in the province of Saskatchewan compared to any other jurisdiction that we find or certainly the comparisons in Saskatchewan year after year after year — a 15 per cent increase in taxes on every goods. You go to a furniture store, go to a furniture store and you will find that you will pay 15 per cent more under an NDP administration because it's 15 per cent more on tables, 15 per cent more on chairs. And low income people pay that.

So, Madam Minister, you said you have choices. You

have decided that you are going to pick on the poor. And we're just making this point — the poor don't like that. The poor thought they were campaigning for a socialist CCF government that would protect them.

And do you know what you did? And again I can go back to your leader who was quoted in the radio station. You decided you would rather not participate in harmonization because you figured you could tax the sick, or tax the poor, or tax the low incomes, and see if you could make it up. Because by not doing the PST, whoops, you could get elected and you'd say, well folks we can just manage our way through this. We'll give you more money. We'll cut your taxes. And you gave up several hundred million dollars that you knew were there, 5 million a year in administration — which is a GigaText a year that you just gave up. Imagine what 5 million would do in this Bill alone. Just put the two together.

And people had choices. They could cook their hamburger at home or they could go to the restaurant. But not under your system. They have to pay their bills. They have to pay the user fees. They have to pay the taxes at Canadian Tire. You've got them because they have no choice.

That's why they're upset. That's why they're so darned disappointed in a Minister of Health that says she's NDP, says she's CCF, says she's a socialist, says she cares, and you're taxing them and giving them no choice. And the hypocrisy of it is when you were standing on this side of the House — and we would increase the budget 5 per cent, 6 per cent, 7 per cent — you'd say, it's no where close to inflation. It's not enough. You haven't helped the poor.

Well, Madam Minister, look at what you've done and the choices that you have made in your caucus and your cabinet. Well, Madam Minister, they've left you out to dry. You're hanging out to dry. You're going to take it on the chin as perhaps one of the most disappointing ministers of Health in the history of Saskatchewan because you went back on your party's legacy, your party's history. You went back on your word politically.

And it's not just this Bill; it's all the other things that are going to be associated with health that we can get into in your estimates. And you keep coming back to it. You have no choice because there's a deficit.

Madam Minister, you have choices. You have choices, and you have decided to tax low income people and to tax them here in this Bill. And they haven't had that happen before. When you had other alternatives that you could get into, you decided to tax them here.

And, Madam Minister, these increases are not going to be forgotten by people who are up against it, who go to the food bank, and the line-ups are increasing, who are approaching going on welfare and the line-ups are increasing. The numbers on welfare are increasing under your administration because of the lack of an economic plan.

And the lack of an economic plan isn't helping the deficit that you're so worried about. So you're taxing the poor.

You have no economic plan to stimulate the general economic activity in the province. Your deficit is growing. Your credit rating is going down. And you're saying, well here in the legislature on this Bill I have to raise taxes on the poor because we don't know what else to do.

Well, well, well. And the opposition members say, well it all happened in nine months. Well, Mr. Chairman, the NDP promised that they would have the same budget. They promised to increase expenditures in health care and lower taxes. All we're calling them on, Mr. Chairman, is this Bill isn't consistent with what they promised and it isn't consistent with balancing the budget. It isn't consistent with looking after the poor and it isn't consistent with the campaign that they had nine or ten months ago, because they never got elected on this. And they know it.

It's a disgrace to the history of the CCF. The CCF clearly are gone, Mr. Chairman. The CCF are gone. And this new bunch of non-democrats are in here now, non-democrats who . . . They'll bring closure on this Bill probably, Mr. Chairman — closure so the minister can't even reply. Because if she did get up, then she would have to take her seat permanently then. And we've seen that already in one of the Bills in here. Bring in the officials. Don't answer any questions, and they just walk out. The Minister of Finance was the first in the history of Canada to do that. And he seems to be proud of it.

Well, Madam Minister, this Bill charges people who are low income and it charges people who are in difficult situations. And we want the public to know how you justify, how you justify charging those who are sick on the argument that you have a deficit. We want to hear from you the amount of money . . . I want you to tell these people the amount of money you think that you will generate from this Bill in one fiscal year.

Hon. Ms. Simard: — Mr. Speaker, the member opposite talks about food banks. Food banks didn't exist in this province before he came to power. Not one single food bank.

The member opposite talks as though all this has just happened in nine months. What he doesn't tell the people of Saskatchewan is the fact that his government went from \$140 million surplus to a \$15 billion deficit. They bankrupted the province. That's what the member there did.

Some Hon. Members: Hear, hear!

Hon. Ms. Simard: — There is no money. There's no money for many of our social programs. And no future for the people of this province, unless we get a handle on that deficit and it is directly credited to the man who just sat down in his seat.

And if we want to talk about disappointment, let's talk about disappointment. The great private sector managers, the great business people over there, who took a prosperous province, a province that was in terms of a financial situation, in the best position of any province in this country in 1982.

Some Hon. Members: Hear, hear!

Hon. Ms. Simard: — And they took this province and they led it from number one down to virtually number ten. That's what they did. And that man over there is responsible for it. And if we want to talk about disappointments, let's talk about the disappointment the public has with that party and that ex-premier, because he bankrupted the future of our children in this province.

And he sits and he smiles about it and thinks it's funny. I'm telling you, it's not funny, because the people of Saskatchewan have to pay the price for your mismanagement and your incompetence and the fact that you're . . .

And even your ex-Conservative supporters say that they have never seen a government that was so incompetent. Let's talk about their disappointment and the fact they abandoned you by the tens of thousands in the last election because of their disappointment. Because you who held yourself out as a private sector individual that knew something about managing businesses, chalked up failure after failure after failure — \$15 billion worth of failure in this province. So let's just talk about that, Mr. Chair, for a bit here. And let's just talk about some of those — the GigaText. I pointed out that GigaText could have paid for a 110,000 eye exams in this province.

Now I'm telling you this, that if we can get a handle on this deficit, we can preserve these programs and improve on them for the future. And that is absolutely crucial.

And the member opposite is going to . . . it's time for the member opposite to repent. He has not stood up once to the public and said, I'm sorry for bankrupting this province. I'm sorry for destroying the future of your children and your grandchildren. It's time for the member from Estevan to stand up and tell the public of Saskatchewan he's sorry, and to repent.

And if he could repent, just maybe we'd have a more open mind and a co-operative approach to how we deal with this huge deficit, this enormous debt legacy that his province and the people of Saskatchewan have been left with.

Some Hon. Members: Hear, hear!

(1645)

Mr. Devine: — Mr. Chairman, all I asked the minister is if she would provide me an estimate of the amount of money, extra money she's going to make as a result of the implementation of this Bill. She's got user fees and she's charging people. How much money do you plan to make from this Bill once it's implemented, on an annual basis?

Hon. Ms. Simard: — The Bill does not make any money. But of course I don't expect the member opposite to understand that because he doesn't understand arithmetic. Going from \$140 million surplus to a 15 billion, he obviously doesn't, and continue to spend.

The Bill does not make money. What the Bill does is it

prevents the expenditure of money by the government, of money the government doesn't have. But then I don't expect the member opposite to understand that. But I'll say it again to make it a little more simple. We will not be spending \$13.6 million annually on certain health care services as a result of this Bill; 13.6 million that is not being spent — not being spent. It's not money that we're making, it's money we're not spending.

And we're not spending it because this year we have a \$760 million interest to pay on your debt — 760 million. The credit rating goes down in the province as a result of your measures. The access to financing becomes extremely difficult. There's one thing the people of this province understand: you can't spend money you don't have.

Some Hon. Members: Hear, hear!

Mr. Devine: — I'm glad, Mr. Chairman, that the minister has acknowledged now — it took about seven hours — but she's acknowledged that people who have got problems with their eyes and their teeth and their back, associated with chiropractic care, are going to fork up \$13.6 million a year out of their pockets so this Minister of Health can deal with the choices that she has in managing the economy.

Well, well, well. Madam Minister, how do you feel? You are getting \$13.6 million out of people who are sick and ill. This is the wellness model. This is the brand-new, NDP wellness model. In one small category, Mr. Chairman, one small category in this Bill alone, we find the sick are going to pay \$13.6 million for eye examinations, teeth care, dental care, and chiropractic care — \$13.6 million. And that, Madam Minister, as you are probably aware, is a bigger hit proportionately to low income people.

How about . . . You mentioned northern Saskatchewan, Madam Minister. How about people in northern Saskatchewan who are working poor, and families with two or three kids, or seniors, or others? They're going to have to pay for their eyes, they have to pay for dental care, chiropractic care — \$13.6 million, and you're proud of this? You're proud of this? And you said you had no choice because there was a deficit.

I'm going to go back and say, Madam Minister, last fall the NDP leader — now Premier — said, we've got \$14.2 billion debt in Saskatchewan, on a radio station. And then — the same radio station — he says, we've got to look at fair taxation, that means doing away with the question of the PST.

An Hon. Member: — We did and we got rid of you.

Mr. Devine: — Well, and one of the hon. members says, we did and we got rid of me. Wasn't that the whole point? Wasn't that it? Wasn't that it? They said that they would reduce taxes just to win the election. And they knew the debt was 14.2 billion. He said so on the radio. And now what we see after that — and we've got it here in quotes — CBC, the NDP leader says, yes, the debt's 14.2 billion but we can do better, we can increase funding, and we'll reduce the PST, we'll reduce it, in fact we'll eliminate it,

give away 2 or \$300 million.

And now they're charging people who have got eye problems and teeth problems and back problems \$13.6 million because they got elected on a sham. You didn't tell the truth, and you knew it. You went out and you were not up front with the people. You said, there's a \$14.2 billion debt but we don't need the PST. And then you come in and you increase the PST on everything in Saskatchewan, from Canadian Tire, to Eaton's, to you name it. And now you're increasing it on taxing the sick.

And you've just admitted to me and to the public here that people who have got problems with their eyes and their teeth and their back and chiropractic care are going to spend another \$13.6 million because you got elected on a sham. And that is the truth. You got elected saying that you weren't going to do this.

And you had choices, and now you're making them suffer. And on top of that you are supposed to be the defenders of medicare and the defenders of health care and the defenders of the poor and the defenders of the downtrodden and the sick and those that are disadvantaged. And you admit in this legislature as an NDP Minister of Health that you're going to squeeze \$13.6 million out of these poor people. Well no wonder they're watching television in the afternoon and in the evening — unbelievable, absolutely unbelievable.

Madam Minister, you've just admitted that this is going to save you \$13.6 million because the public is going to spend that kind of money for the services. Could you break that down, Madam Minister, so we know how much is for eyes, how much is for teeth, and how much is for chiropractic care?

Hon. Ms. Simard: — There's nothing with respect to teeth in this Bill. With respect to chiros, it's 7.7; with respect to optos, it's 5.9 million.

Mr. Devine: — So you break that down, 13.6 million is the total. You were saying for dentists it's 5.6 . . . Would you break it down for eyes, dental, and chiropractic care?

Hon. Ms. Simard: — I did. I said there is nothing with respect to dental. I don't know where you keep getting this dental thing. It's not in this Bill. There's nothing with respect to dentists. It's coming out of chiropractic services, 7.7 million; optometric services, 5.9 million.

Mr. Devine: — Well, so now we know that the chiropractors as an industry and as a service and a professional service are going to be billing their patients \$7.7 million a year more for the services that used to be covered. Because you are going to have a net saving of 13.6 million — 7.7 chiropractic care and 5.9 with respect to ophthalmologists. So you're saying that any patients that go to a chiropractor, that total bill now will be \$7.7 million.

Hon. Ms. Simard: — The province will cover \$7.30 of each chiropractic visit. There will then be a co-payment after that. The province is presently paying 13.10 — \$13.10 for every chiropractic visit. In the future the province will pay \$7.30 for every chiropractic visit.

Mr. Devine: — All right. Well maybe you're just getting \$7.7 million out of the public that have back problems and other chiropractic problems and 5.9 million out of people who have eye problems.

I notice here on section 4(2) of the Bill, you've got: services of an optometrist; services of a dentist; services of a chiropractor; and other services that are prescribed in the regulations. Why have you got the dentist in there?

Hon. Ms. Simard: — There are dental services, for example, that may result as a result of an accident or something like this that are insured under medicare. Those are continued to be insured. They were there before in the legislation, and that as we re-enact the section we have to carry it through. So it's a technical thing and it's got nothing to do with any substantive changes.

Mr. Devine: — Madam Minister, I'm just a little bit sceptical and so is the public. Because they see that you've included optometrists, and you're getting 7.7 million out of the public. You've included chiropractic care in here, and you're picking up 5.9 million from the public. Now all of a sudden you've got dentists in here.

Are you saying, Madam Minister, you don't plan to de-insure anything with respect to dentists — children or anything else? What you have in here in dentists is not consistent then with what you're doing with optometrists and chiropractors. It's just, I mean, you should . . . maybe, Madam Minister, if you don't plan to do in dentistry what you've done in these other two areas, maybe you should take that part of it out and put it in some place else in the Bill. Because to be consistent, you're going to de-insure something.

Hon. Ms. Simard: — First of all, the school-based children's dental plan, which is no longer school-based — and the member is familiar with that and the reasons for that, which I'm not going to go into but I'd like to, but I won't in the sake of trying to get through this Bill — they're looked after under another piece of legislation.

What the dental services are that are referred to in here are the surgery services that may be required, and they're covered by medicare. The older section, the former section, said, "dental services where provided by a dentist in conjunction with maxillo-facial surgery." That's what it said before. Okay, we have just carried that through in here. There is no intention to change medical care coverage for that. It's simply a question of when we replace a section we've got to carry through what was there before.

Dental services, other than these surgery services, have never been covered by medicare, as you know. You pay for your own dentist. You, yourself, benefit from a dental plan in this Assembly. It's not paid for under medicare. So dental services aren't covered under medicare. The services that are being referred to here are certain surgical services that have to be covered as the result of accidents or some other situation. We're not changing the *status quo* with respect to dentists. There's no change. It's simply of a housekeeping nature.

Mr. Devine: — But, Madam Minister, couldn't you imagine that this would allow you to do the same thing in dental services as you've done in optometrists or chiropractors, just in regulation? You have got in this Bill now the power to, with regulation as you've changed the fee for service and charged people for optometrists and for chiropractors, you could now do it with dentists because it's in the same area.

And you've just got . . . item (d) says: "other services that are prescribed in the regulations." So you've put it in a category that gives you the regulatory power to disinsure. And obviously we have people who are insured. And you can say, well it's maybe some place else. But you've now got it in here, right with these others . . . (inaudible interjection) . . . Well, Madam Minister, we didn't have these kinds of changes that you've just made, before. And that's what we're worried about and the public is worried about.

They look at this Bill and they say, I've got to spend \$7.7 million more to get my eyes checked, I've got to spend 5.9 million if I go to a chiropractor, and in the same Bill they can adjust the cost of services for dentists. Well they don't trust you. I mean, how could they? You're charging them \$13.6 million more for the first two services. Why would they believe that you've stuck this in here without . . . well it's there. You don't say you haven't; it's in there.

So can you, Madam Minister, assure the public that despite the fact that under these services where you've got optometrists, chiropractors, there's dentists, that you're not going to do the same thing for dental services as you've done for optometrists and chiropractors.

Hon. Ms. Simard: — First of all, the power to de-insure under regulations was there under the Act that you administered for nine and a half years. It could be done under regulation. This does not change it at all. It is simply housekeeping. Okay? So there's no change in the substantive legislation — absolutely no change. Okay? I want to make that perfectly clear.

There is no intention by the government to de-insure maxillo-facial surgery which is what was covered under the legislation, which is what medicare covers. There's no intention to do that. This is simply a housekeeping thing that results in dentists being put in this category in the section that you read. The power to de-insure is there by regulation today under the present Bill, the one that exists now.

Mr. Devine: — Well, Madam Minister, if you don't plan to do anything with this, why don't we just consider taking it out of there? Because you have done some very significant changes there. And it's like your Minister of Agriculture said, when you give them a little bit of power, well we'll get around it somehow.

Well you might get around a lot of changes. You mentioned facial surgery. Are you telling us that with this Bill and with your intention, there are no intentions and no thought of de-insuring dental services for children in the province of Saskatchewan under any category, any income category, any sort of service at all, because of the

fact that you've got this in the Bill?

The Chair: — Order. It being 5 o'clock, this committee stands recessed until 7 p.m.

The Assembly recessed until 7 p.m.