

A Public or Private Matter?

By Dr. Linda Hancock

ABOUT THE AUTHOR

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I'm confused!

Over the past few months there has been a great deal of controversy at both federal and provincial levels about the possibility of creating a two-tiered system of health care in our country. Former Premier Klein introduced what he termed the "Third Way" but, when questioned about the details of this, the then Minister of Health Iris Evans stated, "Nothing has been cast in stone yet".

I guess what is confusing to me is that I don't really understand the meaning of the term "health-care" and thought we already had a two-tiered system. In fact, if we were to split hairs, I think it might actually be a four-tiered system consisting of no coverage, limited coverage, private coverage and insurance coverage.

One tier is for individuals who do not have any coverage at all because of personal economic reasons and are forced to do without health care.

A second tier is for services that are covered by Alberta Health Care and, although this was originally designed to be a universal program, there are many Albertans who do not have benefits because of the costs. (A limited number may qualify for a benefit card if they are under special government funding programs such as those for Seniors or AISH).

The third tier seems to be for services that are excluded from Alberta Health Care - even when recommended by a doctor. It is believed, for example, that as many as 80 percent of patients who visit their physicians have emotional, mental or stress-related problems that could be treated by a psychologist but these would not be covered under the Alberta Health Care program. Other physician-recommended services such as massage or physiotherapy, exercise programs (such as aqua-size), dental care, specific dietary plans (for example diabetic), prescriptions or a number of other preventative or treatment interventions are also excluded. Some or all of these expenses may be covered through Employee Assistance Benefit programs or Health Spending Accounts set up by employers or by individually purchased private insurance plans such as Blue Cross.

Finally, the fourth tier is for those who pay all expenses from their own pocket. Some Canadians may even choose to leave the country in order to have surgeries or treatment elsewhere rather than being on a wait list.

The "third way" is to be a combination of private and public plans. Would that be tier 1 and tier 2 or tier 2 and tier 3 together? Or would it replace all four?

It just seems that if we truly had a universal health-care program it would be for every person without cost and would provide both preventative and reactive services. If you needed something in order to be healthy, it would be provided. Matching needs with services. Too idealistic?

How do you define "health-care"? Are you worried about a two-tiered system?

No answers here - just a lot of questions!