

THE LEGISLATIVE ASSEMBLY OF MANITOBA

9:30 a.m., Tuesday, May 2, 1967

Opening Prayer by Mr. Speaker.

MR. SPEAKER: Presenting Petitions
 Reading and Receiving Petitions
 Presenting Reports by Standing and Special Committees
 Notices of Motion
 Introduction of Bills

Orders of the Day. The Honourable the Leader of the Opposition.

MR. GILDAS MOLGAT (Leader of the Opposition)(Ste. Rose): Mr. Speaker, before the Orders of the Day I'd like to ask a question of the Minister of Mines and Natural Resources regarding the question I asked about the fishery problem. Has he any further information. Last week he said it would be early in the week.

HON. GURNEY EVANS (Minister of Mines and Natural Resources)(Fort Rouge): No, Mr. Speaker.

ORDERS OF THE DAY

MR. SPEAKER: Orders for Return. The Honourable Member for Brokenhead.

MR. PETER FOX (Kildonan): In the absence of the Honourable Member for Brokenhead, Mr. Speaker, I move, seconded by the Member from Portage la Prairie:

(1) That an Order of the House do issue for a Return giving copies of all correspondence and briefs presented to the Manitoba Vegetable Marketing Inquiry Commission.

(2) That an Order of the House do issue for a Return giving copies of all written communications of every nature and kind between the Minister of Agriculture or anyone in the Department of Agriculture and the Manitoba Vegetable Marketing Inquiry Commission.

MR. SPEAKER presented the motion.

HON. HARRY J. ENNS (Minister of Agriculture and Conservation)(Rockwood-Iberville): Mr. Speaker, I see no reason for not accepting this question, subject to the usual reservations about the manner and way in which some of these documents came into the hands of the Commission, that is with respect to the documents referred to of the Inquiry Commission. Other than that, any information that is not of a privileged nature will be forwarded.

MR. MOLGAT: Before the question is put on this, questions came up a number of times at the committee yesterday and the past few days, regarding the lists of members of both organizations, and some people I think have got lists and other persons don't have any of the lists. Now, I think it would be very useful to members of the House if they could have a list of the various growers in both organizations so that we would know exactly what they represent, and furthermore if we could get a list of the acreage of the various growers, including not just the acreage that goes on the open market but the acreage that goes into processing, because as the discussion carried on there, this question of processing was obviously one that was of vital concern because those who were opposed to the compulsory aspect were saying well, but even those who are under the compulsory aspect do have an out because they have processing which doesn't come under it; and in order to have any rational discussion I think that the members of the House have to have all of the information possible on this. So while it's not part of this order, this Order for Return, and due to the fact that it had been asked at committee and that some people got it, I wonder if the Minister couldn't undertake to supply all of the members of the House, if not before the House rises, then after the House.

MR. ENNS: Mr. Speaker, I believe the Honourable Leader of the Opposition will agree with me that the natural place to get these lists is from the organizations themselves. On the question of supplying acreage; yes, we will be compiling to our best knowledge and we have in some of our books the acreage under process. I had some of that information with me - however it wasn't complete - that was published in our year to year agricultural book, but I'm having it checked and compiled to see what the actual acreage we were talking about that was under contract and that which was left to the fresh vegetable trade. Thank you, Mr. Speaker.

MR. SPEAKER put the question and after a voice vote declared the motion carried.

HON. STERLING R. LYON, Q.C. (Attorney-General)(Fort Garry): ... Committee of the Whole House, Mr. Speaker, I beg to move, seconded by the Honourable the Provincial Treasurer, that Mr. Speaker do now leave the Chair and the House resolve itself into a Committee of the Whole to consider the bills standing on the Order Paper.

MR. SPEAKER presented the motion and after a voice vote declared the motion carried and the House resolved itself into a Committee of the Whole, with the Honourable Member for Winnipeg Centre in the Chair.

COMMITTEE OF THE WHOLE HOUSE

MR. CHAIRMAN: Bill 68. Section 1 --

MR. MOLGAT: When we were yesterday on the bill there were a number of comments and suggestions made from this side of the House, and I wondered if the Minister was going to reply to any of these; there were some comments regarding the fees, for example, presently being paid. Has he been able to get that information?

HON. DUFF ROBLIN (Premier)(Wolseley): The Minister will not reply until we reach the section concerned. We're dealing with section by section to study the bill and I think we should proceed in that way, and we can deal with any points members wish to discuss on the section.

MR. MOLGAT: Mr. Chairman, because we are in Committee of the Whole discussing section by section doesn't mean that there cannot be a general debate at the beginning of the bill on items that aren't in the bill, and I submit that the question that we had asked ...

MR. ROBLIN: I don't agree with that at all. I think the purpose of this Committee is to deal with the bill section by section.

MR. MOLGAT: Well I agree the purpose of it is, but if something is not in the bill and it's germane to the discussion, this is the only time that we can ask for it. --(Interjection)-- Well this is what we're asking for. We asked the Minister yesterday if he would give us a copy of the present schedule of fees, and that certainly is very germane to the discussion that is before us, and I would like to know from the Minister; has he got that schedule and are we going to get it?

MR. ROBLIN: I think that matter can be dealt with in the section that deals with fees.

MR. CHAIRMAN: Subsection (1)--passed; (2)--passed; 1--passed; (2 (1) (a) to (h) passed.) (i)--

MR. NELSON SHOEMAKER (Gladstone): What about a widowed war dependent? It says: - "dependent" with respect to any person, means, subject to subsections (3) and (4), his spouse and, if he has no spouse, his widowed mother. What about the widowed father? Are they covered or not?

HON. CHARLES H. WITNEY (Minister of Health)(Flin Flon): No, Mr. Speaker, they are not covered. This is a standard definition that is -- well when I say standard it's the same definition that is in the Hospital Act. I've never heard of the consideration of a widowed father but certainly after the presentation of Mr. Coulter it can be taken and looked at in both Acts.

MR. CHAIRMAN: (iii)--passed; ((h) to (m) were read and passed.)

MR. MOLGAT: Mr. Chairman, we have an amendment on (n).

MR. SHOEMAKER: Mr. Chairman, I moved when we were in committee, or in Law Amendments, that after (n) - "but does include the services of a licenced optometrist."

MR. CHAIRMAN: Do you have the motion written out?

MR. SHOEMAKER: No, I haven't.

MR. WITNEY: Mr. Chairman, I think we know what the gist of the resolution is without having it written.

MR. SHOEMAKER: ...that the words "but does include the refractory services of a licenced optometrist." That's to be added at the end of clause (n).

MR. WITNEY: ...this the definition that we have now is the same definition as they have in the Medical Care Act in Canada, and an optometrist can be considered as another health service under Section 49, so I couldn't support the ...

MR. SHOEMAKER: Mr. Chairman, I understood the Minister on, second reading of the bill and I think indeed on the introduction of the bill, that a lot of these other services could be added when a majority of the provinces made application to have them included. Now what I would like to know is: has the Province of Manitoba and has the present Minister of Health made application as of this date to the Federal Government to have these services included? That would be an interesting point. It is interesting, Mr. Chairman, to note that when the federal bill providing for Medicare services was being introduced in the House of Commons, that repeatedly and for weeks on end, the opposition party in Ottawa - and you know who that is; I understand the Leader will be here tomorrow evening - they pressed and pressed and pressed to include the optometrists in the bill and they're still at it I think, so all I'm doing

(MR. SHOEMAKER cont'd)...is following the example of the Official Opposition in Ottawa and I suggest that they should be included. Optometrists only, at this stage of the game.

--(Interjection)-- Optometrists are included? Well, why doesn't my honourable friend get up then and just vote for the resolution that is before us?

MR. MOLGAT: Is the First Minister suggesting that when this bill is passed and the people get their Medicare cards, that they will be able to obtain the services of optometrists under the plan?

MR. ROBLIN: Mr. Chairman, you will notice that in a section of the bill which we haven't come to, therefore which I won't discuss, full provision is made.

MR. MOLGAT: Mr. Chairman, that's not the answer. My honourable friend sat there and chattered away and said they're covered. My question is: Will the services of optometrists be covered? Will someone who pays a premium be able to go and get the services of an optometrist? Yes or no.

MR. ROBLIN: Mr. Chairman, when Ottawa agrees to include these services, they will be given consideration in this province.

MR. MOLGAT: That's a far cry from what my friend said to begin with, Mr. Chairman, because he intimated, had we let him get away with it, he was intimating that they would be covered. They're not covered under this bill, and our proposition is that they be covered. It's not enough to say under Section 49 they can be covered; the question is, are they going to be covered?

MR. ROBLIN: Mr. Chairman, they are covered under this bill but I want to assure my honourable friend we have no intention of proceeding with these until we get the green light from Ottawa, so if he has any influence with Ottawa he knows what he can do.

MR. SHOEMAKER: Mr. Chairman, ...half a dozen times says this government made application to have them included, because the Minister of Health said the other day that when six provinces out of eleven have made application that they would be covered. Now the point blank question was: has this government made a request to have them included?

MR. ROBLIN: No, Mr. Chairman, we have not. We will not make any request, nor will we be entitled to do so until the bill is passed.

MR. MOLGAT: Will the government make a request when the bill is passed?

MR. ROBLIN: The policy will be announced in due course, as my friend knows.

MR. MOLGAT: I've never heard of as much weaseling, Mr. Chairman, as we're getting from the First Minister this morning. He is trying to pretend one thing when he knows full well that it isn't so in the bill, and now he won't even answer us whether they are going to ask for it to be included. That's nonsense that he can't tell us at this stage. They've been negotiating with Ottawa for a year and a half. Is he going to tell us that he can't tell this House whether or not he is going to ask for optometry services to be included until this bill is passed? What have they been doing for the last year and a half negotiating with Ottawa if they can't say anything until the bill is passed?

MR. ROBLIN: Trying to get a decent sort of a plan that would suit Manitoba, and I must admit we lamentably failed in that respect.

MR. MOLGAT:...you are failing in giving information to this House.

MR. ROBLIN: ...arrogant bunch of people I have never seen the likes of.

MR. LAURENT DESJARDINS (St. Boniface): Now just because you were up late last night don't lose your temper.

MR. LYON: ...playing politics, that's all.

MR. MOLGAT: Well if the little crown prince would stand up instead of speaking from his seat. The question is simple. Will you ask to have optometry services included or not? You can give that answer right now. You have been dealing with Ottawa. If you are not prepared to give the answer it's pure misinformation, refusing to give the House matters that are perfectly pertinent to this bill.

MR. DESJARDINS: Mr. Chairman, I am a little fed up with every time we bring a suggestion that we are playing politics. I remember not too long ago in committee where one of your Ministers voted against this motion but voted in favour of the chiropractors. I think that we are certainly entitled to make any amendments here or what's the point of being here? --(Interjection)--All right, the motion has been made but you try to give the wrong information. You said when you were sitting down so it wouldn't be an answer, you said that it was included, and you would be -- we know about this permissive. We are not quite as smart as you, but we know what permissive is. But we are asking for it now. You have a condition here, a case

(MR. DESJARDINS cont'd)...where some people who have a Medicare card from the province can go to the optometrist - this is covered - and the other people can't, and this is a universal plan that you have got. Do you want to stand up and talk? --(Interjection)--I know it's a different type of people and this is exactly what we don't want. We want a universal plan. We want a plan where all the people of Manitoba have the same coverage. And if you want to vote against this, this is fine, but this stuff of every time we bring in an amendment or a motion that we are playing politics, is a bit ridiculous.

MR. CHAIRMAN: The motion before the committee: that the words "but does include the refractory services of a licensed optometrist" be added at the end of clause (n). Are you ready for the question?

MR. ROBLIN: One final statement, because I think our position should be made clear on this. We cannot vote for this amendment for the reason the Federal Government will not pay the bill, and I do not think we should get into any part of the Medicare Service where the Federal Government will not join. We made provision in the voluntary section, or the permissive section, so that when the Federal Government will pay the bill, then we can give consideration to including these services, but I owe it to the Committee to make that explanation.

MR. DESJARDINS: Mr. Chairman, this is fine but I think that we should realize that we might - to save a few dollars we might spend an awful lot more. I think that, by being told that there will be a shortage of doctors, these people are doing good work especially in the rural points where the specialist might not be available, and if we don't include them now this might kill their business, because the people that want to see them will have to pay where they could come and see a specialist here and be covered by the plan, so I think that we should take another strong look at this. It is true that we might lose a few dollars until we get this 50 per cent paid by Ottawa, but we might chase these people out of the province. It is a difficult thing for them to start again. We know what the education of these people in the medical profession is, and I think that for the few dollars more that we spend, I think we would be well advised to have another look at this.

MR. JACOB M. FROESE (Rhineland): Mr. Chairman, I think we should take a good look at this amendment because the optometrists will be put in a precarious position because their competitors will be included in the bill, and I don't think this is quite fair, the way we are going about it. We should make very sure that we are not setting a certain group of people at such a disadvantage, and therefore it might be better to have them included under this section and then probably have another section later on which would give the people that would be entitled to have the services probably suspended for a certain period until such time, if we are completely dependent upon Ottawa in going ahead with this, that it be done at that time.

It makes it rather difficult for me because I don't subscribe to the principle of the bill in the first place and then to ask for certain conditions of this type, but I feel we are not doing the right thing to the optometrists in this case.

MR. RODNEY S. CLEMENT (Birtle-Russell): I would only say that it seems to me that everybody was up last night a little late and maybe tempers are a little frayed. The First Minister is chewing on a cigar - he hasn't even lit it yet, and I would think in fairness to the people, the public, the optometrists, and for that matter the chiropractors too, that if it means that six provinces have to apply to the Federal Government, then I can't see why it would be too much for the government to say at least they would request this permission after this bill is passed. I mean, why start playing politics at 9:30 in the morning? Everybody is tired; we've got a lot of work to do, and it looks to me like we'll be here forever unless somebody gives in a little bit somewhere.

MR. CHAIRMAN: Are you ready for the question?

MR. SHOEMAKER: No; not quite, Mr. Chairman. I have before me the House of Commons debates for Wednesday, April 19th last, and that's only two weeks ago. On the Orders of the Day the Honourable T.C. Douglas is asking questions of the Honourable A.J. MacEachen, Minister of National Health and Welfare, in respect to the motion that is before you, Sir, and Mr. MacEachen replies: "The method of adding further health services to the health plan has been set out in the bill. The attitude the Government of Canada took at the conference ..." - and that's the one that was just held - "was that when a consensus developed amongst the provinces as to the importance of further services, the government would consider adding those services to the plan." Well that's quite clear. Has this government made application for other services, or do they intend to? The federal Minister of Health has indicated they are quite prepared to pay half the bill when the consensus of the provinces make application for it.

MR. MOLGAT: Mr. Chairman, I want to bring up another point which was brought up in committee that I think has to be re-emphasized. There is a real question here of service to the public, because in many parts of Manitoba there is no accessible ophthalmologist, so the people in that area, if they want to get reasonably convenient service, must go to an optometrist. Furthermore, there are not too many ophthalmologists in the province and if we are going to put the services of an ophthalmologist under the plan, whereby people can go and get his services for eye glasses at no cost under the plan, then surely you can't expect the people will be going to the optometrists and pay for it when they can get it for free through the ophthalmology service, but there simply aren't enough ophthalmologists to do the services for the province and so people will be standing in line and will not be getting proper service. Now it just doesn't make sense. There's a question here of service to the public particularly outside of Greater Winnipeg and Brandon, so I think that the Minister has to look at this from the straight question of service. Where services can be obtained from ophthalmologists, people can go there and get them under the plan. Now for the identical services - we are not talking about other types of services, we are not talking about the supply of eye glasses; we are talking about strictly the other types of services that can also be given by an optometrist. If he doesn't include it, Mr. Chairman, he may not be saving any money at all, because people will simply be going and getting the services under the plan for an ophthalmologist, but he will certainly be causing them a great deal of inconvenience, of extra expense in going to a centre where there is such a service when they could be getting it at more local areas, and it won't cost any more money in the long run. Well, it may cost a bit more for those who simply get fed up with waiting for an appointment and go and pay their own, but surely, Mr. Chairman, that isn't what this bill is intended to do. The bill is intended to provide service, so I wish the Minister would look at this particular extra service as in that light, as one that will be supplied under the plan in any case, but by a few people only and at great inconvenience to the public, unless he includes optometrists.

MR. SHOEMAKER: Mr. Chairman, has the Honourable Minister considered what the cost would be to the province, if they had to go it alone, to include the services of an optometrist. Someone said the other day in Law Amendments Committee that there were only 14, I believe, in Manitoba - 27 in Manitoba. Well if there are 27 in Manitoba it would seem to me that the cost would not be too great if the province had to include these services or go it alone.

It is interesting to note that in the debate that has taken place since October 13th in the House of Commons on this whole subject, that the arguments that were put forward by the Honourable John Diefenbaker and by Walter Dinsdale and by Mr. George Muir of Lisgar and by all of the Conservative MPs of this province, they were all along the same lines as we are talking about at the moment. Here's what one of them says as a supplementary: "Is the Minister aware that in many regions of the country only optometrists and not eye doctors are available for patients, and is the government giving consideration to this fact when dealing with the matter?" This was back in October and we think it's a pretty important point here that the optometrist services should be included, and if in fact there are only 27, surely to goodness the province could go this alone. We are not talking in terms of a million dollars at all, Mr. Speaker. It would seem to me to be something less than a quarter of a million that we are talking about.

MR. MOLGAT: I wonder if the Minister could tell us how many ophthalmologists are there in the Province of Manitoba. He is going to supply the services strictly under ophthalmologists. How many are there to supply the people in the province? Mr. Chairman, how can the Minister, as Minister of Health be sitting here proposing a plan to provide services to the people of the province if he doesn't know how they are going to be supplied, and if he's trying to tell us that he can supply all the people of the province with their services, refractory services, through ophthalmologists, then he ought to know how many there are to provide that service or he shouldn't be moving this section.

MR. WITNEY: Mr. Chairman, I was under the impression that there were 39 but I wasn't sure of the figure, but I am advised that there are about 30 of them in the province now.

MR. EARL DAWSON (Hamiota): Mr. Chairman, one thing about if this resolution to include optometrists fails here today, I think that we are doing a great injustice to the rural areas, or the citizens of the rural areas. If you examine this situation, the majority of the small towns have finally got an optometrist to come to their area once or twice a week. In my own particular area it took us years to encourage an optometrist to come out from the City of Brandon. He calls in Rivers once a week; I believe he goes to Killarney another day;

(MR. DAWSON cont'd)...Boissevain; one day in Brandon; and in this manner he has built himself up a very good practice, but if this is not to be included in the Medicare plan, what will happen is these people will not be able to afford to come to the rural areas any more because the people will be making the journey into the city to see the eye specialists, and not only is it an injustice to the optometrists themselves, but it's an injustice to the rural areas. Just because we are not handy to an eye doctor we will be deprived of the services of these people, and in the long run we will be sending the optometrists away from the province of Manitoba, and I am sure that this thought has occurred to every member who is trying to get the government to see the point of including optometrists into the service. For sure they will not be able to afford to call on the small towns, because it's natural that the people that are in need of an optometrist will say: well, I might as well go into Brandon or Winnipeg and see the eye specialist and maybe be able to make a trip and do a little shopping at the same time. Once again, we are going to send the shopping dollars from the small towns into the bigger areas.

MR. SHOEMAKER: Mr. Chairman, I have suggested to you, Sir, that we are only supporting what the Manitoba MPs have said in Ottawa on the bill, Medicare bill, and you don't seem to be very much interested in what they have to say, and I know there are people who would agree with you that they are kind of weak sisters down there; but listen to what Dr. P.B. Rynard had to say - and do you know who he is? He is the Progressive-Conservative member for Simcoe East and he is also a medical doctor and chairman of the Conservative Party's health committee. That is, he is the health critic in the House of Commons in Ottawa. Do you know what he had to say? I'm just going to read it to you because it's interesting: "There are faults in this bill and I hope they will be corrected. Doctors are grossly overworked. We need more doctors as a matter of greatest urgency. We are talking about a bill this afternoon which will not come into effect for two years. The measure is weak in other aspects. What does the government intend to do about optometrists? Will they be paid? There are 1,500 of them across Canada and they are responsible for 70 percent of visual care. Only 300 certified ophthalmologists graduated from medical schools and these were mostly in the big cities. What will be done to serve those who live in the rural areas, people who do not have the opportunity to go to the big cities? Is the government thinking of them?" Isn't that what we're saying?

Here's what the Progressive Conservative health critic in the House of Commons is saying, and I think it's worth repeating in this province. If there are only 27 optometrists in Manitoba, we're not talking in terms of a million dollars or anything like it, and if it is a fact that the doctors are grossly overworked - and we know it's a fact, not only in Ottawa where Dr. Rynard was speaking but right here in Manitoba - and they're going to be more than grossly overworked upon the implementation of the Medicare Bill.

So surely to goodness I have convinced some of the backbenchers on the other side, particularly those that have an optometrist in their town, to go along and vote for the amendment before us. What are they going to say to their members when they go back home? What are they going to say to the optometrists and the doctors back there? They're going to say, "Oh, we had to get up and vote against you guys because we don't think you should be included in the Bill." Is this what you're going to say? Let's have a vote on it.

MR. CLEMENT: Mr. Chairman, I'd just like to ask the Minister a question. Due to the fact that Russell is 220 miles from Winnipeg and 130 miles from Brandon, I imagine the closest ophthalmologist will be in Yorkton, Saskatchewan. If the people from Russell go to Yorkton, will they be covered?

MR. DESJARDINS: Mr. Chairman, I suggest that the reason that this is not included is because the medical profession is not too anxious to have them in, as we heard in committee the other day. Now I think it is very wise and I think it is right to co-operate with the medical profession and I think that they are trying to get the best deal possible for them and there's nothing wrong with that, but we're talking about cold cash here on this side; we're talking about the people of Manitoba and we have a certain responsibility.

Now I feel, Mr. Chairman, I think the Minister or the First Minister should get up and say that these people are not serving their community, are not providing anything to the health program of the people of Manitoba, if this is the intention. Oh, Dr. Johnson can shake his head all he wants, but I don't like this kind of co-operation. I like a co-operation when we talk about the people of Manitoba and we look after their affairs. The Minister didn't even know how many of them we had in the province. Can he assure us now that we'll get the service? Can he tell us - can he stand up now in his place and tell us we'll have the service, the people of Manitoba

(MR. DESJARDINS, cont'd) will have the service?

Mr. Chairman, what is this plan if it's not a plan to give the medical service, medical care for all people of Manitoba? This is not a plan for the doctors of Manitoba; this is a plan for the people of Manitoba. --(Interjection)-- I beg your pardon?

HON. GEORGE JOHNSON (Minister of Education)(Gimli): Read the title of the bill.

MR. DESJARDINS: Yes, you can hide an awful lot of things in a title. I remember that we had an education tax, then a sales tax. It didn't change the bill but we had three different names for it. So I'm not interested in the title; I'm interested in what this bill will do. You have something here -- it won't be very much money, you're paying half of it now - you're paying half of it now. You're going to chase these people away. If you feel they're not doing a job, stand up and tell us so, then we'll just have the vote and that's it; but don't try to pretend that you want them in, like your boss the First Minister said, "Blame Ottawa for it." They blame Ottawa for every single thing here in this House. Why can't you stand on your own two feet and decide? If you feel these people, if you feel that the doctors are right, that there's no need for these people, this is fine, but say so; don't try to hide behind Ottawa.

MR. CLEMENT: What about the answer to my question, Mr. Chairman? Would the doctor from Yorkton be able to present his bill to Manitoba, to you people? After all, why should they have to drive 130 miles when it's only 60 or 70 miles to Yorkton?

MR. WITNEY: The answer to the question is "Yes", and there is an ophthalmologist in Brandon and one in Dauphin.

MR. MOLGAT: I'd like to ask a further question of the Minister. Is he satisfied that if optometrists are not included, that the services that they provide so far as the measurements of eyes will be available to the people of the province without undue inconvenience and cost?

MR. CHAIRMAN: All those in favour of the motion . . .

MR. MOLGAT: When there's no answer from the Minister, Mr. Chairman, I assume then that he is not satisfied that it can be done. He does not know the answer, but he's proceeding with the Bill.

MR. FROESE: Mr. Chairman, before the question is put, it's a matter of which way we make the legislation. I know that when The Social Allowances Act was brought in we made provision for certain things and some of the matters were just delayed in having the items proclaimed. We now have, I think, all of them taken care of, all the different sections are proclaimed now. Why couldn't we do the same thing under this bill, or does the government not believe that what we did under The Social Allowances Act by doing it in that manner was a good way of doing things, that this is a better way of doing things?

MR. CHAIRMAN put the question and after a voice vote declared the motion lost.

MR. MOLGAT: Yeas and Nays, Mr. Chairman.

MR. CHAIRMAN: Call in the members. The motion before the committee, that the words "but does include refractory services of a licenced optometrist" be added at the end of clause (n).

MR. CHAIRMAN presented the motion.

A COUNTED STANDING VOTE was taken, the result being as follows: Yeas, 23; Nays, 27.

MR. CHAIRMAN: The motion is lost. (Subsection (1) (n) to Section 4 were read section by section and passed.) Section 5 --

MR. DESJARDINS: I move that Clause (1) of Section 5 be amended by adding the following: "No member of the Legislative Assembly will be a member of this Board."

MR. CHAIRMAN: Are you ready for the question?

MR. DESJARDINS: Mr. Chairman, the reason for this motion is that I feel there is enough qualified people in Manitoba to serve on this Commission and I think it would be wrong to have a member of the Legislative Assembly on this Board. We were told in Committee that maybe there's no reason for this because the members wouldn't be too interested as they would not receive any remuneration at all. This could be easily changed, and the point is not just the remuneration, we feel that the members of this House have enough work to keep them busy and we feel that this should be left to people outside of this House.

MR. SHOEMAKER: Mr. Chairman, I don't know whether or not it is the intention of the government to include or to make certain that one of the members of the Board is from rural Manitoba, but I think that this is very important. Now perhaps my honourable friend . . .

MR. CHAIRMAN presented the motion and after a voice vote declared the motion lost.

MR. MOLGAT: Yeas and nays, Mr. Chairman.

MR. CHAIRMAN: Call in --(Interjection)--

MR. ROBLIN: I think it's wise to have a count, you can't tell who's straggling around.

MR. CHAIRMAN: Call in the Members.

A COUNTED STANDING VOTE was taken, the result being as follows: Yeas, 23; Nays, 27.

MR. CHAIRMAN: The motion is lost. 4 (1)--passed; (2) --

MR. SHOEMAKER: Mr. Chairman, I said when I was speaking two or three minutes ago that I thought one of the members of the board that is to be set up should be from rural Manitoba. I have changed my mind; I think at least three should be. No less than three. Is it not a fact that 50 percent of the people in Manitoba live in the rural areas? Is it not a fact that every politician in the world or in Manitoba says that agriculture is the backbone of our economy, and is it not a fact that we should not be considered when appointing members to a board that is as important as this one is? And so, I hope my honourable friend the Minister will get up and say that it is his intention to make certain that rural Manitoba is well represented on the board. Incidentally, Mr. Chairman, I think it would not be a bad idea to have an optometrist on the board. My honourable friend has already said that there's provision in the bill to have their services included, and no doubt he intends a year hence to include their services, and why not have an optometrist on the board? But let's make certain that at least three of the members will be from rural Manitoba.

MR. CHAIRMAN: (2)--passed; --

MR. SHOEMAKER: Mr. Chairman, is my honourable friend not going to make any comment on that at all? Surely he intends to include members from rural Manitoba.

MR. CHAIRMAN: 5(1)--passed; (2)--passed --

MR. FROESE: I too feel this is a very important matter, that the rural parts are the ones that are getting the least service and this won't be changed even under this Medicare bill, that they will always be at the other end of the stick and most likely will not get the services that are immediately at hand for those people living in the urban and the Greater Winnipeg area; and therefore I feel that this is an important matter and that the rural part of Manitoba be well represented on the board.

MR. CHAIRMAN: (Sections 5 to 14 were read and passed.) 15 (1)--passed; (2) --

MR. FROESE: Mr. Chairman, this insurance one that we're going to set up under this bill, will they take over the present MMS completely with lock, stock and barrel, and all the reserves that they presently have? Is this completely turned over to the new insurance ...?

MR. WITNEY: Provision is provided in this bill for the corporation to negotiate with the MMS for its buildings and its equipment and its stock.

MR. CHAIRMAN: (Sections 15 to 19 were read and passed.) Agreed if we go through the balance of the bill page by page?

MR. MOLGAT: Mr. Chairman, we have amendments to propose.

MR. CHAIRMAN: 20--passed; 21 (1) (a) --

MR. FROESE: I was going to comment in connection with reserves and we're dealing with the annual report. To date we have not received a report on the MMS, have we? Should the committee here not have a report on the MMS if we're going to involve it in this bill? Should we not be entitled to have a report of this authority that is presently dealing with these services so that we could have a close look at the finances and at the reserves. Under this section and under the ... section we are allowing for reserves but we're not making any limitations if the premiums should be of such a nature that we would create large reserves which might not be necessary, although this doesn't look like that at the present, but if this should happen there's no limitations whatever. And should we not be entitled at this time to have a financial statement on MMS so that we can take a good look at the operations?

MR. WITNEY: Mr. Chairman, the MMS is a separate corporation. It is not required to give a report of its activities to the Legislature, but again, the honourable member could get one if he wished to ask them or phone them. With respect to the reserves, if there is any excess in reserves, provision is made in the bill that they be turned over to the Consolidated Fund.

MR. CHAIRMAN: (Section 21 was read and passed; Section 22 (1) and (2) were passed.) (3) --

MR. FROESE: Mr. Chairman, is it the intention to use the services of the municipal offices as there has been in the past in collecting premiums like we have done under the MHSP - hospital services. Will this practice be carried out?

MR. WITNEY: Yes, provision is in here for that, Mr. Chairman. Provision is here also for us to combine the premium of the Hospital Commission and this one, so that they

(MR. WITNEY, cont'd) would all be collected in the same manner.

MR. EDWARD I. DOW (Turtle Mountain): Mr. Chairman, you intend, then, that all delinquent premiums will have to be guaranteed by municipalities, or in other words they're responsible for all the unpaid premiums by residents.

MR. WITNEY: The municipalities -- this provision here, subsection (3), provides for the municipalities to enter into an agreement with the corporation similar to that that is entered into with the Hospital Commission on the guaranteeing of premiums.

MR. SHOEMAKER: All recipients of social allowances or public assistance of any kind will not be subject to paying premiums. Will, in these cases, will each and every one receive a Medicare card? My honourable friend is quite aware that following July 1st of next year he will have two classes of Medicare in the province of Manitoba. As I understand it, there are something like 30,000 people who presently hold Medicare cards, and they don't pay premiums either, but their services or their card provides them with doctor's care, prescribed drugs, dental care, optometrist's and in certain cases chiropractic care, so you're going to have two classes of coverage in Manitoba. Now, is it a fact that all recipients of public assistance of all kinds will receive the provincial Medicare card which provides all of this wide range of services, or will they only receive the same type of care that I will, for instance?

MR. WITNEY: Mr. Chairman, those people who are exempted from premium will receive a certificate from the corporation as provided for in the bill the same way as anyone else will find one. Those people who are on Medicare, they will receive their Medicare in the same manner they are now. The extra benefits that they are entitled for will be provided by the Department of Welfare.

MR. SHOEMAKER: Mr. Chairman, where are you going to draw the line? If you're in receipt -- is it not a fact that the reason that 30,000 people in Manitoba now receive social allowance -- and while they may not in most cases receive any cash benefits now there are something like 30,000 people who are provided with Medicare services -- is it not a fact that the reason they received that service is because they are a recipient of public assistance? Is this not a fact? Are we going to have two classes of people on public welfare that have two different types of services? Where are you going to draw the line on this one? Are you going to have 30,000 that are going to receive the benefits of prescribed drugs, optometrist care, dental care and all the rest of it, and have other municipal cases receiving public assistance that only get the standard type of care that you and I receive? How are you going to make the distinction in cases of this kind?

HON. J. B. CARROLL (Minister of Welfare)(The Pas): Mr. Chairman, if I could clear up that point. The people who now are in receipt of what we call Medicare cards and getting this wide range of service, are people who qualify for social allowances under the Social Allowance Act. They don't include people who are getting temporary assistance in unorganized territories or people who are getting short term assistance from one of the municipalities within the province.

MR. SHOEMAKER: Mr. Chairman, if you're getting temporary short term public assistance at the time your premium falls due under Medicare, this will entitle you to a free -- I don't know what you're going to call it, Mr. Minister, but because you've got a Medicare card on the one hand and a free premium receipt of some kind for Medicare services on the other hand -- under what circumstances do you intend to issue -- I don't know, I'm at a loss to know what to call it, but my honourable friend the Minister can probably tell us what he's going to call his free Medicare services as opposed to the Minister of Welfare who has Medicare service. Well what are we going to call it? And under what set of circumstances is my honourable friend going to issue free certificates? (I believe that's the term my honourable friend used.) The Minister of Welfare calls his Medicare cards, and the Minister of Health is going to call his certificates. Under what set of circumstances will my honourable friend the Minister of Health issue certificates.

MR. WITNEY: This is defined on Page 2, a recipient of public assistance.

MR. T. P. HILLHOUSE, Q.C.(Selkirk): The thing that I'm worried about is this; that under this present system when it combines itself with the Social Assistance Act, municipalities will be required to contribute a larger sum of money now than they did before, because under the Social Allowances Act it was the province and the Federal Government that took care of it, but now, if you're going to issue two kinds of cards, you're going to have a card for an indigent under this Medicare, then you're going to have a card for Social Allowance which entitles that holder to additional benefits. But yet the card that's going to be issued under this particular

(MR. HILLHOUSE, cont'd) bill here, the premium is going to be charged to the municipality. So that's the thing I'm worried about, that under this system the municipality is going to pay more money than it's paying now.

MR. DOW: . . . has shown that the repeaters that do not pay their MHC are the same people pretty nearly all the time and yet they're not under welfare or welfare cards, and so I would like the Minister to emphatically say here that all delinquents of premiums are going to be the responsibility of municipalities, and that those people that are not paid or had to be paid by municipalities, will come into a fact of getting assistance cards.

MR. SAUL MILLER (Seven Oaks): Mr. Chairman, I think this is an important point for the municipalities. What we're being asked to do here is pass a bill which says that the municipalities can enter into an agreement with the province with regard to those public welfare recipients who cannot pay their Medicare premium. The problem is this, that the municipalities cannot then turn around and claim that amount from the province, because under The Social Allowances Act, premiums for hospital I know cannot be claimed for rebate, and from the reading of this I see where Medicare cards, or medical premiums, also will not be reimbursed under The Social Allowances Act, which means simply that the municipality and the ratepayers in that municipality, if they happen to have a lot of welfare recipients, are the ones who are going to get hurt. Again it comes back to that problem. Those areas which have very little public welfare because they happen to be more affluent areas, have no such problems, but the ones that can least afford it, the areas where public welfare is high, they're the ones who have to then turn around and charge the ratepayers, the ones who as I say can least afford it, charge their ratepayers for those cases of public welfare where they have to pick up the medical premiums. Now surely the premiums that are picked up or have to be paid by the municipalities, the guaranteeing municipalities, surely this money should be considered as social welfare under The Social Allowances Act. If it's in order to pay for the rent of a person, for his clothing, for his food, for his shelter, for his amenities - and under The Social Allowances Act this has been broadened; the term has been broadened so we can consider more than just bread and water literally - then surely the care, medical care should be considered one of the necessities of life and it shouldn't be charged to the ratepayers in that society; it should be picked up and be able to be charged back to the province as something earned under The Social Allowances Act, and I wonder whether the Minister of Welfare I think has the answer to this rather than the Minister of Health; I think it comes within his province. And I think it's high time we recognized that both hospital premiums and medical premiums, which are paid by a municipality as a guaranteeing municipality in order that everyone should be covered, should be able to include these premiums in their monthly statements of welfare paid out to these recipients.

MR. WITNEY: Mr. Chairman, I'm sorry I didn't quite explain this. No premiums will be required by these people who are listed as recipients of public assistance. In the Act, when we have recipients of public assistance, no premiums will be required by those people. That will be picked up by the government.

MR. WITNEY: . . . the municipality and the Commission will only be in respect to those people who fail to pay premiums so that the municipalities have been made responsible for them.

MR. WITNEY: Yes.

MR. SHOEMAKER: No, this doesn't clear the matter up entirely. In fact, it clears up the financial problem perhaps, but does it still not leave probably half of our recipients of public assistance that are getting a much much broader coverage under Medicare plan than they would be under the new health plan? Why it's ridiculous, because my honourable friend the Minister of Welfare I think said there were 30,000 or in that neighbourhood.

MR. CARROLL: About 26.

MR. SHOEMAKER: Twenty-six thousand people in Manitoba now who receive all of the services provided by Bill 68, plus prescribed drugs, plus dental care, plus optical care. Now; 26,000 people in Manitoba now receive all those. Now other certain recipients of public assistance will only receive a certificate that their premium has been paid by the province under Bill 68 and will only qualify for medical services as set out in this bill. Well, where are you going to draw the line? I mean, why should 26,000 people in Manitoba receive all the benefits granted under a Medicare card, and probably another 26,000 only - still recipients of public assistance - receive a lesser coverage? That's the thing that I can't get through my head. Why should there be this distinction? I can't . . .

MR. CARROLL: A lesser need.

MR. SHOEMAKER: Lesser means? A lesser need. Well, my honourable friend loves to talk about need, and I know that right now there's only \$2.00 separating a lot of people in Manitoba from getting a Medicare card; lots of them. --(Interjection)--. It's \$2.00 now under the Act, and they go out and determine need and if they come within \$2.00, I believe, of the need, they will give them a Medicare card. Well, I don't know where you're going to draw the distinction. You're going to have a lot of people in receipt of public assistance who are going to be issued a certificate from the Minister of Health; 26,000 who are going to be issued a Medicare card from the Minister of Welfare; and I don't know why they're going to draw the distinction at all; I can't figure it out.

MR. DESJARDINS: Mr. Chairman, I can understand that under the Department of Welfare there might be some added benefits such as glasses and so on, but I would like to ask a question of the Honourable Minister of Welfare: In view of the fact that the Minister of Health and the government does not recognize the service, or the need for the service of chiropractors, optometrists and so on, yet in this province, is it the intention of the Minister to withdraw this service from the people carrying Medicare cards? Can we have an answer to that?

MR. CARROLL: The answer's very simple. We don't intend to, and I do want to try to make the distinction between people on social allowances and others who are drawing temporary assistance. There are quite a few people in Manitoba who live on the resources of the land, who are independent for nine, ten or eleven months of the year but may require temporary assistance over a short period of time between the fishing seasons or something like that. They're self-sufficient for most of the year. During the brief period of time in which they require maybe grocery vouchers only, then they get that kind of assistance but they're quite independent in other ways and want to remain that way, and there's no reason why they should be entitled to the full range of medical services for that brief period of time because they don't need it. If they did need it they would get it, provided either by the municipality or by the Province of Manitoba, but they certainly wouldn't get coverage for 12 months a year.

MR. DESJARDINS: Mr. Chairman, would the Minister answer my question now, please.

MR. CARROLL: I did.

MR. DESJARDINS: You did?

MR. CARROLL: Yes.

MR. DESJARDINS: I asked you - I asked the Minister ...

MR. CARROLL: The answer was "no" - I'll answer it again.

MR. DESJARDINS: You mean they'll keep the services of the optometrists and the chiropractors? Is that right? They will be covered?

MR. CARROLL: They will continue to get their drug services and all...

MR. DESJARDINS: I didn't say anything about drugs or food or clothes,

MR. CARROLL: ... and all of the other services that are being provided.

MR. DESJARDINS: Would you please answer my question. Will they ...

MR. CARROLL: I've answered it three times. The answer's no.

MR. DESJARDINS: I'm not talking about food; just leave it to optometrists, chiropractors and these people. Will they still be covered under this Act.

MR. CARROLL: You want it answered four times?

MR. DESJARDINS: Just once: yes or no.

MR. CARROLL: I've answered four times.

MR. DESJARDINS: Just yes or no once. Would he answer the question?

MR. CARROLL: Yes, I answered the question.

MR. DESJARDINS: What is it? What is the answer?

MR. CARROLL: For the fifth time the answer is "no".

MR. DESJARDINS: No, they will not be covered?

MR. CARROLL: No, the service will not be withdrawn.

MR. DESJARDINS: Fine. Well, Mr. Speaker, what kind of a plan have we got here? We are supposed to have a plan. What is the purpose, and maybe the Minister of Health, now, should explain what the purpose of this plan is. I'm dealing with premiums. I'm dealing with premiums and what's the answers that have been given now, Mr. Chairman? Now, these people will get a card, or a certain group will get a card, and they will be entitled to the service of the optometrists, the chiropractors and so on, but just a few minutes ago the Minister of Health, the First Minister and the rest of the members of the government said that this does not consider the service of the optometrist, the chiropractor and so on, as a basic

(MR. DESJARDINS, cont'd) need of the people of Manitoba in this field of care. How can that be that they are not needed and then we are giving a special privilege to the people that are on welfare? I'm all in favour of paying their premiums. I'm all in favour of treating them the same as any other people in Manitoba, people that can't afford the basic medical services, medical care. I'm all ready for the government to pay for this but why should they get something that is not considered basic, that the Minister of Health and the First Minister and the former Minister of Health say is not needed for the rest of our citizens? Are you creating different classes of citizens, and if so, why?

MR. SHOEMAKER: Mr. Chairman, I'm still not clear on one or two points and I don't know whether I'm simply dense or whether we can't get an answer --(Interjection)-- we're dense, eh? Well, we've got that settled. Now, I'm going to ask my honourable friend the Minister point blank. I understand that the municipality will have to guarantee all premiums under the proposed bill that is before us. --(Interjection)-- Well, except those that are on Social Allowance the privileged group - they will be the privileged group now - but all others who are going to be issued a certificate and their premiums guaranteed by the municipality. Now I understood my honourable friend to say that all they had to do then, at the end of the month, is send the bill to the government for the premiums that they have paid and the government will reimburse the municipality for those premiums paid. Am I correct or am I not correct in this assumption? Well, they're in receipt of social--according to Section 22, they are a recipient of public assistance by reason of the fact that the municipality paid their premium --(Interjection)-- Well, certainly they are. If a municipality or a town or a corporation pays a premium for anyone, they are in fact a recipient of public assistance to the extent of the premium. Well, then, if that is so, the government then must reimburse the municipality or issue a certificate. Now am I right or am I wrong?

MR. WITNEY: Mr. Chairman, as I mentioned just a while ago, these people will not have to pay a premium. It will be taken care of by the government for these people who are listed under that definition of a "recipient of public assistance." Now the municipalities will be responsible for those people who should pay a premium but are delinquent in doing so, and as the same with the hospital commission, if they wish to they can enter an agreement whereby they simply have a guaranteeing arrangement as about 95 percent of the municipalities have at the present time.

MR. FROESE: Mr. Chairman, following up on that, will these municipalities then be reimbursed or compensated? I feel that we're loading more and more work on the municipalities every time we pass legislation of this type, and now we find that we're going to load the municipalities with another job, of collecting the premiums of Medicare, and are the municipalities going to be compensated? What is the situation with the hospital premiums? Are they receiving any compensation for that? And then also, the section before us, the way it is set up, I'm not sure whether the premiums--will it be one lump sum for both Medicare and hospital premiums; will they be separated or will there just be one conglomeration of all?

Mr. Chairman, I would like to have an answer on this. Surely they must have thought these things out as to how the regulations would work, what they intend to set up under the regulation and I think we should have an answer on this. Will they be just collected twice a year as your hospital premiums are at the present time, or what is the intention of the government?

MR. WITNEY: Mr. Chairman, the bill gives the corporation the opportunity, if they want to, to collect the premiums, a joint premium, hospital commission and the medical service. It's in the bill that they do that, in black and white.

MR. CHAIRMAN: Section 22 --

MR. MOLGAT: Mr. Chairman, I don't understand some of the replies of the Minister here. Let's refer this back to the Hospital Services Plan because that one's been in operation, and let's say in a municipality someone does not pay the premium; does not own any property whereby the municipality can collect it through the taxes. Does not, then, the municipality pay either the costs of hospital service or the premium if that individual requires service? Isn't that what happens?

MR. WITNEY: Yes, the municipality is either liable for the hospital bill, but they can enter into an agreement with the Hospital Commission whereby they guarantee that premium and most of them do so, and that would be the same thing that would be provided for here.

MR. MOLGAT: In other words, then, this does exist where the municipality is paying the premiums for some people who cannot afford to pay it themselves. Well? Well Mr. Chairman,

(MR. MOLGAT, cont'd)the answer is either yes or no. It is evidently "yes" just from the answer that the Minister has given me.

MR. WITNEY: Mr. Chairman, if you take a look at Page 16, Section 31. Yes. Well if you take 31 subsection (1); "(a) may, on behalf of that person, and with or without his consent, pay any premium for the payment of which he is liable; and (b) where that person is in default in payment of any premium for a period of more than thirty days, shall, on his behalf, pay the premium."

MR. DESJARDINS: Mr. Chairman, I don't think that this is what was meant where the people can't afford it, the premium, we're talking about -- certain people like you have now under the Hospital Plan that the municipality will pay, but they won't collect from the insurance.

MR. DOW: Mr. Chairman, in regard to this, supposing a municipality doesn't enter into an agreement and the person doesn't pay the premium, then in effect the individual has the right to opt out of this scheme. Is that right? How can you force him?

MR. WITNEY: I wonder if the honourable member would just repeat that because I got lost here for a moment.

MR. DOW: Mr. Chairman, as I read the Act, it says the corporation can enter into an agreement with the municipality in regard to paying delinquent premiums. This in effect is what the Act says. Now . . .

MR. WITNEY: No, maybe that's where I have misled you, Mr. Chairman. The Act doesn't say that, because the Act says on 31 subsection (1) clause (b), that where that person is in default in payment of any premium for a period of more than thirty days, shall, on his behalf, pay the premium.

MR. DOW: Then it's compulsory that the municipalities have to pay all delinquent premiums. Right? Well that's the question that I was trying to get before, that it is compulsory that the municipality, regardless of agreements, have to pay all delinquent premiums.

MR. WITNEY: Yes.

MR. DESJARDINS: Mr. Chairman, I want to clarify this because the Minister told us the opposite, told the Member from Gladstone just a few minutes ago the only people who will not be required to pay the premium would be the people that are on public welfare.

MR. WITNEY: The people who are defined on Page 2 under Recipients of Public Assistance.

MR. DESJARDINS: All the others will have to pay or the municipality will have to pay for them.

MR. WITNEY: Yes.

MR. DESJARDINS: Well that's a different thing.

MR. FROESE: Mr. Chairman, I still would like an answer to my question before. Are the municipalities going to be compensated for this service or not?

MR. WITNEY: Arrangements can be made to do that. I'm not sure right at the moment about the situation with respect to the Hospital Commission.

MR. MOLGAT: Mr. Chairman, I am interested in the administration of this whole bill but it comes under this particular section. At the moment there are a number of employees, I understand, at the Manitoba Hospital Services Plan who are in charge of collections and who travel throughout the province, deal with the municipalities I think first of all, audit their books insofar as this or the MHSP, and then try and collect from those people who have not paid up their premiums.

MR. JOHNSON: This is to help the municipalities.

MR. MOLGAT: Yes. Now this is a program organized by the government and these are employees of the Hospital Services Plan. Now I would hope that this program could use the same staff and the same structure. I would hope that it is not going to mean another set of inspectors going out to inspect the same books in the municipalities and dealing with roughly the same people. Now can we have an assurance from the Minister that this can be done; that there will be the one collection agency?

MR. WITNEY: Yes, the bill does make that permissive to have that done. This corporation here can enter into agreements with the Hospital Commission or with any other Crown agency for certain things to be done.

MR. MOLGAT: Yes Mr. Chairman, I realize that the section makes it permissive. What I want to know is is it going to be done? I don't think it's enough that it be permissive, because if we're going to end up with two sets of inspectors running around the province

(MR. MOLGAT, cont'd) inspecting the same municipalities for -- well, not identical services, but certainly associated services, then I think we are just adding a tremendous amount of overhead, and I think it should be clear that they should operate through the same collection agency.

MR. WITNEY: Yes, I have no objection to the proposals that are being put forward by the Leader of the Opposition but the corporation, when it gets set up, will establish its own administration and I am quite sure that it certainly wouldn't want to be adding a whole flock more of inspectors when there is a network of services already established in the province.

MR. DESJARDINS: . . . this is not just the inspectors; it might be the same computers and so on. This would make it permissible, for instance, to send the bills of both the hospital plan and the medical plan even in the same envelopes and so on. This would be permissible?

MR. WITNEY: Yes, there is a section in the Act which provides for that.

MR. LEONARD A. BARKMAN (Carillon): I think the Minister stated quite clearly that the municipalities are obligated to collect these premiums in certain instances. Is there any provision made -- in plain words, is there a kick-back provided to these municipalities that are forced to pay these premiums for cases that may occur?

MR. WITNEY: As I mentioned to the Honourable the Member for Rhineland, there is provision in this Act whereby it can be done if the corporation wishes to do so. Unfortunately, right at this moment I am not sure what the situation is with the Manitoba Hospital Commission.

MR. CHAIRMAN: (Sections 22 and 23 were read and passed. Section 24 (1) (a) to (o) was read and passed.) (p) --

MR. FROESE: Mr. Chairman, just what is the amendment, under (p)?

MR. CHAIRMAN: That's just what I was reading: Amended by inserting after the word "of" at the end of the second line, the words "subsection (1) of".

(p)--passed as amended; (q)--passed --

MR. SIDNEY GREEN (Inkster): Mr. Chairman, I would like to move an amendment to the Section 24 (1) by adding thereto sub-paragraph (r) to read as follows: "in the absence of agreement under Section 36, prescribing a schedule of fees to be paid by the corporation to medical practitioners in respect of medical services rendered to insured persons."

MR. CHAIRMAN presented the motion.

MR. GREEN: Mr. Chairman, the intention of this particular amendment is to make abundantly clear that the Lieutenant-Governor-in-Council may, and indeed would have to pass a schedule of fees in the absence of there being an agreement between the MMA and the Board. Now Mr. Chairman, I wish to again make it clear that I'm not suggesting that anybody would have to work under this schedule of fees. I take the same position with regard to the medical profession that I took with regard to other people in our society, that they would have a perfect right to say that they will not work for the fees that are prescribed by the Board. But at the same time, Mr. Chairman, I think that we, the public, should have the same rights as any other employer and I have never denied the right of an employer to say that "I am willing to pay anybody who wishes to work this amount of money," and if people then work for him, I say that they have the right to do so. In other words, I say that they have the right to refuse or the right to work. The Minister has indicated that he feels that this right is given in certain other sub-paragraphs, and he quoted to me paragraph (g) respecting the manner of, and other details relating to the payment of benefits to insured persons and to medical practitioners.

Well Mr. Chairman, to me that looks like an administrative regulation which gives them the power to indicate as to how these things will be worked out, but I don't think that it's sufficiently clear to indicate that the board can, if it can't reach an agreement, prescribe a set of fees; and the present situation is that Section 36 says that the corporation may enter into an agreement, and I agree that there should certainly be an attempt to enter into an agreement with the Manitoba Medical Association with regard to fees. However, knowing that it takes two to come to an agreement and knowing that it's possible that an agreement will not be reached, the board should at least be prepared to indicate what fees it will pay and then the medical practitioner would have the right to opt into the plan, opt out of the plan, or as the Act is presently worded, he could take that fee and then extra-bill. I don't mean to say, Mr. Chairman, that I am in favour of the extra billing. I was in favour of it on Friday; I can assure you that when the section is before us today that I will be against it; but the way the Act is presently worded he can extra-bill, and I hope -- in speaking to this matter, Mr. Chairman, I don't wish to leave the impression that I have any different attitude towards the rights of the medical

(MR. GREEN, cont'd) practitioners than I have with regard to every other employee, but just as I have that attitude with regard to them, I think that the public should have the right to not only say that they will set a schedule of fees, but to hire whoever they can, or rather than hire, to pay anybody who wishes to work under that schedule, and I don't believe, Mr. Chairman, that that is sufficiently clarified in the Act. And Mr. Chairman, when I was speaking yesterday I indicated that some of the usual comments that are heard in negotiations with regard to essential services and compulsory arbitration haven't been forthcoming. I don't want to leave the impression that I think they should be forthcoming. I just want to indicate that this is what happens with regard to other people, and it's just unusual that it hasn't happened with regard to the medical profession.

MR. MOLGAT: Mr. Chairman, I have no objection to the amendment. As I mentioned yesterday I intend, under Clause 36, to propose an amendment suggesting that this be part, that is, a schedule to the Act, and this is subject to that not passing, I presume, that it would be handled under this section, so I have no objections. I would hope that the Minister will see fit to accept my amendment when it's proposed.

MR. CHAIRMAN put the question and after a voice vote declared the motion lost.

MR. GREEN: Yeas and Nays, Mr. Chairman.

MR. CHAIRMAN: Call in the members. The motion before the Committee; that subsection (1) of Section 24 be amended by adding a new subsection (r): "(r) in the absence of agreement under Section 36, prescribing a schedule of fees to be paid by the corporation to medical practitioners in respect of medical services rendered to insured persons."

A STANDING COUNTED VOTE was taken, the results being as follows: Yeas, 24; Nays, 29.

MR. CHAIRMAN: Motion lost. (The remainder of Section 24, Sections 25, 26, and 27 were read section by section and passed.) Section 28 (1) (a)--passed; (b)--passed; (c)--

MR. GREEN: Mr. Chairman, with regard to Section 28, this section provides that where an employer is presently deducting premiums for MMS, he will continue to pay -- the agreement shall be deemed to be amended so that the payment to the MMS will be made to the Manitoba Medical Insurance Services or to the corporation. Now, there may be a difference in the amount of the premium, Mr. Chairman, and I would think that in all probability there would be. In other words, that the amount that he is now paying to the Manitoba Medical Services for his employee would be something like \$140.00, or could be something like \$140.00, if he's paying the whole share, and very few employees pay the whole share but some do. The amount that he may be required to pay to the insurance corporation will possibly be in the neighbourhood of \$60.00 - I don't know what premium is being estimated; but I think, Mr. Chairman, that the plan is being put into existence in order to provide for some relief to people all across the province of Manitoba with respect to their medical insurance costs, and I don't think that it's meant to relieve an employer of a wage obligation that he has already accepted, and every benefit that an employer pays to an employee is a wage obligation. So in this case we have an employer who has been paying a wage obligation of so many dollars per week, plus \$120.00 a year, or \$140.00 a year to Manitoba Medical. I don't think that the employee should suffer a loss in wages by virtue of the institution of this plan, so I think that the section should provide - and I ask the Minister to tell me whether he will make it provide, otherwise I'd like to move an amendment - the section should provide that if the amount payable to the Insurance Service Corporation is less than the amount previously paid to the Manitoba Medical, that the difference shall belong to the employee and shall be paid to him as part of his wages; that it shall not be a savings to the employer.

Now, Mr. Chairman, I'm not here penalizing anybody; I'm not trying to act as an advocate against the employer or as an advocate for the employee. I'm saying that the wages that are paid should be the same, and if the wages previously paid amounted to \$120.00 in addition to the monthly salary, which was deducted from salary or paid as part of the salary, that those wages should not go down; that the savings to the employer should be owned by the employee and paid to him as part of his wages. I wonder whether the Minister would not consider that that is intended by this legislation and if so can make it clear.

MR. WITNEY: Mr. Chairman, this Section 28 does not do what the honourable member says that he would like to have done.

MR. GREEN: Mr. Chairman, in that case then I would think that the amendment would not come until after we finish (f), so I'll just wait until we get there. Is it acceptable to the Minister?

MR. CHAIRMAN: 28.(d)--passed; (e)--passed; (f)--passed; 1 --

MR. GREEN: Mr. Chairman, I wish to make an amendment by adding to Section 28 (1) the following subparagraph: "(g) in the event that the amount payable by the employer, as provided herein, is less than the amount previously paid by the employer, the difference shall be paid to the employee."

MR. CHAIRMAN presented the motion.

MR. MOLGAT: Mr. Chairman, I wonder if the mover of the resolution realizes where this leads to. This means that the Legislature is inserting itself into collective agreements in my opinion. This means that the Legislature is making decisions here for something that is normally left between employer and employee, and the conclusion, if you follow this trend of thought through, is that we will start legislating what is basic in our system as something that we want left in the hands of employer and employees. I'm all in favour of collective bargaining. I think it is essential. But it's only as an item of very last resort, in my opinion, that the government interferes; it's only where there's a strike which cannot be resolved by any other means, that all other methods -- and these are provided for very carefully through our Labour Acts, through mediation and through conciliation officers and all of these matters, and only in the most extreme circumstances do we end up by being the ones who must do this; and to come here, not knowing, Mr. Chairman, at all the background of the agreement that may exist here, many of which may be the result of long negotiations involving other factors of which we are not informed, all sorts of circumstances of which we know nothing, and then suddenly for us to say that regardless of what the collective agreements have been, regardless of what the discussions have been, the Legislature says that this is so, in my opinion is an interference into the rights of employees and employers, and it's inserting ourselves in a way that should not be done because we are not familiar with all of the situations that exist. So I'm afraid, Mr. Chairman, that I can't support the amendment. I may misunderstand what the honourable member is proposing but it seems to me as an interference by the Legislature in collective agreements which should not happen.

MR. FOX: Go ahead, Mr. Paulley.

MR. PAULLEY: Mr. Chairman, I just want to say to my honourable friend the Leader of the Liberal Party, if he takes a pretty close look at this section, and in particular in respect to subsection (c), he'll say that he can see readily there that by legislation we are amending agreements, because section (c) says, "both the matters mentioned in clause (a) and the matters mentioned in clause (b), from and after the date on which this Act takes place, the agreement shall be conclusively deemed to be amended to provide for" ... so a collective agreement is being amended in this particular section. Now the proposition of my honourable friend the Member for Inkster is that if as a result of the amending of agreement which we are legislating for there is an overage of money, it should accrue to the employee.

MR. GREEN: Mr. Chairman, any other action would indeed be amending the collective agreement. The agreement is deemed to be amended to provide for the payment, so that my honourable friend's argument does not hold. What we are doing - and he never raised this question of interference with collective agreements when we passed section (c) which does it in those words - amends the collective agreement. Now there's no harm in the parties arriving at a new agreement, and I'd be prepared to add, if my honourable friend is concerned with that, "until a new collective agreement is reached." Until a new collective agreement is reached. But until that time we are not costing the employer one cent. We are merely seeing that he pays the same to his employees after this Act is passed as he paid before the Act is passed, and any saving that he makes as a result of having to pay less to the funds, that that benefit will accrue to the employee, who we are legislating for. Now if they enter a new collective agreement, and I think the motion implied that and it doesn't need to be amended, that the parties can agree after the agreement is terminated to stop paying any medical premiums. They can agree to that. So this just carries over until the new agreement is reached.

MR. FOX: Mr. Chairman, I'd just like to add a few words to this. This is just maintaining the status quo of what it's going to reach, and I would like to point out to the honourable members that when you negotiate you do things at the expense of others. If you negotiate for a fringe benefit then you get less money in regards to wages, and this is one of the sacrifices you make when you negotiate. Now if the legislation is going to alter this status quo, as the member's agreement suggests, then we are going to negotiate against the employee where he doesn't have any chance to negotiate at all. He has sacrificed some cash.

(MR. FOX, cont'd) wages in order to get a fringe benefit, and if we change the legislation during the agreement, then he loses this amount which he has negotiated from his employer, and all the amendment does is ask that we retain the status quo until a new agreement is reached.

MR. FROESE: Mr. Chairman, services of this type in an effective agreement generally are considered fringe benefits, and I have no quarrel with the amendment because this takes care of the transition period. Now I don't know how long these agreements generally, what time periods are contained, because it could be a number of years in certain agreements, I take it. But what about if the reverse is true in cases where this agreement takes effect, and if the insurance premium should go up beyond this level what would be the case then?

MR. CHAIRMAN: Are you ready for the question?

MR. FROESE: Would the employee then have to pay the difference?

HON. OBIE BAIZLEY (Minister of Labour) (Osborne): Mr. Chairman, I'd like to try and confuse the issue because obviously we're at different poles here to my honourable friend, that these agreements and the purpose of this section is to retain what is, in fact, in the agreement. Now, what is in the agreement is this: that an employer shall pay all 50 or 25 percent depending on what has been negotiated. Now costs of premiums change. It doesn't change the percentage that is agreed to between the parties. My honourable friend is suggesting, because there would be a reduction possibly to the employer, that the employee should have this. Well all right, he should. Then the reduction to the employee would be paid to the employer for his share, so you're compensating. They're both there. If it's a shared agreement I say to my honourable friend that they both have a reduction. And if the employer is paying 100 percent he will continue to pay 100 percent whether it is more or less, so if my honourable friend is suggesting that the employer should pay less and the employee then pays less so they will transfer, the employee will pay to the employer the lesser amount that he saves in his premium. I think this is the easiest way to get at it without confusing collective agreements too much.

MR. GREEN: Mr. Chairman, apparently the Honourable the Minister of Labour either doesn't know or didn't understand what was put by the Honourable Member for Kildonan. When these fringe benefits are worked out they are generally worked out on a basis of dollars and cents, and the employees give something; they may give a penny an hour to get this type of fringe benefit, or they may give two cents an hour. As matter of fact, in the last negotiations with Metro in which I was involved, the corporation threw out a figure of - I can't remember - so many thousands of dollars, and you apply them on which fringe benefits you want. They weren't negotiated as fringe benefits; they were negotiated as dollars and cents; and all we are saying is that the dollar and cent negotiation between the employers and the employees will not be disturbed by this Act, and anybody who's entered into negotiations knows if you get \$140.00 a year by virtue of MMS, 100 percent contribution to MMS, you lose \$140.00 in wages which you otherwise could have gotten. And that's negotiation. So that we're here saying that the parties will be free, after their agreement terminates, to renegotiate their position, but until then we maintain the status quo.

MR. BAIZLEY: Mr. Chairman, I'd like to add one word. After all, there is still 15 months too that these contracts are going to be lapsing and renegotiating; but I think in fairness, the legislation that has been spelled out here is going to be fair and equitable to all parties.

MR. FOX: Mr. Chairman, the Minister may think that but I don't. As I said - I'm on the floor Mr. Chairman; I do hope I can finish before I get railroaded through this. My wages will be lowered if this thing goes through at this rate, because we cannot negotiate something that still isn't in effect and we have to negotiate at the time that negotiation is open. Now if our agreement opens up next April, and this bill may be in effect at that time but doesn't come into effect until July, we may be able to negotiate on parts of it but there are contracts that will not open, that will still be carrying on through that period, and I think that the money that people have given aside to fringe benefits should not be taken away from them because, as I said, they could have had those monies in wages instead of fringe benefits.

MR. CHAIRMAN put the question and after a voice vote declared in his opinion the nays had it.

MR. GREEN: Yeas and nays please, Mr. Chairman.

MR. CHAIRMAN: Call in the members. All those . . .

MR. MOLGAT: Mr. Chairman, I wonder if you might put the question again. Now, my reason for asking this - is this merely up to the next renegotiation? If that's in there, then this is a different proposition, but if it's not in there . . .

MR. GREEN: Mr. Chairman, may I say that the law always gives people right to make their agreements and I presumed that in putting the motion.

MR. CHAIRMAN: The motion before the Committee is that Section 28 subsection (1) be amended by adding a new clause (g), reading as follows: "in the event that the amount payable by the employer as provided herein is less than the amount previously paid by the employer, the difference shall be paid to the employee."

MR. DESJARDINS: Mr. Chairman, I believe there was a sub-amendment after that.

MR. CHAIRMAN: No.

A COUNTED STANDING VOTE was taken with the following result: Yeas 22; Nays, 30.

MR. CHAIRMAN: Motion lost. (The balance of Section 28 and Section 29 were read and passed.) Section 30 (1) --

MR. MOLGAT: Under 30; these medical services certificates are going to be issued. Now is there going to be a separate certificate, then, for people who are under Medicare or whatever -- the recipients of public assistance. Will they receive a separate type of certificate than the regular one?

MR. WITNEY: Mr. Chairman, under this Act they will receive the same type of certificate as anyone else.

MR. MOLGAT: Well then, what is going to be the structure for those people, Mr. Chairman? Because they have access to other benefits.

MR. WITNEY: Well, they'll have a certificate under this one. What arrangements will be made by the Department of Welfare for a form of recognition for the other services will be up to the Department of Welfare.

MR. MOLGAT: So we're going to have two classes of citizens then, and two classes of services. Those who pay their premiums get the minimum services and those who cannot afford to pay premiums they get the best of services, because they get in addition to the minimum services all those other services provided for under the Department of Welfare. Now does the Minister really think that this is a sound way of proceeding, to have two classes of services? Should there not be one?

MR. WITNEY: Well, Mr. Chairman, the people that are receiving these Medicare benefits are people who haven't got any other resources and so they get the Medicare benefits, but the people who don't get those Medicare benefits have got resources to provide those for themselves.

MR. MOLGAT: Some people, Mr. Chairman, but the people of the lower income brackets who still are within range of paying premiums are the ones who are going to suffer under this, because they will not have these other services and yet are going to be paying premiums for the basic amount. Admittedly someone in the higher income brackets can do what he wants. He can go to any type of service that he wants; he can afford it. The people I'm concerned about are the ones who are trying to get along, people with a family on low or medium incomes. They are the ones who are going to have the difficult time and this is why I appealed to the Minister on the question, for example, of optometry and these matters. I think he is setting up two classes of service.

MR. CHAIRMAN: 31--passed; (2)--

MR. BARKMAN: Mr. Chairman, you said 30, didn't you? This is 31 now.

MR. CHAIRMAN: 30, subsection (1); (2)--passed; (3)--passed; Section 30 of the bill --passed. 31 (1) (a) --

MR. BARKMAN: Mr. Chairman, on 31. It's partly coming back to 22 (3) but it looks to me, unless I understand it wrong, that here a resident, or a taxpayer for that matter, in unorganized territory, there seems to be a discrepancy between this type of resident and one of a municipality. It looks to me like after all things have been tried to collect this premium, whether it be a municipality or the Minister or the Commissioner of Northern Affairs, and that has failed and they cannot collect that premium, in this case the government would pay the delinquent account where in the other case the municipality would be paying this account. Is this correct?

MR. WITNEY: I would imagine that you could perhaps put that interpretation on it, although taxes are collected in the local government districts. The local government districts are considered to be the same as a municipality, but most of them are areas that don't have the same resources as a municipality does. The local government districts also collect taxes, though, just the same as municipalities, and while you might argue perhaps that there is that position, I think it's just a relative position and it's not one that puts a discrimination on people.

MR. CHAIRMAN: (Sections 31 and 32 were read and passed.) 33 (1)--passed; (2)--

MR. DOW: I don't know whether this comes into this particular picture or not, but what is the position of a municipality that hires a municipal doctor and they take care of all the medical services from a municipal point? Does this put them -- do they have to disregard this system now? I'm thinking of one municipality in particular where the municipality have guaranteed their residents all medical services by paying the doctor a prescribed sum of money, and the individuals in that municipality get their medical services from this picture. Now as I read it then, this takes this type of an agreement right out of the picture. Is this right?

MR. WITNEY: Not necessarily, Mr. Chairman, because if we go back to 31 (1) (a) the municipality may, on behalf of a person, pay the premium, so if the municipality wanted to pay the premiums for all of its residents it could do so.

MR. DOW: ...misunderstood the fact that there is no prescribed premium as such. They hire the doctor to give all the medical services and the municipality levies that over the full municipality, and so now you come into a picture where under this agreement that was allowed, these people - there would be a variation between what the corporation may set up as a premium or as what the resident may be charged. I am just wondering, in this particular case this will take away all municipal agreements, is this right?

MR. DESJARDINS: Mr. Chairman, I wonder if -- I think this will explain it a little better if I read what happened in this case. I think this will answer the question of the honourable member. In Saskatchewan, for instance, they have a method of payment through approved health agencies, and that might cover the situation. They say here: "A physician may become a medical member of an approved health agency, and thereby agrees to submit all bills for service provided to subscribers of that agency to the approved health agency for payment. The agency in turn submits the bills to and receives payment from the commission, then forwards payment to the physician. In submitting an account to an approved health agency, the physician agrees to accept payment as payment in full." So that might be a clause that would cover this, and if not, they have a direct payment here. They have in addition to the above, there is a provision for a physician, subject to acceptance by the commission, to be paid an agreed upon sum on a periodic basis in lieu of a fee for each service. This method of payment is used only in some under doctored areas. In 1965, four physicians were paid under this arrangement. Under this alternative the physician reports the services provided so that his volume of work may be periodically reviewed. So one of those two might I think answer the question; if we had it here. This is Saskatchewan of course.

Would the Minister take this into consideration then and maybe on third reading if this is not covered, not to delay, could you take this into consideration to see if this could be included in the bill.

MR. WITNEY: Mr. Chairman, the permission is given to the corporation to make separate arrangements other than a fee for service with doctors in a manner that is similar to that provided in Saskatchewan.

MR. DESJARDINS: They could do that.

MR. FROESE: Mr. Chairman, in connection with the write-off of uncollectables, the way I understand it under the Bill here, if the corporation decides to make certain write-offs, and the municipality, the way I understand it, will still be able to collect from these people under certain circumstances. If they do collect it, do they still have to remit those balances then to the corporation or do they retain it themselves because once the corporation is written off is the municipality able to hold these amounts then?

MR. WITNEY: Well after a period of 30 days if the amount's not collected the municipality will have to pay the amount but it can assess it on the tax roll and go through the normal procedures of collecting a debt to a municipality.

MR. CHAIRMAN: (Sections 33 to 35 were read and passed.) 36. (1) (a)...

MR. MOLGAT: Mr. Chairman, on 36 (1) I'd like to move an amendment. I beg to move, seconded by the Honourable Member for Selkirk that subsection (1) of section 36 of Bill 68 be amended by adding a further clause (d) as follows: "(d) and any such agreement will be presented to the Legislative Assembly for inclusion as a schedule to this Act at the next session of the Legislature."

MR. CHAIRMAN presented the motion.

MR. MOLGAT: Mr. Chairman, I mentioned the other day that I would be introducing this amendment. Now I recognize quite clearly that the Act and the whole of the plan cannot work without the co-operation of the doctors. I recognize this and my comments on any of this

(MR. MOLGAT cont'd)...I hope will not be interpreted in any way as an accusation against the doctors.

On the other hand, Mr. Chairman, we have a responsibility as legislators here that if we are going into such a plan, that we have the best plan possible for the people of the province and that the bill, the regulations and everything concerned with it, is the soundest arrangement that can be made. Now the Minister said the other day that he could not put the schedule in the Act at this time and I recognize that, and I recognize that the method he is following is probably the best method that can be arrived at at this time. He is setting up his corporation and then the corporation is going to negotiate with the medical profession; and that's quite proper because they obviously have a very direct interest in this and it cannot be simply imposed upon them. I don't think that we could simply write an Act here and say this is going to be it, like it or lump it. I think that this would simply raise their back, as quite frankly my back raised when I saw last Friday that we were being faced with an increase at this time, and I don't think that this will lead to co-operation that is needed for this Bill to work. So I accept what the Minister said in that regard and my proposal now is not that we delay the bill, not that we insist that the schedule be added now, but simply this. If the plan is going to be ready for operation by the first of July 1968, then quite obviously by the next time this House meets the negotiations should have been completed with the medical profession as to services, the fees, the rates and so on. The corporation is to be set up immediately by this bill; I would hope that the Minister can proceed to appoint the members to it, so I don't think that there'll be any rush at all getting this ready for the next session of the Legislature. Then at that time we would ask that the Minister introduce as a bill at that time an amendment to this present bill, which by then will have been an Act, an amendment setting out the details under (a) (b) and (c) of the agreement and that this become part and parcel of the Act as a schedule to the Act at that time.

Now this will simply be putting into the statutes the conclusions that the Board will have arrived at with the medical profession; and I think, Mr. Chairman, that this is perfectly sound. This will make it clear to both the medical profession and the board that this House quite obviously has a vital interest in this matter as it should have, that the agreement will then have the force of law. It will be public, any amendments would then have to proceed by obviously further negotiation by the Board and then notification to this House; but this House will then remain in the final, not direct control, and I'm not suggesting it should be, but at least in view of the fact that we have to raise the taxes, the final authority and it will be part and parcel of the Act. Now it seems to me that this has been followed in other provinces and is a sound practice. So there will be no interference in the negotiations between the board and the medical association in the next few months, they will proceed exactly as the Minister foresees at this time, but once that is concluded then we ask by this amendment that it become part of this Act.

MR. RUSSELL PAULLEY (Leader of the New Democratic Party)(Radisson): Mr. Chairman, we're going to support the amendment proposed by the Honourable Leader of the Liberal Party. We can see, however, some deficiencies and some difficulties in the suggested amendment although it does say any such agreement because we visualize the possibility of no agreement being arrived at and it was for that purpose of course that my colleague from Inkster a short time ago, proposed an amendment which would deal with the possible eventuality of there being no agreement and what action should be taken if such be the case. So I suggest, Mr. Chairman, that there may be some difficulties in fulfilling the agreement or the purpose of the amendment if it is agreed to by the House. There is also one other point which I raise at this particular time. The proposed amendment contemplates an agreement and we being made aware of it at the next session of the Legislature in the event of such an agreement, and I would suggest the purpose may be so that we would have an opportunity of looking over it to see whether or not we thought the schedule and the prices were adequate or inadequate and have an opportunity of making comment on that feature.

I also want to point out, Mr. Chairman, that there is another point that could conceivably happen. I notice that this bill is a bill which comes into being on proclamation. Now if I understand what has been said in Ottawa correctly, both the Minister of Finance I believe, Mitchell Sharp, and the Honourable Minister of Health, said that if the economic well being of Canada advances and improves, and as we all I am sure trust that it does improve, to a degree before July 1st, 1967 then the Act can be proclaimed or at least the date of the commencement of the Act can be advanced; so it is quite conceivable that an agreement may be reached before

(MR. PAULLEY cont'd)...the next session and the Act may be proclaimed and put into effect before July 1st.

So as I say, Mr. Chairman, we can see some difficulties in the question. We regret very much that there isn't the provision in the amendment even to the effect that in the absence of any agreement then a fee schedule is arrived at by negotiation with the - if it's not arrived at, that the Minister establish a fee schedule. However, that was a different question. So we can see some difficulties in this, Mr. Chairman, but we do intend at this time to support it.

MR. DESJARDINS: Mr. Chairman, I think that this is a good amendment. At the committee the Minister will remember that I suggested that we should wait awhile before passing this bill and the Minister quite rightly pointed out that this bill should receive approval, third reading, because there are so many things that had to wait until this became law and this is the reason as my leader said that we have this amendment.

I don't believe - really I think it would be quite difficult to follow the suggestion of the Leader of the New Democratic Party of really imposing an agreement, if there's no agreement made of imposing. I don't think you'd get too much co-operation from the doctors in this instance and there is no doubt that we need their co-operation if this plan is to be successful. Mind you we could always do that. There will have to be some kind of an agreement, if not an agreement a form of payments and the proviso is there now, it's provided for in this Act, that the medical profession they could, all of them if they wish, practice outside the plan. Now this would defeat the purpose, I think, of this Bill, this Act, but it would still be possible.

Now, I don't think that the Minister has any reason not to accept this amendment. If he has it would only mean one thing, that he doesn't want the members of this House to know anything about it or to have a chance to approve or to discuss this and I think that this would be wrong. We were told many times that we are the ombudsmen more or less, that all the members of this House are ombudsmen and I think that we are trustees of the consolidated plan, I think we have the right to question and to find out and to discuss where the money of the taxpayers of the Province of Manitoba goes. I think it's only natural that the Minister should agree to this amendment and then we might feel that we are doing a job here by passing this. If not, he is just telling us to approve a principle but at all costs and this government has been talking about priorities for many years and I think that this is a fact that although something might be good you have to know if it's feasible, you have to know if the people of Manitoba, of the province can stand it and this is all we're asking. This is not very much to ask. I think that the people of Manitoba are entitled to this and I do hope that the Minister will not keep on the way he's been doing there, and not accepting any suggestion from this side of the House at all and just pass the bill, everything the way it is there. It seems to me that this is a case - that this bill was prepared, written by somebody else and not the Minister because he doesn't seem to want to take any suggestion. We're asked to bring in constructive suggestions and I think this is one of them and I hope that the Minister will see fit to support this amendment.

MR. FROESE: Mr. Chairman, I feel the amendment before us is a good one and a proper one. In fact, I've felt all along that we should have had the present schedule of fees that are being used by the MMS - should be before us so that we could consider these at the present time because unless we do have them we don't even know on what terms we are talking on many occasions and therefore certainly before this bill is activated next year that we have this information before us and that it become part of the bill.

Certainly I see no reason why this information should not be made available and should not also become part of the Act because this will mean money that will be spent and will have to come, some from premiums but other moneys certainly will come from the Consolidated Fund for this purpose, and we should be able to have a good look at these expenditures.

MR. MOLGAT: Mr. Chairman, is the Minister going to indicate whether or not he intends to support the amendment, make any comment on it?

MR. WITNEY: Mr. Chairman, no, I will not support the amendment. We have a Crown Corporation set up now which will provide for negotiation between the doctors and the Crown Corporation and we provided in this Act that the agreement that they come to will have to be approved by the Lieutenant-Governor-in-Council. The Lieutenant-Governor-in-Council must pass an Order-in-Council and that Order-in-Council will contain all of the information as to the agreement that has been negotiated between the two bodies and as such it will become a public document.

MR. MOLGAT: Mr. Chairman, is the Minister going to publish that Order-in-Council because the government is very reluctant to publish Orders-in-Council, I have found in the past. In fact when we've asked about them in this House we've been told, well, you can't even get a copy. If you want to get a copy go down to see the Clerk of the Council. If this is the type of publication it's going to be, I'm not satisfied with it.

MR. SHOEMAKER: Mr. Chairman, will the Order-in-Council be published in the Gazette? --(Interjection)--It won't be published in the Gazette? --(Interjection)-- Not necessarily. Well, will it or will it not be published in the Gazette, and as such become a public document or made available to the public in this manner?

MR. WITNEY: Mr. Chairman, the Order-in-Council would not be published in the Gazette but it is available to the public from the Clerk of the House, Clerk of the Executive Council's office.

MR. HILLHOUSE: Would you instruct the Clerk to give us a copy of it if we go to see him?

MR. WITNEY: It's a public document; he must do so if it's requested.

MR. SHOEMAKER: ... Minister undertake to supply members of the House with a copy of the document immediately following or shortly following the Order-in-Council?

MR. WITNEY: I think the members of the House would be quite capable of asking for it themselves, Mr. Chairman.

MR. CHAIRMAN presented the motion and after a voice vote declared the motion lost.

MR. MOLGAT: Ayes and Nays, Mr. Chairman.

MR. CHAIRMAN: Call in the members.

MR. ROBLIN: Mr. Chairman, would you kindly read it.

MR. CHAIRMAN: The motion is, That subsection (1) of Section 36 of Bill 68 be amended by adding a further clause (d) as follows:

(d) And any such agreement will be presented to the Legislative Assembly for inclusion as a schedule to this Act at the next session of the Legislature.

A STANDING COUNTED VOTE was taken, the results being as follows: Yeas, 24; Nays, 29.

MR. CHAIRMAN: The motion is lost.

MR. DOW: Mr. Chairman, I'd like to pursue the municipal doctor concept. I can't find anything in the Act to satisfy me that arrangement of fees has to be made by the Manitoba Medical Association and the fees are paid direct to the medical practitioner. It's either going to do one of two things or the agreement must be changed. In the first instance, if we're going to continue the concept of the municipal doctor then the fees earned by the doctor under the agreement are paid back to the municipality or we're going to take away the concept of a municipal doctor. I'd like the Minister to comment on this because it does affect several municipalities that have provided medical service as a municipal proposition whereby they have through taxes, have covered all medical services and hire a doctor. Now if we have a straight direct premium from these individuals and the municipality hires the doctor, then they should be entitled to the return from the Crown Corporation and I can't find anything in the Act that satisfies me this is being done. Would the Minister comment on that?

MR. WITNEY: Mr. Chairman, as the honourable member speaks about the municipal doctor, he's talking in terms of where the municipality comes to an arrangement with the doctor that they will pay for certain services that the doctor performs and they come to an agreement as to what they will pay for certain benefits. Well, the Corporation will pay for the benefits in this case, not the municipality, the Corporation will do it. Now in some areas where we may have a - say an under-doctored area, we have this section of 36 (5) which I referred to before and if you read it it says: "in accordance with an order of the Lieutenant-Governor-in-Council, the corporation may enter into agreements or make arrangements for payment of remuneration to medical practitioners rendering medical services to residents on a basis other than a fee for services rendered." That it would be the Corporation that made the payment.

MR. DAWSON: Mr. Chairman, I'm quite concerned about this particular aspect of the bill too and I don't think that you've got the point of our question. If I could explain it, maybe - I don't think I can explain it any better than the Honourable Member from Turtle Mountain but I may be able to explain it a little more fully.

As you know there is a mill or X number of mills struck off in a municipality to pay for the municipal doctor. Is this correct? What will happen to this particular plan in the future?

(MR. DAWSON cont'd)....Will it be scrubbed? Will this mean that the people that are living in a particular municipality that have a municipal doctor will lose the services of their municipal doctor and the premium that was going to the doctor from the municipality in the form of taxes will be washed out? Is this correct? And if it is washed out it means that the taxpayer will have to pay his premium directly to the provincial Medicare scheme. And if this is not correct and a municipality can pay the premiums for them as they have done in the past, is this possible? If it is possible, then why can't this be done right across the Province of Manitoba. I think that's the point we're trying to make.

MR. WITNEY: Mr. Chairman, the one you're speaking of is basically the one out at Hamiota and I gather that out there they assess a mill rate. Well that will be wiped out because the people will be paying a premium to the municipality and the benefits they receive will be paid for by the Corporation. Now if the municipality wants to buy a premium for everybody in its municipality, it can do so.

MR. DOUGLAS CAMPBELL (Lakeside): Mr. Chairman, as a matter of interest, can the Honourable the Minister inform the Committee as to how many municipal doctors there are in the province?

MR. WITNEY: Well, in terms of municipal doctors, I think that the Hamiota group have about four I believe, and then there's one down in Dunrea; there's another in Cornwallis and I believe that there's another one in the R.M. of Wallace. --(Interjection)--So they number about 10.

MR. CAMPBELL: Are there varying agreements with the municipal doctors? And so that we get the second question at the same time, this bill in my honourable friend's opinion is able to take care of all the situations, is it?

MR. WITNEY: There are varying degrees of coverage. In some of the rural doctor situations the municipality have an agreement with the MMS, and there are various levels of coverage in the different municipal doctor setups. This legislation here provides for comprehensive medical services for everyone.

MR. CHAIRMAN: (Subsections (1) and (2) of section 36 were read and passed) 3 (a)... The Honourable Member for St. Boniface.

MR. SIDNEY GREEN (Inkster)...the Member for St. Boniface. I let 2 pass and I wanted to bring something up under 2.

Mr. Chairman, I note that the medical review committee is another area where the Act appears to be held in limbo unless we have an agreement. Because it says the corporation with the approval of the Lieutenant-Governor-in-Council, then it goes on to say notwithstanding that it is not an incorporated association the MMA through its officers or (b) the College of Physicians and Surgeons or both may enter into an agreement respecting all matters relevant to the establishment, duties and functions of a medical review committee. Now it appears to me. Mr. Chairman, that if there is no agreement there is no medical review committee and I just wonder before I propose any changes whether my interpretation of that section is correct?

MR. WITNEY: Well when the corporation is set up --as soon as the bill is passed and the corporation is set up and they come to the agreement with the MMA, then we can also arrange for a medical review committee.

MR. GREEN: Mr. Chairman, if there is no agreement under section (2), if the College of Physicians and Surgeons or the MMA can't agree, or on the other hand the corporation can't agree with the personnel or otherwise, duties or functions of a review committee, how will a review committee be established under this Act?

MR. WITNEY: Well there would be nothing for them to be established for so they wouldn't be established.

MR. GREEN: Mr. Chairman, if that's the case then I would like to move that 36 subsection (2) be deleted and substituted therefor the following: "the corporation after consultation with the Manitoba Medical Association and the College of Physicians and Surgeons shall with the approval of the Lieutenant-Governor-in-Council establish a medical review committee and set out its duties and functions provided that said committee shall contain a majority of medical practitioners." Mr. Chairman, -- I'm sorry.

MR. CHAIRMAN presented the motion.

MR. GREEN: Mr. Chairman, I can't conceive of any legislation or any government legislating and making its legislation depending upon some agreement being reached. Now I agree that everything has to be done to get the co-operation of the medical people, but at the same time I don't agree that we will not legislate a medicare scheme for the Province of

(MR. GREEN cont'd)...Manitoba unless the doctors agree with every single thing that's in it and in this case the Minister has told us that if there is no agreement reached between the corporation and the doctor then one of the most important functions of the legislation cannot be proceeded with. You can't have a plan without a review committee and if the College of Physicians and Surgeons or the MMA became adamant that they would not agree to something that the elected representatives of the people felt was necessary there would be no Act.

I'm suggesting an amendment which will provide that, certainly go ahead and co-operate, certainly go ahead and consult, and even give a guarantee that a majority of that committee will be medical men; but in the last analysis there has to be a review committee if we are to have effective legislation.

MR. CHAIRMAN: Are you ready for the question?

MR. MILLER: Mr. Chairman, just a moment, before that passes so hurriedly. Is the Minister saying -- I think this is what he said, he said "when an agreement is reached." Now just supposing an agreement isn't reached - and I'm using the expression he did, "when an agreement is reached." In other words he's predicating this entire bill on the hope that there will be an agreement. Now we cannot gamble that this will be the case and I don't think we should. This isn't aimed against the doctors; if there is an agreement that's fine; but in the event that there isn't an agreement surely the government isn't saying there shall not be a plan. Because if the wording --(Interjection)-- yes this is what he's saying. He says the Manitoba Medical Association through its officers, it's not a member of the MMA but through its officers, in other words if the MMA through its officers decides that they are not prepared to get together on this we don't have a plan. Now he's predicating everything on the hope and the expectation that there will be a plan. I think there will be too, but surely there's nothing wrong in re-wording this so that there shall be a plan, that doctors irrespective if they're officers or not who want to sit on a commission or on this committee shall be able to sit on it; a plan can come in, a schedule of fees can be announced, those doctors who want to practice under it can practice under it, those that don't can stay out; doctors who want to come into the province knowing what the schedule of fees is will then come in and we'll invite them in and welcome them in. But you don't pass legislation predicated on some body outside of this House determining whether or not there shall be any legislation; and this is what we're doing.

MR. DESJARDINS: Mr. Chairman, I don't think that the Minister is consistent if he doesn't agree with this amendment. Either he knows a way more than he's telling us, which I suspect by the way, and there is an agreement, which I'm sure by the way; or if this isn't the case well this is fine, he should say so. But he tells us this is just the mechanics, you have to pass this. I can't talk to doctors, I can't do anything, but when this bill is passed the corporation -- and only then, they will just start negotiating. Remember yesterday he asked me if I got it there were four lists and they didn't say anything about pay there, and if this is the case well let's be consistent and let's have a bill that will make these things possible and I think that the mover of this resolution is absolutely correct. I don't think that this will be needed but technically we can't take this, we have to take the word of the Minister that no, no talk, no talks have been held so far with anyone on the schedule fee. This is what the Minister told us - what can he do. Let's pass this bill, then the corporation will negotiate, only then, and they will bring in agreement. But what is the answer? What if there isn't any agreement? Unless the Minister can say two things, he has to support this. Either he's got to tell us well I've been kidding you along, there is an agreement I know about it but I don't want to tell you. Either that or he's going to say if there's no agreement we don't want this plan. He's got to be able to answer one of these two questions, or if he wants to be consistent he has to make this provision or he will not have a review committee.

MR. WITNEY: Mr. Chairman, how can you people read so much and how can you take such a negative viewpoint and how can you change things around so much as you have just now. If we haven't got an agreement we'll have to be back in the House with new legislation. We've got a bill, it provides for a corporation, we get the corporation set up, the corporation is going to have an agreement, and you all say I think we'll get an agreement. And then you say but - but. Now what on earth are we doing in the Legislature? Let's put some faith in somebody. We'll get an agreement; and if we don't get an agreement we'll be back here. And in the agreement we have - if we get an agreement with them and we've got something to work with, then we can set up a medical review committee. If we haven't got an agreement, we've got nothing for a medical review committee to work for. So why set it up? We'll have to be back here again. I'm against the resolution -- or the motion.

MR. GREEN: What the Minister is saying, and he says it in no uncertain terms now, that the MMA and the College of Physicians and Surgeons, or both, can veto this legislation. That's what he has just said because he has said that if we don't get an agreement on this medical review committee -- if we don't get an agreement with them we will have nothing to legislate for.

A MEMBER: Come back here.

MR. GREEN: No, he said further we won't have any things to legislate for.

MR. DESJARDINS: Mr. Chairman, I would like to thank the Honourable Minister who answered one of the questions because he said if there's no agreement there's no plan and we'll be back. Now not too long ago - there's no Act because you have no agreement - and not too long ago I think he said that we had not negotiated on this at all. Now he's saying, establish the Board, they will negotiate. Well, if you're negotiating you don't - well, I don't know if they will come to an agreement and this is not changing things at all.

Now the Minister made a good point, "let's have faith in somebody." Well, I would like to remind the Minister that 57 of us were elected to represent the people of Manitoba, not 12, and who are asking us to have faith in somebody and to tell us a little more about this so we could know what we are voting on. This is all we've been asking; you refused, you've looked upstairs and then you looked down again and you refuse every single amendment. And they were reasonable amendments. You're talking about having any faith. What do you tell your people? "However, details of progress" - talking about the negotiations - "could not be revealed at this point because the government had asked that they be kept confidential." The government had asked that they be kept confidential.

Now we're coming in, and there's a bill -- this was in 1966 -- now there's a bill in front of us, you say have confidence. You are asking us to vote a blank cheque, this is all you're asking and you're saying now - at least you did answer in a roundabout way - that if there's no agreement, if you don't give them everything they want, if there's no agreement, we will have to come back here, we'll have no plan. Now if this is the case, shouldn't you have voted for my motion in committee, that this was premature, that you were going too fast, you didn't have the information; you weren't ready to give us this information so we could consider this and therefore that you had a chance to wait? Now you didn't want a special session of the Legislature at this time. Are you going to be ready to take advantage of this federal plan then? Are you going to be ready if we have to come back and start all over again if there's no agreement? No, Mr. Chairman, because you know there's an agreement; you know all about the agreement but you just don't want to trust the people of this House and you're asking us to vote you a blank cheque.

MR. CHAIRMAN put the question and after a voice vote declared the motion lost.

MR. GREEN: Ayes and Nays, Mr. Chairman.

MR. CHAIRMAN: Call in the members.

The motion before the Committee, is this, that subsection 2 of section 36 be deleted and the following be substituted therefor: "The corporation after consultation with the Manitoba Medical Association and the College of Physicians and Surgeons shall with the approval of the Lieutenant-Governor-in-Council establish a medical review committee and set out its duties and functions provided that said committee shall contain a majority of medical practitioners".

A COUNTED STANDING VOTE was taken, the results being as follows: Yeas, 23; Nays, 29.

MR. CHAIRMAN: Motion lost. Subsection 2--passed; subsection 3...

MR. DESJARDINS: Mr. Chairman, I have an amendment here, that clause 3 of Section 36 be amended by adding after the number 2 in the second line, the following "and of which committee at least one-third of the members will not be members of the medical profession."

MR. CHAIRMAN presented the motion.

MR. DESJARDINS: Mr. Chairman, this is not in any way being critical of the medical profession, this is treating every group in our society as equals and not having any privilege of anything and I think that the members of the medical profession if they are sincere should certainly have no objection to this at all.

You notice that in any other Act and we're dealing with any other group, we always specify that only not more than 2 or 3 of that particular group could be on these committees. Now I want to make sure, I know some of these things will deal with medical records and so on, this is why that definitely we should have a majority and I think that two-thirds is a good majority of medical men. But this is a review committee. I think that also we must have

(MR. DESJARDINS cont'd)...confidence in the laymen and the people that are on the other side of this contract, and I feel that it is only fair that we should have people that are not in the medical profession on this committee.

We say in the paper just Friday or Saturday that there was such a committee -- the committee mind you recommended it wasn't exactly this -- well it wasn't this committee at all, but it was a committee dealing with the rates and so on and we saw where the laymen on the committee did not agree with everything that was said with the medical profession and in a democratic form of government this is very important. There is no reason in the world to think that this is being critical of the doctors at all, especially doctors as professional, as medical men, but as businessmen dealing with certain things other than the care of patients, and if we are to really, if we are able to be honest on these things, and to look at all the problems that might come, in an honest way, we have to have someone other than the people in the professions. I don't think this should be just a closed shop; I don't think that we should have only one side of the picture presented to us. The majority certainly rules. Two-thirds is a pretty good majority and I can't see one reason in the world why this amendment cannot be passed, why we cannot have somebody that could look, probably as their number one objective, to look at the welfare of the people coming under this plan, the people of Manitoba. After all they are the ones that are required to pay the cost for this and I think that they should have representation.

We are asking for an ombudsman; the law society has asked for ombudsman in the Law Society. Why can't we start - let's not close our eyes there has been and there could be trouble sometimes with the doctors, and they will not be right 100 percent of the time, maybe 99 percent but not 100 percent. There has been some changes made in Saskatchewan on this Act and I think that there might be some other things. So let's not tie ourselves down and have to change this later on. This would be more serious. Now there is nobody being accused of anything; we are just suggesting that in a review committee, people that will review these things, there could be at least one-third of the members who did not belong to the medical profession. I don't apologize to anybody for making this motion. I think that this is a vital part of a democratic form of government that we are supposed to have.

MR. GREEN: I just wondered whether the Minister has anything to say with regard to this proposal? Well, Mr. Chairman, I must say that this is a medical review committee, which is supposed to review I would think, medical matters, but that is not what is stated by paragraph 2. Paragraph 2 says may enter into an agreement respecting all matters relevant to the establishment, duties and functions of a medical review committee and it seems to me that we are left in the dark as to what this committee is going to be doing. Now if it was reviewing only medical matters then there is something to be said for the fact that medical matters will not be reviewed by lay people, but that certainly is not the limitation as expressed by the previous section.

Mr. Chairman, I don't see that there is any harm in the proposal that's being moved by the Honourable Member for St. Boniface provided that it does not mean that either a layman or a majority of laymen would be in control of something respecting a medical matter and I think that the constitution of the committee could be so drafted that in any vote, concerning a medical matter that there must be a majority of medical people. In other words, if there were 9 people on the committee and 5 voted for a particular decision but those 5 included 3 lay people, I would say that that would not be a decision which should be recognized; but I think that that could be left for the constitution of the committee. What I am concerned with is that we do not know at the present time whether this committee is going to be solely concerned with medical matters and in view of the fact that the government won't accept responsibility in the last analysis, telling us what this committee is going to do, I think that the proposal that's being made by the Member for St. Boniface is one which can be supported.

MR. HILLHOUSE: Mr. Chairman, I think this is another case where we have an agreement which is nonexistent and it seems to me that before we can vote intelligently even on this section, I think we should know what the duties, functions of a medical review committee are. I think it's most imperative that we be given that information, because I for one, can't vote intelligently on my colleague's motion unless I know. If it's strictly a medical review of charges that are made and of operations that are performed and kindred matters to determine whether or no there has been abuse of the fund, well then I would say that it should be confined to medical men; but if the functions and duties extend beyond purely medical matters I think that the Honourable Member for St. Boniface's motion is well made. But I do believe, Mr. Chairman, that the Minister should enlighten us on the duties and functions of this medical

(MR. GREEN cont'd)...review committee because it is absolutely necessary if we are to deal with this section in an intelligent manner.

MR. WITNEY: Mr. Chairman, this committee is just what it is labelled as being - a medical review committee. Everything that this committee has to do will have some medical connotation to it somewhere down the line, and only that can be done by medical people.

MR. HILLHOUSE: Well why couldn't you spell out in the Act what the duties and functions are?

MR. DESJARDINS: Mr. Chairman, if you read clause 3 it says "A medical review committee established under an agreement made under subsection (2) is entitled to obtain information relative to any matter before the committee from (a) the corporation; (b) hospitals; (c) medical practitioners and (d) insured persons.

My intention is certainly not to have a few people there trying to practice medicine. I think you know that.

MR. LYON: I wonder if we could have agreement in order to expedite our dealing with business, if we could ask Mr. Chairman just to leave the Chair, by agreement, and then come back to this item on the Order Paper and carry right on.

MR. CHAIRMAN: I am leaving the Chair until 2:30.