Opening Statement

House of Commons
Standing Committee on Finance
Pre-Budget Consultations 2013

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Ottawa, Ont.
November 20, 2012

Check against delivery
Good afternoon. I would like to thank the committee for having the CMA appear before you as you prepare for next year’s federal budget.

Canada’s doctors focus every day on finding innovative ways to provide better care for our patients. Above all else, physicians want to provide patient-centred care within an efficient, high quality, sustainable health care system. However, just like millions of other Canadians, we are frustrated with a health care system that provides quality care but is not efficient. Canada ranks seventh highest of 34 OECD countries in per capita health care spending, but well down the list in terms of health care system performance.

There are a number of actions within federal jurisdiction that the Government of Canada could take to improve health outcomes and exercise a leadership role in transforming our health care system while recognizing that we are in a time of continued economic uncertainty.

First, we recommend that every major new federal policy initiative in which health could be implicated be put to the test of a Health Impact Assessment. Looking at new policies through the perspective of their potential costs and benefits to the health of Canadians would have a significant beneficial impact. Evidence shows that every action with a negative effect on health will incur heavier costs to society down the road. Policies and regulations moved forward by elected officials today may well have consequences for future generations. That is why, to prevent unintended consequences, the CMA recommends that a health impact assessment be included in the cabinet decision-making process.

Second, the government’s Economic Action Plan, with its large infrastructure component, was effective in insulating Canadians from the global recession while providing communities with much-needed infrastructure. We recommend that the government build on this success by targeted investments in health infrastructure. Such an approach could begin to address the current lack of long-term care beds across the country, a shortage that prevents too many Canadians from accessing better, more efficient care in an appropriate and less costly care setting.

According to Finance Canada’s report on the Economic and Fiscal Implications of Canada’s Aging Population, the senior population is projected to increase to about 37 per cent of total population by 2030, and, assuming current residency rates, the Canadian Life and Health Insurance Association predicts Canada will need over 800,000 long-term care beds by 2047 – more than 2.5 times what we have now.
Third, doctors and other health care providers can only do so much when a patient lacks proper food or housing, an adequate income, or the education needed to make informed decisions. Many of the health issues we physicians see downstream every day are the result of upstream circumstances that are almost guaranteed to cause illness. Therefore, we recommend that the federal government recognize the implications of the social determinants of health on the demands of the health care system.

These and other CMA recommendations reflect the evolution in health care over the last 30 years, an evolution marked by an aging population and ongoing fiscal pressures.

The system needs to evolve from its emphasis on ‘acute care’ for things like injuries and curable diseases to improve prevention and better manage the afflictions associated with aging. Our country needs to catch up with other nations and develop a pan-Canadian strategy for long-term care, home care and palliative care; we badly need a dementia strategy; and we need a national pharmaceutical strategy. We should not accept that one in 10 Canadians cannot afford to buy the medicines they’ve been prescribed.

Finally, we recommend the federal government introduce incentives, measurable goals, pan-Canadian metrics and measurement that would link health care spending to comparable health outcomes. This could be done through an agency such as the Canadian Institute for Health Information.

Jurisdiction for health care is shared between the federal and provincial governments. There is no reason why this should preclude the federal government from leveraging its spending power to help Canadians get better value for money spent and better patient care; or from working with the provinces and territories to ensure portability and equity for Canadians across the country.

Canadians deserve a health care system that meets their needs, and they expect leaders at all levels to ensure they get one. As Canadians continue to rank health care as their number one priority, they clearly recognize the importance of a strong efficient health care system to their lives, our communities and to our country’s prosperity.

I would be pleased to answer your questions. Thank you.