

## THE LEGISLATIVE ASSEMBLY OF MANITOBA

2:30 o'clock, Thursday, March 27, 1969

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 GUESTS

I'll pause for a moment and introduce our young guests to the House. We have 50 students of Grade 8 standing from the Beliveau School. These students are under the direction of Messrs. Parker and Senchuk. This school is located in the constituency of the Honourable the Leader of the New Democratic Party. We also have with us today 8 students of Grade 9 standing of the Marymound School. These students are under the direction of Mrs. North and Mrs. Kinsbergin. This school is located in the Constituency of the Honourable Member for Seven Oaks. Also, 20 students of Grade 8 standing from the Butterworth school. These students are under the direction of Mrs. Masniuk. This school is located in the constituency of the Honourable Member for Assiniboia. Also with us today are 33 students of Grade 7 standing of the Harold Edwards School. These students are under the direction of Mr. Costley and Mrs. Taylor. This school is located in the constituency of the Honourable Member for Lakeside.

On behalf of all the Honourable Members of the Legislative Assembly, I welcome you all here today.

INTRODUCTION OF BILLS

MR. SAUL M. CHERNIACK Q. C. (St. John's) introduced Bill No. 38, an Act to incorporate The Talmud Torah Foundation.

MR. JAMES COWAN Q. C. (Winnipeg Centre) introduced Bill No. 39, an Act to amend an Act to amend and consolidate the Acts incorporating The Fidelity Trust Company; Bill No. 40, an Act respecting Misericordia General Hospital; and Bill No. 41, an Act respecting Les Soeurs de Misericorde de Winnipeg.

ORAL QUESTION PERIOD

MR. SPEAKER: The Honourable Member for St. George.

MR. ELMAN GUTTORMSON (St. George): Mr. Speaker, I have a question I would like to direct to the Minister of Mines and Natural Resources. There is a news report in the Portage Graphic today where there appears to be a conflict between two organizations, one is the Assiniboine River Flood Fighting Committee and the other is the Prairie Flood Control organization. Apparently there is some conflict over which organization is the official organization with respect to flood control in the Portage area. Can the Minister tell us which organization of these two is recognized by the provincial government?

HON. HARRY J. ENNS (Minister of Mines and Natural Resources) (Rockwood-Iberville): Mr. Speaker, I am not aware of the news report that the Honourable Member for St. George is referring to. My offhand opinion would be, and I recollect from the committees that have been set up, that the Assiniboine Flood Fighting Committee registers with me, but I would undertake to double-check that matter.

With permission, Mr. Speaker, while I am on my feet, I may reply to a question that has been put to me several times in the past few days dealing with the sale of sandbags. I can now inform the Honourable Member from St. George, and the House, that a supply of bags were sold to Inkster Supply of Winnipeg, the one sale consisting of 72,500 bags at a price of 9.25 cents per bag. These consist of bags of the potato or grain size bags. There was a further sale of 100,000 bags sold at 4.5 cents a bag. I would report that these bags were originally purchased in the price range of 11 to 25 cents per bag. It is difficult to ascertain the precise price because the price was pretty well dependent upon where these bags were purchased from, that is what distance the freight was involved.

I should point out to the Honourable Member, Mr. Speaker, that the reason for the sale was that many of these bags, or these lots of bags, were in many cases in position, although

(MR. ENNS cont'd) . . . not used, but had been distributed where it was felt that they might be needed. They had received some weathering or rain or got wet during the course of this and we were faced with the situation of some pretty serious deterioration setting in on these bags, and it was felt advisable to attempt to get some salvage value out of them. We were not pleased with the four cent price on that bag and we desisted from making any further sales of that kind. Thank you, Mr. Speaker.

MR. GUTTORMSON: Mr. Speaker, would the Minister advise the House when the sale of these two lots took place? And what was the reason given by the firm that bought them - what purpose do they intend to put them to, or did they tell the government?

MR. ENNS: Mr. Speaker, my understanding is that these sales took place sometime during the winter. I can't fix the precise date as I don't have that information. I also don't have the information as to what further use the company involved had in mind for these bags.

MR. GUTTORMSON: Do you mean this past winter - 1969?

MR. SPEAKER: The Honourable Member for St. Boniface.

MR. LAURENT DESJARDINS (St. Boniface): Mr. Speaker, I rise on a point of privilege. A couple of days ago the Honourable Leader of the New Democratic Party, while speaking, made the statement that I had said that the doctors if they were going to be honest and sincere would come in the plan and would not opt out. At the time I told him that he was purposely bringing in a meaning exactly the opposite of what I had said. I challenged him to find it in Hansard and he did the same thing. Unfortunately, the Leader is not here today, but I did find this in Hansard and I'd like to make this point quite clear, Mr. Speaker. This is what I said on the subject. I said, referring to the doctors, "Let them be fair; let them be honest about it and let them recognize that they leave us no other choice but to deal with them as we would with any other trade union." I said, "Now let the doctors be honest with themselves and with the public. Do they wish to join the plan or not? They can't have it both ways. Some doctors are saying that they want nothing to do with the plan; they do not wish to deal with the government. They must at all costs protect their patient-doctor relation, their professional standing; they must make sure that the government should not control the medical profession. Well this is fair enough, so we give them the choice of opting out. Doctors, if you opt out, you will not be punished and will operate under the free enterprise system like members of the other professions do, like those in other fields do. No one will fix your fees. We will place no one between you and your patients." I said, "Are you in or out? You must decide yourself."

Mr. Speaker, I said earlier that I had no objection to seeing doctors opting out, that we should not punish them. I could quote, but it is very clear that it was exactly the opposite as the Honourable Leader of the New Democratic Party would have the House believe that I said.

MR. CHERNIACK: Mr. Speaker, I wonder if just for the records I could indicate that the Honourable Leader of our Party is not present and therefore has not heard what was said, but certainly he will have an opportunity to read it in Hansard and I presume he will have the right to make a comment, just as did the Honourable Member for St. Boniface.

MR. SPEAKER: The Honourable Member for Inkster.

MR. SIDNEY GREEN (Inkster): Mr. Speaker, I have a question to direct to the Honourable the Minister of Consumer Affairs. My question relates, Mr. Speaker, to an incident which occurred some weeks ago where a young girl had serious burns to her face as a result of her bonnet catching fire, and I wonder whether the Minister is aware of this. It is indicated in the news item that I have that there was to be a reference to the public health department. Is the Minister aware of this? Is he able to tell us whether the product has in fact been examined, and is he able to satisfy the public that other such products will not be on the market where this danger exists, or is he able to do anything in this connection?

HON. J. B. CARROLL (Minister of Consumer and Corporate Affairs, and Minister of Tourism and Recreation) (The Pas): Mr. Speaker, I will be glad to take the question as notice. I would like to point out, however, that the federal government have before them at the present time a Bill respecting hazardous substances which does include the question of fire-dangerous substances. I would presume that this is likely within their area of jurisdiction, but I would be glad to look into it on behalf of my friend.

MR. GREEN: Mr. Speaker, I am aware that the federal government is looking into the matter as well, but I think from the point of view of the present danger, I am sure that without legislation a lot of the retailers who might have these products, unknowing that they are dangerous, would be happy to not cause a hazard by taking them off the shelves if the Minister

(MR. GREEN cont'd) . . . would use his good offices in this connection.

MR. T. P. HILLHOUSE Q.C. (Selkirk): Mr. Speaker, on Tuesday the 25th instant, when I was temporarily absent from the House, the Honourable Minister of Municipal Affairs answered a question regarding the Tartan Brewery and the Metropolitan Corporation of Greater Winnipeg which I had previously asked him, and the question was whether or no he had received from the Metropolitan Corporation of Greater Winnipeg any correspondence or any communication whatsoever regarding Tartan's brewery. The answer which he gave on the 25th instant was "yes." I now wish to ask the Honourable Minister whether he is prepared, if the communication were in writing, to table that communication in the House so that the members will have an opportunity of seeing it.

HON. OBIE BAIZLEY (Minister of Municipal Affairs, and Commissioner of Northern Affairs) (Osborne): Yes, Mr. Speaker.

MR. SPEAKER: The Honourable Member for Elmwood.

MR. RUSSELL DOERN (Elmwood): Mr. Speaker, I would like to direct a question to the First Minister. According to one report the TED Commission will report on April 2nd. I wonder if the First Minister could indicate whether or not this is true; or secondly, when we will have that final report.

HON. WALTER WEIR (Premier) (Minnedosa): Mr. Speaker, I can't say definitely but I expect it next week.

MR. SPEAKER: The Honourable Member for Burrows.

MR. BEN HANUSCHAK (Burrows): Mr. Speaker, I note that the Portage Indian Student Residents Glee Club has been invited to appear in California on April 3rd. This is a singing group which has represented Manitoba and Canada on previous occasions but they are about \$2,000 short of being able to make the trip. I wish to direct my question to the Honourable the Minister of Tourism and Recreation, to whom I believe the Arts Council is responsible. Would he be able to find funds within the grant allocated to the Arts Council to assist this group to make this very worthwhile trip?

MR. CARROLL: I would be very glad, Mr. Speaker, to refer this matter to the Manitoba Arts Council for their consideration.

MR. SPEAKER: The Honourable Member for St. John's -- a supplementary on the same subject?

MR. CHERNIACK: If I may, Mr. Speaker, could I ask the Minister whether the Arts Council actually has a budget from which it can make such grants?

MR. CARROLL: Mr. Speaker, they will have the budget available to them within a matter of days. They will have an appropriation available to them and I would think they could consider this if they felt that this was the kind of organization they should be supporting with grants.

MR. CHERNIACK: One further question, if I may, Mr. Speaker. Could the Honourable Minister indicate the portion of the estimates where that grant would be shown so that we could find it.

MR. CARROLL: It was considered last week, Mr. Speaker, in the Department of Tourism and Recreation Estimates under the final item, I believe, in the Tourism and Recreation vote. "Grants," I believe was the title.

MR. SPEAKER: The Honourable Member for St. Boniface.

MR. DESJARDINS: Mr. Speaker, I would like to ask a question of the Honourable the Minister of Health. Now the regulation that we have received just now that was placed on our desks, it's got the heading March 29, 1969, Manitoba Gazette. Has that actually gone out already and this will appear this week in the Gazette? Is that the same copy that we are receiving?

HON. GEORGE JOHNSON (Minister of Health and Social Services) (Gimli): Yes, Mr. Speaker. Maybe I should just inform the members that I wanted to get before them those regulations which are possible to pass under existing Acts. There are in Bill 33 two provisions of law that must be -- this will appear in the next Gazette. Yes, I believe it goes out on Saturday. I thought you should have them as soon as they were off the press, but there are two more regulations required if Bill 33 goes through.

MR. DESJARDINS: We are certainly very pleased to receive this information but doesn't the Minister think that this is quite irregular? I mean -- why are we having this meeting tomorrow, this law committee tomorrow? We have served notice that we will bring in some

(MR. DESJARDINS cont'd) . . . amendments and the Minister says this is definitely going out next Saturday. Isn't this making a mockery of this?

MR. JOHNSON: No, I think it's a misunderstanding, Mr. Speaker. What I am saying to the members of the House is that the amendments in the present Act that is before the House will necessitate further regulations depending on the passage of that Bill, which are excluded in these regulations. Do you understand?

MR. DESJARDINS: Mr. Speaker . . .

MR. SPEAKER: I wonder if this isn't developing into a debate. The matter of the Bill is still before the House and I wonder if there wouldn't be another time to discuss the matters that are bothering the Honourable Member for St. Boniface at the moment. Possibly he has another. . . .

MR. DESJARDINS: Yes, Mr. Speaker, this is exactly my point. I don't want this meeting tomorrow or Saturday to be a mockery. I see here on Page 129 that the premiums are set up, and I certainly have served notice that I will bring in an amendment on this. To me, this seems to be a mockery, tomorrow and the next day. I disagree with the Minister. All that has still to be decided has not been left out. He's got the premiums and so on and I think that this is assuming quite a bit. If this is the action of the government, if they're just going to steam-roll this, this is fine, but I find this to be a mockery.

MR. JOHNSON: The premiums were announced last September under the present provisions of the Act for which we have authority to act.

MR. DESJARDINS: The new members had something to say on that and I think it should be put in the record

MR. SPEAKER: I noticed the Honourable Member for Rhineland wishing to take the floor.

MR. JACOB M. FROESE (Rhineland): Mr. Speaker, I'd like to direct a question to the Honourable the Minister of Finance because this deals with the finances, so I take it it would concern his department. I note from the Globe and Mail that the Saskatchewan Legislature yesterday gave third reading to a Bill to rebate the province's 75 percent share of the federal estate tax. When can we expect legislation in this province in this regard and will it be similar to this?

HON. GURNEY EVANS (Minister of Finance) (Fort Rouge): Mr. Speaker, reference was made in the Speech from the Throne to action in this field. I may make some further reference to it in the Budget Address. Any legislative action that is to follow will follow very shortly, and at this stage I'm not at liberty to describe the contents of the Bill.

MR. SPEAKER: The Honourable Member for Inkster.

MR. GREEN: Mr. Speaker, relative to the last question, I wonder whether the Minister would be able to have for the members of the House, before the legislation comes in, the number of estates - and of course I can't get the names of the estates - the number of estates that would have been affected in 1967, and the amounts that would have been relieved to each particular estate.

MR. EVANS: Mr. Speaker, I would have no objection to providing that information. I'm not aware that it's available; I haven't got it. I would like to have it myself. If I'm able to get it, I'll gladly share it with the members of the House.

MR. GREEN: I would think that it would be available from the collection authority, which would be the federal government, but if the members had that, it would certainly facilitate intelligent debate.

MR. SPEAKER: The Honourable Leader of the Opposition.

MR. GILDAS MOLGAT (Leader of the Opposition) (Ste. Rose): Mr. Speaker, I'd like to ask a supplementary question of the First Minister regarding the TED Commission report. Could the Minister advise the House whether or not the report has been printed as yet?

MR. WEIR: Mr. Speaker, I know that it's been at the printer's. Now whether it's completed or not, I really can't say.

MR. SPEAKER: The Honourable Minister of Mines and Natural Resources.

MR. ENNS: Mr. Speaker, I wonder if I can just amplify a further statement having to do with these sandbags and correct the sale date. The bags were publicly tendered and sold in July of 1967. It was known that these bags, as I mentioned, when returned to stock had received some moisture and were in a state that we knew deterioration was setting in, and it was in an attempt to salvage the same that these bags were sold.

MR. GUTTORMSON: Mr. Speaker, the Minister said the bags were sold in July of 1967. Am I to understand that no sandbags have been sold since that time?

MR. SPEAKER: The Honourable Member for Seven Oaks.

MR. SAUL MILLER (Seven Oaks): Mr. Speaker, I would like to address a question to the Minister of Municipal Affairs. Now that the Committee on Municipal Affairs has been established, I'm wondering whether the Minister is intending that the committee meet in order to complete the work on the revisions to the Municipal Act.

MR. BAIZLEY: Yes, Mr. Speaker.

MR. MILLER: A supplementary question. Before the session ends?

MR. BAIZLEY: Hopefully, Mr. Speaker.

MR. SPEAKER: The Honourable Minister of Transportation.

HON. STEWART E. McLEAN Q. C. (Minister of Transportation) (Dauphin): Mr. Speaker, on Monday, March 24, 1969, at the 2:30 sitting, the Honourable the Member for Burrows and the Honourable the Member for Inkster asked questions relating to the Winnipeg Airport facilities with respect to larger aircraft. I undertook to see what information I could get and I now give the information, which I am anxious to indicate of course is information given to us. This is not within our jurisdiction. The information we have received is that, with only minor adjustments and upgrading, it will be possible for the Winnipeg International Airport to handle the larger aircraft such as the Boeing 747.

The second point dealt with supersonic aircraft, and the information we have is that while supersonic aircraft are a long way away, they will not be larger than the Boeing 747 so that no problems are anticipated.

MR. SPEAKER: The Honourable Member for St. George.

MR. GUTTORMSON: Mr. Speaker, I have another question I'd like to direct to the Minister of Mines and Natural Resources. When he gave the answer with respect to the sandbags, he told us that 72,500 had been sold at nine and a quarter cents to Inkster Supply. Could he tell us who the 100,000 were sold to and were they sold prior to this date?

MR. ENNS: My information is that the same firm purchased the further sale of bags.

MR. SPEAKER: The Honourable Minister of Government Services.

HON. THELMA FORBES (Minister of Government Services) (Cypress): Yesterday, I think it was, the Honourable Member for Gladstone directed a question to the Provincial Secretary regarding whether the regional libraries were receiving a free copy of Hansard. The Honourable Minister of Consumer and Corporate Affairs took the question. I would like to answer him. Some time ago, I believe about eight or nine years ago, the Provincial Secretary of that day suggested and ordered that our own Provincial Library, and the Library of the House of Commons, would be on the free list, and since then of course, Mr. Speaker, we know that many regional libraries have sprung up through this province. I'm willing to give consideration to these regional libraries being added to the list, so that I assure the honourable member I shall look into it.

MR. SPEAKER: The Honourable Member for Gladstone.

MR. NELSON SHOEMAKER (Gladstone): Mr. Speaker, I want to thank my honourable friend for that comment, and I think the idea is a good one. I would urge her to place all regional libraries on the mailing list so that this session's Hansard will be available to them.

And, Mr. Speaker, when I'm on my feet, I would like to ask a question of the Honourable the Minister of Tourism and Recreation. A Return to an Order of the House dated April 1, 1968, dealing with the amount of money paid directly to Dalton Camp and Associates for tourist advertising on behalf of the Manitoba Government, was tabled in the House yesterday. It showed that \$1,144,679.44 was paid to the Camp Agencies between March 31, 1960 and March 31, 1967. The question: Can the Minister of Tourism and Recreation advise the House whether this was the only agency through which tourist advertising was placed in this period? If not, can he advise what other agencies were involved and how much advertising was placed through them? And can he inform the House whether it is time that the government no longer places advertisements -- (Interjection) -- I have three questions.

MR. SPEAKER: I believe the honourable gentleman finished his question, did he not? I didn't wish to interrupt him but I know he's coming to a close.

MR. SHOEMAKER: I have one more.

MR. SPEAKER: Well, probably he'd like to complete it.

MR. SHOEMAKER: I understand I am entitled to three questions, am I not? I've asked

(MR. SHOEMAKER cont'd) . . . two. Can he advise the House what agency the government now deals with for tourist advertising?

MR. CARROLL: Mr. Speaker, my understanding is that the only money spent for tourism promotion was spent through the Dalton Camp Agencies. I hasten to add that really Dalton Camp Agencies don't get all of this money. This is the money that goes to the various media for payment with respect to the ads that are placed there, from which they get a commission for placing the ads. There has been a change in agency since the House last met. The new agency is McConnell Eastman.

MR. SPEAKER: The Honourable Member for St. John's.

MR. CHERNIACK: Mr. Speaker, in the absence of the Honourable the House Leader, may I address a question to the First Minister? On or about March 5th the House adopted the Report of the Committee on Professional Societies which included a request that the committee be reconstituted. On March 12th the Honourable the House Leader indicated that at that time he was not aware as to which Minister would be responsible for bringing in a resolution establishing the committee. Could the Honourable the First Minister now indicate which Minister is responsible for that purpose?

MR. WEIR: Mr. Speaker, I'll take the question as notice on behalf of the House Leader. He may have made some arrangements that I'm not aware of.

MR. SPEAKER: The Honourable Leader of the Opposition.

MR. MOLGAT: Mr. Speaker, I'd like to address a question to the Minister of Mines and Natural Resources. Could he tell the House when we might expect copies of the transcript of the hearings on the South Indian Lake flooding question, which I understood he said would be available to at least the Parties in the House.

MR. ENNS: Mr. Speaker, I would hope to have these available for distribution tomorrow.

MR. SPEAKER: The Honourable Member for Hamiota.

MR. EARL DAWSON (Hamiota): Mr. Speaker, my question is directed to the Minister of Industry and Commerce, but in his absence I would direct it to the Honourable Provincial Treasurer. Is the government contemplating giving financial grants to industry locating in Manitoba?

MR. EVANS: If any announcement is to be made on government policy, it will be made in due course.

MR. DAWSON: I'm asking, Sir, because I know of an industry wishing to locate. If I could have a yes or no?

MR. EVANS: If my honourable friend has information which will aid in assisting industries to locate in Manitoba, it's his duty to report it to the Minister of Industry and Commerce.

MR. SPEAKER: The Honourable Member for Rhineland.

MR. FROESE: Mr. Speaker, I'd like to address a question to the Minister of Youth and Education. Yesterday I asked a question of the Honourable the Minister of Health and he referred the question back, and I would like to ask the Honourable Minister of Education whether the matter of technical-vocational schools and the construction of them will be put under the jurisdiction of the Public Schools Finance Board?

HON. DONALD W. CRAIK (Minister of Youth and Education) (St. Vital): Mr. Speaker, I had this question handed on to me. The development of composite schools or technical-vocational schools will call for their direct administration coming under the unitary division in which they are located. That has taken place in the case of the three schools which are either now on the drawing boards or being planned, and they also, particularly in the one located in the Metro Winnipeg area, an advisory board of six divisions has been formed to assist the operating division.

MR. SPEAKER: The Honourable Member for Gladstone.

MR. SHOEMAKER: Mr. Speaker, the other day in the House the Minister of Agriculture enunciated government policy to assist certain farmers along the Red River whose grain could be flooded out, that is grain in granaries that could be flooded out if the Red River reached a certain crest. Now the question is, will he extend that policy to areas along the Whitemud River, or the Assiniboine River, if they are in the same danger? Now I'm prompted to ask this question by reason of a letter I have just now received from a director of the UGG. It's a very short letter and I would like to read it to point up the seriousness of the situation there. He terms it disastrous, or could be disastrous, so I just want to know whether my honourable

(MR. SHOEMAKER cont'd) . . . friend would consider offering to the people along the Assiniboine River or the Whitemud River, or any other river, the same type of program that he offered to the farmers in the Red River Valley.

HON. J. DOUGLAS WATT (Minister of Agriculture) (Arthur): Mr. Speaker, insofar as government assistance is concerned to these people, I think we would be prepared to offer the assistance insofar as grain storage is concerned or material to store grain temporarily. So far as the extension of the quota to the six bushel area, that would be the responsibility of the Canadian Wheat Board, not the Manitoba Government.

MR. SHOEMAKER: A supplementary question, Mr. Speaker. This letter, in particular, requests grain cars to get rid of grain that might presently be in danger of being flooded out, so will my honourable friend then use his influence on the Canadian Wheat Board to see that they do receive special quotas? I think that's the term.

MR. WATT: I've already discussed this with the Canadian Wheat Board, Mr. Speaker.

MR. SPEAKER: The Honourable Minister of Education.

MR. CRAIK: Mr. Speaker, before the Orders of the Day, I would like to lay on the table of the House copies of a final plan for the development of the educational system for the Province of Manitoba Interlake region by the Local Government Boundaries Commission. I would add that there's a very limited supply of these, Mr. Speaker, and I was intending not to table it until we had the full supply; I understand that they will probably be here sometime next week. I think there's only three copies here, so we could perhaps make one available to the respective whips of the parties, and I would hope that next week that we are able to add additional copies for all members.

MR. SPEAKER: The Honourable Member for Churchill.

MR. JOE BOROWSKI (Churchill): Mr. Speaker, I have a question for the Minister of Mines and Natural Resources. I've been in touch with people in the north, Mr. Speaker, and I'm told that there's some work being done on Missi Falls. I wonder if the Minister could clarify this in view of the fact that a flooding licence has not been granted yet.

MR. ENNS: Exploratory work, Mr. Speaker, has been going on for -- I'm given to understand -- well over a year in that area.

#### ORDERS OF THE DAY - MOTIONS FOR PAPERS

MR. SPEAKER: Orders for Return. The Honourable Member for Seven Oaks.

MR. MILLER: Mr. Speaker, I hoped to be able to speak on this. I wonder if it could be laid over to Private Members' Day?

#### GOVERNMENT BILLS

MR. SPEAKER: The adjourned debate on second reading of the proposed motion of the Honourable the Minister of Health and Social Services. The Honourable Member for Gladstone.

MR. SHOEMAKER: Mr. Speaker, I don't intend to take up but little time of the House this afternoon because so much has been said on this subject matter that it seems there is little left to say. But quite apart from the problem that our friend the Minister has, and indeed the people of Manitoba, with the doctors opting in and opting out, it seems to me that the public are asking two or three very vital questions. One, they are concerned about the total over-all cost of the plan, because I'm confident the Minister told the House the other day that it would be in the neighborhood of 55 million. And then they are concerned that the premiums are high in light of the federal contribution. They are concerned, too, that the ability-to-pay feature was apparently not considered when the premiums were set, and I'm getting this first hand from the patients, because last Sunday afternoon I spent an hour with several patients in the Neepawa Hospital and a week ago Sunday I spent an hour or two with several patients in the Neepawa Hospital, and the patients were asking me -- naturally they want to know what's going to happen to them and their pocket book on April 1st -- and these are the questions that seem to be uppermost in their mind.

Now, on the first question, that is the over-all cost of 55 million, it strikes me that this is an immense sum in consideration of what we were told by the Minister of Health two years ago this week. The Minister immediately to your left was then Minister. We were told in the

(MR. SHOEMAKER cont'd) . . . House, and a propaganda sheet was issued March 17, 1967 -- and I've checked with Hansard and this propaganda sheet was pretty nearly word for word what was said in the Hansard of that day -- and it is headed: "Home-Office-Hospital Medical Service Plan -- Prepaid Insurance Program Slated for July 1, 1968. A Manitoba medical insurance program that will provide medical services at home, doctor's office or hospital, and which is scheduled to go into effect July 1, 1968, was outlined Thursday by Health Minister C. H. Witney." He goes on to say that the planned program will provide the equivalent of the HCX plan of the Manitoba Medical Service -- goes into more detail -- and in the third paragraph from the bottom, the fifth paragraph from the top, I quote: "The plan is expected to cost \$35 million a year at the outset. Some 17 million will be recoverable from Ottawa, and the other half of the total cost will be raised by premiums. The province would pay the premiums for those most in need."

Now it's evident then that the estimated cost, because nobody knows what the actual cost will be, but it is estimated that the cost then has gone up to 20 million in two years before it got started. Now, I just said -- my honourable friend the member for Lakeside has asked where did I get those figures -- from my dear friend the Minister of Labour. Now if it's gone up 20 million in two years before it got started, where will it be in two years hence? That's what makes each and every one of us stop and think.

Now, Mr. Speaker, I did a little phoning today over to the Manitoba Medical Service office to get some information and I had great difficulty in reaching the comptroller, but I eventually got him and I was able to get some valuable information from him in addition to the balance sheet -- certain figures from the balance sheet for the 31st of December, 1968, that appeared in both our daily papers last Saturday -- and as I calculate the figures here, I can't understand why the premium had to be set at the figure that it has been set, according to the regulations that were put on our desks a few moments ago, because I was told that approximately 60 percent of the people in Manitoba are presently covered under MMS.

Well that story is not new, Mr. Speaker, because the former Premier kept telling us for five or six or seven years in a row that it appeared that about 60 percent of Manitoba was now covered by MMS, and he said that about 10 percent were covered by various other private plans, and he said that that left about 30 percent that were not covered at all. And Mr. Roblin used to say, with crocodile tears in his eyes, as I remember it, not only in the House but prior to elections, that the reason the other 30 percent were not covered was simply because they could not afford to pay premiums. That's what he said.

Well now, according to the last financial statement of MMS, 60 percent of the people -- or roughly 600,000 people with 200,000 contracts, because there are about three people covered under each contract on an average -- they paid to MMS last year nearly \$27 million according to the balance sheet. They paid \$26,874,182. Now if all of the people were covered under MMS, then the question is how much would they pay, so, Mr. Speaker, I just took ten over six times that figure and you arrive at a figure of about \$45 million if they were all covered under MMS.

Now the Minister has said that he's only going to ask the people to pay 29 million by way of premiums. Well, it just doesn't seem to add up. It looks as if the premiums that -- that is if we were all going to pay premiums, it looks as if it would raise something like 45 million, because there's not too much difference in the premium that we're going to have to pay and the premium that we have been paying -- not too much difference.

Now I have -- well, I guess the last notice that went out from MMS dated November 1, 1968 -- I think that would be the last one to these subscribers that paid semi-annually -- and this one, just for the record, Mr. Speaker, is Contract No. 354452, the insured person is James Young, Eden, Manitoba, and for the family plan under HCX was \$11.00 a month -- November 1, 1968 -- he was under the Eden Community Group. Now he is in receipt of a bill for the new Medicare program of \$9.80, or just \$1.20 a month less than he was paying under MMS. Immediately he asks the question, well in light of the fact that the federal government are paying half of the shot, why is my premium nearly the same now as it was under MMS? He can not understand it; not only can he not understand it, but a lot of other people can't understand it. Now since the former Minister of Health made his statement in respect to 35 million as being the cost two years ago, he said then that the federal government was paying 17 million; now my honourable friend the present Minister of Health said the federal government's going to pay 26 million, so the federal government are now paying nine million more

(MR. SHOEMAKER cont'd) ... and the public are paying just about the same premium according to this.

Another thing that appears to me to be evident, in light of what I have already said, is that it would appear that if 100 percent of the people were paying premiums on the basis that they were paying premiums to MMS it would raise 45 million, then it appears to me, on the surface anyway, that between 30 and 40 percent of the people are going to be exempt from paying premiums and the premiums for the rest of us who have to pay premiums were based on the total cost. That's what it appears to me on the surface, and surely I'm not correct in that assumption, but it appears that way. So I hope my honourable friend will be able to put us straight on that.

Now I would like to know what contribution the province does expect to pay from out of the Consolidated Fund towards the operation of the plan. -- (Interjection) -- "Nothing," my honourable friend says. Well, that's what I am saying, it doesn't appear that they're going to pay anything. If my figures are correct, it appears that the premium payers are going to pay it.

A MEMBER: Surely you're wrong.

MR. SHOEMAKER: Well, I don't know, but all of my calculations point towards this, that 70 percent of the people will pay premiums in excess of 29 million. -- (Interjection) -- Well, it looks like it to me.

Now in light of what my honourable friend the former Premier has said, and in light of what the former Minister of Health said and in light of what the present Premier has consistently said about how sorry he feels for the 30 percent of the people who apparently cannot afford to pay premiums, then why in the world did they not introduce some ability-to-pay feature into their premium program if in fact they insisted on having premiums. You know, Mr. Speaker, there was a time not long ago when the present Premier said that he was going to introduce a no-premium Medicare plan. You remember the propaganda sheet that went out announcing that policy? That propaganda sheet went out on August 23, 1968, and it's headed: "No Premium Proposal Rejected by Ottawa." It says here that the Manitoba Premier went down there and he said, "I'll tell you what I'm going to do, I'm going to introduce a plan in Manitoba with no premiums at all if you'll go along with it." -- (Interjection) -- That's what they said. Well, is it a fact that this was the original intent of the government to have a no-premium plan, and is it also a fact that the reason we do not have a no-premium plan is because Ottawa wouldn't go along with it? I'd like to have the answer to that.

And so, Mr. -- (Interjection) -- I don't know. Isn't it a fact that some of the provinces now have implemented a no-premium -- or have they all got premiums? Well anyway, Mr. Speaker, as I said, I do not intend to take up any more time of the House, but I would like to certainly have some answers to some of the questions that I have posed this afternoon.

Another thing that does concern me a little bit about the care, that is the program and the premiums too, is that it strikes me that there will not be too many people exempt from premiums if we strictly apply this exemption form that is used by the Old Age Assistance and Blind Persons Allowances Board. There won't be too many exempt if we apply that rigidly, because it is a pretty rigid kind of a test.

Another problem that I see, being a subscriber, I am a subscriber of MMS and a subscriber of United Health, their subsidiary -- are they not a subsidiary -- is that on TV, radio and all news media, they are spending a terrific amount of money on introducing this Mediplus. I have received their brochure on it setting out what it covers and the premium cost, and it looks pretty good for 55 cents.

MR. SPEAKER: I don't think that Mediplus should be discussed at this particular time; we are really dealing with Bill No. 33. I wonder if the honourable gentleman would act accordingly.

MR. SHOEMAKER: But, Mr. Speaker, this Mediplus, according to MMS or the people that operate United Health Insurance Corporation, they're saying "Beware of Medicare, it doesn't cover as much as you thought it did and we're..."

MR. SPEAKER: I would ask the honourable gentleman to -- I know he realizes that he's entirely out of order in discussing that matter at this particular time.

MR. MOLGAT: Mr. Speaker, I hesitate to enter, but on a point of order, surely the honourable member is entitled to discuss the coverage which the Bill provides, and I think the point he's trying to make is that the Bill doesn't go far enough. Now I don't think he wants to

(MR. MOLGAT cont'd) . . . discuss Mediplus per se, but what he's trying to get at is that he doesn't feel that my honourable friend's plan is either going far enough for the price that he is charging and that therefore this is an example. It seems to me, Mr. Speaker, that as long as he doesn't try to sell that clause at this stage, that if he's referring to the fact that the Bill is -- I think he would be in order.

MR. SPEAKER: I appreciate the opinion of the Honourable the Leader of the Opposition. My purpose is simply to keep the discussion within bounds. I am sure it is the wishes of the House to do so, and Mediplus has nothing at all to do with Bill 33 as I see it.

MR. SHOEMAKER: Thanks very much. I'm just about through anyway, and I know that doesn't entitle me to get off base just because I am nearly through, but the government -- and this certainly has to do with Medicare -- the government has inserted that ad in every daily paper and every weekly paper and every semi-weekly paper in the Province of Manitoba. And what does it say? It says, "Your Government Sponsored Manitoba Medical Plan - How it Affects You." And it proceeds then to set out the exclusions right there, right in the middle in block letters it proceeds to set out the exclusions. Mediplus says we'll cover them.

MR. SPEAKER: If the honourable gentleman wishes to discuss Mediplus, I am sure that can be discussed on another occasion. I believe we should stay with Bill 33 today, and that is my opinion.

MR. SHOEMAKER: Well, Mr. Speaker, I will conclude by saying this; as much as I want to, I cannot buy Mediplus. You know why? They won't sell it to any group less than ten. Now they are spending a lot of money telling us how bad we need it and then they are saying we can't sell it to you. So I believe my honourable friend should look into this, that is if it is a fact that my honourable friend admits there are exclusions under Medicare that should be covered, because he must be saying that when he developed this ad. He is warning the public that there are exclusions under the Bill and under the coverage and you had better get prepared for them. I want to get prepared for them and I can't buy the coverage. So what do you think about that?

So, Mr. Speaker, as I said, I am going to sit down now and expect a full and comprehensive answer to the questions that I have put forward this afternoon.

MR. SPEAKER: The Honourable Member for St. John's.

MR. CHERNIACK: Mr. Speaker, we went through a great deal of debate on the Medicare Bill back in 1967 when we all spoke on the matter and in the main supported it. We supported the Bill, we supported the principles, and we were pleased that we were going ahead with this program. It was hard-debated at that time; I can't say hard-fought because so many of the people, who appeared to speak against it, in the end voted for it. Our only complaint then, as now, is that the government was so slow in proceeding with this work, and we felt that much could have been done until now to get this plan working for the benefit of the people of Manitoba. Now we are presented with a Bill which has in it certain features that are necessary to clean it up and patch it up, as the thinking about it and the planning indicated.

There are, of course, two important matters with which we are concerned. One is the matter of the charging of premiums, about which our Party has spoken and which I don't propose to repeat except to indicate that the charging of premiums, which is a flat rate tax on all citizens, with certain exceptions, is not according to ability-to-pay and is wrong.

The other one is the question of assignments, Mr. Speaker. I credit the Minister for giving us ample warning in his opening statement, his draft remarks on the introduction of this Bill for second reading. I give him credit for bringing it clearly to the attention of members of the Legislature and the public that the government does reserve the right to agree to assignments, to permit assignments in the case of opted out doctors, and he mentions that an important amendment here is to give the Lieutenant-Governor-in-Council power to make regulations respecting assignments of monies to practitioners who have opted out. And he says that it is the intention of the government to recommend a certain type of assignment -- and before he even mentioned that I had occasion to ask about it and indicated that I approved of the principle involved in recognizing this service which has to be maintained for the benefit of all people involved in research and teaching of medicine -- but he then says it is not the intention of the government to recommend any other provisions respecting assignment at the present time, and points out that there is a possibility that the government may yet permit assignments, and he says, "to make the plan work in the public interest and to consider further arrangements."

(MR. CHERNIACK cont'd) . . .

That is the point which I think the Minister ought to deal with to a larger extent, because we are entitled to know that if he and the Cabinet wishes to reserve the right to make important decisions in between sessions, or indeed at any time, by Order-in-Council, we should know what the thinking of the Minister and of the Cabinet is, and we should know how they now consider the situation in regard to the doctors who have opted out and their demand for the recognition of assignment. We are entitled to know. He has been dealing with the doctors, I suppose individually and collectively, discussing their demands and their requirements, and we are entitled to know just what is the thinking and what is the argument.

As I understand it, the doctors who have opted out, and I give them the right to opt out -- I may have my opinion as to whether or not they should, both in their interests and insofar as the interests of the people, their patients is concerned, but they were given the right and they have the right and I don't question their right to do it -- but the reasoning given for their opting out is something that we are entitled to study in order to evaluate in the light of the Minister's desire to give them the opportunity to have assignments of monies direct to them. The reasons that I have read in the press and that I have heard mentioned by doctors, friends of mine, amongst whom there are those who have opted in and those who have opted out - they are no less friends of mine although I don't have to respect their judgment in this respect; I don't question their judgment in medical matters -- is that they want to maintain a direct relationship with their patients which would be destroyed apparently through this procedure, which to me is complete and utter nonsense. And I say that now because I cannot conceive that the passing of money from hand to hand gives a better relationship between doctor and patient than does the passing of good medical advice and treatment, and certainly I think that the need to pass money from one hand to the other might even endanger a complete feeling for the patient to ask for services and for the doctor to recommend services which he may believe are too costly for the patient to take, and therefore it just doesn't make sense that a financial relationship will improve the medical services which are offered by the doctor.

So what other relationship does the doctor want to maintain by opting out? Well the suggestion has been made that the fear of an extra charge might be one which will deter the patient, and if that were so, then obviously it will only deter the patient who can't afford to pay the extra charge. The patient to whom the extra charge is minimal -- and I now compare it with Saskatchewan -- the patient to whom the deterrent means very little will not be deterred; the patient to whom the deterrent fee -- or the extra billing in our case -- is a meaningful sum of money will be deterred, but that's not the patient you want to deter. That patient, in addition to everything else, is usually a person who is a working man who can't afford to take time off just to be frivolous in the abuse of the rights that he might have in asking for services which he might not need. So I feel it is only right to point out that the deterrent, if deterrent it is -- we are not talking about a deterrent fee but an extra billing -- is only one that acts against those who can least afford to pay and who may well be the ones who are in the greatest need.

Then the doctors say -- some do -- well, we don't want to come under government control. I would like the Minister to clarify for us, and I hope that the people in Manitoba can get this clarification from the Minister today, as to just what this control can mean, whether you are opted in or opted out. As I read the Act which we passed a couple of years ago, I see that the Lieutenant-Governor-in-Council may approve of the corporation entering into an agreement to establish a medical review committee, and that committee has certain powers. And I ask the Minister now, has he got a medical review committee? Is it established? Who's on it? Because as I can read the Act, we can't have an ongoing working mechanism within the corporation without a medical review committee which must review the billings that come in.

To the extent that doctors fear this kind of "control", then they have been subject to this in all their MMS dealings where profiles are kept; where doctors are presumably checked on abuse, on over-use; where patients are also checked on use, abuse, over-use; and to that extent there was control under the MMS which was acceptable, not to all doctors because we know of instances of doctors who have kicked considerably at the thought that some other body, consisting of doctors and others or maybe only of doctors, is looking into the services they offer in order to decide whether or not they have earned the right to payment. Well then I ask the Minister in closing debate to clarify what's the situation of the medical review committee; and then I ask him to confirm his answer to a question that was asked of him recently as to

(MR. CHERNIACK cont'd) . . . whether only opted in doctors will have their accounts reviewed, and his answer was "no, not only opted in doctors."

As I read the Act that was passed two years ago, I find that the medical review committee is entitled to obtain information from medical practitioners, and under the definition it includes all medical practitioners, and this is obvious, because if I as a patient of an opted out doctor send in a bill to the corporation and say pay me 85 percent, then surely the corporation has to make sure that this payment is made in accordance with the concept of the plan. Whether the doctor has opted in or out, it still means that the payment by the corporation must be in line with principles established. So that it means now that the opted out doctor, who says I want nothing to do with government, I don't even want the assignment -- assuming he says it, I haven't heard him say it but there must be some who say I don't want the assignment -- he still has to submit to a review of his work, because it is conceivable that out of the number of doctors we have in Manitoba, seven or eight hundred, maybe one of them is going to be not careful in his billing and maybe, for all we know, he will be making mistakes and thus showing extra attendances than actually occurred, and surely somebody should be able to check him up and say, did you really see Mr. A. both on the 1, 2, 3 and 4th of whatever month we are involved in. So his records have to be checked just like all of us have to submit our records to review by those who have the authority to do. So it is clear, not only from what the Minister said but from reading the Act itself, all doctors will be subject to having their records reviewed by the corporation's representative. I think that's correct. I think it should go on record that the doctor who opts out is still subject to this kind of review, and I think the Minister ought to confirm that this is necessary in order to pay to the patient the 85 percent to which he is entitled to according to the schedule.

As a matter of fact -- and incidentally, Mr. Speaker, might I warn those who have not yet looked through the regulations which have appeared on our desks today, that as they leaf through it and read it, they will suddenly discover that no person shall hunt, take or kill black bear for sport unless he has a licence, so I just tell them to be careful and make sure that they know that regulation as well as the others. However, that's just in passing.

In the regulations before us we find that "notwithstanding that a medical practitioner has made an election which is in effect under subsection (1) of 41" -- which is the opting out section -- "he shall furnish an insured person" -- and we are just about all insured persons in the province -- "with the necessary information on a claim form prescribed by the corporation to enable the insured person to submit his claim." So there again we are telling the doctor you have got to put in a billing and you have got to put it on the form prescribed by us. The next subsection that I'm reading from reads, "the payment to which the insured person is entitled shall not exceed the amount that would be payable to a medical practitioner under the plan." So again there is going to be a check. This then means that all these things that I hear about that the doctors are objecting to in the plan and which drives them to opt out doesn't really help because they are still under supervision; they still have to supply information; they are still subject to review; and I have already discounted what I think is their argument about direct dealing as being something of value.

Mr. Speaker, without the assistance of the Minister, I find it so very difficult to understand the argument of the opting out doctor except for two things, and unfortunately they both relate to money. One is the right of the doctor to charge more than the amount set in the schedule, and I don't question his legal right so to do. I'm not even sure that I question the moral right if a patient comes to him and says I want your services, and the doctor says I charge double whatever the rate is or triple - do you still want my services? If the patient says yes, then there is a contract.

But the doctors who are saying we want the right to charge extra or to charge as much as we like, I recognize their right so to do. They will of course have to prepare a billing on the form of the corporation in order that the patient should be able to collect the 85 percent of the scheduled rate, but that's no great imposition on the doctor, I feel, and that's O.K. But the doctor who says I'm going to charge according to the rate schedule -- and I don't believe he's tied to that rate schedule, I don't believe that the Physicians and Surgeons Association has the power to control the amount of the charge by the doctors except in a mediatory way by calling them in and appealing to their good sense, but maybe they have a right to control it. That's another story.

But the doctor apparently who speaks openly says, I want the right to charge an extra

(MR. CHERNIACK cont'd) . . . 15 percent; why should I take 85 percent of what I think is right? And incidentally, it's not 85 percent of what he is entitled to get; it's 85 percent of some tariff that has been established by the Medical Association and it is a tariff which apparently the government is accepting to the extent of 85 percent thereof. But the doctor in any event says, I am entitled to 100 percent of that tariff; I want the extra 15 percent. And having opted out I think he has the right to make his full charge.

But then the doctor comes back -- maybe not all of them, but I'm speaking of the opted out doctors -- and he says, No, I'd rather pick and choose; I want to opt out because I don't want control. Well, I think I set that aside because I think there is control. Either opting in or opting out, I think there's the same measure of control, be it great control or less control it is still the same, and I hope the Minister will deal with my statement, just indicate whether I'm right or wrong in that assessment, that as far as the control is concerned it is the same because of the right to review the information and the review of the billing itself.

Now there is of course no control for the extra charge. Well, that's clear; that's money. The doctor then says, I'd like to choose and not choose whether to opt in or opt out, but whether to opt in or opt out for any particular patient at any particular time. And now I begin to fear that we're talking only about money, because it may well be that the routine would be in an opted out office that everyone that comes in is asked to sign an assignment form as a matter of routine, and that then the doctor will send out those bills to patients that he believes will pay the full amount of the bill, send it to the patient; and when he feels he can't collect from the patient, he'll send it in to the government. He'll be paid either way; 85 percent at least, and 15 percent or more at most, and this then seems to me to be the only argument that I can understand by doctors who opt out.

And I mention this not in criticism of them but in a request for an explanation as to what else they have to say about it. What has the Minister to say about? Because if it relates only to money, then clearly, Mr. Speaker, it is right and proper to say you cannot take assignments; you are in or you are out. You have a right to stay out of the plan; you have a right to decide to give credit to your patients. That is your right; do it. But you should not at the same time have the statement of the Minister dangled in front of you that it's O.K. boys, we'll keep watching this; we'll keep reviewing this and you'll still have a chance that you may succeed in your demand that assignments will be accepted. That I think is wrong on the part of the Minister and the government.

If I am right in saying that the opting out doctor seems to be concerned only with money, then I think it is wrong for the government to adversely affect this plan by holding them out this hope, because I am convinced that the opting out doctors will soon discover - and when I say soon, it may be a matter of months only - that it's silly for them to stay out of the plan, that the cost of collection, the aggravation of dealing with patients in financial matters is not worth that 15 percent, that they are under the plan in other respects and that they will come into the plan as a matter of good sense, and we have the history in Saskatchewan to support that statement, that they will come into the plan.

But they won't come into the plan, Mr. Speaker, as long as they think they have some bargaining point, as long as they think we'll be able to prevail yet. And on what basis, Mr. Speaker? Pressure only. No doctor in Manitoba is going to deny his services to anyone. I'm convinced that no doctor is going to go on strike or is going to say to a patient I've opted out, I won't talk to you, because doctors who opt out may lose patients; but that again is their choice. But eventually they'll come into the plan and pretty soon, except for the fact that the Minister is holding the door ajar to them whereby they feel - and they have a right to feel, every right in the world to feel that they may yet persuade the Minister to open the door all the way and say, O.K., send in the assignments; we'll process the assignments. Because indeed he is holding open the door by saying I want to look at this as time goes on. I tell him that by doing this he is making it very difficult to let the doctors discover that they're better off to opt into the plan, and he would be much better off if he said that this Legislature discussed it, this Legislature has decided that you're in our you're out, and you can't have your cake and eat it. And he's not saying it to them, and if he did he'd find them in.

If he found there was a breakdown in the medical services provided to the people of Manitoba, what could you conceive of as being more important than such a situation that would justify the government for calling this Assembly into special session to debate, as representatives of the people, the problem which may occur - which I say won't occur but which the Minister thinks

(MR. CHERNIACK Cont'd.)... may occur - to call us in together to discuss the problem and then to say to them, yes, you're right, go ahead; this is necessary. But he's not doing that; he's not saying it's going to necessitate a calling of the session. He's saying leave it to us and we will talk to the doctors as we go along; we'll study the situation and we may yet give them assignments. I think it's wrong; it's wrong tactics; it's wrong policy, if indeed he believes, as I assume he must, that it is wrong to accept assignments for opting out doctors. If he thinks it's right, he owes it to us to tell that here and now, because reading from his statement, I think he is indicating that it is not correct to make the assignments. If it's correct, he should tell us that.

And finally, let me point out - and this is technical and I think it was pointed out by the member for Inkster - that if there was any doubt whether or not the old Act permitted assignments, and I have doubts, because at first I said it doesn't permit an assignment because it is not a debt due, and therefore it not being a debt due, you can't assign it. But looking further I see that it does become a debt due because the Act says that the minute a bill is submitted then the corporation is liable for payment, and maybe therefore the old Act did permit assignments. So therefore it must be clarified. So what does the Minister do? He does neither at this stage, because in his amendment, proposed amendment, he says, "the Lieutenant-Governor-in-Council may allow, restrict or prohibit the assignment". It's got to do one or the other or the third. It cannot do nothing, because by not doing anything then it is not prohibiting, and if it is not prohibiting then it must be possible to enforce it. So I would suggest to him that he tell us today that he intends to prohibit, and prohibit by regulation immediately so there won't be any doubt that there can't be an assignment, because if he doesn't say I prohibit - except of course in the case he's already outlined - if he doesn't say that, then by implication he has permitted it. Not having prohibited it then it should flow in its normal course. And I warn him he better not get into a legal trap on interpretation of the Act which may put him in a position that he doesn't want to be in. I don't think he's in a very comfortable position right now, so I want him to be sure not to become more uncomfortable. Therefore, I caution him about that, that he should prohibit, if he says it is the intention of the government to recommend no other provision on assignment. He'd better prohibit so there's no doubt.

But before doing that, I'd like him to seriously consider taking this out and just putting a section in which states the government's intention now. "The government now intends to prohibit assignments with the exception of a specified type of case." Let him say that in the Bill; let him just say what he means, and say this is what we intend to do. Then it will mean to those who make their choices that they know the alternatives; they know them now. These are the alternatives: I'm in - I will get 85 percent; I cannot extra bill; I am under inspection. I am out - I'm still under inspection; I deal directly with the patient; I collect my money from the patient; I do not get assignments so I know I have to extend credit to my patients; I have the right to extra bill. Let him know the alternatives and don't leave it in such a vague situation that they don't know, because the way it is today, an opting in doctor may feel very foolish if pretty soon he discovers that he could have had his cake and eaten it; or the doctor who has opted out is sitting in hopes that in some way, through some pressure, he will yet persuade the Minister to give him what he wants. That's not right; it's not fair to the people involved.

Patients are very concerned and they are entitled to know. Doctors are obviously very concerned and they are entitled to know, and they ought to know clear-cut choices. The Minister is denying them that and therefore I do not fault the doctors as much as I fault the government for leaving this vague hope hanging in the air without any indication of which side the doctors should choose. And I assure him - I don't have to assure him, it should be obvious to him - if the situation of the provision of medical services to the people of Manitoba becomes so serious that this Act has to be changed, thrown out, repealed, varied, strengthened, he will have every right in the eyes of the people of Manitoba and of the legislators of this province to call us into hurried session to deal with the problem affecting the health of all the people in Manitoba, because that's very important. If he thinks he can get away with saying to one community, where all doctors have opted out, you can have special concessions because you've all opted out, but not to a community where half have opted out, then he's going to be in even worse trouble.

For his own sake, I urge him firstly to make clear the position that he's in, his attitude. Secondly, give to the doctors, and of course to their patients, clear alternatives so they know how they choose, and not dangle hopes and not indicate any possibility of change, but every

(MR. CHERNIACK Cont'd.)... government has the right to change laws as the circumstances arise which make it necessary. That right he has; it's inherent in the whole system of legislation. Let him be clear. But should he not have the strength of character to make it clear in that way, then let me at least urge him to get busy and prohibit assignments, except in the special case provided, if indeed he decides and agrees that those assignments are not now to be allowed.

MR. SPEAKER: The Honourable Leader of the Opposition.

MR. MOLGAT: Mr. Speaker, for the third year in a row the House is debating another Medicare bill. The first one introduced in 1967 was followed by a change of mind of the government in the bill that was before us at the last session, and now this year we have a further change of mind on the part of the government and a third Bill is before us.

I don't intend to cover all of the territory that went on in the past, Mr. Speaker, except to repeat that it has been our position that once the federal Act was passed there was only one course of action for the Manitoba Government to take, and that was to take advantage of the federal Act immediately, and that the delay, the flip-flopping, the change of direction and the indecision on the part of this government has been extremely costly to the people of Manitoba. It's the people who are bearing that load. It's been costly in two ways: we have failed to get moneys from Ottawa which were rightfully ours and which should have been taken advantage of, which were sitting on the table in Ottawa. This was refused by a government which persists in saying that Ottawa does not give it a fair share. Here was an area where Ottawa has prepared to share and this government failed to act. The other area, of course, was that having set up in 1967 its original act of incorporation, the government then failed to negotiate with the medical profession. It sat back, did not participate in any of the negotiations that this House is aware of, and the fee schedules were very substantially increased in the meantime. The government did nothing. Well, that's done, Mr. Speaker, and the government in my view stands condemned for failure to act.

Now we've got a bill before us and the question is to make this the best bill possible to deal with the problems in Manitoba. A number of speeches have been made so far in the debate; the Minister has been asked many questions. I hope that in closing the debate on the second reading of the bill he will cover the questions that have been asked in great detail because there are a number of areas which do need much more explanation.

I want to come later in my comments to the two main items that I see which need great clarification, and that's the whole question of assignment and opting in and opting out; and the other matter which affects our people most of all, and that is the level of premiums. Before going into that though, I would hope that the Minister will give us answers as well on a number of other items, some of which have been raised and some of which I want to raise now.

How, for example, are the veterans going to be treated? This appears to be still unclear. The Minister answered the other day that the veterans are covered only for certain items - their pensionable items, I think is what he said - at Deer Lodge. I think the facts are that in the past the Department of Veterans Affairs has been very broad in its interpretation and I think properly so, I think very properly so, and I would not want to see any restriction taken now on the past interpretation.

Another area is the Review Committee. This was discussed on the previous bills and it was our view at that time that the Review Committee should have on it some laymen. The Minister at that time said no, they'll be dealing with purely medical matters. It now seems that the Review Committee is going to have broader responsibilities. We believe that there should be laymen on that committee.

The whole question then of exemptions, Mr. Speaker, particularly exemptions for students, and this is a matter that came up previously on the Hospital bill. It was our view, and we recommended it to the government at that time, that an actual student, a dependent of his family, ought to be covered under the family plan. After resisting it on the hospital premium structure, the government finally did make some amendments. I'd urge the Minister to reconsider in the case of medical services this same situation, that if it is a bona fide student that the limit should not be the age limit, the question should be really whether he is in fact a dependent or not and a bona fide student, and that the Minister should look very carefully at the situation. We know the increasing difficulties in which our students find themselves in obtaining summer employment. Last year was one of the worst years and it is not looking too good for the coming year. So if we find that we are adding added costs on the students, we ought to

(MR. MOLGAT Cont'd.). . . be looking for means of giving them at least this amount of protection by being covered by their families. I think the Minister should give us a very clear explanation as to the cost estimate that he puts on the extra services, that is, those services that are not going to be shared by Ottawa. How much will the cost of optometric and chiropractic services be on which we'll have to depend strictly on the Manitoba taxpayer?

Now I want to turn, Mr. Speaker, to the specific question of opting in and opting out and assignments. It seems to me that we may be here involved in what might be a battle of semantics. The key question it seems to me is not, unless there are some hidden meanings in opting in and opting out that I missed, the key question that I'm concerned about is the treatment that the patient is going to get. If a doctor is prepared to accept 85 percent of the fee schedule, that is the amount that the plan will cover for all of his patients, if he says to the government under the plan, fine, I accept the payments for all of my patients and in full payment for each of my patients and I will extra bill no one, are we not involved really in semantics whether it's opting in or opting out? If the doctors feel that there is some principle involved in saying, I belong to the plan and this is repugnant to them, because traditionally they have been an independent profession and they don't want to be civil servants, if there is some mysterious attitude there, or mysterious to me, that the opting in hurts them from that standpoint, I have no objections to the term. The key is, will they accept 85 percent, or will they accept the payments made by the plan to be full payment for each patient and for every patient? As far as I can see if they are prepared to accept that, then I think the battle of opting in and opting out is meaningless. The key must be that no patient be extra billed. And I cannot accept any other principle, Mr. Chairman. I accept the right of the doctors to be in the plan or out of the plan, but I cannot agree that we would assign for a portion of their clientele and that they be allowed to extra bill another portion of their clientele. It must be one or the other. If a doctor is prepared to accept for all his patients, then I would say to the government, don't insist that he sign specifically a clause saying that he is opting in, simply have him sign a clause that he accepts 85 percent as full payment for all his patients. To me that should be satisfactory.

I want to turn now, Mr. Speaker, to the question of the premiums, and this is one where the people of Manitoba right now simply do not understand what the government is up to. It appears to me, quite frankly, that the government almost is going to make a profit out of Medicare, unless my honourable friend the Minister is going to give us some very different figures than those he's give us so far. Because when you look at the figures that have been given in the past, and what people have been paying under the MMS system, the premium schedule as set up by my honourable friends just doesn't make any sense when you recognize that the federal government apparently is going to, in this coming year, make a contribution of \$26 million; \$26 million directly from the federal government should mean that there ought to be a very substantial reduction in the premiums, and yet that isn't the case. A family plan under the present premium structure will be \$117.60 a year. The payments that were being collected so far by -- well it varied under different groups admittedly -- but I suppose and I think we might take an average of something like \$130.00 a year. Certainly many people were covered at that rate. Now how can my honourable friends have a present premium structure such as they propose? The question then is, is it definitely true that the government is going to use premiums only to cover the provincial share. Under the hospital plan the government had introduced income tax to cover a portion, but there is also a contribution directly from the Consolidated Fund. It now appears to me, Mr. Speaker, that if the government is going to collect \$29 million in premiums plus \$26 million from Ottawa, that not only are they not going to make a provincial contribution but they should end up with a very tidy profit, if we look at the costs in the past of MMS.

Then the next question, Mr. Speaker, is what about ability-to-pay? What is the government's concept in this regard? Well, in July of last year I received a magazine called: "Canada Month" with a large front page saying, "Medicare. Articles by the Honourable Walter Weir and other medical political experts and observers." I was most intrigued to find that the Premier had become an author and a medical and political expert. The medical one intrigued me particularly, so I read the article with great care, and I find, Mr. Speaker, that there are many statements here with which I can agree, and I'd like to read some of these into the record. I'm quoting directly from the article on Page 22, and I will say at the outset, Mr. Speaker, that I will not read all of the article. I hope I am not taking anything out of context. I regret that the Minister isn't here but if the Minister in charge of the bill wants a copy of the article at the

(MR. MOLGAT Cont'd.)... same time as I'm reading so he can make sure if I'm to be corrected, I'll be happy to have a copy sent to him. And I will be skipping, but I'll try and indicate when I do skip. Here's what it said, and I quote: "First I want to make clear that Manitoba has supported for several years the principle that medical care should not be restricted because of the income or financial resources of an individual. We have therefore consistently advocated the creation of a system of insurance which would limit the financial liability of every family or individual to an amount compatible with personal income." Further on, and I'm here picking parts of a sentence: "the individual" -- and then I skip, and I quote again, "that he must accept the responsibility of paying for these services to the best of his ability at least up to a reasonable amount." I go on further, and I quote again, "We believe that an ideal plan of medical insurance for the people of Manitoba would meet certain criteria." And I go to the second criteria now, and I quote again, "It would place a very low limit on the costs for low income families and individuals." I go on further again later on in the article, and I quote, "We do not believe that a plan should be designed which does not recognize the difference in circumstances of families and individuals. We believe that the only legitimate application of tax resources in this field is the elimination of the problems of the needy."

Mr. Speaker, I ask you, where does one find this philosophy in this bill? It just isn't there, because this bill makes no provision whatever for the philosophy explained here of taking the personal income of the individual, that he be asked to contribute an amount compatible with personal income. There isn't any, because everyone according to the Minister is going to pay exactly the same price. And I ask the Minister, how can a workman on a salary of \$300.00 a month afford the type of premiums that the Minister is going to propose. Can the Minister legitimately say that he has taken into consideration the ability-to-pay and the differences in incomes in Manitoba? Mr. Speaker, not at all. Not at all. It's one flat fee; one flat fee apparently raised, the provincial share, strictly by premium. No contribution whatever from this government from its Consolidated Fund, no contribution from those taxes that are related to ability-to-pay. One flat premium. And judging from the figures we've got now, not only covering the provincial share but covering a cushion as well. Covering a cushion to reduce the premiums later at election time? To do what, I don't know. We've seen that happen before, Mr. Speaker, in this House, when my honourable friends raised the hospital premiums, raised the hospital premiums and then just before election time dropped them. Mr. Speaker, we don't want any phoney premiums. We don't want a plan that does not take into consideration the unfortunate fact that the ability-to-pay of our people in the province varies tremendously; the fact that some of our people on low incomes who are trying to make their own way through life, have no desire to be on government assistance are going to find it impossible to cover these type of costs.

So, Mr. Speaker, I'm looking forward to a much greater explanation from the Minister, an explanation as to how he really intends to finance this plan and is he really going to collect all of it from premiums on a flat premium schedule with no consideration of ability-to-pay? How much does he really estimate that the plan will cost in the next year. Is it true that it is going to be \$55 million? Will he submit the full details of his calculations? Because on the present basis, Mr. Speaker, the people of this province are convinced that the government is simply not charging a realistic premium when you consider the federal contribution.

.... continued on next page.

MR. SPEAKER: The Honourable Minister of Health and Social Services.

MR. JOHNSON: Mr. Speaker, in rising to close this debate on this most important subject, I'll do my best to cover the highlights of the points which have been raised by the honourable members. I welcome this debate and I think the contributions to the debate by all those who participated has been very good. I can't agree with all they have to say, but I can agree with the comments of one member on the failure of the federal government to listen to the viewpoints of the provinces who requested more flexibility in introducing this program. And I remind the honourable members of the House that the four basic criteria in the federal program: that it must be state operated; that it must have 95 percent coverage in three years, which is compulsion; that there must be uniform terms and conditions - and that has a far reaching meaning; and there shall be portability.

Now the problem the Honourable Member, for example, from St. Boniface emphasized, and it was a good one, was the fact that in insisting on these criteria, and in taxing our people for their share of the program, the federal government might well have gone all the way with a national plan, as I understood him to say. As recently as last November, as the provinces were called down to Ottawa and scolded and spanked for allowing hospital costs to rise across this nation beyond limits which they thought they should, and at the same time of being advised of the withdrawal in health grants, traditional grants that have been established here since 1948, mental health grants; tuberculosis grants, they were established in 1948, they've been traditional grants to this province. They're being withdrawn as of this year and will be completely phased out by 1970 when we won't see one nickel for hospital construction. This is the just society. They still insisted on proceeding with this plan and the day we were in Ottawa the Prime Minister himself in the House of Commons announced he'd be withdrawing from Medicare in 1973 with tax equivalents. I'm sure every member of this House would endorse my statement to the Finance Minister and the Minister of Health that afternoon, namely once launched anything less than 50 percent participation by the federal government in the future was unjustified and unacceptable to us as Manitobans. Having thus entered Medicare we're now in the process of introducing the scheme. And again I agree we must do all we can, and I welcome those statements from all sides of this House; all we can to make it work, to accept it as a way of life, to hope and trust it will prove effective for our people.

I can understand the impatience of the NDP. For 50 years their predecessors and now they have talked universal Medicare and urged it upon governments. Do you realize it's 50 years ago, this year, that it was first promised by the liberal government in Ottawa and now a conservative government's bringing it in. I can well understand why they feel possibly that the government and the Minister should be turning cartwheels and blowing the trumpets and blasting the doctors who won't opt in. They're blasting the government for not pressuring the doctors into the plan, suggesting people be advised not to pay additional billings, suggesting we charge doctors for their education, suggesting we go around the world recruiting. They feel the target date of implementation is drawing near and something has happened - government is inept, playing games with the people and the doctors.

Mr. Speaker, we have on our hands at this time in this province the biggest social measure in our history. Why not continue to talk and work with our own doctors in Manitoba, because in my opinion they are the best. I appreciate the difficulty facing the honourable members in understanding this mammoth scheme. Lord Harry, I'm at it every day, living with it 24 hours a day, and I'm finding it tough enough, so I will do my best to try and impart the scheme and help you if I can absorb it by the written word and by osmosis or whatever process we can. Because there is simply thousands of details and target dates that we've had to meet, or the corporation have had to meet. This has been largely in their hands and they've kept in as close touch with me as they can and there are details that I don't, some of them or many of them, but I hope we can find them. The big decision, the study of the fee schedules and the determination of what they were going to offer or recommend to the government that be paid as a fee schedule. The calculation of the budget referred by the Honourable the Leader of the Opposition. They told me that in developing the financial plan they examined closely the Saskatchewan experience, the MMS experience and other plans. They received reports, statistics; they had much classified help from the federal authorities; the development of different systems of payment, cost sharing arrangements, developing their report in total of expenditures and operations; arrangements with the Manitoba Medical Service to take over that giant operation; arrangements with the Hospital Commission dovetailing the premium system - and I must pay tribute to the

(MR. JOHNSON cont'd.) . . . . dedication of our staff in bringing this premium collection system into effect - to save our taxpayers and our administrative costs; the municipal and employer arrangements by the score; the medical review board of which I will have something to say; the doctor-patient relationship of which I will deal with, the opting out; the portability with other provinces and we have a measure in Bill 33 to cover that; the detailed benefits and exclusions - and here are the benefits which accompany those regulations. There's a dozen here, if they give 3 or 4 to each party. Anyone who wants a schedule can get one. These will be forwarded to all the doctors of the province. (Would you give the Whips of the three parties, three and Mr. Froese one. Here's a special one from me to him.)

These are the schedule of benefits that were determined. This incidentally, the schedule of benefits before you, I don't know if you understand them any better than I do, but this schedule of benefits is really the 85 percent, I believe, of the existing fee schedule with certain minor adjustments. They had to work on their Lab and X-ray policies, they had to detail benefits and exclusions, the timetable of the billings and the agencies, the exemption policies, the changes in legislation that might be required, the public relations program, regulations and so on - a massive job.

I would like to deal again as I said with some of the points. As a means to provide for the financial participation by the residents of the province, the premium system has been selected as a matter of government policy as being the most suitable and feasible in relation to the existing tax structure in our province. It continues the existing pattern, Mr. Speaker, established under voluntary medical insurance schemes and the method adopted under our hospital insurance plan. Basically, of course, and I think it's obvious to all members of the House, the important ability-to-pay principle in relation to insured health service costs is also embodied in the fact that 50 percent federal contribution is financed through the income tax paid by all Canadians. The government's recommendation that there be uniform premiums for all, regardless of income, is frankly in keeping with the previous experience in Manitoba. The establishment of premiums on the basis of income would inconvenience the public with the need to declare income, introduce inequity of assessing current premiums and the possible different incomes of the previous year, create still another means test with the inevitable difficulty of determining farm income. And the facts of the matter are these, Mr. Speaker, that to finance this kind of program through the income tax, would have meant a surcharge of 15 percent, a surtax; and I only refer the Members of the House to the address made by the Minister of Finance last year when he pointed out the impact of this on the business community and the people of Manitoba. And a sales tax of 3 percent suggested by the NDP, a sales tax would be at least in that neighborhood. Government has made a decision to go on the premium system. I think we should also in this House pay cognizance of the fact that over 60 percent of our population was covered under the Manitoba Medical Service, many in the low income groups and that worked most successfully. It's true, frankly, that the contribution roughly from the consolidated revenue toward the support of the program will be in the neighborhood of \$900,000, which will appear in Health and Social Service Estimates, with respect to the partnership arrangement we have with municipalities, L.G.D.'s etc., concerning premiums at that level. The rest of the decision is quite as stated here, namely that the rest of the money, the plan is self-supporting in that sense.

Now Mr. Speaker, the Member from -- Beautiful Plains, well he discussed the matter of comparative figures with the Manitoba Medical Service and at the time of setting the premium, the typical urban and rural rates were known, and I believe, we placed that in the first press announcement we made of the institution of the plan which gave the typical figures under MMS for medical alone. But maybe some more of this will become clearer as I go on.

The Honourable Member for Radisson wanted an explanation about the much lower costs as he saw them of the medical plan in Saskatchewan. I'm not prepared to debate that in detail at this time but I just point out to the House that there are very significant differences in what is included in the Saskatchewan scheme, and in one sense it is like comparing apples and oranges because under their program, as I am advised by the corporation, who took this experience into consideration as I mentioned earlier, plus the experience of MMS in determining what they considered would be the cost of our program, they advise me for example that the entire cancer treatment program, the mental tuberculosis treatment program plus preventative and certain lab and x-ray services are not included in the Saskatchewan plan, and there is quite a list of significant items which I think if they were all added together and added

(MR. JOHNSON cont'd.) . . . . to the \$26 million figure for last year which we heard of, projecting that forward would bring our plans much closer together. Also of course the cost to the individual cannot be determined, because in that province you have the additional billing to the individual, the deterrent fee, in that case. I'm advised for example, by the corporation that the doctor-patient ratio is about 119 percent ratio in favour of Manitoba over Saskatchewan. There is one doctor to 1,117 in Manitoba, there is one to 1,329 in our neighboring province. So it is hard to equate the two programs with our own. I am sure theirs is an excellent plan, it's in no way being critical but just trying to bring some points forward.

I might point out to the House at this time, because it has been raised today, that whereas the federal government did estimate the cost of medicare at \$26 per capita announced by Prime Minister Pearson in 1966, the last figures we have from them they're estimating per capita costs of between 45 - 50 and possibly more, dollars. I will tell you how rapidly it goes up. When I was in Ottawa in November the figures we received that National Medicare would probably cost Canada 623 million. Two weeks ago Medicare would cost Canada \$994 million. So that's pretty good going for three months and it's quite an escalation with two provinces in the program. I think this is why, I would suggest to the Leader of the Opposition, so many provinces have held back and why eight premiers in Canada have asked for more talks with the federal government, and why, for example, two Liberal administrations, New Brunswick and Prince Edward Island have announced they're not able to afford medicare under any circumstances. — (Interjection) — Well my honourable friend who in all other cases is all in favour of high wages is a little worried in this area.

MR. DESJARDINS: They weren't just wages that went up this year.

MR. JOHNSON: No. As a matter of fact, I would like to get into a debate with my honourable friend sometime by taking the DBS figures and the consumer price index and other things and show him that -- I think in the case of the medical men, they have gone sort of in spurts and starts instead of having sort of a yearly increment in their program, and this showed up very badly for them. But I thought that was interesting to note this clear fact. And I would ask my honourable friends to pay close attention to the rate, the premiums and the costs of provinces who are "about" to come into this program in the next few days, in other provinces in Canada.

I would point out also to the honourable members that the corporation advise me that in their examination of the plan, it shows that Manitoba for example with Saskatchewan has a much higher availability of medical services, with higher utilization, greater prevalence of specialization which lead to much higher per capita costs than in that province. And of course we in Manitoba are conditioned to a program which gives us direct access to specialists. In many provinces the specialist is on referral only such as Saskatchewan. Here we all have our own pediatrician, geriatrician, surgeon - even embalmers. We will have our own private...

MR. DESJARDINS: Is the Minister suggesting that that also will be covered by . . .

MR. JOHNSON: No. I wasn't trying to be funny. I wasn't including them yet. They follow the profession. But I must say that we're conditioned in Manitoba to this kind of program the HCX type of program, and again in comparison with our neighbour next door, we have a complete opposite ratio in specialist - general practitioner ratio, where it is 60-40 in favour of specialists here, the opposite is the case in Saskatchewan. And of course the corporation assumed from the beginning that the very comprehensive program as devised over the past 25 years by MMS covering doctors, office, hospital, lab and x-ray, the most comprehensive type of scheme in a medical sense, was what the people of Manitoba wished and from the very outset they had determined that this is what they wished to achieve. And they didn't want to upset in the initial stages, the patterns of practice that have been developed over the years.

I could point out to the committee though that upon negotiation the corporation advise me that in one area they are going to be entering into a most detailed study of lab and x-ray facilities, especially in the Greater Winnipeg area in the coming months with the full cooperation of the, I understand the Manitoba Medical Association and the College of Physicians and Surgeons of the Province in an attempt to further rationalize these services with the idea of keeping the very best type of services available to the people at the minimum cost. I think this is terribly important because in this area and day and age of technology, where costs of lab and x-ray services increased in one year 35 percent, that this cooperative arrangement that will be working over the next nine months as we enter this scheme is highly praiseworthy and I know the corporation are very grateful for the cooperation they've been getting from the professional in this regard.

(MR. JOHNSON cont'd.) . . . .

Based therefore on the patterns of practice which have developed in Manitoba, Mr. Speaker, the corporation first of all had to come to this decision as we said, as to the approach they would take in the fee schedule of the medical profession. They determined that 85 percent of the 67 schedule should be adopted for a two year period as a fair and reasonable fee to the physician. They determined that this was a fee schedule which would not attract or detract from our doctor population. They advise me that the dollar value of fee schedules in other provinces was determined and the corporation satisfied the government that the schedule was comparable with those provinces going into the plan, Alberta, B. C., and as I said, they had the Saskatchewan experience. So it was over a considerable period of time that the corporation studied this matter and met with the association and advised them finally of their decision.

Another matter - the members of the legislature, the Member for Carillon mentioned the municipal arrangements. This is very important. I would just like to repeat it in case he missed me previously, but legislation calls for this - that municipalities shall pay the premiums, and as you know in Bill 33 and in the Hospital Services Insurance Act which will come forward, we're dovetailing the collection methods of the two, to look after the combined premium. The municipalities in carrying out their role in the cooperative arrangement we have had with hospitals over 11 years has been a wonderful thing for our province. As I mentioned earlier to you, it has resulted in no hospital bill for 11 years and I think this is tremendous. The whole reason we chose multiple outlets this time was that our municipal advisor on the corporation board said he didn't think municipal secretary-treasurers wanted people coming in daily throughout the month depositing premiums, that we should use these multiple outlets that were established outlets for other government services, but a person could pay at the municipal office, could pay there in advance for any period of time, and that every three months they would give them a conciliation sheet which shows those people in the municipality who had not paid. The corporation are planning with the hospital commission, the streamlining of their operation so that this can be done more readily than in the past and reduce the staff work of the municipality. Their field staff will continue to give them as much help as they have had in the past, and because of the combined premium this other formula as you know has been worked out which gives them a guarantee of 40 percent of their delinquent premiums, their premiums in arrears at the end of each month, and up to 80 percent, depending on the amount of assistance that municipality is giving.

This still leaves incentive at both levels and I think if my honourable member opposite would check again with the present . . . because in the last talk I had with him, he was surprised he told me how little trouble they'd really had in his municipality over these 11 years and he looked forward to continuation of this happy arrangement. But by this method, by this insurance of our citizens now for medical and hospital, we should have a very good scheme. About 60 percent to 70 percent of our bills are collected through employer-employee groups, the rest through these other outlets and the municipal offices.

MR. DESJARDINS: Mr. Speaker, I wonder if the Honourable Minister would permit a question at this time? I don't want to mix him up but before we leave this question of premiums, I think his estimation has been very good. This might help it. The Minister stated, if I understood, that the Consolidated Fund will pay \$900,000, towards the premiums. Could he specify what that will be for? That explanation wasn't quite complete enough.

MR. SPEAKER: . . . for the benefit of time it would be taken up during his estimates. Of course the Minister is free to answer if he wishes but that . . . .

MR. DESJARDINS: Mr. Speaker, he said that we'd find this amount under the estimates but we certainly - I think the Minister probably would want to give us a word of explanation now. What I'm trying to find out, where this \$900,000 come in. Is it for payment of premiums of people that do not have to pay premiums or . . . .

MR. JOHNSON: No, Mr. Speaker, there is no subsidy of this plan out of the general revenue except through our reimbursements through the Department of Health and Welfare to the municipalities and local government districts and others collecting premiums. There's an Order for Return from the honourable member opposite which will show a figure of around \$900,000, that he will get.

Now, Mr. Speaker, the important matter with respect to veterans - question asked by the Honourable Leader of the Opposition - veterans with pensionable disabilities incurred by services in the forces, continue to be a federal responsibility, that is for the treatment of their

(MR. JOHNSON cont'd.) . . . . disabilities, but for all other services the Federal Government are now turning to the provinces under the plan of this nature to the premium system. You see, a person may have a leg off or hand off, he's got a partial disability, he's always covered for his disability in a DVA hospital irrespective, but for all other purposes the corporation will have to be dealing with the DVA doctors, arranging their payments for all other services. You have the other group of the pensionable veteran, then you have the person on veteran's allowance to a couple, which is a federal responsibility and they pay their premiums the same as other citizens. Would you like any clarification of that?

MR. HILLHOUSE: I would say "wife and dependents". Does the wife have to take out special coverage herself?

MR. JOHNSON: They would have to have the family premium for the two of them. In addition he would be covered completely for his pensionable disability.

MR. MOLGAT: Mr. Speaker, but the veteran will be paying the full premium, even though for a portion of his health needs he would automatically be covered, he still has to pay the full premium?

MR. JOHNSON: That's my understanding, Mr. Speaker. I'm going to do some more work on this, but that is the law at the moment as checked by the corporation. It might be well worthwhile pursuing this with the federal authorities as we negotiate a little further, but that is the law at the moment.

Now when the honourable member talks about cost estimates at this second reading of the bill, I had hoped to deal with this in more detail at the time of discussing the estimates and I haven't got the exact detail before me but can give him a rough breakdown of this at the first opportunity.

I want to get on through to the very important part of this bill and try and share with the honourable members the whole matter of assignment. As we come down to the target date we're saying in this amendment to the Act that the assignment clause is necessary to assure the traditional pattern of medical teaching and the regulation is drafted, will be drafted and hopefully I can have it at Law Amendments for the honourable members to look at, but this whole problem is one that I would like to mention frankly to the members of the House, and emphasizes the need for the kind of flexibility that I feel we need. There is no question that the amendment last year, which created the opt-in opt-out provision, was a complete departure from the original bill. The original bill of '67, which provided the complementary legislation to the Medical Care Act of Canada was drafted in concert with that Act to, in my opinion, make this provision for medical insurance in Canada, namely that for this contribution that each province, through that Medical Care Act and its own act would provide an insured benefit to the people of its province, so in every other province, every physician has the same arrangement as he would have in Manitoba were you to permit assignment. The general right of assignment would mean each doctor or physician would deal with each patient on an opt-in, so-called, or opt-out basis. That's the situation in Saskatchewan; that's the situation in British Columbia and that's the situation in the other provinces in Canada as far as I can determine.

Our legislation provides the opt-in, opt-out. He may receive his money all from the corporation, in which case he does not extra bill; or he can receive his money directly through his patient, but he has to do that in total. It wasn't until the end of February, the middle of February, that the corporation became aware, or began to examine the question of assignment as raised with them in their negotiations. At the end of February they were advised by the profession of this province that in those cases where the assignment would be granted, the doctor who has accepted assignment would accept the assigned benefit as full settlement of his account, which meant that he would still have the right, where he and the patient did not agree to assignment, he would still have the right to deal with his patient on an opt-out basis. I want to clear that because this was the very clear understanding that we had from the medical profession. They did say to us at that time that where there was billing beyond the benefit by an opted out physician there would be no assignment of the benefit, that it would be done with discretion and due regard for the financial circumstances of the patient and that a doctor would not bill beyond benefit any patient he knew to be of limited resources.

They also suggested that beyond this, also any patient could have the following avenues open to him, namely, discussion of his bill on an opted out basis with the doctor, appeal to the Medical Review Committee, or appeal to the Fee Taxing Committee of the College of Physicians and Surgeons of the province. This came to me officially around the 6th of March, and seemed,

(MR. JOHNSON cont'd.) . . . . no doubt, at that late date, strange that it had not come up sooner in all our negotiations and discussions, but that's the way things happen. The corporation felt, as has been talked about in this House, that they look to the government to determine whether or no assignment should be exercised by the corporation or not. It was the government's considered opinion, Mr. Speaker, that we therefore required the assignment provision in order to look after the special arrangements we have to have with respect to teaching and that for the present other assignments should be prohibited by regulation. The Manitoba Medical Association advise me, verbally that the vast number of doctors who opt out of the scheme will not charge in excess of the benefit schedule. I think at this late date the test of this is in the operation of the plan, but I must insist that we need the flexibility in all aspects of this plan. We have seen what a lack of flexibility in the federal plan can do and we don't want this to happen here as this plan goes into operation.

Another point we should remember and expressed here is that the medical doctors in Manitoba have pledged themselves to no withdrawal of service at any time under any conditions. They want to serve. To those opting out, I think we should give them our confidence, and recognize, as members have said, their right to do so. I'm saying, I'm suggesting, that in our job as legislators, we recognize that no plan is perfect. We're here every year with 150 bills, and amending bills we passed a year ago and re-examining them, and I know none of us in this House, Mr. Speaker, want to sit in judgment of an honourable profession that has made this province a medical centre second to none in Canada. I think we should, and the government feels we should go into this plan as it is and gain experience, to see what our people think and to strive for perfection and heal this division which has tended to develop so that our people may enjoy the assurances of a most comprehensive medical program. The general public, the legislator and the doctor must combine their energies to make this plan work. The opt outers are individualists, men of high principle exercising a right this Legislature gave them, and I think as legislators, I'm sure we all agree we should assist the corporation and government in getting the experience we need, then examine our position in the light of such experience.

I would say also to the Member from St. John's who raised the question of Medical Review Committee, this will consist of the secretary who is presently the Executive Director of MMS who are our fiscal agent in paying the claim, made up of four representatives chosen from a panel of eight submitted to the corporation by the College of Physicians and Surgeons of our province and the medical profession and the chairman from our corporation. They will be required to review claims of all doctors in Manitoba, to establish the guidelines, the patterns of practice, those claims that are kicked out of the computer as not meeting the criteria in charges or other factors. As a matter of fact at the corporation you have about three doctors, as in Saskatchewan, and as these claims come through, any questions are examined, then these are referred to the Review Committee, they refer them and any deviations from patterns of practice and so on are referred to the corporation, who, as you know have five laymen and two medical members.

I would feel, Mr. Speaker, in conclusion, then, that I hope I have tried to frankly and candidly express to the members of this House the fact that we have this massive scheme, the fact that even in recent weeks we have required clarification, our corporation have, in certain aspects of the legislation. Our whole intent is to bring to the vast bulk of our people the best possible benefits, to make the plan as administratively suitable as we possibly can for our people, and to enter into it on the 1st of April under these ground rules, with the provision in our legislation which would enable the government to meet the situation that might arise; keeping in mind always, of course, the happy relationship between our people both patient, physician and to give all the feeling that we are concerned enough and desire to create no confrontations but rather to each of us gain more understanding of the big and hopefully beneficial program that is before us today.

MR. DESJARDINS: Mr. Speaker, I wonder if the Honourable Minister would permit a question? I don't know if he has given the ratio of medical men and non-medical men on the Review Committee. He gave it on the corporation, not on committee. I wonder if he can give us that? And could he enlighten the House here as to what's going to happen as far as the income tax deduction for bills and that \$100.00 standard medical deduction. Will those disappear? Or can he give us any information on that?

MR. JOHNSON: I understand you can't deduct insured benefits received under income tax. The Member for Selkirk I think was the one that straightened me out on that. The other matter

(MR. JOHNSON cont'd.) . . . . of the Medical Review Committee, I believe the understanding is that eight nominations are received by the corporation from the College and the Association, of whom four members are picked, and then the secretary of that Review Committee will be the Executive Director of the MMS which is part of the corporation's paying out facility, and then the Claims Branch, and then the chairman of that would be a member of the corporation, the chairman of that **Medical Review Committee**.

MR. DESJARDINS: It means that out of six then that four definitely will be doctors and the other two could be doctors also?

MR. JOHNSON: Could be.

MR. SPEAKER: The Honourable Member for Inkster, I believe, has a question.

MR. GREEN: Yes, Mr. Speaker, thank you. I'd just like to ask the Minister to enlighten me as to whether I heard him correctly. In addition to the regulation which would permit assignments in the case of the educational facilities that you spoke of, there will be a specific regulation prohibiting other assignments? Is that correct?

MR. JOHNSON: Yes, Mr. Speaker, and I'll have draft amendments for Law Amendments tomorrow morning.

MR. SPEAKER: Did the Honourable Member for Elmwood have a question?

MR. DOERN: Yes, Mr. Speaker, I wanted to ask the Minister, I don't believe he dealt with a question that I asked him. I wonder if he could briefly explain any chiropractors were included rather than other paramedical services or drugs?

MR. JOHNSON: The government was advised by our Medical Care Insurance Corporation to give the most serious consideration to the inclusion of optometric and chiropractic and the government's decision was to do so.

MR. SPEAKER: Are you ready for the question? The Honourable Member for Thompson.

MR. BOROWSKI: Mr. Speaker, I wonder if the Minister could tell us what's going to happen to thirty percent of the people who couldn't afford to be in MMS. How are they going to get their premiums paid?

MR. JOHNSON: Mr. Speaker, every Manitoban's an insured person the first of April.

MR. BOROWSKI: Who's going to pay their premiums?

MR. SPEAKER: The Honourable Member for Rhineland.

MR. FROESE: Mr. Speaker, it's just too bad that we didn't have the regulations from the very beginning. Some of us spoke previous to getting them. I have trouble reconciling one point and that is the matter of assignments. Could the Honourable Minister give us a clear definition of assignments? The way I understand it now is we're not speaking of the patient being able to assign over an account to the doctor, that he can get the money direct from the insurance corporation. Is that correct?

MR. JOHNSON: Assignment, as I said, came up late in negotiations. It is being considered that assignment is the general right of anybody under the general law of the land, that a person can assign his benefits as he sees fit. However, there was real doubt left in this legislation. There was a difference of legal opinion; namely, that if the corporation permitted assignment after the program started and it went to court, a judge might well rule that the intent of the act prohibited assignment; on the other hand, it might have been permitted. In either case the corporation must have direction in this matter. The medical profession have said in general terms -- or committed themselves to the point that in those cases where assignment is proffered or accepted from the patient, it would represent payment in full for that patient. However, the next patient they may decide that this patient, because of services rendered or it may be agreed upon between the patient and doctor that additional billing should be permitted, in which case the doctor would collect through the patient as is presently visualized. So I just want to explain that fully.

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

MR. SPEAKER: The proposed motion of the Honourable Minister of Labour. The Honourable Member for Rhineland.

MR. FROESE: Mr. Speaker, I adjourned the discussion on Bill No. 5 just to enable me to check the Act and the particular section that we are amending by this Bill. I do not disapprove of the amendment that is being proposed; I'm just wondering whether this could cause any difficulty by giving it shorter notice. Other than that I have no objection to the Bill.

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

MR. EVANS presented Bill No. 7, An Act for granting to Her Majesty Certain Further

(MR. EVANS cont'd.) . . . . Sums of Money for the Public Service of the Province for the Fiscal Year ending the 31st day of March, 1969, for second reading.

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

MR. EVANS presented Bill No. 23, An Act for granting to Her Majesty Certain Sums of Money for the Public Service of the Province for the Fiscal Year ending the 31st day of March, 1970, for second reading.

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

MR. EVANS: Mr. Speaker, I'd like to consult the wishes of the House as to whether they would be willing, by leave, to proceed with the committee stage and then, by leave, again to complete the third readings of these two bills.

MR. MOLGAT: I have no objection. The money's required by Tuesday, is that correct?

MR. EVANS: Right.

MR. FROESE: I have no objections, Mr. Speaker.

MR. EVANS: Since I hear no objections. . . .

MR. LEMUEL HARRIS (Logan): We have no objections on this side.

MR. EVANS: Thank you. Mr. Speaker, I beg to move, seconded by the Honourable the Minister of Consumer and Corporate Affairs, that, by leave, Mr. Speaker do now leave the Chair and the House resolve itself into Committee of the Whole to consider the following Bills: No. 7 and No. 23.

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 to consider Bills Nos. 7 and 23, with the Honourable Member for Souris-Lansdowne in the Chair.

#### COMMITTEE OF THE WHOLE HOUSE

MR. CHAIRMAN: Bill No. 7. Section (1)--passed; Section (2)--

MR. EVANS: I wish to move an amendment as follows: that in the third line the figures \$826, 220 be changed to \$826, 222. This will correct a typographical error. This would be Section (2) of the Bill, the third line, the figures appearing there do not correspond with the written words with respect to the money. I am correcting the figures to correspond with the words.

MR. CHAIRMAN: (Sections 2 to 5 were read section by section and passed.) Preamble--passed.

MR. EVANS: Mr. Chairman, are you going to call the Schedule?

MR. CHAIRMAN: Oh yes, pardon me. Schedule A--

HON. STEWART E. McLEAN, Q. C. (Minister of Transportation)(Dauphin): Mr. Chairman, if we're speaking now on the Schedule, the other evening when this Bill was originally before the members the Honourable the Leader of the Opposition raised a matter which is not covered in the item relative to highways which caught me a bit by surprise, and I rise now only to put the matter on the record in full, that the two projects referred to by the Honourable the Leader of the Opposition in the area of Lac du Bonnet were completed in 1968 in accordance with the arrangements made.

MR. MOLGAT: Mr. Chairman, I'm very pleased that the Minister opened the discussion up again because I had intended to follow it up at some stage to find out exactly what he was going to do. I'm surprised to hear the Minister say that both had been completed, because the information that I had from a local resident who was concerned about this was that the second project was not completed, that the first one had been done in fact but that the cut through the rock had not been widened as promised and that there was still some problem with the school buses. Now I do not have my notes here which I made based on the comments of this individual, but he assured me that there had been no work done on that rock cut, that it was still dangerous and that there was some hesitation by the local residents because of the school buses. Does the Minister say that it has been done?

MR. McLEAN: Yes, Mr. Chairman. My information, and I of course was not there to examine it personally, is that the rock cut work, the second of the two projects, was completed in accordance with the understanding and arrangements made. That's all the information I have.

MR. MOLGAT: I'll follow it up further and I won't have time in this debate, but maybe on Orders of the Day on some other occasion.

MR. CHAIRMAN: (The balance of Bill No. 7 was read section by section and passed.)

(MR. CHAIRMAN cont'd.) . . . . Bill No. 23. Section (1)--passed; Section (2)--  
The Honourable Member for Rhineland.

MR. FROESE: On this Bill I take it we're granting a certain portion of the total of our estimates, and it would appear to me then that any department of the estimates can be discussed under this particular Bill. The question that I want to raise at this particular time is that the Throne Speech refers to a balanced budget. If that is correct, does the government intend to not borrow any monies under Capital Supply? Will the total amount of the monies needed by the government for this year be in the estimates and covered by this year's budget, or will there be further monies asked for under Capital Supply?

MR. EVANS: Mr. Chairman, with regard to monies required for Capital Supply, they would come in under a Capital Supply Bill, not a current Supply Bill such as this. With respect to the intentions already announced to present a balanced budget, I'm afraid the final answer to that must come when I present the Budget Address. The main estimates are the only sums voted by the House to be placed at the disposal of the government for the next year. They can be added to in one of two ways, either by presenting a supplementary Supply Bill while the House is sitting, or if the House is not sitting and additional money is required for some purpose, it can be authorized by special warrant. That latter process is usually confined to unusual circumstances. It might well happen, for example, if we had a flood emergency. That expenditure is not contemplated in the estimates and would have to be made. If the House is still in session, I would ask the House to consider a supplementary Supply Bill for the purpose. If the House has risen, the money might have to be provided by special warrant. Does that answer my honourable friend's question?

MR. FROESE: To a degree, Mr. Chairman, that the previous Bill that was just passed asking for supplementary amounts, was this financed through special warrants? Was that the case?

MR. EVANS: The answer to that question is no, Mr. Chairman. The Bill just passed for supplementary Supply has regard to the year now just ending. These were the amounts not provided for in the estimates passed a year ago. In cases where the estimates passed a year ago were not sufficient, then additional Supply is provided by this Bill. In the meantime, there were some special warrants passed which will be published in the Public Accounts in the regular way. To provide funds in that connection, there were also appropriations made by the Legislature which were not fully expended. In other words, there were some lapses at the end of the year and some money returned to the Treasury, as it were, by certain appropriations lapsing without having been fully expended. I'm not quite sure what the balance is between the two, but lapses usually provide funds enough to cover the special warrants.

MR. FROESE: Mr. Chairman, this is another point. If money that is allocated through the estimates for certain projects, and then if it's not being used up these then lapse. But according to the Minister's statement just made, can they use that particular money allocated for a certain purpose for a different project or for a different purpose?

MR. EVANS: No, there is a limited degree to which funds can be transferred from the purpose mentioned in the estimates to another purpose, but only within the same vote. My honourable friend will remember that each item of the estimates has a numbered resolution opposite it. There is a process called Sub-appropriation Transfer which enables the -- I think it's the Minister, the Minister of Finance, to transfer funds within a vote but not from one vote to another. Consequently, it may well be that one vote will be short of enough funds to do what must be done while another is over, but the amounts that are too large must be allowed to lapse and the other vote must be enlarged by one of the two methods I've just described.

MR. FROESE: Mr. Chairman, I would like to thank the Minister for the explanations he has given. There's one other matter that I have been speaking on over the years and this has to do with interim financial statements. We're almost at the end of the fiscal year. I feel that this House should, before the year lapses or before it is completed, we should have some indication as to our financial standing, whether we will be having an overage or whether there will be a deficit. Surely enough the government can give us some indication as to the financial position, because I am sure the Executive Council must be getting reports at least monthly as to the amounts received, the amounts expended, how the certain departments are faring, because I know of other administrations where certain Ministers probably over-expend and others will under-expend. Could we not have some indication as to the financial situation of the province at this particular time, because we are now going to allocate new funds out of the estimates

(MR. FROESE cont'd.) . . . . that we are just considering now for the next year.

MR. EVANS: The actual outcome of the current year will be reported on in my Budget Address and any surplus or deficit will be revealed at that time. I have a good deal of sympathy for my honourable friend's point of view about interim financial statements during the course of a year. He raised that point last year and I think I indicated at that time that I thought it was a very sound point to raise and that I had a good deal of sympathy for it. I asked my honourable friend to understand there are some difficulties involved, because even at this point the books of the government will not be closed next Monday. There is a further period I think of 20 days in which any further expenditures can be made. Expenditures that have been authorized within the fiscal year can be paid for I think it's 20 days - although I would ask my honourable friend not to hold me to that number of days - but 20 days of April expenditures can be made, and if memory serves me, there are 30 days in which further revenues can be received and allocated into the year already expired. So the books are not yet closed and it makes it difficult to, first of all, make an estimate of these things in my Budget Address, and I can tell you that at this very moment I haven't the last balance in my own office yet. Nevertheless, by the time the budget is presented, I will have a section on it and the outcome of the current year.

Now I reassure him again, if I need to, that I have a good deal of sympathy for the request for information throughout the year. I know that other jurisdictions do it. I am giving serious consideration to that and I hope in the next year I will be able to make some arrangements in that regard.

MR. CHAIRMAN: (The balance of Bill No. 23 was read section by section and passed.) Committee rise. Call in the Speaker.

Mr. Speaker, the Committee has considered Bills Nos. 7 and 23 and wish to report same without amendments.

#### IN SESSION

MR. M. E. McKELLAR (Souris-Lansdowne): I beg to move, seconded by the Honourable Member for Winnipeg Centre, that the report of the committee be received.

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

BILLS NOS. 7 and 23 by leave, were each read a third time and passed.

MR. EVANS: Mr. Speaker, I beg to move, seconded by the Honourable Minister of Youth and Education, that Mr. Speaker do now leave the Chair and the House resolve itself into a Committee to consider of the Supply to be granted to Her Majesty.

MR. SPEAKER presented the motion and after a voice vote declared the motion carried and the House resolved itself into a Committee of Supply with the Honourable Member for Souris-Lansdowne in the Chair.

#### COMMITTEE OF SUPPLY

MR. CHAIRMAN: Order please. Would we have time to finish out the Department of Mines and Natural Resources? -- (Interjection) -- I just have time to call it if everybody else will co-operate.

MR. FROESE: Mr. Chairman, I think the Minister stated yesterday that we might be getting the plans of the drainage program distributed. I haven't received them yet. I just wonder whether we can't get them before we finish.

MR. CHAIRMAN: Well maybe I could get better co-operation at 8:00 o'clock then if I called it 5:30. It is now 5:30 and I leave the Chair until 8:00 o'clock.