

Canada Health Act needs bite: CMAJ urges federal government to strengthen Act and punish violations

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A new health accord between federal and provincial governments must uphold the universality, equity and quality of our current system, rather than introduce two-tiered health care, argues an editorial in *CMAJ* (*Canadian Medical Association Journal*).

"Having government fix the public system is a far more obvious solution than throwing it away for two-tiered [health care](#) that has dubious prospects for protecting the right of all Canadians to access health care," writes Barbara Sibbald, News and humanities editor, with Dr. Matthew Stanbrook, Deputy editor, *CMAJ*.

Canada's [public health care](#) system has deteriorated, allowing private clinics to fill the gaps. In 2008, the Ontario Health Coalition estimated that 90 [private clinics](#) were charging for health care, clearly violating the prohibition on double billing.

The Canada Health Act specifies criteria—such as free, universal access to health care in the public system—that the provinces and territories must meet to receive federal health care payments.

"The problem is that the Canada Health Act has no bite," write the authors. "It will come as no surprise that those doing the extra billing don't report their violations. And provinces only voluntarily report violations to Health Canada. No one has to do anything, so most do

nothing."

CMAJ calls for the government to take action to improve the public system, which is currently performing inadequately. Cutting wait lists, focusing on innovation and smart spending, and ensuring universal access must all be part of the health accord negotiations. Federal Minister of Health Dr. Jane Philpott must also put muscle into the Canada Health Act and punish violations to protect the public system.

More information: *CMAJ*,
www.cmaj.ca/lookup/doi/10.1503/cmaj.161128

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