



WHAT IS BILL 60?

The Ford government has introduced Bill 60, *Your Health Act*, which allows more private for-profit clinics to permanently perform publicly funded surgeries and diagnostic procedures – including cataract surgeries, MRI and CT scans, gynecological surgeries, and knee and hip replacements.

There is no cap on the number of new clinics that the government will license nor is there a limit to the number or type of surgeries that will ultimately be shifted to private clinics.

Already-stressed public hospitals will now be forced to compete with private clinics for staff as well as provincial funding for surgical services.



WHAT'S AT STAKE?

SPENDING MORE PUBLIC DOLLARS FOR LESS

- In January 2023, it was confirmed that Herzig Eye Institute will receive \$150 more per cataract surgery than public hospitals, costing taxpayers an extra \$750,000 for their 5,000-cataract surgery contract.
- Unsurprisingly, the owners of the company lobbied to expand privatized eye surgeries and donated thousands to the Ontario PCs.

FAILING TO PROTECT PATIENTS

- Under the Canada Health Act, patients are protected from extra-billing and user fees. Such charges are banned, and all medically necessary hospital and physician services are covered by public medicare (OHIP). A patient cannot be charged for a medically necessary surgery no matter what facility performs it. Nor can a patient be charged for a needed diagnostic test. Private clinics cannot attach a medically unnecessary service to a medically necessary surgery or a test to extra-bill patients. They cannot manipulate patients into paying by pretending unnecessary services are necessary.

But this happens.

- In 2021, for example, the Auditor General of Ontario's office hired mystery shoppers, who contacted 25 different private clinics. Add-on fees for OHIP-covered cataract surgeries ranged from **\$450 to \$5000 extra per eye** for "non-OHIP lens", and some were told purchasing the specialty lens was mandatory.

And Bill 60 won't be the exception.

- The Ford government could have fined the private clinics and doctors in violation of the Canada Health Act and Ontario's Commitment to the Future of Medicare Act (2004). But they haven't done so, and they don't need new legislation to do so. They just need to enforce the law.

WORSENING PATIENT OUTCOMES

- Investor-driven private surgical centres will cut corners as they put shareholders ahead of patients.
- During the height of the pandemic, for example, for-profit long-term care homes had outbreaks with nearly twice as many residents infected and 78 per cent more resident deaths than in publicly run ones.
- There's similar evidence about stand-alone for-profit clinics that provide dialysis. Compared to patients getting dialysis at non-profit facilities, patients treated at for-profit dialysis centers are less likely to receive a kidney transplant or even make it on the list – because for-profit clinics have an incentive to keep patients on dialysis.
- Public hospitals not only serve as the safety net for complications of care provided in private clinics, but they also ensure that surgeons and other providers are available to provide emergency care.

EXACERBATING THE STAFFING CRISIS

- Health care staff, working on the frontlines of publicly funded hospitals, may leave for private clinics that at the onset, offer higher pay and better hours.
- For example, in February 2023 – before the legislation has even passed – the Ottawa Hospital began allowing a private corporation, run by eight Ottawa physicians, to perform orthopedic surgeries in vacant operating rooms at its Riverside Campus. RNs are being offered \$750 a day to work with these doctors on Saturdays, with clerical staff earning \$600. That's twice the rate an RN would make on a regular 8-hour shift working for the hospital.
- The government's own briefing documents admit that low wages and Bill 124 are worsening staffing issues within the public health care system. Stop the appeal of Bill 124.



WHAT'S THE ALTERNATIVE TO BILL 60?

- The surgical backlog is largely a manufactured crisis caused by chronic underfunding and a shortage of health care workers including nurses and other health care professionals.
- Every hospital in Ontario has operating rooms that are not used in the evenings or on the weekends, closed for weeks or months per year, or that have permanently closed. This is a political choice – not a necessity as Ontario funds its hospitals at the lowest rate in Canada.
- In 2019-2020, more than a third of Ontario hospitals failed to use their operating rooms for 90 per cent of their available time because of a lack of funding and qualified staff. Also, a 2022 internal government document shows that surgeons were only completing about 80 per cent of the non-urgent procedures they did before COVID-19.
- Instead of using the operating rooms that Ontarians paid for, the government wants to rebuild them in private for-profit clinics at a significant public expense. We do not need to build another entire system of ORs only owned and operated by for-profit corporations. That kind of infrastructure investment is costly and will take years. The government must act now.

Properly fund public hospitals so they can increase capacity and meet patient demand. Address the staffing crisis by stopping the appeal of Bill 124 and treating health care workers with dignity and respect.

WHO'S AFFECTED?

Everyone.

Privatization is a threat to our public health care.

It creates two tiers of care.

Those who can afford to pay more receive faster service, and increasingly, patients who need care are faced with an array of extra charges – as for-profit clinics line the pockets of their stakeholders through exorbitant fees, double billings, medically unnecessary add-ons, etc.

Meanwhile, underfunded public hospitals reach capacity and underpaid, over-worked health care workers face critical levels of burnout.

Who you are, how much you make, and where you live shouldn't determine your ability to access high-quality health care.

But in Doug Ford's Ontario, it does.

Enough is enough.

WHAT CAN I DO?

Your voice matters.

Join our [Enough is Enough campaign](#) to learn how you can get involved to send a strong message to the Ford government to repeal Bill 60.

And, engage with your local chapter of the [Ontario Health Coalition](#) as together we mount the largest fightback in our history to save public medicare. Read the Ontario Health Coalition's full analysis of Bill 60 [here](#).