



Ontario Health Coalition

Fact Sheet: For-Profit Clinics & Privatization of Health Care

March 1, 2022

Canada Health Act Principles

The [1984 Canada Health Act](#) is rooted in the core principles of equity and compassion. Its primary objective is “to protect, promote, and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to health services without financial or other barriers.”

The Canada Health Act is like a bill of rights for patients. It requires needed health care to be provided without user fees and extra-billing of patients – needed hospital & physician care must be covered by OHIP. Our hospitals are public and non-profit. They are run in the public interest. Governments have been handing over more services to private for-profit clinics in recent years. Now, the Ford government has announced their intent to bring in new private hospitals.

Privatization threatens these foundational principles of our public health care system.

Five Facts About Two-Tier Medicare

1. Private clinics increase wait times for the 99%.
2. Private clinics provide an inferior quality of care.
3. Private hospitals are less efficient.
4. Public-Private-Partnerships cost more, deliver less.
5. Patients are subject to pay more through taxes and out-of-pocket.

What’s Wrong with Private Clinics & Two-Tier Medicare?

It is a system for the rich. It widens the gap between the 1% and 99%. People who can afford to pay to jump the queue, even when they have less need or no medical need & are buying unnecessary care, [pushing back others with greater need](#).

[Profit is valued](#) over patient health, care & outcomes.

It drives up costs. Prices for private two-tier care are often double, triple, even 5x the cost under OHIP.

Two-tier Medicare [violates the Canada Health Act](#), which protects patients from financial harm when they are sick, elderly, and least able to pay.

Private clinics also use manipulative tactics to find [loopholes](#) in the Canada Health Act to charge patients for medically unnecessary care.

Two-tier Medicare takes needed financial and human resources out of our public hospitals into the private clinics & hospitals that treat only the light care. “Profitable” patients, leaving heavier care patients behind with less staff and funding to care for them.

COMPARISON OF PRICES: Private Clinics vs. OHIP – publicly covered services

Canada's private clinics offer cataract surgeries, MRI/CT scans, colonoscopy/endoscopy procedures, and ‘boutique’ physician clinics. In 2017 the Health Coalition investigated 136 private clinics in 9 provinces and found [88 clinics in 6 provinces](#) to have been charging patients extra user fees and medically necessary services, even in violation of Canada’s public Medicare laws. The prices are exorbitant. Here is a sampling:

Type of Service	Cost
Physician-Led Care	Private: \$1500-\$4000 per year for ‘boutique’ physician clinics Public: \$0 for family physicians or walk-in clinics
Magnetic Resonance Imaging (MRI)	Private: \$1000 per scan Public: \$0 for patients with a requisition signed by a certified CPSO physician
Surgical/Colonoscopy/Endoscopy Procedures	Private: Charge “block fees” , administrative fees, and extra user-fees Public: \$0 for colon cancer screening
Cataract Surgery	Private: \$1000-\$5000 and additional consultation fees Public: \$0 for patients with a specific medical condition
Cancer Care Treatment	Private: \$500 more per procedure than Ontario’s public cancer treatment centres Public: The New Drug Funding Program covers the cost of most injectable cancer drugs for patients who meet the eligibility criteria