

NEWS RELEASE



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Illegal billing: Nurses launch new court action against provincial government

Legal petition asks BC Supreme Court to order Victoria to enforce the laws of medicare to protect patients from extra billing and user fees by private clinics and medical specialists

The BC Nurses' Union today launched a revised petition in BC Supreme Court in a legal action against the BC Government for failing to enforce the laws of medicare.

The petition and related legal papers provide further evidence that Victoria is allowing private medical clinics and medical specialists to violate federal and provincial laws that prohibit them from charging patients for medically necessary services.

“Patients have the right to receive timely health care services under medicare without being forced to pay facility fees or user charges to receive that care,” says BCNU President Debra McPherson.

Contrary to a media report the union is not demanding that the province reimburse patients who have paid to jump the medical queue. The petition demands the government reassess medicare billings when patients have been charged fees that are prohibited by the Canada Health Act and the BC Medicare Protection Act. “We hope the result would be a government order that patients be reimbursed by whomever charged the illegal fees.

“We initiated this court action last year, which we have not dropped. Today we are filing new affidavits and a revised petition to try to hold the government to account for allowing our public health care system to be eroded by private, for-profit schemes. Health care is too fundamental to the needs of our citizens to be turned into another private commodity to be bought and sold on the private market like luxury cars or big screen TVs,” McPherson said.

The new affidavits include information from a Williams Lake woman who was offered a quick appointment for a fee of \$350 at the office of a neurological specialist, as an alternative to waiting for her scheduled appointment with the same specialist in the same office in February 2008.

“So much for the claim from advocates of private health care that letting patients pay for care will reduce waiting lists,” McPherson says. “Here you have the same physician, managing the same waiting list by giving people who pay the fee the quick appointments, while forcing others to wait as long as 2008 for an appointment. Yet this physician is enrolled in medicare and accepts payments from medicare, but medicare is governed by laws that do not allow this kind of extra billing for quicker care. The government has got to act to enforce its own rules.”

The information filed in court accompanies earlier affidavits from patients who were forced to pay large facility fees for medically necessary operations at Lower Mainland private surgical clinics. They were told the fees were necessary in order to avoid long waits for the same operation by the same practitioner in a public hospital. In most cases the surgeon was paid for the service by the province’s Medical Services Plan, while the patient was billed a facility fee by the clinic.

The union argues these activities are all illegal under BC’s Medicare Protection Act and the Canada Health Act. For example, the BC Act prohibits the provincial Medical Services Plan from paying a doctor to treat a patient if the patient is also charged additional fees for the service.

“The provincial government has been turning a blind eye to these violations for several years and capitulating to pressures from promoters of private health care,” McPherson says. “It’s time they were called to account and forced to put a stop to them.

“As we point out in our legal petition, one of the government’s own MLAs, now a Cabinet Minister, boasted that he paid a private clinic to jump the queue for his own surgery. It has got to the point where one major clinic operator was so confident the government would look the other way that he was ready to charge user fees for basic medical services and treatment at a new urgent care centre in Vancouver.

“Only then did the government move to proclaim sections of a 2003 law that increased its powers to audit the billing practices of private clinics and take action. That law should have been proclaimed after it was passed by the Legislature so the government could take action to protect patients from extra billing and preserve the integrity of medicare.”

McPherson pointed out this is the same government that closed about 1,400 hospital beds and almost 4,000 long term care beds during its first four years in office, while subsidizing several private clinics with lucrative medicare contracts.

Meanwhile, operating rooms in hospitals throughout the province are underutilized for surgeries. By fostering the growth of private health care facilities, the government is making the shortage of nurses, physicians and other health care professionals in the public system even worse, McPherson said.

For more information contact: Debra McPherson 604-209-4253
Art Moses 604-868-4259.