

## Premiers call for more federal funding for health care

Canada's premiers want the federal government to increase health care funding to cover at least 25% of health care costs as negotiations for a new health accord continue.

The call for an increase came at the Council of the Federation meeting of provincial and territorial leaders in Whitehorse, Yukon in late July. Under the previous 10-year health accord, which expired in 2014, federal transfer payments to provinces and territories increased 6% annually. The former Conservative government extended the 6% deal to 2017, but in 2017/18 it is slated to drop to 3%, or an amount matched to the rate of growth in gross domestic product, whichever is higher.

This anticipated reduction is “putting enormous pressure on our provincial/territorial health care systems and additional investments will be required,” said Yukon Premier Darrell Pasloski.

Other premiers echoed his views.

“I think we want the Liberals to keep the spirit of their campaign commitments and their pre-election discussions on health care, which would mean an increase,” Saskatchewan Premier Brad Wall said.

The premiers want Ottawa to pay for 25% of total publicly funded health spending, a demand that shows “a lack of adherence to the data,” said Bill Tholl, president and CEO of HealthCareCAN, a federation of hospital and health organizations. A 2015 report from an advisory panel on health care innovation shows the federal contribution to health spending was at 23% and rising.

Tholl said that's because the health transfer has increased 6% annually, while many of the provinces' spending has only increased 1% or 2%. He says the federal contribution will reach 25% before 2025, even if the transfer only increases 3% annually.

“This idea that the federal share is falling is just false,” he said. “It's dead wrong.”

A 3% increase is sufficient, maintains Tholl, but the federal government should top up the transfer by \$1.6 billion to be divvied up among provinces that have a

disproportionate number of seniors, including British Columbia and Nova Scotia. Older Canadians typically consume more health care resources.

The Canadian Medical Association's president made the same recommendation in an open letter. Dr. Cindy Forbes also called for more investment in long-term, and home and community care for seniors. She said that 16% of hospital beds are tied up with seniors waiting for someplace to go.

In addition to bolstering spending on seniors, Tholl wants \$1 billion set aside to reward innovative health care practices and \$100 million as a “performance bonus” to encourage the provinces to report on progress.

He said the premiers can't always depend on “unencumbered money” from Ottawa. “The era of chequebook federalism has to come to an end.”

The federal government has expressed interest in targeted health care funding, rather than a direct increase to the health transfer. In fact, the Liberals promised \$3 billion in home-care funding during the 2015 election campaign, although that money wasn't in this spring's budget.

The premiers were not united in their views on targeted spending. Quebec Premier Philippe Couillard said he is “totally opposed” to the idea. “We ... have to remind our federal partners that provinces have the jurisdiction [over health care],” he said. “We know what to do. We know what should be done.”

Ontario Premier Kathleen Wynne, however, seemed more open to the idea. “There's definitely a discussion about the degree to which targeting of the funding is acceptable,” she said. “I think there's an acceptance that there needs to be accountability for those dollars.”

The premiers are calling for a meeting with Prime Minister Justin Trudeau in the fall to discuss health care funding and the new health accord, which the federal government has said will be in place by year's end. — Maura Forrest, Whitehorse, Yukon

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