

## NEWS RELEASE

## Alberta can pursue major health-care reforms without Ottawa's consent

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**CALGARY**—The Alberta government can enact major health-care reforms—without contravening the Canada Health Act—that would shorten wait times and improve patient care, finds a new study released today by the Fraser Institute, an independent, non-partisan Canadian public policy think-tank.

"Alberta is a relatively high-spender on health care with often middling to poor results to show for it, but fortunately the province can enact a number of policies to improve the system for Albertans," said Bacchus Barua, associate director of health policy studies at the Fraser Institute and co-author of *Health Care Reform Options for Alberta*.

Currently, Alberta is the second-highest spender on health care (per person) in Canada, but ranks near the middle or bottom among provinces in critical health-care resources. For example, Alberta ranks 5<sup>th</sup> out of the 10 provinces for the number of doctors, 7<sup>th</sup> for nurses, 5<sup>th</sup> for MRI units, 8<sup>th</sup> for CT scanners, and last year, Albertans faced a median health-care wait time of 26.1 weeks, 6<sup>th</sup> worst among the provinces.

The study outlines a number of possible health-care reforms that would improve timeliness of care, access to health resources and patient outcomes, including:

- **Increase use of private clinics**: The province can dramatically expand capacity and incentivize competition by using third-party private clinics to deliver health-care services within the public system, which is not prohibited by the Canada Health Act and would likely shorten wait times for Albertans.
- Create a centralized surgical registry and pool patient referrals: Albertans, like all Canadians, must first visit a primary care physician (typically a GP) to obtain a referral to see a specialist. This process can be made more efficient by following Saskatchewan's example and creating a central province-wide registry to pool such referrals in order to prioritize and directly connect patients to specialists with the shortest wait times.
- Allow private parallel financing and delivery of medically necessary services: The creation of a private parallel system in which Albertan's could pay entirely out of pocket, or obtain private insurance for the full cost of services is not explicitly prohibited by the Canada Health Act, but is severely impeded by provincial legislation. Removing such restrictions has the potential to alleviate pressure on the public system, and provide patients with an alternative within the province's borders.

The study also examines other potential reforms, such as patient cost-sharing—a common feature in other successful universal health-care systems like Switzerland, the Netherlands and Australia—but it is currently prohibited in Canada due to federal legislation.

"Contrary to general perceptions, there are meaningful health-care reforms the Alberta government can pursue on its own, that don't require Ottawa's approval and would benefit Albertans," said Jason Clemens, the Fraser Institute's executive vice-president and study co-author.

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Jason Clemens, Executive Vice-President Fraser Institute

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