

## National Affairs by Claire Hoy ? National pharmacare too costly

And now, let us join Peter Pan on a trip to Never Never Land where, as he says, ?dreams are born, and time is never planned.? Indeed, that's about the only place where it would make sense to argue ? as more and more people are currently doing ? that a mammoth national pharmacare program would not only add to government costs but ? wait for it ? would actually save Canadians billions in spending.

Yes, my friends, it's true. The latest input into this old argument ? which first reared its ugly head in a 1964 Royal Commission on Health Services ? comes from a paper published last week by the Canadian Medical Association Journal.

Those who oppose the implementation of yet another expensive national program, i.e. the current Tory government (and many governments before them), have argued, sensibly, that it would cost too much. And given the fact that Ottawa and the provinces are already dangerously up to their armpits in debt, the last thing they need is yet another grand social experiment in health spending. But hold on, claims Dr. Danielle Martin, co-author of the study and vice-president of Women's College Hospital.

Humbly claiming her study is ?a game changer,? Martin told the Toronto Star that ?it (the study) says to governments that you can do this without having to increase taxes by a single penny and that changes the whole conversation.

Ah, not quite.

When is the last time that government ? any government ? ever did anything that didn't cost taxpayers more money? When did a government program ? any government program ? actually worry about being efficient and keeping tabs on the bottom line? When did a government program ? any government program ? once implemented, not continue to ?grow like Topsy,? a reference to a character in Uncle Tom's Cabin defined as growing ?wild, with neither plan, structure, nor direction.?

Martin says a national pharmacare program could ?save? Canadians \$7.3 billion in drug spending, largely through economies of scale and by turning the current patchwork of public and private programs into a single system.

The study claims that under its best-case scenario current Canadian spending of about \$22 billion on drugs would drop under this program to \$15.1 billion, a 32 per cent slide.

The idea, as you'd expect, is praised by the NDP and the Liberals (although the Liberals, of course, never went near it during all those years they were in office.)

The aforementioned 1964 royal commission, known as the Hall Commission, actually did set the tone for the subsequent national health program, or Medicare as it's known. At the time, then Ontario Premier John Robarts, noting that almost all Ontarians already had insurance for doctor and hospital care, predicted it would ?bankrupt? governments. But when Liberal Prime Minister Lester Pearson threatened to cut off federal funds to Ontario if they didn't agree, they did, and ever since ? despite the propagandized myth that Canada has ?the best healthcare system in the world? ? which, by any objective standard of cost-benefit, is complete nonsense ? both Ottawa and the provincial governments have been constantly strapped to come up with the money to sink down what appears to be a limitless expenditure.

Remember when current U.S. President Barack Obama announced that Obamacare would not only give Americans better health care but would save them money in paying for it? So how is that going? Instead, they're paying more money for less care and the program is wildly unpopular.

I also remember then Ontario health minister Larry Grossman, late in Bill Davis's fourth and last election campaign, announcing the ?free drugs for seniors plan,? an attractive vote-buyer which was supposed to be just a minor blip on the government's spending radar but quickly grew to one of the most expensive items they have. It still is.

Obviously, there are a few things that government has to do ? although my list is quite short ? but one thing governments have never been very good at is offering services that function efficiently and don't top up the ever-growing expenditures. That, of course, means higher and higher taxes.

It is true that drug costs have increased substantially, but it is also true that the vast majority of Canadians get help, either privately or publicly, to help pay for them.

Putting it all under one roof always sounds attractive, but it never works.

It certainly doesn't save money.

And it never will.

