

We welcome original letters of less than 300 words; they may be edited for clarity and length. Letters may be emailed to journal@ doctorsofbc.ca, submitted online at bcmj.org/content/contribute, or sent through the post and must include your mailing address, telephone number, and e-mail address.

Re: Two-for-one private health care: A Canadian compromise

I would disagree with Dr Kotaska's opinion that charging double the cost for medically necessary treatment is a justified social policy. If medical care is a right and not a privilege, then imposing financial barriers of double the actual cost to subsidize a failing public system is mercenary. With competition and a market economy, costs approach value. Circumventing the Supreme Court's decision that prohibiting necessary care is unethical with a scheme to charge double the actual cost for medically necessary care is illegal because the Canada Health Act prohibits extra billing. Charging double is also unethical since it runs counter to the prime directive and first order of the Doctors of BC Code of Ethics (www.doctorsof bc.ca/code-ethics) to "Consider first the well-being of the patient." Any

financial policy that delays treatment and prolongs suffering for an individual patient because they are unable to pay twice what the service is worth violates this edict. It's also very optimistic to imagine a 100% tax would generate a net payoff. It's like doubling down on a losing hand with stolen money.

-Mike Figurski, MD, CPHIMS **Big Whitear**

Re: Two-for-one private health care: A Canadian compromise. Author replies

Dr Figurski says that I suggest imposing financial barriers that would delay treatment and impose suffering on patients. I do nothing of the sort. I propose offering affluent patients expedited service for an additional fee that will be specifically applied to providing services for patients with lesser means. This is the fundamental basis of a progressive taxation system. The net result will be additional capacity and shorter waiting lists for procedures undersupplied by the public health care system. The approach is ethically sound and improves the well-being of all patients compared with the status quo. With competition, market forces will indeed come to bear. For the system, private facilities may increase efficiency. For patients, as the service in economy class gets faster, fewer will choose to fly first class.

Dr Figurski seemingly defends and derides the Canada Health Act. yet does not appear to understand the conflict with the Charter of Rights and Freedoms that engendered my suggestion in the first place. The Supreme Court has not doubled down on the Canada Health Act: it has declared it unconstitutional. Free health care is not enshrined in the Charter. As the growing myriad of current violations demonstrate, the Canada Health Act is on life support. Some would happily see it die; however, I believe that most Canadians would prefer a measured compromise to the Wild West of unregulated private health care.

> -Andrew Kotaska, MD Yellowknife, NWT

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