

BRIEFING NOTE: Access to Care Upon Arrival

Agenda item	Amendment to the Commencement of Enrolment Policy to provide access to the Medical Services Plan (MSP) upon arrival for new & returning BC residents coming from outside of Canada.
Prepared for	The BC Ministry of Health, Medical Services Commission
Prepared by	The Sanctuary Health Collective
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Issue

Under the Commencement of Enrolment Policy (“the policy”) all new and returning BC residents coming from outside of Canada are denied provincially insured health care for the balance of the month in which residence was established plus two months (“the wait period”), resulting in greater long-term healthcare costs and poor health outcomes for migrants, specifically children, babies, pregnant women and temporary foreign workers (TFWs).

Recommendation

That the Medical Services Commission (MSC) amend the MSC Commencement of Enrolment policy (MOC 15-074) to remove the wait period for all new and returning BC residents coming from outside of Canada, and ensure access to care upon arrival.

As noted in MOC 15-074, “the Medicare Protection Act (Act) provides administrative discretion to the MSC to assign an effective date of coverage subsequent to the date of residency but no later than three months after the receipt of the application for coverage.”

Rationale

“Three months might not seem like a long time, but imagine I told you that for the next three months you and your children are not covered - and imagine your child getting a fracture, appendicitis or pneumonia. Illnesses and accidents can occur at any time.”

(Dr Caulford quoted in: Morris, 2017, para. 7)

Universal health care and multiculturalism are central to BC and Canada’s identities, and yet BC is one of only three provinces that have a wait period for residents coming from outside of Canada. Not only does the policy deny access to timely healthcare, contravening the Canada Health Act (“CHA”) and multiple international human rights conventions, it also increases health care spending in the long-term. **(cont’d on page 2)**

Key Considerations

- **The policy is not legislation, and can be amended by the BC Ministry of Health (BCMOH) Medical Services Commission (MSC). The Medicare Protection Act, Section 7.2(3)(b) and the CHA, s. 11(1)(a) both allow for a three month wait period for people arriving from outside of Canada, but do not mandate it.**
- The long-term system costs are much greater when timely access to care is denied. There are devastating health consequences for people during the wait period, particularly pregnant women, children and TFWs. In addition, the policy contravenes the CHA and multiple international human rights conventions.
- Precedents for the removal of the wait period have already been set in Canada and BC:
 - a) BC, Quebec and Ontario are the only Canadian provinces with this wait period.
 - b) BC removed the wait period for military families in 2007;
 - c) Quebec removed the wait period for vulnerable women;
 - d) Ontario removed the wait period for newborn babies;
 - e) New Brunswick entirely removed their wait period policy because it is “the right thing to do” (CBC News, 2010).
- As of January 2020, monthly BC MSP premiums have been eliminated for most people. Therefore, during the wait period, new and returning BC residents are being denied access to the universal health care that their sales and income tax dollars contribute to fund.
- Despite the policy having far reaching health and economic impacts, implementation of changes to the wait period policy is largely administrative.

Rationale (cont'd)

Accessing timely primary and preventative care is necessary to reduce the progression of disease and subsequent acute care costs, as evidenced by multiple Canadian and European studies. Providing timely access to care for pregnant women and infants is particularly important in order to avoid devastating outcomes and costs associated with infant morbidity and mortality. Despite being Canadian citizens, many BC babies have been denied timely access to care during the wait period resulting in costly and lengthy neonatal intensive care hospitalizations.

The BCMOH contradicts the CHA's (1985) principle that care be based on need and not the ability to pay, by directing people to buy private health insurance during the wait period (even pregnant women, who the BCMOH acknowledge are not eligible for private insurance). The cost of private insurance is prohibitive to such a degree that most people will either incur debt by paying out of pocket, or more commonly will delay accessing care. In

Ontario, physician billings spike in the fourth month of an immigrants stay, demonstrating that delaying care leads to the same or greater system-wide costs (Goel, Bloch, & Caulford, 2013). Those with pre-existing conditions and pregnancy are neither eligible for private insurance nor a waiver to the wait period, and yet they are the patients who are most likely to need timely access to care in order to prevent more costly interventions in the future.

The policy's stated purpose is to protect against colloquial *health tourism* and safeguard healthcare dollars. However, there is no evidence substantiating the need for this protection or evidence that the policy meets its intended purpose. In the absence of evidence supporting the policy and with consideration of the wide-ranging benefits of reducing barriers to healthcare access, the policy should be amended to align with BC's provincial commitments to the CHA and to mitigate long-term health care costs, risks and complications.

Risks of Maintaining the Current Policy

- Increased long-term health costs due to delaying timely access to health care.
- Poor health outcomes, including death and severe illness, due to delayed access to care.
- Contravention of the CHA and multiple international human rights conventions.

References

- Canada Health Act, RSC (1985, c. C-6). Retrieved from <https://laws-lois.justice.gc.ca/eng/acts/c-6/>
- CBC News. (2010). N.B waives waiting period for health coverage. Retrieved from <https://www.cbc.ca/news/canada/new-brunswick/n-b-waives-waiting-period-for-health-coverage-1.908995>
- Goel, R., Bloch, G., & Caulford, P. (2013). Waiting for care: Effects of Ontario's 3- month waiting period for OHIP landed immigrants. *Canadian Family Physician*, 59(6), 269-275. Retrieved from <https://www.cfp.ca/content/59/6/e269.full>
- Medicare Protection Act, RSBC (1996 c. 286). Retrieved from http://www.bclaws.ca/civix/document/id/complete/statreg/96286_01
- Morris, C. (2017). Caring for the uninsured: Paul Caulford, BSc'72, MSc'75, MD'78 [interview]. Retrieved from <https://medicine.utoronto.ca/alumni/caring-uninsured-paul-caulford-md-78>

Appendix A: Policy Study of the “Three Month Wait” in BC, Sanctuary Health, 2019

Appendix B: Minute of the Commission 15-074, Medical Services Commission, 2015

Appendix C: Letters of Support: Midwives Association of BC, Hospital Employees' Union, Health Sciences Association, West Coast LEAF (2020 & 2015), BC Health Coalition, Umbrella Multicultural Health Cooperative, REACH Community Health Centre, Strathcona Midwifery Collective, RISE Community Health Centre, BC Government and Service Employees' Union, First Call: BC Child and Youth Advocacy Coalition, Migrant Workers Centre, Vancouver Committee for Domestic and Caregivers Rights, SWAN Vancouver, Vancouver & District Labour Council, BC Civil Liberties Association, Pivot Legal Society, BC Poverty Reduction Coalition, Canadian Centre for Policy Alternatives – BC Office, Living in Community, Community Action Initiative, SEIU Local 2, DIVERSEcity Community Resource Society, Society for Children and Youth of BC, Watari Counselling and Support Services Melissa Glen, PNC(c), MN, NP(f) Family Nurse Practitioner