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To: Office of the Legislative Counsel
Subject: Submission from the NS Federation of Labour on Bill 11

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Submission to the Nova Scotia Public Bills Committee on Bill 11: The Administrative Efficiency and Accountability in Healthcare Act

Submission from the Nova Scotia Federation of Labour, which represents over 70,000 workers across our province.

With much respect, this bill may sound innocent with its titles about "efficiency" and "accountability," but make no mistake: It threatens our public healthcare system and the workers who keep it running. A close look at the bill reveals that it is a dangerous step toward greater privatization of healthcare in Nova Scotia. It will continue on the path toward an American-style healthcare system, one that leaves many people behind.

Sections 4 and 5 we see as the most troubling. These Health Services and Insurance Act changes would let the Minister of Health tell doctors and other healthcare providers to bill private insurance companies instead of our public Medicare system. The bill adds a new rule allowing healthcare providers to charge a private or public insurance plan other than the MSI Plan. This means that the services our public system should cover could be shifted to private insurance companies. Even worse, it will allow health care providers to charge private insurers more than our public system would pay. This creates a strong push toward private care, where the most money can be made. These changes mirror what happens in the United States, where private insurance companies pay hospitals more than Medicare.

This is one of the main reasons American healthcare costs twice as much per person as our Canadian healthcare, and we know the American system does not provide better results.

By allowing higher payments to private insurance, Bill 11 creates a system where Nova Scotians with private insurance will likely get better and faster care than those who rely on our public system. This goes against our basic Canadian principle that healthcare should be based on need, not on the ability to pay. This kind of system has created serious problems in the United States, where many citizens simply do not have health insurance, and many American citizens face huge bills even with insurance.

Is this really what we want for Nova Scotia?

When doctors can make more money treating patients with private insurance, they naturally spend more time doing that. This creates a "dual practice" system where healthcare providers split their time between public and private care, with private patients getting more attention because they bring in more money. We've seen this happen in other places that have tried this approach. Wait times for public patients get longer, while those with private insurance jump to the front of the line. This isn't fair, and it isn't the way for our prided Canadian Health Care system.

Draining Resources from Our Public System: Bill 11 will worsen our healthcare staffing crisis. Private clinics don't create positions for new doctors and nurses; they take them from our public system. As many healthcare unions and healthcare groups in our province and Country have pointed out, staff working in private clinics don't appear out of nowhere. They're leaving the public system to go the private providers, making the staffing crisis in Nova Scotia much worse. Private healthcare providers typically pay higher salaries, creating an exodus of workers from our public system. Many healthcare unions have been sounding alarm bells about this for a long time. This leaves our public health care system short-staffed, with workers struggling to care for those who need it. Privatization of health services often means that private facilities only receive the least complex cases, leaving the public system staff to struggle to support Nova Scotians with far more complicated health issues. This means the public system becomes responsible for the most challenging and resource-intensive cases but with fewer resources and staff to address them.

Higher Costs for All Nova Scotians: Looking at what's happened in the United States and elsewhere that have moved toward private healthcare, we know that costs go up for everyone. This means that allowing a two-tier payment system doesn't just create parallel tracks; it drives up costs throughout the system.

The Path Toward American-Style Healthcare: Bill 11 represents a slippery slope toward greater privatization in Nova Scotia. Six of our ten provinces have banned private insurance for publicly insured services to prevent queue jumping and preserve fairness. Bill 11 moves in the opposite direction.

Some might say this Bill introduces more choice, but experience shows privatization tends to expand once it begins. It's well underway in our province and is increasing with recent announcements of greater privatization. Bill 11 would push us further toward the American model, which has proven to be the most expensive and least equitable healthcare system in the developed world.

What This Means for Nova Scotians: If Bill 11 passes, here's what Nova Scotians can expect:

- A healthcare system where your care depends on whether you have good private insurance, not on your medical needs.
- Wait times in public facilities get longer as resources and staff are drawn to the private system.
- Higher costs as private insurance premiums go up to cover the higher fees allowed by the bill.
- Greater difficulty attracting and keeping healthcare workers in the public system, making current shortages even worse.
- A gradual shift toward an American-style system where healthcare is treated as a market commodity rather than a right.

We call on this committee to:

- Remove sections 4 and 5 of Bill 11 altogether. These sections open the door to American-style privatization and have no place in legislation protecting public healthcare.

- Keep the Emergency Department Accountability Act in place to ensure transparency about how our emergency departments function.
- Add clear language to protect healthcare workers from any negative impacts of administrative changes, including guarantees of continued collective bargaining rights.
- Consult meaningfully with healthcare unions before significantly changing how healthcare is delivered in our province.
- Focus on real solutions to healthcare challenges: better working conditions, appropriate staffing levels, and proper funding for public healthcare.

Bill 11 is not just about administrative changes; it's about the future of our healthcare system and whether we want to preserve the public model or move toward an American one. Allowing providers to bill private insurers at higher rates than MSI creates financial incentives that drain resources from the public system, create unfair access to care, and lead to a gradual but persistent privatization of healthcare in our province. This is not the way forward for Nova Scotia.

Our members work daily to care for Nova Scotians. They deserve better than legislation that undermines their work and threatens our public healthcare system, a system where you get care no matter the size of your bank account. We urge you to reject the privatization agenda hidden in Bill 11. Instead, let's work together to strengthen our public healthcare system for everyone in Nova Scotia.