



Medical Services Commission
Ministry of Health
1515 Blanshard Street
Victoria, BC V8W 3C8

Dear Medical Services Commission,

Re: Residency Requirements for Provincial Healthcare Coverage

We are writing to recommend an amendment to your 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.

The BC Health Coalition first raised this issue alongside Sanctuary Health in a letter to Minister Adrian Dix in March of 2018. In this letter, we shared three major concerns with the wait period:

1. Only three provinces currently have a three month wait policy for BC residents coming from outside of Canada: British Columbia, Ontario, and Quebec.
2. Unlike Ontario, which has an exemption to the wait period for newborn babies born in Ontario, the wait period in BC is being applied to BC-born babies.
3. Many temporary foreign farmworkers who meet the eligibility requirements for MSP, the wait period acts as a significant barrier to health care. Given their, often deplorable, working conditions access to basic health services is a necessity for their overall safety. As most of these farmworkers are only here for six months at a time, by the time they receive their PHN and BC Services Card, they are returned home.

The wait period policy is established in Minute of the Commission (MOC) 15-074. It is not legislation and it is within the power of the MSC to amend or remove it. The Medicare Protection Act, Section 7.2(3) (b) and the Canada Health Act, s. 11(1)(a) both allow for a three month wait period for people arriving from outside of Canada, but do not mandate it. As an organization that advocates for evidence-based improvements to our public health care system, stimulates public education on health care issues, and drives positive change to our health care system, the BC Health Coalition would like to share two additional concerns about the wait period policy.

1. There is clear evidence of the policy's negative health consequences

As the Ontario Medical Association stated "There are no medical reasons to support keeping this three-month wait and many medical reasons to support its removal."¹ A comprehensive review of the three-month wait period in Ontario found that the policy negatively impacted individuals' issues of

¹ Ontario Medical Association (April 2011), "Review of the OHIP Three-Month Wait: an unreasonable barrier to accessing health care" Ontario Medical Review at 16, online: <http://omr.dqtlpub.com/2011/2011-04-30/home.php>.

affordability, pre-existing conditions and quality of care, while at a systems level, the policy constrained various health-care settings, posed a risk to public health, and compounded health care system costs.² Goel, Bloch & Caulford³ demonstrate that there “is evidence to suggest that care is often delayed for the duration of the 3 months resulting in the same financial cost to the public system, only 3 months later, as evidenced by an increase in physician billings when immigrants are in their fourth month of stay.” Accessing timely primary and preventative care is necessary to reduce the progression of disease and acute care costs, and there is indisputable evidence that delayed diagnoses and treatment of chronic conditions results in worse outcomes, and unnecessary tertiary care.⁴

West Coast LEAF⁵ notes that “trans, gender non-binary, and gender non-conforming people also face significant harm when they are unable to access the gender affirming care they need upon arrival to Canada. For those that have been unable to access gender affirming care in their previous place of residence, any further delay to accessing care is not only a violation of their fundamental human rights but can also perpetuate the trauma they may have experienced and can have serious consequences for their mental health.”

The Midwives Association of BC⁶ has shared how their members offer payment plans, reduced rates or volunteer for many birthers stuck in the three month wait. They write that “uninsured clients may also choose to birth at home, not because it is their preferred location for delivery, but because it is the least expensive location. This may result in compromised safety if clients are choosing to birth at home for financial reasons, including planning home births despite the fact that they may not meet criteria and delaying or declining to transfer to the hospital and specialist consultations due to financial barriers.”

2. The policy violates the spirit of the Canada Health Act

The Medical Services Commission is responsible for facilitating access to health care in BC, and is directed to have “...regard to the principles of the [CHA]... Consistent with these principles is the fundamental belief that access to necessary medical care be solely based on need and not on the individual’s ability to pay.”⁷ The expectation that new immigrants and residents purchase private

² Bobadilla, A., Orchard, T., Magalhaes, L., & Fitzsimmons, D. (2017). Ontario healthcare coverage eligibility among new permanent residents: A scoping review. *Journal of Immigrant & Refugee Studies*, 15(4), 384-405. doi:10.1080/15562948.2016.1214993

³ 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>

⁴ Bobadilla, A., Orchard, T., Magalhaes, L., & Fitzsimmons, D. (2017). op.cit.

⁵ West Coast LEAF (2020) Letter to the BC Medical Services Commission RE: Letter in Support of Amending the Commencement of Enrolment Policy

⁶ Midwives Association of BC (2020) Letter to the BC Medical Services Commission RE: MSC Commencement of Enrolment policy (MOC 15-074)

⁷ Medical Services Commission. (2018). *Medical services commission 2017/2018 annual report*. pp.1-23. Retrieved from <https://www2.gov.bc.ca/assets/gov/health/practitioner-pro/medical-services-plan/msc-annual-report-2017-2018.pdf>



insurance contradicts this principle as does the Coverage Wait Period Review's requirement that in order to receive a waiver to the wait period, patients must demonstrate financial hardship and cannot be pregnant or have pre-existing conditions.

The Canada Health Act conditions federal healthcare funding to each province on meeting five criteria: public administration, comprehensiveness, portability, universality and accessibility. Canadian residents in the wait period expect the fulfilment of these principles. It is therefore, unsurprising that the Fraser Health Authority's Finance Department⁸ explains, "the largest portion of self pay receivables originate from uninsured BC residents who do not have MSP coverage due to the three month waiting period requirement. These are very difficult accounts to collect because the patients are frequently covered by MSP shortly after their hospital services and feel that their coverage should have been retroactive." Canadian residents expect public, comprehensive, portable, universal and accessible health care, and the wait period is leaving Health Authorities with the bill. As Sanctuary Health notes, "Canada's commitment to the CHA principles and the United Nations (UN) International Covenant on Economic, Social and Cultural Rights are debased when migrants are excluded from care."

With all these considerations in mind, the BC Health Coalition urges you to make the right decision and remove the wait period for all new and returning BC residents coming from outside of Canada.

Sincerely,

A handwritten signature in blue ink, appearing to be 'Ayendri Riddell', with a long horizontal stroke extending to the right.

Ayendri Riddell
Organizer
BC Health Coalition

⁸ Fraser Health Authority (May 27 2015). Finance and Audit Committee Briefing Note: Year End Report on Bad Debt Write-Offs.