

# Cross-border care booming

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BY MELINDA DALTON, JOE FANTAUZZI AND MATTHEW STRADER GUELPH — Marion Morgan is one of a growing number of Ontarians who have recently considered going for medical help in the U.S.

"Probably I would, but it would be extraordinarily expensive," said Morgan, a Guelph resident, who suffers from a chronic autoimmune ailment called sarcoidosis.

She said a recent easing of her condition has allowed her to take a break from dwelling on whether to follow such a drastic care option.

Though it's never far from her mind after last year's trauma.

"I could hardly breathe," she said.

She's increasingly fed up with the domestic health care system that to her is underfunded, resulting in unacceptable delays in diagnosis and treatment.

When she subsequently developed pain in a leg, it took her more than a year to get in to see a neurologist in September, she said. He told her it wasn't connected to the lung-based sarcoidosis for which she sees an out-of-town respirologist, but the whole experience left a bitter taste in her mouth.

Morgan said medical care is faster to obtain in the U.S., judging by the experiences of a daughter there. She's not optimistic care in Canada will catch up.

"I don't see it getting any better," Morgan said, perceiving a decline in care that's already a decade old.

Universal health care is sacred to Canadians, many of whom are like Morgan in that they become outraged when they believe it is being threatened or becoming inadequate.

Many Ontarians know the health-care sagas of Shona Holmes, Lindsay McCreith and Belinda Stronach, the former federal cabinet minister and Magna International auto heiress. They're among the public faces in the emerging debate over rising numbers from Ontario going to the U.S. for care.

Many, such as Stronach, who went to California for some of her 2007 breast cancer treatment, pay U.S. medical bills on their own.

Others, such as Holmes, of Hamilton, and McCreith, from Newmarket, elect to go south for what they believe is their only option, then battle with the Ontario government to be reimbursed.

Figures published in Metroland's Special Report on Cross-Border Care show Ontario patients are travelling to America for health care in record numbers. Ontario expects to spend an estimated \$164 million next year on cross-border care, triple the \$56.3 million spent in 2005.

There's been a 450-per-cent increase in OHIP approvals for out-of-country care since the beginning of this decade, a time of explosive growth in new technologies and therapies not covered or available here. Ontario funded 2,110 out-of-country procedures in 2001, and 11,775 last year.

"Those astounding figures . . . don't include the people who don't actually get OHIP pre-approval," says NDP leader Andrea Horwath.

"They just skip that whole process because they have deep pockets and they can pay to get the procedures in a private system down in the States. And that further erodes the public system here."

Long waits for MRIs and other diagnostics, poor access to doctors and unacceptable delays for some surgeries are worrisome, says the 2009 report of the Ontario Health Quality Council, set up by the province to monitor the state of health care.

There's been some progress, the council says, but the Ontario health system is not meeting all needs.

"People should be able to get the right care at the right time in the right setting from the right provider," the report says.

McCreith and Holmes believe their rights to care were breached.

Last month, McCreith lost his appeal to have OHIP repay the \$27,600 US he spent in Buffalo, in 2006, on brain cancer surgery. McCreith says he would have had to wait four months for an MRI, and three

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