

Alberta election brought Bill 11 back into public eye

Bill 11, Alberta's controversial private medicine bill, seemed to fall off the radar screen after it became law last year. However, it was in the news again in the weeks leading up to Mar. 11, the day Alberta voters headed to the polls to anoint Ralph Klein's Tories to serve another term.

The Alberta Health Care Protection Act (Bill 11) drew massive media coverage across Canada before its passage last year (see *CMAJ* 2000;162:1606-7). The new law regulates how and when Alberta's publicly funded regional health authorities may contract with private clinics ("extended-stay nonhospital surgical facilities") to perform surgical procedures requiring overnight stays.

Politicians, patients, physicians and the public hotly debated whether Bill 11 would open the doors to private hospitals and two-tier medicine. The bill's opponents argued that it would undermine not only Alberta's but also Canada's health care system and open the door to competition from the US.

The Liberals, led by former Tory health minister Nancy MacBeth, fired the first shot, using ads of their own to tell voters that the Conservative government had "blown \$2.4 million of your money to sell their two-tier, private hospital scheme" by buying advertising. MacBeth promised that if her party was elected, its first act would be to repeal Bill 11.

"Repealing Bill 11 will allow new, stronger rules to be introduced to govern health care facilities, public and private, and will allow for proper conflict-of-interest rules," MacBeth said.

Klein, meanwhile, hasn't wavered from the arguments he made when Bill 11 underwent third reading. He says the legislation creates "tight regulatory fences around surgical facilities, fences that weren't there before."

Alberta's New Democrats also pledged to repeal Bill 11, with party leader Raj Pannu proposing a new "patient bill of rights" to replace it. "It will guarantee that Albertans get public health care in a publicly funded system," said Pannu.

Meanwhile, 2 of Bill 11's most vociferous opponents, Friends of Medicare

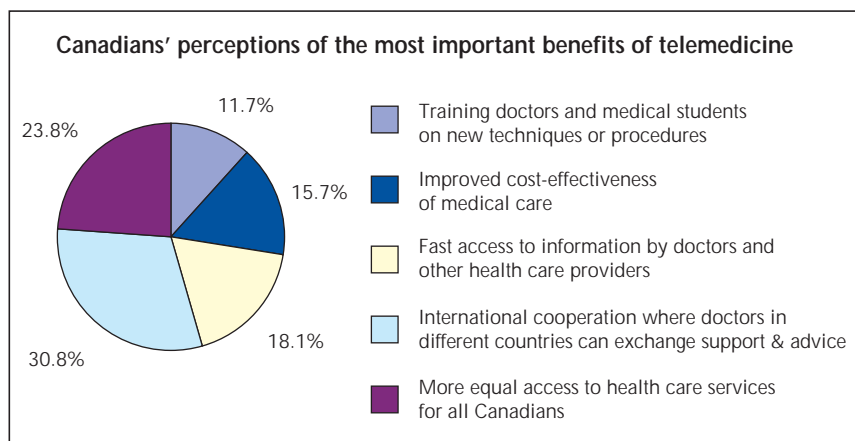
spokesperson Christine Burdett and retired Calgary radiologist Harold Swanson, took their battle against the legislation straight to the polls. Burdett ran for

the New Democrats, while Swanson faced off for the Liberals against Klein. Both lost. — *Barbara Kermode-Scott, Calgary*

PULSE

Public ignorant about telemedicine, survey finds

A recent PricewaterhouseCoopers survey (*HealthInsiders*, Fall/Winter 2000) found that fewer than one-third (29.0%) of respondents knew that videoconferencing could be used to conduct medical tests and make diagnoses. The survey, in which a representative sample of 2592 Canadians aged 15 and older were quizzed about their knowledge of and attitudes toward telemedicine, also found that only 26.1% of respondents were familiar with the concept of dispensing medical advice and assessments by videoconferencing.



Nearly one-quarter (24.2%) of respondents had heard of robotic surgery, while 18.2% were familiar with the practice of disease monitoring by telephone or the Internet. However, only 12.3% of respondents had heard of teleradiology, in which a health care professional advises a person whether or not to seek emergency or other medical care. Canadians' actual experience with telemedicine is very limited. For instance, teleradiology is the most frequently encountered type of service, but only 2.7% of respondents had experienced it. Women and people with children under 16 were more likely to have used this type of service.

Although almost half of respondents (43.2%) indicated that they would be somewhat or very comfortable receiving medical advice and being diagnosed by a doctor who is not in the same room, only 27.1% were comfortable with the possibility of undergoing a medical procedure via telemedicine technology.

When asked to name the most important benefit of telemedicine, 30.8% cited international cooperation, with doctors in different countries exchanging support and advice. Almost one-quarter (23.8%) thought the most important benefit was the possibility of more equal access to health care services for all Canadians.

The greatest concern about telemedicine involved responsibility and liability for malpractice and errors, with 87.8% of respondents indicating that they were very or somewhat concerned. Almost three-quarters (72.1%) said they were very or somewhat concerned about differences in rules and regulations for the provision of health care among countries or provinces. — *Shelley Martin, martis@cma.ca*