

January 31, 2011

Ms. Sylvia Przezdziecki
 Clerk of the Committee
 c/o Standing Committee for Finance and Economic Affairs
 Room 1405, Whitney Block
 Queen's Park,
 Toronto, ON M7A 1A2

Dear Ms. Przezdziecki,

Communicable disease, in particular Tuberculosis (TB) and Multi-Drug Resistant Tuberculosis (MDR TB), is a serious public health concern in the Region of Peel. Tuberculosis rates in Peel are approximately double the average for Ontario and amongst the highest of any city in Canada. Although most Ontario born individuals have minimal risk of being infected with the disease, many of our immigrants come from countries where 30%-50% of people are infected with latent TB. As you are aware, new Canadians settling in Ontario with full immigrant status have no Ontario Health Insurance Plan (OHIP) coverage for three months after arrival. Should they be diagnosed with active tuberculosis during this period and require hospitalization, they incur significant costs for medical care. This medical care is essential to treat the patient, but also necessary to prevent the spread of this disease to others. Unfortunately, the lack of sufficient personal funds (insurance policies often consider TB as a pre-existing condition) to pay for medical care results in delayed treatment seeking even though an individual may be ill and unknowingly contagious.

While the provincial program, Tuberculosis Diagnostic and Treatment Services for Uninsured Persons (TB-UP), does cover outpatient TB care and medication, significant barriers remain. Some physicians refuse to see TB-UP patients because of the cumbersome paperwork. Most problematically, TB-UP does not cover the largest expense for patients and the most serious risk for the community: hospital care for the most seriously ill and those with Multi-Drug Resistant Tuberculosis. These patients are required by Ontario law (The Health Protection and Promotion Act) to incur personal debts of many thousands of dollars in order to protect their fellow residents. This situation sets up a perverse incentive for patients to delay seeking diagnosis and treatment – placing themselves and others at risk - due to these prohibitive costs. Finally, it is highly cost-effective to treat tuberculosis promptly and appropriately thus preventing drug resistance and outbreaks where the health care costs are borne by the Ontario Medical System.

... 2

Given the demonstrated threat to the health of the public and the cost savings associated with preventing cases, Peel Public Health urges the Ministry of Health and Long-Term Care to immediately eliminate the three-month wait period for OHIP coverage for the diagnosis and treatment of communicable diseases for new immigrants.

Sincerely,

A handwritten signature in black ink that reads "David L. Mowat". The signature is written in a cursive style with a large, sweeping initial 'D'.

David L. Mowat, MBChB, MPH, FRCPC
Medical Officer of Health
Peel Public Health