

**Ministry of Health  
and Long-Term Care**

Office of the Minister

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**Ministère de la Santé  
et des Soins de longue durée**

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December 14, 2012

The Honourable Jason Kenney, P.C., M.P.  
Minister  
Citizenship and Immigration Canada  
Ottawa ON K1A 1L1

Dear Minister Kenney:

I am writing regarding the federal government's decision to identify Designated Countries of Origin (DCOs) under the *Balanced Refugee Reform Act*. Specifically, I wish to underscore the effect these changes will have on patients, doctors and Ontario's health care system following the federal government's cuts to the Interim Federal Health Program (IFHP).

I am joined by thousands of health care professionals across Ontario and Canada who have taken issue with your changes to the IFHP. While I expressed my concerns prior to your policy change, the effects on health care have become increasingly clear: limited health care coverage coupled with complexities and confusion for health care providers have resulted in serious negative effects on patients, while downloading costs onto the provinces. Many examples of this have been documented by health care professionals.

Your government has now identified DCOs under the *Balanced Refugee Reform Act*. Following the changes you made to the IFHP, new refugee claimants from a DCO will receive health coverage only if needed to diagnose, prevent or treat a disease posing a risk to public health or safety. This forces doctors to make very difficult decisions regarding care for serious conditions that can include pregnancy, cancer or cardiac arrest. Refusing coverage for patients with these conditions is simply not in keeping with Canadian values.

Under your changes, refugee claimants from other countries – those not from a Designated Country of Origin – will receive care only if it's of an "urgent" or "essential" nature. Our government expects – as do health care providers – that this change will exacerbate the health conditions of patients with chronic conditions and those who are at risk of developing such conditions. In addition, given that preventative care is less costly than emergency or acute care treatment, your policy represents a significant download to the provinces and especially Ontario, where the vast majority of refugee claimants reside.

Requiring different coverage to be provided to different classes of refugees unnecessarily complicates the health care system for limited savings over time. In practical terms, when making time-sensitive medical decisions, you now expect health care providers to determine quickly what class of refugee claimant they are treating, whether their condition poses a risk to public health, or if it is “urgent” or “essential.” It should not be surprising that the complexities of the new program have resulted in confusion and delay in the provision of care, to the detriment of patients.

In the short term, Ontario will do everything it can to clarify these changes for providers to ensure that those who are eligible for care under the IFHP receive it. As Ontario considers its options, we will ensure that those who are in need of emergency medical treatment are not turned away. We will also ensure that individuals affected by your policy change are aware of their eligibility to receive care in Ontario’s Community Health Centres.

I believe that our decisions must be guided by values at the core of our nation: inclusivity, fairness and equity as individuals. This is the expectation of Ontarians. I urge you to reconsider your policy in this light.

Sincerely,

A handwritten signature in blue ink that reads "Deb Matthews". The signature is written in a cursive, flowing style.

Deb Matthews  
Minister