

The ambulance fee is
a barrier to access
healthcare essay
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Canadian healthcare system is defined in Canada Health Act. Canada Health Act describes five principals which are public administration, comprehensiveness, universality, portability, and accessibility. Provincial and territorial governments in Canada have responsibility to deliver healthcare services and insurance services, which cover these five principals (Canada Health Act. , 2017). There are some healthcare services that do not exist in Canada Health Act, which is called extended healthcare services. Extended healthcare services are not usually covered under insurance plan.

Ambulance service is a part of emergency healthcare service. However, ambulance services are outside the scope of the Canada Health Act (Manitoba Health, 2017). Colleen Hopkins who was in Nova Scotia got a \$711. 60 ambulance bill from Emergency Health Services after being saved from serious situation, which is basically her monthly income. This experience made her refuse to call an ambulance, even after she fell and lost consciousness on the other day (CBC News, 2015). This episode indicates that ambulance charge leads to the danger of death due to refuse calling ambulance service.

Even though some people think that charging for ambulance works for right allocating of healthcare service, ambulance fee is a big issue in Canadian health system, because it gives people finance trouble and barrier for healthcare access. Ambulance fee oppresses finance in people. In Nova Scotia, ambulance fee is \$146. 55 per ambulance trip. In addition, if the patient does not have provincial health card, or the patient is Non-Canadians or recent immigrants who does not have a health card yet is charged maximum \$1, 099 (Scotia. , 2015).

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That is so expensive compared with the fee in Ontario which is \$45.00 (ServiceOntario, 2017). According to Tony Kiritsis, a spokesman for the Department of Health, Emergency Health Services issued 73,314 bills in the 2013-2014 fiscal year, amounting to approximately \$12.2 million in fees, and they did not collect \$2.7 million which is 20% of total amount (Ross, 2015). These were more than \$1.5 million that had been waived by people who are low income under the province's Ambulance Fee Assistance Program in between September 2012 to April 2015 (CBC/Radio-Canada, 2015).

These facts show that even though patients have responsibly to pay ambulance fee, more than a few patients who have low income can not pay for it, in short, this charging system does not work well. Nevertheless, there are some opinions that is charging for ambulance is effective for avoiding unnecessary ambulance usage. Some people think that charging for ambulance works for right healthcare service distribution. Roger Melanson who was Finance Minister in New Brunswick told that charging for ambulance can reduce unnecessary service and the service goes to patients who really need the service.

He indicated that if ambulance services were free people would use it even if it was unnecessary, as a result people who really needed emergency care in ambulance service would miss the service (CBC News, 2015). As an example, ambulance service is free in Japan. According to the Fire and Disaster Management Agency, 49.9% of people who were transported by ambulances had minor conditions which is unnecessary hospitalization. In

some cases, people called ambulance with inadequate reason such as to avoid walking to the hospital.

This data made Japanese government started consider to charge patients for ambulance service (Joji, 2015). In Australia, there is a study that investigate the difference of ambulance use between the year fee was changed and the year ambulance service became free. In the result, more people used ambulance service after fees were abolished. Although the increased use was including clinical acuity or admission need, the author said “ Abolishing direct patient cost stimulates ambulance use, potentially including inappropriate transport (Ting JY, Chang AM.

, 2006). ” Lastly, the most important reason why charging ambulance service is a big issue in Canadian healthcare system is that it is a serious barrier for using healthcare service, even though Canada Health Act specifies accessibility as one of principals. Accessibility, which is one of the principles in Canada Health Act, means that people should receive healthcare without financial or any other barriers (Canada Health Act. , 2017), but the cost of ambulance service is a serious barrier for healthcare.

Ryan Meili who is a family physician in Saskatoon and founder of Upstream: Institute for A Healthy Society, says “ We know the importance of the first few minutes of an emergency situation, and the crucial role of Emergency Medical Services in saving lives (Meili, 2015). ” People cannot judge if their symptom is emergency or not, from clinical point of view. Ryan describes about a woman, Connie Newman of the Manitoba Association of Seniors

Centres. She walked to the hospital in -40C with the plight because she could not afford an ambulance (Meili, 2015).

In addition, the CBC Marketplace survey shows that 19% of people have experience for giving up calling ambulance because of cost (CBC/Radio-Canada, 2015). If people worry about ambulance services fee it makes them late or hesitate to call them, that would be a matter of life or death. Ryan advocates that ambulance services have to be covered for everyone in Canada to guarantee people fair and equal access to the service (Meili, 2015). What the government which is supposed to deliver accessible healthcare charges people ambulance fee is a big contradiction in Canadian healthcare service.

In conclusion, although some people think that charging for ambulance will work for people who really need ambulance service, ambulance fee is a serious problem in Canadian healthcare system, because it gives people finance trouble and far access to healthcare service. There are many people who think they do not afford to call ambulance when it is necessary. Also, Department of Health can not collect all amount of fee that they charged to patients.

From some reports, ambulance fee may work to avoid inappropriate use, but people who decide not to call ambulance are included patients who have a serious symptom such as Colleen Hopkins who is referenced above.

Furthermore, ambulance service fee makes people hesitate or delay calling ambulance service, and it leads more dangerous medical complications. This is a big issue in Canadian healthcare system. The reason why ambulance

services are outside the scope of the Canada Health Act (Manitoba Health, 2017). Does the reason make sense to all people who is in Canada?