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Tuesday 9 May 2006

Mardi 9 mai 2006

Speaker
Honourable Michael A. Brown

Président
L'honorable Michael A. Brown

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LEGISLATIVE ASSEMBLY
OF ONTARIO

Tuesday 9 May 2006

ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO

Mardi 9 mai 2006

The House met at 1845.

ORDERS OF THE DAY

TIME ALLOCATION

Hon. James J. Bradley (Minister of Tourism, minister responsible for seniors, Government House Leader): I move that, pursuant to standing order 46 and notwithstanding any other standing order or special order of the House relating to Bill 102, An Act to amend the Drug Interchangeability and Dispensing Fee Act and the Ontario Drug Benefit Act, when Bill 102 is next called as a government order the Speaker shall put every question necessary to dispose of the second reading stage of the bill without further debate or amendment and at such time the bill shall be ordered referred to the standing committee on social policy; and

That no deferral of the second reading vote shall be permitted; and

That, in addition to its regularly scheduled meeting times, the standing committee on social policy shall be authorized to meet at the call of the Chair on May 29, May 30, June 5, June 6, 2006, for the purpose of conducting public hearings and clause-by-clause on the bill; and

That the deadline for filing amendments to the bill with the clerk of the committee shall be 12 noon on June 6, 2006. On that day, at not later than 5 p.m. those amendments which have not yet been moved shall be deemed to have been moved, and the Chair of the committee shall interrupt the proceedings and shall, without further debate or amendment, put every question necessary to dispose of all remaining sections of the bill and any amendments thereto. The committee shall be authorized to meet beyond the normal hour of adjournment until completion of clause-by-clause consideration. Any division required shall be deferred until all remaining questions have been put and taken in succession with one 20-minute waiting period allowed pursuant to standing order 127(a); and

That the committee shall report the bill to the House not later than Wednesday, June 7, 2006. In the event that the committee fails to report the bill on that day, the bill shall be deemed to be passed by the committee and shall be deemed to be reported to and received by the House; and

That, upon receiving the report of the standing committee on social policy, the Speaker shall put the question

for adoption of the report forthwith, and at such time the bill shall be ordered for third reading, which order may be called on that same day; and

That, on the day the order for third reading for the bill is called, the time available for debate up to 5:50 p.m. or 9:20 p.m., as the case may be, shall be apportioned equally among the recognized parties; and

That, when the time allotted for debate has expired, the Speaker shall interrupt the proceedings and put every question necessary to dispose of the third reading stage of the bill without further debate or amendment; and

That the vote on third reading may be deferred pursuant to standing order 28(h); and

That, in the case of any division relating to any proceedings on the bill, the division bell shall be limited to 10 minutes.

1850

The Speaker (Hon. Michael A. Brown): Mr. Bradley has moved government notice of motion number 144. Pursuant to the rules of debate, the time will be divided evenly amongst the parties.

Hon. Mr. Bradley: Thank you for that opportunity. I am one who is always reluctant to see a time allocation motion placed in the House, and members have heard me say this in times gone by, that I'm reluctant to see that happen.

However, you do get an indication during the debate, and I think in discussions with others, that a bill has a life that may be much longer than one might anticipate or reasonably expect.

The bill has now had three days of discussion in the House, an extensive debate. We've heard from members of all the political parties on this legislation. There's been much discussion of this issue over a significant period of time, and I think each government that has assumed the responsibility of office has recognized that there's a major challenge that has to be met. This bill is a bill which tries to meet that challenge.

Without a doubt, we recognize that the cost of the provision of health care in the province is escalating at a very significant rate. Each of the political parties represented in this House has tried to provide the kind of health care system that we believe is appropriate and necessary for the people of this province. It's tried to do so in a responsible fashion, but still taking into consideration that which the people of the province desire.

One of the costs that has increased dramatically in recent years has been the cost of prescription drugs. Each political party that has assumed office has examined the

challenge very carefully and, after examining it, has decided to take whatever action it deemed appropriate. One of the fastest-escalating costs within the health care system, without a doubt, is the cost for prescription drugs. My colleagues who sit on the other side of the House and who once had the responsibility of office I think could foresee that this was not going to get better for governments, but would be much more of a challenge as many more drugs are on the market today and, second, there's a significant portion of the business out there, those who are in the pharmacy business or the production of drugs, who are expanding the products that they make available to the province. I think each government has endeavoured to deal with this problem, and this government has deemed it appropriate to do so after some significant consultation.

I've been in opposition more than I've been in government, and I detected from the debate that was flowing, and just from casual conversations with my good friends opposite, that it was unlikely that this bill was going to proceed in any kind of expeditious manner. While we expect a fulsome debate—and there has been a fulsome debate and there will be further debate and discussion in committee and on third reading—it has been the opinion of the government that this bill would be held up for a very long time in the House, with perhaps endless debate.

As one who has participated in that endless debate in years gone by, I'm certainly not critical of my friends in the opposition. In fact, it is the responsibility of the opposition—I don't expect they're going to be standing to cheer on a time allocation motion; certainly, I can recall, in my days in opposition, not cheering on any time allocation motion, but also recognizing, when I sat in opposition, that there were simply some bills that I, as an opposition House leader or person with some kind of authority on the other side, was not prepared to give to the government.

The government made a judgment, after a period of time, that the debate would go on at great length, far greater length than anticipated, and perhaps in some cases justified—although I am one who likes to err on the side of a more extensive debate. But we've heard from the opposition and from government members on this legislation, and I think we're getting a fairly clear picture of where their initial stand is. I think what will be valuable will be the public hearings, the committee work that is going to take place on this bill. You notice it's not being rushed through this month or anything of that nature. It's giving some considerable time for the members of the opposition and of the government and for the general public to deal with this legislation. We have an ambitious legislative program to deal with as well.

Were I sitting on the other side, and I sat on the other side for a long period of time, I would not ask the government to anticipate that I would be voting for this motion. If I were making a good guess tonight, I would guess that neither opposition party is going to vote for this motion, although I'll tell you, hope rests eternal out there that it will happen someday. But I understand it. I

sat in opposition. The opposition, by the way, in our democratic society plays a significant role. I am one who will never diminish the role played by the opposition in any of the debates that take place. I was an opposition tactician, so I know what I would be doing were I sitting on the other side. I won't be scolding anybody on the opposition side for the fact that you would like to continue the debate at some length and to canvass the issues. But we're not rushing it through this week or next week. The month of June is the time when it will be finally decided.

There will be people who will make their opinions known to those of us who are members of the Legislature. Some we may agree with; some we may not agree with. I think the committee time will be of some significant value to us. I can't necessarily speak on behalf of everything, because I can't anticipate everything the opposition is going to say, but I'm sure the government will listen carefully to all members of the House and the submissions they make, and to submissions that are made by people who want to comment on the bill in the time they will have to do so in committee. I will be interested, as I am sure the government will be, in what they have to say, in what recommendations they have and where they have serious problems with the bill.

I understand there are going to be some who will never be satisfied with the final provisions of the bill. This deals with some significant vested interests in the province, and I understand that, and were I those vested interests, I would be making my views known to members of the Legislature. But I want to say that this government has looked for a long period of time at the challenges presented in this field, has canvassed opinions and has looked at what previous governments have done or tried to do in regard to dealing with the rapidly escalating costs of prescription drugs in the province of Ontario.

There is a fine balance out there. I know the role of the opposition, as I say, having spent the majority of my time on the opposition benches. I don't expect the opposition will be endorsing the bill in principle, or voting for or speaking in favour of the motion we have before us this evening. But whether I'm in the House itself or have access to the feed from the House through television monitors, I will be very interested in hearing what is said this evening.

Mr. Norm Miller (Parry Sound–Muskoka): You'll be watching the hockey game.

Hon. Mr. Bradley: The member from Muskoka suggests I will be watching the hockey game. The Buffalo Sabres are not playing tonight, so I cannot anticipate that.

Interjection.

Hon. Mr. Bradley: The Senators. I know there are some Senator fans here who will not be doing that. I will be riveted to the television set, listening to this Legislature, if I'm not actually in the House listening to my good friends on all sides of the House speak about this motion.

This is not an easy bill. I think all of us who have assumed the mantle of government—the Conservative Party has been there, the NDP has been there, the

Liberals have been there. This is never an easy file to deal with, the file dealing with prescription drugs. There are very powerful interests out there that have a vested interest in our not proceeding with this legislation. There are some who have very legitimate views to offer that may be contrary to certain provisions of this legislation, and we're going to be interested in hearing from those individuals. I'll also be interested, as the debate goes on, still on the thrust of the bill itself, and into committee itself, and on third reading, in hearing what the opposition has to say. I know there will be those in the industry itself, the prescription drug industry, who will be making known their views. People with a medical background, the general public and consumer groups will all have an interest in dealing with this particular legislation. So I look forward with some anticipation to my friends opposite and my colleagues on the government side and the views that they will express.

1900

No government, in my view, wishes to proceed with a specific allocation, or time allocation, on legislation. But each person here in this House who has had the position of government House leader has had to make a judgment that a debate will in fact go on for some very lengthy period of time. To focus the debate more, governments—I hope in our case, rarely—bring in motions which set out specific times for the discussion of this bill. Within the parameters at this time, first of all I think we've heard some interesting debates so far, and I want to commend all members of the Legislature who have expressed their views on this. We have questions that are coming during question period. We have questions that come from various people out there, sometimes when there's a big fundraiser held, and the next day the opposition asks some very significant questions. I don't know what the tie-in is there. My friend Bill Murdoch, who is across the floor, may be able to tell me what the tie-in is of that. From time to time I hear the questions forthcoming and probably it was ever thus. So I have no expectation, though I guess hope rests eternal in all of our hearts, that the opposition members will be voting in favour of this resolution this evening. Certainly I can tell you, as an admission, were I sitting in the opposition, I would never vote for a time allocation motion. That's strictly the role—

Interjection.

Hon. Mr. Bradley: I've got that right, says my friend Norm on the other side. I don't expect that to happen. The roles we play in government—let me tell you something: The role the opposition plays within a democratic institution such as this is a significant role. I know some days you may think the government is not cognizant or respectful of the role, but particularly those of us who have served on the other side of the House for some period of time are very respectful of that.

I don't expect a ringing endorsement of this particular motion this evening. In fact, I expect that there will be some considerable criticism. But perhaps I'll be wrong. Who knows? I hope, for people who watch this, they

understand that that is the role the opposition is going to play. If an opposition member got up in this House and said they were in favour of an allocation of time for a specific piece of legislation, I would be very surprised. I don't criticize the opposition for that. That's a role they have and a role they will play in a very robust fashion. Those of us in government will play a different role, and we hope that, during the time allocated for committee and hearings and the other debates and the questions in this House and statements that are made in this House, we will have some considerable input.

I really look forward to my friends opposite and my friends on this side of the House having their say on all of these issues. I think we have an opportunity tonight with this motion to focus the debate. I have a hard time saying that without a smile on my face, quite obviously, because I can remember that when I sat in the opposition benches, it wasn't a smile on my face that I had in those circumstances. But people should know that the opposition in the House plays a significant role. I can remember—this is a confession, I have to say to my friends on the government side—there were times when I was actually hoping for government to bring in a time allocation bill to finally end the debate. I know none of you are thinking that now, but I actually used to hope for that sometimes.

So I look forward to some very positive comments this evening on this motion. Sometimes the Speaker is tolerant if you leave the motion itself and get into other matters related to the bill itself. I can't speak for the Speaker, but I have seen Speakers in the past who are somewhat tolerant of that in this kind of debate. I wouldn't be presumptuous enough to assign that to our present Speaker.

So that is the motion we have before us this evening. I'm looking forward with anticipation to a very positive and robust debate this evening and then the vote that takes place, which I think will not provide any surprises for me at all.

The Speaker: Further debate?

Mr. Robert W. Runciman (Leeds-Grenville): I appreciate the opportunity, and I appreciate the contribution of the government House leader to the debate. He's one of the deans of the Legislature and certainly knows this place as well as anyone. He has been a witness to and a participant in some of the rule changes that have occurred over the past 28, 29 years by all three governments that have restricted the options available to members to a significant degree. It's interesting; I'm sitting beside the House leader for the NDP, the member for—is it Welland-Thorold?

Mr. Peter Kormos (Niagara Centre): Sure.

Mr. Runciman: He and I participated in a debate some years ago. I was a member of the third party then; he was in the official opposition. It was a debate on auto insurance in Ontario. Of course, as we know, that was a huge issue for his party.

Mr. Kormos: And we were right. Both of us were.

Mr. Runciman: It was an issue for us as well. I happened to be at that point in time the critic for that area, as was the House leader for the NDP. At that point in time, we were allowed to speak forever and a day. I believe Mr. Kormos spoke for how many hours?

Mr. Kormos: A long time.

Hon. Mr. Bradley: Seventeen.

Mr. Runciman: Seventeen hours.

Mr. Kormos: Seventeen and a half.

Mr. Runciman: Seventeen and a half. That was quite an accomplishment.

When people are listening to this, they say, "How could he? He had to go to the washroom," and things like that. But there were ways you could get around that: a quorum call or move adjournment of the debate. There were tricks of the trade, if you will, where you could get out and powder your nose or comb your hair or whatever you had to do. I was the critic, and I didn't come anywhere close to Mr. Kormos's contribution, but I spoke for over seven hours. So that gives you an indication of what we were able to do in years gone by and have some impact on the decisions of the government of the day.

Of course, now it's been dramatically tightened up. We have obviously what we're talking about here this evening, time allocation, but even in the normal rules, when we have to discuss issues in this House, the critic and the minister, or his supporters or colleagues, are allowed an hour, and each of the opposition parties have one hour in terms of leadoff, and then 20 minutes, and that's limited to a certain amount of time. Then we go into 10-minute rotations. So very, very limited opportunities.

I know we've all talked about the increased time devoted to third readings compared to the past. One of the reasons for that is the limited time we have to participate in debate compared to what used to be the case in this place. So we have to take those opportunities for lengthy second reading debate, perhaps lengthier committee hearings and longer time to go into third reading on contentious issues. Certainly, what we're talking about here this evening is a very contentious issue, Bill 102.

The government House leader is a good fellow, as we all know, and I like to think of him as a friend. He gets up in his place and says, "You know, I don't like doing this. I don't like punching you in the nose, but somebody's telling me to do this. It's not something I'd be doing if I had my druthers." But the reality is, for the people viewing us this evening and don't quite understand what we're talking about, this is important legislation which, in our view, is going to significantly reduce the viability and sustainability of many pharmacies in Ontario, especially in small-town and rural Ontario.

1910

What the government has opted to do, rather than extending the debate on this legislation, is to bring in effectively a form of closure. They are, in a very prescriptive way, defining the time in which we can continue debate on this legislation. They're setting out the amount of time very specifically for committee for

public hearings and clause-by-clause, and very specifically for a very limited amount of time for third reading debate.

For the folks who are watching this and may not have any understanding of the bill or perhaps any real interest in the bill, what's happening here is that on a very substantive piece of legislation that is going to affect virtually everyone in this province at some point in their lives, we are having debate shut off and closed down by the government through what we call a time allocation motion. That's essentially what we are talking about here this evening.

I want to put a few things on the record about the legislation. I think I started at 35, so I'm suffering under one of these time limitations myself. I represent an area that has a lot of small towns with one pharmacy, in Elgin or Westport, very small communities, that is really the only health centre for most of those communities. They may not have, and most of them don't have, a doctor so it is the medical centre for that smaller community. What they're doing here essentially, through this legislation, is reducing the viability, the sustainability. We're going to see one to two out of 10 pharmacies in Ontario close over the next few years as a result of this legislation. That's going to be extremely harmful to small-town rural Ontario. It's another indicator of this government's approach, not just to this particular legislation but generally.

I've said in this House that they've written off at least 20 rural seats. They're not even making an effort to appeal to rural Ontario, and this legislation is another signal they're sending. I've told the members here that they should stand up and start expressing concern about a lot of the initiatives this government undertakes that hurt small-town rural Ontario, but they've fallen prey to the whip and the powers of the majority government and are not doing what they should be doing.

I've witnessed this happen over the years. I've stood here in opposition and said this to members of former governments, and they laugh, they smile and then they're gone. If you look at the average tenure in this place, it's something like four and a half or five years. We know, after the last election, they are going to suffer losses. Even if they continue to form the government, they're going to suffer losses and they have written off those losses in rural, small-town Ontario. Essentially that's what they've done. If we look at their budget, focusing on Toronto, if we look at initiatives like this, if we look at what they're trying to do in farmers' markets across the province, they have really written off rural Ontario and are focusing on the seats they think can continue to maintain them in majority government. It's truly regrettable.

I'm looking to my whip. I think I've done my time. I can keep going? Good. Another six hours then.

I find it amazing—being around this place for as long as I've been around and the government House leader—that people would want to heckle what I'm suggesting here with respect to the government's decision. You get

people in the corner office, people who are unelected, who are devising this strategy to hopefully get the Liberal Party re-elected in government. They've made very conscious decisions with respect to what they're going to focus their resources on. Their priorities are maintaining that core around the city of Toronto, the major urban centres, and writing off essentially rural and small-town Ontario. I think that's truly regrettable and harmful. We're seeing that harm done on an almost daily basis in rural Ontario.

I'm getting feedback from my pharmacists on this legislation. I hope the minister for rural affairs is getting feedback as well from the small towns and villages, from the pharmacies that operate in those communities and that are so important in terms of being the sole health care provider in so many.

I regret that we're facing closure on this. I think it is an extremely important piece of legislation. I think it's essentially designed to save the government money: if you look at the budget this year, \$300 million reduced from this program for half a fiscal year. So I think you could extrapolate that and suggest it's \$600 million for a full fiscal year. The people impacted by that are essentially going to be older people, primarily seniors. We have an aging population in this province, so we are all ultimately going to suffer as a result of this cost-cutting measure by the Liberal government of Ontario and the fact that they are forcing this through the Legislature without adequate debate, adequate scrutiny by the great number of Ontarians who are going to be adversely affected over the coming years.

Mr. Kormos: It's with incredible sadness and regret that I speak to yet another time allocation motion, a jack-boot motion, a guillotine motion, this time proposed by a government that wants to speak of itself as the government of democratic reform. Well, we're witnessing some reform, all right. It is the direct attack on debate and public consultation around a piece of legislation that's being passed off by government sycophants as being somewhat innocuous and just run-of-the-mill, when I say to you there's some very dangerous stuff in this bill for the folks of Ontario.

While I have regard for and listened carefully to the comments of my colleague Mr. Runciman, I disagree with him when he speaks of this as a cost-cutting measure, because I predict—let me tell you, when you think about what's going on here—that at the end of the day the drug companies are going to make huge profits, as if they weren't doing well enough already. Mr. Runciman, think about the wining and dining and lobbying that's going to be going on. There's going to be a line-up outside Harbour Sixty, that high-priced steakhouse down there near the waterfront; Scaramouche is going to be booked for months ahead; Truffles up there by Yorkville Avenue, where rich Liberals and the David Peterson types and the Greg Sorbara types spend their pin money on \$150, \$200, \$300 dinners.

Mr. Runciman: They should be going to Bigliardi's.

Mr. Kormos: I'm going to get to that, Mr. Runciman.

Let me tell you lobbyists, rich pharmaceutical companies, as you're bending the ear of the pharmacy czar, the drug king that this government is going to appoint, please, if you want to deal, go to George Bigliardi's over on Church Street. You'll get as good a steak as at any of those other joints. You'll get some of the best service in town, one of the finest ambiances, and if you want to bet a couple of bucks on the ponies after dinner, you can slip next door and do so. But I've got a feeling that the big drug companies are going to be doing their wooing and seducing at some of the most expensive places. At the end of the day the consumer pays for that, every penny of it of it. They do.

This bill is consistent with the two-tier health/drug program that one Minister Smitherman, like George of the Jungle, has been pounding his chest about over the last couple of days, to no real avail, because the opposition has been tearing strips off him on a daily basis and exposing the nakedness of his two-tier health system proposal. You know the one I'm talking about, where rich folk can buy any health treatment that they can afford, while the rest of the people of Ontario, hard-working Ontarians, live with Smitherman's second best, whether it's in long-term care—we've been talking about that lately, Mr. Bradley, long-term care, talking about good folks, our folks, our grandfolks, sitting uncared for in facilities across this province. This government promised \$6,000 a year in new investment per resident in long-term-care facilities to increase the number of health aide staff available to that long-term-care resident, and this government hasn't delivered.

1920

We've heard stories of folks getting one bath a week, and that's in a good week. We've heard stories of folks not being taken to the toilet, having to soil themselves, because the staff simply don't have enough time because this government, Dalton McGuinty's government, the Liberals in Ontario, didn't keep their promise to invest \$6,000 a year in the folks in our long-term-care facilities. We heard the tragic story of one woman sitting on the toilet, ringing and ringing and ringing because she was finished, waiting for long, painful minute after long, painful minute till it passed well into over half an hour, waiting for somebody to help get her up off that toilet. That's the kind of disdain you demonstrate for seniors in this province.

This little drug package of yours is part and parcel of the same thing. What this drug package says and does is that your doctor won't be able to prescribe the pharmaceutical drug that he or she thinks is best for you. Don't give me that baloney about, "They're all the same." There isn't one of us who hasn't—at least I hope there isn't—in our constituency offices had reports. One of the examples is folks with bipolar. That's one of the illustrations that I am personally familiar with because we've talked to several people down in my community where I personally have dealt with their cases, and there is any number of lithium-type medications—the doctors here can correct me if I'm wrong—that treat bipolar. If it's

properly treated, folks can function and live really well, but if it's not properly treated, all hell breaks loose—you know that—and lives are destroyed.

Just from the experience in our office, because many of us have submitted the request—you're familiar with that, Mr. Miller, the request you've got to write when you're trying to get special dispensation for a constituent to get a drug that isn't on the list, because some bureaucrat says, "Oh, well, it's the same drug. Don't worry about it. We're only going to permit the doctor to prescribe"—more importantly, the doctor can prescribe anything he wants, but the pharmacist is forced, police-state style, to substitute what the government dictates. We know that many of these so-called substitutes don't work as well for that particular patient as does the drug that was prescribed by the doctor.

If you folks don't care about talented, incredibly hard-working doctors in this province, if you don't respect them and their judgment, well, just say so. Don't go knocking on the back door when you can be barging through the front door. If you don't trust doctors, if you think they don't know what they're doing, just say so. Because that's what this bill does. This bill says to doctors, "You don't know what you're talking about when you prescribe drug a, b or c," because the bureaucrat, the drug czar, the pharmaceutical king accountable to the Minister of Health—not accountable to the Legislative Assembly; accountable to the Minister of Health—is going to substitute his or her judgment instead of the doctor's.

I don't like time allocation motions. I don't like them. I don't like the governments that introduce them. If it weren't for my long relationship with Mr. Bradley, I'd be hard-pressed to like the people who move them. They are despicable things. Look, this government talks about this bill having been debated? Well, take a look at this, because I checked out the numbers. A bill as fundamental as this has had less than seven hours' total debate. You call that thoroughly debated?

Let's talk about who participated in the debate. I'm not talking about the little backbenchers who stood up and whimpered their two-minute questions and comments, I'm talking about people who participated in the debate. I've got a list of them. Only two New Democrats have been allowed to participate in this debate, only three Conservatives have been allowed to participate in this debate, and only four Liberals. I'm not talking about the little two-minute blah, blah, blah so you get yourself on the record, so somehow you can put something in your householder and send back home around the folks in your neighbourhood. It ends up in the blue box anyway: Don't spend the taxpayers' money.

Only four Liberals had the gumption, the courage, the conviction to stand up and talk about Bill 102, and do you know what? I read a big chunk of their comments. What they did was read the Coles Notes that the whip's and House leader's offices send to them via e-mail—you know, the cheat sheets, the stuff that got you expelled from high school or college if you tried using it then and

there, the sort of stuff that wasn't necessary for people who didn't want to think for themselves, the sort of stuff that made it unnecessary to even read the bill.

Hon. Mr. Bradley: Weren't you a rebel in high school?

Mr. Kormos: Mr. Bradley makes reference to a long-time-ago high school career of mine which was, to my credit, very short-lived. I take great pride in not having spent a whole lot of time in high school.

Only four Liberals have spoken to this bill in any meaningful way, using 20-minute slots. It's not a whole lot of time to talk about the seniors in your community. It's not a whole lot of time to talk about people in your community who are under the care and need the care of doctors. It's not a whole lot of time to talk about doctors in your community who are being undermined, short-changed, having the rug pulled out from underneath them with Bill 102.

Mark my words, there is going to be some sweetheart deal struck between the drug companies and the new drug czar, the pharmaceutical king. These deals will be sweetheart deals. These deals will result in, "Oh, I know what the minister has to say about it. Jeez, Lord love a duck, I can't believe what he's got to say about it." But you see, we don't believe these people anymore. Were you here last night, Speaker? Remember, we were talking about Bill 11? Let's talk about Bill 11. I reflected on the fact that these Liberals are the people who promised to maintain a cap on hydro and control hydro prices so that they were affordable, so we wouldn't lose jobs across the province. They didn't keep that promise. We can't trust a word they say about hydroelectricity, can we?

Mr. Jeff Leal (Peterborough): They don't.

Mr. Kormos: "No," Mr. Leal says. Mr. Leal is now in Hansard. Very good, Mr. Leal. You're one clever one, all right. So we've got Mr. Leal on side, agreeing that the government didn't keep its promise. Let's see who else from the Liberal backbenches we can draw forth with a little bit of candour. Madam clerk from Hansard, you're keeping a record of this stuff, huh? Bless you, madam clerk.

You can't trust the Liberals when it comes to hydroelectricity, the prices and jobs. What, 110,000 jobs lost in 13 months? Mr. Martiniuk—110,000 jobs in 13 months. And these are good jobs; these aren't the McJobs. These are manufacturing jobs. These are wealth creation jobs. These are value-added jobs. Many of them were unionized jobs. They were jobs where people worked hard, but they made some fairly decent money; they were jobs where people worked hard but had some fairly decent pensions; they were jobs where people worked hard but had some good health benefits; they were the kinds of jobs that allowed families to send their kids to college and university—110,000 gone because of Dalton McGuinty's electricity policies, his privatization of electricity in Ontario and the additional cost that that brings inevitably to the price of electricity, not just for industry but for homeowners as well.

Dalton McGuinty and the Liberals promised that they'd extend IBI treatment for kids with autism beyond the age of six. Do you remember that one? Remember that, Mr. Dunlop?

Mr. Garfield Dunlop (Simcoe North): Yes.

Mr. Kormos: Did they keep that promise? Nope. You can't trust what the Liberals have to say about kids and IBI treatment. You can't trust what the Liberals have to say about kids with autism—kids struggling, quite frankly, for their whole futures, and their families struggling alongside them, families going broke, families mortgaging their homes, families selling their homes, families maxing out their credit cards, families borrowing from every friend, neighbour, person they can put the touch on to pay for one more month of treatment. They're forced to because Dalton McGuinty and the Liberals didn't keep their promise to kids with autism.

1930

Dalton McGuinty and the Liberals promised that they would end the child benefit clawback of \$1,000 to \$2,000 a year for a mom and kids, the poorest moms and kids in the province. They Harnicked again. The McGuinty Liberals Harnicked again when it came to their promise to roll back the child benefit. They Forded to thousands of families. That's Ford with a capital F, Hansard, just as Harnick is with a capital H. Dalton McGuinty and the Liberals Forded to thousands and thousands of moms and their kids. You can't trust what Dalton McGuinty and the Liberals say about taking care of the poorest kids, kids living in poverty in our province. Dalton McGuinty and the Liberals Harnicked again when it came to persons with disabilities.

Interjection.

Mr. Kormos: What? One 3% increase in disability benefits over the course of three years? When you take the cost of living, heck, you guys all picked up—what was it?—a 2.2% automatic salary increase. What was it?

Mr. Runciman: It was 2.1%

Mr. Kormos: It was 2.1%. Come on. You guys enjoyed a 2.1% salary increase, boom, like that, without even asking for it. People on disability pensions got zip. For people on social assistance who got cut 21.6% over 10 years ago, not a penny, but for MPPs at Queen's Park, where the minimum wage is—what is it Gerard Kennedy is making for not being here?

Ms. Lisa MacLeod (Nepean–Carleton): Some \$89,000.

Mr. Kormos: Some \$87,000, \$88,000 or \$89,000 a year. Gerard Kennedy, in case people forgot, is the fellow from Parkdale–High Park, the purported member from Parkdale–High Park, as rumour has it. “Vive le Québec,” he says, as the elected representative of Parkdale–High Park goes shopping with some real estate agent in Westmount or wherever it is in Montreal that he's going to move his spouse and kids to. I hope he doesn't submit mileage for all that travel to British Columbia, New Brunswick, the east coast, the west coast, the Rockies. Heck, he's still submitting his salary request

and he hasn't been around for a couple of weeks at least, if not more.

Interjection: Fifty-two votes.

Mr. Kormos: He hasn't been here since 52 votes ago, I'm told. Is it arrogance? Is it pomposity?

Mr. Runciman: Liberal pomposity.

Mr. Kormos: Mr. Runciman says.

Mr. Dunlop: The proof is in the proof. Tell Dingwall.

Mr. Kormos: Mr. Dunlop says.

Gerard Kennedy, MPP for Parkdale–High Park, still collecting an MPP salary of—how much is it?

Ms. MacLeod: It's creeping.

Mr. Kormos: The member for Nepean–Carleton says.

He's still got an office here at Queen's Park, still got an office down in High Park, still got the perks, still got the dental plan, still got the drug plan. You see, he doesn't have to worry, the member for Parkdale–High Park, who hasn't been here for 52 votes, you say, Mr. Runciman. Fifty-two votes.

Mr. Runciman: Consecutive votes.

Mr. Kormos: “Consecutive votes,” Mr. Runciman says. He keeps track of those sorts of things.

Let me tell you, friends, I can tell you very personally that absence does not make the heart grow fonder. Mr. Kennedy's absence has not endeared himself. Don't the people of Parkdale–High Park deserve a working MPP? It's one thing to take off for four, five, six weeks to Cuba like Mr. Kennedy's Liberal colleague. It's another thing to go gallivanting across the province trying to pursue your own personal political ambitions when you don't even intend to keep living in Ontario, when you intend to relocate in Quebec because you figure it's to your political advantage. Some say hubris; I say that arrogant sense of entitlement. “Because I can”—that's why. “Because I'm better than those taxpayers.”

The folks who are going to be denied the prescription drugs their doctors prescribe for them—unless they've got the money, unless they can reach into their wallet, unless they've got the hard, cold cash, they're going to get what the government says they get. That's what Bill 102 is all about.

To suggest that somehow this bill has received anything akin to thorough debate after less than seven hours of consideration, and when only four Liberals have stood up and utilized full speaking slots—good grief, even with no Kennedy here, there are dozens of you. You'd think you'd be proud to stand up and speak up and explain why you're voting for Bill 102, why you're putting the shaft to seniors in your community, why you're undermining doctors, why you're going to be cutting big sweetheart deals with the biggest of the pharmaceutical companies—because mark my words, it will be the biggest of the pharmaceutical companies that will be able to cut the deals. Boy, those skyboxes over at the Air Canada Centre are going to be busy. The partying, the clinking of champagne glasses as the pharmaceutical lobbyists work over the new drug czar and his or her staffing bureaucracy are going to drown out Rob Ford. Well, it will.

Inevitably, I can just see it now—remember, when you were a kid, on the back of those comic books you could buy those X-ray glasses where you could see through things? I never sent away for it. We didn't have any money when I was a kid. But I used to read the back of those comic books where you could buy those X-ray glasses. I can just see it now. There will be the czar, there will be the big, fat guys in the \$2,000 suits. Cordiano will send them to his tailor.

Mr. Runciman: He doesn't pay for them.

Mr. Kormos: Neither do they; the company pays for their suits; Cordiano's riding association pays for his. Come on. Bob, we're on the wrong track here.

So the big, fat pharmacy company guys, the big, rich ones up at the Air Canada Centre, Rob Ford babbling and vomiting in the box next to them, but being drowned out by the popping of champagne bottles and the clinking of the Waterford crystal—what do you call those? Flutes, right?—as the deals are being cut, and there will be Steve Mahoney saying, "But the WSIB has an interest, too. Pour me another one."

Steve Mahoney. You remember him, Speaker? An incredibly qualified Liberal hack. Unemployed Liberal; double dipper; two pensions. Steve Mahoney has got a provincial MPP's pension. He didn't vote for a defined contribution pension plan the way my good friend Jim Bradley did. Mahoney didn't vote for the defined contribution plan the way Mr. Runciman did. Mahoney got out when the getting out was good, when they had a defined benefit pension plan, well funded by the taxpayers of Ontario. And then to boot—because he's a Chrétienite, make no mistake about it. It's one thing to be a Liberal hack, but to be a Chrétien Liberal hack gives you a little more baggage. That's when the porter charges you 20 bucks to carry your luggage, because that's a lot of baggage. That's two-fisted baggage. A Chrétien Liberal hack.

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He then heads off to Parliament Hill—far be it from me to criticize short terms in cabinet, but as a mere junior Secretary of State, he's dismissed promptly once Martin takes over. And then Carolyn Parrish beats him. I'm sorry; of all the embarrassing things, of all the shameful things—I mean, just bury your head. It's a double-bag situation. Don't show your face. Carolyn Parrish beat him. Steve, take the pension and pick up the balance of the lease from Ruprecht's shack down in Guanabo. Just go. But no; he'll be lined up at that Air Canada Centre. Runciman and I will be outside begging scalpers for tickets at half price because the game's half over, but no, they'll be at the front of the line.

Gerard Kennedy will be somewhere in Quebec in front of the big-screen TV with the French subtitles, right? Because he wants to learn French. He'll say "Ontario. Ontario." But then one of his family members will say, "Well, no, dear, that's what it says on your cheque that you get every month. The \$1,600 a week that you make even though you haven't shown up for work"—for 52

consecutive votes, Mr. Runciman says. Far be it from me to doubt Mr. Runciman's word.

Surely we've got enough time to debate important bills until every person who wants to has had the opportunity to speak to them. I'm not suggesting that we wait until Gerard Kennedy shows up. That would trigger time allocation in anybody's mind. It would have to be after December 2 before that would happen. So I'm not suggesting we wait till Kennedy shows up to speak.

But we're going to sit through to June 22, aren't we, Government House Leader? You see, I have a copy of the standing orders here, which prescribe the calendar for the Legislative Assembly. I know what folks expect. Folks expect us to sit through to June 22, which is the statutory calendar date. How long a summer vacation do folks need? Kennedy started his 52 votes ago. Mahoney has grabbed the brass ring. He'll be on vacation for the balance of his term as—what is it?—chair of the—

Mr. Dunlop: WSIB.

Mr. Kormos: WSIB. Steve Mahoney, that great advocate for workers, especially injured workers. Mr. Wrye remembers. Mr. Wrye remembers Mahoney's paper on workers' comp so-called reform. Mr. Wrye remembers. Mr. Wrye's a former member of the Legislative Assembly. He has great experience here: Bill Wrye, a former minister. Why couldn't the Premier's office have asked experienced people like Bill Wrye before they appointed Steve Mahoney? Because Bill Wrye would have been able to give the government some insights. Quite frankly, Bill Wrye would have made one heck of a superior chair of WSIB. He's a person with talent. He's educated. He's skilled. He's demonstrated an interest in the matter. He took his job seriously while he was here. He's been a dedicated public servant. While I presume he's still a Liberal, although I can well imagine there are evenings when he lies in bed wondering why, he's certainly not a Liberal hack. You see, patronage in and of itself isn't the worst thing in the world. I remember Judy LaMarsh once many, many years ago saying that patronage is the grease that oils the gears, but patronage without competence is never right. But think about it. That's hard-core, old-fashioned pork-barrelling. That scraping the bottom of—

Mr. John Wilkinson (Perth–Middlesex): You've got Bob Rae to do the review.

Mr. Kormos: Somebody says, "You've got Bob Rae." That's what I said: It's old-fashioned pork-barrelling. And I'll go you one further: That's scraping the bottom of the barrel.

There you go, with an important job like chair of the WSIB. Glen Wright—and I've got to say this—the Tory appointment, with a strong business background—there were some of us who went, "Oh, yikes." But Glen Wright from time to time scared the daylight out of the Tories. I have a lot of regard for the guy. He had experience, he was talented, he was creative. He contemplated, for instance, 100% worker participation in the payment of WSIB fees. Right?

Mr. Runciman: That's right.

Mr. Kormos: Scared the daylight out of the Tory cabinet, didn't he? Not so much them, but out of the business world. The banks almost swallowed their bubble gum. Well, they did. They didn't know whether to spit or go blind. You know, yikes. Banks paying into WSIB? Call centres like—Canadian Tire Acceptance in Welland is now our largest single employer, and I don't begrudge a single one of those jobs. But because it's a financial institution, over 600 workers, there's no WSIB coverage. Look, I'm not suggesting that ingots of hot steel are falling on people in the call centre, but one of the biggest problems of course—many of you know; you can talk about RSI, repetitive strain injury, is the ergonomics, the ergonomic problems, and carpal tunnel—and inevitably, the people who suffer it are in their 40s, dare I say it, 50s, where the likelihood of them finding new jobs is pretty diminished. And carpal tunnel—you've surely encountered it, perhaps in your own lives or in your families or with constituents—is an incredibly painful, disabling phenomenon. From time to time, stupid people make light of workers' injuries. I've heard some of the jokes myself. But it's an incredibly disabling injury. So in a call centre where people are working at keyboards day after day after day after day, it's one of the more frequent injuries, like other RSI and ergonomic-related injuries, and there's no WSIB.

Is that fair, Mr. Craitor? You're a former member of the Niagara Falls labour council. You tell me. Is that fair that workers like workers at call centres and in banks shouldn't be entitled to WSIB coverage? Mr. Craitor, is it fair? Is it fair, Mr. Craitor? I don't think it is. Because, you see—oh, of course. They can sue the employer, right? Because if you don't have WSIB coverage, you can sue. Oh, yes, please. Please. What are you going to do?

Michael Bryant: access to justice. Oh, yes, sure. Cut me some slack. Give us a break. He'll come knocking on your door, should there be a Staffordshire terrier that happens to look like a pit bull in a pen in the backyard. When it comes to access to justice, we've had zip. Think about it. I just happen to have thought about that, Speaker. There is nothing in the course of three years by this Attorney General that has improved the ability of folks—plain folks, ordinary folks, just plain old hard-working folks—to access the court system. Not a thing. And indeed even Bill 14, should it pass in its present form—oh, that's a scary thought—isn't going to do a single thing to enhance or increase access. It's the workers, like workers at call centres or banks suffering from repetitive strain injuries, they're—down where I come from, we call it SOL. It's game over. That's it. You're finished. That's the remarkable thing.

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I was at Paul Turner's class over at Notre Dame school the other Friday night and a group of his social justice students literally sleep out in cardboard boxes and bags and so on in a one-night experiment, just to identify, show empathy and some effort to understand the plight of homelessness. I was talking to those students, an incred-

ibly bright group of kids over at Notre Dame Catholic high school in Welland, Notre Dame College School. One of the things I had occasion to explain to them—and Mr. Craitor knows; he's seen it—is that you can have a hard-working, middle-class kind of worker who can go from a middle-class lifestyle to welfare within a period of one year: up on a ladder cleaning your eavestroughs, take a fall, suffer a head injury. It's not a workplace. And even if it were a workplace, if he worked at a bank or a financial institution, you wouldn't have workers comp anyway, would you, Mr. Craitor? But a fellow or a gal on their ladder, cleaning the eavestroughs, something most of us have done on a regular basis, takes a fall, has a head injury. Employment insurance? Paul Martin raided it, gutted it. He did. The Liberals did. Within one year that worker could be on welfare—middle-class lifestyle to welfare within 12 months.

The stress on the family is incredible. Families break up, wives leave husbands, husbands leave wives. You see, these are the moms and children on assistance whose child benefits are clawed back by Dalton McGuinty's Liberals, so they can never get ahead. The guy with the head injury, well, physiotherapy is no longer covered by OHIP, is it? Dalton McGuinty and the Liberals delisted—privatized—physiotherapy.

A single person, a single male on social assistance, welfare, doesn't get enough to buy himself a crummy room in a flophouse. That's how you get people who a year ago were living middle-class lifestyles, paying taxes, buying things, which makes the economy work—in the process of one year you can have women living in poverty with the kids, with this government picking their pockets for their child care benefit, and a fellow living on the streets of Toronto. He may drink from time to time, when he can panhandle enough money to do that. By God, if anybody deserved a bottle of Four Aces, one of the cheapest things I recall you can buy in a liquor store, it's that guy whose life has been destroyed in the course of 12 months.

Hon. Mr. Bradley: Ninety-nine cents a bottle at one time.

Mr. Kormos: Ninety-nine cents a bottle at one time, Mr. Bradley recalls. What was the code number, Mr. Bradley?

Hon. Mr. Bradley: It was B58.

Mr. Kormos: So he says. What's that line? He started out on burgundy but soon hit the harder stuff.

These are not pleasant things, time allocation motions. You know what? I was here last night. The government made a big to-do about a motion to sit in the evenings.

Mr. Bisson is going to want to speak for a few minutes. I know he's in his office paying close attention to the clock. I've only got 11 minutes left. He may be occupied on the phone or doing emails. He very much wants to speak to this matter. I don't know whether he'll be able to make it up here in time, but if he doesn't, understand that he's busy working in his office.

But here it was yesterday, once again, the government saying, "Oh, much to do. We've got to sit evenings." But

check the Hansard from last night. How many Liberal speakers were there? Zip, zero, nada; not one of them. And this was Bill 11, again, a very important piece of legislation. And it's not as if they had to go out of their way, because, as I said, they all had their cheat sheets, they all had their Coles Notes; they all had their scripts. I suspect they also had their marching orders. Oh, we're going to sit until—tonight we are, because it's a time allocation motion. Time allocation motions are to be spoken—at least we're going to speak through the full one third of the time allotted to us. We're not going to let this opportunity slip by, slip through our fingers.

But not a whisper from the Liberals in yesterday evening's debate. What's the matter? Cat got your tongue? Or were you anxious to get out of here because you didn't want to work? Were you anxious to get home to your little—I guess not so little—big La-Z-Boy chairs with the stick shift on the side so you get your feet up and get the hockey game or the baseball game, what the heck, or Cagney & Lacey, whatever it is you guys spend your time doing when you get home at night, idling away time when you could be speaking to important legislation here.

There I was with Howard Hampton and Shelley Martel, and the three of us were carrying the debate. There were the three of us. I spoke. I had but 10 minutes on an issue about which I have received a whole lot of letters and phone calls from folks down where I come from. I spoke specifically about the wilderness areas, the wilderness parks, places like Quetico. Shelley, of course, spoke. Shelley Martel from Nickel Belt is one of the hardest-working members of the Legislature. Howard spoke, because Howard has some incredible expertise in that area, especially when it comes to issues around aboriginal rights and treaty rights, First Nations rights and those communities.

I say to you, Speaker, that New Democrats are voting against this time allocation motion. It's an offensive, repugnant thing.

I recall when the government House leader would stand here and rail against time allocation motions. I recall when Liberals like Dalton McGuinty, a back-bencher, would stand and rail against time allocation motions, speak of them accurately as undemocratic, unfair and contrary to full and democratic debate. Well, I say to you, New Democrats aren't going to support this time allocation motion, and we condemn this choking off, this guillotine of debate around so important an issue.

My colleague Mr. Bisson has been able to break away from his computer and his e-mails and his telephone calls, and he will be addressing this motion in due course, before the evening is over. Thank you kindly, Speaker, but no thanks to McGuinty's Liberals.

Mr. Kevin Daniel Flynn (Oakville): It is a pleasure to join the debate tonight. Certainly, as a newcomer to this place, having only come in the last three years or less, it's interesting to hear some of the more senior speakers and their approach to things.

I come from the council arena, and in the council arena, you're supposed to make a point and sit down, you're supposed to speak to a motion, and you're supposed to do business on behalf of the people of your constituency. There's a little saying that goes around local councils and regional councils: If you can't say something in 10 minutes, you haven't got anything to say. That's how so much business gets done by the hard-working men and women who serve this province at the local level, who aren't in love with the sound of their own voices, who really want to do something for the people of the province and who understand that it's the issues under debate, not the process, that are going to make the changes in people's lives in this province.

2000

Listening to the previous speakers, I think the House leader gave a very balanced introduction to what we'll be dealing with this evening. Then I listened to the leadoff speaker from the Conservatives, the member from Leeds-Grenville, and we've just been entertained by the leadoff speaker for the NDP on this issue, the member for Niagara Centre. To listen to those two speakers, you'd think the Liberal government was obviously up to something that was no good. So I took a look at what previous governments in the past had done when they had an opportunity to deal with an issue in a certain way.

Hon. Mr. Bradley: Tell us.

Mr. Flynn: Well, since we've been in government, we've introduced 90 government bills. We've already passed 68 of those bills, and we've only had to time-allocate 12 bills. That doesn't give you any terms of reference until I tell you about the other parties. Let's take 1999 to 2003, for example, with the Harris-Eves Tories. They used time allocation motions on 67 of the 110 bills that were presented before this House: 61%. In eight years, the Tories never had more than three days of debate on any second reading on any bill, ever.

The NDP must have done better. I listened to the previous speaker and he told me how the NDP would just not stand for this, would not tolerate it. When you look at the record, they actually set the trend for time allocation motions. When they took office, they outdid the previous government, the Peterson government. They didn't double it; they didn't triple it. They outdid the previous government five to one. There were five times the number of time allocation motions.

When they did the classic move where they ripped up the collective agreements across this province of Ontario, there was absolutely no time at all allocated for third reading debate. There were absolutely no public hearings either when the NDP raised the gas tax 3.4 cents a litre—no public debate, no public hearings.

So to stand here as a member of a government who's quite proud of the health care record of this government and be preached to in that manner is something I don't think any member of this House has to tolerate.

The record is very clear. For those people who are at home tonight watching this on TV, the record is clear. This is not a government that likes to use time allocation.

It's a government that would prefer not to use time allocation. But the question must be asked of the opposition parties, why are you holding up the process? Why are you holding up the process when we know people in Ontario need better and faster access to drugs? They want a voice in the drug care system. They know that the government is not getting the value it should be getting when it's expending over \$3.5 billion on behalf of taxpayers in Ontario. We know we need to collaborate with the private sector to help employers manage drug costs, because we know that that is economically a very advantageous thing for the economy of this province.

Despite being entertained for the past hour or so, I think it was a classic example of why those of us who come from the municipal sector prefer people who are to the point, prefer people who stick to the issue, and prefer a debate that's centred and focused and moves ahead quickly to the advantage of the people we're purported to represent in this House.

I am proud to support this motion. I want the consultation on this motion to continue, and I want it to be done at committee. That committee has been scheduled. Members of the public, members of the pharmaceutical industry and pharmacists themselves will be able to avail themselves of the politicians, express their views on this issue and allow us to move ahead to a much better system.

Mr. Dunlop: I'm pleased to be here this evening, although I didn't expect to be here on a time allocation motion. I thought we'd be here continuing debate. I actually take offence at some of the comments made by the member from Oakville, his previous comments. The reality is, in a number of the bills today that we have discussed in this House, we in this caucus have not tried to drag out debate for three or four days. A number of the bills we've debated for just two days.

However, when the now government was in opposition, you took every bill, whether it was important or not, whether it was a major bill or not, and you actually dragged it out so we had to time-allocate it.

Interjection.

Mr. Dunlop: See, he did not explain that. So if you're asking the opposition parties to take every bill to the maximum, we will do that. There's not a question. We've been trying to be fair.

This is a very important bill, ladies and gentlemen, to the citizens of the province of Ontario, and we're seeing time allocation here. We're seeing it cut off. There are a lot of people in the two opposition parties who wanted to speak to this bill, and they're not getting that opportunity. The reality is that this is not a good move on behalf of the citizens of Ontario.

But then, ladies and gentlemen, this hasn't been a good day for the government party, the Liberal Party. I think of three things, for example. One is the embarrassing display by the Premier when he was questioned on Gerard Kennedy's riding, the man who has now disappeared but is still receiving his full pay. When I heard the Premier today respond to the questions, I felt em-

barrassed to be an Ontario citizen, if that was the best we could do, having him respond that way.

Second of all, we listened to the Minister of Natural Resources today respond to the issues in Caledonia, and clearly he doesn't know what's going on in that ministry. If it wasn't for Toby Barrett, the member from Haldimand-Norfolk-Brant, updating the citizens of this province day in and day out, visiting the blockade, talking to the First Nations, talking to the citizens of Caledonia—if it wasn't for Toby Barrett, we would not have any input anywhere in this House.

Today I listened to the minister, who clearly didn't have a clue what was going on, and then I listened to Minister Kwinter. When Minister Kwinter tried to respond to the questions on how much it was costing the citizens of the province of Ontario to have the Ontario Provincial Police forces at Caledonia, he clearly had no idea what he was talking about. He didn't realize that it was costing \$100,000 a week to accommodate the OPP officers who are at Caledonia. He thinks that money just drops out of the sky. Ladies and gentlemen, the citizens of the province of Ontario, those are our tax dollars. We want to know where that money is coming from and how it is affecting all the other police services and detachments where all of those officers are being taken from so they can be at Caledonia.

I expect that the minister would know those types of answers, and he clearly didn't have a clue. He's saying, "The money's just there. That's all part of the budget." Did the minister budget this year, in that 2006-07 disaster budget, for this kind of waste? Is that what he did? He has that kind of money floating around; there's just those millions of dollars sitting there? So today I said, there's likely \$8 million that it has cost the citizens of this province so far for Caledonia, and the minister has no accountability for it, no accountability whatsoever. It's coming, ladies and gentlemen, out of all of the other detachments in this province, and it's affecting public safety and security.

So it hasn't been a good day when you take into account the Premier's comments on former Minister Kennedy, the fact that both Minister Kwinter and Minister Ramsay have no idea what's going on at Caledonia themselves, and now we've got this time allocation motion tonight that is clearly—the opposition has every reason. To try to make fun of the member from Niagara Centre I think is demeaning, because he had a lot of really good comments in his speech this evening and brought forth a lot of topics and issues that the citizens of the province of Ontario should understand when they're dealing with a government that is trying to time-allocate, particularly a bill of this importance.

You know what? All I have to do is to read some comments into the record from pharmacists. Maybe you folks aren't getting calls; maybe the people on the government benches aren't receiving any calls from their small pharmacists. But why would you care about them? You don't care about any small business person. Why would you start worrying about the pharmacists? We've seen no

reason at all for this government to actually think they believe in small business. They put them down every possible way they have. And today we're getting it again, to the pharmacist.

Here's a comment from just one pharmacist. I'm certainly not going to read the guy's name into it and I'm going to tell you why: You'll probably find some way of getting back at the guy. It says:

Dear Mr. Dunlop, "I am writing to express my concern with Bill 102 and the effect that it will have on small independent pharmacists. As it is now, independent stores frequently are unable to purchase at the best available price set by the Ministry of Health. This eats into the existing 10% allowed mark-up, sometimes eliminating it entirely. Cutting the allowed mark-up of 8% and capping it at \$25 will mean that many pharmacists will lose money stocking expensive, complex drugs.

2010

"Also, I was shocked to learn that dispensing fees have increased by 2% since 1993, while inflation for that period has equalled 27%.

"With the future increase in need caused by the aging baby boomer demographic, it is important that Ontario have a strong, vibrant system of pharmacy care. I hope you do what you can to help ensure that independent pharmacists continue to be properly compensated for their contribution to the provincial health care system.

"Thanks for your strong representation of Queen's Park."

I won't mention the guy because, again, I'm afraid you'd find a way to get back at him. That's what we're hearing in this government: your hatred for small business; your hatred for rural Ontario. What have you got against small business? What have you got against rural Ontario? Why do we have to put up with this crap day after day? Why do we have to keep putting up with it? It's an assault on the taxpayer and an assault on the small businessman of rural Ontario. Ladies and gentlemen, Bill 102 is doing that tonight.

I'm really sure we're going to see all these amendments. When we go to committee, as was mentioned here earlier by the House leader, we're going to go to hearings, and I'm sure that all the recommendations coming from these small businesspeople are going to be heard.

Actually what's going to happen at committee, as each one of these people brings forth his or her comments, is that we'll make sure the small businesspeople that do come to committee hearings will get some of the comments that were brought in earlier by the House leader and by the member from Oakville, when they talk about how much strong support they have for small business and for having an open mind towards the people who oppose Bill 102. I just want to say that this has not been a good day for the Ontario government. I think it's quite clear.

Now that my colleague Toby Barrett, the member from Haldimand-Norfolk-Brant, is in the House, I just want to say on behalf of the folks I represent in Simcoe North, many of whom are Ontario Provincial Police

officers who have been dispatched to that area, that we really do appreciate his hard work and his dedication, keeping a close eye and reporting faithfully to the caucus members and to the media, and to act as a mediator, somewhat, in trying to resolve the issue at Caledonia. We know it hasn't been easy for the OPP, it certainly hasn't been easy for the First Nations and it hasn't been easy for the citizens of Caledonia who have had some negative response to this whole issue.

But I can tell you that the one person who has shown leadership in this issue, and tell the members and the citizens of Ontario, is the member from Haldimand-Norfolk-Brant. He's done an extremely good job. I'm proud to say that I sit on the same caucus as Toby Barrett. I wish we could see the same kind of leadership from the government. I wish we could see the same kind of leadership from Minister Kwinter, from Minister Ramsay and from the Premier. Do you know what it is? They're all counting on some sort of magic to resolve the problem, that somehow it will resolve itself. Meanwhile they set the Ontario Provincial Police out there as the blockade that will try to help resolve this, and the OPP are taking the blame for things. We should see leadership from the ministers' offices.

I know I haven't got a lot more time to speak to this. Four or five of my colleagues would like to speak to this bill as well.

I absolutely will be voting against Bill 102. I will be voting against the time allocation. I'm disappointed that we're seeing time allocation on this bill. It's a very, very important bill. But of course we saw it last week with Bill 81. We saw it then and we're seeing it again today. I guess what the government wants us to do is to drag every bill out to the last second so that they'll have to time-allocate everything. I don't think that's the right way. Important bills like this bill, important bills that affect our small business community, that affect our senior citizens, that affect our communities in rural Ontario, should be listened to. Everybody in this House should have an opportunity to have their comments and not have the government cut them off and end debate at such an early stage.

I appreciate this opportunity to speak tonight and look forward to other individuals, other members, speaking tonight as well.

Mr. Peter Fonseca (Mississauga East): In October 2003, the people of Ontario said, "Move us forward. Get us out of this mess that this opposition party, that former regime, put us in." They said, "Fix education, fix health care, fix infrastructure, fix our social services. Make sure we're moving forward, not backwards."

Listening to the opposition, to the member for Simcoe North, you would think that all they want to do is go backwards. They want to go back to coal burning; they want to go back to the spinning wheel; they want to go back to the Model T Ford; they want to go back to cave-man times. That caveman caucus over there just wants to take us backwards.

We want to move forward for the people of Ontario. It's not about the status quo. For Ontario to compete in such a competitive world today, the status quo will not do. The opposition wants worse than the status quo; they want to take us backwards. We want to move forward, and that's where the people of Ontario want to go.

Moving forward, we know that drugs, pharmaceuticals, are a big component of our health care system. We spend \$3.5 billion on pharmaceuticals yearly, and they truly make many of our lives much better, with a better quality of life. They allow people to work who maybe wouldn't be able to work if they didn't have access to certain drugs. They give us longer lifespans. They have been truly remarkable in improving the lives of people in Ontario and all over the world.

We want to make sure that Ontarians have the opportunity to access those innovative drugs that are available. We want to make sure that under our universal health care system that we have here and that we are so proud of and see as a value in Ontario, we will be able to make it better so that we don't take down the amount of pharmaceuticals people have asked us for, but allow people to have more access to many of the innovative drugs that are coming online.

To be able to do that under many fiscal constraints, we have to streamline our system. We have to make sure that our health care system is transparent—as Bill 102 says, the transparency of the Ontario drug system—making sure that we work with all our partners, but always focusing on the patient, and working with our pharmacists, working with our physicians, working with our drug manufacturers, making sure we have everybody at the table so that we can provide everybody, but in particular the patients, with the best possible system under the funding mechanisms we have.

This has happened. The consultation around this piece of legislation has been extraordinary: 250-plus experts have consulted on it. We've looked to other jurisdictions, other places in the world. We've looked to the UK, to the US. We've had well over 100 meetings with 350 people in a six-week period of time. We've met with consumers and patients and had round tables.

This government, being responsible, being one that wants to take a strong leadership role and that is here to govern, wants to make sure we do so in a way that will take us to and create a better model than we have today. That's what we're trying to do: make sure we have a model that is sustainable, that gives more access, that accesses resources we've never thought about accessing before.

Where we saw our pharmacists at one time as just pill dispensers, they are so much more than that. Our pharmacists go to school for many years. They know all about health and wellness, and they know pharmacology and how certain drugs will interact with others and how they will affect people's lives.

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Mr. Leal: Very talented people.

Mr. Fonseca: Very talented people, as the member for Peterborough has said. Therefore, we want to make sure we can access that knowledge, that expertise. What we'll be doing with that is making sure those pharmacists will be compensated and worked into a model that will allow them to help our seniors in the community, take more time with them, and be able to show them how to maybe live a healthier lifestyle, when to take those drugs, and listen to those seniors or those families in terms of how to be healthier.

Also, as we know, we have a doctor shortage in the province, which we are addressing on another front. But we want to make sure that our docs are not wasting their time filling out forms: 30 minutes at least to fill out a section 8 form. We want our docs to be able to be docs, to be able to provide their expertise and advice to their patients and then hand them over to our pharmacists or other health care professionals and practitioners in the community who can create a holistic health care experience. The only way this can be done is the way our government is doing it: by breaking down those silos, making sure we all are working in partnership with our pharmacists, our physicians, our drug manufacturers, our nurses, our nutritionists, our family health teams.

We are working toward a sustainable, universal health care system here in Ontario. That's what we're committed to. I don't know what the opposition is committed to. They're not committed to a sustainable health care system. They're committed to something else. I've heard "two-tier," "privatization"—all sorts of other things. I just know what we're committed to: We're committed to the people of Ontario and the best health care system that money can buy.

Ms. MacLeod: It's a pleasure to speak after this young gentleman here, who calls me a caveman. As a 31-year-old working mother, I've never in my life heard anything as disrespectful of my caucus, of my colleagues and of me. I'm going to tell you something: I could just keep giving him the rope because, my goodness, he'd do something with it by the end of the evening if he kept talking.

On more serious matters—and I understand that you have to get into hyperbole when you're so ashamed of what your government is doing by closing down debate—I assure the member opposite and the honourable member from the Niagara region that the likelihood of me actually supporting this motion of closure is about as likely as him putting on an Ottawa Senators jersey and standing up for Ontario in the Stanley Cup.

Large drug companies and large drug chains will benefit from this bill; not patients, not small pharmacies and not Ontarians. I'm going to quote CIBC World Markets, which said, "As currently structured, the changes are generally negative for the pharmacy industry, but particularly troublesome for smaller, independent players.

"As the largest player in Ontario, Shoppers will be impacted. However ... Shoppers" and others have options

available to them that “are not possible for smaller independent players.”

In my own community, and I’m not afraid to name names, a pharmacist in my community, Danny Souaid—he runs Nepean Medical Pharmacy—tells me he’s got great concerns that this legislation can seriously harm retail pharmacies, especially independent pharmacies in Ontario. He tells me that he doesn’t believe the present government understands how important independent pharmacies are to the economy, especially to Ontario’s health. He spoke to the Ontario Pharmacists’ Association to let them know that pharmacy owners have not seen a reasonable dispensing fee increase in over a decade.

He has other concerns. He believes that Bill 102 will hurt pharmacies tremendously, and he tells me that he will have to lay off employees at the end of the summer. I guess it’s caveman thinking that we actually want to stand up for the economy in our rural communities.

Mr. Dunlop: We wouldn’t want to do that.

Ms. MacLeod: We wouldn’t want to do that.

Collectively throughout the province, he believes that many jobs will be lost and wages lowered to the point where the profession will no longer be attractive to anyone considering a career in pharmaceuticals. Again, that’s just backward thinking according to the Liberal Party and the member from Mississauga East.

I’d hoped that these issues would have been addressed in this Legislature during this debate. I guess that’s not going to happen. I spoke with Barry Dworkin while I was on a radio show on Sunday in my community. Barry has an open-line program, Sunday House Call, on CFRA, and he told me he opposes this bill. He’s concerned as a doctor that when he prescribes a brand name medication to one of his patients and then he’s not able to follow through with that because they’re going to get the generic instead, he’s afraid for their safety and health and well-being.

I think more debate and more discussion is required on this issue. The government must take the concerns of Ontarians very seriously. I think it’s also very disrespectful that we’re closing down this debate after the government chose to leak a document. The McGuinty Liberals assured the public that their drug legislation was not reference-based pricing. We now have a leaked document that says it is.

Now, Mr. Speaker, if your doctor writes you a prescription for a four-door car, the McGuinty government can decide to give you a scooter or, in some cases, nothing. That’s what my leader said today. It’s what’s best for the McGuinty government in this legislation, not what is best for Ontarians. I think what we have to do is be straight with the people. We have to encourage more debate. We have to be in this Legislature respecting the people, respecting the views that are coming forward to us and allowing them to come out with their various points of view rather than ignoring debate.

I see that my time is almost up, so I’m just going to close with a quote from a member of this esteemed chamber. “Closure motions really are inherently bad for

our parliamentary system and prevent members of all political parties—government members, opposition members, third party members—from fully participating in the debates of the day. They’re designed to limit those discussions.” I really appreciate Dwight Duncan saying that for us and putting it on the public record, and that concludes my comments.

Mr. Dunlop: On a point of order, Mr. Speaker: I think we should give the member from Mississauga East an opportunity to apologize for his comments, especially as they referred to the member from Nepean–Carleton. I think she brought a great point out. Can we give him that opportunity? Could we ask for unanimous consent to allow the member from Mississauga East a chance to apologize to Ms. MacLeod?

The Acting Speaker (Mr. Kevin Daniel Flynn): Is there consent? I heard a no.

Further debate? The member for London–Fanshawe.

Mr. Khalil Ramal (London–Fanshawe): You look wonderful in this chair, Mr. Speaker. Thank you very much for allowing me to speak for a couple of minutes on this bill.

First, I want to commend the minister for bringing forward such a bill. It’s important for the people of Ontario. I think all the people of Ontario have now listened to us and commend the minister and the government of Ontario for bringing such a great initiative to support them and to help them, especially when we spend \$3.5 billion on a yearly basis to buy drugs. If we are able to save 10%, it would be a great way to help the people of this province, to list more drugs and to enhance the quality of drugs. That’s why I’m standing up today to support that bill.

The member opposite, the member from Nepean–Carleton, mentioned a couple of names, probably her friends, who oppose the bill. Well, that’s normal. Whatever you do in life, not all of the people are going to support you, not all of the people are going to praise you. Some people are going to go with you and some people are going to go against you. At the end of the day, you have to do whatever is good for the people, for the general people, for the public in the province of Ontario.

That’s why this bill is a great bill in order to enhance our health ability, give us extra money, extra dollars. We’re going to save taxpayers’ dollars by 10%, and this 10% is going to be reinvested back into health care to buy more drugs, list more drugs, and elicit more benefit for the people of this province and also enhance quality.

I was pleased this afternoon listening to the Minister of Health when he was talking about how we can reinvest the money. Many questions came from the opposite side accusing the government that this money is going to be diverted back into different envelopes. He very much assured the people of Ontario that every penny that is going to be saved from this bill is going to be invested in health care to list more drugs.

2030

Another thing: Some people were also questioning the ability—you know, the big question that similar drugs

maybe don't have the same value, the same effect. He assured people that this measure, this bill, is going to enhance the drugs. It's going to benefit the people of Ontario and give them great value for the dollars they invest in health care and drugs.

Mr. Toby Barrett (Haldimand–Norfolk–Brant): I appreciate the opportunity to address this time allocation motion, Bill 102, the drug system bill. I suggest that we have this time allocation partly, I feel, out of fear on the government benches, fear of any further analysis of the details of this particular legislation. This evening, we've heard of a number of time allocation motions—concern, I would again posit, from the government side that their true agenda is being exposed. I think of the LHINs debate and, most egregiously, how they ran from a debate about McGuinty's refusal to dismiss his Minister of Transportation, Harinder Takhar, for allegations of unethical behaviour.

Our leader has exposed some of the facts with respect to the McGuinty agenda on pharmaceuticals and pharmacies. We've learned over the past few days that this government intends to have bureaucrats interfere in the patient-doctor relationship, the patient-pharmacist relationship. On this side of the House, we continue to believe that professionals—doctors, for one—are better prepared to prescribe drugs than the McGuinty government.

I would like to expose some of the facts about this legislation, facts that the McGuinty government is trying to hide by once again cutting off democratic debate. I too would like to make reference—I'll take an excerpt from a letter I received. It's from a local pharmacist. It goes, "The current legislation recognizes the critical role of Ontario pharmacists, front-line health care providers who help manage patient outcomes. For the first time, pharmacists will be paid for the skills, knowledge and training they have to deliver value-added professional services such as medication management, patient education and chronic disease management."

It kind of goes downhill from there. To quote further from the same letter: "However, while the government's plan to pay pharmacists for providing direct patient care services is laudable, other changes proposed in this bill, the Transparent Drug System for Patients Act, could compromise the sustainability and the viability of community pharmacy. Based on the information available, some of the proposed changes may have a direct and negative financial impact on pharmacies throughout the province, and it is not clear if these changes will be counterbalanced by any of the other new sources of income" that this particular pharmacist made mention of in his letter.

He continues, "During second reading of Bill 102 ... Minister Smitherman recognized 'issues about the sustainability, about the economics of pharmacy' and said government has a particular obligation to ensure that the economics of pharmacy remain vital."

Pharmacists say that Minister Smitherman should be taken at his word on this point. That may well be some-

thing that's difficult to do about any minister associated with the present government.

Pharmacists are concerned. They're concerned about the clarity of the government's proposed changes to the drug system, and very obviously, in small-town Ontario they're concerned about the impact on pharmacy. The long-term sustainability of community pharmacy must be a core principle as this debate continues.

There is a great deal to talk about in this legislation beyond making references to cavemen or cavewomen or cavepersons, whatever the appropriate phrase would be.

I have another letter, again from one of my constituents, also a pharmacist. We should not be surprised. It states, "As a constituent and an individual who is dramatically affected by Bill 102, I would implore you to put forward the efforts required in the legislative process to effect change to this draft."

He itemizes a number of concerns:

"(1) More clarity is needed in the legislation. Many sections can be interpreted in a variety of ways, with a resultant wide range of impacts to my business and patient care. For example, there is discussion about payment for pharmacist services, but no fee schedule or list of eligible services are outlined."

"(2) The additional professional service revenues in the bill are drastically overshadowed by the changes to generic pricing and restrictions on what the government is terming 'rebates.' I may need to reduce my hours, close my store or charge patients additional fees for services that have been available as part of the usual and customary dispensing."

A third concern, and I think this was mentioned by the member from Simcoe North: "The markup cap of \$25 results in my pharmacy actually losing money on many high-cost medications. As a result, I will not be able to carry those drugs."

"(4) The changes in allowable generic price to 50% of brand. This needs to be on a go-forward basis, and not retroactive, but this is not clear in the legislation."

"(5) It is unclear if these changes apply to all prescriptions in Ontario or only those paid for by Ontario drug benefit."

"(6) It is implied that long-term-care service compensation will change, but"—again—"this is not detailed."

I am pleased to have an opportunity to make reference to these letters. I very recently met with a total of probably 13 small-town pharmacists throughout my riding, primarily in Norfolk county. I have communicated by phone with Haldimand county on this issue as well.

So the upshot is that what we have here is a sloppy piece of legislation. It appears to be riddled with errors and, obviously, vagueness and is opposed by the 13 pharmacists I have met with to date.

As we know, marketing allowances are a crucial source of funding for the majority of pharmacies to provide service, services such as education or the delivery of patient-focused programs. This is a crucial area. I spent 20 years in the alcohol and drug business through the Addiction Research Foundation, and so much of the work

I did over the years was with respect to pharmaceuticals, prescription drugs, over-the-counter drugs. I would plead guilty myself. I have referred a very large number of people—hundreds, perhaps thousands of people—to pharmacies during the years that I was a consultant with that organization. Just imagine the number of requests they get—probably, in many cases, a request for information on virtually every prescription they fill.

Local pharmacists understand the generic industry. They understand that this industry can continue to invest in marketing practices directed to pharmacies and that this must be done through a transparent process. But how do we know that the generic companies will be allowed to invest the same amount as they do today, and how do we know that there will be no limit to those investments? Pharmacists have not yet been told what “acceptable marketing practices” are. I suppose I would say that the government is essentially treating the small-town pharmacists whom I’ve been talking with—they’re being kept in the dark and treated like mushrooms, essentially.

2040

On enforcing drug prices, local pharmacists are asking what process the government will use to reconcile the current situation, in other words, the difference between the selling price and the list price. How will the government protect local drugstores from potential future price increases? As you may know, this government intends to increase the dispensing fee from \$6.54 to \$7, and in the same swipe, to decrease the markup. The markup will go from 10% to 8% with a \$25 cap.

This inspires a number of important questions in my mind.

First, where do these numbers come from? How did the government derive these figures, given that it is widely accepted that it costs more than \$10, on average, to provide a prescription to a client or a doctor’s patient? Where are the figures? Is this just being made up as we go along?

Second, has the government considered the impact on sensitive patient groups? We think of people requiring very intensive medication, for example, HIV/AIDS, cancer, MS, Crohn’s disease.

I have another letter. It reiterates a number of the concerns. “In the context of pharmacy reimbursement, it is unclear how changes to pharmacy reimbursement will enable community pharmacies to continue to provide high cost, complex medications”—medications required for some of the ailments I mentioned earlier—“given the proposed decrease of the markup from 10% to 8%, with a cap of \$25.” My constituent goes on to say, “Based on my practice and that of my colleagues, this change will negatively impact pharmacies who provide medications for those patients such as those with HIV/AIDS, cancer, arthritis, multiple sclerosis or Crohn’s disease. As a consequence, such patients may not be able to access their medications at their local pharmacy.”

I know this Minister of Health is reluctant to hear this from me or essentially pay attention to me. I do ask that

the Minister of Health listen to my constituents and to my pharmacy constituents.

I have another piece of information passed on during a meeting in my const office last Friday. “I want to tell you clearly, as a local pharmacist, I am committed to serving my patients and my community in their best interests. Furthermore, I believe that Ontario pharmacists are ready to assume their enhanced role” as described in this present legislation. “But addressing concerns about the sustainability of pharmacy is critical to making it happen, for the benefit of patients, pharmacists, and the health care system we value.”

These are words from my constituents, specifically directed to the Minister of Health and Long-Term Care. Essentially, through this presentation, we are asking the Minister of Health and Long-Term Care to consider the views of this particular stakeholder group, the people who run our local drugstores, establishments that, certainly in my riding, are so important for the service they provide in the far-flung communities of Haldimand, Norfolk, Brant, New Credit and Six Nations.

Just to sum up, it’s apparent to me why this McGuinty government is hiding behind yet another time allocation motion, the McGuinty government that would like to hide from the consequences of its very own legislation enshrined within this particular bill. My feeling is that they do not want to hear about any of the destructive impact this legislation will have on the bottom line of the smaller drugstores across this province. There is a threatened closure for some of these businesses as a result of this particular legislation.

I’m concerned that the government doesn’t want to hear about the impact this could have, by extension, on the community, on Main Street, and, most importantly, the impact it would have on clients, on patients who access the medications they need from these pharmacies. They don’t want to hear about the risk that pharmacies will no longer be able to stock the kinds of medications that will be impacted. I’m referring to the high-cost medications, the more complicated types of medications.

This government does not want to hear criticism. They are making policy as they go along, policies that, to my way of thinking, are swimming countercurrent to much of the stream of thought that I was hearing in my constituency office.

This government doesn’t want to hear about a plan to install a bureaucrat in the middle of what I consider the very important patient-doctor-pharmacist relationship. We’ve seen the questions from John Tory. This health minister won’t give our leader a straight answer during question period. We have an opportunity this evening to hear some straight answers. We may hear the member opposite address this bill, debate this bill and debate this time allocation motion this evening.

I appreciate the time to address this bill. I will report back to those 12 or 13 pharmacists I have been in contact with. I will allocate the rest of my time to my colleague—unless the government wants to speak up.

Mr. Leal: I note, during the time allocation debate this evening, that when you look from 1999 to 2003, the Harris-Eves government used time allocation motions on 67 of the 110 government bills that received royal assent. In that calculation, that's about 61% of the time. It seems to me that that's a real Kremlin-like approach to running this Legislature, shutting off debate 61% of the time, not letting the people of Ontario find out what's going on.

My friends in the NDP have a sorry record too. On one of the most controversial pieces of legislation that ever went through this Legislature, the social contract, which ripped up every contract of the province of Ontario in the public sector, there was no time for third reading debate, and closure was used to push that through. It was shameful that they would resort to such tactics. Let me tell you, the public sector unions in Ontario still remember that sordid history with the NDP government.

Let me talk about Bill 102 for just a moment. Ontario spends \$3 billion a year in acquiring drugs, so it seems to me that we've got to make sure that the folks of Ontario get the best value possible for that expenditure of \$3 billion of their money. That's exactly what Bill 102 is all about: to make sure we have the drugs on time, as needed by the people of Ontario, to make sure they're getting value for every tax dollar spent.

This bill will go to committee. I want the people out there who are tuning in—folks from Peterborough, at about 8:15 this evening, watching this—to know that this bill will be going to committee. It will be an opportunity for the people of Ontario to make representations to that committee, an opportunity to express their concerns about this bill. Collectively, as we move through this process, we will look at amendments to Bill 102 to make sure we have the best piece of legislation possible to bring back to this Legislature for third reading debate, and again give the members the opportunity to talk on this bill.

2050

Mr. Gerry Martiniuk (Cambridge): I'm pleased to be able to discuss the resolution for closure brought in with regard to Bill 102.

The question I ask is: What's the hurry? This isn't the most important bill. Why are we rushing this through at the last minute? I'd like to, as background, give you the Minister of Health's attitude towards the drug plan and drugs in general. Reported by the *Globe and Mail* on May 6, in an article by Lisa Priest:

"Ontario's Health Minister is encouraged by a proposal that would allow hospitals to charge cancer patients for effective, intravenous medications that are not covered by the public health care system, saying that he believes 'it's the right thing.'

"There's no final decision yet. We've done some due diligence and obviously we're closer to having a policy. And in my heart, I believe it's the right thing."

It's the first time I can remember a Minister of Health of any party saying, in one simple breath, that not only is he in favour of a two-tier health system, or at least drug

plan, but he is in favour of user fees at the same time, and in this case 100%.

As one group leader of the London and District Melanoma Support Group said, "Imagine delaying treatment for lack of money, having to fundraise for treatment; putting your kids' post-secondary education at risk, potentially having to sell your house because you can't keep up the mortgage payments, which you incurred to pay for treatment, because you can't work."

Maybe we know what the hurry is. The freight train is on the track for a two-tier system; one for the rich and the other for the rest of us. And they are going strong. That's the hurry.

As far as closure goes—I must admit I have some time for Minister Duncan, now as the Minister of Finance, but in the past he was the House leader. Let's hear what he had to say about closure motions in this place. In 2000, April 27 to be exact, he said, "If you're truly interested in democracy, as you say you are ... I suggest ... that you won't use the great mallet of closure to stifle this Legislature and to prevent public input into this bill. If you're all about democracy, you ought not to be afraid of that."

I can believe that I could hear that from the present House leader of the Liberals, the member from St. Catharines. That's the kind of thing he would say, I'm sure. But Mr. Duncan said it for him, and I must adopt Mr. Duncan's words. I do have a lot of time for things of that kind.

He goes on to say, by the way, on October 26, 1998, "Closure motions," and that's what we have, what we're doing this evening, "really are inherently bad for our parliamentary system and prevent members of all political parties—government members," being the Liberals in this case—"opposition members, third party members—from fully participating in the debates of the day. They're designed to limit those discussions." I'll adopt that too.

We should have full debate, not just for the third party, but also for the loyal opposition and the government members, the long-suffering backbenchers who are there to raise their hands at the bidding of the Premier. Not this time. Let's see if we can change the vote this time.

Mr. Gilles Bisson (Timmins-James Bay): I want to thank my colleague Mr. Kormos for leaving so much time on the clock for me to participate in this debate tonight. I just want to say to Peter, if you're watching back home, which I know you are—you're probably in your office doing that—I appreciate all the time you left.

Anyway, I have to say, another time allocation motion—my, my, my, how things don't change around this place. I was just talking to a good friend of mine who has had the opportunity to witness this particular type of motion from both sides of the House a couple of times. And it's always interesting, as a member who has been around here for some time, to listen to speeches when it comes to time allocation, because I've been listening to the speeches of the members of the government defending their God-inherent right to rule and to do what they've got to do because, by God, they won the last

election, and they get to do what they want because they've got the majority over there.

I just remind members who just got here or have been here for two or three years that the parliamentary system is set up in a particular way. There's a rhyme and a reason to why we do things. This system, as good and as bad as it might be, is a system where the majority government is made up of sometimes not the majority of the voters of the province that they're voting in, but there is a thing called the opposition. What makes this Parliament work or sometimes not work—but I would argue work more times than not—is the ability of an opposition party or opposition parties to raise legitimate debate, to raise legitimate concerns when it comes to a particular bill and to hold the government's feet to the fire.

The problem we've had over the years is this place has become much more centrally controlled by the people who work in the Premier's office, the corner office, as we call it. Far too often, it is those unpaid people who work for the Premier, who are unelected—I shouldn't say unpaid; they're paid very well. It's those unelected people who work in the Premier's office who basically make all the calls, and then members of the government come in here and defend the decisions of these overpaid, unelected people who work in the corner office, who are telling you to serve the agenda of whoever sits in the corner office. I just say, that's not what this place is supposed to be about.

I've had an opportunity to debate closure motions from all parts of the House and, you know what? Basically, I used to make some of those dumb arguments, too. Over the years, I figured out that they were pretty dumb in the first place. The basic problem we have is this institution, I think, needs to change in order to make sure that there is adequate opportunity for citizens to find their voice in debate through members of the opposition and members of the government, so that you can have a rational debate about what is an important issue.

I'm prepared to admit that the bill the government wants to put forward is substantive and deals with one of the issues that is probably not central, but fairly important, to the overall cost of running our health care system. I think we can have a healthy debate about how we contain the costs of our public health care system in order to make sure we have the dollars to sustain it over the longer term.

This Parliament, this legislative system we have today, doesn't allow us to do that in any real way, because we know the corner office is going to decide what's going to happen here, the corner office is going to decide what is going to happen on committee, and at the end of the day, the good work that members can be doing on behalf of the people we're here to represent sometimes doesn't get done because of that. I would argue that we need to have some changes.

Now, this government is saying that they're prepared to move forward on the whole concept of changing the electoral system to something we see in other countries, which is proportional representation. I will be the first to

admit that it is not the be-all and the end-all to the solution of our problem, but certainly what we have now has worked well in the past. We shouldn't throw out the baby with the bathwater. The British parliamentary system has been a very good one to Canada. All the things we have today, I say, are because of the British parliamentary system. If we had the American system, we would still be in private health care, we would still be reactionary, and we would be doing just as our friends to the south are. Let's not say that the British parliamentary system doesn't work. The challenge is, how do we modernize the parliamentary system to reflect the society of today? Parliament today has to deal with much more complex issues than we used to a hundred years ago or, I would argue, even 16 years ago when I first came to this place.

The debate around drug prices, the sustainability of drug prices, how we should dispense and what we should dispense are matters that this Legislature should be dealing with at length. There is nothing wrong if we have to take a winter to do this and do it properly. There is nothing wrong in taking the time that we need at committee to do it properly so that, at the end of the day, we have a rational debate about what decision this Legislature should take in the end in order to deal with what the crux of the issue is.

There's not anybody in this House who is not going to argue or agree that there's a problem in how we sustain our public health care system. We all agree, the three parties, we want a public health care system. We all agree it has to be sustainable. How do we do that? It's not by guillotine motions of closure we're going to come to that conclusion, and it's certainly not going to be by the process set out by the person who occupies the corner office—I don't care if it's Bob Rae, Mike Harris, Ernie Eves or, in this case, Dalton McGuinty—that we're going to get to the solution.

It's by rational debate in this Legislature, allowing members to do their job. It's not by doing time allocation, but by allowing proper debate on the issue so that we can represent the views of those people we talked to in that debate, then referring the matter off to a standing committee of members who are charged with the responsibility of taking what was said in debate, taking what was said at the public committee process and coming back with recommendations about how we deal with the crux of the issue, because I can tell you, my friends, we ain't going to deal with it this way. What we are going to end up with is a flawed bill in the end.

2100

I agree with the concerns raised by the members of the opposition—both, obviously, us as New Democrats, but the Conservatives. There are a lot of concerns about where this bill is going to go in the end. We don't disagree that we need to find a way to deal with how we pay for it, but I think what you're going to get in the end, as far as a product, is not what you want, because it's not you, it's not you and it's not you who's going to make the decision, or me; it's going to be some guy in the corner office who's going to make those decisions, and

we will be charged with doing what the corner office tells us to do.

I think the sooner the public comes to the realization of that and members take charge of that, the sooner we are going to be in a position to try to find some solution so that at the end of the day this Legislature becomes more relevant, there isn't a need for time allocation, and we charge members with the responsibility to do what they're elected to do, and that is to find solutions to the public policy issues that we're charged to deal with. If we do that properly, and if it takes us a year and we don't use time allocation and we come up with a better product, my, what a great, wonderful thing that would be.

Mr. Wilkinson: I'm delighted to enter into the debate this evening and to join my friends the members from St. Catharines, Oakville, Mississauga East, London-Fanshawe and the member from Peterborough. I think our government is on its feet this evening on this very bill because this bill is about the right drug for the right person at the right time for the right value. That's what this bill is about. We believe that this bill needs to move forward. We believe it needs to move forward tonight to its next logical progression in the democratic process here at Queen's Park, which is to get it to committee for additional public input and for clause-by-clause.

There hasn't been a major piece of legislation introduced by the McGuinty government that hasn't been amended at second reading debate for clause-by-clause consideration. We don't go into a debate with a bill at first reading or at second reading thinking that we are absolutely right on all things. We do this in an open, transparent way. I contrast that with the two previous governments, who seem to have a certain penchant for going to the guillotine just as quickly as possible. It has already been said tonight that the NDP, as compared to the Peterson government, used time allocation five times more. They look like a bunch of pikers compared to the Harris-Eves government.

I find it interesting when I listen to the members of the progressive amnesiac party, who somehow get up here and talk about time allocation. I quote my good friend, the member from Simcoe North. He said that when they were in government, time allocation, when they had to do it—and they were forced to do it some 67% of the time for 1999 to 2003—they were forced by who? By the opposition. "It was the opposition's fault." But tonight, when we want to take this bill for the people, for patients, for transparency, for accountability, we want time allocation.

So I take it, logically then, sir, in debate it would be your fault. Is that what it is? It must be the member from Simcoe North, because I say to the members opposite: When you were using time allocation 67% of the time, how many times—just talking about the members here this evening—how many times did the member for Leeds-Grenville vote against his party and against time allocation? None. How many times did the member for Simcoe North vote against his government? None. How many times did the member from Haldimand-Norfolk?

None. How many times did the member from Cambridge? None. But oh, amnesia is extant in the land here at the Legislature, because they forget all that. Now, it's not our fault. It must be their fault. We must be forced to do that.

I found it quite interesting when the member from Niagara left of centre gets up here and goes on and on about the fact that there's no debate. He gets up every day and he says, "I don't want to work at night." When there's an evening sitting vote, the NDP get up every time and say, "I don't want to work at night. We want to debate, but I don't want to work at night." I know that Mr. Tabuns has spoken for 20 minutes on this bill. I know that the critic Shelley Martel has spoken for 60 minutes. My friend Mr. Prue has spoken for 20 minutes. It sounds to me as if there has been some debate. And I think Mr. Kormos was up here tonight speaking quite at length about this time allocation motion.

Mr. Dunlop: He was talking about Kennedy.

Mr. Wilkinson: I agree. The member from Simcoe North mentioned that perhaps Mr. Kormos careened off the topic ce soir and moved over to some other topics that were entertaining, at best, but had nothing to do with this bill.

I want to say to my friend, my new friend, from Nepean-Carleton that it's amazing. You must be hanging out with that John Tory character, because I've said many times that I believe him to be somewhat of a factual cherry-picker. The member from Nepean-Carleton was telling us that somehow this is some secret plan for reference-based pricing. I distinctly remember the Minister of Health receiving a very clear question—

Interjection.

Mr. Wilkinson: I say to the member from Haldimand-Norfolk, who said the answer wasn't clear, the question was, "Is this about reference-based pricing?" The Minister of Health got up and said no. It can't be any clearer than that, friends on the opposite side. It can't be any clearer than that, because what's in this bill is what we are debating this evening.

Interjections.

The Speaker: There's entirely too much assistance for the member for Perth-Middlesex. Perhaps we could remember that we need to show respect for the people who have the floor. One member gets to speak at a time, without interruption. Member for Perth-Middlesex?

Mr. Wilkinson: Mr. Speaker, I am debating, actually talking about what the members opposite were talking about this evening, going systematically through and refuting some of their comments, reminding them of some of the history of this place, though I am, like others, new to this place. But it has a very long history. Hansard reveals all about one's voting record and how one dealt with other issues.

There is a need to move forward on this bill. Although we've heard concerns—the member from Haldimand-Norfolk said that his local pharmacist said the bill is laudable but could have some problems. Well, that's why

we need to go to committee. We need to clear the air of any concerns.

But when I look at the stakeholders that have concerns: there could be problems for big pharma, there could be problems for generic pharma, there could be problems for big pharmacies, for little pharmacies, for pharmacists, for doctors. There could be problems. Who is speaking for the patient? What do patients tell us? Patients tell us that they want a drug bill, they want reform. They don't accept the status quo. They want transparency and they want accountability. That's what the patient wants.

We have the interest of the taxpayer at heart, all of us in this House, and I know the taxpayers are saying, "If we're the biggest purchaser, we should get the best price. We're not particularly enamoured of the fact that we as taxpayers are spending money for marketing schemes."

I look forward to listening to the parliamentary assistant to the minister, my good friend from Mississauga South, when he enters into the debate this evening.

Mr. Miller: I am pleased to enter the debate this evening. The member from Timmins–James Bay was complaining about the amount of time. In my short two minutes I wanted to get on the record some concerns of some constituents of mine, particularly small pharmacies from rural Ontario that are concerned about this bill.

I will very quickly read part of a letter I've received from a constituent in an e-mail:

"My current understanding of Bill 102 leads me to believe that the viability of my business is in question. I am certain that many or most independent pharmacies are in the same position. Please read the attached letter and allow me to meet with you to explain personally the impact it would have on my business and my customers."

"Dear Mr. Miller:

"I am writing to you about the recently introduced Bill 102, the Transparent Drug System for Patients Act, 2006. Should the sweeping changes to the Ontario drug benefit program be passed, it will unfavourably impact the economic viability of pharmacies in Ontario, and it will adversely affect patient care.

"I know that there was some consultation with the stakeholders"—I don't have time, I can see, to go through the whole thing, so I'd like to go through the points.

"As a constituent and an individual who is dramatically affected by Bill 102, I would implore you to put forward the efforts required in the legislative process to effect change to this draft. Some of my key areas of concern include:

"More clarity is needed in the legislation. Many sections can be interpreted in a variety of ways, with a resultant wide range of impacts to my business and patient care. For example, there is discussion about payments for pharmacist services, but no fee schedule or list of eligible services are outlined," and he had a whole list of questions. That comes from Gordon Lane, BSc, Pharmacist, Lane Family Pharmacy in Parry Sound.

2110

That's why it's a bad thing that the government is forcing this legislation through by having the very prescriptive time allocation motion being debated this evening, because there are countless pharmacists and others who are concerned about the implications of the bill, so we need to take time and the due process to consider all these concerns.

Mr. Tim Peterson (Mississauga South): It's a pleasure to rise to address the Transparent Drug System for Patients Act, 2006, also known as the right drug for the right person at the right price. I'd like to thank the members from Mississauga East, Oakville, London–Fanshawe and Perth–Middlesex and also the opposition members from Niagara Centre, Nepean–Carleton, Simcoe North, Haldimand–Norfolk–Brant and Leeds–Grenville.

Interjection.

Mr. Peterson: And also our member from Peterborough. Thank you.

I wish the members opposite had spent more time focusing on the content of the bill rather than the fact that it's been time-allocated. We are presenting this bill because, for over 20 years, people have said that the drug system in Ontario needs fixing. The system is broken and we are fixing it. When we decided to fix it, we undertook a substantial evaluation of it. We appointed the Drug System Secretariat in June 2005, consisting of Helen Stevenson and Brent Fraser, to do an objective, dedicated system-wide review. They talked to 250 experts worldwide, visited the United Kingdom and the United States, received 100 submissions, had 105 meetings with 350 stakeholders and had public forums with patient groups and public focus groups for research.

What they found was that the supply chain is not transparent or fiscally accountable to the public or private payers. They found that the price paid by government does not reflect the true cost of the drug. They found that brand-name manufacturers' prices are inflated due to high unnegotiated prices as well as unagreed-to price increases. They found that generic manufacturers' prices were inflated through the difference between the drug benefit price and the selling price, as well as unsolicited price increases. They found that manufacturers increased the price of their drugs and the cost was passed on to the government. Our only way of dealing with that is to delist a drug, and you can just imagine if you were a patient in the middle of a treatment and had your drug delisted. The government also, it was found, was not leveraging its \$3 billion of purchasing power. The government is a price taker, accepting the prices by manufacturers, not negotiating them, and we needed to be more active and more aggressive in our negotiations.

So there was an opportunity here, an opportunity to achieve better results in better access to drugs in a transparent manner, not in a poorly understood manner done in secrecy. We needed to include all the stakeholders. We also needed to have collaboration with all aspects of the

private sector to help employers manage drug costs and remain economically competitive in Ontario.

The health care system remains an advantage to Ontario employers. For the Big Three automakers, which cover 250,000 Ontarians, health care is the biggest competitive advantage and one of the most compelling reasons to invest in Ontario. Major employers in Ontario contribute significantly to the health care system: 5.5 million people employed in Ontario with private group plan coverage. The investment in health benefits totals \$11 billion, combined with a payroll of \$220 billion. Drug plans constitute the most significant component of an employer's health plan liability.

After all this consultation, we found that: patients need better and faster access to drugs; the patient needs a voice in the system; the government is not getting value for money; the government is not leveraging its \$3.5 billion of purchasing power; and collaboration with the private sector to help employers manage drug costs is necessary to remain economically competitive.

The five areas we focussed on: improving access for patients to drugs; the strengthening of our position as a customer to get value for money; the promotion of appropriate use of drugs; the rewarding of innovation; and the strengthening of the governance and operations of the drug system.

In so doing, we appointed an executive officer. During the consultations, the Drug System Secretariat heard many concerns about the current review process. Part of the responsibility of the EO is to maintain a drug benefit list. As a result, a regulation amendment is not required each time a change is made to the benefit list. This process will be done openly and transparently so everybody can see why the decisions are being made and the timelines in which decisions are being made. The drug decisions by the EO will be done in consultation with patients, doctors, manufacturers and pharmacists in an open, transparent format.

We're also constituting a committee to evaluate drugs. The committee to evaluate drugs will report, in the beginning, to the drug secretariat and then eventually to the EO. All its deliberations will involve stakeholders, patients and will be publicly posted.

We are including two patients as full members of the committee. Ontario will be the first province in Canada and one of the first jurisdictions worldwide to give patients an active role in both decision-making policy and policy-setting for drugs.

We are also formulating a pharmacy committee. I'd like to commend Mr. Kealey, head of the OPA, for his strong vision of the role that pharmacists and pharmacies can play in the drug system of the future. The committee will consist of representatives from these various groups: the Ontario Pharmacists' Association, the Ministry of Health, hospitals, physicians, patients and the College of Physicians and Surgeons of Ontario. This committee will evaluate the current professional services and roles of pharmacists and their future in the management of the integrated drug system.

In the reimbursement of pharmacists, we are increasing the dispensing fee and we are decreasing the mark-up allowed, but overall we expect to have a neutral result. If any pharmacists don't believe this is the case, I look forward to receiving their submission.

We will also be constituting the drug innovation fund and funding it with \$5 million. This also will be administered by the drug secretariat in the beginning and then the executive officer, and it'll play an integral role in helping bring new drugs to Ontario.

This bill goes to committee on May 29 and 30, and June 4 and 5. If anyone wishes to submit their comments and analysis before that, they will be welcomed by me and they will be forwarded by me to the minister and ministry.

The direction of this bill is very important to Ontario and Canada. It is important because it will help maintain an efficient, cost-effective health system that gives us a large advantage in attracting and maintaining industries in Ontario. It is also more important because it will continue to support an intrinsic characteristic of Ontarians, indeed Canadians: that of caring and sharing.

In conclusion, with the Transparent Drug System for Patients Act, 2006, we will have the right drugs for all at the right price. Thank you very much.

The Speaker: Further debate? There being none, Mr. Bradley has moved government notice of motion number 144. Is it the pleasure of the House that the motion carry?

All in favour will say "aye."

All opposed will say "nay."

In my opinion, the ayes have it.

Call in the members. This will be a 10-minute bell.

The division bells rang from 2120 to 2130.

The Speaker: All those in favour will please rise one at a time and be recognized by the Clerk.

Ayes

Arthurs, Wayne	Flynn, Kevin Daniel	Milloy, John
Balkissoon, Bas	Fonseca, Peter	Patten, Richard
Bentley, Christopher	Gravelle, Michael	Peterson, Tim
Berardinetti, Lorenzo	Hoy, Pat	Ramal, Khalil
Bradley, James J.	Jeffrey, Linda	Ruprecht, Tony
Brownell, Jim	Kular, Kuldeep	Sandals, Liz
Chambers, Mary Anne V.	Lalonde, Jean-Marc	Sergio, Mario
Craitor, Kim	Leal, Jeff	Smith, Monique
Delaney, Bob	Levac, Dave	Smitherman, George
Di Cocco, Caroline	Mauro, Bill	Wilkinson, John
Dombrowsky, Leona	McNeely, Phil	Wynne, Kathleen O.

The Speaker: All those opposed will please rise one at a time and be recognized by the Clerk.

Nays

Barrett, Toby	MacLeod, Lisa	Runciman, Robert W.
Bisson, Gilles	Martiniuk, Gerry	
Dunlop, Garfield	Miller, Norm	

The Clerk of the Assembly (Mr. Claude L. DesRosiers): The ayes are 33; the nays are 7.

The Speaker: I declare the motion carried.

It now being past 9:30 of the clock, this House stands adjourned until 9 of the clock tomorrow morning.

The House adjourned at 2132.

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