## MEDICAL BEFORM OROUP OF ONTARIO

April 13, 1982

Dear M.R.G. Member,

The Medical Reform Group's position with respect to the structure and funding of health care, doctors' participation in OHIP, and the conduct of negotiations between doctors and the government should be familiar to you through our Statement of Principles and previous resolutions in these areas. But perhaps members are wondering how we should apply these principles in the current conflict between the OMA and the Ministry of Health.

The Steering Committee has met and agreed to the following position, which we feel is consistent with the principles and resolutions:

- 1. Although the Ministry's attempted unilateral imposition of a three year settlement was at best poor labour practice and was undoubtedly provocative, the government's willingness to negotiate further is now clear. Physicians should refuse the OMA's call to job action and resume bargaining, with binding arbitration to be used if no negotiated settlement can be reached.
- 2. Physicians currently have a (non-binding) fee agreement with OHIP. However, physicians' working contracts are made with their patients individually, and withdrawing from these contracts when their dispute is with a third party is unreasonable and inappropriate.
- 3. Physicians are not a union in the industrial sense, nor are they government employees. They are a self-governing profession, organized largely as independent small business-people, with the exclusive right by law to provide a service society has deemed so essential that a public system of comprehensive insurance has been constructed to ensure that this service is available to everyone. If physicians wished to reconstitute themselves into a union in the employ of the government, they would have to forego some freedoms they now enjoy and assume some new responsibilities in order to benefit from the rights accorded to unionized workers.

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4. Although inequities for some physicians exist within the current OHIP fee structure, and although doctors (as well as other health care workers and patients) have some legitimate complaints about the current structure of our health care system, these cannot be resolved by the present confrontation. Indeed many of these inequities are entirely within the power of the profession itself to resolve, as are many of the other complaints which doctors frequently voice in justification for their income demands.

All physicians, including M.R.G. members, must act according to their own consciences during this crisis, but we wanted to inform you of the M.R.G.'s official position. If you encounter problems because of your stand on this issue, contact other M.R.G. members for support or suggestions.

For the Steering Committee,

Debby Copes, M.D.

Copies to media

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