

2003:09

## MEDICAL SAVINGS ACCOUNT

**Whereas:** Medical Savings Accounts (MSAs) have been proposed in some quarters as part of the reform of the health care system; and

**Whereas:** a study was published in the Canadian Medical Association Journal (July 2001) that demonstrated that such accounts would end up costing provincial governments more than they now spend on health; and

**Whereas:** the proponents of MSAs propose that the size of accounts would be adjusted for income, sex and health status, but opponents of MSAs indicate that such an adjustment would be costly to administer and would contradict the medicare principle of universality; and

**Whereas:** contrary to the proponents who argue that the introduction of MSAs would result in a reduction of demands for medicare, there is considerable evidence that personally paid medical costs tend instead to deter people from seeking medical care that is timely, preventative, and sometimes life-saving; and

**Whereas:** in some MSA models, persons whose medical expenses exceeded their allotted savings account would be required to cover the costs of illness out of their own pockets unless and until they became severely ill, contradicting the medicare principle of comprehensiveness; therefore be it

**RESOLVED:** that the National Council of Women of Canada adopt as its policy rejection of Medicare Savings Accounts (MSAs) as part of the reform of the health care system; and be it further

**RESOLVED:** that the National Council of Women of Canada urge the Government of Canada to reject any proposal to introduce MSAs as a way to improve the delivery of the health care system; and be it further

**RESOLVED:** that the National Council of Women of Canada urge its Provincial and Local Councils to approach their Provincial Governments to reject any proposal to introduce Medical Savings Accounts as a way to improve the delivery of the health care system.