Action 3: Get serious about wellness and injury prevention

The best thing we can do to improve the health of Albertans and drive down spiralling health care costs is to encourage people to stay healthy. That means individual Albertans have to take responsibility for their own health. And it means government, health regions, and other partners have to step up their efforts to create one of the healthiest populations in the world.

September 2005	Recognize employers who promote healthy workplaces Special awards will recognize employers for their initiatives to promote health
•	in the workplace.
October 2005	Announce second phase of Healthy U campaign
	Phase 2 will build on the media campaign, website, Community Choosewell
October 2003	Challenge program, and other Healthy U initiatives and add a special focus
	on healthy eating and physical activity for young children.
	Legislate the use of booster seats for children
Fall 2005	We've learned to buckle up and put babies in car seats, now it's time to protect
	children by using booster seats.
	Step up public information and involve other ministries and agencies in
Fall 2005	promoting injury prevention
Fall 2005	Every household will receive information about their health care costs and what
	people can do to stay healthy.
Fall 2005	Tackle HIV, Hepatitis and sexually transmitted diseases
1 all 2003	A new strategy will be launched to prevent and reduce the spread of these diseases
	Launch a study on incentives to stay healthy
Fall 2005	Would tax incentives or other kinds of benefits encourage people to stay healthy?
Fall 2005	What are the pros and cons? We'll address those questions through
	a comprehensive study.
In 2006	Announce a new immunization strategy
	All children should have access to routine childhood immunizations.
	The new strategy will make sure they do.
	Proclaim the Smoke Free Places Act
January 2006	The new Smoke Free Places Act will be officially proclaimed and in force across
	the province.

What do you think?

-	ieve you have adequate access to the information you need to make the choices necessary for and active lifestyle for you and your family?
	s take steps to be active, lose weight, or address risk factors, should they get a benefit on their ealth care premiums? What do you see as the pros and cons of such an approach?
What othe nealthier li	r ideas would you suggest to encourage Albertans to take greater responsibility and adopt festyles?
What do y	ou think the government's priorities should be in encouraging Albertans to take responsibility ealth?
Mark 1 for	your first priority, 2 for second, etc.
	Provide more, and more accessible, information about healthy choices and active living.
	Provide tax and other incentives for people who take steps to stay healthy, for example, to those who enroll in fitness or stop smoking programs.
	Encourage and provide incentives to employers to develop workplace wellness programs.
	Develop tougher legislation in areas that can affect health such as smoking or traffic safety.
	Encourage healthy practices in schools (healthy food and physical activity) and other children's environments.

Action 8: Make changes to legislation and regulations

Step 1: Change regulations

It's time to expand choices for Albertans and remove barriers that stand in the way of further innovation by regional health authorities.

July 2005	Provide choices in paying for supplementary health services Instead of having to pay directly, Albertans can use secondary insurance to help pay for podiatry and chiropractic services beyond what's covered by Alberta health care.
September 2005	Provide choice in hospital rooms People who have to be in hospital will be able to choose special accommodations above the standard hospital room. Regional health authorities will be able to charge for those special accommodations.
September 2005	Provide choice in enhanced medical goods and services People will be able to choose enhanced medical goods and services beyond what doctors decide is medically necessary – for example, a special kind of hip replacement. Regional health authorities will be able to charge reasonable fees for enhanced goods and services over and above basic services.

Step 2: Consider a new Health Care Assurance Act for Alberta

Currently there are 39 different pieces of legislation and over 100 regulations that set the rules for Alberta's health system. It's too much, it's too complicated, and it doesn't provide the kind of framework we need for a quality health system.

A Health Care Assurance Act could:

- Ensure Albertans who are sick or injured get access to the services they need within a reasonable waiting time
- · Set out clear principles to guide the system
- Include a clear commitment to reasonable access to medically necessary, basic medicare services at no cost for all Albertans
- Describe what health services would be covered by public health insurance and which ones could be covered by private or not-for-profit insurance plans
- Put a strong emphasis on quality and require all aspects of the health system to meet certain standards and guidelines, protocols and best practices
- Require government and health authorities to prepare and renew health policy frameworks and service plans every five years

Fall 2005	Transform the Health Quality Council into an independent board with particular powers to address quality in Alberta's health system.
In 2006	Introduce a new Health Care Assurance Act for discussion and debate.

What do you think?

Do you agree with the idea of a single Health Care Assurance Act in order to provide an assurance framework o						
ccess and quality health services in Alberta, and to streamline a broad array of legislation currently governing						
health care in Alberta?						

Action 9: Control spiralling drug costs and increase coverage

The provincial government spends a billion dollars a year on prescription drugs in Alberta now, and in the next five years, that amount will double. Drug costs are the fastest growing part of the health care budget and while there's no doubt they bring substantial benefits to patients, we need to seriously look at how we're going to pay the bill for drugs now and in the future. At the same time, current government drug plans only cover about 18% of Albertans, including seniors, children and people with lower incomes. Most Albertans get their prescription drugs covered through private insurance plans. But about 27% of Albertans have no coverage at all.

September 2005	Consider consolidating and managing all provincial drug subsidy programs through a single ministry
	Currently, there are a number of drug subsidy programs within Alberta Health
	and Wellness along with drug programs provided through Human Resources
	and Employment, Children's Services, and Seniors and Community Supports.
	By consolidating all the separate programs, the government can purchase
	drugs centrally and improve efficiency.
	Work with other provinces and the federal government to launch a national
	framework for expensive drugs for rare diseases
October 2005	The framework will ensure affordable access to new "breakthrough" drugs by
	co-ordinating research, review and approval of these drugs and by sharing the
	costs nationally among all governments and drug companies.
	Launch a study to examine different models for a new Alberta pharmacare program
	Alberta's drug coverage plan hasn't changed much in 35 years, except for adding
	new drugs. With rising costs of drugs, it makes sense to explore new models
Fall 2005	including an insurance approach that would extend coverage to more Albertans
Fall 2000	and adjust how much people pay depending on their incomes. The first step would
	be an actuarial study to define the various models, how they could work, and what
	their impact would be on individual Albertans and families. Examine possible cost
	efficiencies associated with pharmaceuticals from other countries.
	Work with neighbouring provinces to establish a western Canadian consortium
April 2007	Because of our relatively small population, we can't buy enough drugs in bulk to
	be able to affect the price. In effect, drug companies set the price and we pay
	it. But if we are able to establish a cooperative arrangement with other western
	provinces on purchasing drugs, we may be able to negotiate a better price.

What do you think?

Would you support the idea of an Alberta non-profit pharmacare insurance program to keep our health system affordable?

An Alberta pharmacare program would enable people to share the costs of drugs based on their ability to pay and it would also take into account a number of health related factors, such as people who live with chronic illnesses. What other factors are important to consider when looking at possible pharmacare models?

Action 10: Improve quality in long term care

The recent report from Alberta's Auditor General brought concerns about quality of care in long term care centres into sharp focus. Albertans expect their parents and grandparents to be well-cared for in places where they are respected and treated with dignity. An MLA task force will work through the summer to discuss concerns with Albertans and develop standards for long term care centres. In the longer term, we also need to look at new approaches for paying for long term care including insurance programs or savings plans where people could invest now and have their long term care needs taken care of when they are old.

July 2005	Increase the number of hours of health care provided in long term care centres Consistent with the need for higher standards and better care, this July the average care hours per resident will increase from 3.1 to 3.4 per day.
Fall 2005	Announce new standards for long term care centres Based on the work of the MLA committee, new standards for accommodations and health care in long term care centres will be announced.
January 2006	Complete the groundwork for a new approach to paying for long term care An actuarial study will look at how a continuing care insurance plan would work, how much it would cost, and how we could make sure it is affordable to current and future generations of seniors.

What do you think?

What do you think about the idea of Albertans being able to invest in some form of insurance or a savings plan to cover the costs of their long term care needs when they are older?
Will the new hours of care be enough?
If implemented, do you believe that continuing care insurance will be a tax on seniors?
How will we know the standards meet professional practice guidelines and provide assurance that Albertans in continuing care are treated with respect and dignity?

Update August 10, 2005: Supplementary health insurance

The Minister of Health and Wellness is taking steps to prepare a discussion on how private, supplementary health insurance might play a role in funding accessible, high quality health care in Alberta.

Alberta Health and Wellness will be conducting research and consulting experts throughout the fall on insurance programs for continuing care, prescription drugs and other non-emergency health services. The Minister has stated that this form of insurance would not be required to cover any medical emergencies or medically necessary health services.

What do you think?	
s there a role for supplementary insurance to cover the costs of non-emergency health services in the future?	
What types of services do you consider non-emergency?	

We're getting on with better health care. What do you think?

We're interested in your feedback and ideas. You can provide input on this package by:

- · Going to www.health.gov.ab.ca and answering key questions online
- Sending your written submission to:

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