

## Office Visit: Canadians Head to U.S. for Medical Services

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The U.S. Commercial Service estimates the relationship between the United States and Canada is the closest and most extensive in the world. The equivalent of \$1.5 billion a day in goods passes between the borders; about 300,000 people do the same. Some travel for work, others for tourism. Another portion of the population comes to the United States for medical services. The College of Family Physicians of Canada has a few ideas on why this trend is taking shape.

While Canadian citizens receive nationalized health care, delays for medical interventions such as hip and knee replacements, spinal surgery and ophthalmologic procedures have posed serious health risks for patients. The CFPC notes that federal and provincial governments are struggling to shorten waiting lists and provide timely care, but patients often have to wait months to obtain appointments with specialists, undergo diagnostic tests and receive treatments – some of which can be attributed to lack of access to family physicians, who are gatekeepers to patients on a list to see the specialists in the first place.

To alleviate the burden, U.S. hospitals in border cities, including Detroit, are making arrangements with Canadian health agencies to provide care that patients have difficulty finding across the border. The reasons are many: Some procedures are more widely available in the U.S.; some patients need immediate access that Canadian hospitals are unable to provide; some patients find cost savings in using a medical tourism company that books their flight, coordinates treatment and offers recovery destination options; some health agencies find it more efficient to partner with U.S. institutions than build new facilities to meet the demands for care.

Some patients applaud the system, explaining that what might look like gaps in Canadian health care are just reminders of how the system works – using backups, regardless of location, to provide patients with timely, quality care paid for by the government. Others use the U.S. backup for procedures not fully covered in Canada.

Whether or not we agree politically with the system, U.S. hospitals have much to gain from such practices – and not just those near the Canadian border. In Oklahoma City, McBride Clinic has admitted and treated Canadian surgery patients for total knee, total hip and shoulder replacements.

We have also seen a great demand for procedures such as arthroscopic surgery for patients who need to get back to work, but can't get surgery done quickly enough in the Canadian system. One example was an ice road trucker on whom I performed arthroscopic surgery of the knee.

The free market is always more effective at solving problems than government because all sides have incentive to succeed.

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