From: HLTH Health Issues HLTH:EX

Sent: January-06-20 11:57:58 AM (UTC-08:00) Pacific Time (US & Canada)

To: May, Stephen GCPE:EX

Cc: Prevost, Jean-Marc GCPE:EX; HLTH Health Issues HLTH:EX

Subject: RE: HLTH Media Request: Delta Hospice

Thanks – Darlene is wrapping up another urgent request for the minister on birth tourism. She will look at it momentarily!

Leah Baade a/Team Lead, Risk and Issues Corporate Issues & Client Relations Branch Ministry of Health 236-478-1364 | leah.baade@gov.bc.ca

From: May, Stephen GCPE:EX < Stephen. May@gov.bc.ca>

Sent: January 6, 2020 11:56 AM

To: HLTH Health Issues HLTH:EX < Health Issues@gov.bc.ca > **Cc:** Prevost, Jean-Marc GCPE:EX < Jean-Marc.Prevost@gov.bc.ca >

Subject: RE: HLTH Media Request: Delta Hospice

Recognize it's a challenging timeline – but MO is eager to see this. Thanks.

From: May, Stephen GCPE:EX Sent: January 6, 2020 11:13 AM

To: HLTH Health Issues HLTH:EX < Health Issues@gov.bc.ca >; XT: Meerman, Jeff GCPE:IN

<jeff.meerman@fraserhealth.ca>; XT:Nuraney, Naseem PAB:IN (Naseem.Nuraney@fraserhealth.ca)

<Naseem.Nuraney@fraserhealth.ca>

Cc: Prevost, Jean-Marc GCPE:EX < Jean-Marc.Prevost@gov.bc.ca >

Subject: RE: HLTH Media Request: Delta Hospice

Need the statement below signed off quickly so I can provide it to the MO for review. Naseem and Jeff, FYI.

From: Stephen May < Stephen. May@gov.bc.ca>

Sent: January 6, 2020 10:04 AM

To: May, Stephen GCPE:EX <Stephen.May@gov.bc.ca>

Subject: HLTH Media Request: Delta Hospice

Reporter

Lianne Lawrence, Reporter Life Site News

<u>llaurence@lifesitenews.com</u> 416-204-1202 c: 647-469-6731

Deadline Monday, January 6, 2020 1:00 PM

Request

I am sending an email request for comment from Minister Dix for an update I am writing on the Delta Hospice Society, specifically, the Fraser Health Authority deadline to the society provide MAiD at Irene Thomas Hospice by Feb 3, as reported in Delta Optimist:

https://www.delta-optimist.com/news/here-s-the-deadline-given-to-delta-hospice-1.24041440 and Globe and Mail:

https://www.theglobeandmail.com/canada/british-columbia/article-delta-divided-over-hospice-refusal-of-assisted-dying/

It is correct to say this deadline is actually from Minister Adrian Dix? Or is it accurate to say this deadline has his full support?

What his rationale for pushing the hospice to provide MAiD in the light of its assertion that MAiD is not compatible with its purposes as stated in its constitution??

What is Minister Dix's response to the joint statement by the Canadian Hospice Palliative Care Association (CHPCA) and the Canadian Society of Palliative Care Physicians supporting Delta Hospice Association position that hospice palliative care is not compatible with MAiD?

The statement says in part:

Healthcare articles and the general media continue to conflate and thus misrepresent these two fundamentally different practices. MAiD is not part of hospice palliative care; it is not an "extension" of palliative care nor is it one of the tools "in the palliative care basket". National and international hospice palliative care organizations are unified in the position that MAiD is not part of the practice of hospice palliative care.

What will be the consequences to the Delta Hospice Association if it does not comply?

Will Minister Dix pull the hospice's public funding? Will he shut down the hospice?

I have a deadline for 4:00 p.m. ET today to file this story.

Thank you and I look forward to receiving a statement from Minister Dix on this matter.

Background

Recommendation

Medical assistance in dying, as a result of unanimous decision of the Supreme Court, has been allowed in Canada, and a decision and a vote of the Parliament of Canada since July 1, 2016.

The decision to choose medical assistance in dying is done between the individual and their physician. If they meet the very strict conditions involved, they proceed. It's also important to recognize that when a person is in hospice it becomes their home, where they should be able to make their personal choices about care. What's of importance is that is something that's the choice, the last choice, of an individual.

It is Fraser Health's policy that they support a patient's right to choose to receive medical assistance in dying wherever they may be, including in a hospice setting. Fraser Health is not in any way asserting that

any individual care provider or volunteer at the Hospice who maintains a conscientious objection to MAiD is obliged to participate in the assessment of eligibility for or provision of MAiD to a Hospice resident.

Fraser Health has recently provided correspondence to the society that they expect that they comply with the policy by February 3. The Ministry of Health supports that decision from Fraser Health.

From: Therrien, Darlene HLTH:EX

Sent: January-06-20 11:24:28 AM (UTC-08:00) Pacific Time (US & Canada)

To: HLTH Health Issues HLTH:EX
Cc: Diacu, Razvan HLTH:EX
Subject: RE: 5th estate

Yes- thanks [©]

Darlene

From: HLTH Health Issues HLTH:EX Sent: January 6, 2020 10:36 AM To: Therrien, Darlene HLTH:EX

Cc: HLTH Health Issues HLTH:EX; Diacu, Razvan HLTH:EX

Subject: 5th estate

Hi Darlene,

I'm guessing you saw these already, but sharing in case you didn't:

 $\frac{\text{https://www.cbc.ca/news/canada/birth-tourism-strain-1.5413296}}{\text{https://www.cbc.ca/fifth/episodes/2019-2020/passport-babies-the-growing-shadow-industry-of-birth-tourism}}$

Leah

Leah Baade a/Team Lead, Risk and Issues Corporate Issues & Client Relations Branch Ministry of Health 236-478-1364 | <u>leah.baade@gov.bc.ca</u> From: HLTH Health Issues HLTH:EX

Sent: January-06-20 10:35:59 AM (UTC-08:00) Pacific Time (US & Canada)

To: Therrien, Darlene HLTH:EX

Cc: HLTH Health Issues HLTH:EX; Diacu, Razvan HLTH:EX

Subject: 5th estate

Hi Darlene,

I'm guessing you saw these already, but sharing in case you didn't:

 $\frac{\text{https://www.cbc.ca/news/canada/birth-tourism-strain-1.5413296}}{\text{https://www.cbc.ca/fifth/episodes/2019-2020/passport-babies-the-growing-shadow-industry-of-birth-tourism}}$

Leah

Leah Baade a/Team Lead, Risk and Issues Corporate Issues & Client Relations Branch Ministry of Health 236-478-1364 | leah.baade@gov.bc.ca From Subject Received Size Categories

Laura.Stovel@gov.bc.caHealth Daily Media Summary - Monday, January 06, 2020 Mon 01-06

410 KB

Today's News Online - Health Daily Media Summary

DO NOT FORWARD THIS E-MAIL TO ANYONE

Monday, January 06, 2020

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- Alzheimer's Drug Attracts Skeptics Dong Lyu National Post 06-Jan-2020
- Alzheimer's awareness campaign challenges stigma for North Thompson residents affected by dementia Staff Barriere Star Journal 04-Jan-2020
- Island churches' urge to merge Richard Watts Times Colonist (Victoria) 05-Jan-2020
- Trials offer hope for dementia reversal Sarah Knapton National Post 06-Jan-2020

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- Vaping survey CFAX CFAX (Victoria) 06-Jan-2020

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- Kootenay Lake Hospital welcomes first baby of 2020 Staff Nelson Star 03-Jan-2020
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- 3. <u>Kimberley resident warning dog owners to leash up after dog almost dies in conibear trap |</u>
 <u>Cranbrook Daily Townsman</u>
- 4. Wet'suwet'en hereditary chiefs issue eviction notice to pipeline company | The Georgia Straight
- 5. John Horgan and the BC NDP are working for you and delivering results. | BC NDP

- 6. <u>Exclusive: Canada police prepared to shoot Indigenous activists, documents show | The Guardian</u>
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- 8. Here are some reasons why the B.C. NDP needs to watch its back | The Georgia Straight
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- 8. Iran
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- 2. Oilsands greenhouse gas emissions are being significantly underestimated, new study suggests | Financial Post
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- 4. Exactly How Alberta Gets Ripped Off | Western Standard
- 5. Interesting. "While the level of agreement with the "speculation tax" is highest among BC NDP voters from 2017 (86%), it stands at 75% with those who supported either the BC Liberals or the BC Greens..." bcpoli speculationtax | michael eso
- 6. Why Would the BC Liberals Revive Their Own Patronage Controversy? | The Tyee
- 7. We're proud of our province and must do everything we can to protect our air, land and water.

 | John Horgan
- 8. <u>Kimberley resident warning dog owners to leash up after dog almost dies in conibear trap |</u>
 <u>Cranbrook Daily Townsman</u>
- 9. Huh. The Rocky Mountain Goat hiring a legislative reporter | Andrew Kurjata
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After years of work, Abbotsford's hospital still plagued with same old issues Abbotsford News Friday, January 03, 2020

By Tyler Olsen

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Tyler Olsen is a reporter with The Abbotsford News

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Although it's legal, assisted dying must still involve ethical consideration Globe and Mail Monday, January 06, 2020 Page A11 By Tom Koch

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Hospice's refusal of assisted death divides city

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Blood Donors Kept My Husband Alive

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Helping first responders deal with PTSD

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Island Spine Trail Closer To Completion

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Australia gets brief reprieve from fires

Globe and Mail Monday, January 06, 2020 Page A03 By Nick Perry & Kristen Gelineau

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Phone, email scams are growing ever more daring

Times Colonist (Victoria) Sunday, January 05, 2020 Page D04 By Lawrie McFarlane

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Free program in Surrey for families of kids 'off the healthy weight trajectory' Surrey Now Leader Friday, January 03, 2020

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B.C. Politics Enters A Fragile New Year

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BC parties prep for possible 2020 election as Green leadership race ramps up instability

Vancouver Sun Friday, January 03, 2020

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Protzer - employer health tax

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Spectre Of Snap Election Puts Parties In Prep Mode

The Province Sunday, January 05, 2020 Page A13 By Rob Shaw

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Spectre of snap election has parties in prep mode (p.A10)

Vancouver Sun Saturday, January 04, 2020

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With Cost Of Food Rising, Time To Start Growing Your Own

Times Colonist (Victoria) Saturday, January 04, 2020 Page D07 By Helen Chesnut

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Fundraiser started for family of man who died in New Year's Eve fire Smithers Interior News Saturday, January 04, 2020

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Arrowsmith SAR crews help locate missing Qualicum Beach senior Parksville Qualicum Beach News Saturday, January 04, 2020

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Blacksmiths making new tools after theft at brain-injury centre

Times Colonist (Victoria) Sunday, January 05, 2020 Page A04 By Roxanne Egan-Elliott

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Key public health issues for the 2020s

Times Colonist (Victoria) Sunday, January 05, 2020 Page D05 By Trevor Hancock

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Meet four of Canada's 2019 Rhodes scholars

Globe and Mail Monday, January 06, 2020 Page A09 By Joe Friesen

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One in two homeless people have suffered a traumatic brain injury Victoria News Saturday, January 04, 2020

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UBC threatened with legal action over free speech concerns after cancelling event

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New marijuana products to hit shelves next week

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The transition to legalized pot was supposed to be easy Globe and Mail Monday, January 06, 2020

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What to expect for cannabis 2.0

North Island Gazette Saturday, January 04, 2020

By Tyson Whitney

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First 2020 baby for Williams Lake born at Cariboo Memorial Hospital

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Williams Lake Tribune Sunday, January 05, 2020

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Drugmaker offers lottery to treat rare deadly disease that affects babies Globe and Mail Monday, January 06, 2020 Page A01 By Kelly Grant

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Meet four of Canada's 2019 Rhodes scholars

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Seniors top previous next All Together Now sessions benefit Voices in Motion choir during Alzheimer's Awareness Montl Victoria News Sunday, January 05, 2020 By Staff	ight				
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By Staff	Victoria News		_		
	Sunday, January 05, 2020				
	By Staff				

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Alzheimer's Drug Attracts Skeptics

National Post Monday, January 06, 2020 Page FP3 By Dong Lyu

Bloomberg Link to Story		

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Alzheimer's awareness campaign challenges stigma for North Thompson residents affected by dementia

Barriere Star Journal Saturday, January 04, 2020

By Staff

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Island churches' urge to merge

Times Colonist (Victoria) Sunday, January 05, 2020 Page A01 By Richard Watts

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Trials offer hope for dementia reversal

National Post Monday, January 06, 2020 Page A02 By Sarah Knapton

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_____ Sexual Health

Abbotsford News Friday, January 03, 2020	200,000 for defaming ex-boyfriend on Instagram	
By Staff		
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Ex-lover's defamatory posts cost her \$200K

National Post Saturday, January 04, 2020 Page A06 By David Carrigg

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Meet four of Canada's 2019 Rhodes scholars Globe and Mail Monday, January 06, 2020 Page A08 By Joe Friesen

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Woman Must Pay \$200,000 To Ex-Boyfriend For Defaming Him On Websites, Judge Rules

_____ Sexual Health

Times Colonist (Victoria) Saturday, January 04, 2020 Page A05 By David Carrigg

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_____ Smoking top previous next

From the wild to the wacky, B.C. certainly gets its share

Times Colonist (Victoria) Sunday, January 05, 2020 Page D04 By Monique Keiran

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_____ Smoking

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New cannabis goods may not eat into black market

Globe and Mail Monday, January 06, 2020 Page B03 By Michelle Mcquigge

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New cannabis products may not eat into black market, experts say Abbotsford News Sunday, January 05, 2020

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Vaping survey

CFAX Monday, January 06, 2020, 07:01 By CFAX

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Recurring rat-damage claims cause A Abbotsford News Saturday, January 04, 2020	bbotsford man to struggle with ICBC
By Staff	
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Year in Review 2019: March Quesnel Cariboo Observer

Sunday, January 05, 2020

By Staff

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After Oppenheimer Park homicide, homeless camp pushes back on safety concerns

Global News: BC 1 Sunday, January 05, 2020

By Sean Boynton

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Lobby Wrap: Flair Airlines lobbying or	n 'domestic capacity and access to airports'
iPolitics	•
Monday, January 06, 2020	

By Marco Vigliotti

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2019 Year in Review - January

Quesnel Cariboo Observer Saturday, January 04, 2020

By Staff

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Charges being considered in New Year's Eve head-on truck crash Smithers Interior News Friday, January 03, 2020

By Marisca Bakker

		_ Hospitals
	top previous next	
	Finkler - cannabis edibles OD CKNW	
	Monday, January 06, 2020, 07:02 By CKNW	
Соруг	ight	
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	top previous next	_ Hospitals
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	Johnson - birth tourism CBU	
	Monday, January 06, 2020, 06:51	
	By CBC Early Edition	
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		_ Hospitals
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Kootenay Lake Hospital welcomes first baby of 2020

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Nelson Star
Friday, January 03, 2020

By Staff

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Hospitals

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Thousands lose power in Langley during windstorm
Langley Advance Times
Saturday, January 04, 2020

By Dan Ferguson

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BC Calendar

Health Authorities

Vancouver Coastal Health

Asbestos

Assisted Dying

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Palliative Care

Suicide

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From: Rongve, Ian HLTH:EX

Sent: January 6, 2020 11:16 AM

To: Therrien, Darlene HLTH:EX

Cc: Patterson, Catherine M HLTH:EX; Schuster, Michelle M HLTH:EX

Subject: Re: ACTION REQUIRED: Request from MO

ASAP.

Sent from my iPhone

On Jan 6, 2020, at 11:13 AM, Therrien, Darlene HLTH:EX <Darlene.Therrien@gov.bc.ca> wrote:

Okay -will do!!

Darlene

On Jan 6, 2020, at 11:03 AM, Patterson, Catherine M HLTH:EX < Catherine.Patterson@gov.bc.ca> wrote:

Good morning Darlene,

I would appreciate it if you could please review the link below and provide information to me no later than end of day today.

With thanks,

Catherine

From: Moulton, Holly HLTH:EX < Holly.Moulton@gov.bc.ca>

Sent: January 6, 2020 11:00 AM

To: Rongve, Ian HLTH:EX < lan.Rongve@gov.bc.ca>

Cc: Patterson, Catherine M HLTH:EX < <u>Catherine.Patterson@gov.bc.ca</u>>; Andrachuk, Andrea HLTH:EX < <u>Andrea.Andrachuk@gov.bc.ca</u>>; Prevost, Jean-Marc GCPE:EX < <u>Jean-</u>

Marc.Prevost@gov.bc.ca>
Subject: Request from MO

Good morning lan,

The Minister has asked for a review of the below and s.13

s.13

https://gem.cbc.ca/media/the-fifth-estate/season-45/episode-16/38e815a-012234c7ec6

Thanks

Holly

From: Moulton, Holly HLTH:EX

Sent: January 6, 2020 12:47 PM

To: Rongve, Ian HLTH:EX

Subject: RE: Request from MO

Thanks Ian.

From: Rongve, Ian HLTH:EX < Ian.Rongve@gov.bc.ca>

Sent: January 6, 2020 12:44 PM

To: Moulton, Holly HLTH:EX < Holly. Moulton@gov.bc.ca>

Subject: Re: Request from MO

Working on a preliminary response for this afternoon but given the questions will be high level. Have engaged with VCH who are going to provide a more in depth response tomorrow.

Have talked to jean-Marc so he is aware.

Sent from my iPhone

On Jan 6, 2020, at 11:02 AM, Moulton, Holly HLTH:EX < Holly.Moulton@gov.bc.ca > wrote:

As soon as possible.

From: Rongve, Ian HLTH:EX < lan.Rongve@gov.bc.ca

Sent: January 6, 2020 11:02 AM

To: Moulton, Holly HLTH:EX < Holly.Moulton@gov.bc.ca >

Subject: RE: Request from MO

Timeline?

From: Moulton, Holly HLTH:EX < Holly.Moulton@gov.bc.ca>

Sent: January 6, 2020 11:00 AM

To: Rongve, Ian HLTH:EX < Ian.Rongve@gov.bc.ca>

Cc: Patterson, Catherine M HLTH:EX < Catherine.Patterson@gov.bc.ca>; Andrachuk, Andrea HLTH:EX < Andrea.Andrachuk@gov.bc.ca>; Prevost, Jean-Marc GCPE:EX < Jean-Marc.Prevost@gov.bc.ca>

Subject: Request from MO

Good morning lan,

The Minister has asked for a review of the below and \$.13

s.13

https://gem.cbc.ca/media/the-fifth-estate/season-45/episode-16/38e815a-012234c7ec6

Thanks Holly

1

From: Patterson, Catherine M HLTH:EX

Sent: January 6, 2020 4:09 PM
To: Rongve, Ian HLTH:EX

Subject: FOR APPROVAL: Updated status on Birth Tourism

Attachments: Birth Tourism Status Update_Jan 6_2020 DCT (002) RD_.docx

FOR APPROVAL. Once approved, I will let DMO know.

From: Therrien, Darlene HLTH:EX < Darlene. Therrien@gov.bc.ca>

Sent: January 6, 2020 4:03 PM

To: Rongve, Ian HLTH:EX < Ian.Rongve@gov.bc.ca>

Cc: Patterson, Catherine M HLTH:EX < Catherine. Patterson@gov.bc.ca>

Subject: Updated status on Birth Tourism

Attached

Darlene Office 778-974-2554

STATUS REPORT FOR MINISTER OF HEALTH

Title	Update on Birth Tourism
Reporting Period	As of January 6, 2020
Reporting Branch/Division	Provincial Hospital and Lab Services Division
Key Contact	Ian Rongve

BACKGROUND

- Birth tourism is not supported by the Ministry of Health; however, hospitals will not deny service to any woman requiring maternity care.
- Concerns have been raised at times regarding hospital occupancy, cost recovery, access to publicly funded services, and a lack of regulation of birth houses.
- A CBC *Fifth Estate* segment aired in early January 5th, 2020, including an interview with the Minister of Health. Vancouver Coastal Health is updating its Issues Note on birth tourism to address concerns from the *Fifth Estate*.
- The Ministry has undertaken a comprehensive analysis of birth tourism in BC. The analysis and options paper for discussion will be forthcoming to the Minister's Office.
- Birth tourism is an immigration issue that would need to be addressed at the federal level. In BC, it would be very difficult to prohibit birth tourism to non-residents through regulatory options. Efforts in this regard risk legitimizing birth houses and are not recommended.

DISCUSSION

CBC Fifth Estate

- Comments were made by nurses that non-resident births are prioritized over resident births and that the private pay this generates is not used to ease staff loads.
 Vancouver Coastal Health confirms that non-resident births are not prioritized and that the privately paid funds flow through to Richmond Hospital for their birth tourism patients.
- Comments were also made by the BC Nurses Union president that adding additional
 patients into a health-care system that isn't staffed or funded appropriately is
 causing strain..

Birthright Citizenship and Birth Houses

- Under the federal Citizenship Act, a person has the right to citizenship if they are born in Canada. Women who are non-residents of Canada give birth in BC each year for a variety of reasons, including premature/unexpected labour, or to obtain citizenship for their child, which provides entitlement to publicly funded services.
- Based on media reports, Ministry conversations with program staff at Richmond Hospital (RH) and prior investigations of birth houses in Richmond, birth houses appear to offer pregnant non-residents temporary room and board for several months before and after birth, providing limited non-medical care. Birth houses are

not currently regulated under any health specific legislation or municipal business licensing.

Hospital Maternity Services - Occupancy

- The primary responsibility of hospitals in BC is the provision of "insured" or medically required services to eligible beneficiaries. Service resource capacities should primarily be directed to meeting those responsibilities. Provision of other than insured services should not diminish or divert Health Authority capacities to provide insured services to eligible beneficiaries.
- Hospital occupancy due to non-resident births does not appear to be impacting the ability to accommodate resident births.
- Women who gave birth at Richmond Hospital's Birth Centre who were non-residents and who paid privately for their care:
 - 2018/19: 454 (23.1%) of 1,967 women;
 - 2017/18: 469 (22.1%) of 2,126 women;
 - 2016/17: 379 (17.2%) of 2,206 women; and
 - 2015/16: 299 (15.5%) of 1,923 women.

Unpaid Bills by Birth Tourists

- Non-residents are required to pay for any hospital stay costs, including medical care for the mother and baby, as well as any specialized care costs. At RH they are also required to make a pre-payment deposit of \$10,000 for a regular birth and \$16,000 for a caesarean birth. Any additional clinical service costs incurred by the non-resident (i.e. obstetrician, anesthetist for epidural, pediatrician, etc.) are billed directly to the non-resident patient by the physician.
- In 2018/19, VCH invoiced non-residents approximately \$5.3 million for maternity services at RH and recovered approximately 95 percent of that amount. In 2017/18, non-residents were invoiced approximately \$6.2 million for maternity services at RH and VCH recovered approximately 82 percent. More complicated cases with payments not paid in full can skew the cost recovery rate the majority of non-residents pay for these services
- With regards to services provided to non-resident birth tourists by individual physicians, MSP does not track services to non-residents as they are not registered in the Medical Services Plan. Any billing or collection efforts for these services would be done by the physicians' offices.

RESPONSE

- Matters relating to immigration are the responsibility of the federal government.
- The Ministry's priority and the priority of the health authorities and health care
 providers is to make sure that nobody is denied the care they need at any British
 Columbia hospital, be it a patient with a broken leg or a pregnant mother and her
 new baby.
- The Ministry in no way endorses or supports the marketing of maternity tourism.

From: Rongve, Ian HLTH:EX
Sent: January 6, 2020 4:22 PM
To: Catherine Patterson

Subject:Birth Tourism Status Update_Jan 6_2020 DCT (002) RD_Attachments:Birth Tourism Status Update_Jan 6_2020 DCT (002) RD_.docx

Preliminary response

STATUS REPORT FOR MINISTER OF HEALTH

Title	Update on Birth Tourism
Reporting Period	As of January 6, 2020
Reporting Branch/Division	Provincial Hospital and Lab Services Division
Key Contact	Ian Rongve

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- Birth tourism is not supported by the Ministry of Health; however, hospitals will not deny service to any woman requiring maternity care.
- Concerns have been raised at times regarding hospital occupancy, cost recovery, access to publicly funded services, and a lack of regulation of birth houses.
- A CBC Fifth Estate segment aired in early January 5th, 2020, including an interview with the Minister of Health.
 - Vancouver Coastal Health is updating its Issues Note on birth tourism to address concerns from the *Fifth Estate*. This note is expected to be available January 7, 2020.
- The impetus for Birth tourism is an immigration issue that would need to be addressed at the federal level. In BC, it would be very difficult to prohibit birth tourism to non-residents through regulatory options. Efforts in this regard risk legitimizing birth houses and are not recommended.

DISCUSSION

CBC Fifth Estate

- Comments were made by nurses that
 - o non-resident births are prioritized over resident births and
 - o that the private pay this generates is not used to ease staff loads.
 - Vancouver Coastal Health confirms that non-resident births are not prioritized over those of BC mothers and that the privately paid funds flow through to Richmond Hospital.
- Comments were also made by the BC Nurses Union president that adding additional
 patients into a health-care system that isn't staffed or funded appropriately is
 causing strain. Vancouver Coastal is investigating staffing levels at the Richmond
 Hospital.
- A physician interviewed for the segment referred to the difficulty of billing out of country patients for services. Options are being investigated for whether the ministry can address this issue with policy.

Birthright Citizenship and Birth Houses

 Under the federal Citizenship Act, a person has the right to citizenship if they are born in Canada. Women who are non-residents of Canada give birth in BC each year for a variety of reasons, including premature/unexpected labour, or to obtain citizenship for their child, which provides entitlement to publicly funded services. Based on media reports, Ministry conversations with program staff at Richmond Hospital (RH) and prior investigations of birth houses in Richmond, birth houses appear to offer pregnant non-residents temporary room and board for several months before and after birth, providing limited non-medical care. Birth houses are not currently regulated under any health specific legislation or municipal business licensing.

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 and \$16,000 for a caesarean birth. Any additional clinical service costs incurred
 by the non-resident (i.e. obstetrician, anesthetist for epidural, pediatrician, etc.)
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RESPONSE

- Matters relating to immigration are the responsibility of the federal government.
- The Ministry's priority and the priority of the health authorities and health care providers is to make sure that nobody is denied the care they need at any British

Columbia hospital, be it a patient with a broken leg or a pregnant mother and her
new baby.
The Ministry in no way endorses or supports the marketing of maternity tourism.

HLTH HSIARDocs Processing HLTH:EX

From: Shewchuk, Jack VSA:EX

Sent: January 6, 2020 9:42 AM

To: Wright, Martin P HLTH:EX

Subject: FW: Fifth Estate report on Birth Tourism

FYI- the Fifth Estate CBC did their birth tourism item last night.

Jack Shewchuk CPA (CA)
Registrar General
Vital Statistics Agency
Health Sector Information, Analysis and Reporting
Ministry of Health
250-952-9039

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From: Arscott, Melanie VSA:EX < Melanie. Arscott@gov.bc.ca>

Sent: January 6, 2020 9:22 AM

To: Bloomfield, Ingrid VSA:EX <Ingrid.Bloomfield@gov.bc.ca>; Jennings, Suzanne VSA:EX

<Suzanne.Jennings@gov.bc.ca>; Shewchuk, Jack VSA:EX <Jack.Shewchuk@gov.bc.ca>; Spearman, Mark VSA:EX

<Mark.Spearman@gov.bc.ca>; Vincent, Wanda L VSA:EX <Wanda.Vincent@gov.bc.ca>

Subject: Fifth Estate report on Birth Tourism

It's a 20 minute report https://www.youtube.com/watch?v=x6MdgushuK4

Mel

Melanie Arscott, Office Manager

Vital Statistics Agency, Office of the Registrar General

Health Sector Information, Analysis and Reporting Division

Ministry of Health, Province of British Columbia

C Tel: 778 974-4790 / 🖨 Fax: 250 952-9097 🖾 Email: Melanie.Arscott@gov.bc.ca

PO Box 9657 Stn Prov Govt, Victoria BC V8W 9P3

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Dix, Adrian HLTH:EX

From:

Murray, Heather HLTH:EX

Sent:

January 24, 2020 1:44 PM

To: Cc:

Dix, Adrian HLTH:EX

Brown, Stephen R HLTH:EX; van Baarsen, Amanda HLTH:EX

Subject:

Fifth Estate Transcript - Analysis

Attachments:

MO Request - Fifth Estate - Birth Tourism - Line by Line Review - 01-23-20.docx; 2020-01218 - US Department of State - VISAS Temporary Visitors for Business or

Pleasure.pdf

Good Afternoon Minister,

Steve asked me to forward to you the attached line-by-line review of the Fifth Estate documentary on Birth Tourism for your review. Steve will be reviewing this over the weekend.

Also included is a pdf copy of the link referenced in Item 32, the US State Department's rule amending the regulation governing temporary visitors for business or pleasure.

Thank you, Heather

Sincerely,

Heather Murray | A/Senior Manager

Office of the Associate Deputy Minister's

Ministry of Health

Phone: 250.952.2879 | Cell: 250.415.5856

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Passport babies: Secrets behind birth tourism

The Fifth Estate

Broadcast Date: January 5, 2020

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DEPARTMENT OF STATE

22 CFR Part 41

[Public Notice: 10930]

RIN: 1400-AE96

Visas: Temporary Visitors for Business or Pleasure

AGENCY: Department of State

ACTION: Final rule.

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[FR Doc. 2020-01218 Filed: 1/23/2020 8:45 am; Publication Date: 1/24/2020]

Reporter *still collecting info

Annie Burns-Pieper, Reporter CBC Fifth Estate annieburnspieper@gmail.com 416-585-5123

Deadline Friday, November 29, 2019 4:00 PM

Request

You said in the interview that "we recoup over ninety percent of the money on the maternity side"-Can you provide the data which shows this for the last five years

- -when you say maternity side do you mean this does not include neonatal/pediatric care?
- -Does this refer to the whole province? Or a particular hospital or health region? Are you saying Health Authorities recoup that?

What is the total amount currently owed to the province currently as a result of non-resident births (maternity and neonatal care)?

In the interview, you say your collections rate has gone up as a result of higher deposits? From our understanding a single night in the NICU can cost \$10,000 which can add up quickly, how did higher deposits for maternity care affect payment of those bills?

You said in the interview that you are trying to the address the issue of individual physicians not getting paid by non-residents, how are you doing that?

You say you don't take cash anymore. When did that policy change and why? Who does that apply to, is it just Health Authorities? Does that also apply to doctors seeing these patients?

What year was pre-registration required at Richmond hospital? Do you have any stats on how many people tried to pre-register and were told the hospital was full that month?

You say you have directed to this issue to the federal government but did not provide specifics on what you have asked for, can you clarify?

Sunnybrook Hospital in Toronto says: "Generally speaking, obstetricians are not supposed to accept patients from out of country unless they are Canadian citizens living abroad, who wish to come home to have their baby delivered... Doctors who agree to accept out-of-country patients would be viewed as having directly or indirectly solicited the patient and may not necessarily be provided coverage if they were sued outside of Canada." Why are these physicians in B.C. accepting out of country patients? What happens if they are soliciting them?

Background

Recommendation

-Can you provide the data which shows this for the last five years – You would need to file a FOI request through Vancouver Coastal

- -when you say maternity side do you mean this does not include neonatal/pediatric care? Labour and delivery
- -Does this refer to the whole province? Or a particular hospital or health region? Are you saying Health Authorities recoup that? Richmond Hospital through Vancouver Coastal and then Labour and delivery

What is the total amount currently owed to the province currently as a result of non-resident births (maternity and neonatal care)? You would have to connect with individual health authorities.

In the interview, you say your collections rate has gone up as a result of higher deposits? From our understanding a single night in the NICU can cost \$10,000 which can add up quickly, how did higher deposits for maternity care affect payment of those bills? There has been strong recovery for labour and delivery costs regardless of deposits.

What year was pre-registration required at Richmond hospital? Do you have any stats on how many people tried to pre-register and were told the hospital was full that month? Registration has been voluntary for decades at all hospitals in BC. (My daughter will be 20 in February and we were pre-registered through pre-natal classes)

You say you have directed to this issue to the federal government but did not provide specifics on what you have asked for, can you clarify? I do not understand reference Do you mean birth tourism? Immigration is a federal matter.

Sunnybrook Hospital in Toronto says: Copyright

Copyright

Why are these physicians in B.C. accepting out of country patients? What happens if they are soliciting them? Any concerns about behaviour and practices by a physician in B.C. is appropriately directed to the BC College of Physicians and Surgeons for investigation.

You said in the interview that you are trying to the address the issue of individual physicians not getting paid by non-residents, how are you doing that? The Ministry of Health is considering a number of options that might better support physicians who are not being fairly compensated in the case of non-resident births. The work is in its early stages.

You say you don't take cash anymore. When did that policy change and why? Who does that apply to, is it just Health Authorities? Does that also apply to doctors seeing these patients? At this time the vast majority of deposits are made through credit card and cash is strongly discourages. The Minister is determined to better ensure staff safety by eliminating large cash payments. To that effect, the Ministry of Health is working with health authorities on a policy that would set appropriate legal and practical boundaries around cash payments.

Dix, Adrian HLTH:EX

From:

Burton, Meribeth GCPE:EX

Sent:

December 6, 2019 12:24 PM

To:

Dix, Adrian HLTH:EX

Cc:

van Baarsen, Amanda HLTH:EX; Prevost, Jean-Marc GCPE:EX; Yeung, Lucinda HLTH:EX;

Pham, Thuy HLTH:EX

Subject:

Document1

Attachments:

Document1.docx

Minister Dix

Please see attached 5th estate follow up questions and proposed responses.

The reporter has called several times today.

We could send all but the last two responses, as the other questions are very straight forward.

Meribeth:

Dix, Adrian HLTH:EX

From:

van Baarsen, Amanda HLTH:EX

Sent:

November 15, 2019 4:42 PM

To:

Dix, Adrian HLTH:EX

Subject: Attachments: FW: Birth tourism - CBC fifth estate IN_non-resident births_Sept 2019_FINAL.docx; MR_08112019_ABP_CBC_Birth

tourism_All responses.docx; QA_Birth Tourism_Nov 8_2019_FINAL.DOCX; Acrobat

Document.pdf

I uploaded these all to your iPad in a folder called "5th Estate"

From: Burton, Meribeth GCPE:EX <Meribeth.Burton@gov.bc.ca>

Sent: November 15, 2019 4:02 PM

To: van Baarsen, Amanda HLTH:EX <Amanda.vanBaarsen@gov.bc.ca> Cc: Prevost, Jean-Marc GCPE:EX <Jean-Marc.Prevost@gov.bc.ca>

Subject: Birth tourism - CBC fifth estate

Adding QA and IN and media responses with FOI.

Meribeth

From: Burton, Meribeth GCPE:EX Sent: November 8, 2019 12:48 PM

To: Yeung, Lucinda HLTH:EX < Lucinda. Yeung@gov.bc.ca>

Cc: van Baarsen, Amanda HLTH:EX < Amanda.vanBaarsen@gov.bc.ca>; Pham, Thuy HLTH:EX < Thuy.Pham@gov.bc.ca>;

Prevost, Jean-Marc GCPE; EX < Jean-Marc.Prevost@gov.bc.ca>

Subject: FW: Birth tourism - CBC fifth estate

Hi Lucinda,

I was preparing this for the Minister but the QA needs a question about docs benefiting/promoting birth tourism. We are working on that.

In the meantime....

The Fifth Estate is looking to confirm the non-resident birth interview for November 21 or 22. The producer is looking for a firm time for the interview as they are booking flights from Toronto.

Below details of the timing around the interview and some of the questions that will be asked.

Attached is our Birth Tourism QA, Issues Note and a rundown of all responses to the Fifth Estate from MOH and Vancouver Coastal.

If you find it helpful, we could consider a pre-interview to prepare. I am happy to play reporter – like the olden days.

Meribeth

1 Hour set up in the room where the interview will be held in advance of interviewee arriving

1 Hour for the interview, it will not be this long but it allows for sound checks and any stopping and starting needed, 30 minutes for some basic b-roll.

We should probably need him for less than the hour and a half but its a safe window to ensure we can get everything done.

We want to speak about how the issue of birth tourism affects the healthcare system in BC including;

- How the province is studying impacts of birth tourism on health care in British Columbia
- What the ministry has learned about this issue including the impact on resident patients and health care providers.
- The challenges you face in addressing this.
- Next steps on the issue.
- Any requests you might have for assistance from other levels of governance in moving forward.

Let me know if that timing works for you.

Thanks a lot,

Annie

From: Peaker, Alex GCPE:EX < Alex.Peaker@gov.bc.ca>

Sent: November 8, 2019 12:12 PM

To: Burton, Meribeth GCPE:EX < Meribeth.Burton@gov.bc.ca>

Subject: Birth tourism - CBC fifth estate

IN, updated QA with the daily pieces and media rollup of our responses and VCH's attached.

Thanks!

Alex Peaker GCPE – Health

Office: 778.698.2381 Mobile: 250.893.5640

Alex.Peaker@gov.bc.ca

ADVICE TO MINISTER

CONFIDENTIAL ISSUES NOTE

Ministry: Health

Date: Sept. 19, 2019

Minister Responsible: Adrian Dix

Non-resident of Canada births

ISSUE SUMMARY:

- The issue of "birth tourism" has held ongoing media and political interest.
- On March 14, the Canadian polling firm Angus Reid released their survey results on birth tourism and who should be granted citizenship.
 - Results indicated that 60% of Canadians believe citizenship laws need to change to discourage birth tourism and 64% of respondents indicated that a child born here to parents on tourist visas should not be granted citizenship.
- The impact of non-resident births or so-called "birth tourism" at Richmond Hospital has been the subject of media and political discussion regarding immigration issues, access to care for Richmond residents, and the costs to individual mothers and the health-care system in general. An April 2018 lawsuit against a non-resident mother for unpaid medical bills sparked further media interest.
- In August 2018, the federal Conservative Party passed a resolution to end birthright citizenship in Canada. A statement from Conservative Party leader Andrew Scheer is here: mailchi.mp/conservative/statement-dclaration-w9no1eqzu8?e=6eb5d0c7f6
- The non-binding resolution encourages government to enact legislation, which will fully eliminate birthright citizenship in Canada unless one of the parents of the child born in Canada is a Canadian citizen or permanent resident of Canada.

BACKGROUND REGARDING THE ISSUE:

- The potential issues related to birth tourism discussed in media include:
 - 1) Non-payment of fees incurred:
 - On June 12, 2018, Global News ran a story about a Notice of Civil Claim filed by Vancouver Coastal Health (VCH) against a non-resident of Canada after she gave birth at Richmond Hospital and failed to pay the charges incurred. The claim dates to 2012, at which time the defendant was admitted to Richmond Hospital for the birth of her child. Due to complications arising out of the birth, the medical fees reached the amount of \$312,595.
 - VCH reserves the right to charge interest but does not usually do so; if the claim goes to
 a collection agency, the agency will charge interest. In this case, VCH has not exercised
 its right to charge interest nor waived it, though the civil claim refers to an implied 2%
 interest leading many media to report on the "million dollar baby."

2) Revenue generation:

- Media are questioning whether the rates charged to non-residents of Canada to give birth in B.C. should be increased to generate revenue for the health-care system or discourage the practice.
- Charges to non-residents of Canada for any medical services in a B.C. hospital are based on rates set annually by the provincial government, with input from health authorities.
- Most health authorities require non-residents of Canada to pay a pre-payment deposit,
 with deposit rates varying based on individual health authority policy:
 - o FH: \$9,000 for a vaginal birth and \$15,000 for a caesarean birth;
 - IH: no deposit required
 - NH: no deposit required
 - o VCH: \$10,000 for a vaginal birth and \$15,000 for a caesarean birth;
 - PHSA: \$15,000 for a vaginal birth and \$15,000 for a caesarean birth; and
 - VIHA: \$5,000 for a vaginal or caesarean birth.
- Non-residents are required to pay for any hospital stay and medical care costs for the
 mother and baby, including specialized care such as neonatal intensive care unit. Every
 pregnancy and labour is different and the cost of prenatal, labour and delivery care will
 be different for each woman.
- The total amount charged to non-residents of Canada will vary depending on the complexity of patient care provided and individual procedures performed (e.g., iab tests, x-rays, MRIs).

3) Concerns over "bumping" pregnant British Columbians due to non-resident births:

- Patients are diverted for a wide variety of reasons and there is no evidence to indicate diversions are due to the number of non-residents giving birth.
- The need for maternity beds fluctuate greatly depending on demand, which makes them different than other hospital units. All maternity units find themselves full from time-to-time and have to divert mothers to other hospitals. For example, a transfer would be logged based on whether someone requires a higher level of care or specialized diagnostic testing.
- From April 2018 to August 2019 (17 months), Richmond Hospital diverted 11 patients
 due to overcapacity. This is normal practice for maternity hospitals to provide safe care
 to all patients. Richmond Hospital also regularly accepts patients from other sites such
 as BC Women's, Lions Gate and St. Paul's to assist with their capacity challenges.
- To date, the Birth Centre at Richmond Hospital has been able to meet the growing number of non-resident births because the overall number of births at Richmond Hospital has remained consistent since 2014. In 2018, which saw the largest increase in non-resident births, the number of resident births decreased.

4) Anchor babies:

Media have also reported on the possibility of non-resident births occurring to secure
"anchor babies." Media have speculated about the future burden on government social
systems when these children return to B.C. and support their families in immigrating.

- A petition was sponsored by local MP Alice Wong to eliminate birthright citizenship unless one of the parents of the child born to is a Canadian citizen or permanent resident of Canada.
- The federal government explored eliminating birthright citizenship several years ago; however, later abandoned the idea.
- The ministry's priority, and the priority of health authorities and health-care providers is to make sure that all babies and mothers receive the care they need no matter where they come from.
- Matters relating to immigration are the responsibility of the federal government.
- Nobody is denied the care they need at any British Columbia hospital. The Ministry of Health's priority is to support the provision of health-care services to those in need.
- Doctors and other health-care providers have no role in immigration enforcement.

Overview: Non-resident births

- There are two categories of non-residents of Canada who are giving birth in B.C.:
 - 1) Expectant mothers on temporary permits such as work/study permits or tourist visas who pay their birthing costs up front and have their babies with no MSP coverage. This group is typically associated with baby houses and is the focus of the media. The ministry is aware of 26 so-called baby houses in the Lower Mainland. They provide hospitality services to pregnant women, new mothers and their babies. They do not provide medical care.
 - 2) People who properly obtain MSP but then become ineligible for continued coverage, often by returning to their home country without notifying MSP, later returning to Canada to have their child, only to then return to their country of origin after the birth.
- MSP coverage for a child born in British Columbia to a non-Canadian:
 - Children born in British Columbia to a non-resident parent are eligible for MSP coverage
 if the intent is for the child to be a resident of B.C. after completion of the wait period.
 The wait period is the balance of the month of birth plus two months.
 - Babies get date of birth coverage if a parent is a resident. If a baby is born to parents in their wait period for MSP coverage, the baby is eligible for date of birth coverage.

Birth Houses

- A "Birth House" often refers to a space (often a residential house) where pregnant non-Canadian resident women stay leading up to the birth of their child and return to prior to their return home.
- Any facility providing a certain level of health-care services is required to be licensed under the Community Care and Assisted Living Act to ensure patient care and safety.
- The ministry is not aware of any of these facilities providing that level of care. Previous visits by Vancouver Coastal to expected birth houses by inspectors found that there was no licensable care as defined under the Community Care and Assisted Living Act being provided at Richmond residences. Whether or not these residences have business licenses is a municipal responsibility, and not something the Ministry of Health has authority over.

Non-Resident Medical Procedure Tracking

- The Medical Beneficiary Branch does not track information for non-residents who have medical procedures done in B.C. and then return to their own country.
- If routine investigations show that non-residents may have been inappropriately accessing MSP coverage, the Eligibility, Compliance and Enforcement Unit of the ministry investigates, and the ministry and health authorities seek to recover any inappropriately-billed benefits.

DISCUSSION/ADVICE:

- In the past, the Ministry of Health has tracked non-resident births by the address listed by parents on a baby's birth registration, which could be local or international.
- Hospitals will typically go by whether or not patients are paying out-of-pocket for services to determine if someone is a resident of British Columbia.
- Vital Statistics is currently in the process of aligning these reporting methods to get a more accurate picture of non-resident births across British Columbia.

ADVICE AND RECOMMENDED RESPONSE:

- Matters relating to immigration are the responsibility of the federal government.
- The ministry's priority and the priority of health authorities and health-care
 providers is to make sure that nobody is denied the care they need at any
 British Columbia hospital, be it a patient with a broken leg or pregnant mother
 and her new baby.
- More than 43,000 babies are born in B.C. each year of which non-resident births account for approximately 2%, not including home births.
- Women who live in other countries give birth in British Columbia each year for a variety of reasons, including premature or unexpected labour.
- Non-residents of Canada are required to pay the costs associated with their care just as we are when we are visiting other countries. Canadian taxpayers are not being asked to pay these costs.
- Non-residents of Canada who present for birth at a Lower Mainland hospital are required to make a pre-payment deposit, except in emergencies. For example, VCH requires a deposit of \$10,000 for a vaginal birth and \$15,000 for a birth by C-section.

- Charges to non-residents of Canada to give birth in a British Columbia hospital are based on rates set annually by the Ministry of Health and the health authorities.
- All revenue related to non-resident of Canada births are put back into the health-care system.
- The ministry in no way endorses or supports the marketing of maternity tourism.

Communications Contact: Kristen Booth

Reviewer:

Program Area Contact:

File Created:

Aug. 6, 2016

File Updated:

March 22, 2019; Sept. 19, 2019

Ministry of Health and Vancouver Coastal Health Requests and Responses

Date: October 15, 2019

Request to Ministry of Health:

A briefing note on the subject of birth tourism was just released to me through FOI (Cliff 1120367). I have a question about it I was hoping you could answer.

It says that the vast majority of non-resident births at the Richmond hospital are from families with a permanent addresses in China. I hadn't seen a nationality breakdown in the past. Can you tell me how the Ministry came to that conclusion?

In that same briefing note it mentioned that B.C's vital statistics keep track of people giving birth here from other places. Are those statistics you can provide me or would I have to go through FOI?

Would you be able to tell me how the following doctors rank in terms of overall MSP billings compared to their family practice peers?

Brenda Patricia Tan

Florina Tianyi Feng

Xin-Yong Wang

Response:

Here are the amounts the three physicians have billed to MSP over the past three fiscal year from 2015/16 through 2017/18

Brenda Patricia Tan: 2017/18: \$465,552; 2016/17: \$602,766; 2015/16: \$497,786

Florina Tianyi Feng: 2017/18: \$339,042; 2016/17: \$ 391,632; 2015/16: \$389,642

Xin-Yong Wang: 2017/18: \$ 271,773; 2016/17: \$378,205; 2015/16: \$ 396,751

Caroline Ying-Mei Wang: 2017/18: \$37,201; 2016/17: N/A 2015/16: \$27,332

Using https://www2.gov.bc.ca/assets/gov/health/practitioner-pro/medical-services-plan/irm_practitioner.pdf (Tables 4-1 through 4-3) - it would appear that all of these GPs except Caroline Ting-Mei Wang would be above the median expenditure in billing – with Tan close to the top for 16/17.

It is important to remember that the billings to the Medical Services Plan does not correlate directly to income, as it does not take into account any expenses for running a practice, such as staffing, rent and overhead.

If anyone has concerns about inappropriate billing or extra billing, they can contact B.C.'s billing integrity program which will investigate the concern - https://www.health.gov.bc.ca/exforms/bip/index.html

Date: October 14, 2019

Request to Ministry of Health:

How does it work when a doctor bills outside MSP? Are there set fees?

Response:

The Doctors of BC provides a guide of fees for uninsured services, but this is just guidance and doctors are not required to adhere to the recommended fee rates. Births are not part of this list. Claims for uninsured services are not submitted to MSP and the Ministry has no record of the physicians performance of these services. For non Canadian patients not covered by MSP, physicians can set their own fees for their services, and are also responsible for billing and collection.

Date: September 30, 2019

Request to Ministry of Health:

I was interested to read in a recent article that physicians who work on a fee-for-service basis have difficulty collecting their separate fees from birth tourists. I was wondering if your department tracks this at all through the MSP? And if so if you have any numbers about how often this is happening?

Response:

MSP does not track separate bills. Since anyone who is a non-beneficiary is not registered in the Medical Services Plan, any billing for these services would be done by the doctors and their offices. Collection efforts would have to be done through their office as well.

Date: September 20, 2019

Request to Vancouver Coastal Health:

Request for interview regarding birth tourism.

Response:

Hello Annie:

Thank you for reaching out to our team regarding participation in the Fifth Estate segment on birth tourism.

We would be happy to provide you with the most recent statistics, but will gratefully decline an interview.

Date: October 14, 2019

Request to Vancouver Coastal Health:

Hi Matt and Carrie,

Just following up. Not sure who is handling this request at this point.

I just wanted to reiterate my interest in an interview. As you know I am producing a segment on the issue of birth tourism for The Fifth Estate. Data on this issue has shown that Richmond Hospital has the highest number of non-resident births in the entire country.

This issue is one of increasing interest across the country. When we spoke on the phone Matt highlighted the fact that you respond to all patients who need care regardless of their nationality. This is a fair point and one that we would be happy for you to make in an on-camera interview.

But as you are aware the concerns about the effect of birth tourism on the hospital level go deeper than the issue of treating patients or not. Critics, including nurses from your own hospital who have spoken through the BC Nurses Union, have raised concerns about how this phenomenon is affecting the quality of care, access to health care and workload.

Our program is a national platform for a representative of your health authority to speak to the issues that have been raised on this topic. I think it would be a great opportunity for you to respond. As you know we are a longer-format program which means we have more of an opportunity to go into depth than most news coverage.

As I mentioned to Matt on the phone I am available to speak further about what we are looking to discuss. I am happy to do whatever I can to facilitate this interview including giving your health authority nearly two months to prepare for a sit-down interview with our reporter since my first request in mid-September. As I mentioned to Matt we are looking to potentially shoot this interview in mid-November.

As we are a television show and written statements are unsatisfactory for our format. Since we will be discussing the Richmond hospital in relation to this subject, the absence of representative from the hospital or health authority will be conspicuous. If an interview is declined, we will have to include that fact in our report as well as the efforts we have made to make it possible for your health authority to take part.

Please let me know if	l can answer an	y questions.
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Best,

Annie

Response:

Hello Annie:

Once again, Thank you for reaching out to our team regarding participation in the Fifth Estate segment on birth tourism.

As previously mentioned, we would be happy to provide you with the most recent statistics on non-resident births at Richmond Hospital, but we will gratefully decline an interview.

Date: October 15, 2019

Request to Vancouver Coastal Health:

Hi Carrie and Matt, Can you tell me more about why you are declining an interview?

Thank you,

Annie

Response:

Hi Annie:

The role of Vancouver Coastal Health is to provide health care services.

I can send along some stats and materials if you like, which show the overall births at Richmond hospital have remained fairly consistent over the years.

Regards,

Carrie

MINISTRY OF HEALTH INFORMATION BRIEFING NOTE

Cliff 1120367

PREPARED FOR: Honourable John Horgan, Premier of British Columbia - FOR INFORMATION

TITLE:

Non-resident births in British Columbia

PURPOSE:

To provide information on concerns related to non-resident mothers giving

birth in BC hospitals.

BACKGROUND:

The impact of non-resident births or so-called "birth tourism" in BC has been the subject of several media reports focusing on immigration issues, access to care for BC residents and the health care system in general. These media reports also raise concerns over "baby houses", businesses providing before and after birth care, being marketed to non-residents.

The majority of non-resident births in BC take place at Richmond Hospital in the Vancouver Coastal Health Authority (VCHA). Richmond Hospital serves a community where over 60% of the residents are immigrants, some of whom are at different stages of their immigration/residency process.

Tourists and visitors to BC are not eligible for provincial health care benefits. The baby of a non-resident of Canada would need to be a resident for three months to qualify for Medical Services Plan (MSP).

A petition spearheaded by a Richmond woman and sponsored by Richmond Centre Conservative MP Alice Wong that opposed birth tourism was presented to the House of Commons on Oct. 19, 2016, but dismissed. A second petition by the same Richmond woman, sponsored by Steveston-Richmond East MP Joe Peschisolido, was initiated in March 2018.

DISCUSSION:

More than 44,000 babies are born in BC each year, of which non-resident births account for less than 2%. In 2016/2017, 378 or 17% of women who gave birth at Richmond Hospital's Birth Centre were non-residents who paid privately for their care. The vast majority gave a permanent address in China.

At Richmond Hospital, non-residents are required to make a pre-payment deposit of \$7,500 for a regular birth and \$13,000 for a caesarean birth. Non-residents are required to pay for any hospital stay costs, including medical care, for the mother and baby, including specialized care such as NICU. Urgent and emergent care is not denied based on ability to pay, and health authorities have systems in place to collect compensation from visitors from Canada who use medical services.

All maternity units find themselves at capacity on occasion and have to divert mothers to other hospitals. Diversions due to capacity issues do not often occur, but when they do the decision is based on clinical need, not citizenship or ability to pay. VCHA has stated that they will continue to monitor the impact of non-resident births at Richmond Hospital and look into ways of better managing the demand.

ADVICE:

While the ministry in no way endorses or supports the marketing of maternity tourism, matters relating to immigration are the responsibility of the federal government. The Ministry of Health's priority continues to be supporting the provision of health care services to those in need.

Program ADM/Division: (enter info in this section unbulded)

Telephone:

Program Contact (for content):

Drafter:

Date:

File Name with Path:

MEETING MATERIAL

Cliff #: 1130624

PREPARED FOR: Honourable Adrian Dix, Minister of Health

TITLE: Birth Tourism in British Columbia with a focus on Richmond Memorial Hospital.

MEETING REQUEST/ISSUE: Minister Dix has requested a briefing on birth tourism with David Byres and Ian Rongve.

SHOULD MINISTRY STAFF ATTEND THIS MEETING: Yes, David Byres and Ian Rongve

BACKGROUND:

- The Ministry of Health (the Ministry) does not endorse or support the marketing of birth tourism. However, the health authorities' role is to provide healthcare services to those who need it regardless of where they are from - no woman will be refused the care she needs during labour and delivery.
- Any individual without MSP coverage would be asked to pay the full non-resident fee for medical service up front, except in emergency cases. The baby of a non-resident of Canada would need to be a resident for three months to qualify for MSP.
- The province's health authorities have responsibility for collecting money owed to them for non-resident medical procedures, including birth.
- Women who are non-residents do give birth in British Columbia (B.C.) each year, for a
 variety of reasons, including premature or unexpected labour, or potentially to obtain
 Canadian citizenship for their child,
- B.C.'s Vital Statistics Agency has records of people giving birth here from many other places in the world, such as the United States, Mexico, Korea, China, India, the United Arab Emirates and Saudi Arabia.
- Citizenship for children born in B.C is the responsibility of the federal government and not a provincial matter.
- Richmond Hospital does see a higher number of non-resident births each year than other hospitals within Vancouver Coastal Health (VCH)
- Tourists and visitors to BC are not eligible for provincial health care benefits. The baby of a non-resident of Canada would need to be a resident for three months to qualify for MSP.
- From April 1, 2016 to June 2017 there were 27 diversions to other maternity hospitals due to overcapacity issues. 14 of the diversions were related to capacity issues in either Maternity or the NICU.
- VCH encourages women intending to use Richmond Hospital's maternity services to preregister with them 6-8 weeks prior to their due date. This may not reduce demand on services
 but it assists them in being more proactive in planning.

- The hospital and health authority have not indicated that this affects their capacity to provide services to British Columbians, even though the number of non-resident women giving birth in B.C. has increased.
 - o In 2015/16, 299 or 15.5% of total mothers at Richmond Hospital's Birth Centre were non-residents of Canada who paid privately for their care.
 - o In 2016/2017 379 or 17% of mothers who gave birth at Richmond Hospital's Birth Centre were non-residents who paid privately for their care. The vast majority gave a permanent address in China.
 - In 2017/18 469 or 22.1% of mothers who gave birth at Richmond Hospital's Birth Centre were non-residents who paid privately for their care.
 - o From April 1, 2018 to Oct. 18, 2018 there have been 223 non-resident mothers at Richmond Hospital.

Costs for a non-resident to give birth:

- Every pregnancy and labour are different, and the cost of prenatal, labour and delivery care
 will be different for each woman, dependent on a variety of factors.
- Non-residents of Canada are required to pay the costs associated with their care BC taxpayers are not being asked to pay these costs.
- Non-residents of Canada who present for birth at a lower mainland hospital are required to make a pre-payment deposit, except in emergencies. For example, Vancouver Coastal Health requires a deposit of \$8,200 for a vaginal birth and \$13,300 for a caesarcan section.
- Non-residents are required to pay for any hospital stay costs, including medical care for the
 mother and baby, including specialized care costs such as Neonatal Intensive Care Unit.
 Every pregnancy, labour and delivery is different and the costs will be different for each
 woman.

ADVICE: The Ministry will continue to work with VCH to monitor the issue.

JOINT MINISTER MEETING: N
IF SO, CAN THIS MATERIAL BE SHARED: Y/N

Program ED/Branch/Division: Acute and Provincial Services Branch

Date: March 12, 2019

Korchinski, John HLTH: EX

From:

Davidson, Heather A HLTH:EX

Sent: To: August 29, 2018 2:23 PM Rains, Derek HLTH:EX

Subject:

RE: Briefing with Premier re Birth Tourism Tomorrow

Attachments:

1120367- IBN non-resident births in BC.dacx

Here's a first draft. I wasn't able to reach Sue, and GCPE could not find any info on "baby houses", so I only briefly mentioned that aspect.

From: Rains, Derek HLTH:EX

Sent: Wednesday, August 29, 2018 1:27 PM

To: Patterson, Catherine M HLTH:EX

Cc: Abbott, Brendan HLTH:EX; Rongve, Ian HLTH:EX; Davidson, Heather A HLTH:EX

Subject: Re: Briefing with Premier re Birth Tourism Tomorrow

No problem.

Thx

Sent from my iPhone

On Aug 29, 2018, at 1:22 PM, Patterson, Catherine M HLTH:EX < Catherine.Patterson@gov.bc.ca > wrote:

I've just sent through eApprovals directly to Heather. It's due end of day today to DMO, so would appreciate receiving no later than 4pm.

From: Abbott, Brendan HLTH:EX

Sent: Wednesday, August 29, 2018 12:07 PM

To: Patterson, Catherine M HLTH:EX

Cc: Rongve, Ian HLTH:EX; Rains, Derek HLTH:EX; Davidson, Heather A HLTH:EX

Subject: RE: Briefing with Premier re Birth Tourism Tomorrow

Hî.

Heather on Derek's team can take the lead on this one...

We will reach out to GCPE as well as going back to our previous Fact Sheets, etc.

Thanks, Brendan

From: Patterson, Catherine M HLTH:EX Sent: Wednesday, August 29, 2018 11:57 AM To: Abbott, Brendan HLTH:EX

Cc: Rongve, Ian HLTH:EX

Subject: Briefing with Premier re Birth Tourism Tomorrow

Importance: High

Heads up.....just had a call from DMO. Premier has asked for a briefing tomorrow so materials need to be prepared. Will be coming shortly through eApps. Who should I direct to?

Have yet to receive confirmation who will be attending with Manjit (as DM). It's possible both Ian and you are required, but haven't heard on timing.

Catherine

Catherine Patterson
Manager, Divisional Operations
Hospital, Diagnostic and Clinical Services Division
Ministry of Health
PO Box 9639 Stn Prov Govt, Victoria BC V8W 9P1

Tel: 778 698-1749

Email: Catherine.Patterson@gov.bc.ca

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Korchinski, John HLTH:EX

From:

Abbott, Brendan HLTH:EX

Sent:

March 12, 2019 12:21 PM

To: Subject: Murphy, Carrie E HLTH:EX Fwd: IN RH

Attachments:

IN_Richmond Hospital birth tourism Jan 2018 (002).doc; ATT00001.htm

Begin forwarded message:

From: "Paul, Ruth C HLTH:EX" < Ruth.Paul@gov.bc.ca>

Date: March 12, 2019 at 12:14:51 PM PDT

To: "Abbott, Brendan HLTH:EX" < Brendan.Abbott@gov.bc.ca>

Cc: "Rains, Derek HLTH:EX" < Derek.Rains@gov.bc.ca>

Subject: IN RH

Policy Analyst, Hospital Services Branch Provincial, Hospital and Laboratory Health Services Division

Phone: 250-952-3093

BC Ministry of Health 6th Floor, 1515 Blanshard Street

Victoria BC V8W 3C8

BIRTH TOURISM March 2019

The issue of "birth tourism" may be brought up by the opposition during the spring session at the legislature. Jas Johal, MLA for Richmond-Queensborough will be presenting a petition and requesting to work with the Ministry of Health to look at ways to curtail the practice.

The impact of non-resident births or so-called "birth tourism" at Richmond Hospital has been the subject of media and political discussion regarding immigration issues, access to care for Richmond residents and the costs to individual mothers and the health care system in general. An April 2018 lawsuit against a non-resident mother for unpaid medical bills sparked further media interest. In August 2018, the federal Conservative Party passed a resolution to end birthright citizenship in Canada.

Q1. What is birth tourism?

- Birth tourism is when pregnant non-residents come to Canada to give birth with the purpose of their baby gaining Canadian citizenship.
- Q2. Jas Johal, MLA for Richmond-Queensborough says it is up to the Ministry of Health to stop birth tourism? Can the Ministry do this?
 - Matters of immigration are the responsibility of the federal government and for them to address.
 - The Ministry's role is to make sure that our hospitals deliver the best care to all patients who need their care and services.
 - We are not going to turn doctors and nurses and health care workers into immigration officers.
- Q3. Will the Ministry implement a ban on tourist birth's in B.C.'s hospitals as requested by Jas Johal?
 - We are not going to turn doctors and nurses and health care workers into immigration officers.
 - If someone needs care our hospitals will provide that doing otherwise would not be consistent with our core values.
- Q4. What percentage of births in BC are foreign births?

- In 2017/2018 469, or 22.1% of women who gave birth at Richmond Hospital's Birth Centre were non-residents. This is up from 2015/16 where 299 or 15.5% were non-residents.
- Provincially, less than 2% of women who gave birth are non-residents.

Q5. Where do most of the non-resident births in B.C. occur?

Most births of non-resident mothers in British Columbia occur at Richmond Hospital.

Q6. What is BC's stance on birthright citizenship?

- Matters relating to immigration and citizenship are the responsibility of the federal
 government the Ministry of Health's priority is to support the provision of health care
 services to those in need.
- For concerns around immigration and citizenship, individuals must engage in those discussions with the federal government

Q7. Are there tax dollar implications for British Columbians?

- Non-residents of Canada are required to pay for any hospital stay costs, including medical care for the mother and baby, including specialized care such as neonatal intensive care unit (NICU).
- VCH, as an organizational entity invoiced non-residents for approximately \$45 million for all non-resident services in 2017/18 and collected about 80% of that amount.
- For maternity cases at Richmond Hospital, the recovery rates are higher. Most non-residents pay their bills in full.
- In 2017, VCH has invoiced non-residents for approximately \$6.2 million in maternity services at Richmond Hospital, and recovered approximately 82% of that amount. (The larger value maternity cases arising from complications and not paid in full, skew the VCH recovery statistics).
- Non-residents were required to make a pre-payment deposit of \$8,200 for a vaginal birth and \$13,300 for a caesarean birth at VCH facilities. Effective November 1, 2018, the deposit amounts at VCH were increased to \$10,000 for a vaginal birth and \$15,000 for a caesarean birth. Non-residents are required to pay all hospital costs and medical care for the mother and baby.
- **Q8.** Are British Columbians being bumped or re-directed because of non-resident births?

- To date, the Birth Centre at Richmond Hospital is able to meet the growing number of non-resident births because the overall number of births at Richmond Hospital has remained consistent since 2014. In the first 3 months of 2018, which saw the largest increase in non-resident births, the number of resident births decreased slightly.
- Diversions due to capacity issues do not occur often but when they do, the decision is based on clinical care needs, not citizenship.
- Maternity cases fluctuate greatly, depending on demand, which makes them very different than other hospital units.
- Diversions due to capacity issues do not occur often but when they do, the decision is based on clinical care needs, not citizenship. Sometimes, diversions are for care reasons.
- Vancouver Coastal Health is continuing to monitor hospital capacity issues and discussing better ways of managing the demand.
- Richmond Hospital serves a community where over 60% of the residents are immigrants, some of whom are at different stages of their immigration/ residency process.
- Women intending to use Richmond Hospital's maternity services are encouraged to
 pre-register six to eight weeks prior to their due date. This may not reduce demand on
 services, but it will help the health authority be more proactive in its planning.

Q9. What is BC's stance on Birth Houses? Private care provided to patients?

- A "Birth House" often refers to a space (often a residential house) where pregnant non-Canadian resident women stay leading up to the birth of their child and return to prior to their return home.
- Any facility providing a certain level of health care services is required to be licensed under the Community Care and Assisted Living Act to ensure patient care and safety.
- The Ministry is not aware of any of these facilities providing that level of care. Previous
 visits by Vancouver Coastal to expected birth houses by inspectors found that there was
 no licensable care as defined under the Community Care and Assisted Living Act being
 provided at Richmond residences.
- Whether these residences have business licenses is a municipal responsibility, and not something the Ministry of Health has authority over.
- The ministry in no way endorses or supports the marketing of birth tourism.

- **Q10.** Why are the numbers being reported by Stats Canada, the provincial government and the federal governments different?
 - The Ministry of Health is aware of the data discrepancy and is considering possibilities as why this is so.
 - The Ministry of Health relies on our provincial data.
- Q11. Can government stop the marketing of birth tourism?
 - The ministry in no way endorses or supports the marketing of birth tourism.
 - This is a larger conversation however that must involve the federal government if there is to be proper enforcement.