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# Leaving Canada for medical care



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**T**here are a growing number of companies providing Canadians with easier access to medically necessary treatments outside the country. Of course, leaving Canada for medically necessary treatment is nothing new; Canadians have been doing so for many years, either in response to the unavailability of certain

treatments in Canada, in response to concerns about quality in Canada, or in response to long wait times for medically necessary treatment.

How many Canadians receive treatment outside Canada each year, though? While data on this topic are difficult to come by, it is possible to estimate the number

**Table 1: Estimated number of patients receiving treatment outside Canada, 2010**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic surgery	31	37	0	0	55	18	2	7	2	—	153
Gynecology	341	119	52	0	1,358	113	0	7	11	0	2,001
Ophthalmology	795	838	20	40	902	1,131	44	50	0	22	3,842
Otolaryngology	108	202	13	44	721	329	6	35	0	0	1,458
General surgery	676	191	188	209	2,431	1,160	46	15	0	0	4,914
Neurosurgery	47	88	0	0	96	156	—	0	—	—	387
Orthopedic surgery	526	354	0	96	711	208	7	54	6	17	1,979
Cardiovascular surgery	29	13	63	0	423	399	27	0	—	0	953
Urology	363	614	—	30	4,479	270	31	170	—	0	5,957
Internal medicine	495	531	152	164	1,585	990	8	127	7	0	4,058
Radiation oncology	11	33	—	—	40	26	7	—	0	—	116
Medical oncology	12	24	—	—	1,146	81	—	7	0	0	1,271
Residual*	2,131	2,404	456	349	9,245	2,524	106	381	17	91	17,705
<b>Total</b>	<b>5,565</b>	<b>5,447</b>	<b>943</b>	<b>933</b>	<b>23,192</b>	<b>7,406</b>	<b>282</b>	<b>851</b>	<b>44</b>	<b>130</b>	<b>44,794</b>

\* The residual count was produced using the average provincial percent of patients receiving treatment outside Canada and the residual count of procedures produced in *Waiting Your Turn*.

Source: Barua, Rovere, and Skinner 2010; calculations by author.

using the results of the Fraser Institute's *Waiting Your Turn* survey, and the counts of procedures completed each year in Canada, which are provided by the Canadian Institute for Health Information (CIHI).<sup>1</sup> While the computations below are approximate, they are the most accurate estimates currently available.

## Methodology

Each year, the Fraser Institute's *Waiting Your Turn* survey asks physicians across Canada—in 12 major medical specialties—the question, “Approximately what percentage of your patients *received* non-emergency medical treatment in the past 12 months outside Canada?” (emphasis in original). The answers are averaged for each of the specialties studied in *Waiting Your Turn* for each province, producing a table that reports the average percentage of patients receiving treatment outside Canada (Barua et al., 2010: table 11). In 2010, 1.0% of all patients in Canada

were estimated to have received non-emergency medical treatment outside Canada, the same as in 2009.

Combining these percentages<sup>2</sup> with the number of procedures performed in each province and in each medical specialty gives an estimate of the number of Canadians who actually received treatment outside the country. Two data-related issues must be noted before discussing the estimate. First, the number of procedures performed in Canada is not readily available from the Canadian Institute for Health Information (CIHI). Notably, Alberta and Quebec do not provide complete discharge abstract data (DAD) to the CIHI, which is the source for the procedures counts data used in *Waiting Your Turn*. The authors of *Waiting Your Turn* address this concern by making a pro-rated estimate of procedures using older hospitalization data. These estimated procedure counts fill in for the actual number of procedures in Alberta and Quebec.

Second, there is a temporal mismatch between the timing of the Fraser Institute's *Waiting Your Turn* survey and the CIHI's annual DAD release. Specifically,

procedure counts data used for *Waiting Your Turn* are typically one year behind (e.g., the 2010 edition of *Waiting Your Turn* used procedure counts from 2008/2009). While the calculation below uses the temporally mismatched procedures counts to provide up-to-date information, previous calculations adjusting for the temporal mismatch show that it does not appear to materially affect the trend witnessed in the overall count of Canadians. However, it does, as expected, affect the actual counts of Canadians (Esmail, 2007).<sup>3</sup>

The counts of the number of patients receiving treatment outside Canada each year that are produced by this methodology are likely to underestimate the actual number of patients being treated outside Canada. This is the result of a few factors. First, and most importantly, these numbers are based on specialist responses, which means that patients who leave Canada without consulting a specialist<sup>4</sup> are not likely to be included in the count shown in table 1. Second, the counts are based on the number of procedures estimated to have been performed in Canada, which is less than the total number of patients consulted and less than the total number of Canadians who would have required treatment, including those who left Canada to seek it.

## An estimated count of patients leaving Canada

The products of the percentage of patients receiving non-emergency treatment outside of Canada and the number of patients treated in Canada as estimated in *Waiting Your Turn* are shown in table 1.

A significant number of Canadians—an estimated 44,794 in total—received treatment outside Canada in 2010. This is a notable increase from the 41,006 Canadians estimated to have received treatment outside Canada in 2009. Increases in the estimated number of patients going outside Canada for treatment were seen in British Columbia (5,327 to 5,565), Alberta (5,354 to 5,447), Saskatchewan (707 to 943), Manitoba (678 to 933), Ontario (20,510 to 23,192), Quebec (6,917 to 7,406), Nova Scotia (601 to 851), and Prince Edward Island (15 to 44). Conversely, New Brunswick (497 to 282) and Newfoundland and Labrador (400 to 130) saw decreases in the estimated number of patients who received treatment outside Canada.

The national increase in the estimated number of patients treated outside Canada occurred at the same time as a national increase in the median wait time for medically necessary treatment. Specifically, the national median wait time for treatment after consultation with a specialist was 8.0 weeks in 2009 and 9.3 weeks in 2010.



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## Conclusion

In 2010, an estimated 44,794 Canadians received non-emergency medical treatment outside Canada. This estimate likely underestimates the actual number of patients who received treatment outside the country that year.

## Notes

- 1 This includes estimates for some provinces that do not provide comparable data to the CIHI.
- 2 Readers should note that exact values, not the rounded values which appear in table 11 in Barua et al., 2010, are used for this calculation.
- 3 Specifically, the Canadian counts with the temporal mismatch for 2004, 2005, and 2006 were 49,392, 44,022, and 39,282, respectively. Accounting for the mismatch, the counts for 2004 and 2005 were 47,011 and 45,776, respectively. See Esmail, 2007.
- 4 In 2010, the national median wait time between referral by a general practitioner and consultation with a specialist was 8.9 weeks. See Barua et al., 2010.

## References

- Barua, Bacchus, Rovere, Mark, and Brett J. Skinner (2010). *Waiting Your Turn: Wait Times for Health Care in Canada* (20th ed.). Fraser Institute.
- Esmail, Nadeem (2007). Receiving Medical Treatment Outside of Canada. *Fraser Forum* (February): 5–8.
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