Medical Consultants' Committee

Activity Plan

2011-2014

Chairperson's Message

I am pleased to provide the three year Activity Plan for the Medical Consultants' Committee (the Committee) in accordance with the requirements of the *Transparency and Accountability Act* for a Category 3 Government Entity. The Plan covers the period April 1, 2011 – March 31, 2014.

This Activity Plan provides an overview of the Committee and identifies key objectives to be accomplished during the fiscal period covered by the plan. As Chairperson of the Medical Consultants' Committee, my signature below is indicative of the entire Committee's accountability for the preparation of this plan and for the achievement of the annual objectives contained in this plan. The Committee has given its approval to the plan.

In the development of this plan careful consideration was given to the strategic directions of government, as communicated by the responsible minister (See Appendix A).

Dr. Blair Fleming MD Chairperson

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1.0 Overview

The Department of Health and Community Services has an Audit and Claims Integrity Division. Part of their mandate is to ensure that monies the Department of Health and Community Service pays to physicians, who submit claims to the Medical Care Plan (MCP), has been appropriately billed. This is achieved by ensuring that billable services have been rendered as claimed in accordance with the appropriate legislation and Departmental policy and procedures. This mandate is fulfilled through the performance of audits. The Medical Consultants' Committee (MCC) is a key component in the Department of Health and Community Services audit function.

The Committee reviews the patterns of practice and billing procedures of physicians who submit claims to the Medical Care Plan (MCP) as well as the utilization of services by beneficiaries. The Committee is an additional level of record review that adds further credibility to audit findings. The Committee reviews all evidence presented and can recommend recovery of funds billed in error and other corrective actions that serve to deter misbilling by all fee-for-service physicians. The MCC makes recommendations to the Minister of Health and Community Services with regard to cases of physician and beneficiary over-utilization, inappropriate billing and/or abuse. Recommendations are then considered and once finalized a notification letter is prepared and forwarded to the provider.

The Medical Consultants' Committee consists of seven members, as follows:

- Three physicians appointed by the Minister of Health and Community Services from a list submitted by the Newfoundland Labrador Medical Association. These members serve for a period of up to five consecutive years.
- A chartered accountant appointed by the Minister. This member serves for a period of up to five consecutive years.
- The Department's Medical Director, Assistant Medical Director and Dental Director who are ex officio members.

The Medical Consultants' Committee is chaired by the Assistant Medical Director.

As of April 1, 2011, membership on the Committee is as follows:

- 1. Dr. Blair Fleming MD, Assistant Medical Director, Department of Health and Community Services, Chair
- 2. Dr. Larry Alteen MD, Medical Director, Department of Health and Community Services
- 3. Dr. Ed Williams DDS, Dental Director, Department of Health and Community Services
- 4. Dr. Robert Randell, Specialist (term expires January 22, 2016)
- 5. Dr. Richard Barter, Non-salaried General Practitioner (term expires January 22, 2016)
- 6. Dr. Karen Horwood, salaried General Practitioner (term expires June 15, 2011)
- 7. Ms. Peggy Coady, Chartered Accountant (term expires January 22, 2016)

Members whose terms expire before the end of fiscal year 2013/14 will be replaced in accordance with Section 15 of the Medical Care Insurance Insured Services Regulations.

The Committee meets when one or more medical billing audits have reached the stage where they are ready for review by the Committee. Historically, the Committee has met from one to four times a year. Meetings are held in the Belvedere Building, 57 Margaret's Place, St. John's. The Committee does not have its own staff or budget; administrative support and remuneration expenses of the Committee's members are provided by the Audit and Claims Integrity Division of the Department of Health and Community Services.

2.0 Mandate

The Medical Consultants' Committee is established pursuant to Sections 14 and 15 of the Medical Care Insurance Physicians and Fee Regulations under *The Medical Care Insurance Act*, (1999). The duties and responsibilities of the Committee include providing advice to the Minister as follows:

- Review the patterns of practice and billing procedures of participating physicians and the utilization of services by beneficiaries.
- Where the Committee concludes that no corrective action is warranted beyond notification to the physician of a finding that a deviant pattern or unacceptable billing practice exists, that notification may be given or authorized by the Committee.
- Recovery of funds or other disciplinary or investigative action may be recommended by the Committee to the Minister.

3.0 Values

The Medical Consultants' Committee has adopted the Department of Health and Community Services' values, which are reflected daily as employees fulfill their roles and responsibilities. They are a key element of the department's culture.

Professionalism

Each person is qualified and competent, and supported in their work through a culture that encourages continuing education and employee development.

Excellence

Each person makes decisions based on the best evidence available and follows proven best practices to ensure individual and departmental performance is maintained at the highest possible standard.

Transparency and Accountability

Each person takes their responsibilities to their clients seriously and contributes to a culture of openness and transparency in decision-making and reporting.

Collaboration

Each person engages others, both within and external to the department, in a positive manner, respectful of others and their different perspectives.

Privacy

Each person manages and protects information related to persons/families/organizations/ communities and the department appropriately.

4.0 Primary Client

The primary client of the Medical Consultants' Committee is the Minister of Health and Community Services.

5.0 Vision

The Medical Consultants' Committee supports the vision of the Department of Health and Community Services. The Committee works to ensure the financial integrity of a key component of the health care system, based on the belief that proper stewardship of public funds, adds strength to the Department's efforts to realize its vision.

The vision of the Department of Health and Community Services is for individuals, families and communities to achieve optimal health and well being.

6.0 Mission

The Medical Consultants' Committee's mandate is not broad enough to develop a separate mission, therefore it has adopted the Departmental Mission. The MCC contributes to the Departmental mission by providing an informed, professional assessment with respect to physician billing issues. This level of record review adds credibility to compliance audit findings and recommendations to the Minister.

By March 31, 2017, the Department of Health and Community Services will have provided leadership to support an enhanced health care system that effectively serves the people of the province and helps them achieve optimal health and well-being.

Note: For a complete version of the Department's mission statement, please contact the Department of Health and Community Services Tel: 709-729-4984 or email: healthinfo@gov.nl.ca or visit http://www.health.gov.nl.ca/health/.

7.0 Annual Objectives

Over the course of the three year period from the beginning of fiscal 2011/12 to the end of fiscal 2013/14, the Medical Consultants' Committee will meet at least once each year and review cases prepared by the Audit and Claims Integrity Division of the Department of Health and Community Services. In so doing, this Committee further extends Government's ability to ensure the wise and prudent use of public resources. This supports the strategic direction of "Improved Accountability and Stability in the Delivery of Health and Community Services within Available Resources" (See Appendix A).

The Medical Consultants' Committee has developed the following annual objectives to measure its performance in auditing fee for service physician billing practices. The defined mandate of this Committee results in the annual objective remaining the same for each year of this Activity Plan. Progress will be reviewed at the end of each year to determine if changes in the indicators are necessary. In compliance with the *Transparency and Accountability Act*, the Committee also intends to prepare annual activity reports (i.e. 2011-2012, 2012-2013 and 2013-2014) on the extent to which the annual objectives have been achieved. The final year will also summarize the contribution that this Committee has made to delivering physician services within the available resources of the health and community services system.

By March 31, 2012, the Medical Consultant's Committee will have reviewed the patterns of practice and billing procedures of participating physicians and the utilization of services by beneficiaries in cases prepared by the Audit and Claims Integrity Division of the Department of Health and Community Services.

Measure: Reviews completed

Indicators:

- Number of cases forwarded by the Audit and Claims Integrity Division of the Department of Health and Community Services.
- Number of completed reviews of MCP billing audits on fee-for-service physicians.
- Yearly reports provided.
- Met a minimum of once annually.

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8.0 Appendix A: Strategic Direction

Strategic Direction Title: Accountability and stability of health and community services

Strategic Direction Outcome: Improved system performance and sustainability

Strategic Direction Statement:

As a priority of Government, record investments have been made in health care for several consecutive years. In 2010-2011, health and community services expenditures consumed approximately 37% of all government expenditures with the largest percentage allocated to regional health services (70%). The ability to sustain the provision of quality services requires the coordination and integration of services, increased standardization and monitoring of clinical practice and service and innovation. A focus on increased monitoring and evaluation, the achievement of balanced budgets, the stabilization of health human resources and increased utilization of information for decision making will lead to a sustainable health system and contribute to improved health outcomes for the people of the Province.

Focus Areas of the Strategic Direction	The Strategic Direction of Improved Accountability and Stability in the Delivery of Health and Community Services within Available Resources is		
	Not being implemented at this time (rationale included in the plan)	Addressed only in specific sub-areas (rationale included in the plan)	Addressed in the activities plan
Evaluation of Legislation, Programs and Services			*
Performance Measurement/Monitoring			*

Note: For a complete version of Government's strategic directions, contact the Department of Health and Community Services Tel: 709-729-4984 or email: healthinfo@gov.nl.ca or visit http://www.health.gov.nl.ca/health/.