

ANNUAL PERFORMANCE ACTIVITY REPORT

MEDICAL CONSULTANTS' COMMITTEE

2007- 2008

September 15, 2008

Message from the Chairperson

I am pleased to provide the 2007-2008 Activity Report for the Medical Consultants' Committee (the Committee) in accordance with the requirements of the *Transparency and Accountability Act* for a Category 3 Government Entity. This report addresses the strategic directions of the Department of Health and Community Services, as communicated by the responsible minister and as deemed relevant to the work of this Committee (See Appendix A).

This Activity Report provides an overview of the Committee and the extent to which planned and actual objectives were met during the fiscal period covered by the report and objectives in the 2007-2008 Transitional Activity Plan. As Chairperson of the Medical Consultants' Committee, my signature below is indicative of the entire Committee's accountability for the preparation of this report and for the achievement of the specific objectives contained therein.

Yours sincerely,

BLAIR FLEMING MD
Chair
Medical Consultant's Committee

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1.0 Overview

The Medical Consultants' 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 advises the Minister of Health and Community Services of its findings.

The Committee is a key component in the Department of Health and Community Services audit function. It can recommend recovery of funds billed in error and other corrective actions and serves to deter misbilling by all fee-for-service physicians.

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.

Current membership of the Committee is as follows:

1. Dr. Blair Fleming MD, Assistant Medical Director, Department of Health and Community Services, Chair
2. Dr. Cathi Bradbury MD, Medical Director, Department of Health and Community Services
3. Dr. Ed Williams DDS, Dental Director, Department of Health and Community Services
4. Dr. Michael Paul, Specialist (term expires May 31, 2009)
5. Dr. Stephen Major, fee-for-service General Practitioner (term expires May 31, 2009)
6. Dr. Karen Horwood, salaried General Practitioner (term expires June 14, 2011)
7. Mr. Robert Healey, Chartered Accountant (term expires May 30, 2009)

Members whose terms expire before the end of fiscal year 2010/11 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. The Medical Consultants' Committee is not required to prepare an audited financial statement. Administrative support and remuneration of the Committee's members' expenses are provided by the Audit and Claims Integrity Division of the Department of Health and Community Services. In 2007-2008 the committee met four times at the Belvedere Building in St. John's. Total expenses for the meetings held were as follows:

Per Diems	\$7,000.00
Food/Refreshments	<u>\$539.89</u>
	<u>\$7,539.89</u>

2.0 Mandate

The Medical Consultants' Committee is established pursuant to Sections 14 and 15 of the Medical Care Insurance Physicians and Fee Regulations. 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 Primary Client

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

4.0 Values

The following values are considered to be important to the Department of Health and Community Services. The Medical Consultants' Committee has adopted the Department's values. These values are incorporated in daily activities and are present in the overall organizational climate. They include:

Collaboration

Each person engages actively with partners.

Fairness

Each person uses a balance of evidence for equity in decision making.

Privacy

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

Respect

Each person provides opportunities for others to express their opinions in an open and safe environment.

Transparency in decision making

Each person is forthcoming with all information related to decision making except where prohibited by legislation.

Excellence

Each person performs to the best of their ability, and within available resources.

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 the Departmental Mission has been adopted. The following is the mission from the Department's and the Medical Consultant's Committee's 2007-2008 plans*:

“By 2011, the Department of Health and Community Services will have developed and guided implementation of provincial policies and strategies to ensure equitable and quality services in population health, to public health capacity and, accessibility to priority services, and to improve accountability and stability in the health and community services system.”

The MCC contributed to improved accountability and stability in the delivery of health and community services within available resources. By reviewing patterns of practice and billing procedures of participating physicians and the utilization of services by beneficiaries, the Medical Consultant's Committee utilizes information to make decisions and in turn, the results from their review provides further evidence for improvements in physician billing practice and health system planning.

Note: For an updated and complete version of the Department's and Medical Consultants' Committee 2008-2011 Plans, which contain the current mission, 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 Activities 2007-2008

The Committee prepared a Transitional Activity Plan for 2007- 2008 and activity during the year was greater than that planned. The Committee objective and performance activity during this period follows:

2007-08 Objective:

By the end of the fiscal year 2007/08, the Medical Consultants' Committee will have met at least three times and reviewed cases prepared by the Audit and Claims Integrity Division of the Department of Health and Community Services.

Measure:

Reviewed cases prepared by the Audit and Claims Integrity Division of the Department of Health and Community

Planned Activity	Actual Activity in 2007-2008
<p>Indicators:</p> <ul style="list-style-type: none"> ▪ Meet a minimum of three times ▪ Completed reviews of MCP billing audits on fee-for-service physicians 	<p>By the end of the 2007/08 fiscal year, the Committee:</p> <ul style="list-style-type: none"> • met 4 times and were presented with 7 MCP billing audits on 7 fee-for-service physicians by the Audit and Claims Integrity Division of the Department of Health and Community Services, • completed review of 7 MCP billing audits on 7 fee-for-service physicians, • recommended recovery of a total of \$386,044.72 that had been billed in error by the 7 physicians , • submitted an Activity Report for 2006-2007 and prepared and approved their Activity Plan for 2008 – 2011.

Discussion of Results:

This additional level of record review adds further credibility to audit findings. The Committee reviews all evidence presented by the Audit and Claims Integrity Division and can recommend recovery of funds billed in error and other corrective actions that serves to deter misbilling by all fee-for-service physicians. This focused review contributes to the wise and prudent use of public resources and increased accountability and stability in the delivery of health and community services.

8.0 Appendix A: Strategic Direction

1. **Strategic Direction Title:** Improved accountability and stability in the delivery of health and community services within available resources

Strategic Direction Statement: Delivery of health and community services occurs in the context of Government's commitment to bring the Province's finances in order.

Clarifying Statement: The Health and Community Services system consumes 46 per cent of all Government program expenditures and this has an important impact on the fiscal stability of the Province. Government must ensure the wise and prudent use of public resources and this includes reviewing MCP billing by fee-for-service physicians and utilization of services by beneficiaries.

Focus Areas of the Strategic Direction	This Direction is/was		
	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
Identification and utilization of information for evidence based planning in service delivery.			*

Note: For a complete version of the Department'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/> .