

MEDICAL CONSULTANTS' COMMITTEE

ACTIVITY REPORT

2021-22

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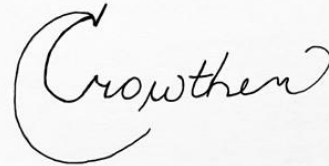
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1.0 Message from the Chairperson

I am pleased to provide the **2021-22 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 Activity Report provides an overview of the Committee and the extent to which planned results were met during the fiscal period April 1, 2021 to March 31, 2022. As Chairperson of the Committee, my signature below is indicative of the entire Committee's accountability for the actual results reported herein.

Yours sincerely,

A handwritten signature in black ink on a light grey rectangular background. The signature is written in a cursive style and reads "Crowther".

Colleen Crowther MD FRCPC
Chairperson
Medical Consultants' Committee

2.0 Committee Overview

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

Membership

The 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 and 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; and
- The Department's Director of Medical Services, Assistant Medical Director and Dental Consultant are ex-officio members.

Committee membership during 2021-22 was as follows:

1. Dr. Colleen Crowther, Assistant Medical Director, Department of Health and Community Services
2. Dr. Ed Williams, Dental Consultant, Department of Health and Community Services
3. Ms. Lisa Curran, Director of Medical Services, Department of Health and Community Services
5. a salaried general practitioner (vacant)
6. Dr. Robert Randell, consultant
7. Dr. Richard Barter, non-salaried family physician
8. Dr. Peggy Coady, chartered professional accountant

Legislative Authority

The Committee receives its authority from the **Physicians and Fee Regulations** under the **Medical Care and Hospital Insurance Act**. Members whose terms have expired will be replaced in accordance with the Independent Appointments Commission process. Subsection 15(6) of the **Physicians and Fee Regulations** outlines that when a Committee member's term expires, he or she continues to be a Committee member until replaced.

Meeting Frequency

The Committee meets when one or more medical billing audits have reached the stage where they are ready for review by the Committee. Historically, it has met one to four times a year. The Committee was not able to meet in 2021-22.

Expenditures

The 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.

2.1 Mandate

The Committee is established pursuant to Sections 14 and 15 of the **Physicians and Fee Regulations** under the **Medical Care and Hospital Insurance Act**. The Committee provides advice to the Minister based on the following duties and responsibilities:

- Review of 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 Report on Performance 2021-22

Annual Objective 2021-22

Over the course of the three-year period from the beginning of fiscal 2020-21 to the end of fiscal 2022-23, the Committee will meet at least once each year and review cases prepared by the Audit and Claims Integrity Division. In so doing, this Committee further extends Government’s ability to ensure the wise and prudent use of public resources.

The Committee has developed the annual objective to measure its performance in auditing fee-for-service physician billing practices. The defined mandate of this Committee results in the annual objectives remaining the same for each year of the Activity Plan. This report is the second to report on progress made under the 2020-23 Activity Plan. In compliance with the **Transparency and Accountability Act**, the Committee also intends to prepare annual activity reports (i.e., 2020-21, 2021-22, 2022-23) on the extent to which the annual objective has been achieved.

Indicators 2021-22 Planned Activity	Actual Activity in 2021-22
Number of cases forwarded by the Audit and Claims Integrity Division of the Department of Health and Community Services.	By the end of the 2020-21 fiscal year, the Committee received eight MCP billing audits on fee-for-service physicians from the Audit and Claims Integrity Division.
Number of completed reviews of MCP billing audits on fee-for-service physicians.	The Committee did not complete any reviews of MCP billing audits on fee-for-service physicians for 2021-22. This was due to multiple factors, including staffing resources within Audit and Claims Integrity, the inability of staff to complete this work while working from home during lockdowns, member unavailability, and preference of the Committee to meet in-person versus virtually.
Annual Reports produced.	The Committee produced an Annual Report for 2020-21 which was tabled in the House of Assembly.
Met a minimum of once annually.	The Committee did not meet in 2021-22.

Discussion of Results (2021-22)

The Committee reviews evidence presented by the Audit and Claims Integrity Division and recommends recovery of funds billed in error and other corrective actions that serve to deter misbilling by all fee-for-service physicians. This focused review contributes to the prudent use of public resources and increased accountability and stability in the delivery of health and community services.

The Committee was unable to meet its annual objective of meeting at least annually in 2021-22. A meeting was not held due to complications related to the COVID pandemic. It is anticipated that there will be compensatory meetings as a result in early 2022 when staff are in the office regularly and Committee members can attend in-person.