Medical Consultants’ Committee

Activity Plan

2014-2017
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, 2014 – March 31, 2017.

This Activity Plan provides an overview of the Committee and identifies the key objective 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 objective 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
# Table of Contents

1.0 Introduction

2.0 Overview

3.0 Mandate

4.0 Values

5.0 Primary Client

6.0 Vision

7.0 Mission

8.0 Objective

Appendix A: Strategic Direction
1.0 Introduction

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 is a key component in the Department of Health and Community Services audit function.

2.0 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 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 Committee 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, 2014, membership on the Committee is as follows:

1. Dr. Blair Fleming MD, Assistant Medical Director, Department of Health and Community Services, Chair (Acting until replacement is finalized)
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. Daniel Hewitt, salaried General Practitioner (term expires July 16, 2016)
7. Ms. Peggy Coady, Chartered Accountant (term expires January 22, 2016)

Members whose terms expire before the end of fiscal year 2016/17 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 were held in the Belvedere Building, 57 Margaret’s Place, St. John’s until December 2013. Beginning in 2014 they will be held at the Department of Health and Community Services, West Block Confederation Building. 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.
3.0 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.

4.0 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.

<table>
<thead>
<tr>
<th>CORE VALUES</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Transparency and Accountability</strong></td>
<td>Each person carries out their responsibilities while contributing to a culture of openness in decision making</td>
</tr>
<tr>
<td><strong>Collaboration</strong></td>
<td>Each person will work together in a positive manner with co-workers, partners and stakeholders, sharing knowledge and resources to identify potential solutions to priority issues</td>
</tr>
<tr>
<td><strong>Innovation</strong></td>
<td>Each person actively seeks new ways to develop and implement more effective and efficient programs and services in an effort to achieve better health outcomes for the people of the province</td>
</tr>
<tr>
<td><strong>Privacy</strong></td>
<td>Each person manages and protects information related to persons/families/organizations/communities and the department appropriately while at the same time promoting an environment of openness with each other and our partners, including the public we serve</td>
</tr>
<tr>
<td><strong>Excellence</strong></td>
<td>Each person demonstrates high professional standards, takes pride in performing every task with openness and integrity and willingly supports others to fulfill their roles</td>
</tr>
</tbody>
</table>
5.0 Primary Client

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

6.0 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.
7.0 Mission

The Medical Consultants’ Committee’s mandate is not broad enough to develop a separate mission, therefore it has adopted the Departmental Mission. The Committee 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/.

8.0 Objective

Over the course of the three year period from the beginning of fiscal 2014/15 to the end of fiscal 2016/17, 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 performance and efficiency in the health and community services system to provide quality services that are affordable and sustainable.” (See Appendix A).

The Committee has developed the following annual objective 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. 2014-2015, 2015-2016 and 2016-2017) on the extent to which the annual objective has 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, 2015, 2016 and 2017 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.
Appendix A: Strategic Direction

Strategic directions are the articulation of desired physical, social, or economic outcomes and normally require action by or involvement of, more than one government entity. These directions are generally communicated by the Provincial Government through platform documents, Throne and Budget Speeches, policy documents and other communiqués. They summarize the outcomes desired for the health sector and are communicated to entities that plan and report in collaboration with the Department. The direction and focus area related to the work of the Medical Consultant’s Committee for the planning period 2014-17 is as follows:

Strategic Direction

Title: An Accountable, Sustainable, Quality Health and Community Services System

Outcome: Improved performance and efficiency in the health and community services system to provide quality services that are affordable and sustainable.

Currently, approximately 40% of the provincial budget is spent on health care. The budget has almost doubled since 2003/04 to its current level of $3 billion. The growth in health care spending can be attributed to a number of factors including the aging of our population, geographical layout of the province, new and more expensive treatments, increased incidence in chronic disease and increased health provider costs. These demands and growth characteristics require the Department, in partnership with the Regional Health Authorities, to work together to address cost containment and sustainability through innovation and the adoption of consistent evidence informed service delivery approaches.

Through a renewed focus on collaboration, innovation and best practices, health and community services will become more efficient. Improved efficiency means sustainable costs over the long term and the delivery of quality services in a more effective manner to better meet the needs of individuals, families and communities.

<table>
<thead>
<tr>
<th>Focus Areas of the Strategic Direction 2014-2017</th>
<th>Strategic Direction addressed by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation of Legislation, Policies, Programs and Services</td>
<td>Activity Plan</td>
</tr>
</tbody>
</table>