MEDICAL CONSULTANTS’ COMMITTEE

ACTIVITY PLAN

2008-2011
Chairperson’s Message

I am pleased to provide the three year 2008/2011 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. 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).

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 specific objectives contained therein.

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 whose mandate is to ensure that monies the Department of Health and Community Service expends annually have been appropriately distributed. 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.

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.

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. 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. 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 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. In so doing, this Committee further extends Government’s ability to ensure the wise and prudent use of public resources.

By March 31, 2011 the Department of Health and Community Services will have guided the implementation of provincial policies and strategies that are developed to ensure equitable and quality services in population health, enhanced public health capacity, accessibility to priority services and improved accountability and stability in the health and community services system.

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 Goals and Objectives

Over the course of the three year period from the beginning of fiscal 2008/09 to the end of fiscal 2010/11, 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.

**Goal:** By March 31, 2011 the Medical Consultants’ Committee will have contributed to improved accountability and stability in the health and community services system by reviewing 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 Division of the Department of Health and Community Services.

**Measure:** Contributed to improved accountability and stability in the health and community services system

**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

**Annual Objectives**

The Medical Consultants’ Committee has developed the following annual objectives to accomplish the above goal. At this time, the defined mandate of this Committee results in the annual objective remaining the same for each year of this Activity Plan. Measures and indicators are provided for the first year (2008-09) and the remaining two years will be developed when progress in 2008-2009 is determined. These indicators will be provided in the annual report for the respective years.

By March 31, 2009 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 Division of the Department of Health and Community Services.

**Measure:** Reviews completed
**Indicators:**

- Number of cases forwarded by the Audit and Claims Division
- Number of cases reviewed

By March 31, 2010 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 Division of the Department of Health and Community Services.

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In compliance with the Transparency and Accountability Act, the Committee also intends to prepare annual activity reports (i.e. 2008-2009, 2009-2010 and 2010-2011) on the extent to which the above goal and annual objectives have been achieved.
8.0 Appendix A: Strategic Direction

1. **Strategic Direction Title:** Accountability and Stability of Health and Community Services

   **Strategic Direction Outcome:** 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 44 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.

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<tr>
<th>Focus Areas of the Strategic Direction</th>
<th>This Direction is/was</th>
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<tbody>
<tr>
<td></td>
<td>Not being implemented at this time (rationale included in the plan)</td>
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<tr>
<td>Identify and monitor outcomes for selected programs</td>
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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/](http://www.health.gov.nl.ca/health/).