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**FINAL**

- s.13

- Dr. Halpenny is also continuing to follow up on the process involving a physician recently charged with fraud that was referred to the Ministry of Health's Special Investigations Unit.

**2.0 Record of Decisions (ROD):**

A **motion** to accept the MSC Record of Decisions for December 7, 2016, was approved.

**3.0 Expenditure Report/Managing the Available Amount:**

- The MSC reviewed the 2015/16 and 2016/17 Medical (Non-Lab) and Laboratory Fee-for-Service Payments (FFS) Year-Over-Year Change by Month reports as of December 31, 2016 and compared 2016/17 projected payments against the Available Amount based on MSP billing data updated as of December 31, 2016.

- As per the projected 2016/17 Available Amount variance, the Commission discussed its responsibility according to the *Physician Master Agreement* to alert the Ministry of Health and the Doctors of BC and it was agreed that a letter should be sent to both parties.

Nancy South and Eric Larson also advised that they will be discussing the projections with the Ministry's financial staff and will report back to the Commission.

- Nancy and Eric provided the Commission with a budget variance model for non-lab expenditures as of December 31, 2016 and they discussed non-lab cost drivers for the period April 1 to December 31, 2016 as well as spending growth by specialty and the top 10 non-lab fee items by dollar increase for the same period. As per the MSC's request, Nancy and Eric also provided more detailed analysis regarding cost drivers for ophthalmology and growth in ophthalmology paid services from April 1 to December 31, 2016. The Commission raised the issue of patient outcomes with respect to the value and appropriateness of some ophthalmology tests.

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Nancy South**  
**Eric Larson**

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**FINAL**

**4.0 Update re Access to MRIs:**

Dr. Jeff Coleman, Physician Consultant, Ministry of Health, provided the Commission with a comprehensive overview of British Columbia's Advanced Medical Imaging Strategy (AMIS).

Dr. Coleman discussed MRI utilization, indicating that in 2014/15, MRI wait times in the province were the longest in Canada and MRI exams per 1,000 population were the second lowest in the country. In late 2015, the Ministry of Health approved the Advanced Medical Imaging Strategy that included plans to increase MRI volumes yearly over a four year period, a capital needs assessment and \$20 million in increased funding.

Dr. Coleman reviewed the deliverables of the AMIS project and the current status of MRI exam volumes, wait times, capital and machines. He highlighted the Choosing Wisely appropriateness toolkit that has been developed in addition to quality key performance indicators and service distribution guidelines. He also outlined next steps including continued annual increases in MRI scans to 2018/19, options for consideration regarding governance funding models and capital procurement strategies and a roadmap for standardized requisition and electronic ordering of MRIs. Recommendations will be submitted to the Standing Committee on Health Services and Population Health by March 31, 2017.

**5.0 Advisory Committee on Diagnostic Facilities (ACDF):**

*Request for Decision*

- The Commission approved a **motion** removing the current temporary moratorium on polysomnography applications within the Interior Health Authority. This decision was based on a previous finding of insufficient medical need for the service.

*Diagnostic Accreditation Program (DAP) Withdrawal*

- The Commission passed a **motion** approving that immediate steps be taken to withdraw approval and revise the Certificate of Approval for Vancouver General Hospital in relation to the specific levels of pulmonary function accreditation withdrawn by the Diagnostic Accreditation Program (DAP).

*Information Item*

- The ACDF's *Standard Report of Approvals Granted* for December 14, 2016, was provided for the Commission's information.

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**FINAL**

**6.0 Joint Standing Committee on Rural Issues (JSC):**

Dr. Alan Ruddiman and Rod Frechette – co-chairs of the Joint Standing Committee on Rural Issues (JSC) – updated the Commission on recent JSC initiatives.

They indicated that the JSC is established under the Rural Practice Subsidiary Agreement (RSA) and is comprised of representatives from the Doctors of BC, the Ministry of Health and the health authorities. The JSC advises the government and the Doctors of BC on matters pertaining to rural medical practice and its goal is to enhance the availability and stability of physician services in rural and remote areas of British Columbia by addressing some of the unique and difficult circumstances face by physicians in these areas.

Dr. Ruddiman highlighted some of the JSC's funded programs including the Rural Retention Program that pays annual retention benefits to physicians working in eligible communities covered under the RSA. He also discussed the Rural Coordination Centre of BC that seeks to improve rural patient care in the province by coordinating rural health education in conjunction with the University of British Columbia's Faculty of Medicine, supporting the recruitment and retention of rural practitioners, and developing and sustaining community health services and professional partnerships.

**7.0 Extra Billing/Legal Update:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.
- s.14
- s.14;s.22



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**FINAL**

s.14;s.22

- s.14

***Action:***  
**Lee Peacock**

s.13;s.14

***Action:***  
**Dr. Robert Halpenny**

- s.14

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***Action:***  
**Joanne Glover**

- s.14;s.22

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*The January 18<sup>th</sup> meeting was adjourned at 1:15 p.m.*

*The next regular meeting of the Medical Services Commission is scheduled for Wednesday, February 22, 2017, and will be held in Victoria.*

**Guests:** Eric Larson (*Ministry of Health*)  
Dr. Sandra Lee/Dr. Doug McTaggart (*via teleconference*)/Shannon Gibson/  
Jill Murray (*Guidelines and Protocols Advisory Committee*)  
Joanne Philley/Victor Yan (*Ministry of Health*)  
Jonathan Penner (*Ministry of Justice*) (*via teleconference*)  
Marie Thelisma/Evan Machin/Dr. Shiroy Dadachanji (*Ministry of Health*)

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- Dr. Halpenny advised that he forwarded a letter to Stephen Brown, Deputy Minister, regarding the audit priorities the MSC recommended at its last meeting. To date, no response has been received.
- Dr. Halpenny is also awaiting a response to the letter he forwarded to the Ministry and the Doctors of BC regarding a projected 2016/17 Available Amount overrun.
- With respect to the MSC public member vacancy and the need for a full complement of representatives, the Commission agreed that Dr. Halpenny should send a letter to the Minister of Health asking that this position be filled as soon as possible.
- Dr. Halpenny indicated that discussions are underway with the College of Physicians and Surgeons of BC regarding a Memorandum of Understanding regarding the sharing of sensitive information.
- The Commission discussed the need to password-protect the circulation of its meeting materials and move towards setting up a Sharepoint site where MSC members will be able to access the material with an id.

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Lee Peacock**

**2.0 Record of Decisions (ROD):**

A **motion** to accept the MSC Record of Decisions for January 18, 2017, was approved.

**3.0 Expenditure Report/Managing the Available Amount:**

- The MSC reviewed the 2015/16 and 2016/17 Medical (Non-Lab) and Laboratory Fee-for-Service Payments (FFS) Year-Over-Year Change by Month reports as of January 31, 2017 and compared 2016/17 projected payments against the Available Amount based on MSP billing data updated as of January 31, 2017.

At the MSC's request, Eric Larson will follow up to determine whether the 2016/17 Available Amount was adjusted to account for the Economic Stability Dividend increase and the disparity correction as per the *Physician Master Agreement*.

**Action:**  
**Eric Larson**

- Eric provided the Commission with a budget variance model for non-lab expenditures as of January 31, 2017 and discussed non-lab cost drivers for the period April 1, 2016 to January 31, 2017 as well as spending growth by specialty and the top 10 non-lab fee items by dollar increase for the same period. He also provided more detailed

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analysis regarding paid cardiology services.

**4.0 MSC 2016/17 Strategic Plan:**

The Commission revised its 2016/17 work plan and agreed that it would proceed with a planning day on April 26<sup>th</sup> to revisit its strategic framework ("house") and update its work plan for 2017/18 as necessary.

Dr. Robert Halpenny, MSC Chair, will discuss expectations for the planning day with potential facilitators.

**Action:**  
**Dr. Robert Halpenny**

**5.0 Patterns of Practice Committee (POPC):**

The Commission approved a **motion** appointing Dr. Lorne Verhulst as the new Chair of the Patterns of Practice Committee (POPC) replacing Dr. Keith White, effective February 22, 2017.

The MSC Chair signed a Minute of the Commission formalizing the appointment.

**6.0 Guidelines and Protocols Advisory Committee (GPAC):**

Requests for Decision

- The Commission approved a **motion** adopting the revised *Chronic Obstructive Pulmonary Disease (COPD): Diagnosis and Management* guideline presented by Dr. Doug McTaggart.

A Minute of the Commission was signed by the MSC Chair, formalizing the Commission's approval of the guideline.

- The Commission approved a **motion** adopting the revised *Palliative Care for the Patient with Incurable Cancer or Advanced Disease (Part 1: Approach to Care; Part 2: Pain and Symptom Management; and Part 3: Grief and Bereavement)* guidelines presented by Dr. Sandra Lee.

A Minute of the Commission was signed by the MSC Chair, formalizing the Commission's approval of the guidelines.

**7.0 Doctors of BC/Ministry of Health Requisition Committee:**

Joanne Philley, Senior Clinical Analyst, Provincial Laboratory Coordination Office and co-chair of the Doctors of BC/Ministry of Health Requisition Committee, provided the Commission with a comprehensive overview of the Committee.

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She reviewed the Committee's governance and indicated that it provides oversight for the development and maintenance of standard outpatient requisition forms that assist appropriate utilization of, and creation of, records for insured diagnostic services provided in an outpatient setting and facilitates implementation of, and adherence to, BC Guidelines.

Joanne also highlighted objectives (e.g., supporting and enabling health system transformation) and key deliverables (a revised Terms of Reference and the development of an operations manual) from the Committee's 2015-2018 strategic plan and discussed the diagnostic requisition forms currently under review and/or pending approval.

*Request for Decision*

- The Commission was asked to approve a revised Standard Outpatient Bone Densitometry Requisition HLTH 1905 2016/01/14 form but deferred a decision until the next meeting as it was advised that the form has not yet been endorsed by the Board of the Doctors of BC despite being submitted twice nor has the Doctors of BC provided any guidance to the Requisition Committee on how to proceed.

Prior to the next MSC meeting, Dr. Robert Halpenny, Chair, will discuss this matter and review the process with Allan Seckel, CEO of the Doctors of BC.

**Action:**  
**Dr. Robert Halpenny**

**8.0 Extra Billing/Legal Update:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.

- s.14

s.14

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***Action:***  
**Joanne Glover**

**9.0 MSP Updates:**

Stephanie Power provided the Commission with an overview of the Premium Assistance (PA) program that assists MSP beneficiaries with the cost of premiums based on their income as verified with the Canada Revenue Agency. She discussed January 2017 changes to premiums and PA, indicating that the maximum threshold to qualify was increased from an adjusted income of \$30,000 to \$42,000.

Stephanie also updated the MSC on the recent Budget and Fiscal Plan 2017/18-2019/20 and changes to premiums and PA effective January 1, 2018, including a 50 percent premium rate reduction for existing PA levels and a 50 percent reduction in premiums for individuals and couples

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with an adjusted net income of \$42,000 to \$120,000.

The government will move toward complete elimination of MSP premiums at a date yet to be determined.

**10.0 Audit and Investigations Branch (AIB) Update:**

Marie Thelisma, Dr. Shiroy Dadachanji and Evan Machin from the Audit and Investigations Branch (AIB) updated the Commission on 2016/17 year-to-date audit statistics. They also provided the Commission with an overview of the October 19, 2016 and January 31, 2017 Audit and Inspection Committee (AIC) meetings, reviewing the referrals accepted by the AIC and highlighting the audit reports that were approved.

Dr. Robert Halpenny, MSC Chair, indicated that he and Joanne Glover, MSC Legal Counsel, s.14

s.14

**Action:**  
**Dr. Robert Halpenny**  
**Joanne Glover**

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***The February 22<sup>nd</sup> meeting was adjourned at 1:30 p.m.***

***The next regular meeting of the Medical Services Commission is scheduled for Wednesday, April 5, 2017, and will be held in Victoria.***



**Guests:** Nancy South/Eric Larson (*Ministry of Health*)  
Greg Leake (*Ministry of Health*)  
Kathryn Kickbush (*Ministry of Justice*)  
Marie Thelisma (*Ministry of Health*)  
Kevin Samra/Victoria Schuckel (*Ministry of Health*)  
Woody Turnquist/Tricia Braidwood-Looney (*Advisory Committee on Diagnostic Facilities*)

**Action:**  
Dr. Robert Halpenny

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**2.0 Record of Decisions (ROD):**

A **motion** to accept the MSC Record of Decisions for February 22, 2017, was approved.

**3.0 Expenditure Report/Managing the Available Amount:**

- The MSC reviewed the 2015/16 and 2016/17 Medical (Non-Lab) and Laboratory Fee-for-Service Payments (FFS) Year-Over-Year Change by Month reports as of February 28, 2017 and compared 2016/17 projected payments against the Available Amount based on MSP billing data updated as of February 28, 2017.
- Nancy South and Eric Larson provided the Commission with a budget variance model for non-lab expenditures as of March 1, 2017 and discussed medical fee-for-service cost drivers for the period April 1, 2016 to February 28, 2017, as well as spending growth by specialty and the top 10 medical fee-for-service fee items by dollar increase for the same period. They also provided more detailed analysis regarding paid cardiology services including the top 10 cardiology fee items by service groups, cardiology expenditure growth for 2016/17 and cardiology patients by age group and health authorities.
- The Commission asked for an update regarding walk-in clinic data. Dr. Robert Halpenny, MSC Chair, and Nancy South, will discuss.

**Action:**  
**Dr. Robert Halpenny**  
**Nancy South**

**4.0 MSC 2016/17 Strategic Plan:**

The Commission reviewed the status of its 2016/17 strategic plan and discussed expectations for its 2017/18 planning day, scheduled for April 26<sup>th</sup>.

Dr. Robert Halpenny, MSC Chair, indicated that Kyle Stamm – from Helios Services Group Ltd. – will facilitate the planning day and will be sending members a survey to complete in advance of the session.

**5.0 Virtual Care Strategy Update:**

Greg Leake, Executive Director of the Ministry of Health's Virtual Care Strategy, provided the Commission with an overview of the significant elements related to virtual care.

Greg indicated that virtual care will impact all clinical services and have many potential benefits, opportunities and risks. He discussed major considerations including new models of care and care providers,

compensation models, clinical and professional standards, supporting technology, virtual care framework options, the potential development of policy directions<sup>s.13</sup>

s.13

s.13

and the security of personal health information versus access to care.

Greg indicated that he will continue to keep the MSC updated on the overall virtual care strategy as it evolves.

**6.0 Extra Billing/Legal Update:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.

- s.14

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***Action:***  
**Dr. Robert Halpenny**  
**Joanne Glover**

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s.14

- Marie Thelisma from the Audit and Investigations Branch informed the Commission that she and her staff are working on the next steps regarding the outstanding extra billing audits. She will provide the MSC with regular updates at each of its meetings.

**Action:**  
**Marie Thelisma**

- s.13;s.14

**Action:**  
**Dr. Robert Halpenny**  
**Joanne Glover**

**7.0 Health Technology Assessment Update:**

Kevin Samra, Executive Director of Legislation, Intergovernmental Relations and Knowledge Management and Victoria Schuckel, Executive Director, Knowledge Translation, updated the Commission on British Columbia's health technology review process.

They indicated that health technologies in the province are assessed in a coordinated and consistent manner informed by the available evidence to ensure patients receive the best health care that British Columbia can afford. They outlined how topics are identified for assessment, discussed technology appraisals and highlighted recent reviews that have been conducted including ceramic hip implants and the use of endovascular therapy for strokes.

Kevin and Victoria indicated that the Ministry's Health Technology Assessment Committee (HTAC) will be participating in a planning session on May 18<sup>th</sup> to discuss new subjects for review and/or reassessment and they encouraged the Commission to submit any potential topics to them prior to this date in addition to suggestions on how HTAC can better link with the MSC and its advisory committees (e.g., GPAC).

**8.0 Doctors of BC/Ministry of Health Requisition Committee:**

The Commission passed a **motion** approving the Standard Outpatient Bone Densitometry Requisition HLTH 1905 2017/03/06 form.

**9.0 Advisory Committee on Diagnostic Facilities (ACDF):**

Requests for Decision

- The Commission passed a **motion** approving an addition to the

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*Policies and Guidelines of the Medical Services Commission's Advisory Committee on Diagnostic Facilities* to restrict relocation applications from both public and privately-owned outpatient diagnostic facilities to be within the same geographic catchment area where the approved facility is currently located.

- The Commission passed a **motion** approving an amendment to the polysomnography catchment area policy, such that the catchment area will be based on the Health Service Delivery Area as defined by the Ministry of Health and BC Stats.
- The Commission passed a **motion** approving an amendment to the current polysomnography minimum bed capacity requirement, from a minimum of two (2) beds to three (3) beds appropriate for the purpose of overnight sleep testing. Remaining two bed facilities will be grandfathered to three beds upon facility application.

ACDF Recommended Denials

- The Commission passed a **motion** accepting the ACDF's recommendation that West Coast Medical Imaging Inc.'s application to relocate their Category III plus fee items 08572, 08574 and 08591 radiology Certificate of Approval from 6695 Sooke Road, Sooke to 15385 – 56 Avenue, Surrey, and downgrade their radiology test menu to Category III plus fee items 08572 and 08573, expand their hours of operation, upgrade their radiology equipment from analog to digital, and increase their monthly volume of MSP billable services, be denied.
- The Commission passed a **motion** accepting the ACDF's recommendation that the following three (3) applications be denied:
  - 1) <sup>s.13</sup>
  - 2)
  - 3)

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Information Item

- The ACDF's *Standard Report of Approvals Granted* for March 15, 2017, was provided for the Commission's information.

**10.0 MSP Updates:**

- Stephanie Power provided the Commission with an overview of the MSP digital service delivery and design project intended to reduce red tape and streamline MSP enrolment and applications for premium assistance.
- Stephanie also indicated that effective July 1, 2017, the First Nations Health Authority will be onboarding PharmaCare.
- Stephanie advised the Commission that Health Insurance BC recently conducted a client satisfaction survey. She will discuss the survey further at the MSC's May meeting.
- Stephanie will also keep the Commission updated on the procurement process with respect to the expiry of the MAXIMUS contract.

**Action:**  
**Stephanie Power**

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***The April 5<sup>th</sup> meeting was adjourned at 1:30 p.m.***

***The next regular meeting of the Medical Services Commission is scheduled for Wednesday, May 17, 2017, and will be held in Victoria.***



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related to opioids and methadone, he plans to follow up with the Billing Integrity Program (BIP) and ask that BIP review the billings for this fee code.

**Action:**  
**Dr. Robert Halpenny**

- Dr. Halpenny indicated that he also plans on following up with Nancy South regarding walk-in clinic data and Dr. Lorne Verhulst, the new Chair of the Patterns of Practice Committee.

**Action:**  
**Dr. Robert Halpenny**

**2.0 Record of Decisions (ROD):**

A **motion** to accept the MSC Record of Decisions for April 5, 2017, was approved.

**3.0 Expenditure Report/Managing the Available Amount:**

- The MSC reviewed the 2015/16 and 2016/17 Medical (Non-Lab) and Laboratory Fee-for-Service Payments (FFS) Year-Over-Year Change by Month reports as of April 30, 2017 and compared 2016/17 projected payments against the Available Amount based on MSP billing data updated as of April 30, 2017.
- Nancy South and Eric Larson provided the Commission with a budget variance model for non-lab expenditures as of April 30, 2017 and discussed medical fee-for-service cost drivers for the period April 1, 2016 to March 31, 2017, as well as spending growth by specialty and the top 10 medical fee-for-service fee items by dollar increase for the same period. They also provided more detailed analysis regarding anaesthesia expenditures, including cost drivers, anaesthesiologists by health authority and anaesthesia consultation fees.
- Dr. Halpenny advised that no response has been received with respect to the letter the MSC forwarded to the Ministry of Health and the Doctors of BC in February 2017 regarding a projected 2016/17 Available Amount overrun. The Commission agreed that a follow up letter should be sent.

**Action:**  
**Dr. Robert Halpenny**

**4.0 Guidelines and Protocols Advisory Committee (GPAC):**

Shana Ooms and Dr. Jim Gray – GPAC co-chairs – provided the Commission with a comprehensive overview of GPAC's 2017/18 work plan and annual report.

They reviewed recently completed guidelines, discussed the top ten guidelines as accessed via GPAC's website and updated the Commission on GPAC's mobile app. In terms of GPAC's 2017/18



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priorities, the Commission offered to provide direction to the Committee to ensure alignment with the MSC's objectives and priorities. GPAC's strategic planning will continue over the next few months.

**Action:**  
**MSC**

**5.0 Extra Billing/Legal Update:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.
- s.14

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**Action:**  
**Joanne Glover**

**6.0 Audit and Inspection Committee (AIC):**

Dr. Vern Davis, AIC Chair, and Dr. Shiroy Dadachanji and Evan Machin from the Audit and Investigations Branch (AIB) updated the Commission on 2016/17 year-to-date audit statistics. They also provided the Commission with an overview of the March 21, 2017 AIC meeting, reviewing the referrals accepted by the AIC and highlighting the audit reports that were approved.

In terms of goals for the upcoming year, Evan indicated that the Billing Integrity Program is working towards reaching a full compliment of auditors to complete more audits and reduce the time between onsite visits and the audit reports.

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**May 17, 2017**

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**FINAL**

**7.0 Advisory Committee on Diagnostic Facilities (ACDF):**

*Requests for Decision*

- The Commission passed a **motion** approving the appointment, on a temporary basis, of Ms. Anna Gardner as a third government representative to the ACDF.
- The Commission passed a **motion** approving the appointment, for a three year term, of Ms. LeeAnne Evanow as an MSP beneficiary (public) member to the ACDF.
- The Commission passed a **motion** approving the appointment, for a two year term, of Dr. Iain Allan as an MSP beneficiary (public) member to the ACDF.

A Minute of the Commission formalizing the ACDF appointments will be signed by the MSC Chair.

**Action:**  
**Dr. Robert Halpenny**

- The Commission passed a **motion** accepting the ACDF's recommendation that consultation with stakeholders take place regarding the removal of paragraphs b) through e) of the *Use of Existing Facilities* policy for all service modalities included in the *Policies and Guidelines of the Medical Services Commission's Advisory Committee on Diagnostic Facilities*, with the exception of diagnostic ultrasound and nuchal translucency.
- The Commission passed a **motion** accepting the ACDF's recommendation that an addition to the policies and guidelines to require individuals who may be applying for a privately-owned electromyography (EMG) Certificate of Approval, physically located within a health authority facility (hospital), to provide an appropriate letter of support for such an arrangement, signed by the health authority Chief Executive Officer or authorized delegate, be approved.
- The Commission passed a **motion** accepting the ACDF's recommendation that as it is not expected that the current ultrasound sonographer shortage will change in the immediate future, the current (temporary) moratorium on new, expanded or relocated outpatient ultrasound facilities be extended until June 1, 2020. Applications for addition of services to an existing ultrasound Certificate of Approval will continue to be accepted as will applications made for demonstrated urgent health or safety needs.

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- The Commission passed a **motion** accepting the ACDF's recommendation that the James Samuel Gosnell Memorial Health Centre radiology and ultrasound Certificates of Approval be extended for a 12-month term, effective June 13, 2017 to June 12, 2018.

**8.0 MSC 2017/18 Strategic Plan:**

- Following up from its April 26<sup>th</sup> planning session, the Commission reviewed the first draft of its 2017/18 strategic plan and noted revisions to several of the responsibilities. Dr. Robert Halpenny, MSC Chair, will forward the changes to Kyle Stamm, who facilitated the planning session. Kyle will return to the MSC's June 28<sup>th</sup> meeting to finalize the plan.

- s.13

**Action:**  
**Dr. Robert Halpenny**  
**Kyle Stamm**

**Action:**  
**Heather Davidson**

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***The May 17<sup>th</sup> meeting was adjourned at 2:00 p.m.***

***The next regular meeting of the Medical Services Commission is scheduled for Wednesday, June 28, 2017, and will be held in Victoria.***

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**June 28, 2017**

**Members Present:** Dr. Robert Halpenny (Chair), Sheila Taylor, Colin Kinsley, Dr. Bill Rife, Dr. Bryan Norton, Jillianne Code

**Member Regrets:** Dr. Matthew Chow, Kenneth Werker

**Alternate Present:** Dr. Charles Webb (*Doctors of BC*)

**Officials Present:** Joanne Glover (*MSC Legal Counsel/Ministry of Justice*)  
 (for routine business) Stephanie Power (*Ministry of Health*)

**MSC Secretariat:** Sarah Bryanton

**Guests:** Kyle Stamm (*Helios Group*)  
 Woody Turnquist/Glenn Armitage (*Advisory Committee on Diagnostic Facilities (ACDF)*)

**1.0 General/Chair's Report:**

- The June 28<sup>th</sup> Medical Services Commission (MSC) meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the agenda that was circulated and the Chair requested to include a new agenda item to discuss MSC Records of Decision and the accountability of the Reference Committee and the Medical Advisor Council (MAC).
- In his Chair's Report, Dr. Halpenny advised that he has not yet received a response to his letter to Dr. Brendan Carr (CEO of Island Health Authority) regarding the opening of a new private surgical centre in Victoria.
- Dr. Halpenny informed the MSC that further to a discussion he had with Dr. Heidi Oetter, Registrar of the College of Physicians and Surgeons of BC regarding potential billing abuse of fee code 00039 related to opioids and methadone, he followed up with Marie Thelisma of the Billing Integrity Program (BIP) and she confirmed there are specific criteria in place for use of that fee code and that BIP would provide an overview of the number of doctors using the fee code and the population of patients they are seeing.
- Dr. Halpenny indicated that he met with Eric Larson regarding walk-in clinic data. Eric confirmed that he would do some analysis of new

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graduates with high patient numbers who appear to be working at walk in clinics, and compare their prescribing patterns with a physician who has a consistent roster of regular patients.

- Dr. Halpenny advised the MSC that he met with Stephen Brown, Deputy Minister of Health, to discuss the MSC strategic direction, the available amount variance, audit delays and hearing delays.

**2.0 Record of Decisions (ROD):**

- A **motion** to accept the MSC Record of Decisions for May 17, 2017, was approved.

**3.0 Extra Billing/Legal Update**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.
- Discussion took place about the distribution of the Record of Decisions. The Chair advised the MSC that he will meet with Allan Seckel, CEO, Doctors of BC, to discuss this topic and agree on a process going forward.
- s.13

**Action:**  
Dr. Robert Halpenny

**Action:**  
Dr. Robert Halpenny  
Joanne Glover

- s.14

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s.14

- Stephanie Power also advised the MSC that a hearing is currently under way with a supplementary benefits provider.

- s.14

#### **4.0 MSC 2017/18 Strategic Plan**

- Kyle Stamm returned to the June 28 MSC meeting to finalize the MSC 2017/18 strategic plan that was drafted at the April 26 planning session.
- The MSC discussed the topic of “quality medical care” and adoption of the triple aim strategy as outlined in their strategic plan. The MSC agreed that it would be valuable to have the Quality Counsel attend an MSC meeting and give a presentation. The MSC also agreed that we should seek confirmation from the Deputy Minister that the Ministry has adopted the triple aim strategy.
- The MSC discussed the relationship of supplementary benefit providers, midwives, dentists, optometrists, etc. to the MSC. It was agreed that these practitioners have a relationship with the MSC and that regular reporting from these groups would be beneficial.
- Once the MSC strategic plan is finalized the MSC will seek the Minister’s endorsement of the plan. The MSC also discussed publishing the final plan, possibly on the Ministry of Health website.
- The Chair will review the Physician Master Agreement for “MSC items” to ensure alignment of priorities.

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Dr. Robert Halpenny**

#### **5.0 Provincial Surgical Strategy**

- Marilyn Copes and Dr. Andy Hamilton gave a presentation to the MSC on the topic of the Surgical Services Strategy. Highlights included the concept of catching up and keeping up with surgical demand and improving the patient experience through clearer navigation of the system and easy to understand information. The Surgical Services Strategy includes priorities such as improving timely access to appropriate surgical procedures, managing waitlists optimally, consistently and proactively, and monitoring performance.

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- The MSC members raised discussion around resourcing (i.e. using existing resources better vs. net new resources) and what the MSC can do to support the Surgical Services Strategy.

**6.0 Advisory Committee on Diagnostic Facilities (ACDF):**

**Request for Direction**

**Ultrasound: “Rare exceptions” to general requirements/radiologist oversight for privately-owned facilities**

- ACDF raised a request to seek the MSC’s direction as to rare exceptions to general requirements for approval of privately-owned outpatient diagnostic ultrasound facilities in British Columbia.
- The MSC approved a **motion** to include a rare exception policy that is restrictive to specific services or practitioners.

**Recommendations for Denial**

s.13

**Request for Decision**

**Member Appointment – nomination of 3rd Doctors of BC member to ACDF**

- The ACDF raised a request for decision for the MSC to consider appointment of a third Doctors of BC nominee to the ACDF.
- The MSC passed a **motion** to approve the appointment of Dr. Dean Kolodziejczyk to the ACDF for a two year term.

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***The June 28<sup>th</sup> meeting was adjourned at 2:05 p.m.***

***The next regular meeting of the Medical Services Commission is scheduled for Wednesday, September 13, 2017, and will be held in Victoria.***

**MEDICAL SERVICES COMMISSION (MSC)**  
**Record of Decisions**  
**September 13, 2017**

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**September 13, 2017**

**Members Present:** Dr. Robert Halpenny (Chair), Sheila Taylor, Colin Kinsley, Dr. Bill Rife, Dr. Bryan Norton, Dr. Matthew Chow, Jillianne Code, Kenneth Werker

**Officials Present:** Joanne Glover (*MSC Legal Counsel/Ministry of Justice*)  
 (for routine business) Stephanie Power (*Ministry of Health*)

**MSC Secretariat:** Sarah Bryanton

**Guests:** Tricia Braidwood-Looney, Woody Turnquist, Glenn Armitage (*Advisory Committee on Diagnostic Facilities (ACDF)*), Dr. Vern Davis, Dr. Shiroy Dadachanji, Evan Machin (*Audit and Inspection Committee*), Tyna Mason (*Ministry of Justice*), Jonathan Penner (*Ministry of Justice*)

**1.0 General/Chair's Report:**

- The September 13<sup>th</sup> MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the revised agenda that was circulated. No new agenda items were added.
- In his Chair's Report, Dr. Halpenny advised a response was received from Island Health regarding s.14 s.14
- Dr. Halpenny informed the MSC that he is still waiting to receive the report from Marie Thelisma's group regarding fee item 00039.
- Dr. Halpenny indicated that he met with Eric Larson regarding walk-in clinic data. Eric confirmed that he has a methodology for identifying the clinics and will be getting a report to the Commission soon.
- Dr. Halpenny advised that he still needs to meet with Allan Seckel regarding distribution of the MSC Record of Decisions.
- Dr. Halpenny advised that he had another meeting with Stephen Brown, Deputy Minister of Health, to discuss the role of the MSC. A similar meeting with Ted Patterson, Assistant Deputy Minister, Workforce Planning, Compensation and Beneficiary Services, also occurred to discuss roles, responsibilities, and communication.

**Action:**  
**Dr. Robert Halpenny**



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- Dr. Halpenny indicated that he is still working to get a meeting with Minister Adrian Dix. On the agenda for discussion with the Minister are items such as the MSC strategic plan, discussion regarding the *Medicare Protection Act*, the role of beneficiaries, the MSC public member vacancy, the list of audits to be performed and a discussion about monitoring the available amount.
- Dr. Halpenny updated the Commission members to advise them that Dr. MC Fabian has joined the Compensation Policy and Programs Branch as the Senior Medical Consultant.
- Dr. Halpenny advised that he met with GPAC to discuss their strategic plan. GPAC is beginning consultations on their plan and will bring the final plan forward for the MSC to approve.
- The list of 2018 MSC meeting dates was **approved** by the Commission. \*Note that one minor revision was made to the dates after the meeting.

#### 2.0 Record of Decisions (ROD):

- A **motion** to accept the MSC Record of Decisions for June 28, 2017, was approved.

#### 3.0 Advisory Committee on Diagnostic Facilities (ACDF):

##### Request for Decision

##### **Ultrasound: General Requirements and Rare Exceptions Policy**

- ACDF recommends that the MSC approves a revision to the ultrasound general requirements guidelines which would allow the ACDF to accept a diagnostic facility application in concert with an application for category IV radiology, and permit the ACDF to focus its assessment solely on the need for ultrasound capacity. Additionally, it was recommended that the MSC approves a new rare exception policy allowing NT ultrasound in a standalone facility without radiologist oversight.
- The MSC **deferred** the decision to the October meeting to allow members time for thorough consideration.

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**Diagnostic Accreditation Program (DAP) Withdrawals from an Approved Facility**

- ACDF recommends that the Medical Services Commission approve immediate steps be taken to withdraw approval and revise the Certificate of Approval for the specified practitioners and facilities listed in the appendix of the request for decision.
- The MSC passed a **motion** to approve the ACDF recommendation and withdraw approval and revise the Certificate of Approval for the specified list of practitioners and facilities.

**Request for Approval**

**ACDF 2016/17 Activity Report and Annual Report**

- ACDF brought forward their 2016/17 activity report and annual report. The MSC briefly discussed a few of the highlights as well as the exceptional quality of the report.
- The MSC passed a **motion** to approve the ACDF 2016/17 Activity Report and Annual Report.

**Information Item**

**Use of Existing Facilities Policy – Stakeholder Consult Update**

- ACDF provided an update on stakeholder consultation concerning potential revision to the ACDF's *Use of Existing Facilities* policy.

**4.0 Appeal for** <sup>s.14; s.22</sup>

**[CONFIDENTIAL]:**

- s.14; s.22

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**MEDICAL SERVICES COMMISSION (MSC)**  
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s.14;s.22

**Action:**  
**Stephanie Power**

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**Action:**  
**Joanne Glover**

- The Commission would like to follow up regarding the process for applications made for MSP out of province coverage. The Chair will follow up with Stephanie Power, Executive Director of BSB.

**Action:**  
**Dr. Robert Halpenny**

**5.0 Audit and Inspection Committee Update:**

- Dr. Vern Davis, AIC Chair, and Dr. Shiroy Dadachanji and Evan Machin from the Audit and Investigations Branch (AIB) updated the Commission on 2017/18 year-to-date audit statistics. They highlighted the 2017/18 year-to-date stats from their Service Verification Group as well as referrals and reports approved in May 2017.
- An update was provided regarding the current audits of private clinics including discussion regarding challenges and timelines of the audits.

**6.0** s.14

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- s.14

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**7.0 Extra Billing/Legal Update [CONFIDENTIAL]:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.
- s.14

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***Action:***  
**Dr. Robert Halpenny**

**8.0 Research Funds Request:**

- An email was received by the Chair from Dr. Scott Garrison requesting approval to use MSP funds as part of a research project exploring alternate timing of medication in hypertension patients.
- The Commission discussed the request and determined that they did not support MSP funds being used for research purposes as per the Preamble section C6 of the MSP Payment Schedule.
- A **motion** to deny the request to use MSP funds in support of the research project was approved.

**9.0** s.22

s.22

**Action:**  
Sarah Bryanton

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***The September 13<sup>th</sup> meeting was adjourned at 1:00 p.m.***

***The next regular meeting of the Medical Services Commission is scheduled for Wednesday, October 25, 2017, and will be held in Vancouver.***

**MEDICAL SERVICES COMMISSION (MSC)**  
**Record of Decisions**  
**October 25, 2017**

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**October 25, 2017**

**Members Present:** Dr. Robert Halpenny (Chair), Sheila Taylor, Colin Kinsley, Dr. Bill Rife, Dr. Bill Cavers, Dr. Matthew Chow, Jillianne Code, Kenneth Werker

**Officials Present:** Joanne Glover (*MSC Legal Counsel/Ministry of Justice*)  
 (for routine business) Stephanie Power (*Ministry of Health*) – via teleconference

**MSC Secretariat:** Sarah Bryanton

**Guests:** Tricia Braidwood-Looney, Woody Turnquist (*Advisory Committee on Diagnostic Facilities [ACDF]*)  
 Eric Larson (*Ministry of Health*)  
 Dr. Doug McTaggart, Shannon Gibson (*Guidelines and Protocols Advisory Committee [GPAC]*)  
 Tyna Mason, Jonathan Penner (*Ministry of Justice*)

**1.0 General/Chair's Report:**

- The October 25<sup>th</sup> MSC meeting was held in Vancouver. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC welcomed new Doctors of BC member, Dr. Bill Cavers.
- The MSC reviewed the revised agenda that was circulated. Two new items were added – discussion regarding sending MSC agenda packages to Doctors of BC, and the process for appointments to the Patterns of Practice Committee (PoPC).
- In his Chair's Report, Dr. Halpenny advised that he met with Mr. Allan Seckel, CEO Doctors of BC, regarding the topic of distribution of the MSC Record of Decisions. Mr. Seckel will follow up with Dr. Halpenny and they will determine next steps.
- Dr. Halpenny informed the MSC that he received a phone call from Dr. Kingsford regarding billing for virtual care. Dr. Kingsford advised that he is going to be discussing this topic at Leadership Council. Dr. Halpenny advised Dr. Kingsford that he should touch base with Greg Leake at the Ministry of Health as he is the lead for virtual care from the Ministry.
- Dr. Halpenny advised the MSC that he had a conversation with Dr. Derek Smith regarding Medical Assistance in Dying fees. Dr. Smith expressed concern that the fees are too low and as a

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consequence physicians are opting not to participate. Dr. Halpenny indicated that discussions would be ongoing about the most appropriate compensation model for compensating physicians for their role in Medical Assistance in Dying.

- Dr. Halpenny advised the MSC that he continues to review the Physician Master Agreement in order to clarify the MSC's role as outlined in that agreement.
- Dr. Halpenny advised the MSC that he received a copy of the Doctors of BC Medical Audit Review report, which explored jurisdictional approaches to audit across the country. MSC Secretariat to follow up with Marie Thelisma regarding who will respond to this report.
- Dr. Halpenny updated the MSC on correspondence with Dr. Garrison and his request to use MSP funds for research (reviewed at September 13, 2017 MSC meeting). Dr. Garrison presented alternate options such as reimbursing MSP for any extra medical visits related to the research. Dr. Halpenny advised Dr. Garrison that the options he presented would not be feasible from both a legal and logistical perspective.
- Dr. Halpenny discussed a new College of Physicians and Surgeons of British Columbia standard titled Physician Office Medical Device Reprocessing Assessments (POMDRA). Dr. Halpenny indicated that the MSC will need to follow up on the ramifications of this standard and the potential issue of tray fees that it raises. To be discussed further at a future meeting.
- Dr. Halpenny informed the MSC that the Halvorson class action lawsuit against the MSC has concluded as all claims have been disbursed.
- Dr. Halpenny advised the MSC that Dr. David Kendler's application to bill MSP for Bone Densitometry services in the Vancouver area came up in the House during Ministry of Health estimates. The Minister advised the opposition MLA that this was a decision of the MSC and he would look to get more details on the rationale for the application being denied. The MSC recently reviewed Dr. Kendler's application at their June 28, 2017 meeting and the decision to deny the application was made on the basis of capacity in that area. Ministry staff that support the ACDF are preparing information for the Minister.
- Dr. Halpenny updated the MSC on the status of Bill 92 amendments.

**Action:**  
**Sarah Bryanton**

**Action:**  
**Dr. Robert Halpenny**  
**Sarah Bryanton**

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- Dr. Halpenny advised the MSC that he met with Adrian Dix, Minister of Health. They discussed the following issues: the MSC public member vacancy, the audits of private clinics, the list of audits in abeyance, the length of time it takes for audits to be completed, funding for Medical Assistance in Dying, virtual care, and the fee review.

**2.0 Record of Decisions (ROD):**

- A **motion** to accept the MSC Record of Decisions for September 13, 2017, was approved.

**3.0 Advisory Committee on Diagnostic Facilities (ACDF):**

**Request for Decision**

**Doppler Studies Recommendations**

- ACDF requests that the MSC considers revisions to the current ultrasound policy to allow Ministry of Health recommended privately-owned Community Imaging Clinics (CIC's) to perform and bill MSP for select non-cardiac Doppler studies.
- ACDF recommended that the MSC approves:
  - a) A revision to the ACDF's ultrasound policy which would allow MSC-selected privately-owned CIC's to perform select non-cardiac Doppler studies.
  - b) The seven facilities recommended in the request for decision.
  - c) Initial approvals be limited to a three year period.
  - d) Completion of a follow up wait times study at health authority and qualifying privately-owned CIC facilities during May/June 2019, to assess impacts to non-cardiac Doppler studies utilization and waitlists.
- A **motion** to accept the ACDF recommendations was approved.

s.13



s.13

### **Ultrasound: General Requirements and Rare Exceptions Policy**

- ACDF recommends that the MSC approves a revision to the ultrasound general requirements guidelines which would allow the ACDF to accept a diagnostic facility application in concert with an application for category IV radiology, and permit the ACDF to focus its assessment solely on the need for ultrasound capacity. Additionally, it was recommended that the MSC approves a new rare exception policy allowing nuchal translucency (NT) ultrasound in a standalone facility without radiologist oversight.
- This item was deferred for decision from the September 13, 2017 MSC meeting to allow time for consideration that such an approval may have on existing litigation.
- The MSC discussed their concerns with the ACDF and agreed that next steps will be for the ACDF to gather data by identifying existing approved facilities that could potentially add NT ultrasounds to their current suite of approvals, based on where BC Pre-Natal Genetic Screening Program data indicates the greatest need to be. ACDF to report back to the MSC in December with this data.
- Decision on the rare exceptions policy is **deferred** to the December meeting.

### **Echocardiography Policy Review Plan**

- The ACDF Echocardiography Policy Review Plan considers the following key issues:
  - The appropriateness of current clinical oversight of privately owned facilities that seek approval to perform and bill MSP for outpatient echocardiography services (i.e., radiology vs cardiology oversight);
  - Requirements for approval of privately-owned facilities to perform and bill MSP for outpatient echocardiography services;
  - Geographic accessibility (i.e., urban vs rural);
  - Methods to minimize potential impacts on health authority sonographers;

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- Practitioner patient referral and conflict of interest issues;
  - Impacts of new and anticipated technologies; and
  - Financial impacts.
- The MSC provided general agreement on the plan. The MSC would like an update in six months on how the plan is proceeding.

#### 4.0 Expenditure Report:

- The MSC reviewed the FY 2016/17 Projected Non-Lab Fee-For-Service (FFS) Payments and Available Amount year end totals. Eric Larson advised that he expects the deficit to come down once final reconciliation is complete.
- Eric provided the MSC with the budget variance model for medical FFS expenditures for 2016/17, discussed medical FFS growth by month, and medical FFS cost drivers. He also provided an analysis of the top 10 medical FFS fee items by dollar increase and the top 5 non-lab services codes by expenditure increase.
- Eric provided the MSC with information on the working habits of recent GP grads including a comparison of number of days worked and number of patients seen between grads in 2003 and 2013. Eric outlined next steps for analyzing the habits of recent GP grads which includes another analysis with an earlier cohort, looking at payment program preferences and obtaining a walk-in clinic list.
- Eric agreed to provide some additional information next meeting including:
  - 2017/18 Available Amount
  - Average amount paid for anaesthesia
  - Analysis on virtual care

**Action:**  
**Eric Larson**

#### 5.0 Guidelines and Protocols Advisory Committee:

##### Requests for Decision

- The MSC approved a **motion** adopting the *Frailty in Older Adults – Early Identification and Management (2017)* guideline presented by Dr. Doug McTaggart.

A Minute of the Commission was signed by the MSC Chair, formalizing the Commission's approval of the guideline.

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**6.0 Electronic Communicating – Security and Auditing:**

- Dr. Halpenny raised the issue of auditing and security related to electronic communication which was triggered by a recent Minute of the Commission he was asked to sign. The discussion focused on standards required by the College of Physicians and Surgeons and the Canadian Medical Protective Association and whose responsibility it is to follow up and ensure the standards are being adhered to. After thorough discussion, the MSC and legal counsel agreed that this responsibility would not fall to the payer (i.e. the MSC).

**7.0 Extra Billing/Legal Update [CONFIDENTIAL]:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.
- s.14

**Action:**  
**Joanne Glover**

- The MSC also discussed the issue of charging for telephone prescription renewals. There has been correspondence between the MSC and the Tariff Committee throughout 2015 and 2016 but it is not clear whether the issue was satisfactorily resolved. MSC Secretariat to gather all correspondence to date. MSC Chair to connect with Dr. Brian Winsby at the Tariff Committee.

**Action:**  
**Sarah Bryanton**  
**Dr. Robert Halpenny**

s.14

s.14;s.22

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s.14;s.22

**Action:**  
**Joanne Glover**

s.14

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***The October 25<sup>th</sup> meeting was adjourned at 2:00 p.m.***

***The next regular meeting of the Medical Services Commission is scheduled for Wednesday, December 6, 2017, and will be held in Victoria.***

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**December 6, 2017**

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**December 6, 2017**

**Members Present:** Dr. Robert Halpenny (*Chair*), Colin Kinsley, Dr. Bill Rife, Dr. Bill Cavers, Dr. Matthew Chow, Jillianne Code, Kenneth Werker

**Alternates Present:** Stephanie Power (*3<sup>rd</sup> Government Alternate Member*)

**Officials Present:** Joanne Glover (*MSC Legal Counsel/Ministry of Attorney General*)  
*(for routine business)*

**MSC Secretariat:** Sarah Bryanton

**Guests:** Dr. Vern Davis, Dr. Shiroy Dadachanji, Marie Thelisma, Evan Machin  
*(Audit and Inspection Committee)*  
 Nancy South, Geoff Homer, Greg Leake, Marie Ty (*Ministry of Health*)  
 Tricia Braidwood-Looney, Carolyn Rudden (*Requisition Committee*)  
 Dr. Doug McTaggart, Dr. Sandra Lee (*Guidelines and Protocols Advisory Committee [GPAC]*)  
 Tricia Braidwood-Looney, Woody Turnquist (*Advisory Committee on Diagnostic Facilities [ACDF]*)  
 Jonathan Penner (*Ministry of Attorney General*)

**1.0 General/Chair's Report:**

- The December 6<sup>th</sup> MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the revised agenda that was circulated. No additional agenda items were added.
- In his Chair's Report, Dr. Halpenny advised that he met with Mr. Allan Seckel, CEO Doctors of BC, regarding the topic of distribution of the MSC Record of Decisions. Dr. Halpenny is still awaiting Mr. Seckel's reply. Dr. Halpenny will follow up with Mr. Seckel in order to determine next steps.
- Dr. Halpenny advised the MSC about the pre and post MSC briefings that have been set up with Executive Directors from the Ministry of Health by Stephanie Power and Sarah Bryanton. The briefings were organized in an attempt to increase communication between the MSC and the ED's responsible for the advisory committees. So far, the briefings have achieved good saturation of information and we are starting to see connections be made in work that is happening across various advisory committees.

**Action:**  
**Dr. Robert Halpenny**

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- Dr. Halpenny informed the MSC that he met with Dr. Lorne Verhulst, Chair of the Patterns of Practice Committee, to discuss adding pharmacy data to the mini profiles. Dr. Halpenny also met with John Capelli, Executive Director, PharmaCare Information, Policy and Evaluation, to discuss the use of pharmacy data in the mini profiles. Work on this topic is ongoing. Dr. Halpenny will follow up with Heidi Oetter of the College of Physicians and Surgeons of BC as it is understood that the College may be looking at prescription auditing/data.
- Dr. Halpenny advised the MSC that he discussed the case of s.14;s.22 s.14;s.22
- Dr. Halpenny advised that he met with Marie Ty regarding Medical Assistance in Dying (MAiD) fees and the comparison of BC against other provinces. Dr. Halpenny advised that BC is roughly in the middle of the pack when compared against MAiD fees in other provinces. Dr. Halpenny to follow up with Marie Ty after Tariff Committee discussion about this topic.
- Dr. Halpenny advised that he attended the recent Physician Services Committee (PSC) meeting. The PSC is a point of connection between the Physician Master Agreement, the Doctors of BC and the MSC. An overview/update was provided by the General Practice Services Committee (GPSC), the Specialist Services Committee (SSC), the Shared Care Committee (SCC), and the Joint Standing Committee (JSC). Valuable discussion occurred about the GPSC report and the need for increased accountability and alignment of initiatives with the role in the PMA.
- Dr. Halpenny updated the MSC on the public member vacancy and advised that Ms. Ellen Godfrey has been recommended by the Minister of Health for appointment. Ms. Godfrey was previously a public member of the MSC during a term in 2015/16.
- Dr. Halpenny advised the MSC that he met with Stephen Brown and Lynn Stevenson to discuss s.14 s.14

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Dr. Robert Halpenny**

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- s.14

- Dr. Halpenny advised the MSC that three additional clinics have been added to the audit list.

- s.14

## 2.0 Record of Decisions (ROD):

- A **motion** to accept the MSC Record of Decisions for October 25, 2017, was approved with one minor correction.

## 3.0 Audit and Inspection Committee (AIC) Update:

- Dr. Vern Davis, AIC Chair, and Marie Thelisma, Dr. Shiroy Dadachanji and Evan Machin updated the Commission on 2017/18 year-to-date statistics and audit referrals and reports from the September 13, 2017 AIC meeting.
- An overview of the extra billing audits was provided including the number of audits to be scheduled, the number of audits in progress, and the number of auditor hours required to date.
- Updated wording for the MSP practitioner enrolment forms was provided to the MSC. The updated wording will be added to practitioner enrolment forms and any forms relating to additional payees or assignment of payment.s.14  
s.14

**Action:**  
**Marie Thelisma**

## 3.5 Virtual Care/Telehealth/Telemedicine:

- Marie Thelisma and Nancy South (with support from Greg Leake and Marie Ty) joined the MSC for a presentation regarding virtual care/telehealth fees.
- The MSC discussed the different terminology –virtual care, telehealth,

## MEDICAL SERVICES COMMISSION (MSC)

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telemedicine – and that the terms are used interchangeably. None of the terms are defined in the MSC Payment Schedule.

- Marie and Nancy highlighted that there is an increasing utilization of virtual care/telehealth/telemedicine fees and that we are seeing new companies arise that solely focus on telemedicine.
- An overview was provided on the total utilization of fees, the service growth seen between 2012/13-2016/17, the number of practitioners receiving payment for telemedicine fees and the growth in GPCS and SSC telemedicine fee items.
- Marie and Nancy highlighted Ontario as an example of the growing rate of telemedicine reciprocal billings for BC patients.
- The MSC requested some specific information which Nancy's team will follow up on:
  - Is it particular fee items that are rapidly increasing?
  - Is it known if these are new services or are we seeing a substitution effect?
  - Can we cull out services where there has been no face to face communication between the physician and patient in the past one to two years?
- Lastly, Marie and Nancy highlighted some possible concerns to be addressed including location requirements of patient and physician, inter-provincial use of telemedicine fees; reciprocal billing, clarification of these requirements in the payment schedule, definition of terms, and whether patient initiated virtual care is considered a benefit.
- Greg Leake advised the MSC regarding his work updating the Strategic Framework for Virtual Care. He discussed how the vision is generally to increase virtual care where appropriate. Some areas of focus include a review of compensation policy, privacy of health information, health technology, and transmission of information.
- The need to follow up with the College of Physicians and Surgeons of BC regarding concerns about location requirements of the physician and patient was highlighted. Marie Thelisma will work to define the issues at hand and bring them forward to the College.
- The MSC requested a report back in four months showing action on the areas of concern.

**Action:**  
**Nancy South**

**Action:**  
**Marie Thelisma**



## MEDICAL SERVICES COMMISSION (MSC)

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#### 5.0 Expenditure Report:

- The MSC reviewed the final FY 2016/2017 Medical Fee-for-Service (FFS) Payments and Available Amount. The final FY 2016/2017 Available Amount variance was a \$46.81 million deficit. A question was raised regarding how this deficit compares to the 2015/2016 deficit. Nancy South's team will follow up and bring this information back for the MSC.
- The MSC reviewed the Medial FFS Cost Drivers, Spending Growth by Specialty, and Top 10 Medical FFS Dee Items By Dollar Increase all for the period of April 1, 2018-October 31, 2018.
- There has been a decline in services per patient and the MSC requested more information on whether there is evidence that this may be a result of a substitution effect of GPSC fees. It was noted that there has been a 16.2% increase in surgical assistance fees and a 12.9% increase in hospital visit fees. The MSC requested additional information on what may be causing these increases. Nancy's team to follow up on these items and report back to the MSC.
- Nancy provided information on Anaesthetist Income Over Time that the MSC previously requested.
- The MSC Chair requested an update on where the Ministry is at with the Ophthalmology fee review. Marie Ty advised that this went to Tariff Committee on December 1, 2017 and further work is required.

**Action:**  
**Nancy South**

**Action:**  
**Nancy South**

#### 6.0 Requisition Committee Update

- Tricia Braidwood-Looney and Carolyn Rudden attended the meeting to provide an update on the Requisition Committee.
- A high level overview was provided including Committee structure and roles. The MSC discussed the Committee's shift in focus from development of both laboratory (the SOPLR) and diagnostic services requisitions to focusing on diagnostic services requisitions only as a result of the introduction of the *Laboratory Services Act*. With the Committee's shift in focus and the transition of new co-chairs, an opportunity has arisen to identify and discuss some areas of concern which include; scope of work, consistency of requisitions, resourcing for the Committee, composition of the Committee, and clarity for processes and structure.
- Five options for achieving sustainability and desired future state for

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the Committee were presented and include:

s.13

- The MSC recommended that the Requisition Committee consider these options and come back with one recommended option at the next MSC meeting.

**Action:**  
**Tricia Braidwood-**  
**Looney**  
**Carolyn Rudden**

**6.0 Advisory Committee on Diagnostic Facilities (ACDF):**

**Requests for Decision**

**Re-appointment of one Doctors of BC nominated member**

- A **motion** to accept the ACDF recommendation to approve the reappointment of Dr. Glenn Scheske was approved.

**Delegation of additional powers to ACDF Chair**

- A **motion** to accept the ACDF recommendation to approve amendments to MOC 17-098 and the ACDF Terms of Reference to allow both the ACDF Chair and the ACDF as a whole to assess and approve applications from publicly-owned health authority diagnostic facilities (hospitals) for distance reading of Committee-approved outpatient ultrasound services, was approved.

**7.0 Legal Update [CONFIDENTIAL]:**

s.14

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s.14

**Extra Billing:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.

s.14

**8.0 MSP Update:**

- Stephanie Power advised the MSC that the Beneficiary Services Branch (BSB) is working in close order with Vital Statistics Agency and the Ministry of Citizens' Services regarding gender X on the BC Services Card.
- Stephanie also advised that the BC Services Card project is ending in February 2018 and she is planning to have a formal presentation/update for the MSC at the January 2018 MSC meeting.
- Other priorities for BSB have included the expansion of the Travel Assistance Program as indicated in the Minister of Health's mandate letter, online digital access to numerous MSP forms, the annual report to Health Canada regarding extra billing charges, and four Human Rights Tribunals that are currently under way.

**9.0 Telephone Prescription Renewal:**

- The MSC reviewed the historical correspondence regarding the telephone prescription renewal issue. The main concern at hand is whether charging MSP beneficiaries for telephone prescription renewal is extra billing. Correspondence between the MSC and a clinic, the Society of General Practitioners and the Tariff Committee, and the Tariff Committee and the MSC was reviewed.

- s.14

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- Nancy South agreed to follow up and determine if there is ability for her team to pull any data on this issue in order to better inform the MSC in making a decision on next steps. In the meantime, Dr. Halpenny will follow up with Brian Winsby, Chair of the Tariff Committee and Marie Ty.

**Action:**  
**Nancy South**  
**Dr. Robert Halpenny**

**10.0 Referrals for Medical Cannabis:**

- The MSC reviewed documents that were brought to its attention which appear to be promotional materials from a cannabis clinic that are being faxed physicians' practices. These specific materials are asking GP's to refer patients to their cannabis clinic and state that there will be no charge for "medical and counselling services" for patients with a valid health card.
- The MSC discussed the appropriateness of soliciting for referrals and also discussed that the College of Physicians and Surgeons of BC has established basic information and processes for referrals.
- Dr. Halpenny will connect with the College of Physicians and Surgeons of BC. Dr. Halpenny will work with Billing Integrity Program and Marie Ty to define what we are asking of the College and what the MSC's responsibility is in this scenario.

**Action:**  
**Dr. Robert Halpenny**

**11.0 s.14**

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***The December 6<sup>th</sup> meeting was adjourned at 1:40 p.m.***

***The next regular meeting of the Medical Services Commission is scheduled for Wednesday, January 17, 2018, and will be held in Victoria.***

# MEDICAL SERVICES COMMISSION (MSC)

## Record of Decisions

### January 17, 2018

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### January 17, 2018

**Members Present:** Dr. Robert Halpenny (*Chair*), Heather Davidson, Colin Kinsley, Dr. Bill Rife, Dr. Bill Cavers, Dr. Matthew Chow, Kenneth Werker, Ellen Godfrey

**Member Regrets:** Jillianne Code

**Officials Present:** Joanne Glover (*MSC Legal Counsel/Ministry of Attorney General*)  
 (for routine business) Ross Alexander (*MSC Legal Counsel/Ministry of Attorney General*)  
 Stephanie Power (Executive Director, Beneficiary Services Branch)

**MSC Secretariat:** Sarah Bryanton

**Guests:** Nancy South, Eric Larson, Marie Ty (*Ministry of Health*)  
 Dr. Lorne Verhulst, Juanita Grant (*Patterns of Practice Committee*)  
 Dr. Doug Cochrane (*BC Patient Safety and Quality Council*)  
 Dr. Doug McTaggart, Shannon Holms, Jill Murray (*Guidelines and Protocols Advisory Committee*)  
 Woody Turnquist, Daniella Blaj (*Advisory Committee on Diagnostic Facilities*)

#### 1.0 General/Chair's Report:

- The January 17<sup>th</sup> MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the agenda that was circulated. No additional agenda items were added.
- Dr. Halpenny advised that<sup>s.22</sup>  
<sup>s.22</sup> Dr. Halpenny welcomed new MSC members Heather Davidson (Government representative replacing Sheila Taylor) and Ellen Godfrey (public representative rejoining the MSC after a previous term in 2015-2016).
- In his Chair's Report, Dr. Halpenny advised that he had received a response from Mr. Allan Seckel, CEO Doctors of BC, regarding distribution of the MSC record of decisions (ROD). After discussion it was agreed that the MSC Secretariat will send a copy of the previous months approved ROD following each MSC meeting to Allan Seckel and Jim Aikman. Draft versions will not be shared. The ROD will be redacted in accordance with Freedom of Information standards in order to protect any privileged or confidential information. It was agreed that the redacted ROD that is provided to Mr. Seckel and Mr. Aikman can be shared with the Doctors of BC board.

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- Dr. Halpenny discussed the ongoing work regarding adding prescribing profiles/pharmaceutical data to the mini profiles. Dr. Halpenny advised that he has met with the Pharmaceutical Services Division, the Patterns of Practice Committee Chair and Dr. Oetter and Dr. Murray of the College of Physicians and Surgeons of BC to discuss the topic. The College advised they have been also been doing some work on the topic and have approached the Ministry of Mental Health and Substance regarding prescribing habits related to opioids/controlled substances . Dr. Halpenny advised he also met with Bob Nakagawa with the College of Pharmacists. Work on the subject is ongoing and Dr. Halpenny plans to meet with the Therapeutics Initiative and update the Minister and the Deputy Minister of Health on the topic.
- Dr. Halpenny informed the MSC that the timing of bringing in to force the provisions of Bill 92 is still unknown.
- Dr. Halpenny indicated that he has been in discussions with Marie Ty regarding the Medical Assistance in Dying fees and that we are still awaiting the outcome of the Tariff Committee discussion.
- Dr. Halpenny advised the MSC that he met with Stephen Brown and Lynn Stevenson to discuss s.14  
s.14
- s.14
- On the topic of virtual care, Dr. Halpenny indicated that there is some more follow up to be done regarding patient and physician locations and he will follow up with Marie Ty on this work. Dr. Halpenny also discussed a new virtual care pharmacy that has opened and that this should be brought to the attention of the College of Pharmacists.
- Dr. Halpenny advised that he met with Nancy South to discuss doing a deeper dive on some expenditure data on a quarterly basis while continuing with the high level expenditure report monthly.
- The discussion regarding the recommended option for the Reference Committee will be deferred to February 2018.

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Dr. Robert Halpenny**

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**January 17, 2018**

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**2.0 Record of Decisions (ROD):**

- A **motion** to accept the MSC Record of Decisions for December 6, 2017 was approved with one minor correction.

**3.0 Expenditure Report:**

- The MSC reviewed the final FY 2017/18 Medical Fee-for-Service (FFS) Payments and Available Amount.
- The MSC reviewed the Medical FFS Cost Drivers, Top 10 Medical FFS Fee Items By Dollar Increase and the Bottom 10 Medical FFS Fee Items By Dollar Increase for the period of April 1, 2017- Decemberr 31, 2017.
- Nancy South and Eric Larson provided follow up material that was requested at the December 6, 2017 MSC meeting. This included a comparison of the deficit/surplus for 2015/16 and 2016/17 vs. 2017/18, additional details regarding the growth in surgical assist fee items, additional detail regarding the growth in services per patient and evidence related to the possibility of a substitution effect for GPSC fees.
- The MSC requested some additional information, including:
  - More detail on to the psychiatry fee items that are appearing in the bottom 10 Medical FFS Fee Items.
  - What specialties are using the surgical assist fee item?
  - Analysis on the interaction of GPSC fees and available amount fees.
  - Analysis on the interaction of SSC fees and available amount fees.

**Action:**  
**Nancy South**

**4.0 Patterns of Practice Committee Update:**

- Dr. Lorne Verhulst, Patterns of Practice Committee (PoPC) Chair and Juanita Grant, PoPC Secretariat attended the January 17, 2018 MSC meeting to provide an update on the PoPC.
- Dr. Verhulst provided the MSC with a presentation on what the PoPC is, including their current mandate, what the PoPC is not, and information on what kinds of education activity the PoPC held in 2017.

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## **Record of Decisions**

### **January 17, 2018**

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- Dr. Verhulst highlighted that in 2017 there were 37 physician groups that expressed interest in or scheduled one of the PoPC's accredited sessions. To date, they have spoken to 24 physician groups and approximately 553 physicians.
- The MSC discussed the mini profile, including a potential redesign. Current issues with the mini profile are that it has not changed in approximately twenty years, the data in the mini-profile is dated by at least one year, and that it needs more focused information for specialists. The PoPC expressed concern regarding the amount of time it takes for them to receive the data from the Ministry of Health that is required to create the mini profiles. The MSC agreed to follow up on the issues regarding timeliness of data.
- The PoPC also expressed some concern regarding their access to information and participation in meetings with the Audit and Inspection Committee and the Billing Integrity Program.

**Action:**  
**Dr. Robert Halpenny**

#### **5.0 MSP Updates:**

- No MSP updates were provided due to time limitations.

#### **6.0 BC Patient Safety and Quality Council:**

- Dr. Doug Cochrane, Chair of the BC Patient Safety and Quality Council, attended the January 17, 2018 MSC meeting to provide an overview of the Council and their work. Dr. Cochrane highlighted the council's history, the scope of their mandate, the council's philosophy and examples of how the philosophy is put in to action.
- Dr. Cochrane discussed the priorities and initiatives of the council for the coming years, 2017-2020. The Council will focus on improving the quality of patient care with initiatives such as the Call for Less Antipsychotics in Residential Care (CLeAR) and Releasing Time to Care (RT2C). The Council will work on advancing the patient voice & patient and family-centred care through initiatives such as "What Matters to You?" Day and the Patient Voices Network. The Council also focuses on engaging the system in quality through the Quality Awards and Change Day BC. Lastly, the Council strives to build capacity with tools such as workshops and the Quality Academy.

#### **7.0 Legal Update [CONFIDENTIAL]:**

##### **Extra Billing:**



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- An updated *MSC Extra Billing Status Report* was circulated for members' information.
- s.14

**Action:**  
**Joanne Glover/  
 Ross Alexander**

- The MSC had a further discussion following the December 6, 2017 MSC meeting regarding telephone prescription renewal fees. Dr. Halpenny indicated that he spoke with Dr. Brian Winsby, Chair of the Tariff Committee. Dr. Winsby indicated that they are looking to the MSC for a decision on how to address the issue. The MSC discussed whether telephone prescription renewal is a benefit, and how long the original office visit can reasonably be considered to cover subsequent prescription renewals. The MSC determined that it may be appropriate to initiate the process of creating a specific fee item for telephone prescription renewal under the MSC payment schedule. Dr. Halpenny to follow up with Marie Ty.

**Action:**  
**Dr. Robert Halpenny**

**8.0 2017/18 Strategic Plan Update:**

- The MSC reviewed their 2017/18 strategic plan and indicated which items have been completed or are underway. The MSC Secretariat will update the plan and post an update version to the MSC's SharePoint site.
- The MSC also reviewed a document that outlines all of the MSC's responsibilities and references in the Physician Master Agreement.

**Action:**  
**Sarah Bryanton**

**9.0 Guidelines and Protocols Advisory Committee (GPAC):**

- Dr. Doug McTaggart, Shannon Holms, and Jill Murray attended the January 17, 2018 MSC meeting to present the new GPAC *Opioid Use Disorder: Diagnosis and Management Guideline*. A request for decision was put forward for the MSC to approve and adopt the guideline.
- GPAC raised some concerns about publishing the guideline, which

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contains some potentially practice changing material for physicians, without addressing the issue of the inadequacy of the opioid use disorder fees.

- The MSC agreed to send a letter to the Deputy Minister of Health and the CEO of the Doctors of BC requesting that the fee review be expedited in light of the current public health emergency that was declared on April 14, 2016.
- The MSC approved a **motion** adopting the *Opioid Use Disorder: Diagnosis and Management Guideline* presented. The guideline will not be published until the fee review has been completed.

**Action:**  
**Dr. Robert Halpenny**

**10.0 Advisory Committee on Diagnostic Facilities (ACDF):**

**Requests for Decision:**

s.13

**ECG services (recommended for deregulation)**

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- The MSC passed a **motion** accepting the ACDF's recommendation to approve deregulation of Electrocardiography services. As such, facilities are no longer required to receive approval from the ACDF and/or the MSC in order to provide ECG services on a referral basis.

**VIHA - request for ultrasound moratorium exception (recommended for approval)**

- The MSC passed a **motion** accepting the ACDF's recommendation to approve this request for exception to the current moratorium on applications for outpatient diagnostic ultrasound facilities in BC. This approval allows a formal application for services to come forward to the next meeting of the ACDF for consideration.

**For Information**

- The ACDF provided the list of approvals from the December 13, 2017 ACDF meeting.

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***The January 17<sup>th</sup> meeting was adjourned at 2:10 p.m.***

***The next regular meeting of the Medical Services Commission is scheduled for Wednesday, February 21, 2018, and will be held in Victoria.***

# MEDICAL SERVICES COMMISSION (MSC)

## Record of Decisions

### February 21, 2018

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### February 21, 2018

**Members Present:** Dr. Robert Halpenny (*Chair*), Colin Kinsley, Dr. Bill Cavers, Dr. Matthew Chow, Kenneth Werker, Ellen Godfrey

**Alternates Present:** Dr. Alan Ruddiman (Doctors of BC 1<sup>st</sup> Alternate), Stephanie Power (Government Representative 3<sup>rd</sup> Alternate)

**Member Regrets:** Jillianne Code, Dr. Bill Rife

**Officials Present:** Ross Alexander (*MSC Legal Counsel/Ministry of Attorney General*)  
(for routine business)

**MSC Secretariat:** Sarah Bryanton

**Guests:** Dr. Heidi Oetter, Dr. Michael Murray (*College of Physicians and Surgeons of BC*)  
Eric Larson (*Health Sector Information, Analysis and Reporting Division, Ministry of Health*)  
Jonathan Penner (*Ministry of Attorney General*)  
Dr. Shiroy Dadachanji, Marie Thelisma, Evan Machin (*Billing Integrity Program, Ministry of Health*)  
Robyn White (*Beneficiary Services Branch*)  
Mark Young, Wanda Lee (*Health Insurance BC*)  
Tricia Braidwood-Looney, Woody Turnquist (*Laboratory, Diagnostic and Blood Services Branch/Advisory Committee on Diagnostic Facilities*)  
Mark Armitage (*Workforce Planning, Compensation and Beneficiary Services Division, Ministry of Health*)

### 1.0 General/Chair's Report:

- The February 21<sup>st</sup> MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the agenda that was circulated. No additional agenda items were added.
- In his Chair's Report, Dr. Halpenny advised that the issue of distribution of the MSC record of decisions (ROD) has been resolved and the new process is underway.
- Dr. Halpenny discussed the ongoing work regarding adding prescribing profiles/pharmaceutical data to the mini profiles. Dr. Halpenny advised that he has met with Malcom McClure and discussed that there have been various initiatives over the years that have attempted to achieve this work regarding the prescribing habits

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of physicians. Dr. Halpenny will be arranging a meeting with the Deputy Minister and the Minister of Health to continue the discussion on this work.

**Action:**  
**Dr. Robert Halpenny**

- Dr. Halpenny informed the MSC that Ross Alexander will be attending the upcoming Patterns of Practice Committee meeting to discuss the issue that Committee raised at the last MSC meeting regarding their participation at the Audit and Inspection Committee meetings.
- Dr. Halpenny advised the MSC that the co-founder of Medimap Systems Inc. is unable to attend today's meeting and that item has been deferred to the April agenda.
- Dr. Halpenny advised that there are various groups addressing the issue of appropriateness including Guidelines and Protocols Advisory Committee (GPAC), Choosing Wisely, and initiatives internal to the Ministry of Health. Dr. Halpenny will meet with Ian Rongve and Dr. Andy Hamilton regarding these initiatives and how they tie together.
- Dr. Halpenny advised that he is still awaiting a response regarding the Medical Assistance in Dying fees after the March 9<sup>th</sup> Tariff Committee meeting.
- s.14;s.22
- s.14
- Dr. Halpenny advised that he has contacted Marie Thelisma regarding the length of time it takes to generate the data for the Patterns of Practice Committee mini profiles.
- Dr. Halpenny indicated that the work on telephone prescription renewal fees is ongoing.
- Dr. Halpenny advised that he sent a letter to the Deputy Minister of Health and the CEO of the Doctors of BC regarding the expedited review of the opioid use disorder (OUD) fees. Doctors of BC responded indicating that the fee review is a priority for the Tariff Committee and that the Society of General Practitioners has also undertaken a review of the current OUD fees.

**Action:**  
**Dr. Robert Halpenny**

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- Stephanie Power highlighted that an announcement was made in the February 20, 2018 budget speech regarding the elimination of MSP premiums.

#### **2.0 Record of Decisions (ROD):**

- A **motion** to accept the MSC Record of Decisions for January 17, 2018 was approved.

#### **3.0 College of Physicians and Surgeons of BC Update:**

- Dr. Heidi Oetter, Registrar and Dr. Michael Murray, Deputy Registrar, of the College of Physicians and Surgeons of BC attended the February 21, 2018 MSC meeting to provide an overview on the responsibilities of the College as well as some of their current priorities.
- Dr. Oetter and Dr. Murray gave an overview on the College's Prescription Monitoring Program that aims to address some challenges such as the limited analysis of prescribing of opioids, sedative/hypnotics and stimulants and the database and analytics which were designed in the 1990's. Dr. Oetter and Dr. Murray discussed the desired future state of the program which includes a proposal for a comprehensive database that holds all of the information available in PharmaNet and can be accessed by regulators, health authorities, or others to improve practice and potentially identify unsafe practice.
- The work ties in closely with the MSC's work on prescribing habits/pharmacy data in the mini profiles.
- Dr. Oetter and Dr. Murray also discussed the work that is happening to move toward implementing two-factor billing. This serves as a quality assurance tool by ensuring, through use of locator of facility codes, that: certain procedures are only done in "accredited facilities"; only appropriate procedures are performed in a community office setting; and that all lab and image requests are submitted with a locator code linking the provider to a service location. Next steps on this work include logistical planning, consultation, identifying facilities to establish location codes and identifying procedures limited to accredited facilities and hospitals.

#### **4.0 Expenditure Report:**

- The MSC reviewed the FY 2017/18 Medical Fee-for-Service (FFS)

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**February 21, 2018**

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Payments and Available Amount.

- The MSC reviewed the Medical FFS Cost Drivers, Top 10 Medical FFS Fee Items By Dollar Increase and the Bottom 10 Medical FFS Fee Items By Dollar Increase for April 1, 2017-January 31, 2018.
- Eric Larson provided the follow up material that was requested at the January 17, 2018 MSC meeting. This included detail on the psychiatry fee item decreases and increases in related psychiatry fee items, information on the growth in computerized vs manual retinal testing fees, additional detail on surgical assist fees including associated surgeries and specialties and lastly, additional detail on the growth of GPSC fee items.
- The MSC requested some additional information, including:
  - Further detail on psychiatry fee items – specifically, the question was raised whether fee item 00120 is going up while 14043 is going down?
  - Further detail on ophthalmology testing and the standard suite of testing for cataract surgery.

**Action:**  
**Eric Larson**

**5.0 Legal Update/Extra Billing [CONFIDENTIAL]:**

s.14

**Extra Billing:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.
- The MSC discussed recent extra billing correspondence that has been sent to the following parties:
  - Medimap Systems Inc.
    - Medimaps co-founder was scheduled to attend the February 21 meeting but this discussion has been deferred to the April MSC meeting.

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### **February 21, 2018**

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- Pezim Clinic
- Victoria Surgery
- Welcome Back MRI And Pain Management Centre
- YMCA Jumpstep Program

#### **6.0 Supplementary Benefit Practitioner Update:**

- Dr. Shiroy Dadachanji, Marie Thelisma and Evan Machin provided an update to the MSC on Supplementary Benefit Practitioners. An overview was provided on the audit hearing process, fiscal year end and year to date stats and referrals and reports.

#### **7.0 BC Services Card Update:**

- Robyn White, Director of Supplementary Benefits and Priority Projects with the Beneficiary Services Branch attended the February 21 MSC meeting to provide an update on the BC Services Card project.
- Robyn highlighted the catalysts for the project as well as the corporate goals and integrated program model.
- Detail was provided on the legislative framework which allows for the policies set to come in to effect on February 22, 2018. Policies launching on February 22 include Two-Step Enrolment, Modified Enrolment and Renewal of Enrolment and Individual Exemptions for No Primary ID. Robyn highlighted that all of the exemptions provided under these policies are MSC exemptions.
- In the coming months ongoing policy work will continue to work towards allowing a non-binary X indicator on the BC Services Card and resolving issues with name mismatches between ICBC and HIBC.
- Lastly, Robyn highlighted statistics on card issuance to date (4.235 million as of January 31, 2018) and budget/expenditures.

#### **8.0 Health Insurance BC Manual Adjudication of Physician Claims:**

- Mark Young and Wanda Lee, Health Insurance BC, attended the February 21, 2018 MSC meeting to provide an update on aging claims/manual adjudication of physician claims.
- Statistics were provided regarding the number of claims >60 days old, the number of claims which pass through the automated process



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successfully and the level of growth for in province claims since October 2015.

- Mark and Wanda discussed the service level requirement that HIBC is under which requires that 100% of claims are processed within 85 days from date of receipt and that since April 2013 this contractual obligation has been consistently met.
- The MSC will continue to receive this update on an annual basis.

**9.0 Advisory Committee on Diagnostic Facilities (ACDF):**

**Requests for Decision**

**Appointment of Government ACDF Member**

- The MSC passed a **motion** approving the appointment of Lindsay Storie as a third government representative to the ACDF.

**10.0 Requisition Committee Update:**

**Requests for Decision:**

**Future State of the Requisition Committee**

- A request for decision was brought forward to the MSC to determine the future state of the Requisition Committee and the development of standardized diagnostic services requisitions.
- The MSC passed a **motion** approving the following recommendation to achieve desired future state of the development of standardized diagnostic services requisitions within BC that:  
 For the short-term:
  - 1) Complete the two requisitions that are currently in the production, including updating the breast imaging outpatient one and creating a new echocardiogram one.
  - 2) Place the Requisition Committee on a hiatus, once the two requisitions are completed.

For the long-term while the Requisition on hiatus:

- 1) Develop a coordinated work plan aligning priorities and synergies of the other MSC committees and other appropriate stakeholders to focus on targeted initiatives in a comprehensive and cohesive approach for maximum impact.
- 2) Recommend further financial support in the Physician Master

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Agreement (PMA) to obtain more resources for Guidelines and Protocols Advisory Committee (GPAC) to support future requisition development required for the targeted initiatives.

3) Focus on developing a stewardship role of the facilities and services providers through the Ministry's Laboratory, Diagnostic and Blood Services Branch. This includes: setting out expectations through policies (e.g., signature requirements), monitoring utilization (e.g., appropriateness) and initiating corrective action through MSC's other committees or other measures (if required).

- The MSC agreed that the Requisition Committee hiatus would be for a one year period, and at that point the MSC would like an update on the long-term plan.

**11.0 Medical Imaging Access & Quality Improvement Project:**

- Tricia Braidwood-Looney provided the MSC with an overview of the Medical Imaging Access and Quality Improvement Project.
- Phase 1 of the project was known as the Advanced Imaging Strategy Project. Phase 1 produced 18 high level recommendations relating to four key streams of work:
  - 1) MRI access and service distribution;
  - 2) Governance, Funding and service model;
  - 3) Medical imaging business processes; and
  - 4) Quality of Care and Performance Monitoring.
- The intent of the Medical Imaging Access and Quality Improvement (MIAQI) Project (aka Phase 2), is to achieve the 18 recommendations produced as a result of Phase 1.
- The MIAQI project is seeking participation from GPAC in the development of clinical practice guidelines and patient materials for practitioners that will provide guidance on and outline the appropriateness criteria on ordering medical imaging services.
- The MIAQI project is also seeking participation from the Patterns of Practice Committee in providing feedback on ordering practitioners using indicators. These indicators will be published in the Patterns of Practice Mini-Profiles.

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**12.0 Health Sector Strategic Priorities:**

- Mark Armitage, ADM, Workforce Planning, Compensation and Beneficiary Services Division gave the MSC an overview of the BC Health System Strategy.
- Mark highlighted the strategic context which includes the ability to meet health care needs of key patient populations such as primary care, complex chronic conditions, mental illness and substance use and the frail elderly.
- Mark discussed the core focus which includes patient centred care and continuous improvement. Patient centred care strives to continue to shift the culture of health care from being disease-centred and provider-focused to being patient-centred. The continuous improvement focus aims to continuously improve outcomes and health services for BC citizens.
- Mark then discussed two areas of strategic focus which include primary and community care and access to surgical services. Priorities in primary and community care are establishing Primary Care Networks, Patient Medical Home, strengthening linkages to health authority services, specialized community service programs and community based resources, coordinating team based care and simplifying pathways of care. Priorities on access to surgical services include improving timely access to appropriate and high-quality surgical services, developing an updated, comprehensive surgical waitlist management policy and improving patient experience.
- Mark highlighted that the guiding direction for the Health System Strategy is the Governments overall strategic direction, the Ministry's Service Plan, the Minister's Mandate Letter and any other Government direction (Cabinet, Throne/Budget speech).

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***The February 21<sup>st</sup> meeting was adjourned at 3:05 p.m.***

***The March 21<sup>st</sup> Medical Services Commission meeting is the annual strategic planning session and will be held in Victoria.***

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**April 18, 2018**

**Members Present:** Dr. Robert Halpenny (*Chair*), Heather Davidson, Colin Kinsley, Dr. Matthew Chow, Kenneth Werker, Ellen Godfrey, Dr. Bill Rife

**Alternates Present:** Dr. Eric Cadesky (Doctors of BC 2<sup>nd</sup> Alternate)

**Member Regrets:** Dr. Bill Cavers

**Officials Present:** Ross Alexander (*MSC Legal Counsel/Ministry of Attorney General*)  
(*for routine business*) Stephanie Power (*Executive Director, Ministry of Health*)

**MSC Secretariat:** Sarah Bryanton

**Guests:** Allan Seckel (*Doctors of BC*)  
Woody Turnquist, Oliver Krupke (*Laboratory, Diagnostic and Blood Services Branch/Advisory Committee on Diagnostic Facilities*)  
Kyle Stamm (*Helios Group*)  
Blake Adam (*Medimap Systems Inc.*)  
Jonathan Penner (*Ministry of Attorney General*)  
Tyna Mason (*Ministry of Attorney General*)  
Greg Leake, Nancy South, Marie Thelisma, Marie Ty, Dr. Shiroy Dadachanji, Eric Larson (*Ministry of Health*)

**1.0 General/Chair's Report:**

- The April 18<sup>th</sup> MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the agenda that was circulated. No additional agenda items were added.
- In his Chair's Report, Dr. Halpenny advised that he met with Deputy Minister Stephen Brown on April 17 to review the MSC's draft strategic plan. Stephen Brown and Dr. Halpenny discussed the role of the MSC with respect to quality and the number of different groups involved with quality initiatives (i.e. Guidelines and Protocols Advisory Committee (GPAC), Choosing Wisely, BCMQI, etc.). Stephen Brown agreed that there is a need to make sure these groups are connecting. Also discussed achieving value for money in healthcare, the issue of walk in clinics and the ability to get data, virtual care, pharmaceutical cost increases and the implications of Bill 92 for the MSC and practitioners. Stephen Brown requested a follow up meeting in May for 1.5-2 hours to discuss issues in more depth.

- Dr. Halpenny advised that the Minute of the Commission with updated fees for Medical Assistance in Dying (MAiD) has been signed.

- s.14

- Dr. Halpenny advised that he spoke with Marie Thelisma regarding the timeliness of data for the Patterns of Practice mini profiles. The issue with timeliness of data links back to the Alternative Payment Plan (APP) data and the reporting schedule of the health authorities. Will continue this conversation to see if there is any ability to reduce the amount of time it takes to get the profiles out.

- Dr. Halpenny advised that he attended a recent GPAC meeting. GPAC has provided Dr. Halpenny with their strategic plan and Dr. Halpenny will share the plan with the MSC members.

**Action:**  
**Dr. Robert Halpenny**

- Dr. Halpenny attended the Physician Services Committee retreat. There was a lot of discussion about the General Practice Services Committee (GPSC) and their governance/direction.

- Dr. Halpenny met with Dr. Douglas Kingsford, Chief Medical Information Officer with Interior Health Authority to discuss virtual care and payment for virtual care. The MSC would like to invite Dr. Kingsford to attend a future meeting to discuss this topic.

**Action:**  
**Sarah Bryanton**

- Dr. Halpenny met with Dr. Martin Wale to discuss various quality initiatives.

- Dr. Halpenny advised that he sent a memo to the Health Authority CEO's to inquire about where their respective agencies are at with case costing. Island Health is the only Health Authority currently doing case costing. Dr. Halpenny met with Island Health Chief Financial Officer to discuss case costing.

## **2.0 Record of Decisions (ROD):**

- A **motion** to accept the MSC Record of Decisions for February 21, 2018 was approved with one minor change to wording in section 10.

## **3.0 Doctors of BC Update:**

- Allan Seckel, Doctors of BC CEO, attended the April 18 MSC meeting to discuss the Doctors of BC planning and strategic priorities.
- Mr. Seckel discussed the role of the Doctors of BC which includes taking some burden off doctors so they can focus on their clinical roles. Doctors of BC assists with interests of doctors such as fairness in wages and overarching system improvements. Doctors of BC seek to create a climate where doctors get a fair economic reward (relative to other professions) for working in a health care system that is effective.
- Some attributes that the Doctors of BC focus on are collaboration and physician advocacy. Collaboration focusses on ways to work with members and the health care system to improve quality of care. Doctors of BC participates on many joint collaborative committees. Physician advocacy work ranges from engaging in negotiations with government regarding payment arrangements under the PMA to overseeing a robust policy department that seeks to create a climate where doctors can provide the highest quality of care to British Columbians. Doctors of BC also provides services to doctors such as insurance and financial planning.
- The MSC asked Mr. Seckel what he sees the role of the MSC being and what value the MSC can bring as we move forward. Mr. Seckel expressed that he is grateful for the existence and the work of the MSC and that he believes the MSC enhances the degree of collaboration in the province and helps alter behavior.
- The MSC discussed with Mr. Seckel what the Doctors of BC role might be in influencing system changes to things like overhead costs that doctors face as well as other systematic pressures. Discussed the perception that family practice doctors seem increasingly unhappy. Mr. Seckel agreed that the costs of providing care are increasing faster than the revenue which leads to a shrinking pool of doctors willing to practice family medicine. The MSC would like to follow up on this point by obtaining data on the general frame of mind of family practice doctors – are they truly feeling unhappy?

**Action:**  
**Dr. Robert Halpenny**

#### **4.0 Advisory Committee on Diagnostic Facilities (ACDF):**

**Request For Decision: applications recommended for denial**

- The MSC reviewed two applications from privately-owned facilities seeking approval to bill MSP for provision of polysomnography services in the South Vancouver Island Health Service Delivery Area.
- The ACDF recommended that both applications be denied as there is no demonstrated need for additional polysomnography capacity in the area. The existing facilities are reasonably accessible and have unused capacity.
- A **motion** was approved by the MSC to deny the two applications.

**For Review/Discussion: Pulmonary Function policy review update**

- The ACDF brought forward an update on the pulmonary function policy review. This included five possible strategies to consider going forward:
  - 1) Explore approval of billing of Flow Volume Loop (FVL).
  - 2) Allow approved specialist offices to test patients referred for Pulmonary Function Test (PFT) without requiring specialist consultations.
  - 3) Allow Health Authorities that have not launched rapid access spirometry clinics to do so.
  - 4) Consider allowing qualified GP's to do basic spirometry in their offices.
  - 5) Update/clarify GPAC's COPD guidelines.
- The MSC discussed that the training on this testing is very minimal and that they would support any work that will allow doctors to do this testing in their offices. Discussion also took place about the path to get a combined fee approved. The MSC advised the ACDF of the Practice Support Program, a GPSC initiative, which took a cohort of doctors and did more in depth training on this testing.
- Take away items: look at the role of GP's in this testing, outcome of the above noted GPSC initiative and look at the fees (combined fee, has the fee changed as technology adapted?) The MSC will provide a contact at GPSC to follow up with regarding the outcome of the initiative.

**Action:**  
**Dr. Robert Halpenny**

**For Information: March 14/18 ACDF Facility Approvals**

- A list of facility approvals from the March 14, 2018 ACDF meeting was provided for the MSC's information.

**5.0 MSC Strategic Planning**

- Kyle Stamm attended the April 18 MSC meeting to review the draft 2018/19 MSC strategic plan that was created during the March 21 planning day.
- Updates were made to the plan and a final version will be sent to Dr. Halpenny for review before sharing with MSC members.
- Dr. Cadesky mentioned there is data that was provided to the Tariff Committee on the early adoption of virtual care. Dr. Halpenny will follow up regarding accessing this data.

**Action:**  
**Dr. Robert Halpenny**

**6.0 Legal Update/Extra Billing [CONFIDENTIAL and/or PRIVLEDGED]:**

**Medimap Systems Inc.**

- Mr. Blake Adam, Medimap co-founder, attended the April 18 MSC meeting to discuss recent correspondence between the MSC and Medimap regarding potential extra billing charges.
  - Mr. Adam provided a brief overview on the creation of Medimap. Medimap is an online resource that allows patients to look up wait times at clinics across the province. Mr. Adam explained that the program has been adopted by approximately 80% of walk in clinics across the province. The service was made free for clinics to sign up and use and free for patients to look up wait times. As the business grew, Medimap began to consider ways to generate revenue in order to support providing this service long term. s.21
- s.21 Medimap engaged patient users and it was evident patients were willing to pay for the service of remotely adding their name to clinic waitlists for a fee of \$5. Mr. Adam stated that Medimaps had stakeholder engagement with health authorities, government, legal counsel, etc., which advised Medimaps that such patient charges wouldn't be a problem. Given this, Medimap was surprised to receive a letter from the MSC stating that they appear to be contravening the *Medicare Protection Act* (the Act).
- Mr. Adam clarified that the service Medimap provides adds a patient's name to a clinic waitlist remotely. It does not to book an appointment online. The \$5 charge does not guarantee the patient a specific appointment time. Clinic staff make the decision to approve adding



patient names to their waitlists or not. However, Mr. Adam agreed with the MSC's point that perceivably the individual who has \$5 has the ability to gain access to the waitlist sooner than the person who cannot afford the \$5.

- The MSC highlighted for Mr. Adam the newly announced changes coming in to force with Bill 92 where there is wording specific to "priority over other persons or being given preferential treatment in the scheduling or rendering of the benefit". Mr. Adam advised he has not had a chance to consider this legislation but indicated he would consider doing so if asked by the MSC.
- Following Mr. Adam's presentation, the MSC advised that they would be in touch regarding their position on the matter.

**Action:**  
**Ross Alexander**

s.14

s.14

s.14

**Extra Billing:**

- An updated *MSC Extra Billing Status Report* was circulated for members' information.
- Dr. Halpenny highlighted that the enactment of Bill 92 provisions was announced by the Minister of Health on April 4, 2018.s.13

s.13

- Dr. Halpenny requested an update on the status of the extra billing audits from Marie Thelisma, and he is awaiting a report on the full list of audits.
- The MSC discussed recent extra billing correspondence that has been sent:

s.14

**Action:**  
**Dr. Robert Halpenny**

s.14

**Action:**  
**Dr. Robert Halpenny**  
**Sarah Bryanton**

**Action:**  
**Ross Alexander**

**Action:**  
**Ross Alexander**

**Action:**  
**Ross Alexander**

s.14

**Action:**  
**Ross Alexander**

## **7.0 Virtual Care Update:**

- Greg Leake, Nancy South, Marie Thelisma, Dr. Shiroy Dadachanji, Marie Ty and Eric Larson attended the April 18 MSC meeting to provide an update on Virtual Care.
- Mr. Leake reviewed scope and direction of the Virtual Care Strategy Framework. He also discussed the enablers and services of virtual care. Enablers include technology, guidelines, personal health information and provider compensation. Services include primary care, specialist community services programs, HealthLink BC and Home Health Monitoring.
- Mr. Leake reviewed some of the issues that the MSC highlighted in the previous discussion about Virtual Care including out of province doctors treating BC patients virtually, definitions of terms, rationalization of fee codes and cost. The MSC discussed some of their foundational principles and concerns – mainly, ensuring that the concept of virtual care is used appropriately and that as a payer, there is clear policy that ensures the MSC is paying for care that is high quality and valuable. The MSC would like some level of involvement in development of the policy statements. Dr. Halpenny and Mr. Leake will have an offline conversation about what this looks like.
- Dr. Halpenny highlighted the patient location/billing matrix that Marie Ty has prepared. Dr. Halpenny requested this matrix be shared with Mr. Leake.

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Marie Ty**

## **8.0 Expenditure Report:**

- Due to time limitations, the expenditure report was not presented. Nancy South and Eric Larson will cover the material that was missed during the April 18 meeting at the next meeting on May 30.

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*The April 18<sup>th</sup> meeting was adjourned at 3:10 p.m.  
The next regular meeting of the Medical Services Commission is scheduled for  
Wednesday, May 30, 2018 and will be held in Victoria.*

**MEDICAL SERVICES COMMISSION (MSC)**  
**Record of Decisions**  
**May 30, 2018**

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**May 30, 2018**

**Members Present:** Dr. Robert Halpenny (*Chair*), Heather Davidson, Colin Kinsley,  
Dr. Matthew Chow, Kenneth Werker, Ellen Godfrey, Dr. Bill Cavers

**Alternates Present:** Dr. Alan Ruddiman (Doctors of BC 1<sup>st</sup> Alternate)

**Member Regrets:** Dr. William Rife

**Officials Present:** Ross Alexander (*MSC Legal Counsel/Ministry of Attorney General*)  
(*for routine business*) Stephanie Power (*Executive Director, Ministry of Health*)

**MSC Secretariat:** Sarah Bryanton

**Guests:** Jonathan Penner (via telephone) (*Ministry of Attorney General*)  
Nancy South, Marie Ty, Eric Larson (*Ministry of Health*)  
Shannon Gibson, Jill Murray, Dr. Doug McTaggart (*Guidelines and  
Protocols Advisory Committee*)

**1.0 General/Chair's Report:**

- The May 30<sup>th</sup> MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the agenda that was circulated. A discussion regarding s.14 was added to the agenda.
- s.14
- Dr. Halpenny advised that he attended the recent Physician Services Committee meeting.
- Dr. Halpenny attended the Medical Directors of BC meeting in Victoria. He presented an overview of the *Medicare Protection Act* and Bill 92 implications. At the meeting he met with Rob Hulyk, Director of Physician Advocacy, Doctors of BC and inquired about physician satisfaction surveys that could be shared with the MSC. Mr. Hulyk will look into the feasibility of sharing the results with the MSC.
- Dr. Halpenny advised that he discussed pulmonary function test pilot with Dr. Shelly Ross but does not yet know the outcome of the pilot.
- Dr. Halpenny advised that his follow-up meeting to with Deputy

**Action:**  
**Dr. Robert Halpenny**

Minister Stephen Brown originally scheduled in May has been rescheduled to June 12. The purpose of this meeting is to discuss/review the MSC Strategic Plan and other MSC priorities including pharmaceutical prescribing habits.

- Dr. Halpenny suggested that the roles and responsibilities of the Patterns of Practice Committee be reviewed as there has been a trend of meetings being cancelled (including their most recent meeting) due no agenda items.
- Dr. Halpenny noted that the MSC needs a thorough review and advice on the MSC's authorities and accountabilities. Look to schedule this in the coming months.

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Sarah Bryanton**

## **2.0 Record of Decisions (ROD):**

- A **motion** to accept the MSC Record of Decisions for April 18, 2018 was approved with no changes.

## **3.0 Expenditure Report**

- The Expenditure Report was distributed to the MSC and presented by Eric Larson and Nancy South. The following statistics were presented:
  - Medical fee-for-service (FFS) payments and Available Amount – 2017/18 is looking at a surplus in the range of \$0-13M
  - Budget variance model for medical FFS
  - Medical FFS cost drivers
  - Growth in services and patients – it was noted that this continues to be on a downward trend
  - Top and bottom ten fee items – it was noted that the top 10 list has not changed since December 2017
  - Cost drivers for select GP Counselling and Mental Health Planning fees – not seeing a substitution with GP counseling fees from psychiatry fees
  - Cataract suite of services analysis
- The MSC requested that Eric and Nancy follow-up on:
  - Decline in services per patient – can this information be divided demographically by age cohorts?
  - Decline in psychiatry fees and possible correlation to some audit results.
  - With regards to cataract analysis, is it known if referrals to ophthalmologists are from GPs or optometrists? What is the frequency of billing a full repeat consult just after six months?

**Action:**  
**Eric Larson**  
**Nancy South**

- Overview of tests ordered prior to cataract surgery to determine if testing is appropriate
- The MSC requested a roll-up of 2017-18 statistics once the fiscal year closes in September.
- The following items were flagged for future consideration by the MSC:
  - What does the MSC need to know about certain specialties (e.g. primary care) as it relates to MSC priorities such as value for money?
  - Discussion regarding Available Amount and utilization management.

**Action:**  
**Dr. Robert Halpenny**  
**Sarah Bryanton**

#### **Virtual Care**

- The Virtual Care Report presentation was distributed to the MSC and presented by Eric Larson and Nancy South. The following statistics were presented:
  - Historical data
  - Cost drivers
  - Care providers
  - Follow-up items: evidence of substitution between Virtual Care and in-office fees, care continuity, and prior contact
- With regards to Virtual Care cost drivers, the MSC requested a breakdown by demographics. The MSC also requested analysis on the proportion of billings that have transitioned from face to face to virtual care billings.
- The MSC suggested a potential survey of patients, not necessarily limited to virtual care. Dr. Halpenny to discuss further with Heather Davidson.

**Action:**  
**Eric Larson**  
**Nancy South**

**Action:**  
**Dr. Robert Halpenny**

#### **4.0 Primary Care Network Compensation Models**

- The Compensation Options Supporting Primary Care Networks and Team-based Care presentation was distributed to the MSC and presented by Marie Ty. Topics discussed included:
  - An overview of Primary Care Networks
  - Compensation options that were included in the Expression of Interest: population-based funding, value-based compensation/Fort St. John prototype, and nurse in primary care practice.
- The GPSC partners have been working together to establish the

patient medical home and primary care networks as the foundation for an integrated system of patient care.

- The MSC inquired how models are being evaluated. Marie Ty advised that evaluation frameworks are envisioned for all models.

## **5.0 Guidelines and Protocols Advisory Committee**

- The MSC discussed the overlap between GPAC and “Choosing Wisely”. “Choosing Wisely” has not been fully endorsed by BC. Dr. Halpenny plans to discuss this further with Stephen Brown.
- The MSC discussed IMITSC and the integration of GPAC guidelines into EMRs. Dr. Halpenny would like to discuss this with Stephen Brown and invite Dr. Doug Kingsford and Carol Rimmer to the MSC in the future to continue the conversation about incorporating guidelines into EMRs.

**Action**  
**Dr. Robert Halpenny**

**Action:**  
**Dr. Robert Halpenny**  
**Sarah Bryanton**

### **For Decision:**

#### **Ultrasound Prioritization Guideline**

- GPAC distributed and presented the *Ultrasound Prioritization Guideline* and request for decision document. The guideline summarizes suggested wait times for common indications where ultrasound is the recommended first imaging test. The purpose is to inform primary care practitioners in BC how referrals are prioritized by radiologists, radiology departments and community imaging clinics.
- The MSC approved a **motion** adopting the *Ultrasound Prioritization Guideline*.

#### **Opioid Use Disorder Guideline**

- GPAC distributed and presented a slightly revised *Opioid Use Disorder* Guideline and request for decision document. This Guideline was previously reviewed and approved at the January 2018 MSC meeting. Since January, the issue of the inadequacy of the opioid use disorder fees has been addressed and the fees will be increased effective June 1, 2018. The guideline presents recommendations for the diagnosis and management of opioid use disorder in primary care with focus on induction and maintenance of buprenorphine/naloxone opioid agonist treatment for adults and youth.
- The MSC approved a **motion** adopting the *Opioid Use Disorder*



*Guideline.*

**For Discussion:**

**2017-2018 Annual Report**

- GPAC distributed and presented their 2017/18 Annual Report detailing: guidelines and protocols published and in development, membership updates, strategic plan, website analytics, project highlights, alignment with stakeholders and promotional activities.
- The MSC endorsed the GPAC 2017-2018 Annual Report.

**2017-2019 Strategic Plan**

- GPAC distributed and presented their 2017-2019 Strategic Plan. Their objectives and priorities include:
  - Optimize clinical care and resource allocation to improve health outcomes;
  - Improve patient and provider experience;
  - Improve promotion to maximize practitioner uptake and use of BC guidelines;
  - Improve evaluation efforts and activities; and
  - Improve GPAC member engagement.
- The MSC endorsed the GPAC 2017-2019 Strategic Plan.

**2018-2019 Annual Work Plan**

- GPAC distributed and presented their 2018/19 Work Plan outlining: topics for guideline and protocol development, priority guideline-related projects, and key ongoing operational activities.
- The MSC endorsed the GPAC 2018/19 Work Plan.

**6.0 2018-19 MSC Strategic Plan Final Review**

- The MSC reviewed the final 2018-19 Strategic Plan. The following amendments were requested:
  - On page 3, should be funded by MSP, not the “available amount”
  - On page 6, revise the bullet regarding the audit process to read that “more” emphasis should be focused on strengthening education and prevention. Change “timely” to “optimal”

**Action:**  
**Sarah Bryanton**

- The motion to adopt the 2018-19 MSC Strategic Plan was approved with the aforementioned amendments.

**7.0 MSC Recommendations to SSC re: Appropriateness**

- Dr. Matthew Chow advised the MSC that the Specialist Services Committee (SSC) has some one-time fund available and is looking for some suggestions on how to allocate the funds.
- “Appropriateness” seems to be a reoccurring theme and a potential candidate for the one-time funds. Work led by Ian Rongve is happening within the Ministry to look at appropriateness so it may be worthwhile connecting with that group.
- The MSC discussed other potential areas of focus: pooled referrals, patient surveys, and physician prescribing habits. Another option is to connect with Dr. Andy Hamilton and Marilyn Copes regarding PROMS and PREMS.

**8.0 Legal Update/Extra Billing [CONFIDENTIAL and/or PRIVLEDGED]:**

s.14

**Action:**  
**Ross Alexander**

s.14

**Extra Billing:**

- An updated MSC Extra Billing Status Report was circulated for members' information.
- The MSC discussed recent extra billing correspondence that has been sent:  
s.14

**Action:**  
**Ross Alexander**

s.14

**Action:**  
**Ross Alexander**

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Ross Alexander**

## **9.0 Urgent Care Centre Announcement**

- A copy of the article announcing the BC government launch of a new primary health-care strategy to deliver faster and improved health care to British Columbians was distributed. As part of the new strategy, government will be putting in place: primary care networks, urgent primary care centres and community health centres.

## **10.0 MSP Updates (Beneficiary Services)**

- Ms. Stephanie Power departed the meeting early and was not able to provide an update. Update to be provided at future meeting.

*The May 30th meeting was adjourned at 1:35 p.m.  
The next regular meeting of the Medical Services Commission is scheduled for  
Wednesday, June 27, 2018 and will be held in Victoria.*

**MEDICAL SERVICES COMMISSION (MSC)**  
**Record of Decisions**  
**June 27, 2018**

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**June 27, 2018**

**Members Present:** Dr. Robert Halpenny (*Chair*), Heather Davidson, Colin Kinsley, Dr. Matthew Chow, Kenneth Werker, Ellen Godfrey, Dr. Bill Cavers, Dr. William Rife

**Officials Present:** Ross Alexander (*MSC Legal Counsel/Ministry of Attorney General*)  
(*for routine business*) Stephanie Power (*Executive Director, Ministry of Health*)

**MSC Secretariat:** Sarah Bryanton

**Guests:** Jonathan Penner (via telephone) (*Ministry of Attorney General*)  
Nancy South, Marie Ty, Eric Larson, Bev Sealey, Evan Machin, Dr. Shiroy Dadachanji, Teri Collins, Shanna Ooms, Woody Turnquist, Mariana Diacu (*Ministry of Health*)  
Dr. Vern Davis, Endre Dolhai, Dr. Jack Burak, Dr. Brian Gregory (*Audit and Inspection Committee*)

**1.0 General/Chair's Report:**

- The June 27<sup>th</sup> MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the agenda that was circulated. No additional agenda items were added.
- In the Chair's Report, Dr. Halpenny advised that Rob Hulyk, Director of Physician Advocacy, Doctors of BC shared the results of the physician satisfaction survey. This information will be reviewed at the September MSC meeting.
- Dr. Halpenny advised that he followed-up with Dr. Shelly Ross regarding the pulmonary function test pilot. Dr. Ross advised that the device was not popular and respirologists complained about the device. Dr. Halpenny will follow-up further to see if there is anything further to add.
- Dr. Halpenny met with Marie Ty regarding location codes. Dr. Halpenny will follow-up regarding the impediments to starting to use location codes.
- Dr. Halpenny met with Deputy Minister Stephen Brown on June 12. The following items were discussed:
  - Reasonable access to quality care - Stephen Brown advised

**Action:**  
Sarah Bryanton

**Action:**  
Dr. Robert Halpenny

**Action:**  
Dr. Robert Halpenny

that the mandate of the Provincial Health Services Authority (PHSA) is changing and they are going to have an oversight role in quality care. Stephen Brown agreed the MSC should help coordinate the appropriateness initiatives. Dr. Halpenny to follow-up with Carl Roy, PHSA CEO regarding this.

**Action:**  
**Dr. Robert Halpenny**

- Alternative Payments Plan (APP) - Stephen Brown confirmed that the MSC is not involved in the oversight of APP.
- Available Amount - Stephen Brown is supportive of MSC doing a detailed analysis of the Available Amount. Request that Finance and Corporate Services (FCS) ADM attend an upcoming MSC meeting to discuss this in more detail.
- Stephen Brown agreed the MSC should do a deeper dive to understand the relationship and alignment between walk-in-clinics and the Primary Care Network system.
- Stephen Brown agreed the MSC should follow-up on the use of location codes.
- Concerns with virtual care.
- Pharmaceutical prescribing patterns as part of Patterns of Practice Committee.
- *Medicare Protection Act* (MPA) and Bill 92 amendments.
- Stephen Brown agreed to arrange a high-level meeting of decision makers in order to help connect the dots amongst various initiatives (e.g. quality care).

**Action:**  
**Dr. Robert Halpenny**  
**Sarah Bryanton**

**Action:**  
**Dr. Robert Halpenny**

- Dr. Halpenny advised that he met with Malcom McClure from the Therapeutics Initiative to discuss the work that the Therapeutics Initiative have done on pharmaceutical prescribing habits.
- Dr. Halpenny attended the most recent Advisory Committee on Diagnostic Facilities (ACDF) meeting to provide an overview of the MSC.
- Dr. Halpenny attended Leadership Counsel to give an overview of MPA/Bill 92 amendments.
- Dr. Halpenny is working to schedule a meeting with Minister Adrian Dix over the summer.
- s.22

- The General Practice Services Commission (GPSC) has an inquiry regarding the significant recoveries from practitioners who have billed GPSC fees inappropriately and whether this money can come back to GPSC. Doctors of BC representatives to request

**Action:**  
**Dr. Matthew Chow**  
**Dr. Bill Cavers**  
**Dr. William Rife**

GPSC (Jean Clark) to send a formal letter to MSC.

- Updates have been made to the MSC Strategic Plan. Chantelle to distribute. Strategic Plan updates should be a standing item on the agenda.

**Action:**  
**Chantelle Jones**

## **2.0 Record of Decisions (ROD):**

- A **motion** to accept the MSC Record of Decisions for May 30, 2018 was approved with a minor change to wording in section eight.

## **3.0 Expenditure Report**

- The Expenditure Report was distributed to the MSC and presented by Eric Larson, Marie Ty, and Nancy South. The following statistics were presented:
  - Medical fee-for-service (FFS) payments and Available Amount – 2017/18 is looking at a surplus in the range of \$0-13M.
  - Budget variance model for medical FFS.
  - Medical FFS cost drivers. “Growth in Services per Patient” for 2014/15 has disappeared on the most recent data run; Nancy and Eric are looking into this.
  - Top and bottom ten fee items – it was noted that the top 10 list has not changed since December 2017.
  - Cataract analysis follow-up.
  - Outcomes for attached and un-attached patients.
  - Cost drivers by age group.
- The following items were flagged for follow-up:
  - Cataract analysis:
    - Ophthalmology to Ophthalmology referrals – Suite of testing that is performed based on who the referral comes from. How many patients go on to have another cataract within 6 months?
    - The MSC to have a discussion regarding the usefulness of this data before directing Nancy and Eric to analyze further.
  - Outcomes for attached and un-attached patients:
    - Run the algorithm from a time before the fees were in place.
    - Provide a copy of the location code legend.
- Eric advised that they should be able to present 2017/18 year-end

**Action:**  
**Eric Larson**  
**Nancy South**

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Eric Larson**  
**Nancy South**

close figures and a preliminary look at the 2018/19 figures at the September MSC meeting.

#### **4.0 MSP Beneficiary Hearings Update**

- Bev Sealey, Director of Beneficiary Services, Operations and Policy presented an overview/update on MSP beneficiary hearings. Topics presented included:
  - Residency reviews
  - Waiver of the Wait Period reviews
  - Out of country coverage reviews
- The presentation included details of the hearing/committee processes, statistics and operational challenges.

#### **5.0 Referrals to the Special Investigations Unit**

- As an outcome of the Strategic Plan, Dr. Halpenny requested information from Manjit Sidhu, FCS ADM regarding referrals made to the Special Investigations Unit and the process with Crown Counsel.
- A detailed response was received that addressed the MSC's questions. This matter is now complete.

#### **6.0 Audit and Inspection Committee Update**

- The Audit and Inspection Committee (AIC) and Billing Integrity Program (BIP) staff Evan Machin, Director and Dr. Shiroy Dadachanji, Medical Consultant presented an overview of current AIC activities. Presentation topics included:
  - Introduction of AIC members
  - Report on 2017/18 goals
  - Fiscal 2017/18 year end statistics
  - Reports and referrals from AIC meetings
  - Special Investigations Unit referral process
  - Audit environment – facts and figures
- The MSC discussed the options for settling audit results: prior to medication, during mediation or hearing.
- The length of time to complete audits was discussed including how we compare to other provinces. BIP recently went through a LEAN process that helped to reduce the amount of time spent internally on audits.



- The MSC discussed the balance between education and deterrence.
- The AIC feels it would be helpful to have direction from the MSC regarding repeat offenders, particularly around the length of de-enrollments. The MSC to discuss standard operating procedure for repeat offenders at the September meeting.
- The MSC to discuss these matters further including defining some of the issues and solutions/recommendations. This will be added to the September meeting agenda.

**Action:**  
**Sarah Bryanton**

**Action:**  
**Sarah Bryanton**

## **7.0 Health Sector Information Analysis and Reporting Division Presentation**

- Teri Collins, ADM of Health Sector Information Analysis and Reporting Division (HSIAR) presented an overview of her division. This division was created in 2015 to bring together data and analytic functions and creating a single source of truth. Presentation topics included:
  - Division overview
  - Ministry's consolidated analytics and target operating model
  - Clients/partners
  - Products and services
  - What is currently provided to the MSC
  - MSC areas of focus
- The MSC discussed methodology and how we determine value for money in relation to the available amount.
- The MSC discussed potentially developing an analytics plan to determine what problems we are trying to address (areas of focus) and what identity what information is available.
- Teri agreed to share an integrated board report with the MSC.

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Teri Collins**

## **8.0 Primary Care Networks**

- Shana Ooms, Executive Director of Primary Care Access presented the Primary Care Strategic Priorities. Topics included:
  - Primary Care policy direction
  - Overview of team based care
  - Primary Care Networks – process, wave 1, May-June highlights and upcoming dates

- Common program agreement
- Enabling strategies
- Urgent Primary Care Centres
- Community Health Centres

- The MSC sees a connection to the primary care initiative through the financial influence it can have over the system (e.g. walk in clinic funding). Dr. Halpenny and Shana Ooms to continue this conversation offline.

**Action:**  
**Dr. Robert Halpenny**  
**Shana Ooms**

## **9.0 Advisory Committee on Diagnostic Facilities (ACDF)**

### **For Decision:**

#### **Policy Addendum to ACDF Assessment Criteria**

- The MSC reviewed the Request for Decision and recommended the following wording change to the proposed policy addendum: “Notwithstanding these criteria, the Committee may, on a case-by-case basis, recommend the Medical Services Commission approve under exceptional circumstances...”
- The MSC approved a **motion** adopting the policy addendum with the aforementioned wording changes.

#### **Nomination of New ACDF Chair**

- The MSC reviewed the Request for Decision recommending that Mariana Diacu be appointed as Chair and third government member on the ACDF.
- The MSC approved a **motion** appointing Mariana Diacu as Chair and third government member on the ACDF.

### **For Information:**

#### **Approvals from June 13 ACDF**

- For information the MSC received the list of approvals granted at the June 13, 2018 meeting of the ADCF meeting.

## **10.0 Legal Update/Extra Billing [CONFIDENTIAL and/or PRIVILEGED]:**

s.14

s.14

**Extra Billing:**

- An updated MSC Extra Billing Status Report was circulated for members' information.
- A **motion** was approved by the MSC to request that the extra billing settlements will be reported to the MSC. Dr. Halpenny to communicate this to the Billing Integrity Program.
- The MSC discussed policy and communications work on Bill 92. If review/approvals regarding Bill 92 are required by the MSC this can be done via email in order to meet the short timelines.
- The MSC discussed recent extra billing correspondence:

s.14

**Action:**  
**Ross Alexander**

s.14

**Action:**  
**Ross Alexander**

s.14

**Other Legal:**

- The MSC requested that items signed between meetings be brought forward as information at each meeting, particularly Settlement Agreements. Sarah to make this a standing agenda items in the legal section.

**Action:**  
**Sarah Bryanton**

*The June 27th meeting was adjourned at 2:40 pm.  
The next regular meeting of the Medical Services Commission is scheduled for  
Wednesday, September 19, 2018 and will be held in Victoria.*

**MEDICAL SERVICES COMMISSION (MSC)**  
**Record of Decisions**  
**September 19, 2018**

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**September 19, 2018**

**Members Present:** Dr. Robert Halpenny (*Chair*), Heather Davidson, Colin Kinsley (2:00 departure), Dr. Matthew Chow, Ellen Godfrey, Dr. Bill Cavers

**Member Regrets:** Kenneth Werker, Dr. William Rife

**Officials Present:** Ross Alexander (*MSC Legal Counsel/Ministry of Attorney General*)  
(*for routine business*) Stephanie Power (*Executive Director, Ministry of Health*)

**MSC Secretariat:** Sarah Bryanton

**Guests:** Mark Armitage, Eugene Johnson (*Ministry of Health*) - **Item 4.0 Bill 92 Implementation**  
Dr. Doug McTaggart, Shannon Gibson, Fritha Munday (*Ministry of Health*) - **Item 5.0 – Guidelines and Protocols Advisory Committee**  
Mariana Diacu, Oliver Krupke (*Ministry of Health*) – **Item 6.0 Advisory Committee on Diagnostic Facilities**  
Carolyn Rudden (*Ministry of Health*) – **Item 9.0 Requisition Committee**

**1.0 General/Chair's Report:**

- The September 19th MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the agenda that was circulated. No additional agenda items were added.
- In the Chair's report, Dr. Halpenny advised that he communicated with Dr. Shelly Ross to follow-up regarding polysomnography. A refresh of the Practice Support Program's COPD learning module is underway. Dr. Halpenny would like to ensure this refresh is connected with the work ACDF is doing.
- Dr. Halpenny met with Stephanie Power and her team to discuss location codes.
- Dr. Halpenny approved a Minute of the Commission that the Ministry of Health and the Doctors of BC agreed to lower the fee for cataract surgery to \$350.
- Dr. Halpenny met with Carl Roy regarding PHSA's new mandate. The new mandate aligns with many of the MSC's priorities. For example:

**Action:**  
**Dr. Robert Halpenny**

- Prescribing habits for physicians
  - Reviewing stroke care across the Province (link to GPAC)
  - Ensuring performance metrics are in place and reporting on value for money
  - PHSA potential oversight of Diagnostic Imaging and Pharmacy
  - Supporting the Ministry in development of digital health strategy
- Manjit Sidhu, ADM, Finance and Corporate Services will be calling in to the October meeting to discuss the process of setting the Available Amount.
  - A detailed analysis of walk-in-clinic data is underway. Dr. Halpenny continues to work with Eric Larson on this.
  - Dr. Halpenny is meeting with Kerri Harrison, Executive Director, Finance and Corporate Services on September 20 regarding case costing for cataracts.
  - The Audit and Inspection Committee (AIC) requested direction from the MSC regarding repeat offenders, particularly around de-enrolments. The AIC will be discussing further at their October meeting and will report back with more detail regarding which areas they feel they need direction from the MSC.
  - In June, Teri Collins indicated she may be able to share an integrated board report with the MSC. Need to follow up on this item.
  - Dr. Halpenny advised that he will be following-up with Shana Ooms regarding walk-in-clinics and how they tie in with the primary care initiative.
  - s.14
  - Dr. Halpenny met with Christina Krause from the Patient Safety and Quality Council on how to tie in their initiatives, particularly as they relate to quality care, to the MSC priorities.
  - Dr. Halpenny met with Mitch Moneo, ADM of Pharmaceutical Services regarding prescribing habits of physicians. Mitch advised of some similar work underway where the Ministry may have a

**Action:**  
**Sarah Bryanton**

**Action:**  
**Dr. Robert Halpenny**

contract with the College of Physicians and Surgeons of BC (CPSBC) specific to opioids.

- Dr. Halpenny met with Andrew Wrae regarding the Physician Quality Improvement Initiative.
- Dr. Heidi Oetter, CPSBC registrar brought forward a concern regarding physicians wanting to remove their specialty designation to gain access to the complex consultation fee for general internal medicine. Marie Ty advised Dr. Halpenny that this issue should be rectified when new policy goes into place regarding billing the general internal medicine code. There is a discrepancy in the number of physicians designated in BC under general internal medicine on the CPSBC website (2 designations) and the Royal College of Physicians and Surgeons of Canada website (33 designations).
- Dr. Halpenny discussed physician billing codes for pain management with Dr. Michael Murray. The CPSBC requested a list of physicians billing invasive services for pain management from the Ministry of Health and after some discussion it was determined that this can be used to contact the physicians.
- Dr. Halpenny had a discussion with the CPSBC regarding CPAP providers. The CPSBC is concerned that the individuals providing the service are not accredited and whether there is any billing by the individuals reading the tests (it is not under a respiratory therapist's scope of practice to read the tests). The CPSBC is currently following up on this and checking how other jurisdictions handle this.
- Dr. Halpenny advised that the Bill 92 stakeholder letter was sent to medical practitioners, private clinics and diagnostic facilities throughout the Province and a high volume of inquiries are being received.
- Dr. Halpenny met with Dr. Tom Noseworthy and was provided an overview of the Academic Health Sciences Network. The MSC discussed the need to ensure there is not a duplication of the work being done, particularly as it relates to rural and remote initiatives.
- Dr. Halpenny met with Dr. Wright regarding the Therapeutics Initiative. The purpose of this meeting was to determine how the Patterns of Practice Committee and the Guidelines and Protocols Advisory Committee can work with them on the initiative.



- Dr. Halpenny emailed Deputy Minister Stephen Brown regarding the new Telus medical app. Dr. Halpenny reiterated the need for policy to start putting a box around some of the issues with virtual care. The news article regarding the Telus app will be circulated to the MSC members for the information.
- A concern regarding a methadone clinic in Duncan providing addiction therapy and charging patients for access was brought forward to the CPSBC. The CPSBC indicated they brought this issue to the attention of the clinic and they do not have concerns regarding the professional status of the director and staff. This matter is considered closed.
- Dr. Halpenny advised that he is meeting with Minister Adrian Dix on September 20. Discussion items include:
  - MSC Strategic Plan – highlighting concerns with Available Amount and value for money.
  - Concerns around the number of entities working on quality of care indicatives and the commitment from the Deputy Minister that MSC can take a role in connecting dots of those entities working on quality initiatives.
  - Patterns of Practice Committee and who is looking at patterns of prescribing habits.
  - Virtual care and the direction of virtual care.
  - Bill 92 and audits - need confirmation of approach to enforcing Bill 92 and how to address issues with retroactivity. With regards to the injunction, if it is successful, then what is the enforcement mechanism.
  - Issue of physicians who de-enroll in order to bill patients directly, specifically in the case of private diagnostic imaging clinics.
  - The letter received from Health Critic re MRI's.

**Action:**  
**Sarah Bryanton**

#### **Strategic Plan Update**

- Updates have been made to the MSC Strategic Plan. A review of the Strategic Plan to discuss updates is now a standing item on the agenda.

#### **Approval of 2019 Meeting Dates**

- The MSC approved the 2019 meeting dates. Sarah to circulate the dates to members.

**Action:**  
**Sarah Bryanton**

**2.0 Record of Decisions (ROD):**

- A **motion** to accept the MSC Record of Decisions for June 27, 2018 was approved with no changes.

**3.0 Audit and Inspection Committee Public Member Appointment**

- The Audit and Inspection Committee's (AIC) current public representative's term is expiring. The AIC received five applications which were put forth to the MSC along with a recommendation from the AIC to appoint Mr. David Proctor.
- The MSC developed criteria, discussed what competencies are needed for this role and reviewed the applications.
- A **motion** was approved to accept the AIC's recommended candidate, Mr. David Proctor. *\*Heather Davidson was not present for this vote.*

**4.0 Bill 92 Implementation**

- Eugene Johnson, Stephanie Power and Mark Armitage provided an update on Bill 92 implementation including the historical context, details of the beneficiary complaint process, provider implications, work underway (policy, communications, contract implications and operations/monitoring) and work that will take place post-October 1.
- It was highlighted that on September 7, 2018, an Order in Council was approved that will see Section 18.1 of the Act "Limits on direct or extra billing in a diagnostic facility" brought in to force effective April 1, 2019, providing a 6-month delay in bringing this section in to force.
- The role of the MSC was discussed including what may trigger a decision from the MSC.
- s.14

- Unrelated to Bill 92, Mark Armitage flagged for the MSC that the Section of Ophthalmology had signaled they were planning to request a review of the decision by the Tariff Committee and the Doctors of BC board in relation to the planned reduction of two cataract fee items. Mark noted that as per the Physician Master Agreement, the MSC may be required to play an arbitrator role in a dispute resolution process if required.

## **5.0 Guidelines and Protocols Advisory Committee (GPAC)**

### **For Decision:**

#### **Updated *Testosterone Testing Protocol Guideline***

- GPAC distributed and presented the updated *Testosterone Testing Protocol Guideline* and request for decision document. The protocol reviewed the appropriate use of serum testosterone testing in men and women aged over 19 years.

The MSC approved a **motion** adopting the *Testosterone Testing Protocol Guideline*.

### **For Information:**

- Executive and General minutes from the March 7, 2018 GPAC meeting were distributed.

## **6.0 Advisory Committee on Diagnostic Facilities (ACDF)**

### **For Decision:**

#### **ACDF Government Member Appointments**

- The MSC reviewed the Request for Decision recommending that Derek Rains and Stan Bersenev be appointed as government members on the ACDF.
- The MSC approved a **motion** appointing Derek Rains and Stan Bersenev as government members on the ACDF, with the amendment that Anna Gardner is removed from the draft Minute of the Commission outlining Committee members.

#### **Ultrasound Moratorium Exception Requests**

- s.13

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#### **ACDF Annual Activity Report 2017/18**

- The MSC reviewed the ACDF Annual Activity Report for 2017/18. The MSC requested an overview of why DAP letters are withdrawn be added to section 2.4
- Pending this change, a **motion** to adopt the ACDF 2017/18 Work Plan was approved.

#### **ACDF Work Plan 2018/19**

- A **motion** to adopt the ACDF 2018/19 Work Plan was approved.

#### **7.0 Discussion re: Dr. Tam**

- The MSC discussed the letter received from Dr. Morton, Vice President of Medicine at Fraser Health Authority regarding information sharing and communication related to Dr. Tam, a former Fraser Health Obstetrician who was found to have overbilled the province and was directed to repay a \$2.1-million. Dr. Morton expressed his view that there was very little information sharing and communication amongst the Health Authority, CPSBC and MSC in this particular case. Dr. Morton suggests an in-depth discussion at the upcoming Provincial Medical Services Executive Council (PMSEC) meeting.

- The MSC agreed that a letter should be sent back to Dr. Morton thanking him for copying the MSC on this letter and inviting him to update the MSC regarding the outcome of the PMSEC discussion.
- Further to this, the MSC and MSC Legal Counsel discussed the legal authorities and circumstances in which the MSC would be permitted to share information regarding an investigation or the outcome of an investigation in to a practitioner. The MSC also discussed legal restraints from sharing such information.
- The MSC will follow up with the Audit and Inspection Committee to ensure that the MSC is being made aware of any audit cases that are revealing concerns regarding patient safety/substandard care. These are the cases that the MSC Chair is obligated by legislation to report to CPSBC.
- The MSC will follow up with Marie Thelisma to discuss the involvement of law enforcement/crown counsel and how law enforcement is made aware if this practitioner returns to Canada.

**Action:**  
**Sarah Bryanton**

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Dr. Robert Halpenny**

**8.0 Legal Update/Extra Billing [CONFIDENTIAL and/or PRIVILEGED]:**

**Settlements and Recoveries Signed by Chair**

- The MSC discussed the approach to providing this information in an overarching and confidential manner going forward. MSC Legal Counsel will provide an overview at each meeting.

**Payment of Audit Recovery Monies**

s.14

s.14

- The MSC briefly discussed other topics such as personal liability of MSC members and future presentation topics.

#### **Extra Billing**

- An updated MSC Extra Billing Status Report was circulated for members' information.
- Correspondence on the following issues was provided to the MSC for information and consideration. A fulsome discussion on each issue did not occur due to time limitations.

s.14

#### **9.0 Requisition Committee**

- Carolyn Rudden brought forward a request for decision seeking approval on the updated Standard Outpatient Breast Imaging Requisition (HLTH 1906 2018/08/16). The requisition required updating in order to align with the GPAC *Breast Disease and Cancer: Diagnosis* and *Breast Cancer: Management and Follow-up* guidelines.
- In order for the MSC to approve this requisition, the MSC needs to ensure Doctors of BC provide their position on the requisition. Carolyn indicated she had previously been told that the requisition didn't need to go back to the Doctors of BC. Carolyn to draft a letter for the MSC Chair to send to Doctors of BC seeking their position on the requisition. Once a response is received from Doctors of BC, the requisition can come back to the MSC for approval.

**Action:**  
**Carolyn Rudden**

***The September 19<sup>th</sup> meeting was adjourned at 2:45 pm.  
The next regular meeting of the Medical Services Commission is scheduled for  
Wednesday, October 24, 2018 and will be held in Vancouver.***

**MEDICAL SERVICES COMMISSION (MSC)**  
**Record of Decisions**  
**October 24, 2018**

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**October 24, 2018**

**Members Present:** Dr. Robert Halpenny (*Chair*), Heather Davidson (by telephone), Colin Kinsley, Dr. Matthew Chow, Dr. Bill Cavers, Dr. Sam Bugis, Ellen Godfrey (*10:15 arrival*), Kenneth Werker, Jillianne Code

**Officials Present:** Ross Alexander (*10:15 arrival – Item 4.0*) - *MSC Legal Counsel/Ministry of Attorney General*  
*for routine business* Stephanie Power - *Executive Director, Ministry of Health (by telephone)*

**MSC Secretariat:** Sarah Bryanton

**Guests:**

Woody Turnquist (*Ministry of Health*) – **Item 5.0 Advisory Committee on Diagnostic Facilities by telephone**

Tyna Mason (*Ministry of Attorney General*) – **Item 6.0 Pacific Centre for Reproductive Medicine by telephone**

Manjit Sidhu (*Ministry of Health*) – **Item 7.0 Setting the Available Amount by telephone**

Dr. Doug McTaggart, Shannon Gibson, Katey Townsend (*Ministry of Health*) - **Item 8.0 – Guidelines and Protocols Advisory Committee by telephone**

Dr. Vern Davis, Marie Thelisma, Dr. Shiroy Dadachanji, Evan Machin (*Ministry of Health*) – **Item 9.0 False Creek Audit Report by telephone**

**1.0 General/Chair's Report:**

- The October 24th MSC meeting was held in Vancouver. Dr. Robert Halpenny, Chair, called the meeting to order at 9:05 a.m.
- Dr. Jillianne Code was welcomed back to the MSC as a public representative and Dr. Sam Bugis was welcomed as the new Doctors of BC nominee.
- The MSC reviewed the agenda that was circulated. An additional item was added under the legal section to discuss s.14

A change to the agenda was also noted; no expenditure report was received in time for the meeting and therefore that item is removed from the agenda. The MSC agreed it was difficult to fulfil the mandate of managing and monitoring the Available Amount if regular expenditure reports are not received. The MSC agreed a letter should be written to the ADM of Finance and Corporate Services to

**Action:**  
**Dr. Robert Halpenny**

highlight this issue.

- In the Chair's report, Dr. Halpenny provided an update on his meeting with Minister Dix that took place on September 20. Dr. Halpenny advised that he was able to touch on all of the issues he shared at the September 19 MSC meeting but that the discussions were quite high level. Minister Dix indicated he would like another meeting to be scheduled soon.
- Dr. Halpenny noted that due to time limitations several items under the extra billing section of the agenda were not discussed, at the September 19 meeting:
  - s.14
    - The Medimap file is now considered closed.
    - A letter was sent to the Specialists of BC in response to an article published in their newsletter. The letter clarified that the contrary to the article, the prohibition on extra billing is not new and has been in place under the *Medicare Protection Act* (MPA) prior to the Bill 92 amendments.
  - s.22
- Dr. Halpenny advised that he spoke with Dr. Vern Davis, Chair of the Audit and Inspection Committee (AIC) and Dr. Davis indicated that s.14 s.14
- Dr. Halpenny updated the MSC on an issue that arose related to a residency hearing. The beneficiary's legal counsel was requesting that the MSC pay for an interpreter. Dr. Halpenny reviewed the request and the decision was that the beneficiary certainly has the right to an interpreter but the MSC would not assume responsibility for the payment of the interpreter.
- Dr. Halpenny indicated he is waiting on a response from the Provincial Medical Services Executive Council (PMSEC) on the outcome of their discussion regarding information sharing/communication related to Dr. Tam. On this same topic, Dr. Halpenny also indicated he would be following up with Marie Thelisma to determine if there is anything that can be done if Dr. Tam returns to Canada (e.g. is this flagged for immigration?)

**Action:**  
**Dr. Robert Halpenny**



- Dr. Halpenny provided an update on the work he has been involved in related to Bill 92. Specifically, have been working through questions raised by the Section of Plastic Surgery and the BC Dental Association. Following receipt of the questions from the Section of Plastic Surgery, Dr. Halpenny met with the head of the Section, Dr. Nancy Van Laeken to discuss the issues raised in her letter. Dr. Halpenny is now in the process of working through the nuances of each question and preparing a response to Dr. Van Laeken. Some examples of questions raised include specifics around performing gynecomastia and blepharoplasty, areolar tattooing, and performing public and private procedures under one anesthetic. Dr. Halpenny advised that staff are keeping record of inquiries and responses so that this can be closely monitored, and consistent messaging distributed.
- Dr. Halpenny provided an update on the extra billing compliance agreements that physicians were being asked to sign. Letters were distributed to all Health Authorities (HA) but the communication amongst HA's was not consistent and caused some angst. In follow up to this, there has been discussion with the Doctors of BC and a follow up letter will be sent by the Ministry to help clarify some of the issues surrounding the compliance agreements.
- Dr. Halpenny advised that he attended the most recent Patterns of Practice Committee meeting. There is a sense that the Committee could use re-energizing and clarity on their role, mandate and terms of reference. There was agreement that the addition of pharmaceutical prescribing should be added to the Mini-Profiles.
- Dr. Halpenny advised that he has sent a follow up email to Mitch Moneo regarding Pharmaceutical Services Division's contract with the College of Physicians and Surgeons of BC (CPSBC).
- Dr. Halpenny indicated he would be following up with Dr. Oetter regarding the misalignment of general internal medicine specialists on the CPSBC website and the Royal College of Physicians and Surgeons of Canada website.

#### **Strategic Plan Update**

- Updates have been made to the MSC Strategic Plan and the plan will continue to be updated on a monthly basis.

**2019 Meeting Dates**

- Revised 2019 meeting dates were circulated but Sarah Bryanton indicated these dates were still in flux and finalized dates would be circulated soon.

**2.0 Record of Decisions:**

- One revision to the September 19, 2018 Record of Decisions was requested under the Chair's Report section.
- A **motion** to accept the MSC Record of Decisions for September 19, 2018 was approved with the above noted change.

**3.0 Expenditure Report:**

- As discussed under the agenda review, no expenditure report was provided for the October 24 meeting.

**4.0 Legal Update/Extra Billing [CONFIDENTIAL and/or PRIVILEGED]:**

s.14

**Action:**  
**Sarah Bryanton**

s.14

**Action:**  
**Dr. Robert Halpenny**

**Overview of Settlements and Recoveries Signed by Chair**  
s.14

**Extra Billing**  
s.14

s.14

Action:  
Ross Alexander

Action:  
Ross Alexander

s.14

**Action:**  
**Ross Alexander**

**Action:**  
**Sarah Bryanton**

**Action:**  
**Dr. Robert Halpenny**

**5.0      Advisory Committee on Diagnostic Facilities (ACDF):**

**For Decision:**

*Request for Re-appointment*

- The ACDF brought forward a request for decision for the re-

appointment of two ACDF members – Kimberly McEwan (public member) and Dr. Allan Hoffman (Doctors of BC member).

- The MSC passed a **motion** approving the re-appointment of Kimberly McEwan and Dr. Allan Hoffman.

*Med Ray Imaging*

- The ACDF brought forward a request for decision that the MSC consider approving Med Ray Imaging to be included with the seven Community Imaging Clinic (CIC) facilities approved to provide and bill MSP for the provision of select non-cardiac doppler studies tests, under the same limited term as those other seven facilities.
- It was noted that Med Ray Imaging would have been approved in October 2017 with the other recommended facilities but at that time they did not meet the required BCIT Clinical Placement Agreement standard. That shortfall has since been rectified.
- The MSC passed a **motion** to approve Med Ray Imaging for the same four non-cardiac doppler fee codes previously approved for qualifying CIC's. The approval is limited to October 24, 2020 so that it aligns with the term of the seven other CIC facilities approved by the MSC in October 2017.

*ACDF Recommendation for Denial*

- s.13

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**For Information:**

- Response to questions concerning ACDF 2017/18 Annual Report.
- ACDF list of approvals from September 26<sup>th</sup> ACDF meeting.
- ACDF ultrasound moratorium exception request letters.

**6.0** s.14

s.14

## **7.0 Setting the Available Amount**

- Manjit Sidhu, Assistant Deputy Minister, Finance and Corporate Services, called in to the October 24 MSC meeting to give an overview on how the Available Amount is set.
- Dr. Halpenny advised that this question of how the available amount is set arose from the MSC strategic planning session earlier this year.
- Manjit advised that the Available Amount is estimating what the expenditure is going to be for the upcoming year. This is a common process among programs in the Ministry of Health.
- Manjit explained that the calculation starts with the base expenditure (previous years actual expenditure). Sometimes this may be a forecast of actuals because final calculations may not yet be available. The next step is to take in to account known factors (e.g. more business days in a year) and adjust accordingly. Adjustments are also made for any known compensation initiatives (e.g. .4% economic stability dividend government announced). Next, a projected growth amount is added (e.g. population increases and demographics). Any increases that may be part of the PMA are added (e.g. 0.5% general increase, specialist disparity funding, etc.) This year a notional adjustment was added for projected uptake of new physicians due to the primary care initiatives (\$25 million). The intent is to see how the primary care initiative rolls out, a further adjustment may be needed.
- A question was raised about the linkage of the Available Amount to the MSC and whether there is any opportunity for the MSC to give feedback on preliminary calculations? The short answer was no, that this is a Ministry calculation. A final question was asked about recourse that the MSC has if the Available Amount appears to be inadequate. Manjit explained that in previous years the Chair of the

MSC has written to the Ministry to ensure they are aware of any projected deficit and that that process should continue.

**8.0 Guidelines and Protocols Advisory Committee (GPAC):**

**Thyroid Function Testing Guideline**

- GPAC brought forward a request for decision for adoption of the new *Thyroid Function Testing in the Diagnosis and Monitoring of Thyroid Function Disorder (2018)* guideline.
- The MSC passed a **motion** to adopt the *Thyroid Function Testing in the Diagnosis and Monitoring of Thyroid Function Disorder (2018)* guideline.

**Requests for Retirement/Withdraw**

- GPAC brought forward a request for decision to withdraw two guidelines: *Oral Rehydration Therapy in Children (2010)* and *Febrile Seizures (2010)*.
- GPAC indicated that the information in these guidelines is available elsewhere for patients. Uptake of the guidelines have been quite low based on web trends reports showing how often the guidelines are accessed.
- The MSC passed a **motion** to withdraw the *Oral Rehydration Therapy in Children (2010)* and *Febrile Seizures (2010)* guidelines.

**9.0** s.14; s.15



s.14; s.15

**Action:**  
**Ross Alexander**

**Action:**  
**Ross Alexander**

**Action:**  
**Dr. Robert Halpenny**

*The October 24<sup>th</sup> meeting was adjourned at 3:03 pm.  
The next regular meeting of the Medical Services Commission is scheduled for  
Wednesday, December 5, 2018 and will be held in Victoria.*

**MEDICAL SERVICES COMMISSION (MSC)**  
**Record of Decisions**  
**December 5, 2018**

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**December 5, 2018**

**Members Present:** Dr. Robert Halpenny (*Chair*), Heather Davidson, Colin Kinsley, Dr. Matthew Chow, Dr. Bill Cavers, Ellen Godfrey, Kenneth Werker, Jillianne Code

**Member Regrets:** Dr. Sam Bugis

**Alternates Present:** Dr. Kathleen Ross

**Officials Present:** Ross Alexander - *MSC Legal Counsel/Ministry of Attorney General*  
(*for routine business*) Stephanie Power - *Executive Director, Ministry of Health*

**MSC Secretariat:** Sarah Bryanton

**Guests:** Eric Larsen, Geoff Homer (Ministry of Health) – **Item 3.0 Expenditure Report**  
Bonnie Gunderson, Ryan Taylor (Ministry of Health) – **Item 4.0 Procurement Update**  
Dr. Vern Davis, Marie Thelisma, Dr. Shiroy Dadachanji, Evan Machin (*Ministry of Health*) – **Item 5.0 Audit Reports**  
Woody Turnquist, Carol Pudwell (*Ministry of Health*) – **Item 6.0 Advisory Committee on Diagnostic Facilities by telephone**  
Jonathan Penner (*Ministry of Attorney General*) – **Item 7.0 Legal Update**  
Dr. Doug McTaggart, Katey Townsend (*Ministry of Health*) - **Item 8.0 – Guidelines and Protocols Advisory Committee by telephone**

**1.0 General/Chair's Report:**

- The December 5 MSC meeting was held in Victoria. Dr. Robert Halpenny, Chair, called the meeting to order at 9:00 a.m.
- The MSC reviewed the agenda that was circulated. Additional items were added under the legal section to discuss the s.14 s.14
- In the Chair's report, Dr. Halpenny advised that a letter had been received from Dr. Morton at Fraser Health Authority (FHA) regarding lack of communication related to a FHA obstetrician. The issue will be discussed at an upcoming Provincial Medical Services Executive Council (PMSEC) meeting which Dr. Halpenny has been invited to attend, and a separate meeting between the three parties (MSC, FHA and the College) may occur.

- Dr. Halpenny advised that he has been in discussion with Marie Ty regarding location codes. This work is ongoing.
- Dr. Halpenny advised that the MSC Annual Report is under review by Government Communications and Public Engagement.
- Dr. Halpenny updated the MSC on recent organizational changes within the Ministry of Health.
- Dr. Halpenny indicated that some follow up is needed on breast density and the measurement of breast density. This issue has arisen from the Minister's office and his office remains involved and interested in a resolution.
- Dr. Halpenny and Dr. Bill Cavers met to discuss issues with walk in clinics and the lack of continuity of care. Nancy South and Eric Larson have been working on gathering data on walk in clinics which will be presented with the expenditure report today. The issues surrounding walk in clinics will be helped by the introduction of location codes.
- Dr. Halpenny provided an update on his meeting with the Section of Plastic Surgery and highlighted one issue that arose around areolar tattooing. It was suggested by the Section that areolar tattooing cannot be done in hospitals, as they do not have the equipment and this work is typically done by a technician (work likely should not be done by a plastic surgeon). However, review of MSP data shows that practitioners have been claiming for this fee item. This highlighted an issue with the Payment Schedule that needs to be reviewed in more detail to determine if the existing fee item is appropriate.
- Dr. Halpenny advised that he also discussed virtual care with Dr. Cavers during their meeting. The MSC remains concerned that virtual care could become another entity that is misused or taken advantage of. This links back to the issue of location codes in that we need to know where practitioners are providing service.
- Dr. Halpenny advised that Greg Leake was unable to attend the December MSC meeting to provide an update on virtual care, but we will ask Corrie Barclay, ADM of Health Sector IM/IT Division to attend the January meeting for an overview of Government's IM/IT strategy and virtual care policy.

**Action:**  
**Dr. Robert Halpenny**

**Action:**  
**Sarah Bryanton**

- Dr. Halpenny updated the MSC on an issue that arose regarding 16 clinics who were found (by way of a research project) to be charging for afterhours phone calls with physicians. The one specific clinic that has been reviewed to date appears to also be doing a large volume of virtual care billings. Further follow up is required.
- Dr. Halpenny advised that he met with Woody Turnquist regarding the use of existing facilities policy.
- Dr. Halpenny advised that he met with Government staff involved in the Physician Master Agreement (PMA) negotiations and discussed areas of concern. One issue raised was with regards to the MSC Advisory Committees and the need for the PMA to reflect the Committees roles and responsibilities accurately.
- s.14

**Action:**  
**Dr. Robert Halpenny**

- Dr. Halpenny attended a recent Physician Services Committee (PSC) meeting. Collaborative Committee reporting is being coordinated by MNP LLP. Patient Reported Outcome Measures (PROMS) and Patient Reported Experience Measures (PREMS) was discussed at PSC and it was highlighted that different groups are developing their own PROMS And PREMS. The MSC agreed that a coordinated approach is needed for consistency.
- Dr. Halpenny advised that he is getting some traction on including physician prescribing habits in the mini profiles since connecting with the Therapeutics Initiative (TI). The TI is looking at creating a prescribing profile that would be mailed to physicians and posted online thereafter. This doesn't quite achieve the overall goal of including the prescribing habits in the mini profile which will require involvement from the Patterns of Practice Committee, but Dr. Halpenny will continue to follow up on this work.

- Dr. Halpenny sent a letter to Stephen Brown and Allan Seckel regarding PMA negotiations. Specific topics included walk in clinics, virtual care, location codes and prescribing habits.
- Dr. Halpenny gave an overview of his meeting with Stephen Brown that occurred on December 4. The focus was on the area of virtual care and location codes Dr. Halpenny received support to advance the work on location codes.

### **Strategic Plan Update**

- Updates have been made to the MSC Strategic Plan and further updates will be made following the meeting with Stephen Brown.

**Action:**  
**Dr. Robert Halpenny**

### **2019 Meeting Dates**

- Final 2019 meeting dates were circulated.

## **2.0 Record of Decisions:**

- s.22

- A **motion** to accept the MSC Record of Decisions for October 24, 2018 was approved with the above noted change.

## **3.0 Expenditure Report:**

- Eric Larson and Geoff Homer attended the December 5 MSC meeting to present the Expenditure Report. The following statistics were presented:
  - Medical fee-for-service (FFS) payments and Available Amount year end figured for 2017/18. 2017/18 ended in a \$9.7 million surplus.
  - Eric indicated that early calculations for the 2018/19 Available Amount are predicting a \$27-\$36 million deficit. The MSC discussed whether this was an appropriate time to notify the Ministry and the Doctors of BC of the projected deficit, and the decision was made to prepare a letter to these parties.
  - Budget variance model for medical FFS.

**Action:**  
**Sarah Bryanton**

- Medical FFS cost drivers. “Growth in Services per Patient” that was showing a negative amount for 2017/18 appears to have corrected itself and is now in the positive range.
  - Top ten specialties by percent growth of amount paid.
  - Top and bottom ten fee items.
  - The effect of a 1% increase in patients on MSP expenditure by age groups.
  - Follow up analysis on walk-in clinic physicians. Discussion occurred around the need for location codes to help improve the data.
- The following items was flagged for follow-up:
  - Data showing range of incomes across all specialties (normal income and the range of incomes).

**Action:**  
**Eric Larson**

#### **4.0 Procurement Update**

- Bonnie Gunderson, Executive Project Lead for the Health Insurance BC (HIBC) Procurement Project, attended the December 5 MSC meeting to provide an update on the project.
- Bonnie discussed the background of the project including an overview of what services HIBC provides today.
- Bonnie provided an overview of the project approach, discussed the key drivers and opportunities for change, and highlighted the goals of the proposed strategy.
- The options for business operations, technology management, and in-house services were discussed. These options included s.13 s.13
- Bonnie also gave an overview of the proposed strategy for transformation, workstreams for the next phase of the project, upcoming key milestone dates, and next steps.

#### **5.0 Audit and Inspection Committee (AIC):**

- Dr. Vern Davis, Marie Thelisma, Evan Machin and Dr. Shiroy Dadachanji attended the December 5 MSC meeting to present the s.14 and s.14 Audit Reports.

s.14

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Action:  
Evan Machin

**6.0      Advisory Committee on Diagnostic Facilities (ACDF):**

s.13

s.13

**Action:**  
**Dr. Robert Halpenny**

*Pulmonary Function (Spirometry) Facility Approval Policy*

- The ACDF brought forward a request for decision recommending the following:
  - 1) Remove restriction that limits privately-owned facilities to bill for (spirometry) data interpretation only;
  - 2) Remove the requirement for a specialist consultation prior to spirometry testing in privately owned facilities (allow approved facilities to provide spirometry testing on referral);
  - 3) For all current privately owned facilities approved to bill for spirometry data interpretation, immediately approve them to also bill for graphic interpretation (Flow Volume Loop);
  - 4) Adopt an 'approval upon application' spirometry policy for appropriately credentialed practitioners, operating in Diagnostic Accreditation Program certified facilities;
  - 5) Delegate authority for future spirometry approval to the Chair, Advisory Committee on Diagnostic Facilities;
  - 6) Direct ACDF to bring forward a plan to make recommendations concerning potential revision to current PF MSP billing categories.
- Woody Turnquist raised an issue that came up in the days leading up to the MSC meeting regarding a change to the Diagnostic Accreditation Program (DAP) pulmonary function testing credentialing standards. The MSC would like Woody to provide a

**Action:**  
**Woody Turnquist**



short summary of this issue that arose. The MSC would also like Woody to provide a final copy of the DAP standards when available.

- A **motion** to accept the six recommendations was approved.

*For Discussion* – s.13

s.13

**7.0 Legal Update/Extra Billing [CONFIDENTIAL and/or PRIVILEGED]:**

- s.14

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s.14

**Action:**  
**Ross Alexander**

**Action:**  
**Ross Alexander**

**Action:**  
**Ross Alexander**

**Action:**  
**Stephanie Power**  
**Sarah Bryanton**

s.14

*Extra Billing Correspondence*

s.14

**Action:**  
**Dr. Robert Halpenny**  
**Ross Alexander**

*Overview of Settlements Signed by the Chair*

- Ross provided an overview of one settlement agreement that was signed by the Chair between meetings.

#### **8.0 Guidelines and Protocols Advisory Committee (GPAC):**

- GPAC brought forward a request for decision for adoption of the new *C-Reactive and Erythrocyte Sedimentation Rate Testing (2018)* guideline.
- The MSC passed a **motion** to adopt the *C-Reactive and Erythrocyte Sedimentation Rate Testing (2018)* guideline.

#### **9.0 Telephone Prescription Renewal:**

- The MSC discussed the history of the issue of charging patients for prescription renewal by telephone. The current billing rules are silent on how long the physician is liable for prescription repeats after the initial office visit; this leads to a grey area in billing.
- The MSC discussed creation of a telephone prescription renewal fee item and agreed that if a recommendation is made to create a

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fee item it needs to be clear that this has to be in the context of an ongoing relationship/longitudinal care with the patient.

- Dr. Kathleen Ross and Dr. Bill Cavers will draft a letter for Dr. Halpenny to send to the General Practice Services Committee, the Specialist Services Committee and the Tariff Committee Chair.

**Action:**  
**Dr. Kathleen Ross**  
**Dr. Bill Cavers**

*The December 5<sup>th</sup> meeting was adjourned at 2:38 pm.*  
*The next regular meeting of the Medical Services Commission is scheduled for*  
*Wednesday, January 16, 2019 and will be held in Victoria.*