

President's Letter

June 13, 2018



Tracey Bridger
MD, FRCP(C)
President

Regulatory Change Affecting Insured Services

Dear Colleagues:

The Department of Health and Community Services plans to make a change to *Medical Care Insurance Insured Services Regulations* that would set a new direction for defining MCP-insured services. I want to advise the membership why the NLMA has opposed this regulatory change.

The background on this regulation arises in the area of cataract surgery and a separate non-insured service, but the principles that lie behind the government's position could affect other disciplines.

The *Medical Care Insurance Insured Services Regulations* identify which services are insured by MCP and which ones are not. In some cases the regulations specify that services will only be paid for by MCP if they occur in a hospital, but the focus remains on insurance coverage. The regulations are limited to defining when and where a service might be insured by MCP. In particular, the regulations do not prohibit access to non-insured services. This distinction is critical.

According to the CBC website, the government "has committed to a regulatory amendment on or before June 15, 2018, to clarify that the removal and replacement of a cataractous lens by any procedure is an MCP (insured) service and must be performed in a hospital." Rather than defining when and where a service is insured, the new regulation as reported in the media would require that all cataract surgeries conducted by whatever means must occur in a hospital. This approach to regulating insured services could mean that a separate non-insured service would be prohibited for people with cataracts even though people without cataracts are allowed to obtain the same non-insured service.

The NLMA supports the principles of the *Canada Health Act* and is opposed to user charges and extra billing for insured services. The NLMA also acknowledges government's right, as a way of controlling costs, to specify the locations where insured services may be offered. However, the government should not pass a new regulation that prohibits the offering of a non-insured service to part of the population.

The Government has other choices. It can develop good wait time information and improve access to insured services in hospitals. The government and the NLMA have also started a process that will invite proposals from all disciplines for MCP-insured services outside hospitals if they are more efficient, offer the same quality as or better quality than hospitals, and improve access for patients. This process holds considerable promise.

The College of Physicians and Surgeons of Newfoundland and Labrador is the regulator of medical practice and is the body that protects the public if doctors engage in unprofessional practices deserving of sanction. Specific guidance can be provided for physicians on how to advise patients regarding insured services, the avoidance inappropriate non-insured services, and the preservation of patient choice and informed consent.

Other disciplines could be affected if the government extends the principle embedded in its plan. New non-insured services could be prohibited if they offer similar benefits as insured services. The *Medical Care Insurance Insured Services Regulations* should not be amended in a way that extends beyond insurability of services. The NLMA has made its views known to the government, and we are awaiting further dialogue.

Sincerely,



Tracey Bridger, M.D., FRCP(C)
President



**Newfoundland &
Labrador Medical
Association**
164 MacDonald Dr.
St. John's, NL
A1A 4B3
(709) 726-7424
Or 1-800-563-2003
Fax: (709) 726-7525
www.nlma.nl.ca
president@nlma.nl.ca