HEALTH MINISTRY HAS TROUBLE MONITORING SPECIALISTS’ PAY: AUDITOR GENERAL

(TORONTO) The Ministry of Health and Long-Term Care offers specialist physicians financial incentives in order to meet a variety of policy and service objectives, but the Ministry has done little to determine if these incentives have yielded the expected benefits, Auditor General Jim McCarter says in his 2011 Annual Report.

“The number and complexity of the different types of payments and premiums available to specialists also make it hard for the Ministry to monitor the alternate funding contracts and related payments,” McCarter said today after the release of the Report. “For example, specialists who provide academic services at teaching hospitals can receive up to 14 different categories of payments.”

Prior to the 1990s, specialists were paid on a fee-for-service basis for diagnosing and treating patients. However, they received few other payments from the Ministry for services such as academic training of new physicians and research. In a bid to encourage specialists to, among other things, do more of this type of work, and to relocate in remote, under-serviced parts of the province, the Ministry introduced alternate funding arrangements for some specialists beginning in the 1990s.

In the 2009/10 fiscal year, the Ministry paid almost $1.1 billion to more than 9,000 specialist physicians under the alternate funding arrangements, or about 17% of the $6.3 billion paid to all 13,000 specialists in the province. These 2009/10 alternate payments to specialists were up more than 30% since 2006/07.

However, the Auditor found that the Ministry has done little formal analysis to determine whether alternate funding has improved patient access to specialists, or whether these funding arrangements are cost-effective.

Following are some of the Auditor’s other significant findings:

- The Ministry gave specialists funded under academic contracts a checklist to evaluate their own performance. However, it didn’t ask the specialists to return the evaluations, and it has done little other monitoring to determine whether the services paid for were actually being delivered.
- The Ministry paid $15,000 to each of 234 northern specialists who gave the Ministry permission to collect information on their income from all provincial government-funded sources.
- Payments to hospital emergency-room doctors increased 40% between the 2006/07 and 2009/10 fiscal years. However, the number of patient visits to emergency departments over the same period increased only 7%.

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