Rationale of Minister's Approval of Renewal of Designation for uninsured services under the Health Care Protection Act, February 4, 2005

Report to Albertans: Rationale of Minister's Approval of Renewal of Designation for Uninsured Services under the *Health Care Protection Act*.

Minister's Message:

The Alberta government is committed to public health care. To help our public system be responsive to Albertans' needs, we need to have an integrated, sustainable and accountable health system. We are open to innovation and alternative service delivery, but we will only approve private surgical facilities if they meet the requirements of Alberta's *Health Care Protection Act* (HCPA), demonstrate a benefit to the public, and have no adverse impact on our public health system or with our ability to comply with the *Canada Health Act*.

In September 2002, the Health Resource Centre-Calgary (HRC) was approved to provide specific uninsured orthopedic surgical services requiring an overnight stay. This designation expired January 31, 2005. HRC has submitted a proposal for review and additional information requested by the department.

Alberta Health and Wellness assessed the proposal based on their original proposal and against the requirements under the HCPA to ensure it met all legislated and regulatory requirements. I evaluated the information again, focusing on the impact on the public health system, the ability to comply with federal and provincial requirements and how the facility serves the public interest and provides a benefit to Albertans.

HRC's designation has been extended until March 31, 2005. This allows the department to discuss with HRC additional information requested. This allows individuals booked for surgery to have their surgery while the department continues discussions with HRC.

I am pleased to present my rationale for approving this proposal.

Iris Evans Minister of Health and Wellness

Proposal Summary:

HRC provides five orthopedic surgical procedures to patients who are uninsured under the *Canada Health Act*. These include Workers' Compensation Board (WCB) recipients and persons under federal government jurisdiction. Because the third party pays for these services, no Alberta government health dollars are spent on the facility, or towards the fees of the physicians. The breakdown of procedures by third party payors is:

<u>Alberta residents – Alberta Workers' Compensation Board (WCB)</u>

- 65 uncomplicated primary total hip replacements
- 65 uncomplicated primary total knee replacements
- 18 uncomplicated primary shoulder replacements
- 105 spinal laminectomies (not exceeding 2-disc spaces)
- 27 spinal fusions (not exceeding 2-disc spaces)
- Total: 280 procedures

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Alberta residents - Federal Government

- 1 uncomplicated primary total hip replacement
- 1 uncomplicated primary total knee replacement
- 2 spinal laminectomies (not exceeding 2-disc spaces)
- 1 spinal fusions (not exceeding 2-disc spaces)
- Total: 5 procedures

Residents of other provinces and territories - Workers' Compensation Board

- 33 uncomplicated primary total hip replacements
- 33uncomplicated primary total knee replacements
- 6 uncomplicated primary total shoulder replacements
- 35 spinal laminectomies (not exceeding 2-disc spaces)
- 9 spinal fusions (not exceeding 2-disc spaces)
- Total: 116 procedures

Residents of other provinces and territories – Federal Government

- 1 spinal laminectomy
- 1 spinal fusion
- Total: 2 procedures

Other provincial and territorial medicare plans

- 6 uncomplicated primary total hip replacements
- 6 uncomplicated primary total knee replacements
- 1 uncomplicated primary total shoulder replacement
- 2 spinal laminectomies (not exceeding 2-disc spaces)
- 2 spinal fusions (not exceeding 2-disc spaces)
- Total: 17 procedures

Out of Country Residents - Non-Canadian

- 8 uncomplicated primary total hip replacements
- 8 uncomplicated primary total knee replacements
- 2 uncomplicated primary total shoulder replacement
- 2 spinal laminectomies (not exceeding 2-disc spaces)
- 1 spinal fusions (not exceeding 2-disc spaces)
- Total: 21 procedures

The College of Physicians and Surgeons of Alberta granted HRC accreditation in October 2002. My staff has confirmed their accreditation status renewal.

The renewal of HRC designation identified minor changes from their original proposal. The changes are: an update to its corporate administration team, change of one board member, an increase in the number of spinal fusions (from 27 to 50), updated list of HRC managers and key nursing staff, copies of accreditation and insurance liability, additional details regarding their quality assurance program and out-of-province corporate expansion. My staff have confirmed that there are no conflict of interest issues with corporate administration and shareholders.

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Assessment **Summary:**

Alberta Health and Wellness conducted its due diligence in reviewing the proposal as per HCPA and the established Ministry Criteria for HCPA Agreements. In addition, four health authorities were asked to comment on whether or not there was an impact on their service delivery. They were in agreement that there is no negative impact on the public health system.

I reviewed the proposal taking into consideration the department's recommendations, the regional comments and adherence to provincial and federal legislation.

Compliance: Since September 28, 2000, all contracts for surgical services from private facilities must comply with the Health Care Protection Act (HCPA). I am satisfied that this proposal meets those requirements, provides a public benefit and shows no adverse impact on our public health system, or our ability to comply with the Canada Health Act.

> The College of Physicians and Surgeons of Alberta accredited HRC as a nonhospital surgical facility to provide the orthopedic surgeries on October 20, 2002, and they received re-accreditation in October 2004.

> The proposal has not had any negative impact on the region's public health force, and HRC has a sufficient number of qualified and appropriately trained staff to manage the volume of work.

Physicians who have proven qualifications and experience will provide services. Provisions are in place to monitor physicians' compliance with the Medical Professions Act.

Public Benefit:

One public benefit is increased operating and recovery room time in hospitals. Moving some uninsured patients out of hospitals frees up time and space in operating and recovery space and beds for other insured services. This is especially important in large centres like Calgary that provide complex and resource-intensive services to Albertans from across the province to meet specialized medical needs. An additional benefit is a faster turn around time between specialist consultation and surgery. Injured workers will get back to work sooner because they do not have take up room in the public system.

Because third parties pay for these services, no Alberta government public health funds will be spent on the patients, the facility, or the fees for physicians providing services at HRC.