



WORKPLACE SAFETY  
AND INSURANCE BOARD

Workplace Safety &  
Insurance Board

**WSIB**  
ONTARIO  
**CSPAAT**

Commission de la sécurité  
professionnelle et de l'assurance  
contre les accidents du travail

**Annual Report 1999**

The Workplace Safety and Insurance Board (WSIB) oversees Ontario's workplace safety education and training system. The WSIB also administers the province's no-fault workplace insurance for employers and their workers. As part of this system, the WSIB provides disability benefits, monitors the quality of health care, and assists in early and safe return to work for workers who are injured on the job or contract an occupational disease. The WSIB is funded entirely by employer premiums – it receives no public funding from the Ontario government.

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## CHAIR'S MESSAGE



Looking back, this past year was filled with great successes and greater challenges. It is also important to look at what we have achieved over the past four years and how we have laid a solid foundation for yet another five years of significant improvements in many areas throughout the WSIB.

Financially, the unfunded liability has been reduced from \$10.9 billion in 1996 to just over \$6 billion in 1999. Premium rates have fallen by 24 per cent since 1995 to an average rate in 1999 of \$2.42. Moreover, we are approaching funding ratio levels that have not been seen since the early 1980s. It is clear that we have achieved and will continue to maintain a stable, responsible fiscal environment. This is a key element in promoting Ontario's competitiveness in the global community.

Without question, our new service delivery model – which includes account managers, customer service representatives, consolidated adjudicators and nurse case managers – has improved service levels.

However, we are still grappling with two formidable barriers in customer service: improving the efficiency

and effectiveness of our processes, and the frustrating lack of access to the information that we need to do our job.

If we are to provide consistent outstanding day-to-day service for our customers, we need to overcome these barriers. That's why the Board of Directors has approved an ambitious program for the renewal of our business processes and our information technology.



As with any large scale transformation there is a certain amount of risk. The Board of Directors recognizes these risks and has ensured that appropriate checks and balances are in place throughout the various stages of the project.

In 1999 we continued our commitment to dealing with the challenges around attitudes and behaviours in workplaces toward safety and prevention. We launched two major public information and media advertising campaigns on safety and accident prevention including one that dealt specifically with young workers and summer jobs.

Results of these campaigns have been extremely positive – clearly demonstrating an increased awareness of the importance of health and safety in the workplace.

All of us must recognize our responsibility to improve the safeness of our workplaces and educate our youth. Those employing youth have a particular responsibility to ensure that these individuals receive the proper training. We will continue to inform young people that it is okay to ask questions and refuse unsafe work.

With the prevention focus, Ontario workplaces are becoming safer and more productive – everybody wins. We must continue to build on these winning strategies.

As I look at our challenges, I believe that occupational disease requires more attention as we come to better understand our roles and responsibilities as employers, workers and the WSIB. In 1999 we provided financial support to the Sarnia workers' clinic to investigate diseases in the local area.

We are committed to working through these serious and often disturbing issues and, as such, have a priority to establish a more effective Occupational Disease Response Strategy. As well, research into occupational disease will be an essential and important part of our research program.

I would like to thank the Board of Directors for their ongoing commitment and stewardship. I would particularly like to acknowledge the service of our Vice Chair, Eileen Mercier.

On behalf of the Board of Directors, I would also like to thank and acknowledge the substantial effort of our staff under the leadership of President and CEO David Williams and the Senior Management Team. Change is challenging but we are having success because we are united in purpose. We are united in our desire to reduce accidents and suffering while providing the right services at the right time to our customers and injured workers.

“ We believe that all workplace accidents and illnesses are preventable. Our role is to help employers and workers make their workplaces injury and illness free. ”

## PRESIDENT AND CEO'S REPORT



Change, transition – these are familiar words to the WSIB and 1999 was no exception. We are continuing to work on defining what initiatives the organization needs to have in order to lead in prevention, health and safety; to better care for injured workers and to promptly and efficiently serve employers. This work has been ongoing throughout the year and is leading us into the new century.

Having said that, in order to support and move these initiatives forward, I believe that we also need to take care of the people inside the organization. Every single person in the WSIB must believe that he or she makes a difference in the quality and service that we provide to our customers and clients – whether they deal directly or indirectly with the customer or client. To help shape the change ahead of us and to ensure our employees commitment to that change, I wanted to listen and speak with each of our 4,300 employees and reinforce this message. Consequently, in 1999, my team and I traveled across the province and spoke to employees in small groups about these issues and heard how they felt about them.

Last year, we asked our employees to complete a voluntary survey that measured job satisfaction and management practices. The survey results established a number of baselines. This survey will be continued on a regular basis to confirm or highlight issues that need to be addressed or resolved.

The past year was a landmark for labour relations between the WSIB and its unionized employees. The WSIB and CUPE Local 1750, which represents about 75 per cent of our staff, reached a three-year agreement through a collaborative and cooperative effort at the bargaining table.

As a result of taking the above steps, I believe we will have the right ingredients to show that outstanding customer and client relationships begin with excellent employee relations.

At a corporate level, our 5-year strategic plan continues to unfold. Towards the end of 1999, five initiatives were identified that will move us forward to the corporate vision of eliminating all workplace injuries and illnesses.

One of these initiatives is high performance training for people and teams. This initiative is all about giving people the skills that will best help them to perform individually and in teams. Our commitment is that by the end of 2000, our front-line workers and the majority of all employees of the WSIB will have undergone this progressive training.

The Health Care Model is an initiative that focuses on five program areas: clinical care; purchase and payment of health services; information management and technology; strategic and operational relationships with health professionals; and quality and success measurements. The focus of treatment for injured and ill workers will be on outcomes rather than the process itself. This is leading to new instructive, co-operative and collaborative relationships between the WSIB and the health care providers.

Occupational disease is a critical health and safety issue that is gaining more awareness in Ontario. Consequently, an Occupational Disease Response Strategy will be established which will focus more closely on workers and their families who are affected by occupational diseases and the associated problems.

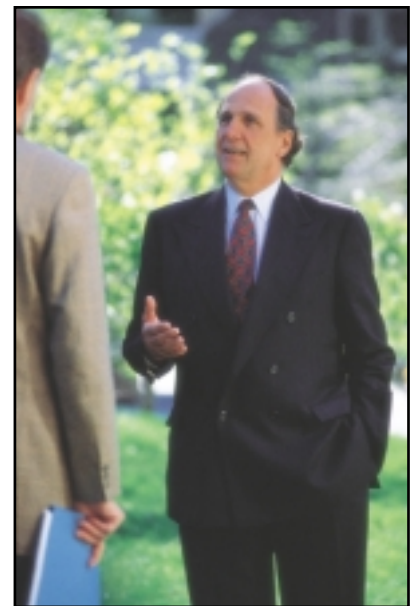
We've embarked on a new initiative to improve how we do business. This initiative, identified as The Agility Program, will look at changing our business processes and information technology. It will integrate all of our systems to better meet the needs of our clients and customers and help us to become a more efficient and effective organization.

All of our changes are centred on a vision – the elimination of all workplace injuries and illnesses. I am pleased with the continued progress of bringing all stakeholder groups, SWAs in particular, together to continue developing our coordinated approach to creating safe workplaces.

As part of our commitment to listen to our customers/clients, we initiated a major Angus Reid study in 1999 involving injured workers and employers. The results will serve as the baseline for future surveys on the needs and views of our stakeholders. By listening, we can improve our relationships with workers, injured workers and employers.

As we move through 2000, the initiatives we have started will evolve into concrete solutions that will help us to better serve workers, injured workers and employers in Ontario's industry sectors and small businesses. The reorganization of our business processes and information systems will allow us to access and use that knowledge and expertise in meaningful ways. Our future will be as a trustee of knowledge and a centre of expertise that will benefit and contribute significantly to the social and economic well-being of Ontario.

I would like to thank the employees and management of the WSIB for their dedication, for caring, and for getting the job done in these times of change and transition.



# BOARD OF DIRECTORS



Left to right:  
David Williams, Chris Griffin, John Gardner, Eileen Mercier, Glen Wright, Patrick Dillon

## David Williams

Mr. Williams is President and CEO of the WSIB and a member of the Board of Directors. He is actively involved in many industry, government and community initiatives. These include being Director of the Grocery Industry Foundation... Together (GIFT), Chair of the Centre for Studies of Children at Risk, and Chair of the Learning Partnership. He served as Chief Financial Officer of Loblaw's Company, and then as President of National Grocers.

## Chris Griffin

Mr. Griffin has been a member of the Board of Directors of the WSIB for two years. His exceptional community involvement and firefighting skills were recognized in 1983 when he was selected 'Firefighter of the Year' by the Oshawa Kiwanis Club. He is a Qualified Director of Training and has participated in the training of new firefighters since 1991. Mr. Griffin was promoted to Captain of the Oshawa Fire Department in 1997.

## John Gardner

Mr. Gardner has been a member of the Board of Directors of the WSIB for three years. He served as President of Sun Life Assurance Company for 10 years before retiring in 1996. He is a Fellow of the Society of Actuaries and the Canadian Institute of Actuaries, and brings a solid understanding of key financial principles of the insurance industry to the WSIB's Board of Directors. He is currently Chair of the Field's Institute for Research in Mathematical Sciences.

## Eileen Mercier

Mrs. Mercier, Vice Chair, has been a member of the Board of Directors of the WSIB for four years. She is President of Finvoy Management Inc., a management consulting firm specializing in financial strategy, restructuring/turnaround and shareholder relations issues. Mrs. Mercier has 30 years of senior financial, strategic and change management experience. She has also served as Chair of Sir Wilfrid Laurier University and is currently a member of the Board of Governors of York University and the Board of Trustees of the University Health Network, and member of the board of directors of several public companies.

## Glen Wright

Mr. Wright has served as Chair of the Board of Directors for four years. He has more than two decades of experience in the health and disability insurance field and is also Chair of the consulting firm, Wright, Mogg and Associates Ltd. The firm advises clients on pensions, actuarial matters, employee benefits, group disability and health insurance, and human resources management. In addition, Mr. Wright serves as a Director of Spicer Corporation, and Gore Mutual Insurance, a property and casualty insurance company.

## Patrick Dillon

Mr. Dillon has been a member of the WSIB Board of Directors for four years. He is Business Manager of the Provincial Building and Construction Trades Council of Ontario, an umbrella organization representing local unions, bargaining councils and local building trades councils in the construction industry throughout Ontario. He is also President of the Ontario Construction Secretariat.



# 1999 THE YEAR IN REVIEW



A vision of the future: Health and Safety Way at the 1999 IAPA Conference

IT WAS...

...an incredibly busy year. Along with the corporate changes and transformation, staff and management continued to work on the WSIB strategic priorities: prevention, customer service and financial responsibility.

# PREVENTION/HEALTH & SAFETY

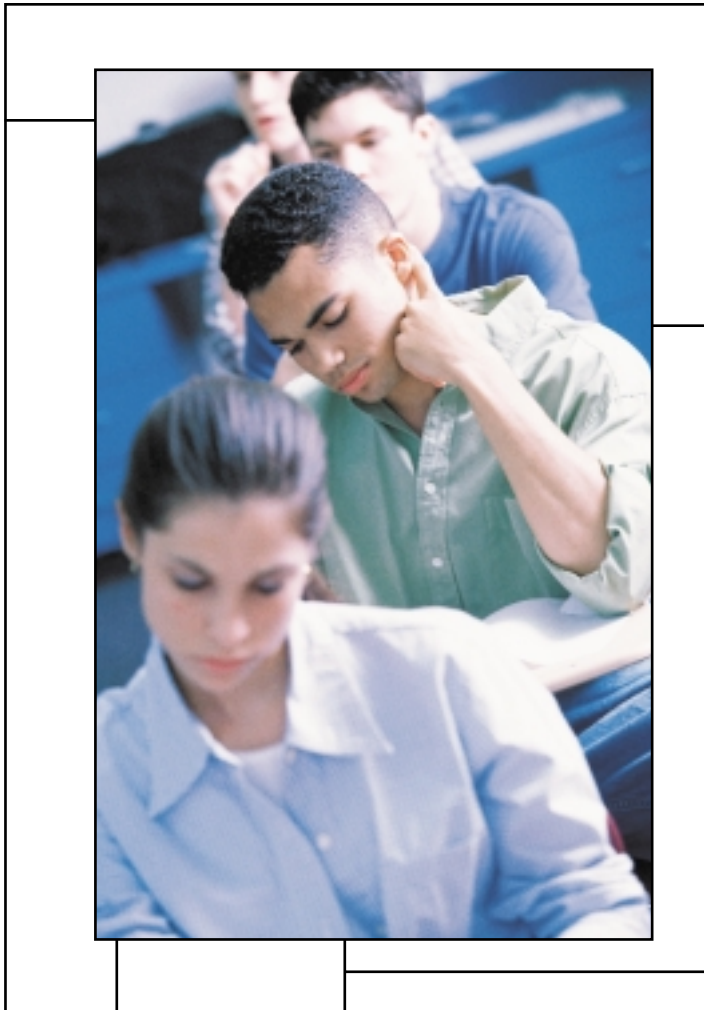


*With a vision of eliminating all workplace injuries and illnesses, the WSIB participated in an ambitious plan to promote health and safety and prevention awareness and make every person in Ontario aware that every accident and illness is a prevention opportunity.*

## **A dual strategy**

In 1999 the WSIB's prevention initiatives were influenced by a dual strategy. On the one hand we aimed our messages at the province's workplaces; on the other we pushed ahead with the integration of prevention into the WSIB corporate culture. As a result, 1999 gave rise to several noteworthy accomplishments:

- Prevention messages reached more Ontarians than ever through a variety of media.
- Some 120 teams, made up of WSIB Operations staff, received prevention integration training in 1999. By the year's end, the flow of health and safety initiatives was beginning to be from, instead of to, these areas.
- New levels of cooperation and partnership were reached in the health and safety system – in no small part due to WSIB leadership – allowing the health and safety system to confront the dramatic economic changes occurring in the province.



## **Prevention: marketing ideas**

In 1999 the WSIB unveiled two social marketing campaigns. The first was directed at youth – asking the question “How Safe is Your Job?”. It focused on an injured young worker, Matt Sagan.

The campaign, based on a poster photograph of Matt, used newspapers, various poster venues, and radio commercials to convey its message. An evaluation of the campaign showed a strong recollection of the poster.

The Youth campaign was a precursor to a major campaign carried out on television, radio and newspapers in November. The second campaign was designed to be seen by every television-viewing Ontarian at least 13 times. This campaign was the largest health and safety advertising venture since the mid-80s. Its emphasis on the relationship between



work and home, on how work-related injury and disease is not just a workplace issue, but also a community and family issue, broke new ground. Again, this campaign received a highly favourable evaluation with a significantly higher-than-expected recall factor – a good indicator that the message is starting to get through.

In 1999, the WSIB partnered with its local union, CUPE Local 1750, the Ontario Chamber of Commerce, and the Ontario Network of Injured Worker Groups to mark the Day of Mourning, to commemorate workers killed on the job. A joint advertising poster ran in all Ontario daily newspapers on April 28th.

In May, the WSIB, in cooperation with the Globe and Mail, produced a six-page health and safety insert in the paper to coincide with North American Occupational Safety and Health week. Not only did the supplement contain a wealth of information for readers about health and safety and prevention, it was also the first such initiative for the health and safety system and the WSIB.

Equally impressive as an example of partnering was the Health & Safety Way. For the first time, the public-sector health and safety system – some 19 organizations – went on display in a unified exhibit at the 1999 IAPA Health and Safety Conference & Trade Show.

By the end of 1999, Sector Interagency Groups (SIGs) comprising the WSIB, the health and safety associations, and the Ministry of Labour, had taken root. The main goals of the SIGs are cooperation and production of relevant products and services. The SIGs link organizations in the system by industry sector. Each SIG project begins with analysis of the particular needs of a given sector. The end products reflect that analysis.

Take construction, for example. New and small firms are recognized as the new frontier in the achievement of health and safety awareness in the construction sector, bringing a combined expertise to bear on the problem. Three projects were initiated:



- an injury-reduction project to reduce lost-time injuries by 50 per cent among 260 'priority' firms;
- an information package, developed for new and small firms; and
- a questionnaire to gather information on workplace fatalities as a means to analyze fatalities and determine recommendations to prevent further fatalities.

There is also a need to transcend industry sectors – to develop tools for universal use. A real breakthrough in this category is OSH for Everyone. Developed in partnership with the Canadian Centre for Occupational Health and Safety (CCOHS), the health and safety associations, and the Ministry of Labour (MoL), this user-friendly CD-ROM has over 200 health and safety documents on items ranging from the Core Certification Manual to the Occupational Health and Safety Act to fact sheets and much more.



As part of the WSIB's objective to create a flow of prevention information through its front-line service delivery teams and out into workplaces, a Prevention Intranet was developed. This provides a continuously updated flow of online information that is available to all staff at the WSIB. Its main targets are front-line staff who meet employers and workers day in and day out.

Gathering best practices is another ongoing project – capturing the best practices of the top health and safety performers so that they can be used as models.

The trick is to get these practices on paper. That's the aim of a Best Practices Workbook developed in 1999. It asks the questions that elicit the details of a best practice. A database making these best practices widely and easily available is being planned.

Complementing the Best Practices initiative is Benchmarking, the process of finding the particular health and safety best practice (for example, accident investigation) and making the practice the benchmark for others to strive for and, hopefully, exceed. A five-step benchmarking process was developed in 1999. It has now been tested and is ready for use.

### **Programs, old and new**

Prevention programs encompass awareness-raising, training, and incentives. They include programs old and new.

Most noteworthy is the Young Worker Awareness Program (YWAP). YWAP was promoted in 1999 via a direct mail campaign to high school principals, librarians and guidance counselors. The mailer went to 900 high schools across the province. WSIB also funded a one-year pilot program in Peterborough aimed at encouraging local businesses to give preference to young people who have had health and safety training. Called the Passport to Health and Safety Program, it gives students who have taken YWAP and certain training courses a 'passport' they can show when applying for jobs.

The WSIB partnered with the MoL and the Ministry of Education in 1999 to bring about a historically important development: the introduction of occupational health and safety into the high school curriculum. This subject will be offered from Grades 9 - 12.

The Safe Workplaces, Sound Business program raises health and safety awareness and commitment among CEOs through mentoring. Those who are champions – heads of companies with exemplary health and safety records – mentor other CEOs. In 1999 the WSIB sponsored a series of activities including a round table meeting, piloting of mentor-protégé relationships, and planning for future Champion events. The WSIB is already planning the next phase of this program.





## Incentives

1999 was a year of innovation and development for WSIB incentive programs geared to enhanced prevention practice. Of particular note is the Safety Groups initiative. A Safety Group can be any group of more than 40 firms that come together to act as one firm for the purpose of arriving at a group premium. A trial implementation for eight to ten Safety Groups was set up in various sectors for the year 2000.

The Safe Communities Incentive Program (SCIP), a groundbreaking initiative for small businesses, paid out \$648,000 to 386 firms in 1999. Four new communities were added to the SCIP roster in 1999, for a total of 14. As well, established incentive programs were slated for review with the result being a consultation on the New Experimental Experience Rating (NEER) program as well as on the Workwell Program. The Merit Adjusted Premium (MAP) program also received attention. It now provides firms whose premiums exceed \$25,000 the option of leaving MAP for NEER.

1999 was an important year for Ontario's health and safety system – a system in which the WSIB plays a leading role.

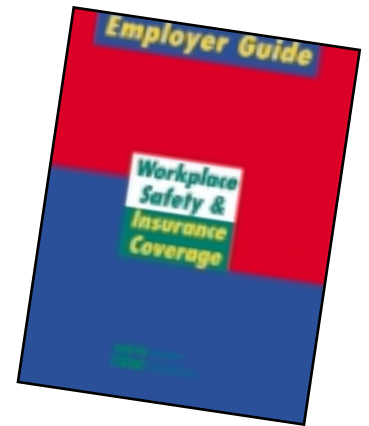
The WSIB oversees a significant part of the system, the 14 health and safety associations. Prevention Dynamics was introduced to coordinate and centralize services to achieve efficiencies and greater effectiveness. Partnerships were magnified and solidified and, by year's end, the system and its work were more discernible than ever before. For the second consecutive year, the workforce increased substantially while the accident frequency rate, that is, the number of reported injuries per worker, decreased. To maintain that trend, we must continue to build awareness of and commitment to prevention.

## Research

Research provides the foundation for effective decision making – it allows us to make informed decisions that improve our ability to prevent, compensate and treat workplace injuries and illness including occupational diseases, and to help injured workers achieve early, safe return to work.

Through the WSIB's Research Advisory Council's 1999 grant program, Solutions for Workplace Change, the WSIB awarded \$3 million in grant support to 20 external research projects. These peer-reviewed projects cover a broad range of topics pertinent to the WSIB's mandate. This is in addition to the \$4.5 million provided to the Institute for Work and Health that carries out world class research on the prevention and reduction of workplace disability from musculo-skeletal injuries.

In November 1999, 300 people – stakeholders and researchers – participated in the Research Advisory Council's conference to help focus priorities for research funding in the year 2000. A second Request for Proposals was announced later that same month and successful proposals will be announced in mid-2000.



# CUSTOMER SERVICE



The WSIB is focused on being responsive to the requirements of its stakeholders. This involves the delivery of quality service through a process of cooperation, consultation and collaboration. In the early part of 1999, the WSIB commissioned a survey to benchmark its services with its clients and customers. The results show that the WSIB is seen to be moving in the right direction, but it also demonstrated there is room to improve on overall satisfaction. These results will serve as benchmarks for future surveys and assist the WSIB in improving the services it provides.

## Corporate Initiatives

To transform the WSIB into an organization that is responsive to the needs of Ontario workers and injured workers, and the 180,000 employers covered by the WSIB, ground work was laid for the implementation of five corporate initiatives for the year 2000. These initiatives apply to all WSIB priorities.

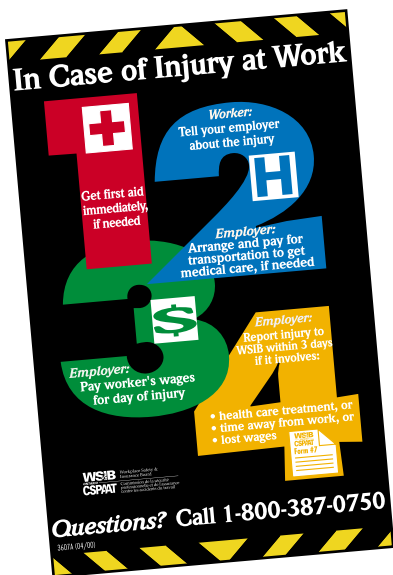
The initiatives are high performance training for staff, refining the service delivery strategy, building a new health care model, implementing an occupational disease response strategy and the re-organization of business processes and information systems.

## High Performance Training

The high performance training of front-line staff intensified in 1999. This training promotes accountability and allows each team to take ownership of its business activities.

## Service Delivery Strategy

The WSIB also continued work on its restructured service delivery strategy. The new service delivery teams formed within the Industry Sectors and Small Business units offer workers, injured workers, employers, and health care providers one-stop shopping. Team members are able to provide a consistent understanding and a more streamlined decision-making process. The teams are learning to become more flexible and confident when looking for the best solution for all concerned. In other words, they are thinking outside the box.



Our staff is developing a better sense of workers', injured workers' and employers' requirements – permitting them to develop best practices, to deliver quality service, achieve early and safe return to work, and positive outcomes for accident prevention and disability management. This includes a more flexible approach to returning injured workers to suitable employment or business. Instead of determining whether an injured worker is capable of a particular job, the teams take a more creative approach, looking at skill sets and working with both employers and workers to reach the best outcome. The focus on this will continue through 2000 and beyond.

### **Health Care Initiative**

In 1999, we launched an ambitious initiative: the Health Care Model. This model will fundamentally redesign the way we purchase health care services for workers. Health care is an important component in providing service to injured and ill workers and the WSIB wants to maximize the quality of the health care

provided. The proposed Health Care Model is based on three principles:

- Quality care must be a priority in purchasing health care services;
- Health care provided to workers should reflect clinical evidence and follow best practice guidelines, as appropriate and available; and
- Provider fees must be commensurate with health outcomes achieved.

A health care model discussion paper was developed, outlining an approach to all aspects of purchasing health services. In addition to being posted on the WSIB Web site, the discussion paper was distributed to health professional associations and regulatory colleges, as well as to employer and worker representative organizations.

### **Addressing Occupational Disease**

The Occupational Disease Response Strategy will focus resources where an occupational disease affects a community, a company, or workers and their families. This will allow the WSIB to provide timely and fair compensation to workers and their families as well as facilitating community-based support through outreach activities.

Beginning in 1998 and continuing through 1999, the WSIB has worked diligently with workers, employers, labour unions and community representatives in Sarnia where there are issues concerning exposure to asbestos and fibreglass. This is the first major initiative in our Occupational Disease Response Strategy.

### **The Agile Organization**

The final initiative is the major enabler to drive the other four. Called The Agility Program, it is a five-year program to redesign all our major business processes and technological systems. This program is essential because our business processes and technology systems at the WSIB are outdated and not fully integrated.

The Discovery phase of this program, developed in 1999, assessed our current business processes and systems, and identified that the market is likely to be able to respond to the needs of the WSIB. Our objective is to enable the transformation in health and safety, financial security and customer service and create the tools for success in these areas.

“ Joanne Piccinn, Department of Rehabilitation, Orthopaedic & Arthritic Hospital, has definitely noticed a change. We are seeing that the lines of communication between us, as providers, and the WSIB nurse case managers, in particular, are open and a wonderful dialogue to have. “The other part that is interesting to us is that we are seeing injured workers come to us with much more information. They are much more settled and informed around why it is they are coming to see us – and that is a very positive thing. In the past, there often was quite a bit of tension coming to a centre like this. ”



[www.wsib.on.ca](http://www.wsib.on.ca)

## FINANCIAL RESPONSIBILITY



Workers, injured workers and employers deserve a Workplace Safety and Insurance Board that is well managed and financially sound and stable. We will continue to protect the financial viability of the system for the workers, injured workers and employers of Ontario.

A healthy economy and sound financial practices contributed to the continuation of successful results for 1999. The unfunded liability, the difference between the WSIB's total liability as it exists today and the value of its assets, decreased to \$6.4 billion. That is remarkable considering the unfunded liability stood at \$10.4 billion in 1996. In 1999, at the same time as decreasing the unfunded liability, we also

lowered the average premium rate by 6.6 per cent to \$2.42. This is the third consecutive decrease in the average premium rate and compares to a rate of \$3.00 for 1996 – a reduction of 19.3 per cent.

The WSIB Insurance Fund provides a reserve to fund benefit payments to injured workers. This broadly diversified fund produced a 12.8 per cent return on market value in 1999, a fifth consecutive year of double-digit returns. There was also a continuation of a good performance in the value of the WSIB's investments, which rose from \$8.6 billion in 1998 to \$9.6 billion.

Each business unit at the WSIB is committed to playing its role in keeping the system financially accountable. One in particular is designed specifically to address the issue of non-compliance and fraud. The Special Investigations Branch (SIB) works to ensure the integrity and credibility of the system as well as improving compliance by everyone who is part of the system: employers, workers, providers and WSIB staff. In 1999, the SIB received 2,853 calls to its anonymous 24-hour Action Line and laid a total of 642 charges.

Throughout 1999, WSIB staff, management and Board of Directors worked diligently addressing complex issues, all the while focused on a vision of eliminating injury and illness.

For 2000 and beyond, our future is about continuing to align our work with the needs of workers, injured workers, employers, and health providers.



# PUBLIC SECTOR SALARY DISCLOSURE 99

Name	Position	Taxable Earnings	Benefits	Total Earnings
Abrams, Brenda E.	Legal Counsel 2	\$101,611	\$178	\$101,789
Achar, Ramach Andra	Medical Consultant	\$107,511	\$99	\$107,610
Adamo, Valerie	VP Info Svcs & CIO	\$152,769	\$181	\$152,950
Allingham, R.	Dir Research & Evaluation	\$103,412	\$184	\$103,596
Anstey, Calvin	Dir Transportation Sctr	\$100,603	\$181	\$100,784
Argue, R J	Dir Application Dev	\$110,720	\$162	\$110,882
Aronstam, M.	Medical Consultant	\$112,545	\$169	\$112,714
Arvaisis, J.	Medical Consultant	\$116,750	\$169	\$116,919
Belanger, Adele Marie	Legal Counsel 2	\$104,995	\$187	\$105,182
Bell, Susan	Dir CCP	\$107,282	\$159	\$107,441
Bishop, M.	Medical Consultant	\$113,857	\$169	\$114,026
Boga, Amirali	Medical Consultant	\$111,245	\$158	\$111,403
Bowman, Leslie	Medical Consultant	\$122,582	\$174	\$122,756
Brown, Elizabeth	Legal Counsel 2	\$104,915	\$187	\$105,102
Burton, Neil	Dir Client Svcs Div.	\$110,106	\$186	\$110,292
Cantlie, George	Medical Consultant	\$122,700	\$212	\$122,912
Chain, Marybelle	Medical Consultant	\$113,351	\$196	\$113,547
Chan, T.	VP Finance & CFO	\$169,662	\$186	\$169,848
Colaco, C	Medical Consultant	\$122,582	\$174	\$122,756
Coutinho, Jude	Assoc Dir/Physician	\$108,031	\$190	\$108,221
Cude, Beverley	Dir Technology Svcs	\$113,653	\$186	\$113,839
David, Lawrence	Medical Consultant	\$111,634	\$193	\$111,827
De Demeter, Dorrit	Medical Consultant	\$122,582	\$174	\$122,756
De Domenico, Ivan J.	Medical Consultant	\$114,489	\$162	\$114,651
Difranco, Joe	Sr Spec Technology Svcs	\$100,725	\$146	\$100,871
Dioso, Rosario	Project Manager csd	\$104,838	\$151	\$104,989
Djan, P. A.	Medical Consultant	\$105,658	\$188	\$105,846
Douglas, Colin J.	Legal Counsel 2	\$104,930	\$187	\$105,117
Douglas, Richard Alexander	Dir Employee Relations	\$120,396	\$201	\$120,597
Dsouza, I.	Medical Consultant	\$108,304	\$166	\$108,470
Dudley, John	Assoc Dir/Physician	\$120,160	\$137	\$120,297
Flynn, Miriam E.	Legal Counsel 2	\$103,099	\$181	\$103,280
Frame, J. D.	Legal Counsel 2	\$104,758	\$163	\$104,921
Garg, S. K.	Medical Consultant	\$112,438	\$199	\$112,637
Geary, Judy	GM CCP & Spec Claims Svcs	\$144,122	\$292	\$144,414
Germansky, Martin	Medical Consultant	\$113,682	\$199	\$113,881
Gibbs, Henry	VP Investments	\$228,613	\$196	\$228,809
Gregoire, J.	Chief Actuary	\$181,599	\$245	\$181,844
Hadjiski, Anna	Medical Consultant	\$122,582	\$202	\$122,784
Hall, Nick M.	Dir Automotive Sctr	\$101,186	\$181	\$101,367
Hawkins, Adam J.	Dir Realty Invest	\$108,740	\$158	\$108,898
Heckadon, Robert	Assoc Dir/Physician	\$138,961	\$0	\$138,961
Hickman, Robert	Medical Consultant	\$109,871	\$193	\$110,064
Ho Kim, Thu Lan	Medical Consultant	\$106,806	\$189	\$106,995
Ho, Michael	Medical Consultant	\$122,582	\$174	\$122,756
Holyoke, Paul	General Counsel	\$170,173	\$242	\$170,415
Horseman, Brock C.	Sr VP Operations	\$257,238	\$252	\$257,490
Hubbard, Dean James	Dir IS Support Svcs	\$101,594	\$175	\$101,769
Jolley, Linda	VP Policy & Research	\$165,679	\$234	\$165,913
Jones, Derek	Medical Consultant	\$105,280	\$189	\$105,469
Kanalec, Andrew D.	Assoc Dir/Physician	\$135,217	\$145	\$135,362
Karr, A. Wm.	Medical Consultant	\$113,750	\$169	\$113,919
Kelly, J. Brian	Assoc Dir/Physician	\$140,540	\$145	\$140,685
Kosmidis, E.	Legal Counsel 2	\$104,995	\$187	\$105,182

Name	Position	Taxable Earnings	Benefits	Total Earnings
Kwong, P Y	Project Manager CSD	\$120,302	\$159	\$120,461
Lamanna, Pat	Dir Small Business	\$101,948	\$161	\$102,109
Lamoureux, Linda	Dir Special Invest'n	\$128,167	\$218	\$128,385
Leshchshyn, D.	Dir Ind Sctr Construction	\$102,571	\$183	\$102,754
Lewis, O	Dir Application Dev.	\$108,508	\$186	\$108,694
Londry, D.	Dir Corp Information Ctr.	\$117,086	\$162	\$117,248
Lortie-Monette, Francine	Medical Consultant	\$111,261	\$96	\$111,357
Lovelock, Ronald	Dir Prevention Svcs	\$102,204	\$190	\$102,394
Luck, M	Dir Svcs Sctr	\$102,949	\$288	\$103,237
Macarthur, A.	Medical Consultant	\$122,582	\$212	\$122,794
Macri, Joseph	Project Manager CSD	\$102,792	\$157	\$102,949
Maehle, Waldemar	Medical Consultant	\$105,768	\$188	\$105,956
Malayil, Ammini	Medical Consultant	\$122,582	\$174	\$122,756
Mastrilli, Arcangelo	Medical Consultant	\$112,438	\$169	\$112,607
McAdam, Roberta	Dir Revenue Audit Svcs.	\$101,766	\$242	\$102,008
McDonald, Patrick J.	Medical Consultant	\$106,529	\$189	\$106,718
McKenna-Boot, Patricia	Medical Consultant	\$105,589	\$188	\$105,777
McMurtrie, Robert	Dir Accounting	\$109,429	\$155	\$109,584
Mitchell, William	Dir Application Dev.	\$126,076	\$162	\$126,238
Morden, Donald Lawrence	VP Human Resources	\$115,269	\$153	\$115,422
Mould, Roy	VP Prevention	\$144,666	\$213	\$144,879
Nur, N S	Sr Spec Database	\$112,806	\$146	\$112,952
Painvin, Catherine	Dir Clinical Resources	\$141,089	\$185	\$141,274
Prichett, B.	Medical Consultant	\$113,750	\$169	\$113,919
Roy, Marie	Medical Consultant	\$118,637	\$172	\$118,809
Schofield, Michel	Phys Coord/Spec Clinics	\$140,540	\$236	\$140,776
Seville, Michelle	Project Manager CSD	\$117,499	\$149	\$117,648
Shapiro, G.	Medical Consultant	\$113,682	\$169	\$113,851
Sherwin, Linda	Medical Consultant	\$105,669	\$164	\$105,833
Simmors, Wayne B.	Dir Bonds & Money Mkt	\$171,402	\$181	\$171,583
Siu, Christina	Project Manager CSD	\$102,915	\$153	\$103,068
Slinger, J T	Dir Appeals	\$113,054	\$192	\$113,246
Sooknanan, A.	Project Manager CSD	\$102,077	\$151	\$102,228
Stasila, Dave	Board Auditor	\$119,877	\$205	\$120,082
Sutherland, Doris	Medical Consultant	\$122,582	\$174	\$122,756
Taraschuk, Ihor	Medical Consultant	\$105,795	\$186	\$105,981
Thakur, Ranasee	Medical Consultant	\$122,516	\$174	\$122,690
Thomas, Roy E	VP Communications	\$110,000	\$158	\$110,158
Thomson, Garry	GM Industry Sector	\$143,008	\$205	\$143,213
Todorovic, Slavica	Dir Benefits Policy	\$105,045	\$156	\$105,201
Walker, John	Medical Consultant	\$113,741	\$199	\$113,940
Weatherbee, Wayne	GM Small Business Svcs	\$143,364	\$176	\$143,540
Welton, I.	Dir Rev Policy	\$113,071	\$162	\$113,233
Williams, David	President & CEO	\$772,400	\$463	\$772,863
Yeung, Ka Sing	Sr Policy Analyst EPID	\$103,620	\$83	\$103,703

\*\* The amount shown as earnings in this disclosure statement may not represent the individual's actual annual rate of salary. The earnings required to be made public under the *Public Sector Salary Disclosure Act, 1996* reflect the amount reported to Revenue Canada on the employer's T4 slip for an employee. The earnings shown in this statement may therefore include non-recurring payments in 1999 for retroactive pay from a reclassification or a grievance settlement or a payout upon retirement. The earnings shown may be less than the individual's annual rate of salary if the individual worked only part of the year.