

# Council proposes fee increase

More resources needed to address unprecedented volume of complaints

After reviewing the proposed budget for 2018, Council is recommending a \$100 fee increase to renew an independent practice certificate. This increase, if approved, would bring the fee to \$1,725.

The fee increase is required to ensure the College has the resources to fulfill our statutory obligations. The College has a mandate to register qualified physicians, investigate complaints, and ensure physicians are providing quality care to their patients throughout their career.

If the proposed fee is approved by Council next February, the average increase per year for the 2013-2018 period will be 2.25%. For most of the years within the past five, the rate was below inflation.

Council understands the financial challenges currently facing physicians but it is charged with the responsibility of ensuring that the College can fulfill its statutory duty in a timely manner. This means having the necessary resources in place to operate a robust regulatory system that can continue to govern in the public interest.

The College has always been committed to responsibly managing our financial resources, and as noted, only modest fee increases have been implemented over the past five years. In fact, one year there was no fee increase at all. We have made process changes and implemented cost-saving efficiencies wherever we can – such as reducing resources to address non-urgent matters. Plans are under development to derive further savings in 2018. This work to find efficiencies, enhance processes and streamline our operations is ongoing.

The scope of the College's work, however, is set by legislation and we do not have the option to narrow our focus in response to increasing costs. We continue to face an unprecedented volume of cases and significantly, an increase in the number of complex and time-consuming investigations. Over the last several years, the number of investigations has been steadily climbing – in the last year alone there was a 13% increase in the total caseload, with a 45% increase in the more complex Registrar's Investigations. And as of October, there were more than 108 open discipline matters – an unprecedented number.

Other external drivers which impact our budget include those numerous issues that arrive at the College and require – based on risk, public safety, stakeholder relationships or direction by government – concentrated work efforts to achieve the optimal outcome. Recent examples include the work necessitated by Bills 87 and 160.

The College is committed to being transparent about its finances and its resource requirements to operate programs. The Finance Committee regularly provides detailed reports to the public Council meetings and all Committees and College programs report regularly on College activities and benchmarks.

## MEDICAL REGULATORY AUTHORITIES

### A FEE COMPARISON

Licensure/Renewal Fees	2018
CPSA	\$1,960
CPSPEI	\$1,900
CPSS	\$1,880
CPSNS	\$1,850
CPSNL	\$1,850
CPSM	\$1,780
CPSO	\$1,725
CPSBC	\$1,680
CMQ	\$1,520
CPSNB	\$600
NT	\$250
YK	\$250
NU	\$250

The College is required, to set fees in the form of by-laws, and to circulate all by-laws to the membership. Below is the proposed amendment.

**By-Law No. 116**  
**Subsection 4(a) of By-Law No. 2 (the Fees and Remuneration By-Law) is revoked and the following is substituted: Annual Fees**

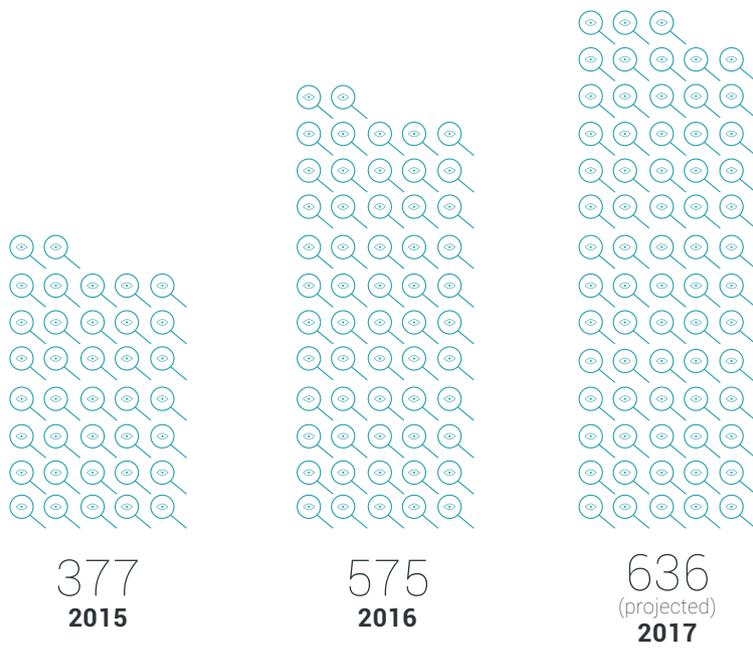
4. Annual fees for the year beginning June 1, 2018, are as follows:  
 (a) \$1725 for holders of a certificate of registration other than a certificate of registration authorizing postgraduate education and other than a certificate of registration authorizing supervised practice of a short duration; and

# INCREASED ACTIVITY = INCREASED RESOURCES



## PUBLIC COMPLAINTS

## REGISTRAR'S INVESTIGATIONS



### 45% INCREASE IN REGISTRAR'S INVESTIGATIONS

RIs are more complex than public complaints, with a greater proportion of these cases categorized as high-risk based on potential patient and public safety issues. RIs can include some or all of the following:



A review of 25 patient charts by an external assessor



Collection of OHIP records, or pharmacy records



Interview with doctor under investigation



Observation of the doctor under investigation

