Governance and Nominating Committee Report

The purpose of the Governance and Nominating Committee is to provide a focus on board governance that will enhance Doctors Manitoba’s performance by assessing and making recommendations regarding board effectiveness, the recruitment of board members, and the selection of the President of the Board of Directors, Board Officers and the Board Chair.

Board Executive 2017-18

The committee provided recommendations to the Board of Directors for the Board Executive (2017-18). The recommendations were endorsed by the Board of Directors at their March 15, 2017 meeting.

- Dr. Shannon Prud’homme be President-Elect for 2017-18
- Dr. Louis F. Smith be appointed Honourary Treasurer for 2017-18.
- Dr. Cory Baillie be appointed Honourary Secretary for 2017-18

Strategic Plan 2017-20

The Committee was tasked this year with reviewing and updating the association’s Strategic Plan. The following was approved by the Board of Directors at their March 15, 2017 meeting.

Vision: A trusted organization with an engaged membership and a strong voice for the health of Manitobans.

Mission: To serve the physicians of Manitoba, advocating for their professional, economic and personal well-being.
Values:

- **Unity** - *We strive to make decisions that will foster unity in the membership*
- **Influence** - *Our influence derives from our unity as an association*
- **Foresight** - *We anticipate and plan for the changing environment*
- **Professionalism** - *We adhere to a high standard of integrity and respect in our work relationships*

Details of the Strategic Plan (2017-20) will be available on the Doctors Manitoba website and distributed to members later this summer.

**Constitution & By-laws**

Proposed changes were discussed and considered by the Board in January and March 2017. They were debated and endorsed by the Board and sent to the membership on April 5, 2017.

The changes to the Constitution & By-laws:

- reflect numerous policy issues studied by Governance & Nominating Committee and Board of Directors
- were endorsed and recommended by Governance & Nominating Committee and Board of Directors
- aim to achieve a more engaged Board
- are in line with best practices and several other jurisdictions

In summary, the changes:

- Create a position on the Board for one representative from the MMSA (currently the rep. is an invited guest with no vote);
- Allow the University Medical Group to appoint a representative rather than its President (currently it must be its President, UMG has no choice);
• Revises the composition of the Physician Health & Wellness Committee to increase Members-at-Large (adds two Members-at-Large at request of Committee);
• Adds the Resident of the Year Award (new award);
• Addresses miscellaneous housekeeping issues (for example, changing reference to Faculty of Medicine to College of Medicine).

The changes require a two-thirds majority vote of those in attendance at the Annual General Business Meeting, assuming a quorum is achieved.

**Members of the Governance and Nominating Committee:**

- Dr. Darcy Johnson (Chair)
- Dr. Aaron Chiu
- Dr. David Cram
- Dr. Brian Rumbolt
- Mr. Scott Baldwin (QSM Consulting)
- Dr. Barbara Kelleher (ex-officio)
- Mr. Robert Cram (ex-officio)
Finance and Audit Committee Report

The purpose of the Finance and Audit Committee is to coordinate the Board of Directors financial oversight responsibilities by recommending policy to the Board and monitoring its implementation. The Committee also provides board oversight of Doctors Manitoba’s annual financial audit.

Audited Financial Statements

We are pleased to report that Doctors Manitoba maintained its strong financial position in 2016, recording a slight deficit of $62,937 (2015 - $56,203 surplus) and net assets of $7,512,883 (2015 - $7,575,820).

At August 31, 2016, Doctors Manitoba net assets consisted of $3,260,933 in Capital Assets (building), $4,251,950 in Unrestricted Net Assets (in the form of cash and investments).

Membership Dues revenue increased by 2.3% (2016 - $3,111,083 vs. 2015 - $3,040,415), leading to an overall revenue to increase of 1.0% from (2016 - $3,925,342 vs. 2015 - $3,887,042).

Note that approximately 80% of the Association’s revenue is derived from Membership Dues, while another 10% is derived from Benefit Program Administration Fees (2016 - $350,000). These steady and predictable revenue sources provide the Association with a consistent cash flow year to year.

Overall expenses in 2015-16 increased by 7.1% (2016 - $4,021,639 vs. 2015 - $3,752,431). The introduction of the new Physician & Family Support Program ($102,000) contributed to the increase in expenses. This program was introduced in September 2015 and is available to all Doctors Manitoba members.

As a result of the continued financial strength of Doctors Manitoba, membership dues will remain unchanged for 2017-18. Doctors Manitoba membership fees have not been raised since 2007. A full-time member will continue to pay $1,145.
Membership Report

Provincial/Territorial Medical Association Membership Dues as of January 2017

<table>
<thead>
<tr>
<th>Province</th>
<th>Membership Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>***Quebec - SP</td>
<td>$2,915</td>
</tr>
<tr>
<td>*P.E.I</td>
<td>$2,700</td>
</tr>
<tr>
<td>***Quebec - GP</td>
<td>$2,515</td>
</tr>
<tr>
<td>*Saskatchewan</td>
<td>$2,060</td>
</tr>
<tr>
<td>*Ontario</td>
<td>$1,970</td>
</tr>
<tr>
<td>*New Brunswick</td>
<td>$1,825</td>
</tr>
<tr>
<td>**Alberta</td>
<td>$1,795</td>
</tr>
<tr>
<td>*Northwest Territories</td>
<td>$1,700</td>
</tr>
<tr>
<td>*Newfoundland</td>
<td>$1,700</td>
</tr>
<tr>
<td>*Nova Scotia</td>
<td>$1,650</td>
</tr>
<tr>
<td>Yukon</td>
<td>$1,561</td>
</tr>
<tr>
<td>**British Columbia</td>
<td>$1,540</td>
</tr>
<tr>
<td>*Manitoba</td>
<td>$1,145</td>
</tr>
</tbody>
</table>

CMA Dues                  Provincial Dues

Note: CMA fees are an additional $495 for a full time member in 2017.

* Payment of provincial dues is compulsory by law
** Physicians must either be members or pay an administrative fee to receive benefits
*** Quebec physicians pay dues on a compulsory basis to either the General Practitioners Federation or the Specialists Federation at the rates shown. The Federations represent Quebec physicians in fee negotiations with the province, not the QMA. The rates shown also include non-compulsory dues of $315.00 to the QMA.

Doctors Manitoba Dues were last increased effective September 1, 2007, from $945 to $1,145.
The trend of increased membership in Doctors Manitoba continued last year. At December 31, 2016 there were 4,348 physicians registered in Manitoba, which is a net gain of 2.2% over the previous year (2015 – 4,253).

<table>
<thead>
<tr>
<th></th>
<th>DEC31-2016</th>
<th>DEC31-2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Member</td>
<td>Affiliate</td>
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<tr>
<td>Full-Time</td>
<td>2,258</td>
<td>181</td>
</tr>
<tr>
<td>Resident</td>
<td>575</td>
<td>-</td>
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<tr>
<td>Retired</td>
<td>222</td>
<td>8</td>
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<tr>
<td>Part-Time</td>
<td>84</td>
<td>15</td>
</tr>
<tr>
<td>Non-Resident</td>
<td>-</td>
<td>262</td>
</tr>
<tr>
<td>Student</td>
<td>433</td>
<td>-</td>
</tr>
<tr>
<td>Honorary</td>
<td>47</td>
<td>-</td>
</tr>
<tr>
<td>Salaried</td>
<td>196</td>
<td>36</td>
</tr>
<tr>
<td>Other</td>
<td>10</td>
<td>21</td>
</tr>
<tr>
<td>TOTAL</td>
<td>3,825</td>
<td>523</td>
</tr>
</tbody>
</table>

Members of the Finance and Audit Committee:

- Dr. Shannon Prud’homme (Chair)
- Dr. Aaron Chiu
- Dr. David Cram
- Mr. Harold Dueck (CA)
- Dr. Barbara Kelleher (ex-officio)
- Mr. Robert Cram (ex-officio)
Health and Wellness Committee Report

Doctors Manitoba established a Physician Health and Wellness Committee in December 2012. The Committee’s main goal is to provide assistance and guidance to all Manitoba physicians for wellness activities.

Physician health has traditionally been centered on stress and burnout, but the emphasis is now shifting towards wellness promotion and encouraging doctors to look after their long-term health. As such, the Committee has been working on developing a master plan that provides a broad range of assistance and training to its members for wellness activities.

The Board of Directors first set out the terms of reference for the Committee that included the following:

- Develop Education/ Workshops for MB physicians
- Develop an EAP program for MB physicians
- Develop a Wellness program for MB physicians
- Develop a physician connection line for MB physicians to access a Family Physician
- Complete a Survey of MB Doctors

During 2016 (and early 2017), the Health and Wellness committee completed the planning and implementation of a number of initiatives including:

1. Hosting a Conflict Management and Negotiation workshop offered through the CMA’s Physician Management Institute
2. Organizing and hosting of the first annual Physician Wellness Day held in May 2016 at the Fort Whyte Centre. The physician wellness day focused on causes and the impact of stress in medicine along with how to reduce stress and burnout and improve work-life-balance.
3. The roll out and promotion of the Physician and Family Support Program that provides 24/7 confidential counseling and support to physicians, residents, students and their families. Included in the services provided to Doctors Manitoba were two webinars offered to the membership to improve family communication.
Members of the Health & Wellness Committee:

- Dr. Flordeliz Osler (Chair)
- Dr. Terry Babick
- Ms. Alana Poon
- Dr. Annie Finlayson
- Dr. Philippe Erhard
- Dr. Derek Fewer
- Dr. Jarrett Lobley
- Dr. Ann Loewen
- Dr. David Cram
- Dr. Mark Prober
- Dr. Cornelia Van Ineveld
- Dr. Barbara Kelleher (ex-officio)
Negotiated Benefits Program Report

Continuing Medical Education Program (CME)

Paid CME claims for year ended December 31, 2016 were 1,584, totaling $4,143,624. Total claims for the year increased by 1.5% over the previous year (1,584 vs. 1,560 in 2015). The maximum benefit of $3,500 was claimed by 43% of physicians. The year-end cash position of the fund at December 31, 2016 was $1,198,902.

Professional Liability Insurance Fund (PLIF)

PLIF Program rebates for year ended May 31, 2016 totaled $9,438,507. The 2016 year-end surplus amount is $1,666,558.

Maternity/Paternity Benefit Program

Paid maternity/paternity claims for the year ended December 31, 2016 totaled $1,177,734. Claims included 72 new claims plus 14 claims that began in 2015 and carried over into 2016. The year-end cash position of the fund is $51,665.

Physician Retention Program

Physician Retention payments for the year ended March 31, 2016 totaled $2,846,480. This amount was paid to the physicians who reached their five-year milestone during the year plus death and disability benefits during that year. The audited fund balance at March 31, 2016 was $28,512,770.
Insurance Program Report

The insurance plans administered by Doctors Manitoba continue to provide members with well-priced coverage while providing continued financial stability. Programs are currently operating with fully funded reserves.

Disability Income Plan

For the year ended May 31, 2016 the Disability Income Plan had a surplus of $183,985. A portion ($46,597) was directed to the Claims Fluctuation Reserve (CFR) account with the remainder directed to the Disability Trust Account. A 5% refund of the 2015/16 experience rated premiums was approved by the Insurance Committee for 2016/17 participants. The balance in the Disability Trust Account at May 31, 2017 will be approximately $979,592. This reserve will be used to ensure stable rates in future plan years with a negative experience.

Office Overhead Expense Plan

For the year ended May 31, 2016 the Office Overhead Expense Insurance Plan generated a surplus of $4,466 allowing for a 75% refund of the 2015/2016 experience-rated premium ($64,588) to members participating in the plan for 2017/2018. The balance in the Office Overhead Expense Account at May 31, 2017 will be approximately $278,358. This reserve will be used to provide future rebates and to ensure stable rates in future plan years with a negative experience.

Term Life Plan

For the year ended December 31, 2015 the Term Life Insurance Plan generated a surplus of $855,729. A portion of this amount was used to top up the Claims Fluctuation Reserve (CFR) account and the Callable Refund Deposit Account (CRDA) leaving a balance of $826,016. A 60% refund of the 2015 experience rated premium was approved by the Insurance Committee for 2017 participants.
Extended Health Care Plan

For the year ending June 30, 2016 the Extended Health Care Plan generated a modest surplus of $5,249 which was directed to the surplus account. The Insurance Committee approved a 6.3% increase in premiums due to higher than normal drug costs and travel accident claims.

Members of the Insurance Committee:

- Dr. Al Schroeder
- Dr. Steve Grass
- Dr. Maralyn MacKay
- Dr. Louis F. Smith
- Dr. Helmut Unruh
- Dr. Richard Rusk
- Dr. Fred Ball
- Dr. Tyler Oswald
- Dr. Bruce Boyd
- Dr. Jordyn Lerner (PARIM)
Negotiations and Advocacy Report

This past year has been notable as the first full year of a new Progressive Conservative Government in Manitoba. After an initial period of relative quiet as the new Government adjusted to its role there have been series of announcement related to both legislation and restructuring that will affected our members and have, and will continue, to require action and advocacy on the part of Doctors Manitoba.

Substantive changes began with the introduction of Bill 28 *The Public Services Sustainability Act* that, if passed, will leave the existing Master Agreement in tact until April 1, 2019, but would effectively dictate most terms of the next Master Agreement and neuter our ability to arbitrate. This Bill was paired with Bill 29, *The Health Sector Bargaining Unit Review Act* which would require the amalgamation many of the Collective Agreements that cover employed physicians. The full implications of these pieces of legislation is yet to be seen. Doctors Manitoba has taken a strong stand against Bill 28 while working to review both Acts and analyze their implications should they pass. We are preparing for difficult discussions and bargaining ahead.

This was further complicated by the recent announcements of substantial changes in the WRHA that will impact many of our members, the services they provide and the agreements they work under. Discussions with the Government, the WRHA and Manitoba Health on restructuring and its implications have already begun as have the advocacy and planning work related to it.

Doctors Manitoba will continue to be busy in the upcoming year protecting the interests of the profession as details become more apparent and changes are implemented. Doctors Manitoba is committed to holding the WRHA and government accountable for its statements with regard to the effects these changes will have on front line medical staff.

As of the date of drafting no announcements have been made with regard to any “restructuring” that may occur in rural or northern areas, however staff continue to monitor all announcements and will vigorously protect the interests of rural or northern physicians as well, should any changes be forthcoming.
In Addition, Doctors Manitoba has been engaged in a series of discussions with Manitoba Health with regard to the commitment made in the Master Agreement to:

“discuss, explore and facilitate system improvement to enhance the sustainability of the health care system, in an effort to realize medical and health care system efficiencies of $50 million over the term of the Master Agreement”.

These discussions have taken place at the staff level right up to meetings between our Board Executive and the Minister of Health. The Government’s recent unilateral actions with regard to both legislation and restructuring had brought into questions its good faith with regard to these discussions however work will continue over the coming year to clarify the position of the government.

Notwithstanding the recent dramatic announcements, Doctors Manitoba rate increases to Fee For service and alternately funded agreements in the Master Agreement averaging 2% proceeded on April 1, 2017. Increases to afterhour’s premiums, specialist on call rates and the new Comprehensive Care Management Tariffs for Family Practitioners were also implemented. Additionally, Doctors Manitoba has continued to negotiate a wide range of Physician’s Manual amendments, new fee tariffs and alternately funded agreements over this past year. It also continued to address billing disputes with Manitoba Health and provides both negotiations services and advice to individual and groups of doctors with regard to their relationships and contracts with various RHAs and agencies.

Doctors Manitoba has found itself engaged in many number of additional issues of importance to the profession over the past year including:

EMRs. – Extensive discussions with Manitoba Health and eHealth occurred with regard to the new EMR certification process. Monitoring the process in an effort to minimize negative impact on physicians and maximize their knowledge and benefits from this program.

Statement 190, College of Physicians and Surgeons – Doctors Manitoba has been engaged with the CPSM, Manitoba Health and CFPM working towards a pilot project that would address the
concerns that Statement 190 was raised. It is anticipated that the limited pilot project will get under way over the next year.

Academic Clinicians - Doctors Manitoba worked closely with University Medical Group and the University to put in place governance structures that will lead to greater transparency and support greater engagement with University Departments.

We anticipate the coming year will be busy time as we learn more about the Government’s plans for physicians and the health care system and as the implications of such changes become apparent.
AUDITS

Doctors Manitoba continues to represent both specialists and family physicians that are undergoing audits by Manitoba Health. Where it was determined that a physician had been in violation of the Physician’s Manual, settlements were negotiated by Doctors Manitoba which generally include an undertaking by the physician to alter that billing practice and may have involved a monetary repayment. In other cases where, after investigation there appeared to be no wrongdoing on the part of the physician, Doctors Manitoba vigorously defended them against any claim for repayment made by Manitoba Health. In a number of these cases the Audit lead to broader policy discussion about physician payment in particular areas and changes to the Physician’s Manual.

NEGOTIATIONS STAFF

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