



**SOCIETY OF  
GENERAL  
PRACTITIONERS OF  
BRITISH COLUMBIA**

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BCMA  
Dr. Mark Corbett

BC College of Family  
Physicians  
Dr. Lisa Gaede

# PRESIDENT'S LETTER

MAY 2010

Dear Colleagues,

This will be my last letter to you as President. As usual, there is much to report about what is going on the background, while you work busily in your offices. I will highlight some of these activities below and try to keep the letter brief - we all have more than enough to read with all the paperwork that crosses our desks.

## Pharmacists' Adaptation and Renewal of Prescriptions Feedback to BCMA

Recently the BCMA requested feedback from the membership around changes to practice resulting from the Pharmacists' Adaptation and Renewal of Prescription legislation. We are doing a short survey to provide feedback on the impact of this legislation on practicing GPs, and to get suggestions on how to improve collaboration with pharmacists.. Please take two minutes to complete the very brief survey at <http://www.surveymonkey.com/s/MTJ8ZVD>

## Telephone Consultation Fees

As most of you are now aware, as of April 1, 2010, the specialists have new telephone consultation fee codes, which are designed to facilitate communication between specialists and between specialists and GP's. The goal is to expedite advice for patient care and reduce the necessity of sending patients to the ER for medical problems that could be handled in the community. GP's are quite rightly asking which fee they can bill for these telephone consultations.

At the present time, the 14016 may be billed for the GP part of the telephone consultation discussion, but it is limited to those patients for whom the 14016 was designed: Frail Elderly, Palliative/End-of-Life, Multiple Co-morbidities & Mental Health patients. The use of the 14016 will also require the formation/modification of a care plan to keep the patient safe in the community. It is not for a simple telephone consultation. GPSC is working on a solution for patients who are not community based, as well as those outside the specific patient populations covered by the 14016. Additionally, the GPSC is reviewing the possibility of a new fee to cover other patients and locations for telephone consultations in the future. Stay tuned!

## Divisions

Divisions are rapidly spreading across the province. Nine Divisions now have full non-profit Society status. Twenty others are in various stages of engagement and formation and are likely to achieve society status by year's end. Enquiries from interested GP groups are being received weekly. This initiative encourages community-based GPs to band together and participate in determining the direction of services for the community. It can also strongly enhance the voice of GPs at the level of the health authority, to improve patient care.

## Attachment Initiative

BC data shows that patients in the highest healthcare utilization levels cost less than half to the health care system **IF** they are 'attached' to a GP; savings mostly from reduced hospital admissions and specialist referrals.

GPSC is currently working with GPs throughout the province, developing an 'Attachment' initiative to enhance patients' attachment to GPs and increase access to primary care for those who don't have a GP. This initiative is **NOT** about capitation or negation. It is totally voluntary. Income from this initiative is in addition to your fee-for-service earnings. Part of

the funding will go towards paying you for the patients you already have in your practice and others you newly attach, and part will go towards increasing the primary health care capacity in your community. It is being prototyped through interested Divisions, and the plan is to have this initiative offered across the province over the next few years. Again, stay tuned!

### **BC Cancer Agency & Pap fixative**

The BCCA sent a letter to all GP's in the province, instructing us that we must now use fixative on all our PAP slides to meet international standards. Many SGP members and the SGP Board believe that the decision to change the protocol, and thereby increase the overhead costs to GP's, and the method of notification was non-collaborative in its approach. I have written to the BCCA and suggested that rather than mandate changes, in future they should be consulting GP's around any relevant changes in practice, in an effort to work towards a mutually acceptable solution.

### **UBC Medical Student Bursary**

SGP Board has approved an increase to the value of our two Medical Student Bursaries to \$2000 each for the 2010/11 school year. These will be made available to 4<sup>th</sup> year students with an interest in family medicine.

### **Special Authority Forms and Private Insurers**

The SGP has had reports of Blue Cross (and other private insurers) requesting the GP submit an SAF first as part of their medication coverage approval process. Since this is a benefit to a third party insurer, it is the recommendation of the SGP Board that the insurance company should be billed for the SAF completion.

### **OSMV DMER**

In January several Drivers medical examinations for commercial drivers and drivers over 80 were sent out in error on the DMER forms (blue forms). As such, fees submitted through MSP were rejected. The OSMV has advised the SGP that since this was their error, all submitted bills will be paid. Previously rejected claims can be resubmitted for payment.

### **CDM and Complex Care Fees**

We are still receiving complaints from our members that although they have provided comprehensive care to certain long-time and complicated patients, when they submit their CDM or Complex Care Fees to MSP, they have been rejected because another doctor has billed the fee. Please only bill these fees for the appropriate patients in **your** own practice. If you have had any of these fees rejected for this reason, please send your request for review to [gpsc.billing@bcma.bc.ca](mailto:gpsc.billing@bcma.bc.ca) and a review will be undertaken to determine who the GP providing the longitudinal care is and if paid incorrectly, this will be reversed as it is the intent of the GPSC to reward the most responsible GP for the time, intensity and complexity of providing care for these patients.

### **New Benefit of Society of General Practitioners Membership**

The SGP has negotiated a reduced rate for booking car rentals with AVIS that is available for Society members. To register with this program, members can access the AVIS link once signed in to the SGP website ([www.sgp.bc.ca](http://www.sgp.bc.ca)) using their BCMA ID number and then last name in lower case letters as your password and the clicking on the links section. If you cannot sign in to the members' side of the website, it is because your membership with the Society has not been renewed for 2010. To renew your membership using a credit card, go to the BCMA website and update your status directly. You can also download an SGP membership form from the SGP website and mail it in to the office with a cheque for the applicable dues.

### **Governance Review**

Since the BCMA's overall Governance Review process is tabled for now, the SGP has decided to move forward with our own governance review which will likely commence in the fall 2010. The SGP has been actively developing its relationship with other sections that

represent GPs in a variety of areas, including the Sections of Sports Medicine, Palliative Medicine, Hospital Medicine and Clinical Faculty and if acceptable to these sections, would like to formalize these relationships through changes in our governance structure.

### **Elections Update**

SGP Board nominations have been completed and we are pleased to announce that all the positions have now been filled. The Officers for 2010/11 are:

Secretary – Dr. Chris Galanos  
Treasurer – Dr. Tracy Monk  
President Elect – Dr. Peter Barnsdale  
President – Dr. Ralph Jones  
Past President – Dr. Joanne Young

I want to thank all of those who have stepped forward to accept a position on the SGP Board. When we are busy seeing patients, then working through the mounds of paper work at the end of a long day, it is hard to imagine the work that goes on behind the scenes. Having spent the last couple of years behind the curtain, I can attest to the devotion of the GP's who are tirelessly striving to make general practice a viable and rewarding career.

I also want to thank all the SGP members, and especially those who have recently joined, for it is only with your support that this organization is able to accomplish all that it has to turn things around for the GP's of British Columbia. I want to thank you for the opportunity to represent you as President of the SGP in these very exciting times.

Please do **renew your SGP membership** if you haven't done so yet, by going to:

[https://www.bcma.org/store/sections\\_societies](https://www.bcma.org/store/sections_societies)

The SGP is your voice of General Practice in BC and we need your support and membership to be even stronger! Please sign up and encourage your colleagues to join as well!

Sincerely,  
Joanne Young