



ANNUAL REPORTS

2018-2019

Strategic Plan 2017-20

Doctors Manitoba board and staff continue to work on 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*

Strategic Goals 2017-20

A. Member Engagement

- 1.0 All members feel informed by and connected to Doctors Manitoba.
- 2.0 Members view participation on Doctors Manitoba Board, committees and working groups as worthwhile.

B. Physician Health and Wellness

- 1.0 Doctors Manitoba provides assistance and training to its members for wellness activities that are increasingly utilized.
- 2.0 All physicians, residents and medical students will have access to a primary care physician.
- 3.0 Doctors Manitoba promotes professionalism within its membership.

C. Remuneration and Benefits

- 1.0 Physician remuneration and benefits in Manitoba remain competitive.

D. Advocacy and Innovation

- 1.0 All members view Doctors Manitoba as a proactive and effective advocate for the medical profession.
- 2.0 Doctors Manitoba advocates on public health issues and opportunities for innovation where there is a clear consensus in the medical profession.
- 3.0 Doctors Manitoba advocates for member throughout their career, from student to retiree.

E. Organizational Capacity and Leadership

- 1.0 Doctors Manitoba has the capacity to successfully execute and monitor its strategic and operating plans.
- 2.0 Doctors Manitoba promotes the development of leadership skills of its members, at the regional, provincial and national levels.

Governance and Human Resources Committee Report

The purpose of the Governance and Human Resources Committee is to review all matters related to governance and governance standards for Doctors Manitoba, as well as Board and committees' membership, including the recruitment of board members, and the selection of the President of the Board of Directors, Board Officers and the Board Chair.

Board Executive 2019-20

The committee provided recommendations to the Board of Directors for the membership of the Board Executive (2019-20). The recommendations were endorsed by the Board of Directors at their March 13, 2019 meeting.

- Dr. Cory Baillie be President-Elect for 2019-20
- Dr. Kristjan Thompson be appointed Honourary Treasurer for 2019-20
- Dr. Candace Bradshaw be appointed Honourary Secretary for 2019-20

Members of the Governance and Human Resources Committee:

- Dr. Shannon Prud'homme (Chair)
- Dr. Cory Baillie
- Dr. Brian Rumbolt
- Dr. Darren Leitao
- Dr. Kristjan Thompson
- Mr. Scott Baldwin (external)
- Ms. Theresa Oswald (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

Doctors Manitoba maintained its functional financial position in 2017-18, with net assets of \$6,423,281 (2017 - \$6,973,116). At August 31, 2018, Doctors Manitoba net assets consisted of **\$3,281,034** in Capital Assets, **\$3,142,247** in Unrestricted Net Assets (in the form of cash and investments).

While, membership dues revenue increased by 2.5% (2018 - \$3,247,981 vs. 2017 - \$3,169,493), the overall revenue increased by 6.8% (2018 - \$4,247,865 vs. 2017 - \$3,959,314), mainly due to an increase in investment and interest income in fiscal 2018.

The trend of increased membership in Doctors Manitoba continued last year. At December 31, 2018 there were 4,470 physicians registered in Manitoba, which is a net gain of 1.7% over the previous year (2017 – 4,394).

	DEC31-2018		DEC31-2017	
	Member	Affiliate	Member	Affiliate
Full-Time	2,278	315	2,355	153
Resident	598	1	597	-
Retired	160	23	201	8
Part-Time	73	33	86	17
Non-Resident	-	258	-	242
Student	436	-	434	-
Honourary	50	-	48	-
Salaried	173	51	199	36
Other	13	8	10	8
TOTAL	3,781	689	3,930	464

Note that approximately 80% of Doctors Manitoba revenue is derived from membership dues, with another 10% is derived from Benefit Program Administration Fees (2018 - \$333,333).

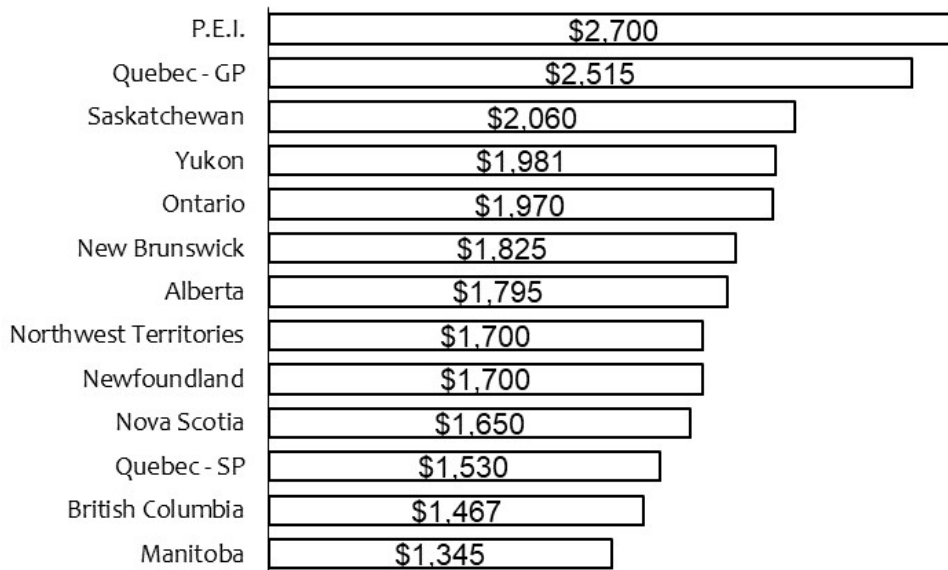


These steady and predictable revenue sources provide Doctors Manitoba with a consistent cash flow year to year. Overall expenses in 2017-18 increased by 6.6% (2018 - \$4,797,700 vs. 2017 - \$4,499,081), as a result of our increased investment in the organization related to staff and resources.

As reported last year, the Board decided to increase annual dues for the 2018-19 membership year. This increased revenue was realized this past fall and will be reflected in the 2019-20 fiscal year. Doctors Manitoba last increased membership dues a decade ago, using the funds to build a new headquarters and to modernize our operations. We have had budgetary deficits for the past few years, just to maintain our current organizational activity. To prepare for difficult upcoming negotiations, to maintain the current services, and to prepare for the future we must invest once again in our organization. The increased fees will mean more resources for Doctors Manitoba to serve you.

Dues for most members increased by \$200 (dependent on membership category). Even with the increase, Doctors Manitoba's annual dues remain the lowest in all of Canada, by a significant margin.

Provincial/Territorial Medical Association Membership Dues as of January 2019



Negotiated Benefits Fund Trusts

Continuing Medical Education Program (CME)

Paid CME claims for year ended December 31, 2018, were 1,698, totaling \$4,255,825. Total claims for the year increased by 3.3% over the previous year (1,698 vs. 1,643 in 2017). The maximum benefit of \$3,500 was claimed by 41% of physicians. The year-end cash position of the fund at December 31, 2018, was \$8,121,649.

Professional Liability Insurance Fund (PLIF)

PLIF Program rebates for year ended December 31, 2018, totaled \$6,069,578. The 2018 year-end fund balance is \$5,256,303.

Maternity/Parental Benefit Program

Paid maternity/paternity claims for the year ended December 31, 2018, totaled \$1,705,377, which is an increase of nearly 10% (2017- \$1,562,339). There were 100 new claims plus 34 claims that began in 2017 and carried over into 2018. The year-end cash position of the fund is \$178,521.

Physician Retention Program

Physician Retention payments for the year ended December 31, 2018, totaled \$4,555,800. Although expensed in 2017, retention benefits of \$34,392,300 were paid to members in 2018 for milestones ending March 31, 2017. There were also \$25,500 death and disability payments made during 2018. The trust had \$17,958,010 in net assets at the end of the fiscal period.

Members of the Finance and Audit Committee:

- Dr. Cory Baillie (Chair)
- Dr. Fourie Smith
- Dr. Candace Bradshaw
- Dr. Kristjan Thompson
- Ms. Alice Sayant (external)
- Dr. Shannon Prud'homme (ex-officio)
- Ms. Theresa Oswald (ex-officio)

Physician Health and Wellness Committee Report

Doctors Manitoba established a Physician Health and Wellness Committee in December 2012 to respond to emerging research that the health of physicians and an increase in stress and burnout were becoming significant issues for individual physicians and the broader health care system. The Committee's mandate is to contribute to the continuing development, operation and evaluation of the Doctors Manitoba Physician Health and Wellness Program. Designed to reflect the needs of the physician population, the Committee provides high-level guidance focusing on mission, policy input and annual evaluation of the program.

The Committee and Doctors Manitoba staff have been working on supporting a broad range of assistance programs and training opportunities for health promotion and wellness activities.

These include:

- Doctors Manitoba Physician Health Programs for medical students, residents, and physicians. Programs include MD Care, Physician's at Risk and the Physician and Family Support Program
- The Doctors Manitoba Physician Health and Wellness website www.docsmbwellness.org
- Annual leadership workshop through the Canadian Medical Association's Physician Leadership Institute (PLI) for Manitoba doctors at a significant cost-savings to members
- Annual Physician Wellness Day for members
- Health and Wellness presentation to be used as part of an outreach program for all Manitoba physicians.

Members of the Health & Wellness Committee:

- Dr. Philippe Erhard (Chair)
- Dr. Ann Loewen
- Dr. Stephane Lenoski (Vice-Chair)
- Dr. Yvette Emerson
- Dr. Alewyn Vorster
- Dr. Kaitlin Edwards
- Dr. Michael Loudon
- Dr. Sara Rusen
- Dr. Candace Bradshaw
- Dr. Ming-Ka Chan
- Dr. James Skinner
- Ms. Jaspreet Bassi
- Dr. Michael Boroditsky
- Dr. Shannon Prud'homme (ex-officio)

Insurance Committee Report

The Committee is advisory to the Board of Directors. It monitors the annual financial experience of each of the Doctors Manitoba Insurance programs and directs ongoing plan development. For over 40 years Doctors Manitoba has provided members with group insurance products that are comprehensive and competitively priced. Plans are non-for-profit and are operating with fully funded account reserves. In addition, Doctors Manitoba began offering Critical Illness Insurance, effective January 2019.

Disability Income Plan

For the year ending May 31, 2018, the Disability Income Plan had an operating deficit of \$35,093. However, this deficit was cleared using a portion of the in-year interest earnings. The balance of the interest along with \$23,647 from the Disability Surplus Trust Account was transferred to the Claims Fluctuations Reserve (CFR) in order to maintain 100% of its objective.

A 15% refund of the 2017/18 experience rated premiums was approved by the Insurance Committee for 2019/20 participants. The balance in the Disability Surplus Trust Account at May 31, 2019, will be approximately \$2,771,429. This reserve will be used to provide future rebates and to ensure stable rates in future plan years.

Office Overhead Expense Plan

For the year ended May 31, 2018, the Office Overhead Expense Insurance Plan generated a surplus of \$23,022 allowing the Insurance Committee to approve a 75% refund of the 2017/18 experience-rated premium (\$70,193) to members participating in the plan for 2019/20. The balance in the Office Overhead Expense Account at May 31, 2019 will be approximately \$177,250. This reserve will be used to provide future rebates and to ensure stable rates in future plan years.

Term Life Plan

For the year ending December 31, 2017, the Term Life Insurance Plan generated a surplus of \$1,246,282. A portion of this amount was used to top up the Claims Fluctuation Reserve (CFR)

account. A 50% refund of the 2017, experience rated premium (\$809,455) was approved by the Insurance Committee for 2019, participants, leaving a surplus bank balance of \$2,512,965

Extended Health Care Plan

For the year ending June 30, 2018, the Extended Health Care Plan generated a small deficit of \$19,157 which was cleared using interest earned and funds from the Surplus Account. The Surplus Account was \$384,109 at June 30, 2018. Blue Cross requested an increase to premiums of 13% (due to rising drug and travel costs). Mercer negotiated an 8% increase. The Insurance Committee accepted the 8% increase, and agreed to split the cost of the increase with funds from the surplus accounts and a premium rate increase. The net result is a 4.0% increase to premiums for member participants in 2019.

Members of the Insurance Committee:

- Dr. Steve Grass (Chair)
- Dr. Al Schroeder
- Dr. Maralyn MacKay
- Dr. L. Fourie Smith
- Dr. Helmut Unruh
- Dr. Richard Rusk
- Dr. Fred Ball
- Dr. Bruce Boyd
- Dr. Jordyn Lerner (PARIM)

Negotiations and Advocacy Services Report

This year has been an extremely busy one as we have worked hard with physicians to research, develop and submit our proposal for a new Master Agreement to replace the previous agreement which expired March 31, 2019. The elements of this agreement remain in place until a new one is signed and ratified.

We are very grateful for the many contributions from the blocs and working groups, the chairs and the members, and to individual physicians who sat down with us to help frame the best possible ideas for a go-forward plan.

Consultations over the last year have been extensive. Doctors Manitoba staff travelled nearly 15,000 kms to meet with physicians across the province. Despite your punishing schedules, you attended over 200 meetings and reviewed 3,615 tariffs, with 167 physicians involved in fee-for-service working groups, and many others involved in alternate funded and regional meetings.

We submitted our proposal to Manitoba Health and to government in November 2018. While we have had several meetings with key staff from both parties, as of the writing of this report, we have received no submission in writing from them. It is clear the act of health system restructuring has been all-consuming for those in government tasked with engaging in meaningful negotiations with physicians. We remain hopeful that we will soon sit down and have good faith discussions on the issues that matter to you most.

On the matter of system restructuring, this has undoubtedly been a highly challenging and sometimes stressful time for us all. You continue to be faced with substantial changes in the health care system. This change has caused considerable disruption, and has not always been accompanied by clear communication from the system, particularly concerning compensation models and duties. Between WRHA restructuring, the creation of Shared Health and the anticipated Clinical and Preventative Service Plans, the staff at Doctors Manitoba has been working to ensure the voice of physicians is being heard wherever possible.

We continue to work with RHAs and senior officials in Shared Health to represent the physicians who have felt the impact of these changes directly. Staff at Doctors Manitoba continues to

monitor all announcements and will work hard to keep our membership up to date on the implications of these changes. We will vigorously protect the interest of physicians in all future restructuring based on the principles set out by the Board of Directors. The guiding principles are:

- No layoff of doctors (they are front line staff)
- Voluntary layoff to be negotiated by Doctors Manitoba (open to all doctors regardless of site and specialty)
- Doctors Manitoba to negotiate and facilitate, where possible, transfers to other facilities
- RHA/Shared Health/Manitoba Health to designate a key individual that can speak with authority in meetings with Doctors Manitoba.
- Doctors Manitoba to be copied on any communication to physicians regarding job or position status/change. To that end we will play an active role in obtaining and disseminating accurate and reliable information to our members.
- All physician contractual matters to be negotiated with Doctors Manitoba.
- Doctors Manitoba will work to ensure that the unique nature of, and challenges associated with, the practice of medicine in rural, northern and remote communities are thoughtfully considered.
- Doctors Manitoba will work to ensure excellence in patient care throughout Manitoba.

In addition, Doctors Manitoba continues to follow the status of *The Public Services Sustainability Act*, which, if proclaimed, will effectively dictate many of the terms of the next Master Agreement and neuter our ability to arbitrate. Obviously, this is of significant concern, and we have taken a strong position against this Act. Further, the introduction of Bill 10, The Regional Health Authorities Amendment Act (Health System Governance and Accountability), eliminates any fair and transparent dispute resolution mechanism for physicians in the case of payment claw backs, and we will fight to amend this egregious suggestion in the strongest possible terms. *The Health Care Sector Bargaining Unit Review Act* and the resulting amalgamation of many of the collective agreements that cover employed physicians is underway, and we are working with those effected physicians to ameliorate the implications going forward.

In the midst of all of this change, we continue to work with individuals and groups of physicians to assist with the development and interpretation of contracts, an ever-growing number of billing



disputes, audits and health care delivery policy issues such as flu vaccine delivery and the development of MyHealth Teams.

Please call us with your questions and concerns. It is our pleasure to serve you.

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