



**Date:** February 12, 2020

**To:** College of Physicians and Surgeons of Ontario (CPSO)

**Re:** Third Party Reports Policy Consultation

### **Context**

The Ontario College of Family Physicians (OCFP) represents 13,500 family physician members across Ontario providing primary and secondary care across all settings. We appreciate this opportunity to comment on the CPSO's draft policy related to Third Party Reports.

According to 2019 Member Research conducted by the OCFP, family physicians rank daily administrative burden/paperwork as their top practice level pain point. For some, they spend 25 percent of their time – 10 to 15 hours each week – on paperwork, including forms related to investigations, insurance and specialist referrals.

Many of these forms are onerous, lengthy and unnecessarily repetitive. Policies that streamline reporting are essential in reducing family physicians' workload and freeing up more time for care.

### **Recommendations for Strengthening CPSO's Third Party Reports Policy**

The OCFP offers the following three key recommendations in relation to the CPSO's Third Party Reports Policy.

Re: #3, under "**Obligation to Provide a Report,**" the Policy states:

**Treating physicians must provide reports about their own patients when proper consent is provided.**

#### OCFP Comment:

- Providing reports about their patients is an expectation that family physicians fulfill daily. Yet, our members are telling us that they are experiencing increasingly onerous and frequent requests from insurance companies, especially as it relates to short-term and long-term disability. The OCFP recommends that physicians reserve the right to refuse repeated requests from third parties – that is, in those instances whereby the requests related to a particular patient are becoming too frequent or arduous.
- The reporting expectation on family physicians should be reasonable and not serve to impede their time available for care.



Re: #25, under “**Comprehensiveness**,” the Policy states:

**Physicians must take steps to obtain and review all available clinical notes, records and opinions relating to the patient or examinee that could impact the findings of the report, including the physician’s final opinion and/or recommendations.**

OCFP Comment:

- Family physicians see many patients for third-party physicals, such as those required for the Ministry of Transportation (MOT), when it is the physician’s *first point of contact* with the patient. In those instances, they rely on patients to provide truthful information when questioning them on their health history.
- Asking a patient to bring in previous medical records to complete a MOT physical is not feasible and may add significant costs through multiple visits.

Re: #37, under “**Scope of Expertise & Knowledge**,” the Policy states:

**In situations where a physician is asked to answer questions or provide an opinion that is beyond their expertise or experience, or which requires access to information they do not have, physicians are advised to discuss the matter with the requesting party and explain that they may not be able to answer every question asked, or provide the opinion sought.**

OCFP Comment:

- In many forms that family physicians are required to complete, they are often asked very pointed questions about the patient’s prognosis and return to work date, often early in the course of the patient’s illness when it is difficult to predict. To mitigate this, family physicians may indicate on the form that they do not yet have adequate information to predict a return-to-work date or prognosis.
- From our perspective, it is not reasonable to expect family physicians to “discuss the matter” with the requesting party. There is often significant pressure on family physicians to complete these forms quickly since the patient’s income is dependent on this when they are on short-term or long-term disability. Attempting a discussion about the patient’s prognosis and return to work date, rather than indicating that this information is not yet known and thus cannot be confirmed until appropriate follow up assessment is made, will delay completion even further.

Once again, we thank you for this opportunity to share our perspectives on this policy.