

MINUTES
ANNUAL GENERAL MEETING
Bear Mountain Resort
May 10, 2014

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Fraser Health Region
DR TODD SWANSON

Interior Health Region
DR STEPHEN HISCOCK

Northern Health Region
DR BRIAN DUBOIS

Vancouver Coastal
Health Region
DR ADAM MENEGHETTI

1. Call to Order – Dr Karimuddin called the meeting to order with 30 surgeons in attendance.
2. Minutes of Previous AGM – March 21, 2013 – The previously circulated minutes of the 2013 AGM were adopted as circulated.
3. ECONOMICS REPORT – Dr Hwang review the changes to the fees over the past year, listing new, pending and proposed fees as attached. He also brought to the members attention that there is no longer a extra fee for mesh with hernia repair, but that Section was given \$90K which increased all hernia fees.

He also reported that there is an expected surplus of money after the first year of billing the new malignancy consult and office visit fee. He presented a proposal for spending the surplus as follows:

- Funding the two new lap fees = \$6K per year.
- Funding the complex urinary catheter fee = \$10K per year
- Increasing the 29 worst fees in relation to Alberta = \$150K retro to April 2013
- And with the remainder increasing malignancy consult from \$125.50 to \$133.00 retro to April 2013 = \$50K and malignancy office from \$47.64 to \$56.00 retro to April 2013 = \$50K

Dr Elaine McKeivitt queried whether an increase to the number of visits (from two to three) was possible rather than an increase to the consult fee. It appears that many members are not able to bill the malignancy consult because the diagnosis was not yet confirmed.

Dr Akushla Wijayanayagam reported that her special office visit fee is often rejected if the original consult was not billed as the special one. Dr Hwang pointed out that we have been working with MSP on this issue and she should be not experiencing this any longer.

Dr Carl Brown asked if the Economics Committee had given consideration to using the extra funds to increase the regular consultation.

Dr Al Hayashi asked if there was any consideration to a fee for mentorship (can't remember if there was an answer)

The Plastic Surgery section has revised its schedule and this impacts many of the fees billed by General Surgery. We are continuing to negotiate with MSP for the best outcome for our members.

Dr Hwang asked the members to look for email updates, and to be sure the Section has their current email address. He encouraged members to bring forward ideas for new items,

particularly if associated with new technology. We are still awaiting funds to be able to implement the special hospital visit fee for malignancy.

It was moved by Dr Hiscock and seconded

“that the Executive of the Section of General Surgery are enabled to apply a portion of money allocated to the Section to increase fees that are less than 0.5 of the value of the equivalent Alberta fee codes and a portion to increase the fee value of 71010 and 71017”

CARRIED – none against

It was moved by Dr Hiscock and seconded

“that the Executive of the Section of General Surgery are enabled to apply \$10,000 allocated to the Section to allow members of the Section to bill a new fee for complex urinary catheterization.”

CARRIED – one against

4. PRESIDENT’S REPORT – DR AHMER KARIMUDDIN

Three Year in Review - Dr Karimuddin informed the members that the work of the Section has changed over the time he has been president. Whereas it was an organization that dealt with introduction of new fees, negotiated via the Doctors of BC, and within the SSPS, it has become more active in many other areas on a provincial level, as priorities have changed for the government.

Ensuring the ‘triple aim’ is met – health of population, experience of care and per capita costs – the Section can no longer just prove it performs more services and after hours care, but it has provided input to government sponsored initiatives, ie, patient prioritization code, surgical patient registry, the colorectal screening program and now the privileging dictionary. There are 15 General Surgeons sitting on the Privileging panel which represents 10% of the total workforce of our Section.

The Section has had an opportunity to meet with MLAs and Ministry of Health officials about the issue of resources – and the lack of available operating room time and endoscopy. Dr Karimuddin also sat on the MOCAP redesign panel – to help preserve the support for the out of hours work provided by General Surgeons in BC.

He felt that with the changing role of the Section, including the change of focus to non-clinical outcomes, good representation was needed for both the people and the surgeons of BC.

Dr Karimuddin then introduced the following motion – which was passed by the Executive of the Section

“That the General Surgeons of British Columbia do not support a number to be used as a criteria for provider participation in the FIT program.

That The General Surgeons of British Columbia strongly support ongoing review of clinical outcomes related to endoscopy.

The General Surgeons of British Columbia strongly support an annual review of endoscopy privileges based on validated criteria and data sets.”

Discussion among the members ensued, some friendly amendments brought forward, but in the end the issue was felt too complex to be voted upon given the time restraint of the meeting. Therefore, Dr Karimuddin asked the members to provide him with any feedback which he would be bringing to the review meeting of the Colon Cancer Screening Program to be held July 15.

5. Update from Dr Sam Bugis, Executive Director, Physician and External Affairs, Doctors of BC (formerly BCMA)

Dr Bugis provided an update to the Section on relevant Doctors of BC activities. This is now provided to Sections at their request at their Annual General meetings or Executive meetings. Dr. Bugis makes himself or one of his staff available for this and so far this year about a dozen Specialty Sections have made the request.

Negotiations of the Physician Master Agreement are now underway – initially a reopener for the remaining 2 years of the agreement, Doctors of BC (in extensive consultations with their members and Sections) and the Ministry of Health agreed to expand the negotiations both in content and possibly term. It is recognized that new money will likely be scarce or absent in the early years of any new agreement. Based on the well known and consistent frustration expressed among facility-based physicians with regard to their relationship with hospitals and Health Authorities, one of the goals in the current negotiations is to get meaningful physician influence into the system.

The MOCAP Redesign Panel completed its report in May 2013 – all sections and health authorities had an opportunity to be heard. The submissions by Sections confirmed that the majority of physicians receiving MOCAP are pleased with it while also identifying that there are areas for improvement. The redesign process will include data collection that will allow good decisions to be made. It will be brief in duration. Much attention has been paid to the unique circumstances of rural physicians and these will be taken in to account as the data collection process rolls out.

The Provincial Privileging Steering Committee has completed or is in the process of

completing about half of the “privileging dictionaries” for the various Sections and Specialties. This has been more challenging for some groups than others. The Chair has been asked to complete all groups by the end of this calendar year – a task that that Doctors of BC has repeatedly said is better done properly than quickly. Doctors of BC has also been emphasizing the need for consistent processes around implementation, evaluation and revision of these dictionaries.

Dr Bugis pointed out that the Provincial Surgical Advisory Committee is becoming active again with new membership and a new mandate.

- 6. Treasurer’s Report - Dr Nam Nguyen presented the budget for 2014 – with total assets expected to be \$90,239. He also presented the financial statement with actuals spent in 2013, and asked the membership to approve the recommendation of the Executive that the annual dues remain at \$650 for 2014.

It was moved and seconded

*“That the financial statement for 2013 be approved.
That the budget for 2014 be approved.
That dues for 2015 remain at \$650”*

CARRIED

- 7. Election of Officers – Slate for 2014-15

It was noted that all officers will remain in their current positions except the President and Resident Rep who will be replaced by Dr Jaclyn Farquhar. The slate was presented and elected as follows:

PRESIDENT	DR MARK DICKESON
PAST PRESIDENT	DR AHMER KARIMUDDIN
PRESIDENT-ELECT	DR
ECONOMICS REP	DR HAMISH HWANG
TREASURER	DR NAM NGUYEN
MEMBERS AT LARGE:	
NORTHERN HEALTH REGION	- DR BRIAN DUBOIS
INTERIOR HEALTH REGION	- DR STEPHEN HISCOCK
VANCOUVER ISLAND HEALTH REGION	DR DARREN BIBERDORF
FRASER HEALTH REGION	DR DAVID KONKIN (since mtg replaced by Dr Todd Swanson)
VANCOUVER COASTAL HEALTH	DR ADAM MENEGHETTI
RESIDENT MEMBER	DR JACLYN FARQUHAR
ECONOMICS COMMITTEE	DR HAMISH HWANG(Chair)
	DR SHARADH SAMPATH
	DR SAMAAD MALIK

DR MARK DICKESON
DR AHMER KARIMUDDIN

Dr Dickeson thanked Dr Karimuddin for his three years of leadership and presented him with a plaque and gift.

There being no further business, the meeting adjourned.

TBugis
19.5.14

**Summary of Section of General Surgery fee changes
AGM 2014**

New

71010 Consultation for management of malignancy
71017 Special office visit for malignancy
72713 Laparoscopic distal pancreatectomy
72714 Laparoscopic distal pancreatectomy with splenic preservation

Pending

Portal lymphadenectomy \$750
Laparoscopic reduction of volvulus, intussusception, internal hernia
\$645.13
Laparoscopic mobilization splenic flexure (extra) \$117.44
Laparoscopic resection of bands, enterolysis \$615.54
Laparoscopic cecostomy tube (extra) \$370.23
Laparoscopic correction of malrotation \$574.73
Radical resection of malignant skin or soft tissue tumour 5-10cm
\$256.85
Radical resection of malignant skin or soft tissue tumour 10+cm
\$443.84
Temporary or delayed abdominal closure with VAC \$369

Proposed

Laparoscopic internal drainage pseudocyst \$739.66
Laparoscopic hepatotomy for drainage of abscess or cyst
\$532.28/\$801.69
Special hospital visit for malignancy \$40.56

Changes

Deletion of several Plastics items

Proposed motions:

- that the Executive of the Section of General Surgery are enabled to apply a portion of money allocated to the Section to increase fees that are less than 0.5 of the value of the equivalent Alberta fee codes and a portion to increase the fee value of 71010 and 71017
- that the Executive of the Section of General Surgery are enabled to apply \$10,000 allocated to the Section to allow members of the Section to bill a new fee for complex urinary catheterization

Fees less than 50% Alberta fee

Code	Description	BC fee	AB fee	BC/AB	Propo
07072	Hidradenitis suppurativa excision - axillary - operation only	\$119.77	\$503.27	0.24	\$147.2
07073	Tenotomy Congenital Torticollis	\$131.91	\$312.04	0.42	\$162.7
07076	Hidradenitis suppurativa excision - perianal - operation only	\$119.77	\$503.27	0.24	\$147.2
07082	Hidradenitis suppurativa excision - perineal - operation only	\$119.77	\$503.27	0.24	\$147.2
07110	Ligations and strippings - 3 to 5 incisions - operation only	\$108.28	\$427.35	0.25	\$133.7
07111	Ligations and strippings - 6 or more incisions	\$188.11	\$427.35	0.44	\$231.2
07112	Ligation of 2 or more perforators	\$196.20	\$422.89	0.46	\$241.2
07141	Catheter removal - Broviac type - operation only	\$37.59	\$132.30	0.28	\$46.2
07603	Abdominal wound evisceration - resuture	\$263.85	\$564.80	0.47	\$324.2
07646	Enterostomy, large or small intestine - closure of loop - without resection	\$369.49	\$946.35	0.39	\$454.2
07653	Atresia; small bowel; excision or bypass	\$722.34	\$1,879.38	0.38	\$888.0
07675	Fistula-in-ano - subcutaneous or submucous (operation only)	\$148.07	\$342.82	0.43	\$182.0
07706	Cholecystoenterostomy - direct (loop)	\$641.61	\$1,306.08	0.49	\$788.7
07771	Picking operation; metastatic neck nodes for thyroid carcinoma	\$400.27	\$1,396.58	0.29	\$492.0
70020	Certified surgical assistance- after one hour	\$26.28	\$70.70	0.37	\$32.3
70025	Biopsy - lymph glands - groin - operation only	\$79.87	\$162.37	0.49	\$98.19
70041	Aspiration - fine needle - solid/cystic lesion (operation only)	\$43.08	\$135.32	0.32	\$52.90
70478	Mastectomy - gynecomastia	\$219.21	\$547.25	0.40	\$269.4
70601	Hiatus hernia - paraoesophageal	\$745.31	\$1,623.78	0.46	\$916.2
70603	Diaphragmatic hernia - laparoscopic	\$745.31	\$1,623.78	0.46	\$916.2
70604	Diaphragmatic hernia - congenital	\$748.45	\$1,879.38	0.40	\$920.7
70648	Jejunostomy	\$263.85	\$580.35	0.45	\$324.2
71533	Esophagoplasty - tracheoesophageal fistula	\$1,020.21	\$2,255.25	0.45	\$1,254.2
71538	Oesophagogastric fundoplasty - with gastropasty - Collis	\$776.62	\$1,623.78	0.48	\$954.7
71719	Pancreatectomy - proximal/subtotal (Whipple)	\$1,377.91	\$3,969.24	0.35	\$1,692.2
71720	Pancreatectomy - pyloric sparing	\$1,377.91	\$3,969.24	0.35	\$1,692.2
71721	Pancreatectomy - regional	\$1,565.80	\$3,969.24	0.39	\$1,924.2
71722	Pancreatectomy - total	\$1,440.54	\$3,969.24	0.36	\$1,770.2
71746	Parathyroid - re-exploration	\$873.08	\$2,149.35	0.41	\$1,072.2

*Calculations are approximate!

