

NEW HEALTH LEGISLATION: MYTH VS FACT

x Myth: There is no data to show concern with the quality of care.

✓ Fact: The number of complaints and queries to the Health Council about the quality of care has increased from 10% (8) in 2010 to 17% (39) in 2015. The Health Council regularly receives information from the public and providers about the quality and standards of care of healthcare businesses. These complaints are kept in a database and used to inform health system improvements.

x Myth: The legislation restricts a provider's ability to refer a patient for care.

✓ Fact: Providers can refer a patient for care to any business. The legislation would require providers to inform patients of their financially-vested interests in the care they are recommending. This enables patients to make more informed decisions about the care they will receive.

x Myth: The legislation restricts a patient's choice of services.

✓ Fact: A patient can choose to receive care anywhere or as many times as they wish; the legislation will protect patient choice. Patients will have the right to expect their provider to be transparent when referring them for care.

x Myth: The legislation will not apply to the hospital.

✓ Fact: The legislation does include oversight of the hospital. The legislation applies to all local health service providers. It supports the highest standards of hospital, medical, dental and professional health services.



✘ **Myth:** The legislation permits inspectors to come into a provider's office unannounced and demand medical records and financial data.

✔ **Fact:** The legislation does not permit patient care to be interrupted for any reason or allow the Health Council to demand medical records. To promote patient safety, inspections will be conducted based on concerns reported to the Health Council and "red flags" in claims data. Before any inspection, the provider will have a chance to confirm services are safe and appropriate. Depending on the outcome of that meeting, providers may be given notice that their facility or clinical department will be inspected. Inspections will be conducted in a way that will not disrupt patient care.



✘ **Myth:** The legislation is going to be passed anyway so why give input?

✔ **Fact:** The Health Council has been working hard with providers over the last month. Some changes have been made; for example, providers will no longer require permission to make financially vested referrals or self-referrals and the definition of high risk health technology is changing. Other changes are also being discussed and will be announced soon.



✘ **Myth:** Providers who are self-employed are going to be double-licensed.

✔ **Fact:** Professional registration verifies that a professional is qualified to provide a certain type and level of care. This is not the same as licensing health service providers. Licensing looks at whether providers are delivering care according to best practice standards in safe and appropriate environments.

✘ **Myth:** Licensing health service providers is political; it controls specific physicians' facilities and revenue generation.

✔ **Fact:** All 300+ providers are affected by the legislation. The public is entitled to safe and quality care, better health outcomes and basic practice standards that promote good relationships between patients and providers. The Health Council's mandate is to ensure that all health services are provided to the highest standards without compromise.

