

NATIONAL PHYSICIAN DATABASE



AVERAGE PAYMENT
PER PHYSICIAN REPORT, CANADA
2002-2003



Canadian Institute
for Health Information
Institut canadien
d'information sur la santé

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Average Payment per Physician Report Canada, 2002–2003

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Foreword

The Canadian Institute for Health Information (CIHI) is one of Canada's leading sources of quality, reliable and timely health information. More and more, Canadians are turning to CIHI for information they can trust. CIHI is a not-for-profit, pan-Canadian organization governed by a strong and active 16-member board of directors whose membership strikes a balance among the health sectors and regions of Canada.

The key to CIHI's achievements is partnership. CIHI is a focal point for collaboration among major health players—from provincial governments, regional health authorities and hospitals to the federal government, researchers and associations representing health care professionals. The result of this cooperative effort is a strong and responsive health information system.

CIHI provides Canadians with essential statistics and analysis about their health and their health care system. CIHI has become an indispensable source of information for those seeking answers to critical questions around the delivery of health care. Is the health system training enough health care professionals and is it making optimal use of their skills? Are Canadians getting reasonable access to the health services they need? Are we investing in the right resources and equipment?

For more information, visit our Web site (www.cihi.ca).

The *Average Payment per Physician Report, Canada, 2002–2003* is produced by Health Human Resources at CIHI to support health human resource planning and utilization analysis. CIHI wishes to acknowledge the support of the provincial and territorial health ministries and the CIHI Expert Group on Physician Databases in the development and publication of this report.

Preface

Previously published reports in the *Average Payment per Physician* series:

- *Average Payment per Physician Report, Canada, 2001–2002* (2003)
- *Average Payment per Physician Report, Canada, 1999/2000 and 2000/2001* (2003)
- *Average Payment per Physician Report, Canada, 1998/1999 and 1999/2000* (2002)
- *Average Payment per Physician Report, Canada, 1996/97 to 1998/99* (2001)
- *Average Payment per Physician Report, Canada, 1993/94 to 1995/96* (1999)
- *Average Payment per Physician Report, Canada, 1989/90 to 1993/94* (1997)

Average Fee Payments for Full-time Physicians by Specialty, Canada by Province, 1985/86–1988/89 and Average Fee Payment Per Physician and Physician/Population Ratios, Canada by Province and Territory, 1981/82 to 1985/86 and 1986/87 Where Available, produced in 1991 and 1988 respectively by the Health Information Division at Health Canada, contained figures derived from the Medical Care Database (MCDB), the predecessor of the National Physician Database (NPDB). In 1995, both databases were transferred to CIHI.

The MCDB was developed following the implementation of the *Medical Care Act* in 1967 and was used to monitor the services provided and payments made by the provincial and territorial medical insurance plans. The NPDB expanded on the MCDB by including information on physician demographics and practice characteristics as well as the age and gender of patients.

Introduction

The National Physician Database (NPDB) has been used by the federal, provincial and territorial governments, by medical stakeholder groups and by various private organizations and researchers as a data source for the average payment patterns of Canadian fee-for-service physicians for program administration, evaluation and policy development.

This publication provides information on average payments for fee-for-service physicians. Average payment results are presented in two series:

- per fee-for-service physician who received at least \$60,000 in payments; and
- per full-time equivalent fee-for-service physician.

Figures on the number of physicians, population per physician and physician per population ratios for both series are also included.

Average payment results represent gross payments made to fee-for-service physicians only. Payment figures do not represent net physician income (for example, personal income after making overhead payments). Also, non fee-for-service payments made to physicians are excluded from the figures.

Any questions regarding publications or the NPDB should be directed to:

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Methodological Notes

Background

The National Physician Database (NPDB) provides information on the demographic characteristics of physicians and their level of activity within the Canadian medical care system and is used by governments, professional associations, consulting firms, pharmaceutical companies, researchers and the media for medical human resource planning and utilization analysis. The establishment of the database was approved in 1987 by the Conference of Deputy Ministers of Health upon the recommendation of the Advisory Committee on Health Human Resources (ACHHR).

On August 1, 1995, the NPDB was transferred to the Canadian Institute for Health Information (CIHI). CIHI assumed the responsibilities of Health Canada in maintaining the database. Previously, the NPDB was under the direction of the Working Group on Medical Care Statistics (WGMCS), which was disbanded when the database was transferred to CIHI. An Expert Group on Physician Databases was convened in April 1996 and advises CIHI on data quality, methodology and product development matters relating to the NPDB and the Southam Medical Database (SMDB).

The NPDB is a multi-year, multi-phase initiative. Phase 1, which is operational, contains data on the demographic characteristics and activity levels of fee-for-service physicians. Information on activity levels includes total payments, total services, average payment per physician and full-time equivalent physician counts. Phase 2 is adding data on clinical activities remunerated under alternative reimbursement plans (such as salaries, contracts and sessional fees). Phase 3 will contain data on non-clinical care activities of physicians (such as teaching, research and administration).

Data Sources and Collection

NPDB Data

Data are derived from physician fee-for-service claims submitted by provincial and territorial medical insurance programs to CIHI. The claims data and associated physician and patient demographic data are submitted in five files, as listed below. Data files are usually received within six months of the end of the quarter to which the data correspond. Any files that do not meet appropriate layouts, as defined in the NPDB Data Submission Specifications Manual, are returned to the provinces and territories for correction and subsequent re-submission.

Files submitted include:

Title	Description
25 File	Dental services and other non-physician services file (file not submitted by all jurisdictions)
30 File	Reciprocal billing file (Quebec does not submit this file)
35 File	Physician characteristics file
50 File	Utilization File (by fee-code, UPI, sex and age group of patient)
55 File	Changes to UPI file

In addition to the NPDB data files described above, CIHI gathers annual, aggregate level, alternative payment information through a variety of information sources, including provincial and territorial representatives of CIHI's Expert Group on Physician Databases. A summary of this information is presented in Table 2 of the Methodological Notes section.

For a complete description of NPDB record layouts, please see the NPDB Data Submission Specifications Manual, available at www.cihi.ca. For further information regarding the NPDB, including alternative payments, please contact the Consultant, NPDB, CIHI.

Average Payment Figures

Two utilization files are used to create average payment indicators: the Utilization File (50 File) and the Reciprocal Billing File (30 File). The Utilization File contains all direct payments for fee-for-service claims by physicians, laboratories and diagnostic facilities, as well as services received by out-of-province or territory medical care plan beneficiaries but not processed through the reciprocal billing system (that is, essentially, services received out of Canada and in Quebec, as well as services excluded from the reciprocal billing agreement). The Reciprocal Billing File contains data on out-of-province or territory services processed by the Reciprocal Billing System. This means that each province and territory sends data on services their physicians provided to out-of-province or territory patients. Quebec does not participate in reciprocal billing arrangements.

Type of Data: Date of Service vs. Date of Payment

Generally, utilization data files are submitted on a date-of-payment basis for Newfoundland and Labrador, Prince Edward Island, New Brunswick, Manitoba and Saskatchewan, and on a date-of-service basis for Nova Scotia, Quebec, Ontario, Alberta, British Columbia and Yukon Territory. Jurisdictions submitting on a date-of-service basis wait six months, or until 98% of services are captured, before submitting data files for processing. Please see Table 1 for a yearly breakdown by province and territory of the type of data file submission.

Table 1. NPDB File Submission: Date of Service (DOS) vs. Date of Payment (DOP)

Province or Territory	2002–2003	
	DOS	DOP
N.L.		✓
P.E.I.		✓
N.S.	✓	
N.B.		✓
Que.	✓	
Ont.	✓	
Man.		✓
Sask.		✓
Alta.	✓	
B.C.	✓	
Y.T.	✓	

Type of Data: Billing vs. Payment Data

All jurisdictions, except Quebec, submit payment data. Billing data reflect the full amount the physician billed the provincial or territorial medical services plan for a particular fee code item. Payment data reflect what was actually paid to the physician. The amount paid would be the billed amount less any adjustments applied due to threshold values being met, income capping or clawbacks.

Starting with the 2001–2002 data year, payments for Ontario’s J, X and Y fee codes, with suffix B, are excluded from average payment results presented in this report. Appendix A provides background information on this change in methodology and also summarizes how average payment results are effected by the change.

Payment Mode: Level of Fee-for-Service Coverage

Average payment per physician results are based on fee-for-service payments only. A variety of alternative forms of payment, such as salary and sessional payments, are commonly used across jurisdictions. Alternative forms of reimbursement are currently not submitted comprehensively to the NPDB and are, therefore, not included in the statistics presented in this report.

Table 2 gives current estimates of fee-for-service and alternative payments made across provinces and territories. Alternative payment information is gathered from a variety of data sources, as noted above. The alternative payment information shown in Table 2 is not based on the limited and incomplete alternative payment data that is submitted to the NPDB. Fee-for-service payment amounts shown in Table 2 are based on the NPDB. Selection criteria have been applied to NPDB fee-for-service payment data to improve the cross-jurisdiction comparability of payment estimates shown in Table 2. As such, the total fee-for-service payment amounts shown in Table 2 should not be interpreted as the underlying data used for average payment results presented in this report.

Please note, each jurisdiction defines with its physician group, whether a service should be paid under a fee-for-service plan payment or an alternative plan payment. Thus, one jurisdiction may pay for a service through the fee-for-service plan, whereas, another jurisdiction may pay for the same service within an alternative plan which would not be captured in this report.

It is important to note that the range of physician payment information submitted to the National Physician Database varies across provinces and territories. In 2002–2003, fee-for-service medical care plan payments accounted for 94.7% of all NPDB payment information. In order to improve cross-jurisdiction comparison, only these payments, which are submitted by all jurisdictions, are included in calculations for CIHI’s Average Payment per Physician Report.

All other payment sources are excluded from average payment calculations. Among the excluded NPDB payment categories are salary and sessional payments (New Brunswick), rural retention premiums (British Columbia), contract payments (Yukon), workers compensation board payments (Quebec and British Columbia), insurance board payments (British Columbia) and midwife referral claims (British Columbia).

Table 2. Summary of Physician Payments by Type of Payment and Province/Territory, Fiscal 2001–2002 and 2002–2003, (\$'000)

2001–2002												
	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Y.T.	Total
Fee-for-Service	96,776	26,711	230,082	185,818	1,838,989	3,911,314	289,705	266,775	975,426	1,404,818	7,687	9,250,590
	61.1%	81.9%	69.8%	82.0%	79.2%	88.1%	65.8%	88.5%	93.2%	82.7%	95.3%	83.9%
Alternative	61,498	5,901	99,514	40,813	482,322	530,484	150,523	34,665	70,871	294,132	379	1,771,101
	38.9%	18.1%	30.2%	18.0%	20.8%	11.9%	34.2%	11.5%	6.8%	17.3%	4.7%	16.1%
2002–2003												
	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Y.T.	Total
Fee-for-Service	111,223	31,836	246,081	206,765	1,811,263	3,945,073	299,510	274,450	1,117,557	1,452,787	8,763	9,505,307
	63.3%	78.5%	68.4%	81.5%	77.4%	87.8%	64.1%	86.6%	91.4%	80.8%	91.9%	82.8%
Alternative	64,617	8,705	113,798	46,816	528,424	550,442	167,687	42,321	105,287	345,880	771	1,978,942
	36.7%	21.5%	31.6%	18.5%	22.6%	12.2%	35.9%	13.4%	8.6%	19.2%	8.1%	17.2%

Sources: Fee-for-service NPDB payments are based on data submitted to the National Physician Database, CIHI. Selection criteria have been applied to NPDB fee-for-service payment data to improve the proportional payment estimates shown. As such, the total fee-for-service payment amounts should not be interpreted as the underlying data used for average payment results presented in this report. Alternative payment information is gathered through provincial and territorial representatives of CIHI's Expert Group on Physician Databases, with the exception of Newfoundland and Labrador, Manitoba and Ontario in 2001–2002 and 2002–2003. Alternative payment information for Newfoundland and Labrador, Manitoba and Ontario was obtained from public accounts and estimates compiled in the CIHI National Health Expenditures Database for 2001–2002 and 2002–2003. The data are preliminary and subject to change.

Population Data

Canadian population figures used in this publication are compiled by the Demography Division of Statistics Canada. Statistics Canada prepares, by special request, estimates of the “covered population” for use with the NPDB data. The covered population reflects people who received medical services paid for by provincial and territorial medical insurance programs. The covered population is the total population less the members of the Canadian Armed Forces, the Royal Canadian Mounted Police and inmates in federal and provincial penitentiaries. These groups of people have their medical services covered by a federal medical insurance program. Estimates are for October 1 of the given year and are revised annually. See Appendix B for the net population data.

Note to Readers: Readers wishing further information on data provided through the cooperation of Statistics Canada may obtain copies of related publications by mail from: Publication Sales, Statistics Canada, Ottawa, Ontario K1A 0K9, by calling (613) 951-7277 or 1 800 267-6677 (toll free). Readers may also fax their order to (613) 951-1584.

Data Quality

Error/Validation Routines

The NPDB files are derived from provincial and territorial administrative systems, and edit checks are conducted on the data by the jurisdiction prior to processing the NPDB files. As CIHI has no control over these edit checks, all data files received by CIHI are processed through the NPDB error/validation routines. The error/validation routines are limited in scope because the data cannot be confirmed against the source. Error/validation routines include review of the total record counts, service counts and dollar amounts for each file, checking each value in the fields against acceptable values, checking for invalid fee codes, checking for Unique Physician Identifier (UPI) numbers with illogical formats and logical review of the processed data. Any files that do not pass through the error/validation routines are returned to the jurisdictions for correction and subsequent re-submission.

Additional Data Quality Checks

Service counts, dollar amounts and other economic indicators are validated against previous years’ data and provincial and territorial annual reports.

Data providers are given the opportunity to review their own data for validity and consistency. This publication was reviewed by the provincial and territorial medical insurance plan authorization officers prior to publication. For a complete list of these authorization officers, please see Appendix C.

Data Definitions

Fee-for-Service Physicians

A fee-for-service physician is defined as a physician who has billed at least one cent in the jurisdiction's fee-for-service payment plan. Only the payments from the fee-for-service payment plan are included in this report. For example, if a physician billed \$1 in the fee-for-service plan and received \$200,000 from an alternative payment plan, only the \$1 appears in this report.

Full-Time Equivalent Physicians

Full-time equivalent (FTE) physician counts are weighted physician counts. Physicians are weighted based on the total payments they receive. A physician's FTE value is calculated using his or her total payments in relation to set amounts that define upper and lower payment benchmarks for a medical specialty group within a jurisdiction. FTE values are calculated as follows:

$FTE_i = \text{total payments}_i / \text{lower benchmark}_j$	If physician i earns less than the lower benchmark value
$= 1$	If physician i earns an amount equal to or within the benchmark values
$= 1 + \log (\text{total payments}_i / \text{upper benchmark}_j)$	If physician i earns more than the upper benchmark value

where:

- "FTE_{*i*}" is the FTE value assigned to the *i*th physician
- "Total payments_{*i*}" is the sum of all payments made to the *i*th physician
- "Lower benchmark_{*j*}" is the lower benchmark value set for the physician specialty group within the province or territory of practice of the *i*th physician
- "Upper benchmark_{*j*}" is the upper benchmark value set for the physician specialty group within the jurisdiction of practice of the *i*th physician

Further details on FTE methodologies and calculations are given in CIHI's annual *Full-Time Equivalent Physicians Report, Canada*, available at no charge on CIHI's Web site (www.cihi.ca).

Province or Territory of Practice

"Province or territory of practice" is the jurisdiction where the physician is registered and receives payments from the provincial or territorial medical care plan. Physicians may practise in more than one jurisdiction in a given fiscal year. For example, the physician may move from one province to another during the fiscal year, or may provide services in two provinces on a regular basis (for example, a physician providing services in provincial border areas such as Ottawa-Gatineau). This can result in the double counting of physicians (except at the national level, where physician counts are not based on province or territory of practice).

It should be noted that in 2000–2001, Saskatchewan changed its policy allowing those physicians granted a locum license by the College of Physicians and Surgeons of Saskatchewan for more than eleven months to obtain their own billing number. The policy amendment also applied to locums for shorter periods of time where the College indicated the physicians' intent to establish a practice for a period of more than eleven months. This policy was further revised in April 2001, extending to all locums with the intent to practise for a period of more than three months. In previous years, these locum physicians would have billed through a sponsoring physician who had a billing number. This policy change has the effect of increasing the number of Saskatchewan physicians and full-time equivalent physicians, while at the same time reducing their average payment results.

Specialty

Physician specialty designations on the NPDB are assigned by the provincial and territorial medical care plans and grouped within the NPDB to a national equivalent. Of the two specialties (latest acquired certified specialty and plan payment specialty), the latter is used for the purposes of this report.

In three provinces, Nova Scotia, Quebec and British Columbia, data for public health specialists are reported in the family medicine figures. For all provinces and territories, uncertified specialists and community medicine are also grouped with family medicine, except in Ontario, where community medicine, public health, occupational medicine and pediatric cardiology are received as internal medicine specialties. Internal medicine includes the sub-specialties such as cardiology, gastroenterology, haematology, rheumatology, genetics and medical oncology. Psychiatry includes neuropsychiatry. Neurology includes EEG specialists, and physical medicine includes specialists in electromyography. Specialists in the double specialty of ophthalmology/otolaryngology are included with the ophthalmologists.

Additionally, the very few plastic surgeons and urologists in Prince Edward Island are grouped into the general surgery category for privacy and confidentiality reasons.

Physicians in Quebec may have two different statuses, which include two different specialties: one for in-province billings and one for billings outside Quebec. These two different statuses appear on the 35 File (Physician Characteristics File) as two different records with the same Unique Physician Identifier which results in duplicate records on the file as far as individual physicians are concerned. Only the second record is retained on the NPDB system. This results in incorrect specialty assignment for some payments. Approximately 100 physicians per year are affected by this incorrect assignment.

In 2001–2002, Saskatchewan changed how it paid foreign-certified specialists. Prior to April 2001, such physicians were grouped and paid in family medicine. Starting in April 2001, Saskatchewan's foreign-certified specialists are grouped with specialists and receive payments at 90% of specialist fee code rates and at 100% for fee codes with identical specialist/family medicine rates. As a result, some family medicine physicians are now grouped with specialist physicians, thus increasing the specialist physician count and reducing the family medicine physician count.

For a complete listing of the specialty designations and their groupings, please see Appendix D.

Unique Physician Identifier (UPI)

A unique identifier is created by the province or territory using components of the physician's first and last names (scrambled using an algorithm), date of birth, gender and place of graduation.

Computations

Counts

Two types of physician counts are presented in this report. They are counts based on FTE values and simple head counts. Physician count results are given in Table 5–1 and Table 5–2. These counts are used to calculate results for the two average payment series presented in this report: average payment per physician who received at least \$60,000 in payments and average payment per full-time equivalent physician.

The first series, average payment per physician who received at least \$60,000 in payments, uses simple head counts. In this case, all physicians who receive payments of at least \$60,000 are counted as one physician, regardless of their clinical activity level.

The second series, average payment per full-time equivalent physician, uses physicians' FTE values. FTE counts are the summation of physicians' FTE values. FTE totals can be less than, equal to or greater than simple head count values. FTE counts provide an estimate of physician numbers, adjusting for variations in clinical workload. Physicians with earnings below lower benchmark payment values are counted as less than one physician, while those with earnings above upper benchmark payment values are counted as more than one physician. Physicians with earnings within or equal to the payment benchmarks are counted as exactly one physician (see full-time equivalent physician definition).

Physicians who receive payments in more than one province or territory are included in the average payment calculations for each jurisdiction they work in. In calculating national-level average payment results, payments are summed for each physician who works in multiple jurisdictions. For example, a physician who earns \$50,000 in one province and \$50,000 in another province will be included in the average payment calculations of each province. He or she will contribute \$50,000 to the numerator of each provincial equation and 1 (or his or her province-specific FTE value, for the average payment per FTE series) to the denominator. For national level calculations, this doctor would contribute \$100,000 to the numerator and 1 (or the sum of his or her province-specific FTE values, for the average payment per FTE series) to the denominator.

Physicians who receive payments under more than one specialty designation, possibly in multiple provinces, are assigned exclusively to the specialty in which most of their payments have been made.

Average Payment

All average payment figures are created based on a fiscal year (April 1 to March 31). Figures released in annual provincial reports may differ if they use the calendar year rather than the fiscal year.

Average payment amounts are calculated as follows for the two data series:

Average payment per physician who received at least \$60,000 in payments

Average payment amounts are reported for each medical specialty group for each province. Average payment amounts are calculated as the sum of all payments made to physicians who receive at least \$60,000 in payments divided by the number of physicians who receive at least \$60,000 in payments.

Average payment per full-time equivalent fee-for-service physician

Average payment amounts are reported for each medical specialty group for each province. Average payment amounts are calculated as the sum of all payments made to physicians divided by the sum of all physician FTE values.

Data Limitations

Gross and Net Payments

Average payment figures presented in this report are not adjusted to account for overhead expenses incurred by physicians. Thus, average payment results reflect gross fee-for-service payments. Overhead expenses may vary across jurisdictions and across medical specialty groups. Other data sources, including the Canadian Medical Association's Physician Resource Questionnaire survey, may provide overhead expense information that can aid in the interpretation of average payment results presented in this report.

For individual physicians, gross income may include payments made through both fee-for-service and alternative payment systems. As noted above, the NPDB contains very limited alternative payment data. Therefore, average payment results presented in this report reflect gross fee-for-service income, but not additional payments stemming from alternative payment sources.

For further information on gross/net payments, alternative payments and overhead expenses please see CIHI's "Physician Databases Analytical Bulletin: Physician Expenditures, 2004:1", available at www.cihi.ca.

Specialty Designations

Provinces and territories are requested to provide two types of specialty information on the NPDB files—latest acquired certified specialty and payment plan specialty. The latest acquired certified specialty is the most recently acquired specialty designation from the Royal College of Physicians and Surgeons of Canada, the Collège des médecins du Québec or the College of Family Physicians of Canada. The payment plan specialty may or may not be different from the latest certified specialty and should reflect the specialty area in which the physician provides the majority of his or her services. The payment plan specialty is not provided by all provinces and territories.

For the purpose of this report, the payment plan specialty is used. Provinces and territories may provide latest certified specialty instead of plan payment specialty if they do not have that information available. The latest certified specialty may or may not coincide with specialty orientation of the work actually carried out by a physician.

Additionally, any physicians who practised under more than one specialty during the fiscal year were assigned the specialty under which they received the majority of their payments.

CIHI average payment per physician statistics may vary from provincial and territorial annual statistics because of differences in the way specialties are grouped. For example, CIHI groups neuropsychiatry in with psychiatry, whereas Quebec groups it with neurology. CIHI includes electromyography with physical medicine, whereas Quebec does not. The sub-specialties that constitute CIHI's internal medicine specialty are reported on individually in the Régie de l'assurance maladie du Québec annual statistics report. Please refer to Appendix D for the CIHI specialty groupings.

Radiology and Pathology (Laboratory) Physicians

Radiologists, pathologists and laboratory directors are excluded from this report. Payments for radiology and laboratory services performed by a physician, who is neither a radiologist, pathologist nor laboratory director, are included. Medical care plan fee payments to radiologists or pathologists are nil or very small in the four Atlantic provinces, relatively small in Quebec, but substantial in the other jurisdictions. Omitting such payments in all jurisdictions improves comparability. See Appendix E for information on the extent of fee-for-service payments for radiology and laboratory services that are included in the NPDB data files, but excluded from this report.

Privacy and Confidentiality

CIHI employs a variety of safeguards to protect the privacy and confidentiality of physician data. These include:

Unique Physician Identifier (UPI)

Physician names are not used on the provincial and territorial files. Instead, a Unique Physician Identifier (UPI) is generated by the province or territory using components of the physician's name, date of birth, gender and place of Medical Doctorate (M.D.) graduation. The name portion of the UPI is scrambled using an algorithm known only to the province or territory. The UPI helps protect the privacy and confidentiality of physicians and allows for the tracking of physicians throughout their career in Canada.

Data Suppression

In preparing the Average Payment per Physician Report for publication, CIHI suppresses data for medical specialty groups consisting of one to four physicians within a jurisdiction. Furthermore, if the application of selection criteria (i.e. physicians with earnings greater than \$60,000) produces physician groups between one and four, the corresponding data are also suppressed. Suppressed data are excluded from all average payment calculations within a jurisdiction. Therefore, in order to avoid residual disclosure, suppressed data are not included in column subtotals and totals.

Some physicians work in more than one jurisdiction and may have their information suppressed in one jurisdiction (where physician counts are between one and four) but not in another (where physician counts are greater than four). For physicians who work in multiple jurisdictions, and where their payments are included in the average payment results for at least one jurisdiction, their payments from all jurisdictions are included in results presented in the *Total* column. Again, this rule applies only to physicians who practice in multiple jurisdictions.

NPDB Data Access/Release Policy

The release of data from the NPDB is governed by the NPDB Data Access/Release Policy, which was established by the provincial and territorial ministries of health and is administered by CIHI. Depending on the type of client, the level of data aggregation, the province and territory and the indicator of interest, CIHI may not be able to release data to the client without prior approval from the province or territory. Additionally, any cell counts between one and four are suppressed and are aggregated to the next level. This policy is in place to help protect the privacy and confidentiality of the physicians.

CIHI Privacy and Confidentiality Policy

The release of any data from NPDB, whether as a regular product or as a custom request, is governed by CIHI's *Principles and Policies for the Protection of Personal Health Information and Policies for Institution-Identifiable Information*. Refer to CIHI's Web site (www.cihi.ca) for further information or to obtain a copy of the policies and procedures document.

Products and Services

There are three types of products that are generated from the NPDB—ad hoc requests, publications and special projects. Ad hoc requests are generally short queries that do not require major programming resources. Service counts and dollar amounts by specific fee codes or procedures are the most common forms of an ad hoc request. Most ad hoc requests can be handled through standard reports that are generated annually. The following series of publications, among others, are currently available:

- *Average Payment per Physician Report, Canada*
- *Full-Time Equivalent Physicians Report, Canada*
- *National Grouping System Categories Report, Canada*
- *Reciprocal Billing Report, Canada*

For details on publication years and reporting periods covered, please refer to the CIHI's Web site (www.cihi.ca).

Special projects require project planning and the commitment of extra resources. Please contact Health Human Resources at CIHI for costs associated with these products and services.

Data Tables

Table 1. Average Payment per Fee-for-Service Physician Who Received at Least \$60,000 in Payments by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	176,538	198,317	179,591	198,283	154,826	202,703	191,520	204,149	224,244	199,550	192,932
Medical Specialties	253,228	260,772	213,352	261,918	179,865	260,194	206,251	245,059	261,136	250,402	236,208
Internal Medicine	280,518	273,097	216,656	321,604	198,877	326,288	228,123	308,896	302,134	325,716	281,770
Neurology	171,612	*	252,574	247,239	184,536	247,750	210,733	231,601	215,925	273,354	226,947
Psychiatry	213,911	*	150,339	197,432	117,963	177,159	150,657	199,094	225,924	175,065	171,311
Pediatrics	196,196	*	177,261	224,267	164,810	225,313	181,177	150,499	205,056	209,656	201,315
Dermatology	268,446	*	386,992	261,829	233,482	292,459	231,847	*	503,018	315,835	292,491
Physical Medicine	n/a	n/a	169,043	*	166,112	192,552	171,437	*	142,581	168,381	177,417
Anesthesia	259,971	236,123	229,003	226,829	175,680	262,343	246,373	220,808	271,015	252,111	238,299
Surgical Specialties	292,048	321,872	351,002	347,139	223,028	340,052	317,693	339,796	413,230	343,998	316,495
General Surgery	252,887	325,342	318,563	357,312	204,588	312,841	301,628	290,106	372,181	306,248	288,284
Thoracic/Cardiovascular Surgery	*	n/a	355,788	451,590	303,909	413,684	416,641	401,925	651,381	401,730	405,245
Urology	353,968	*	331,930	329,182	242,986	345,030	257,417	308,155	382,517	396,263	326,346
Orthopedic Surgery	251,097	*	332,774	271,657	183,363	319,846	295,536	317,573	321,936	276,762	277,619
Plastic Surgery	*	†	355,309	292,274	162,350	270,966	370,151	258,679	357,041	252,742	258,184
Neurosurgery	*	n/a	*	*	128,213	371,706	*	*	288,647	374,657	281,354
Ophthalmology	350,801	292,861	428,698	466,315	272,856	422,793	422,556	510,428	584,357	481,937	411,262
Otolaryngology	401,212	*	344,472	379,685	241,671	338,364	236,814	351,073	519,966	314,379	318,765
Obstetrics/Gynecology	252,849	343,942	319,868	295,745	233,107	334,925	296,806	313,913	386,242	298,402	304,974
Total Specialties	268,756	292,930	281,239	302,350	195,369	286,669	242,967	284,948	312,072	283,632	264,434
Total Physicians	216,385	228,529	221,234	242,364	174,597	242,937	218,172	236,812	259,488	233,421	225,600

Source: NPDB, CIHI

† Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 2. Average Payment per Full-Time Equivalent Fee-for-Service Physician by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	155,174	150,779	191,164	207,506	153,739	183,448	177,212	181,845	238,182	227,245	188,344
Medical Specialties	209,072	221,111	237,740	240,864	163,592	225,357	194,650	226,864	269,569	259,833	215,712
Internal Medicine	224,200	248,789	258,228	273,468	199,832	289,831	239,704	273,980	300,023	317,461	264,356
Neurology	161,388	*	255,934	189,576	158,892	224,050	196,974	175,879	245,558	287,652	207,680
Psychiatry	154,046	185,640	151,584	184,834	87,980	146,079	135,418	161,069	194,698	194,484	143,327
Pediatrics	139,188	46,937	207,420	203,890	140,689	175,774	147,322	167,828	216,741	221,693	173,515
Dermatology	297,173	*	493,185	360,080	236,970	289,319	257,370	336,961	418,598	356,415	293,321
Physical Medicine	n/a	n/a	218,590	138,660	106,345	162,900	143,330	130,811	212,539	243,070	154,032
Anesthesia	260,171	317,121	251,669	243,800	188,185	251,593	232,786	223,630	378,614	252,816	245,698
Surgical Specialties	279,955	315,754	365,898	353,959	246,071	322,459	329,081	317,144	428,919	414,361	324,752
General Surgery	228,236	296,137	326,429	340,860	241,419	300,975	296,600	308,280	397,235	365,475	300,750
Thoracic/Cardiovascular Surgery	393,073	n/a	373,331	490,236	312,535	454,124	408,566	426,069	618,735	471,453	430,398
Urology	339,422	*	376,302	380,116	259,463	333,018	372,976	333,742	420,991	431,567	336,220
Orthopedic Surgery	250,585	308,936	334,233	296,086	205,523	297,045	301,434	273,894	377,020	353,179	289,295
Plastic Surgery	250,239	†	321,749	302,395	182,657	248,054	291,458	254,759	380,450	280,165	257,917
Neurosurgery	*	n/a	*	252,257	150,424	288,331	*	242,185	324,907	371,075	269,661
Ophthalmology	410,156	414,314	453,585	443,352	283,807	390,097	475,844	396,366	568,166	559,915	408,993
Otolaryngology	315,270	*	411,049	373,044	266,087	341,079	326,642	295,226	466,460	403,471	335,289
Obstetrics/Gynecology	242,626	298,531	331,478	313,568	250,778	318,556	290,943	299,206	381,276	398,610	311,669
Total Specialties	236,237	268,029	302,032	291,312	188,737	255,381	235,423	264,377	322,204	309,256	250,753
Total Physicians	190,026	187,287	235,923	244,618	171,033	217,945	206,536	214,636	272,381	260,918	217,187

Source: NPDB, CIHI

† Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Based on gross payments.

Base year 2000–2001.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 3-1. Average Payment per Fee-for-Service Physician Who Received at Least \$60,000 in Payments by Type of Practice, 2002-2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	176,538	198,317	179,591	198,283	154,826	202,703	191,520	204,149	224,244	199,550	192,932
Medical Specialties	253,228	260,772	213,352	261,918	179,865	260,194	206,251	245,059	261,136	250,402	236,208
Surgical Specialties	292,048	321,872	351,002	347,139	223,028	340,052	317,693	339,796	413,230	343,998	316,495
Total Specialties	268,756	292,930	281,239	302,350	195,369	286,669	242,967	284,948	312,072	283,632	264,434
Total Physicians	216,385	228,529	221,234	242,364	174,597	242,937	218,172	236,812	259,488	233,421	225,600

Source: NPDB, CIHI

Table 3-2. Percent Change in Average Payment per Fee-for-Service Physician Who Received Payments at Least \$60,000 in Payments From 2001-2002 to 2002-2003 by Type of Practice

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	3.56	-2.93	6.67	8.82	1.65	-0.52	1.38	3.61	9.21	-1.12	1.56
Medical Specialties	3.44	15.85	4.00	6.40	-1.03	2.11	3.66	2.65	14.97	3.33	3.04
Surgical Specialties	-3.01	10.73	4.14	12.81	-3.27	1.80	3.11	4.10	11.70	3.49	2.44
Total Specialties	0.61	13.24	4.56	9.48	-1.97	2.00	3.61	3.34	14.10	3.14	2.80
Total Physicians	2.01	2.67	5.50	8.89	-0.30	1.09	2.64	3.65	11.13	0.98	2.28

Source: NPDB, CIHI

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 3–3. Average Payment per Full-Time Equivalent Fee-for-Service Physician by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	155,174	150,779	191,164	207,506	153,739	183,448	177,212	181,845	238,182	227,245	188,344
Medical Specialties	209,072	221,111	237,740	240,864	163,592	225,357	194,650	226,864	269,569	259,833	215,712
Surgical Specialties	279,955	315,754	365,898	353,959	246,071	322,459	329,081	317,144	428,919	414,361	324,752
Total Specialties	236,237	268,029	302,032	291,312	188,737	255,381	235,423	264,377	322,204	309,256	250,753
Total Physicians	190,026	187,287	235,923	244,618	171,033	217,945	206,536	214,636	272,381	260,918	217,187

Source: NPDB, CIHI

Table 3–4. Percent Change in Average Payment per Full-Time Equivalent Fee-for-Service Physician From 2001–2002 to 2002–2003 by Type of Practice

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	4.12	-0.85	5.35	6.01	3.07	1.12	1.90	4.09	11.87	1.18	3.17
Medical Specialties	3.87	2.75	3.55	5.92	0.00	2.75	2.96	2.95	16.01	3.30	3.57
Surgical Specialties	-2.17	2.79	3.78	5.70	-0.50	2.59	1.40	3.81	12.73	3.55	3.35
Total Specialties	2.12	3.18	4.04	5.94	-0.41	2.69	2.72	3.28	15.23	3.05	3.47
Total Physicians	3.02	1.41	4.47	5.80	1.19	2.25	2.46	4.10	13.21	2.30	3.45

Source: NPDB, CIHI

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 4–1. Average Payment per Physician by Category of Payment, 2002–2003

Family Medicine

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	176,538	198,317	179,591	198,283	154,826	202,703	191,520	204,149	224,244	199,550	192,932
Full-Time Equivalent Fee-for-Service Physicians	155,174	150,779	191,164	207,506	153,739	183,448	177,212	181,845	238,182	227,245	188,344

Source: NPDB, CIHI

Table 4–2. Average Payment per Physician by Category of Payment, 2002–2003

Medical Specialties

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	253,228	260,772	213,352	261,918	179,865	260,194	206,251	245,059	261,136	250,402	236,208
Full-Time Equivalent Fee-for-Service Physicians	209,072	221,111	237,740	240,864	163,592	225,357	194,650	226,864	269,569	259,833	215,712

Source: NPDB, CIHI

Table 4–3. Average Payment per Physician by Category of Payment, 2002–2003

Internal Medicine

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	280,518	273,097	216,656	321,604	198,877	326,288	228,123	308,896	302,134	325,716	281,770
Full-Time Equivalent Fee-for-Service Physicians	224,200	248,789	258,228	273,468	199,832	289,831	239,704	273,980	300,023	317,461	264,356

Source: NPDB, CIHI

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 4–4. Average Payment per Physician by Category of Payment, 2002–2003**Neurology**

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	171,612	*	252,574	247,239	184,536	247,750	210,733	231,601	215,925	273,354	226,947
Full-Time Equivalent Fee-for-Service Physicians	161,388	*	255,934	189,576	158,892	224,050	196,974	175,879	245,558	287,652	207,680

Source: NPDB, CIHI

Table 4–5. Average Payment per Physician by Category of Payment, 2002–2003**Psychiatry**

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	213,911	*	150,339	197,432	117,963	177,159	150,657	199,094	225,924	175,065	171,311
Full-Time Equivalent Fee-for-Service Physicians	154,046	185,640	151,584	184,834	87,980	146,079	135,418	161,069	194,698	194,484	143,327

Source: NPDB, CIHI

Table 4–6. Average Payment per Physician by Category of Payment, 2002–2003**Pediatrics**

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	196,196	*	177,261	224,267	164,810	225,313	181,177	150,499	205,056	209,656	201,315
Full-Time Equivalent Fee-for-Service Physicians	139,188	46,937	207,420	203,890	140,689	175,774	147,322	167,828	216,741	221,693	173,515

Source: NPDB, CIHI

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 4–7. Average Payment per Physician by Category of Payment, 2002–2003

Dermatology

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	268,446	*	386,992	261,829	233,482	292,459	231,847	*	503,018	315,835	292,491
Full-Time Equivalent Fee-for-Service Physicians	297,173	*	493,185	360,080	236,970	289,319	257,370	336,961	418,598	356,415	293,321

Source: NPDB, CIHI

Table 4–8. Average Payment per Physician by Category of Payment, 2002–2003

Physical Medicine

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	n/a	n/a	169,043	*	166,112	192,552	171,437	*	142,581	168,381	177,417
Full-Time Equivalent Fee-for-Service Physicians	n/a	n/a	218,590	138,660	106,345	162,900	143,330	130,811	212,539	243,070	154,032

Source: NPDB, CIHI

Table 4–9. Average Payment per Physician by Category of Payment, 2002–2003

Anesthesia

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	259,971	236,123	229,003	226,829	175,680	262,343	246,373	220,808	271,015	252,111	238,299
Full-Time Equivalent Fee-for-Service Physicians	260,171	317,121	251,669	243,800	188,185	251,593	232,786	223,630	378,614	252,816	245,698

Source: NPDB, CIHI

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 4–10. Average Payment per Physician by Category of Payment, 2002–2003**Surgical Specialties**

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	292,048	321,872	351,002	347,139	223,028	340,052	317,693	339,796	413,230	343,998	316,495
Full-Time Equivalent Fee-for-Service Physicians	279,955	315,754	365,898	353,959	246,071	322,459	329,081	317,144	428,919	414,361	324,752

Source: NPDB, CIHI

Table 4–11. Average Payment per Physician by Category of Payment, 2002–2003**General Surgery**

	N.L.	P.E.I. [†]	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	252,887	325,342	318,563	357,312	204,588	312,841	301,628	290,106	372,181	306,248	288,284
Full-Time Equivalent Fee-for-Service Physicians	228,236	296,137	326,429	340,860	241,419	300,975	296,600	308,280	397,235	365,475	300,750

Source: NPDB, CIHI

Table 4–12. Average Payment per Physician by Category of Payment, 2002–2003**Thoracic/Cardiovascular Surgery**

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	*	n/a	355,788	451,590	303,909	413,684	416,641	401,925	651,381	401,730	405,245
Full-Time Equivalent Fee-for-Service Physicians	393,073	n/a	373,331	490,236	312,535	454,124	408,566	426,069	618,735	471,453	430,398

Source: NPDB, CIHI

[†] Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 4–13. Average Payment per Physician by Category of Payment, 2002–2003

Urology

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	353,968	*	331,930	329,182	242,986	345,030	257,417	308,155	382,517	396,263	326,346
Full-Time Equivalent Fee-for-Service Physicians	339,422	*	376,302	380,116	259,463	333,018	372,976	333,742	420,991	431,567	336,220

Source: NPDB, CIHI

Table 4–14. Average Payment per Physician by Category of Payment, 2002–2003

Orthopedic Surgery

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	251,097	*	332,774	271,657	183,363	319,846	295,536	317,573	321,936	276,762	277,619
Full-Time Equivalent Fee-for-Service Physicians	250,585	308,936	334,233	296,086	205,523	297,045	301,434	273,894	377,020	353,179	289,295

Source: NPDB, CIHI

Table 4–15. Average Payment per Physician by Category of Payment, 2002–2003

Plastic Surgery

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	*	†	355,309	292,274	162,350	270,966	370,151	258,679	357,041	252,742	258,184
Full-Time Equivalent Fee-for-Service Physicians	250,239	†	321,749	302,395	182,657	248,054	291,458	254,759	380,450	280,165	257,917

Source: NPDB, CIHI

† Prince Edward Island plastic surgeons are included with general surgeons.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 4–16. Average Payment per Physician by Category of Payment, 2002–2003**Neurosurgery**

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	*	n/a	*	*	128,213	371,706	*	*	288,647	374,657	281,354
Full-Time Equivalent Fee-for-Service Physicians	*	n/a	*	252,257	150,424	288,331	*	242,185	324,907	371,075	269,661

Source: NPDB, CIHI

Table 4–17. Average Payment per Physician by Category of Payment, 2002–2003**Ophthalmology**

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	350,801	292,861	428,698	466,315	272,856	422,793	422,556	510,428	584,357	481,937	411,262
Full-Time Equivalent Fee-for-Service Physicians	410,156	414,314	453,585	443,352	283,807	390,097	475,844	396,366	568,166	559,915	408,993

Source: NPDB, CIHI

Table 4–18. Average Payment per Physician by Category of Payment, 2002–2003**Otolaryngology**

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	401,212	*	344,472	379,685	241,671	338,364	236,814	351,073	519,966	314,379	318,765
Full-Time Equivalent Fee-for-Service Physicians	315,270	*	411,049	373,044	266,087	341,079	326,642	295,226	466,460	403,471	335,289

Source: NPDB, CIHI

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 4–19. Average Payment per Physician by Category of Payment, 2002–2003

Obstetrics/Gynecology

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	252,849	343,942	319,868	295,745	233,107	334,925	296,806	313,913	386,242	298,402	304,974
Full-Time Equivalent Fee-for-Service Physicians	242,626	298,531	331,478	313,568	250,778	318,556	290,943	299,206	381,276	398,610	311,669

Source: NPDB, CIHI

Table 4–20. Average Payment per Physician by Category of Payment, 2002–2003

Total Specialties

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	268,756	292,930	281,239	302,350	195,369	286,669	242,967	284,948	312,072	283,632	264,434
Full-Time Equivalent Fee-for-Service Physicians	236,237	268,029	302,032	291,312	188,737	255,381	235,423	264,377	322,204	309,256	250,753

Source: NPDB, CIHI

Table 4–21. Average Payment per Physician by Category of Payment, 2002–2003

Total Physicians

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians Who Received at Least \$60,000 in Payments	216,385	228,529	221,234	242,364	174,597	242,937	218,172	236,812	259,488	233,421	225,600
Full-Time Equivalent Fee-for-Service Physicians	190,026	187,287	235,923	244,618	171,033	217,945	206,536	214,636	272,381	260,918	217,187

Source: NPDB, CIHI

Notes

Please refer to Tables 1 and 2 for detailed notes by province and series.
 Base year 2000–2001.
 Based on gross payments.
 Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 5–1. Fee-for-Service Physician Counts of Physicians Who Received at Least \$60,000 in Payments by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	276	81	634	479	5,089	8,400	641	672	2,535	3,666	22,449
Medical Specialties	126	18	223	185	3,104	5,166	462	264	1,130	1,595	12,245
Internal Medicine	57	12	71	71	1,409	2,033	161	109	340	502	4,751
Neurology	5	*	7	12	148	168	14	13	45	66	477
Psychiatry	16	*	41	23	452	1,343	101	34	271	451	2,732
Pediatrics	14	*	18	20	365	569	68	37	182	171	1,442
Dermatology	6	n/a	11	7	165	154	12	*	33	54	437
Physical Medicine	n/a	n/a	6	*	51	112	11	*	21	30	231
Anesthesia	28	6	69	52	514	787	95	71	238	321	2,175
Surgical Specialties	84	20	217	167	1,740	2,562	227	192	569	878	6,639
General Surgery	21	10	49	32	415	619	55	53	124	161	1,534
Thoracic/Cardiovascular Surgery	*	n/a	14	9	58	58	14	9	21	55	237
Urology	7	*	21	16	131	200	15	15	36	64	500
Orthopedic Surgery	14	*	27	30	241	355	35	27	98	139	965
Plastic Surgery	*	†	10	12	85	143	11	13	40	53	367
Neurosurgery	*	n/a	*	*	44	46	*	*	19	28	138
Ophthalmology	13	5	47	25	255	368	29	29	83	158	1,009
Otolaryngology	9	*	10	14	161	200	17	12	34	70	524
Obstetrics/Gynecology	20	5	39	29	350	573	51	34	114	150	1,365
Total Specialties	210	38	440	352	4,844	7,728	689	456	1,699	2,473	18,884
Total Physicians	486	119	1,074	831	9,933	16,128	1,330	1,128	4,234	6,139	41,333

Source: NPDB, CIHI

† Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Note

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 5–2. Full-Time Equivalent Fee-for-Service Physician Counts by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	333.59	111.40	621.77	474.61	5,365.71	9,583.98	721.33	779.16	2,433.06	3,312.34	23,736.95
Medical Specialties	155.17	25.40	209.79	208.95	3,643.59	6,100.97	510.18	300.22	1,118.43	1,569.41	13,842.11
Internal Medicine	72.09	13.53	62.70	85.46	1,455.46	2,325.28	162.41	125.42	350.49	521.28	5,174.12
Neurology	5.55	*	7.13	15.65	182.83	190.51	15.68	17.35	41.16	64.50	540.36
Psychiatry	22.63	3.44	46.06	26.78	800.92	1,706.35	118.59	43.71	320.46	419.33	3,508.27
Pediatrics	21.38	3.93	16.24	23.76	463.38	757.77	88.05	34.76	179.86	169.94	1,759.07
Dermatology	5.42	*	8.77	5.09	165.46	157.30	10.81	4.43	39.67	48.59	445.54
Physical Medicine	n/a	n/a	4.64	3.47	85.64	137.23	13.55	3.70	14.88	22.25	285.36
Anesthesia	28.10	4.50	64.25	48.74	489.90	826.53	101.09	70.85	171.91	323.52	2,129.39
Surgical Specialties	96.42	24.97	211.19	168.26	1,597.94	2,730.84	222.10	213.43	551.65	737.97	6,554.77
General Surgery	23.75	11.04	48.58	34.00	359.16	652.36	57.04	50.90	117.02	137.30	1,491.15
Thoracic/Cardiovascular Surgery	2.25	n/a	13.51	8.38	56.54	53.10	14.43	8.49	22.20	46.97	225.87
Urology	7.30	*	18.55	13.98	123.39	208.79	10.56	13.85	32.71	59.07	488.20
Orthopedic Surgery	14.32	4.37	27.45	27.87	219.46	387.65	35.09	31.47	84.72	110.40	942.80
Plastic Surgery	4.97	†	11.22	11.76	76.86	157.83	13.97	13.20	37.77	48.78	376.36
Neurosurgery	*	n/a	*	3.31	39.43	60.24	*	6.86	17.14	28.36	155.34
Ophthalmology	11.38	3.55	44.75	26.44	246.82	401.10	25.76	37.49	85.47	137.08	1,019.84
Otolaryngology	11.53	*	8.63	14.25	146.90	199.80	12.49	14.27	37.90	55.09	500.86
Obstetrics/Gynecology	20.92	6.01	38.50	28.27	329.38	609.97	52.76	36.90	116.72	114.92	1,354.35
Total Specialties	251.59	50.37	420.98	377.21	5,241.53	8,831.81	732.28	513.65	1,670.08	2,307.38	20,396.88
Total Physicians	585.18	161.77	1,042.75	851.82	10,607.24	18,415.79	1,453.61	1,292.81	4,103.14	5,619.72	44,133.83

Source: NPDB, CIHI

† Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 6–1. Population per Fee-for-Service Physician Who Received at Least \$60,000 in Payments by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	1,879	1,693	1,460	1,555	1,463	1,443	1,799	1,477	1,229	1,121	1,392
Medical Specialties	4,116	7,617	4,151	4,027	2,398	2,346	2,495	3,759	2,756	2,577	2,553
Internal Medicine	9,098	11,425	13,038	10,493	5,283	5,961	7,161	9,104	9,160	8,189	6,579
Neurology	103,720	*	132,243	62,083	50,291	72,130	82,350	76,331	69,209	62,289	65,531
Psychiatry	32,413	*	22,578	32,391	16,467	9,023	11,415	29,185	11,492	9,116	11,442
Pediatrics	37,043	*	51,428	37,250	20,392	21,297	16,954	26,819	17,112	24,042	21,677
Dermatology	86,433	*	84,155	106,429	45,110	78,688	96,075	*	94,376	76,131	71,529
Physical Medicine	n/a	n/a	154,283	*	145,943	108,196	104,809	*	148,305	137,037	135,317
Anesthesia	18,521	22,850	13,416	14,327	14,481	15,398	12,136	13,976	13,086	12,807	14,372
Surgical Specialties	6,174	6,855	4,266	4,461	4,278	4,730	5,079	5,168	5,473	4,682	4,708
General Surgery	24,695	13,710	18,892	23,281	17,935	19,577	20,962	18,723	25,116	25,535	20,377
Thoracic/Cardiovascular Surgery	*	n/a	66,121	82,778	128,329	208,929	82,350	110,256	148,305	74,747	131,891
Urology	74,086	*	44,081	46,563	56,818	60,590	76,860	66,153	86,511	64,236	62,516
Orthopedic Surgery	37,043	*	34,285	24,833	30,884	34,135	32,940	36,752	31,780	29,576	32,392
Plastic Surgery	*	†	92,570	62,083	87,566	84,741	104,809	76,331	77,860	77,568	85,172
Neurosurgery	*	n/a	*	*	169,161	263,433	*	*	163,916	146,825	226,509
Ophthalmology	39,892	27,420	19,696	29,800	29,189	32,929	39,755	34,217	37,523	26,020	30,979
Otolaryngology	57,622	*	92,570	53,214	46,230	60,590	67,818	82,692	91,600	58,730	59,653
Obstetrics/Gynecology	25,930	27,420	23,736	25,690	21,266	21,148	22,606	29,185	27,319	27,407	22,900
Total Specialties	2,470	3,608	2,104	2,116	1,537	1,568	1,673	2,176	1,833	1,662	1,655
Total Physicians	1,067	1,152	862	897	749	751	867	880	736	670	756

Source: NPDB, CIHI

† Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Net population figures are used to calculate these figures.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 6–2. Population per Full-Time Equivalent Fee-for-Service Physician by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	1,555	1,231	1,489	1,570	1,387	1,264	1,598	1,274	1,280	1,241	1,317
Medical Specialties	3,342	5,398	4,413	3,565	2,043	1,986	2,260	3,305	2,785	2,620	2,258
Internal Medicine	7,194	10,133	14,764	8,718	5,114	5,211	7,099	7,912	8,886	7,887	6,041
Neurology	93,441	*	129,832	47,604	40,710	63,608	73,527	57,193	75,666	63,738	57,847
Psychiatry	22,916	39,855	20,098	27,819	9,293	7,102	9,722	22,702	9,719	9,804	8,910
Pediatrics	24,256	34,885	57,001	31,355	16,063	15,992	13,094	28,547	17,316	24,191	17,770
Dermatology	95,683	*	105,553	146,365	44,984	77,037	106,651	223,995	78,508	84,608	70,158
Physical Medicine	n/a	n/a	199,504	214,697	86,911	88,304	85,085	268,189	209,301	184,769	109,540
Anesthesia	18,456	30,467	14,408	15,285	15,193	14,661	11,405	14,006	18,116	12,707	14,679
Surgical Specialties	5,379	5,491	4,383	4,428	4,658	4,437	5,191	4,649	5,646	5,571	4,769
General Surgery	21,836	12,418	19,055	21,912	20,724	18,575	20,212	19,495	26,614	29,942	20,962
Thoracic/Cardiovascular Surgery	230,489	n/a	68,520	88,902	131,643	228,209	79,896	116,879	140,288	87,526	138,390
Urology	71,041	*	49,903	53,290	60,322	58,039	109,176	71,646	95,212	69,597	64,027
Orthopedic Surgery	36,215	31,373	33,723	26,731	33,916	31,260	32,856	31,532	36,761	37,238	33,155
Plastic Surgery	104,346	†	82,504	63,350	96,840	76,778	82,527	75,174	82,457	84,278	83,054
Neurosurgery	*	n/a	*	225,076	188,767	201,160	*	144,650	181,704	144,961	201,224
Ophthalmology	45,571	38,620	20,686	28,177	30,156	30,212	44,755	26,468	36,439	29,991	30,650
Otolaryngology	44,978	*	107,265	52,281	50,668	60,650	92,306	69,537	82,174	74,625	62,409
Obstetrics/Gynecology	24,790	22,812	24,044	26,353	22,597	19,866	21,852	26,892	26,683	35,774	23,080
Total Specialties	2,061	2,722	2,199	1,975	1,420	1,372	1,574	1,932	1,865	1,782	1,532
Total Physicians	886	847	888	875	702	658	793	768	759	732	708

† Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Net population figures are used to calculate these figures.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 7–1. Fee-for-Service Physicians Who Received at Least \$60,000 in Payments per 100,000 Population by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	53	59	68	64	68	69	56	68	81	89	72
Medical Specialties	24	13	24	25	42	43	40	27	36	39	39
Internal Medicine	11	9	8	10	19	17	14	11	11	12	15
Neurology	1	*	1	2	2	1	1	1	1	2	2
Psychiatry	3	*	4	3	6	11	9	3	9	11	9
Pediatrics	3	*	2	3	5	5	6	4	6	4	5
Dermatology	1	*	1	1	2	1	1	*	1	1	1
Physical Medicine	n/a	n/a	1	*	1	1	1	*	1	1	1
Anesthesia	5	4	7	7	7	6	8	7	8	8	7
Surgical Specialties	16	15	23	22	23	21	20	19	18	21	21
General Surgery	4	7	5	4	6	5	5	5	4	4	5
Thoracic/Cardiovascular Surgery	*	n/a	2	1	1	0	1	1	1	1	1
Urology	1	*	2	2	2	2	1	2	1	2	2
Orthopedic Surgery	3	*	3	4	3	3	3	3	3	3	3
Plastic Surgery	*	†	1	2	1	1	1	1	1	1	1
Neurosurgery	*	n/a	*	*	1	0	*	*	1	1	0
Ophthalmology	3	4	5	3	3	3	3	3	3	4	3
Otolaryngology	2	*	1	2	2	2	1	1	1	2	2
Obstetrics/Gynecology	4	4	4	4	5	5	4	3	4	4	4
Total Specialties	40	28	48	47	65	64	60	46	55	60	60
Total Physicians	94	87	116	112	133	133	115	114	136	149	132

Source: NPDB, CIHI

† Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Net population figures are used to calculate these figures.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Table 7–2. Full-Time Fee-for-Service Equivalent Physicians per 100,000 Population by Type of Practice, 2002–2003

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	64	81	67	64	72	79	63	79	78	81	76
Medical Specialties	30	19	23	28	49	50	44	30	36	38	44
Internal Medicine	14	10	7	11	20	19	14	13	11	13	17
Neurology	1	*	1	2	2	2	1	2	1	2	2
Psychiatry	4	3	5	4	11	14	10	4	10	10	11
Pediatrics	4	3	2	3	6	6	8	4	6	4	6
Dermatology	1	*	1	1	2	1	1	0	1	1	1
Physical Medicine	n/a	n/a	1	0	1	1	1	0	0	1	1
Anesthesia	5	3	7	7	7	7	9	7	6	8	7
Surgical Specialties	19	18	23	23	21	23	19	22	18	18	21
General Surgery	5	8	5	5	5	5	5	5	4	3	5
Thoracic/Cardiovascular Surgery	0	n/a	1	1	1	0	1	1	1	1	1
Urology	1	*	2	2	2	2	1	1	1	1	2
Orthopedic Surgery	3	3	3	4	3	3	3	3	3	3	3
Plastic Surgery	1	†	1	2	1	1	1	1	1	1	1
Neurosurgery	*	n/a	*	0	1	0	*	1	1	1	0
Ophthalmology	2	3	5	4	3	3	2	4	3	3	3
Otolaryngology	2	*	1	2	2	2	1	1	1	1	2
Obstetrics/Gynecology	4	4	4	4	4	5	5	4	4	3	4
Total Specialties	49	37	45	51	70	73	64	52	54	56	65
Total Physicians	113	118	113	114	143	152	126	130	132	137	141

Source: NPDB, CIHI

† Prince Edward Island plastic surgeons are included with general surgeons.

n/a = Not Applicable—There were no physicians for this specialty for this province.

* Data have been suppressed. Please see Methodological Notes, Data Suppression section for details.

Notes

Net population figures are used to calculate these figures.

Base year 2000–2001.

Based on gross payments.

Alternative forms of reimbursement, such as salary and sessional, are not included.

Appendix A

Impact of Excluding Ontario's Payments for J, X and Y Fee Codes With Suffix B

Impact of Excluding Ontario's Payments for J, X and Y Fee Codes With Suffix B

In 2001, 94% of physicians payment claims for Ontario's J, X and Y fee codes, with suffix B, were paid directly to independent health facilities or hospital departments. While claims for these fee codes include an associated physician identifier, payments for the claims are not typically paid directly to physicians.

Starting with the 2001–2002 data year, the methodology used to calculate average payment results in Ontario was updated to exclude payments related to fee codes J, X and Y, with suffix B. In 2002–2003 these fee codes accounted for approximately \$112.5 million (2.5%) of Ontario's total publishable fee-for-service payments. Table A summarizes the impact of excluding these payments from average payment results for the year 2002–2003.

Table A. Percent Reduction in Average Payment per Physician Results Due to Exclusion of Payments for Ontario Fee Codes J, X and Y (with suffix B), by Specialty, 2002–2003

	Ontario		Total	
	Physicians Who Received Payments > \$60,000	Average Payment per FTE Physician	Physicians Who Received Payments > \$60,000	Average Payment per FTE Physician
Family Medicine	0.88%	0.54%	0.35%	0.21%
Medical Specialties	5.03%	3.17%	2.42%	1.54%
Internal Medicine	8.39%	4.55%	4.41%	2.54%
Neurology	3.97%	1.98%	1.56%	0.83%
Psychiatry	2.73%	2.02%	1.33%	1.02%
Pediatrics	0.75%	0.32%	0.34%	0.14%
Dermatology	0.00%	0.00%	0.00%	0.00%
Physical Medicine	0.53%	0.10%	0.28%	0.06%
Anesthesia	0.07%	0.03%	0.03%	0.01%
Surgical Specialties	2.30%	0.94%	0.97%	0.39%
General Surgery	2.47%	1.07%	1.09%	0.48%
Thoracic/Cardiovascular Surgery	5.06%	2.30%	1.31%	0.63%
Urology	0.68%	0.21%	0.29%	0.09%
Orthopedic Surgery	0.76%	0.37%	0.33%	0.16%
Plastic Surgery	0.11%	0.06%	0.04%	0.02%
Neurosurgery	2.22%	0.43%	0.99%	0.23%
Ophthalmology	1.60%	0.52%	0.61%	0.18%
Otolaryngology	3.45%	1.42%	1.43%	0.60%
Obstetrics/Gynecology	3.82%	1.45%	1.83%	0.71%
Total Specialties	3.97%	2.27%	1.81%	1.04%
Total Physicians	2.67%	1.65%	1.14%	0.70%

Source: NPDB, CIHI

Appendix B

Net Population Estimates

Table B. Statistics Canada Net Population Estimates, 2001–2002 to 2002–2003

Year		N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
2001–2002	(PR)	532.4	139.1	934.8	750.7	7,416.8	11,924.6	1,144.4	1,012.7	3,065.5	4,102.8	31,023.8
2002–2003	(PR)	518.6	137.1	925.7	745.0	7,443.1	12,117.9	1,152.9	992.3	3,114.4	4,111.1	31,258.2

Notes: Net population estimates are produced by excluding from total estimates the members of the Royal Canadian Mounted Police, the Canadian Armed Forces personnel and the number of inmates in federal and provincial institutions.

PR=Updated postcensal estimates.

The estimates for 2001–2002 data are based on 1996 census counts, adjusted for net census undercoverage.

The estimates for 2002–2003 data are based on 2001 census counts, adjusted for net census undercoverage.

These figures have been rounded independently to the nearest hundred.

Appendix C

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NPDB Authorization Officers

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Appendix D

NPDB Specialty Categories

NPDB Physician Specialty Categories

- 01 ***Family Medicine***
 - 010 Residency
 - 011 General practice
 - 012 Family practice
 - 013 Community medicine/public health
 - 014 Emergency medicine

Medical Specialties

- 02 ***Internal Medicine***
 - 020 General internal medicine
 - 021 Cardiology
 - 022 Gastroenterology
 - 023 Respiratory medicine
 - 024 Endocrinology
 - 025 Nephrology
 - 026 Hematology
 - 027 Rheumatology
 - 028 Clinical immunology and allergy
 - 030 Oncology
 - 031 Geriatrics
 - 032 Tropical medicine
 - 035 Genetics
- 04 ***Neurology***
 - 040 Neurology and EEG
 - 041 Neurology
 - 042 EEG
- 05 ***Psychiatry***
 - 050 Psychiatry and neuropsychiatry
 - 051 Psychiatry
 - 052 Neuropsychiatry
- 06 ***Pediatrics***
 - 060 Pediatrics
- 07 ***Dermatology***
 - 065 Dermatology
- 08 ***Physical Medicine/Rehabilitation***
 - 070 Physical medicine and rehabilitation
 - 071 Electromyography
- 09 ***Anesthesia***
 - 075 Anesthesia

Surgical Specialties

- 10 **General Surgery**
080 General surgery

- 11 **Thoracic/Cardiovascular Surgery**
086 Thoracic surgery
087 Cardiovascular surgery
088 Cardiovascular/thoracic surgery

- 12 **Urology**
090 Urology

- 13 **Orthopedic Surgery**
095 Orthopedic surgery

- 14 **Plastic Surgery**
100 Plastic surgery

- 15 **Neurosurgery**
110 Neurosurgery

- 16 **Ophthalmology**
115 Ophthalmology
116 Ophthalmology/otolaryngology

- 17 **Otolaryngology**
120 Otolaryngology

- 18 **Obstetrics/Gynecology**
126 Obstetrics
127 Gynecology
128 Obstetrics/gynecology

Note: Although genetics is no longer a sub-specialty of internal medicine, it is included in the internal medicine category, because the number of physician records assigned to this specialty is relatively small.

Appendix E

Fee-for-Service Radiology and Laboratory Coverage in NPDB

Fee-for-Service Radiology and Laboratory Coverage in NPDB

Radiology and laboratory services supplied to CIHI for use in NPDB are not uniform or complete. For this reason, the data are not routinely used in the NPDB publications. The following notes were provided by the provincial medical insurance plans regarding the radiology and laboratory services included on the NPDB file submissions.

Newfoundland and Labrador

- No laboratory services data are supplied to NPDB, as these services are paid through the hospital funding.
- Physicians can be paid on a fee-for-service basis for interpretation services on certain diagnostic services such as EEG, ECGs, etc. These services would be included in the NPDB file submissions.

Prince Edward Island

- No laboratory services data are supplied to NPDB, as these services are paid through the hospital funding.
- Radiologists' interpretation fees are included in the NPDB file submissions.

Nova Scotia

- No laboratory services data are supplied to NPDB, as these services are paid through the hospital funding.
- The majority of radiology billings are not included in NPDB file submissions. For Nova Scotia, the majority of radiology billings are not included in fee-for-service earnings.

New Brunswick

- No laboratory services data are supplied to NPDB, as these services are paid through the hospital funding.
- All radiology services are excluded in the NPDB file submissions.

Quebec

- No laboratory services are included.
- Some radiology services provided by physicians in hospital and in private practice are included in the NPDB file submissions.

Ontario

- Approximately 50% of all laboratory services are funded through OHIP, and therefore are included in the NPDB file submissions. The remaining 50% are funded via public health (1%) and hospital global budgets (49%).
- Information on Radiology services is not available.

Manitoba

- Laboratory services provided in the NPDB file submissions are those provided by privately owned fee-for-service laboratories. Laboratory services provided in urban/rural facilities are not included in the NPDB file submissions.
- Radiology services submitted include all private radiology services and all urban facility radiology services. Rural facility radiology services, approximately 11% of the total dollar value for radiology services, are not included in NPDB file submissions.

Saskatchewan

- Since 1993–1994, the only laboratory services included in the NPDB file submissions are common in-office laboratory services provided by physicians other than pathologists. Responsibility for private laboratory services provided by specialists in pathology was transferred to district health boards in October 1993 and no longer funded on a fee-for-service basis.
- Facility-based radiology services, which are funded through district health boards, are excluded from the NPDB file submissions, as are radiology services provided through the Screening Program for Breast Cancer.

Alberta

- Up to July 1, 1995, only non-hospital based laboratory services were included.
- Only non facility-based radiology services are included in NPDB file submissions.

British Columbia

- Laboratory and radiology services, when performed on a fee-for-service outpatient basis, are included in NPDB file submissions; but inpatient services are not included.



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