

National Physician Database



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Average Payment per Physician Report, Fee-for-Service Physicians in Canada, 2004–2005

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Foreword

The Canadian Institute for Health Information (CIHI) collects and analyzes information on health and health care in Canada and makes it publicly available. Canada's federal, provincial and territorial governments created CIHI as a not-for-profit, independent organization dedicated to forging a common approach to Canadian health information. CIHI's goal: to provide timely, accurate and comparable information. CIHI's data and reports inform health policies, support the effective delivery of health services and raise awareness among Canadians of the factors that contribute to good health.

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

The Average Payment per Physician Report, Fee-for-Service Physicians in Canada, 2004–2005 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 Advisory 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, 2002–2003 and 2003–2004 (2005).
- Average Payment per Physician Report, Canada, 2002–2003 (2004).
- 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.

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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 fee-for-service payments made to physicians who are remunerated through fee-for-service systems. 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 Advisory 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 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. CIHI is working with the provinces, territories and ministries to also include data on clinical activities remunerated under alternative reimbursement plans (such as salaries, contracts and sessional fees).

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*
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

^{* 30} File data is not applicable to the province of Quebec.

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 Advisory 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 Program Lead, 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	2004	-2005
Territory	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. Figure 1 gives current estimates of alternative payments as a percentage of total physician payments across jurisdictions.

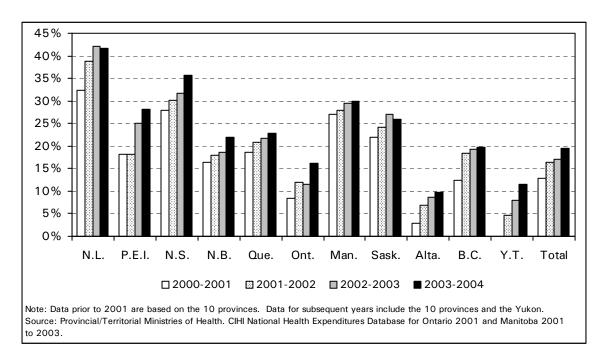


Figure 1. Physicians' Alternative Clinical Payments as a Percentage of Total Clinical Payments, 2000–2001 to 2003–2004

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. In addition, jurisdictions may vary with respect to how alternative payments are allocated to physicians. For example, alternative payments may represent a relatively small percentage of income for most physicians in one province, while in another province some physicians might be paid primarily through alternative plans with others paid primarily through fee-for-service arrangements. These variations across jurisdictions can impact average payment and full-time equivalent physician results.

It is important to note that the range of physician payment information submitted to the National Physician Database varies across provinces and territories. Table 2 presents a summary of payment information submitted to the National Physician Database and indicates payment data that is included and excluded from average payment calculations.

Table 2. Payment Information Submitted to the NPDB and Inclusion/Exclusion Criteria Used to Produce Average Payment Per Physician Results, 2004-2005 (Current Dollars)

	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
NPDB Payment Information Included in Average Payment Per Physician Calculations	cluded in Average	Payment Per F	hysician Calculat	ions							
Medical care plan, fee-for- service payments	156,189,580	32,123,928	244,015,265	225,858,362	2,008,576,431	4,287,737,057	333,429,197	317,315,613	1,178,309,828	1,501,167,383	10,284,722,643
Reciprocal billing payments	1,356,242	318,626	6,505,180	4,449,400	n/a	16,118,560	8,869,519	5,571,652	38,787,554	17,576,774	99,553,507
Subtotal – payments included in average payment calculations	157,545,822	32,442,553	250,520,445	230,307,762	2,008,576,431	4,303,855,618	342,298,716	322,887,266	1,217,097,382	1,518,744,156	10,384,276,150
NPDB Payment Information Excluded From Average Payment Per Physician Calculations	cluded From Ave	rage Payment F	er Physician Calc	ulations							
Physicians with total payments less than or equal to \$0.00	(159)	0	0	(4,937)	0	0	(2,226)	(691)	0	0	(8,014)
All payments made to out of province, territory or country physicians*	446,453	0	0	6,326,346	9,619,710	67,564,458	0	577,388	0	3,096,642	87,630,997
Salary, sessional, and capitation payments**	0	0	0	58,732,270	0	0	0	0	0	0	58,732,270
Rural retention premiums***	0	0	0	0	0	0	0	0	0	32,919,667	32,919,667
Worker's compensation board payments	0	0	0	0	58,919,606	0	0	0	0	25,035,241	83,954,847
Provincial/Territorial Insurance Corporation	0	0	0	0	0	0	0	0	0	8,196,114	8,196,114
Payments made to facilities and radiology/pathology specialists	20,223,653	2,404,902	3,368,010	30,481,502	247,516,167	1,541,720,103	49,478,202	21,026,729	175,465,346	435,935,262	2,527,619,877
Shadow billing	0	0	0	0	0	0	0	25,787,612	0	0	25,787,612
Subtotal – payments excluded from average payment calculations	20,669,947	2,404,902	3,368,010	95,535,181	316,055,484	1,609,284,561	49,475,976	47,391,038	175,465,346	505, 182, 926	2,824,833,371
Total Payment Information 178,215,769 34,847,456 253,888,455 325,842,942 2,324,631,915 5,913,140,179 391,774,691 374,691	178,215,769	34,847,456	253,888,455	325,842,942	2,324,631,915	5,913,140,179	391,774,691	370,278,303	1,392,562,728	2,023,927,083	13,209,109,521

*Includes payments made to out of province, territory or country physicians through all remuneration modes and sources of payment.

**Excludes salary and sessional payments made to out of province, territory or country physicians.

***Includes rural retention premiums made through all sources of payment (e.g., worker's compensation board, insurance corporation).

Note: The figures have been rounded independently to the nearest dollar $\ensuremath{\text{n/a}} = \ensuremath{\text{Not}} \ensuremath{\text{Applicable}}$

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 OK9, 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 and authorized 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:

where:

- "FTE_i" is the FTE value assigned to the ith physician.
- "Total paymentsi" is the sum of all payments made to the ith physician.
- "Lower benchmark_i" is the lower benchmark value set for the physician specialty group within the province or territory of practice of the ith physician.
- "Upper benchmark_i" is the upper benchmark value set for the physician specialty group within the jurisdiction of practice of the ith 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 website (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).

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.

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 Medical Doctorate (M.D.) 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 Tables 4-1 to 4-2. 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

Data Exclusions

Medical services covered by third parties, such as hospital insurance and workers' compensation plans, are not included in this report. The data also exclude certain categories of persons, among them, members, of the Armed Forces and of the Royal Canadian Mounted Police and inmates of federal and provincial penitentiaries who are covered under other public programs (these persons account for less than half of one percent of the total population).

Certain payments made directly by patients are also omitted; for example, amounts extra-billed or balance-billed by physicians and the costs of plastic surgery for cosmetic purposes.

Yukon data are currently not included in CIHI Full-Time Equivalent Physician and Average Payment Per Physician Reports. At the present time full-time equivalent (FTE) benchmarks have not been established for medical specialty groups within the Yukon Territory. FTE benchmarks are required to perform calculations for both the average payment and full-time equivalent physician reports. CIHI will work to establish FTE benchmarks for the Yukon, thus permitting the inclusion of Yukon results within future Average Payment Per Physician and Full-Time Equivalent Physician Reports.

Negative Numbers

Negative numbers may appear in the data tables because of adjustments that have been applied by the provinces or territories to the payments. These negative numbers are anomalies in the data and should be treated as such. These negative numbers are excluded from the Average Payment per Physician report as well as the Full-Time Equivalent report.

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 subspecialties 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 provinces improves interprovincial 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. This algorithm is the same across jurisdictions. 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 Privacy Secretariat at CIHI has developed a set of guidelines to safeguard the privacy and confidentiality of data received by CIHI. The document *Privacy and Confidentiality of Health Information at CIHI: Principles and Policies for the Protection of Personal Health Information* may be obtained from the CIHI website (www.cihi.ca). These policies govern the release of data for all provinces except Quebec and Newfoundland and Labrador in publications, media releases, the CIHI website and through ad hoc requests and special studies. In compliance with these guidelines, CIHI prevents residual disclosure by implementing cell suppression for cells with counts from 1 to 4. For further information on data suppression, please see section Data Suppression above. These policies ensure the privacy and confidentiality of all health care providers and recipients.

The release of data from the NPDB for the provinces of Quebec and Newfoundland and Labrador 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 or territory and indicator of interest, CIHI may not be able to release data to the client without prior approval from the province or territory.

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; and
- Reciprocal Billing Report, Canada.

For details on publication years and reporting periods covered, please refer to the CIHI's website (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.



Table 1. Average Payment per Fee-for-Service Physician Who Received at Least \$60,000 in Payments by Type of Practice, 2004-2005

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	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	215,931	220,742	185,448	211,734	164,568	213,088	217,390	238,775	232,742	198,365	202,481
Medical Specialties	314,521	334,107	206,830	285,549	189,817	278,094	216,009	284,063	276,809	245,174	248,694
Internal Medicine	330,869	334,107	237,613	361,263	219,434	351,826	235,867	349,879	321,970	317,202	301,450
Neurology	233,342	n/a	378,531	317,953	202,764	256,120	214,724	253,297	238,245	244,494	237,083
Psychiatry	259,752	*	149,307	195,751	119,698	184,170	159,857	236,324	234,570	170,832	175,444
Pediatrics	275,924	*	201,479	244,223	169,313	235,227	185,389	206,477	226,115	205,423	210,655
Dermatology	300,178	*	352,402	292,888	246,669	304,680	256,681	366,660	578,134	312,692	306,682
Physical Medicine	n/a	n/a	177,313	*	167,875	200,360	192,213	*	157,438	179,362	185,046
Anesthesia	344,637	*	164,175	220,956	171,798	289,396	262,026	238,935	278,630	245,030	248,994
Surgical Specialties	367,822	329,280	321,293	357,199	240,343	361,045	337,476	406, 161	427,550	353,479	334,012
General Surgery	333,659	346,103	275,596	326,577	211,730	335,220	328,416	331,009	370,425	321,985	299,819
Thoracic/Cardiovascular Surgery	*	n/a	178,254	457,144	297,333	432,402	392,824	641,318	647,370	383,768	406,372
Urology	368,699	n/a	379,062	364,954	270,173	355,042	263,477	367,558	363,818	401,124	339,338
Orthopedic Surgery	383,867	*	245,606	312,339	205,013	338,152	299,419	370,649	347,506	276,376	294,965
Plastic Surgery	*	+	236,061	295,403	179,325	279,653	392,920	329,297	370,033	245,477	269,055
Neurosurgery	*	n/a	*	*	131,620	400,764	*	*	*	348,947	297,649
Ophthalmology	411,889	333,849	466,156	507,299	313,449	457,667	469,556	632,834	608,308	546,647	455,025
Otolaryngology	475,293	*	335,502	388,563	255,892	348,880	257,072	419,487	543,338	322,564	333,392
Obstetrics/Gynecology	293,640	297,433	296,497	289,673	245,733	351,024	327,038	363,536	402,055	289,802	316,831
Total Specialties	335,554	330,837	264,842	320,896	207,727	305,755	254,246	334, 168	328,680	282,677	278,656
Total Physicians	263,996	252,638	216,778	259,334	185,751	258,090	236,695	277,930	270,328	232,756	237,492
										Sourc	Source: NPDB, CIHI.

Notes Based on gross payments.

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

t 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.

lable Z. Average Payment per Full	ment per	Full-I me	Equivaler	Equivalent Fee-for-Service		Physician by Type	by Iype	ot Practice,	e, 2004–2005:	-2005	
	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	199,700	180,100	204,561	229,946	168,148	196,598	206,072	216,914	252,063	227,351	202,219
Medical Specialties	252,272	220,349	251,112	271,850	180,032	243,433	213,451	274,636	289,852	258,834	232,396
Internal Medicine	259,832	273,405	274,912	308,614	222,455	311,121	257,126	327,415	327,667	316,023	284,641
Neurology	230,739	*	299,123	220,176	175,462	241,848	221,074	201,365	262,366	282,814	224,582
Psychiatry	186,027	193,845	161,071	196,292	96,816	156,248	151,239	194,926	207,209	193,055	152,916
Pediatrics	184,518	79,670	225,629	239,602	152,632	189,037	159,563	229,785	237,512	218,475	186,040
Dermatology	326,281	*	522,326	399,847	260,352	294,420	306,978	382,898	440,661	363,458	311,507
Physical Medicine	n/a	n/a	226,357	156,130	114,138	171,167	161,663	160,709	232,920	243,056	163,607
Anesthesia	326,721	339,601	250,342	254,283	202,252	274,236	254,282	263,354	396,161	249,207	264,288
Surgical Specialties	348,165	333,572	387,199	385,429	272,642	342,872	357,791	377,177	447,696	419,552	347,720
General Surgery	291,444	304,936	343,197	355,354	263,864	325,114	329,515	361,906	412,427	368,845	323,639
Thoracic/Cardiovascular Surgery	445,591	n/a	373,374	517,824	359,687	474,842	436,795	513,755	618,809	472,379	463,880
Urology	401,717	*	408,505	401,548	283,885	345,092	400,204	399,390	430,140	436,242	353,227
Orthopedic Surgery	395,263	330,160	330,392	338,168	233,617	309,051	324,759	321,487	396,786	355,090	309,331
Plastic Surgery	318,227	+	314,826	318,462	201,322	252,065	302,517	305,912	399,701	277,490	269,366
Neurosurgery	*	n/a	*	284,377	165,496	326,042	*	289,396	302,995	364,651	291,002
Ophthalmology	471,744	446,320	485,428	485,160	318,089	407,242	503,552	480,510	591,706	579,087	436,488
Otolaryngology	375,083	*	436,294	386,728	290,694	350,324	369,946	350,058	489,275	408,181	353,727
Obstetrics/Gynecology	267,923	318,691	342,097	353,834	275,866	341,900	319,027	353,589	396,005	395,980	334,016
Total Specialties	287,704	274,972	319,092	323,514	208,218	274,548	256,028	317,852	343,441	309,921	269,606
Total Physicians	237,509	213,559	247,034	272,341	188,005	234,706	231,357	257,223	288,645	261,726	233,617
										_	

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

Source: NPDB, CIHI.

NotesBased on gross payments.
Base year 2000–2001.
Alternative forms of reimbursement, such as salary and sessional, are not included.

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.

Table 3-1. Average Payment per Fee-for-Service Physician Who Received at Least \$60,000 in Payments by Type of Practice, 2004-2005

, odk - ka	by type of theorem, took										
	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	215,931	220,742	185,448	211,734	164,568	213,088	217,390	238,775	232,742	198,365	202,481
Medical Specialties	314,521	334,107	206,830	285,549	189,817	278,094	216,009	284,063	276,809	245,174	248,694
Surgical Specialties	367,822	329,280	321,293	357,199	240,343	361,045	337,476	406,161	427,550	353,479	334,012
Total Specialties	335,554	330,837	264,842	320,896	207,727	305,755	254,246	334,168	328,680	282,677	278,656
Total Physicians	263,996	252,638	216,778	259,334	185,751	258,090	236,695	277,930	270,328	232,756	237,492
										Sourc	Source: NPDB, CIHI.

Percent Change in Average Payment per Fee-for-Service Physician Who Received Payments **Table 3-2.**

at Least \$60,000 in Payments From 2003-2004 to 2004-2005 by Type of Practice

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	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	4.47	6.42	-0.77	3.89	0.45	2.85	7.58	10.07	3.52	-0.36	2
Medical Specialties	8.98	10.16	-2.86	1.41	0.37	3.50	2.96	7.38	2.96	-1.94	2
Surgical Specialties	5.39	4.69	-8.73	2.35	-1.42	3.22	3.69	10.55	1.66	1.70	_
Total Specialties	7.27	6.45	-5.79	2.02	-0.30	3.33	2.98	8.70	2.74	-0.69	_
Total Physicians	5.04	5.96	-4.09	3.31	0.01	3.33	4.96	9.80	3.08	-0.33	2
										Sour	Source: NPDB, (

2.30 2.27 1.62 1.99 2.21

, CIHI.

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.

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Table 3-3. Average Payment per Full	Payment p	er Full-Tir	ne Equiva	lent Fee-f	or-Service	Physicia	n by Typ	e of Pract	-Time Equivalent Fee-for-Service Physician by Type of Practice, 2004–2005	2005	
	N.L.	P.E.I.	N.S.	N.B.	Oue.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	199,700	180,100	204,561	229,946	168,148	196,598	206,072	216,914	252,063	227,351	202,219
Medical Specialties	252,272	220,349	251,112	271,850	180,032	243,433	213,451	274,636	289,852	258,834	232,396
Surgical Specialties	348,165	333,572	387,199	385,429	272,642	342,872	357,791	377,177	447,696	419,552	347,720
Total Specialties	287,704	274,972	319,092	323,514	208,218	274,548	256,028	317,852	343,441	309,921	269,606
Total Physicians	237,509	213,559	247,034	272,341	188,005	234,706	231,357	257,223	288,645	261,726	233,617
										- 0	NBD BOBI

Percent Change in Average Payment per Full-Time Equivalent Fee-for-Service Physician From 2003-2004 to 2004-2005 by Type of Practice Table 3-4.

	, , ,)		. (2)))								
	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	6.42	4.23	1.23	6.04	1.81	2.91	6.99	7.88	3.57	-0.11	2.7
Medical Specialties	6.54		2.44	4.33	2.27	3.20	2.86	9.00	3.73	-0.41	2.9
Surgical Specialties	9.76	2.38	2.62	5.18	2.17	2.53	4.12	8.63	2.01	0.87	2.7
Total Specialties	7.86	2.17	2.41	4.81	2.15	2.88	2.99	8.90	3.30	-0.01	2.7
Total Physicians	7.08	3.23	0.25	5.58	1.93	3.13	4.73	8.59	3.37	0.08	2.8
										Source	Source: NPDB, CIH

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, 2004-2005

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	215,931	220,742	185,448	211,734	211,734 164,568	213,088	217,390	238,775	232,742	232,742 198,365	202,481
Full-Time Equivalent Fee-for-Service Physicians	199,700	180,100	204,561	229,946	168,148	196,598	206,072	216,914	252,063	227,351	202,219
										Sonic	Source: NPDB. CIHI.

Table 4-2. Average Payment per Physician by Category of Payment, 2004-2005

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	314,521	334,107	206,830	285,549	189,817	278,094	216,009	284,063	276,809	245,174	248,694
Full-Time Equivalent Fee-for-Service Physicians	252,272	220,349	251,112	271,850	180,032	243,433	213,451	274,636	289,852	258,834	232,396
										Sourc	Source: NPDB, CIHI.

Table 4-3. Average Payment per Physician by Category of Payment, 2004-2005

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	330,869	334,107	237,613	361,263	219,434	219,434 351,826	235,867	349,879	349,879 321,970	317,202	301,450
Full-Time Equivalent Fee-for-Service Physicians	259,832	273,405	274,912	308,614	222,455	311,121	257,126	327,415	327,667	316,023	284,641
										Sourc	l Source: NPDB, CIHI.

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, 2004-2005

Neurology

	N.L.	P.E.I.	N.S.	N.B.	One.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians who received at least \$60,000 in payments	233,342	n/a	378,531	317,953	202,764	256,120	214,724	253,297	238,245	244,494	237,083
Full-Time Equivalent Fee-for-Service Physicians	230,739	*	299,123	220,176	175,462	241,848	221,074	201,365	262,366	282,814	224,582
										— Sour	Source: NPDB, CIHI

Table 4-5. Average Payment per Physician by Category of Payment, 2004–2005

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	259,752	*	149,307	149,307 195,751	119,698	119,698 184,170 159,857	159,857	236,324	236,324 234,570		170,832 175,444
Full-Time Equivalent Fee-for-Service Physicians	186,027	193,845	193,845 161,071	196,292		96,816 156,248 151,239	151,239	194,926	194,926 207,209	193,055	193,055 152,916
										Sourc	Source: NPDB, CIHI.

Table 4-6. Average Payment per Physician by Category of Payment, 2004-2005

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	275,924	*	201,479	244,223 169,313	169,313	235,227	235,227 185,389	206,477	206,477 226,115	205,423	210,655
Full-Time Equivalent Fee-for-Service Physicians	184,518	79,670	225,629	239,602	152,632	189,037	189,037	229,785	237,512	218,475	218,475 186,040
										_ Source	Source: NPDB, CIHI.

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.

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.

Table 4-7. Average Payment per Physician by Category of Payment, 2004-2005

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	300,178	*	352,402	292,888	246,669	304,680	256,681	366,660	578,134	312,692	306,682
Full-Time Equivalent Fee-for-Service Physicians	326,281	*	522,326	399,847	260,352	294,420	306,978	382,898	440,661	363,458	363,458 311,507
										Source	Source: NPDB, CIHI.

Table 4-8. Average Payment per Physician by Category of Payment, 2004–2005

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	177,313	*	167,875	200,360	192,213	*	157,438	179,362	185,046
Full-Time Equivalent Fee-for-Service Physicians	n/a	n/a	226,357	156,130	114,138	171,167	161,663	160,709	232,920	243,056	163,607
										Sourc	Source: NPDB, CIHI.

Average Payment per Physician by Category of Payment, 2004-2005 Table 4-9.

Anesthesia

Fee-for-Service Physicians who received	N.L.	P.E.I.	N.S.	N.B.	One.	Ont.	Man.	Sask.	Alta.	1 1	B.C.
at least \$60,000 in payments	344,637	*	164,175	220,956	171,798	289,396	262,026	238,935			278,630 245,030
Full-Time Equivalent Fee-for-Service Physicians	326,721	339,601	250,342	254,283	202,252	274,236	254,282	263,354		396,161	396,161 249,207
											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.

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, 2004-2005

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	367,822	329,280	321,293	357,199	240,343	361,045	337,476	406,161	427,550	353,479	334,012
Full-Time Equivalent Fee-for-Service Physicians	348,165	333,572	387,199	385,429	272,642	342,872	357,791	377,177	447,696	419,552	347,720
										Source	Source: NPDB, CIHI.

Table 4-11. Average Payment per Physician by Category of Payment, 2004-2005

General Surgery

		*				ľ	r				
	J.	PEI	N.S.	N.B.	One.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians who received	030 000	24.0	975	773 900	700	000		000	307.070	000	000
at least \$00,000 iii payments	999,099	340,103	086'677	776,076	211,730		320,410	800,188	370,429	321,300	239,013
Full-Time Equivalent Eng for Couring Discriptor	201	904 936	242 107	250	262 864	22E 112	220 51	361 006	707 617	900	222 620
ree-lot-service rilysicialis	444,167	304,330	343,137	400,000	703,004	920, 1.4	329,515	306,100	4.2,42,	300,043	323,039
										Source	Source: NPDB, CIHI.

Table 4-12. Average Payment per Physician by Category of Payment, 2004-2005

Thoracic/Cardiovascular Surgery

/											
	N.L.	P.E.I.	N.S.	N.B.	One.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians who received at least \$60,000 in payments	*	n/a	178,254	178,254 457,144	297,333	432,402	392,824	641,318	647,370	383,768	406,372
Full-Time Equivalent Fee-for-Service Physicians	445,591	n/a	373,374	517,824	359,687	474,842	436,795	513,755	618,809	472,379	463,880
										Sourc	Source: NPDB, CIHI.

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

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.

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.

Table 4-13. Average Payment per Physician by Category of Payment, 2004-2005

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	368,699	n/a	379,062	364,954	270,173	355,042	263,477	367,558	363,818	401,124	339,338
Full-Time Equivalent Fee-for-Service Physicians	401,717	*	408,505	401,548	283,885	345,092	400,204	399,390	430,140	436,242	353,227
										Source	Source: NPDB, CIHI.

Table 4-14. Average Payment per Physician by Category of Payment, 2004–2005

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	383,867	*	245,606	312,339	205,013	338,152	299,419	370,649	347,506	276,376	294,965
Full-Time Equivalent Fee-for-Service Physicians	395,263	330,160	330,392	338,168	233,617	309,051	324,759	321,487	396,786	355,090	309,331
										Source	 Source: NPDB, CIHI.

Table 4-15. Average Payment per Physician by Category of Payment, 2004-2005

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	*	+	236,061	295,403	179,325	279,653	392,920	329,297	370,033	245,477	269,055
Full-Time Equivalent Fee-for-Service Physicians	318,227	+	314,826	318,462	201,322	252,065	302,517	305,912	399,701	277,490	269,366
										Sourc	Source: NPDB, CIHI.

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.

t 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.

Table 4-16. Average Payment per Physician by Category of Payment, 2004-2005

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	*	*	131,620	400,764	*	*	*	348,947	297,649
Full-Time Equivalent Fee-for-Service Physicians	*	n/a	*	284,377	165,496	326,042	*	289,396	302,995	364,651	291,002
										Source	Source: NPDB, CIHI.

Table 4-17. Average Payment per Physician by Category of Payment, 2004-2005

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	411,889	333,849	466,156	507,299	313,449	313,449 457,667	469,556	632,834	808'309	546,647	455,025
Full-Time Equivalent Fee-for-Service Physicians	471,744	446,320	485,428	485,160	318,089	407,242	503,552	480,510	591,706	579,087	436,488
										Source	Source: NPDB, CIHI.

Table 4-18. Average Payment per Physician by Category of Payment, 2004-2005

Otolaryngology

(GG/											
	N.L.	P.E.I.	N.S.	N.B.	Oue.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Fee-for-Service Physicians who received at least \$60,000 in payments	475,293	*	335,502	388,563	255,892	348,880	257,072	419,487	543,338	322,564	333,392
Full-Time Equivalent Fee-for-Service Physicians	375,083	*	436,294	386,728	290,694	350,324	369,946	350,058	489,275	408,181	353,727
										Source	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.

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, 2004-2005

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	293,640	297,433	296,497	289,673	245,733	351,024	327,038	363,536	402,055	289,802	316,831
Full-Time Equivalent Fee-for-Service Physicians	267,923	318,691	342,097	353,834	275,866	341,900	319,027	353,589	396,005	395,980	395,980 334,016
										Sourc	Source: NPDB, CIHI.

Table 4-20. Average Payment per Physician by Category of Payment, 2004-2005

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	335,554	330,837	264,842	320,896	207,727	305,755	254,246	334,168	328,680	282,677	278,656
Full-Time Equivalent Fee-for-Service Physicians	287,704	274,972	274,972 319,092	323,514	208,218	274,548	256,028	317,852	343,441	309,921	269,606
										Source	Source: NPDB, CIHI.

Table 4-21. Average Payment per Physician by Category of Payment, 2004-2005

Total Physicians

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. 2004-2005

by Type of Fractice, 2004	acilce, zi	JO4-400 3	5								
	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	332	76	675	485	5,283	8,379	670	665	2,689	3,777	23,001
Medical Specialties	135	10	217	190	3,287	5,273	505	273	1,136	1,701	12,693
Internal Medicine	62	10	74	79	1,473	2,044	183	112	315	556	4,888
Neurology	2	n/a	9	9	157	197	20	15	47	77	531
Psychiatry	16	*	42	20	524	1,365	109	32	304	475	2,888
Pediatrics	15	*	17	23	379	546	74	27	149	167	1,393
Dermatology	9	*	13	80	169	160	13	2	34	57	463
Physical Medicine	n/a	n/a	9	*	54	111	o	*	23	28	231
Anesthesia	31	*	29	54	531	850	97	82	264	341	2,299
Surgical Specialties	88	21	223	185	1,805	2,638	232	190	596	901	6,870
General Surgery	23	10	52	36	440	573	29	22	135	165	1,549
Thoracic/Cardiovascular Surgery	*	n/a	13	6	55	104	15	∞	21	57	282
Urology	80	n/a	19	17	137	208	17	12	43	64	523
Orthopedic Surgery	15	*	26	32	253	372	37	26	107	149	1,014
Plastic Surgery	*	+	11	13	77	149	11	13	43	53	370
Neurosurgery	*	n/a	*	*	41	20	*	*	*	32	123
Ophthalmology	14	5	48	28	257	371	28	27	87	155	1,017
Otolaryngology	11	*	11	15	171	204	18	12	37	89	545
Obstetrics/Gynecology	17	9	43	35	374	209	47	35	123	158	1,447
Total Specialties	223	31	440	375	5,092	7,911	737	463	1,732	2,602	19,563
Total Physicians	555	107	1,115	860	10,375	16,290	1,407	1,128	4,421	6,379	42,564
										Sour	Source: NPDB, CIHI.

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

[†] 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.

2005 2004 Practice ÷ Counte Service Physician Farrivalent Time 0 צ Table

Table 5-2. Full-Time Equivalent Fee-tor-Service Physician Counts by Type of Practice, 2004–2005	IIValent F6	3e-10r-9er	VICE PNY	sician co	nuts by 1	уре от гга	ctice, zo	04-4000	•		
	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	374.39	96.18	637.72	462.50	5,389.44	9,373.10	729.65	753.99	2,528.55	3,387.06	23,732.58
Medical Specialties	177.81	27.12	188.12	208.87	3,682.87	6,159.86	527.22	290.02	1,114.94	1,647.86	14,024.69
Internal Medicine	81.26	12.52	66.95	94.83	1,506.84	2,348.53	174.86	122.15	323.56	564.53	5,296.03
Neurology	5.84	*	7.77	8.87	191.57	214.29	19.70	18.91	44.35	68.11	579.41
Psychiatry	24.62	5.00	42.44	22.88	820.76	1,682.88	120.73	40.47	349.88	438.11	3,547.77
Pediatrics	26.55	6.45	16.01	25.46	454.18	706.63	89.00	25.87	148.94	164.74	1,663.83
Dermatology	5.52	*	8.89	5.86	161.85	167.86	10.87	4.82	44.96	49.52	460.15
Physical Medicine	n/a	n/a	4.70	3.39	84.81	136.35	11.58	3.11	16.50	22.44	282.88
Anesthesia	34.02	3.15	41.36	47.58	462.86	903.32	100.48	74.69	186.75	340.41	2,194.62
Surgical Specialties	104.20	25.28	187.77	174.29	1,611.33	2,805.17	220.59	211.27	573.10	767.89	6,680.89
General Surgery	27.53	11.35	42.28	33.74	359.39	598.58	59.59	52.82	122.17	145.61	1,453.06
Thoracic/Cardiovascular Surgery	3.02	n/a	6.36	8.05	45.86	94.99	13.49	10.00	21.98	46.46	250.21
Urology	7.46	*	17.69	15.50	131.06	215.52	11.22	11.05	36.37	59.24	505.11
Orthopedic Surgery	14.85	4.57	19.79	29.89	225.54	412.28	34.39	30.32	94.34	117.83	983.80
Plastic Surgery	4.84	+	8.31	12.07	71.69	168.19	14.39	14.16	39.84	48.50	381.99
Neurosurgery	*	n/a	*	0.99	35.42	62.16	*	6.34	1.24	30.81	136.96
Ophthalmology	12.42	3.76	46.67	29.38	254.94	418.91	26.17	35.79	89.57	147.36	1,064.97
Otolaryngology	14.12	*	8.68	15.24	151.15	204.69	12.53	14.38	41.22	54.45	516.46
Obstetrics/Gynecology	19.96	2.60	37.99	29.43	336.28	629.85	48.81	36.41	126.37	117.63	1,388.33
Total Specialties	282.01	52.40	375.89	383.16	5,294.20	8,965.03	747.81	501.29	1,688.04	2,415.75	20,705.58
Total Physicians	656.40	148.58	1,013.61	845.66	10,683.64	18,338.13	1,477.46	1,255.28	4,216.59	5,802.81	44,438.16
										Sou	Source: NPDB, CIHI.

NotesBase 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, 2004-2005

by Type of Fractice, 2004-2003	riacuce,	2004-20	00								
	N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
Family Medicine	1,554	1,810	1,376	1,539	1,429	1,483	1,744	1,492	1,191	1,112	1,386
Medical Specialties	3,822	13,759	4,280	3,929	2,297	2,356	2,314	3,635	2,820	2,470	2,511
Internal Medicine	8,323	13,759	12,549	9,449	5,125	6,078	6,385	8,861	10,170	7,557	6,520
Neurology	103,207	n/a	154,776	124,406	48,087	63,067	58,425	66,165	68,162	54,568	60,017
Psychiatry	32,252	*	22,111	37,322	14,408	9,102	10,720	31,015	10,538	8,846	11,035
Pediatrics	34,402	*	54,627	32,454	19,920	22,755	15,791	36,758	21,501	25,160	22,878
Dermatology	86,006	*	71,435	93,305	44,673	77,652	89,885	198,495	94,224	73,714	68,832
Physical Medicine	n/a	n/a	154,776	*	139,810	111,930	129,834	*	139,287	150,061	137,961
Anesthesia	16,646	*	15,740	13,823	14,218	14,617	12,046	12,103	12,135	12,322	13,862
Surgical Specialties	5,864	6,552	4,164	4,035	4,183	4,710	5,037	5,224	5,375	4,663	4,639
General Surgery	22,436	13,759	17,859	20,734	17,158	21,683	19,805	17,412	23,730	25,465	20,574
Thoracic/Cardiovascular Surgery	*	n/a	71,435	82,938	137,268	119,464	77,901	124,059	152,553	73,714	113,011
Urology	64,504	n/a	48,877	43,908	55,107	59,732	68,736	82,706	74,502	65,652	60,935
Orthopedic Surgery	34,402	*	35,717	23,326	29,841	33,399	31,581	38,172	29,940	28,199	31,429
Plastic Surgery	*	+	84,423	57,418	98,048	83,384	106,228	76,344	74,502	79,277	86,132
Neurosurgery	*	n/a	*	*	184,140	248,485	*	*	*	131,303	259,097
Ophthalmology	36,860	27,517	19,347	26,659	29,376	33,489	41,732	36,758	36,823	27,108	31,336
Otolaryngology	46,912	*	84,423	49,763	44,150	60,903	64,917	82,706	86,584	61,790	58,475
Obstetrics/Gynecology	30,355	22,931	21,597	21,327	20,186	20,468	24,862	28,356	26,046	26,593	22,024
Total Specialties	2,314	4,438	2,111	1,991	1,483	1,571	1,585	2,144	1,850	1,615	1,629
Total Physicians	930	1,286	833	898	728	763	830	880	725	629	749
										Sourc	 Source: NPDB, CIHI.

NotesNet population figures are used to calculate these figures.
Alternative forms of reimbursement, such as salary and sessional, are not included.

NPDB, CIHI

Source:

55,002 8,983 19,154 83,429 1,539 6,018 69,258 112,659 14,521 4,770 21,932 127,369 29,925 61,707 22,955 717 1,343 2,272 63,093 32,394 232,688 Total 84,849 187,242 12,343 35,659 86,633 7,443 9,591 28,856 90,437 70,927 5,472 77,166 1,739 1,241 2,550 724 36,375 28,513 35,720 B.C. Population per Full-Time Equivalent Fee-for-Service Physician by Type of Practice, 2004–2005 194,158 17,155 26,223 145,751 88,084 80,412 2,873 9,156 21,509 71,255 5,590 35,766 77,720 1,898 1,267 33,958 25,351 760 2,583,552 Alta. 1,316 3,422 205,908 319,124 13,288 4,698 18,790 99,248 27,731 69,018 1,980 38,364 89,817 32,733 70,090 156,542 27,258 791 Sask. 2,216 59,315 9,679 107,498 19,609 86,620 6,683 33,978 81,203 93,257 23,940 1,563 1,601 13,129 11,629 5,297 04,145 44,651 791 Man. 7,383 74,016 91,120 13,754 20,756 130,796 1,326 2,017 4,429 57,648 30,136 73,870 29,659 60,698 19,726 1,386 678 98,876 Ont. 46,646 89,019 16,311 21,007 164,625 57,605 2,050 39,410 9,198 4,685 105,311 213,149 29,614 49,949 1,426 16,623 33,474 707 1,401 22,451 Que. 32,624 29,318 127,378 220,188 15,688 4,283 22,123 92,725 48,157 1,614 3,574 24,973 61,842 25,406 48,979 1,948 7,871 84,153 25,363 883 53,978 N.B. 119,518 197,586 146,015 916 1,456 4,936 21,882 4,946 19,898 13,871 111,751 24,445 2,471 58,005 04,461 22,453 21,964 52,496 46,925 106,988 N.S. 5,073 10,989 27,517 21,331 5,443 12,122 30,107 36,592 2,626 926 1,431 n/a n/a 43,678 24,569 P.E.I. 1,378 2,902 6,350 88,362 20,960 19,436 4,952 18,744 170,872 06,619 41,549 36,546 1,830 93,484 n/a 15,169 69,173 25,853 786 34,750 N.L Thoracic/Cardiovascular Surgery Obstetrics/Gynecology Surgical Specialties Medical Specialties Orthopedic Surgery Physical Medicine able 6-2. nternal Medicine **Total Physicians** amily Medicine General Surgery otal Specialties Plastic Surgery Ophthalmology Otolaryngology **Neurosurgery** Dermatology Anesthesia Veurology ²sychiatry Pediatrics Urology

† 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.

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, 2004-2005

	,000		202	QN	91.0	, to C	Моя	Cook	V Ito	0	Total
	N.L.	7.6.1.	N.O.	N.D.	cne.	OII.	Mall.	odsk.	Alla.	<u>ن</u>	lotal
Family Medicine	64	55	73	65	70	67	57	29	84	06	72
Medical Specialties	26	7	23	25	44	42	43	28	35	40	40
Internal Medicine Neurology	12	7	8 -	11	20	16	16	11	10	13	15
Psychiatry Pediatrics	m m	* *	5	m m	7	11	o (ю с	ைம	11	0 4
Dermatology Physical Medicine	1 1/2	* @/C	1 — —) ← *	7 7 0) — —	» — *) - -	· — —	
Anesthesia	9	*	9	7	7	7	· ∞	8	· ω	. 80	7
Surgical Specialties	17	15	24	25	24	21	20	19	19	21	22
General Surgery	4	7	9	Ω.	9	۰ کا	۰ کا	9	4	4	S.
Thoracic/Cardiovascular Surgery Urology	* 2	n/a n/a	1	2 -	2	2 1				1	2 1
Orthopedic Surgery	m	*	3	4	က	m	m	3	က	4	М
Plastic Surgery	*	+	1	2	-		-	1	-	1	-
Neurosurgery	* (n/a	* 1	* '	_ '	0	* (* (* (0 (
Ophthalmology Otolaryngology	ε c	4 *	5	4 0	ю с	m c	2 6	ω L	დ -	4 0	m c
Obstetrics/Gynecology	ıκ	4	5	ונה	ונס	מו	1 4	. 4	. 4	1 4	IΩ
Total Specialties	43	23	47	20	67	64	63	47	54	62	61
Total Physicians	108	78	120	115	137	131	120	114	138	152	134
										Sour	Source: NPDB, CIHI.

NotesNet population figures are used to calculate these figures.
Alternative forms of reimbursement, such as salary and sessional, are not included.

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	N.F.	7.5	N.O.	N.D.	ene.	OII:	Mail.	odsk.	Alta.	ز 6	lotal
Family Medicine	73	70	69	62	71	75	62	76	79	81	74
Medical Specialties	34	20	20	28	49	20	45	29	35	39	44
Internal Medicine Neurology	16	o *	7	13	20	19	15	12	10	13	17
Psychiatry Pediatrics	מ מ	4 10	7 2	· က က	11	_	01	ι 4 κ	11.	10	11
Dermatology Physical Medicine	1 1/a	* * /⊔	I 	0 - 0	1 2			00			
Anesthesia	7	2	4	9	9	7	6	80	9	8	7
Surgical Specialties	20	18	20	23	21	23	19	21	18	18	21
General Surgery	7.2	00 0	٠ 2	٠ کا	7.2	7 2	٠ 2		4 -	ю <i>-</i>	٠ 2
Urology		ŭ * ≧	- 2	2	2	2		-			2
Orthopedic Surgery	ο,	ო -	. 2	4 (ο,	· ω	σ ,	ο,	σ,	ο,	σ ,
Plastic Surgery Neurosurgery	*	⊥ n/a	*	0 7	- 0		*		- 0		- 0
Ophthalmology	2	М	D	4	ю	က	2	4		4	က
Otolaryngology	က	*	_	2	2	2	_	1	_	1	2
Obstetrics/Gynecology	4	4	4	4	4	വ	4	4	4	က	4
Total Specialties	55	38	40	51	70	72	64	51	53	57	65
Total Physicians	127	108	109	113	142	148	126	126	132	138	139
										Sour	 Source: NPDB, CIHI.

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 2004–2005 these fee codes accounted for approximately \$119.4 million (2.7%) of Ontario's publishable total fee-for-service payments. Table A summarizes the impact of excluding these payments from average payment results for the year 2004–2005.

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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, 2004–2005

	Ont	ario	To	otal
	Physicians Who		Physicians	
	Received	Average	Who Received	Average
	Payments	Payment per	Payments	Payment per
	>\$60,000	FTE Physician	>\$60,000	FTE Physician
Family Medicine	0.79%	0.46%	0.30%	0.18%
Medical Specialties	4.89%	3.07%	2.36%	1.50%
Internal Medicine	8.18%	4.39%	4.25%	2.41%
Neurology	3.32%	2.12%	1.38%	0.91%
Psychiatry	3.15%	2.30%	1.59%	1.14%
Pediatrics	0.27%	0.11%	0.14%	0.05%
Dermatology	0.00%	0.00%	0.00%	0.00%
Physical Medicine	0.03%	-0.02%	0.01%	-0.01%
Anesthesia	0.06%	0.02%	0.03%	0.01%
Surgical Specialties	2.20%	1.05%	0.94%	0.43%
General Surgery	2.74%	1.26%	1.15%	0.53%
Thoracic/Cardiovascular Surgery	5.75%	2.59%	2.34%	1.07%
Urology	0.83%	0.31%	0.35%	0.12%
Orthopedic Surgery	-0.21%	-0.01%	-0.07%	0.00%
Plastic Surgery	0.00%	0.00%	0.00%	0.00%
Neurosurgery	2.22%	0.56%	1.23%	0.38%
Ophthalmology	1.61%	0.48%	0.60%	0.15%
Otolaryngology	3.47%	1.67%	1.39%	0.66%
Obstetrics/Gynecology	3.28%	1.62%	1.62%	0.80%
Total Specialties	3.85%	2.25%	1.77%	1.03%
Total Physicians	2.60%	1.63%	1.11%	0.69%
				Source: NPDB, CIHI

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Appendix B Net Population Estimates

Statistics Canada Net Population Estimates (in Thousands), 2003–2004 to 2004–2005 Table B.

Year		N.L.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	Total
2003-2004	(PR)	519.1	137.8	927.1	744.7		7,489.0 12,253.0	1,159.8	992.4	3,153.4	4,145.8	31,522.2
2004-2005	(PR)	516.0	137.6	928.7	746.4		7,549.7 12,424.3	1,168.5	992.5	3,203.6	4,201.7	31,869.0

Source: Net population estimates, Statistics Canada.

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 are based on 2001 census counts, adjusted for net census undercoverage.

These figures have been rounded independently to the nearest hundred.

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Appendix C NPDB Authorization Officers

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 **EEG** 042 05 **Psychiatry** 050 Psychiatry and neuropsychiatry 051 **Psychiatry** 052 Neuropsychiatry 06 **Pediatrics** 060 **Pediatrics** 07 Dermatology 065 Dermatology 80 Physical Medicine/Rehabilitation 070 Physical medicine and rehabilitation

Electromyography

Anesthesia

071

075

Anesthesia

09

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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.

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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.
- Radiology services provided by physicians in private practice are included in the NPDB file submissions.

Ontario

- Approximately 50 percent of all laboratory services are funded through OHIP and therefore are included in the NPDB file submissions. The remaining 50 percent are funded via Public Health (1 percent) and Hospital global budgets (49 percent).
- Information on Radiology services is not available.

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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 percent 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 health regions in October 1993 and no longer funded
 on a fee-for-service basis.
- Facility-based radiology services which are funded through health regions are excluded from the NPDB file submissions, as well as 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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