

November 13, 2022

Dear Members of the OMA Board and NTF,

We are writing to formally voice our concern and disappointment in the outcome of the virtual care framework negotiations and their negative effects on our membership. We cautiously relied on assurances from leadership at the OMA that the unintended consequences of the PSA would be addressed in reasonable cases, particularly for those practicing virtual medicine prior to the pandemic. We did not anticipate that negotiations would only be corrective for larger more powerful blocks within OMA and overlook our smaller groups of FFS Family Physicians.

We agree with the principle of comprehensive virtual care and “emphasizing the importance of providing virtual care in the setting of an ongoing physician-patient relationship”. However, we perceive that it is not being acknowledged that FFS Family Physicians are providing continuity of care. For why else would the OMA board not be continuing to fight for the same colleagues who are already lowest in the hybrid relativity metric amongst all MD groups in the province and behind in intra-sectional relativity within family medicine? Inability to access reasonable virtual care fees will only worsen these challenges.

Again, let us highlight the vulnerable members of whom we speak and, by extension, their patients who are at risk. These include physicians who remain unable to access elusive GP Focused-Practice Designations yet they provide focused-practice care, walk in clinic & urgent care colleagues who provide necessary continuity of care to our growing unattached patient population as well as members who simply choose for various reasons to practice comprehensive FFS family medicine without a PEM designation.

This again is an equity situation. Members practicing the same kind of medicine should have access to the same compensation with the same support and processes. Instead, our members are scrambling, being forced to alter their practices, rent space or change processes, making their work more difficult than prior to Dec 1, and more difficult than that of colleagues doing similar work.

We appreciate the complexity of these negotiations and the added complexity of introducing a virtual care framework. However, once again Fee-for-Service Family physicians were not prioritized, which points to ongoing under-representation and a lack of advocacy on our behalf. We are not asking for special treatment. We are asking for equitable representation and results, so that we do not always remain the bearers of “unintended consequences”.

Sincerely,

FFS Family Physician MIG Executive

Dr. Marni Brooks
Dr. Allen Greenwood
Dr. Riva Levitan