



INSIGHTS

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ISSUED QUARTERLY

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Nothing comes for free...not even healthcare

It's been an interesting month. There was talk the Federal Liberals were going to tax health and dental claims. On the American side, there was the Republican Party's attempt to repeal Obamacare, or at least major portions of it. Critics ranged from conservative Republicans to insurers to the American Association for Retired People.

Conservatives complained that the bill didn't fully repeal Obamacare and that many provisions are too similar to the health reform law. Insurers worried that Republicans would cut federal support for Medicaid and tax credits, leaving many of their customers without coverage. And the AARP feared that Americans in their 50's and early 60's would see their premiums skyrocket and federal assistance reduced.

Proponents of the bill said it would save the individual health market from collapse. The legislation would create a patient-centered health-care system that provides Americans more choice, greater control and lower costs.

Interestingly, it wasn't until the Republicans realized that the bill wouldn't pass that there was any talk about working with Democrats to improve the Affordable Care Act of 2010.

Sometimes life is like that. We get so fixated on the negative that we forget there are things we should be thankful for. Recently, the Canadian Institute for Health Information released a report on surgical waiting times, and for the most part it made me glad to have the healthcare system we have.

Three out of four Canadians received a hip or knee replacement, cataract surgery, hip fracture repair or cancer radiation therapy within the recommended wait times for those priority procedures, although



there was often wide variation from one province to another.

The report by the Canadian Institute for Health Information provided a snapshot of patient wait times for five priority medical procedures in 2016 and compared them to data for the previous four years. Overall, wait times for hip fracture repair across the country continued to improve, with the percentage of patients receiving surgery within the 48 hour benchmark increasing to 86 per cent in 2016 from 81 per cent in 2012.

Nationally, wait times for joint replacement remained relatively unchanged last year, with 75 per cent of patients receiving hip or knee replacement surgery within the 182 day benchmark. Since 2012, the number of hip replacements rose 22 per cent, while knee replacements went up 18 per cent.

However, there was a significant drop in the proportion of Canadians who were able to get cataract surgery within the targeted wait time of 112 days: in 2016, 73 per cent of patients had the sight-restoring operation within that period, down from 83 per cent in 2012.

...continued on reverse

Nothing comes for free ... continued from reverse

Median wait times increased over the five-year period: in 2012, half of patients got cataract surgery within 47 days; four years later, that median wait time expanded to 67 days. Volume for cataract surgery didn't increase as much as it did for knees and hips.

When it came to cancer patients, CIHI found that about 97 per cent received radiation therapy within the 28 day benchmark in 2016. While there was some variation in wait times across provinces, overall, 90 per cent of patients were able to access the treatment within 15 to 27 days.

No one province or area looks really bad in everything. They have strengths and

weaknesses based on where they started in their wait time benchmarks initially set in 2004.

The report will be helpful to those patients who find themselves on hold for a particular procedure by giving them information to discuss with their doctors. Knowing what the benchmark is will allow a patient to ask their surgeon/doctor, "I can see that the benchmark is 182 days. How much longer or shorter am I going to have to wait? Or, is there another way for me to proceed in order to shorten the wait time?"

Can we improve wait times? It will be dependent on the resources available, including the number of surgeons available

and the operating room time hospitals have budgets for. Canadians need to realize that nothing comes for free, not even healthcare. We may still feel that our wait times are unreasonably long, but the trade-off is the cost when compared to the American model. Canadians who require emergency surgeries get them right away. Canadians who require other procedures will wait. Our system isn't perfect, but at the moment it looks pretty darn good.

Until next time...

Sources:

Canadian Institute for Health Information
– March 2017

CBC News

**RWAM's Provider eClaims solution delivers fast and convenient service to both plan members and healthcare providers.**

- Providers are able to submit claims online for immediate adjudication
- Claim payments are conveniently deposited to your account or can be directed to your healthcare provider

Who can submit claims?

The following providers can submit claims directly to RWAM on your behalf.

- Physiotherapist
- Chiropractor
- Naturopath
- Chiropodist
- Osteopath
- Psychologist/Psychotherapist
- Massage Therapist
- Acupuncturist
- Podiatrist
- Speech Therapist
- Social Worker

Please note that Vision will be eligible in late 2017.

What do you need to do?

In order to take full advantage of the convenience of Provider eClaims Services, you need to register on RWAM's Plan Member Services website at <https://planmember.rwam.com> and sign up for direct deposit. This ensures that your claims experience will be paperless...from the claims submission, to reimbursement, to your Explanation of Benefits.

How does it work?

Claims can be adjudicated while you are in the provider's office, providing you with immediate information regarding the eligibility of your claim.

Using RWAM's Provider eClaims, the eligible reimbursement may be made directly to your bank account or payment can be made to your provider.

Healthcare providers

To take advantage of RWAM Provider eClaims, have your provider register and submit your claims directly to: <https://provider.rwam.com>

For more information visit:

www.rwam.com/en/providers/FAQs.aspx