



April 30, 2022

The Honourable Paul Merriman
Minister of Health

The Honourable Everett Hindely
Minister of Mental Health and Addictions, Seniors, and Rural and Remote Health Care

Government of Saskatchewan
Ministry of Health
Uploaded to: virtualcare.saskatchewan.ca

Re: Public Engagement on Virtual Care

About CLHIA

The CLHIA is pleased to provide comments to the Government of Saskatchewan, Ministry of Health, in response to its consultation on virtual care in the health care sector. The Canadian Life and Health Insurance Association (CLHIA) is a voluntary trade association with member companies that account for 99 percent of Canada's life and health insurance business. Life and health insurers are a significant social and economic contributor in Canada, providing 26 million Canadians with extended health care, dental and disability coverage and making \$38 billion in health benefits payments in 2020. Most benefit plans are offered and funded by plan sponsors (employers) in Canada for the benefit of their employees, partners and dependents

In Saskatchewan, our members protect 760,000 Saskatchewanians with drug, dental and other health benefits.

Executive summary

Virtual care is an important issue for our industry as we provide access to this type of care through our employer sponsored benefit plans. Canadians have access to virtual healthcare providers including doctors, nurse practitioners, and nurses, enabling them to discuss symptoms, obtain prescriptions, and get referrals to other providers.

This matters to employers as they are committed to the health and well-being of their employees and see direct positive impacts to their business through providing access to virtual care through their benefits plans. For example, employees are generally healthier as they can access care at the

Canadian Life and Health Insurance Association
79 Wellington St. West, Suite 2300
P.O. Box 99, TD South Tower
Toronto, Ontario M5K 1G8
416-777-2221 www.clhia.ca

Association canadienne des compagnies d'assurances de personnes
79, rue Wellington Ouest, bureau 2300
CP 99, TD South Tower
Toronto (Ontario) M5K 1G8
416-777-2221 www.accap.ca

onset of symptoms, which leads to a healthier workforce and fewer and shorter disability leaves. There is also a correlation with workplace absences and virtual care as employees can easily access services from their physical or virtual office without having to factor in commuting time to a doctor's office. It also allows for greater access to services for those living in rural and remote communities.

Virtual care is an important part of the future of Canadian healthcare. We have a strong interest in supporting the modernization of policies in order to provide Canadians with greater innovation, choice and access to virtual healthcare across the country, both through the public healthcare system and through other virtual care platforms.

The Importance of Virtual Care

As noted, virtual care is an important issue for our industry. The industry has been a leader in offering innovative products to help Canadians access a wide variety of health care services. It is important to emphasize that our industry's virtual care offerings are meant to complement the care provided by Saskatchewan's public health care system, not compete with it. Ideally, the one-to-one relationship with a family doctor is the foundation of primary health care in Canada. The CLHIA sees virtual care as being akin to other health services that that may not be covered by the public health system and are covered through employer benefit plans: physiotherapy, dental, mental health supports (in certain cases), some laboratory services and some diagnostic imaging.

Through the various offerings across our industry, Canadians have virtual access to doctors, nurse practitioners, and nurses enabling them to discuss symptoms, obtain prescriptions, and get referrals to other providers. Virtual care helps connect patients to the health system when a visit to the emergency room is not warranted or feasible. Virtual care also provides quick access to mental health supports and other virtual health care where appropriate, including in the management of their day-to-day health needs and in supporting their recovery from disability and, where appropriate, their return to work. These services provide flexibility to assist patients with access and help reduce the pressure on the overall healthcare system. Virtual care also helps benefit plan sponsors (employers and unions) meet their goals for overall employee health and well-being.

Rural populations and disadvantaged groups should have equitable access to virtual care. Investment in broadband infrastructure is essential to ensure equitable access is possible.

The COVID-19 pandemic accelerated the need for access to virtual services and the industry and public healthcare systems responded. For that reason, overall, we are supportive of the progress towards employing more virtual healthcare services within the health care sector. In our view this can and should be done in a way that does not diminish the existing virtual service offerings provided by the industry. Given the industry's experience with the implementation of virtual health care services, we appreciate the opportunity to share our observations and suggestions for the Ministry of Health to consider.

In addition, [a recent study](#) of one of our industry virtual care platforms found a direct correlation between utilization of employer paid virtual care and cost and strain reduction on Canada's healthcare system. For example, on average, a visit to the emergency department in Canada costs the public healthcare system \$202 while a visit to a doctor's office or clinic costs \$44 per consultation.

The economic modelling from the above noted study suggests that telemedicine platforms that are part of employer paid health plans save the Canadian healthcare system \$52 on average for every consultation that would have otherwise taken place through standard public care.

The study found that as telemedicine adoption rates continue to rise, it is estimated that by 2025 virtual care platforms could save governments up to \$1 billion per year.

As we noted above, this kind of service is meant to complement existing provincial health care systems and not compete with them. We view the one-to-one relationship with a family doctor as the foundation of primary health care in Canada.

Virtual care is an important part of the future of Canadian health care. We have a strong interest in supporting the modernization of policies in order to provide Canadians with greater innovation, choice and access to virtual health care across the country, both through the public healthcare system and through other virtual care platforms.

Responses to Ministry of Health Questions

Q1: What key learnings and insights have we gained over the last two years that should be reflected in a virtual care strategy?

In the last two years, virtual care has played a critical role in enabling healthcare across Canada. Abacus Data completed a Health Attitudes survey for the CLHIA between January and February 2022. It provides insights into how virtual care is perceived by Canadians generally and those living in Saskatchewan after two years of frequent use during the pandemic.

Nationally, 58% of Canadians are satisfied with their ability to access health information by phone or video in their province. However, 32% are dissatisfied with their ability to have a timely consultation with their doctor or medical appointment. In fact, wait times are a problem throughout the health system with at least 82% of respondents indicating that timely access to various appointments (mental health, general medical appointments, consultations with specialists and doctors), is an area of the health system that requires urgent and important improvement. The CLHIA believes virtual care can help address wait times and provide Canadians with access to the health system, sooner.

In Saskatchewan, 65% of respondents have used virtual care in the last couple of years at least once. Of those who have used the service, 95% were satisfied with their experience and only 5% were dissatisfied. For many in Saskatchewan, virtual care services suit their needs. It is not surprising that 86% of respondents from Saskatchewan approve of government expanding virtual care to increase access to advice and information, more than any other province.

Q2: What are the key challenges and opportunities before us in Saskatchewan as we incorporate virtual care as a more permanent aspect of our health care delivery?

Please see response to Q4.

Q3: How can we best use virtual care to enhance outcomes in the area of patient and provider experience, health outcomes, and overall system efficiency?

Secure delivery of health care services and ensuring patient privacy are also key to the success of virtual care. Patients need to know they can receive services through a safe, secure and private connection to their healthcare provider.

Further, once services are delivered virtually, primary physicians need to be able to access digital records to ensure continuity of care. If electronic records are stored on multiple platforms, such platforms need to be compatible, allowing access by primary physicians and virtual providers, alike.

As with any change to the provision of healthcare, processes to define, track, and measure the success of any virtual care offerings and processes on health outcomes should be developed, with a feedback process to determine and implement areas where improvements can be made.

Q5: What system level policy frameworks and other enablers are required to support our overall success as a health system?

During COVID, many health care professionals were suddenly faced with having to offer virtual care services so their patients could continue to have access to care. During the rush to bring these services to Canadians, in many cases, it was discovered that well developed policies by health care regulators (i.e. regulatory colleges) on virtual care services were not available. Our industry believes that, as virtual care becomes a more common mode of care delivery, there needs to be well-developed medically supported guidelines in place to ensure patient safety and quality of care. The standard of care should be set at an equivalent level to that of in-person consultations.

Saskatchewan's health care regulatory bodies (i.e. health profession colleges) have a pivotal role to play in the development of these policies. The range of issues to be addressed include:

- a. who can provide and who can receive virtual services? Do both the provider and patient have to be resident and physically located in Saskatchewan at the time of service? Can a Saskatchewan resident access care from a provider based outside of the province? Can a Saskatchewan based provider provide virtual service to a non- Saskatchewan resident?
- b. patient identification and verification protocols
- c. patient consent protocols to address both the nature of the virtual care and any associated risks, and the transmission of personal information through a digital medium
- d. documentation and reporting standards for virtual services with patient-reported issues but without provider-observed results, to ensure transparency about how the services were delivered, and
- e. technical specifications for secure digital modes of communication to ensure protection of personal health information.
- f. regulations should enable information sharing through integrated electronic health records so these can be shared and accessed by primary and virtual care providers over different platforms.

Outside of regulatory changes, we encourage governments to continue to invest in broadband infrastructure to ensure that those in rural, remote and Indigenous communities have access equitable to those living in urban centres.

Consideration should also be given to those without access to technology due to socio- economic barriers.

Q9: Is there any other information you would like to share with the Ministry of Health on this important topic area?

Virtual care is an important issue for our industry as we provide access to this type of care through our employer sponsored benefit plans. Virtual care provided through employer sponsored plans are meant to complement the care provide by Saskatchewan’s public health care system, not compete with it. Ideally, the one-to-one relationship with a family doctor is the foundation of primary health care in Canada.

Our industry looks forward to working with your government to continue to maximize the benefits of virtual care for the residents and employers in Saskatchewan.

Thank you for your consideration of this submission. We would be pleased to discuss any of the issues raised in this submission in more detail at your convenience.

Sincerely,

Joan Weir
Vice-President, Group Benefits
jweir@clhia.ca
416-294-9384