

~~Don't~~ Sweat the Small Stuff

A new chapter each week – a 4 minute read!

Chapter 10 – Our First Visit to the Big Smoke

Trip to the Big Smoke

For those of us who do not live in Toronto it has always had a number of nicknames and monikers – some complimentary and some derogatory. “Toronto is like New York run by the Swiss” was famously coined by Peter Ustinov as a truly positive characterization that Toronto was world class like New York but was efficient, clean, safe and friendly. It is often referred to as Hogtown or the Big Smoke. I know that the term Hogtown comes from the fact that Toronto was the centre of the hog industry for a significant period of the late 1800s and early 1900s. I had often heard the term the Big Smoke – I simply assumed it was in reference to Toronto being the largest metropolitan centre of the country and was a large industrial city by North American standards. I found that in the 1970s journalist Allan Fotheringham used the term to describe the city as full of hot air – a big reputation but little to show for it. I have a much fonder view of Toronto.

There can be no doubt that Toronto is truly the epicenter of our medical system. A good golfer could hit a ball in front of the Ontario legislature and hit a building that represents the centre of health care in Ontario. (UHN, Princess Margaret, SickKids, Mount Sinai, Ontario Health, Ministry offices and a myriad of physician offices.) This small area represents somewhere between \$7 and \$10 billion of health spending or roughly 10% - 15% of the entire provincial health care budget. We are talking about an area of about 10 city blocks!

In our mind this represents great value for the people of Ontario, - world leading expertise in so many areas and it is available to all Ontarians. Our first trip to Toronto was a three day session that started with trepidation. We knew that Princess Margaret was willing to consider Carol for a stem cell transplant but they would have to do their own assessment to determine if she was a candidate. Carol had to have a number of tests and bloodwork done. We were surprised that we had to report to Toronto General Hospital to have blood work done and then wait while the results were run across the street and delivered to Princess Margaret by foot! I am sure that this has changed as UHN has continued to merge the large entities that have come under its umbrella.

Small Stuff # 14 – It Pays to Know Someone

This is a bit of the back door access but our choice of Princess Margaret and our oncologist was not by chance. Lucy Bonanno who had been the CEO at Geraldton hospital contacted me when she heard that Carol had lymphoma. Lucy was on the board of the Lymphoma Canada and she

mentioned that a fellow board member was a well-known lymphoma oncologist and she was happy to recommend him. His name was Dr. John Kuruvilla and he was at Princess Margaret. Her recommendation was great with us and this was who we asked to be referred to.

When we met with Dr. Kuruvilla we were impressed with his demeanour. He was matter of fact but truly engaging. He did not sugar coat the road ahead but indicated that we would move forward together and after the review of all of the data and their analysis he concluded that Carol was a good candidate for the stem cell transplant. As he talked to us he quickly signed the Northern Travel Grant documentation that is a part of many patient visits to downtown Toronto.

Small Stuff #15 – Northern Travel Grant (NTG) – Needed but unnecessarily complicated.

Our first NTG claim was the reason I started writing this story. The NTG is an important program that allows residents of the north to access care that is not available locally. If you have to travel more than 100 km to access care you can submit a claim to be reimbursed for a portion of your travel. The program has grown and is in the vicinity of \$100 million in annual costs to the Ministry. The NTG process requires a paper form that must be signed by the referring physician and then signed by the specialist or physician that you are being referred to once the service has been provided. The form has been the same for a significant period of time. The questions of the referring physician determine that the service being referred for is not available locally. The specialist must answer 4 questions – three of them are almost always “No” (One of the questions is “Is this service for the Cleft Palate and Lip Program”??), but there is one question – “Is this medical service for an OHIP insured service?” – which must be answered Yes. Our oncologist checked all of the boxes without really reading the form as he was talking to us and signed his name to the bottom of the form. He mistakenly answered No to all questions. Hence the reason for our claim to be rejected. Interestingly the letters of rejection did not provide why the claims were being reject but simply that they were rejected. This required follow up phone calls with the Sudbury office to find out why the claims were rejected.

A Northern Travel Grant Fix

As a lifelong resident of the north I am familiar with the NTG and the role it plays in ensuring more equitable access to services. While important this does not mean that the program could not be improved. Given that OHIP has paid our referring physician to provide a service and his/her practice address is in the north and the service is tied to Carol’s health card number we can easily establish where the service was provided, who provided it and who it was provided to. Similarly the specialist we would see will similarly bill OHIP – his place of practice is known and the billing will indicate who the service was provided to. This is a process that could be automated quite easily. Adding a tag on the referring physician’s bill for service – “Does this require travel and a NTG payment” – the entire process could happen electronically. While the form asks information about modes of transportation the Ministry has simplified the process by simply paying the equivalent mileage irrespective of how you travel.

I realize that this may reduce the headcount at the Sudbury Ministry office but this is a process that is crying out for simplification and automation.

Next Chapter – A Month in TO – The best of the best!