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Update # 19

Updates

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Recruitment for Survey Code Evaluations Set to Begin

Recruitment for the evaluation of the intensity of medical services will begin later this month. Eleven evaluation sites have been chosen across the province. The Angus Reid Group will manage the recruitment and supervise the evaluation sessions. Angus Reid will conduct a random recruitment of physicians from across the province representing all OHIP specialties and key physician demographics.

2000

[September 22](#)

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Section Executives were asked by the Commission to provide Angus Reid with a letter encouraging their members to participate in the survey code evaluations if contacted by Angus Reid. A sample letter was sent to all Section Chairs. To date, a number of Sections have not yet provided a letter. It is important that all Sections provide a letter as soon as possible to assist in the successful recruitment of physicians from their specialty.

1999

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The Commission is considering options for those cases where an adequate recruitment of physicians from a given specialty is not achieved.

For further detail related to the recruitment process, contact the Commission offices.

Report on Commission Pilot Study

In July 1999, the RBRVS Commission of Ontario conducted a pilot study to test aspects of the methodology related to the evaluation of the intensity of medical services. The purpose of the pilot study was to test a number of factors to inform the design of the process to collect intensity data regarding the survey codes. The pilot study showed a high level of agreement among physicians in rating the intensities of medical services. It also showed that the ratings between specialties and their related specialties are very close. Physicians in one specialty are able to rate the services of related or close specialties consistently and reliably. Even if unfamiliar with a service, when enough information is supplied, physicians are able to rate services very close to those familiar with the code.

1998

[November 18](#)

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A full report on the pilot study and its results will be distributed this week.

Further Commission Decisions Regarding Reference Codes

[July 3](#)[May 29](#)[April 8](#)[March 30](#)[February 4](#)**1997**[November 19](#)[October 23](#)[September 4](#)[August 7](#)[July 29](#)[July 2](#)

On the basis of the positive results of the pilot study, the Commission re-evaluated the use of reference codes in the upcoming process. The Commission examined the reference code and pilot study data with a view to developing a modified approach that preserves the integrity of the rating process and methodology and maintains the usefulness of reference code intensity ratings as examples for raters while addressing the concerns of some Sections about the use of reference codes.

Based on the advice of the Commission's technical consultants panel, the following decisions have been made concerning reference codes:

- i. A selected number of individual intensity-specific ratings, chosen from the strongest reference code data, will act as examples to demonstrate the rating level definitions to be used in the evaluation of the survey codes. In other words, a relatively small number of example intensity ratings will be used, not whole codes.
- ii. All of the 88 original reference codes will be added to the list of survey codes to be evaluated, including the example intensity ratings used to demonstrate the rating level definitions.

Preliminary Conclusions of Lost Opportunity Cost Study

Lost opportunity cost is the term used to describe those costs (i.e. lost opportunity to generate income) incurred by a physician due to required specialty training. Early last year, the Commission retained the actuarial firm, Watson Wyatt Canada, to undertake the task of determining an accurate opportunity cost evaluation for each specialty and considering the application of this factor to the new relative value schedule.

Watson Wyatt independently conducted an extensive study using economic data for the period from 1993 to 1998. The preliminary results of their study show that there appear to be relatively negligible lost opportunity costs during the years of postgraduate training for specialists. It is anticipated that Watson Wyatt's final report will be ready for distribution in early November.