Health Professions Appeal and Review Board

Health Services Appeal and Review Board

Ontario Hepatitis C Assistance Plan Review Committee

Commission d'appel et de révision des professions de santé

Commission d'appel et de révision des services de santé

Comité de révision du Programme ontarien d'aide aux victimes de l'hépatite C

Ontario

2020-21 Annual Report

Health Professions Appeal and Review Board

Health Services Appeal and Review Board

Ontario Hepatitis C Assistance Plan Review Committee

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Ontario

The Honourable Christine Elliott
Deputy Premier and Minister of Health
Office of the Deputy Premier and Minister of Health
777 Bay Street, 5th Floor
Toronto ON M7A 1N3

June 30, 2021

Dear Minister:

RE: Health Boards Annual Report

On behalf of the Health Professions Appeal and Review Board, Health Services Appeal and Review Board, and the Ontario Hepatitis C Assistance Plan Review Committee (the Health Boards), it is my pleasure to submit the 2020-21 Annual Report.

Yours sincerely,

Christine Moss, Chair
Health Professions Appeal and Review Board
Health Services Appeal and Review Board
Ontario Hepatitis C Assistance Plan Review Committee

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Chair's Message

On behalf of the Health Professions Appeal and Review Board, Health Services Appeal and Review Board, and the Ontario Hepatitis C Assistance Plan Review Committee (the Health Boards), it is my pleasure to submit our Annual Report for the fiscal year of 2020-21.

The Health Boards are committed to providing timely, accessible and informed service delivery to the Ontario public.

As a result of the adoption of various measures in response to the COVID-19 pandemic, for the first time in the Health Boards' history, all Board work was done remotely. We continued to hold telephone, video and written reviews/hearings and ensured open lines of communication with those requiring accessibility accommodations and language interpretation as necessary. While there has been a decrease in the overall number of filed requests for reviews and appeals in 2020-21, the Health Boards remained busy as we continued to review and hear matters received during the prior year in 2019-2020 (during which a record number of requests were received) as well as record number of appeals received under the *Health Protection and Promotion Act*. This year also saw the introduction of new members, three to HPARB, four to HSARB, one member cross-appointed to both HPARB and HSARB and two to OHCAP. Extensive training and onboarding have been provided for members to effectively participate in adjudicating matters.

Where possible, we strive to resolve matters brought before the Health Boards within one year. In 2020-21, on average, complaint review matters before the HPARB were resolved in just over a year and registration matters before the Board were resolved in just over 9 months. In regard to health insurance eligibility matters before the Health Services Appeal and Review Board (HSARB), on average these matters were resolved in just over 6 months.

As part of the Ontario Public Services' commitment to anti-racism and reconciliation, I benefitted from my participation in an Indigenous Cultural Competency training course offered by the San'yas Program. The program is designed to increase knowledge, enhance self-awareness and strengthen the skills of those like myself who work directly and indirectly with Indigenous peoples.

The Health Boards recognize the importance of their work and acknowledge the skilled and professional members and staff who are committed to excellence in the service provided to Ontarians. I thank them for their support and steadfast commitment to the work of the Boards, particularly through this very challenging time, and look forward to working with them in 2021-22 to continue to deliver exceptional service.

Christine Moss, Chair
Health Professions Appeal and Review Board
Health Services Appeal and Review Board
Ontario Hepatitis C Assistance Plan Review Committee

Legislative Authority and Mandate

Health Professions Appeal and Review Board

The Health Professions Appeal and Review Board (HPARB) is an independent adjudicative tribunal created by the *Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998* that provides oversight to the regulated health professions of Ontario.

The HPARB functions as a quasi-judicial adjudicative and regulatory tribunal with jurisdiction respecting the regulatory activities of twenty-seven Colleges governing the following twenty-nine regulated health professions (human and animal):

- Audiology
- Acupuncture
- Chiropody
- Chiropractic
- Dental Hygiene
- Dental Technology
- Dentistry
- Denturism
- Dietetics
- Homeopathy
- Kinesiology
- Massage Therapy
- Medical Laboratory Technology
- Medical Radiation Technology
- Medicine
- Midwifery
- Naturopathy
- Nursing
- Occupational Therapy
- Opticianry
- Optometry
- Pharmacy
- Physiotherapy
- Psychology
- Psychotherapy
- Respiratory Therapy
- Speech-Language Pathology
- Traditional Chinese Medicine
- Veterinary

The HPARB also functions as a quasi-judicial adjudicative and regulatory tribunal with jurisdiction respecting the decisions of the Accreditation Committees for pharmacies and veterinarian facilities and the practice privilege decisions of the Boards of Directors of Ontario's public hospitals.

The majority of the work conducted by the HPARB involves appeals of the decisions made by the Inquiries, Complaints and Reports Committees (ICRC) of the self-regulating health professions Colleges in Ontario under the *Regulated Health Professions Act, 1991* and decisions made by the Complaints Committee of the College of Veterinarians of Ontario under the jurisdiction of the *Veterinarians Act* ("complaint reviews"). The HPARB has the authority under these Acts to:

- Confirm or rescind all or part of the Committee's decision;
- Make recommendations to the Committee; and
- Require the Committee to take further action.

The work of the HPARB also involves appeals respecting applications for professional registration that have been refused or restricted by Registration Committees of the Colleges and the accreditation of veterinary and pharmacy facilities. The HPARB has the authority under these Acts to:

- Confirm the Registration Committee's order or proposed decision;

- Require the College to issue a certificate of registration or licence to the applicant, if they complete examinations or training required by the Registration Committee;
- Require the College to issue a certificate of registration or licence to the applicant, with any terms or limitations the Board considers appropriate, if the applicant qualifies for registration and if the Registration Committee has exercised its power improperly;
- Refer the matter back to the Registration Committee with recommendations.

In addition to the above, the work of HPARB involves appeals under the *Public Hospitals Act* with regard to the practice privilege decisions of the boards of Ontario's public hospitals. The HPARB has the authority under the Act to:

- Confirm the decision;
- Direct the hospital Board, person, or body making the decision to take such action as directed by the HPARB;
- Substitute its opinion for that of the hospital Board, person or body making the decision.

The HPARB can inquire into or make a decision concerning the constitutional validity of a provision of an Act or a regulation.

A list of the statutes under which appeals and reviews may be conducted by the HPARB can be found at www.hparb.on.ca. Regulations under the statutes that may affect proceedings before the HPARB may be found at www.e-laws.gov.on.ca.

Health Services Appeal and Review Board

The Health Services Appeal and Review Board (HSARB) is an independent adjudicative tribunal created by the *Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998* that functions as a quasi-judicial adjudicative tribunal with jurisdiction respecting decisions on disputes that arise under twelve different statutes:

- *Ambulance Act*;
- *Commitment to the Future of Medicare Act*;
- *Healing Arts Radiation Protection Act*;
- *Health Facilities Special Orders Act*;
- *Health Insurance Act*;
- *Health Protection and Promotion Act*;
- *Home Care and Community Services Act*;
- *Immunization of School Pupils Act*;
- *Independent Health Facilities Act*;
- *Laboratory and Specimen Collection Centre Licensing Act*;
- *Long-Term Care Homes Act*; and
- *Private Hospitals Act*.

The HSARB has varied authority under the twelve different statutes for which it has an appeal or review mandate. The majority of the work conducted by the HSARB falls under the jurisdiction of the *Health Insurance Act* and involves appeals where:

- An individual is entitled to be an insured person under the Ontario Health Insurance Plan (OHIP) but has received a decision from the General Manager of OHIP that OHIP does not cover the health services the person is claiming ("subscriber" appeal), such as an insured person who received treatment out of country; or
- An individual has received a decision from the General Manager of OHIP that they are not entitled to be an insured person under OHIP ("eligibility" claim).

The HSARB has the authority under *Health Insurance Act* to:

- Affirm or rescind the decision;
- Direct the General Manager to take such action as the Board considers the General Manager should take;
- Substitute its opinion for that of the General Manager.

Other examples of the work of the HSARB include appeals respecting:

- Decisions of approved agencies under the *Home Care and Community Services Act* regarding eligibility for and amount of community services;
- Orders of the Medical Officer of Health or public health inspectors under the *Health Protection and Promotion Act*;
- Orders and decisions of the Director under the *Long Term Care Homes Act*; and
- Decisions of the Director under the *Independent Health Facilities Act* with respect to licensing of independent health facilities;
- Decisions of the General Manager of OHIP under the *Health Insurance Act* related to physician billing.

The HSARB cannot inquire into or make a decision concerning the constitutional validity of a provision of an Act or a regulation. However, the courts have clarified that the HSARB is to apply "Charter values"[1] in interpreting legislation.

A list of the statutes under which appeals and reviews may be conducted by the HSARB can be found at www.hsarb.on.ca. Regulations under the statutes that may affect proceedings before the HSARB may be found at www.e-laws.gov.on.ca.

Ontario Hepatitis C Assistance Plan Review Committee

The Management Board of Cabinet established the Ontario Hepatitis C Assistance Plan (OHCAP) Review Committee on March 1, 1999. The Review Committee is an independent administrative tribunal, which operates at arms-length from the Ministry and its OHCAP Program Office. The Review Committee, comprised of members appointed by the Minister of

[1] *E. H. v. General Manager Ontario Health Insurance Plan* 2012 ONSC CanLII 5106.

Health, reviews decisions of the OHCAP Program Adjudicator respecting eligibility for benefits under the Plan.

Members of the public can apply to the OHCAP Program Office for financial assistance if before January 1, 1986, or from July 2, 1990 to September 28, 1998:

- They contracted hepatitis C virus (HCV) through the blood system in Ontario;
- They were infected with HCV by a spouse, partner or mother who contracted HCV through the blood system in Ontario; or
- They are the personal representative of an estate of an individual who contracted HCV through the blood system in Ontario during the period covered by the Ontario Plan.

OHCAP applicants dissatisfied with a Program Office decision can request a review of that decision by the OHCAP Review Committee. The OHCAP Review Committee conducts a review of the initial application and Program Office decision and determines the applicants' entitlement to the specified program benefit. The OHCAP Review Committee can either confirm or reverse the initial decision of the OHCAP Program Adjudicator. The proceedings are not open to the public and decisions are confidential.

Further information on the Ontario Hepatitis C Assistance Plan can be found on the Ministry of Health website at www.health.gov.on.ca.

Mission

The Health Boards are committed to providing the highest quality service to the public, and to being valued partners in the delivery of health care in Ontario for all stakeholders.

Operational Highlights

Updated Templates

In 2020-2021, the Health Boards continue to work on updating templates used by the Boards. Templates for complaint review matters, which represent the largest volume of matters before the Health Boards along with consent forms, were rolled out in 2019-2020 using plain language principles, to ensure the work of the Boards is made simple and clear, and to improve the accessibility and transparency for the parties before the Boards, especially with those with no legal experience. More updated forms for the remaining matters before the Health Boards are expected to be rolled out in the upcoming year.

Modernization Initiatives

The Health Boards Secretariat staff created a digital committee that looked at ways to have all files before the Health Boards be in an electronic format. Our modernization initiative first

began in 2018-2019 where all registration matters were in an electronic format. As of 2020-2021 all files before the Health Boards became electronic, and are delivered to all parties, when possible, electronically. Exceptions are made for those with accommodation requests and parties who are unable to receive materials electronically.

In 2020-2021, there was an increase in the number of videoconferences for our reviews and hearings at the Health boards due to the suspension of in-person matters. The Boards continue to look at available digital platform options for future Board matters.

Legislative Changes

During the global pandemic, new legislation was introduced which temporarily affected the processes of the Health Boards.

In response to the pandemic, the three-month waiting period for OHIP coverage was removed from Regulation 552 effective March 19, 2020. All individuals enrolled for OHIP after March 19, 2020 were immediately covered and individuals who were currently in their three-month waiting period were eligible for OHIP coverage as of March 19, 2020. As a result of this change, there has been a decrease in the number of *Health Insurance Act* eligibility appeals before the HSARB during 2020-2021. The removal of the three-month waiting period for OHIP coverage is temporary and once this temporary measure is removed, the HSARB expects an increase in the number of eligibility appeals under the *Health Insurance Act*.

2020-21 also saw the introduction of the *Emergency Management and Civil Protection Act*, where proceedings in Ontario, subject to the discretion of the court, tribunal or other decision-maker responsible for the proceeding, be suspended for the duration of the emergency. This suspension took place from March 16, 2020 to September 14, 2020 which affected the Health Boards as timelines were suspended for parties to file a request for review or hearing, Colleges were no longer required to provide record of investigations within 15 days from the date of HPARB's request, and legislative requirements to hold a hearing or review within specific timeframes were suspended.

In July 2020*, Reopening Ontario (A Flexible Response to COVID-19) Act* came into effect. Orders made under section 7.0.2 or 7.1 of the *Emergency Management and Civil Protection Act* that had not been revoked as of the day this subsection came into effect continued to be valid and effective. As a result of this Act, HSARB has seen an increase in the number of appeal requests under the *Health Protection and Promotion Act* specifically those that fall under Section 22 Orders.

Additional changes were made to Regulation 552 under the *Health Insurance Act.* Effective January 1, 2020 the "travellers provisions" (section 28.2, 28.3 and 29) were changed so that there was no authority for the General Manager of OHIP to reimburse out-of-country claims under the aforementioned sections. However, in September 2020, an order stemming from a divisional court decision, Canadian Snowbirds Association Inc. v. Attorney General of Ontario, 2020, overturned part of Regulation 259 which removed the provision under Regulation 552

that out-of-country medical expenses are no longer reimbursed by OHIP. Subscriber appeals were on the decline in 2020-2021 but will be closely monitored to see how this change will affect appeal requests in 2021-2022.

In July 2020, an amendment to the *Judicial Review Procedure Act* saw changes to the timeliness of application submissions. Under section 5 of the J*udicial Review Procedure Act*, an application for judicial review shall be made no later than 30 days after the date the decision or matter for which judicial review is being sought was made or occurred. In response to this amendment, our HPARB complaint review decision transmittal letters were updated to include this amendment and indicate that parties have the right to request a judicial review of the Board's decision within 30 days of the date the decision was made. 2020-2021 saw a slight decrease in appeals for judicial review but will continue to be monitored to see how this amendment affects future applications for judicial review.

Public Disclosure of Adjudicative Tribunal Expense Information

The Travel, Meal and Hospitality Expenses Directive (Directive) requires that information about expenses for all appointees to provincial agencies be posted on an appropriate public website. This requirement had not been enforced due to confidentiality and security concerns raised by ministries and tribunals at the time the requirement came into effect in 2015. However, in November 2020 it was communicated that ministries must ensure that the information for expenses incurred by adjudicative appointees in Q4 2020/21 are posted no later than July 1, 2021 and expenses must continually be posted each quarter. To ensure compliance with the directive, in 2021-2022, staff will continue to participate in the working group formed for this initiative.

Professional Development

In 2020-21, the Health Boards held an All Member Training session in the spring and for the first time via video conference and included within the program, relevant and dynamic speakers. All Member Training provides an opportunity for members to be educated on issues that are relevant to the work of the Boards as well as to discuss initiatives to support improved delivery of services to parties before the Boards, stakeholders and the public.

Highlights of the All Member Training session in 2020-2021 included a session on a Supreme Court decision, *Canada (Minister of Citizenship and Immigration) v. Vavilov, 2019 SCC 65* with the focus on looking at reasonableness, a key criteria when reviewing decisions of the ICRC of the health regulated Colleges. The session provided additional resources and concepts to consider when Board Panels write decisions in respect to reasonableness. The Chair also used All Member Training sessions to remind members of their ethical obligations under the *Public Service of Ontario Act* along with the Health Boards' duties under the *French Language Services Act*.

With the appointment of new members to HPARB and HSARB, trainings took place throughout the year to train new members on the complex jurisdiction of the Boards, the disclosure

process of the HPARB in particular topics related to public access to proceedings, publication ban and confidentiality orders, and other functions such as Presiding over matters, facilitation of case conferences, and decision writing. These trainings ensure that there is a succession plan in place and a transfer of knowledge from the senior adjudicators to the new members of the Boards.

The government also launched a new e-Learning program for all public members which is administered by the Public Appointments Secretariat. The program will provide foundational knowledge on the agency sector, their roles and responsibilities as public appointees including their fiduciary duties and acting in an ethical way. The program is a mandatory requirement for all members currently with the Health Boards.

Stakeholder Consultation

In 2020-21, the Chair of the Health Boards and the Registrar of the Health Boards Secretariat, connected with various stakeholders, particularly Registrars of the self-regulated health professional Colleges, OHIP and OHCAP program administrators. The stakeholder consultations provided a forum for the Health Boards to discuss and evolve on project initiatives related to modernization of template forms and conversion to electronic document transmission and methods of proceeding and mutual beneficial operational shifts to improve efficiency of and access to Board processes. The Health Boards will continue to engage stakeholders in 2021-22, to promote initiatives, listen to stakeholder concerns and obtain feedback regarding new projects along with possible impacts and outcomes.

Health Professions Appeal and Review Board Recommendations

In fulfilling its public interest mandate, the HPARB has power to make recommendations in complaint and registration dispositions to the Inquiries, Complaints and Reports Committees and the Registration Committees of the Colleges of the regulated health professions[2] and the Complaints Committee of the College of Veterinarians of Ontario[3]. Recommendations identify concerns in Colleges' process and/or policy and generally, the HPARB finds that the Colleges are responsive in making the recommended changes.

Dispositions issued by the Board during the last fiscal year have been outlined below and provide an example of the type of recommendations that may be included within an HPARB decision. The full Board decisions in these matters can be found on the CanLII website at www.canlii.org.

[2] Section 35(1) of the Health Professions Procedural Code, Schedule 2 to the *Regulated Health Professions Act, 1991* Statutes of Ontario, 1991, c.18.
[3] Section 27(1) of the *Veterinarians Act*, Revised Statutes of Ontario, 1990, c. V.3.

File Number	Board Recommendation
19-CRV-0241	The Board makes a general recommendation to the College that it develop and implement a practice policy to clarify the responsibility of physicians regarding a patient's healthcare preventative screening.
18-CRV-0493 18-CRV-0577	The Board makes a general recommendation that a contemporary interpretation of the linguistic rights and obligations set out in section 23 and section 86 of the Code should include that the College implement, in a reasonable time frame, a) A written policy that explicitly defines the College's obligations to ensure that the members of the public and the members of the profession can use (i.e., communicate and be heard) in French for all dealings with the College (within reasonable limits); b) A French or bilingual register as set out in section 23 of the Code; c) French or bilingual website pages with key policies, guidelines, etc. to ensure members of the public and the members of the profession have access to French versions of the College's communications (within reasonable limits); d) Interactive French forms to file complaints and the appropriate supporting policies, procedures and staff to ensure dealings are carried out in French or in a bilingual manner (within reasonable limits); and e) College shall actively identify, record and document the language of preference of each party and provide services in keeping with its linguistic obligations for all dealings involving that person pursuant to its obligations under section 86(1.1) of the Code.
19-CRV-0422	The Board makes a general recommendation to the College that it review and revisit its policies and procedures governing the College's disclosure practices to parties during the investigation process, and to adopt an approach that is more in line with transparency in the public interest.
19-CRV-0118	The Board makes a general recommendation to the College that it consider making its Risk Assessment Framework publicly available.
19-CRV-0548	The Board makes a general recommendation to the College that it consider providing its members with further and more formal information and guidance on the issue of confirmation bias and the steps which may been taken to reduce the risk thereof.
19-CRV-0442	The Board makes a general recommendation to the College that it should consider having information available to the general public informing the general public as to any dispensing restrictions, including methadone restrictions, which might include publication on the College's website and appropriate signage at the individual pharmacies.

File Number	Board Recommendation
19-CRV-0259	In the public interest, the Board provides a General Recommendation to the College to assess whether additional information and training would benefit its members regarding the impact of cultural/racial bias on Indigenous populations in the medical profession and how such bias may affect a physician's conduct and actions towards Indigenous patients and to provide such information and training as it considers advisable.
19-RRV-0765	The Board understands that as of January 2022, the College will introduce a new examination, the REx-PN™, which may give applicants further opportunities to pass the examination. The Board recommends that the College notify eligible applicants to the Board of this development in the event it is applicable to an applicant's particular circumstances.
20-RHR-0158	The Board makes a General Recommendation to the College that it consider pursuing amendments to the Regulation that would permit the Committee to consider education and training that is completed outside an approved degree program where the education and training can be verified to have been at the level of education and training in an approved program.
19-CRV-0142	The Board makes a recommendation to the College that the Committee consider widening the circumstances in which it either provides complainants with health professionals' replies or seeks further information from complainants.

Record of Investigation Timeliness

Under section 32(1) of the *Regulated Health Professions Act, 1991* and section 25(7) of the *Veterinarians Act*, Colleges are required to provide HPARB with a copy of the record of the investigation related to the complaint within fifteen (15) days after HPARB's request.

59% of the records of investigations received by the HPARB were from the College of Physicians and Surgeons of Ontario, which continues to be the majority of requests for a complaint review.

In 2020-21, approximately 72% of the records of investigations were received from the Colleges to HPARB within 15 days after HPARB's request. Although there was a temporary suspension of timelines to submit the record of investigations due to emergency legislation enacted during the pandemic, the majority were still received within 15 days. The Health Boards will continue to work with the Colleges to promote timely submission of records of investigations.

Section 28(4) Letters

Pursuant to section 28(4) of the *Health Professions Procedural Code* which is Schedule 2 to the *Regulated Health Professions Act, 1991,* it is the duty of the self-regulated health professional Colleges to notify the HPARB when a complaint has not been disposed of within 150 days of receiving a complaint, and the HPARB must be notified every 60 days following if that same complaint has yet to be disposed of. Suspension of legislative timelines as per the *Emergency Management and Civil Protection Act* saw a hold of notifications from the Colleges *f*or a period of time in 2020-2021. The Health Boards continue to work with the Colleges to streamline the transmission method for these letters and are dedicated in looking at ways to efficiently update College notices in the case management system to be able to report figures annually.

Judicial Review

Parties to a complaint review before the Health Professions Appeal and Review have the right to request a judicial review of the Board's decision through the Divisional Court. In 2020-21, the Board received 11 requests for Judicial Review.

	2016-17	2017-18	2018-19	2019-20	2020-21
Requests for Judicial Reviews	9	7	9	14	11

Caseload Statistics

Health Professions Appeal and Review Board

The HPARB received 720 new requests for review or appeal in 2020-21, a decrease from our record high of 1,060 received in 2019-20, but still an increase from the 642 requests received in 2017-18. The HPARB is anticipating that its case conferences convened, matters heard, matters resolved, and decisions issued, volumes will increase in 2021-2022.

The majority of the HPARB's activity continues to be related to reviews of the decisions of the Inquiries, Complaints and Reports Committees (ICRC)[4] of the self-regulated health professional Colleges in Ontario, with 664 new requests for a complaint review in 2020-21, and the majority of these requests continue to be related to decisions of the College of Physicians and Surgeons of Ontario, with 405 of the requests in 2020-21 being related to this College, all decreases from the previous year. The majority of the HPARB's requests related to registration matters are connected to the decisions of the Registration Committee of the College of Registered Psychotherapists of Ontario and the College of Physicians and Surgeons of Ontario, with 15 requests related to each College.

In 2020-21, 92% of the HPARB's complaint review decisions confirmed the decisions of the health professions College's ICRC and 8% returned or returned in part the Committee's

[4] Includes the Complaints Committee of the College of Veterinarians of Ontario

decisions. Regarding registration decisions, in 2020-21, the HPARB confirmed about 78% of decisions of the health professions Colleges Registration Committees and returned or returned in part about 21% of the Committee's decisions.

Table 1: Summary of Activity

	2016-17	2017-18	2018-19	2019-20	2021-20
Requests for Appeal/Hearing/ Review	852	642	964	1,060	720
Case Conferences Convened	759	635	645	614	776
Matters Heard	662	586	544	537	564
Matters Resolved[5]	276	194	210	187	258
Decisions Issued	678	623	522	572	604

Table 2: Summary of Request for Review/Hearing/Appeal by Type

Review/Appeal Type	**2016-17**	**2017-18**	**2018-19**	**2019-20**	**2020-21**
Complaint Review	714	552	820	956	664
Registration and Accreditation	119	72	115	89	48
Public Hospitals Act	8	5	7	8	3
Other[6]	11	13	22	7	5
Total	**852**	**642**	**964**	**1,060**	**720**

Table 3: Summary of Requests for Complaint Review by College

College	**2016-17**	**2017-18**	**2018-19**	**2019-20**	**2020-21**
College of Physicians and Surgeons of Ontario	486	336	573	658	405
College of Nurses of Ontario	45	34	42	91	44
Royal College of Dental Surgeons of Ontario	59	70	47	61	31

[5] Includes matters that were withdrawn (e.g. resolution after a case conference), frivolous & vexatious, ineligible, or dismissed and matters that were closed as a result of timeliness, no jurisdiction, and administrative closure.
[6] Includes Section 26 applications under the *Veterinarians Act* and Section 28 applications under the *Regulated Health Professionals Act* Procedural Code.

College	2016-17	2017-18	2018-19	2019-20	2020-21
College of Pharmacists of Ontario	17	20	38	38	45
College of Veterinarians of Ontario	26	10	28	10	9
College of Psychologists of Ontario	15	10	15	15	17
Other Colleges	66	72	77	83	113
Total	**714**	**552**	**820**	**956**	**664**

Table 4: Summary of Requests for Registration Review or Hearing by College

College	2016-17	2017-18	2018-19	2019-20	2020-21
College of Nurses of Ontario	79	17	17	13	1
College of Psychologists of Ontario	14	5	12	19	8
College of Physicians and Surgeons of Ontario	9	9	15	12	15
College of Registered Psychotherapists of Ontario	8	35	50	30	15
Other Colleges	9	6	21	15	8
Total	**119**	**72**	**115**	**89**	**47**

Table 5: Summary of Complaint Review Decisions

	2016-17	2017-18	2018-19	2019-20	2020-21
Confirmed	531	513	395	452	517
Returned or Returned in Part*	59	41	64	56	50
Total	**590**	**554**	**459**	**508**	**567**

*Includes matters with substituted decisions as well as decisions that were both confirmed and returned

Table 6: Summary of Registration Decisions

	2016-17	2017-18	2018-19	2019-20	2020-21
Confirmed	64	47	30	36	26
Returned or Returned in Part	14	12	12	18	7
Total	**78**	**59**	**42**	**54**	**33**

Health Services Appeal and Review Board

The HSARB received 230 requests for appeal in 2020-21, the highest number of requests since 2015-16.

While the majority of HSARB's activity continues to be related to appeals under the *Health Insurance Act* and the majority of these continue to be related to subscribers (i.e., an individual is entitled to be an insured person under OHIP but has received a decision from the General Manager of OHIP that OHIP does not cover the health services the person is claiming). This appeal type has decreased compared to previous years with a decrease also in matters relating to eligibility (i.e., an individual has received a decision from the General Manager of OHIP that they are not entitled to be an insured person under OHIP). The number of matters relating to physician billing has increased significantly to 36 compared to the 1 file received in 2019-20. Uncommon to previous years and as result of the ongoing provincial restrictions and guidelines surrounding the pandemic, the number of appeals filed under the *Health Protection and Promotion Act* has skyrocketed to 90 new requests, compared to the average of 10 files received from 2016-17 to 2019-20.

In 2020-21, the HSARB denied about 91% of appeals for *Health insurance Act* subscriber matters and granted or granted in part about 9% of appeals. With regard to eligibility matters, the HSARB denied 100% of appeals.

Table 1: Summary of Activity

	2016-17	2017-18	2018-19	2019-20	2020-21
Appeals Received	209	206	195	213	230
Case Conferences Convened	203	214	203	198	144
Matters Heard	65	58	63	49	38
Matters Resolved[7]	187	151	173	185	170

[7] Includes matters that were withdrawn (e.g. resolution after a case conference), frivolous & vexatious, abandoned, ineligible, or dismissed and matters that were closed as a result of timeliness, no jurisdiction, and administrative closure.

Decisions Issued	72	62	64	49	46

Table 2: Summary of Request for Appeal by Type

Appeal Type	**2016-17**	**2017-18**	**2018-19**	**2019-20**	**2020-21**
Health Insurance Act	170	159	146	171	130
Home Care and Community Services Act	18	7	9	11	5
Health Protection and Promotion Act	2	15	10	9	90
Independent Health Facilities Act	2	7	12	7	4
Long-Term Care Homes Act	6	4	6	3	1
Other Acts	11	14	12	12	0
Total	**209**	**206**	**195**	**213**	**230**

Table 3: Summary of *Health Insurance Act* Appeals by Type

Appeal Type	**2016-17**	**2017-18**	**2018-19**	**2019-20**	**2020-21**
Subscriber	115	115	103	111	76
Eligibility	55	44	43	59	21
Physician Billing	-	-	-	1	33
Total	**170**	**159**	**146**	**171**	**130**

Table 4: Summary of *Health Insurance Act* Subscriber Dispositions

Appeal Type	2016-17	2017-18	2018-19	2019-20	2020-21
Granted or Granted in Part	2	5	3	2	3
Denied	46	39	39	27	30
Total	**48**	**44**	**42**	**29**	**33**

Table 5: Summary of *Health Insurance Act* Eligibility Dispositions

Appeal Type	2016-17	2017-18	2018-19	2018-19	2020-21
Granted or Granted in Part	1	2	2	0	0
Denied	9	13	11	9	5
Total	**10**	**15**	**13**	**9**	**5**

Ontario Hepatitis C Assistance Plan Review Committee

The OHCAP Review Committee received 1 appeal in 2020-21. This number is a vast decrease from previous years.

Table 1: Summary of Activity

	2016-17	2017-18	2018-19	2019-20	2020-21
Appeals Received	10	8	5	12	1
Matters Resolved[8]	2	2	2	3	1
Decisions Issued	6	6	4	2	8

[8] Includes matters that were withdrawn and abandoned

Service Standards

Health Professions Appeal and Review Board

Service Standards	Achievement for 2020-21
80% of complaint review matters will be resolved within 12 months of the Board receiving the request for review	The average length of a complaint review matter was just over 12 months
80% of decisions in application for registration matters were issued in less than 12 months from the date the request for hearing or review was made	The average length of a registration matter was just over 9 months

Health Services Appeal and Review Board

Service Standard	Achievement for 2020-21
85% of Health Insurance Act eligibility for OHIP coverage matters will be resolved within 9 months	The average length of a *Health Insurance Act* eligibility matter was just over 6 months

Membership

The HPARB is made up of members of the public, appointed by the Government of Ontario, none of whom can be or ever have been a member of any of the regulated health Colleges.

The HSARB is made up of members of the public, appointed by the Government of Ontario, only three of whom must be members of the College of Physicians and Surgeons of Ontario.

As of March 31, 2021, there were 28 members appointed to the HPARB, 27 members appointed to the HSARB, and four members appointed to the OHCAP Review Committee. Of those members appointed to the HPARB and HSARB, 21 are cross appointed to both Boards. These cross appointed members are noted with an asterisk (*) in the tables below. Two members are cross appointed to HPARB, HSARB and OHCAP Review Committee whereas one member is cross appointed to HPARB and OHCAP Review Committee.

Chair and Vice Chairs (March 31, 2021)

Name	First Appointed	Term Ends
Christine Moss Chair, HPARB, HSARB, OHCAP Review Committee (RC)*	February 2016 (HPARB) February 1999 (HSARB) June 2019 (OHCAP RC)	December 2023 (HPARB) December 2023 (HSARB) June 2023 (OHCAP RC)

Name	First Appointed	Term Ends
Trina Morissette Full-Time Vice Chair, HPARB*	January 2021 (HPARB) February 2021 (HSARB)	January 2022 (HPARB) February 2021 (HSARB)
Mitchell Toker Full-Time Vice Chair, HSARB*	February 2021 (HPARB) January 2021 (HSARB)	February 2022 (HPARB) January 2022 (HSARB)
Thomas Kelly Part-Time Vice Chair, HSARB*	December 2005 (HPARB) July 2012 (HSARB)	December 2021 (HPARB) July 2022 (HSARB)

HPARB Members (March 31, 2021)

Name	First Appointed	Term Ends
Timothy Bates*	July 2010	July 2023
Maria Capulong*	September 2017	September 2022
Anna-Marie Castrodale*	November 2019	November 2021
Harold Domingo	March 2020	March 2022
Beth Downing*	December 2009	December 2022
Kathleen Elliott*	March 2007	March 2024
Sonia Gaal*	October 2019	October 2021
François Giroux	November 2012	November 2022
Bonnie Goldberg*	February 2008	March 2024
Mason Greenaway*	November 2017	November 2022
Douglas Kearns*	January 2016	January 2022
Catherine Loik	March 2020	March 2022
Barbara Mellman*	September 2017	November 2022
Valerie Samson	January 2020	January 2022
Deven Sandhu*	March 2020	March 2022
Yasmeen Siddiqui*	May 2010	May 2023
David Scrimshaw*	June 2012	June 2022
Robert Steele	October 2008	January 2023
Stephane Thiffeault*	October 2019	October 2021

Name	First Appointed	Term Ends
Keith Thompson*	October 2019	October 2021
Bonita Thornton	October 2019	October 2021
Karina Vilner	January 2020	January 2022
Carla Whillier*	December 2016	March 2023
Dale Wright*	November 2017	November 2022

HSARB Members (March 31, 2021)

Name	First Appointed	Term Ends
Carmen Abel	March 2020	March 2022
Timothy Bates*	July 2010	July 2023
David Borenstein (Physician Member)	January 2020	December 2024
Maria Capulong*	September 2017	September 2022
Anna-Marie Castrodale*	November 2019	November 2021
Beth Downing*	July 2015	December 2022
Tina Elahipanah	April 2020	April 2022
Kathleen Elliott*	March 2011	March 2024
Sonia Gaal*	October 2019	October 2021
Bonnie Goldberg*	March 2011	March 2024
Mason Greenaway*	November 2017	November 2022
Douglas Kearns*	January 2016	January 2022
Barbara Mellman*	September 2017	September 2022
Deven Sandhu*	March 2020	March 2022
Yasmeen Siddiqui*	May 2010	May 2023
Michel Schofield (Physician Member)	November 2015	May 2021
David Scrimshaw*	June 2012	June 2022
Debbie Snow (Physician Member)	October 2015	October 2025

Name	First Appointed	Term Ends
Stephane Thiffeault*	October 2019	October 2021
Keith Thompson*	October 2019	January 2022
Carla Whillier*	December 2016	March 2023
Heather Willis	March 2020	March 2022
Dale Wright*	November 2017	November 2022

OHCAP Review Committee Members

Name	First Appointed	Term Ends
Anna-Marie Castrodale*	March 2021	November 2021
Beth Downing*	December 2019	December 2021
Bonita Thornton	March 2021	May 2022

Staff

The Health Boards are supported by 20 staff in the Health Boards Secretariat (HBS) of the Ministry of Health. The HBS is led by a Registrar and includes an executive support team, case management team, administrative support team, and information technology team.

The HBS also processes per diem and expense claims to public members of the health regulatory Colleges and fee-for-service claims and assessment order invoices related to matters before the Consent and Capacity Board and Ontario Review Board.

The shared resource structure provides financial and operational efficiencies, including the ability to shift resources in line with what can be a variable appeal volume to the adjudicative bodies. This shared resourcing model is consistent with recent trends in the administrative justice sector in Ontario towards clustering of agencies.

Financials

The below financial information does not include salary and wages for Health Boards Secretariat staff or facilities as these expenditures are shared between the HPARB, HSARB and OHCAP Review Committee and also support HBS's paymaster function. Salary and wage

information for the full-time Chair and Vice Chairs of the HPARB and HSARB are also not included in the below financial information as they are funded out of the HBS budget.

With the continued loss of many senior adjudicators on both HPARB and HSARB, training was conducted remotely with the newer members of the Boards on the more senior tasks of adjudication such as Presiding matters, facilitating case conferences, and decision writing. The decreased expenditures for the HSARB in 2020-21 is largely due to the loss of those senior members and substantial reduction in expenses incurred for travel. Anticipated increases in expenditure are expected once travel restrictions ease and expected increases in the Board's intake levels.

Health Professions Appeal and Review Board

Expenditure Category	**2016-17**	**2017-18**	**2018-19**	**2019-20**	**2020-21**
Part-Time Per Diem Payments	1,825,944	1,993,471	2,158,524	1,952,435	2,355,256
Travel[9]	136,623	90,846	107,710	94,462	3,405
Legal Services	177,832	176,930	199,326	220,344	157,167
Other Services[10]	138,430	101,735	112,045	64,872	48,856
Supplies and Equipment[11]	4,243	3,826	3,684	6,137	4,589
Total	**2,283,072**	**2,366,808**	**2,581,289**	**2,338,250**	**2,569,272**

Health Services Appeal and Review Board

Expenditure Category	**2016-17**	**2017-18**	**2018-19**	**2019-20**	**2020-21**
Part-Time Per Diem Payments	251,938	279,574	376,158	381,505	237,198
Travel[12]	12,145	4,317	13,230	16,457	75
Legal Services	138,600	115,500	143,692	55,420	33,972
Other Services[13]	46,019	33,673	32,184	26,776	26,143
Supplies and Equipment[14]	490	1,023	1,247	3,794	4,631
Total	**449,192**	**434,087**	**566,512**	**483,952**	**302,020**

[9] Includes travel for full-time and part-time appointees (e.g. air, rail, taxi, parking, etc.).
[10] Includes costs such as audio conferencing charges, translation services, court reporter fees, etc.
[11] Includes costs such as those for office machines, stationary and office supplies, etc.
[12] Includes travel for full-time and part-time appointees (e.g. air, rail, taxi, parking, etc.).
[13] Includes costs such as audio conferencing charges, translation services, court reporter fees, etc.
[14] Includes costs such as those for office machines, stationary and office supplies, etc.

Ontario Hepatitis C Assistance Plan Review Committee

Expenditure Category	2016-17	2017-18	2018-19	2019-20	2020-21
Part-Time Per Diem Payments	9,698	10,075	4,920	5,074	0
Travel[15]	463	0	0	0	0
Other Services[16]	0	83	92	85	80
Total	**10,161**	**10,158**	**5,012**	**5,159**	**80**

[15] Includes travel for full-time and part-time appointees (e.g. air, rail, taxi, parking, etc.).
[16] Includes costs such as audio conferencing charges, translation services, etc.