**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

# 2022-23 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 Sylvia Jones
Deputy Premier and Minister of Health
Office of the Deputy Premier and Minister of Health
777 Bay Street, 5th Floor
Toronto ON M7A 1N3

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 2022-23 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 2022-23.

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

The Health Boards remained busy as the number of requests rose from the 2021-22 year. The Health Professions Appeal and Review Board (HPARB) received 801 requests in comparison to 682 requests received in 2021-22. In addition to 801 requests being received, 615 matters were heard, and 592 decisions were issued. Resulting from the COVID-19 pandemic, the Board has prioritized digital transformation and innovation through the modernization of its services. Proceedings are conducted via teleconferencing or videoconferencing, and in a hybrid combination of both channels. For those that cannot attend digitally, accommodation requests are reviewed for in-person proceedings on a case-by-case basis. While the Health Boards have encouraged digital proceeding formats, access to services is ensured and accommodations are approved when needed.

In addition to the transformation to digital proceedings, the Health Boards also introduced digital training sessions. In 2022-23 the Health Boards conducted two training sessions in a hybrid format, with some members attending in person, while most attended by videoconference. By conducting training in this format, the Health Boards were able to facilitate new digital learning strategies. This year also saw the introduction of one new member to HPARB, and two to the Health Services Appeal and Review Board (HSARB). Recruitment for new members to the Health Boards as well as recruitment for a full time Vice-Chair for the HPARB is underway.

The Health Boards revised a document called the Practice Direction titled "Public Access to Proceedings" and issued an updated copy. The newly updated document now aligns with the provisions of Tribunals Adjudicative Records Act and its updates, affecting interim processes of the Health Boards. The Health Boards sought to ensure a higher level of transparency, allowing for greater public access to proceedings. The revised Practice Direction aimed to create a level playing field and ensure equitable treatment for all parties involved in the Health Boards' proceedings.

In 2022-23, both *the Long-Term Care Homes Act, 2007* and the *Home Care and Community Services Act, 1994* were repealed and were replaced by the *Fixing Long-Term Care Act, 2021* and the *Connecting Care Act, 2019.* In turn, the Health Boards worked to analyze the changes brought on by the new legislation as well as prepare to facilitate new templates as well as training which will be rolled out in the coming year.

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 Health Boards, particularly through this very challenging time, and look forward to working with them in 2023-24 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*;
- *Connecting Care Act*;
- *Immunization of School Pupils Act*;
- *Independent Health Facilities Act*;
- *Laboratory and Specimen Collection Centre Licensing Act*;
- *Fixing 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 *Connecting Care 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 *Fixing 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.

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

### 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 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 2022-2023, the Health Boards continued to work on updating its templates including revising previously issued template letters for all physician billing matters before the HSARB. In previous years, the Health Boards rolled out templates for complaint review matters and included simple and clear language, to improve accessibility and transparency. These templates continue to be revised, and more updated forms, particularly for HSARB matters, are expected to be rolled out in the upcoming year.

## Post-Pandemic Impact

The COVID-19 pandemic continued to have an impact on the number of matters before the Health Boards as well as the subject matter of requests. In 2022-23 the HPARB saw an increase in the number of complaint reviews, and many files being opened were a direct result of the pandemic. The Health Boards received an influx of requests in part due to the Regulatory Health Colleges managing their caseloads which were impacted by the pandemic and related protocols. In 2023-24 it is anticipated that the content of the requests received by the Health Boards, as well as the increased case numbers brought on by the pandemic, will begin to ease.

## Modernization Initiatives

In 2022-23, the Health Boards continued to prioritize digital transformation and innovation through the modernizing of its services. Proceedings were conducted electronically via teleconferencing and videoconferencing as well as conducted in a hybrid manner, via both channels. For those unable to participate in matters via digital platforms, the Health Boards worked to safely accommodate limited in-person proceedings.

Training sessions held by the Health Boards in 2022-23 were also conducted digitally through videoconferencing, as well as in-person in a hybrid format. Through this new method of presenting information, the Health Boards were able to invoke new digital learning strategies. These training sessions were unique to previous sessions as questions that arose during these trainings could be asked and answered interactively.

In 2022-23, the Health Boards continued working with stakeholders and parties to ensure that they receive, and send, all documents and materials electronically using a safe and secure portal.

## Legislative Changes

In April 2022, the *Fixing Long-Term Care Act, 2021* came into effect and replaced the repealed legislation: *Long-Term Care Homes Act, 2007.* This new legislation regulates Ontario's long-term care home sector. The main changes address requirements related to staffing and care, accountability and transparency, enforcement, and licensing. Under the *Fixing Long-Term*

*Care Act, 2021,* a holder of a long-term care home license issued under the Act, or a person who the Director decides is not eligible to be issued a license may appeal to the HSARB. Decisions of a placement coordinator determining a person "ineligible" for long-term care home admission may also be appealed to the Board.

In May 2022, the *Home Care and Community Services Act, 1994* and its regulations were repealed. Provisions under the *Connecting Care Act, 2019* then came into effect. The overall purpose of the *Connecting Care Act, 2019* is to create a single agency for integrated public health care: Ontario Health. Historically, decisions that could be appealed under the *Home Care and Community Services Act, 1994* can similarly be appealed to the HSARB under the *Connecting Care Act, 2019*. These include decisions to receive and exclude services as well as decisions regarding the number of services and decisions to terminate service.

With both the *Fixing Long-Term Care Act, 2021* and *Connecting Care Act, 2019* coming into effect in the 2022-23 fiscal year*,* the Board worked to analyze the Acts and their impact on the work of the HSARB and prepared for the creation of updated templates as well as updated training was provided to board members. New templates to reflect these changes are expected to be rolled out in the coming year.

## Professional Development

In 2022-23, the Health Boards held two All-Member Training sessions. One session was held in the spring and one in the winter; both conducted within a hybrid meeting format. The training sessions included 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 Health Boards as well as to discuss initiatives to support improved delivery of services to parties appearing before the Health Boards, stakeholders, and the public.

Highlights of the 2022-23 All-Member Training sessions included a session on administrative justice with the focus on looking at accessibility and inclusivity, as well as a session on procedural fairness. The Chair also used the sessions to remind members of their ethical obligations under the *Public Service of Ontario Act*, the Health Boards' duties under the *French Language Services Act*, and a refresher on the Accessibility, Health and Safety and Respectful Workplace Policies.

With the appointment of one new member to HPARB and two new members to HSARB, new member training sessions took place throughout the year to teach new members the complex jurisdiction of the Health Boards, the disclosure process of the HPARB, topics related to public access to proceedings, publication bans and confidentiality orders, and other functions such as presiding over matters, facilitation of case conferences, and decision writing. These trainings provide mentorship opportunities and ensure that succession plans are in place and that there is a transfer of knowledge from the senior adjudicators to the new members of the Health Boards.

## Stakeholder Engagement

In prior years, stakeholder engagement efforts were hindered due to the ongoing pandemic. In 2022-23, the Chair of the Health Boards met with various stakeholders remotely, particularly newly appointed Registrars of the self-regulated health professional Colleges. Other key stakeholders include the Health Professions Regulators of Ontario, and representatives of the Ontario Health Insurance Plan. By consulting with stakeholders, opportunities are created for the Health Boards to address concerns, discuss procedural improvements, and gather feedback regarding new projects and the possible impact they may have on the work of the stakeholders. In 2023-24, the Health Boards will remain committed to engaging with stakeholders on a regular basis both remotely and in-person.

## French Language Services

The Health Boards are committed to actively providing French language services and proceedings in accordance with the *French Language Services Act* (FLSA) and work to ensure that French language services are easily accessible and actively offered. In addition to all documents produced by the Health Boards being available in French, as well as receiving submissions in French, the Health Boards also include language their decisions, advising that upon request a copy of the decision can be provided in either official language. In 2022-23, the Health Boards prepared to meet their obligations under the new regulation of the Act ensuring compliance by April 1, 2023. Some of the requirements include bilingual greetings, prominent signage in French as well as ensuring the public and stakeholders are made immediately aware that French services are available. The Health Boards continue to work to ensure that FLSA obligations, goals and commitments continue to be met.

## Revised Practice Direction: Public Access to Proceedings

In April of 2022, the Health Boards revised the Practice Direction "Public Access to Proceedings." These revisions resulted in an updated version of the Practice Direction being posted. The purpose of these revisions was to align the document with the provisions of *Tribunals Adjudicative Records Act* and its updates. As a consequence of these revisions, the interim processes of the Health Boards were decommissioned.

The main reasons behind these changes were to enhance the principles of efficiency, transparency, and fairness within the Health Boards' operations. By updating the Practice Direction, the Health Boards aimed to streamline their processes, making them more efficient. They also sought to ensure a higher level of transparency, allowing for greater public access to proceedings. The revised Practice Direction aimed to create a level playing field and ensure equitable treatment for all parties involved in the Health Boards' proceedings

### 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.

In 2022-23, approximately 40% of the records of investigations were received from the Colleges to HPARB within 15 days after HPARB's request. Within 15-20 days of the request, 14% of the records of investigations were received and within 20-30 days, 21% were received. The remaining 25% of records of investigations were received after 30 days from the initial request. The Health Boards will continue to work with the Colleges to promote timely submission.

### Judicial Review

Parties to a complaint review before the Health Professions Appeal and Review Board have the right to request a judicial review of the Board's decision through the Divisional Court.

In 2022-23, the Board saw a decrease in judicial review requests, receiving 7. The number of requests for judicial review has decreased by 68% from the 2021-22 year and is the lowest total in the last 5 years. Due to upcoming legislative changes, the Board anticipates that the number of requests will increase in the coming year.

| | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Requests for Judicial Reviews | 9 | 14 | 11 | 22 | 7 |

## Caseload Statistics

### Health Professions Appeal and Review Board

The HPARB received 801 new requests for review or appeal in 2022-23, an increase from last years 682 requests. This past year the HPARB conducted 583 hearings and reviews, a decrease from 615 matters heard last year. In addition, the HPARB issued 592 decisions, a decrease from the last two years.

The majority of the HPARB's activity continues to be related to reviews of the decisions of the Inquiries, Complaints and Reports Committees (ICRC)[2] of the self-regulated health professions Colleges in Ontario. The HPARB received 757 new requests for a complaint review in 2022-23, and the majority of these requests continue to be related to decisions of the College of Physicians and Surgeons of Ontario, with 451 of the requests in 2023-23 being related to this College.

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

In 2022-23, approximately 95% of the HPARB's complaint review decisions confirmed the decisions of the health professions College's ICRC and approximately 5% returned or returned in part the Committee's decisions. Regarding registration decisions, in 2022-23, the HPARB confirmed about 91% of decisions of the health professions Colleges Registration Committees and returned or returned in part about 9% of the Committee's decisions.

**Table 1: Summary of Activity**

| | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Requests for Appeal/Hearing/ Review | 964 | 1,060 | 720 | 682 | 801 |
| Case Conferences Convened | 645 | 614 | 776 | 721 | 581 |
| Matters Heard | 544 | 537 | 564 | 615 | 583 |
| Matters Resolved[3] | 210 | 187 | 258 | 222 | 225 |
| Decisions Issued | 522 | 572 | 604 | 606 | 592 |

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

| **Review/Appeal Type** | **2018-19** | **2019-20** | **2020-21** | **2021-22** | **2022-23** |
|---|---|---|---|---|---|
| Complaint Review | 820 | 956 | 664 | 639 | 757 |
| Registration and Accreditation | 115 | 89 | 48 | 31 | 35 |
| Public Hospitals Act | 7 | 8 | 3 | 5 | 5 |
| Other[4] | 22 | 7 | 5 | 7 | 4 |
| **Total** | **964** | **1,060** | **720** | **682** | **801** |

**Table 3: Summary of Requests for Complaint Review by College**

| **College** | **2018-19** | **2019-20** | **2020-21** | **2021-22** | **2022-23** |
|---|---|---|---|---|---|
| College of Physicians and Surgeons of Ontario | 573 | 658 | 405 | 368 | 451 |
| College of Nurses of Ontario | 42 | 91 | 44 | 45 | 96 |

[3] 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.
[4] Includes Section 26 applications under the *Veterinarians Act* and Section 28 applications under the *Regulated Health Professionals Act* Procedural Code.

| College | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Royal College of Dental Surgeons of Ontario | 47 | 61 | 31 | 67 | 75 |
| College of Pharmacists of Ontario | 38 | 38 | 45 | 45 | 35 |
| College of Veterinarians of Ontario | 28 | 10 | 9 | 22 | 12 |
| College of Psychologists of Ontario | 15 | 15 | 17 | 19 | 8 |
| Other Colleges | 77 | 83 | 113 | 73 | 80 |
| **Total** | **820** | **956** | **664** | **639** | **757** |

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

| College | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| College of Nurses of Ontario | 17 | 13 | 1 | 3 | 3 |
| College of Psychologists of Ontario | 12 | 19 | 8 | 10 | 13 |
| College of Physicians and Surgeons of Ontario | 15 | 12 | 15 | 3 | 5 |
| College of Registered Psychotherapists of Ontario | 50 | 30 | 15 | 9 | 10 |
| Other Colleges | 21 | 15 | 9 | 6 | 4 |
| **Total** | **115** | **89** | **48** | **31** | **35** |

**Table 5: Summary of Complaint Review Decisions**

| | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Confirmed | 395 | 452 | 517 | 527 | 545 |
| Returned or Returned in Part* | 64 | 56 | 50 | 54 | 31 |
| **Total** | **459** | **508** | **567** | **581** | **576** |

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

**Table 6: Summary of Registration Decisions**

| | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Confirmed | 30 | 36 | 26 | 21 | 10 |
| Returned or Returned in Part | 12 | 18 | 7 | 3 | 1 |
| **Total** | **42** | **54** | **33** | **24** | **11** |

## Health Services Appeal and Review Board

The HSARB received 196 requests for appeal in 2022-23, a slight increase from 190 matters received in 2021-22.

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 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 seeking). This appeal type has increased compared to previous years with a decrease 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 appeals filed under the *Health Protection and Promotion Act* has decreased steeply to 8 new requests from 60 requests in 2021-22 which was a result of the ongoing provincial restrictions and guidelines surrounding the pandemic.

In 2022-23, the HSARB denied 93% of appeals for *Health insurance Act* subscriber matters as well as denying 100% of appeals for *Health Insurance Act* eligibility matters.

**Table 1: Summary of Activity**

| | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Appeals Received | 195 | 213 | 230 | 190 | 196 |
| Case Conferences Convened | 203 | 198 | 144 | 178 | 119 |
| Matters Heard | 63 | 49 | 38 | 27 | 36 |
| Matters Resolved[5] | 173 | 185 | 170 | 172 | 133 |
| Decisions Issued | 64 | 49 | 46 | 34 | 26 |

**Table 2: Summary of Request for Appeal by Type**

| Appeal Type | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| *Health Insurance Act* | 146 | 171 | 130 | 124 | 167 |
| *Connecting Care Act*[6] | 9 | 11 | 5 | 2 | 4 |

[5] 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.
[6] Replaced the *Home Care and Community Services Act, 1994.*

| Appeal Type | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| *Health Protection and Promotion Act* | 10 | 9 | 90 | 60 | 8 |
| *Independent Health Facilities Act* | 12 | 7 | 4 | 0 | 8 |
| *Fixing Long-Term Care Act*[7] | 6 | 3 | 1 | 3 | 7 |
| *Other Acts* | 12 | 12 | 0 | 1 | 2 |
| **Total** | **195** | **213** | **230** | **190** | **196** |

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

| Appeal Type | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Subscriber | 103 | 111 | 76 | 59 | 120 |
| Eligibility | 43 | 59 | 21 | 33 | 21 |
| Physician Billing | - | 1 | 33 | 32 | 26 |
| **Total** | **146** | **171** | **130** | **124** | **167** |

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

| Appeal Type | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Granted or Granted in Part | 3 | 2 | 3 | 0 | 1 |
| Denied | 39 | 27 | 30 | 18 | 13 |
| **Total** | **42** | **29** | **33** | **18** | **14** |

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

| Appeal Type | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Granted or Granted in Part | 2 | 0 | 0 | 0 | 0 |
| Denied | 11 | 9 | 5 | 8 | 3 |
| **Total** | **13** | **9** | **5** | **8** | **3** |

[7] Replaced the *Long-Term Care Homes Act, 2007.*

### Ontario Hepatitis C Assistance Plan Review Committee

The OHCAP Review Committee received 1 appeal request in 2022-23.

**Table 1: Summary of Activity**

| | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Appeals Received | 5 | 12 | 1 | 0 | 1 |
| Matters Resolved[8] | 2 | 3 | 1 | 0 | 2 |
| Decisions Issued | 4 | 2 | 8 | 2 | 0 |

## Service Standards

### Health Professions Appeal and Review Board

| Service Standards | Achievement for 2022-23 |
|---|---|
| 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 under 13 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 11 months |

### Health Services Appeal and Review Board

| Service Standard | Achievement for 2022-23 |
|---|---|
| 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 8 months |

[8] Includes matters that were withdrawn and abandoned

# 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, three of whom must be members of the College of Physicians and Surgeons of Ontario and three of whom must be members of the Law Society of Ontario.

As of March 31, 2023, there were 28 members appointed to the HPARB, 22 members appointed to the HSARB, and 4 members appointed to the OHCAP Review Committee. Of those members appointed to the HPARB and HSARB, 15 are cross appointed to both Health Boards. These cross appointed members are noted with an asterisk (*) in the tables below. All three OHCAP members are also cross appointed to HPARB, and HSARB.

**Chair and Vice Chairs (March 31, 2023)**

| Name | First Appointed | Term Ends | 2022-23 Remuneration |
|---|---|---|---|
| Christine Moss<br>Chair, HPARB, HSARB, OHCAP Review Committee* | February 2016 (HPARB)<br>February 1999 (HSARB)<br>June 2019 (OHCAP RC) | December 2023 (HPARB)<br>December 2023 (HSARB)<br>December 2023 (OHCAP) | $186,621.00 |
| Mitchell Toker<br>Full-Time Vice Chair, HSARB* | February 2021 (HPARB)<br>January 2021 (HSARB) | February 2024 (HPARB)<br>January 2024 (HSARB) | $146,311.00 |
| Thomas Kelly<br>Part-Time Vice Chair, HSARB* | July 2012 (HSARB) | July 2024 (HSARB) | $17,349.00 |
| James Minns<br>Part-Time Vice Chair, HPARB | March 2022 | March 2024 | $37,853.50 |

**HPARB Members (March 31, 2023)**

| Name | First Appointed | Term Ends | 2022-23 Remuneration |
|---|---|---|---|
| Timothy Bates* | July 2010 | July 2023 | $70,137.25 |
| Jean Bedard* | November 2021 | May 2023 | $57,125.00 |
| Anna-Marie Castrodale* | November 2019 | November 2024 | $54,319.00 |
| Beth Downing* | December 2009 | December 2024 | $104,066.00 |

| Name | First Appointed | Term Ends | 2022-23 Remuneration |
|---|---|---|---|
| Kathleen Elliott* | March 2007 | March 2024 | $70,432.00 |
| Lisa Freeman | March 2022 | March 2024 | $0.00 |
| Sonia Gaal* | October 2019 | October 2024 | $96,396.00 |
| Mark Gordon | October 2021 | October 2023 | $81,793.00 |
| Mason Greenaway* | November 2017 | November 2027 | $93,811.30 |
| Greg Kanargelidis | February 2022 | February 2024 | $30,929.00 |
| Thomas Kelly* | December 2005 | December 2024 | $211,435.00 |
| Catherine Loik | March 2020 | March 2025 | $95,826.00 |
| Michelle Mann-Rempel* | February 2022 | May 2023 | $29,971.00 |
| Barbara Mellman* | September 2017 | November 2027 | $17,700.00 |
| Shawn Ouimet | February 2022 | February 2024 | $0.00 |
| Valerie Samson | January 2020 | January 2025 | $40,280.00 |
| Diana Smith | October 2021 | October 2023 | $36,675.00 |
| Robert Steele | October 2008 | March 2026 | $92,184.00 |
| Kayla Stephenson | November 2021 | November 2023 | $0.00 |
| Stephane Thiffeault* | October 2019 | October 2024 | $60,995.00 |
| Bonita Thornton* | October 2019 | October 2024 | $123, 682.45 |
| Karina Vilner | January 2020 | January 2025 | $21,836.00 |
| Teresa Walsh | March 2022 | March 2024 | $26,681.00 |
| Carla Whillier* | December 2016 | March 2026 | $35,301.00 |
| Stephen Kovanchak | April 2022 | April 2024 | $67,353.00 |

**HSARB Members (March 31, 2023)**

| Name | First Appointed | Term Ends | 2022-23 Remuneration |
|---|---|---|---|
| Carmen Abel | March 2020 | March 2025 | $6136.00 |

| Name | First Appointed | Term Ends | 2022-23 Remuneration |
|---|---|---|---|
| Timothy Bates* | July 2010 | July 2023 | $944.00 |
| Jean Bedard* | May 2021 | May 2023 | $15,014.00 |
| Anna-Marie Castrodale* | November 2019 | November 2024 | $0.00 |
| Beth Downing* | July 2015 | December 2024 | $29,751.00 |
| Tina Elahipanah | April 2020 | April 2025 | $6372.00 |
| Kathleen Elliott* | March 2011 | March 2024 | $11,840.50 |
| Sonia Gaal* | October 2019 | October 2024 | $0.00 |
| Mason Greenaway* | November 2017 | November 2027 | $10,327.50 |
| Michelle Mann-Rempel* | May 2021 | May 2023 | $28,180.00 |
| Barbara Mellman* | September 2017 | December 2027 | $0.00 |
| Charles Peniston | June 2021 | June 2023 | $0.00 |
| Jennifer Sarjeant | April 2022 | April 2025 | $8260.00 |
| Debbie Snow | October 2015 | October 2025 | $13,894.00 |
| Stephane Thiffeault* | May 2022 | May 2025 | $8815.00 |
| Bonita Thornton* | May 2022 | May 2025 | $0.00 |
| Carla Whillier* | December 2016 | March 2026 | $472.00 |
| Heather Willis | March 2020 | March 2025 | $11,092.00 |
| Hy Bloom | April 2022 | April 2024 | $0.00 |

**OHCAP Review Committee Members**

| Name | First Appointed | Term Ends | 2022-23 Remuneration |
|---|---|---|---|
| Anna-Marie Castrodale* | March 2021 | November 2024 | $0.00 |
| Beth Downing* | December 2019 | December 2024 | $0.00 |
| Bonita Thornton* | March 2021 | May 2025 | $0.00 |

# Staff

The Health Boards are supported by 19 staff in the Health Boards Secretariat (HBS) of the Ministry of Health. The HBS is led by a Senior Manager and 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 the HBS' 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.[9]

Overall, the Health Boards saw a decrease in expenditures in part due to the reduction in board member shift to digital proceedings that was brought on by the pandemic. As the Health Boards have shifted to electronic hearings and reviews, the small number of expenses were incurred due to the in-person training session. Anticipated increases in expenditure are expected in the upcoming year because of an anticipated increase in the Health Board's intake levels, increase of in-person proceedings and board membership.

**Health Professions Appeal and Review Board**

| Expenditure Category | 2018-19 | 2019-20 | 2020-21 | 2021-22 | 2022-23 |
|---|---|---|---|---|---|
| Part-Time Per Diem Payments | 2,158,524 | 1,952,435 | 2,355,256 | 1,938,105 | 1,847,285 |
| Travel[10] | 107,710 | 94,462 | 3,405 | 0 | 298 |
| Legal Services | 199,326 | 220,344 | 157,167 | 166,265 | 190,777 |

[9] Financial reporting includes minor reclassifications and edits of previously reported amounts which do not affect the accuracy of current year reporting.

[10] Includes travel for full-time and part-time appointees (e.g. air, rail, taxi, parking, etc.).

| | | | | | |
|---|---|---|---|---|---|
| Other Services[11] | 112,045 | 64,872 | 48,856 | 86,738 | 108,937 |
| Supplies and Equipment[12] | 3,684 | 6,137 | 4,589 | 1,884 | 2,151 |
| **Total** | **2,581,289** | **2,338,250** | **2,569,273** | **2,192,992** | **2,149,448** |

**Health Services Appeal and Review Board**

| **Expenditure Category** | **2018-19** | **2019-20** | **2020-21** | **2021-22** | **2022-23** |
|---|---|---|---|---|---|
| Part-Time Per Diem Payments | 376,158 | 381,505 | 237,198 | 154,583 | 176,539 |
| Travel[13] | 13,230 | 16,457 | 75 | 0 | 298 |
| Legal Services | 143,692 | 55,420 | 33,972 | 22,750 | 654 |
| Other Services[14] | 32,184 | 26,141 | 26,834 | 32,732 | 27,837 |
| Supplies and Equipment[15] | 1,247 | 4,429 | 3941 | 1,971 | 2,020 |
| **Total** | **566,512** | **483,952** | **302,020** | **212,036** | **207,348** |

**Ontario Hepatitis C Assistance Plan Review Committee**

| **Expenditure Category** | **2018-19** | **2019-20** | **2020-21** | **2021-22** | **2022-23** |
|---|---|---|---|---|---|
| Part-Time Per Diem Payments | 4,920 | 5074 | 0 | 0 | 0 |
| Travel[16] | 0 | 0 | 0 | 0 | 0 |
| Other Services | 92 | 85 | 80 | 88 | 87 |
| **Total** | **5,012** | **5159** | **80** | **88** | **87** |

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