physician at the University of British Columbia, whose focus is on family planning. The choice to not cover birth control is a bad one, she says, both for the company and for the woman. In North America, about 48% of pregnancies are unwanted, according to the International Federation of Gynecology and Obstetrics. Numerous studies, by the Guttmacher Institute and others, says Norman, have found that women with unplanned children are less likely to finish their education and less likely to advance in their careers.

Norman also thinks that covering only the birth control pill and excluding devices is wrong-headed. In the real world, she says, the pill has a failure rate of 9%, whereas so-called "set and forget" methods, like the IUD, have only a 1% failure rate. "It's phenomenal that insurance plans cover these mid-effective methods but not highly effective methods," she says.

"Maybe it's time to revisit this," says Weir. "Plans are not keeping up with the way treatment is delivered." She notes that there hasn't been much concern raised about lack of birth control coverage. "People need to make those wishes known."

Canada is the only country in the world with universal health care, but no pharmacare, which is "outrageous," says Colleen Flood, a health law professor at the University of Ottawa. "My hope is that we'll bring some pharmaceuticals and devices into the public plan. We need a rational process."

Pregnancy remains the world's second biggest killer of reproductive-age women, according to the World Health Organization, resulting in the deaths of some 300 000 women each year. — Alison Motluk, Toronto, Ont.

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Larger claims push CMPA fees up

arger and larger claim settlements are pushing up fees doc-I tors pay to the Canadian Medical Protective Association (CMPA), a not-for-profit medical mutual defence organization serving 92 000 physicians. The exception is in Quebec, where fees are substantially lower than in CMPA's three other regions because cases have historically resulted in lower awards.

Executive Director Dr. Hartley Stern outlined the 2017 fee schedule at the CMPA's recent annual meeting in Vancouver.

The aggregate fee for Ontario physicians will rise 1.4% (or \$138) to \$9991, while in Quebec, the aggregate fee will drop 13% (\$531) to \$3596.

Fees also rose for the British Columbia/Alberta region by 7.1% (or \$450) to \$6785 and by 12% (or \$428) for the Prairies/Atlantic Canada/Territories region to an aggregate \$3988.

Fees levied by the CMPA are based on the cost of anticipated claims against doctors in the year they occurred and an actuarial calculation of future costs, offset by anticipated revenue from the association's investment fund, which last year had a net asset value of \$3.51 billion.

There is no cross-subsidization among the regions. However, provincial governments subsidize fees to varying degrees.

Fees charged to individual physicians are based on the relative risk of their type of practice. In Ontario, for



CMPA fees are up across Canada, except in Quebec, where claim settlements are historically lower.

example, a dermatologist next year will pay \$7092, while an obstetrician will pay \$99 072.

While the cost of settlements fluctuates from year to year, Stern noted that it has gone up steadily in the last decade. This doesn't reflect an increase in complaints so much as an increase in the size of the awards.

The median compensation payment to Ontario patients last year was \$236 800, compared with \$136 100 in Quebec, stated CMPA's Supervisor, Public Affairs Joel Baglole in an email.

"While some regional variance is to be expected, the CMPA believes the

difference in compensation payments is larger than warranted by cost of living differentials or other factors," she stated. "Working collaboratively with the Ontario Medical Association, the CMPA has consistently urged the Ontario government to adopt improvements to the medical liability system that would reduce costs without negatively impacting appropriate compensation for patients."

Baglole wouldn't speculate on what factors might cause Quebec awards to be consistently lower than those in Ontario. — Steve Mertl, Vancouver, BC

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