Emergency medicine journal slams fee-for-service payments

Fee-for-service (FFS) payments are a “dinosaur” when used in emergency departments, the editor of the Journal of the Canadian Association of Emergency Physicians (JCEM 2000;2[4]:228) says. Not only does FFS lead to longer patient waits and physician burnout, says Dr. Grant Innes, but it encourages highly skilled workers to perform low-complexity work and refer early.

“FFS also causes emergency medicine groups to limit their size and maximize single coverage to maintain income,” says Innes, who practises at St. Paul’s Hospital in Vancouver. This in turn leads to longer patient waiting times and increases physician overload, job dissatisfaction and burnout. In the editorial he argues that FFS “motivates us to work like dogs to see more patients faster and to handle more volume than we otherwise would — or perhaps should.”

After 13 years practising in an FFS environment, Innes moved to an alternate funding agreement. He says the improved physician coverage this makes available means he can spend more time with patients in the trauma room and at the same time experience less stress related to patient volume. “FFS rewards high volume and low intensity,” says Innes. “At tax time, the physicians who spent the fewest minutes per patient and treated the most stubbed toes will mail the biggest cheques to Ottawa.” — Barbara Sibuld, CMAJ

Nearly a quarter of Canadians head online for health info

According to a recent Pricewaterhouse-Coopers (PWC) survey, 22% of adult Canadians used the Internet to find health information during the past year and 79% believed the quality of that information needs to be improved.

BC residents were the most likely to have looked for online health information (28%), followed closely by residents of Ontario and Alberta. Quebeckers were least likely (14%).

Although 96% of those who searched indicated that it is easy to find information and it tended to be presented in a manner that was easily understood, 79% felt that it is hard to know which information can be trusted.

According to the survey, which was conducted in the spring of 2000, Canadians aged 65 and over are least likely to have used the Internet in the past year (7%, compared with 72% of those aged 15–24 and 56% of those aged 25–44). However, seniors who are connected presented a manner that was easily understood, 79% felt that it is hard to know which information can be trusted.

The exchange of Internet-based health information sometimes travels in the other direction. The PWC found that 36% of doctors give information found online to patients; 51% of online doctors refer patients to health sites, at least occasionally. Doctors who are not personally online appear to be familiar with some health-related Web sites: 26% of them have referred patients, at least occasionally, to medical sites. — Shelley Martin, martis@cma.ca