

The General Practice Services Committee

Evaluation of the Full Service Family Practice Incentive Program and the Practice Support Program

Final Report: The Uptake of Incentive Payments for the Full Service Family Practice Incentive Program: Fiscal 2009/10

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HIGHLIGHTS OF FINDINGS

- Overall uptake of incentives was 71.1%, it has been constant at 71% to 72% since fiscal 07/08.
- Uptake for regular family GPs (i.e., those with 50 or more MSOC patients) was 92.6% and for non-regular GPs it was 27.5%. The percentages for both groups have been fairly constant since fiscal 07/08.
- The uptake of chronic disease incentives by regular GPs was 87.9%.
- Uptake for GPs who billed at least 10 incentives in fiscal 09/10 was 88.2% for regular GPs and 10.6% for other GPs.
- Full service GPs billed an average of 236.1 incentives in fiscal 09/10, compared to 5.3 for other GPs.
- Full service GPs billed 98.9% of incentives and accounted for 98.6% of all incentive billings. The corresponding percentages for other GPs were 1.1% and 1.4%, respectively.
- There was a relatively modest uptake for chf (59.4%) and obstetrics (20.0%).
- Overall for fiscal 09/10, 804,684 incentives were billed, 795,833 by regular GPs and 8,851 by other GPs.
- Average billings of incentives per GP, overall, were \$28,955, ranging from \$32,511 in urban areas to \$23,183 in small towns.
- Average income from incentives, for the top 100 incentive billers, was \$126,863, ranging from \$107,440 in metropolitan areas to \$42,681 in small towns.

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1. INTRODUCTION

The General Practice Services Committee (GPSC) has contracted with Hollander Analytical Services Ltd. to conduct an evaluation of incentive payments instituted under the Full Service Family Practice Incentive Program (FSFPIP). One of the key elements of the evaluation is to address the extent to which General Practitioners (GPs) use the incentives, that is, the level of uptake of the incentives by GPs. Given that there are payments attached to the incentives which were introduced as fee items in the fee schedule, one would expect a reasonable uptake simply for financial reasons. However, it is not a given that all incentives will be automatically used by GPs. The possible reasons why incentives may not be used include: the level of knowledge by GPs of a given incentive; the burdens of additional paperwork; the possible complexity of the rules around billing and audit; and the timing of payments. In addition, there may be different levels of uptake for the different types of incentives. Finally, it should also be noted that, as a counter to the above points, the incentive payments do allow GPs to provide better care to their patients. This can also serve as a strong inducement to use the incentive payments. The impacts on costs and service utilization in regard to the incentives will be addressed in other reports prepared for this project. This report presents data on the uptake, by GPs, of the incentive payments for fiscal 2008/09.

2. STRUCTURING THE ANALYSIS

2.1 Introduction

Previously, there was no generally agreed upon indicator or formula in British Columbia to determine who is a full service family physician. GPs can have complex working lives. While some GPs work full-time and have a full service practice, others also provide a full service practice but work part-time. In addition, it appears that it is now relatively common for GPs to work in multiple settings. For example, a full service GP may be located with a group of other GPs, and a drop in clinic may be attached to their practices. Thus, GPs may have their own practice but may also work in their own, or another, drop in clinic. Complexity is further compounded as GPs may have their own practice, may work part-time in a drop in clinic, may work as a hospitalist, and/or may work in an emergency department. Thus, given what is now a complex web of working relationships, it is difficult to determine who is a full service GP. Extensive analyses were conducted when the first uptake report was produced. That report recommended the adoption of a definition of a “regular” family doctor as one who had at least 50 Majority Source of Care (MSOC) patients. This definition has been approved by the GPSC and is coming to be adopted by various groups within the Ministry of Health Services.

3. ESTIMATES OF UPTAKE

3.1 Overall Uptake

Table 1 presents the number of GPs in BC for fiscal 2003/04 to fiscal 2009/10, inclusive. It indicates that in fiscal 2009/10 there were an estimated 3,371 “regular”, or full service, GPs using the 50 MSOC rule. Overall, the number of “regular” GPs has been relatively constant over the six years shown in the table.

Table 1: Number of GPs in British Columbia: Fiscal 2003/04 to 2009/10

	All # of GPs						
	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10
All	4,524	4,579	4,669	4,760	4,812	4,905	5,028
Group							
Full Service	3,218	3,204	3,235	3,263	3,291	3,311	3,371
Other	1,306	1,375	1,434	1,497	1,521	1,594	1,657

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10.

Table 2 shows that, for all GPs, the uptake in the use of incentives remained essentially the same as the previous two years. Thus, the 71% to 72% range may represent a ceiling effect in uptake. There may be a similar ceiling effect for “regular” GPs as the uptake in fiscal 2007/08 was 92.2%, for fiscal 2008/09 it was 92.9%, and for fiscal 2009/10 it was 92.6%. The uptake by the “Other” GPs has also remained fairly constant at about 27%. However, as will be shown later, most of these GPs only billed for a few incentives.

Table 2: Percentage of GPs Using Incentives: Fiscal 2003/04 to 2009/10

	% Using Incentives						
	Year						
	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10
All	33.6	46.7	59.7	66.8	71.7	71.5	71.1
Group							
Full Service	45.6	63.3	80.1	87.5	92.2	92.9	92.6
Other	4.1	8.1	13.6	21.6	27.4	27.0	27.5

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Tables 3 presents some descriptive data on GPs for the past two years. Table 3 indicates that there has been a slightly greater growth among the “Other” GPs than the “Regular” or “Full Service” GPs. The increase in the number of Full Service GPs was 60 GPs, while the increase in Other GPs was 63. For fiscal 2007/08 compared to Fiscal 2008/09 the numbers were 20 and 73, respectively. The data for 2008/09 to 2009/10 may indicate a shift to a greater proportion of GPs choosing full service family practice. Table 3 also shows that the majority (93%) of Other GPs billed 25 or fewer incentives, while the majority of regular GPs billed more than 50 incentives (78%).

Table 3: GP Characteristics and Incentive Billings by Number of GPs: Fiscal 2008/09 and 2009/10

	# of GPs					
	2008/09			2009/10		
	Overall	Full Service	Other	Overall	Full Service	Other
All	4,905	3,311	1,594	5,028	3,371	1,657
Provincial MSOC Patients						
1. No Patients	215		215	231		231
2. 1-49 Patients	1,379		1,379	1,426		1,426
4. 50-99 Patients	247	247		265	265	
5. 100-249 Patients	534	534		548	548	
6. 250 or more Patients	2,530	2,530		2,558	2,558	
FTE Factor						
1. Full Time (FTE Factor > 1)	1,971	1,864	107	2,021	1,906	115
2. Full Time (FTE Factor = 1)	1,027	859	168	1,048	869	179
3. Part Time (FTE Factor 0.2 to 0.99)	1,265	533	732	1,311	524	787
4. Part Time (FTE Factor < 0.2)	642	55	587	648	72	576
No. of Incentives						
0 to 25 Incentive Services	2,039	551	1,488	2,070	525	1,545
26 to 50 Incentive Services	296	239	57	285	216	69
51 or more Incentive Services	2,570	2,521	49	2,673	2,630	43
Age Group						
1. 40 and Under	1,127	598	529	1,175	632	543
2. 41-60	2,953	2,190	763	2,945	2,163	782
3. Over 60	825	523	302	908	576	332

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

As can be seen in Table 4, the uptake of incentives for all “Other” GPs was 27.5% in fiscal 2009/10. However, this is reduced to 10.6% if one excludes GPs who billed 10 or fewer incentives in fiscal 2009/10. The average number of incentives billed in fiscal 2009/10 by regular or full service GPs was 236.1, while it was 5.3 for other GPs. Similarly, average billings for regular GPs for fiscal 2008/09 was \$30,282, while it was \$884 for “Other” GPs. This indicates that while the 50 MSOC rule for defining GPs may not be perfect, it seems to be a reasonable estimate. It may also be that there may be a bit of slippage with people billing for incentives who either should not bill, or who may have been able to bill as they were filling in for a colleague.

Table 4: GP Characteristics and Incentive Billings Over Time: Fiscal 2003/04 to 2009/10

		Year						
		2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10
# of GPs	Full Service	3,218	3,204	3,235	3,263	3,291	3,311	3,371
	Other	1,306	1,375	1,434	1,497	1,521	1,594	1,657
	Total	4,524	4,579	4,669	4,760	4,812	4,905	5,028
% GPs in each Group	Full Service	71.1	70.0	69.3	68.6	68.4	67.5	67.0
	Other	28.9	30.0	30.7	31.4	31.6	32.5	33.0
	Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
% Using Incentives	Full Service	45.6	63.3	80.1	87.5	92.2	92.9	92.6
	Other	4.1	8.1	13.6	21.6	27.4	27.0	27.5
	Total	33.6	46.7	59.7	66.8	71.7	71.5	71.1
% Using More than 10 Incentives	Full Service	33.2	44.6	65.6	78.6	87.3	87.8	88.2
	Other	0.8	1.5	4.0	7.9	13.5	11.5	10.6
	Total	23.8	31.7	46.7	56.4	64.0	63.0	62.6
Total Incentives	Full Service	52,908	74,684	101,989	334,931	1,148,032	719,844	795,833
	Other	368	838	1,589	4,382	10,838	10,025	8,851
	Total	53,276	75,522	103,578	339,313	1,158,870	729,869	804,684
Average # of Incentives	Full Service	16.4	23.3	31.5	102.6	348.8	217.4	236.1
	Other	0.3	0.6	1.1	2.9	7.1	6.3	5.3
	Total	11.8	16.5	22.2	71.3	240.8	148.8	160.0
% Incentives in each Group	Full Service	99.3	98.9	98.5	98.7	99.1	98.6	98.9
	Other	0.7	1.1	1.5	1.3	0.9	1.4	1.1
	Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total Incentive Amount in Thousands \$	Full Service	3,968	6,915	8,843	31,179	110,405	92,918	102,079
	Other	28	146	203	708	1,501	1,605	1,465
	Total	3,996	7,061	9,046	31,887	111,906	94,523	103,545
Average \$ for Incentives	Full Service	1,233	2,158	2,733	9,555	33,548	28,063	30,282
	Other	21	106	142	473	987	1,007	884
	Total	883	1,542	1,937	6,699	23,256	19,271	20,594
% Dollars in each Group	Full Service	99.3	97.9	97.8	97.8	98.7	98.3	98.6
	Other	0.7	2.1	2.2	2.2	1.3	1.7	1.4
	Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Tables 5 to 8 present the number and percent of GPs billing for the different types of incentive payments. While the overall uptake was 92.6% for fiscal 2009/10, it was 87.9% for people with chronic diseases, a fairly high percentage. However, the uptake for CHF patients remains relatively low at 59.4% (see Table 8)

In terms of patterns of uptake, the uptake has remained fairly consistent over the past three years for complex care at 73% to 74% (see Table 6). The obstetrics incentive uptake has remained at between 20% and 22% since fiscal 2005/06. There has been a modest decrease in the uptake for the conferencing incentive payment but the uptake for mental health incentives has continued to increase. For fiscal 2009/10 the uptake for acute care discharge was 8.2%, the uptake for palliative care was 19.7% (see Table 6) and the uptake for the COPD incentive was 52.7% (see Table 8). These results may, to some degree, reflect the timing of when the incentive was introduced. With regard to CDM, the overall uptake has remained at just under 88% for the past three years, and the uptake for diabetes has remained at about 86% for the same period. There continues to be modest increases in uptake, over time for hypertension and CHF, although the overall uptake for CHF is still below 60% (see Table 8).

Tables 9 to 12 present the total number of incentives billed, and the average number of incentives billed, for each incentive, by GPs. As was documented in Table 6, there has been a substantial increase in the uptake for the mental health incentive from fiscal 2007/08 to 2008/09. There has also been an increase in the number of incentives billed for CDM. Table 10 indicates that the average number of mental health incentives billed per regular GP rose from 5.3 in fiscal 2007/08 to 22.4 in fiscal 2009/10. Finally, Table 13 presents the total number of patients who received incentive based care from 2006/07 to 2009/10. Diabetes, complex care, and mental health had the largest increase in patients between 2008/09 and 2009/10.

Table 5: Number of GPs Billing for Various Incentives Over Time: Fiscal 2003/04 to 2009/10

		Number Using Incentives									
		All	Any Incentive	Chronic Disease	Obstetrics	Complex Care	Cardiac	Conference	Mental Health	Acute Care Discharge	Palliative Care
All	Year										
	2003/04	4,524	1,522	1,522	0	0	0	0	0	0	0
	2004/05	4,579	2,139	1,963	637	0	0	0	0	0	0
	2005/06	4,669	2,787	2,608	721	0	0	0	0	0	0
	2006/07	4,760	3,179	2,929	814	0	0	1,454	0	0	0
	2007/08	4,812	3,450	3,107	809	2,546	2,528	2,004	1,122	0	0
	2008/09	4,905	3,506	3,124	818	2,567	2,562	1,958	1,856	0	0
	2009/10	5,028	3,576	3,146	791	2,609	2,697	1,915	2,107	290	690
Group	Year										
Full Service	2003/04	3,218	1,469	1,469	0	0	0	0	0	0	0
	2004/05	3,204	2,028	1,883	596	0	0	0	0	0	0
	2005/06	3,235	2,592	2,465	655	0	0	0	0	0	0
	2006/07	3,263	2,856	2,736	706	0	0	1,352	0	0	0
	2007/08	3,291	3,033	2,881	698	2,415	2,370	1,848	1,077	0	0
	2008/09	3,311	3,075	2,912	696	2,444	2,388	1,783	1,736	0	0
	2009/10	3,371	3,121	2,962	673	2,514	2,494	1,765	1,963	278	663
Other	2003/04	1,306	53	53	0	0	0	0	0	0	0
	2004/05	1,375	111	80	41	0	0	0	0	0	0
	2005/06	1,434	195	143	66	0	0	0	0	0	0
	2006/07	1,497	323	193	108	0	0	102	0	0	0
	2007/08	1,521	417	226	111	131	158	156	45	0	0
	2008/09	1,594	431	212	122	123	174	175	120	0	0
	2009/10	1,657	455	184	118	95	203	150	144	12	27

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 6: Percentage of GPs Billing for Various Incentives Over Time: Fiscal 2003/04 to 2009/10

		% Using Incentives								
		Any Incentive	Chronic Disease	Complex Care	Obstetrics	Cardiac	Conference	Mental Health	Acute Care Discharge	Palliative Care
All	Year									
	2003/04	33.6	33.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	2004/05	46.7	42.9	0.0	13.9	0.0	0.0	0.0	0.0	0.0
	2005/06	59.7	55.9	0.0	15.4	0.0	0.0	0.0	0.0	0.0
	2006/07	66.8	61.5	0.0	17.1	0.0	30.5	0.0	0.0	0.0
	2007/08	71.7	64.6	52.9	16.8	52.5	41.6	23.3	0.0	0.0
	2008/09	71.5	63.7	52.3	16.7	52.2	39.9	37.8	0.0	0.0
	2009/10	71.1	62.6	51.9	15.7	53.6	38.1	41.9	5.8	13.7
Group	Year									
Full Service	2003/04	45.6	45.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	2004/05	63.3	58.8	0.0	18.6	0.0	0.0	0.0	0.0	0.0
	2005/06	80.1	76.2	0.0	20.2	0.0	0.0	0.0	0.0	0.0
	2006/07	87.5	83.8	0.0	21.6	0.0	41.4	0.0	0.0	0.0
	2007/08	92.2	87.5	73.4	21.2	72.0	56.2	32.7	0.0	0.0
	2008/09	92.9	87.9	73.8	21.0	72.1	53.9	52.4	0.0	0.0
	2009/10	92.6	87.9	74.6	20.0	74.0	52.4	58.2	8.2	19.7
Other	2003/04	4.1	4.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	2004/05	8.1	5.8	0.0	3.0	0.0	0.0	0.0	0.0	0.0
	2005/06	13.6	10.0	0.0	4.6	0.0	0.0	0.0	0.0	0.0
	2006/07	21.6	12.9	0.0	7.2	0.0	6.8	0.0	0.0	0.0
	2007/08	27.4	14.9	8.6	7.3	10.4	10.3	3.0	0.0	0.0
	2008/09	27.0	13.3	7.7	7.7	10.9	11.0	7.5	0.0	0.0
	2009/10	27.5	11.1	5.7	7.1	12.3	9.1	8.7	0.7	1.6

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 7: Number of GPs Billing for Chronic Disease Management Incentives Over Time: Fiscal 2003/04 to 2009/10

		Number Using Incentives					
		All	Chronic Disease	Diabetes	Heart Disease	Hypertension	COPD
All	Year						
	2003/04	4,524	1,522	1,510	818	0	0
	2004/05	4,579	1,963	1,954	948	0	0
	2005/06	4,669	2,608	2,595	1,268	0	0
	2006/07	4,760	2,929	2,826	1,584	2,235	0
	2007/08	4,812	3,107	3,009	1,964	2,761	0
	2008/09	4,905	3,124	3,020	1,971	2,813	0
	2009/10	5,028	3,146	3,027	2,038	2,886	1,814
Group	Year						
Full Service	2003/04	3,218	1,469	1,457	809	0	0
	2004/05	3,204	1,883	1,877	930	0	0
	2005/06	3,235	2,465	2,457	1,230	0	0
	2006/07	3,263	2,736	2,675	1,548	2,130	0
	2007/08	3,291	2,881	2,828	1,907	2,594	0
	2008/09	3,311	2,912	2,865	1,918	2,658	0
	2009/10	3,371	2,962	2,903	2,002	2,755	1,775
Other	2003/04	1,306	53	53	9	0	0
	2004/05	1,375	80	77	18	0	0
	2005/06	1,434	143	138	38	0	0
	2006/07	1,497	193	151	36	105	0
	2007/08	1,521	226	181	57	167	0
	2008/09	1,594	212	155	53	155	0
	2009/10	1,657	184	124	36	131	39

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 8: Percentage of GPs Billing for Chronic Disease Management Incentives Over Time: Fiscal 2003/04 to 2009/10

		% Using Incentives				
		Chronic Disease	Diabetes	Heart Disease	Hypertension	COPD
All	Year					
	2003/04	33.6	33.4	18.1	0.0	0.0
	2004/05	42.9	42.7	20.7	0.0	0.0
	2005/06	55.9	55.6	27.2	0.0	0.0
	2006/07	61.5	59.4	33.3	47.0	0.0
	2007/08	64.6	62.5	40.8	57.4	0.0
	2008/09	63.7	61.6	40.2	57.3	0.0
	2009/10	62.6	60.2	40.5	57.4	36.1
Group	Year					
Full Service	2003/04	45.6	45.3	25.1	0.0	0.0
	2004/05	58.8	58.6	29.0	0.0	0.0
	2005/06	76.2	76.0	38.0	0.0	0.0
	2006/07	83.8	82.0	47.4	65.3	0.0
	2007/08	87.5	85.9	57.9	78.8	0.0
	2008/09	87.9	86.5	57.9	80.3	0.0
	2009/10	87.9	86.1	59.4	81.7	52.7
	Other	2003/04	4.1	4.1	0.7	0.0
2004/05		5.8	5.6	1.3	0.0	0.0
2005/06		10.0	9.6	2.6	0.0	0.0
2006/07		12.9	10.1	2.4	7.0	0.0
2007/08		14.9	11.9	3.7	11.0	0.0
2008/09		13.3	9.7	3.3	9.7	0.0
2009/10		11.1	7.5	2.2	7.9	2.4

Table 9: Total Number of Incentives Billed Over Time: Fiscal 2003/04 to 2009/10

		Total Number of Incentives								
		Any Incentv	Chronic Disease	OB	Complex Care	Cardiac	Conf Fees	Mental Health	Acute Care Discharge	Palliative Care
All	Year									
	2003/04	53,276	53,276	0	0	0	0	0		0
	2004/05	75,522	74,333	1,189	0	0	0	0		0
	2005/06	103,578	99,519	4,059	0	0	0	0		0
	2006/07	339,313	301,431	14,406	0	0	23,476	0		0
	2007/08	1158870	388,867	15,184	631,372	60,441	45,263	17,743		0
	2008/09	729,869	418,800	15,807	137,641	49,112	43,258	65,231		0
	2009/10	804,684	456,399	15,498	142,662	64,307	44,909	76,400	1,801	2,694
Group	Year									
Full Service	2003/04	52,908	52,908	0	0	0	0	0		0
	2004/05	74,684	73,566	1,118	0	0	0	0		0
	2005/06	101,989	98,261	3,728	0	0	0	0		0
	2006/07	334,931	298,728	13,266	0	0	22,937	0		0
	2007/08	1148032	384,637	13,816	629,113	59,011	43,925	17,530		0
	2008/09	719,844	414,776	14,180	136,503	47,718	42,250	64,399		0
	2009/10	795,833	453,532	13,901	142,137	62,453	43,938	75,443	1,774	2,642
Other	2003/04	368	368	0	0	0	0	0		0
	2004/05	838	767	71	0	0	0	0		0
	2005/06	1,589	1,258	331	0	0	0	0		0
	2006/07	4,382	2,703	1,140	0	0	539	0		0
	2007/08	10,838	4,230	1,368	2,259	1,430	1,338	213		0
	2008/09	10,025	4,024	1,627	1,138	1,394	1,008	832		0
	2009/10	8,851	2,867	1,597	525	1,854	971	957	27	52

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 10: Average Number of Incentives Billed Over Time: Fiscal 2003/04 to 2009/10

		Average Number of Incentives								
		Any Incentive	Chronic Disease	OB	Complex Care	Cardiac	Conf Fees	Mental Health	Acute Care Discharge	Palliative Care
All	Year									
	2003/04	11.8	11.8	0.0	0.0	0.0	0.0	0.0		0.0
	2004/05	16.5	16.2	0.3	0.0	0.0	0.0	0.0		0.0
	2005/06	22.2	21.3	0.9	0.0	0.0	0.0	0.0		0.0
	2006/07	71.3	63.3	3.0	0.0	0.0	4.9	0.0		0.0
	2007/08	240.8	80.8	3.2	131.2	12.6	9.4	3.7		0.0
	2008/09	148.8	85.4	3.2	28.1	10.0	8.8	13.3		0.0
	2009/10	160.0	90.8	3.1	28.4	12.8	8.9	15.2	0.4	0.5
Group	Year									
Full Service	2003/04	16.4	16.4	0.0	0.0	0.0	0.0	0.0		0.0
	2004/05	23.3	23.0	0.3	0.0	0.0	0.0	0.0		0.0
	2005/06	31.5	30.4	1.2	0.0	0.0	0.0	0.0		0.0
	2006/07	102.6	91.6	4.1	0.0	0.0	7.0	0.0		0.0
	2007/08	348.8	116.9	4.2	191.2	17.9	13.3	5.3		0.0
	2008/09	217.4	125.3	4.3	41.2	14.4	12.8	19.5		0.0
	2009/10	236.1	134.5	4.1	42.2	18.5	13.0	22.4	0.5	0.8
Other	2003/04	0.3	0.3	0.0	0.0	0.0	0.0	0.0		0.0
	2004/05	0.6	0.6	0.1	0.0	0.0	0.0	0.0		0.0
	2005/06	1.1	0.9	0.2	0.0	0.0	0.0	0.0		0.0
	2006/07	2.9	1.8	0.8	0.0	0.0	0.4	0.0		0.0
	2007/08	7.1	2.8	0.9	1.5	0.9	0.9	0.1		0.0
	2008/09	6.3	2.5	1.0	0.7	0.9	0.6	0.5		0.0
	2009/10	5.3	1.7	1.0	0.3	1.1	0.6	0.6	0.0	0.0

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 11: Total Number of Chronic Disease Management Incentives Billed Over Time: Fiscal 2003/04 to 2009/10

		Total Number of Incentives				
		Chronic Disease	Diabetes	CHF	Hypertension	COPD
All	Year					
	2003/04	53,276	47,370	5,906	0	0
	2004/05	74,333	67,061	7,272	0	0
	2005/06	99,519	90,198	9,321	0	0
	2006/07	301,431	115,492	13,415	172,524	0
	2007/08	388,867	142,379	18,053	228,435	0
	2008/09	418,800	154,421	19,364	245,015	0
	2009/10	456,399	160,459	19,943	248,328	27,669
Group	Year					
Full Service	2003/04	52,908	47,040	5,868	0	0
	2004/05	73,566	66,323	7,243	0	0
	2005/06	98,261	89,025	9,236	0	0
	2006/07	298,728	114,426	13,301	171,001	0
	2007/08	384,637	140,709	17,852	226,076	0
	2008/09	414,776	152,968	19,180	242,628	0
	2009/10	453,532	159,445	19,834	246,781	27,472
	Other	2003/04	368	330	38	0
2004/05		767	738	29	0	0
2005/06		1,258	1,173	85	0	0
2006/07		2,703	1,066	114	1,523	0
2007/08		4,230	1,670	201	2,359	0
2008/09		4,024	1,453	184	2,387	0
2009/10		2,867	1,014	109	1,547	197

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 12: Average Number of Chronic Disease Management Incentives Billed Over Time: Fiscal 2003/04 to 2009/10

		Average Number of Incentives Per GP				
		Chronic Disease	Diabetes	CHF	Hypertension	COPD
All	Year					
	2003/04	11.8	10.5	1.3	0.0	0.0
	2004/05	16.2	14.6	1.6	0.0	0.0
	2005/06	21.3	19.3	2.0	0.0	0.0
	2006/07	63.3	24.3	2.8	36.2	0.0
	2007/08	80.8	29.6	3.8	47.5	0.0
	2008/09	85.4	31.5	3.9	50.0	0.0
	2009/10	90.8	31.9	4.0	49.4	5.5
Group	Year					
Full Service	2003/04	16.4	14.6	1.8	0.0	0.0
	2004/05	23.0	20.7	2.3	0.0	0.0
	2005/06	30.4	27.5	2.9	0.0	0.0
	2006/07	91.6	35.1	4.1	52.4	0.0
	2007/08	116.9	42.8	5.4	68.7	0.0
	2008/09	125.3	46.2	5.8	73.3	0.0
	2009/10	134.5	47.3	5.9	73.2	8.1
	Other	2003/04	0.3	0.3	0.0	0.0
2004/05		0.6	0.5	0.0	0.0	0.0
2005/06		0.9	0.8	0.1	0.0	0.0
2006/07		1.8	0.7	0.1	1.0	0.0
2007/08		2.8	1.1	0.1	1.6	0.0
2008/09		2.5	0.9	0.1	1.5	0.0
2009/10		1.7	0.6	0.1	0.9	0.1

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 13: Total Number of Patients who Received Incentive Based Care: Fiscal 2006/07 to 2009/10

Number of Patients With Incentives		Year			
		2006/07	2007/08	2008/09	2009/10
Diabetes		115,516	142,657	154,695	160,836
CHF		13,456	18,125	19,501	20,082
Hypertension		173,029	228,723	245,385	248,727
OB		12,095	12,615	13,071	13,131
Conf Fees		11,720	21,334	21,201	21,999
Complex Care		0	113,091	109,562	116,795
Cardiac		0	58,194	47,896	63,283
Mental Health		0	17,408	50,902	61,069
Chronic Obstructive Pulmonary Disease		0	0	0	27,538
Acute Care Discharge Plan		0	0	0	1,009
Palliative Care		0	0	0	1,783

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

3.2 Analysis by Size of Community

Tables 14 to 17 present data by type of community for GPs who billed at least one incentive. The number of GPs in the geographic area are clustered into groups of up to 100 and rank ordered in terms of the amount of their incentive billings. Table 18 presents data for the province as a whole. Thus, for Table 14, one can see that the top 100 billers living in Metropolitan areas, billed an average of \$107,550 in incentive payments. The overall average was \$28,737 (the average for full service GPs was \$32,793). Average billings for urban areas was \$32,511 (\$36,131 for full service GPs) while the top 100 billers averaged \$103,595 (Table 15). Average billings for GPs living in towns was \$23,650 (\$27,131 for full service GPs), while the average for the top 100 was \$63,415 (Table 16). The comparable figures for GPs located in small towns and villages was \$23,183 (\$25,818 for full service GPs), and \$42,681 (Table 17). As can be seen in Table 18, for the province as a whole, the top 100 billers billed an average of \$126,863. The overall average was \$28,955 (\$32,707 for full service GPs).

Table 14: Total Incentive Amount by Rank (2009/10, Metropolitan)

	# of GPs	Patients with Incentives	Incentives	Incentive Amount	Amount Per GP
Ranked Groups High to Low Users Within Location					
1	100	51,074	83,935	10,754,953	107,550
2	100	37,676	53,086	6,998,697	69,987
3	100	33,482	45,412	5,489,178	54,892
4	100	28,145	35,741	4,325,077	43,251
5	100	22,964	27,873	3,408,127	34,081
6	100	18,023	22,816	2,681,893	26,819
7	100	14,361	17,222	2,077,538	20,775
8	100	11,719	13,735	1,663,245	16,632
9	100	9,565	10,789	1,304,459	13,045
10	100	7,793	9,152	962,537	9,625
11	100	5,702	6,216	638,747	6,387
12	100	3,084	3,284	323,841	3,238
13	100	958	1,113	100,783	1,008
14	100	198	240	19,070	191
15	18	18	18	750	42
All	1,418	244,762	330,632	40,748,895	28,737

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 15: Total Incentive Amount by Rank (2009/10, Urban)

	# of GPs	Patients with Incentives	Incentives	Incentive Amount	Amount Per GP
Ranked Groups High to Low Users Within Location					
1	100	47,013	75,307	10,359,460	103,595
2	100	36,048	52,625	7,130,324	71,303
3	100	31,255	42,379	5,729,611	57,296
4	100	26,707	35,337	4,691,284	46,913
5	100	24,955	31,468	3,890,299	38,903
6	100	19,807	24,299	3,145,701	31,457
7	100	16,537	20,721	2,601,974	26,020
8	100	15,291	18,148	2,140,123	21,401
9	100	10,378	12,152	1,616,658	16,167
10	100	9,047	10,366	1,163,755	11,638
11	100	6,002	6,844	742,587	7,426
12	100	2,513	2,776	270,596	2,706
13	100	434	492	47,056	471
14	39	47	53	3,060	78
All	1,339	246,034	332,967	43,532,489	32,511

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 16: Total Incentive Amount by Rank (2009/10, Town)

	# of GPs	Patients with Incentives	Incentives	Incentive Amount	Amount Per GP
Ranked Groups High to Low Users Within Location					
1	100	30,905	45,083	6,341,515	63,415
2	100	19,024	24,689	3,506,181	35,062
3	100	13,679	16,840	2,269,508	22,695
4	100	8,520	9,852	1,295,132	12,951
5	100	4,552	5,261	534,843	5,348
6	92	492	595	53,427	581
All	592	77,172	102,320	14,000,607	23,650

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 17: Total Incentive Amount by Rank (2009/10, Small Town/Village)

	# of GPs	Patients with Incentives	Incentives	Incentive Amount	Amount Per GP
Ranked Groups High to Low Users Within Location					
1	100	22,442	30,998	4,268,063	42,681
2	100	6,672	7,608	977,582	9,776
3	27	131	159	16,890	626
All	227	29,245	38,765	5,262,535	23,183

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10

Table 18: Total Incentive Amount by Rank for BC

	# of GPs	Patients with Incentives	Incentives	Incentive Amount	Amount Per GP
Ranked Groups High to Low Users Within Location					
1	100	55,696	94,653	12,686,282	126,863
2	100	43,176	66,811	8,931,264	89,313
3	100	38,494	56,394	7,754,241	77,542
4	100	36,858	52,189	6,986,182	69,862
5	100	33,963	49,043	6,288,748	62,887
6	100	31,552	42,713	5,717,004	57,170
7	100	30,060	40,623	5,203,963	52,040
8	100	27,667	37,249	4,772,582	47,726
9	100	26,633	34,377	4,400,867	44,009
10	100	24,849	31,904	4,094,236	40,942
11	100	23,401	29,546	3,798,708	37,987
12	100	21,118	26,683	3,458,268	34,583
13	100	20,009	24,473	3,172,013	31,720
14	100	18,856	23,536	2,928,934	29,289
15	100	17,348	21,702	2,727,374	27,274
16	100	16,576	20,246	2,522,154	25,222
17	100	15,608	19,002	2,329,611	23,296
18	100	14,570	17,325	2,133,591	21,336
19	100	13,419	15,945	1,917,813	19,178
20	100	11,923	14,235	1,745,349	17,453
21	100	10,497	12,088	1,603,541	16,035
22	100	9,324	10,930	1,455,883	14,559
23	100	8,795	9,965	1,298,588	12,986
24	100	9,302	10,690	1,152,615	11,526
25	100	7,972	9,231	1,020,337	10,203
26	100	6,996	8,146	891,362	8,914
27	100	6,228	6,922	737,181	7,372
28	100	5,203	5,754	601,636	6,016
29	100	4,160	4,584	457,254	4,573
30	100	2,960	3,176	321,822	3,218
31	100	1,838	2,039	203,736	2,037
32	100	1,072	1,236	120,489	1,205
33	100	555	637	62,348	623

	# of GPs	Patients with Incentives	Incentives	Incentive Amount	Amount Per GP
34	100	278	326	30,326	303
35	100	168	213	13,790	138
36	76	89	98	4,435	58
All	3,576	597,213	804,684	103,544,526	28,955

Source: British Columbia Ministry of Health Services, Primary Care Data Repository, Fiscal 2009/10