Supplementary fees a necessity, physicians argue

Last fall, a Montreal newspaper reported that some local pediatricians were charging parents for routine vaccinations of their children. The supplementary fee was being charged even though physicians get the vaccine for free and doctors in Quebec’s community clinics (CLSCs) will inject it for free, the paper reported. What it didn’t report was that not only is this type of supplementary fee common across Canada, but it is likely to grow in popularity.

“Supplementary fees are assuming more importance and will gain more importance as time goes on,” says Dr. Steve Pelletier, a family physician in Clarence Creek, Ont. “They’re a direct result of a stagnant fee schedule and the rising cost of medical practice and modern equipment.”

As for the vaccination fees charged in Montreal, pediatrician Mary Gillin makes no apologies. “We try to inform everybody about which CLSCs have vaccination clinics, but the fact is the DSC [Departement de santé communautaire] encourages us to do [immunizations in our offices], because otherwise the CLSCs wouldn’t be able to cope,” she says. Her office charges $10 per vaccination.

Lynda London, office manager at Montreal’s Cavendish Health Centre, says patients shouldn’t be surprised by the charges, particularly after doctors’ fees were cut in Quebec, so an office visit that used to pay $16 now pays $14. “We’re not going to eat extra charges … any more,” says London. “Overhead goes up and doctors’ fees go down. Someone has to absorb these costs.”

Every provincial medical association now provides a list of recommended charges for professional acts not covered by medicare plans. These services range from providing proof of a visit to the doctor’s office ($10 in Quebec, $11.19 in Ontario, $22.60 in Alberta) to giving an expert opinion ($200 an hour in Quebec, $223.65 an hour in Ontario, $285–$450 in Alberta). These are suggested amounts only; it is up to the physician to decide if and how much to charge.

Although the lack of monitoring might suggest a wild-west atmosphere of dramatically varying — and escalating — rates, Pelletier says that this is not the case because most physicians are uncomfortable about asking patients for any money. He says many doctors feel that asking patients for money “cheapens the doctor–patient relationship.”

However, Dr. Connie Ellis, a Calgary physician who routinely bills for uninsured services, thinks the opposite is true. “I really support billing for supplementary services because it values us as physicians for the work that we do.”

Pelletier thinks more physicians should support that view. “When patients are told about the time I take to provide an uninsured service, it solidifies the relationship,” he says. “They appreciate me more.”

Regulate tongue piercing, dentist advises

An Edmonton dentist says screening rules involving tongue piercing need to be standardized. Dr. Christine Botchway says this form of “body art” (see page 864) is becoming increasingly popular among young people but the practice remains “completely unregulated.”

Writing in the Journal of the Canadian Dental Association (2001;67[1]:18-9), Botchway complained that there “are no formal guidelines or licensing requirements for tongue piercers in Alberta, or indeed in the rest of Canada.”

Botchway, who had previously written about tooth fractures associated with tongue piercing (J Can Dent Assoc 1998;64[11]:803-5), says dentists or physicians who are asked about tongue piercing should “review the real dangers (some potentially life threatening) associated with the practice.” — Patrick Sullivan, CMAJ