



# *The Canadian Orthopaedic Association* *L'Association Canadienne d'Orthopédie*



## **COA Position Statement Remuneration for Orthopaedic Surgeons During the COVID-19 Pandemic**

The 2020 World COVID-19 pandemic is significantly impacting Canada's population and health-care system. Our top priority, as orthopaedic surgeons, is the safety and health of all Canadians. We support the government in their efforts to cancel activities, events, and nonessential services. We agree that during a pandemic, patients should not attend hospitals or clinics for routine procedures and evaluations. The duration of this pandemic is unknown but most estimates are a minimum of 3 months. Physicians are a key element of the health-care system and the government has a duty to protect them. Orthopaedic surgeons provide an essential service to the population and are committed to continue providing care for acute musculoskeletal injuries and conditions. The ability to provide these services is challenging when physicians, who rely on fee for service income, experience drastic loss in income. Physicians use their fees to cover the expenses of their medical offices. If medical offices are forced to close from this financial impact, where will patients turn for care?

### **Background**

Many orthopaedic surgeons run their medical practice as a small business. They have overhead expenses such as rent and salaries for medical staff that do not end with a pandemic. It is important that surgeons are able to keep their offices afloat during this crisis. This will allow surgeons to address care concerns for acute and long-term patients during the pandemic. It would be unfortunate for chronic care patients to have to attend emergency departments for issues that could be addressed in a clinic setting. Keeping surgeon's offices open will also maintain capacity to provide orthopaedic care when the dust settles.

There is precedence for physician remuneration in the time of crisis. During the SARS epidemic of 2003, hospitals and clinics were closed for 6 weeks in Toronto, Ontario. Affected physicians in Ontario were remunerated at 80% of their mean income. This allowed physicians to keep their offices running so that they could effectively resume patient care after SARS.

### **Potential Solutions**

1. Mean income compensation
2. Basic degree of compensation to all physicians while rewarding frontline workers with "hazard pay"
3. Daily stipend for fee for service physicians
4. Tax incentives, although this is less favoured as it does not address current expenses

### **Conclusion**

The Canadian Orthopaedic Association (COA) is committed to pursuing an open dialogue with members, health authorities, provincial and national governments, and other key stakeholders to address physician remuneration during this crisis. The COA has full support of all the provincial orthopaedic associations in this endeavor. It is also committed to planning and implementing the resumption of services once the pandemic has passed. We encourage governments to maintain orthopaedic surgery engagement through suitable compensation.

**This statement was approved by the Canadian Orthopaedic Association's Practice Management Committee and Executive Committee on April 2, 2020** and prepared by a working group including: Heather Barske, MD, FRCSC, University of Manitoba; Pierre Guy, MD, MBA, FRCSC, University of British Columbia; Mark Glazebrook, M.Sc., Ph.D., MD, FRCSC, Dalhousie University; Cynthia Vezina, Canadian Orthopaedic Association; COA Practice Management Committee; COA Executive Committee.