

Out-of-Province Medical Claims Program



Why We Did This Audit

- The out-of-province and out-of-country medical claims program is vital for ensuring access to medically necessary care not available in the province
- A judicial review found two individuals had been unfairly rejected in their request for coverage
- The Premier requested our Office review and assess the program on its human-centred approach

Key Audit Results

Our audit found about 90% of patients applying for out-of-province medically necessary care are approved. However, patients without in-province specialists still face an unclear and difficult pathway to access care

Oversight of the Program Administrator is inefficient and unclear

- Duplication of review efforts by the Department and the Program Administrator has slowed response times and is not cost-effective

The Department did not have a human-centred approach to review applications

- Human-centred guidance remains limited in policy, despite some tone and language improvement in applicant responses

Appeals process lacks clear policy direction and decision-maker independence

Information regarding the program is not readily available to the public and physicians

This report makes

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Recommendations

to strengthen the out-of-province and out-of-country medical claims program.