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Canadian
Chiropractic
Association

Healthcare Policy News

Month of February 2017





- McMaster University's National Pain Centre released its draft guidelines for the use of opioids for chronic non-cancer pain patients. The draft guidelines will inform Canada's next iteration of guidelines for opioid prescribing.

The proposed guidelines strongly recommend the use of non-opioid pharmacotherapy and non-pharmacological therapy, rather than a trial of opioids.

The National Pain Centre is asking interested parties to submit feedback on the draft guidelines. The Centre has developed a survey to collect feedback.

[Click here](#) for a summary of the development of the draft guideline.

[Click here](#) for a copy of the guideline values preference statement.

[Click here](#) for the draft opioid guideline recommendations.

[Click here](#) to be directed to a the National Pain Centre Draft Guideline Survey.





Federal Government/Federal Agencies

- Prime Minister, Justin Trudeau, announced changes to his Cabinet. The following changes were announced:
 - Chrystia Freeland, currently Minister of International Trade, was appointed as Minister of Foreign Affairs, and retains the Canada-U.S. relations file.
 - Maryam Monsef, currently Minister of Democratic Institutions, was appointed as Minister of Status of Women.
 - Patricia A. Hajdu, currently Minister of Status of Women, was appointed as Minister of Employment, Workforce Development and Labour.
 - François-Philippe Champagne, currently Parliamentary Secretary to the Minister of Finance, was appointed as Minister of International Trade.
 - Karina Gould, currently Parliamentary Secretary to the Minister of International Development, was appointed as Minister of Democratic Institutions.
 - Ahmed D. Hussen was appointed as Minister of Immigration, Refugees and Citizenship.

[Click here](#) for more information.

- The Federal government announced that it had reached an agreement with Nunavut, Yukon, and the Northwest Territories on healthcare transfers. The agreement means that the territories will together get an additional \$36.1 million in new financial funding for mental health and home care over the next 10 years.

[Click here](#) for more information.





Extended Healthcare Coverage

- Aon Hewitt released its *2017 Global Medical Costs for Employer Sponsored Medical Plans* report. According to the report, non-communicable diseases continue to be primary cost drivers.

Global Projections and Trends

The average cost for employer-sponsored medical plans continue to increase globally. Average cost increases are projected to be 8.2% in 2017, up slightly from 8.1% percent in 2016.

Medical cost trend rates continue to increase due to many factors, including an aging population, poor lifestyle habits in emerging countries, cost shifting from social programs, and the increased prevalence and utilization of employer sponsored health plans in many countries.

Projections and Trends: Canada

Over the past several years, medical cost inflation, both gross and net, has been trending higher, signaling a return to historical levels. Medical costs for employer sponsored plans are expected to rise by 8% in 2017 the same level as 2016 on a gross basis.

[Click here](#) for a copy of Aon Hewitt’s summary report.





- Cathy Bennett, the Minister of Finance and President of the Treasury Board, announced the start of pre-budget consultations. The Department of Finance is asking members of the public and stakeholders to submit their pre-budget submissions by February 13, 2017. Stakeholders will be asked for their feedback in outlining priorities under the following areas:
 - A more efficient public service
 - A stronger economic foundation
 - Better services
 - Better outcomes
- [Click here](#) for a copy of the pre-budget consultation.





- The New Brunswick Council on Aging presented its recommendations for a new provincial strategy. The seventeen member council was created last February to develop a strategy that addresses short-term sustainability and long-term changes in order to balance the needs of the aging population with rising costs and pressures to the healthcare system.

[Click here](#) for a copy of the report.

- The Ministry of Finance released its third quarter economic and fiscal update. According to the Department of Finance, the province is projecting a deficit of \$231.1 million.

According to the government, the province is on track to eliminate the deficit by 2020-21. Third-quarter results show higher revenues of \$25.6 million from budgeted. Total expenses are projected to be \$9.6 million higher than budgeted mainly due to increased funding for federal infrastructure programs.

[Click here](#) for a copy of the news release.

[Click here](#) for a copy of the economic and fiscal third quarter report.





- Premier Kathleen Wynne announced changes to her Cabinet. She appointed the following Members of Provincial Parliament to the following Cabinet posts:
 - Marie-France Lalonde moves from Minister of Government and Consumer Services and was appointed as Minister of Community Safety and Correctional Services.
 - Jeff Leal was appointed Minister Responsible for Small Business, in addition to retaining his previous role as Minister of Agriculture, Food and Rural Affairs.
 - Indira Naidoo-Harris was appointed as Minister of Women's Issues.
 - Dipika Damerla, previously Minister Responsible for Seniors, becomes Minister of Seniors Affairs.
 - Tracy MacCharles was appointed as Minister of Government and Consumer Services and retains her role as Minister Responsible for Accessibility.



[Click here](#) for a copy of the news release.



- The Ministry of Finance announced the start of pre-budget consultations for the 2017-18 budget. The Ministry is asking stakeholders and members of the public to submit their proposals.

[Click here](#) for a copy of the news release.

- The Ontario government announced that it will provide nicotine replacement products for people leaving hospital and invest in new programs to help people quit smoking. The province will Invest \$2.5 million for Quit Cards, invest \$1.5 million in Indigenous communities to assist in their quit smoking programs, and \$1 million for communities with high smoking rates.

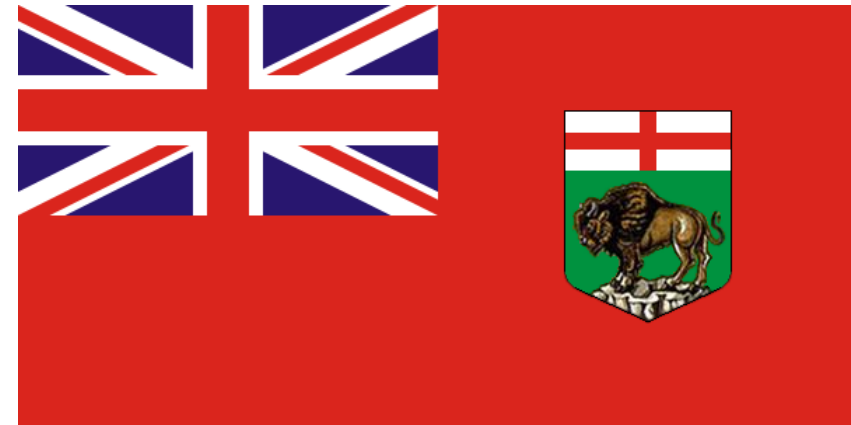
[Click here](#) for a copy of the news release.





- The Ministry of Health announced that it will expand its program to make Naloxone available to Manitobans by adding nine locations where individuals can access Naloxone.

[Click here](#) for a copy of the news release.





- Premier Brad Wall announced that his government had reached an agreement with the federal government on healthcare funding. The annual Canada Health Transfer payments to the province will increase by three per cent per year.

Under the agreement, Saskatchewan will receive \$190.3 million for home care and \$158.5 million for mental health initiatives over the next 10 years.

[Click here](#) for more information.

- The Minister of Health, Jim Reiter, accepted all of the recommendations of the Saskatchewan Advisory Panel on Health System Structure. As a result, the province will consolidate the twelve existing Regional Health Authorities (RHAs) into one single Provincial Health Authority.

[Click here](#) for more information.





- Joe Ceci, the President of Treasury Board and the Minister of Finance, announced the start of pre-budget consultations. The Minister is asking stakeholders and members of the public to participate and submit their ideas by February 2017.

[Click here](#) for more information.

- Premier Rachel Notley announced changes to her Cabinet. The following appointments were announced:
 - Danielle Larivee was appointed as Minister of Children’s Services.
 - Shaye Anderson was appointed as Minister of Municipal Affairs.
 - Human Services will be renamed “Community and Social Services” and will continue to be led by Minister Irfan Sabir.

[Click here](#) for a copy of the news release.





- The Ministry of Health announced that it will invest more than \$16 million to increase addiction treatment services as part of its initiative against the opioid crisis.

[Click here](#) for additional information.





American News & Developments in Chiropractic

- Sherman College’s Director of Evidence-Informed Curriculum and Practice, Dr. Christopher Kent, issues a statement on the use of drugs in the profession. Dr. Kent opposes the prescribing rights to be included into the scope of practice. The following is a summary of some of his key points:
 - It would be contrary to the historic and widely accepted identity of the profession
 - To our knowledge, no accredited chiropractic college clinic employs injectable homeopathic remedies, injectable nutrients, and other legend drugs in the care of outpatients in their student clinics. Furthermore, students have no hospital rotations and practical training in dealing with the safe and effective use of drugs, and the management of anaphylactic reactions and other adverse effects.
 - Some have proposed a “tiering” of the profession. Legislation could empower state boards to either allow any licensed chiropractor to practice in these potentially dangerous areas with little or no training, or require “certification” that is not comparable to the thousands of hours of residency required of medical and osteopathic physicians. Furthermore, this would lead to two (or more) classes of chiropractors, causing confusion and potential deception of the public.
 - Chiropractors would become part of the iatrogenic drug problem.
 - There is no evidence that drugs are useful in locating, analyzing, and correcting vertebral subluxations.
 - The best interests of the public are served by limiting the use of drugs to fully qualified physicians trained in their use.



[Click here](#) for a copy of the statement.



American News & Developments in Chiropractic

- Connecticut: Senate Bill 323; House Bill 6249; House Bill 6029 were all referred to the Joint Committee on Public Health:
 - SB 323 and HB 6249 would allow chiropractors to clear student athletes to participate in an intramural, interscholastic or college athletic activity after showing signs of or being diagnosed with a concussion.
 - HB 6029 would specifically allow chiropractors to diagnose student athletes with a concussion in addition to returning them to play.

- Indiana Senate Bill 437 is before the Senate Committee on Health and Provider Services. The bill would allow chiropractors to call themselves "physicians" and to order, perform and interpret "laboratory, radiological, electrodiagnostic or any other diagnostic test" taught in a chiropractic college, "including ordering of advanced imaging of all parts of the human body."

- Oregon: Senate Bill 217; House Bill 2390; SB 217 were assigned to Senate Committee on Health Care. The bills would allow chiropractic "physicians" and naturopathic "physicians" to return student athletes who have suffered a concussion to play. A similar bill was introduced in the last session but failed to pass the legislature.

- Wyoming: House Bill 107 is before the House Committee on Minerals, Business & Economic Development. The bill would allow chiropractors to call themselves chiropractic "physicians." A similar bill was introduced last session but failed to pass the legislature.





American News & Developments in Chiropractic

- Senator Cisco McSorley introduced Senate Bill 150, *Amending and Enacting Sections of the Chiropractic Physician Practice Act*. The bill would expand the medications that a chiropractor with the “Advance Practice Chiropractic Physicians” designation can prescribe.

[Click here](#) for a copy of the bill for additional details.

- The Texas Board of Chiropractic Examiners is proposing amendments to rule 78 which governs “grossly unprofessional conduct.” The proposed changes would clarify what constitutes unprofessional conduct.

[Click here](#) for a copy of the proposed changes to the rule.

- The Chronicle of Chiropractic, a chiropractic publication, has asked its readers not to support the Texas Chiropractic Association’s (TCA) lawsuit with the Texas Medical Association (TMA). The article argues that the TMA lawsuit is a result of the TCA’s attempts to expand a chiropractor’s scope of practice in the state. It asks its readers to support the Chiropractic Society of Texas.

[Click here](#) for a copy of the article.





International Developments in Chiropractic & Other News

➤ The Chiropractors' Association of Australia has posted a position statement on patient care. The position statement is a response to the media and political attention on chiropractic treatment claims and treatment of infants in Australia. In their position statement, the CCA states that "there is an urgent need to be proactive otherwise Health Ministers may seek to impose restrictions on our scope of practice." The position statement covers the following issues:

- Immunization
- Advertising
- Visiting Health Facilities and Credentialing
- Care of Infants and Children

[Click here](#) for a copy of the position statement.

➤ The President of the Council of Physiotherapist of Spain wrote to the Ministry of Health, the Ministry of Education, and Ombudsman about a proposal from Real Centro Universitario Escorial Reina Cristina to offer a chiropractic degree. The President of the Council of Physiotherapist argued that the Law on Management of Health Professions only recognizes physiotherapy and chiropractic and osteopathic techniques are part of a physiotherapist scope of practice. According to the President of the Council of Physiotherapists, the courses offered should not lead to a degree in chiropractic, but should be offered as additional training for physiotherapists.

[Click here](#) for an article on the issue.





Healthcare/Employee Benefits Conferences

April 2017

- [Benefits and Pension Summit](#)
 - Benefits Canada, Toronto, April 11 – 12, 2017
- [Healthy Canada Conference 2017: Access to Affordable Medicines](#)
 - Conference Board of Canada, April 26 – 27, 2017.

May 2017

- [World Health Summit, Regional Meeting North America](#)
 - World Health Summit, May 8 – 9, 2017

June 2017

- [Public Health 2017](#)
 - Canadian Public Health Association, Halifax, June 6 – 8, 2017
- [HealthCareCan – National Healthcare Leadership Conference](#)
 - HealthCareCan, Vancouver, June 12 – 13, 2017

September 2017

- [Canadian Institute for Military and Veteran Health Research Forum](#)
 - CIMVHR, Toronto, September 25 – 27, 2017





Healthcare/Employee Benefits Conferences

October 2017

- [Canadian Conference on Global Health](#)
 - Canadian Society for International Health, Ottawa, October 29 – 30, 2017

