

Dear Ontario Medical Student,

From one medical student to another, I understand your frustrations with the current political environment in Ontario. For the past two years or so the media has been a hotspot for the “war against Ontario physicians,” doctors’ lounges and conversations across the OR table have focused on cuts to physician services and underfunding of healthcare. When the tentative Physician Services Agreement (tPSA) was initially released in July, I felt an overwhelming sense of relief that finally we can get back to talking about medicine and not about politics. Then I read the six-page agreement.

Over the past month you have, like me, been inundated with emails from the OMA and also OMSA telling you to vote “yes.” Now you’re getting emails from the Coalition of Ontario Doctors telling you to vote “no.” And if you are following the conversations on social media, your pages are probably flooded with arguments telling you to vote one way or the other. This email isn’t about telling you how to vote.

Today, I ask that you read through the agreement. Read it, question it, think through the for and against arguments, and vote. Don’t vote “yes” because you are being told to, don’t vote “no” because you are being told to, vote based on your own analysis.

Here are a few things you should think about and question when reading the tPSA:

1. Should need for physician services exceed the planned budget, the OMA and the MOH will “address that over-expenditure as soon as possible using the principles of relativity, appropriateness and value for money”.

This is going to likely involve targeting the “high billers.” We have all met physicians who work incredibly long hours, take few vacations and are dedicated to serving their patients. They also get rewarded for their efforts. While nearly 50% of us will choose careers in primary care, the other 50% may be venturing toward specialties that may turn us into the high billers of the future. All physicians are paid well, that is not a question. Targeting specialties that require lengthy training and that ultimately result in higher billing does not align with the idea that healthcare is a human right and that all Ontarian's should have access to the highest quality of care. We need the surgeons who work 80 hours per week perfecting their craft and the ophthalmologists with the best equipment to treat our grandparent’s cataracts. We need the high billers in our system.

2. “The Parties will form a bilateral group to make recommendations about physician supply and distribution.”

This means that the MOHLTC, together with the OMA, may potentially add further cuts to residency spots and even to medical school seats. The MOHLTC has promised OMSA and PARO a seat at the table, but a seat doesn’t mean that they will be able to influence decisions. There will be more cuts, and by ratifying the PSA, we are willingly agreeing to more cuts.

3. “The MOHLTC will increase the funding for the Physician Services Budget (PSB) by 2.5% in each of the four Fiscal Years of this PSA.”

Instead of agreeing to fund the estimated 3.2-3.4% increase in healthcare, we are agreeing to underfund healthcare in Ontario by accepting a budget of a mere 2.5%, with onetime payments bringing the total to 3.1% in the first year of the agreement. This does not meet the increasing

needs in Ontario. In addition, physicians are responsible for not exceeding this budget, which opens a potential for physicians have to limit the care they offer. The practice of medicine should not be dictated by the bottom line, we all need to be responsible and “choose wisely,” but some patients require a lot of care, and they have a right to receive that care in a single payer system.

These are just a few of the potential problems with the PSA, which were not clearly addressed in the OMSA press release.

As a medical student, we have all done things out fear, such as that summer of research you did because you thought everybody else was doing it, even though you dislike research. Or when you bought that giant reflex hammer from the sales rep during the first week of medical school because he told you would be the “only one without it.” We have all done things because we were afraid of the alternative if we didn’t. Voting on the tPSA shouldn’t be one of those times.

I implore you think for yourself and make your own decision on the tPSA. And I ask that you vote. We are a large portion of the OMA membership, we are being asked to vote, so vote. Vote because it is a privilege to be a medical student and an honor to care for patients.

Sincerely,  
A Concerned Ontario Medical Student