



SUMMER NEWSLETTER



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PRESIDENT'S UPDATE

This is my initial update as the ORA President and consequently I wanted to provide you with an indication of what you can anticipate in the ensuing two years. The ORA will continue to advocate for our membership and arthritis care in the province. We will aggressively pursue our organizational priorities which continue to be focused on Access to Treatment; Inter-Professional Patient Centric Models of Care; Advocacy and Communications. My effort over the next 2 years will be both easier and more demanding with the voices of our three past presidents who continue on as part of the executive team. The remainder of the executive continues to work determinedly. [ORA organizational priorities and committee leads 2014](#)

What is going to be new and different?

We are excited to announce:

New people have been added to the executive team including Dr. Deb Levy, our pediatric representative; the irrepressible Dr. Henry Averbs as vice president and Ms. Sandra Couto our project leader and advisor for several committees. New faces to the ORA committees include Dr. Angela Montgomery (EAP), new additions to the Board of Directors include Dr. Julie Kovacs, Dr. Cathy Alderdice, Dr. Angela Montgomery and Dr. Thanu Nadarajah.

New directions for the ORA will now in-

clude a focus on SEBs, uveitis, and drug shortages.

New positions have been created including a Director of Stakeholder Relations (Dr. Carter Thorne), a Director of Models of Care (Dr. Vandana Ahluwalia), and a Director of Government Relations (Denis Morrice). A novel committee will also be rolled out in the Fall of 2014 named "ORADE" which stands for **ORA Development and Education** committee. I will lead this committee and it will be dedicated to facilitating our member's attendance at international conferences whilst advocating for the ORA.

What continues?

The ORA will continue its work liaising with government, private payers, communities, and our members at large through the Exceptional Access Program (EAP), Private Payer, Models of Care (MOC), Electronic Medical Records (EMR), Manpower, and OMA committees.

Look for new developments and updates with our newsletters and email blasts. And don't forget our Annual General Scientific Meeting (AGM) which continues to be a great success every year thanks to Dr. Janet Pope and her happy feet. We encourage you to attend this high-quality scientific meeting in a relaxed Muskoka setting this May 2015.

I look forward to serving you as president with an exciting and productive two years.

Dr. Arthur Karasik



**ORA Annual Meeting
May 21-24, 2015
JW Marriott, Muskoka**

Winner of the \$25 Tim Horton Gift Card for completing the ORA Annual Meeting Survey is:
Dr. Carter Thorne

NEWS ITEM

Forteo now covered by EAP to treat AVN of jaw and Bisphosphonate-related atypical femoral fractures. Criteria for this can be [found here](#).



OMA UPDATE

Negotiations are ongoing for a new contract. They are currently in the facilitation phase. I will be presenting an OMA Update on October 23rd live at Sunnybrook in Toronto which will also be available by webcast (details will follow).

Philip Baer

New EMR Adoption Program Extension 2 - Funding

The program has received funding for another year starting on April 1, 2014 and ending on March 31, 2015 (i.e., the program extension). The program will fund an additional 760 physicians and will focus on family physicians and community specialists who have not participated to date.



Physicians considering an EMR should visit the [New EMR Adoption Program Extension](#) page for information on the Terms and Conditions of funding, eligibility criteria, requirements and to download an application form starting April 1, 2014. **Your application must be received by OntarioMD by September 30, 2014, the application deadline.**

If you have applied to the program prior to September 30, 2013 deadline, but have not signed a Funding Agreement by March 31, 2014, you will need to submit a new application. Please visit the [New EMR Adoption Program Extension](#) page.

https://www.ontariomd.ca/portal/server.pt/community/emr_funding/

THIRD PARTY PAYERS COMMITTEE DR. JANE PURVIS

The Third Party Payers Committee is an ORA project, working with the CRA, to improve access to medications from insurance companies. We have previously worked with individual companies on issues related to forms and criteria. This summer, we have begun a process working with the Canadian Life and Health Insurance Association (CLHIA) to create pan-Canadian criteria for biologic access in Rheumatoid Arthritis. This has involved ORA and CRA members from across the country and insurers from coast to coast as well. The project is still in an early phase. We are hopeful that common ground can be found across all the provinces for insurance companies. If we can reach agreement with CLHIA, we will then reach out to all the provincial governments to attempt a similar harmonization of public payer criteria. This would allow for ease of access from one province to another, and represent a concrete example of prescribers and payers working together for the benefit of patients.

MANPOWER COMMITTEE DR. JANE PURVIS

The ORA manpower committee remains focused on trying to increase the profile of rheumatology at the medical student and resident level, as well as trying to improve the distribution of rheumatologists across the province. To that end, we have created a website www.rheumcareers.ca which allows visitors to explore what rheumatology is, and also gives rheumatology residents information on and contacts in communities actively recruiting new rheumatologists. In addition, there are funds available for site visits. Local rheumatologists have put themselves forward as mentors for new graduates who wish to relocate from the GTA area. We will be reaching out to the Royal College of Physicians and Surgeons, the Professional Association of Residents of Ontario (PARO), the Canadian Medical Association, as well as all the medical schools and internal medicine training programs across Ontario to communicate the projected need for rheumatologists and the advantages found in selecting rheumatology as a subspecialty.

The ORA would like to acknowledge the founding sponsors of this initiative:

UCB, AstraZeneca, GlaxoSmithKline and The Arthritis Society

MOC COMMITTEE UPDATE

The ORA Models of Care Committee and the Ontario Pharmacists Association have partnered together to strengthen inter-professional communication and collaboration to enhance and optimize the quality of care for their patients.

Since 2007, pharmacists in Ontario have been conducting OHIP-covered patient medication reviews for any individual on three or more chronic prescription medications. This medication review is referred to as a MedsCheck. Subsequent to the MedsCheck consultation an updated and personalized list of all current prescription and non-prescription medications is prepared for the patient. Any real or potential therapeutic concerns arising from the MedsCheck are addressed with the appropriate healthcare provider(s). Identifying drug interactions, medication duplication, adherence and smoking cessation are examples of the elements that can be covered within the Medscheck.

In this new partnership, rheumatologists are encouraged to direct their newly referred patients to community pharmacists to receive a MedsCheck prior to their initial appointment. Pharmacists can expect to receive directed patient referrals from rheumatologists for a MedsCheck Review. Patient will have an accurate and up-to-date MedsCheck Personal Medication Record for their visit with their rheumatologist.

While the MedsCheck program is not new, rheumatologists may be unfamiliar with it and will soon recognize this medication review service as integral for positive health outcomes for their patients. Complexity of care and declining rates of medication adherence are significant and frequent challenges that are well-known to physicians and pharmacists alike. Increased collaboration between rheumatologists and pharmacists will help demystify complex treatment regimens, facilitate message consistency and foster greater rates of medication adherence while simultaneously streamline communications and strengthen relationships between busy health professionals.

The MedsCheck program not only supports the provision of high quality patient care, but is an excellent way to promote the evolving role of Ontario pharmacists within the healthcare community. The Ontario Pharmacists Association and the Ontario Rheumatology Association recognize the importance of inter-professional patient-focused care and are pleased to lead the way toward greater integration between the province's health-care providers.

ORA/OPA Communication piece can be [found here](#).

A New Arthritis Patient Charter developed by CAPA to be released in September 2014. This was supported by the ORA Models of Care Committee, the CRA and the Arthritis Alliance of Canada.

By Dawn Richards.

An Arthritis Patient Charter has been released for September's Arthritis Month - you can find it here: <http://arthritispatient.ca/projects/arthritis-patient-charter/>, that highlights an arthritis patient's rights and responsibilities associated with their arthritis and care. This Charter is a grassroots culmination, lead by the Canadian Arthritis Patient Alliance and with input, support, and participation provided from all Canadian arthritis stakeholders, including founding support from the Ontario Rheumatology Association. The Charter is also a reflection of the continued changing landscape of the arthritis community and healthcare system, and which emphasizes a partnership of patients and their healthcare providers. We will continue to work together towards enabling people with arthritis to reach their full potential.

ORA EXECUTIVE

Dr. Arthur Karasik - President

president@ontariorheum.ca

Dr. Henry Aaverns - Vice President

henry@rheumors.com

Dr. Nikhil Chopra - Secretary/Treasurer

nikhil7chopra@gmail.com

Dr. Jane Purvis - Past President

pastpresident@ontariorheum.ca

Dr. Philip Baer - Chair - OMA Section of Rheumatology

office@carterthorne.ca

Dr. Carter Thorne - Director of Stakeholder Relations

janet.pope@sjhc.london.on.ca

Dr. Janet Pope - Annual Meeting Steering Committee Chair

Dr. Vandana Ahluwalia - Director of Models of Care

directormoc@ontariorheum.ca

Dr. Deb Levy - Pediatric Representative

deborah.levy@sickkids.ca

Dr. Felix Leung - Member-at-Large

memberatlarge@ontariorheum.ca

Denis Morrice - Executive Director

executivedirector@ontariorheum.ca

Tina Niro - ORA Administration

admin@ontariorheum.ca

