

MEMORANDUM OF AGREEMENT
PHYSICIAN ADMINISTRATIVE BURDENS

BETWEEN:

**HIS MAJESTY THE KING IN RIGHT OF THE PROVINCE OF BRITISH
COLUMBIA**, as represented by the Ministry of Health

(the “**Ministry**”)

AND:

**FRASER HEALTH AUTHORITY, INTERIOR HEALTH AUTHORITY,
VANCOUVER ISLAND HEALTH AUTHORITY, VANCOUVER
COASTAL HEALTH AUTHORITY, NORTHERN HEALTH
AUTHORITY and PROVINCIAL HEALTH SERVICES AUTHORITY**

(individually a “**Health Authority**” and
collectively the “**Health Authorities**”)

AND:

ASSOCIATION OF DOCTORS OF BC

(the “**Doctors of BC**”)

(individually a “**party**” and collectively the “**parties**”)

PHYSICIAN ADMINISTRATIVE BURDENS

The Ministry, Doctors of BC, and the Health Authorities are committed to working together to review current physician administrative requirements in an effort to reduce administrative burden and maximize physician resources to support public policy health objectives, including supporting access and quality of care.

It is the mutual interest and desire of the parties to continue the collaborative working group structure to identify physician burdens, review, problem-solve, and develop recommendations to reduce or eliminate physician administrative burdens.

Administrative Burdens Working Group

The Administrative Burdens Working Group (“**ABWG**”) is established with three representatives of Doctors of BC and three representatives of the Ministry/Health Authorities. Each party will ensure that at least one of its three representatives is a senior staff member.

The ABWG has developed and will maintain a Terms of Reference. Decisions of the ABWG are by consensus. The ABWG reports to the Physicians Services Committee. Health Quality BC will continue to provide secretariat and project team support for the ABWG. This support will include stakeholder engagement, analysis of identified burdens, and working with the parties to assess the feasibility and impact of recommendations, among other functions necessary for the work of the ABWG. Unless otherwise agreed by the majority of representatives of the ABWG, the ABWG will meet once per calendar month.

Scope of Work

Focus will be on the most significant burdens that the Ministry of Health, Health Authorities, Doctors of BC, and physicians are able to influence. The scope of the subject areas to be addressed are limited to burdens that are created by, or within the control of the Ministry of Health, Health Authorities, Doctors of BC, and physicians. Generally, requirements around the creation of a patient record are out of scope. No recommended change will reduce quality of care for patients.

The objectives of the ABWG are as follows:

1. To analyze the specified forms/processes that create physician administrative burdens and identify alternatives that will achieve the intended purpose with reduced physician burden.
2. To develop joint recommendations from the parties to the organization(s) or individuals that have control of the form or process.
3. To present the joint recommendations to the Ministry of Health and the Doctors of BC Board of Directors for endorsement or feedback.
4. To develop shared expertise and capacity for future application.

The ABWG will first review and prioritize new forms and processes, as supported by appropriate evidence of feasibility, by consensus. Once the ABWG has reached consensus, the recommended selection will be provided to the Ministry of Health Associate Deputy Minister who will approve the ABWG's prioritization or provide alternative options for reassessment by the ABWG.

Work on the following specified forms/processes will continue:

1. Special Authority Forms.
2. BC Cancer forms and processes related to medical imaging, hereditary screening, and general referral intake.

The ABWG will be guided by the following work processes:

1. The ABWG will request source representative(s) with the appropriate authority/expertise/influence to participate directly in problem-solving.
2. The ABWG may create sub-groups to guide, investigate and make recommendations to the ABWG on the specified forms/processes, or on topics directed by the ABWG.
3. The ABWG will review and problem-solve each of the specified forms/processes by:
 - Conducting a collaborative review within one year;
 - Providing an opportunity for all parties to raise interests and concerns;
 - Identifying the purpose for the form or process, and the extent to which it supports quality patient care;
 - Identifying alternative options to achieve the intended purpose;
 - Developing an assessment of required cost/effort of improvement; and
 - Suggesting measures for tracking impact and, if possible, developing an estimate of the impact of both the current form or process being reviewed, as well as the potential impact of reducing that form or process.
4. The ABWG will endeavour to develop recommendations to reduce or eliminate the physician burden by consensus.
5. The ABWG must consider the potential capacity and cost implications for the Ministry of Health, Health Authorities, or other agencies in the development of its recommendations before determining whether to move a recommendation forward for feedback and endorsement under section 8 below.
6. The parties agree to provide relevant and available information and data necessary to effect the objectives of the Memorandum of Agreement.

7. Where the source is undertaking process improvement efforts that may relate to the same forms/processes, then the work of the ABWG will be intended as a complement to those efforts, and that the ABWG will not ask that those efforts be discontinued.
8. The ABWG will seek feedback and endorsement from the Associate Deputy Minister or Deputy Minister and the Board of Directors of Doctors of BC.
9. Once a recommendation is endorsed:
 - a. if the source of the form/process is the Ministry of Health or a Health Authority, the Ministry will communicate non-binding recommendations to the source;
 - b. if the source of the form/process is physicians, the Ministry and the Doctors of BC will jointly communicate non-binding recommendations to the source.

Evaluation/Continued Collaboration

The parties will annually evaluate the work of the ABWG with the view to update its processes as necessary. Any changes will be upon mutual agreement of the parties.

Ongoing Funding

Government will provide the following funding for the operation of the ABWG as set out in this Memorandum:

- Effective April 1, 2025: \$1.10 million per year in ongoing annual funding.
- Effective April 1, 2026: a further \$2.0 million per year in ongoing annual funding, for a total of \$3.10 million per year in ongoing annual funding.

One-Time Funding

- Effective April 1, 2025: The Government will provide the ABWG with \$5 million in one-time funds to be used exclusively to assist in the implementation of recommendations that are endorsed by the Associate Deputy Minister or Deputy Minister and the Doctors of BC Board of Directors.
- One-time funds are to be allocated by a consensus decision of the ABWG.
- Any one-time funds that remain unexpended at the end of a Fiscal Year will carry over into the next Fiscal Year.

Through the Physician Services Committee, additional funding may be allocated from Joint Clinical Committee funds. Costs related to secretariat support, ABWG sub-groups and physician expenses for participating in the ABWG are paid out of this Memorandum of Agreement.

Resolution of Disagreements

If any of the parties has a concern respecting this Memorandum of Agreement, the parties directly impacted (e.g. Doctors of BC and a Health Authority) will meet to attempt to resolve the issues. If they cannot resolve the issues, the CEO of the Doctors of BC, the Deputy Minister of Health, and/or the Health Authority CEOs will meet to attempt to resolve the issues. Failing resolution, there are no further steps under the Memorandum to address such concerns.

Termination

This Memorandum of Agreement shall terminate effective March 31, 2029, if either party provides notice, by no later than January 31, 2029, to terminate it. If no such notice is provided, it will have the same term as, and will terminate concurrent with, any termination of the 2025 Physician Main Agreement.

Dated this 1st day of April, 2025



Dr. Adam Thompson
President
Doctors of BC



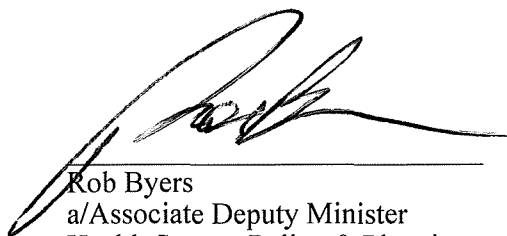
Anthony Knight
Chief Executive Officer
Doctors of BC



Dermot Kelly
President and CEO
Fraser Health Authority



Kathryn MacNeil (Jul 15, 2026 12:07:04 PDT)
Kathy MacNeil
President and CEO
Vancouver Island Health Authority



Rob Byers
a/Associate Deputy Minister
Health System Policy & Planning
Ministry of Health

Ciro Panessa

Ciro Panessa (Jul 15, 2026 12:43:00 PDT)

Ciro Panessa
President and CEO
Northern Health Authority

Sylvia Weir

Sylvia Weir (Jul 15, 2026 13:25:51 PDT)

Sylvia Weir
President and CEO
Interior Health Authority

Paul Mochrie

Paul Mochrie (Jul 15, 2026 14:28:02 PDT)

Paul Mochrie
President and CEO
Provincial Health Services Authority

Vivian Eliopoulos

Vivian Eliopoulos (Aug 13, 2026 10:28:21 PDT)

Vivian Eliopoulos
President and CEO
Vancouver Coastal Health Authority