

WorkSafeBC coverage for physicians

At a recent BCMA-WorkSafeBC Liaison Committee meeting, BCMA representatives asked if we could outline the types of coverage available to physicians for occupational injury and/or disease.

Registration for corporations is mandatory

If you practise within a structure that is incorporated or you hire others to work for you, you must register with WorkSafeBC as an employer. Without WorkSafeBC registration, your corporation faces unnecessary financial risks. If an employee suffers a work-related injury or disease, your corpora-

tion could be held responsible for all costs, including medical and rehabilitation services, income replacement, and lawsuits.

If you are an employee and your corporation is registered with WorkSafeBC, you are eligible for compensation benefits for a work-related injury or disease.

Are you currently covered by WorkSafeBC?

If you are not certain of your WorkSafeBC coverage, please check. For instance, some hospitals consider physicians to be “workers” while others view physicians as independent and therefore not covered. To determine if you are indeed included under your employer’s WorkSafeBC coverage, please call WorkSafeBC at 1 888 922-2768 and choose option 2.

Personal Optional Protection coverage

If you are not considered a worker under the Workers Compensation Act because you work independently and are not incorporated, you can purchase WorkSafeBC’s Personal Optional Protection (POP) coverage. The premium payments for POP depend on the amount of coverage you want and the nature of your business. The minimum monthly earnings that you can insure are \$1500 and the maximum earnings are \$5200. For example, for a private medical practice, the premium for the minimum \$1500/month coverage would be \$4.20/month, while the premium for the maximum \$5200/month coverage would be \$14.56/month. Please contact WorkSafeBC for precise POP premiums for your particular circumstances.

WorkSafeBC coverage may not be enough

The maximum insurable wages amount under WorkSafeBC is \$5200 per month. Wage replacement benefits are 90% of the net wages that are insured.

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WorkSafeBC’s 7th Annual Physicians’ Education Conference “Pearls by the Sea”

Saturday, 21 October 2006
Coast Harbourside Hotel, Victoria
8:30 a.m.–4:30 p.m.

Conference highlights

- The Top Five Upper Extremity Controversial Treatments in Workers’ Compensation and The Art of Return to Work—Dr Mark Melhorn
- The Neurosurgeon and Back Pain: When to Refer?—Dr John Sun

Workshop highlights

- The 3-Minute Examination of the Low Back—Dr Don Krawciw
- Working with Disability—Dr Bill Clifford
- Motivational Interviewing Techniques—Dr Dan O’Connell
- Hidden Occupational Diseases: Uncovering Them in Your Practice—Dr Sam Youakim
- Practice Management with WorkSafeBC (forms, fees, billing)—Ms Ethel Croft

Coast Guard Icebreaker Workshop

- Worksite Assessment: Coast Guard Icebreaker, Victoria Waterfront—Dr Peter Rothfels

For more information, contact Christine Lynn at 604 276-7742.
Registration deadline: 15 October. To download registration form, visit www.WorkSafeBC.com and type in the keyword “physician conference.”

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Since most physicians earn more than the maximum insurable wages and want coverage for non-work-related disability as well, purchasing additional disability coverage is a consideration.

WorkSafeBC benefits

You may already be familiar with the WorkSafeBC health care and rehabilitation benefits that your patients receive when they suffer a work-related injury or disease. Benefits may include short-term disability wage loss payments, certain health care and rehabilitation costs, long-term benefits for permanent disability, and death benefits to the survivor dependants of a worker suffering a fatal injury or occupational disease.

WorkSafeBC coverage has no waiting period; therefore, benefits for approved claims commence on the date of injury, with wage-loss replacement commencing with the first missed shift due to partial or total disability. For further details of the benefits, including eligibility and limitations, please visit www.worksafebc.com/insurance.

At present, there are no benefits available for quarantine from work in the absence of injury or disease as may have occurred during the SARS crisis.

If you are covered by WorkSafeBC as a worker—that is, you are employed by a corporation registered with WorkSafeBC or you purchase POP coverage—you are eligible for the same benefits that your injured worker patients receive.

Contact WorkSafeBC

For more information regarding WorkSafeBC coverage and eligibility or an application for POP coverage, visit www.worksafebc.com and click on Insurance or call WorkSafeBC's Employer Service Centre at 1 888 922-2768 and choose option 2.

—Don Graham, MD
WCB Chief Medical Officer

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convincing evidence has been found to support these claims.^{4,6}

The bottom line

The addition of fluoride to water supplies or to dental hygiene regimens in recommended doses has repeatedly been proven to be a safe, effective, and cost-saving measure for ensuring good dental health. Patient concerns about fluoride should be acknowledged and addressed in light of the best available evidence.

—Lloyd Oppel, MD
Alternative Health and
Therapeutics Committee

References

1. You're putting WHAT in our Drinking Water? www.suite101.com/article.cfm/chiropractic_health_care/89303 (accessed 9 August 2006).
2. Fluoridation/Fluoride, Toxic Chemicals in your Water. www.holisticmed.com/fluoride/ (accessed 9 August 2006).
3. The Canadian Dental Association, the Canadian Medical Association, the Canadian Public Health Association, the Canadian Pediatric Society, and the World Health Organization (among others).
4. American Academy of Family Physicians. 2004 American Academy of Family Practice policy statement on fluoridation of public water supplies. www.aafp.org/online/en/home/clinical/clinicalrecs/fluoridation.html (accessed 9 August 2006).
5. Hodge HC. Evaluation of some objections to water fluoridation. In: Newbrun E (ed). *Fluorides and Dental Caries*. 3rd ed. Springfield, Illinois: Charles C. Thomas; 1986:221-255.
6. National Research Council. *Health Effects of Ingested Fluoride*. Washington, DC: National Academy Press; 1993.

Resources on fluoride supplementation

Visit these web sites for information on the facts and misconceptions of fluoride supplementation.

American Academy of Family Physicians. 2004 American Academy of Family Practice policy statement on fluoridation of public water supplies. www.aafp.org/online/en/home/clinical/clinicalrecs/fluoridation.html (This site gives a blow-by-blow analysis and critique of the studies allegedly showing the harm of fluoride.)

Centers for Disease Control and Prevention. Achievements in Public Health, 1900–1999: Fluoridation of Drinking Water to Prevent Dental Caries. www.cdc.gov/mmwr/preview/mmwrhtml/mm4841a1.htm

Quackwatch. Fluoridation: Don't Let the Poisonmongers Scare You! www.quackwatch.org/03HealthPromotion/fluoride.html

2004 US Preventive Services Task Force. Prevention of Dental Caries in Preschool Children. www.ahrq.gov/clinic/uspstf/uspstdnch.htm

Canadian Pediatric Society. Statement on the use of fluoride in infants and children. www.cps.ca/english/statements/N/n02-01.htm