



# ANNUAL REPORT

2020-21

**eHealth**  
Saskatchewan 



# TABLE OF CONTENTS

## CORPORATE OVERVIEW

- 2 Letter of Transmittal
- 3 Message from the Chief Executive Officer
- 4 Message from the Board Chair
- 5 Board Members
- 7 Authority & Mandate
- 8 Aligning with the Government's Direction
- 10 Strategic Plan for 2020-23
- 11 Corporate Vision, Mission and Values

## EMERGENCY PANDEMIC RESPONSE EFFORTS

- 13 COVID-19 Self-Assessment Tool
- 14 COVID-19 Call Centre Deployments
- 14 MySaskHealthRecord
- 15 Virtual Care
- 18 Electronic Health Record
- 19 Provincial Laboratory Technology Enhancements
- 19 COVID-19 Testing & Assessment Centre Deployments
- 19 COVID-19 Field Hospital Deployments
- 20 COVID-19 Acute Facility Construction Support & Equipment Deployment
- 20 COVID-19 Contact Tracing Technology
- 21 Emergency Operations Centre (EOC)
- 22 COVID-19 Access & Vaccine Centre Deployments
- 23 COVID-19 Long Term Care Technology Enhancements
- 24 COVID-19 Public Health Technology Deployments

## eHEALTH PROGRESS & HIGHLIGHTS IN 2020-21

- 27 Information Security

## eHealth Programs

- 30 eHealth Programs

## In Focus

- 33 MySaskHealthRecord
- 36 In Focus: *Regina Man with Cancer Diagnosis says MySaskHealthRecord 'Made all the Difference in the World'*

- 38 Connected Care Programs
- 39 Integrated Health Programs
- 40 Provincial Programs

## Information Technology

- 43 IT Service Management
- 43 Stabilizing Core Services
- 43 Strategic Partner Projects
- 44 Provincial Process Development & Consolidation
- 45 Privacy, Access & Patient Safety
- 47 Health Registries & Vital Statistics
- 48 Organizational Development
- 50 Policy
- 51 Information & Analytic Services
- 52 Governance

## FINANCIAL STATEMENTS

- 55 Management's Responsibilities Letter
- 56 Independent Auditor's Report
- 58 Financial Statements
- 68 Payee List

# LETTER OF TRANSMITTAL



**Paul Merriman**  
MINISTER OF HEALTH

Regina, Saskatchewan

The Honourable Paul Merriman  
Minister of Health

Honourable Paul Merriman:

I have the honour of submitting eHealth Saskatchewan's Annual Report for the fiscal year ending March 31, 2021.

On behalf of the Board of Directors and eHealth's Executive team, I am pleased to present our annual report. It highlights our progress and achievements in the 2020-21 fiscal year, as we continue our ongoing efforts to improve patient care in Saskatchewan through connected healthcare, accessible to everyone, everywhere.

I take my responsibility for public accountability seriously and, as eHealth's CEO, have made every effort to ensure the accuracy of this report.

A handwritten signature in black ink, consisting of two stylized 'K' characters with dots above them, representing the name Kimberly Kratzig.

**Kimberly Kratzig**  
Chief Executive Officer  
eHealth Saskatchewan

# MESSAGE FROM THE CEO



**Kimberly Kratzig**  
CHIEF EXECUTIVE OFFICER

The 2020-21 fiscal year was a historic and unforgettable one for health care around the world.

eHealth was proud to play a fundamental role in supporting the pandemic relief efforts in Saskatchewan, as well as maintain the critical core services that our health system and the people of the province expect.

Our Vision: “Connected healthcare, accessible to everyone, everywhere” drives the work we do every day to improve the quality of health care across the province for both patients and health care providers.

This was never more evident than in 2020-21 as teams from across our organization worked together to support the provincial health system with the pandemic response.

In addition to our COVID-19 efforts, our organization made significant strides to improve the security of our health care system and respond to the Office of the Information and Privacy

Commissioner recommendations, made following the ransomware incident in December 2019. Thanks to the hard work of our eHealth team, we are making progress on implementing the recommendations. This priority work will continue to be a focus for our organization into the future.

2020-21 was a monumental year for one of our flagship programs, MySaskHealthRecord. As of March 2021, more than 214,000 Saskatchewan people were using the convenient online tool to view their health information, including COVID-19 test results and vaccinations. This far surpasses the goal set when MySaskHealthRecord was launched in October 2019. We were also excited to announce more improvements and features to MySaskHealthRecord—the registration age was lowered to 14, from 18, and parents and legal guardians can now request permanent access to the health information of their children under the age of 14.

Another noteworthy success from this past fiscal year was health card renewal. Every three years our Health Registries team leads this large-scale provincial campaign. I would like to take this opportunity to thank them for their ongoing efforts in ensuring that all eligible residents in our province are adequately insured for important health services.

The eHealth executive team is working to build a strong relationship with our newly appointed Board of Directors. With their support and

guidance we will continue to work together productively to the benefit of the provincial health system and everyone in Saskatchewan. We are continuing our efforts to mature IT governance structures along with our health system partners. Key committees have been created and are receiving the necessary information, as well as providing valuable system input and oversight.

I want to thank all our partners and stakeholders for their great work during this challenging year. To all eHealth employees, your unwavering professionalism, dedication and expertise is noted and appreciated. So much of the crucial work of our employees is done behind-the-scenes. On behalf of the Executive team, thank you for all you do each and every day to improve the quality of life for patients, providers and families across Saskatchewan.

We have all been through a lot this past year—living and working like never before. But, we’re finally turning the corner and I’m feeling hopeful about our future.

A handwritten signature in black ink, consisting of a stylized 'K' followed by a smaller 'K'.

**Kimberly Kratzig**  
Chief Executive Officer  
eHealth Saskatchewan

# MESSAGE FROM THE BOARD CHAIR



**Denise Macza**  
CHAIR, BOARD OF DIRECTORS

Earlier this year, Health Minister Paul Merriman announced changes to eHealth's Board of Directors. I am honoured to have been appointed Board Chair, alongside Ministry of Health Assistant Deputy Minister, Billie-Jo Morrissette, as Vice-Chair. eHealth's two-person Board was created following the government's acceptance of the report released by the Office of the Information and Privacy Commissioner, following the ransomware attack on the provincial IT health care systems in December 2019.

An important responsibility of the newly appointed Board will be to work with eHealth to understand opportunities and address key risks in order to ensure we are meeting citizen and health system expectations as they relate to the high quality management of health information.

I would like to take this opportunity to thank the previous Board Chair and Directors for their service, passion and commitment to eHealth and the provincial health care system.

Their tenure included steering the organization through many new beginnings, transitions, successes and some difficult times as well, including the ransomware attack and the COVID-19 pandemic. However, they also oversaw the exciting milestone of the launch of MySaskHealthRecord, which gives Saskatchewan people quick and easy online access to their health information.

eHealth is proud to be a key player in Saskatchewan's health care system. As the organization responsible for many important electronic health systems and programs, as well as the Information Technology of our health sector, all eHealth employees play a valuable role in the delivery of safe and effective health care for people across the province. Thank you to each and every one of you for the important work you do.

Like many organizations, eHealth has faced its share of challenges, changes and transitions over the years. These challenges have been

met with strong resolve, commitment, perseverance and optimism from leaders and employees, who are always finding ways to improve so they can continue to support our health system partners, health care providers and ensure the best and safest possible care for patients.

Our leaders, employees and partners are committed to building a positive way forward and I am confident we will do this together.

A handwritten signature in blue ink, appearing to read 'Denise Macza'. The signature is fluid and cursive, written over a light blue background.

**Denise Macza**  
Chair, Board of Directors  
eHealth Saskatchewan

# BOARD MEMBERS



## Denise Macza

### BOARD CHAIR

Denise Macza has been an Associate Deputy Minister at the Ministry of Health since July 2019. Her responsibilities include the province's insured health services, overseeing the financial needs of the ministry and advancing Saskatchewan's Connected Care Strategy.

Prior to joining the Ministry of Health, Denise was an Associate Deputy Minister at the Ministry of Finance responsible for Treasury Board Branch & Treasury Management where she played a key role in the development of the government's annual budget and management of the province's treasury operations.

Denise holds a Chartered Professional Accountant (CPA) as a Certified Management Accountant (CMA), has a Chartered Financial Analyst (CFA) designation and is a member of the Institute of Corporate Directors (ICD.D).



## Billie-Jo Morrisette

### VICE CHAIR

Billie-Jo Morrisette has been an Assistant Deputy Minister at the Ministry of Health since 2018, advancing work in a number of portfolios. She has led a variety of initiatives in her leadership roles with the Ministry since she started in 2016.

Billie-Jo has served in various roles in the non-profit and public service during her career, including time in the Ministries of Environment, Finance, Social Services and Health. Her areas of focus and responsibilities have been in public policy development, program design and delivery, and finance and governance.

She has a strong interest in contributing to the human services sector and public service of Saskatchewan, working to improve services for citizens of the province.

Billie-Jo has a Bachelor of Science Degree and Masters of Public Policy. She is also the Board Chair of the Saskatchewan Association of Health Organizations, and is interested in collaboration among all health sector partners and organizations in Saskatchewan.





# AUTHORITY & MANDATE

eHealth is a Treasury Board Crown Corporation. Our Orders in Council outline our objectives, purpose, and powers. We are subject to orders or directives by Treasury Board.

Key roles of eHealth, which are driven from our mandate:

- Consolidate all Information Technology (IT) Services that were provided by former Saskatchewan health regions, Saskatchewan Cancer Agency (SCA) and 3sHealth into a single service provided by eHealth.
- Lead Saskatchewan Electronic Health Record (EHR) planning and strategy for the Province of Saskatchewan.
- Administer and operate the Vital Statistics Act and the Change of Name Act.
- Administer and operate the Health Registration Registry.
- Procure, implement, own, operate or manage other health information systems.
- Enter into agreements or arrangements to market IT or expertise to other governments, international agencies or commercial or non-profit organizations.

The eHealth Board of Directors (the “Board”) is appointed by Order in Council in accordance with The Crown Corporations Act, 1993. The Board fulfils its governance role by overseeing and providing direction to the President and Chief Executive Officer (the “CEO”) and all individuals who report directly to the CEO with regards to the conduct of the business, affairs and effective management of eHealth.

The Board is accountable to and reports to the Minister of Health. The Board shall act in the best interests of eHealth and is responsible for its stewardship on behalf of the public, including but not limited to, promoting the vision, mission, values, objectives, purposes and ensuring good governance.

# ALIGNING WITH THE GOVERNMENT OF SASKATCHEWAN'S DIRECTION

The provincial government's vision for Saskatchewan is to be the best place in Canada to live, work, start a business, get an education, raise a family and build a life.

This high quality of life would not be attainable without the health and safety of its people. Health care providers, such as doctors, nurses and pharmacists, are relied on every day to give patients the best possible care and help keep everyone healthy. Front-line professionals, as well as their patients, benefit from the support of organizations like eHealth.

eHealth plays a key role in making important electronic information readily available to health care teams across the province. When providers

are able to quickly and easily access their patients' important clinical information, such as diagnostic imaging, prescriptions, lab tests and hospital visit history, they are able to deliver more timely and high quality care and treatment to their patients. eHealth's commitment to improving the quality of health care in the province aligns with the government's vision and goal to secure a better quality of life for all Saskatchewan people.

## SASKATCHEWAN'S VISION

*"... TO BE THE BEST PLACE IN CANADA – TO LIVE, TO WORK, TO START A BUSINESS, TO GET AN EDUCATION, TO RAISE A FAMILY AND TO BUILD A LIFE."*

### A STRONG ECONOMY

Saskatchewan's vision and three goals provide the strategic direction for organizations to align their programs and services to build a strong Saskatchewan. eHealth joins other organizations across the province in reporting our progress in 2020-21.

The 2020-21 annual report showcases eHealth's support of the Government's commitment to: Protect. Build. Grow.

The Government of Saskatchewan is committed to protecting Saskatchewan people through the rest of the pandemic as life returns to normal and our economy

### STRONG COMMUNITIES

grows. Investing in infrastructure like hospitals, schools, and highways will help build a strong economy and create jobs for strong families, strong communities, and a better quality of life.

eHealth is committed to working with government officials, the Saskatchewan Health Authority (SHA), health care partners, stakeholders, health care providers and patients year-round to help make Saskatchewan the best place in the country to receive high quality health care.

### STRONG FAMILIES



# eHEALTH SASKATCHEWAN 2020-23 STRATEGIC PLAN

The success of the provincial health system is dependent on partnership, collaboration, open and transparent communication, and system alignment.

---

eHealth's 2020-23 Strategic Plan was created by the Board of Directors and Executive Leadership Team in consultation with our employees, health system partners and stakeholders. The 2020-23 Strategic Plan provides direction to employees and establishes the organization's key imperatives:

- Work Together
- Think Future
- Build Reliable Core Systems
- Develop our People

This plan will help to simplify decision-making and ensure that all of our employees and partners are aligned.

At the foundation of eHealth's Strategic Plan is our Vision, Mission and Values.



# CORPORATE VISION, MISSION + VALUES

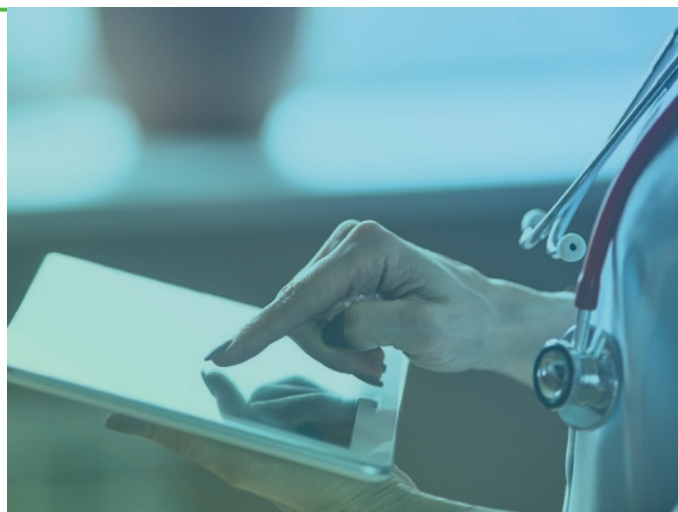


## VISION

Connected healthcare,  
accessible to everyone,  
everywhere.

## MISSION

We collaborate to transform  
healthcare through the use of  
information and innovative  
technology.



## VALUES

Excellence, Integrity, Teamwork,  
Courage, Resilience, and  
Collaboration.



**eHEALTH'S PRIORITY  
FOR 2020-21:**

**EMERGENCY  
PANDEMIC  
RESPONSE  
EFFORTS**

**KEY INVOLVEMENT & HIGHLIGHTS**

# EMERGENCY PANDEMIC RESPONSE EFFORTS: COVID-19 & VACCINE ROLLOUT

As the 2020-21 fiscal year began, Saskatchewan had just recently joined the rest of the world in battling a global pandemic. Our health system was presented with the challenge of adapting very quickly to an emerging health crisis. eHealth made it a priority to assist our health system partners as they prepared for anticipated surges in their facilities. Employees and teams from across the organization worked together to deliver crucial IT support to the frontline health care workers so they could provide the very best possible care to patients during these unprecedented times. eHealth supported the IT needs of COVID-19 testing and assessment centres, call centres, contact tracing services, vaccine centres, and also made key enhancements to programs, services, infrastructure and health facilities

across the province to support pandemic response efforts. eHealth also ensured that the field hospitals in Regina and Saskatoon were well equipped with safe and secure IT systems. Teams also helped more than 1,000 health care providers set up the necessary equipment and programs so they could deliver more timely and convenient virtual care. The use of virtual care options increased significantly as the province worked to control the spread of COVID-19 by encouraging more patients to seek out virtual health care treatment and reduce the risk of spreading the virus in patient-care facilities.

*The following sections are a high-level overview of eHealth's involvement in the various aspects of Saskatchewan's emergency pandemic response and relief efforts.*

---

## **COVID-19 Self-Assessment Tool**

During the early stages of the pandemic, Saskatchewan's health system worked with Alberta Health Services to adapt their provincial COVID-19 Self-Assessment Tool here in Saskatchewan. This valuable online tool allowed Saskatchewan residents to quickly and easily determine if they should be tested for COVID-19. Access to the tool was available on Saskatchewan.ca, as well as in MySaskHealthRecord.

Throughout the fiscal year, a number of key updates were made to ensure the Self-Assessment Tool continued to evolve as new information about COVID-19 was discovered. For instance, the tool initially included one screening process (pathway) for all residents to follow, but has since expanded to include a number of new screening processes (pathways) for specific categories, including the general public, health care workers, and designated family or support persons of patients.

## COVID-19 Call Centre Deployments

When the COVID-19 pandemic hit, the 811 HealthLine experienced a huge increase in calls. eHealth quickly found and implemented a new solution to support the high call volumes and provide additional functionality. The new solution allowed HealthLine employees to more quickly and efficiently respond to and support Saskatchewan residents calling in with their health-related questions and concerns.

eHealth also helped to develop and deploy additional COVID-19 support lines for pandemic support, including the Occupational Health Hotline, Mental Health Support Line, Contact Notification, Rapid Notification, Case Investigations, Case Monitoring, Contact Monitoring, Home Health Monitoring and Negative Results Notifications.

During the vaccine rollout, eHealth supported the development of the new Vaccine Booking Call Centre and worked to ensure HealthLine and other support lines were not overwhelmed. Thanks to lessons learned in other provinces, Saskatchewan avoided any service disruptions to critical call centre services while the Vaccine Scheduling Line was implemented.

## MySaskHealthRecord

All Saskatchewan residents who were successfully registered for MySaskHealthRecord were able to view their COVID-19 test results and also see their immunization history, including COVID-19 vaccines, in their MySaskHealthRecord account.

As a result of the COVID-19 pandemic, eHealth made the following changes and updates to MySaskHealthRecord:

- When creating a new account, Saskatchewan residents could phone the new MySaskHealthRecord Service Desk to request their PIN and complete their registration. The mailing of PIN letters was temporarily suspended and remains suspended, as people can call our Service Desk to receive their PIN.
- COVID-19 test results were available in MySaskHealthRecord.
- Added a COVID-19 Self-Assessment Tool link.
- Added immunization history data for all new and existing users.

The MySaskHealthRecord Service Desk received **252,417 phone calls** from Saskatchewan residents in 2020-21.







## Virtual Care

Throughout the pandemic, many residents and patients in rural or remote areas of the province took advantage of the health system's virtual technology options. Instead of traveling long distances to meet with a health care provider about basic concerns, an increasing number of patients opted for the quicker and more convenient virtual appointments. The pandemic's public health measures and restrictions led to a further increase in the use of virtual care. From March to December 2020, Saskatchewan patients participated in more than 1.8 million virtual appointments with a physician, according to the Government of Saskatchewan's billing data.

Saskatchewan is expanding capacity to provide secure, responsive virtual health care, so patients can safely, securely and conveniently access these services well into the future. eHealth is working with the Ministry of Health on an action plan—based on the Federal Bilateral Agreement—to enhance virtual services that focuses on security, privacy and an improved patient experience.

Saskatchewan's priorities include improving and expanding:

### Videoconferencing:

Multiple virtual solutions (web and Telehealth) are used by health care providers across the province to meet the needs of their patients.

### Remote Patient Monitoring:

Remote monitoring was used to support more than 1,700 Saskatchewan residents who tested positive for COVID-19, as well as patients with other health concerns. One health care provider is able to monitor up to 100 patients at a time as they recover in their homes.

## BY THE NUMBERS

**417**

telehealth endpoints.

**209**

telehealth sites & facilities.

Available in

**145**

communities.

### Auto-dialer:

The Auto-dialer system notifies residents by phone or text within 24 hours if they test negative for COVID-19. People who test positive receive a phone call from public health. This system was developed by the Saskatchewan Health Authority (SHA), in collaboration with eHealth.

### MySaskHealthRecord:

Eligible Saskatchewan residents can sign up for a MySaskHealthRecord account to gain quick and easy access to their health information online.

---

## VIRTUAL CARE IS WIDELY RECOGNIZED FOR A WIDE RANGE OF BENEFITS, INCLUDING:

---

- Improved patient access to care;
- Better health outcomes;
- Improved quality of life;
- Lower health care costs for both patients and providers;
- Shortened hospital stays;
- Decreased travel costs; and
- Reduced inappropriate visits to emergency and walk-in clinics, unnecessary specialist referrals and visits, and re-admissions from chronic conditions.

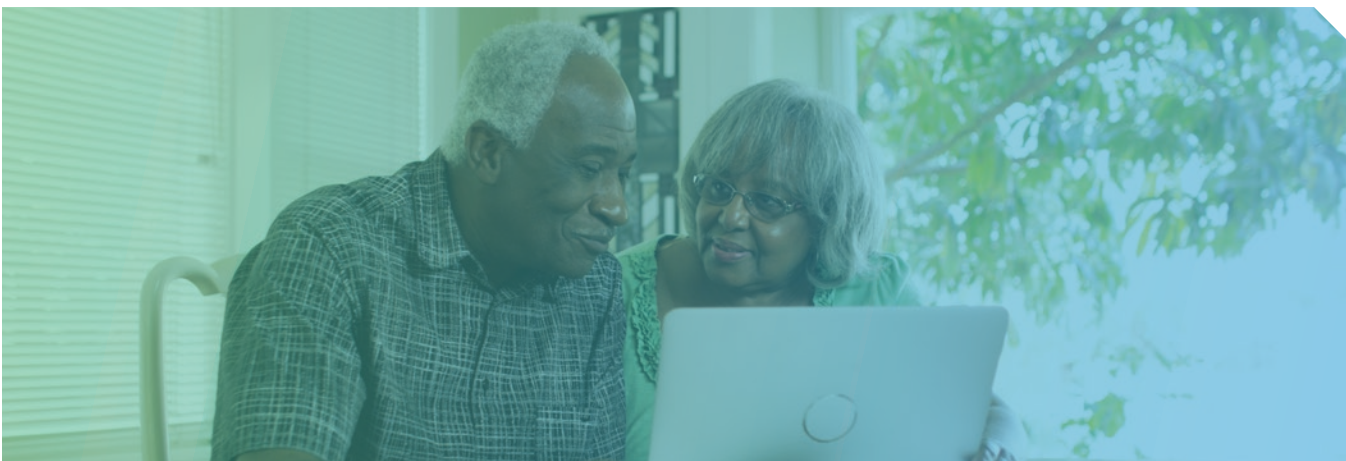
Given these benefits, the expansion of virtual care has been included within Saskatchewan's Growth Plan for 2020-30, including the expansion of remote presence technologies to support primary and specialist care and the investigation and use of smartphone applications to support virtual delivery models.

## EXCERPT FROM SASKATCHEWAN'S GROWTH PLAN FOR 2020-30:

*"In partnership with physicians and the medical community, Saskatchewan will expand the use of remote presence technology and new technologies to provide Saskatchewan people with access to health care services. Saskatchewan is already undertaking cutting-edge work in the delivery of health care services to under-served rural and remote communities through the work of Dr. Ivar Mendez and the province's remote medicine program. The technology uses robotics to provide diagnosis services to patients in their own communities. Dr. Mendez has demonstrated with the technology that about 70 per cent of acutely ill children can be treated in their own communities.*

*Expansion of this program to other communities throughout the province will provide more vulnerable patients with better access to health care. In October 2019, Saskatchewan launched MySaskHealthRecord, a secure website that provides patients with online access to their personal health records. The website will allow patients to add their own personal information, including setting medication and appointment reminders. The Government of Saskatchewan will also engage Saskatchewan's physicians and medical community to explore piloting new virtual health care technology that can be delivered through a patient's smart phone, including an evaluation of B.C.'s early approach to using this type of technology in B.C.'s health care system."*

Saskatchewan health system partners, including eHealth, the Ministry of Health, SHA, Saskatchewan Cancer Agency (SCA), Saskatchewan Medical Association (SMA), and Health Canada (as a participant and representative of First Nation communities), formed an operational and leadership working group during the pandemic. This group consulted with patients and providers to understand where Saskatchewan could expand virtual care options to better meet the needs of patients across the province.





### Another virtual care tool used by health care providers throughout the pandemic was Remote Patient Monitoring.

Remote patient monitoring technology allows patients with severe chronic diseases or conditions to monitor their blood pressure and other health factors from the comfort of their own homes and share this information electronically with their physician and other health care providers. Remote monitoring was initially being piloted to monitor lung transplant patients, but was quickly rolled out more broadly during the pandemic as another virtual care option for health care providers and their patients.

By tracking patient results on a regular basis through remote monitoring, health care teams can adjust treatments as required. In the longer term, remote monitoring provides guidance to patients in order to help them learn to live and cope with their life-long conditions.

### BY THE NUMBERS

Expanded access to clinical video conferencing by

**4,400%**

More than

**470,000**

consultations occurred using clinical video conferencing technology.

Remote Patient Monitoring was used to help monitor active COVID-19 cases. More than

**1,700**

patients used remote monitoring and about

**40 to 50**

new patients were being on-boarded daily throughout the fiscal year.



## ELECTRONIC HEALTH RECORDS (EHR)

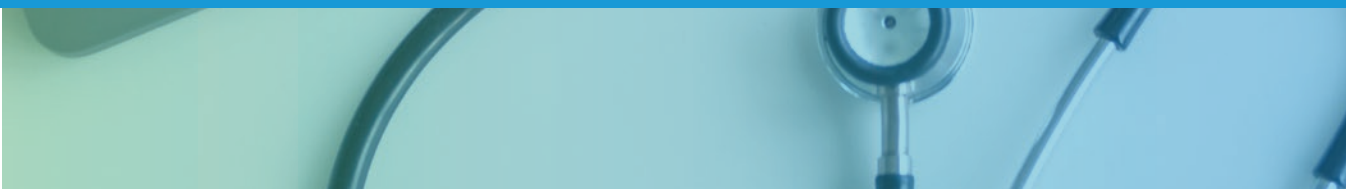
The Electronic Health Record (EHR) improves health care coordination in Saskatchewan's health system by giving health care providers timely and convenient access to provincial patient information. As Saskatchewan battled the pandemic within our own borders, health care providers relied on electronic patient information more than ever. Ensuring the flow of accurate health information became a key part of the provincial health system's offensive strategy for mitigating the spread of COVID-19.

The SHA identified new virtual care workflows and developed new clinical documents, such as assessments and progress notes of COVID-19 patients. The 10 new COVID-19 clinical documents were also added to the EHR, so that providers could access important COVID-19 related patient information from anywhere in the province.

### What is the EHR?

The EHR is a secure and private lifetime record of an individual's key health history and care. It safely and securely collects and stores patient information, such as laboratory results, medical imaging, immunizations, prescriptions, clinical documents and hospital visits across Saskatchewan.

- More than 15,000 health care providers have access to this provincial information using a secure website called the eHR Viewer.
- Approximately 220,000 patients benefit from electronic information flow every month.



## Provincial Laboratory Technology Enhancements

During the pandemic, Laboratory Services created new test codes to ensure COVID-19 test results displayed correctly in health systems across the province, thereby improving the accuracy and delivery of patient information when it was most critical. The team also enhanced those lab systems so they could effectively manage and store the additional data and information.

Lab Services also supports federal COVID-19 screening for individuals crossing Canadian borders by air or land. Those results are sent to the SHA for necessary follow-up and reporting.

## HIGHLIGHTS

- Implemented system and application changes to support a new COVID-19 positive reporting and distribution process for Public Health and the Roy Romanow Provincial Laboratory (RRPL).
- Enhanced and increased system capacity and reliability at the RRPL to support the increase in COVID-19 test results.

## BY THE NUMBERS

LAB SERVICES:

Researched and created the provincial standards for

**80**

COVID-19 related laboratory test codes and added them to the province's electronic health records.

Mapped more than

**700**

laboratory tests so they displayed correctly in health systems across the province.

Confirmed more than

**3,000**

COVID-19 tests and added them to provincial electronic health records.

## COVID-19 Testing & Assessment Centre Deployments

eHealth supported the set-up of COVID-19 testing and assessment sites, including Walk-In and Drive-Thru locations, across the province:

- 40 Testing Sites
- 30 Assessment Sites

eHealth deployed network and devices, such as computers and printers, to all testing and assessment sites. The team continues to work with SHA Digital Health and clinical teams to support those devices and provide any additional hardware and networks needed.

## COVID-19 Field Hospital Deployments

eHealth collaborated with the SHA to design and set up two provincial field hospitals—one in Saskatoon (Merlis Belsher) and one in Regina (International Trade Centre, Evraz Place)—as a precautionary measure during the pandemic. If Saskatchewan hospitals reached capacity, patients requiring ambulatory care could be sent to these field hospitals for treatment.

eHealth worked closely with the SHA to understand the requirements and provide the necessary IT network infrastructure and devices, such as desktops, workstations, phones,

printers, microphones (to support self-edit and dictation) and corporate and wireless network (to support potential clinical needs).

Both sites were set up so they could open within a two-week period. Thanks to the great efforts of our province to contain the spread of COVID-19, the two field hospitals have not had to open. Any unused IT infrastructure and devices will be cycled back into the health system to be used where needed.

## COVID-19 Acute Facility Construction Support & Equipment Deployment

In light of the global pandemic, the provincial health system developed surge plans for acute centres throughout Saskatchewan. These plans included renovations, new equipment, relocations of existing departments and expansion of critical care units (ICUs), in an effort to prepare health facilities for additional patients and demand for services.

### What is Surge Planning?

*Surge planning occurs when Saskatchewan's health system prepares for an increased demand for health care services. The surge could be due to anything ranging from a plane crash, a weather event, or a pandemic.*

As expected, acute centres did face numerous surges as more and more COVID-19 patients were admitted, adding increased pressure on the health system and providers. These surges led to the expansion of critical care space to support our most critical COVID-19 patients throughout the pandemic. eHealth deployed the necessary IT equipment to these critical spaces to help providers give the best possible patient care. That equipment included desktops, printers, status boards and the implementation of Vocera—devices that enable hands-free communication between health care providers—in Saskatoon's Intensive Care Unit (ICU) and the expansion of Vocera in Saskatoon's Emergency Department.

## HIGHLIGHTS

- Implemented standardized Display Board columns to track Infection Control, COVID-19 Screening and Testing Statuses.
- Supported the onboarding of staff redeployments across the health system.
- Supported the transition of health system employees to work from home by providing the necessary IT infrastructure, services and equipment.

## COVID-19 Contact Tracing Technology

As Saskatchewan worked to reduce the spread of COVID-19 and “flatten the curve”, the SHA required a quick and efficient way to monitor and contact those residents who may have been in close contact with someone who tested positive for COVID-19. The province decided to use a free service offered by the World Health Organization (WHO) to do just that. In April 2020, the SHA and

eHealth worked together to quickly implement and deploy the new Contact Tracing Application, so that Contact Tracers across the province could inform all potential close contacts and help reduce the spread of COVID-19 in the province.

To meet the growing demand and increased usage of the new Contact Tracing Application, improvements were made to its performance, infrastructure and stability.

## BY THE NUMBERS

THE CONTACT TRACING SYSTEM SUPPORTS:

**1,600**

health system users.

**96,525**

Contacts – Individuals contacted by the SHA because they may have been in close proximity to someone with COVID-19.

## EMERGENCY OPERATIONS CENTRE (EOC):

eHealth held regular Pandemic Planning meetings throughout the year to ensure the organization was supporting our health system partners to the best of our ability and meeting the health system's unique technological needs during the ever-changing pandemic. In December 2020, eHealth officially established an Emergency Operations Centre (EOC) to further organize our pandemic response efforts and align with the SHA's EOC.

**An EOC is an emergency command and control location, physical or virtual, that provides a centralized and coordinated approach to managing an emergency situation—in this case, the COVID-19 global pandemic.**

The members of eHealth's EOC are subject-matter experts from across the organization who provided direction and support during the emergency pandemic response efforts. They also have the experience and authority to make decisions on behalf of their respective departments.

eHealth collaborated with the SHA, Ministry of Health, and other health partners to quickly implement and support a number of new services and applications needed by the health system and providers to care for patients, and respond effectively to the ever-changing needs and demands of the pandemic.



## COVID-19 Access and Vaccine Clinic Deployments

When the second pandemic wave hit Saskatchewan in November 2020, the health system mobilized all of their available employees and received additional supports from other Ministries, Executive and Federal Government organizations and rapidly began to redeploy those resources to support critical COVID-19 activities, such as Contact Tracing, Negative Callbacks, Contact Monitoring, and, eventually, Vaccine Rollout. All resources involved in these rapid redeployments, including physicians redeployed to various “hot spots” throughout the province, needed quick access to the necessary programs and services in order to complete their new COVID-19 related duties. eHealth was able to accommodate processing the necessary account requests within a 24-hour turnaround time, as requested by the SHA.

eHealth made it a priority to provide the necessary access to those working on the frontlines of the ongoing emergency pandemic response efforts. For the next six months, many eHealth employees were also redeployed to help set up COVID-19 accounts; grant access to key health programs and services; and support equipment requests. They processed an unprecedented number of account requests, within that short time:

### BY THE NUMBERS

**10,206**

account requests for SHA employees, and redeployed executive and federal government employees, to assist with new pandemic-related roles, such as Contact Tracing, Contact Monitoring, COVID-19 Positive Notifications, Negative Callbacks, Case Monitoring, Case Investigator, and Vaccine Rollout.

**53**

Physician Redeployment Requests.

**6,956**

Vaccine Clinic Support Requests—

**5,228**

Requests between March 9 to 14, before Vaccine Clinics opened across the province.



Once vaccines were scheduled to arrive in Saskatchewan, the health system worked as quickly as possible to set up 216 Vaccine Clinics across the province, with eHealth providing the necessary IT programs, equipment and infrastructure for each site. Health system teams worked together to support Saskatchewan’s COVID-19 vaccination rollout strategy and eHealth made it a priority to meet the unique technical and connectivity needs and challenges of each vaccine clinic. Our deployment teams around the province worked tirelessly to drive the necessary equipment out to each of the locations for their first clinic dates and where possible provided on-site support to ensure the clinics were operating efficiently.







## COVID-19 Long Term Care Technology Enhancements

In Saskatchewan, 160 Long Term Care (LTC) facilities use a unique system to document all COVID-19 vaccines given to the residents in their facility. If a resident received a COVID-19 vaccine before moving to a LTC facility, it appears as 'historical' information in the system. This information gathering has proven valuable for the health system in many ways, including:

- Organizing patient information from LTC facilities
- Organizing the flow of patients in and out of LTC facilities
- Assisting the health system to plan first and second doses of COVID-19 vaccines
- Completing provincial dashboards, as the information is captured in real time
- Planning for those older than 70 years of age who reside in a LTC facility in the province

All immunizations administered and recorded in LTC facilities are automatically sent to Panorama (a provincial health information system) on a daily basis.

- 13,302 COVID-19 immunizations from LTC facilities were created and recorded in Panorama via automation before the end of the fiscal year. This is especially noteworthy as this new automation saved health care providers from having to manually enter more than 13,000 COVID-19 immunization events into Panorama.





## COVID-19 Public Health Technology Deployments

### Panorama

During the vaccine rollout, eHealth expanded Panorama so that it had enough capacity to receive and store all vaccine information from LTC facilities, community pharmacies, and support the expanded use of the application during the pandemic. This expansion ensured that all health facilities across the province that use and rely on the provincial health information available in Panorama have the most accurate and up-to-date immunization information available.

**Panorama is a comprehensive, integrated public health information system that allows Saskatchewan's health care professionals to effectively manage vaccine inventories; immunizations; investigations; outbreaks and family health.**

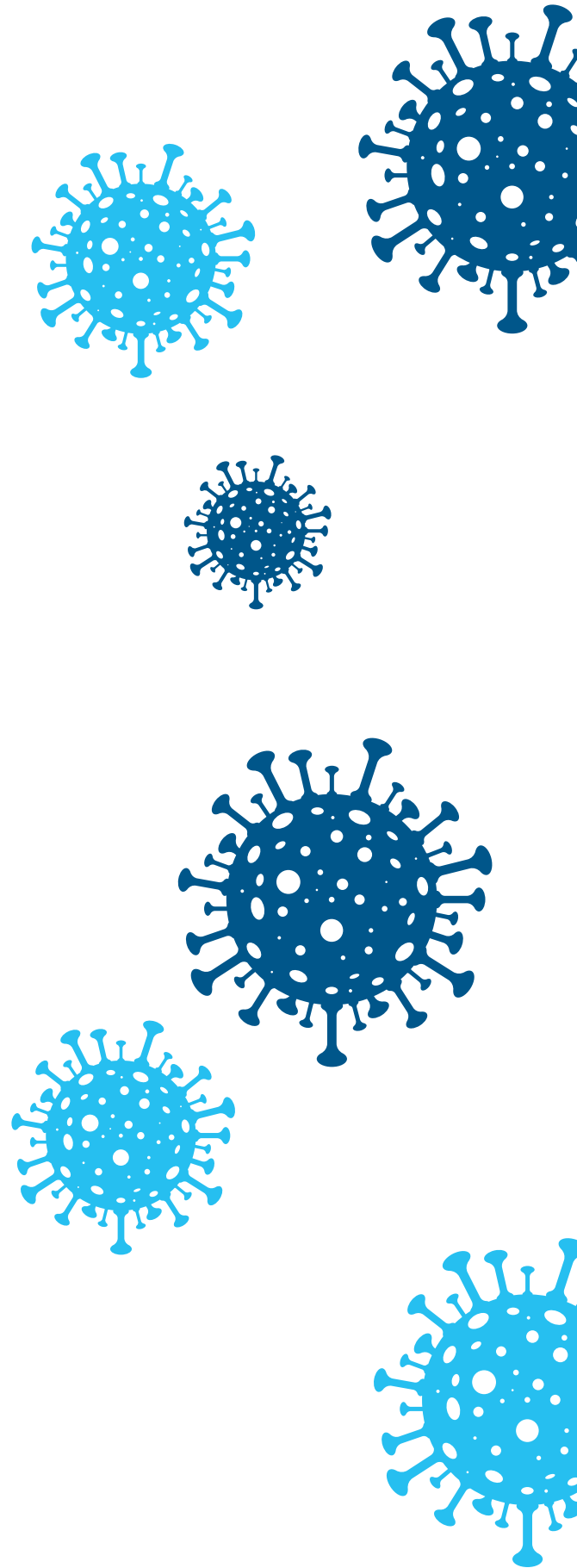
eHealth also improved and updated Panorama during the pandemic to ensure it ran smoothly and included relevant COVID-19 and vaccine information, which supports the clinical and reporting requirements of the vaccination program.

eHealth continues to provide operational support to approximately 1,700 health care professionals and facilities that use Panorama.

- 208,404 total COVID-19 immunization events added to Panorama before the end of the fiscal year.

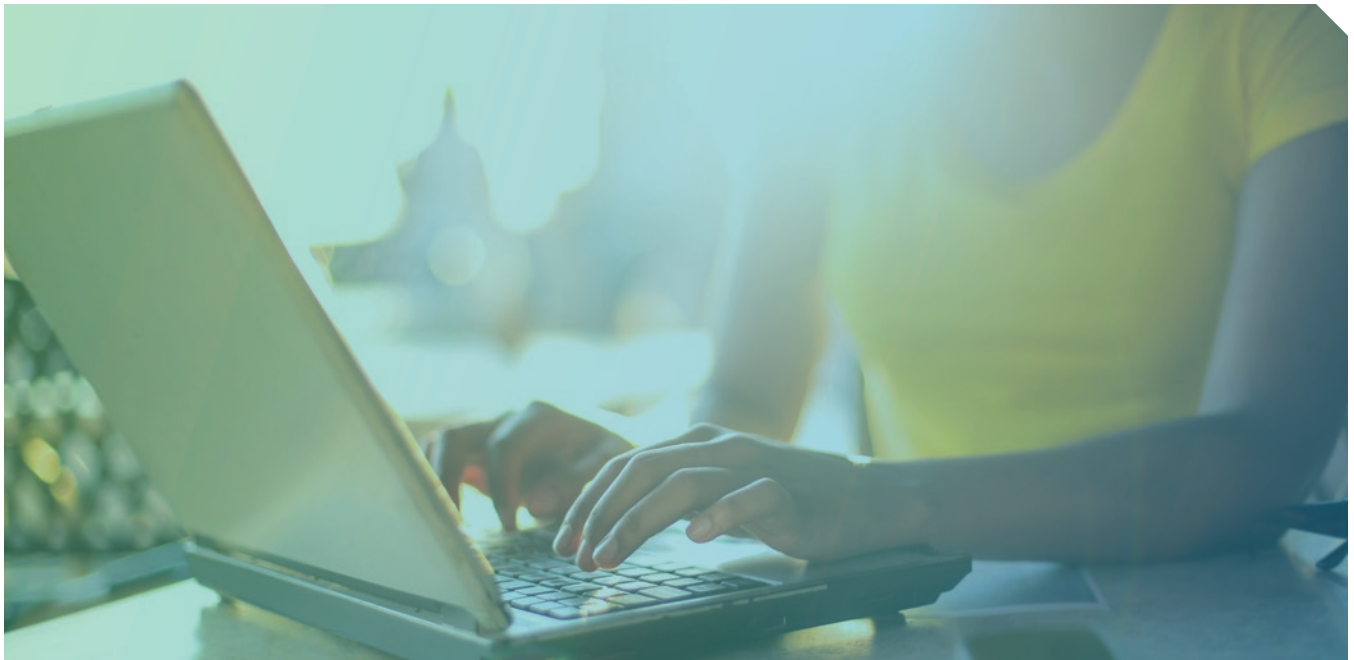
- **Vaccine Distribution Tracker (VDT):**
  - eHealth developed a new web form to make it quicker and easier for health care providers, pharmacists, vaccine clinic staff and other workers to record and track vaccine inventories.
  - In March, this new vaccination tracking service was implemented in vaccine sites owned by the SHA, Indigenous Services Canada, Community Pharmacies and Athabasca Health Authority.
- **COVID-19 Quick Entry (CQE):**
  - eHealth created and implemented a new COVID-19 Quick Entry tool that makes it quicker and easier for health care providers, pharmacists, vaccine clinic workers and others administering vaccines, to record, search and view immunization records.

Onboarded 1,391 health care providers, pharmacists and other workers to assist with the vaccination rollout efforts.





**eHEALTH  
SASKATCHEWAN  
PROGRESS &  
HIGHLIGHTS  
IN 2020-21**



## INFORMATION SECURITY

In addition to eHealth's extensive COVID-19 efforts, our organization also made it a priority to improve the security of Saskatchewan's health care system. eHealth has been working diligently on responding to, and implementing, the recommendations made by the Office of the Information and Privacy Commissioner (OIPC), following the ransomware incident in December 2019. Thanks to the hard work of teams across eHealth, we are making significant progress on implementing the OIPC's recommendations and that work will continue to be a focus for our organization into the future.

Saskatchewan's health system relies on eHealth's provincial clinical information systems to support direct patient care. It is important that residents, patients, health care providers and our partners trust the safety and security of provincial electronic health records.

### Some of eHealth's Information Security priorities, include:

- Continuing to consolidate security tools across the provincial health care system.
- Implementing security program improvements to address the findings from the Office of the Information and Privacy Commissioner (OIPC) and Saskatchewan's Provincial Auditor.
- Refreshing security policies and procedures that are applicable to the entire provincial health care system.
- Ensuring that all Saskatchewan health system employees successfully complete the annual provincial Security Awareness Training Program.
- Establishing a vulnerability management program across Saskatchewan's health system to protect Personally Identifiable Information (PII) and Personal Health Information (PHI).
- Standardizing password policies across the health system.
- Performing an internal audit of critical health applications to ensure that disaster recovery plans are complete, reflect the current state and meet eHealth's recovery criteria.



## INFORMATION SECURITY

### Improving Patient Care

eHealth is committed to making ongoing improvements and enhancements to Information Security in an effort to protect the availability, integrity and confidentiality of health care records, information and systems that are used to deliver the very best care to Saskatchewan patients.

### eHealth is also working to enhance Security Governance with:

1. A five-year security roadmap
2. The creation of a Cyber Security Response Team (CSRT) – Internal eHealth Security Committee
3. A Security Officers Committee (SOC)

**Purpose & Goal:** The SOC is a collaborative group of health partner representatives responsible for enhancing the overall security posture of Saskatchewan health care. It also supports privacy needs by advising on security governance best practices and demonstrating a joint commitment and collaborative approach to the protection of health information.

- Provides input to the development of security policies and standards;
- Promotes the adoption of policies and standards within their respective partner health organizations; and
- Acts as advocates within their respective organizations to ensure the highest standard of information protection;

The Committee collaboratively guides the development of a comprehensive security governance framework that incorporates:

- Strategy Review
- Policy Review
- Standards Review
- Compliance Reporting
- Training

4. A refreshed Security Policy Framework

5. Centralized security program reporting on all initiatives and projects

6. Centralized information on known risks in an Enterprise Risk Register





## eHEALTH PROGRAMS

---

### HIGHLIGHTS

---

While COVID-19 emergency pandemic response was eHealth's top priority, our Programs areas and other departments also continued to focus on other important projects, supports and critical maintenance.

eHealth Saskatchewan's Programs are comprised of more than 30 clinical and non-clinical program (service) areas that all work together to support health care providers and teams across the province in delivering the best possible care to patients. They enable and facilitate the merging of digital technologies with health, health care, living, and society to enhance the efficiency of health care delivery.

Programs range from primary care to acute care, and

include laboratories, pharmaceuticals and diagnostics. Additional systems that also support patient care and information include, Virtual Care, MySaskHealthRecord and the Provincial Electronic Health Record.

The Programs team is comprised of clinical health professionals, technical professionals and program management professionals. Together, they engage directly with all health system partners in managing their technology requirements and ensuring their specific services are delivered efficiently and effectively. The team also collaborates with stakeholders across the province to ensure that health care providers and their employees have access to the latest solutions for improving patient care.







# IN FOCUS



## MySaskHealthRecord

When Saskatchewan residents register for MySaskHealthRecord, they have quick and easy access to a secure website that contains their personal health information, including:

- *Laboratory Test Results, including COVID-19 test results*
- *Immunization History, including COVID-19 vaccinations*
- *Medical Imaging Reports*

- *Clinical Visit History, such as hospital visits*
- *Prescription History*

They can also add their own personal information to:

- *Track and generate reports*
- *Set medication and appointment reminders*
- *Upload information from health devices*
- *Share your information with other MySaskHealthRecord users*

## BENEFITS

Having quick and easy access to personal health information may help Saskatchewan residents be more:

- Proactive in managing chronic conditions and your overall health
- Informed to make better decisions about your health and care
- Engaged with health care providers
- Prepared when travelling

## BY THE NUMBERS

APRIL 1, 2020 - MARCH 31, 2021

Achieved approximately

**214,000** users, or **17.4%**

of Saskatchewan's population, by the end of the fiscal year.

More than

**8,400**

parents and legal guardians were granted access to their children's health information under the age of 12 (as per a temporary option made available to parents with children under 12, during the pandemic).

---

## HIGHLIGHTS

---

- Achieved approximately 214,000 users, or 17.4% of Saskatchewan's population, by the end of the fiscal year.
- As of March 2021, the registration age for MySaskHealthRecord was lowered to 14, from 18.
- Parents and legal guardians can request permanent access to the health information of their children and dependents under the age of 14, as of March 2020.
- More than 8,400 parents and legal guardians were granted access to their children's health information under the age of 12, during the fiscal year (since April 2020, when that option was made available).

---

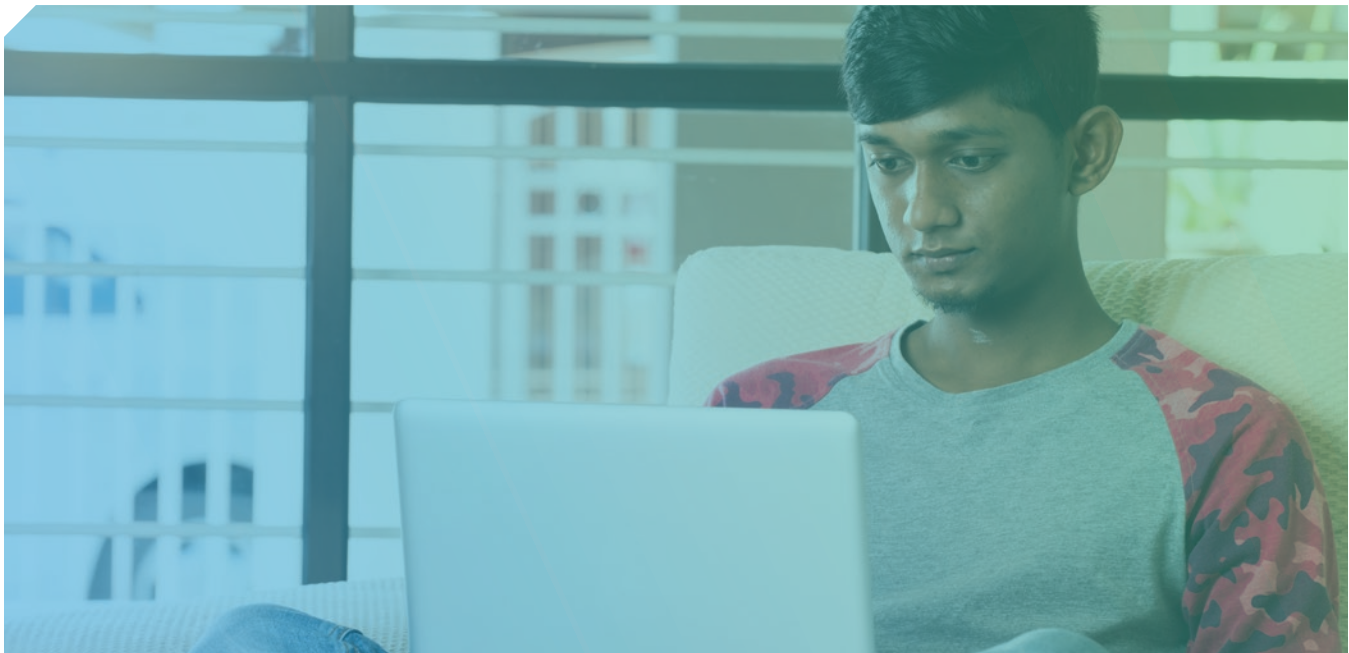
## LOOKING AHEAD

---

eHealth is currently developing some new features for MySaskHealthRecord:

- A new feature that allows residents to scan or upload their advanced care directives into MySaskHealthRecord. Those uploaded directives could then be viewed by their physician via the Electronic Health Record (EHR) and Electronic Medical Record (EMR) and could also be uploaded via EHR/EMR in the hospital and viewed on MySaskHealthRecord.
- A demographic update feature that would allow users to update their contact information, such as address, phone number, and email in MySaskHealthRecord, which would also update their contact information in provincial health systems.
- The ability to view transcribed documents, such as discharge summaries.
- Report generator enhancements, which would allow users to create their own custom reports.
- A secure messaging feature that would allow patients and providers to directly communicate with one another.

eHealth is also working on the creation of a mobile app for MySaskHealthRecord.





# IN FOCUS: MySaskHealthRecord

## Regina man with Cancer Diagnosis says MySaskHealthRecord 'Made all the Difference in the World'



### *Hearing the words 'you have cancer' is terrifying.*

That's how 68-year-old Regina resident, Jim Beale, says he felt when he received his prostate cancer diagnosis in May 2019.

"It sucks the wind right out of your sails."

Before his diagnosis, Beale was fully engaged in his work as a financial advisor and enjoyed travelling and golfing with his wife Lori, as well as fishing with his kids and grandkids.

Knowing that his life was about to change to now include numerous medical tests, treatments and hospital visits, Beale quickly signed-up for eHealth Saskatchewan's MySaskHealthRecord to have quick and easy access to his health records online.

MySaskHealthRecord is a secure website for personal health information such as lab test results (including COVID-19 test results), medical imaging reports, clinical visits, prescriptions and

immunizations. This service is available to eligible Saskatchewan residents 14 years of age and older.

"With convenient online access to my health records through MySaskHealthRecord, I felt comfortable practicing 'active surveillance' for the 12 months following my diagnosis," said Beale.

"I could view my periodic tests that displayed my PSA (Prostate-Specific Antigen) levels, volume changes, and other test results, and then make more informed decisions about my treatment."

Based on the information in MySaskHealthRecord, and after many discussions with his doctor, Beale chose to undergo surgery that would completely remove his prostate. Beale says he did not know at that point if the surgery would be effective. He and his wife were anxious about all of the unknowns—were the cancer cells only in his prostate? Or, had the cancer cells also moved to his lymph nodes and bones? In order to answer those questions, Beale underwent a bone scan, as well as an MRI.

He says the tests were completed in the morning and that same afternoon he received a notification email from eHealth that new information had been added to his MySaskHealthRecord account. He recalls feeling both nervous and excited to open his account as quickly as he could.

"What a relief to read the same day that the cancer had not spread and, as a result, my surgery was likely to be successful," said Beale.

Beale had prostate surgery in July 2020 and it was a success.

"One month after my surgery, a blood test revealed that my PSA was negligible and that I was cancer free!" "It is always the fear of the unknown that makes me lose sleep," said Beale. "This journey through prostate cancer presented me with so many scary unknowns, but I have had far fewer of them thanks to MySaskHealthRecord."

Beale encourages everyone to sign up for MySaskHealthRecord and become more involved in their own health care.



“MySaskHealthRecord has made me feel completely empowered to work with my health care professionals on my health issues,” said Beale. “To ask them questions from a position of understanding, instead of ignorance. We always make better decisions when we are better informed.”

Beale says he is excited to get back to focusing on all of the things he loves, with the people he loves.



“We are looking forward to a great summer with a lot of outdoor activities, including golf and fishing, hopefully with the whole family—eight grandchildren should keep us busy!”

Those who sign up for MySaskHealthRecord can also access their children’s health information (under the age of 14); add their own personal information to track and generate reports; set medication and appointment reminders; upload information from

health devices, such as activity trackers; and share their information with other MySaskHealthRecord users.

In addition, as Saskatchewan continues to rollout COVID-19 vaccinations, MySaskHealthRecord also gives people quick and easy access to proof they have been immunized.

To register for MySaskHealthRecord, eligible residents will need a valid Saskatchewan health card, plus a Saskatchewan Government Insurance (SGI) driver’s licence or SGI photo ID card.

**SIGN UP TODAY AT**  
[eHealthSask.ca/MySaskHealthRecord](https://eHealthSask.ca/MySaskHealthRecord)





## CONNECTED CARE PROGRAMS

Saskatchewan's Connected Care Strategy is about improving team-based care in hospital and community settings and enhancing provider access to patient information as they move between health care settings. eHealth's Connected Care Programs support this strategy by enabling information flow to patients and providers through innovative technology. The four pillars of this program division are Citizen, Provider, Virtual Care and Information Flow.

### HIGHLIGHTS

#### Electronic Health Record

Additional clinical health information is added to the EHR to support health care providers as they treat and care for their patients. That information includes:

- Two new community radiology sites
- Patient consults & referrals
- Progress notes
- Discharge summaries

In January 2021, the EHR was updated to increase performance, which also completed the Provincial Auditor's recommendations on the Saskatchewan Laboratory Result Repository (SLRR).

#### Organ & Tissue Donor Registry

In Saskatchewan and across Canada, the need for organs and tissues for transplants far outweighs the available supply. A transplant is sometimes the only treatment for people with an organ damaged through injury or disease. Tissue donations can also dramatically improve the quality of life for people of all ages. Outcomes continue to improve each year. Thanks to donors, more and more transplant patients are living longer and healthier lives.

eHealth led the creation and management of the technical solution that supports the new provincial organ and tissue donor registry. This work was done in collaboration with the SHA, health system partners and various technology vendors.

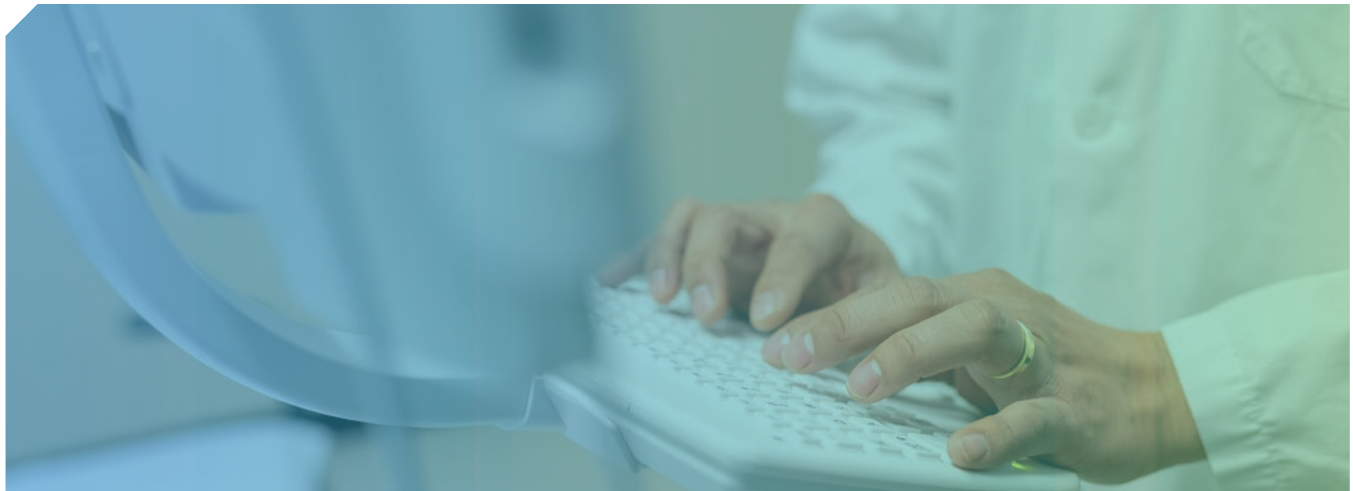
#### Referral Management System

eHealth also supports the Referral Management System (RMS)—a secure website used by specialty clinics to quickly and conveniently identify the next available specialist, in an effort to help speed up referrals and appointment bookings and reduce overall patient wait times.

The pandemic ignited renewed interest in RMS with several specialty groups in the province, who are adding this helpful system into their clinics.

- 22,368 patient referrals were managed through RMS and 75% of those referrals led to patient appointments.





## INTEGRATED HEALTH PROGRAMS

Integrated Health Programs facilitate and support the delivery and access of health care information across the continuum of care. This program area works with the health system in the areas of public health, mental health and addictions, primary health care, acute and tertiary care, home care, long term care, and chronic disease management. Integrated Health also focuses on providing technological support for our health system partners and the communities they serve.

---

### HIGHLIGHTS

---

#### Community Care - Mental Health & Addictions

**Level of Care Utilization System (LOCUS)** is available electronically in the Mental Health and Addictions Information System (MHAIS) and supports health care providers by improving their access to quality mental health and addictions services and, thereby, reducing wait times. LOCUS standardizes the services offered based on an individual's current need. The application aligns with provincial standards on privacy, suicide risk management, service delivery and reporting requirements.

- eHealth collaborated with the SHA to develop an electronic version of the LOCUS tool, which was also added to the MHAIS.
- MHAIS has been enhanced to further increase its potential of being a provincial client record for mental health and addictions.

#### Acute Care

**Sunrise Clinical Manager (SCM)** provides physicians with quick and easy access to electronic health records in acute care settings, such as emergency departments, intensive care, coronary care, cardiology and other general areas where patients receive short-term treatment and care.

- Upgraded SCM so that all patient documentation and results, for a single visit, can be viewed in one location. This function is widely used for Release of Information requests.
- Implemented Standardized Physician Emergency Department documentation, which allows physicians from across the province to document the same, consistent patient information.
- These documents are also now available in the eHR Viewer for family and consulting provider use anywhere in the province.

# PROVINCIAL PROGRAMS

The Provincial Programs portfolio includes Laboratory, Drug & Pharmacy, Medical Imaging, and Renal. The teams are comprised of clinical health professionals, technical professionals, and program management professionals. Together, they focus on providing support and delivering services for our health system partners while ensuring alignment with their strategic direction.



## Laboratory

- Laboratory Information Systems (LIS) are being implemented in Esterhazy and Stony Rapids.
- 25 new physician Electronic Medical Records (EMRs) were provisioned to receive electronic laboratory results.

## Drug & Pharmacy

- Automated medication dispensing systems were added in the Humboldt Hospital, St. Paul's Hospital RAM Clinic, Saskatoon City Hospital, Lloydminster Hospital and Victoria Hospital, which helps clinicians safely and efficiently manage and dispense the right medications for the right patients.
- Pharmaceutical Information Program (PIP) information was made available in MySaskHealthRecord, so that residents with an account could quickly and easily view their prescription history online.

## Medical Imaging

Medical Imaging supports the delivery of public and community-based radiology imaging services by supporting several different clinical systems.

- Improvements and upgrades made to the Provincial Picture Archiving and Communications System (PACS).
- Mayfair Diagnostics in Saskatoon was set up with Provincial PACS to support them in providing MRI services to patients, on behalf of the SHA.

## Laboratory Information Systems (LIS)

LIS facilitates the collection and analysis of patient samples (blood samples, tissue samples, biopsies, etc.) and then reports those results to health care providers in a timely and accurate fashion. LIS is also capable of receiving and sending orders, managing laboratory test data throughout the processing cycle and generating and distributing laboratory result reports.

## The Radiology Information System (RIS)

RIS helps streamline departmental operations, including scheduling procedures, order entry, work list management, result distribution and billing. PowerScribe 360 interfaces with RIS to produce voice generated interpreted radiology reports. The Picture Archiving and Communication System (PACS) also interfaces with RIS to provide a complete imaging solution with interpreted radiology reports.



eHealth  
Saskatchewan

2010-11-18  
Regina, Saskatchewan  
1-877-222-2222



# INFORMATION TECHNOLOGY

# IT SERVICE MANAGEMENT

eHealth manages and operates three service desks that support health care providers and other employees in Saskatchewan's health system. eHealth's overall IT Service Management processes, include:

- Service Requests
- Account Management
- Critical Incident Response
- Monitoring

eHealth has been focusing on a number of initiatives that will improve necessary IT Service Management processes, increase proactivity and monitor and improve service response times.



## Stabilizing Core Services

eHealth continues to update and maintain key infrastructure in the health system, while also working to replace and renew aged IT infrastructure to help improve, stabilize and standardize critical core services (clinical systems and applications) for the provincial health system.

eHealth is also working on major projects to modernize and support critical health infrastructure, such as storage and backup systems, Virtual Desktop Infrastructure (VDI) and email systems. These projects increase the performance, reliability, security and capacity of these core systems so that they can provide more timely, secure, and reliable access to health system partners.

## Strategic Partner Projects

### AIMS (Administrative Information Management System)

The AIMS project was initiated in 2018 to create one cohesive provincial system for better financial, capital and human resource management within the health system.

eHealth's Programs and Technology teams continued to make important progress in areas that will support the AIMS launch. Throughout the fiscal year, teams continued to work on integrations, software certifications and installing various health care technologies throughout the health system.

Working groups were also established to discuss future supports and the roles and responsibilities of eHealth teams and the AMS (Application Management System) team, which is responsible for ensuring the stability

of the system, resolve issues, and manage changes and enhancements in collaboration with vendors, after the official AIMS launch.

### New Facility Build Capital Projects

While many of eHealth's projects and initiatives were paused during the pandemic, our organization continued to support the SHA's new facility build capital projects. Prince Albert Victoria Hospital and Weyburn General Hospital continued their high-level planning and initial cost estimates. Meadow Lake Long Term Care facility made significant progress on construction throughout this fiscal year.

These projects will continue to be a focus for both eHealth and the provincial health system.

## Provincial Process Development & Consolidation

eHealth continues to work on creating standardized IT support processes for the provincial health sector that will improve efficiency and service delivery for front line health care providers.

### IT Asset Management

The IT Asset Management (ITAM) program was initiated in 2019 with the goal of establishing an enterprise

grade program/service that would help guide asset investments and define asset related risks. The program has continued to work towards these goals and has already contributed valuable information for the Enterprise Security Services' Vulnerability Management scans.

eHealth is working to manage IT assets more effectively and create a more sustainable environment into the future.





## PRIVACY, ACCESS + PATIENT SAFETY

eHealth's Privacy, Access, and Patient Safety Unit is responsible for:

- eHealth's compliance with *The Health Information Protection Act* (HIPA) and *The Freedom of Information and Protection of Privacy Act* (FOIP);
- Privacy breach investigation and follow-up;
- eHealth's Patient Safety Program;
- Liaising with the Saskatchewan Office of the Information and Privacy Commissioner (OIPC);
- Completing Privacy Impact Assessments (PIAs) on eHealth initiatives;
- Operating the electronic Provincial Privacy Audit and Monitoring Program (ePPAM), which enables eHealth to quickly and easily detect and report inappropriate uses of the Electronic Health Record Viewer (eHR Viewer) and other clinical information systems;
- Establishing Data Sharing Agreements for initiatives involving the sharing of personal health information; and
- Operating eHealth's Privacy Service—a public-facing service that:
  - Answers privacy, access, and patient safety-related questions and provides advice and assistance to the public;
  - Responds to access to information requests under HIPA and FOIP;
  - Responds to requests from parents and legal guardians looking to access their child's MySaskHealthRecord;
  - Allows individuals to request masking or removal of masking of their personal health information in the Pharmaceutical Information Program (PIP) and the eHR Viewer;
  - Allows individuals to request that a full block be placed or removed on their personal health information in the eHR Viewer; and
  - Allows individuals to request audit reports, showing who has viewed their personal health information in PIP, Picture Archiving and Communications System (PACS) and the eHR Viewer.

## HIGHLIGHTS

eHealth completed its investigation report into the ransomware attack on the provincial health system in December 2019. Our teams have been working closely with the OIPC, the Ministry of Health and health sector partners on the recommendations in the OIPC's report.

## BY THE NUMBERS

APRIL 1, 2020 - MARCH 31, 2021

eHealth's Privacy Service received

**2,175**

inquiries from the public.

**398**

patients have their personal health information masked in the eHR Viewer.

Fewer than

**5**

patients have a full block on their personal health information in the eHR Viewer.

## LOOKING AHEAD

The Privacy, Access, and Patient Safety Unit looks forward to:

- Making improvements to its access to information and privacy impact assessment processes;
- Making improvements to the electronic Provincial Privacy Audit and Monitoring (ePPAM) service to allow for more robust auditing and monitoring of access to personal health information; and
- Updating the eHR Viewer Joint Services/Access Policy (JSAP) to make it easier for users of the eHR Viewer to understand.





# HEALTH REGISTRIES + VITAL STATISTICS



## Health Registries

A Saskatchewan health card is a key component for Saskatchewan residents accessing provincially-funded health care services and benefits. Health Registries processes new health card applications and updates the current Person Health Registration System (PHRS).

## Health Card Renewal

2020 was a health card renewal year. Health Registries mailed out renewal stickers to all Saskatchewan residents with provincial health coverage. The updated sticker renews health cards to December 31, 2023. This process updates the PHRS to ensure that only eligible Saskatchewan residents maintain health coverage.

The renewal project requires additional financial and human resources and generates approximately 1,000 to 1,500 additional phone calls per day during the peak months.

## BY THE NUMBERS - HEALTH REGISTRIES

APRIL 1, 2020 TO MARCH 31, 2021

# 48,888

Health Registration applications processed.

# 162,983

Health Registration updates.



## Vital Statistics

Vital Statistics registers and issues certificates for all vital events experienced by residents, including birth, stillbirth, marriage, death, and legal changes of name.

## LOOKING AHEAD

Vital Statistics is working in partnership with their federal and provincial partners to improve the timing for registration and notification of death.

## BY THE NUMBERS - VITAL STATISTICS

THE FOLLOWING NUMBERS ARE FROM THE 2020 CALENDAR YEAR,  
AS PER VITAL STATISTICS LEGISLATIVE REPORTING REQUIREMENTS

# 29,858

vital events and amendments were registered.

Events Registered:

Events Amended:

# 14,172

 births

# 1,691

 births

# 10,269

 deaths

# 24

 deaths

# 3,454

 marriages

# 119

 marriages

# 129

 stillbirths

# 0

 stillbirths

# 28,024

total events registered

# 1,834

total events registered

**Great Work Team!** Despite the steady high volume of work and challenges related to COVID-19, Health Registries was able to maintain service levels throughout the COVID-19 pandemic.





## ORGANIZATIONAL DEVELOPMENT

eHealth Saskatchewan went through a reorganization a few years ago that saw the creation of a new Organizational Development department that incorporates:

- Continuous Improvement
- Change Management
- Employee Recognition
- Learning and Development
- Leadership Development
- Employee Engagement

Organizational Development's key contribution to achieving eHealth's vision and mission is to coach, mentor, consult, train and assist employees to further build capacity, spread knowledge and foster problem-solving thinking and behaviour throughout the organization. This team supports eHealth's Centre of Excellence journey through the following priorities:

- Embedding organizational best practice, standards and tools;
- Building capacity and competency through education, training and coaching;
- Supporting others as they apply new methods and tools through initiatives; and
- Coaching and advising leaders on deploying the organization's strategic plan.

eHealth is in the process of an organization-wide inventory of learning and development requirements to assess corporate needs for now and into the future. Once the inventory and assessment is complete, eHealth will develop learning and development opportunities for our employees. These opportunities will further support our partner organizations and providers in delivering better care and solutions for the people of Saskatchewan.

# POLICY



Policies and procedures are a strategic link between eHealth’s vision and its operations. As such, sound policy development ensures strong and consistent corporate direction. eHealth’s policy area provides public, corporate and business policy development services to all eHealth business areas.

---

## HIGHLIGHTS

---

Effective February 18, 2020, Saskatchewan made legislative amendments to require individuals older than 18 to provide a criminal record check as part of the change of name process. Saskatchewan is the first jurisdiction in Canada to deny a change of name where a person has been convicted of certain types of criminal offences. The changes were implemented to prevent offenders who prey on the most vulnerable in our society from changing their name to avoid public

disclosure and scrutiny.

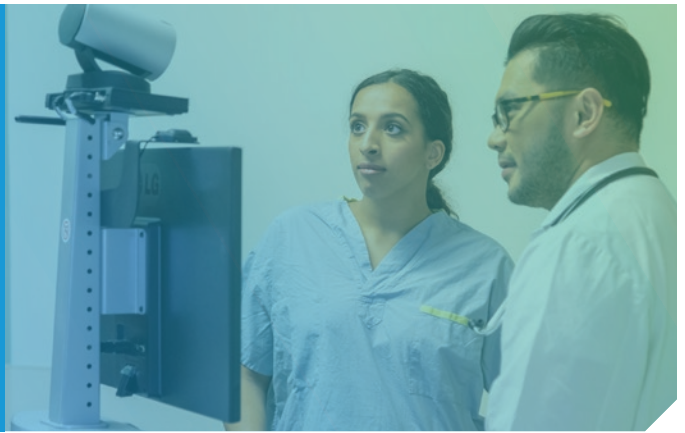
Significant work was also completed this year on various corporate policies to improve internal administration, reduce the organization’s corporate risk and deliver on eHealth’s vision.

eHealth is responsible for administering several pieces of legislation for the province, such as:

- The Change of Name Act and Regulations;
- The Medical Care Insurance Beneficiary and Administration Regulations (for administration of registration of health benefits); and
- The Vital Statistics Act, the Vital Statistics Regulations.



# INFORMATION + ANALYTIC SERVICES



## Data Management

The Data Management team continued to increase its data holdings to provide health care providers, system administrators and policy makers with timely access to quality and reliable information and analytics to improve system delivery and patient care.

## Data Solutions

Data Solutions continued to fulfill the high volume of requests for information from their numerous clients, including health care providers and health system partners. Focus was placed, once again, on providing an efficient self-service reporting environment to clients, which has been a huge asset.

## HIGHLIGHTS

COVID-19 highlighted the importance of quality and timely data. The Information and Analytic Services team worked closely with health system partners to ensure reliable data was available for a variety of needs, including:

- **Admit/Discharge/Transfer (ADT) Census:** The team integrated data from multiple clinical systems (SCM, WinCIS) to provide census data of hospitalized patients. That

data was further integrated with lab data to meet several needs: (1) gives clinicians knowledge of patients' COVID-19 status (infectious/non-infectious), (2) statistical reporting of hospitalized patients for the Ministry/SHA/Government dashboards, and (3) census data for capacity planning. These feeds have been further integrated and used to populate the GE Tile capacity management tool. These feeds are primarily delivered to the SHA, with the Ministry and Government dashboards being fed further downstream.

- **Panorama:** The team provides infectious disease case management data to both the SHA and the Ministry to advance the work of the epidemiologists. We also provide vaccination data for the Ministry of Health/SHA dashboard reporting, as well as case management data from the GoData platform.
- **Vaccine Distribution Tracking (VDT) application:** The team provides feeds of data from VDT to assist in vaccine distribution and coordination.
- **Google Analytics:** Data pertaining to the online COVID-19 screening tool is provided to the SHA.

- **HealthLine 811:** Data feeds and dashboards are provided to the SHA to inform resourcing decisions on crucial communications channels.
- **Long Term Care (LTC) facilities:** Provided data around the demographics of long term care facilities to coordinate vaccination efforts, to report on capacity and the impact of COVID-19 on those facilities.

## LOOKING AHEAD

Thanks to support from the Saskatchewan Centre for Patient-Oriented Research (SCPOR) program, eHealth will continue to work with other health system partners to build infrastructure and capabilities to help researchers and analysts in the province more easily access data. In addition, eHealth will continue to promote our existing tools and services (data management, business intelligence and visualization tools, advanced analytics, etc.) to other organizations in an effort to support and enable the adoption of analytics throughout the province.

# GOVERNANCE

In 2020-21 eHealth made significant progress on the establishment of an Information Technology (IT) Governance structure to support collaboration with our partners on health system priorities. eHealth successfully established the Integrated Advisory Committee (IAC), the Information Technology Project Portfolio (IT PPM) Committee, and the Service Management and Information Technology Strategy Oversight (ITSM) Committee. Through these committees, eHealth can effectively engage with partners on their business priorities and the impact technology has on those priorities.

eHealth continues to work on further maturing our Governance structure, as well as establishing new supporting Committees, with the ultimate goal of improving health system collaboration.





# STRATEGIC PLAN

1 products and services



Build our brand and image.

of information



Create a customer-focused culture.



engaged and workforce.

2

Business Operations



Let our customer service shine.

3

Digital Strategy

Business development



Innovation

and no  
s!!



# **2020-21 FINANCIAL STATEMENTS**



# MANAGEMENT'S RESPONSIBILITIES

The accompanying financial statements included in the Annual Report for the year ended March 31, 2021, are the responsibility of management.

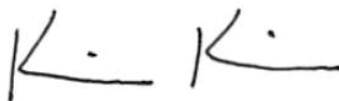
Management has prepared these financial statements in accordance with the Canadian public sector accounting standards, consistently applied using management's best estimates and judgments where appropriate.

The eHealth Saskatchewan Board of Directors is responsible for overseeing the business affairs of the corporation and has the responsibility for approving financial statements. The Board fulfills these responsibilities by reviewing financial information prepared by management and discussing the relevant matters with management and external auditors.

Management maintains a system of internal controls to ensure the integrity of information that forms the basis of the financial statements. The internal controls provide reasonable assurance that transactions are recorded and executed in compliance with legislation and required authority; that assets are properly safeguarded; and that reliable records are maintained.

The Provincial Auditor of Saskatchewan has audited the financial statements.

Her report to the members of the Legislative Assembly precedes the financial statements.



**Kimberly Kratzig**  
Chief Executive Officer  
eHealth Saskatchewan



**Mark Borgares**  
VP, Corporate Services and CFO  
eHealth Saskatchewan

## INDEPENDENT AUDITOR'S REPORT

To: The Members of the Legislative Assembly of Saskatchewan

### Opinion

We have audited the financial statements of eHealth Saskatchewan, which comprise the statement of financial position as at March 31, 2021, and the statement of operations, statement of change in net financial assets and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of eHealth Saskatchewan as at March 31, 2021, and the results of its operations, changes in net financial assets, and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

### Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of eHealth Saskatchewan in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

### Other Information

Management is responsible for the other information. The other information comprises the information included in the 2020-21 Annual Report, but does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or any knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on the work we have performed on this other information, we conclude that there is a material misstatement of this other information, we are required to report that fact in this auditor's report. We have nothing to report in this regard.

### Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards for Treasury Board's approval, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing eHealth Saskatchewan's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate eHealth Saskatchewan or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing eHealth Saskatchewan's financial reporting process.

### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists.



Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of eHealth Saskatchewan's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on eHealth Saskatchewan's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause eHealth Saskatchewan to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control identified during the audit.

Regina, Saskatchewan  
June 30, 2021

Tara Clemett, CPA, CA, CISA  
Acting Provincial Auditor  
Office of the Provincial Auditor

---

**Statement 1****eHealth Saskatchewan  
Statement of Financial Position  
As At March 31  
(\$000s)**

	<u>2021</u>	<u>2020</u>
<b>Financial Assets</b>		
Due from General Revenue Fund (Note 3)	\$ 20,189	\$ 15,915
Receivable from Ministry of Health	595	4,853
Other Accounts Receivable	7,476	13,718
	<u>28,260</u>	<u>34,486</u>
<b>Liabilities</b>		
Accounts Payable & Accrued Liabilities	10,038	16,394
Accrued Salaries & Benefits	1,244	845
Accrued Vacation	1,278	761
Deferred Revenue (Note 10)	4,376	4,752
Obligations Under Capital Leases (Note 9)	4,610	3,562
	<u>21,546</u>	<u>26,314</u>
<b>Net Financial Assets (Statement 3)</b>	<u>\$ 6,714</u>	<u>\$ 8,172</u>
<b>Non-financial Assets</b>		
Tangible Capital Assets (Note 6)	11,233	5,984
Prepaid Assets	12,470	6,686
Inventory	414	690
	<u>24,117</u>	<u>13,360</u>
<b>Accumulated Surplus (Statement 2)</b>	<u>\$ 30,831</u>	<u>\$ 21,532</u>

**Contractual Obligations (Note 8)****Contingent Assets (Note 14)**

(See accompanying notes to financial statements)



Statement 3

**eHealth Saskatchewan**  
**Statement of Change in Net Financial Assets**  
**For the year ended March 31**  
**(\$000s)**

	<u>Budget</u> (Note 4)	<u>2021</u>	<u>2020</u>
<b>Annual Surplus (Statement 2)</b>	\$ 1,671	\$ 9,299	\$ 631
Acquisition of Tangible Capital Assets	(750)	(9,623)	(908)
Amortization of Tangible Capital Assets	10,000	4,374	9,378
	<u>9,250</u>	<u>(5,249)</u>	<u>8,470</u>
(Acquisition) / Use of Prepaid Assets	(2,800)	(5,784)	(1,501)
(Acquisition) / Use of Inventory	-	276	(690)
	<u>(2,800)</u>	<u>(5,508)</u>	<u>(2,191)</u>
<b>Decrease in Financial Assets</b>	\$ 8,121	\$ (1,458)	\$ 6,910
<b>Net Financial Assets, beginning of year</b>	<u>8,172</u>	<u>8,172</u>	<u>1,262</u>
<b>Net Financial Assets, end of year (Statement 1)</b>	<u>\$ 16,293</u>	<u>\$ 6,714</u>	<u>\$ 8,172</u>

(See accompanying notes to financial statements)

---

**Statement 4**

**eHealth Saskatchewan  
Statement of Cash Flows  
For the year ended March 31  
(\$000s)**

	<u>2021</u>	<u>2020</u>
<b>Cash Flows From Operating Activities</b>		
Cash Receipts	\$ 166,198	\$ 138,650
Cash Paid To Suppliers And Others	(153,349)	(130,784)
<b>Cash received from Operating Activities</b>	<u>12,849</u>	<u>7,866</u>
 <b>Cash Flows From Capital Activities</b>		
Purchase Of Tangible Capital Assets	(9,623)	(908)
<b>Cash paid in Capital Activities</b>	<u>(9,623)</u>	<u>(908)</u>
 <b>Cash Flows From Financing Activities</b>		
Net Change in Obligations Under Capital Leases	1,048	(5,806)
<b>Cash Paid in Financing Activities</b>	<u>1,048</u>	<u>(5,806)</u>
 <b>Net Increase/(Decrease) In Due From General Revenue Fund</b>	\$ 4,274	\$ 1,152
<b>Due From General Revenue Fund, Beginning Of The Year</b>	15,915	14,763
<b>Due From General Revenue Fund, End Of The Year</b>	<u>\$ 20,189</u>	<u>\$ 15,915</u>

(See accompanying notes to financial statements)

**Notes to the Financial Statements  
for the Year ended March 31, 2021  
(\$000s)**

**1. Description of Business**

Saskatchewan Health Information Network (SHIN) was established as a Treasury Board Crown Corporation by Order in Council 581/1997 under the provisions of *The Crown Corporations Act, 1993* (Act) effective August 19, 1997.

SHIN was renamed to eHealth Saskatchewan by Order in Council 734/2010.

eHealth Saskatchewan (eHealth) was created to design, implement, own, operate, and manage a provincial health information network. eHealth's purpose is to foster the development of the health information technology sector, to foster re-engineering of health delivery processes and to protect health information as a strategic resource.

As a Crown entity, eHealth is not subject to income and property taxes from the federal, provincial, and municipal levels of government.

**2. Significant Accounting Policies**

Pursuant to standards established by the Public Sector Accounting Board (PSAB) and published by Chartered Professional Accountants (CPA) Canada, eHealth is classified as an other government organization. eHealth uses Canadian public sector accounting standards to prepare its financial statements. A statement of remeasurement gains and losses has not been presented in these financial statements because all financial instruments carrying value approximates their fair value. The following principles are considered to be significant:

**a) The Basis of Accounting**

The financial statements are prepared on the accrual basis of accounting.

**b) Revenue**

Government transfers are recognized as revenue in the period the transfer is authorized and any eligibility criteria are met. Other revenue is recognized in the year received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

**c) Expenses**

Expenses represent the cost of resources consumed for operations during the year. Expenses include provision for the amortization of tangible capital assets.

**d) Employee Future Benefits**

i) Pension plans - Employees of eHealth Saskatchewan participate in the Public Employees' Pension Plan (PEPP) (a related party) - This is a defined contribution plan. eHealth's financial obligation to the plan is limited to making the required payments to this plan according to the PEPP agreement.

ii) Disability income plan - Employees of eHealth participate in several disability income plans to provide wage-loss insurance due to disability. eHealth follows post-employment benefits accounting for its participation in the plans. Accordingly, eHealth expenses all contributions it is required to make in the year.

iii) Accumulated sick leave benefit liability - eHealth provides sick leave benefits for employees that accumulate but do not vest. eHealth recognizes a liability and an expense for sick leave in the period in which employees render services in return for the benefits.

**e) Tangible Capital Assets**

Tangible capital assets are recorded at cost and are amortized over their useful life. Leased assets are amortized over the life of the lease. Normal maintenance and repairs are expensed as incurred. During development, these assets are recorded based on their percentage of completion and are disclosed as work in progress system development. Amortization is recorded, commencing with the quarter after the assets are placed into service, on a straight-line basis at the annual rates set out below:

Hardware, Software & System Development costs	20% to 33%
Office Furniture & Leasehold Improvements	10% to 20%

**f) Non-financial assets**

Tangible capital and other non-financial assets are accounted for as assets because they can be used to provide services in future periods. These assets do not normally provide resources to discharge liabilities unless they are sold.

**g) Measurement Uncertainty**

The preparation of financial statements in accordance with Canadian public sector accounting standards requires management to make estimates and assumptions that affect the reported amount of financial assets and liabilities and disclosure of contingencies and contractual rights and obligations at the date of the financial statements and the reported amount of revenues and expenses during the reporting period. These estimates are reviewed periodically, and, as adjustments become necessary, such adjustments are reported in earnings in the period in which they become known. Significant items that require estimates include amortization and accrued liabilities.

**h) Financial instruments**

eHealth's financial instruments include due from the General Revenue Fund, accounts receivable and accounts payable. The carrying amount of these instruments approximates fair value due to their short-term nature. These instruments have minimal interest, market, liquidity or credit risk. All financial assets are assessed for impairment on an annual basis. When a decline is determined to be other than temporary, the amount of the loss is reported in the Statement of Operations.



i) Leases

Leases that transfer substantially all of the benefits and risks of ownership related to the leased property from the lessor to eHealth are accounted for as a capital lease. Other leases are accounted for as operating leases with contractual obligations disclosed in note 8.

j) New accounting standards in effect

PS 3400 Revenue (effective April 1, 2023) is a new standard establishing guidance on the recognition, measurement, presentation and disclosure of revenue. It is not yet effective for governments and has not been applied in preparing these financial statements.

3. **Due from the General Revenue Fund**

Earned interest is calculated and paid by the General Revenue Fund on a quarterly basis into eHealth's bank account using the Government's thirty-day borrowing rate and eHealth's average daily account balance. The Government's average thirty-day borrowing rate in 2021 was 0.19% (2020 - 1.72%).

4. **Budget Approval**

eHealth's budget was approved by the Board on June 23, 2020.

5. **Accumulated Surplus**

eHealth's accumulated surplus of \$30,831 in 2021 (2020- \$21,532); tangible capital assets not fully amortized (\$11,233); lease obligations \$4,610 and; designated assets held for specific purposes (\$12,183) (Note 12). eHealth's accumulated surplus is \$12,025 after adjusting for the items previously identified.

6. **Tangible Capital Assets**

	March 31, 2021						March 31, 2020	
	Desktop Hardware	Computer Hardware	Computer Software	Office Furniture & Leasehold Improvements	System Development Costs	Work In Progress System Development	Total	Total
Opening Cost	\$ 6	\$ 39,016	\$ 6,045	\$ 3,043	\$ 153,499	\$ -	\$ 201,609	\$ 200,701
Additions During the Year	-	9,113	-	-	-	510	9,623	908
Closing Cost	6	48,129	6,045	3,043	153,499	510	211,232	201,609
Opening Accumulated Amortization	6	34,444	6,045	1,896	153,234	-	195,625	186,247
Annual Amortization	-	3,945	-	287	142	-	4,374	9,378
Closing Accumulated Amortization	6	38,389	6,045	2,183	153,376	-	199,999	195,625
<b>Total Tangible Capital Assets</b>	<b>\$ -</b>	<b>\$ 9,740</b>	<b>\$ -</b>	<b>\$ 860</b>	<b>\$ 123</b>	<b>\$ 510</b>	<b>\$ 11,233</b>	<b>\$ 5,984</b>

## 7. Related Parties

These financial statements include transactions with related parties. eHealth is related to all Saskatchewan Crown agencies such as ministries, corporations, boards and commissions under the common control of the Government of Saskatchewan, as well as its key management personnel and their close family members. Additionally, eHealth is related to organizations where they have key management personnel and/or their close family members in common. Transactions with these related parties are in the normal course of operations and are settled on normal trade terms. Related party transactions for the year ended March 31, 2021, include the following:

	2021	2020
<b>Revenue</b>		
Health Shared Services Saskatchewan (3S Health)	274	548
Saskatchewan Health Authority	9,028	19,214
Saskatchewan Association of Health Organizations	13	7
Saskatchewan Cancer Agency	682	523
Saskatchewan Ministry of Finance	62	265
Saskatchewan Ministry of Health	138,154	119,589
Saskatchewan Public Safety Agency	103	64
SaskTel	-	1
	<b>\$ 148,316</b>	<b>\$ 140,211</b>
<b>Accounts Receivable</b>		
Health Shared Services Saskatchewan (3S Health)	183	164
Saskatchewan Health Authority	4,766	8,432
Saskatchewan Cancer Agency	199	171
Saskatchewan Public Safety Agency	10	21
Saskatchewan Ministry of Finance	6	58
Saskatchewan Ministry of Health	595	4,853
Saskatchewan Association of Health Organizations	2	-
	<b>\$ 5,761</b>	<b>\$ 13,699</b>
<b>Expenses</b>		
Health Shared Services Saskatchewan (3S Health) <sup>2</sup>	1,183	141
Other <sup>1</sup>	10	22
Public Employees - Dental Plan <sup>2</sup>	157	337
Public Employees - Disability Income Plan	131	112
Public Employees - Extended Health Care Plan <sup>2</sup>	270	571
Public Employees - Group Life Insurance Plan	40	180
Public Employees Pension Plan	2,351	4,024
Saskatchewan Health Authority	30,409	42,924
Saskatchewan Cancer Agency	35	-
SaskBuilds and Procurement	175	183
Saskatchewan Ministry of Justice	80	68
Saskatchewan Ministry of Finance	96	-
Saskatchewan Workers' Compensation Board	201	317
SaskEnergy	34	32
SaskPower	244	233
SaskTel	14,488	9,875
	<b>\$ 49,904</b>	<b>\$ 59,019</b>
<b>Accounts Payable</b>		
Health Shared Services Saskatchewan (3S Health) <sup>2</sup>	243	33
Other <sup>1</sup>	-	13
Public Employees - Dental Plan <sup>2</sup>	-	26
Public Employees - Disability Income Plan	14	9
Public Employees - Extended Health Care Plan <sup>2</sup>	-	20
Public Employees - Group Life Insurance Plan	14	13
Public Employees Pension Plan	195	140
Saskatchewan Health Authority	1,063	172
Saskatchewan Cancer Agency	35	-
SaskBuilds and Procurement	16	55
Saskatchewan Ministry of Justice	-	30
Saskatchewan Ministry of Finance	96	-
Saskatchewan Workers' Compensation Board	(73)	-
SaskPower	14	-
SaskEnergy	1	3
SaskTel	1,086	1,009
	<b>\$ 2,704</b>	<b>\$ 1,523</b>

<sup>1</sup> Other Expenditures include: Queen's Printer Revolving Fund; Saskatchewan Government Insurance; Saskatchewan Gaming; Sask Chamber of Commerce. Routine operating transactions with related parties are recorded at the rates charged by those organizations and are settled on normal trade terms. In addition, eHealth pays Provincial Sales Tax to the Saskatchewan Ministry of Finance on all its taxable purchases. Other transactions with related parties and amounts due to/from them are described separately in the financial statements and the notes thereto. <sup>2</sup>In October 2020, eHealth's Health and Dental plans moved from the Public Employees plan to Health Shared Services Saskatchewan (3sHealth)

8. **Contractual Obligations**

i) **Operating Leases**

eHealth has entered into a lease agreement with Cornwall Centre Inc. for office space expiring January 31, 2024 and Sasktel for data centre leases expiring January 1, 2024 and July 31, 2024. eHealth has 7 operating leases with MacQuarie finance expiring September 2024, 2 operating leases with Dell Financial expiring December 2024, and 1 operating lease with Cisco Capital expiring August 2021. The operating lease payments for the next 5 years are as follows:

2022	4,758
2023	4,544
2024	4,050
2025	1,794
2026	1,046
<b>Total Lease Payments</b>	<b>\$ 16,192</b>

ii) **Maintenance agreements for software**

eHealth has several agreements with software vendors to provide maintenance for software that has been purchased by eHealth. A total of \$40,214 was spent in 2021 (2020 - \$33,126). This arrangement will likely continue into the future.

iii) **Other Contractual Obligations**

As of March 31, 2021, eHealth is committed to technical support for internal and IT systems totalling \$120,254 (2020 - \$102,735). The following table outlines the funds dedicated for capital and operational expenditures over the remaining years as follows:

2022	45,909
2023	26,327
2024	19,851
2025	17,667
2026	8,971
Thereafter	1,529
<b>Total Commitment</b>	<b>\$ 120,254</b>

9. **Capital Leases**

eHealth currently has 21 capital leases for computer hardware. Capital lease obligations are recorded at the present value of the minimum lease payments excluding executory costs. The minimum annual lease payment for the capital leases over the remaining years is as follows:

2022	2,349
2023	1,980
2024	540
2025	43
Total	4,912
Less Interest	64
<b>Net</b>	<b>4,848</b>
Less Maintenance	238
<b>Total Obligation</b>	<b>\$ 4,610</b>

10. **Deferred Revenue**

As of March 31, 2021, eHealth's deferred revenue balance is \$4,376 (2020 - \$4,752). Deferred revenue is only used once all project planning and due diligence (including stakeholder readiness) is completed and other revenue opportunities are maximized. Deferred revenue consists of unspent amounts provided by the Project Management Board of the Provider Registry System from Alberta, Saskatchewan, and Newfoundland, from Saskatchewan Centre for Patient Orientated Research (SCPOR), Saskatchewan Health Authority, Canada Health Infoway and Service Canada.

Deferred Revenue	April 1, 2020	Recognized in 2020-21	Amounts Received	March 31, 2021
Provider Registry Host Agency	\$ 130	\$ 55	\$ 50	\$ 125
SPCOR	2,114	-	-	2,114
Saskatchewan Health Authority	293	154	-	140
Canada Health Infoway	2,215	1,109	-	1,105
Service Canada	-	50	942	892
<b>Total Deferred Revenue</b>	<b>\$ 4,752</b>	<b>\$ 1,368</b>	<b>\$ 992</b>	<b>\$ 4,376</b>

**11. Employee Future Benefits**

**i) Pension plans**

Employees of eHealth participate in the Public Employees Pension Plan (PEPP) (a related party). PEPP is a defined contribution pension plan and is the responsibility of the Government of Saskatchewan. The eHealth's financial obligation to the plan is limited to making required payments to match the amount contributed by the employees for current services. eHealth's contribution to this plan is 8.6%. Pension expense for the year is included in salary and benefits in Schedule 1.

**ii) Disability Income plans**

Employees of eHealth participate in the following disability income plans:

PEBA – Disability income plan for out-of-scope staff are administered by the Public Employees Benefits Agency. eHealth's financial obligation to this plan is limited to making the required payments to the plan according to the applicable agreement. Disability expense for the PEBA plan is included in salary and benefits in Schedule 1.

SGEU – Disability income plan for in-scope staff, administered by the Saskatchewan Government and General Employees' Union. eHealth has no financial obligation for this plan.

**iii) Accumulated sick leave benefit liability**

The cost of the accrued benefit obligations related to sick leave entitlement earned by employees is determined using management's best estimate of sick leave usage of active employees. Sick leave liability is included in Salary and benefits in Schedule 1

**12. Designated Assets**

eHealth's designated assets represent Ministry of Health funding committed to developing information technology systems that support frontline delivery and improve access, quality and efficiency of care. eHealth's designated asset balance as at March 31, 2021 is \$12,183 (2020 - \$10,178). In 2020-21, the designated assets consist of a combination of cash and accounts receivable. eHealth's Board of Directors has approved the following designated assets in 2020-21:

Designated Assets	April 1, 2020	2020-21 Expenditures	Amounts Received	March 31, 2021
Drug Plan System Enhancements	\$ 23	\$ 23	\$ -	\$ -
Community System Enhancements	940	919	190	211
Chronic Disease Management	835	275	379	939
Strategy & Innovation	2,147	-	-	2,147
Population Health	-	203	750	547
Acute and Emergency Services	373	2,262	3,260	1,371
Financial Services Branch	3,737	20,045	21,800	5,492
eHealth Saskatchewan	1,246	647	-	599
My SK Health Portal	845	-	-	845
Saskatchewan Health Authority	32	-	-	32
<b>Total Designated Assets</b>	<b>\$ 10,178</b>	<b>\$ 24,374</b>	<b>\$ 26,379</b>	<b>\$ 12,183</b>

**13. Subsequent Event**

In March 2020, the World Health Organization declared the outbreak of novel coronavirus (COVID-19) as a pandemic which continues to spread throughout Canada. On March 18, 2020, the Government of Saskatchewan declared a provincial state of emergency due to the pandemic. The COVID-19 pandemic is complex and rapidly evolving and will have a major impact on the health sector and eHealth Saskatchewan. The pandemic is expected to lead to an increase in demand for health services which could impact eHealth's financial position and operations, estimates of these impacts have been included where appropriate. Given the uncertaining and duration of the pandemic, it is not possible to determine if there are significant additional impacts on current operations or reported asset and liability values

**14. Contingent Asset**

In January 2020 eHealth was the victim of a cyber attack. Expenses were incurred during 2019-20 and 2020-21 related to the cyber event. eHealth has insurance coverage for these types of events and is currently working with the insurance company to determine the eligibility and potential recovery of the expenses. The amount of this recovery cannot be reasonably estimated at this time.

**Schedule 1**

**eHealth Saskatchewan  
Schedule of Expenses by Object  
For the year ended March 31  
(\$000s)**

	<b>Budget</b>		<b>2021</b>		<b>2020</b>
Amortization	\$ 10,000	\$	4,374	\$	9,378
Board	104		36		54
Cabling	-		18		-
Communications	481		1,669		690
Community Net	6,391		7,091		6,901
Facilities	649		412		496
Hardware	1,768		9,190		4,415
Hardware Maintenance	1,592		2,945		1,770
Insurance	135		142		123
Leases	531		749		991
Legal	450		428		115
Membership	2		14		92
Miscellaneous	551		335		351
Office Supplies	2,304		923		656
Parking	331		332		194
Professional Fees	12,596		7,252		10,062
Rent	2,755		2,709		2,725
Salary & Benefits	33,103		35,821		30,539
Software License	693		2,448		3,364
Software Maintenance	40,562		40,214		33,126
Telephone	179		460		253
Travel	134		21		133
Other <sup>1</sup>	27,692		29,192		38,777
	<b>\$ 143,003</b>	<b>\$</b>	<b>146,775</b>	<b>\$</b>	<b>145,205</b>

<sup>1</sup> Effective April 1, 2018 eHealth Saskatchewan's base funding increased to reflect an amalgamation with Saskatchewan Health Authority to provide their information technology technical services. An agreement is in progress for the provision of information technology services to be provided to the SHA by eHealth.

# PAYEE LIST

## SALARIES

Listed Employees who received \$50,000 or more for the provision of services

ABDUL KHADER, AZARUDEEN	72,806	CHURCH, DAVIN	164,828
ABDULLAH, MUHAMMAD	96,882	CLAUDE, BRIAN	88,886
ABRAHAM, OLUWAFUNS	68,604	CROOK, BEVERLEY	86,576
ADAMS, WILLIAM	102,059	CULLINS, KEITH	52,245
ADEROJU, ADETUNJI	84,156	DABAO, MARK	77,551
AJAYI, OLUGBENGA	90,271	DAUVA, NADEEM	72,673
AKINBADE, OLUWASEYI	51,804	DEMAS, ROGENA	56,908
ALEEM, MUHAMMAD	53,730	DEOBALD, AARON	88,686
ALI, NAVEED	102,960	DERIN, CARRIE	96,686
AMOR, MARIE	136,354	DESJARLAIS, TAMARA	98,627
ANDERSON, ROBERT	90,050	DHANJAL, GURSAHIB	107,727
ANDERSON, SABRINA	127,339	DI PIETRO, ALEX	60,072
ANDREAS, TRENT	101,037	DOBSON WILLIAMS, TAMARA	84,421
ANTONIO, JUSTIN	76,701	DOLNEY, DIANE	112,509
ARMSTRONG, KRISTIN	102,651	DONG, LI	88,845
ASHOKKUMAR, NAGA POOR	51,617	DRAUDE, MITCHELL	103,676
ATKINSON, JOSEPHINE	119,729	DUNN, KELLY	89,249
AUTON, LESLIE	61,557	DUNN, LYDIA	64,594
AWESOME, WES	88,894	EBERLE, ROXANE	111,053
BACHTIAR, MACHDUM	100,416	ELLIS, JARROD	107,669
BALLAN, MILDRED	85,218	ENGEL, KEVIN	95,026
BALLER, GREGORY	96,863	ENGEL, LISA	105,922
BAN, HAO	94,447	EVENSON, DANIELLE	76,634
BAYNTON, CHRISTINE	118,687	FALLAS, IAN	98,930
BECKER, CHRISTOPH	119,603	FAMUYIBO, OYEBOLA	86,673
BENHAM, ROBERT	92,279	FEDORAK, CORY	65,236
BERG, MARLIN	104,904	FEISEL, MICHAEL	67,776
BHANDARI, SUMAN	80,848	FIDELAK, MARK	99,938
BHATTACHARYYA, PINAKI	114,906	FISHER, REBECCA	58,789
BIENVENUE, MURRAY	101,590	FLAMAN, LINDA	59,797
BISHOP, ISAAC	65,495	FREI, DEREK	100,671
BISHT, NEERAJ	90,066	FREI, JASON	108,752
BISS, JEFF	76,704	GABEL, MICHAELA	88,942
BLACKMORE, GORDON	86,355	GARLAPATI, RAMA KRIS	76,148
BORGARES, MARK	169,258	GEDDES, SEAN	91,922
BRADLEY, SEAN	81,161	GHATTI, RINI	89,291
BRITTNER, RYAN	101,527	GILL, ARMAAN	91,313
BROCKMAN, DANIEL	96,717	GRAFF, LISA	88,178
CANNON, BRIAN	93,869	HALIM, MD	89,730
CARLSTON, LINDSAY	55,428	HAMILTON, DUANE	92,217
CARR, JESSE	89,270	HANCOCK, MICHAEL	84,861
CELIS, ALONSO	127,082	HANMANTHARAOPET, SRILAKSHM	85,401
CHIGBOGU, CHUKWUEBU	50,881	HANNA, IAN	151,939

HAYES, ROBERT	102,576	KRAFT, EVAN	81,695
HEAD, AIDAN	55,622	KRAMER, AMY	125,901
HEBERT, ANDREW	90,853	KWAN, DEREK	109,555
HEINRICH, BETTY	69,672	LABRADOR, YAZMIN	112,397
HELMOND, WENDY	93,629	LAM, WILLIAM	69,535
HENNENFENT, JAMIE	90,065	LANE, ROBERT	109,004
HERMANSON, PERRY	106,715	LARWOOD, MICHEAL	52,670
HINZMANN, GARY	116,533	LAWRENCE, PAUL	145,386
HOFFMAN, DARYL	129,484	LEFLAR, NICOLE	131,157
HOMROY, HOMARGHYA	96,053	LESTAGE, VALERIE	88,868
HONG, HAIYING	88,789	LEWIS, DENISE	52,012
HORNELL, JAMES	280,482	LINDENBACH, JENNIFER	130,477
HOVANAK, GARY	99,621	LINTOTT, NICOLE	58,239
HOVIND, MYRNA	106,790	LIPINSKI, BRADLEY	116,835
HOWATT, WENDY	57,539	LIPINSKI, CRYSTAL	92,829
HUMPHREYS, MARK	104,563	LOGANATHAN, PRATHEEPA	81,287
HUNCHAK, JUSTINE	105,469	LOUCKS, DARRYL	120,251
HUTCHINGS, ROBERT	75,034	LOVE, DANICA	65,265
HUTCHISON, LAURIE	158,299	LUND, MICHAEL	61,029
IGBINWEKA, VALERIE	74,977	LY, LILLIAN	128,018
ISLAM, MOHAMMAD	86,727	MAINDONALD, PAUL	159,057
JAMES, CINDY	114,907	MANJAREKAR, SANDEEP	65,908
JAMIL, MUHAMMAD	100,894	MANN, GREGORY	95,737
JAMIL, RAHEEL	79,343	MARKEWICH, EVAN	92,620
JANZEN, NORINE	85,386	MARTIN, NICK	94,969
JASTER, NICOLE	97,136	MARTINSON, JOYCE	56,576
JEANNOT, JESSICA	129,104	MATCHETT, HAYDEN	73,674
JEWSBURY, KIRSTY	103,718	MCBRIDE, HELEN	63,676
JIANG, MINGDE	99,724	MCBRIDE, JULEE	50,552
JOHNSON, ANGELA	117,739	MCCANN, SHAWN	93,139
JORDAN, JENNIFER	64,444	MCDONALD, CARRIE	51,659
JOSEPH, GERALD	94,478	MCGEOUGH, MARGO	67,713
JOSHI, KHUSHBU	68,955	MCKENZIE, DOUGLAS	100,402
KASPERSKI, DAN	90,407	MCKINNON, GRANT	106,914
KAVILIGA, SREENIVAS	65,266	MCMURDO, STEVEN	76,264
KEATING, EOIN	55,810	MEMON, HARIS	51,374
KECK, SANDRA	52,958	MERVITZ, JESSICA	68,442
KHAN, HARIS	59,755	MICHAEL, YONATAN	95,344
KHURANA, HITESH	97,178	MICHAELS, SCOTT	79,568
KLIPPENSTEIN, NEIL	81,535	MIHALICZ, ADAM	86,528
KNOLL, MILES	90,247	MILLAR, JOHN	92,636
KONECHNY, LORRAINE	92,279	MOLNAR, BRENT	105,733
KOSHMAN, NATHAN	89,314	MOMIN, ANIS	111,358
KOSIOR, CASSEY	77,479	MUDRY, BRENDA	89,211
KOTECK, MARVIN	92,152	MULA, AARON	124,929
KOZAK, CHARENE	98,582	MULAMALLA, HIMA BIND	81,524

MYLES, DARREN	198,949	RONDEROS, ANDRES	101,814
NAGEL, SHERRI	104,225	ROSSMAN, RYAN	74,523
NAVARRO, DANICA	83,233	RUST, JESSICA	89,071
NEIGUM, DARWIN	78,931	RUTTEN-JAMES, RABIN	97,174
NEUDORF, CHRISTINA	83,239	SAHOTA, SUKHMENDI	106,454
NICHOLS, LUKE	103,357	SALAZAR, SHAYLENE	172,755
NICOLSON, KENT	59,722	SALEEM, MUHAMMAD	113,829
OGUNYEMI, AYODELE	76,230	SAWCHYN, COREY	87,107
OLSON, ROSE	124,495	SCHMIDT, KAREN	83,501
OLYNICK, NEIL	106,537	SCHULTZ, MICHAEL	73,090
OZOH, LORRETTA	85,433	SELINGER, MELISSA	80,923
PAIDEL, JEFF	51,864	SELINGER, PAUL	100,730
PANESAR, RUPI	102,414	SESULA, JAMES	97,860
PAPP, RANDY	98,207	SHAH, BINAL	64,979
PAQUET, DANIEL	89,413	SHAH, SHIVANI	51,758
PARMAR, VAISHALIB	51,822	SHARMA, ANIKET	78,592
PATEL, GAURAV	73,703	SHARMA, RADHIKA	172,076
PAWLIW, SPENCER	105,381	SHEVCHUK, MICHAEL	88,878
PEARCE, RHONDA	118,351	SHIRODKAR, SANDESH	115,158
PEERS, RICHARD	65,022	SHIRODKAR, SAYALI	81,702
PEKRUL, SHAUN	95,936	SIDDIQUE, MUHAMMAD	58,266
PERRAS, BRENDA	64,224	SILVER, ROBIN	109,500
PETERSEN, WAYNE	78,804	SINGH, HARKARAN	118,026
PETRIEW, JENNIFER	104,605	SINGH, KARANVIR	83,870
PETTIGROSSO, DIANA	69,711	SINGH, MANMEET	92,138
PILLIPOW, KELVIN	92,207	SINGH, SATINDER	128,483
POLIQVIN, VINCENT	97,203	SLOMAN, PAUL	109,982
POPOOLA, TOLULOPE	53,789	SMITH, KENNETH	67,791
POSTEN, KATHLEEN	58,967	SNELL, AMANDA	100,988
PROCYSHEN, TREVOR	108,792	STEPP, QUINN	76,480
PYLE, JOSEPH	127,196	SUBRAMANIAN, SULOCHANA	62,418
QUACH, ANDREW	71,194	SWARAY, BRENDA	89,754
QURAIISHI, ASHAN	95,311	SYNK, LUANNE	67,044
RADFELDER, STACY-LEE	52,623	TAM, MINOAH	97,546
RAMBARAN, SHAMMI	56,965	TANVEER, FAISAL	91,912
RAZA, AMIR	100,596	TESSIER, JENNIFER	92,883
RAZAQ, ABDUL	102,682	THACYK, RANDAL	101,890
REECE, DAVID	81,525	THOMAS, TIM	56,495
REEVES, JANICE	98,227	TOMPKINS, MEGAN	56,567
REILLY REDLER, ANGELEEN	91,382	TREMBLAY, CODY	103,402
RICHARD, MARNIE	91,605	TUNSTEAD, DARRELL	89,648
RICHE, KAILEY	71,602	TURCOTTE, STEVIN	76,504
ROBERTS, GENNINE	86,597	TURLEY, KARA	88,333
ROBERTSON, SARA	73,070	VAGHELA, NIDHI	67,010
ROBINSON, TREVOR	57,567	VAXVICK, KEVIN	118,616
ROESCH, WILFRED	89,239	VERMA, VIVEK	150,747



VIDOVIC, OLEG	105,798
WALZ, JANNA	70,430
WARNES, JASON	102,944
WELLS, SCOTT	127,527
WHITFIELD, CARMEN	72,171
WILSON, BRENTON	84,043
WINNICKI, KRISTA	82,885
WOLF, LAURIE	52,901
WONG, MICHAEL	56,236
WRIGHT, JASON	76,471
WRIGHT, MICHAEL	88,756
YAUCK, RODNEY	105,007
YESUFU, MAIMUNA	57,820
ZAMAN, SHAFI	108,484
ZANGER, KAREN	63,540
ZHAN, JUNSHENG	99,433
ZHANG, BONING	74,065
ZHANG, HONG	81,524
ZHANG, ZHAOXIANG	93,375
ZORN, AARON	71,094
ZWIRSKY, NIKKI	65,364

**GOODS and SERVICES**

Listed payees who received \$50,000 or more for the provision of goods and services, including office supplies, communications, contracts and equipment

3sHealth	802,628	Managing Information Systems 3 Inc.	243,800
AlayaCare Inc.	311,719	Marsh Canada Limited	141,545
Allscripts Healthcare, LLC	4,510,351	Microage	93,062
ARC Technologies Inc.	502,404	Microsoft Canada Co.	6,095,912
ARCAS Group Inc.	254,007	MicroStrategy Services Corporation	217,267
Axiell ALMCanada Inc.	157,562	Minister of Finance - PST	811,040
BDM Healthware Inc.	1,310,673	Ministry of Justice and Attorney General	110,421
Becton Dickinson and Company	231,961	Ministry of SaskBuilds and Procurement	203,472
Brown Communications Group	107,472	MLT Aikins	559,168
Callidus Software Inc.	69,975	Momentum Healthware Inc.	1,568,837
Canada Post Corporation	754,804	Novari Health	216,265
Canada Revenue Agency	9,178,049	Oracle Canada ULC	1,291,765
Canadian Bank Note Company Ltd	116,969	Orion Health Limited	591,687
Canadian Pharmacists Association	277,708	Philips Healthcare	3,862,778
CDW CANADA	178,901	PICIS Clinical Solutions INC.	1,758,196
Cerner Canada Ltd.	754,242	Powerland Computers	2,970,659
CGI ISMC Inc.	73,279	ProcessPower Solutions Inc.	53,530
Christie Innomed Inc.	67,626	Public Employees Disability Income Plan	137,780
Cisco Systems Capital Canada Co.	4,803,625	Public Employees Dental Plan	183,178
Citrix Systems Inc.	1,767,814	Public Employees Extended Health Care Plan	314,290
Cornwall Centre Inc.	1,850,340	Public Employees Pension Plan	4,412,428
Data Communications Management	139,061	Public Employees-Group Life Insurance	160,840
Dawsco Services Ltd.	207,897	QHR Technologies Inc.	146,281
De Lage Landen Financial Services Canada Inc.	10,291,829	Quadbridge Inc.	148,382
Dell Financial Services Canada	1,784,469	Quantitative Medical Systems Inc.	338,104
Diligent Canada Inc.	86,433	Receiver General of Canada	319,083
EMC Corporation of Canada	179,655	rSolutions	360,378
Entco Software Canada Co. Logiciels Entco Canada CIE	226,166	SAP Canada Inc	96,238
Entrust Limited	51,249	SAS Institute (Canada) Inc.	135,717
ESTI Consulting Services	5,103,949	Saskatchewan Government Employees Union	694,866
FCI Accelerated Solutions Inc	125,045	Saskatchewan Health Authority	63,958
First Data Bank Inc.	640,952	Saskatchewan Health Authority	119,920
Gartner Canada, Co.	690,138	Saskatchewan Workers' Compensation Board	233,546
GDI Services (Canada) LP	125,180	SaskPower	224,546
Gevity Consulting Inc.	131,063	SaskTel	15,113,041
Grand & Toy	75,170	SCC Soft Computer	2,533,246
Hewlett Packard Canada	339,580	Softchoice Corporation	61,122
Hyland Software Canada ULC	448,207	Solvera Solutions	268,188
IBM Canada Ltd.	1,554,035	Telus Health Solutions Inc.	6,409,233
Imprivata, Inc	270,981	Terranova Worldwide Corporation	64,872
Infor (Canada), Ltd.	891,674	The Wireless Age	347,541
Informatica LLC	220,820	Think Research Group	729,187
Insight Canada Inc.	99,962	VIVVO Application Studios Ltd	163,170
Inverness Consulting	477,653	VMware International Limited	938,113
Lab Ware Inc.	112,452	WBM Office Systems	4,059,882
Lexmark Canada Inc.	1,032,451	ZU	427,891
Malwarebytes Inc.	73,127		



---

# NOTES

---



