Benefits

The PHSA covers 2015 premium costs for participation of the employee and their eligible dependents by the British Columbia Medical Services Plan.

Newly hired employees are placed on the appropriate salary range based on the new hire's work experience, skills, and competencies for placement within the salary range established for the job. In most circumstances, PHSA works with HEABC and PSEC to review Market regularly and establish competitive rates.

Job market data shall be appropriate to the type of position: local for administrative support positions and provincial or national for managerial positions and provincial, national and international for executive positions. The comparison of compensation shall be relevant to the employer's internal compensation markets.

Executive Salary Ranges

A defensible compensation system responds to broad equity issues. The Plan recognizes the responsibility of the health sector to establish compensation levels that acknowledge fairness and consistency within the organization, achieve equal access to superior health care specialists and support the overarching accountability. Fundamental to this statement is the fact that compensation practices in the health sector cannot lead the market, while providing in areas of critical importance.

Executive Compensation Principles

The Executive Compensation Principles contained in the Compensation Reference Plan Guidelines. The core principles are:

- Performance: Compensation programs support and promote a performance-based culture.
- Fiscal Responsibility: Compensation programs support recruitment and retention needs, thus ensuring that taxpayers receive the maximum benefits from qualified individuals occupying jobs within the health care sector, further re-enforcing the notion of accountability.
- Transparency: Compensation programs are designed, managed and communicated in a manner that ensures the program is salary under-pinned by evidenced-based salary reference factors with adequate provisions for an adequate range and spread of salary rates to differentiate developmental, job standard, and above standard rates.

Compensation Policy Objectives

Compensation Policy Objectives contained in the Compensation Reference Plan Guidelines. The objectives are as follows:

1. Eligible executives participate in the Municipal Pension Plan or the Public Service Pension Plan. This plan has contributions from the employer and employee, as established by the Pension Board.
2. Parking is paid for by PHSA for the CEO and executive staff located at 3 + 6 $ Corporate office.
3. Subject to portability rules, executives are eligible for annual vacation entitlements as follows:

Organization Information Plan

The Organization Information Plan provides a means of grouping organizations with similar characteristics for the purpose of comparing pay practices of the employer groups to their relevant labour markets and establishing discrete salary ranges for each of the employer groups.

Role Assessment Plan

Role Assessment Plan requires the relative worth of jobs be established by measuring the composite value of skill, effort, responsibility and working conditions.

Public Sector Executive Compensation Reporting
Provincial Health Services Authority (PHSA)
Statement of Executive Compensation
2025/26

COMPENSATION DISCUSSION AND ANALYSIS

Provincial Health Services Authority (PHSA) plans, manages and evaluates specialty and province-wide health care services across BC, working with the five geographic health authorities and the First Nations Health Authority to meet local and provincial needs. The goal is to ensure that everyone in the province has access to the kind of specialized health services they need, when they need them, wherever they happen to live.

PHSA achieves this goal by fulfilling two main roles:

1. It is responsible for managing and governing well-known specialized programs and services:
    - BC Autism Network
    - BC Cancer
    - BC Centre for Disease Control
    - BC Children's Hospital and Sunny Hill Health Centre
    - BC Early Hearing
    - BC Emergency Health Services (including BC Ambulance Service, BC Bedline, and BC Trauma)
    - BC Mental Health Substance Use Services (including Forensic Psychiatric Services, Child and Youth Mental Health, and Corrections Services)
    - BC Renal
    - BC Surgical Patient Registry
    - BC Transplant
    - BC Women's Hospital + Health Centre
    - Cardiac Services BC
    - Child Health BC
    - Critical Care BC
    - Cystic Fibrosis Care BC
    - Emergency Care BC
    - Health Emergency Management
    - Indigenous Health
    - Lower Mainland Biomedical Engineering
    - Lower Mainland Health Information Management
    - Lower Mainland Medical Imaging Program
    - Lower Mainland Pharmacy Services
    - Medical Mobile Unit
    - Pain Care BC
    - Perinatal Services BC
    - Population & Public Health
    - Post-Covid-19 Interdisciplinary Clinical Care Network
    - Provincial Laboratory Medicine Services
    - Provincial Language Services
    - Provincial Infection Control Network
    - Provincial Retinal Disease Treatment
    - Provincial Supply Chain Services
    - Services Francophone
    - Stroke Services BC
    - Trans Care BC
    - Trauma Services BC

2. It plans, coordinates, evaluates and, in some cases funds specialized services delivered

by the regional health authorities. PHSA's role supports the accessibility, quality, efficiency and effectiveness of province-wide programs and services.

PHSA is a member employer of the Health Employers Association of BC and is governed by the HEABC Compensation Reference Plan. The Plan has been developed pursuant to the statutory requirements of the Public Sector Employers Act and is applied across the member employers of HEABC for non-union, management and executive roles within healthcare. The Plan was refreshed in November 2015 to align with Government's recommendation of a common compensation philosophy for the broader public sector using shared principles aligned with the Province's Taxpayer Accountability Principles. As with other public employers, we are also subject to policies determined by the Public Sector Employers Council Secretariat (PSEC).

Compensation Principles

PHSA's compensation principles have been updated to reflect government's core principles and are consistent with the compensation principles contained in the Compensation Reference Plan Guidelines. The core principles are:

- **Performance**: Compensation programs support and promote a performance-based (merit) organizational culture.

- **Differentiation**: Differentiation of salary is supported where there are differences in the scope of the position within an organization, and/or due to superior individual team contributions.

- **Accountability**: Compensation decisions are objective and based upon a clear and well documented business rationale that demonstrates the appropriate expenditure of public funds.

- **Transparency**: Compensation programs are designed, managed, and communicated in a manner that ensures the program is clearly understood by employees and the public while protecting individual personal information.

Compensation Policy Objectives

PHSA's Compensation Policy Objectives are consistent with the updated compensation policy objectives contained in the Compensation Reference Plan Guidelines. The objectives are as follows:

1. A defensible compensation system recognizes the responsibility of the health sector to establish compensation levels that acknowledge fairness and the public's ability to pay. Compensation levels in the health sector will reflect the market average and will not lead the market. This ensures that taxpayers receive the maximum benefits from qualified individuals occupying jobs in the health sector.

2. External equity requires competitive levels of compensation be established, that address issues of attraction and retention, by analyzing compensation practices in relevant labour markets including British Columbia health sector bargaining associations.

3. Internal equity requires the relative worth of jobs be established by measuring the composite value of skill, effort, responsibility and working conditions.

4. Compensation will reinforce and reward performance through measurable performance standards that support and promote a performance based culture.

5. Compensation policies will comply with the intent and requirements of legislation and be non-discriminatory in nature.

Compensation Survey

HEABC is responsible for conducting an annual cash compensation survey to ensure appropriate internal and external equity are maintained.

Job market matches shall be appropriate to the type of position: local for administrative support positions; and provincial or national for managerial positions and provincial, national and international for executive positions. The comparison of compensation shall be relevant to the PSEC approved external labour markets.

Reference Salary Ranges

A defensible compensation system responds to broad equity issues. The Plan recognizes the responsibility of the health sector to establish compensation levels that acknowledge fairness and the public's ability to pay, re-enforcing the notion of accountability. Fundamental to this statement is the fact that compensation practices in the health sector cannot lead the market, while providing appropriate levels of compensation that support recruitment and retention needs. This ensures that taxpayers receive the maximum benefits from qualified individuals occupying jobs within the health care sector, further re-enforcing the notion of accountability.

HEABC is responsible for providing healthcare employers with reference salary ranges. The reference salary ranges will be based on the 50th percentile of the blended market survey. The salary reference ranges will include provisions for an adequate range and spread of salary rates to differentiate developmental, job standard, and above standard rates.

Employers will administer salaries within the reference salary ranges and compensation guidelines.

Circumstances may require employers to address compression or inversion issues between non-contract staff and directly supervised bargaining unit employees. A differential of up to 15% may be established where there is a functional supervisory role, with responsibility and accountability for outcomes. This differential does not form part of the comparison ratio calculation.

Organization Information Plan

The Organization Information Plan provides a means of grouping organizations with similar characteristics for the purpose of comparing pay practices of the employer groups to their relevant labour markets and establishing discrete salary ranges for each of the employer groups.

Role Assessment Plan

The Role Assessment Plan (a point factor job evaluation plan) provides a means of establishing an equitable hierarchy of jobs within an organization, as well as a comparison of jobs across the healthcare sector. The hierarchy of jobs is determined by assessing the skill, effort, responsibility, and working conditions inherent in all jobs in HEABC member organizations.

Application of the Compensation Reference Plan

Newly hired employees are placed on the appropriate salary range based on the new hire's work experience, skills, and competencies for placement within the salary range established for the job, in most circumstances, PHSA works with HEABC and PSEC to review Market regularly and establish competitive rates.

Performance reviews are conducted annually (April each year) using a comprehensive employee performance and development plan tool. The amount of adjustments varies based on the employee's performance evaluation score.

Executive Compensation

The CEO and each named executive officer (NEO) are reported in the Summary Compensation Table of this disclosure pursuant to the Public Sector Executive Compensation Reporting Guidelines. We are unique from the other five geographic health authorities, in that PHSA has a specialized and province-wide mandate. As such, we provide high quality, specialized services in areas such as oncology, paediatrics, psychiatry and perinatal care. As a result, we employ a higher number of specialists than other health authorities. In addition, due to our structure, we are responsible for and report out on the Programs and Services that comprise PHSA, the senior leaders of which are employees of those Programs/Services or may be paid by a partner organization in some instances (eg. an academic centre).

Benefits

PHSA executive benefit package (Standard Executive Benefit Plan – refreshed in January 2015) is comparable to other health sector employers in British Columbia and includes the following key elements:

Medical Services Plan
The PHSA covers the premium costs for participation of the employee and their eligible dependent(s) in the British Columbia Medical Services Plan.

Extended Health Benefits Plan
The Plan provides employees and their dependent(s) with prescription drug reimbursement and other approved paramedical services subject to yearly maximum levels and a deductible of $100/year effective January 2015. PHSA pays the cost of premiums.

Dental Plan
PHSA pays the cost of a Dental Plan that provides to the employee and their dependent(s) 100% reimbursement for Basic Services, Prostheses, Crowns, Bridges, and Orthodontics.

Group Life Insurance
This plan provides a non-evidenced benefit of five (5) times annual salary to a maximum of $1,000,000 to the beneficiary or estate of a deceased employee. PHSA pays the cost of premiums.

Dependent Group Life Insurance
This plan provides for $10,000 spousal insurance and $5,000 insurance for each dependent child. PHSA pays the cost of premiums.

Accidental Death and Dismemberment
This plan provides up to five (5) times annual salary to a maximum non-evidenced coverage of $1,000,000 in the event of accidental death or dismemberment. PHSA pays the cost of premiums.

Long Term Disability Insurance
This plan provides continuing income in the event of total disability after a qualifying period. The taxable benefit is 77% of pre-disability gross salary to a maximum non-evidenced monthly benefit of $10,000. PHSA pays the cost of premiums.

Pension Plan
Eligible executives participate in the Municipal Pension Plan or the Public Service Pension Plan. This plan has contributions from the employer and employee, as established by the Pension Board.

Perquisites
The CEO and the Executive Vice President are provided a vehicle allowance, if eligible. Parking is paid for by PHSA for the CEO and executive staff located at PHSA's corporate office.

Annual Leave
Subject to portability rules, executives are eligible for annual vacation entitlements as follows:

- Up to a maximum of twenty (20) days after one (1) year of service and up to four (4) years of service.
- After four (4) years of continuous service, one (1) additional day for each additional year of employment, up to a maximum of thirty-five (35) days.

Provincial Health Services Authority

Summary Compensation Table at 2026

Name and Position	Salary	Holdback/Bonus/ Incentive Plan Compensation	Benefits	Pension	All Other Compensation (expanded below)	2025/2026 Total Compensation	Previous Two Years Totals Total Compensation	
							2024/2025	2023/2024
Penny Janet Ballem, President & CEO	$ 347,308	-	$ 15,463	-	$ 4,998	$ 367,769		
Paris-Ann Gfeller-Ingledew, Executive Vice President and Chief Medical Officer, BC Cancer	$ 623,791	-	$ 26,498	$ 57,813	-	$ 708,102		
Leanne Heppell, Executive Vice President, BC Emergency Health Services and Chief Ambulance Officer	$ 330,482	-	$ 34,159	-	$ 6,874	$ 371,515	$ 383,220	$ 366,390
Michael Lord, Vice President, Finance and Business Operations & Chief Financial Officer	$ 329,033	-	$ 24,252	$ 30,633	-	$ 383,918	$ 377,277	
Shannon Malovec, Executive Vice President, Digital Health, Information Services and Innovation	$ 312,705	-	$ 19,877	$ 29,112	$ 28,913	$ 390,607	$ 366,238	$ 352,948
Susan Wannamaker, Executive Vice President, Clinical Service Delivery, PHSA	$ 341,328	-	$ 18,986	-	-	$ 360,314	$ 363,372	$ 351,996
Kim Chi, Medical Oncologist and Clinician Researcher	$ 556,684	-	$ 21,976	$ 42,874	$ 131,860	$ 753,394	$ 709,239	$ 526,007

Summary Other Compensation Table at 2026

Name and Position	All Other Compensation	Severance	Vacation Payout	Paid Leave	Vehicle / Transportation Allowance	Perquisites / Other Allowances	Other
Penny Janet Ballem, President & CEO	$ 4,998	-	-	-	-	-	$ 4,998
Paris-Ann Gfeller-Ingledew, Executive Vice President and Chief Medical Officer, BC Cancer	-	-	-	-	-	-	-
Leanne Heppell, Executive Vice President, BC Emergency Health Services and Chief Ambulance Officer	$ 6,874	-	-	-	$ 6,000	-	$ 874
Michael Lord, Vice President, Finance and Business Operations & Chief Financial Officer	-	-	-	-	-	-	-
Shannon Malovec, Executive Vice President, Digital Health, Information Services and Innovation	$ 28,913	-	$ 28,913	-	-	-	-
Susan Wannamaker, Executive Vice President, Clinical Service Delivery, PHSA	-	-	-	-	-	-	-
Kim Chi, Medical Oncologist and Clinician Researcher	$ 131,860	-	-	$ 130,907	-	-	$ 953

Notes

Penny Janet Ballem, President & CEO	**General Note:** Dr. Penny Ballem assumed the role of President & CEO effective April 1, 2025- March 31, 2026. As Dr. Penny Ballem's term ended on March 31, 2026, this will be the last year Dr. Penny Ballem will be reported. Previous incumbent, David Byres was seconded to the Ministry effective April 1, 2025 and will not be reported. **Other Note:** $4998 is for professional association/membership dues.
Paris-Ann Gfeller-Ingledew, Executive Vice President and Chief Medical Officer, BC Cancer	**General Note:** Included in FY 2025/26 total compensation is the pay for Dr. Paris-Ann Gfeller-Ingledew in her previous role of Department Head and Radiation Oncologist, Radiation Oncology from April 1, 2025 to May 31, 2025 in the amounts of $86,008 in Actual Base Salary, $2,306 in Statutory and Health Benefits, $8,007 in Pension Contributions. Included is a stipend in the amount of $2,884. Effective June 1, 2025 Dr. Paris-Ann Gfeller-Ingledew assumed the role of Executive Vice President and Chief Medical Officer, BC Cancer. Included in FY 2025/26 total compensation is the pay for Dr. Paris-Ann Gfeller-Ingledew in her EVP and Chief Medical Officer role effective June 1, 2025 in the amounts of: $537,783 in Actual Base Salary, $24,192 in Statutory and Health Benefits, $49,805 in Pension Contributions. Four business days adjustments are not included in this compensation due to the effective date of Dr. Chi's departure and the start of the pay period on June 6, 2025. Included in the Actual Base Salary is a stipend in the amount of $49,385. Included in the Actual Base Salary is $129,418 to account for an additional 0.2FTE (above the 1.0FTE) for work done in the clinical role. This includes $86,278 for 391.5 hours of work completed in FY 2025/26 and an additional $43,139 in retroactive pay for 195.75 hours for work completed in FY 2024/25. An additional $1,761 was included in Actual Base salary for project work as part of the Health Services Redesign (HSR).
Leanne Heppell, Executive Vice President, BC Emergency Health Services and Chief Ambulance Officer	**General Note:** Leanne Heppell received a 2% performance-based salary increase effective April 1, 2025. This increase is reflected in the annualized salary, however due to timing of when this increase was paid out, the adjustment is not reflected in the earnings for FY 2025/26. **Other Note:** $874 is for professional association/membership dues
Michael Lord, Vice President, Finance and Business Operations & Chief Financial Officer	
Shannon Malovec, Executive Vice President, Digital Health, Information Services and Innovation	**General Note:** Shannon's last working day in office as Executive Vice President, Digital Health, Information Services and Innovation with PHSA was May 26, 2025. Salary continuance in the amount of $262,191 is included in FY 2025/26 compensation for the period starting on May 27, 2025 to March 31, 2026. Salary continuance to end May 27, 2026. Estimated total compensation for the period of April 1 to May 27, 2026 is of: $60,135.55 in Salary Continuance, $2,211.82 in Statutory and Health Benefits, $5,599 in Pension Contributions. Upon departure, responsibilities for this role have been reassigned to other positions within the executive team. This role has been eliminated. As a result, this position will not be included in future years disclosure statements.
Susan Wannamaker, Executive Vice President, Clinical Service Delivery, PHSA	**General Note:** Susan Wannamaker received a 2% performance-based salary increase effective April 1, 2025. This increase is reflected in the annualized salary, however due to timing of when this increase was paid out, the adjustment is not reflected in the earnings for FY 2025/26.

Kim Chi, Medical Oncologist and Clinician Researcher	**General Note:** Dr. Kim Chi's last working day as Executive Vice President and Chief Medical Officer, BC Cancer with PHSA was May 31, 2025 (working notice from May 8 to May 31, 2025). Included in FY 2025/26 total compensation is the pay for Dr. Kim Chi in his EVP and Chief Medical Officer role during the period of April 1, 2025 to May 31, 2025 in the amounts of: $113,413 in Actual Base Salary, $2,283 in Statutory and Health Benefits, $10,559 in Pension Contributions. Included is a stipend in the amount of $30,769. Four business days adjustments are included in this compensation due to the effective date of Dr. Chi's departure and the end of the pay period on June 5, 2025. Effective June 1, 2025, Dr. Kim Chi returned to his role as Medical Oncologist at BC Cancer. Included in FY 2025/26 total compensation is the pay for Dr. Kim Chi in the Medical Oncologist role during the period of June 1, 2025 to March 31, 2026 in the amounts of: $443,272 in Actual Base Salary, $19,693 in Statutory and Health Benefits, $32,315 in Pension Contributions. Included is the remaining amounts owed for stipends specific to leadership roles in the amount of $227,077 paid on July 25, 2025. **Other Note:** $953 is for employer paid parking. $130,907 is for education leave (SERP)