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# President's Letter

March 28, 2012

## NLMA presses forward with MOA implementation, preamble review



**Sandra Luscombe, MD**  
President

Dear Colleagues:

The NLMA and government have reached consensus on how to disperse all unallocated moneys available through the Clinical Stabilization Fund (CSF). The CSF was established under the NLMA's 2009-13 MOA to address several areas of medical care delivery that warrant additional resources. The allocation of the funds is subject to consensus between government and the NLMA. To date, just under half of the \$2.9 million allocated to the CSF has been committed on a permanent basis. To ensure that the remaining uncommitted funds will not lapse following the fiscal year ending March 31, 2012, government has agreed to transfer the funds on a one-time basis to the NLMA to fund several physician-led initiatives that will have a positive impact on the province's health care system.

### **Initiatives to be funded on a one-time basis**

The NLMA will allocate CSF funds to strengthen the Physician's Health Program (PHP), particularly with respect to preventative programs dealing with stress management, addiction prevention and balancing professional and family obligations. CSF funds have also been used to contract Dr. Douglas Woodhouse of Apex Performance to assist the NLMA and government with streamlining the medical referral and consultation process between GPs and specialists. Other initiatives include research into home medical eldercare innovations and strategies to reduce seniors' length of stay days in acute care facilities; the design of an evaluation framework to be conducted following a tele-stroke pilot project; and, a collaborative mental health care delivery initiative between psychiatrists and GPs aimed at reducing wait times and creating a central intake mechanism. CSF funding will also be used to fund a number of physician leadership initiatives to promote excellence in medicine.

In addition to these initiatives, the NLMA Board of Directors has agreed to earmark any remaining CSF funds from fiscal year 2011-12 on a one-time basis to a provincial rural recruitment fund (signing bonus). These funds will be used to help stabilize medical services in hard to recruitment areas. The funds will be dispersed by the Newfoundland and Labrador Health Boards Association and managed jointly by government and the NLMA.

### **Category B Emergency Services**

The review of Category B Emergency Services compensation arrangements is now underway. The NLMA has contracted the services of Ms. Cheryl Saunders to conduct the review. There is currently \$1.8 million remaining to be distributed from the new funding assigned under the MOA for Category B in the year ending March 31, 2012. The NLMA has indicated to government that it is willing to distribute the remaining funds based on the hours of coverage that physicians provided at their site. These funds will be allocated to FFS and Salaried physicians who provided coverage at Category B facilities from October 1, 2010 to March 31, 2012. Once the Category B review is complete, a new payment mechanism will be put in place that will fully utilize all of the new funding available for Category B services.

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**APP Review**

The NLMA has also retained the services of Ms. Saunders to conduct a review of all APPs in the province following the Category B review. The intent of the APP review is to standardize the framework for these arrangements. The funding to pay for the APP review and the review of Category B Emergency Services has been sourced from uncommitted Clinical Stabilization Funds.

**On-Call Payment Program**

The MOA states that until a joint review of the On-Call Payment Program is complete, the on-call per diem and call back rates from 2009 will remain in effect. However, since the review has not yet concluded, the NLMA and government have agreed that the remaining funds in reserve for the fiscal year ending March 31, 2012, will be assigned to all physicians who provided on-call services on a prorated basis using their billings under their program as their base. The Association will also use a portion of the uncommitted funds from the CSF to pay for the review of the program, conducted by consultant Ken Fowler.

**Preamble Review**

At the 2011 AGM, delegates passed a motion calling on the NLMA to conduct a comprehensive review of the MCP Preamble to improve the usability of the preamble and develop recommendations that better reflect current practice patterns. The Association established the Preamble Review Working Group, which held its first meeting on February 23, 2012. The most recent meeting of the working group was held on March 22. Physicians will receive regular updates from the NLMA as the review unfolds.

Regards,



Sandra Luscombe, MD  
President

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