


NLMA Academic Physicians Section

Open meeting

February 12 2019, 5:30 p.m. NLMA House



Academic physician funding/ compensation

Canadian models



Ontario

- Over 6,500 academic physicians are paid through an **OMA-negotiated academic funding plan**, and an earlier academic arrangement
- The plans were developed in response to difficulties in recruiting physicians for academic duties within FFS

Ontario

Academic Health Sciences Centre Alternate Funding Plans (AHSC AFPs)

- Main academic arrangement in Ontario
- Funding negotiated by OMA
- Covers clinical, academic and research services
- Total physician compensation includes:
 - FFS billing for clinical services
 - A stable monthly payment that provides compensation for academic work
 - Clinical repair
 - Teaching
 - Research
 - Innovation
 - Administration
 - Hospital and university funding for administrative duties, in some cases

Nova Scotia

Clinical/Academic Funding Plans (C/AFP)

- Similar to Ontario model
- Doctors Nova Scotia negotiates the Master C/AFP Contract for clinical & academic services, plus department-specific schedules
- Covers clinical, academic and research services
- Department schedules outline:
 - Base funding (by source)
 - Complement of current FTEs
 - Any approved new FTEs
 - Departmental deliverables
- Department practice plans outline roles and responsibilities and determine the allocation to clinical, research and administration

Alberta

Academic Medicine and Health Services Program (AMHSP)

- Similar to Nova Scotia and Ontario models
- AMA has not been involved, to date
- Covers clinical, academic and research services
- Ensures academic physicians compensated for:
 - Research
 - Innovation
 - Education
 - Administration
 - Leadership
- Key features:
 - Master Agreement
 - Arrangements x10 departments/divisions
 - Individual Service Agreements (ISAs) – contracts for individual physicians that set out individual tasks/duties

Alberta

- New legislation establishes **AMA representation rights**: AMA is the exclusive representative when government consults physicians on compensation and benefits
- What's new for academic members?
 - Right to request direct support in negotiations from AMA
 - AMA involvement in Individual Services Agreements and Master Academic Medicine Health Services Plan Agreements

Alberta

Current work at the AMA

- Seeking representation of all physicians who provide academic services
- Meeting with an interim working group
- Establishing an advisory council
- Adjusting AMA governance structure to give academic physicians an enhanced role
- Preparing for 2020 renegotiation of academic agreements

Manitoba

- ~650 GFTs provide small amounts of services and are paid small stipends by the University for academic work
 - GFT definition different from in NL
 - GFTs include non-physicians – clinical psychologists, clinical researchers
 - \$1,000 to \$10,000
 - Variety of FTEs
- A handful of GFTs have large administrative roles and are paid substantially more
- University has stopped offering tenure
- ~1350 'Nil appointments' without pay

Manitoba

- Doctors Manitoba has limited involvement with academic compensation
- If a physician contacts them they will assist
- They have advocated for transparency and accountability within departments re: overhead dollars paid by GFTs to their departments

Saskatchewan

- Until several years ago, most academic physicians were salaried employees of the College of Medicine and members of the faculty union
- New compensation system introduced
 - Individual contracts for professional services
 - No membership in faculty union
 - Performance metrics
 - Bonuses/holdbacks associated with performance metrics
- Each physician could voluntarily choose to move to the new system (and most have, except for 30-40 tenured salary faculty)
- Incentives for moving: buyouts of old contracts, raises, no layoffs for 3 years

Saskatchewan

- No formal role for SMA in designing new model
- SMA acts as an advocate from time to time
 - i.e. Contract review, dispute resolution when an individual physician reaches out

British Columbia

- Doctors of BC has a **consultation agreement** with UBC on compensation for clinical teaching
 - Does not cover GFTs, who are represented by the UBC Faculty Association
 - Covers other clinical faculty
- Agreement allows Doctors of BC to advocate for members in discussions where it would not otherwise be invited
- Effectively creates a duty to consult with Doctors of BC

British Columbia

Consultation process

- Annual member survey by Doctors of BC
- Joint committee (3 UBC, 3 physicians, 2 staff from Doctors of BC)
- Recommendations are made to the Dean
 - Joint recommendations negotiated at the joint committee
 - Doctors of BC can also make separate recommendations
- Dean may accept or reject the recommendations
- Dispute resolution provisions