

mcp newsletter

February 22, 2023

23-03

TO: ALL FEE-FOR-SERVICE PHYSICIANS

RE: RURAL FFS RETENTION BONUS – OPPORTUNITY TO APPLY/REAPPLY UNDER CERTAIN CIRCUMSTANCES

To address concerns that have been brought to the Department of Health and Community Service's (HCS) attention, applications for the Rural FFS Specialists Bonus and the **now defunct*** General Practitioner Rural Fee-for-Service (FFS) Retention Bonus (RRB) will be accepted for reassessment, in some circumstances, for a two-month period, beginning February 27, 2023.

There are a number of reasons why a physician may not have received a Rural Retention Bonus in every year that they were eligible. For example, there could have been a lack of communication about the services required or the need to sign a Medical Services Cooperation Agreement; or, physicians may have learned about the bonus outside of the timeline to apply. These issues seem to have been particularly acute in the first years of the program (2012) and/or in the first years in practice for a new physician. If a physician believes that they may have been eligible during any such periods/scenarios, they are encouraged to submit an application (hereafter referred to as Stale Dated applications) directly to HCS for assessment.

Please note: any physician who had previously been adjudicated **within** program deadlines/policies and had been either prorated or denied should not reapply - such applications will not be processed.

During the two-month period between February 27, 2023 and April 27, 2023, any FFS physicians who were previously denied due to either (1) late RRB Applications; or (2) lack of documentation of "Original Medical Coverage Cooperation Agreement" will have their application reassessed. For this one time, temporary, reapplication period, HCS is waving the requirement that RHA's submit a signed Medical Coverage Cooperation Agreement. However, an application is required. Physicians should submit applications between February 27, 2023 and April 27, 2023 using the application in Appendix B. **Only those applications submitted during this two-month period will be reassessed.**

All documents related to the Rural FFS Retention Bonus program can be found at the end of this newsletter:

- Rural FFS Retention Bonus Policy (October 1, 2012): Appendix A
- Rural FFS Retention Bonus Application: Appendix B
- Medical Services Cooperation Agreement (included for reference only - do not submit)

Payment for Stale Dated Rural FFS Retention Bonus Applications:

- To be considered, stale dated applications will only be accepted **between February 27, 2023, and April 27, 2023.**
- Stale dated applications will not require sign-off by the Regional Health Authority (RHA).
- Eligibility for the Rural Retention Bonus is based upon accumulated service time:

	After 12 Eligible Months	After 24 Eligible Months	After 36 Eligible Months
FFS GPs	\$6,000	\$8,000	\$10,000
FFS Specialists	\$5,000	\$10,000	\$15,000

For example, if a physician's stale dated application for 2015 is the first year for which they submitted an application, it will be designated as year one for calculating that physician's bonus payment.

- Stale dated applications are to be submitted for adjudication to the attention of Melissa Bath, Medical Services Division, Department of Health and Community Services by email (MedServicesPrograms@gov.nl.ca) or mail:

Medical Services Division
Department of Health and Community Services
PO Box 8700
St. John's, NL A1B 4J6

Applications received post-marked or dated after **April 27, 2023**, will not be considered for payment.

*Please note, as of October 1, 2022, the new Rural Community Comprehensive Care Bonus has replaced the General Practitioner FFS RRB. For more information, please see [MCP Newsletter 22-23](#).

<p>Questions relating to the content of this newsletter should be directed to Melissa Bath by email at MelissaBath@gov.nl.ca.</p>
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APPENDIX A:
Rural FFS Retention Bonus Program Policy
Revised: October 1, 2012
**[Expired for FP's on September 30th, 2022 and replaced by the Rural Community
Comprehensive Care Bonus]**

Background:

The Rural Fee for Service Retention Bonus program was introduced as part of the 2009-13 Memorandum of Agreement between the Newfoundland and Labrador Medical Association (NLMA) and the Government of Newfoundland and Labrador. It is based on a number of principles agreed upon by both parties, including:

- a. the FFS physician must be in active practice outside St. John's/Mount Pearl;
- b. the FFS physician has an "established relationship" with a Regional Health Authority (RHA);
- c. the responsibility for ensuring accessible and adequate medical care coverage is a joint obligation of both the physician community and the RHA;
- d. in the interest of fairness, only physicians contributing to the overall joint RHA/physician effort may benefit from this incentive program, and;
- e. the original criteria for the program will be subject to modifications that will be developed collaboratively based on the observations and experience of the initial couple of years.

In order for physicians to understand how they can best contribute to medical care the RHA will annually inform physicians from each clinical specialty for each respective location of the overall service needs and in particular as it relates to family medicine.

Process:

- The VP Medicine or designate will provide to physicians a list of services that need to be provided by each specialty group in a defined geographical area.
- The VP of Medicine, or designate, will meet annually with the physicians in each group to review the RHA list of needed services, presented in order of priority, so as to determine the level of interest of each physician group in providing the services.
- The physician group, in consultation with the RHA, will develop a cooperation plan to address the service needs of the RHA (individual participants may provide different types/levels of services with the consensus of other physicians in their group).
- A Medical Coverage Cooperation Agreement (see attached appendix A) will be used by the RHA to define each physician's responsibility in the context of the group thus establishing each physician's relationship with the RHA.

Eligible Services:

1. Family Medicine:

- a. 24/7 Category A Emergency Department Coverage
 - i. Each physician would be an equal participant in a ED rota,
 - ii. Each physician would agree to assist the organization in the provision of service by participating in coverage beyond their individual normal work week when necessary.
- b. 24/7 Category B Emergency Department Coverage

- i. Each physician would agree to be an equal participant in an on call group to provide this service.
 - c. 24/7 Inpatient Care
 - i. Each physician would agree to be an equal participant in on call group to provide this service.
 - d. 24/7 Long Term Care Coverage
 - i. Each physician would agree to be an equal participant in on call group to provide this service.
 - e. 24/7 Obstetrical Intra-partum and Inpatient Care
 - i. Each physician would agree to be an equal participant in on call group to provide this service.
 - f. 24/7 Surgical assisting
 - i. Each physician would agree to be an equal participant in on call group to provide this service.
 - g. Traveling Clinics
 - i. Each physician would agree to participate equally in the provision of clinical services to communities remote from their home base as identified by the RHA
 - h. After Hours Ambulatory Services
 - i. Each physician agrees to participate equally with their colleagues in the provision of this after hours service
 - ii. Each physician must do a minimum of three evening clinics and one weekend clinic per calendar month.
- 2. Specialists:**
- a. 24/7 on call for the provision of emergent and urgent care to patients referred from the Emergency Department
 - b. 24/7 on call for emergent and urgent referrals for the RHA catchment area.
 - c. 24/7 on call for telephone consultation from physicians within their RHA catchment area
 - d. 24/7 on call for inpatient care both for their respective specialty inpatients and those referred from other physician colleagues.
- 3. Other Services:**
- a. There may be other particular circumstances that may be deemed to meet additional requirements of the RHA. This will be identified by the RHA and forwarded to the Physician Services Division of the DHCS for consideration prior to the RHA entering into a Medical Coverage Agreement with the physician.
- 4. Solo Family Physicians:**
- a. A solo family physician who establishes a FFS practice in a rural area at the request of the RHA may be considered eligible for this bonus. Each will require the RHA to seek pre-approval by the Physician Services Division of the DHCS.

This policy for the Rural FFS Retention Bonus will be subject to further revision and refinement based on the experience over the next two years and with consultation among the DHCS, RHA and NLMA.

Retention Bonuses – FFS Physicians (excluding physicians on Alternate Payment Plans (APPs))

FFS General Practitioners and Specialists, who practice outside St. John's/Mount Pearl and meet the criteria referenced in the Rural FFS Retention Bonus Policy, will be eligible to receive an annual retention bonus based on accumulated service time from October 1, 2009 onward, as follows:

	After 12 Eligible Months	After 24 Eligible Months	After 36 Eligible Months
FFS GPs	\$ 6,000	\$ 8,000	\$10,000
FFS Specialists	\$ 5,000	\$10,000	\$15,000



Government of Newfoundland and Labrador
Department of Health and Community Services

**APPENDIX B:
Rural FFS Retention Bonus Application**



STALE DATED APPLICATIONS
Rural Fee-for-Service Retention Bonus Application

TO BE COMPLETED BY CLAIMING PHYSICIAN

Name: _____ MCP Provider Number: _____
Specialty: _____ Practice Location: _____
Bonus Period Start Date: _____ Bonus Period End Date: _____

Include coverage and/or clinical services provided to the RHA and its patients below:

GP Clinical Services

Service	RHA Facility	Frequency
After Hours Clinics/Walk In Clinics		
Nursing Home Care/Long Term Care Services		
In Patient Care Coverage		
ER Coverage (Cat. A and/or Cat. B)		
Long Term Care Coverage		
Surgical Assisting Coverage		
Obstetrics Coverage		
RHA Supported Traveling Clinics		

Specialist Clinical Services

Service	RHA Facility	Frequency
Hospital On Call Coverage		
RHA Supported Traveling Clinics		

Physician Email Address: _____

Physician Signature _____ Date: _____

Completed forms should be sent to the Medical Services Division of the Department of Health and Community Services by email at MedServicesPrograms@gov.nl.ca or mail:

Medical Services Division
Department of Health and Community Services
PO Box 8700,
St. John's, NL A1B 4J6



Government of Newfoundland and Labrador
Department of Health and Community Services

Annex C: Medical Services Cooperation Agreement

Note: This is for reference only. Please do not submit with staled dated application

Medical Coverage Cooperation Agreement

This agreement is in recognition of the commitment on the part of the RHA (specify) and the medical profession to collaborate in providing residents of Newfoundland and Labrador with adequate medical care coverage and accessibility to timely services. The parties hereto agree to the following:

Name of Physician: _____

Provider Number: _____

Coverage Commitment:

Period Covered: _____

The DHCS on behalf of the RHA agrees to pay _____
(Physician's Name)

as per the Rural FFS Retention Policy upon satisfactory completion of the commitments specified above.

Physician's Signature

Authorized RHA Signature

Date

Date