Physician Pandemic Planning Payments (Fall/Winter 2020/21): FAQs

In recognition of additional planning work required to action the Ministry of Health's Management of COVID-19 Health Sector Plan for Fall/Winter 2020/21 (<u>http://news.gov.bc.ca/files/COVID-19_fall-winter_preparation.pdf</u>), released in September 2020, the Ministry of Health is providing funding for physician time spent on associated planning activities. Planning may be initiated by the Health Authorities, Medical Staff Associations (MSAs) or Divisions of Family Practice (DOFP).

1. What is the deadline for the submission of physician invoices?

Physicians must submit invoices to the organization (i.e., Health Authorities, MSAs, Divisions of Family Practice) which initiated the planning activities by **April 30, 2021**. However, physicians are encouraged to submit an invoice as soon as the maximum 20 hours of planning is reached.

Health Authorities and the Doctors of BC have until **May 28, 2021** to submit requests for reimbursement to the Ministry. The Ministry may request that the Doctors of BC and Health Authorities provide a rough estimate of the invoices received to date on April 5, 2021, for year end purposes.

2. Who do Divisions of Family Practice and MSAs submit their invoices to?

Divisions will submit this <u>excel template</u> that provides information on all invoices, with an accurate accounting of costs, to <u>divisions@doctorsofbc.ca</u> by **April 30, 2021.** The excel template must be confirmed with a signature from the Division physician leads.

MSA will submit one consolidated invoice from their "Fall/Winter 2020-21 COVID Planning" engagement activity to <u>engagement@doctorsofbc.ca</u> by **April 30, 2021. The invoice must be confirmed by the MSA executives with a signature.**

3. What sessional rates should be used?

The following sessional rates will be used for pandemic planning:

- GPs \$509.77 for 3.5 hours of work or **\$145.65/hour**
- Specialists \$601.31 for 3.5 hours of work or \$171.80/hour

4. Are GP specialists eligible for the specialist sessional rate?

Only Royal College-certified Specialists have access to the Specialist sessional rate. GPs who may have additional training that does not lead to Royal College certification will be compensated at the GP sessional rate.

5. Are clinical fellows eligible for pandemic planning pay?

Clinical fellows are not eligible for the pandemic planning payments under this initiative.

6. What is the distinction between MSA-driven facility engagement and Agency/HA-driven work on service delivery planning? For example, as an organization PHC has provided limited extraordinary funding directly related to COVID so far.

For the purposes of reimbursement, the important distinction is which group led and requested the planning work being done. MSA-driven facility engagement work tends to be local and related to specific clinical processes. By contrast, HA-driven work on service delivery planning may be more focused on regional planning and response. Regardless of the scope of the planning work, reimbursement should be sought through the entity that initiated it.

7. Clarity requested on the following statement: "All Invoices must be confirmed with a signature by a Health Authority designated representative or MSA/DOFP executive." [To attest actual performance of the planning] This seems to imply that the HA may act independent of the MSA.

Physicians should submit invoices to the organization that initiated the planning activities. All invoices must be confirmed with a signature by a health authority designated representative or division/MSA executive to attest to the actual performance of the planning activities. Signoff validates that the invoice is legitimate and appropriate, and that the planning was requested and performed.

Payments are made to physicians through divisions or MSAs for work initiated by the MSA and divisions. For planning work explicitly initiated by the Health Authorities outside of the Divisions and/or MSAs, physicians will be compensated directly by the applicable Health Authority.

8. If a physician who is paid on a FTE basis (e.g. service contract or salary agreement) participates in planning work over and above their contracted FTE, and is paid according to their contract or salary rate, can the HA be reimbursed for the monies paid? What if the HA/Agency has already reimbursed physicians at a lower (e.g. admin or medical leadership) rate?

The HA/Agency may be reimbursed for these expenditures, but the appropriate invoicing process should still be followed, and it is up to the HA/Agency to ensure amounts are correct and any differences in rates are reconciled. The HA/Agency must document what payments went out to physicians.

If the HA has paid a higher amount (e.g., paid according the physician contract) the HA can seek funding for up to the appropriate sessional rate for that physician.

The HA/Agency cannot pay a lower rate and subsequently invoice the Ministry for a higher amount (the sessional rate).

9. Are physicians eligible for an additional 20 hours if they are currently in a paid Health Authority physician leadership role and are already paid up to the maximum 100 hours related to COVID-19 by the HA?

No, the total cannot exceed 100 hours, but Health Authorities can submit for reimbursement from the Ministry of Health for up to 20 hours.

10. Some physicians will have undertaken planning work for more than one organization. What happens if invoices are submitted which, when combined, total more than 20 hours?

It is the physician's responsibility to ensure that they submit invoices only up to a total of 20 hours combined across all pandemic planning activities. Under this funding initiative only up to 20 hours will be funded. The Ministry of Health will be reconciling funding by individual physician and any inadvertent overpayments under this funding initiative will be recovered.