

Ministry of Health payment for physician planning time in response to COVID-19

FREQUENTLY ASKED QUESTIONS

IMPORTANT DATES

- Physicians will be compensated to a **maximum of 20 hours in total for active planning performed between October 19th 2020 and March 31st 2021.**
- MSA and Division of Family Practice (DOFP) invoices, with an accurate accounting of costs, must be submitted to Doctors of BC by **April 30, 2021.**

MSA and DOFP Physician Invoicing

Physicians will be asked to track their planning hours between October 19th, 2020 and March 31st 2021 and submit a single invoice to DOFP or submit their claims through the Facility Engagement Management System (FEMS) for MSAs.

MSAs and DOFPs are asked **not to pay any physician planning time** until after Doctors of BC verifies all submissions and confirms the final value each MSA and DOFP is entitled to in May 2021.

Ministry of Health Reimbursement for MSAs and DOFPs

DOFP will submit this [excel template](#) that provides information on all invoices, with an accurate accounting of costs, to divisions@doctorsofbc.ca by **April 30, 2021.** **The excel template must be confirmed with a signature from the DOFP physician leads.**

MSA will submit the FEMS claim summary list from their “Fall/Winter 2020-21 COVID Planning” engagement activity to engagement@doctorsofbc.ca by **April 30, 2021.** **The claim summary list must be confirmed by the MSA executives with a signature.**

1. What type of planning activities are eligible for reimbursement?

- **Physicians’ active participation in meetings and planning work** initiated through DOFPs, MSAs and health authorities that are directly related to supporting the management of the MoH’s [COVID-19 Health-Sector Plan for Fall/Winter 2020-21](#). Payment will not be provided for passive attendance at meetings.
- **Meetings must be about service delivery planning, re-design and implementation** related to provision of patient care at a community, facility, regional and/or provincial level in response to COVID-19.
- **The planning work is extraordinary**, and goes beyond usual department, DOFP or MSA meetings – planning for patient care in the outpatient physician office settings is not eligible.

2. Can a physician claim be reimbursed through the MoH for 20 hours of planning time each from the health authority (HA), MSA and/or DOFP?

No. A physician will be reimbursed for a **maximum of 20 hours** in total, no matter how many organizations they are invoicing.

3. What consultation occurred to arrive at this compensation model?

Since the pandemic started, physicians have been working hard to actively plan and deliver patient care in their communities and facilities in order to successfully meet their patients’ most pressing medical needs. As we move into the fall and winter, Doctors of BC recognized that new challenges will arise. In response to these evolving

Ministry of Health payment for physician planning time in response to COVID-19

challenges, Doctors of BC has been working and advocating on physicians' behalf, through the Joint Collaborative Committees and directly with the Ministry of Health, to provide necessary supports to enable physicians to continue to provide patients with quality care.

4. Are these funds in addition to those made available earlier this year?

Yes, the maximum of 20 hours per physician in total that physicians can be reimbursed for are an **additional, one-time compensation** for physicians to continue active participation in planning activities initiated through DOFPs and MSAs. The timeframe for these active planning funds is October 19th 2020 and March 31st 2021. **Retroactive payments for active planning that occurred prior to October 19th 2020 are not eligible for these funds.**

5. Can MoH reimbursement be made available for eligible physicians' Covid planning activities that occurred between July 1, 2020 and October 18, 2020?

No. Physicians who undertook Covid planning activities initiated by the MSA or DOFP between July 1, 2020 and October 18, 2020 may approach their local MSA or DOFP for reimbursement from their local funds. Ultimately, it will be up to the individual MSA or DOFP physician leadership to make that decision.

6. What is the sessional hourly rate that the MoH will use for the Covid planning funding?

The PMA 2020/21 sessional hourly rates will be used (GPs - \$145.65/hour; Specialists - \$171.80/hour).

7. Are GP specialists eligible for the specialists 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.

MSA Specific Questions

1. What is the process for these physician claims?

The Facility Engagement Management System (FEMS) will be used to track and process MSA claims. The FEMS developer will be setting up an Engagement Activity entitled "Fall/Winter 2020-21 COVID Planning" for each MSA and assigning all MSA physicians to this EA. **No action is required by the MSA.**

Between October 19th 2020 and March 31st 2021, physicians can submit claims to this EA to a **maximum of 20 hours** in total. MSA executives should use their current decision making processes to pre-approve eligible planning activities before physicians submit their claims. After March 31, 2021, each MSA will submit the FEMS claims summary list from their "Fall/Winter 2020-21 COVID Planning" engagement activity to engagement@doctorsofbc.ca by **April 30, 2021** along with approval from the MSA executives.

2. How will MSAs and physicians be reimbursed?

Ministry of Health payment for physician planning time in response to COVID-19

After all submitted invoices have been reviewed by Doctors of BC in May 2021, funds will be transferred to the MSA accompanied by a letter providing any instructions necessary to pay the claims. Physicians that submitted claims to the “Fall/Winter 2020-21 COVID Planning” EA will then receive compensation for their claims. **Physicians can expect compensation by June 2021.**

3. For physicians who cross DOFP and FE, who ensures that individual physicians are capped at 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. After all submissions are received by Doctors of BC, a cross reference between MSA and DOFP invoices will be carried out to ensure the maximum number of hours has not been exceeded by any physician.

The Ministry of Health will be reconciling funding by individual physician and any inadvertent overpayments under this funding initiative will be recovered.

4. Can MSAs top up physicians for hours in excess of the 20 hours reimbursed by MoH?

Yes, at the discretion of the MSA for **only MSA physician members**. However, a separate Engagement Activity will need to be created. The “Fall/winter 2020-21 COVID Planning” activity is to be used for MOH reimbursement claims only.

5. Can MSAs pay health authority physician leaders who have undertaken COVID planning activities?

Health authority physician leaders (i.e. Department Heads, Chiefs of Staff, Medical Directors) **cannot be paid by the MSA for COVID planning activities**. In May 2020, the Joint Collaborative Committee (JCC) Co-Chairs and Ministry of Health agreed that it was not the JCC’s responsibility to fund health authority physician leaders’ time spent on COVID planning activities. Health authority physician leaders who qualify for the Ministry of Health COVID planning funding should follow up with their health authority directly.

6. What qualifies as MSA-initiated planning activities?

MSA planning activities that were approved by the MSA Executives/Working Groups or initiated by the individual MSA members on their own would qualify provided that the following criteria are met.

- **Physicians’ active participation in meetings and planning work** that are directly related to supporting the management of the MoH’s [COVID-19 Health-Sector Plan for Fall/Winter 2020-21](#). Payment will not be provided for passive attendance at meetings.
- **Meetings must be about service delivery planning, re-design and implementation** related to provision of patient care at a community, facility, regional and/or provincial level in response to COVID-19.
- **The planning work is extraordinary**, and goes beyond usual department, DOFP or MSA meetings – planning for patient care in the outpatient physician office settings is not eligible.

DoBC requires that the MSA Executives review/verify all invoices submitted to them against these criteria prior to the April 30, 2021 submission deadline to DoBC.

7. Will the MSAs’ access to their gates of annual funding be affected?

Ministry of Health payment for physician planning time in response to COVID-19

No. MSAs will not be responsible for paying physicians and will therefore not require reimbursement that could affect the timing of gated funding. There will be no payments for this activity from the MSA to physicians until June 2021, at which time funds will be transferred to the MSA and immediately paid out to physicians, without affecting the balance in the deferred revenue account.

8. What is the distinction between MSA-initiated and HA-initiated work on COVID planning?

For the purposes of reimbursement, the important distinction is which group led and requested the planning work being done. MSA initiated work tends to be local and related to specific clinical processes. By contrast, HA initiated 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.

Medical Staff Association questions:

Please contact the Engagement Partner supporting the MSA or email engagement@doctorsofbc.ca.

Division of Family Practice Specific Questions

1. What is the process for these physician claims?

DOFPs are asked to hold-off paying for physician planning time under this funding until all invoices are received and processed from all DOFPs and MSAs. We expect this to be completed by early June 2021. Until then, DOFP need to coordinate with physicians to submit and track the physician invoices for this work. We suggest asking physicians to submit only one invoice at the end of the period, but how this is tracked is the DOFP's responsibility.

Each DOFP will submit this template ([MoH Reimbursement for COVID-19 Fall/Winter Planning](#)) to divisions@doctorsofbc.ca by April 30, 2020. **DoBC requires that the Division physician leads review/verify all invoices submitted to them against the eligibility criteria prior to the April 30, 2021 submission deadline to DoBC.**

2. How will DOFP and physicians be reimbursed?

After all excel templates have been received by Doctors of BC, DOFP and MSA submissions will be compared to ensure no physician has claimed over 20hrs. Doctors of BC will then confirm with DOFP their final reimbursement. If a submission is adjusted we will provide an explanation on which physician has submitted more than 20hrs and what their individual reimbursement will actually be. DOFP can then pay physicians based on these confirmations. The transfer to DOFP will be processed as quickly as possible and we expect this to be completed by June 2021.

3. What is difference between the MoH's 20 hr planning funding and GPSC's \$5-million one-time funding provided to the DOFP for pandemic planning and preparation related to achieving the goals of the Ministry's Primary Care COVID-19 Response Framework?

The \$5-million one-time funding provided by GPSC to DOFPs is intended to support the planning, implementation and monitoring of activities related to the fall/winter COVID-19 response, in alignment with the Ministry's COVID-19 Health-Sector Plan for Fall/Winter 2020-21, the Fall/Winter COVID-19 Response Framework (Fall 2020) and associated *Primary Care: Key Questions for Consideration* template. DOFP have received a series of templates that require local input, working at collaborative tables, as well as regional planning and aggregation.

Ministry of Health payment for physician planning time in response to COVID-19

This funding has a limit of up to 5 hours of physician time per month and DOFP staffing hours are limited to 60% of the overall funding amount. An interim report on use of funds is required by January 1, 2021 and a final report by June 30, 2021.

4. Can physicians learning regarding how to support their staff and patients also be included in this funding?

No, physicians learning activities are not active planning activities.

5. Would you please advise which mechanism we use to recoup the other Covid-19 costs we've accumulated, e.g., PPE supplies, redeployment of staff away from projects, etc.?

In October 2020, the Ministry of Health announced that primary care providers and community-based specialists will be able to obtain PPE through the Ministry's provincial supply chain and distribution system at no charge for the duration of the emergency response. Detailed information on the process for ordering and delivery of PPE through the provincial supply will be forthcoming from the Ministry.

6. What types of meetings are eligible? Would an EOC planning meeting be invoiced through the Division or Health Authority?

- Meetings must be about active **service delivery planning, re-design and implementation** related to provision of patient care at a community, facility, regional and/or provincial level in response to COVID-19.
- **The planning work is extraordinary**, and goes beyond usual DOFP meetings – planning for patient care in the outpatient physician office settings is not eligible. Payment will not be provided for passive attendance at meetings.
- As EOCs are health authority driven, invoicing can be submitted to the health authority.

7. Is the template meant to capture compensation already covered by the DOFP or gaps where physicians have yet to be compensated?

The answer is **both for eligible planning activities that occur between October 19, 2020 and March 31, 2021**. Within the template, please document the sessional costs already covered by the DOFP.

8. How is active participation defined?

Active participation at meetings is where attendees are directly contributing to service delivery planning, re-design and implementation. For example, attendance at meetings such as Town Halls and information webinars do not qualify for compensation under these guidelines.

9. For physicians who cross DOFP and FE: Who ensures that individual physicians are capped at 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. After all submissions are received by Doctors of BC, a cross reference between MSA and DOFP invoices will be carried out to ensure the maximum number of hours has not been exceeded by any physician.

The Ministry of Health will be reconciling funding by individual physician and any inadvertent overpayments under this funding initiative will be recovered.

Ministry of Health payment for physician planning time in response to COVID-19

DOFP questions:

Please contact the Engagement Partner supporting the Division of Family Practice or email engagement@doctorsofbc.ca.