

## mcp newsletter

December 19, 2022

22-23

**Updated December 22, 2022**

**TO: ALL FEE-FOR-SERVICE FAMILY PHYSICIANS**

**RE: NEW RURAL COMMUNITY COMPREHENSIVE CARE BONUS**

The Government of Newfoundland and Labrador and the Newfoundland and Labrador Medical Association have signed a new Memorandum of Agreement (MOA) covering the period of October 1, 2017 to September 30, 2023. As outlined in Schedule “Q” of the MOA, the new Rural Community Comprehensive Care Bonus (RCCCB) comes into effect on September 30, 2022. **Applications will be accepted on or after September 30, 2023** (covering the bonus period September 30, 2022 – September 29, 2023) which is the first full year of the new RCCCB program.

The RCCCB replaces the FFS Family Medicine Rural Retention Bonus (RRB). FFS Family Physicians who may be eligible for a portion of the RRB up to September 30, 2022 are encouraged to submit their RRB applications to the Department of Health and Community Services (HCS) now rather than waiting for their anniversary date to apply. Further details on the new RCCCB are available below.

**Note: The RRB is still in place for FFS Specialists.**

### **Eligibility Criteria:**

1. FFS Family Physician who practices outside of the Northeast Avalon (i.e., communities north of and including Holyrood and Witless Bay with the exception of Bell Island).
2. Physician has billed at least \$100,000 in the year covered by the bonus period.
3. Physician has billed for services on at least 115 days in the year covered by the bonus period.
4. Physician participates in the Family Practice Renewal Program (FPRP) Fee Code Program or physician meets the FPRP's eligibility criteria for the Fee Code Program threshold for providing comprehensive community care (see “Eligibility Guidelines” in Annex A).

The new RCCCB provides \$10,000 per year to eligible physicians. This amount (and the eligibility criteria) will be prorated, where necessary, in situations where the physician is on parental leave, retires, or enters practice partway through the bonus period. Other situations may be considered and are subject to approval by HCS and the NLMA.

**Prorated Scenarios:**

Example 1: Physician is on parental leave for 6 months during the bonus period:

- In this example, the physician has a potential 105 working days. If the physician bills \$50,000 and bills on 58 days, they receive \$5,000 (provided all other criteria are met).
- Eligibility criteria 2 and 3 and bonus amount would be prorated as follows:
  - Criteria 2:  $\$100,000 / 210 \text{ billing days} \times 105 \text{ potential working days} = \$50,000$  in billings required
  - Criteria 3:  $115 \text{ days} / 210 \text{ billing days} \times 105 \text{ potential working days} = 58 \text{ billing days}$  required
  - Bonus Amount:  $\$10,000 / 210 \text{ billing days} \times 105 \text{ potential working days} = \$5,000$  bonus

Example 2: Physician retires 3 months into the bonus period:

- In this example, the physician has a potential 52.5 working days. If the physician bills \$25,000 and bills on 29 days, they receive \$2,500 (provided all other criteria are met).
- Eligibility criteria 2 and 3 and bonus amount would be prorated as follows:
  - Criteria 2:  $\$100,000 / 210 \text{ billing days} \times 52.5 \text{ potential days} = \$25,000$  in billings required
  - Criteria 3:  $115 \text{ days} / 210 \text{ billing days} \times 52.5 \text{ potential days} = 29 \text{ billing days}$  required
  - Bonus Amount:  $\$10,000 / 210 \text{ billing days} \times 52.5 \text{ potential days} = \$2,500$  bonus

Example 3: Physician enters practice partway through the eligibility period of the program:

- Bonus period: September 30, 2022 – September 29, 2023
- New physician enters practice on May 30, 2023
- In this example, the physician has a potential 70 working days. If the physician bills \$33,333 and bills on 38 days, they receive \$3,333 (provided all other criteria are met).
- Eligibility criteria 2 and 3 and bonus amount would be prorated as follows:
  - Criteria 2:  $\$100,000 / 210 \text{ billing days} \times 70 \text{ potential days} = \$33,333$  in billings required
  - Criteria 3:  $115 \text{ days} / 210 \text{ billing days} \times 70 \text{ potential days} = 38 \text{ billing days}$  required
  - Bonus Amount:  $\$10,000 / 210 \text{ billing days} \times 70 \text{ potential days} = \$3,333$  bonus

**Prorated Formulas:**

- Prorated Criteria 2 (billing value threshold)  
=  $[\$100,000 \div 210 \text{ billing days}] \times [\# \text{ potential working days}]$
- Prorated Criteria 3 (billing days threshold)  
=  $[115 \text{ days} \div 210 \text{ billing days}] \times [\# \text{ potential working days}]$
- Prorated Bonus Amount  
=  $[\$10,000 \div 210 \text{ billing days}] \times [\# \text{ potential working days}]$
- “potential working days”  
=  $[\# \text{ months worked} \div 12 \text{ months}] \times [210 \text{ working days in a year}]$

Questions relating to the content of this newsletter should be directed to Melissa Bath by email at [MelissaBath@gov.nl.ca](mailto:MelissaBath@gov.nl.ca).

**Annex A:  
Rural Community Comprehensive Care Bonus (RCCCB)  
Eligibility Guidelines**

Physicians applying for the Rural Community Comprehensive Care Bonus will be assessed using the following eligibility criteria:

**Criteria A: Basic Eligibility Guidelines**

Physicians must meet each of the following:

- ☐ Fee-for Service Family Physician
- ☐ Physician practice address is in a community outside of the Northeast Avalon (i.e., communities north of and including Holyrood and Witless Bay with the exception of Bell Island).
- ☐ Physician has billed at least \$100,000 in the year covered by the bonus period.
- ☐ Physician has billed for services provided on a minimum of 115 days within the year covered by the bonus period.

**Note: If Criteria A is met, physician can move on to Criteria B and C to determine bonus eligibility.**

**Criteria B: Family Practice Renewal Program's Fee Code Program**

- ☐ Physician is a participant in the Family Practice Renewal Program's Fee Code Program

**Note: If both Criteria A and B are met, physician is eligible for bonus. If Criteria A is met, but Criteria B is not, physician can move on to Criteria C to determine bonus eligibility.**

**Criteria C1: Comprehensive Care**

- ☐ Physician has adopted EMR in practice or has signed an EMR Physician Participation Agreement (note: does not have to be provincial EMR).

**Note: If physician meets Criteria A and Criteria C1, physician must meet 4 of the Criteria C2 requirements below. If physician meets Criteria A, but does not meet C1 criteria, physician must meet 6 of the C2 requirements.**

**Criteria C2:**

The following criteria are identical to the eligibility criteria for the FPRP Fee Code Program. If you have previously qualified for the Fee Code Program, you fulfil the requirements of Criteria C2. Please note, you may be contacted periodically to update the information on your eligibility for the fee code program.

To determine if you have already qualified for the Fee Code Program, please email [fsynyard@nlma.nl.ca](mailto:fsynyard@nlma.nl.ca) or call 709-702-6695.

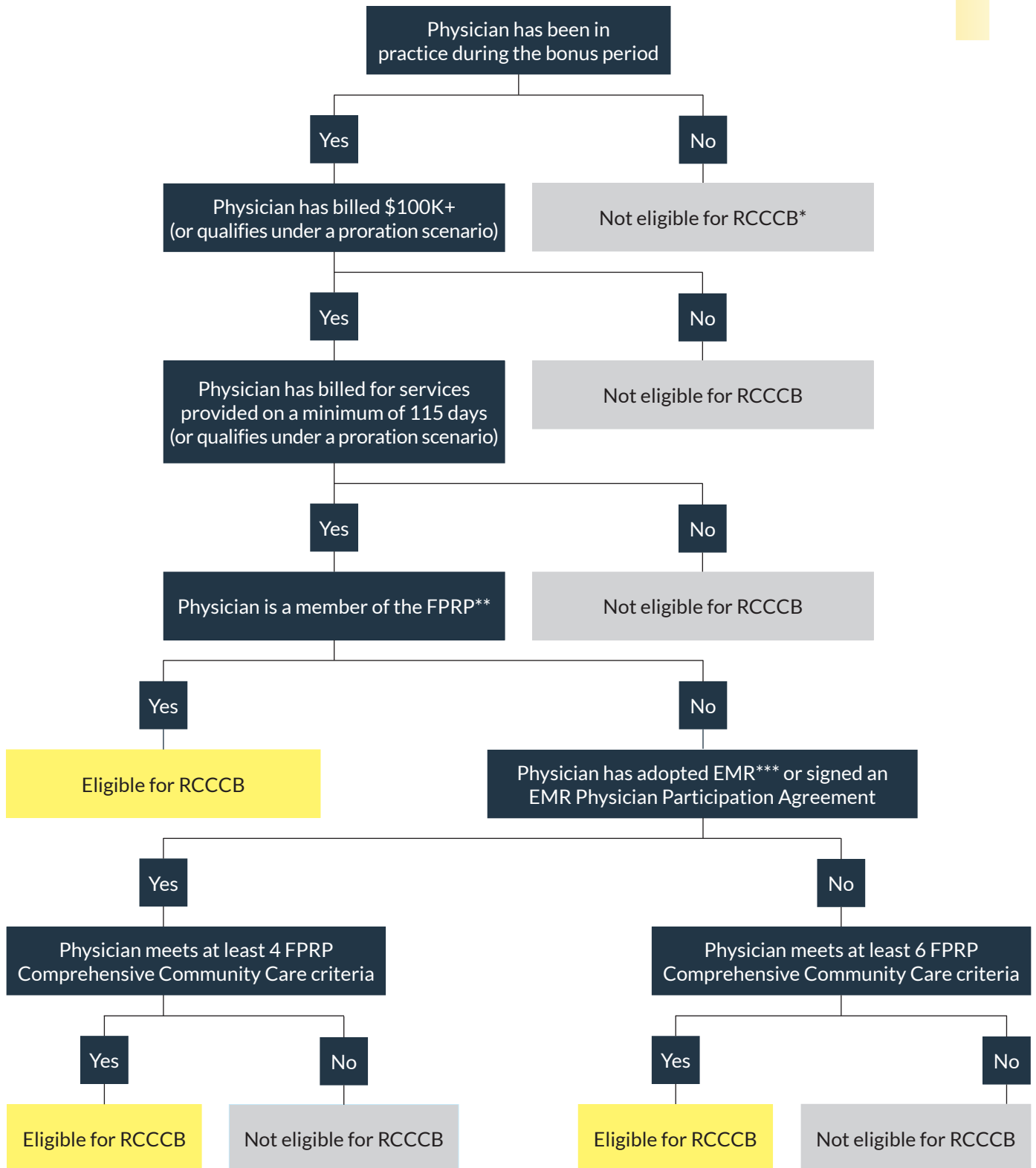
To apply for the fee code program, please complete this [Form](#).

- ☐ Physician provides after-hours care/extended hours in their practice (i.e., before 9:00 am or after 5:00 pm on weekdays, or a weekend clinic) for at least 90 hours annually.
- ☐ Physician participates in a structured after-hours (i.e., before 9:00 am or after 5:00 pm on weekdays, or a weekend clinic) rotation with a group of family physicians, whereby each physician sees the patients of any physician within the group, for at least 90 hours annually OR physician is part of an RHA-sponsored after-hours primary care clinic with a prescribed limit on the number of hours that can be worked.
- ☐ Physician provides hospital services (e.g., care to own patients when admitted to an acute care facility, participation in a structured rotation to provide care for admitted patients, Emergency Department coverage, Chemotherapy Management, surgical assists, on-call services, etc. within RHA facilities).
- ☐ Physician regularly performs medical care visits to own patients residing in long-term care facilities or personal care homes.
- ☐ Physician regularly conducts medical care visits to own patients in the patient's personal residence, completing a minimum of 50 visits annually.
- ☐ Physician provides access to a minimum of 5 same-day appointments in his/her practice per full office day or equivalent thereof.
- ☐ Physician employs and collaborates with an LPN, RN, NP, or other primary health care professional in their practice in a multi-disciplinary or interdisciplinary team environment OR physician regularly collaborates with an RHA-employed LPN, RN, NP, or other primary health care professional in a multi-disciplinary or interdisciplinary team environment.
- ☐ Physician is a member of a group family practice, defined as two or more family physicians participating in a shared practice, whereby each physician sees the patients of any physician, when their designated physician is unavailable.
- ☐ Physician regularly provides labour and delivery services (i.e., with a clear and consistent pattern, considering birth rates in the practice area).

- ☐ Physician participates in physician leadership initiatives that encourage and facilitate primary care renewal and system change. Examples may be FPRP or RHA leadership roles (e.g., participating in Family Practice Network leadership group or Community Medical Advisory Committee) OR physician performs a preceptor role with the MUN Faculty of Medicine's Undergraduate or Postgraduate programs OR Performs a Clinical Chief role within his/her RHA.
- ☐ Physician manages office-based emergencies or performs minor procedures that would otherwise necessitate emergency room visits or specialist referrals. These may include:
  - abscess draining
  - biopsies
  - casting
  - electrocardiograms
  - excisions
  - IUD insertions
  - removal of corneal foreign bodies
  - spirometry
  - suturing of lacerations
  - vasectomies

# Rural Community Comprehensive Care Bonus Application

## Eligibility Flow Chart



# Rural Community Comprehensive Care Bonus Application



**To:** Medical Services Division  
Department of Health and Community Services  
P.O. Box 8700, St. John's, NL A1B 4J6  
[MedServicesPrograms@gov.nl.ca](mailto:MedServicesPrograms@gov.nl.ca)

**From:** \_\_\_\_\_  
Physician Name  
  
\_\_\_\_\_  
Physician MCP Billing Number

This will confirm that I am a Fee-For-Service General Practitioner who practices outside of the Northeast Avalon (i.e. communities north of and including Holyrood and Witless Bay, with the exception of Bell Island). I understand that I may be contacted periodically in instances where my qualifying criteria cannot be assessed via fee codes.

**Physician Contact Information (phone or email):** \_\_\_\_\_

Please sign me up to receive MCP Newsletters electronically

**Physician Email:** \_\_\_\_\_

Please calculate and remit my \_\_\_\_\_ Rural Community Comprehensive Care Bonus.  
(year)

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Note: Application must be submitted within three months of the bonus period ending (December 31).**

This personal information is being collected for the purpose of facilitating payment of the Rural Community Comprehensive Care Bonus under the authority of Section 61(c) of the **Access to Information and Protection of Privacy Act**. If you have any questions relating to the collection of this personal information, please contact Medical Services Division at the email provided above.

EXTRAORDINARY.  
EVERY DAY.

