

## Nova Scotia Physician Incentive: Specialist Stream

### Guidelines

The Specialist Physician Incentive is intended to support the recruitment of specialists working full-time and outside of Central Zone. Specialist means a Physician registered with the College of Physicians and Surgeons whose name appears on the Medical Specialist Register of Nova Scotia, excluding those who have either a CCFP or CCFP-EM certification.

#### **Eligibility Criteria:**

<b>Communities of practice that are eligible for the incentive</b>	<b>Western Zone</b> – all communities <b>Eastern Zone</b> – all communities <b>Northern Zone</b> – all communities <b>Central Zone</b> – not eligible	
<b>ELIGIBILITY CRITERIA 1</b>	<b>Have you previously entered into a Return of Service agreement for a financial or educational incentive either with the Province, the Minister and/or the Department of Health and Wellness or another party (either current or past)?</b>	
	<b>No</b>	Please proceed to Eligibility Criteria 2.
	<b>Yes</b>	You do not qualify.
<b>ELIGIBILITY CRITERIA 2</b>	<b>Do the following conditions apply to your situation?</b> <ul style="list-style-type: none"> <li>• You are currently enrolled in a Canadian specialist residency program, or have completed a specialist residency (and any training immediately following residency) and it has been 10 years or less since you entered into independent practice; and</li> <li>• You are currently licensed with a medical regulatory authority in Canada</li> </ul>	
	<b>Yes</b>	Please proceed to Eligibility Criteria 3.
	<b>No</b>	You do not qualify.
<b>ELIGIBILITY CRITERIA 3</b>	<b>Have you practiced in Nova Scotia before in a community that is eligible for the incentive, other than during a residency or locum?</b>	
	<b>No</b>	Please proceed to Eligibility Criteria 4.
	<b>Yes</b>	You do not qualify.
<b>ELIGIBILITY CRITERIA 4</b>	<b>Have you signed a letter of offer with the NSHA, which specifies a community or communities of practice?</b>	
	<b>Yes</b>	Please proceed to Eligibility Criteria 5.
	<b>No</b>	You do not qualify.

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### ***Return of Service (ROS) Agreement:***

Approved incentive recipients will be required to enter into a Return of Service agreement with the Province of Nova Scotia before receiving any funds. Among other things, the agreement will require you to:

- practice for five years in the community or communities specified in your Letter of Offer,
- participate in the call coverage rotation for your service (where a call service exists), and
- meet fee-for-service and/or shadow billing targets and/or minimum hours of service per annum (whichever is applicable for the mix of services being provided in the Return of Service period).

### ***Value of Incentive:***

For **full-time** physicians (1.0 FTE), the incentive is valued at \$125,000:

- Initial payment of \$25,000 will be paid upon signing a Return of Service agreement.
- Five annual payments of \$20,000 each are paid at the end of each year of service (provided conditions are met as outlined within the Return of Service agreement).

Physicians practicing on a **part-time** basis (less than 1.0 FTE) will receive a prorated portion of these payments.

### ***Alternative Payment Plans (APPs):***

Physicians receiving this incentive and remunerated with an Alternative Payment Plan (APP) must have a minimum 0.5 FTE APP agreement.

### ***Annual Payment Conditions:***

Annual billings will be calculated no sooner than 90 days following the end of each year of service, to allow for calculation of all relevant billings.

Billings and payments for non-clinical services will be excluded from the billing data analysis. They include, but are not necessarily limited to:

- a. Master Agreement incentive programs
- b. Leadership/administrative stipends
- c. Pathology List B payments
- d. Facility on-call stipends
- e. Workers' compensation billings
- f. Payment for C/AFP entitlements
- g. Teaching stipend
- h. Locum payments for anything other than clinical services (i.e., expenses)

Though not all, those listed above are typically payable in addition to a physician's shadow billing or fee-for-service claims.

For APP physicians, the incentive shadow billing target is 50% of the APP contract value.<sup>1</sup>

For fee-for-service physicians, the incentive billing threshold will be 50% of the Canadian Institute for Health Information (CIHI) average gross clinical payment for 2019-2020 adjusted for the current Master Agreement annual increases<sup>2</sup> and FTE identified in the NSHA Letter of Offer.

Where remuneration for services is based on days/hours (e.g., ED, ICU, sessional), the incentive threshold is based on minimum annual hours.

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Physicians remunerated from multiple sources (e.g., part-time APP, part-time fee-for-service, part-time sessional) will have a weighted average target applied comprising the individual targets (i.e., APP target + FFS target + sessional target).

In all instances, the threshold will be pro-rated for the FTE identified in the NSHA Letter of Offer.

If a physician leaves mid-year, the final payment will not be prorated.

### ***Moving Return of Service Location:***

If a recipient wishes to change their Return of Service location, the incentive may only be transferred with Department of Health and Wellness approval and if the new location is outside of Central Zone. In each instance, the physician and health authority must present an extenuating reason for the request to be considered.

Please note this is a taxable benefit. Upon request, a T4A will be provided.

For further detail about this incentive, please refer to the accompanying *Question & Answer (Q&A)* document.

1. APP shadow billing thresholds are independent of the Return of Service billing threshold. When issuing a contract to a physician, DHW will advise the applicable thresholds (i.e., shadow billing, FFS, hours) of the services being provided for the incentive.
2. Source: CIHI National Physician Database – Payments Data, 2019-2020. [npdb-payments-data-tables-2019-en.xlsx \(live.com\)](#) Nova Scotia Physician Services Master Agreement rate increases are applied (e.g., 2% per annum for the 2019-23 agreement); e.g., the Paediatrics average gross clinical payment for 2019-20 was \$244,784 per FTE; the rate for 2022-23 is calculated as \$259,767. The threshold will be \$129,884 per 1.0 FTE. Note: some specialties (e.g., geriatric medicine, palliative care) may not have a billing threshold until the new accountability framework establishes appropriate metrics for those specialties. When issuing a contract to a physician, DHW will advise the applicable thresholds (i.e., shadow billing, FFS billing, hours) of the services being provided for the incentive.