



FAMILY PRACTICE RENEWAL PROGRAM

REGISTRATION/ELIGIBILITY CRITERIA

FAQs

1. Who is eligible to participate in the fee code program?

A Fee-For-Service Family Physician who:

- 1) **Has a valid practitioner number for practice in Newfoundland and Labrador.**
- 2) **As designated primary care physician have indicated and recorded your commitment to established longitudinal relationships with your patients whereby you commit to the overall responsibility of the coordination of patient care needs. If you do not provide a particular service needed at any given time (e.g. Obstetrics), you will coordinate the referral to a colleague who is able to provide that service in a shared care arrangement with the patient's family physician.**
- 3) **Has either adopted an Electronic Medical Record (EMR) in practice or has signed an EMR Physician Participation Agreement.**

Note:

For physicians for which this is true, they must meet at least 4 of the requirements in Question 4.

For physicians for which this is not true, they must meet 6 of the requirements in Question 4.

- 4) **Currently performs the below service at the stated level OR can demonstrate a clear and consistent pattern, which, if continued, would meet the requirement(s) of the stated service level(s).**
 - i. **Provides after-hours care/extended hours in his/her practice (i.e. before 9:00 am or after 5:00 pm on weekdays, or a weekend clinic) for at least 90 hours annually.**
 - ii. **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 is part of an RHA-sponsored after-hours primary care clinic with a prescribed limit on the number of hours that can be worked.**
 - iii. **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, etc. within RHA facilities).**

- iv. Regularly performs medical care visits to own patients residing in long-term care facilities or personal care homes.
 - v. Regularly conducts medical care visits to own patients in the patient's personal residence, completing a minimum of 50 visits annually.
 - vi. Provides access to a minimum of 5 same-day appointments in his/her practice per full office day or equivalent thereof.
 - vii. 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 Regularly collaborates with an RHA-employed LPN, RN, NP, or other primary health care professional in a multi-disciplinary or interdisciplinary team environment.
 - viii. 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.
 - ix. Regularly provides labour and delivery services (i.e. with a clear and consistent pattern, considering birth rates in the practice area).
 - x. 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 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.
 - xi. Manages office-based emergencies or performs minor procedures that would otherwise necessitate emergency room visits or specialist referrals. These include:
 - abscess draining;
 - biopsies;
 - casting;
 - electrocardiograms;
 - excisions;
 - IUD insertions;
 - removal of corneal foreign bodies;
 - spirometry;
 - suturing of lacerations; and
 - vasectomies.
2. Are locums eligible to participate in the fee code program?

Physicians undertaking a locum tenens for a family physician enrolled in the FPRP Fee Codes Program are eligible to bill FPRP fee codes if:

- a) **The physician for whom the locum is covering is already a registrant; AND**

b) The locum is providing a period of replacement that is greater than three months, with at least 20 days in one calendar month considered one month of replacement service.

3. I have signed an EMR Physician Participation Agreement for EMR adoption and am in a queue waiting for the process to be initiated. Can I gain entry to the fee code program while waiting for my EMR implementation date to be determined?

Yes, if you have signed an EMR Physician Participation Agreement for EMR adoption and meet all other eligibility criteria as indicated, you can gain entry to the fee code program while waiting for your EMR to be implemented.

4. I am new to practice and although I regularly provide after hours care and regularly conduct medical care visits to my own patients in their personal residences, I do not meet the annual requirement as stated in the criteria as I have only been in practice for 3 months. Am I eligible for registration with the fee code program?

Yes, if you currently meet eligibility requirements 1, 2 AND 4 in the list of criteria above, AND can demonstrate a clear and consistent pattern which, if continued, would meet the requirement(s) of the stated service level(s) in 4, you are eligible for entry to the fee code program.

5. I have been a practicing physician for a number of years and have many long-term patients for whom I am their only primary care physician. My commitment to a continued relationship and to addressing their care needs has not been formally recorded. Am I eligible?

Yes, if you have a long-term relationship with a patient whereby you are their designated physician and are committed to, and responsible for their care, you are eligible.