

FULL NAME OF HOST PHYSICIAN (FIRST, LAST)		MSP PAYEE NUMBER	MSP PRACTITIONER NUMBER
HOST PHYSICIAN PHONE NUMBER AND AREA CODE	HOST PHYSICIAN FAX NUMBER AND AREA CODE	HOST PHYSICIAN EMAIL ADDRESS	
NAME OF COMMUNITY WHERE LOCUM IS REQUESTED		NUMBER OF DAYS FOR LOCUM COVERAGE	
1 FROM (EFFECTIVE DATE)	TO (CANCEL DATE)	2 FROM (EFFECTIVE DATE)	TO (CANCEL DATE)

PLEASE PROVIDE THE FOLLOWING MANDATORY DETAILS OF YOUR OFFICE PRACTICE (Locum coverage must be minimum 2 days, not more than 10 days.)

REASON FOR LOCUM COVERAGE (I.E., VACATION, ON-CALL ROTA)			
PROVIDE ON-CALL	DATES (BE SPECIFIC)		
<input type="checkbox"/> YES <input type="checkbox"/> NO			
REGULAR SCHEDULED OFFICE HOURS			
DAYS:			HOURS
TYPE OF PAYMENT			
<input type="checkbox"/> FEE FOR SERVICE	<input type="checkbox"/> APP / HA CONTRACT	<input type="checkbox"/> SALARIED OR SESSIONAL	<input type="checkbox"/> OTHER (SPECIFY):
ARE ADMITTING & TREATMENT PRIVILEGES NECESSARY?		IF YES, NAME OF FACILITY	
<input type="checkbox"/> YES <input type="checkbox"/> NO			
DO YOU PROVIDE SERVICES OUTSIDE YOUR COMMUNITY THAT A LOCUM MAY BE REQUIRED TO PROVIDE?		IF YES, PROVIDE DETAILS	
<input type="checkbox"/> YES <input type="checkbox"/> NO			
HAS A LOCUM BEEN RECRUITED TO PROVIDE SERVICE?	LOCUM NAME	PHONE NUMBER (INCLUDE AREA CODE)	FAX NUMBER (INCLUDE AREA CODE)
	LOCUM E-MAIL ADDRESS		
<input type="checkbox"/> YES <input type="checkbox"/> NO			

TERMS AND CONDITIONS

HOST PHYSICIAN – I AGREE TO:

- Reimburse those services not covered by Medical Services Plan (i.e., private, ICBC, WCB and Reciprocal billings) directly to the locum less the amount recovered for overhead prior to the locum leaving the locum assignment.
- Submit claims within two weeks of the end date of the locum assignment.
- Provide the locum with a detailed reconciliation of claims submitted.
- If necessary, establish hospital privileges on behalf of the locum physician.
- For office-based locum assignments, accept 40 percent of paid claims when locum is providing office-based services for the host physician.
- Ensure that the locum receives the medical on-call payments from the health authority / host physician.
- Not bill the Medical Services Plan while the locum is providing service on behalf of the host physician.
- Provide the locum with detailed information on the care and treatment of hospital patients or those patients requiring special treatment.
- In C + D communities, assist with providing reasonable accommodation, which shall include clean and private quarters, reasonably furnished, cooking facilities, TV, and private phone, and provide a vehicle if the locum does not have transportation.

SIGNATURE OF HOST PHYSICIAN	DATE SIGNED

HEALTH AUTHORITY TERMS AND CONDITIONS

- In C + D communities, assist with reasonable accommodation- which shall include reasonably furnished, clean and private quarters, cooking facilities, TV and private phone.
- Assist with providing a vehicle if locum does not have transportation.

I CONFIRM THAT HOST PHYSICIAN MAINTAINS ADMITTING AND TREATMENT PRIVILEGES AND PROVIDES ON-CALL SUPPORT. I CONFIRM THERE ARE 4 OR LESS PHYSICIANS IN THIS ON-CALL GROUP.	<input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE OF HEALTH AUTHORITY REPRESENTATIVE	DATE SIGNED
NAME OF FACILITY			
PRINT NAME OF HA REPRESENTATIVE		TITLE OF HA REPRESENTATIVE	
PHONE NUMBER (INCLUDE AREA CODE)	FAX NUMBER (INCLUDE AREA CODE)	EMAIL ADDRESS	

Locums for Rural BC administers the Rural Locum Programs on behalf of the Ministry of Health and Doctors of BC.

Please mail or fax applications to:

200 - 1333 West Broadway, Vancouver BC V6H 4C6
Phone: 1 877 357-4757 Fax: 1 877 387-4757
HLTH 1960 2017/05/25

The information on this form is collected under s.26(c) (e) of the *Freedom of Information and Protection of Privacy Act* and will be used to place locum physicians as needed and to ensure continuous care for rural communities. The Ministry of Health is collecting this information for the purpose of program evaluation. If you have any questions about the collection and use of this information, please contact the Locum Program Officer at 1-877-357-4757, or by mail at Locums for Rural BC 200 – 133 West Broadway, Vancouver BC V6H 4C6.

DO YOU NEED A GP ANAESTHESIA LOCUM?

Do you need a reliable qualified locum so you can take time off for a vacation, a break from on-call duties or for continuing medical education? The Rural GP Anaesthesia Locum Program (RGPALP) can help!

You may be eligible for the RGPALP if you live and practice in a community with fewer than seven (7) GPAs in the community and you routinely provide GPA services, as required by the health authority (HA).

Your community must be situated greater than 70km from a major medical centre providing anaesthesia services. For further details on eligibility, please contact Locums for Rural BC.

INTERESTED...NEED MORE INFORMATION? PLEASE CONTACT:

Locums for Rural BC
Health Match BC
200 - 1333 West Broadway
Vancouver BC V6H 4C6

Tel: 877 357-4757
Fax: 877 387-4757
Website: locumsruralbc.ca

Email: info@locumsruralbc.ca
email is for inquiries only - do NOT send applications via email

ADVANTAGES OF USING THE PROGRAM

- There is no fee for to the host physician for using the RGPALP.
- You keep forty (40) percent of the Medical Services Plan paid claims to cover your office overhead, except when the locum is providing a hospital-based locum or where an alternative payment arrangement is in place.
- No payment hassles – we pay the locum.
- Our locums have rural training and/or experience.

CRITERIA FOR USING THE PROGRAM

- You must be a GP or family medicine physician licensed to practice medicine in British Columbia.
- Be a member in good standing with the Canadian Medical Protective Association.
- Reside and practice in a designated rural community for a minimum of nine (9) months per year, bill over \$65,000 per annum, maintain hospital privileges, and participate in an on-call group to support a rural hospital's operations.
- Have Royal College of Physicians & Surgeons of Canada Certification.
- Be enrolled in the Medical Services Plan.
- Have obtained anaesthesia training, have been recognized by the HA, have been granted privileges to practice GPA services in a rural hospital, and provide on-call support in the designated core service.

HOW OFTEN CAN I USE THE PROGRAM?

- Each rural GPA who meets the criteria can request up to ten (10) days of locum services per year (each request must be for a minimum of two (2) days).

CLAIMS SUBMISSION AND PAYMENT PROCESS

OFFICE-BASED SERVICES

- An RGPALP assignment form must be completed by the locum (please do not submit a regular assignment form) and faxed to the attention of Rural Practice Programs at (877 387-4757).
- Claims must be submitted using the host physician payment number and the locum physician Medical Services Plan (MSP) practitioner number.
- The host physician is expected to submit claims within two (2) weeks of the end date of the locum assignment and refused claims within two (2) weeks of the refusal date.
- The host physician must provide the locum with a detailed reconciliation of claims submitted.
- The locum receives the greater amount of sixty (60) percent of paid claims or \$850 to \$1,000 per day, depending on the community's degree of isolation. If the locum is a certified anaesthetist, they will receive \$1,200 per day.
- The host physician receives forty (40) percent of paid claims and payment will be made by Rural Practice Programs and MSP on the regular payment dates. Where an alternative payment arrangement is in place, no Fee-for-Service (FFS) is billed.

HOSPITAL-BASED SERVICES

- A locum providing hospital-based services, as required by the HA, will receive the greater amount of \$850 to \$1,000 per day depending on the community's degree of isolation or one hundred (100) percent of paid claims, with top-ups on a quarterly basis. Certified anaesthetists will receive \$1,200 per day.
- A locum under the RGPALP will be assigned an additional payment number to be used when the locum is only covering the host physician's hospital-based assignments.
- The host physician does not receive forty (40) percent of paid claims when the locum is only covering the host physician's hospital-based assignments.

OFFICE-BASED AND ON-CALL AVAILABILITY SERVICES:

- Rural Practice Programs will pay the locum's daily rate, travel expenses and travel time honorarium.
- The locum receives the applicable Medical On-Call / Availability Program (MOCAP) payment from the HA / host physician.