## **Consensus Decision of the Allocation Committee (AC)**

## April 26, 2016

#### 1.0 Purpose and Effect

- 1.1 This document records the consensus decision of the AC, to make adjustments to the Service Contract Ranges and Salary Agreement Ranges (the "Ranges") pursuant to Article 5.1 of the 2014 Alternative Payments Subsidiary Agreement (the "APSA").
- 1.2 This Consensus Decision is binding upon satisfaction of the requirements for a consensus decision set out in section 1.2 of the 2014 Physician Master Agreement (the "PMA"). The Government and the Doctors of BC agree to execute and deliver any and all required documents and take any and all steps that may reasonably be required to carry out the Consensus Decision.
- 1.3 This document is subject to the terms of the PMA and the APSA. If there is any conflict or inconsistency between any terms of this document and any terms of the PMA or the APSA, the terms of those Agreements will prevail.

#### 2.0 Funding

- 2.1 Subject to 2.2, the funding available (the "Funding") for adjustments to the Ranges is identified in Section 1.3(b) of Appendix F to the PMA as follows:
  - "(b) Effective April 1, 2016, \$9 million will be made available to fund adjustments to be made by the Allocation Committee to the Salary Agreement Ranges and the Service Contract Ranges in response to physician recruitment and retention challenges and to address issues of equity within the Salary Agreement Ranges and the Service Contract Ranges respectively. Affected physicians under existing Service Contracts and Salary Agreements will be placed within the applicable amended Service Contract Range or Salary Agreement Range at the same level as their current placement (e.g. range minimum, mid-range, or range maximum). In no event shall the total cost to the Government under this section 1.3(b) exceed \$9 million in any one Fiscal Year."
- The AC agrees that the inflated cost base from 2015/16 that has been used to plan ongoing Range increases for 2016/17 will be corrected by an ongoing reduction of \$521,896 per Fiscal Year to the 2016/17 funding of \$9M set out in Section 1.3(b) of Appendix F of the 2014 PMA (to \$8.478M). The Parties agree

that notwithstanding Section 1.3(b) of Appendix F of the 2014 PMA, there will only be\$8.478M available to the AC to fund adjustments to the Ranges in 2016/17.

- 2.2 Disagreements Affecting Allocation of the Funding
  - 2.2.1 This Consensus Decision recognizes that there are the following disagreements affecting the allocation of the Funding that require setting aside sufficient amounts of the Funding until those disagreements are resolved:
    - a disagreement between the Government and the Doctors of BC regarding the application of Section 2.4.1 of the December
       2010 Consensus Decision of the APC and Section 3.7.1 of the May 22, 2014 Consensus Decision of the APC.
    - **2.2.1.2** a disagreement on the Range for a Practice Category called Paediatric Radiology.

#### 3.0 Adjustments to the Ranges

- 3.1 Adjustments to the Ranges Effective April 1, 2016
  - 3.1.1 Salary Agreement Ranges are adjusted effective April 1, 2016 as set out in Appendix A (the "2016/17 Adjusted Salary Agreement Ranges").
  - **3.1.2** Service Contract Ranges are adjusted effective April 1, 2016 as set out in Appendix B (the "2016/17 Adjusted Service Contract Ranges").
  - 3.1.3 The 2016/17 Adjusted Salary Agreement Ranges and the 2016/17 Adjusted Service Contract Ranges ("2016/17 Adjusted Ranges") include the increase of 0.5% referred to in Article 1.3(a)(iii) of Appendix F to the PMA and 0.45% referred to in Article 1.8 (b) of Appendix F to the PMA.

#### 3.2 Finalizing Range Adjustments

- 3.2.1 The Allocation Committee has initially allocated 90% of the funds identified at sections 1.3(b) of Appendix F to the 2014 Physician Master Agreement to adjust the Salary Agreement and Service Contract Ranges.
- 3.2.2 If the 2016/17 Adjusted Salary Agreement Ranges and the 2016/17 Adjusted Service Contract Ranges, plus the associated incremental RRP cost and the associated incremental benefit cost increases for salaried

physicians, exceed the available funding for the 2016/17 Fiscal Year, the adjustments to the Salary Agreement Ranges and the Service Contract Ranges will be revised downward by the AC in the manner it determines appropriate. Notwithstanding section 5.4 of the APSA, if the funding limit is not exceeded and there are excess funds available, the Allocation Committee will apply those funds to the adjusted Salary Agreement Ranges and adjusted Service Contract Ranges in the manner it deems appropriate.

3.2.3 Schedule A and Schedule B to the APSA will be revised to reflect the 2016/17 Adjusted Ranges when they are confirmed as final.

## 3.3 Assignment to Practice Categories

- 3.3.1 General Practice Defined Scope A: General Practitioners who do not provide a Full Service Family Practice (as the term is used by the General Practice Services Committee) but are contracted or employed by an Agency to provide Physician Services in a focussed area of practice (i.e. palliative care, geriatrics, complex pain, mental health, sexual medicine) and possess recognized additional training are assigned to the practice category "General Practice-Defined Scope A". This also includes General Practitioners who provide cancer treatment services in a hospital and in the community (commonly referred to as "GP Oncologists") under a contract with the BC Cancer Agency, who were transferred from the Full Scope B category to this Defined Scope A category, effective April 1, 2011.
- 3.3.2 General Practice Defined Scope B: General Practitioners who do not provide Full Service Family Practice (as the term is used by the General Practice Services Committee) are assigned to the practice category "General Practice-Defined Scope B.". This includes General Practitioners providing services at student health centres and those providing clinical assistant services in Intensive Care Units.
- 3.3.3 General Practice Full Scope A: General Practitioners who provide a Full Service Family Practice (as the term is used by the General Practices Service Committee) in a rural community, as defined in the Rural Practice Subsidiary Agreement and provide one or more of anaesthesia, obstetrics, general surgery and emergency services in a hospital or designated D & T Centre, are assigned to the practice category "General Practice -Full Scope A" which shall have three associated Ranges.

  Assignment to Ranges A, B and C will be on the basis of the isolation points assigned by the JSC to a particular community from time to time

and when changes to isolation points result in a change in the applicable Range, implementation of such change will be determined by JSC policy. Specifically, Range A is for practice in communities assigned 20 or greater isolation points, Range B for communities assigned 15-19.9 isolation points and range C for communities assigned 6-14.99 isolation points.

- 3.3.4 General Practice Full Scope B: General Practitioners who provide a Full Service Family Practice (as the term is used by the General Practice Service Committee) in the community are assigned to the practice category "General Practice Full Scope B."
- 3.3.5 Paediatricians who work under the supervision of other Physicians are assigned to the practice category "General Paediatrics (Defined Scope)". This includes General Paediatricians who provide ICU, SCN, or oncology services.
- 3.3.6 General Paediatricians who do not work under the supervision of other physicians are assigned to the practice category "General Paediatrics".

## 3.3.7 Emergency Medicine

- 3.3.7.1 The Emergency Medicine (Non Hospital Based) practice category is reserved for physicians required to provide emergency medicine expertise in a non-hospital setting (e.g. physicians contracted by the BC Ambulance Service).
- 3.3.7.2 The Emergency Medicine Area A Range is reserved for General Practitioners (GPs) without CCFP (EM) qualifications
- **3.3.7.3** The Emergency Medicine Area B Range is reserved for:
  - 3.3.7.3.1 physicians with the following Emergency Medicine qualifications: CCFP (EM), FRCPC(EM or Paediatric EM), ABEM (SPs) or American subspecialty board certification in pediatric emergency medicine through the American Board of Pediatrics or American Board of Emergency Medicine.
  - **3.3.7.3.2** Physicians holding certification in General Pediatrics who have been grandfathered on this range.
  - 3.3.7.3.3 Physicians holding certification in General Pediatrics who begin working in the BCCH ED post the signing of this Consensus Decision and who

have 5 years of continuous, full-time experience working in a pediatric emergency department within two years of the commencement of work at BCCH ED.

3.3.7.3.4 Physicians holding certification in General Pediatrics post the signing of this Consensus Decision who have less than five years continuous, full-time experience in a pediatric emergency department will be placed at a maximum of 0.92 of the Area B Range maximum.

## 3.3.8 MHO Areas A through D

**3.3.8.1** For assignment to these Ranges, see Schedule G to the Alternative Payments Subsidiary Agreement.

## 3.7.9 Critical Care (Pediatrics) at BCCH/BCWH

- 3.7.9.1 This range/practice category is not applicable to clinical associates only qualified as paediatricians or general practitioners or to physicians receiving any other compensation for services as per the "grandfathered" arrangement, subject to their relinquishing such "grandfathered" compensation.
- 3.7.9.2 Application of this range to existing physicians is without prejudice to the positions that may be taken by the Government or the Doctors of BC, including with respect to the application of this range to new physicians.

#### 4.0 Implementation

4.1.1 Subject to Article 3.2, physicians working under a Service Contract or Salary Agreement will be eligible to receive retroactive increases consistent with the 2016/17 Adjusted Salary Agreement Ranges and the 2016/17 Adjusted Service Contract Ranges.

4.1.2 Subject to Article 3.2, physicians working under existing Service Contracts and Salary Agreements will be placed within the applicable amended Service Contract Range or Salary Agreement Range at the same level as their current placement (e.g. range minimum, mid-range, or range maximum).

This consensus decision made by the APC on the April , 2016.
For the Government:
For the BCMA: Aving Woohh

Appendix A Salary Agreement Ranges, Effective April 1, 2016

Appendix A Salary Agreement Ranges, Effective Ap	orn 1, 2016	
PRACTICE CATEGORY	Minimum	Maximum
General Practice - Defined Scope B	\$154,214	\$192,767
General Practice - Defined Scope A	\$179,112	\$223,890
General Practice - Full Scope B	\$179,112	\$223,890
General Practice - Full Scope A – Area A	\$206,656	\$258,320
General Practice - Full Scope A – Area B	\$199,982	\$249,978
General Practice - Full Scope A – Area C	1 1	1 .
·	\$192,330	\$240,413
Hospitalists	\$179,112	\$223,890
MHO Area A	\$157,117	\$196,396
MHO Area B	\$171,169	\$213,961
MHO Area C	\$202,443	\$253,054
MHO Area D	\$215,056	\$268,820
General Paediatrics (Defined Scope)	\$188,782	\$235,978
General Paediatrics	\$215,056	\$268,820
Psychiatry	\$215,056	\$268,820
Forensic Psychiatry	\$230,821	\$288,526
Physical Medicine	\$220,094	\$275,118
Neurology	\$230,443	\$288,054
Dermatology	\$225,405	\$281,756
Internal Medicine	\$220,094	\$275,118
Medical Genetics	\$225,405	\$281,756
Sub-specialty Paediatrics	1 1 1	
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Sub-specialty Internal Medicine	\$232,123	\$290,154
Anaesthesia	\$254,906	\$318,632
Critical Care	\$252,636	\$315,795
Critical Care (Pediatrics) at BCCH/BCWH	\$289,326	\$361,657
Haematology/Oncology	\$276,999	\$346,249
Medical Oncology	\$276,999	\$346,249
Radiation Oncology	\$276,999	\$346,249
Laboratory Medicine	\$253,270	\$316,587
Radiology	\$272,394	\$340,492
Pediatric Radiology	ТВА	ТВА
Nuclear Medicine	\$289,377	\$361,721
Otolaryngology	\$258,240	\$322,800
Orthopaedic Surgery	\$258,240	\$322,800
Urology	\$258,240	\$322,800
Ophthalmology	\$258,240	-
Plastic Surgery	I - I	\$322,800
Plastic Surgery Plastic Surgery at VGH/SPH	\$258,240	\$322,800
	\$357,723	\$447,154
Obstetrics/Gynecology	\$258,240	\$322,800
General Surgery	\$258,240	\$322,800
Gynecological Oncology	\$283,318	\$354,147
Maternal Fetal Medicine	\$283,318	\$354,147
General Surgical Oncology	\$283,318	\$354,147
Sub-specialty Orthopaedics	\$341,277	\$426,596
Neurosurgery	\$341,277	\$426,596
Vascular Surgery	\$341,277	\$426,596
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Cardiac Surgery	\$341,277	\$426,596
Thoracic Surgery	\$453,730	\$567,163
Emergency Medicine (Non-Hospital Based)	\$175,169	\$218,961
Emergency Medicine Area A	\$223,984	\$248,471
Emergency Medicine Area B	\$248,471	\$279,980

# Appendix B Service Contract Ranges, Effective April 1, 2016 These ranges include 12% for benefits. These rates may also be increased by reasonable overhead expenses projected to be incurred by the Physician.

PRACTICE CATEGORY	Minimum	Maximum
General Practice - Defined Scope B	\$172,719	\$215,899
General Practice - Defined Scope A	\$200,606	\$250,757
General Practice - Full Scope B	\$200,606	\$250,757
General Practice - Full Scope A - Area A	\$231,454	\$289,318
General Practice - Full Scope A Area B	\$223,980	\$279,975
General Practice - Full Scope A - Area C	\$215,410	\$269,263
Hospitalists	\$200,606	\$250,757
MHO Area A	\$175,971	\$219,964
MHO Area B	\$191,709	\$239,636
MHO Area C	\$226,737	\$283,421
MHO Area D	\$240,862	\$301,078
General Paediatrics (Defined Scope)	\$211,436	\$264,295
General Paediatrics	\$240,862	\$301,078
Psychiatry	\$240,862	\$301,078
Forensic Psychiatry	\$258,519	\$323,149
Physical Medicine	\$246,506	\$308,132
Neurology	\$258,097	\$322,621
Dermatology	\$252,454	\$315,567
Internal Medicine	\$246,506	\$308,132
Medical Genetics	\$252,454	\$315,567
Sub-specialty Paediatrics	\$252,454	\$315,567
Sub-specialty Internal Medicine	\$259,978	\$324,972
Anaesthesia	\$285,494	\$356,868
Critical Care	\$282,952	\$353,690
Critical Care (Pediatrics) at BCCH/BCWH	\$324,045	\$405,056
Haematology/Oncology	\$310,239	\$387,799
Medical Oncology	\$310,239	\$387,799
Radiation Oncology	\$310,239	\$387,799
Laboratory Medicine	\$283,662	\$354,577
Radiology	\$305,081	\$381,351
Pediatric Radiology	TBA	TBA
Nuclear Medicine	\$324,102	\$405,128
Otolaryngology	\$289,229	\$361,536
Orthopaedic Surgery	\$289,229	\$361,536
Urology	\$289,229	\$361,536
Ophthalmology	\$289,229	\$361,536
Plastic Surgery	\$289,229	\$361,536
Plastic Surgery at VGH/SPH	\$400,650	\$500,812
Obstetrics/Gynecology	\$289,229	\$361,536
General Surgery	\$289,229	\$361,536
Gynecological Oncology	\$317,316	\$396,645
Maternal Fetal Medicine	\$317,316	\$396,645
General Surgical Oncology	\$317,316	\$396,645
Sub-specialty Orthopaedics	\$382,230	\$477,788

Neurosurgery	\$382,230	\$477,788
Vascular Surgery	\$382,230	\$477,788
Cardiac Surgery	\$382,230	\$477,788
Thoracic Surgery	\$508,178	\$635,223
Emergency Medicine (Non-Hospital Based)	\$196,189	\$245,236
Emergency Medicine Area A	\$250,862	\$278,288
Emergency Medicine Area B	\$278,288	\$313,578