

Consensus Decision of the Alternative Payments Committee (APC)

May 22, 2014

1.0 Purpose and Effect

- 1.1** This document records the consensus decision of the APC, to make adjustments to the Service Contract Ranges and Salary Agreement Ranges (the "Ranges") pursuant to Articles 4.5(b) and 4.5(c) of the 2012 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 2012 Physician Master Agreement (the "PMA"). The Government and the BCMA 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 as follows:
 - 2.1.1** Effective April 1, 2012, the Funding identified in Section 1.1 (c) of Appendix F to the 2012 PMA (Year 1 Funding) as set out below:
 - “(c) Effective April 1, 2012, \$4 million will be made available to fund adjustments to be made by the Alternative Payments Committee to the Salary Agreement Ranges and the Service Contract Ranges in response to physician recruitment and retention challenges. 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 1.1 (c) exceed \$4 million in any one Fiscal Year.”
 - 2.1.2** Effective April 1, 2013, the Funding identified in Section 1.2 (b) of Appendix F to the 2012 PMA (Year 2 Funding) A as set out below:

“(b) Effective April 1, 2013, \$10 million will be made available to fund

- (i) adjustments to be made by the Alternative Payments Committee to the Salary Agreement Ranges and the Service Contract Ranges in response to physician recruitment and retention challenges, and/or
- (ii) the implementation of consensus decisions and/or agreements regarding any of the matters referred to in section 4.5(d) of the Alternative Payments Subsidiary Agreement.

Physicians working under existing Service Contracts and Salary Agreements, who are affected by changes resulting from section 1.2(b)(i), 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 1.2(b) exceed \$10 million in any one Fiscal Year.”

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:

2.2.1.1 a disagreement between the Government and the Doctors of BC regarding the interpretation of Sections 1.1 (c) and 1.2 (b) of Appendix F to the PMA as to whether the incremental Rural Retention Premium (RRP) costs and the incremental benefit cost increases for salaried physicians associated with the adjusted Ranges are included as part of total cost to the Government under Sections 1.1 (c) and 1.2 (b) of Appendix F to the PMA and be attributed to the Funding. The APC agrees not to allocate any of the Funding that might be required pending resolution of this disagreement.

Should a resolution determine that the incremental RRP costs and benefit cost increases are not to be included within the total cost to Government under Sections 1.1 (c) and 1.2 (b) of Appendix F to the PMA then the withheld Funding will be

applied proportionately to those Ranges that have received an adjustment under this Consensus Decision or be applied to resolution of other disagreements identified in this section as may be required

2.2.1.2 a disagreement between the Government and the Doctors of BC regarding the application of Section 2.4.1 of the December 9, 2010 Consensus Decision of the APC.

2.2.1.3 a disagreement regarding a new Range for Critical Care at BC Children's Hospital and BC Women's Hospital.

2.2.1.4 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, 2012

3.1.1 Subject to Article 3.6, Salary Agreement Ranges are adjusted effective April 1, 2012 as set out in Appendix A (the "2012/13 Adjusted Salary Agreement Ranges").

3.1.2 Subject to Article 3.6, Service Contract Ranges are adjusted effective April 1, 2012 as set out in Appendix B (the "2012/13 Adjusted Service Contract Ranges").

3.1.3 The 2012/13 Adjusted Salary Agreement Ranges and the 2012/13 Adjusted Service Contract Ranges include the increase of 0.5% referred to in Article 1.1(a)(iii) of Appendix F to the PMA.

3.2 Adjustments to the Ranges Effective April 1, 2013

3.2.1 Subject to Article 3.6, the 2013/14 Adjusted Salary Agreement Ranges effective April 1, 2013 are as set out in Appendix C (the "2013/14 Adjusted Salary Agreement Ranges").

3.2.2 Subject to Article 3.6, the 2013/14 Adjusted Service Contract Ranges are as set out in Appendix D (the "2013/14 Adjusted Service Contract Ranges").

3.2.3 The 2013/14 Ranges include the increase of 0.5% referred to in Article 1.2 (a)(iii) of Appendix F to the PMA.

3.3 Transfer of Funds to Sessional Rate for Forensic Psychiatry

- 3.3.1** The APC recommends to the Government of BC and the Doctors of BC that a total of \$128,571 of the Year 1 Funding and \$321,429 of the Year 2 Funding be used to support compensation increases for Specialists providing forensic services effective April 1, 2012 and April 1, 2013 respectively.

3.4 Thoracic Surgery

- 3.4.1** In the event that new service contracts for the provincial thoracic service are in place during the period January 1, 2014 to six months after the signing of this Consensus Decision, a maximum of \$480,000 of the Funding to increase Service Contract Rates for the physicians who have signed new service contracts:

3.4.1.1 \$11,428 per full time equivalent effective April 1, 2012; and,

3.4.1.2 a further \$28,572 per full time equivalent effective April 1, 2013.

- 3.4.2** The Service Contract Range and Salary Agreement Ranges as set out in Appendices A through D will be revised to reflect the Service Contract Rates described in the new Service Contracts.

3.5 Plastic Surgery

- 3.5.1** In the event that a new Service Contract is concluded between Vancouver Coastal Health and Providence Health and the Plastic Surgery Group within six months of the signing of this Consensus Decision, a maximum of \$350,000 to increase the price of this group contract by adjusting the payment rate as follows:

3.5.1.1 \$7,143 per full time equivalent effective April 1, 2012; and,

3.5.1.2 A further \$17,857 per full time equivalent effective April 1, 2013.

- 3.5.2** The Service Contract Range and Salary Agreement Ranges as set out in Appendices A through D will be revised to include new ranges that reflect the Service Contract Rates described in the new Service Contract.

3.6 Finalizing Range Adjustments

- 3.6.1** Prior to finalizing the Salary Agreement Ranges and Service Contract Ranges under Article 3, the Ministry of Health will work with the Health Authorities and the BCMA to prepare detailed costing at the level of individual Salary Agreements and individual or group Service Contracts in order to confirm the adjustments set out in Article 3 do not exceed the Funding.
- 3.6.2** The 2012/13 Adjusted Salary Agreement Ranges and the 2012/13 Adjusted Service Contract Ranges (the "2012/13 Adjusted Ranges") will be revised downward by the APC in the manner it determines appropriate if they exceed the Funding set out in Article 1.1 (c) of Appendix F to the PMA. If such funding limit is not exceeded and there are excess funds available, the APC will apply those funds to the 2012/13 Adjusted Ranges in the manner it determines appropriate.
- 3.6.3** The 2013/14 Adjusted Salary Agreement Ranges and the 2013/14 Adjusted Service Contract Ranges (the "2013/14 Adjusted Ranges") will be revised downward by the APC in the manner it determines appropriate if they exceed the Funding set out in Article 1.2 (b) of Appendix F to the PMA. If such funding limit is not exceeded and there are excess funds available, the APC will apply those excess funds to the 2013/14 Adjusted Ranges in the manner it determines appropriate.
- 3.6.4** Schedule A and Schedule B to the APSA will be revised to reflect the 2012/13 Adjusted Ranges and 2013/14 Adjusted Ranges when they are confirmed as final.

3.7 Assignment to Practice Categories

- 3.7.1 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.

- 3.7.2 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.
- 3.7.3 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.
- 3.7.4 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."
- 3.7.5** 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.
- 3.7.6** General Paediatricians who do not work under the supervision of other physicians are assigned to the practice category "General Paediatrics".

3.7.7 Emergency Medicine

- 3.7.7.1** 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).
- 3.7.7.2** The Emergency Medicine Area A Range is reserved for General Practitioners (GPs) without CCFP (EM) qualifications
- 3.7.7.3** The Emergency Medicine Area B Range is reserved for:
 - 3.7.7.3.1** 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.
 - 3.7.7.3.2** Physicians holding certification in General Pediatrics who have been grandfathered on this range.
 - 3.7.7.3.3** 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.
 - 3.7.7.3.4** 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 A Range maximum.

3.7.8 MHO Areas A through D

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

4.0 Implementation


4.1 Upon final confirmation of the Adjusted Ranges by the APC under Article 3.6:

4.1.1 Subject to Article 3.6, physicians working under a Service Contract or Salary Agreement will be eligible to receive retroactive increases consistent with the 2012/13 and 2013/14 Adjusted Salary Agreement Ranges and the 2012/14 and 2013/14 Adjusted Service Contract Ranges.

4.1.2 Subject to Article 3.6, 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 23rd day of May, 2014.

For the Government: 

For the BCMA: 

Appendix A Salary Agreement Ranges, Effective April 1, 2012

PRACTICE CATEGORY	Minimum	Maximum
General Practice - Defined Scope B	\$151,243	\$189,054
General Practice - Defined Scope A	\$166,732	\$208,415
General Practice - Full Scope B	\$166,732	\$208,415
General Practice - Full Scope A – Area A	\$181,571	\$226,963
General Practice - Full Scope A – Area B	\$179,867	\$224,833
General Practice - Full Scope A – Area C	\$177,738	\$222,172
Hospitalists	\$166,732	\$208,415
MHO Area A	\$148,125	\$185,156
MHO Area B	\$161,906	\$202,383
MHO Area C	\$182,932	\$228,664
MHO Area D	\$195,300	\$244,125
General Paediatrics (Defined Scope)	\$172,453	\$215,566
General Paediatrics	\$197,870	\$247,338
Psychiatry	\$200,698	\$250,872
Forensic Psychiatry	\$214,952	\$268,690
Physical Medicine	\$197,870	\$247,338
Neurology	\$207,200	\$259,000
Dermatology	\$207,200	\$259,000
Internal Medicine	\$204,313	\$255,391
Medical Genetics	\$210,781	\$263,476
Sub-specialty Paediatrics	\$210,781	\$263,476
Sub-specialty Internal Medicine B	\$210,781	\$263,476
Sub-specialty Internal Medicine A	\$221,062	\$276,327
Anaesthesia	\$249,995	\$312,494
Critical Care	\$242,805	\$303,506
Haematology/Oncology	\$266,699	\$333,374
Medical Oncology	\$266,699	\$333,374
Radiation Oncology	\$266,699	\$333,374
Laboratory Medicine	\$241,636	\$302,045
Radiology	\$251,145	\$313,931
Pediatric Radiology	TBD	TBD
Otolaryngology	\$253,265	\$316,581
Orthopaedic Surgery	\$253,265	\$316,581
Urology	\$253,265	\$316,581
Ophthalmology	\$253,265	\$316,581
Plastic Surgery	\$253,265	\$316,581
Plastic Surgery at VGH/SPH	TBD	TBD
Obstetrics/Gynecology	\$253,265	\$316,581
General Surgery	\$253,265	\$316,581
Gynecological Oncology	\$277,860	\$347,325
Maternal Fetal Medicine	\$265,009	\$331,261
General Surgical Oncology	\$277,860	\$347,325
Sub-specialty Orthopaedics	\$334,703	\$418,378
Neurosurgery	\$334,703	\$418,378
Vascular Surgery	\$334,703	\$418,378
Cardiac Surgery	\$334,703	\$418,378
Thoracic Surgery	\$424,683	\$530,854
Emergency Medicine (Non-Hospital Based)	\$171,794	\$214,743
Emergency Medicine Area A	\$187,644	\$234,555
Emergency Medicine Area B	\$210,907	\$263,633

Appendix B Service Contract Ranges, Effective April 1, 2012

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	\$169,392	\$211,740
General Practice - Defined Scope A	\$186,740	\$233,425
General Practice - Full Scope B	\$186,740	\$233,425
General Practice - Full Scope A – Area A	\$203,359	\$254,199
General Practice - Full Scope A – Area B	\$201,451	\$251,813
General Practice - Full Scope A – Area C	\$199,066	\$248,833
Hospitalists	\$186,740	\$233,425
MHO Area A	\$165,900	\$207,375
MHO Area B	\$181,335	\$226,668
MHO Area C	\$204,883	\$256,104
MHO Area D	\$218,736	\$273,420
General Paediatrics (Defined Scope)	\$193,148	\$241,434
General Paediatrics	\$221,615	\$277,019
Psychiatry	\$224,781	\$280,977
Forensic Psychiatry	\$240,746	\$300,932
Physical Medicine	\$221,615	\$277,019
Neurology	\$232,064	\$290,080
Dermatology	\$232,064	\$290,080
Internal Medicine	\$228,831	\$286,038
Medical Genetics	\$236,074	\$295,093
Sub-specialty Paediatrics	\$236,074	\$295,093
Sub-specialty Internal Medicine B	\$236,074	\$295,093
Sub-specialty Internal Medicine A	\$247,589	\$309,486
Anaesthesia	\$279,994	\$349,993
Critical Care	\$271,942	\$339,927
Haematology/Oncology	\$298,703	\$373,379
Medical Oncology	\$298,703	\$373,379
Radiation Oncology	\$298,703	\$373,379
Laboratory Medicine	\$270,632	\$338,291
Radiology	\$281,282	\$351,602
Pediatric Radiology	TBD	TBD
Otolaryngology	\$283,656	\$354,571
Orthopaedic Surgery	\$283,656	\$354,571
Urology	\$283,656	\$354,571
Ophthalmology	\$283,656	\$354,571
Plastic Surgery	\$283,656	\$354,571
Plastic Surgery at VGH/SPH	TBD	TBD
Obstetrics/Gynecology	\$283,656	\$354,571
General Surgery	\$283,656	\$354,571
Gynecological Oncology	\$311,204	\$389,004
Maternal Fetal Medicine	\$296,810	\$371,013
General Surgical Oncology	\$311,204	\$389,004
Sub-specialty Orthopaedics	\$374,867	\$468,584
Neurosurgery	\$374,867	\$468,584
Vascular Surgery	\$374,867	\$468,584
Cardiac Surgery	\$374,867	\$468,584
Thoracic Surgery	\$475,645	\$594,556
Emergency Medicine (Non-Hospital Based)	\$192,409	\$240,512
Emergency Medicine Area A	\$210,161	\$262,702
Emergency Medicine Area B	\$236,216	\$295,270

Appendix C Salary Agreement Ranges, Effective April 1, 2013

PRACTICE CATEGORY	Minimum	Maximum
General Practice - Defined Scope B	\$151,999	\$189,999
General Practice - Defined Scope A	\$173,561	\$216,951
General Practice - Full Scope B	\$173,561	\$216,951
General Practice - Full Scope A – Area A	\$198,057	\$247,571
General Practice - Full Scope A – Area B	\$192,083	\$240,104
General Practice - Full Scope A – Area C	\$184,621	\$230,777
Hospitalists	\$173,561	\$216,951
MHO Area A	\$154,861	\$193,576
MHO Area B	\$168,711	\$210,888
MHO Area C	\$199,537	\$249,421
MHO Area D	\$211,967	\$264,959
General Paediatrics (Defined Scope)	\$186,071	\$232,588
General Paediatrics	\$211,967	\$264,959
Psychiatry	\$211,967	\$264,959
Forensic Psychiatry	\$227,506	\$284,383
Physical Medicine	\$211,967	\$264,959
Neurology	\$277,709	\$277,709
Dermatology	\$277,709	\$277,709
Internal Medicine	\$211,967	\$264,959
Medical Genetics	\$222,167	\$277,709
Sub-specialty Paediatrics	\$222,167	\$277,709
Sub-specialty Internal Medicine	\$222,167	\$277,709
Anaesthesia	\$251,245	\$314,056
Critical Care	\$244,019	\$305,024
Haematology/Oncology	\$268,033	\$335,041
Medical Oncology	\$268,033	\$335,041
Radiation Oncology	\$268,033	\$335,041
Laboratory Medicine	\$242,844	\$303,555
Radiology	\$265,156	\$331,445
Pediatric Radiology	TBD	TBD
Otolaryngology	\$254,531	\$318,164
Orthopaedic Surgery	\$254,531	\$318,164
Urology	\$254,531	\$318,164
Ophthalmology	\$254,531	\$318,164
Plastic Surgery	\$254,531	\$318,164
Plastic Surgery at VGH	TBD	TBD
Obstetrics/Gynecology	\$254,531	\$318,164
General Surgery	\$254,531	\$318,164
Gynecological Oncology	\$279,250	\$349,062
Maternal Fetal Medicine	\$279,249	\$349,062
General Surgical Oncology	\$279,250	\$349,062
Sub-specialty Orthopaedics	\$336,376	\$420,470
Neurosurgery	\$336,376	\$420,470
Vascular Surgery	\$336,376	\$420,470
Cardiac Surgery	\$336,376	\$420,470
Thoracic Surgery	\$447,215	\$559,019
Emergency Medicine (Non-Hospital Based)	\$172,653	\$215,816
Emergency Medicine Area A	\$191,961	\$239,951
Emergency Medicine Area B	\$215,340	\$269,175

Appendix D Service Contract Ranges, Effective April 1, 2013

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	\$170,239	\$212,799
General Practice - Defined Scope A	\$194,388	\$242,985
General Practice - Full Scope B	\$194,388	\$242,985
General Practice - Full Scope A – Area A	\$221,823	\$277,279
General Practice - Full Scope A – Area B	\$215,133	\$268,917
General Practice - Full Scope A – Area C	\$206,776	\$258,470
Hospitalists	\$194,388	\$242,985
MHO Area A	\$173,444	\$216,805
MHO Area B	\$188,956	\$236,195
MHO Area C	\$223,481	\$279,352
MHO Area D	\$237,403	\$296,754
General Paediatrics (Defined Scope)	\$208,399	\$260,499
General Paediatrics	\$237,404	\$296,754
Psychiatry	\$237,404	\$296,754
Forensic Psychiatry	\$254,807	\$318,509
Physical Medicine	\$237,404	\$296,754
Neurology	\$248,828	\$311,034
Dermatology	\$248,828	\$311,034
Internal Medicine	\$237,404	\$296,754
Medical Genetics	\$248,828	\$311,034
Sub-specialty Paediatrics	\$248,828	\$311,034
Sub-specialty Internal Medicine	\$248,828	\$311,034
Anaesthesia	\$281,394	\$351,743
Critical Care	\$273,301	\$341,627
Haematology/Oncology	\$300,196	\$375,246
Medical Oncology	\$300,196	\$375,246
Radiation Oncology	\$300,196	\$375,246
Laboratory Medicine	\$271,986	\$339,982
Radiology	\$296,974	\$371,218
Pediatric Radiology	TBD	TBD
Otolaryngology	\$285,075	\$356,343
Orthopaedic Surgery	\$285,075	\$356,343
Urology	\$285,075	\$356,343
Ophthalmology	\$285,075	\$356,343
Plastic Surgery	\$285,075	\$356,343
Plastic Surgery at VGH/SPH	TBD	TBD
Obstetrics/Gynecology	\$285,075	\$356,343
General Surgery	\$285,075	\$356,343
Gynecological Oncology	\$312,760	\$390,949
Maternal Fetal Medicine	\$312,759	\$390,949
General Surgical Oncology	\$312,760	\$390,949
Sub-specialty Orthopaedics	\$376,741	\$470,927
Neurosurgery	\$376,741	\$470,927
Vascular Surgery	\$376,741	\$470,927
Cardiac Surgery	\$376,741	\$470,927
Thoracic Surgery	\$500,881	\$626,101
Emergency Medicine (Non-Hospital Based)	\$193,371	\$241,714
Emergency Medicine Area A	\$214,996	\$268,745
Emergency Medicine Area B	\$241,181	\$301,476