

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

**April 1, 2018**

### **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** The funding available (the "Funding") for adjustments to the Ranges is identified in Section 1.5(b) of Appendix F to the PMA as follows:
  - "(b)** Effective April 1, 2018, \$11 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 1.5(b) exceed \$11 million in any one Fiscal Year."

### **3.0 Adjustments to the Ranges**

#### **3.1 Adjustments to the Ranges Effective April 1, 2018**

- 3.1.1** Salary Agreement Ranges are adjusted effective April 1, 2018 as set out in Appendix A (the "2018/19 Salary Agreement Ranges").

**3.1.2** Service Contract Ranges are adjusted effective April 1, 2018 as set out in Appendix B (the “2018/19 Service Contract Ranges”).

**3.1.3** The 2018/19 Salary Agreement Ranges and the 2018/19 Service Contract Ranges (“2018/19 Ranges”) include the increase of 0.5% referred to in Article 1.5(a)(iii) of Appendix F to the PMA and 0.40% 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 section 1.5(b) of Appendix F to the 2014 Physician Master Agreement to adjust the Ranges.

**3.2.2** If the 2018/19 Ranges, plus the associated incremental RRP cost and the associated incremental benefit cost increases for salaried physicians, exceed the available Funding for the 2018/19 Fiscal Year, the adjustments to the 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 2018/19 Ranges in the manner it deems appropriate.

**3.2.3** Schedule A and Schedule B to the APSA will be revised to reflect the 2018/19 Ranges when they are confirmed as final.

### **3.3 Assignment to Practice Categories**

**3.3.1 General Practice - Full Scope (Non-Joint Standing Committee (JSC) Community):** 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 (Non-JSC Community)”.

**3.3.2 General Practice - Full Scope (Rural):** General Practitioners who provide a Full Service Family Practice (as the term is used by the General Practice 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 (Rural)” 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 15-19.99 isolation points and range C for communities assigned 6-14.99 isolation points.

- 3.3.3 General Practice - Defined Scope A:** The “General Practice – Defined Scope A” category is applicable to 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 (e.g. palliative care, geriatrics, complex pain, mental health, sexual medicine). This category 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.
- 3.3.4 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), limited to those who (i) provide services in student health centres or (ii) provide clinical associate services, are assigned to the practice category “General Practice – Defined Scope B”.
- 3.3.5 General Paediatrics (Defined Scope):** 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 Paediatrics:** 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 May 22, 2014 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 May 22, 2014 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** The AC agrees that the practice category names found at Schedules A, B and G of the APSA will be amended from "MHO Area A-D" to "Community Medicine/Public Health Area A-D".
- 3.3.8.2** For assignment to these Ranges, see Schedule G to the Alternative Payments Subsidiary Agreement.

### **3.4.9 Critical Care (Pediatrics) at BCCH/BCWH**

- 3.4.9.1** 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.
- 3.4.9.2** 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.

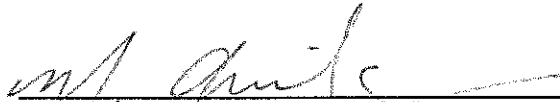
**4.0 Implementation**

**4.1.1** Subject to Article 3.2, physicians working under a Service Contract or Salary Agreement will be eligible to receive retroactive increases to April 1, 2018 consistent with the 2018/19 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 AC on the 02 day of <sup>May</sup> April, 2018, but effective April 1, 2018.

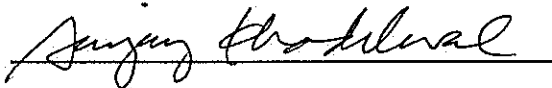
For the Government:



Print Name:

M. ARMITAGE

For the Doctors of BC:



Print Name:

SANJAY KHANDELWAL

Appendix A

Salary Agreement Ranges, Effective April 1, 2018

PRACTICE CATEGORY	Salary Rates	
	April 1, 2018 - March 31, 2019	
	Min	Max
General Practice - Defined Scope B	168,992	211,240
General Practice - Defined Scope A	188,970	236,213
General Practice - Full Scope (Non-JSC Community)	199,632	249,540
General Practice - Full Scope (Rural) - Area A	221,614	277,018
General Practice - Full Scope (Rural) - Area B	214,620	268,275
General Practice - Full Scope (Rural) - Area C	208,469	260,586
Hospitalists	188,970	236,213
Community Medicine/Public Health Area A	159,885	199,856
Community Medicine/Public Health Area B	174,183	217,729
Community Medicine/Public Health Area C	206,010	257,512
Community Medicine/Public Health Area D	218,844	273,555
General Paediatrics (Defined Scope)	205,386	256,732
General Paediatrics	228,366	285,457
Psychiatry	228,366	285,457
Forensic Psychiatry	236,211	295,264
Physical Medicine	223,970	279,963
Neurology	241,574	301,967
Dermatology	241,574	301,967
Internal Medicine	228,366	285,457
Medical Genetics	241,574	301,967
Sub-specialty Paediatrics	241,574	301,967
Sub-specialty Internal Medicine	241,574	301,967
Anaesthesia	262,788	328,485
Critical Care	264,829	331,036
Critical Care (Pediatrics) at BCCH/BCWH	302,164	377,705
Haematology/Oncology	284,423	355,529
Medical Oncology	284,423	355,529
Radiation Oncology	284,423	355,529
Laboratory Medicine	268,074	335,093
Radiology	284,423	355,529
Pediatric Radiology	320,300	400,375
Nuclear Medicine	294,474	368,093
Otolaryngology	262,788	328,485
Orthopaedic Surgery	262,788	328,485
Urology	262,788	328,485
Ophthalmology	262,788	328,485
Plastic Surgery	262,788	328,485
Plastic Surgery at VGH/SPH	380,601	475,751
Obstetrics/Gynecology	266,681	333,351
General Surgery	262,788	328,485

Gynecological Oncology	293,023	366,279
Maternal Fetal Medicine	293,023	366,279
General Surgical Oncology	293,023	366,279
Orthopedic Surgery (Enhanced Scope)	347,288	434,110
Neurosurgery	347,288	434,110
Vascular Surgery	347,288	434,110
Cardiac Surgery	347,288	434,110
Thoracic Surgery	461,723	577,154
Emergency Medicine (Non-Hospital Based)	182,146	227,683
Emergency Medicine Area A	234,153	260,627
Emergency Medicine Area B	260,627	292,691

**Appendix B**

**Service Contract Ranges, Effective April 1, 2018**

PRACTICE CATEGORY	Service Rates	
	April 1, 2018 - March 31, 2019	
	Min	Max
General Practice - Defined Scope B	189,271	236,589
General Practice - Defined Scope A	211,647	264,559
General Practice - Full Scope (Non-JSC Community)	223,588	279,485
General Practice - Full Scope (Rural) - Area A	248,208	310,260
General Practice - Full Scope (Rural) - Area B	240,374	300,468
General Practice - Full Scope (Rural) - Area C	233,485	291,856
Hospitalists	211,647	264,559
Community Medicine/Public Health Area A	179,071	223,839
Community Medicine/Public Health Area B	195,086	243,857
Community Medicine/Public Health Area C	230,730	288,413
Community Medicine/Public Health Area D	245,106	306,382
General Paediatrics (Defined Scope)	230,032	287,540
General Paediatrics	255,770	319,712
Psychiatry	255,770	319,712
Forensic Psychiatry	264,557	330,696
Physical Medicine	250,847	313,559
Neurology	270,562	338,203
Dermatology	270,562	338,203
Internal Medicine	255,770	319,712
Medical Genetics	270,562	338,203
Sub-specialty Paediatrics	270,562	338,203
Sub-specialty Internal Medicine	270,562	338,203
Anaesthesia	294,322	367,903
Critical Care	296,608	370,760
Critical Care (Pediatrics) at BCCH/BCWH	338,424	423,030
Haematology/Oncology	318,554	398,193
Medical Oncology	318,554	398,193
Radiation Oncology	318,554	398,193
Laboratory Medicine	300,243	375,304
Radiology	318,554	398,193
Pediatric Radiology	358,736	448,420
Nuclear Medicine	329,811	412,264
Otolaryngology	294,322	367,903
Orthopaedic Surgery	294,322	367,903
Urology	294,322	367,903
Ophthalmology	294,322	367,903
Plastic Surgery	294,322	367,903
Plastic Surgery at VGH/SPH	426,273	532,841
Obstetrics/Gynecology	298,682	373,353
General Surgery	294,322	367,903



Gynecological Oncology	328,186	410,233
Maternal Fetal Medicine	328,186	410,233
General Surgical Oncology	328,186	410,233
Orthopedic Surgery (Enhanced Scope)	388,962	486,203
Neurosurgery	388,962	486,203
Vascular Surgery	388,962	486,203
Cardiac Surgery	388,962	486,203
Thoracic Surgery	517,130	646,412
Emergency Medicine (Non-Hospital Based)	204,004	255,005
Emergency Medicine Area A	262,251	291,902
Emergency Medicine Area B	291,902	327,814