

FAQs - AHS temporary optional payment structure for COVID-19 redeployment

Current as of April 6, 2020

Why did AHS create a COVID-19 Compensation Alternative to Fee for Service?

As part of Alberta Health Services' (AHS) COVID-19 response, Medical Staff will need to be redeployed to areas of greatest need. In some cases, physicians will be asked to consider redeployment to clinical areas that are outside their normal scope of practice.

AHS has created a temporary, optional remuneration arrangement to provide a predictable compensation for those physicians who offer to work in prioritized redeployment roles. This temporary payment structure is an alternative to the usual Fee for Service (FFS) model of physician remuneration. However, this payment structure is entirely optional and physicians can opt to bill for services provided per the normal Schedule of Medical Benefits (SOMB) structure.

What is the compensation alternative?

Physicians who offer to be redeployed in priority clinical areas during the COVID-19 response can opt-in to a flat sessional rate of \$220/hour in lieu of fee for service.

Alternatively, physicians can bill fee for service as they usually do following the SOMB, or remain in their existing Academic Medicine and Health Services Program (AMHSP) or clinical Alternative Relationship Plan (ARP) compensation structure.

How did you determine the rate?

The sessional rate is consistent with what has already been offered for COVID-19 Assessment Centre physician staffing. It is also very close to the usual ARP Rate (\$221.17 per hour).

Why did AHS choose a flat sessional rate and not another compensation model?

The simple, single sessional rate is intended to provide a predictable compensation model to help both AHS and physicians to respond to patient care and health system needs in a timely way.

AHS will need to respond simultaneously to changes in patient service need, workforce availability and the unpredictability of when these changes will happen. This single, sessional rate that covers all clinical areas, without shadow billing requirements, avoids the significant work required for usual alternatives to FFS. This enables AHS to remain focused on responding to the rapidly-evolving COVID-19 pandemic.

Do I have to choose the sessional rate?

No. Physicians can bill fee for service as they usually do following the SOMB, or remain in their existing AMHSP or ARP compensation structure.

Are there differentials for evening and weekend work?

No. This is a single rate no matter the time of day or week. The sessional rate is intended to provide a predictable compensation model to help both AHS and physicians to respond to patient care and health system needs in a timely way.

We anticipate the response will require most physicians to rotate through day/evening/night/weekend shifts, and that this responsibility will be shared equitably among physicians, balancing demands that come with 24-hour care.

Does the sessional rate include on call COVID-related services?

The sessional rate is for on-site work scheduled by AHS as a priority COVID-related response only. If the prioritized COVID-related service model approved by Zone Medical Leadership and scheduled by AHS includes on call from home, it will be paid at Physician On Call rates (currently \$11.50/hr).

Where will physicians need to be deployed?

We are expecting critical care bed coverage and medical inpatient coverage to be the two areas of greatest need. To cope with the anticipated increased demand in these areas, substantially more Hospitalist-like roles will be required.

The sessional rate alternative to FFS will may also be used in other service settings deemed a COVID priority by Zone leadership.

How are the redeployment roles being identified and managed?

Medical and operational leadership in each individual Zone will identify service delivery priorities. Zone Medical Leadership will then determine how many physicians are needed, where and for how many hours, including when redeployment of physicians is necessary.

Zones will manage recruitment to identified priorities and scheduling into specific shifts. Schedules will be retained by each Zone Medical Affairs teams.

What is being done for hospitalists paid less than the sessional rate?

AHS recognizes that some existing Hospitalist Alternate Relationship Plans (ARPs) may currently pay less than \$220/hour. To be consistent with the rate proposed for non-Hospitalists temporarily being redeployed to those roles, a hospitalist ARP could be temporarily suspended and replaced with the sessional rate if the Zone Emergency Operations Centre (ZEOC) prioritizes expanded hospitalist coverage as part of their COVID-19 response.

When temporary COVID-19 response ramps down to pre-increased levels, the previous Hospitalist ARP rates/parameters would return.

Can a current ARP be amended to accommodate the extra physicians needed for prioritized areas?

No. A temporary expansion of an ARP or enrolment of the additional workforce in the ARP poses considerable challenges in redeploying resources and in our ability to more readily readjust once normal service levels are returned.

If a ZEOC prioritizes temporary expanded hospitalist coverage, physicians providing that coverage will be able to choose either FFS only or the temporary sessional stipend of \$220/hr in lieu of FFS.

Other existing ARPs may provide services that are prioritized by a ZEOC. If those services are required in a higher volume than usual, physicians providing the incremental service will be offered the option of either FFS or the temporary sessional stipend. Where this happens, service schedules will be kept to allow reconciliation of work that was done inside the ARP during the COVID-response and work that was done outside the ARP.

I would like to help with the COVID response and be redeployed. How do I do that?

AHS is maintaining a list of individuals with medical training who are willing and able to be redeployed as the COVID-19 response evolves. The College of Physicians & Surgeons of Alberta (CPSA) is tracking the availability of Alberta licensed physicians. Licensed physicians and surgeons can register their availability by logging into the [CPSA portal](#). Information gathered by the CPSA will be shared with AHS to guide redeployment planning.

Post-graduate year 5 (PGY 5) and retired physicians returning to practice are advised to contact Bruce.Leisen@cpsa.ab.ca to register their availability. All unlicensed international medical graduates and students can register their availability by reviewing opportunities on the [Doctor Jobs Alberta website](#).

How will the sessional rate be processed?

Each Zone Medical Affairs office will execute contracts with physicians agreeing to be redeployed and who are opting into the sessional rate option for redeployed work.

The contract will acknowledge that the physician will not bill FFS for Alberta patients when working on a redeployed shift and will collaborate with AHS to bill appropriate insurers for services provided to non-Alberta patients with any recoveries retained by AHS to partially offset stipends paid by AHS.

Payment will only be made for AHS scheduled shifts for pre-approved, prioritized COVID response services.