

## Written Declaration Form (WDF) and Guidelines for Fee-for-Service Income of MPP Physicians

As per the *New Brunswick Policy for Physicians on the Medical Pay Plan* (section 6.v.)

The purpose of this application is to clarify if and when a MPP Physician may bill NB Medicare on a fee-for-service basis as per the criteria outlined on reverse side. These services are referred to as **Fee-for-Service (FFS)** income and include fee-for-service work, sessional remuneration (e.g. working in the ER, Nursing Home, etc.) or Alternate Funding Plan (AFP) income. These guidelines do not preclude the physicians from billing FFS outside normal working hours for on-call services when they are called in for urgent/emergent services.

All physicians paid in accordance with the Medical Pay Plan who bill Fee-for-Service (FFS) for **private practice** income must submit the *Written Declaration Form (WDF) of Fee-for-Service Income for MPP Physicians* and must be approved before services being rendered. The WDF is not required for on-call services, sessional arrangements and AFPs.

These guidelines do not cover the work provided by MPP physicians outside normal working hours in order to meet the requirements of their position. For details regarding compensation of such work outside of normal working hours, please see section 5.iii.d) of the *NB Policy for Physicians on the Medical Pay Plan, Working Excessive Hours*.

If one or more criteria are not met, the physician can only bill fee-for-service for on-call related services when called-in for urgent/emergent work outside normal working hours. Review *section 6.iii.* for details regarding remuneration for Mandated On-Call in the *NB Policy for Physicians on the Medical Pay Plan*.

Process steps are outlined below:

- **Step 1:** Fill out and sign the Written Declaration Form (WDF). Failure to comply will result in the services not being paid.
- **Step 2:** Review it with your Clinical Department Head and Medical Director, and have them sign off if all criteria have been approved
- **Step 3:** Email to [MedSalPhys@gnb.ca](mailto:MedSalPhys@gnb.ca) a scanned copy with signatures of physician, Clinical Department Head and Medical Director

Claims and clinical documentation must include the time of day and they must be billed to the physician's personal account (do not bill these services to an on-call account). The FFS Income Threshold (FIT) applies to these services; refer to the FIT under section 6.iv. of the *NB Policy for Physicians on the Medical Pay Plan*.

Please refer to the criteria outlined on reverse and the Fee-for-Service Income Guidelines as outlined in the *NB Policy for Physicians on the Medical Pay Plan* (section 6.v.).

**Written Declaration Form (WDF) of Fee-for-Service Income for MPP Physicians**

**Criteria:**

In order for a MPP physician to earn such FFS income, **the following 5 criteria must be met.** The compliance with the 5 criteria shall be evaluated on a continuing basis.

1. The FFS income work is outside the scope of the MPP arrangement with the RHA. It must be work done outside of the physician’s regular declared working hours, for services to patients outside the normal salaried practice if the 5 criteria are met.

a) Please provide details of the service(s) that are/will be provided. (e.g. walk-in clinic)

\_\_\_\_\_  
\_\_\_\_\_

b) Provide details of regular MPP working hours and FFS hours schedule: (e.g. I work in my family medicine office with typical MPP work hours from 8am-4pm. I then work in a walk-in clinic during evenings and sometimes on Saturdays)

MPP Practice Schedule: \_\_\_\_\_  
Private FFS Practice Schedule: \_\_\_\_\_

2. The MPP physician’s expected workload is being met as determined by the Clinical Department Head and the Medical Director. The applicable Accountability Benchmark Policy should be considered when determining workload.

3. The FFS income work is performed in a workspace paid for by the MPP physician and not paid for by the RHA. (This criterion does not apply to sessional and AFP agreements.) If the work is being done in an RHA facility, the MPP physician may be required to make overhead arrangements with the RHA.

a) Location and address where services are/will be provided? (e.g. New Maryland Walk-in Clinic, 636 New Maryland Hwy, New Maryland, NB E3C 1K1) \_\_\_\_\_

\_\_\_\_\_

b) Who pays for the workspace? (e.g. the physicians who work in the walk-in clinic split the cost of the workspace) \_\_\_\_\_

\_\_\_\_\_

4. Patients from the MPP practice cannot be referred to or followed in the FFS income practice or vice versa.

5. There must not be any conflict of interest (as per the Conflict of Interest Policy AD-2915).

**General Information:**

Name of Physician: \_\_\_\_\_ Email: \_\_\_\_\_  
Daytime Telephone Number(s): \_\_\_\_\_

We the undersigned declare that the 5 criteria above have been met:

	<b>Print</b>	<b>Signature</b>	<b>Date</b>
Physician:	_____	_____	_____
Clinical Department Head:	_____	_____	_____
Medical Director:	_____	_____	_____
DH/Medicare:	_____	_____	_____