

INFOBulletin

Keeping health care providers informed of payment, policy or program changes

To: New Graduate Physicians

Published by: Health Services Branch

Date Issued: May 2, 2016

Bulletin #: 11147

Re: New Graduate Entry Program (NGEP) – Updated

Page 1 of 9

Overview

The New Graduate Entry Program (NGEP) is changing based on feedback from physicians and stakeholders. The changes described in this INFOBulletin aim to ensure that the NGEP: enables newly graduated family physicians to practice comprehensive family medicine (including hospital work); adjusts compensation parameters to allow for increased flexibility, and; modifies performance improvement requirements. The NGEP remains a voluntary program for newly graduated family physicians and is intended to support the establishment of a comprehensive primary care practice in the kinds of team based models in which new grads have trained, and to do so in areas not identified as high needs.

Newly graduating physicians have several options to establish their practice in Ontario:

- Join an existing Family Health Organization (FHO) or a Family Health Network (FHN) in a high needs area (list available here – add link);
- Establish a new FHO or a FHN in a high needs area;
- Set up a Comprehensive Care Model (CCM), Family Health Group (FHG) or Fee for Service (FFS) practice in a location of choosing;
- Apply to the voluntary NGEP to join or establish a FHO or FHN in a non-high needs area

- Accept a salaried role in a Community Health Centre (CHC) Aboriginal Health Access Centre (AHAC), Community-Sponsored Family Health Team or through Locum arrangements.
- Join an existing FHN/FHO on the Income Stabilization program for areas of high needs
- Apply to an existing Community Sponsored Family Health Team to join as a Blended Salary Model physician or as a Blended Salary Model physician on the Income Stabilization program

Why NGEP?

In February 2015, changes were made to the Managed Entry process whereby entry into the FHN and FHO compensation models were designated for areas identified as high needs. The need for this change comes from an acknowledgement that access to quality, comprehensive care is not equitable across this province. Despite our collective progress to address this challenge, patients in Ontario continue to experience considerable variation in access to primary care. All high-performing health care systems are based on strong primary care services delivered through a variety of models, and our focus needs to be on reducing variations in access and outcomes.

While the ministry remains committed to addressing gaps in equitable access to services and encourages physicians to contribute to this goal when making their practice location choices, we are also aware that changes to the Managed Entry program had a particularly negative impact on family medicine residents and newly graduated family physicians. NGEP is therefore designed as a voluntary program for newly graduating physicians who are interested in establishing a comprehensive primary care practice in an area not identified as high needs.

Summary of Program Changes

The ministry values the contributions of Ontario's family physicians in providing access to high quality services to improve the health and well-being of Ontarians. The ministry remains open to future changes to this program to ensure it can meet the needs of Ontario's patients while at the same time, supporting new graduates to practice comprehensive family medicine.

The following detailed program changes are effective immediately. A summary of the NGEP details before and after these changes can be found in Table 1.

Annual Compensation

- Annual compensation levels for a 1.0 FTE position are as follows. Corrections have been applied to the average monthly payment amount in years 1 and 2.
 - 1st Year – Up to a maximum of \$162,000 (average monthly payment of \$13,500)
 - 2nd Year – Up to a maximum of \$178,000 (average monthly payment of \$14,833)
 - 3rd Year – Up to a maximum of \$207,000 (average monthly payment of \$17,250)

OHIP Billing - Permissible Fee-for-Service Cap

- New Graduate Physicians participating in the NGEF must provide comprehensive care services to their patients and the patients of the FHN/FHO group that they have joined. Physicians participating in NGEF are now eligible to submit up to the Fee for Service Cap in Fee-for-Service (FFS) billings in each of the 1st, 2nd, and 3rd years of the program for services provided outside of their FHN/FHO group.
- The Permissible Fee-for-Service Cap has been increased to \$35,000 per 1.0 FTE in each of the 1st, 2nd, and 3rd years of the program for both designated comprehensive care and non-designated services.
- The services permitted to be billed under FFS have also changed. The Permissible Fee-for-Service Cap comprising of at least 50% (e.g. \$17,500) for designated services (palliative, obstetrics, geriatrics, in-hospital services and anesthesia) and a maximum of 50% will be for other, non-designated FFS billings.
- For prorated FTEs, FFS billings will now be allowed. The FFS Cap will be increased by the difference between annual compensation for 1.0 FTE and the prorated FTE. For example, for a 0.7 FTE in the first year with a prorated annual compensation of \$113,400, the FFS Cap would be increased by \$48,600 (\$162,000 - \$113,400) for a total FFS Cap of \$83,600.

Practice Improvement Plans

Participating New Graduate Physicians will be required to submit a Practice Improvement Plan by the end of year 3 only (as opposed to each year of the program) in the form prescribed by the ministry.

The requirement to submit a Patient Experience metric has been eliminated.

NGEP Requirements

Eligibility

NGEP is open to new graduates, defined as any newly registered physician in Ontario during the first three years of practice following the OHIP registration date (i.e. the effective date of the physician's assigned OHIP billing number).

The program is voluntary and focuses on new graduates interested in providing comprehensive care services in accordance with the terms and conditions of the FHN or FHO agreements either by joining or establishing a new FHN or FHO with other new graduate physicians, and in both cases, in an area not identified as high needs.

General Requirements

To join the NGEF program, eligible New Graduate Physicians must sign and deliver to the ministry:

- an “NGEP Application” (see How to Apply below); and
- an application to join an existing FHN/FHO group or form a new FHN/FHO group; and
- all other necessary documentation required to register in a FHN/FHO group.

Eligible New Graduate Physicians may participate in the NGEP for a minimum term of 3 years (36 months) and until such time that performance expectations have been met (“NGEP Period”).

At the end of the NGEP period, the New Graduate Physician must meet the following conditions to transition to compensation under the FHN/FHO agreement:

- Minimum of 36 months in the NGEP; and
- Meeting or exceeding performance improvement targets.

Eligible New Graduate Physicians participating in the NGEP who do not achieve the above noted conditions will continue in the NGEP until such time as the conditions are met, and will continue to be compensated at the Year 3 level.

Eligible New Graduate Physicians participating in the NGEP may request the NGEP Period to be temporarily suspended due to an absence from their practice. The ministry will consider such request on a case-by-case basis. A New Graduate Physician making this request shall provide the ministry with a minimum notice of 30 days prior to the requested effective date of the NGEP Period suspension.

New Graduate Physicians participating in the NGEP must provide a minimum of 30 days prior written notice to the ministry of their intention to terminate their participation in the NGEP. New Graduate Physicians who end their participation in the NGEP prior to completing the minimum 3-year term and the exit requirements, will also terminate their affiliation as a signatory physician with the FHN/FHO group.

New Graduate Physicians participating in the NGEP are required to adopt an approved Electronic Medical Record.

The NGEP is available to both full time and part time physicians. A full time equivalent (FTE) position will be based on a 40 hours per week commitment to the FHN/FHO group. The New Graduate Physician must declare their FTE commitment as part of the application process (allowable commitments range from 0.5 to 1.0 FTE in 0.1 FTE increments. Changes in the FTE level will be approved during the NGEP period at the discretion of the ministry.

Patient Enrolment Requirements

Participating New Graduate Physicians will be required to commit to enrolling new patients who have not been enrolled to any other physician in the FHN/FHO group or to the FHN/FHO group itself (New Patients) during the NGEP Period.

Participating New Graduate Physicians are required to complete and retain Patient Enrolment and Consent to Release Personal Health Information forms and to submit the Per Patient Rostering Fee code to the ministry through the Medical Claims Payment System (MCPS) to trigger enrolment on the ministry's patient enrolment database.

Monthly patient enrolment targets are set out in Table 2. Enrolment targets are prorated based on the New Graduate Physician's FTE commitment. Consistent failure to achieve cumulative monthly enrolment targets may result in termination from the NGEF and the FHN/FHO group.

Practice Improvement Plans

Participating New Graduate Physicians will be required to register to receive Health Quality Ontario ("HQO")/Institute of Clinical Evaluative Sciences ("ICES") Primary Care Practice Reports in the form, content and timing prescribed by the ministry.

Participating New Graduate Physicians will also be required to submit Practice Improvement Plans by the end of year 3 in the form prescribed by the ministry with a focus on the following metrics:

- Access - % of patients provided with same day, next day appointments
- Preventive Care - % of target patient populations compliant with preventive care requirements

New Graduate Physicians must achieve or exceed all performance improvement targets by the end of year 3 of the NGEF period in order to transition to compensation under the standard terms of the FHN/FHO agreement. New Graduate Physicians who do not achieve performance improvement targets will remain in the NGEF at the Year 3 compensation level.

Mentorship

Eligible New Graduate Physicians are required to participate in a mentorship program during the NGEF Period under the direction of the Lead Physician or the Lead Physician's designate in the case of an existing FHN/FHO group, or, in the case of a new FHN/FHO group comprised completely of New Graduates, under the direction of a physician from another FHN/FHO group who has at least 3 years of FHN/FHO experience and who has agreed to act as mentor to the New Graduate Physician applicant.

Physicians who have agreed to act as mentors to New Graduate Physicians should be prepared to provide the formal sharing of knowledge, experience and ideals to provide New Graduate Physicians with the opportunity to obtain advice and support with the goal of transitioning proficiently to a full signatory FHN/FHO physician.

Annual Compensation

Participating New Graduate Physicians will be eligible to receive average monthly payments equivalent to 1/12th of the annual compensation level up to the maximum applicable to each year of the NGEF Period. Annual compensation levels will be prorated based on the New Graduate Physician's FTE commitment (between 0.5 and 1.0).

Annual compensation levels for a 1.0 FTE position are as follows:

- 1st Year – Up to a maximum of \$162,000 (average monthly payment of \$13,500)
- 2nd Year – Up to a maximum of \$178,000 (average monthly payment of \$14,833)
- 3rd Year – Up to a maximum of \$207,000 (average monthly payment of \$17,250)

Monthly compensation amounts will be prorated based on the percentage of the monthly enrolment target achieved. This calculation will be conducted monthly. Exceeding monthly enrolment targets will not result in payment above the maximum monthly rate.

OHIP Billing

Participating New Graduate Physicians will be required to submit service encounter data (shadow bill) for both enrolled and non-enrolled patients through the ministry's Medical Claims Payment System (MCPS) using the FHN/FHO group ID number. Participating New Graduate Physicians will receive a Blended Fee for Service Premium (5% of approved fee value) for shadow billed claims.

All claims submitted through the FHN/FHO group, for both enrolled and non-enrolled patients, will be paid at \$0.

Participating New Graduate Physicians are not eligible to receive any other premiums, bonuses and incentives otherwise available through the FHN/FHO agreement or through the Schedule of Benefits.

Claims for services performed outside the FHN/FHO and billed not using the FHN/FHO group will be subject to the OHIP Billing - Permissible Fee-for-Service Cap program changes outlined on page 2 above.

Services billed outside of the FHN/FHO group in excess of the Permissible Fee-for-Service Cap will be paid through the source in which they were billed, but will be recovered by the ministry from the monthly NGEF Remittance Advice at the full approved fee value for the service.

If enrolled patients of the participating New Graduate Physician receive care from a physician outside of the FHN/FHO group, the FHN/FHO group will have their Access Bonus negated by the approved value of the included service(s) in accordance with the existing provisions of the FHN/FHO agreement.

How to Apply

To obtain a copy of the NGEF Application please contact the Ministry of Health and Long-Term Care, Negotiations Branch.

By Mail: Ministry of Health and Long-Term Care
Negotiations Branch
Blended Models Unit
1075 Bay Street, 9th Floor
Toronto ON M5S 2B1

By Phone: 416-325-3575 or 1-866-766-0266

Table 1 – NGEF Summary Changes

Original Program Details	Approved Changes
Compensation	
1st Year – Up to a maximum of \$162,000 (average monthly payment of \$12,833)	1st Year – Up to a maximum of \$162,000 (average monthly payment of \$13,500)
2nd Year – Up to a maximum of \$178,000 (average monthly payment of \$14,333)	2nd Year – Up to a maximum of \$178,000 (average monthly payment of \$14,833)
3rd Year – Up to a maximum of \$207,000 (average monthly payment of \$17,250)	3rd Year – Up to a maximum of \$207,000 (average monthly payment of \$17,250)
OHIP Billing - Permissible Fee for Service (FFS) Cap	
Year 1: \$0	Year 1: \$35,000
Year 2: \$28,000	Year 2: \$35,000
Year 3: \$28,000	Year 3: \$35,000
No other FFS or ministry funded services allowed in Year 1	<p>With the following caveats:</p> <p>a) 50% of the FFS cap will be for designated services, and;</p> <p>b) 50% will be for unrestricted FFS billings</p> <p>If FTE is prorated, allow extra billings to FFS Cap. For example, a 0.7 FTE = \$113,400</p> <p>Increase \$35,000 FFS Cap by \$48,600 (\$162,000 - \$113,400) for a total FFS Cap of \$83,600</p>
Performance Metrics	
Practice Improvement Plans submitted annually	<p>Practice Improvement Plans submitted in Year with a focus on the following metrics:</p> <p>3 only with a focus on the following metrics:</p> <ul style="list-style-type: none"> Access Preventive Care Patient Experience

Table 2 – Monthly Enrolment Targets

Year 1			Year 2			Year 3		
Month	Minimum Monthly Enrolment Targets	Minimum Cumulative Enrolment Targets	Month	Minimum Monthly Enrolment Targets	Minimum Cumulative Enrolment Targets	Month	Minimum Monthly Enrolment Targets	Minimum Cumulative Enrolment Targets
1	50	50	1	15	840	1	17	1017
2	50	100	2	15	855	2	17	1034
3	50	150	3	15	870	3	17	1051
4	75	225	4	15	885	4	17	1068
5	75	300	5	15	900	5	17	1085
6	75	375	6	15	915	6	17	1102
7	75	450	7	15	930	7	17	1119
8	75	525	8	14	944	8	17	1136
9	75	600	9	14	958	9	16	1152
10	75	675	10	14	972	10	16	1168
11	75	750	11	14	986	11	16	1184
12	75	825	12	14	1000	12	16	1200
Total	825		Total	175		Total	200	