

BACKGROUNDER 1

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Ministry of Health
BC Medical Association

A GP for Me and In-Patient Care program

A GP for Me and the In-Patient Care program, which supports hospitalized patients in receiving care from family doctors, are funded through the General Practice Services Committee, a collaboration between the BCMA and the Ministry of Health. Total funding for this program is \$132.4 million.

A breakdown of the funding includes:

- \$40 million distributed over the next three years to Divisions of Family Practice to evaluate community needs, and develop and implement local community plans to improve primary care capacity – such as mechanisms to place patients with doctors and meet the needs of vulnerable patients.
- \$22 million will be provided to enable physicians to consult with patients via telephone – meaning patients may not need to physically attend their doctor’s office for some health issues. Physicians will receive \$15 per call and will be able to bill a total of 500 telephone consultations every year.
- \$20 million will support a new incentive, which will assist physicians in providing care to vulnerable populations including frail in residential care, frail in the community, cancer patients, patients with severe disabilities, mental health and substance use, and maternity. Physicians will receive \$200 per patient when they agree to be the primary provider for these patients.
- \$18.5 million will:
 - Expand the current complex care management fee that supports doctors who develop long-term care plans for patients with complex conditions. This fee will be available for a wider range of high-needs patients. Physicians will receive \$315 per patient per calendar year.
 - An expansion of fees to help physicians coordinate patient care planning with other physicians and health care providers. Physicians will receive \$40 per 15-minute patient conference and a total of up to three hours per patient per calendar year.

- \$31.9 million to better support existing care by family physicians in hospitals. Funding will support:
 - Family doctors in providing care to their own patients when they are in hospitals.
 - Family doctors in providing care for patients admitted to hospital without a family doctor, whose doctor does not have hospital privileges, or who are from out-of-town.
 - Increased incentives for family doctors to provide hospital or terminal facility care to patients.

Media Contacts:

Ryan Jabs
Media Relations Manager
Ministry of Health
250 952-1887 (media line)

Sharon Shore
Senior Manager, Communications
& Media Relations
BC Medical Association
604-638-2832
604-306-1866 (pager)

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