



BC FAMILY
DOCTORS
Your Specialists in Primary Care.

TRANSITION INTO PRACTICE

A GUIDE FOR RESIDENTS AND NEW TO PRACTICE PHYSICIANS

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Thank you to the physician experts that created this document
Dr. Cathy Clelland, Dr. Jaron Easterbrook and Dr. Namrata Jhamb and Dr. Tracy Monk.



WHO IS BC FAMILY DOCTORS?

BC Family Doctors is the economic and political voice of family doctors in BC. Our purpose is to build an environment where family doctors thrive. We promise to advocate for the economic and professional well-being of family doctors. Simply put, we believe that caring for family doctors ensures both healthy patients and healthy communities.

We know that family doctors are the essential foundation of a high-functioning healthcare system, with a unique skill set and expertise that cannot be replaced. As a result, the expertise, opinion, and input of family doctors are crucial for the successful delivery and transformation of primary care in BC.

BC Family Doctors is a family doctor-funded and family doctor-led organization, governed by a physician board of directors. We are completely independent of government and other outside interests, both in terms of funding and governance. This means we can stand up and speak out for family doctors - loudly when necessary, quietly when more effective.

This includes advocacy for the following:

- promoting the idea that our clinics need to be Physician Medical Homes as much as they are Patient Medical Homes.
- advocating for support to address the rising costs of doing business
- working to modernize and create equity in physician compensation
- addressing the systemic factors impacting physician workload and health, including reducing administrative and paperwork burdens

We are also the Section of Family Medicine, working closely with Doctors of BC and named in their bylaws as the group that is to discuss matters relating to family doctors' interests and make recommendations. As part of that work, we manage the family medicine fee schedule, amending and modifying fee codes within the basket of funding available for family medicine.

We also work with other physician organizations and groups in BC, including the BC College of Family Physicians, the General Practice Services Committee, Consultant Specialists of BC, and other Sections.

We advocate for family doctors, so that family doctors can advocate for their patients.

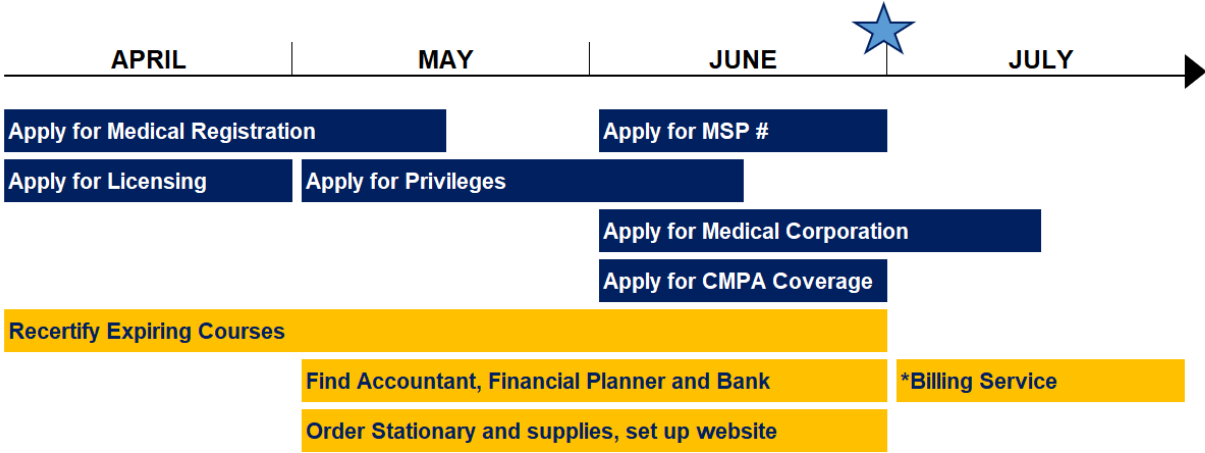
INTRODUCTION

This transition-to-practice guide is a high-level overview for family medicine residents and new-to-practice physicians who want to practice medicine in British Columbia. We hope that it assists with an orientation on how to plan a successful transition to practice as well as the services and supports available through various organizations in BC.



PLAN A SUCCESSFUL TRANSITION INTO PRACTICE

Several steps must be taken to transition to practice, even for those who are currently in the Family Practice Residency program in BC. The below information is written with the timeline in mind for those who are completing residency on a typical schedule. Similar timelines apply year-round.



*Sign up for billing service (if required)

Although July 1st is considered to be your first day as a practicing physician, you may not get your medical license and hospital privileges until mid-July. To be on the safe side, plan to start working in mid-July.

3 months before you finish your Residency, you can start your "Application for Medical Registration" on [PhysiciansApply](#). This is a process that may be initiated by your residency program.

- For a July 1st start date, the soonest you can apply is April 1st.
- You should complete your Application for Medical Registration **before** you begin your application for licensing with the [College of Physicians and Surgeons of BC](#). Upon completion of your Application for Medical Registration, a File Manager from the College will reach out to you

COST OF APPLICATION FOR MEDICAL REGISTRATION

- Physicians Apply Account Fee: \$310
- Application cost: \$220
- Provincial registration for BC: \$640



ENSURE APPROPRIATE PROFESSIONAL LIABILITY COVERAGE

Professional liability coverage is a requirement to practice and you must have proof of coverage when you apply for your license to practice. **You must have medical liability protection in place on the day you begin your medical practice.**

The [Canadian Medical Protective Association \(CMPA\)](#) provides members with liability protection, advice, and resources to help manage medical-legal risks in clinical practice. Before graduation, once you decide what you want to do and where you want to practice, you must contact CMPA to ensure you have valid professional liability coverage in place upon beginning practice. You need to ensure you have appropriate coverage for the nature of your planned practice. The fee schedule depends on what type of work (ToW) you do and the region your practice is located.

In Family Medicine, there are 4 different categories:

1. Family Medicine or General Practice – excluding anesthesia, obstetrics (labour and delivery), shifts in the emergency department, and surgery (35):

Work in a private office, CLSC, hospital or ward work, walk-in/urgent care clinic, home care, nursing home, or chronic/long-term care facility.

- If you work primarily in geriatric, palliative, or physical medicine and rehabilitation, choose code 27.
- If your work is restricted to occupational medicine, choose code 51.
- If your work is restricted to minor cosmetic procedures, choose code 37.

2. Family Medicine or General practice – including shifts in the emergency department (73).

Work in a private office, CLSC, hospital or ward work, walk-in/urgent care clinic, home care, nursing home, or chronic/ long-term care facility.

- If you work primarily in geriatric, palliative, or physical medicine and rehabilitation, choose code 27.
- If your work is restricted to occupational medicine, choose code 51.
- If your work is restricted to minor cosmetic procedures, choose code 37.
- If your work is primarily in the emergency department, choose code 82.

3. Family Medicine or General practice – including obstetrics (labour and delivery), anesthesia, surgery, and shifts in the emergency department (78)

Work in a private office, CLSC (local community service centre), hospital or ward work, walk-in/urgent care clinic, home care, nursing home, or chronic/ long-term care facility.

- If you work primarily in geriatric, palliative, or physical medicine and rehabilitation, choose code 27.
- If your work is restricted to occupational medicine, choose code 51.
- If your work is restricted to minor cosmetic procedures, choose code 37.



4. Family Medicine or General practice – including anesthesia, surgery, and shifts in the emergency department (79)

Work in a private office, CLSC, hospital or ward work, walk-in/urgent care clinic, home care, nursing home, or chronic/ long-term care facility.

- If you work primarily in geriatric, palliative, or physical medicine and rehabilitation, choose code 27.
- If your work is restricted to occupational medicine, choose code 51.
- If your work is restricted to minor cosmetic procedures, choose code 37.

If you are going to do locums and the type of work changes with different host doctors or locations, you can change your coverage with CMPA online month by month. If your practice will be restricted to one area of care (eg. addiction medicine, hospitalist, palliative care, sports medicine) you will need to select the appropriate code from the [CMPA list](#).





HOW TO OBTAIN A MEDICAL LICENSE TO PRACTICE IN BC

All physicians and surgeons who practice in British Columbia must be registered and licensed by the College of Physicians and Surgeons of British Columbia. The College grants licensure in a variety of registration classes, each of which has its own requirements.

Once the College receives your Application for Medical Registration from [PhysiciansApply](#), you will be assigned a File Manager at the College. The File Manager will send you the complete licensing application package, including a list of everything that needs to be done. This multi-part process involves a fair amount of coordination on your part. Fortunately, the College has moved to an online Application Status tool that regularly updates as you submit each required element, ensuring you stay on track. When you log in to your account it will list the outstanding items.

Cost of application for a medical license with CPSBC: \$1,124 pro-rated for July 1–February 28

Required documents:

- Application
- CV
- Criminal Record check: must be signed in ink, though you can then e-mail it
- Driver's license (notarized)
- Online orientation course: you have three attempts to score 100%; failure requires an in-person orientation.
- 3 references: 1 must be from your Program Site Director; the other two must be physicians who have had close professional relationships with you for at least (ideally) 18 months
- MINC authorization: send back page 3
- Registration Waiver form: only for the pending criminal record check; no need to add any details for items 1 through 10
- Acknowledgement of Registration Requirements Form
- CMA Code of Ethics Form
- English Language Proficiency documentation, if applicable
- Certificate of Professional Conduct: only required if you have completed parts of your residency training outside of BC

In addition, the following information should be sent to the College from your [PhysiciansApply](#) account as part of the Application for Medical Registration process that you previously completed:

- LMCC
- Medical Degree
- Passport

For more information, visit the [College of Physicians and Surgeons of BC](#)



RECERTIFICATION OF COURSES

Your residency may offer ACLS, ATLS, and/or NRP recertification courses in June – be sure to check! This will ensure that your certificates are up to date when applying for hospital privileges.

HOW TO OBTAIN HOSPITAL PRIVILEGES

First, contact the Department of Family Practice at your desired hospital(s) in April.

Provide:

- Proof of: Medical license(s), MSP number, CMPA coverage certificate, Record of immunizations
- Curriculum Vitae
- Certificates of Good Standing (eg. NRP, ALARM, ACLS, CARE)
- Possibly **another set of references** (TIP: if you leave this until June, your references may be on vacation, so better to get this done in May where possible)

You will be required to complete some online training modules, dependent on the Health Authority (eg. hand washing module, safe prescribing module)

HOW TO OBTAIN A MEDICAL SERVICES PLAN (MSP) BILLING NUMBER

For UBC residents, this process is initiated by the UBC residency program. Applications for an MSP billing number are administered through the BC Ministry of Health. Have the following ready:

- full licensure from the College of Physicians and Surgeons of BC
- copy of medical degree
- exam certificates

The application for an MSP billing number can be found [here](#).

Each practitioner enrolled with MSP is assigned a billing number consisting of two numbers:

- a practitioner number, which identifies the practitioner rendering the service; and
- a payment number, which identifies the person or group (e.g. clinic, hospital) to which payment is to be made.

The practitioner and initial personal payment numbers assigned to each physician are the same. However, if you practice in multiple settings, you may need to have more than one payment number or you may be asked to complete an assignment of billing number form if locuming, joining another practitioner or group, such as a clinic or hospital. In these situations, your services will still be submitted using your practitioner number, but your MSP fee-for-service payments will be paid to the other practitioner/group/clinic/hospital and then you will be paid by them based on the contract/agreement. If you decide to incorporate, your company will have a different payment number and you will assign your practitioner number to your company's payment number.



All claims submitted to MSP must include the practitioner number of the physician who performed the service; therefore, a physician (locum or otherwise) cannot bill under another physician's practitioner number. The practitioner whose number appears on the MSP claim assumes full responsibility for the service provided.

APPLYING FOR AN ICBC VENDOR NUMBER

An ICBC vendor number is used to identify the clinic or practitioner that ICBC pays for the treatment service, allowing for combined payment for all services that are included under the Teleplan submission process, along with a statement listing all paid reports or invoices. Payments can be received via electronic fund transfer (EFT), which is deposited directly to your nominated account. Keeping on top of your business accounts is easier when you're enrolled in the ICBC vendor system. For more information, review the physician page of the [ICBC website](#).

OWNERSHIP OF ELECTRONIC CHARTS

If you are joining a practice, it is important to have a data-sharing agreement. Make sure to get this in writing from the start. It will be critical to have this clearly defined if you decide to change work settings and want to bring patient charts with you to a new location.

Read more here: [CMA's advice about Data Sharing Agreements](#)

HOW TO SUBMIT BILLING

Most new grads will either work as a locum or join a practice where MSP Teleplan submissions are already set up. As a locum, you will need to complete an [assignment of payment form](#). This allows the practitioner for whom you are covering to receive your MSP fee-for-service payments, keep a portion for overhead, and cut you a cheque for the remaining amount.

In BC, all MSP, WorkSafeBC, and most ICBC claims are submitted using Teleplan, a web-based telecommunications system, over an encrypted Internet connection. 95% of claims are processed within 30 days, with the majority being paid within 14 days. Uninsured services such as medical-legal letters or reports, most insurance forms, off-work/school notes, or provision of medical services not covered by MSP are to be billed directly to the patient or requester of the service (eg lawyer, insurance company, etc).

All claims submitted to MSP must use the practitioner number of the physician who performed the service. You cannot bill under another physician's practitioner number. It is a legal requirement to submit claims under your own practitioner number and Doctors of BC negotiated benefits such as the CMPA rebate, CME benefit, CPRSP benefit, and Parental Leave Program are all calculated based on billings under your MSP practitioner number (regardless of which payment number these are processed under).

Payments are made bimonthly. MSP must receive claims for payment within 90 days from the date the service was rendered. If you are setting up your own practice, click to access the [application for Teleplan service](#).

[All MSP forms can be found here.](#)



BUILDING YOUR TEAM

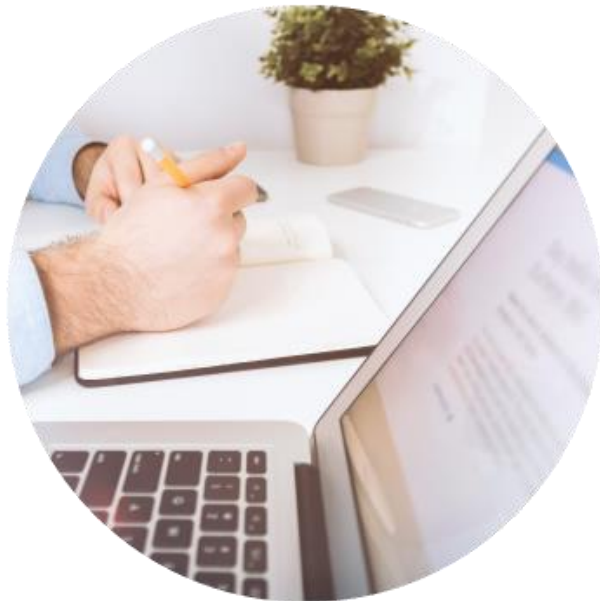
The most important step to take as you make this transition into life as an attending/staff physician is to build your team.

- Accountant
- Lawyer
- Banker
- Financial planner – Services such as MD Management or other private financial groups can help
- Insurance broker – Preferred rates are available through the Doctors of BC Benefits program.

This team will help you to figure out how your priorities in life can be matched with your financial goals and actions. They will help you do the following things (among others):

- Determine your insurance needs: life insurance, disability insurance
- Develop your will and appropriate powers of attorney
- Prepare for your first (often hefty) tax payments
- Plan your budget
- Establish a debt load reduction strategy
- Spend less than you earn

[Use this checklist to help you get started.](#)





WHAT TO KNOW ABOUT TAXES

It's important to remember that you are a doctor and not an accountant. Most doctors do not have accounting skills. Your time has value. You will almost certainly save money and time by employing the services of an accountant. Consult with an accountant early, preferably before you complete residency or soon after.

Whether you plan on doing locums, working in a health authority clinical setting, or are starting a new community Family Practice, you will be a self-employed professional and you will not have taxes or CPP deducted from your income at the source. This means you will need to put money aside to pay your taxes and CPP. If you are not incorporated, the tax owed on income earned over the rest of the calendar year following completion of your residency will be due at the end of April the subsequent year. After that initial payment, if you are not incorporated you will need to make quarterly tax installment payments to the Canada Revenue Agency (CRA) based on the expected tax that will be owing at the end of the year.

TIP: Put 1/3 of all funds paid to you into a separate account that you will not touch except to pay taxes owed. Put aside 1/3 of your revenue for taxes and CPP.

If you are incorporated, you will need to make monthly installment payments to CRA based on the expected tax that will be owing on the taxable net income of your corporation at your corporate year-end. Your corporate taxable net income essentially is the total income paid to your corporation minus business expenses that include your personal "salary" drawing from which your corporation will deduct and submit your personal income tax and issue you a T4 each year.

THE BASICS

A few basic things every Doctor should know about taxes:

- Consider opening a separate chequing account and a separate credit card for your business expenses. This allows for the separation of your business and personal expenses, which allows you to do your taxes much more easily and decreases your accounting costs!
- To put money aside for your taxes, create a tax savings account. If you are incorporated, this tax savings account may be a Business savings account. If you are not incorporated, you can use a separate Personal account to save money for your taxes. Some personal accounts have lower bank charges than Business accounts.



THREE BANK ACCOUNTS YOU WILL NEED

- **Personal chequing account** – for your personal expenses
- **A separate chequing account for business expenses** – everything in is income and everything out is a business expense. If you are incorporated, make this a Business chequing account. If you are not incorporated, make this a separate Personal chequing account under your professional name.
- **High-interest tax savings account** - If you are incorporated, make this a Business savings account. If you are not incorporated, make this a Personal savings account.

EXPENSES TO DISCUSS WITH YOUR ACCOUNTANT

It is important to discuss what expenses are deductible with your accountant. Professional dues are generally considered tax-deductible expenses.

- College of Physicians and Surgeons of BC
- Doctors of BC Dues
- BC Family Doctors Dues
- College of Family Physicians and BC College of Family Physicians
- Canadian Medical Protective Association (CMPA)

Remember to ask your accountant about:

- Moving expenses (if you move at least 40 kilometers closer to your new place of work)
- Computers if used mostly for work
- Phone expenses for portions used for work
- Expenses related to having a home office
- Work performed as a locum and using your home as the office base
- A portion of your car expenses related to business mileage
- Continuing medical education
- Bank charge (on business accounts) and Accounting fees
- Child care
- Other expenses





EXPENSES TO TRACK

Here are some expenses that you will need to track if you want to claim them as tax deductions:

1. Car expenses

- Your accountant will have specific suggestions for you that fit your circumstances
- Have an auto log book and track business kilometers and total kilometers for the year as well as the auto expenses by category: repairs, gas, parking
- When you are a locum with a “home office,” your mileage to work may be deductible. When working in your own office, mileage from your office to a hospital, nursing home or housecall, etc is generally considered deductible.
- One way to track total kilometers for the year is to take the odometer reading on January 1st each year and to keep a log book of business kilometers throughout the year.

2. Home office expenses – discuss with your accountant

INCORPORATION

- Seek advice from your accountant about whether incorporation makes sense for you
- The benefit is mainly tax deferral
- You must have a lawyer to help you incorporate, as per the requirements of the College of Physicians and Surgeons of [BC for a Medical Corporation](#)
If you are incorporated, you must register your corporation with WorkSafe BC





JOIN PROFESSIONAL ORGANIZATIONS

Join all your professional organizations. It will save you money, save you grief, keep you up to date, and support the advocacy work all the organizations do on behalf of all family doctors.

In most cases, it's a tax-deductible business expense. This means the net cost of these dues is less than what you pay.

ORGANIZATION	RESIDENT	FIRST-YEAR	GENERAL MEMBER
BC FAMILY DOCTORS	Free	\$238.00	\$475.00
DOCTORS OF BC	\$52	\$785.40	\$1,571.85
CANADIAN MEDICAL ASSOCIATION	Free	\$98.00	\$195.00
*COLLEGE OF PHYSICIANS & SURGEONS OF BC (LICENSE)			\$1,725.00
CANADIAN MEDICAL PROTECTIVE ASSOCIATION		Dependent on the type of practice	
*COLLEGE OF FAMILY PHYSICIANS OF CANADA	National	Chapter	Total
	\$823	\$225.00	\$1,048.00

*MANDATORY

BC FAMILY DOCTORS

- Joining BC Family Doctors is **FREE** for residents and a reduced cost for physicians in their first year in practice. If you join BC Family Doctors before you finish residency, you receive 6 free months of membership in your first six months of work.
- Access to our enhanced [Simplified Fee Guide](#) offers clear and concise information on the most common fee codes used by family doctors. Information is updated continually, ensuring that you can rely on the accuracy of this resource.
- Recently expanded, our searchable [Billing Question Library](#) houses 300+ frequently asked questions about billing for everyday scenarios.
- Our [Practice and Billing Tools](#) help with uninsured services, common diagnostic codes and offers easy-to-use printable billing records and posters for your office
- [Send us a Billing Question](#) - our physician billing experts are here to help not just physicians, but MOAs too – no question too simple or too complicated.



DOCTORS OF BC

- As a Doctors of BC member, you can access several [negotiated benefits](#) including CMPA rebates, CME funds, CPRSP, the Rural Education Action Plan, Parental Leave Program (PLP), and more.
- Reimbursement of most of your CMPA dues is also a negotiated benefit
- Learn more about the benefits of Doctors of BC membership on [their website](#)

COLLEGE OF FAMILY PHYSICIANS OF CANADA AND BC COLLEGE OF FAMILY PHYSICIANS

[The College of Family Physicians of Canada \(CFPC\)](#) is a professional association that represents family doctors across the country. The CFPC establishes the standards for and accredits family medicine residency training for medical schools in Canada. Family Physicians who are CCFP-certified can maintain these credentials through ongoing membership in the CFPC and your participation in the College's Maintenance of Certification Program (Mainpro+).

As a full member of CFPC, you automatically become a member of the provincial chapter, the BC College of Family Physicians (BCCFP). BCCFP supports family physicians in providing equitable, culturally safe, longitudinal care for all British Columbians. They provide leadership, support, advocacy, and continuing professional development for family physicians.

DIVISIONS OF FAMILY PRACTICE

Divisions of Family Practice are community-based groups of family physicians working together to achieve common healthcare goals. There are 35 Divisions of Family Practice around the province, representing more than 230 communities. Divisions work collaboratively with community and healthcare partners to enhance local patient care and improve professional satisfaction for physicians.

We encourage you to [find the Division in your region](#) and join, there is no cost to you.

The Divisions of Family Practice initiative is funded through the [General Practice Service Committee \(GPSC\)](#), one of four joint collaborative committees that represent a partnership of the Ministry of Health and Doctors of BC.



WHAT TO KNOW ABOUT BILLING

FEE-FOR-SERVICE PAYMENTS

Most physicians in BC are self-employed professionals who bill fee-for-service (FFS) for each individual service provided.

The [MSC Payment Schedule](#) is the list of fees approved by the Medical Services Commission payable to enrolled physicians for insured medical services provided to beneficiaries enrolled with the Medical Services Plan. For most services, the provincial Ministry of Health is responsible for the payment of insured services. WorkSafeBC and ICBC also pay for some services related to workplace injuries/illnesses and motor vehicle accidents, respectively.

THE ANATOMY OF A FEE-FOR-SERVICE BILL

For each clinical encounter, there are several essential billing components. All appropriate components must be completed when a claim is submitted for payment.

- **Fee code:** Indicates the type of service provided during the patient encounter. Fee codes are usually specific to the specialty. Common fee codes for in-office family medicine services are in-office visit codes, counselling codes, and prenatal visit codes. There are many others, including codes for specific procedures.
- **Diagnostic code:** This indicates the diagnosis for the medical assessment or procedure. BC uses modified International Classification of Diseases (ICD-9) codes





UNINSURED SERVICES

Even if a BC resident is insured under the Medical Services Plan (MSP) not all services provided by a doctor are covered, these services can be billed directly to the patient. Doctors of BC has established recommended fees for some uninsured (not covered) services to help guide doctors on setting a reasonable value for these services.

Members of BC Family Doctors can access our [Uninsured Services Package](#) to help bill for services that are not covered by the Medical Services Plan (MSP). The Uninsured Services Package includes a standardized invoice, a wall poster, a certificate of illness and absence as well as a tutorial about how to bill for uninsured services.

ALTERNATE PAYMENT ARRANGEMENTS

There are alternate payment arrangements (sessional, service contract, or salary) available for family doctors working in some settings. Historically, these have been for family doctors working with specific patient populations/ geographies or for specific programs (eg. hospitalist, ER).

More recently, BC has introduced contracts for New to Practice physicians and Group Medical Practice physicians. You can learn more about these newer contract options on the [Doctors of BC website](#).

Currently, BC Family Doctors and Doctors of BC are negotiating a new payment model for family doctors that is expected to be announced in late 2022.

If you are considering one of these new alternate payment arrangements, you should carefully review the contract deliverables, expectations on workload, and requirements to end the contract if not working out. You should also have the contract you are offered reviewed by the Doctors of BC Negotiations department (negotiations@doctorsofbc.ca) before signing any contract with a BC Health Authority. This is a service available to all physician members of Doctors of BC.



HOW TO LEARN ABOUT BILLING

As a member of BC Family Doctors, you can access the [Simplified Fee Guide](#) which outlines the most common fee codes used by family doctors for in-office, hospital, long-term care, and other settings.

Many of the billing resources highlighted in this document, including the Simplified Fee Guide, require a BC Family Doctors membership and associated login credentials to view. Membership is free to residents - to register contact BC Family Doctors at sgp.office@doctorsofbc.ca.

Watch this quick video about [How to Use the Simplified Fee Guide](#)

BILLING WEBINARS

BC Family Doctors and GPSC co-host a series of billing education webinars each year. Led by physician educators, the 90-minute webinar sessions help family physicians to increase confidence when billing, better support appropriate billing, improve understanding of fee rules, and bill for all eligible services.

These cover both select MSP fees and GPSC incentive fees. This series has five sessions which are offered twice each year in the fall and winter. Check the GPSC website for more details by [clicking here](#).

Session 1: MSP Basics – Introduction to Billing for Family Practice

Targeted to new-to-practice family physicians, and of interest to all family physicians, this session is designed as an introduction to family practice billing and will cover content including:

- General Preamble review
- Basic billing rules
- Basic visit (00100 series) and house calls
- Complete physical (00101)
- Counseling (00120)

Session 2: GPSC Billing Part 1

- GPSC Preamble overview
- GPSC Portal & Locum portal (14070, 14071)
- Overview of responsibilities for Most Responsible Provider as per GPSC preamble
- Locums
- Communicating with patients (14076, 14078, 14023)
- Conferencing about patients (14077, 14018, 13005)
- Advice to another provider (13005, 14019, 14021, 14022)



Session 3: GPSC Billing Part 2

- Complex Care (14033, 14075)
- Chronic Disease Management (14050, 14051, 14052, 14053)

Session 4: GPSC Billing Part 3

- Prevention/Personal Health Risk Assessment (14066)
- Mental Health (14043, 14044, 14045, 14046, 14047, 14048)
- Palliative Care (14063)
- Recap of definitions and what can be done face-to-face vs. non-face-to-face

BC FAMILY DOCTORS AND GPSC BILLING TIPS VIDEOS

Learn more about office procedures and service codes in short “Billing Tips” videos. These brief videos have been developed to increase confidence when billing common family practice fee codes, and provide a better understanding of the fee rules and appropriate billing to ensure comprehensive billing for these services.

- [Daily Volume Payment Rule](#)
- [Basic Office Visits](#)
- [Counselling Codes](#)
- [Immunizations and Injections](#)
- [Office Procedures](#)
- [Pre-operative Forms](#)
- [Family Practice Consultation Fee](#)
- [Complete Physical Examination](#)

OTHER

UBC Continuing Professional Development hosts a practice management conference each year entitled [Practice Survival Skills: What I Wish I Knew in My First Years of Practice](#)



BC FAMILY DOCTORS BILLING RESOURCES

Take a quick video tour of the BC Family Doctors Billing Resources by [clicking here](#).

SIMPLIFIED GUIDE TO FEES

As a member, you can access our [Simplified Guide to Fees](#) which outlines the most common fee codes used by family doctors for in-office, hospital, long-term care, and other settings.

BILLING QUESTION SERVICE

BC Family Doctors provides a [Billing Questions service](#) to assist our members to resolve billing questions. Our physician billing experts can help you:

- Accurately interpret fee rules (within the larger context of other fee items).
- Reduce missed or rejected billings.
- Increase your billing confidence
- Prevent inappropriate billing practices
- You can also access billing advice by emailing the [GPSC Incentives Program](#) and [Doctors of BC](#).

BILLING QUESTION LIBRARY

Recently expanded, BC Family Doctors houses a one-stop shop of 500 answers to frequently asked questions about billing for all areas of your family practice. Visit the Billing Question Library by [clicking here](#).

PRACTICE AND BILLING TOOLS

[This resource](#) will help you with uninsured services, locum tools, and common diagnostic codes and offers easy-to-use printable billing records including audit and adjudication information.

CONSULTATION AND REFERRALS

You can find additional resources to assist you with consultations and referrals including frequently asked questions in the [Billing Question Library](#).



LOCUM WORK

There are many advantages to working as a locum before making a long-term practice commitment. Locums range from short-term coverage for a vacation or long-term relief for maternity leave or a sabbatical. Working as a locum gives you an excellent opportunity to gain experience before committing to a long-term practice.

LOCUM & JOB LISTINGS

BC Family Doctors have a [locum and job listing service](#) that is free for members. This is the #1 Google search for family practice locums in BC. Our website averages 15,000 page views/month and the locum listings had 20,000 page views last year.

We also send a monthly locum newsletter to a large subscriber list of recent graduates and physicians looking for locum work.

LOCUM TIPS & TOOLS

You can find additional [resources](#) to assist you with setting up locums on the BC Family Doctors website.

- Locum contract template
- Locum-host checklist
- Provincial Assignment of Payment form



CONTINUING MEDICAL EDUCATION

To continue to have a license to practice medicine, under section 2-5 of the **College of Physicians and Surgeons of BC** Bylaws under the *Health Professions Act*, all physicians in BC must comply with requirements for continuing professional development (CPD), which requires the registrant to enroll in and be compliant with CPD expectations of either the Royal College of Physicians of Canada (RCPSC) or the College of Family Physicians of Canada (CFPC).

There are 2 levels of membership in CFPC:

- Full membership allowing continued use of CCFP designation (\$823)
- Non-member Mainpro+ participants (NMMP) supporting tracking of CPD requirements for licensure only (\$625)

Keep track of your Continuing Medical Education using Mainpro credits on the [College of Family Physicians of Canada website](#)

- Mainpro credits are monitored on a 1-year and 5-year cycle
- You are required to achieve 250 credit hours in each 5-year cycle with a minimum of 25 hours in any given year
- You can carry forward a significant amount of MainPro credits earned during residency into your first few years of practice

There are many great options for continuing your medical education after residency. The [BC College of Family Physicians](#) provides high-quality continuing professional development to support your evolving practice needs. [UBC Continuing Professional Development](#) is another great resource for in-person and online courses, programs, resources, and support.



RECAP

ADMINISTRATIVE STEPS REQUIRED TO PRACTICE FAMILY MEDICINE IN BC

- Contact Canadian Medical Protective Association (CMPA) to ensure resident coverage is transferred to the appropriate level the type of work and the location where you will be in practice
- Obtain a medical license through the College of Physicians and Surgeons of BC
- Obtain Medical Services Plan (MSP) practitioner and payment numbers
- Obtain ICBC Vendor number
- Join the College of Family Physicians of Canada and decide on Full membership vs. Non-member Mainpro + (NMMP)
- Obtain hospital privileges, if you plan to do hospital-based care
- Read more at www.practiceinbc.ca

ADDITIONAL RESOURCES

DOCTORS OF BC RESOURCES

- [Virtual Care resources and best practice guides](#)
- [Privacy Toolkit for BC Physicians](#)
- [Billing and Audit information](#)
- [Physician Health Program](#)

CANADIAN MEDICAL ASSOCIATION RESOURCES

You will also find the [CMA Joule website](#) useful. It has great tools for New in Practice physicians:

- [Practice Management Curriculum](#)
- [Locum Evaluation Checklist](#)
- [Practice Evaluation checklist and Action Plan](#)