### **Allied Health Care Professional Pilot Program**

## **Program Guidelines**

### **Background**

As part of the 2023 Physician Agreement, the parties have agreed that the Department of Health and Wellness (DHW) shall develop a pilot program to compensate family physicians who engage an allied health care practitioner (AHCP) to deliver health services to the physician's patients, under an arrangement approved by Nova Scotia Health (NSH) and the DHW.

## **Program Intent and Objectives**

The DHW and NSH have implemented a primary care strategy focusing on establishing health homes and networks. Collaborative care is key to this overall strategy and approach. The overall objective of the strategy is to ensure patients have access to the right provider at the right time to meet their clinical needs.

Over the past few years, the DHW has made significant investments in collaborative care teams, specifically focusing on expanding nursing roles in the primary care environment, as well as establishing new, NSH-funded, collaborative practices.

This approach has been successful in expanding NSH collaborative teams, however expanding access to nursing and AHCPs in private family medicine clinics has lagged.

As such, this program is designed to give private family practitioners an opportunity to increase patient access to care by bringing new nursing and/or AHCPs into their private office clinics in a patient volume—funded approach.

## Physician Eligibility to Apply to the Program

To be eligible to apply to this program, the physician must be:

- an actively licensed family medicine or general practitioner in active practice holding NSHA privileges
- working in a private office setting<sup>1</sup> (i.e., not in an NSHA turnkey practice)
- providing longitudinal family medicine with an attached patient panel
- must be providing more than a 0.5 FTE office-based practice, that is, \$150,000 in FFS, or more than 862.5 hours annually<sup>2</sup>

Individuals or groups of physicians may apply to this pilot program if all physicians in the group meet the above criteria, except the 0.5 FTE in-office requirement. Not all members of a group practice would have to meet the 0.5 FTE in-office requirement.

<sup>&</sup>lt;sup>1</sup> For clarity, physicians currently engaged in NSH co-leadership or service agreements who are working in privately owned and operated clinics are eligible to participate in this program.

<sup>&</sup>lt;sup>2</sup> Physicians who are working 0.5 FTE or more, but who are providing less than 0.5 FTE in the office based on system needs (i.e., they are providing hospitalist or ED services in a community) may be considered for this program at the sole discretion of the DHW.

## **Eligible Nursing and Allied Health Care Practitioners**

Proposals for regulated health professionals including, but not limited to, the following will be considered:

- Nurse Practitioners (NPs)
- Family Practice Nurses (RN)
- Licensed Practical Nurses (LPN)
- Audiologists
- Dietitians
- Physiotherapists
- Psychologists
- Registered Social Workers
- Speech Language Pathologists
- Occupational Therapists

This program is primarily focused on approving new providers joining family practices.

Practices that already have nursing or AHCPs may apply to this program and have existing providers converted to this program if:

- a) there is an interest in expanding hours/services of existing AHCP(s);
- b) there is a request for a new provider to join a practice with pre-existing providers and there is a desire to align remuneration approaches of all health providers; or
- c) there is an interest in changing current care pathways within a clinic to allow existing providers to work to full scope while no longer having to meet the MSI *Physician Manual* requirements under the traditional FFS billing approach.

#### **Assessment Criteria for the Pilot Program**

All proposals will be assessed on the information provided in the response to the Expression of Interest (EOI), against the following criteria:

- willingness to enter into pilot funding agreement
- new providers are working to full scope of practice
- physician commitment to ensuring either expanded patient access or additional patient attachment based on bringing a new provider into practice
- participation with evaluation and reporting requirements
- demonstrated patient need within practice/community
- physician developing a collaborative team (i.e., experience in supervision, teaching and/or mentoring providers)
- physician readiness to work in a collaborative manner with other providers
- proposed patient access and/or attachment benefit
- appropriateness of space within clinic or, if proposal does not include co-location, an overview of the required sites

## **Application and Review Process**

Applications will be accepted if submitted until 11:59 p.m. on Feb. 28, 2025.

A joint review team will be established consisting of representatives from:

- NSH
- DHW
- Doctors Nova Scotia

Nova Scotia Health Medical Affairs will provide EOI administration and selection process support.

All applications will be reviewed, and final approvals will be made by March 15, 2025.

# **Implementation Process**

Selected practices will be offered an opportunity to sign onto a pilot funding agreement offered by the DHW.

The NSH Practice Support Program will be offered to support participating practices with template service agreements, process optimization, etc. This support is not mandatory.