

NS to pay for doctor–patient phone calls

The contract that physicians in Nova Scotia recently ratified with the provincial government does not permit fee increases for two years but does support non–face-to-face patient care on an uncapped basis.

“We consider this a very important component of this contract and one area where we may be able to improve patients’ access to care while also improving patient convenience and satisfaction,” says Doctors Nova Scotia President Dr. Michelle Dow. “It’s a win-win for both patients and doctors.”

Under the terms of the deal, specialists can contact any patient via phone and will be paid \$28 for the call. Family physicians, for the same fee, can contact patients who are 65 years of age or older, or have mental illness or a chronic disease.

Although rankled by the restrictions on family doctors, Dr. Ajantha Jayabarathan, an assistant professor in the faculty of medicine at Dalhousie University, applauds the intent of the program. “This form of delivering health care fits into the principles of family medicine and strengthens the doctor–patient relationship,” says the family physician.

Jayabarathan points out that this form of outreach is commonplace for family physicians. “Hundreds of family doctors have offered this service free-of-charge to their patient population for decades and deserve this compensation,” she says.



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Specialists and family physicians will be paid \$28 per call.

Nova Scotia’s health department has set aside \$3 million in the two-year contract to cover telephone-related fees, and will conduct ongoing monitoring to assess progress and uptake of the initiative, which also includes payment for conversations between family doctors and specialists. Physician-to-physician telephone calls must be accompanied by a written request from the general practitioner and charted by both the specialist and the family doctor.

This aspect of the program is unwieldy and unfair to family physi-

cians, says Jayabarathan. “This telephone call provision offers the specialist \$60, while the family doctor, who has taken on the creation of the written referral, had their staff fix an appointment time with the specialist and then spent time on the call, must then follow up and institute treatment for the patient for \$28. Economically, this is not sustainable and not viable for the family doctor.” — donalee Moulton, Halifax, NS

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