

6. FINANCIAL SERVICES

6.1 OVERVIEW

The Financial Services Division of the DOHCS is responsible for the final step in the claims processing stream. It is the responsibility of this Division to administer the bi-weekly payments; process payments under various block-funded, alternative funding arrangements; process claim adjustments that cannot be processed through the claims processing system; process retroactive fee payments as required and pay the annual Canadian Medical Protective Association (CMPA) subsidy (refer to Section 6.3).

6.2 QUERIES

All cheques and direct deposits are controlled centrally by the Expenditure Control and Compliance Division of the Comptroller General's Office, Department of Finance. Inquiries to this office may be directed to the following email address; apinquiries@gov.nl.ca . However, it is recommended that payment inquiries should first be directed to the appropriate DOHCS staff as noted below.

Manager of Financial Operations
Accounting Services Section
Financial Services Division
Department of Health & Community Services
P.O. Box 8700
St. John's, NL A1B 4J6
(709)729-7956
AngelaDyke@gov.nl.ca

Accountant I
Accounting Services Section
Financial Services Division
Department of Health & Community Services
P.O. Box 8700
St. John's, NL A1B 4J6
(709)729-2199
LorettaMcLoughlin@gov.nl.ca

Alternate contact (709)729-6870

6.3 CANADIAN MEDICAL PROTECTIVE ASSOCIATION (CMPA) SUBSIDY

The Province provides an annual subsidy to physicians for the CMPA medical malpractice insurance premiums. CMPA mails the Acknowledgment forms in mid December and these forms are the required documentation to support application for the subsidy. The CMPA Acknowledgment must be mailed to the Financial Services Division on the date of the second claims submission cut-off in February and payment will be made on the second bi-weekly payment in March. Specific dates are communicated in early January of each year in an MCP newsletter.

The policy reimburses physicians for 90% of the cost of their CMPA premiums in excess of the basic General Practice (CMPA code 35) rate, subject to a maximum physician cost of \$5,000.

All fee-for-service physicians in active practice throughout the entire calendar year are eligible. Salaried physicians who converted to or from fee-for-service during the year are eligible for the months while in fee-for-service practice. Physicians who terminate practice prior to the end of the year are not eligible; exceptions include, maternity leave, retirement and sabbatical leave.

6.4 FINANCIAL STATEMENTS

Fee-for-service physicians are self employed operating in either sole practitioner or group practices operating at arms length to Government. It has been noted that many practices have incorporated as allowed under the *Medical Act, 2005*. Government has no legal obligation to provide statements of earnings (or T4's) to self employed individuals, limited companies or incorporated legal entities.

All MCP claim details and financial adjustment information is provided to physicians in the bi-weekly remittance statements. Production of remittance statements is detailed elsewhere in this manual, refer to Section 10.8—Claims Processing, Remittance Statement—Electronic Media.