LOCUM CONTRACT TEMPLATE

This contract is between:			
	and		
The Hiring Physician or Medical Practice		The Locum Physician	
The Locum Physician will work in the Hiring F	Physician's	medical practice from:	
to (dav/mon/vr) (dav/mon/vr)	·		

Locum Physician Responsibilities

The Locum Physician agrees to provide physician services to the patients of the Hiring Physician during the term of this Agreement as outlined in Schedule A.

The Locum Physician confirms that:

- (a) S/he is now and will remain during the term of this agreement a licensed and registered physician lawfully entitled to practice medicine in the Province of British Columbia.
- (b) S/he is now and will remain a member in good standing in the Canadian Medical Protective Association.

The Locum Physician agrees to comply with the usual office procedures of the Hiring Physician including procedures with respect to billing and accounting practices that are consistent with the professional and ethical standards set out by the College of Physicians and Surgeons of BC.

Hiring Physician Obligations

The Hiring Physician agrees:

- (a) That the Locum Physician may use the medical offices and related facilities of the Hiring Physician.
- (b) To provide the usual equipment, materials, examination rooms and drugs which are necessary or desirable to provide care to the patients of the Hiring Physician.
- (c) To provide up-to-date emergency medications and equipment as mandated by the College of Physicians and Surgeons of BC policy guidelines.
- (d) To provide reception and office staff at the level normally available to the Hiring Physician.
- (e) To provide access to patient records and related information as is necessary or desirable to permit the Locum Physician to perform physician services for the patients of the Hiring Physician.
- (f) To maintain an insurance policy (or policies) respecting liability for personal injury or property loss. Note: Medical malpractice insurance must be maintained by the Locum Physician.
- (g) To assume responsibility for the follow-up of all patient care, patient records, test reports, consults and referrals generated by the Locum Physician.

Payment Terms

The Locum Physician will record on a day sheet or billing program the fee codes or fees charged and diagnostic codes for all services rendered on behalf of the Hiring Physician. Fees charged will be in accordance with MSP regulations and commonly accepted medical practice policies.

Agreed to work location(s), work	k arrangements and payment details are	specified in Schedule A.
Cheques will be made out to:		
	(Indicate personal name of Locum Physicial on locum preference)	n to be used or corporate name to be used, based
Cheques will be mailed to:		_
		_
The terms of this contract and the	he agreements specified in Schedule A a	re agreed to by:
SIGNATURES		
Hiring Physician:		
Name:	_ Signature:	Date:(day/mon/yr)
Locum Physician:		
Name:	_ Signature:	Date: (day/mon/yr)

SCHEDULE A

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From:	To:
(day/mon/year)	(day/mon/year)

Work Location(s)

e.g. for office(s), clinic(s), extended care/ nursing home facility(s), etc.

Office/ facility: Address:	2.	Office/ facility: Address:	

Weekly Schedule

Day	Hours (write in hours)	Location (circle appropriate location)
Monday		Location 1 Location 2
Tuesday		Location 1 Location 2
Wednesday		Location 1 Location 2
Thursday		Location 1 Location 2
Friday		Location 1 Location 2
Saturday		Location 1 Location 2
Sunday		Location 1 Location 2

Practice Requirements

1.	On-call work required:	□ None □ Yes Details
2.	Hospital work (surgical assists, hospitalist shifts, ER shifts):	□ None □ Yes Details
3.	Obstetrical coverage:	□ None □ Yes Details
4.	Extended care/nursing home and/ or home visits:	□ None □ Yes Details

ncial Terms
Office-based billings split: (70:30 split recommended) Includes: • MSP, WorkSafeBC, ICBC • Non-insured visits (cosmetic procedures, out-of-province patients) • In-office procedures, lab/tray fees • In-office phone calls
Form fees: (90:10 split recommended) Includes: Other
Out of office billings: (100% to Locum recommended) e.g. extended care visits, home visits, ER billings, hospital billing, obstetrics, out of office billed hospital/ care facility phone calls
GPSC fees:(Recommended that this be discussed and agreed to between the Hiring physician & locum for locum terms of 6 months continuous duration or longer. In general the percentage split should be commensurate with length of locum contract) e.g. chronic disease management, complex care, prevention fees, palliative care fees, mental health fees
Guaranteed minimums (if agreed) The following amounts will be paid if net billings are less than the specified minimums agreed to below: (select one of the 3 options below if a guaranteed minimum has been agreed to) Per week \$ Per day \$ Per hour \$ Note: Daily or hourly minimums will be calculated daily and not averaged over the term of the locum agreement.
Payments owed to the Locum physician will be paid by the Hiring physician every month or within 2 weeks of the completion of this contract. Any outstanding payments will be subject to interest charges of 2% per month. Payments will be based on: billings submitted (suggested for contracts of 1 month or less) - or - billings actually paid (suggested for contracts greater than 1 month)
Any retroactive payments received by the Hiring physician for services performed by the Locum physician will be subject to the terms agreed to & documented in this Schedule. Payments will be paid to the Locum physician within 30 days of receipt of payment from MSP. Any outstanding payments will be subject to interest charges of 2% per month.
r Agreements & Notes

Initials: Hiring Physician: ____ Locum Physician: ____

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LOCUM CHECKLIST

This checklist is meant to ensure that the following information and/or items are reviewed/ provided to the Locum physician prior to the Hiring physician leaving.

<u>Office</u>
□ Location of Parking/ parking pass if required
□ Keys given to Locum physician
□ Location of the following is known:
 □ In-office emergency kit □ Procedural equipment (i.e. needles, vaccines, bandages/minor wound materials, liquid nitrogen, suture removal kits, PAP, IUDs, mole removals, etc.) □ Staff lunch room, fridge, microwave, etc. □ Inbox/outbox for paperwork
□ Booking practices have been reviewed, e.g. how many patients/hour, time allotted for regular visit/CPX/PAP, sameday bookings
□ Staff contact information (in case of emergency)
□ Pager and/or cell phone & numbers
□ Call group details
EMR / Computer / Contact Details
The following have been provided:
□ User IDs & passwords □ EMR □ Computer □ Wireless
□ EMR tutorial
Work Outside of the Office Hours
The following have been provided:
□ A list of the usual visitation days for extended care/ nursing home facilities
□ On call requirements
□ A list of patients who may require house calls