

Appendix 3. Consolidated Extraction Results

	Year Introduced	Scope of Availability	Number of Providers/Clinics	Nature of Clinic Funding	Basis of Funding Level	Basis of MD/NP Compensation	MD/NP Compensation Source	Basis of RN Compensation	RN Compensation Source	Team Supports	Eligibility Requirements	Sources
ALBERTA												
Compensation Models												
Academic Medicine and Health Services Program	2017	Clinic/organisation specific	78 family physicians; 14 clinics	Block	Hours	Time	University	-	-	-	For physicians affiliated with Alberta's Faculties of Medicine	[1-3]
Blended Capitation Clinical Alternative Relationship Plan	2016	Province-wide	-	Blended	Population, Volume	Time	Clinic	-	-	-	Must be an office-based clinic offering comprehensive primary care services with strong administrative capabilities.	[4,5]
Clinical Alternative Relationship Plan (ARP)	1999	Clinic/organization specific	1924 family physicians; 69 clinics	Block	Population, Volume	Time	Clinic	Time	Clinic	Single basket of funding intended to cover overhead costs, hire other health care providers, and pay physicians	Clinics must register interest among at least 80% of their physicians to be eligible; intended for physician groups providing specific program services.	[2,6-10]
Fee-for-Service	1935	Province-wide	90.7% of payments to family physicians	Billings	Volume	Activity	Alberta Health Services	Activity	-	-	-	[11-13]
Practice Models												
Community Health Centres	2008	Province-wide	148 clinics	-	-	-	Clinic/Alberta Health Services	-	-	-	-	[14,15]
Family Care Clinics	2012	Clinic/organisation specific	3 clinics	Block	Budget	Time	-	Time	-	Grant funding may be available to support clinic renovations to facilitate co-location of care providers. AHS will provide funding for Information and Medical Technology solutions. Additional funding may be included in clinic Business Plans for consideration.	Minimum community size of 2500 population or, in remote areas with population less than 2500, FCCs can use a centralized model. FCCs have defined minimum team compositions (1 FP/NP, 2 additional service providers, 1 business manager)	[16-19]
Primary Care Networks	2005	Province-wide	42 networks	Roster	Population, Volume	Activity/Time	Alberta Health Services	Time	Clinic	Clinic funding can be used toward a variety of one-time/ongoing costs associated with operations, including staffing and delivery of services. Supplementary funding supports enhanced staffing, space, and equipment.	-	[20-26]
BRITISH COLUMBIA												
Compensation Models												
Alternative Payment Programs (Service/Salary/Sessional)	1986	Province-wide	19.4% of payments to family physicians	Block	Hours	Time	Health Authority	Time	Regional Health Authority	All service contracts must include clear and specific provisions that identify responsibilities of Agency and Physician/Physician Group regarding provision of support, technology, materials, and supplies	Physicians/NP (solo or group) may apply for an APP contract if they are part of a Primary Care Network. APP contracts are intended for 'all-in' clinical programs and services and clinics not well supported to fee-for-service payments.	[13,27-31]
Fee-for-Service	-	Province-wide	80.6% of payments to family physicians	Billings	Volume	Activity	Medical Services Commission	-	-	-	-	[13,32]
Population-Based Funding	1999	Clinic/organisation specific	9 clinics	Blended	Population+ Volume	Patients + Activity	Clinic	-	Clinic	-	Clinics must possess an enhanced EMR (Telus Wolf, IntraHealth Profile, Telus Med-Access)	[32-34]
Value Based Compensation	2016	Region specific & Clinic/organisation specific	3 clinics	Roster	Population	Patients	-	-	Clinic	Funding is intended to contribute to overhead expenses, including professional fees and hiring of other health professionals.	EMR requirement (MOIS only)	[32,33]
Practice Models												
Independent Community Health Centres	1970s	Province-wide	29 clinics	-	-	-	-	-	-	-	-	[35,36]
Health Authority Community Health Centres	2018	Province-wide	100 clinics	Block	Hours	Time	Health Authority	Time	Health Authority	-	-	[36,37]
NP Primary Care Clinic	2020	Region specific	4 clinics	Block	Hours	Time	Ministry of Health	-	-	-	-	[38,39]
Primary Care Network (Nurse in Practice Program)	2018	Province-wide	40 clinics	-	-	-	-	Time	Health Authority	To aid clinics in preparing for adding an RN, the PCN will provide \$17,940 to clinic overhead for expenses related to lease, infrastructure (computer, workstation, EMR access). Additionally, clinics will receive training for onboarding the RNs.	-	[31,40-46]

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Family Medicine New Brunswick	2017	Province-wide	9 clinics	Blended	Population/Volume	Patients/Activity	-	Time/Activity	Clinic	FMNB clinic groups receive an annual stipend to help hire nursing staff and free access to the EMR.	Family physicians licensed by the College of Physicians and Surgeons of New Brunswick and privileged by one of the regional health authorities (Horizon or Vitalité). Physicians joining/establishing a FMNB practice model cannot work in walk-in clinics.	[66,76-78]
NEWFOUNDLAND AND LABRADOR												
Compensation Models												
Alternative Billing System Arrangements	-	Province-wide	22.5% of family physician payments	Salary	Hours	Time	Medical Care Plan	-	-	-	-	[13,70]
Fee-for-Service	-	Province-wide	77.5% of family physician payments	Billings	Volume	Activity	Medical Care Plan	-	-	-	-	[13]
Practice Models												
Community Health Centre	2012	-	3 clinics	Salary	Hours	Time	-	-	-	-	-	[24]
Family Care Team	2020	Province-wide	8 clinics	Billings	Volume	Time	Health Authority	-	-	-	-	[79-83]
NP-Led Clinic	2022	Clinic/organisation specific	1 clinic	Billings	Volume	Activity	Patients	-	-	-	-	[84]
Primary Health Care Teams	2006	Province-wide	clinics	Billings/Salary	Population	Activity/Time	Health Authority	-	Health Authority	Administrative support for human resources, finance, IT, and communication provided through existing regional health authority structures; team building, interdisciplinary education, professional development, collaborative practice supports may be available.	The maximum population base for the establishment of a team must be low enough to minimize challenges around continuity of service/care and communication that can occur when serving large populations and allow for a sufficiently large population to support the provision of a broad range of services. Dependent on the population profile, geography and availability of providers, a minimum of 6,000 people to a maximum of 25,000 people is desirable.	[24,27,55,85]
NORTHWEST TERRITORIES												
Compensation Models												
Alternative Payment Plans (Salary, Sessional)	2001	Territory-wide	All but one physician	Salary	Population	Time	Health and Social Services Authority	-	-	Territorial EMR is shared by all healthcare providers	-	[53]
Fee-for-Service	-	Territory-wide	1 physician	Billings	Volume	Activity	Health and Social Services Authority	-	-	-	-	[53]
Practice Models												
Community Health Representatives	-	Territory-wide	-	-	-	-	-	-	-	-	-	[53]
Integrated Care Team	2020	Clinic/organisation specific	4 clinics	Blended	Population	-	Health and Social Services Authority	-	-	-	-	[86-88]
Yellowknife Primary Healthcare Clinic	2012	Region specific	1 clinic	-	-	-	-	-	-	-	-	[53]
NOVA SCOTIA												
Compensation Models												
Blended Capitation	2019	Clinic/organisation specific	19 doctors	Roster	Population	Patients	Health Authority	Time	Clinic	-	Clinics must have a minimum of 4 family physicians, use a shared EMR, and be well-established (at least 3-4 years old). Physical co-location is not required but patients must be able to access care in-person. Minimum office hours stipulated.	[89-92]
Clinical/Academic Funding Plan	2005	Clinic/organisation specific	2 clinics	Block	Budget	Activity/Time	University	-	-	-	Physician must be an employee of Dalhousie University	[93,93]
Collaborative Alternative Payment Plan	2010	Province-wide	-	Block	Hours	Time	-	-	-	-	-	[94]

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Comprehensive Care Alternative Payment Plan	2007	Province-wide	-	Block	Hours	Time	-	-	-	-	-	[31,95,96]
Fee-for-Service	-	Province-wide	39.2% of family physician payments	Billings	Volume	Activity	Medical Services Insurance Program	-	Clinic	-	-	[13,95]
Sessional	2016	-	-	Block	Hours	Time	-	-	-	-	Sessional allocations are approved only to support services where the fee-for-service model does not adequately reflect the services being provided, including collaborative family practice.	[70,97,98]
Practice Models												
Collaborative Family Practice Team	2015	Province-wide	96 clinics	Block	Hours	Time	Health Authority	-	Health Authority	-	-	[18,96,99-101]
Primary Care Team	pre-2014	Province-wide	-	Block/Billings	Population/Volume	Time/Activity	Health Authority	Time	Health Authority	-	-	[24,56]
NUNAVUT												
Compensation Models												
Alternative Payment Plans	-	Territory-wide	21 family physicians	Block	Hours	Time	Department of Health	-	-	-	-	[102]
Practice Models												
Community Health Centre	1950s	Territory-wide	22 clinics	Block	Hours	Time	Department of Health	Time	Department of Health	-	To work in Nunavut, community health nurses must meet specific education and work experience requirements and be eligible to register with the Registered Nurses Association of the Northwest Territories and Nunavut.	[103-106]
Regional Health Centre	-	Region specific	2 clinics	Block	Hours	Time	Department of Health	Time	Department of Health	-	-	[103]
ONTARIO												
Compensation Models												
Alternative Funding Plans	-	Province-wide	-	Blended	-	-	-	-	-	-	Family physicians providing HIV, palliative, or elder care.	[107,108]
Blended Capitation	1999	Province-wide	36% of family physicians	Blended	Population + Volume	Patients + Activity	-	-	-	-	Physicians working in Family Health Network and Family Health Organisation practices.	[24,31,107,108]
Blended Salary	2006	Province-wide	22% of family physicians	Blended	Hours + Population	Time + Patient	-	-	-	Funding for purchase and implementation of an approved EMR/clinic management system.	For physicians who are employed by either Community or mixed-governance Family Health Team	[24,31,53,108,109]
Enhanced Fee-for-Service	2003	Province-wide	-	Blended	Volume + Population	Activity + Patients	-	-	-	-	Physicians working in Comprehensive Care Model or Family Health Group practices.	[31,108]
Fee-for-Service	1970s	Province-wide	30% of family physicians (only source of compensation)	Billings	Volume	Activity	Ontario Health Insurance Plan	Salary	Clinic	-	-	[107,108,110]
First Nations Agreement	-	Region specific	-	-	-	-	-	-	-	-	Provision of comprehensive primary care physician services to select First Nations communities.	[107]
Rural Northern Physician Group Agreement	1996	Region specific	38 groups	Blended	Hours + Population	Time + Patients	-	-	-	Partial funding for purchase and implementation of an approved EMR/clinic management system.	Groups of 1-2 or 3-7 physicians providing care to the entire population of a defined rural community in Northern Ontario.	[107-109,111]
Salaried	-	Province-wide	-	Block	Hours	Time	-	-	-	-	For physicians working in Community Health Centres	[108]
Practice Models												
Aboriginal Health Access Centres	1995	Clinic/organisation specific	10 clinics	-	-	Time	-	-	-	-	-	[27,110,112-114]
Comprehensive Care Model	2005	Province-wide	331 clinics	Billings	Volume + Population	Activity + Patients	-	-	-	-	For solo physicians who commit to providing comprehensive primary health care and a weekly block of after-hours services to enrolled patients.	[107-109,115]
Community Health Centre	1979	Province-wide	74 clinics	Block	Hours	Time	Health Authority	Time	Health Authority	Operational funding from the Ministry of Health and Long-Term Care	-	[20,24,27,108,109,113,115,115-119]

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Family Health Group	2003	Province-wide	237 clinics	Blended	Volume + Population	Activity + Patients	-	-	Clinic	-	Groups of 3-4 physicians providing comprehensive health care and after-hours services to enrolled patients.	[107-109,113,115,118]
Family Health Network	2001	Province-wide	20 clinics	Blended	Population + Volume	Patients + Activity	-	-	Clinic	Partial funding is available for purchasing and implementing an approved EMR/clinic management system and an administrator.	6 or more physicians providing comprehensive care during regular office hours and after-hours.	[107-109,115,118]
Family Health Organization	2006	Province-wide	483 clinics	Blended	Population + Volume	Patients + Activity	-	-	-	Partial funding is available for purchasing and implementing an approved EMR/clinic management system and an administrator.	6 or more physicians providing comprehensive care during regular office hours and after-hours.	[31,107-109,115]
Family Health Team	2005	Province-wide	185 teams	Blended	Volume + Population	Activity + Patients/ Time + Patients	-	Time	Clinic/Ministry of Health and Long-Term Care	Funding for an Executive Director and EMR	-	[24,108,109]
GP Focused Practice	2004	Clinic-specific	-	Block	Hours	Time	-	-	-	-	Family physicians providing HIV, palliative, or elder care.	[31,107]
Group Health Centre	1963	Clinic specific	4 clinics	Roster	Population	Patients	Clinic	Time	Clinic	-	-	[107,116,120]
Homeless Shelter Agreement	-	Clinic/organisation specific	3 shelters	-	-	-	-	-	-	-	Physicians providing primary health care services to homeless populations.	[107]
NP-Led Clinics	1970	Province-wide	25 clinics	Block	Hours	Time	Ministry of Health and Long-Term Care	Time	Ministry of Health and Long-Term Care	-	-	[27,109,121-123]
Toronto Palliative Care Associates	-	Region specific	-	Billings	Volume	Activity	-	-	-	-	-	[107]
PRINCE EDWARD ISLAND												
Compensation Models												
Alternative Payment	-	Province-wide	37.1% of family physician payments	Block	Hours	Time	Health PEI	-	-	-	-	[13,70]
Fee-for-Service	-	Province-wide	62.9% of family physician payments	Billings	Volume	Activity	Health PEI	-	-	-	-	[13]
Practice Models												
Family Health Centre	2002	Province-wide	6 clinics	Block	Hours	Time	-	-	-	FHCs are linked to the provincial health information system and have practice management software integrated.	-	[24,70,124]
Patient Medical Home	2022	Province-wide	16 clinics	-	-	-	-	-	-	-	-	[125-127]
Primary Care Network	2010	Province-wide	5 networks (12 clinics)	-	-	Activity/Time	-	Time	Health PEI	-	-	[24,55,125,128]
QUEBEC												
Compensation Models												
Blended Payments	2015	Province-wide	-	Blended	Hours + Volume	Time + Activity	RAMQ	-	-	-	-	[70]
Fee-for-Service	-	Province-wide	72.4% of payments to family physicians	Billings	Volume	Activity	RAMQ	-	-	-	-	[13]
Lump Sum	-	Province-wide	-	Roster	Population	Patients	RAMQ	-	-	-	-	[70]
Salary	-	Province-wide	-	Block	Hours	Time	RAMQ	-	-	-	-	[129]
Practice Models												
Family Medicine Group	2002	Province-wide	370 clinics	Blended	Volume + Population	Activity / Time	RAMQ	Time	CISSS/CIUSS or MSSS	Funding available to support staffing, premises, and IT.	-	[20,24,129-135]
Family Medicine Group Network	2015	Province-wide	50 networks	Blended	Volume + Population	Activity / Time	RAMQ	Time	CISSS/CIUSS or MSSS	Funding and human resources (nurses, social workers, nutritionists, occupational therapists employed by IHSSCs) available to support provision of care to local populations.	Clinics must apply to Ministry of Health to obtain network access designation.	[129,134,136,137]

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(Urban) Local Community Service Centre	1970s	Province-wide	147 clinics	Block	-	Time	RAMQ	Time	CISSS/CIUSS or MSSS	-	-	[55,135]
University Family Medicine Group	2017	Province-wide	39 clinics	Blended	Volume + Population	Activity / Time	RAMQ	Time	MSSS	-	-	[13]
SASKATCHEWAN												
Compensation Models												
Alternative Payment Plan	2001	Province-wide	52.2% of payments to family physicians	Block	Hours	Time	Health Authority	-	-	-	-	[24,55,70,98]
Fee-for-Service	-	Province-wide	47.8% of payments to family physicians	Billings	Volume	Activity	Ministry of Health	-	-	-	-	[13,55,70]
Northern Medical Services Agreement	-	Region-specific	-	Block	Hours	Time	University of Saskatchewan	-	-	-	For physician working in remote northern communities.	[70]
Practice Models												
Collaborative Emergency Centre	2012	Province-wide	5 clinics	-	-	-	-	-	-	-	-	[24]
Community Clinic	1962	Province-wide	5 clinics	Block	Hours	Time	-	Time	-	-	-	[138,139]
Primary Care Network Team	2002	Province-wide	40 clinics	Block	Hours	Time	Health Authority	-	-	-	-	[139-141]
Primary Healthcare Team	2012	Province-wide	30 clinics	-	-	-	-	-	-	-	-	[20,55]
YUKON												
Compensation Models												
Alternative Payment Plan	-	Territory-wide	34.1% of payments to family physicians	Block	Hours	Time	Health Services Branch	-	-	-	APP providers shadow bill the Yukon Health Care Insurance Plan.	[13,70]
Fee-for-Service	-	Territory-wide	65.9% of payments to family physicians	Billings	Volume	Activity	Yukon Health Care Insurance Plan	-	-	-	-	[13,70]
Practice Models												
Community Health Nurse	-	Region-specific	4 communities	-	-	-	-	Time	Department of Health and Social Services	-	Registered nurses with an expanded scope of practice.	[142]
Community Health Centre	1940s	Territory-wide	14 clinics	-	-	-	-	Time	Department of Health and Social Services	-	Registered nurses with an expanded scope of practice.	[142]

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