

## Blended Capitation versus Fee For Service



The clinic receives funding each year to look after a group of patients who have signed an **Affiliation Agreement** with their doctor.

Some patients won't need to come in. Others may come in several times. The clinic is paid to be there for them either way.

This group of patients is called a "panel".



The clinic receives funding for the doctor seeing each patient as they come in.

Pay is for the service provided and the time spent.

The more patients that are seen, the more funding the clinic gets.



The patient is looked after by the member of the *team* who can most help them with their issue.



The doctor MUST see or talk to the patient in order to get paid every time they come to the clinic.



Visits can be done in a number of different ways, over the phone, video conference, secure messaging, or in person.



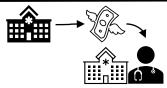
Most visits are done in person, with the doctor seeing the patient directly – "whites of the eyes".



Care is provided where the patient needs it in Alberta.



Care is provided in the clinic.



If a patient visits a family doctor at another clinic, some of their funding is transferred to that doctor. This is called "**Negation**".



If a patient visits a family doctor at another clinic, that doctor is paid for the service they provide and the time spent.



Patients can talk to and book with the team at their *Medical Home* base. They can access their doctor, or the team member who is able to provide them the most help with their issue.



Patients must see or talk to the doctor first as a gateway to the rest of the clinic team. Most visits with the team will also require a doctor appointment.



Patients are required to sign an *Affiliation Agreement*. This states that their doctor and the team at their clinic will be supported to provide their care. In turn, the patient is asked to *contact the clinic first* when they need care.



Patients are seen at the discretion of the doctor or clinic.