



Application Form

Rural Physician Incentive Program (RPIP)

Apply within the first 90 days of **EACH YEAR** of practice.

Applicant Information:

Full Name: _____
Last First Middle
 Email Address: _____ Phone Number: _____
 Mailing Address: _____ Postal Code: _____
 MINC number: _____

Education:

Country of medical degree: _____
 University of postgraduate medical education: _____
 Country of postgraduate medical education: _____
 Date of completion of postgraduate education: _____

First time applicants:

I have included a copy of my certificate of completion of residency/internship training with my application form.

Incentive:

I am submitting an application for:

- Year 1* - \$10,000
- Year 2 - \$10,000
- Year 3 - \$12,000
- Year 4 - \$15,000

Note: a new application for RPIP must be submitted each year.

Community & Practice Information:

Rural/Remote Sask. Community	Start Date	End Date	Full-time/Part-time, Visiting, or Locum	Payment Modality (FFS, Shadow billing, contract)

Clinic/Manager Contact Information:

Disclosure - Initial each clause to acknowledge each statement:

Please apply within 90 days. Adjudication of the RPIP will be made by the Physician Recruitment Agency of Saskatchewan (PRAS). Physicians must submit an application within 90 days of starting each year of practice. A new RPIP application is required for each year of service.

The start date for the calculation of the incentive will be the date that the physician commenced their year of practice in an eligible community, provided the application is received within 90 days of the commencement of practice. If a late application is received, the start date shall be 90 days prior to the date of application.

___ I have read and understand the RPIP criteria as outlined in the Program Parameters.

I agree that my information may be shared with the Saskatchewan Medical Association (SMA), Saskatchewan Health Authority, Northern Medical Services and Saskatchewan Ministry of Health officials to verify that I meet the eligibility criteria set out in the program parameters.

___ I acknowledge that if I have been a prior recipient of the SMA's Rural Practice Establishment Grant (RPEG) I will only be considered for years three (3) and four (4) of RPIP.

I agree that the Ministry of Health/Physician Recruitment Agency of Saskatchewan (PRAS) reserves the right to change, amend, modify, suspend, continue or terminate all or any part of the program, either in an individual case or in general, at any time without notice.

___ I agree that the Ministry of Health may release my fee-for-service and/or shadow billings to PRAS to confirm service volumes and full-time status.

Your application will be adjudicated by PRAS after 12 months of service are complete to confirm that you have met the service criteria over the year. If you qualify, you may receive the incentive after the end of the 12 months service period.

I hereby certify that all information and statements made in this application are true and complete to the best of my knowledge and belief.

Signature of Applicant _____ Date: _____

Submit completed application to:

saskdocs, 100-311 Wellman Lane, Saskatoon, SK S7T 0J1, or

Email: info@saskdocs.ca or Fax: 306-933-5115

PRAS Adjudication (Internal Use Only):

Date completed application received by PRAS: _____

Application received within first 90 days of practice (eligibility date 90 days prior to date completed application is received):

Yes No

Date confirmation email sent to applicant: _____

One year eligibility date: _____

Applicant contacted to confirm service after 12 months. Date: _____

RHA and/or Ministry confirmation received. Date: _____

- Successful completion of post-graduate or internship training in Family Medicine within the previous twenty-four (24) months for CMGs or thirty-six (36) months for IMGs from the date practice is first established
- Holds licensure in Saskatchewan with the College of Physicians and Surgeons of Saskatchewan (CPSS) at the time of application
- Has established a full-time practice or is providing visiting or locum serviceⁱ, during the previous twelve (12) months, in a rural Saskatchewan community with a population of 10,000 or less and are currently practicing in a rural Saskatchewan community with a population of 10,000 or less. For greater clarity, the minimum practice requirement to qualify for RPIP is practice in at least 11 of the 12 months with a minimum of 24 days per year.
- Practice is in a collegial primary care team that is either physically or virtually connected in a group practice environment and
- The practice is in alignment with and supported by the Saskatchewan Health Authority and the community is deemed to be a sustainable practiceⁱⁱ.

Retention Incentive Total: _____

Eligibility Year: Year 1 • Year 2 • Year 3 • Year 4 Period: _____

Adjudicated by: _____ Date: _____

Confirmed by: _____ Date: _____

Application: Approved Denied

Approved by: _____ Date: _____

Notes: _____

Approval letter sent to RPIP recipient Date: _____

Direct Deposit information and SIN received Date: _____

Payment request sent to Central Accounts Payable Date: _____

ⁱ Physicians providing visiting or locum services will receive pro-rated payment based on time worked in an eligible rural community as reported by the Saskatchewan Health Authority.

ⁱⁱ Sustainable practices are those structured or networked in a manner that provides physicians with collegial peer support, work-life balance, and reasonable call schedules.