



Other Payments 101

In addition to salary and call stipends, there are other forms of payments that you are eligible to receive as part of residency training that occur at different times throughout the academic year.

- 1) CMPA Reimbursement (see Article 30)
 - AHS reimburses each resident physician \$1,500 each year
 - Reimbursement occurs at rate of \$125/month each month you are in active training (if you are on leave for an entire calendar month you will not receive that month's payment)
 - This is not considered 'employment income' (so it does not go through AHS payroll). The payments are processed by AHS Accounts Payable – you will receive a remittance advice for the amount that will be direct deposited into your bank account with the date of deposit.
 - If individuals have not received their eligible reimbursement should contact AHS (U of A – Academic Medicine; U of C – Medical Education)
- 2) Practice Stipend (Article 35.04)
 - All resident physicians receive one Practice Stipend for each year of residency training
 - The Practice Stipend is paid through AHS Payroll (it is considered employment income) on the 1st paycheque in September of each year
 - If a resident physician is on a leave of absence on September 1 – no practice stipend will be paid. The individual will receive it next year.
- 3) Chief Resident Physician Stipends (Article 33)
 - Chief resident physicians earn a stipend calculated at the rate of \$200 for each approved residency position in the program on September 1 to a maximum of \$8,000.
 - Typically these stipends are paid in monthly installments
 - If there is more than one chief resident physician – the eligible stipend amount is pro-rated for the number of individuals
- 4) Maternity Leave (Article 11.03(c))
 - Top-up payment is typically one lump-sum payment that is received at the end of the maternity leave portion of the leave (4-5 months after the start of leave)
 - Top-up payment is considered employment income meaning that there will be deductions to the payment – tax, CPP, EI and PARA dues
 - In exceptional circumstances, it might be possible to request partial payment earlier (however, AHS cannot guarantee this will occur)

As well there are reimbursements that you might be eligible to receive:

1) Advanced Resuscitation Courses (Article 34.02)

- Resident physicians are reimbursed by AHS for 100% of the tuition and registration fees incurred for successfully obtaining advanced resuscitation courses deemed necessary by the applicable Program Director and required by AHS for work in the program
- If certification is required to be renewed annually – AHS will reimburse the cost for each year of training (AHS will not reimburse the cost in the final year of training if the certification is for a time period after training is completed)
- Travel, accommodation, parking, meals related to taking the course are not eligible for reimbursement
- Failed or incomplete courses are not eligible for reimbursement (only the successful completion of the course)
- Requests for reimbursement must be made through AHS iExpense and to ensure acceptance you need to submit the following when prompted in iExpense:
 - Course certificate of completion
 - Receipt for course expense
 - Proof of exchange rate conversion (if applicable)

2) PARA Taxi/Rideshare Reimbursement (Article 28.04)

- Reimbursement claims need to be submitted to PARA
- The reimbursement is done quarterly to a maximum of \$200/quarter for each Resident Physicians to ensure that sufficient funds are available for all individuals making claims
- The instructions regarding the reimbursement process are found on the PARA website
- Here is the link to the reimbursement form/information

Other payments not covered under the Resident Physician Agreement

1) Extender payments

- Individuals who have “Extender” licenses are paid separately by AHS/Alberta Health
- These shifts and payments are not part of residency training, however, the ability to perform these shifts is connected to training as follows:
 - It should be noted that the CPSA requires the total number of ‘call shifts and extender shifts be within the on-call shift guidelines in the Resident Physician Agreement
 - An individual needs program/PGME support to hold an ‘Extender’ license with CPSA – if the program/PGME deems that extender shifts are causing challenges to the completion of training, the support can be removed resulting in a loss of the privilege of performing extender shifts