

Unassigned Inpatient Care Network Registration form

The term “Unassigned Inpatient” is used in this context to denote those patients whose family physician (FP) does not have admitting privileges in the acute care facility in which the patient has been admitted. The Family Practice Services Committee (FPSC) Unassigned Inpatient Care Incentives are applicable to FPs with a community practice who are delivering unassigned inpatient care services and meet the criteria outlined on the [FPSC web site here](#).

Instructions: Download and save this form. Complete downloaded form to register new physicians to the Unassigned Inpatient Care Network, or to change network membership. Save the completed form. Use multiple forms if necessary.

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| Division of Family Practice (if applicable): | |
| City/Town/Community of the network: | |
| Hospital the network is associated with: | |
| Are FPs listed joining the network/already members? | Yes: <input type="checkbox"/> No: <input type="checkbox"/> |
| Are FPs listed leaving the network? | Yes: <input type="checkbox"/> No: <input type="checkbox"/> |
| Who will bill the Unassigned Inpatient Care Fee of \$150 (G14088)? Tick only one box. | DoFP/FP group: <input type="checkbox"/> Individual FPs: <input type="checkbox"/> |
| MSP billing/payee number for the quarterly unassigned network incentive (if applicable): | |

For each FP participating in unassigned in-patient care for the hospital, please complete the following information.

| Name of the network member | MSP practitioner number | MSP payee/billing number | Effective date | Cancellation date (if applicable) | Email or fax |
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| Date submitted: | |
| Date effective: | |
| Network contact name: | |
| Network contact phone number: | |
| Network contact email: | |

Please send completed form to fp.billing@doctorsofbc.ca