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Please review the Pregnancy and Parental Leave Benefits Program (PPLBP) Policy available at [Pregnancy and Parental Leave for Ontario Physicians | ontario.ca](https://www.ontario.ca/ontario-ca) before completing the application package.

Information

The Pregnancy and Parental Leave Benefit Program (PPLBP) was established under the 2004 Physician Services Framework Agreement.

Any new PPLBP leave commencing as of April 1, 2025, the benefit payment maximum is \$2,000.00 per week.

Birth mothers applying for pregnancy leave will receive up to 22 weeks of PPLBP benefits. All other physicians applying for parental leave, including birth fathers or otherwise becoming a parent (including adoption, surrogates, non- birth mothers) will receive up to 17 weeks of PPLBP benefits. In the event of a stillbirth, only the birth mother may apply for up to 22 weeks of pregnancy leave benefits if the child was carried up to at least 23 weeks gestation prior to the loss.

The benefit is calculated based on 75% of the eligible physician's average weekly gross eligible earnings in Ontario in the 12-month period immediately preceding the start date of the PPLBP leave. The leave does not have to be taken in consecutive weeks. If taken as non-consecutive weeks, the leave must be taken for no less than two weeks at a time and be 7-day increments from Sunday to Saturday.

To receive these benefits, a physician must meet the eligibility criteria below. Please note that other pregnancy, maternity, or parental leave benefits from the EI program and/or an employer will also affect the weekly PPLBP benefit amount that is paid out.

Eligibility Criteria

To be eligible for PPLBP benefits, a physician must meet each of the following criteria:

1. Reside in Ontario.
2.
 - a. Be licensed to practice medicine in Ontario, by the College of Physicians and Surgeons of Ontario (CPSO), during the full 26 weeks immediately before the start date of your pregnancy or parental leave, or
 - b. Completed residency in Ontario during the 26 weeks immediately before the start date of the pregnancy or parental leave
3. Have not entered into an agreement with the Ministry that provides any other similar pregnancy or parental leave benefits under that agreement
4. Earn less than \$5,000.00 per week in gross eligible income during the leave.

Pregnancy and Parental Leave Timelines

Pregnancy

Birth mothers may begin their leave as early as 5 weeks before their expected date of delivery.

- If the birth mother is advised by her attending physician/midwife to stop working early due to health concerns, she may start her leave earlier than 5 weeks before the expected date of delivery. A letter from the attending physician/midwife must be included in the application submission that confirms the date she was advised to stop working due to these health concerns.

Parental

Other parents, including birth fathers, non-birth mothers, and parents expecting a child via surrogacy may begin their leave as early as the child's birth date. Parents expecting a child via adoption can begin as early as the adoption placement date.

Stillbirth

In the event of a stillbirth, only the birth mother may be eligible for up to 22 weeks of benefits provided that she meets the program eligibility criteria and carried the child to at least 23 weeks gestation prior to the loss. Birth mothers may begin their leave as early as 5 weeks before their expected date of delivery.

- If the birth mother is advised by her attending physician/midwife to stop working early due to health concerns, she may start her leave earlier than 5 weeks before the expected date of delivery. A letter from the attending physician/midwife must be included in the application submission that confirms the date she was advised to stop working due to these health concerns.

All leaves must be completed within 12 months of the child joining the parent. No further benefit will be paid after this date.

An eligible physician is entitled to PPLBP benefits equaling 75% of their average weekly gross eligible earnings for providing OHIP insured clinical services in Ontario in the 12-month period immediately preceding the start date of the leave, up to a maximum of \$2,000.00 per week. To receive the maximum \$2,000.00 per week benefit, the pre-leave earnings must be \$138,667.00 or greater during this period. Average earnings are calculated for the period an eligible physician is licensed to practice medicine in Ontario. Time taken off work during this 12-month period is included in these calculations.

12-month Gross Eligible Earnings	Weekly Average (divide 52 weeks)	75% of Weekly Average	Weekly PPLBP Benefit *max \$2,000.00 per week
\$50,000.00	$\$50,000.00 / 52 = \961.54	$\$961.54 * 75\% = \721.15	\$721.15
\$100,000.00	$\$100,000.00 / 52 = \$1,923.08$	$\$1923.08 * 75\% = \$1,442.31$	\$1,442.31
\$138,667.00	$\$138,667.00 / 52 = \$2,666.67$	$\$2,666.67 * 75\% = \$2,000.00$	\$2,000.00
\$200,000.00	$\$200,000.00 / 52 = \$3,846.15$	$\$3,846.15 * 75\% = \$2,884.62$	\$2,000.00

OHIP-insured clinical services refer to services that are paid under the OHIP Payment System and meet all the applicable requirements listed in the OHIP Schedule of Benefits. If a physician is paid directly by their workplace, the services they provided could have been eligible for payment under the OHIP Payment System had their workplace not paid them directly.

Please be advised that each application is assessed on an individual basis due to multiple sources of eligible income and various personal scenarios and it may result in differences in actual payment.

An eligible physician who is receiving PPLBP benefits may continue to work during their leave and earn gross eligible earnings up to \$3,000.00 per week. Any amount earned over \$3,000 per week will be deducted dollar for dollar from the PPLBP benefit payment. For example, earning \$3,500 during a week of leave means that \$500 will be deducted from the PPLBP benefit payment for that week.

Top-Up to Other Maternity, Pregnancy or Parental Leave Benefits

EI Benefits: Physicians who have or will receive maternity/pregnancy and/or parental leave benefits from EI, at any time during their leave (before, during or after PPLBP benefits) are eligible for a top-up from the PPLBP. This top-up is the difference between the physician's weekly PPLBP benefit amount and the gross weekly EI benefit amount. This top-up policy is applied even if the EI benefits and PPLBP leave dates do not overlap.

Employer-Provided Maternity and Pregnancy Leave Benefits: Physicians who have or will receive benefits, income, funds, or a stipend from their employer, partnership or workplace at any time during their leave (before, during or after PPLBP benefits) for the purpose of being on a maternity, pregnancy or parental leave will receive a top-up similar to the EI benefits top-up policy.

Below is an example of a top-up calculation for a physician who is on a 17-week PPLBP leave and receiving \$200 per week in employer benefits and \$695 per week in EI benefits.

PPLBP Leave Dates	April 3, 2025 to July 30, 2025
PPLBP Weekly Benefits:	\$2,000.00
Employer Weekly Benefits:	-\$200.00
EI Weekly Benefits:	- \$695.00
Weekly PPLBP Top-up Amount:	\$1,105.00

Part 2 – Income Confirmation Instructions

To calculate the weekly benefit entitlement, a **Part 2 – Income Confirmation** form must be completed to verify non-fee for service income sources that were declared in the 1.3 Pre-Leave Income Statement for providing OHIP covered clinical services in the 12-month period prior to the start date of the leave.

The following pre-leave income sources will require a **Part 2** form for verification:

- all payments received under an Alternate Funding Arrangement (AFA), Alternate Payment Plan (APP) or Alternate Funding Plan (AFP) or under the Academic Health Science Centre (AHSC) AFP
- salaried earnings from an employer or paying agency, and
- other medical professional income that was not billed as fee for service under the physician's OHIP billing number (i.e. locum earnings, on-call stipends, etc)

Section 2.1 is to be completed and signed by the physician on leave. Sections 2.2 and 2.3 is to be completed and signed by an administrator/representative at the clinic or hospital who can verify the following:

- the earnings were paid for providing OHIP-insured clinical services in the 12-month period immediately before the pregnancy or parental leave start date. **Example: Start date April 3, 2025 = income confirmed for April 3, 2024 to April 2, 2025.**
- if the physician has or will receive similar pregnancy/maternity or parental leave benefits for this leave through this organization and if yes, the details on these other benefits
- if the physician will earn income or receive a continuing salary from this organization during the leave, and if yes, the details on these earnings

One **Part 2** form is required to verify each income source. If there are multiple sources of income from one employer/organization, this can be combined on one **Part 2** form. For example, the total income earned for providing locum coverage for multiple physicians at one location can be verified on one **Part 2** form if there is an administrator/representative who can verify these earnings.

Part 3 – Declaration of Earned Income Instructions

In order to calculate the benefit payments, this form must be completed each month to declare the gross earnings during each week of the leave and any EI/employer benefits that have or will be paid out for being on leave.

Benefit cheques are issued by mail on the 15th of each month. The submission deadline for Part 3 forms is the 28th of the month to have a PPLBP benefit cheque issued on the 15th of the following month (i.e. March 28th deadline to receive a benefit payment issued on April 15th). Incomplete or late forms will result in a delayed payment.

Consecutive Leave – Declaring Zero Income:

If the leave is taken as consecutive weeks and the physician will not be working or earning income during the leave, one completed Part 3 form can be submitted to declare zero earnings for the duration of the leave. If the situation changes and the physician returns to work early, begins earning income during the leave, or will be receiving EI/employer benefits at any time, the physician must notify the PPLBP office immediately and submit revised Part 3 form(s) for the remainder of their PPLBP leave to calculate the benefit payments.

Non-Consecutive Leave:

The weeks of the leave and income earnings during those weeks must be declared in the “Income for all the weeks in your leave” table. Dates or income earnings that are outside of the PPLBP leave dates must not be entered. All weeks declared on this form will be counted as part of the PPLBP leave, regardless of the income that is declared.

Completing the Part 3 form:

Each week of the leave must be entered into the Income table, beginning with the PPLBP leave start date. Weeks must be entered from Sunday to Saturday. If the leave starts on a day other than Sunday, the PPLBP benefit will be prorated for the number of days in the first and last week. For example, if the leave starts on a Wednesday, the first week is declared as Wednesday to Saturday. The last week of leave is to be declared as Sunday to Tuesday.

The gross weekly earnings must be listed in each row under the weeks that the income was earned. **Income must be declared based on the service date, not the payment received date.** Weeks that have no earnings must be declared as “\$0” and not as a blank space. Forms that include estimated earnings or earnings outside of the leave dates will not be processed.

All physicians who are declaring income during their leave must wait until they receive their Remittance Advice (RA) or receive payment to ensure that their declared income matches the income earnings attached to their OHIP billing number. Estimated earnings will not be accepted.

As there are only five columns in the income table, more than one **Part 3** form must be completed when submitting more than five weeks of leave at a time for payment.

Fee-for Service

Fee for service physicians will need to review their monthly RA to determine the dates that these earnings cover based on when the services were provided and not when they were paid. Delayed payments for clinical services provided before the leave started should not be declared. All claims must be submitted and paid before a **Part 3** form is completed. Please regularly check the error report to ensure that all billings are submitted properly and paid in a timely matter.

Primary Care Model

To declare weekly earnings, signatory physicians in primary care models must review their monthly RA, divide their capitation amount by the number of days in the month this payment covers to determine the daily capitation amount, then multiply the daily capitation amount by the number of days in the declared week of leave to determine the weekly capitation amount.

The monthly RA will report the previous month’s earnings. For example, the May RA will provide the April earnings, June RA reports May earnings, etc.

Example: May RA shows capitation payments of \$22,000 and \$2,400 in access bonus for the month of April.

- Capitation: \$22,000 divided by 30 days is \$733.33 per day. \$733.33 multiplied by 7 days is \$5,133.31 per week.
- Access Bonus: \$2,400 divided by 30 days is \$80.00 per day. \$80.00 multiplied by 7 days is \$560.00 per week.

Based a start date of April 3, 2025, structure of the month would be as follows:

- Thursday, April 3 to Saturday, April 5, 2025 = 3 days
- Sunday, April 6 to Saturday, April 12, 2025 = 7 days
- Sunday, April 13 to Saturday, April 19, 2025 = 7 days
- Sunday, April 20 to Saturday, April 26, 2025 = 7 days

The Part 3 form would be completed as follows:

Income

	Week 1	Week 2	Week 3	Week 4	Week 5
	April 3, 2025	April 6, 2025	April 13, 2025	April 20, 2025	
	April 5, 2025	April 12, 2025	April 19, 2025	April 26, 2025	
	\$	\$	\$	\$	\$
Capitation	\$2,199.99	\$5,133.31	\$5,133.31	\$5,133.31	
Access Bonus	\$240.00	\$560.00	\$560.00	\$560.00	

As noted above, capitation payments must be declared on a separate line from other income earnings (i.e. billings, bonuses, premiums, incentives, etc).

Deducting Locum Payments

If the physician is in a capitation-based primary care model (i.e. FHN, FHO, etc) and will be using their capitation payments to pay for locum coverage during the leave, this can be claimed as a deduction by declaring the weekly amount that will be paid to the locum(s) in the row labelled “Locum Coverage Payment.”

When submitting the PPLBP application package, a letter signed by the locum(s) must be included to verify coverage dates and the weekly payments they will receive for the clinical services provided. A monthly locum letter must be submitted if the locum payments will change each week. The locum payment deductions declared on these forms cannot exceed the payment amounts confirmed in the signed locum letter. If the locum payment amount declared is higher than the capitation amount, only the capitation amount can be claimed as a deduction

EI/Employer Benefits

If the physician has or will be receiving EI/employer benefits at any time during their leave (before, during or after PPLBP benefits), the start/end dates and gross weekly amount(s) must be declared in the EI Benefits and Employer Benefits table. The first Part 3 form cannot be completed until the EI application has been processed and/or the employer, workplace, or partnership has provided the physician with a full summary of their benefits.

A top-up will be applied to all EI benefits and employer benefits, regardless of payment dates or if this overlaps with the PPLBP leave.