



<https://fems.facilityengagement.ca>

Welcome to
The Facility Engagement Management System.

Sign into your account

 Remember me? [Forgot Password?](#)

Don't have an account?

Create your account today

Who can register?

- **Physicians**
- **Allied health professionals who are part of the MSA**

By clicking **Sign in** you agree to our [Terms of Use](#).

[Click here for Support](#)



Account Registration

Personal

Registration Survey

FACILITY

* Facility

Facility

PROFILE DETAILS

* User Type (Please choose GP or SP based on your College Sub-Class)

Select a User Type

* MSP Number

MSP Number

* Medical Practice Type

Medical Practice Type

* Prefix

Title

* First Name

First Name

* Last Name

Last Name

PROFILE DETAILS

* User Type (Please choose GP or SP based on your College Sub-Class)

Select a User Type

PHYSICIANS

Specialist Physician

General Practitioner

Dentist

ALLIED HEALTH PROFESSIONALS

Clinical Psychologist

Choose based on your
college sub-class

* Medical Practice Type

Medical Practice Type

Administration (non-medical staff)

Allergy and Immunology

Anesthesiology

Cardiac Surgery

Cardiology

Community and Rural



SIGN-IN DETAILS

* Password ⓘ

Password

* Confirm Password

Confirm Password

VersaPay is the Canadian equivalent to **PayPal**

Sign up at <https://secure.versapay.com>

PAYMENT DETAILS

* Payment Method

Direct Deposit (via VersaPay)



* Settle To

My personal bank account

My company bank account

I'm not a robot



By Clicking "Next" below, you are agreeing to the [Terms of Use](#)

Next >

Cancel

Direct Deposit (via VersaPay) is set as default for all new FEMS users. Only the **Administrator can change the method of payment** if a physician requests it.

PAYMENT DETAILS

* Payment Method

Cheque

Cheque

Direct Deposit (via VersaPay)

Email Transfer



VersaPay <https://secure.versapay.com>

Sign Up for VersaPay

Business Name
Use your legal name if signing up for a personal account.

First Name

Last Name

Email

Password

Repeat Password

Already have an account? Please [Sign In](#).

By creating an account you agree to our [user agreement](#), [privacy policy](#) and to accept transactional and newsletter emails from VersaPay Corporation.

Sign Up

1

Add personal information requested and submit.

NOTE: Use the **same personal email address** for FEMS and VersaPay.

Add a bank account

Select your bank:

[Don't see your bank?](#)

Transit number:

Account number:

* Account holder:

Your Name DATE

Your Address

PAY TO THE ORDER OF

DOLLARS

MEMO

Transit Institution Account

||' 001 ||' I: 38314 ||| 004 ||| 5948894300 :'

Address Line 1:

Address Line 2:

City:

Province/State:

Postal/Zip:

I agree to the [Pre-authorized Debit Agreement](#) allowing Versapay to debit this account according to my instructions.

Add Bank Account

2

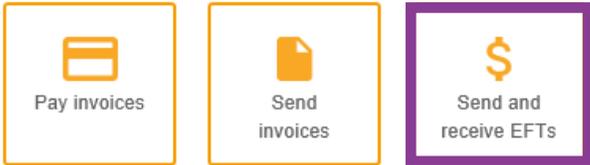
You must add your bank account to the VersaPay account. Click on **Add Bank Account** under the **Quick Links** menu.

HOW TO SIGN UP FOR VERSAPAY

VersaPay is the Canadian equivalent to PayPal. As a payment processor, it administers electronic fund transfers (EFTs) of your claims.

Smart. Simple. Secure.

What would you like to do?



1. Sign up at <https://secure.versapay.com> and choose **Send and Receive EFTs**.

2. Use the **same** email address for VersaPay that you used to register in FEMS. Click **Confirm Account** in the confirmation email.

Sign Up for VersaPay

Business Name
Use your legal name if signing up for a personal account.

First Name

Last Name

Email

Password

Repeat Password

At least 8 characters
At least 1 lowercase letter
At least 1 uppercase letter
At least 1 number

Already have an account? Please Sign In.

By creating an account you agree to our user agreement, privacy policy and to accept transactional and newsletter emails from VersaPay Corporation.

Sign Up

Quick Links

Add Bank Account



Send Money



Request Money



Upload Batch File



3. Click **Add Bank Account** under the **Quick Links Menu** to fill in the fields with your banking information.

Need Help?

604 638 4869 or 1 800 665 2262

femssupport@doctorsofbc.ca

M-F 9am to 4pm

Add a bank account

Select your bank:

[Don't see your bank?](#)

Transit number:

Account number:

* Account holder:

Your Name DATE
Your Address

PAY TO THE ORDER OF

DOLLARS

MEMO

⑈ 001 ⑈ ⑈ 38314 ⑈ ⑈ 004 ⑈ ⑈ 5948894300 ⑈ ⑈

Address Line 1:

Address Line 2:

City:

Province/State:

Postal/Zip:

I agree to the [Pre-authorized Debit Agreement](#) allowing Versapay to debit this account according to my instructions.

[Add Bank Account](#)

4. Check the box indicating you **Agree to the Pre-Authorized Debit Agreement** and click **Add Bank Account**.
5. Review the details you have entered and click **Confirm Bank Account** or go **Back** to edit your information.

Your bank account is ready to be verified

In order to verify your bank account please check either your online banking or last bank statement and note the dollar amount next to the "VersaPay Verify" transaction.

Once you have your verification amount, please click the link below to verify your bank account.

Here is an example bank statement with the verification deposit circled:

Account Statement

Date	Description	Debits	Credits
Apr. 16	Canadian Tire	\$25.00	
Apr. 10	VersaPay Verify BUS	\$2.79	
Apr. 10	VersaPay Verify AP		\$2.79
Apr. 10	Whole Foods	\$25.00	

[Verify my bank account](#)

6. Within 2 to 3 business days of adding the bank account, a verification micro deposit from VersaPay will appear on your bank statement.
7. You will also receive an email reminder from VersaPay to verify your bank account. Click **Verify my Bank Account** to redirect you to VersaPay and sign in to continue.

8. Enter the deposit amount that you observed in your bank account in the field provided and click **Verify Bank Account**. Once your account is verified, the deposit will be reversed. VersaPay is now ready to take your claims.

Verify ownership of TD Canada Trust (7854)

* Deposit amount: 3 attempts left ?

Account			
Date	Description	Debits	Credits
Feb 22	Canadian Tire	25.00	
Feb 21	VersaPay Verify BUS	2.79	
Feb 21	VersaPay Verify AP		2.79

[Verify Bank Account](#)



Submit a Claim



When can I submit a claim?
When you claim your **attendance time** in an engagement activity.
Any expenses incurred can be submitted with the claim.

Example:

Attend a meeting for an hour

Submit a claim in FEMS

Get paid via VersaPay



Train Physicians

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The Facility Engagement Management System.

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FE FACILITY ENGAGEMENT An SSC Initiative Support Welcome Dr. Black TEST ▾

Dashboard Activities **Claims** Finance ▾ Reporting ▾

Dashboard > Claims

Claims

Claim Number Submitted ▾ Activity Date ▾ Status ▾ More ▾

CLAIM NUMBER	CLAIMANT	ENGAGEMENT ACTIVITY	PHYSICIAN SOCIETY/MSA	SUBMITTED	ACTIVITY DATE	TIME	EXPENSES	TOTAL	STATUS
Draft									
5ZRR95	Black TEST, Richard	Weekly Meeting - Test	Medical Staff Association (Test)	Aug 14, 2018	Aug 14, 2018	\$148.31	\$10.00	\$158.31	<input type="button" value="Draft"/>

Click on Submit a Claim



Submit a Claim

Submit a Claim



CLAIM DETAILS

* Claimant
Geller, Ross

* You participated in Engagement Activity
-- Select an Engagement Activity --

* Date of Activity
07-23-2018

TIME

* Hours Quantity
15 min increments (ie for 2 hours 30 min, enter '2.5')

Description (optional)

Indicate the **Number of Hours** you have participated in an engagement activity

* You participated in Engagement Activity

- Select an Engagement Activity --
- Anesthesia ERAS Project
- Familiar Faces Project
- Governance
- Helipad
- Mental Health Teenage Pregnancy
- OR Project

If you **DON'T** see your Engagement Activity please contact your **MSA administrator**

Next >

Save Draft Cancel



Submit a Claim

Submit a Claim

Time **Expenses** Review

EXPENSES If submitting for **expenses only**, please select the expense type, amount, and attach a receipt. Please "Skip Expenses" if there are none.

Skip Expenses >

* Expense/Mileage
Parking

* Total Amount (incl. taxes)
\$ 10.00

Amount Claimed
\$ 10.00

* Receipt

Indicate the **Total Amount** for any expenses incurred and upload the **Receipt**

Next >

< Back Save Draft Add Expense



Submit a Claim

Submit a Claim



CLAIM DETAILS

Engagement Activity **Weekly Meeting - Test**

Claimant Richard Black TEST

Date of Activity Aug. 14, 2018

Types of work

Hours for today 1.00 hour(s) ←

Rate \$148.31/hour

Subtotal \$148.31

Status

**Review the Number of Hours
you have participated in an
engagement activity
and Expenses**

EXPENSES/MILEAGE

Parking \$10.00

Subtotal \$10.00

CLAIM TOTALS

Tax \$0.00

Claim Total \$158.31



Evaluation

The provincial evaluation of the FEI is being conducted by UBC researchers and examines:

- How the initiative is being implemented
- Whether the initiative is meeting its target objectives

Submit feedback

Success! Claim successfully updated.



Your feedback is important and will help evaluate the effectiveness of the provincial Facility Engagement Initiative by a third party evaluator. Disclosure of this information will be anonymized and feedback will be aggregated. Thank you for your participation.

MEETING / ACTIVITY RATING

1) This engagement activity is proceeding as intended:

Strongly agree	Agree	Disagree	Strongly disagree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2) In my opinion, this session contributed to increasing physician engagement:

Strongly agree	Agree	Disagree	Strongly disagree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3) Add Comment (optional):

NOTE: if you navigate away from this page, this claim will be on **draft status** until you submit the claim and the questions to the evaluation

Submit >

< Back

Submit Expenses

Support

Welcome Ms. Turtle ▾

Dashboard

Activities

Claims

Finance ▾

Please Note: This claim has been automatically flagged for further review by our system. Your Physician Society will review this claim and contact you should further information be required for approval.

Thank you!

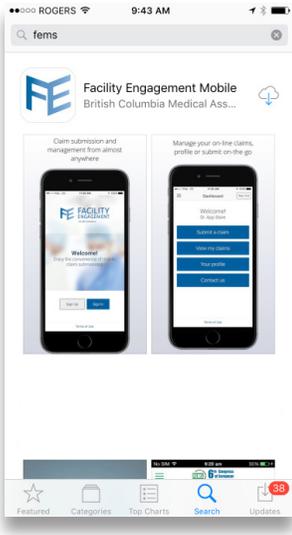
Your claim #XM4845 has been successfully submitted.

Submit another claim

View my claims

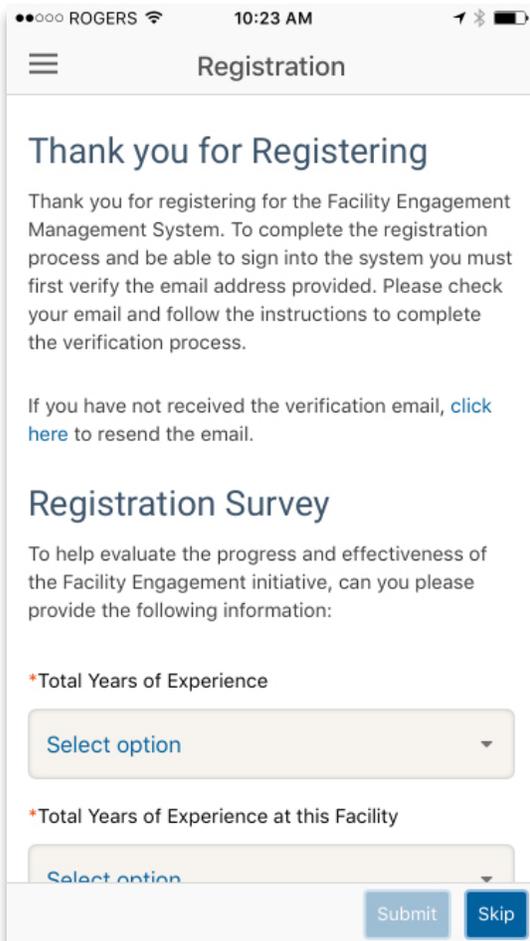
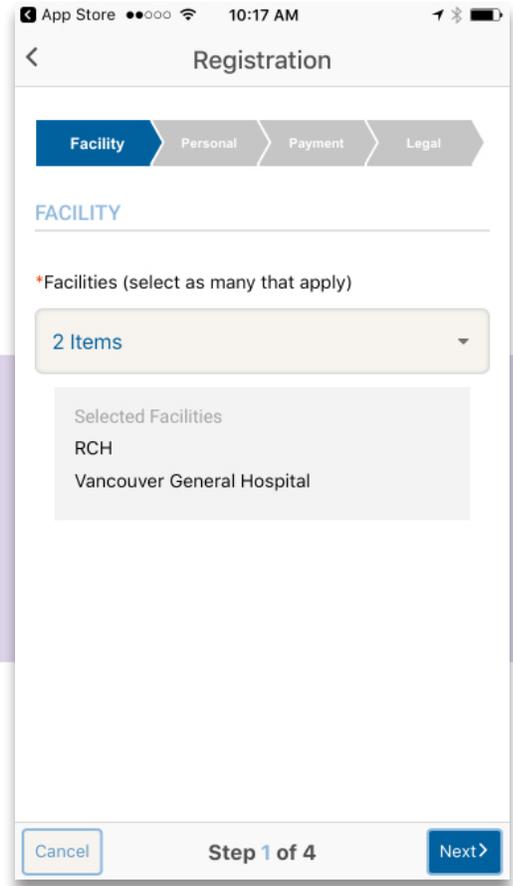
Claim Confirmation

HOW TO DOWNLOAD AND REGISTER FOR THE FEMS MOBILE APP



1. Open the Google Play or Apple App Store on any mobile device and search “**Facility Engagement**”. Select, download, and open the FEMS mobile app to **Sign Up**.

2. Select the facility (or facilities) where you work, add your profile information, and create a password. The password must contain at least one uppercase letter, one lowercase letter, a number, a special character, and be at least eight characters long. Example: **UserDoc12#**



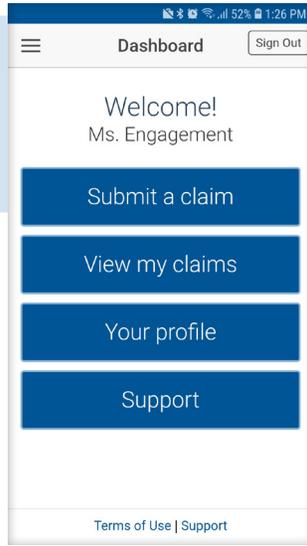
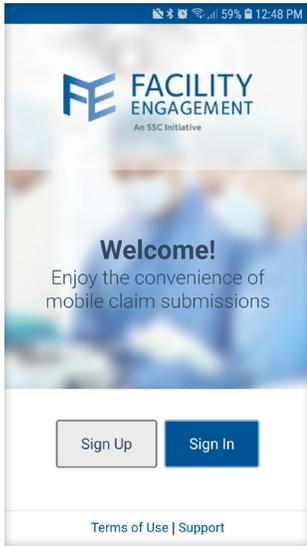
3. Select where you want your claim payments directed, either to your company or your personal bank account.
4. Click **Next** to complete the registration survey.
5. A confirmation email will be sent to you to verify your email address.
6. Click the link in your email within 7 days to activate your FEMS account.

Need Help?

604 638 4869 or 1 800 665 2262
femssupport@doctorsofbc.ca

M-F 9am to 4pm

HOW TO SUBMIT A CLAIM WITH THE FEMS MOBILE APP



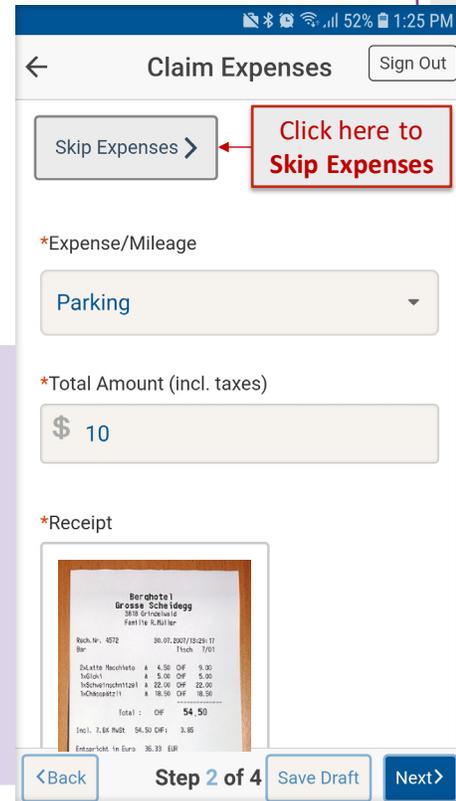
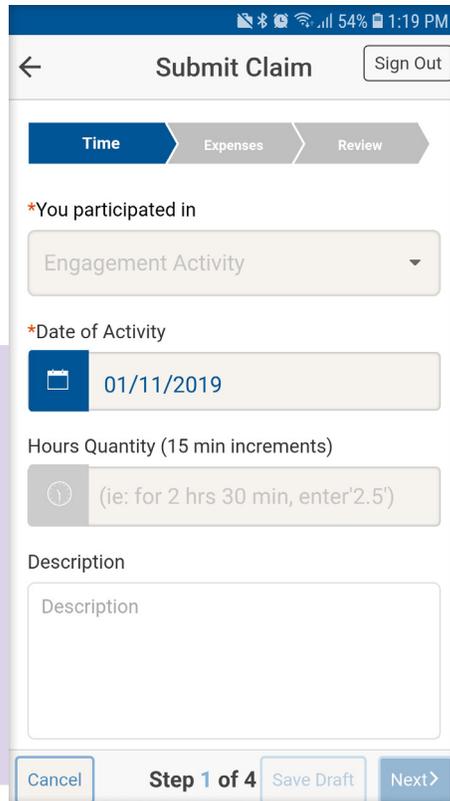
1. **Sign In** and click **Submit a Claim**.

NOTE: The FEMS mobile app is only available for members to submit and review a claim.

2. Enter the requested information and click **Next**.

3. Add **Expenses** (if applicable), select the expense type and amount, attach a receipt, and click **Next**.

4. Review the claim in the next section. If satisfied with the details you have entered, click **Submit**.



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