

## mcp newsletter

### *IMPORTANT NOTICE*

March 2009

09-03

**TO: ALL PHYSICIANS**

**RE: REVISED MCP PAYMENT SCHEDULE EFFECTIVE APRIL 1, 2009**

The Department of Health and Community Services and the NLMA have completed the process of allocating funds made available under the last 2 years of the *Memorandum of Agreement* for increases to fee-for-service compensation. The Minister of Health and Community Services has approved these increases which are reflected in a revised MCP Medical Payment Schedule, which will come into effect on April 1, 2009 at 00:01 a.m. and applies to all MCP insured physician services rendered on or after that date. At the same time, the current across the board increases being applied to all fee-for-service claims will be discontinued.

Physicians should continue to bill for their services using the current rates as listed in the 2005 MCP Payment Schedule until 00:01 a.m. on April 1, 2009 to avoid claim rejection; the amount claimed will be increased by the applicable across the board percentage increase until that time.

**All physicians are advised to review the revised Schedule and to familiarize themselves with those sections, especially Preamble sections, which are relevant to their own practice. For ease of identification, new and amended material has been printed in bold type. If you are a salaried physician who does no fee-for-service billing, this newsletter is provided for information only.**

**Key features of the Schedule are identified on pages 2 - 5 of this Newsletter.**

For the first time since the inception of Medicare the revised Payment Schedule will be primarily communicated to physicians and their billing staff by having it posted on the MCP website at [www.health.gov.nl.ca/mcp/](http://www.health.gov.nl.ca/mcp/) . It can be located on the website by clicking on the 'Provider Information' link. **The revised Schedule will not be distributed by way of a general mail out of paper copies.** Physicians who wish to have a paper copy mailed to them may do so by sending an e-mail request to [cathybenett@gov.nl.ca](mailto:cathybenett@gov.nl.ca) or by sending a facsimile request to Cathy Bennett at (709) 292-4052. Please be sure to include your name and mailing address.

Questions related to the revised Payment Schedule may be directed to the Claims Department at 1-800-440-4405, or to the Assistant Medical Director at (709)758-1501.

Key features of the revised Schedule are as follows:

### All Specialties

#### **Fee Increases**

- Negotiated fee increases were implemented for all specialties. **Fees which have been increased are printed in bold type.**
- All GP and Specialist rates for consultation fee codes and subsequent hospital visits are increased.
- The half day organized sessional clinic rate for specialists is increased to \$409.85; the half day organized sessional clinic rate for GPs is increased to \$321.61.
- The Category 'A' Emergency Department hourly rate is increased to \$132.64.
- Critical Care rates, including daily rates for Intensive Care and Coronary Care are increased.

#### **Expired Fee Codes**

- Partial assessment fee codes for all specialty groups except General Practice, Emergency Medicine, and Pediatrics are expired. Services previously billed as partial assessments should now be billed as specific reassessments. The purpose of this change was to simplify the visit fee code structure.

### General Practice

#### **Fee Increases**

- All visit fee codes (except fee code 139 after hours add on fee)
- Category 'B' Emergency Coverage rate is increased to \$31.83.
- Long Term Care coverage rates
- Dedicated time surgical assistant rate
- Delivery fee codes
- Chemotherapy fee codes
- Pap Smear fee code

### Anaesthesia

#### **Fee Increases**

- The time unit value increases to \$14.53
- Nerve Block fee codes
- Organized Pain Clinic fee codes
- Patient Controlled Anaesthesia fee codes
- Hyperbaric Therapy fee codes

## **Dermatology**

### **Fee Increases**

- All visit fee codes
- Laser skin treatment and skin biopsy fee codes
- Patch testing fee code

## **General Surgery**

### **Fee Increases**

- All visit fee codes
- Operations on the Digestive System fee codes
- Operations on the Cardiovascular System fee codes

## **Internal Medicine**

### **Fee Increases**

- All visit fee codes

### **New Fee Codes**

- Specific Assessment 113, 213, 313, and 413

## **Neurology**

### **Fee Increases**

- All visit fee codes

### **New Fee Codes**

- Specific Assessment 113, 213, 313 and 413

## **Neurosurgery**

### **Fee Increases**

- All visit fee codes
- Operations on the Nervous System and Musculoskeletal System fee codes

### **New Fee Codes**

- Specific Assessment 113, 213, 313 and 413

## **Nuclear Medicine**

### **Fee Increases**

- All Nuclear Medicine fee codes

## **Obstetrics/Gynecology**

### **Fee Increases**

- All visit fee codes
- Obstetric ultrasound fee codes
- Delivery fee codes and selected Operations on the Female Genital System fee codes

## **Ophthalmology**

### **Fee Increases**

- All visit fee codes
- Operations on the Eye fee codes
- Orthopedics

## **Orthopedics**

### **Fee Increases**

- All visit fee codes
- Fee codes for diagnostic arthroscopy and arthroscopy in association with surgery
- Fee codes for open reduction of fractures
- Operations on the Musculoskeletal System fee codes

## **Otolaryngology**

### **Fee Increases**

- All visit fee codes
- Selected fee codes from the Operations on the Respiratory System section, the Operations on the Lymph Nodes subsection and the Operations on the Salivary Glands subsection.

## **Pediatrics**

### **Fee Increases**

- All visit fee codes except the partial assessment fee code

### **New Fee Codes**

- Specific Assessment 113, 213, 313 and 413

## **Plastic Surgery**

### **Fee Increases**

- All visit fee codes
- Selected fee codes from the Operations on the Hand and Wrist subsection and the Operations on the Integumentary System section.

## **Psychiatry**

### **Fee Increases**

- All visit fee codes including group psychotherapy fee codes
- ECT fee code

## **Radiology**

### **Fee Increases**

- All radiology fee codes including the screening mammography fee code

## **Urology**

### **Fee Increases**

- All visit fee codes
- Operations on the Male Genital System fee codes

### **New Fee Codes**

- Five new fee codes have been introduced: 96865, 97441, 97443, 97444 and 97500. Please see the Payment Schedule for details.

### **Expired Fee Codes**

- As part of the process to introduce the new fee codes the following fee codes are expired: 96864, 96866, 97440, 97442, 97492