

mcp newsletter

January 2019

19-01

TO: FEE FOR SERVICE OPHTHALMOLOGISTS

**RE: INTRAVITREAL INJECTIONS (IVI) OF ANTI-VEGF
OCULAR COHERENCE TOMOGRAPHY (OCT)**

In consultation with the Newfoundland and Labrador Medical Association (NLMA), the Department of Health & Community Services (HCS) will be introducing two new fee codes to the Medical Care Plan (MCP) Medical Payment Schedule for the intravitreal injection of anti-VEGF and office OCT when used in association with intravitreal injection as follows below. These changes are effective January 15th, 2019.

Code		GP/Spec.	Anaes.
54846	Intravitreal injection of anti-VEGF substance (unilateral).....	125.00	
54848	Ocular Coherence Tomography in association with intravitreal injection of anti-VEGF substance in office (uni-or bilateral).....	add 30.00	

Notes:

- 1. The above fee codes are insured for treatment and examination of neovascularization associated with: macular degeneration, diabetic macular edema, and retinal venous occlusion.**
- 2. A maximum of one unit of IVI is payable per eye regardless of the number of injections.**
- 3. If both eyes are injected, the second eye should be billed at 85% of the listed rate.**
- 4. A maximum of one unit of office OCT is payable per patient treatment session regardless of the number of injections.**
- 5. The office OCT fee code is only payable as an add-on to IVI; it is not payable as an add-on to any other fee code and is not payable when billed alone.**
- 6. Billings for office OCT associated with IVI are restricted to the following limitations: a maximum of 8 services per patient per 12 month period and a maximum of 16 services per patient per 24 consecutive months.**
- 7. Intravitreal injection of anti-VEGF is not payable when delegated to another health care professional, physician employee, or assistant when provided in a clinic outside of the hospital setting.**
- 8. Payment for the use of topical or local anaesthesia will be included in the fee for IVI.**

Use of fee codes 54846 and 54848 is restricted to ophthalmologists who have subspecialty training in the surgical treatment of vitreoretinal disease and/or ophthalmologists who have undergone additional medical retinal training.

There will be no need to enter a facility code when billing fee codes 54846 or 54848.

Changes will also be made to fee code 57780 (Ocular Coherence Tomography) to list IVI as an indication for hospital-based OCT as highlighted below:

Code	GP/Spec.	Anaes.
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57780 Ocular Coherence Tomography – interpretation, uni or bilateral...30.00		
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Note:

This fee code can only be claimed by Ophthalmologists when OCT is performed in the hospital for the following indications: intravitreal injection of anti-VEGF or for evaluation in hospital of macular diseases of the retina or patients with previously documented features of glaucoma such as ocular hypertension, established visual field defects and optic nerve morphology consistent with a diagnosis of glaucoma. Screening of patients with ocular coherence tomography is not an insured service.

Claims associated with fee code 57780 will still require a hospital facility code, as before.

Questions relating to the content of this Newsletter should be directed to Dr. Colleen Crowther, Assistant Medical Director at (709) 758-1557 or by email at colleencrowther@gov.nl.ca