

MEDICAL SERVICES COMMISSION

MINUTE OF THE COMMISSION

Page 1 of 2

20-016

Amendment to the Medical Services Commission Payment Schedule Section of General Practice

In accordance with Section 26(3) of the *Medicare Protection Act*, the following modification to the Payment Schedule has been approved by the Medical Services Commission, effective Immediately:

Amendment:

The following wording is deleted from the Section of General Practice Preamble (strikethrough deleted):

Note: Daily Volume Payment Rules Applying to Designated Office Codes

(i) The codes to which these rules apply are as follows:

Office visits: 12100, 00100, 15300, 16100, 17100, 18100
Office counselling: 12120, 00120, 15320, 16120, 17120, 18120
Office complete examinations: 12101, 00101, 15301, 16101, 17101, 18101

(ii) The total of all billings under the codes listed in i) that are accepted for payment by MSP will be calculated for each practitioner for each calendar day. When such a daily total exceeds 50 the practitioner's payment on these codes for that day will be discounted. Moreover, when a daily total exceeds 65, a further payment discount will be made.

Daily-Ranges	Discount Rate	- Payment Rate
	<u> Biocount (kato</u>	
(for an individual practitioner		
for any single calendar day)	•	

0 to 50	0%	
51 to 65	50%	50%
66 and greater	100%	0%

MINUTE OF THE COMMISSION

Page 2 of 2

- (iii) Payment discounts-will not be applied to services rendered in communities that are/were receiving NIA premiums as of December 15, 2002.
- (iv) Payment discounts will not be applied to services designated by the physician as being the responsibility of ICBC, (designate by checking the MVA indicator on the claim), or services that are the responsibility of Worksafe BC.
- (v) Services will be assessed and payment/discounts will be applied to services in the order in which they are received and accepted for payment by MSP.

Dr. Robert Halpenny

Chair

Medical Services Commission

Dated this 13 H

day of

march

AD 20 70