

# PHYSICIAN'S BULLETIN

November 22, 2024: Vol. LXIX, ISSUE 8



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## NEW INTERIM FEE

Effective September 18, 2024 the following interim health service code is available for billing:

Category	Code	Description	Base Units	Anae Units
MASG	92.84B	<b>Arthroscopic Repair (Hip) with Labral Tear</b>	473 MSU	4 + T
		<b>Description</b> This interim fee code is only for orthopedic surgeons who specialize in hip arthroscopy with labral tear. MSI must pre-approve use of this code by providers.		
		<b>Billing Guidelines:</b> <ul style="list-style-type: none"><li>• Restricted to orthopedic surgeons with prior approval from MSI.</li><li>• Maximum one hip arthroscopy payable per patient per day.</li><li>• Hip arthroscopies are composite fees and include all necessary procedures. No other procedures involving the hip are payable during the same operation.</li></ul>		
		<b>Specialty:</b> SP=ORTH with expertise in this procedure – prior approval required		
		<b>Assistant:</b> RO=SRAS allowed		
		<b>Regions:</b> RG=LEFT or RG=RIGT		
		<b>Location:</b> LO=HOSP		

## NEW UPCOMING INTERIM FEE

The following service will be effective December 1, 2024; however, physicians are required to hold their claims until the system is updated. Notification and the health service code will be published in an upcoming Physician's Bulletin when claims can be submitted.

Category	Code	Description	Base Units
DEFT	TBD	<b>Advance Care Planning Discussion</b>  <b>Description</b> Advance Care Planning Discussion may be claimed when the patient's family physician, or if the patient is admitted to an acute care facility, their most responsible physician, has a face to face (in person) conversation with the patient (or the patient's substitute decision maker either face to face or virtually) to discuss their wishes for future health care based on their beliefs and values, determines the substitute decision maker (SDM), documents the conversation in the patient's health record, and captures the outcome of that conversation by completing the initial Patient-Centered Priorities and Goals of Care (GOC) form. In extenuating circumstances, for established homebound patients only, as defined by the Preamble, this service may be rendered virtually by telephone or PHIA compliant video platform. The circumstances necessitating the virtual visit must be documented in the health record. Where possible, the GOC form should be submitted to the patient's hospital chart through the appropriate health records department. A copy of the document must be shared with the patient so that it may be added to their Green Sleeve folder, if applicable.  <b>Billing Guidelines:</b> Documentation of the Advance Care Planning Discussion, the patient appointment substitute decision maker, and resultant completion of the Patient-Centered Priorities and Goals of Care (GOC) form must be in the patient's health record AND, where possible, the GOC form must be sent/faxed to the appropriate hospital records department for inclusion in the patient's hospital chart.  May not be claimed where this service is part of the compensation for an existing health service: <ul style="list-style-type: none"><li>• 03.04D Geriatrician's Initial Comprehensive Consultation</li><li>• 03.04E Family Physician's Initial Geriatric Inpatient Medical Assessment</li><li>• CGA1 LTC Clinical Geriatric Assessment</li><li>• 03.09C Palliative Care Consultation</li><li>• 03.09H Antenatal Palliative Care Consultation</li><li>• Critical Care HSC's Adult and Pediatric</li></ul>	15 MSU



## FACILITY ON CALL UPDATES

Effective October 21, 2024, the following Rota may be billed from an additional facility (18):

Health Service Code	Description	Weekday	Weekend/Holidays (DA=RGE1)	Approved Facilities
F1008	Facility on Call Category 1 Family Medicine O.R. Call Assists	\$350	\$500	Valley Regional, St. Martha's, Cape Breton Regional, Dartmouth General, Aberdeen, Cumberland Regional, <a href="#">Colchester East Hants Health Centre</a>

Effective November 25, 2024, the following Rota may be billed from an additional facility (166528):

Health Service Code	Description	Weekday	Weekend/Holidays (DA=RGE1)	Approved Facilities
F1006	Facility on Call Category 1 Hospitalist	\$350	\$500	IWK/Grace, <a href="#">West Bedford Transitional Care Facility</a>



## Billing Matters Billing Reminders, Updates, New Explanatory Codes

### Physician Retirement Fund

The Government has introduced a retirement fund initiative for physicians practicing in Nova Scotia. This retirement fund will support physicians in their continued clinical practice in Nova Scotia and assist in their long-term financial planning. Please see an updated FAQ: [Retirement Fund FAQ](#)

### Audiologist Referrals to Specialists

As published in the July 26, 2024 physician's bulletin, the specialties otolaryngology, neurology, and internal medicine may claim a consultation when a patient is referred to them by an audiologist. The referring audiologist number is only required when claiming an 03.07 or 03.08 as this is a referral required service. The specialist may then claim any necessary insured procedures or services as they have received a valid referral for that patient. The referring audiologist number is not required on claims for any follow-up care/procedures after the consultation. Entering an audiologist referring provider number in procedures/services after the consultation may result in the claim being rejected, as a referring provider is not required on these claims.

As a reminder, MSI will pay for a visit or consultation to determine if a treatment method is insured, even though the proposed procedure is non-insured. If the proposed procedure or treatment is always uninsured, a visit or consultation may not be claimed. (2.2.9)

### Physicians Manual

Applicable updates in the Physician's Bulletin's will be reflected in the [Physician's Manual](#) within 3 weeks; however, it may be necessary to refer to Physician's Bulletins for additional detailed information and any billing clarifications or reminders.



## NEW AND UPDATED EXPLANATORY CODES

Code	Description
GN131	SERVICE ENCOUNTER HAS BEEN REFUSED AS YOU MUST SUBMIT YOUR COMPLETED GAC PHYSICIAN DECLARATION IN ORDER TO CLAIM 03.04K.
MJ095	SERVICE ENCOUNTER HAS BEEN REFUSED AS HSC 92.84B HAS ALREADY BEEN CLAIMED FOR THIS PATIENT ON THIS DAY.
MJ096	SERVICE ENCOUNTER HAS BEEN REFUSED AS HSC 92.84B IS A COMPOSITE FEE AND MAY NOT BE CLAIMED AT THE SAME SERVICE OCCURRENCE AS ANY OTHER PROCEDURES INVOLVING THE HIP.
MJ097	SERVICE ENCOUNTER HAS BEEN REFUSED AS HSC 92.84B IS A COMPOSITE FEE. NO OTHER PROCEDURES INVOLVING THE HIP MAY BE CLAIMED AT THE SAME SERVICE OCCURRENCE.

## NOTICE TO VENDORS – UPCOMING TECHNICAL CHANGES REQUIRED

Communication has been sent to vendors on October 16, and October 31, 2024 regarding upcoming technical changes related to the service encounter detail record data to support upcoming payment requirements. The specifications were included in the communication, and an updated [Vendor Manual](#) has been uploaded on the MSI website.

The modifications made to vendor software need to be communicated to, and validated by, Medavie Blue Cross.

To schedule a date to have your software tested, or if you have not received the communications and require more information, please contact us by email: [BC\\_MSIbusinessAnalysts@medavie.ca](mailto:BC_MSIbusinessAnalysts@medavie.ca)



**In every issue** Helpful links, contact information, events and news, updated files

### UPDATED FILES

Updated files reflecting changes are available for download on Friday November 22, 2024. The files to download are:  
Health Service (SERVICES.DAT), Health Service Description (SERV\_DSC.DAT), and Explanatory Codes (EXPLAIN.DAT).

### CONTACT INFORMATION

**NOVA SCOTIA MEDICAL INSURANCE (MSI)**

Phone: 902-496-7011

Toll-Free: 1-866-553-0585

Fax: 902-490-2275

Email:

[MSI\\_Assessment@medavie.bluecross.ca](mailto:MSI_Assessment@medavie.bluecross.ca)

**NOVA SCOTIA DEPARTMENT OF HEALTH AND WELLNESS**

Phone: 902-424-5818

Toll-Free: 1-800-387-6665

(In Nova Scotia)

TTY/TDD: 1-800-670-8888

### HELPFUL LINKS

**NOVA SCOTIA MEDICAL INSURANCE (MSI)**

<http://msi.medavie.bluecross.ca/>

**NOVA SCOTIA DEPARTMENT OF HEALTH AND WELLNESS**

[www.novascotia.ca/dhw/](http://www.novascotia.ca/dhw/)

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## 2025 CUT-OFF DATES FOR RECEIPT OF PAPER AND ELECTRONIC CLAIMS

PAPER CLAIMS	ELECTRONIC CLAIMS	PAYMENT DATE	CONTRACT PAY PERIOD
<b>December 24, 2024**</b>	January 2, 2025	January 8, 2025	December 20, 2024-January 2, 2025
January 13, 2025	January 16, 2025	January 22, 2025	January 3-16, 2025
January 27, 2025	January 30, 2025	February 5, 2025	January 17-30, 2025
<b>February 7, 2025**</b>	<b>February 12, 2025**</b>	February 19, 2025	January 31-February 13, 2025
February 24, 2025	February 27, 2025	March 5, 2025	February 14-27, 2025
March 10, 2025	March 13, 2025	March 19, 2025	February 28-March 13, 2025
March 24, 2025	March 27, 2025	April 2, 2025	March 14-27, 2025
April 7, 2025	April 10, 2025	April 16, 2025	March 28-April 10, 2025
April 21, 2025	April 24, 2025	April 30, 2025	April 11-24, 2025
May 5, 2025	May 8, 2025	May 14, 2025	April 25-May 8, 2025
<b>May 16, 2025**</b>	May 22, 2025	May 28, 2025	May 9-22, 2025
June 2, 2025	June 5, 2025	June 11, 2025	May 23-June 5, 2025
June 16, 2025	June 19, 2025	June 25, 2025	June 6-19, 2025
<b>June 27, 2025**</b>	July 3, 2025	July 9, 2025	June 20-July 3, 2025
July 14, 2025	July 17, 2025	July 23, 2025	July 4-17, 2025
<b>July 25, 2025**</b>	<b>July 30, 2025**</b>	August 6, 2025	July 18-31, 2025
August 11, 2025	August 14, 2025	August 20, 2025	August 1-14, 2025
<b>August 22, 2025**</b>	<b>August 27, 2025**</b>	September 3, 2025	August 15-28, 2025
September 8, 2025	September 11, 2025	September 17, 2025	August 29-September 11, 2025
<b>September 19, 2025**</b>	<b>September 24, 2025**</b>	October 1, 2025	September 12-25, 2025
<b>October 3, 2025**</b>	<b>October 8, 2025**</b>	October 15, 2025	September 26-October 9, 2025
October 20, 2025	October 23, 2025	October 29, 2025	October 10-23, 2025
<b>October 31, 2025**</b>	<b>November 5, 2025**</b>	November 12, 2025	October 24-November 6, 2025
November 17, 2025	November 20, 2025	November 26, 2025	November 7-20, 2025
December 1, 2025	December 4, 2025	December 10, 2025	November 21-December 4, 2025
December 15, 2025	December 18, 2025	December 24, 2025	December 5-18, 2025
<b>December 24, 2025**</b>	January 1, 2026	January 7, 2026	December 19, 2025-January 1, 2026
<b>11:00 AM CUT OFF</b>	<b>11:59 PM CUT OFF</b>		

**NOTE:**

Though we will strive to achieve these goals, it may not always be possible due to unforeseen system issues. It is advisable not to leave these submissions to the last day.

Each electronically submitted service encounter must be received, processed and accepted by 11:59 p.m. on the cut-off date to ensure processing for that payment period.

Paper Claims include: Psychiatric Activity Reports, Rural Providers' Emergency on Call Activity Reports, Sessional Payments and Locum Claim Forms. Manual submissions must be received in the Assessment Department by 11:00 a.m. on the cut off date to ensure processing for that payment period.

**PLEASE NOTE, THE \*\* INDICATES A DATE VARIATION**

Please make a note in your schedule of the following dates MSI will accept as “Holidays”.

NEW YEAR'S DAY	WEDNESDAY, JANUARY 1 2025
HERITAGE DAY	MONDAY, FEBRUARY 17, 2025
GOOD FRIDAY	FRIDAY, APRIL 18, 2025
EASTER MONDAY	MONDAY, APRIL 21, 2025
VICTORIA DAY	MONDAY, MAY 19, 2025
CANADA DAY	TUESDAY, JULY 1, 2025
CIVIC HOLIDAY	MONDAY, AUGUST 4, 2025
LABOUR DAY	MONDAY, SEPTEMBER 1, 2025
NATIONAL DAY FOR TRUTH AND RECONCILIATION	TUESDAY, SEPTEMBER 30, 2025
THANKSGIVING DAY	MONDAY, OCTOBER 13, 2025
REMEMBRANCE DAY	TUESDAY, NOVEMBER 11, 2025
CHRISTMAS DAY	THURSDAY, DECEMBER 25, 2025
BOXING DAY	FRIDAY, DECEMBER 26, 2025
NEW YEAR'S DAY	THURSDAY, JANUARY 1, 2026