Base Rate Capitation Flow through Decrease of 1.37% effective January 1, 2013

The 2012 Physician Services Agreement (PSA) between the Ministry of Health and Long-Term Care (MOHLTC) and the Ontario Medical Association (OMA) includes provisions for changes arising from the April 1, 2012 Schedule of Benefits to be applied to Group Health Center as per Appendix C “April 2012 flow through effective January 1, 2013”.

As a result, the Base Rate Capitation Payments for GHC have been discounted by 1.37 %.

This discount has been processed with an effective date of January 1, 2013 and will be reflected on your April 2013 Remittance Advice (RA).

Hard Cap Discount

Effective January 1, 2013 Hard Cap will be discounted 1.37% to the new amount $55,758.37 reflected on the April 2013 RA.

Effective April 1, 2013 the new Hard Cap amount is $55,183.49 reflected on the May 2013 RA.

New Fee Schedule Codes effective April 1, 2013

Effective April 1, 2013 the following Fee Schedule Codes will be added to the Schedule of Benefits:

<table>
<thead>
<tr>
<th>NEW FSC</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>A900A</td>
<td>Complex House Call Assessment</td>
</tr>
<tr>
<td>E431A</td>
<td>when papanicolaou smear is performed outside of hospital, to G394</td>
</tr>
</tbody>
</table>
These new fee schedule code A900A has been identified as a Primary Care Service and will be added to the basket of ‘Included Codes’ for the GHC patient enrolment models.

When a GHC physician bills the A900A service for a rostered patient the claim will pay at zero dollars with a payment explanation type code of ‘I2’ (shadow billed).

The G394A FSC is an excluded code and therefore the add-on E431A FSC is added to the basket of excluded codes. When the GHC physician bills the service the claim will be paid FFS.

Thank you for your continued participation in advancing Primary Health Care in Ontario.

All claims inquiries should be directed to your Claims Service Branch Office.

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