

Bulletin



Bulletin Number 4456	Date September 25, 2007	Direct inquiries to Ministry of Health and Long-Term Care Processing Sites (address below)
Distribution Physicians, Hospitals, Clinics and Laboratories		

SUBJECT: Implementation of 2007 Reassessment Memorandum of Agreement for October 1, 2007 and Updated List for Second Surgical Assists.

- 1. Fee increases**
- 2. Revisions to specific fee codes**
- 3. Deletion of specific fee codes**
- 4. Amendment chart**
- 5. Second Surgical Assistant**

In accordance with the 2007 Re-assessment Memorandum of Agreement, a number of changes are being made to the Schedule of Benefits for Physician Services. These changes will be implemented with an **effective date of October 1, 2007**. In addition, the list of surgical procedures where prior authorization for a second surgical assistant is not required has been updated.

1. Fee increases

Fee increases to specific fee codes are being introduced on October 1, 2007. These fee increases are summarized in the following Amendment Chart. They will be implemented on the OHIP claims processing system effective October 1, 2007.

2. Revisions to specific fee codes

Two revisions will be made to the wording/definition of specific fee codes:

- E649 - Embolectomy and/or thrombectomy
- Long term ventilated care is modified to permit the billing of ICU fees for stable patients who are on ventilators.

3. Deletion of specific codes

Three fee codes will be deleted from the Schedule effective October 1, 2007. These codes are summarized in the following Amendment Chart.

Processing Sites			
Hamilton 119 King Street West, 10 th Floor P.O. Box 2280, Stn A L8P 4Y7	Kingston 1055 Princess Street, Suite 401 P.O. Box 9000 K7L 5A9	London 217 York Street, 5 th Floor Station A N6A 5P9	Mississauga 201 City Centre Drive Suite 300 L5B 2T4
Oshawa Executive Tower, Oshawa Centre 419 King Street West P.O. Box 635 L1J 7J2	Ottawa Fuller Building 75 Albert Street K1P 5Y9	Sudbury 199 Larch Street Suite 801 P3E 5R1	Toronto 47 Sheppard Avenue East Suite 505 M2N 7E7

4. Amendment Chart

All of the abovementioned changes to the Schedule are listed in the following chart:

Fee Code	Fee Code Description	Action	Existing Fee	Oct 1 2007
E649	Embolectomy/and or Thrombectomy - revise descriptor for same operative site	Revision	112.45	X
	Long-term ventilated care	Revision	X	X
X186	Mammogram - dedicated xeroradiography equipment - unilateral	Delete	T - \$31.40 P - \$12.80	\$0.00 \$0.00
X187	Mammogram - dedicated xeroradiography equipment - bilateral	Delete	T - \$48.25 P - \$19.35	\$0.00 \$0.00
S640	Stereotactic prostate brachytherapy	Delete	\$627.15	\$0.00
Z524	Drainage of hematoma or deep neck abscess	Fee increase	\$153.35	\$271.05
N282	Brachial Plexus	Fee increase	\$593.85	\$1,000.00
S420	Nephroureterectomy	Fee increase	\$592.55	\$673.10
R483	Knee hemiarthroplasty double component	Fee increase	\$447.30	\$619.90
E526	Balancing mastopexy	Fee increase	\$283.35	\$401.35

5. Second Surgical Assistant

Revisions are being made to expand the number of surgical services where a second assistant's services are payable and authorization is not required. They will be implemented on the OHIP claims processing system effective October 1, 2007. These additional codes are listed in the following table.

Fee Code											
M111	M117	M134	M142	P042	P051	P052	P056	P059	R008	R009	R013
R014	R015	R016	R055	R056	R067	R069	R134	R135	R136	R140	R182
R244	R296	R334	R393	R438	R441	R464	R483	R545	R553	R568	R593
R617	R645	R701	R702	R711	R712	R713	R714	R715	R718	R726	R727
R728	R729	R733	R734	R735	R737	R738	R742	R743	R746	R747	R749
R764	R770	R771	R772	R785	R786	R799	R800	R801	R802	R803	R804
R811	R815	R816	R817	R818	R830	R832	R858	R863	R870	R872	R874
R920	R927	R929	R930	S005	S007	S090	S120	S125	S189	S454	S462
S484	S750										

A revised Schedule of Benefits for Physician Services including all Schedule amendments resulting from both the 2004 Physician Services Agreement as well as the 2007 Re-assessment will be distributed to physicians for April 1, 2008.

Bulletins and the updated version of the Schedule reflecting October 2007 amendments are available on the Ministry of Health and Long-Term Care website <http://www.health.gov.on.ca/>.

This Bulletin is a general summary provided for information purposes only. Physicians, hospitals and other health care providers are directed to review the *Health Insurance Act*, Regulation 552 and the Schedules under that regulation, for the complete text of the provisions. You can access this information on-line at: www.e-laws.gov.on.ca/. In the event of a conflict or inconsistency between this bulletin and the applicable legislation and/or regulation, the legislation and/or regulation prevails.