

MSCommuniqué

Communicating the policy and directives of the Medical Services Commission of British Columbia

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CMQ96-018

Proration of MSC Payment Schedule

Minute of Commission #96-0049

As the total claims expenditure for 1996/97 is projected to exceed the Available Amount, the Medical Services Commission, pursuant to Section 19 of the *Medicare Protection Act*, adopts the following measure:

Payment of claims for physician services rendered on or after October 1, 1996 and until March 31, 1997, shall be prorated by an amount of three (3) percent.

CMQ96-019

Deinsurance of the Surgical Treatment of Benign Skin Lesions

Minute of Commission #96-0048

In accordance with Minute of Commission 96-0029 - Deinsurance of Surgical Removal of Benign Skin Lesions, the Medical Services Commission hereby sets the implementation date for Minute of Commission 96-0003 - Deinsurance of Surgical Treatment of Benign Skin Lesions to October 1, 1996.

Notes: For amendment to the *MSC Payment Schedule - Preamble Appendix A: Surgery for Alteration of Appearance*, please see enclosed insert.

The full Minute of Commission 96-0003 and additional information about the deinsurance of the surgical removal of benign skin lesions is available through Claims Info-by-Fax line at 356-9605. Please direct your billing questions to Claims Billing Support at 952-2670.

CMQ96-020

Application for Northern and Isolation Allowance

Physicians practising in isolated communities are eligible to receive a fee premium on MSP claims through the Northern and Isolation Allowance Program (NIA). Physicians must be living, practising and taking call in a community which has applied and qualified under NIA Terms of Reference. NIA is also available to relief physicians, including bona fide locum tenens and supplemental physicians, practising temporarily in a NIA community but who retain their principal residence elsewhere. The following policies apply:

Communities must make application to the joint Northern and Isolation Committee in order to be considered for an allowance.

- Physicians who have located in a community that has applied and been approved for NIA must apply on an individual basis in order to receive the allowance.
- No retroactive adjustments will be made in cases where communities and/or physicians have failed to apply for NIA in accordance with the NIA Terms of Reference.

For more information on the NIA program, its terms of reference or application procedures, call MSP Alternative Payments Branch (APB) at 952-3200 or the APB Info-by-Fax line at 356-0998.

Members:

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CMQ96-021

**Guideline for
Cholesterol Testing:
Adults Under
69 Years**

Minute of Commission #96-0039

Pursuant to Section 4 and Section 32(4) of the *Medicare Protection Act*, the Medical Services Commission hereby adopts the attached* clinical practice guideline for *Cholesterol Testing: Adults Under 69 Years*, effective January 1, 1997.

*Guideline distributed September 23, 1996

The recommendations in the cholesterol guideline supercede the current protocols on pages 249 and 250 of the *MSC Payment Schedule*, for services rendered on and after **January 1, 1997**.

CMQ96-022

**Protocol for Routine
Pre-Operative
Testing**

Minute of Commission # 96-0034

Pursuant to Section 4 and Section 32(4) of the *Medicare Protection Act*, the following payment protocol will apply with respect to the Medical Services Commission *Payment Schedule*:

Diagnostic services relating to pre-operative testing will be considered a benefit under the Medical Services Plan only when rendered in conformity with the Protocol for Routine Pre-Operative Testing and the Standard Pre-Operative Outpatient Diagnostic Requisition Form, appended.*

This protocol shall be used for audit purposes and the Medical Services Commission Recovery Policy for Diagnostic Facilities will apply to facilities that do not comply.

Effective December 1, 1996.

* Protocol distributed September 16 , 1996

Note: Additional copies of guidelines and protocols are available through the Resource Management Info-by-Fax line at **356-9644** or by calling Claims Billing Support at **952-2670**.