

mcp newsletter

September 29, 2026

26-06

TO: ALL PHYSICIANS

RE: UPDATED RATES OCTOBER 1, 2026

On October 1st at 00:00, the new MCP Medical Payment Schedule will “go live”. The changes in the new MCP Payment Schedule reflect the **2017-23** Memorandum of Agreement (MOA) between the Government of Newfoundland and Labrador and the Newfoundland and Labrador Medical Association (NLMA).

On the same date, October 1, 2026, the Year 4 increases awarded under the **current** 2023-27 MOA will be applied. For further information, please see MCP newsletters [25-15](#), [25-16](#), [25-17](#), and [25-18](#). Please note that retro associated to the 2023-2027 MOA was processed in fiscal year 2025-26.

This newsletter is intended to help physicians billing Fee-For-Service (FFS) and Alternate Billing (ABS) understand the changes effective October 1st and provides an update to the newsletters above. For detailed changes to the Payment Schedule, please see MCP newsletter [26-05](#). If you do not bill FFS or ABS, this newsletter is provided for information only.

Across the Board Biweekly Adjustments

With the publication of the new 2026 Payment Schedule, the biweekly across-the-board (ATB) adjustments from the 2017-23 MOA will be discontinued. The ATB adjustments awarded under the 2023-27 MOA as per ‘Schedule F’ of the MOA will remain in effect and will continue to be applied to the new Payment Schedule rates as an automatic biweekly adjustment. This will continue until the fee code allocation process for the 2023-27 MOA is complete. Please see the updates to the ATB biweekly adjustments by specialty below. The table below updates that found in MCP [newsletter 25-16](#).

The table below shows the **New Effective ATB percentages by specialty**

Specialty	Oct. 1, 2024	Oct. 1, 2025	Oct. 1, 2026	Effective FFS ATB % (Note)
Family Medicine	9.59%	3.55%	3.50%	17.45%
Internal Medicine	10.10%	3.50%	3.50%	17.94%
Neurology	11.08%	3.50%	3.50%	18.99%
Psychiatry	11.75%	3.50%	3.50%	19.71%
Paediatrics	4.86%	3.50%	3.50%	12.33%
Dermatology	6.09%	3.50%	3.50%	13.65%

General Surgery	15.27%	3.50%	3.50%	23.48%
Urology	2.00%	3.50%	3.50%	9.26%
Orthopaedic Surgery	2.00%	3.50%	3.50%	9.26%
Plastic Surgery	6.97%	3.50%	3.50%	14.59%
Neurosurgery	2.00%	3.50%	3.50%	9.26%
Ophthalmology	2.00%	3.50%	3.50%	9.26%
Otolaryngology (ENT)	12.71%	3.50%	3.50%	20.74%
Obstetrics/Gynecology	21.94%	3.50%	3.50%	30.63%
Radiology	16.61%	3.50%	3.50%	24.92%
Anesthesiology	9.67%	3.50%	3.50%	17.48%
Critical Care	10.10%	3.50%	3.50%	17.94%

Note: The effective FFS ATB % is the compounded value of the 2023-27 MOA increases applied to the updated Payment Schedule rates. Using Family Medicine as an example: $(1 + 0.0959) \times (1 + 0.0355) \times (1 + 0.0350) = 1.1745$, or 17.45%.

Changes to the On-Call Payment Program Manual

The existing [On-Call Payment Program Manual](#) has been updated with on-call rates, call back rate, and solo specialist minimum and cap amounts effective October 1, 2026.

On-Call Rates — Effective October 1, 2026

Item	Rate
Tier 1	\$476.93 per day / \$19.88 per hour
Tier 2	\$425.38 per day / \$17.73 per hour
Tier 3	\$373.83 per day / \$15.58 per hour
Tier 4	\$322.29 per day / \$13.43 per hour
Call Back	\$550.76 per day
Solo Specialist Minimum	\$42,254.31 per annum
Solo Specialist Cap	\$171,837.12 per annum

Alternate Billing System (ABS) Rate Changes

Fee Code	Description	Unit	Oct 1/2026 Rate
ANAESTHESIA			
640500	Obstetrical Anaesthesia	per hour	\$223.57
640510	Cardiac Anaesthesia – Case completed (no TEE)	per case	\$1,772.22
640512	Cardiac Anaesthesia – Case completed (with TEE)	per case	\$1,994.92
640520	Cardiac Anaesthesia – Case cancelled	per case	\$1,772.22
640530	Neurocoiling Anaesthesia – Case completed	per case	\$2,159.40
640532	Neurocoiling Anaesthesia – Case cancelled	per case	\$2,159.40
OBS/GYN			
641000	Case Room Block Funding	per hour	\$286.57
NEONATAL BLOCK FUNDING			
641030	Level I – Weekday 08:00–16:00, excl. holiday	per unit	\$1,246.54
641040	Level I –Holiday 08:00–16:00	per unit	\$1,448.21

641050	Level II – Weekday 08:00–16:00, excl. holiday	per unit	\$1,486.48
641060	Level II –Holiday 08:00–16:00	per unit	\$1,681.88
641070	Level III – Weekday 08:00–16:00, excl. holiday	per unit	\$1,486.48
641080	Level III – Any day, 16:00–08:00	per unit	\$1,541.51
641090	Level III –Holiday 08:00–16:00	per unit	\$1,681.88
641100	Level III – Weekend 08:00–16:00	per unit	\$1,681.88
ICU / CRITICAL CARE			
642100	ICU Coverage – St. Clare's Mercy Hospital	per hour	\$228.08
642110	ICU Coverage – Health Sciences Centre	per hour	\$228.08
642120	ICU 2nd Physician Coverage – Health Sciences Centre	per hour	\$228.08
ORGANIZED CLINICS			
644025	Premature Infants Ophthalmology Services	per unit	\$909.61
644070	Otolaryngology Services	per unit	\$2,173.88
CATEGORY-A EMERGENCY DEPARTMENT (HSC & St. Clare's only)			
601257	Emergency Room (Cat A) – Health Sciences Centre	per hour	\$312.06
601259	Emergency Room (Cat A) – St. Clare's Mercy Hospital	per hour	\$312.06

The Long-Term Care bed rate has increased again effective October 1st. New rates can be found in Appendix C of the new Payment Schedule.

The interim rate structure for Category B facilities set out in MCP newsletters will remain in place.

Other Rate Changes – Effective October 1, 2026

Item	Rate
Surgical Assist — Dedicated Time Method	\$36.60
Surgical Assist — Standard Time Method	\$39.92
Category “A” Facilities — Hourly Rate	\$273.45
MAiD Fee Codes (604100 / 604150 / 604200)	\$199.62

FFS Visit Premiums

Visit premium rates for family physicians and consultants increase on October 1, 2026 under the 2023-27 MOA. These rates have been incorporated into the new Payment Schedule.

Blended Capitation Model Physicians

ATB increases for the FFS component (i.e. 25% of in-basket fee codes) of the Blended Capitation Model will follow the first table in the newsletter.

Specialist Assist Rate ATB Payments

Medical Services will continue to apply applicable ATB increases through the established manual adjustment process. This manual adjustment will change effective October 1, 2026. Adjustments made as a result of the 2017-23 MOA will discontinue. However, adjustments will continue to be applied to reflect the 2023-27 MOA. This is an update to the process described in MCP [Newsletter 22-10](#).

Questions relating to the content of this newsletter should be directed to:
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