Department of Health and Community Services

mcp newsletter

MAY, 2004 04-04

TO: ALL PHYSICIANS

RE: MERGER OF PAPER AND ELECTRONIC FEE-FOR-TIME BILLING SYSTEMS

Sessional arrangements were introduced years ago as an alternative to fee-for-service billing for specific insured services. For most of this time sessional claims had to be submitted on paper forms. In 1997 MCP implemented an internal computerized processing system for these claims which has continued to exist until now. In 2000/01 MCP developed new Windowsbased TeleClaim software that enabled electronic billing of sessional claims. Consequently, MCP has been maintaining two parallel systems for the purpose of processing sessional claims for several years. This involves some inefficiencies and creates the possibility of errors in processing and data collection.

As well, over the same period of time, Government and the Medical Association have been negotiating multiple new fee-for-time payment arrangements, other than the traditional sessionals, as an alternative to fee-for-service billing. This has placed greater demands on the 1997 paper system and MCP staff, and has accentuated the discrepancies between the way the two systems process claims.

In order to address these issues, MCP has been working to merge the two systems into a single, more efficient, new system. This new system will be referred to as the **Alternate Billing System** and will apply to the following arrangements:

- Organized Sessional Clinics
 - General Practice Correctional Institute Sessional Arrangements
 - Specialist Organized Sessional Clinics
- ICU Sessional Arrangements
- Category 'A' Emergency Department Coverage
- Category 'B' Emergency Department Coverage
- Long Term Care Facility Coverage by General Practitioners
- Dedicated Time General Practitioner Surgical Assists
- Obstetrical/Anaesthesia Block Funding
- Obstetrical/Gynecology HCC Case Room Block Funding
- Neonatology Block Funding
- Premature Infants Ophthalmology Services Alternate Payment Plan
- Otolaryngology Services NCTRF Alternate Payment Plan
- On-Call Payment Program

As of June 14, 2004 paper claims for all of the arrangements listed above will be keyed into the new Alternate Billing System and this will have implications for both physicians and MCP staff.

All paper claims will be key entered by MCP staff as they are submitted by physicians and/or their billing staff. MCP staff will not modify the information entered on these paper claims. Any error on the claim forms will result in TADs being sent back to the physician for clarification of billing and/or more information, etc., resulting in possible delays in payment of the claim.

To ensure claims are processed in a timely manner, please note the following:

- use the 24-hour clock for all times of service
- enter the correct, published rate for your arrangement
- complete all fields on the forms
- On-call Call Back Physicians should bill for the full calendar date on which you were called back, as that arrangement is a per diem fee. Use the following time format to ensure your claim is processed; 00:00 23:59.

All physicians are encouraged to bill MCP electronically. The current versions of MCP TeleClaim software can be used to bill for the services listed above. Physicians who use other billing software provided by a private vendor should contact their vendor to discuss conversion to electronic billing. Physicians who employ a private billing agency should discuss this matter with their billing staff as well.

MCP TeleClaim billing software and advice can be obtained at no cost from our Computer Support Technicians by calling 758-1530. Physicians outside the St. John's local calling area can be connected to them by calling the 1-800-440-4405 toll free number.

Should you require further clarification of the content of this newsletter, please contact Brenda Hancock at (709) 292-4003 or 1-800-440-4405.