

1. INTRODUCTION

1.1 OVERVIEW

The purpose of this Information Manual is to provide instructions on the preparation and the submission of claims for services insured under the Medical Care Plan.

This document contains instructions on the completion of claims, the handling of queries on previously submitted claims, information on the payment process, sample claims for various services, information on physician and beneficiary registration, and the Medical Care Insurance Act, etc.

This document is not intended to replace the MCP Medical Payment Schedule—it deals mainly with the process required for the submission of claims. If there is conflicting information, the MCP Medical Payment Schedule will prevail.

This document will be amended as necessary and new material or revisions to policies and procedures will be added to the document on the website.

1.2 MCP PUBLICATIONS

The following MCP publications are available upon request and are designed for your benefit. Please contact MCP at 1-800-563-1557, or (709) 292-4000 if you wish to obtain a copy of any of these documents:

1.2.1 MCP Payment Schedule

This document identifies the amounts prescribed as payable and rules and conditions of payment under the Physicians and Fee Regulations (Schedule A), governed by the Medical Care Insurance Act for insured services rendered by licensed physicians.

Amendments are mailed periodically and should be entered in the appropriate section of the Payment Schedule. The Payment Schedule is also available for download on the internet at www.gov.nl.ca/mcp under the topic “Information for Providers”.

1.2.2 Newsletters

MCP issues newsletters periodically to make physicians aware of various matters such as claim processing period cut-offs, Payment Schedule amendments, etc. These are sent to all

or to specific groups of physicians depending on the topic. Access to MCP Newsletters is also available on the internet at www.gov.nl.ca/mcp under the topic ‘Information for Providers’.

All Newsletters received should be read carefully to determine their impact on your practice. If the content of a newsletter is not clearly understood, you should contact MCP for clarification.

1.2.3 Website

The Newfoundland and Labrador Medical Care Plan website can be found at www.gov.nl.ca/mcp. Website contents include:

- Medical Care Plan
 - Surgical Dental
 - Contact MCP
- Dental Health Plan
- Hospital Insurance Plan
- Beneficiary Information
- Provider Information
 - Registration
 - Claim Submission
 - Claim Payment
 - Newsletter
 - TeleClaim Software Package
 - Private Vendor’s Software
 - MCP Subsys Software
 - Provider Audit
 - Forms
 - Payment Schedule Download
- MCP Structure
- Medical Care Act
- Annual Reports
- Forms
- Other Health Sites
- MCP Re-Registration

1.3 ROLES AND RESPONSIBILITIES

1.3.1 Role of the Newfoundland and Labrador Medical Association (NLMA)

The NLMA represents the medical profession within the province. The Department of Health & Community Services works closely with the NLMA and its various committees in dealing with issues relevant to the medical profession as a whole. Issues addressed are fee negotiations and other Payment Schedule matters, and appointments to committees.

1.3.2 Role of the Department of Health and Community Services (DOHCS)

The Minister of Health and Community Services is responsible for the administration of the Medical Care Plan and the Dental Health Plan. The DOHCS, on behalf of the Minister, is responsible for the formulation of policy as well as decisions with respect to legal and financial matters associated with the operation of the Plans. An organizational chart depicting MCP operations has been included at the end of this section.

The Audit and Claims Integrity Division (ACID), under the direction of the Executive Director, is responsible for the overall operation of both Plans, and reports to the Assistant Deputy Minister, Corporate Services Branch, of the DOHCS. The administrative offices, management and staff within this Division that deal directly with the service delivery and auditing of both Plans, are commonly referred to as “MCP”.

The Regional Director (Grand Falls-Windsor) is responsible for the day to day operation of the Grand Falls-Windsor office of “MCP”, including full responsibility for Claims Operations and administrative responsibility for Public Services. The Claims Operations section is responsible for the processing and assessing of medical and dental claims, as well as participating in the production of various manuals (Physician Payment Schedules, Dental Payment Schedules, etc) related to the operation of the Plans. Public Services is responsible for the registration of beneficiaries and the issuance of “MCP” cards.

The Director of Physicians Services Division, Medical Services Branch of the Department, interprets and advises “MCP” management and staff on medical matters and acts as a liaison between “MCP” and the medical profession. The Director keeps the profession informed of amendments to the Medical Care Plan, and arranges instruction, where necessary, for physicians and their staff in correct billing procedures.

The Assistant Director of Physicians Services Division, Medical Services Branch, participates in these functions under the direction of the Director of Physician Services, and also functions as the Medical Consultant to the Audit section of “MCP”. Physicians are free to contact the Director of Physician Services, or the Assistant Director of Physician Services, on any matter concerning “MCP”.

1.4 COMMITTEES

1.4.1 Medical Advisory Committee (MAC)

An essential part of MCP's work is carried out by the MAC which deals with complex or contentious claims and hears requests from individual physicians on claim assessment decisions made by MCP. Physicians external to MCP, the Assistant Director of Physician Services Division, and MCP management staff attend the meetings to provide pertinent information regarding assessment decisions.

1.4.2 Medical Consultants' Committee (MCC)

This committee is comprised of ten members, five physicians nominated by the NLMA, the Medical Consultant to MCP's Audit Division (chair), the Medical and Dental Directors of MCP, the Medical Consultant to the DOHCS and a private industry chartered accountant. The committee's mandate is to review patterns of practice and billing procedures of participating physicians. It also reviews the utilization of services by beneficiaries. The committee, as required, also makes recommendations on these matters to the Minister of Health and Community Services. Audit cases are presented to the committee by the Medical Audit Division.

1.4.3 Payment Schedule Review Committee (PSRC)

The PSRC is responsible for ongoing review and maintenance of the MCP Payment Schedule and the drafting of amendments to the Payment Schedule as necessary. It is comprised of representatives of the NLMA and MCP.

**Department of Health & Community Services
Flow Chart for Medical Services & Corporate Services**

