

BROADCAST MESSAGES

EFFECTIVE DATE (CCYYMMDD): 2025-08-15

TARGET TYPE: AI

CANCEL DATE (CCYYMMDD): 2025-08-31

TARGET KEY: MD

COPY MESSAGE FROM

BROADCAST TITLE (50 char): Amedment & Placement of 78711 & Heading Amendment

BROADCAST MESSAGE (UP TO 5 PAGES, 12 LINES PER PAGE, 76 CHARACTERS PER LINE):

Effective September 1, 2025, note ii of fee code 78711 has been amended to indicate that specialists initiating a conference call may bill it when a resident physician answers the call on behalf of their supervising staff:

P78711 Specialist Initiation of Conference with a Physician and/or Allied Care Provider

Notes:

- ii) Conferencing initiation cannot be delegated. No claim may be made unless conference initiation is performed by the provider themselves. No claim may be made where communication is with a proxy for the receiving provider (with the sole exception of resident physicians).

The heading of the Specialist Advice Fees has also been amended by adding fee code 78711, and the eligibility has been amended by removing previous note iv and adding fee codes 78710 and 78711 in note v), as follows:

Specialist Advice Fees G10001, G10002, G10005, 78710 and 78711

Notes:

- i) Payable to Specialists for communication regarding assessment and management of a patient but without the consulting physician seeing the patient.
- ii) Includes discussion of pertinent family/patient history, history of presenting complaint, and discussion of the patient's condition and management after reviewing laboratory and other data where indicated.
- iii) An adequate medical record/chart, including times as specified under each fee item, is required.
- iv) The Specialist is responsible for the confidentiality and security of all records, and electronic transmissions. For video technology, see Section D. 1. of the Preamble.

- v) G10001, G10002, G10005, 78710, 78711 may not be delegated to resident physicians.

Copy to DoBC: **Yes**

INITIATED BY: **MoH**

AUTHORIZED BY: **Blanca Gala Diaz**

IF TARGET TYPE IS

THEN TARGET KEY IS

PY-PAYEES -----	PAYEE NO.
PR- PRACTITIONER -----	PRACTITIONER NO.
SP-SPECIALTY -----	SPECIALTY CODE
AI-ASSOCIATION IDENTIFIER -----	MD – BC MEDICAL ASSOCIATION
A -ALL -----	LEAVE TARGET KEY BLANK
PS-PAYEE STATUS -----	C - VESTED INTEREST LAB
	F - PRIMARY CARE
	H - HOSPITAL
	I - INACTIVE PAYEE
	L - LABORATORY
	M - ACTIVE PAYEE
	V - 3RD PARTY- OUT OF PROVINCE
	Y – ALTERNATIVE PAYMENTS PROGRAM