## **BROADCAST MESSAGES**

EFFECTIVE DATE (CCYYMMDD): 2025-09-15 TARGET TYPE: SP CANCEL DATE (CCYYMMDD): 2025-09-30 TARGET KEY: 00

COPY MESSAGE FROM

BROADCAST TITLE (50 char): Amend 14088 preamble and note i)
BROADCAST MESSAGE (UP TO 5 PAGES, 12 LINES PER PAGE, 76 CHARACTERS PER LINE):

Effective retroactively to July 1, 2025, the preamble and note i) of fee item 14088 FP Unassigned Inpatient Care Fee are amended as follows:

FPSC Incentives for In-patient Care (H14088)

The term "Unassigned Inpatient" is used in this context to denote those patients whose Family Physician does not have admitting privileges in the acute care facility in which the patient has been admitted.

The FP Unassigned Inpatient Care Fee is designed to provide an incentive for Family Physicians to accept Most Responsible Physician (MRP) status for an unassigned patient's hospital stay. It is intended to compensate the Family Physician for the extra time and intensity required to evaluate an unfamiliar patient's clinical status and care needs when the patient is admitted and is only billable once per hospital admission.

## H14088 FP Unassigned Inpatient Care Fee Notes:

- i) Payable only to Family Physicians who are actively participating in:
  - a. an FP Assigned Inpatient Care Network and an FP Unassigned Inpatient Care Network and/or
  - b. an FP Maternity Care Network.
- ii) Payable only to the Family Physician who is the Most Responsible Physician (MRP) for the patient during the in-hospital admission.
- iii) Payable once per unassigned patient per in-hospital admission in addition to the hospital visit (00109, 13109, 13008, 13010, 13011, 00127) or delivery fee.
- iv) Not payable to physicians remunerated under the LFP Payment Model or an Alternative Payment model that includes payment for this service.

Copy to DoBC: Yes INITIATED BY: MoH

**AUTHORIZED BY: Donna Bell** 

## 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 - 3<sup>RD</sup> PARTY- OUT OF PROVINCE

Y – ALTERNATIVE PAYMENTS PROGRAM