

## BROADCAST MESSAGES

**EFFECTIVE DATE (CCYYMMDD):** 2026-02-01                      **TARGET TYPE:** SP  
**CANCEL DATE (CCYYMMDD):** 2026-02-15                      **TARGET KEY:** 00  
**COPY MESSAGE FROM**

**BROADCAST TITLE (50 char):** Change to LFP Time Code Submission PHN

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

This is a notification about an upcoming process to simplify the submission of LFP time codes.

While submission of LFP time codes under the PHN of the first patient of the day will remain, it will be discontinued in the near future as part of continuous efforts to evolve and improve the LFP Payment Model.

Effective February 23, 2026, all claims for LFP time codes with dates of service on or after February 23, 2026, are to be submitted on a new generic personal health number (PHN).

The generic PHN will apply to all time codes billed, including Direct Patient Care, Indirect Patient Care, Clinical Administration, and Travel, for any setting under the Model.

Physicians will submit all time codes using the following “patient” demographic information:

- PHN: 9646191917
- Patient Surname: Time
- First Name: LFP
- Date of Birth: January 1, 2005

There are no other changes to the requirements for submitting time code claims.

**Copy to DoBC:** Yes

**INITIATED BY:** MoH

**AUTHORIZED BY:** Haley Magrill

**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**