BROADCAST MESSAGES

EFFECTIVE DATE (CCYYMMDD): **2026-06-01** **TARGET TYPE:** **SP**
CANCEL DATE (CCYYMMDD): **2026-06-15** **TARGET KEY:** **11**
COPY MESSAGE FROM

BROADCAST TITLE (50 char): 24-25 One-Time Retro Payment for Plastic Surgery

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

For the 2024/25 fiscal years, a temporary fee increase has been made in order to process a one-time retroactive payment for the fee items and dates of service listed below.

The retroactive payments for claims for fee items that were previously paid at the old rates have now been processed and will appear on this remittance statement under adjustment code 80.

Retroactive payments are made to the payee number associated with the claim receiving the retroactive payment. Please ensure that you have updated your banking information for all of your payment numbers. To update your banking information, complete a Direct Bank Deposit Form and fax to (250) 405-3592.

The Direct Bank Deposit Form can be found on the HIBC website at:
http://www.gov.bc.ca/mspphysicians

	April 1, 2024 – March 31, 2025	
Fee Item	**Base Rate**	**Temporary Rate**
06193	$511.31	$532.07

Copy to DoBC: **Yes** **INITIATED BY:** **MoH**

AUTHORIZED BY: **Munmun Biswas**

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