

BROADCAST MESSAGES

EFFECTIVE DATE (CCYYMMDD): 2026-07-01 TARGET TYPE: SP
CANCEL DATE (CCYYMMDD): 2026-07-15 TARGET KEY: 00
COPY MESSAGE FROM

BROADCAST TITLE (50 char): LFP Time Code Nightly Edit Refusals

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

This is a reminder that effective May 1, 2026, the former process of submitting LFP time code claims under the first patient PHN of the day was discontinued, and any claims submitted this way have been refused by the Teleplan claims Edit and Eligibility system with explanatory code NX (Invalid PHN/fee item combination for payment model).

Refused claims are returned next business day to the EMR as part of the nightly Edit report and do not appear on the semi-monthly remittance statement. Please ensure you check your EMR for any refused time code claims and re-submit using the following generic “patient” demographic information.

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

The generic “patient” demographic information must be submitted for all LFP time code claims, including Direct Patient Care, Indirect Patient Care, Clinical Administration, and Travel, for any setting under the model.

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 - 3RD PARTY- OUT OF PROVINCE
Y – ALTERNATIVE PAYMENTS PROGRAM