Billing Bulletin



IMPORTANT HEALTH WEBSITE LINKS

All Medical Services Branch Payment Schedules, Newsletters, Operations Bulletins, Billing Bulletins, Billing Information Sheets and forms are available at:

https://www.ehealthsask.ca/services/resources/establish-operate-practice/Pages/Physicians.aspx

CONTACT INFORMATION

Physician Billing Inquiries

Direct all physician billing inquiries to:

Phone: 306-787-3454 Fax: 306-798-0582

Physician Audit Inquiries

Direct all physician audit and professional

review inquiries to:

Policy, Governance and Audit Unit

Phone: 306-787-0496 Fax: 306-787-3761

Email: MSBPaymentsandAudit@health.gov.sk.ca

Claims Processing Support Inquiries

Direct all claims submission & processing

inquiries to:

Phone: 306-787-0182 or 306-787-3470

Fax: 306-798-0582

Physician Billing Education Inquiries

Direct all physician education and online

billing course inquiries to: Insured Services Officer Phone: 306-787-9011

BILLING RESOURCES & BILLING INFORMATION SHEETS

There are important billing resources available on the eHealth website. These documents are provided to all new physicians upon registering with Medical Services Branch (MSB). They are also available for download or viewing at the above link. Physicians should ensure that they avail themselves of this important information.



FREE ONLINE BILLING COURSE:

MSB offers an online billing course that outlines the process involved in the billing cycle. The course is appropriate for beginners, as well as those with more advanced billing knowledge and is designed to be flexible. Start and stop at your leisure! Your progress will be saved for you to resume when convenient. Depending on the participant's knowledge, the course may take between hours or days to complete.

HOW TO GET STARTED:

- 1. Go to the following link: https://msbonlinebillingcourse.litmos.com/self-signup/
- 2. Enter the required information and use the following code: **OLBC**
- 3. You will need to complete a basic User Profile upon signup, requiring only an email address for your User Name and a valid password, consisting of the following criteria:
 - Minimum of 8 characters
 - 1 upper case
 - 1 lower case
 - 1 number
 - 1 special character



To start the course, you will be presented with a list of the modules under the course, along with a button to "Start the Learning Path". You can choose to start at the top and work to the bottom or click on any module in the sequence. Alternatively, you can exit the module you are working on at any time (using the <u>orange</u> 'exit' button in the right corner) and come back later or you can move onto another module of your choice.

You will require a current Physicians Payment Schedule to facilitate you in the course, which can be found at this link: https://www.ehealthsask.ca/services/resources/establish-operate-practice/Pages/Physicians.aspx

Once you have completed the signup process, use the following link to re-enter the site with your new credentials: https://msbonlinebillingcourse.litmos.com

If you have any questions regarding the Online Billing Course, please contact 306-787-9011.

STATUTORY HOLIDAYS FOR THE PURPOSES OF BILLING TIME-OF-DAY PREMIUMS AND/OR SPECIAL CALL/SURCHARGES:

Please be advised that statutory holidays for <u>the purposes of billing</u> any type of time-of-day premium or special call/surcharge are according to the Government's observed/designated holidays listed below, and may be different than the Saskatchewan Health Authority designated holidays.

ACTUAL DATE	OBSERVED/BILLED ON
Friday April 7, 2023	Friday April 7, 2023
Monday May 22, 2023	Monday May 22, 2023
Saturday July 1, 2023	Monday July 3, 2023
Monday August 7, 2023	Monday August 7, 2023
Monday September 4, 2023	Monday September 4, 2023
Monday October 9, 2023	Monday October 9, 2023
	Friday April 7, 2023 Monday May 22, 2023 Saturday July 1, 2023 Monday August 7, 2023 Monday September 4, 2023

^{*}Note: For the purposes of billing there is no statutory holiday observed on Easter Monday or on September 30, the National Day for Truth and Reconciliation.

CLAIMS BACKLOG

The Claims Analysis unit current has a backlog of medical claims submissions. In order to assist Medical Services Branch (MSB) address this backlog in a timely manner, w are requesting that you:

- ✓ Please wait for a minimum of three (3) payment runs if you have not received any information regarding the status of the claims submitted.
- ✓ Please refer to your Control Summary Report to verify if a submission was received.
- ✓ For any claims that have not yet been adjudicated by MSB, please do not resubmit electronically or use the Request for Review of Claims Assessment form.
- ✓ If you have an adjustment that exceeds 20 claims, please refrain from submitting a Request for Review of Claims Assessment form for each individual claim. Please instead submit one form and attach an Excel and/or Word document identifying all/any claims that require readjudication.

AUDIT & INVESTIGATIONS

JOINT MEDICAL PROFESSIONAL REVIEW COMMITTEE (JMPRC)

The JMPRC is a legislated, *physician peer-review committee* with two (2) physicians appointed by each of the Saskatchewan Medical Association, the College of Physicians and Surgeons of Saskatchewan and the Ministry of Health.

The JMPRC is responsible for *reviewing a physician's pattern of medical practice associated with billing*. It has the authority to review a physician's billings over a 15-month period, request copies of medical records, and interview physicians with respect to their pattern of medical practice. If a physician's pattern of medical practice is deemed to be unacceptable by the JMPRC, the JMPRC has the legislative authority to order a physician to repay monies to the government.

Physician Billing Education

It is important that physicians are aware of their billing obligations pursuant to their Automated Claims Submission and Direct Payment Agreement with Medical Services Branch.

Many of the physicians reviewed by the JMPRC claim to have an inadequate understanding and/or knowledge of the Physician Payment Schedule. Physicians must be aware of their billing obligations and take ownership for the services that are billed to Medical Services Branch (MSB) under their billing number.

Thus, the JMPRC strongly advises physicians to avail themselves of the billing education and resources provided by the SMA, the CPSS and the Ministry.

The following is a summary of all monies ordered to be repaid by physicians due to inappropriate billings and/or an inappropriate pattern of medical practice in the last 3 fiscal years (April 1 to March 31):

Fiscal Year	Total Amount Ordered to be Recovered	No. of physicians	Average Recovery per Physician
2020-21	\$2,035,232	7	\$290,747
2021-22	\$2,002,408	10	\$198,500
2022-23	\$2,567,089	10*	\$256,709

^{*} Note: there were 12 reviews completed in 2022-23; however, two (2) of the reviews were discharged by the JMPRC prior to a reassessment being ordered.

To learn more about the JMPRC, you can access the billing information sheet here: JMPRC Billing Information Sheet

BILLING AUDITS AND INVESTIGATIONS

Medical Services Branch has a legislative obligation to protect tax-payer funded services and ensure that the use of these funds is appropriate and aligns with existing legislation. Minimizing loss and ensuring government accountability to a publicly funded system are key.

The use of routine audits are an effective method used to deter and identify the potential misuse and overuse of public funds. Eliminating and deterring inappropriate billings that have minimal evidence of a patient benefit or cost-effectiveness can reduce potential harm to patients and excessive costs to the publicly funded system. This, in turn, leaves more money available to potentially address unmet health care needs and to ensure the best possible distribution of public resources.

Billing audits and investigations can be initiated in a wide variety of ways. MSB undertakes routine audits on a regular basis, but investigations can also be initiated through inquiries and **complaints from the public.**

If physicians or other members of the public have potential concerns about a physician's billing practices, they are encouraged to contact Policy, Governance and Audit at:

MSBPaymentsAndAudit@health.gov.sk.ca

To learn more about physician audits, you can access the information sheets here:

Routine Audit Billing Information Sheet
Payment Integrity (Audit) Billing Information Sheet

REFERRALS TO THE COLLEGE OF PHYSICIANS AND SURGEONS OF SASKATCHEWAN (CPSS)

Medical Services Branch would like to make physicians aware that any potential inappropriate billing issues identified by MSB may be referred to the College of Physicians and Surgeons of Saskatchewan for further investigation and possible disciplinary action.

Physicians have an obligation pursuant to *The Medical Professional Act, 1981 (section (46))* and the CPSS' Code of Ethics (7.1) to ensure that the billings they submit for payment are appropriate and align with legislation. In some circumstances, physicians may be disciplined by the College pursuant to section (46) of the *Act*.

GENERAL

EXPLANATORY CODE (KB) - ANESTHETIC IS AN INCLUSION IN THE SURGICAL FEE WHEN PROVIDED BY THE SAME PHYSICIAN

According to explanatory code KB, anesthetic is considered an inclusion in the surgical fee when provided by the same physician. As a result, any claims submitted with a surgical fee in addition to codes billed from Section H (Anesthesia) will be rejected under this explanatory code.

WART REMOVAL

Medical Services Branch only insures wart treatment when it is associated with genital and plantar warts. All other wart treatments are uninsured services and must be billed directly to the patient.

SERVICES BILLABLE BY ENTITLEMENT OR BY APPROVAL

Please ensure that you are aware of the entitlement and "by approval" process, which is outlined in the Physician Payment Schedule under the heading "Services Billable by Entitlement or By Approval".

It is important that you review this information <u>prior to</u> billing or performing any services that are only billable by entitlement.

SECTION A – GENERAL SERVICES

SPECIAL CARE HOME MANAGEMENT (SCHM) (627A/628A/629A) IN ASSOCIATION WITH TELEPHONE CALLS

Telephone calls billable under service code 796A are only billable with SCH codes when the telephone call is provided **outside of regular business hours** and is considered **urgent or emergent.** These claims also require a comment identifying the reason and time of the call in order to be considered for payment. Failure to provide an appropriate comment will result in the rejection of your claim.

SECTION J – SURGICAL ASSISTING

SURGERIES WITH SURGICAL ASSIST

This is a reminder to physicians who are performing surgeries where a surgical assistant is involved. Whether you are a contract physician (shadow biller) or billing fee-for-service, please ensure you are submitting your surgical claims in a **timely manner**. This is especially important when you require a surgical assistant, as we require your claim in order to process any applicable payment for a surgical assistant.

Please also ensure that a surgical assistant is medically required to be in attendance.

SECTION X – DIAGNOSTIC RADIOLOGY

FLUOROSCOPIC CONTROL OF CLINICAL PROCEDURES PERFORMED BY ANOTHER PHYSICIAN (659X/660X)

These service codes are only billable when performed in conjunction with another insured, medically required procedure provided by another physician. These service codes are not payable when billed in isolation or in conjunction with a procedure performed by the *same* physician.