

BROADCAST MESSAGES

EFFECTIVE DATE (CCYYMMDD): 2025-03-01 TARGET TYPE: SP
CANCEL DATE (CCYYMMDD): 2025-03-15 TARGET KEY: 00, 05, 76
COPY MESSAGE FROM

BROADCAST TITLE (50 char): Retro Payment of FI04301

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

Effective November 1, 2024, the payment rate for the indicated fee item was amended as follows:

Fee Item	Previous Rate	New Rate
04301	\$255.79	\$300.00

The retroactive payments for claims that were previously paid at the old rate 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>

Copy to DoBC: Yes

INITIATED BY: MoH

AUTHORIZED BY: Evan Stafford

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