BROADCAST MESSAGES

EFFECTIVE DATE (CCYYMMDD): 2025-02-01 TARGET TYPE: SP CANCEL DATE (CCYYMMDD): 2025-02-15 TARGET KEY: 00

COPY MESSAGE FROM

BROADCAST TITLE (50 char): Hospital at Home (HAH) Excluded from LFP BROADCAST MESSAGE (UP TO 5 PAGES, 12 LINES PER PAGE, 76 CHARACTERS PER LINE):

Effective June 24, 2024, Hospital at Home (HaH) is retroactively excluded from the LFP Payment Schedule.

Any physician who has billed an LFP Inpatient code, from June 24th to present day, for any HaH service should rectify it by reversing the original claim using Submission Code 'E' and an electronic note "HAH service correction".

The debit reversal should be followed by a rebilling under the appropriate Fee-for-Service fee item using Submission Code 'A' and the same note.

Submission Code A must be preapproved prior to use, and can be obtained by sending form HLTH 2943 Practitioner Request for Approval of Over-Age Claims. The form is located at https://www2.gov.bc.ca/assets/gov/health/forms/2943fil.pdf

Any questions relating to claims inquiries can be directed to HIBC:

Vancouver 604-456-6950 Other areas of BC 1-866-456-6950

Copy to DoBC: Yes INITIATED BY: MoH

AUTHORIZED BY: Kimberly Au

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