
1. Fee increases
2. New fee schedule codes
3. Revisions to existing fee code descriptors
4. Changes to the payment of operative anaesthesia services
5. Surgical assistant base units
6. Deleted fee codes
7. Amendment charts

In keeping with the provisions of the 2004 Physician Services Agreement, a number of changes to the Schedule of Benefits are to be implemented effective January 1, 2008. In addition to a number of fee increases outlined in Appendix L of the Agreement, funding allocations have been made under Appendix K of the Agreement to Diagnostic Radiology, Cardiac Diagnostics, Vascular Surgery, Thoracic Surgery, General Surgery, Nuclear Medicine, Obstetrics and Gynecology, Ophthalmology, Paediatrics, Physical Medicine, and Plastic Surgery under this process. It is recommended that physicians practicing in these areas carefully review the Schedule for changes that may affect them.

1. Fee increases

Effective January 1, 2008, fee increases to specific fee codes will be implemented. These fee increases are summarized in Chart 1.

2. New fee schedule codes

Effective January 1, 2008, new fee codes will be introduced. These fee codes are summarized in Chart 2.
3. **Revisions to existing fee code descriptors**

In keeping with the provisions under Appendix K of the 2004 Physician Services Agreement, a number of revisions will be made to the wording/definitions of some existing fee codes in order to reflect revised insurability criteria for certain procedures effective January 1, 2008. These revisions are summarized in Chart 3.

4. **Changes to the payment of operative anaesthesia services**

Effective January 1, 2008, time units should be billed for each 15 minutes or part thereof:

- Up to and including the first hour ........................................... 1 unit
- After the first hour up to and including the first 1.5 hours ............... 2 units
- After 1.5 hours ................................................................. 3 units

Time units are calculated on the basis of time spent by the anaesthesiologist and commence when the anaesthesiologist is first in attendance with the patient in the operating room for the purpose of initiating anaesthesia and end when the anaesthesiologist is no longer in attendance (when the patient may safely be placed under customary post-operative supervision). In addition, the basic unit fee will be increased from $12.51 to $13.24.

5. **Surgical assistant base units**

Effective January 1, 2008, the minimum basic units provided by surgical assistants for a number of surgical procedures will increase from five to six units and the basic unit fee will be increased from $10.40 to $11.40.

6. **Deleted fee codes**

In keeping with the provisions under Appendix K of the 2004 Physician Services Agreement, a number of fee schedule codes will be deleted effective January 1, 2008. In most circumstances, the service will now be claimed using a new or existing fee schedule code. These deleted fee codes are listed in Chart 4.

7. **Amendment charts**

- Chart 1 – Fee increases
- Chart 2 – New fee schedule codes
- Chart 3 – Revisions to existing fee code descriptors
- Chart 4 – Deleted fee codes

A revised Schedule of Benefits for Physician Services, including all amendments set out in this Bulletin, will be distributed to physicians in the new fiscal year.


This Bulletin is a general summary provided for information purposes only. Physicians, hospitals and other health care providers are directed to review the *Health Insurance Act*, Regulation 552 and the Schedules under that regulation, for the complete text of the provisions. You can access this information on-line at: [www.e-laws.gov.on.ca/](http://www.e-laws.gov.on.ca/). In the event of a conflict or inconsistency between this bulletin and the applicable legislation and/or regulation, the legislation and/or regulation prevails.