PHYSICIAN'S BULLETIN

January 16, 2026: Vol. LXXI, ISSUE 1

NOVA SCOTIA MEDICAL SERVICES INSURANCE

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NEW FEES

Effective **January 1, 2026** the following health service codes are available for billing:

Category	Code	Description	Value*
DEFT	PREC1	Daily Preceptor Stipend for Pre-Clerkship (Med 1 and Med 2), Clerkship (Med 3 and Med 4), First Year Residents (PGY1), Physician Assistants, and any approved Allied Providers.	$210
DEFT	PREC2	Daily Preceptor Stipend for Second Year Residents (PGY2) and Integrated Family Medicine Emergency Medicine Residents (iFMEM).	$130
DEFT	PREC3	Daily Preceptor Stipend for Senior Residents (PGY3+)	$100
		Description Precepting Stipend health service codes for Dalhousie-appointed and approved preceptors. The Stipends are now available for teaching Physician Assistants while in a formal Dalhousie-accredited program. The Stipends for Medical Students and Residents are available for all learners who are located in Nova Scotia at the time of their instruction, not just Dalhousie learners. The Stipends are available for physicians paid via following modalities: FFS, LFM, APP, ED, Sessional, hospitalist/hourly, and FFS academic department or division at the FFS rate. Physicians who are part of C/AFP will be eligible to shadow bill the daily stipends. The stipends are not available to physicians who are paid outside of the Physician Agreement (e.g., medical officers of health and medical examiners).	**Rate for RP=INTL*

Category	Code	Description	Value*

Billing Guidelines

- Claims must be submitted using generic health card number 0000002352.
- Text is required on the claim indicating the name and student ID# for the learner(s) present on the day this code is being claimed. Claim will be refused without text.
- When teaching multiple learners at the same time on the same day, the claim for the highest rate learner should be submitted with RP=INTL and subsequent learners should be submitted with RP=SUBS with multiples.
- When teaching a learner (or learners) for a half day, the claim should be submitted with PO=HALF.
- Only one PREC with RP=INTL per day **or** two PREC RP=INTL with PO=HALF.
- Stipends are available for billing 7 days a week.

Modifiers

- RP=INTL – use on first PREC claim when teaching one student, or the highest paying PREC when teaching multiple students.
- RP=SUBS – use when teaching multiple students (append to appropriate PREC code after the PREC RP=INTL claim) If additional learners, claim multiples for each additional learner thereafter)

Following guidelines above, use PO=HALF when teaching half day.
(Half Day for these stipends is equal to 3.5 hours)

- RP=INTL, PO=HALF
- RP=SUBS, PO=HALF

These new Preceptor Stipend codes replace the **TESP1 and TESP2 that have now been terminated**. As announced in the December 22, 2025 bulletin, **claims for preceptor work completed back to January 1, 2026 may now be submitted using the above codes**.

For greater clarity, no TESP1 or TESP2 health service codes should be used for service dates January 1, 2026 onward.

C/AFP physicians are remunerated for medical education through their block funding. These incentives **will not** be paid in addition to the block funding; however, the precepting codes and premium amounts are eligible to be shadow billed to support accountability measures and future data analysis.

Please see joint communication from DHW and DNS: MEWG Message

*Please note the above daily stipends follow the eligibility guidelines as defined in Preamble 5.2.5 Clinical Supervision. (See February 14, 2025 Physician's Bulletin for Clinical Supervision Preamble Update)

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FEE UPDATES

Effective **January 16, 2026**, the following Health Service Codes for SP=INMD, SP=NEUR and SP=PHMD have adjusted fees:

Health Service Code	New Value	Specialties
03.03 RP=SUBS	**17** MSU	SP=NEUR, SP=INMD, SP=PHMD
03.03 RO=CNTC	**17** MSU	SP=NEUR, SP=INMD, SP=PHMD
03.03 RO=CNTC AG=OV65	**21** MSU	SP=NEUR, SP=INMD, SP=PHMD
03.03A	**21** MSU	SP=NEUR, SP=INMD, SP=PHMD
03.03 RO=DIRC	**17** MSU	SP=NEUR, SP=INMD, SP=PHMD
03.03 RO=DIRC AG=OV65	**21** MSU	SP=NEUR, SP=INMD, SP=PHMD

Effective **January 16, 2026**, the following Health Service Code: **03.03 RO=INTL, SP=PHMD** has been terminated.

Please note the following prolonged nursing home description update:

Category	Code	Description	Base Units
VIST	03.03	**Prolonged Nursing Home Visit** **Description** This fee may be billed for any resident of the nursing home or **Residential Care Facility** receiving care, whether they be the first patient seen or an extra patient**.** Prolonged nursing home and **Residential Care Facility** visits are paid in 15-minute time blocks or portion thereof, 80% of the time must be direct physician to patient contact with the patient alone **or the patient and their legally identified substitute decision maker, and/or the regulated health care professional providing care to the patient at the nursing home, as appropriate to the patient's medical condition. The physician must spend at least a portion of the visit in direct face to face (in person) contact with the patient. The substitute decision maker may be accessed virtually if they are not immediately present with the patient.** Prolonged nursing home visits are not to be confused with active treatment associated with detention. **Billing Guidelines** • A prolonged nursing home **or RCF** visit can be billed up to a maximum of 60 minutes per patient per day. This would include a base visit plus up to 3 additional multiples of 15 minutes each. • Start and stop times are required for any visit billed with multiples greater than 1. The start and stop times must be documented in the health record and on the text field of the claim. • Multiples/prolonged not applicable for virtual care. **Multiples:** 17 MSU per 15 minutes to a maximum of 4 multiples (60 minutes) per day **Modifiers:** TI=EVNT = Time 1701-2000 – 28.3 MSU + MU (22.95 MSU per 15 minutes) TI=ETMD = Time 2001-2359 – 28.3 MSU + MU (22.95 MSU per 15 minutes)	21.3 MSU +MU

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Category	Code	Description	Base Units
		TI=MDNT = Time 0000-0800 – 38.3 MSU + MU (25.5 MSU per 15 minutes) DA=RGE1, TI=AMNN = Time 0801 – 1200, Sat., Sun., Holidays – 28.3 MSU + MU DA=RGE1, TI=NNEV= Time 1201 – 1700, Sat., Sun., Holidays – 28.3 MSU + MU **Specialty Restriction:** SP=GENP **Location:** LO=NRHM	

If a physician has an encounter dating back to July 1, 2025 that would satisfy a prolonged nursing home visit under these guidelines, but were unable to submit due to previous requirements, please reach out to msi_assessment@medavie.bluecross.ca

Please note that the Prolonged Nursing Home Visit is not to be billed for any virtual visit.

Physicians providing virtual care (telephone/video) to their patients in Nursing Homes **from an office location (LO=OFFC**) can bill an 03.03 or 03.03A, provided they satisfy all other billing requirements (no multiples).

Billing Matters Billing Reminders, Updates, New Explanatory Codes

RETIREMENT FUND WEBPAGE

Physicians are advised of a new page on the MSI website dedicated to the Physician Retirement Fund, where you will find the program overview and updates, resources, and key dates. MSI - Physician Retirement Fund –

Reminder Physicians are issued a 6-digit MSI provider number at the time of registration with MSI. This number is used for billing and identification purposes and is needed when applying for the Retirement Fund. Please ensure you retain this number in your records.

PHYSICIAN'S MANUAL

Applicable updates in the Physician's Bulletin's will be reflected in the Physician's Manual within 3 weeks; however, it may be necessary to refer to Physician's Bulletins for additional detailed information and any billing clarifications or reminders.

NEW AND UPDATED EXPLANATORY CODES

Code	Description
GN146	SERVICE ENCOUNTER HAS BEEN REFUSED AS YOU HAVE ALREADY CLAIMED A PRECEPTOR STIPEND ON THIS DATE.
GN147	SERVICE ENCOUNTER HAS BEEN REFUSED. PLEASE RESUBMIT WITH TEXT INDICATING THE NAME AND STUDENT NUMBER OF THE LEARNER.
GN148	SERVICE ENCOUNTER HAS BEEN REFUSED AS A PRECEPTORSHIP STIPEND MAY NOT BE CLAIMED ON THE SAME DAY AS A TEACHING STIPEND.

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Code	Description
GN149	SERVICE ENCOUNTER HAS BEEN REFUSED AS PRECEPTORSHIP STIPEND HAS ALREADY BEEN CLAIMED AT EITHER HALF OR FULL VALUE FOR THE SAME SERVICE DATE.
GN150	SERVICE ENCOUNTER HAS BEEN REFUSED AS A PRECEPTORSHIP STIPEND HAS ALREADY BEEN CLAIMED AT FULL VALUE FOR THE SAME SERVICE DATE.

In every issue Helpful links, contact information, events and news, updated files

UPDATED FILES

Updated files reflecting changes are available for download on Friday January 16, 2026. The files to download are:
Health Service (SERVICES.DAT), Health Service Description (SERV_DSC.DAT), and Explanatory Codes (EXPLAIN.DAT).

CONTACT INFORMATION

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Toll-Free: 1-866-553-0585
Fax: 902-490-2275
Email:
MSI_Assessment@medavie.bluecross.ca

NOVA SCOTIA DEPARTMENT OF HEALTH AND WELLNESS

Phone: 902-424-5818
Toll-Free: 1-800-387-6665
(In Nova Scotia)
TTY/TDD: 1-800-670-8888

HELPFUL LINKS

NOVA SCOTIA MEDICAL INSURANCE (MSI)
http://msi.medavie.bluecross.ca/

NOVA SCOTIA DEPARTMENT OF HEALTH AND WELLNESS
www.novascotia.ca/dhw/

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