

SGIM BC Financial Update



Financial Summary

	01/31/2023 Year to Date	11/30/2021 Annual Total
General Internal Medicine Specialists (GIM)		
Statement of Financial Position		
As of January 31, 2023		
	Unaudited	
ASSETS		
Cash	\$59,635	\$293,012
Investments	\$253,004	\$0
Accounts Receivable	\$0	\$0
Total Assets	\$312,639	\$293,012
LIABILITIES AND UNDISTRIBUTED FUNDS		
Accounts Payable	\$3,474	\$0
Total Liabilities	\$3,474	\$0
Revenue over Expenditures	\$24,509	\$39,710
Fund Balance	\$288,130	\$253,302
Total Net Assets	\$312,639	\$293,012
Total Liabilities and Undistributed Funds	\$309,165	\$293,012

SGIM BC - Revenues and Expenditures

	01/31/2023 Year to Date	11/30/2021 Annual Total
General Internal Medicine Specialists (GIM) Statement of Revenue & Expenditure For the 14 Months Ending January 31, 2023		
REVENUES		
Membership Dues	\$67,689	\$68,200
Interest Income	\$1,877	\$1,363
Total Revenues	\$69,566	\$69,563
EXPENDITURES		
AGM Minutes	\$914	\$0
AGM Honourarium	\$1,000	\$1,000
Annual Report	\$40	\$0
Website Hosting	\$42	\$180
Consultant	\$2,265	\$6,749
Consultant-Regular (EA)	\$27,071	\$19,924
Executive Meeting Stipend	\$13,293	\$0
Legal	\$0	\$0
Miscellaneous	\$276	\$0
ScotiaBank Service Charges	\$69	\$0
Awards	\$2,000	\$2,000
Total Expenses	\$45,057	\$29,853
Excess (Deficiency) of Revenue Over Expenditures	\$24,509	\$39,710

Fee Code Update - Retro Payments

- **Dec 14, 2021 - GIM *Retro Payment***
 - **32210/32370: \$204.09 —> \$257.94**
 - **Retroactive: Apr 2019 - Mar 2020**
- **Nov 15, 2022 - GIM *Retro Payment***
 - **311/32271: \$277.78 —> \$293.93**
 - **32210/32370: \$206.36 —> \$226.59**
 - **Retroactive: Apr 2020 - Mar 2021**
- **Sep 29, 2022 - GIM *Fee Code Increase***
 - **311/32271: \$277.78 —> \$285.81**
 - **Retroactive to Apr 2021**

Fee Code Update - New PMA

- **\$708M/year in new funding**
 - **13.2-15.2% increase overall (depending on COLA)**
 - **General fee increases of 3%, 2% and 1%**
- **Of interest to GIM**
 - **Increase in BCP (and inclusion of hospital-based fees)**
 - **Increase in MOCAP (10%) and Sessional Rates (3.5% and 1%)**
 - **More more for disparity**
 - **\$70M (90% inter-sectional; 10% inter-provincial)**
 - **Improved retirement savings (~\$1000/year) and parental leave (~30%)**

Fee Code Update - New PMA

- **Non-monetary benefits**
 - **Maintenance of temporary COVID fees (including virtual fees)**
 - **Working groups to address**
 - **administrative burden**
 - **non-MSP eligible patients**
 - **re-referrals**
 - **gender disparity and other DEI initiatives**

Fee Code Update - Disparity

Scenario #1: DKA-Sun 2am (1hr 15 min, Emerg)

BC: \$308-\$478	mean \$404
AB: \$628	mean \$628
SK: \$424	mean \$424
ON: \$325-\$347	mean \$340
QC: \$216	mean \$216
NS: \$249	mean \$249

Scenario #2: In-patient visit (weekday)

BC: \$29-\$67	mean \$53
AB: \$96	mean \$96
SK: \$40	mean \$40
ON: \$43-90	mean \$68
QC: \$74	mean \$74
NS: \$36	mean \$36

Scenario #3: Pre-op Consult (weekday)

BC: \$170-310	mean \$258
AB: \$327	mean \$327
SK: \$146	mean \$146
ON: \$156-180	mean \$165
QC: \$134	mean \$134
NS: \$166	mean \$166

Fee Code Update

- **Requests submitted:**
 - **Complex Follow Ups**
 - **32308: Remove 10 day limit (post-admission)**
 - **32307: Remove 6 month limit (post-consult)**
 - **Reinstatement of the 2 system consult fee (32312)**
- **Consideration**
 - **Adjusting the diagnoses for the 311**
 - **Creation of a complex limited consult**

Fee Code Update - Definition of a GIM

- A physician will be eligible to bill complex care codes (i.e. 311/32210 and associated follow up and telehealth fees) if they either:
 - A. Trained in Canada
 - 3 years of Core IM training PLUS
 - At least one year of *GIM training* (ie. 3+1 or 3+2 +/- sub-specialty)
 - B. Trained outside of Canada
 - 3 years of Core IM training PLUS
 - At least one year of dedicated GIM training that includes:
 - 1 block of ICU, 1 block *leading an inpatient IM team*, 1 block of Cardio, 2 blocks of *ambulatory GIM* (or longitudinal equivalent), 2 blocks of *community GIM*

Fee Code Update - Removal of Provisional Status

- **Permanent Fee Codes**
 - **311/32271 (as previous)**
 - **32210/32370**
 - **32212/32372**
 - **32208/32378**
 - **32206/32376**
- **Remaining Provisional Fee Codes (no change)**
 - **32308**
 - **32307/32367**
 - **32207/32377**

Fee Code Update - Definition of an “active issue”

- Written consultation report includes “advice or recommendations for treatment” regarding 3 or more of the conditions...
 - There is some ambiguity and need for interpretation.
 - Always go back to the fee guide (*including the preamble*)
 - Always make sure your documentation is clear (assessment/plan for each issue)
- Some points to consider
 - Each issue should be clearly identified in the consult
 - Provisional diagnoses are ok (i.e. rule out CAD in a patient with chest pain)
 - Multiple diagnoses for the same symptom are probably not (i.e. rule out COPD, rule out CHF, rule out anemia in a patient with SOB) unless those 3 conditions clearly co-exist
 - Each issue should be clearly identified in the follow up notes
 - Technically, once something is “resolved” or “stable” it is no longer eligible
 - Co-management with a sub-specialist may be appropriate if you are actively involved in the decision making/treatment

FAQs



The screenshot shows the SGIMBC website header with the logo and navigation menu. The main content area features a large heading 'What's the 3-1-1?' followed by a paragraph explaining the complexity of GIM Fee codes and the availability of updated documents. Below this, there are two blue links: 'GIM Fee Codes' and 'Billing FAQs'.

SGIMBC
The Society of General Internal Medicine of BC

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What's the 3-1-1?

We understand that the GIM Fee codes can be quite complex. The Society has put together two documents with tips and responses to frequently asked questions. These documents are continuously being updated.

Click the links below to access the documents.

[GIM Fee Codes](#)

[Billing FAQs](#)

<https://www.sgimbc.org/billing-tips/>

Billing and Audit Resources:

- **Billing and Audit Section on Doctors of BC website**
 - On-line Fee guide, Includes Broadcast messages of all fee guide changes. <https://www.doctorsofbc.ca/>
 - Found under “**Resource Centre Tab**” on Doctors of BC website under **Billing and Audits**; webinars on billing tips, common billing errors and information on the audit process.
- **On-line Practice Mini Profile (After 1 year of FFS earnings)***
 - Identifies if your billing may be out of line with your peers and how this may place you at risk for audit.
 - Under “**My Account**” on the Doctors of BC website.
- **Billing Tips in the BCMJ** (monthly articles) <http://www.bcmj.org/>

Doctors of BC Billing and Audit Resources

- **Advisor, Audit and Billing: Tara Hamilton**

- 604-638-6058 / thamilton@doctorsofbc.ca
- Provide advice pertaining to the audit process
- Provide advice on your Practice Mini-Profile
- Help solve complex MSP / Medical Legal billing disputes
- Audit and Billing Sessions

- **Fee Guide Advisor: Lea Harth**

- 604-638-2827 / lharth@doctorsofbc.ca
- Can help identify the most appropriate billing code to use
- Provides support for the billing process and medical legal disputes
- Can provide fee recommendations for Non-MSP insured services
- Medicolegal billing disputes

Questions???

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