

To: All Members of the Section on Orthopaedic Surgery
From: OMA President Dr. Sohail Gandhi

I wanted to reach out to you personally and provide important information about recommended fee schedule changes specific to Orthopaedic Surgery that will be in effect on April 1, 2020. This is a long email (apologies) but it does deal with finances, and how decisions were made.

I want to (briefly) recap the process that has led to the decisions on fee code changes. As you are all aware, for the first time in the history of Ontario, physicians were given an Arbitrated Award for a Physician Services Agreement (PSA). This is why there was no ratification vote. The Award is binding both on the OMA and the Ministry of Health (MOH).

As part of that process, the Arbitrator agreed that we must deal with the issues of relativity. The official OMA model for relativity is CANDI (the FAIR model you may have heard about is not final yet, it is in development). The government refused to accept CANDI. The official MOH model for relativity is RAANI. The OMA feels that there are serious, significant and unresolvable issues with RAANI, and we refused to accept it. The Arbitrator (acting in this case as a mediator), worked with both sides, and came up with the Hybrid model, and the Hybrid model will be used for all 4 years of the current PSA. *Please note, it has yet to be decided what relativity model will be used in the next PSA (2021-2025).*

As a result of the award and the Hybrid process, the Section on Orthopaedic Surgery was awarded a 2.3% normative increase.

This Hybrid model is not perfect. It does not address the fact that some services are provided by members in multiple Sections. If those fees go up, then the allocation to that Section will rise automatically.

In order to come up with fairest way of making changes, we tasked the Medical Services Payment Committee (MSPC) with the enormous responsibility of doing this for every Section. The timelines were tight as the MOH insisted they had to have a decision by December 18, 2019, in order to program their computers for April 1, 2020. I ask that you keep in mind that MSPC is a bilateral committee — half OMA and half MOH. For a decision to be made, both sides have to agree. If they don't agree, then we go to arbitration on those issues. By now, I believe all members are keenly aware of just how long arbitration takes.

In July, the MSPC sent letters to all Section executives outlining this process. In August, the MSPC surveyed members of each Section to see what fee codes were in need of change. On September 20, the Section executives were sent the survey results, and asked to provide input by October 14 (as mentioned the timelines were tight). This was to allow the OMA staff to model the effect of proposed changes on the members. It also allowed time for the MSPC to contact Sections as needed, to clarify their submissions. Our goal was to ensure that the fewest possible members had a negative impact.

The majority of Section executives, including the Section Executive for Orthopaedic Surgery, provided feedback, which helped inform the MSPC recommendations. I thank the Section Executive for all their hard work.

The MSPC went through multiple modeling exercises and came up with the best possible recommendations they could for Orthopaedic Surgery. The final recommendations indicate that with these changes, in the Section on Orthopaedic Surgery:

- 626 physicians will see an increase in their income (average of \$7,340, representing 1.81% of their billings).

The specific changes recommended by MSPC for your Section are provided below and also posted online [here](#). Recommendations for all OMA Sections and Medical Interest Groups, along with background documents related to the MSPC, are available on the OMA website [here](#).

As with all fee schedule changes, the MSPC recommendations will be submitted to Cabinet for final approval.

If you have any questions, or require additional information, please contact mspc@oma.org.

Ontario's Doctors Rock!

Sohail Gandhi
OMA President

Section on Orthopaedic Surgery

April 1, 2020 Recommended OHIP Schedule of Benefits Fee Changes

Highlighted Fee Changes

Various Fee Increases

Fee Code	Description	Current Fee Value	New Fee Value	Percent Increase
F096	Femur - Reconstruction - Fractures - Closed reduction - Open reduction	\$493.80	\$613.95	24.33%
F101	Pelvis and Hip - Reduction - Fractures - Femoral neck trochanteric, subtrochanteric open reduction - Primary prosthesis, Femur only (includes Moore, Thompson, Unipolar, Bipolar)	\$490.95	\$613.60	24.98%
F081	Fibula and Tibia - Reduction - Fractures - Intramedullary nail with distal and proximal locking screws - Medial or lateral tibial plateau	\$394.45	\$558.10	41.49%
F080	Fibula and Tibia - Reduction - Fractures - Tibia with or without fibula - Open reduction - Shaft	\$356.40	\$553.60	55.33%
R465	Hand and Wrist - Arthrodesis - Finger-Thumb	\$256.15	\$321.30	25.43%
R485	Hand and Wrist - Arthroplasty - Wrist - Total	\$426.90	\$667.75	56.42%
R322	Hand and Wrist - Reconstruction - Bone - Pseudoarthrosis/non - Union/avascular necrosis - Scaphoid	\$500.00	\$588.20	17.64%
E497	Hand and Wrist - Reconstruction- Bone - Pseudoarthrosis/non - Union/avascular necrosis- Pedicled vascularized bone graft, to R322 or R345 add	\$350.00	\$526.40	50.40%
F100	Pelvis and Hip - Reduction - Fractures - Femoral neck trochanteric, subtrochanteric - Open reduction - Pin and plate/screws (cannulated included)	\$498.95	\$614.55	23.17%

Fee Increases to Elbow and Forearm Related Services

Fee Code	Description	Current Fee Value	New Fee Value	Percent Increase
R466	Hand and Wrist/Elbow and Forearm/Foot and Ankle - Arthrodesis - Wrist/Elbow/Ankle	\$400.00	\$461.75	15.44%
R261	Reconstruction - Bone - Deformity - Osteotomy -radius with or without ulna	\$411.20	\$577.70	40.49%

Fee Code	Description	Current Fee Value	New Fee Value	Percent Increase
R486	Arthroplasty - Complete arthroplasty replacement	\$619.90	\$911.05	46.97%
R421	Excision - Joint contents - Synovectomy/capsulectomy/debridement, etc.	\$311.85	\$407.25	30.59%
F030	Reduction - Fractures - Radius - Distal, e.g. Colles', Smith's, or Barton's fracture - Open reduction	\$420.00	\$499.40	18.90%
F023	Reduction - Fractures - Radius and ulna - Monteggia - Open reduction of ulna plus closed reduction radial head	\$242.25	\$416.65	71.99%
F026	Reduction - Fractures - Radius and ulnar shaft - Open reduction	\$368.40	\$528.55	43.47%
F041	Reduction - Fractures - Transcondylar/condylar - open reduction	\$375.80	\$600.00	59.66%
F036	Reduction - Fractures - Olecranon - Open reduction	\$224.55	\$414.60	84.64%
F033	Reduction - Fractures - Radius or ulna - Open reduction	\$274.00	\$438.05	59.87%

Fee Increases to Foot and Ankle Related Services

Fee Code	Description	Current Fee Value	New Fee Value	Percent Increase
R475	Arthrodesis - Pan- Talar, one stage	\$626.45	\$779.50	24.43%
R477	Arthrodesis - Metatarsophalangeal	\$247.25	\$302.60	22.39%
R695	Arthrodesis - Subtalar	\$450.00	\$599.95	33.32%
D028	Reduction - Dislocations - Tarso- Metatarsal - Open reduction, one joint	\$300.00	\$388.20	29.40%
F108	Reduction - Fractures - Ankle fracture with tibial Plafond burst - Open reduction	\$362.95	\$616.15	69.76%
F077	Reduction - Fractures - Ankle - Open reduction - Multiple malleoli or ligaments	\$400.00	\$523.50	30.88%
F076	Reduction - Fractures - Ankle - Open reduction - One malleolus	\$237.50	\$283.80	19.49%
F072	Reduction - Fractures - Os calcis - Open reduction - With repair of both the subtalar and calcaneocuboid joints	\$500.00	\$588.20	17.64%

Fee Increases to Shoulder, Arm & Chest Related Services

Fee Code	Description	Current Fee Value	New Fee Value	Percent Increase
F118	Reduction - Fractures - Clavicle - Open reduction	\$300.00	\$458.75	52.92%

Fee Code	Description	Current Fee Value	New Fee Value	Percent Increase
F052	Reduction - Fractures - Neck with dislocation of head - open reduction	\$385.15	\$521.75	35.47%
F121	Reduction - Fractures - Scapula - Open reduction	\$242.25	\$381.40	57.44%
F055	Reduction - Fractures - Neck without dislocation of head - - Open reduction	\$327.55	\$514.95	57.21%
F044	Reduction - Fractures - Shaft - Open reduction	\$323.05	\$655.50	102.91%
R487	Arthroplasty - Total prosthesis	\$695.10	\$770.00	10.78%
R401	Reduction - Dislocations - Glenohumeral joint - Open reduction, recurrent	\$379.50	\$419.65	10.58%

New Services and Fee Code Revisions

The MSPC recommends revising the Schedule in order to separate codes that appear in multiple sections with different descriptors (R466, R589, R259). This may not be a part of the April 1, 2020 revisions given its priority but will be entered as soon as it is feasible and practical to do so.

Once feasible to implement, the new Schedule listing will appear as follows:

Arthrodesis

- R466 Hand and Wrist Arthrodesis \$461.75 (Fee increase from \$400.00)
- Raaa Elbow and Forearm Arthrodesis \$461.75
- Rbbb Foot and Ankle Arthrodesis \$461.75

Tendon Repair

- R589 Shoulder Tendon repair or release – biceps \$227.40
- Rccc Femur Quadriceps repair – simple \$227.40
- Rddd Knee Suture of patellar/quadriceps tendon \$227.40
- Reeel Foot and Ankle Achilles tendon repair – early \$227.40

Deformity

- R259 Elbow and Forearm Osteotomy Ulna \$297.85
- Rfff Foot and Ankle Osteotomy *os calcis* \$297.85

Other Fee Changes of Interest

- **Surgical Assistant unit fee value** will be increased from \$12.04 to \$12.25 (1.7%).
- Increases to select Surgical Assistant services with base units.
- **C983B** (SVP - Saturdays, Sundays or Holidays, daytime and evenings (07:00h -24:00h), first patient seen) will be increased from \$75.00 to \$85.60 (20%).
- **C999B** (SVP - Nights (00:00h - 07:00h) will be increased from \$100.00 to \$117.65 (25%).
- **C998B** (SVP - Evenings (17:00h - 24:00h) Monday to Friday; or for non-elective surgery with sacrifice of office hours - Weekdays) will be increased from \$60.00 to \$67.05 (17%).
- **Selected GP/FP Time Based K-code fee increases** - fee increases between approximately 8% and 25%.

- **Hospital inpatient MRP subsequent visits (C122, C123, C124, C142 and C143)** - fee increases by approximately 4%.
- **E542** (when rendered outside of hospital) will be increased from \$11.15 to \$11.55 (3.6%).

Note: These codes represent fee codes most commonly billed by your Section. A comprehensive list of ALL recommended fee code changes is available on the OMA website [here](#).

Notes:

1. The Schedule of Benefits changes listed above are recommended by the bilateral OMA-MOH Medical Services Payment Committee — Cabinet approval is pending.
2. Best efforts have been made to ensure the accuracy of information contained in this document. In the event of any errors, the Schedule of Benefits to be published April 1, 2020 is the definitive source. Further details about the Schedule will be available on the Ministry of Health OHIP Bulletins webpage [here](#).
3. This update was sent to you based on your primary affiliation with an OMA Section. Fee code recommendations for all OMA Sections and Medical Interest Groups are available on the OMA website [here](#).

Questions? Please email mssp@oma.org