

Changes to the MSC Payment Schedule relating to MVAs

Effective November 27, 2025, new legislation amending the Insurance (Vehicle) Act introduced changes to the payment of medical claims for motor vehicle accidents (MVAs). Previously, ICBC was responsible for all medically necessary physician services arising from MVAs. Physicians submitted claims to MSP, and ICBC reimbursed MSP for these services.

Beginning November 27, 2025, ICBC is no longer responsible for physician services related to MVAs. Instead, all MVA-related claims will be processed as standard MSP claims, including any claims received on or after that date, even if the service date is prior to November 27, 2025.

This legislative change requires several changes to the Family Medicine Payment Schedule and the General Preamble of the MSC Payment Schedule to remove language relating to MVA billing.

Here is a summary of changes, with the full details provided below:

1. **Temporary** amendments to General Preamble C.17 (Motor Vehicle Accident Billing Guidelines) to provide clarity for physicians. Section C.17 will eventually be permanently removed.
2. Delete reference to "ICBC" in General Preamble C.16 (Payment for Specialist Consultations/Visits and specialty-restricted items)
3. Removal of language in the Family Medicine Section Preamble that exempted MVA claims from daily volume limit discounts
4. Delete reference to "ICBC" in WorkSafeBC and ICBC Services
5. Cancellation of fee item 13075 (Assessment of an unrelated condition in association with an ICBC service)
6. Ending payment for up to four additional ICBC-related services for individual counselling (12120, 00120, 15320, 16120, 17120, 18120 and equivalents) and Mental Health Management fees (14044–14049), as these will now be covered under regular MSP billing. Note: As this is not stated explicitly in the MSC Payment Schedule, no amendments will be required for this change.

Detailed amendments:

1. Temporary amendments to General Preamble C.17

- The following amendments to the General Preamble will be effective immediately.
- Deletions are struck-through, and additions are in red below.

C. 17. Motor Vehicle Accident (MVA) Billing Guidelines

- ~~1. All cases directly relating to an MVA which ICBC Insurance coverage applies should be identified as such by a "yes" code in the Teleplan MVA field.~~
 - ~~2. All such cases should be coded "MVA" regardless of whether seen in an office visit, emergency, diagnostic, lab or x-ray facility. Surgery or procedures performed in regard to these cases should also be identified.~~
 - ~~3. Where possible, please attach an ICBC claim number to each coded MVA in your Teleplan billing.~~
 - ~~4. In cases where a visit or procedure was occasioned by more than one condition, the dominant purpose must be related to an MVA to code it as such.~~
 - ~~5. If the patient is from another province, use the normal out-of-province billing process.~~
 - ~~6. In those instances in which the patient has no MSP coverage, the medical practitioner should bill the patient or ICBC directly. Medical practitioners have the choice of either billing the uninsured patient directly at the Doctors of BC recommended rate and having the patient recover the costs from ICBC (see Doctors of BC Fee Guide), or billing ICBC for the MSP amount.~~
 - ~~7. If the MVA is work-related, WorkSafeBC (WSBC) should be billed under their procedures.~~
 - ~~8. Medical Practitioners are accountable for proper MVA identification and are subject to audit.~~
- 1. Services related to motor vehicle accidents (e.g. visits, procedures, counselling, consultations) are no longer the responsibility of Insurance Corporation of BC (ICBC).**
 - 2. ICBC-related physician reports remain billable to ICBC via report or invoice using the applicable ICBC fee codes (see Doctors of BC ICBC Fee Guide).**
 - 3. ICBC claim numbers and a "yes" code in the Teleplan MVA field are not required.**
 - 4. If the patient is from another province, use the normal out-of-province billing process as noted in C. 11. Reciprocal Claims.**
 - 5. When the patient has no MSP coverage, the medical practitioner should bill the patient directly.**
 - 6. If the MVA is work-related, WorkSafeBC (WSBC) should be billed under their procedures.**

2. Amendments to General Preamble C.16

- The amendments to the General Preamble will be effective immediately.
- Deletions are struck-through.

C. 16. Payment for Specialist Consultations/Visits and specialty-restricted items

To be paid by MSP, ~~ICBC~~ or WorkSafeBC for specialist consultations, visit items and/or other specialty-restricted fee items listed in the specialty sections of the Payment Schedule, one must be a Certificant or a Fellow of the Royal College of Physicians and Surgeons of Canada and/or be so recognized by the College of Physicians and Surgeons of British Columbia in that particular specialty.

A specialist recognized in more than one specialty by the College of Physicians and Surgeons of British Columbia should bill consultation and referred items under the specialty most appropriate for the condition being diagnosed and/or treated for that referral/treatment period.

3. Family Medicine Payment Schedule Changes – Daily Volume Payment Rules

- The following amendments will be effective immediately.
- Deletions are struck-through.

Note: Daily Volume Payment Rules Applying to Designated Office Codes

(iv) Payment discounts will not be applied to services designated by the physician as being the responsibility of ~~ICBC, (designate by checking the MVA indicator on the claim), or services that are the responsibility of Worksafe BC.~~

4. Family Medicine Payment Schedule Changes – WorkSafeBC and ICBC Services

- The following amendments will be effective immediately.
- Deletions are struck-through.

WorkSafeBC and ICBC Services

In cases where a visit or procedure was occasioned by more than one condition, the dominant purpose must be related to an ~~MVA~~ or WorkSafeBC issue to code it as such. If medically necessary, an assessment of an unrelated condition can also be billed to MSP by Family Physicians.

5. Fee item 13075 (Assessment of an unrelated condition(s) in association with an ICBC service)

- The cancellation of fee item 13075 will be effective February 28, 2026.

Additional Information:

- MVA related services will now be MSP insured claims the following will apply:
 - Business Cost Premium
 - Rural Retention Premium
 - Services will increase the future base years used for calculation of annual General Fee Increase allocations