

Bulletin



Bulletin Number	Date	Direct inquiries to
4488	December 17, 2008	Ministry of Health and Long-Term Care
Distribution		
Physicians, Hospitals, Clinics and Laboratories		

SUBJECT: Prostate Specific Antigen (PSA) Monitoring Tests

Effective January 1, 2009, the Prostate Specific Antigen (Free and Total) ordered for *diagnosing or monitoring* purposes in the community laboratory sector is an insured service.

1. Amendments to Ontario Regulation 552 of the *Health Insurance Act*
2. Amendments to Ontario Regulation 552, Schedule 22 of the *Health Insurance Act*
3. Amendments to Ontario Regulation 682, Appendix C, of the *Laboratory and Specimen Collection Centre Licensing Act*
4. New Fee Codes: L354 Prostate Specific Antigen (Free) and L358 Prostate Specific Antigen (Total)
5. Revisions to OHIP Laboratory Requisition Form

Eligibility Criteria:

Effective January 1, 2009, PSA testing for diagnosing or monitoring purposes, will be an insured service in the community laboratory sector, as follows.

- When a man ***has been diagnosed with***, or is receiving treatment for, or is being followed after treatment for prostate cancer, the PSA test is available at no charge to the patient at a community laboratory (covered by OHIP) and will continue to be available at no charge to the patient at a hospital laboratory (covered through the hospital's global budget).
- When a health care practitioner ***suspects prostate cancer*** because of a man's history, race and/or the results of his physical examination (including digital rectal examination), PSA testing is available at no charge to the patient at a community laboratory (covered by OHIP) and will continue to be available at no charge to the patient at a hospital laboratory (covered through the hospital's global budget). "A man's history" means he is at increased risk for prostate cancer due to family history (one or two first degree relatives, such as father or brother).
- In ***men without symptoms*** (screening), PSA testing continues ***not*** to be paid for by the provincial health plan nor through a hospital's global budget. "Men without symptoms" means men without suspicious findings on physical examination or not at increased risk because of history. A man can have the PSA screening test if he is willing to pay for the test himself. However, it is hoped he will make this decision only after discussion with his doctor.

NOTE: PSA screening tests continue to not be an OHIP-insured service nor covered through hospital global budgets and the patient will be responsible for payment to the laboratory service provider.

Hospital-based PSA testing for diagnosing or monitoring purposes will continue to be covered through hospitals' global budgets, as per the above eligibility criteria.

1. Amendments to Ontario Regulation 552 of the *Health Insurance Act*

The Schedule of Benefits for Laboratory Services has been revised to include the PSA test (Total and Free) as an insured service, when ordered by a healthcare practitioner and performed by a licensed community laboratory, for men who meet the eligibility criteria, as described above. See attached Addendum and Preamble in Schedule as well.

2. Amendments to Ontario Regulation 552, Schedule 22 of the *Health Insurance Act*

The amendments to Schedule 22 of O.Reg 552 of the *Health Insurance Act* to ensure that the PSA test (Free and Total) is an insured service when ordered by nurse practitioners for men who meet the eligibility criteria as described above.

http://www.e-laws.gov.on.ca/Download?dDocName=elaws_regs_900552_e

3. Amendments to Ontario Regulation 682, Appendix C, of the Laboratory and Specimen Collection Centre Licensing Act

Amendments to O.Reg.682 will add the PSA testing to tests in Appendix C of the Regulation that can be requested by a nurse practitioner. The change to Appendix C of the Regulation will also ensure that laboratories can examine specimens for these tests at no charge to the patient, when requested by nurse practitioners for men who meet the eligibility criteria.

<http://www.search.e-laws.gov.on.ca/en/isysquery/d63037d0-7d49-4581-a223-d353072bdbaa/3/frame/?search=browseStatutes&context=>

4. New Fee Codes: L354 Prostate Specific Antigen (Free) / L358 Prostate Specific Antigen (Total)

Effective January 1, 2009, new fee codes will be introduced to include the PSA test as an insured service when testing is performed in a community laboratory only where patients meet the eligibility criteria, as described above.

5. Revision to OHIP Laboratory Requisition Form

The OHIP Laboratory Requisition Form (4482-84) has been revised to include order boxes for PSA testing (Total and Free) for diagnosing or monitoring purposes. Healthcare practitioners must identify when PSA is ordered for diagnosis or monitoring purposes.

Screening tests may continue to be ordered by checking the PSA screening -uninsured box. PSA screening tests are not an OHIP-insured service and the patient will be responsible for payment to the laboratory service provider.

Older versions of the Laboratory Requisition Forms may continue to be used, but practitioners ordering the PSA test must indicate whether the test is for diagnosis, monitoring or screening purposes. If this is not specified, the testing laboratory will assume that the test is for screening purposes and the patient will be billed for the test.

Effective January 1, 2009:

<http://www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf/FormDetail?OpenForm&ACT=RDR&TAB=PROFILE&ENV=WWE&NO=014-4422-84>

Addendum Dated October 15, 2008

**To The Schedule Of Benefits For Laboratory Services
(Effective as of January 1, 2009)**

Effective January 1, 2009, the Schedule of Benefits for Laboratory Services is changed as follows:

The following tests have been added to the Schedule:

Code	Description	LMS Units
L354	Prostate Specific Antigen (PSA), Free	0
L358	<i>Prostate Specific Antigen (PSA), Total</i>	0

The following paragraph is added to the Preamble of the Schedule:

Paragraph #33: L354 Prostate Specific Antigen (PSA), Free and L358 Prostate Specific Antigen (PSA), Total tests are insured services for men who have been diagnosed with, or receiving treatment for, or are being followed after treatment for prostate cancer, or men whose health care practitioner suspects prostate cancer because of their history, race, and/or the results of their physical examination. The L700 Patient Documentation and Specimen Collection Fee is not applicable and should not be claimed for L354 and L358.