

mcp newsletter

November 21, 2025

25-16

TO: ALL FFS AND BLENDED CAPITATION PHYSICIANS

RE: 2023-2027 MOA ACROSS THE BOARD BIWEEKLY ADJUSTMENTS

The Government of Newfoundland and Labrador and the Newfoundland and Labrador Medical Association (NLMA) have signed a new Memorandum of Agreement (MOA) effective from October 1, 2023, to September 30, 2027.

In accordance with the MOA, updated across-the-board (ATB) adjustments have been applied to applicable fee-for-service billings with service dates beginning October 25, 2025. For FFS billings already submitted with service dates up to and including October 24, 2025, retroactive adjustments will be paid on a future date to be confirmed.

The table below indicates ATB percentages by specialty.

Until the 2017-2023 MOA fee code allocation process is completed, with the NLMA, and the MCP Payment Schedule is updated, the current ATB increases from the 2017-2023 MOA remain in place, and the 2023 – 2027 ATB adjustments will be applied in addition.

Once the updated MCP Payment Schedule is published, and funding applied at the fee code level, the ATB increases from the 2017-2023 MOA will be discontinued (as the funds will be incorporated into the Payment Schedule). The ATB increases for the 2023-2027 MOA will continue and be applied to the rates in the updated MCP Payment Schedule (paid automatically as a bi-weekly adjustment) until the fee allocation process for the 2023–2027 MOA is completed. For reference, the allocation process is set out in Schedule 'L' of the MOA.

Please be advised that ATB adjustments only apply to FFS billings.

Blended Capitation Model physicians: Please reference MCP Newsletter 25-15 for information related to adjustments to the capitation rate. The foregoing **only** pertains to the FFS component (25%) of your practice.

Alternate Billing System Fee Codes: The '6xxxxx' series fee codes, where applicable, will have their rates increased separately. Please refer to **MCP Newsletter 25-15** for information regarding increases to those rates.

Specialty	2017-2023 MOA	2023-2027 MOA			
	Dec. 30, 2021 (Current)	Oct. 1, 2024 (Note 1)	Oct. 1, 2025 (Note 2)	Effective FFS ATB % (Note 3)	Oct. 1, 2026
Family Medicine	13.31%	9.59%	3.55%	28.58%	3.50%
Internal Medicine	8.28%	10.10%	3.50%	23.39%	3.50%
Neurology	0.28%	11.08%	3.50%	15.29%	3.50%
Psychiatry	16.74%	11.75%	3.50%	35.02%	3.50%
Pediatrics	-	4.86%	3.50%	8.53%	3.50%
Dermatology	-	6.09%	3.50%	9.80%	3.50%
General Surgery	7.72%	15.27%	3.50%	28.51%	3.50%
Urology	10.41%	2.00%	3.50%	16.56%	3.50%
Orthopedic Surgery	-	2.00%	3.50%	5.57%	3.50%
Plastic Surgery	12.45%	6.97%	3.50%	24.50%	3.50%
Neurosurgery	-	2.00%	3.50%	5.57%	3.50%
Ophthalmology	9.22%	2.00%	3.50%	15.30%	3.50%
Otolaryngology (ENT)	8.03%	12.71%	3.50%	26.02%	3.50%
Obstetrics/ Gynecology	15.04%	21.94%	3.50%	45.19%	3.50%
Radiology	-	16.61%	3.50%	20.69%	3.50%
Anesthesiology	10.46%	9.67%	3.50%	25.38%	3.50%
Critical Care	10.00%	10.10%	3.50%	25.35%	3.50%

Note 1: To be included in retroactive pay.

Note 2: Claims with applicable service dates between October 1, 2025, to October 24, 2025, will be included in retroactive pay.

Note 3: Effective FFS ATB % increases will be applied to billings effective October 25, 2025. These rates represent the compounded value of all applicable ATB rates currently in place for a specialty. Using Family Medicine as an example, below is the methodology used to determine that group's FFS adjustment as of October 1, 2025:

$$(1+0.1331) \times (1+0.0959) \times (1+0.0355) = 1.2858 \text{ or } 28.58\%$$

Questions relating to the content of this newsletter should be directed to
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