

**From:** Dadachanji, Shiroy HLTH:EX  
**To:** Tse, Cabio HLTH:EX; Muir, Angela HLTH:EX  
**Cc:** Machin, Evan W HLTH:EX  
**Subject:** RE: Concerns regarding ReBalance  
**Date:** January 24, 2018 1:45:51 PM  
**Attachments:** [image002.png](#)  
[image004.png](#)

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Hi Cabio and Angela,

Yes, I think a standard response can be sent to this complainant.

Rebalance is a large clinic here in Victoria. I must disclose a possible conflict of interest, as many of the physicians there are sports medicine physicians (either primary care or orthopaedic). s.22

As an unbiased reference, the portions of the payment schedule that are relevant to this issue are section D.2.2 and D.2.3 of the MSC Payment Schedule (screenshots below):

**D. 2. 2. Restrictions**

- i) A consultation for the same diagnosis is not normally payable as a full consultation unless an interval of at least six months has passed since the consultant has last billed a visit or service for the patient. A limited consultation may be payable within the six month interval, if medically necessary and a consultation has been specifically requested.

**D. 2. 3. Limited Consultation**

A limited consultation requires all of the components expected of a full consultation for that specialty but is less demanding and normally requires substantially less of the medical practitioner's time than a full consultation.

It is expected that the limited consultation, when medically necessary and specifically requested, will be billed as part of continuing care, and that a full consultation is not billed simply because of the passage of time.

A new and unrelated diagnosis can be billed as a full consultation without regard to the passage of time since the consultant has last billed any visit or service for the patient.

Having said that, the complaint states that re-referrals are being requested for "routine follow-up appointments longer than 6 months after the last appointment." When I worked in Vancouver it was standard practice for the GP-Sports Medicine physicians to request re-referrals for patients that wanted to be seen again *more than 6 months after their last appointment*. We found that if patients hadn't seen us for >6 months, their clinical situation had likely changed significantly enough to warrant a consultation (consistent with D.2.2 of the preamble). Also, GP's (such as myself) don't have a limited consultation fee item. I don't think routine follow-up appointments (regardless of duration since the last appointment) should be billed as consultations; however, in the musculoskeletal fields (sports medicine and orthopaedics), it's rare to have routine follow-ups at >6month intervals.

Cabio, I'd appreciate you still looking into this matter further to assess the appropriateness of consultations being billed by physicians at this clinic.

Thanks,  
Shiroy

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**From:** BIP, HLTH HLTH:EX  
**Sent:** Wednesday, January 24, 2018 12:48 PM  
**To:** Dadachanji, Shiroy HLTH:EX  
**Cc:** Muir, Angela HLTH:EX  
**Subject:** FW: Concerns regarding ReBalance

Hi Shiroy,

One more complaint came through the BIP's generic box. Please note that s.22  
s.22 an email on Nov 24/17 regarding s.22 Dermatology and we sent  
a letter requesting records which the due date of the records will be Feb 16/18.

Regarding the email below, I am not able to find a payee #, but I found the following website and a large number of practitioners are listed (see weblink)

<http://rebalancemd.com/team/>

I will try to get the practitioner numbers and do some preliminary review, meanwhile can Angela send a standard response to this sender?

Cabio

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**From:** s.22 | s.22  
**Sent:** Wednesday, January 24, 2018 10:33 AM  
**To:** BIP, HLTH HLTH:EX  
**Subject:** Concerns regarding ReBalance

Hello,

I have a concern that the ReBalance clinic in Victoria is inappropriately asking for re-referrals from GPs so they can bill consult fees for routine follow-up appointments longer than 6 months after the last appointment. s.22

s.22 The time to re-refer is  
an unnecessary burden on GPs and also inappropriate use of our funds as a healthcare system.

Regards,  
s.22



### FILE NOTE

**Project Name:** M21-0507  
**Practitioner #:** s.22  
**Practitioner Name:**  
**Type of Practice:** ORTHOPAEDIC SURGERY  
**Survey Letter Date:** MAY 7, 2021

#### Irregularities Identified in this Project:

Beneficiary s.22 ) responded online by marking anomaly to the consultation on Jan s.22'21 and stated "I met s.22 January s.22 2021 but it definitely was not a consultation or a "service". My appointment with s.22 was extremely disappointing. I waited s.2 months to be seen at Rebalance clinic. When I saw s.22 spent only 5 minutes time assessing my s.22 I tried to explain to s.22 what I had been experiencing and what my goals were for the appointment, but s.22 interrupted me by saying "I haven't examined you yet". s.22 then proceeded to tell me I had s.22 and not to do any s.22 or s.22 That is all s.22 said.. s.22 did not do s.22 due diligence. I left s.22 office completely dissatisfied and upset" Review of patient history shows that this was the only billing submitted by s.22 on behalf of this beneficiary.

In response to the EACL confirmation letters, one beneficiary has identified services as irregularities. We have not proceeded with any further investigation as these are the only irregularities out of 50 letters mailed and it would not be cost effective to do so.

No further action has been taken and Service Verification Audit M210507 can be closed. A copy of this file note will be placed on the practitioner's correspondence file for further reference.

**Written By: Sarah Caron**

**Reviewed By:**

  
Cabio Tse, Audit Technician

**Date: July 16, 2021**

**Date:** July 16, 2021