

## PHYSICIANS MANUAL UPDATES

### Page B-36 & B-37

Immunization tariffs 8896, 8961 & 8685 deleted effective May 1, 2025:

~~Men-C-C Meningococcal-C Conjugate~~

~~8685 single dose ..... 12.04~~

~~Men-C-ACWY-135-Meningococcal-Conjugate ACWY~~

~~8990 single dose ..... 12.04~~

~~MMR-Measles, Mumps, Rubella~~

~~8670 single dose ..... 12.04~~

~~MMRV-Measles-Mumps-Rubella-Varicella~~

~~8671 single dose ..... 12.04~~

~~Pneu-C-13 Pneumococcal Conjugate 13-valent~~

~~8896 single dose ..... 12.04~~

~~Pneu-P-23 Pneumococcal Polysaccharide 23-Valent~~

~~8961 single dose ..... 12.04~~

~~PNEU-C-15 – Pneumococcal Conjugate-15-Valent~~

### Page E-1

Note 2 was added under the heading “Revision or Repair” effective February 1, 2025:

#### **REVISION OR REPAIR**

- Notes:*
- 1) *These procedures have certain restrictions under the Regulations when done as elective surgery. To be certain that the case is covered, written approval from the Minister should be obtained before the procedure is undertaken.*
  - 2) *Revision or repair services following mastectomy for masculinization services are described under tariff 0482.*

### Page E-3/E-4

The following tariff has been added effective February 1, 2025:

0482	Mastectomy for masculinization - bilateral .....	1,400.00	21.375
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- Notes:*
- 1) *Includes mastectomy, tissue transfer, breast reduction, skin or nipple grafting, and excision of aberrant breast tissue.*
  - 2) *Only applicable for patients medically diagnosed with gender dysphoria (GD) or gender incongruence (GI) by any Manitoba physician or a Nurse Practitioner who has demonstrable knowledge of the SOC-8 guidelines and criteria and any future revisions thereto.*
  - 3) *Only applicable to patients 16 years of age and over, undergoing female to male chest masculinization surgery. The diagnosis of gender dysphoria or gender incongruence must be recorded in the patient chart.*

- 4) *0482 is billable at 100% for bilateral major revision including redo operations where at least twelve (12) months have elapsed since the initial or a previous revision surgery.*
- 5) *Major revision and redo operations must include 2 or more of the following bilateral services: additional resection of breast tissue; additional resection/revision of skin and/or scar tissue; revision of areola. A minimum of 2 of these services must be provided under general anesthesia to claim 0482.*
- 6) *Minor revision surgery must include 1 or more of the following services: additional resection of breast tissue; additional resection/revision of skin and/or scar tissue; revision of areola; and may be claimed under tariff 0476.*
- 7) *For the initial procedure, the referral letter must be electronically submitted with the claim.*
- 8) *Written prior approval from the Minister of Health is required for coverage of major revisions and redo operations, and minor revisions that will be claimed under tariff 0476. It is the responsibility of the physician to obtain this approval prior to the operation.*