

Health PEI

One Island Health System

Physician Bulletin

Medical Affairs & Legal Services
November 2016

Dr. Tom Dorran
Executive Director

This is our first Physician Bulletin of 2016-17. This revitalized communication tool will help us inform physicians and their staff on matters concerning the Tariff Fee codes, electronic billings, etc.

As we try to standardize the format, please take note of the main headings: Medical Consultant's Message, New Items, Reminders, Organizational News, and Useful Links.

Please ensure that your office/billing staff receive a copy.

MEDICAL CONSULTANT'S MESSAGE

Amendments related to Medical Assistance in Dying (MAID) were made to the Criminal Code in response to the Supreme Court of Canada decision, *Carter v Canada* (Attorney General). HPEI and the PEI College of Physicians and Surgeons have each drafted policies around medical/nurse practitioners providing MAID. Education sessions have been given across the province.

Our College and Health PEI have done a great job getting the rules and procedures for medically assisted dying out to the profession. The payment for the physician role in MAID is presently being negotiated by Health PEI and the Medical Society. In the interim, we have decided to pay on an Independent Consideration basis. The detail for this is in this Bulletin. If you have any questions on this, please call the Medicare office.

Dr. David Hambly,

Health PEI Medical Consultant

NEW ITEMS:

Interim Fee Codes for Medical Assistance in Dying

Physicians providing Medical Assistance in Dying (MAID) are now able to bill Medicare for providing this service. New fee codes will be created for this purpose. In the interim, physicians may bill I.C. (Independent Consideration) for the following:

Facilitating Physician:

I.C. fee code 9999 \$2.65/min. to a maximum of 2 hours.

Start and stop times must be recorded in the patient's medical record for the face-to-face component of the service. Start and stop times for the non face-to-face components must also be documented in the patient's medical record. Non face-to-face billable time includes completing all documentation, discussion with other Regulated Health Professionals as necessary and discussions with the family if required. Total duration of all face-to-face and billable non face-to-face time for the patient's care may be claimed. Start time and total duration (time spent) must be on the electronic claim. As well, a comment is required on the electronic claim "MAID". Physicians may not claim for non-billable time nor services provided by other health care providers such as nurses, nurse practitioners, pharmacists and medical trainees (such as residents.)

Independent Physician:

I.C. fee code 9999 \$2.65/min. to a maximum of 2 hours.

Start and stop times must be recorded in the patient's medical record for the face-to-face component of the service. Start and stop times for the non face-to-face components must also be documented in the patient's medical record. Non face-to-face billable time includes completing all documentation, discussion with other Regulated Health Professionals as necessary and discussions with the family if required. Total duration of all face-to-face and billable non face-to-face time for the patient's care may be claimed.

Start time and total duration (time spent) must be on the electronic claim. As well, a comment is required on the electronic claim "MAID". Physicians may not claim for non-billable time nor services provided by other health care providers such as nurses, nurse practitioners, pharmacists and medical trainees (such as residents.)

Administering Physician:

This physician must be either the facilitating physician or the independent physician. I.C. fee code 9999 \$2.65/min. to a maximum of 2 hours.

Start and stop times must be recorded in the patient's medical record for the face-to-face component of the service. Start and stop times for the non face-to-face components must also be documented in the patient's medical record. Non face-to-face billable time includes completing all documentation, discussion with other Regulated Health Professionals as necessary and discussions with the family if required. Total duration of all face-to-face and billable non face-to-face time for the patient's care may be claimed. Start time and total duration (time spent) must be on the electronic claim. As well, a comment is required on the electronic claim "MAID". Physicians may not claim for non-billable time nor services provided by other health care providers such as nurses, nurse practitioners, pharmacists and medical trainees (such as residents.)

Forms for Drug Programs – Change of Process

Effective August 15th, 2016 the data entry for the Diabetes Control, Sexually Transmitted Disease, Seniors, Family Health Benefit and Smoking Cessation Programs has been taken on by staff in Pharmacare. As such, **all relevant forms should now be sent to Pharmacare.** Pharmacare contact information is

PEI Pharmacare
16 Fitzroy Street Sullivan Building
Charlottetown, PE C1A 7N8
Telephone: (902) 368-4947
Toll free: 1-877-577-3737.

Also, you can fax Diabetes Control Program referrals to (902)368-4905 or scan in referrals and e-mail to drugprogram@gov.pe.ca.

Health Services Payment Advisory Committee (HSPAC) interpretation decision re: Comprehensive Office Visits (XX10) for Specialists. Tariff Section 9.D (pages 5-6).

In a meeting of October 18, 2016, HSPAC clarified the intent of fee Code XX10, Comprehensive Office Visits for specialist groups when conducting follow-up visits:

To bill any visit, including a follow-up visit, using fee code XX10 – Comprehensive Office Visit, the nature of the visit must meet the requirements noted on page 5.

- In-depth evaluation necessitated by the seriousness, complexity, or obscurity of the patient's complaint(s) or medical condition.
- Include a full history (past medical history and history of presenting complaint),
- Include a full functional inquiry,
- Include a detailed examination of relevant body systems, and
- Include a recommendation for treatment and all relevant advice.

Billing Education Sessions – November, 2016

In the next few weeks, we will be communicating the details on billing education sessions to be held at various locations across the Island in November and December, 2016.

REMINDERS:

Recording Time for Time-Based Fee Codes

There are several time-based codes in the current Master Agreement. For these codes, Health PEI requires Physicians to:

- Document their patient contact time (start and end times) in the patient records; AND
- Record the start time in the date/time field of the electronic claim and the duration of patient contact in the time spent field.

Note that only your time physically spent providing services to the patient can be claimed. (Delegated services can be claimed separately if you are pre-approved.)

Contract Hours Submissions to Medicare Office

Contract hours are to be submitted to the Medicare office by Noon on the Tuesday of Physician pay weeks, for the work provided in the two previous weeks. Please use the standard time sheet format and obtain approval from your administrator, **prior to submission.** Physicians should submit their time sheets in a timely manner, ideally no later than one month after the end of the two-week period worked.

Out-of-Province Referral Program

Physicians are required to obtain prior approval from Health PEI when referring a patient out of province for services. Physicians may do so by submitting a referral request through the Claims Processing System. It is expected that each Island physician will make every reasonable effort to submit out-of-province referral requests in a timely manner to ensure their patients have approval or denial before obtaining out-of-province services.

If you have any questions regarding the Out-of-Province Referral Program please contact the Out-of-Province Referral Co-ordinator by e-mail at arpowers@gov.pe.ca, by telephone at 902-368-6516 or by fax at 902-569-0581.

Walk-in-Clinics

1. It is important that physicians use the correct **facility type** code in the claims system when seeing patients in a walk-in-clinic. The appropriate facility type code is **27 walk-in-clinic** (and *not* 01-Office). If patients who are not part of your regular panel are able to be seen by you, walk-in-clinic and facility type 27 should be used.
2. Most walk-in clinic visits should be claimed as Basic Office Visits (0123) because they are typically for minor ailments or take less than 10 minutes. Occasionally Limited Office Visits (0113) may be warranted where the severity meets Tariff Preamble 9.E requirements and the encounter took at least 10 minutes of physician-patient contact time.

Organizational News:

Welcome to physicians who have begun working in PEI during 2016:

- Dr. Brenda Keeping, Anesthesia
- Dr. Aleisha Murnaghan, Emergency Medicine
- Dr. Jane Hennessey, Hospitalist
- Dr. Katie Matheson, Obstetrics and Gynecology
- Dr. Jaclyn O'Brien, Family Practice
- Dr. Laura Heron, Family Practice
- Dr. Roberto Campanaro, Family Practice
- Dr. Mark Foley, Emergency Medicine
- Dr. Abiodun Oladipo, Obstetrics and Gynecology
- Dr. Cai Wadden, Orthopedic Surgery
- Dr. Tiffany Townsend, Neurology
- Dr. Mohamed Naser, Internal Medicine
- Dr. Thomas Enright, Radiology
- Dr. Michelle Barton, Family Medicine
- Dr. Adriana Verdejo, Family Medicine.

Useful Links:

1. Link to on-line Physician Bulletins:
<http://www.healthpei.ca/src/medicarebulletins>
2. The Canadian Medical Protective Association (CMPA) Good Practices Guide for Documentation:
<https://www.cmpa-acpm.ca/serve/docs/ela/goodpracticesguide/pages/communication/Documentation/documentation-e.html>
3. The Master Agreement between the Medical Society of Prince Edward Island and the Government of Prince Edward Island and Health PEI
http://www.gov.pe.ca/photos/original/doh_masteragree.pdf