

Introduction of Fee Code for Physicians Providing Services by Telephone or Video or Working in Designated Assessment Centres

To reduce the risk of disease spread by keeping people at home and out of doctors' offices, and to enable patients to receive the necessary services, the Ministry of Health and Long-Term Care and OMA have agreed upon the implementation of temporary telephone and video codes for family physicians and specialists for services provided. These fee codes are not limited to COVID screening or COVID patients and are effective Saturday March 14, 2020.

These fee codes are available to family physicians and specialists. Physicians who provide virtual services through OTN Invite can continue to do so.

Fee Code	Description	Value
K080	minor assessment of a patient by telephone or video or advice or information by telephone or video to a patient's representative regarding health maintenance, diagnosis, treatment and/or prognosis	\$23.75
K081	a. intermediate assessment of a patient by telephone or video, or advice or information by telephone or video to a patient's representative regarding health maintenance, diagnosis, treatment and/or prognosis, if the service lasts a minimum of 10 minutes; or b. psychotherapy, psychiatric or primary mental health care, counselling or interview conducted by telephone or video, if the service lasts a minimum of 10 minutes	\$36.85
K082	psychotherapy, psychiatric or primary mental health care, counselling or interview conducted by telephone or video per unit (unit means half hour or major part thereof)	\$67.75
K083	Specialist Consultations and Visits by telephone or video payable in increments of**	\$5

K080, K081 and K082 are

- included in-basket for capitated and salaried Primary Care Enrolment models; or
- for Alternate Payment Program contracts these codes will be shadow-billed and the appropriate flow-through and shadow-billing premiums (if applicable) applied based on the specific contract;
- otherwise the codes will be paid fee-for-service

The codes are eligible for any applicable after-hours premiums.

For those in a FHO/FHN, patients seek who obtain care outside the group will **not** count towards outside use. If the ministry is unable to complete the necessary computer programming, they will make any necessary access bonus adjustments retroactively.

K083

Specialists will also be able to bill Consultations and Visits codes by telephone or video. Given the differential rates across specialties, specialists will bill the value of the equivalent face-to-face code in \$5 increments. An example is provided below.

For example:

General Surgery Consult \$90.30

- Round to the nearest \$5 = \$90
- Divide by 5 = 18
- Bill K083 for 18 units which will then be paid at 18 units x \$5 = \$90

Timing

While the codes are effective immediately, it will take approximately one month for the necessary computer programming to occur. Physicians will be instructed to hold their claims until the system is ready.

The Ministry has prepared InfoBulletins with all the relevant details.

- OHIP Bulletin 4745 “Changes to the Schedule of Benefits for Physician Services (Schedule) in response to COVID-19 influenza pandemic” is available [here](#)
- OHIP Bulletin 11229 “Primary Care Changes in response to Corona Virus (COVID-19)” is available [here](#)

Designated Assessment Centres

Physicians working in designated assessment centres will be paid a sessional rate of \$170/hour

Phone/Video Technology

There are no specific technologies required. You should note that there are regulated virtual care products that have passed PHIPA rules, where consent from the patient is handled at sign-up. There are also non-regulated products that have not undergone PHIPA testing. If you choose a non-regulated product, then you should ask patients for their consent and record that verbal express consent was obtained.

OMA Legal has prepared a short paragraph statement to initiate a Virtual Care patient encounter which has also been vetted by the CMPA:

“Just like online shopping or email, Virtual Care has some inherent privacy and security risks that your health information may be intercepted or unintentionally disclosed. We want to make sure

you understand this before we proceed. In order to improve privacy and confidentiality, you should also take steps to participate in this virtual care encounter in a private setting and should not use an employer's or someone else's computer/device as they may be able to access your information.

If you want more information, please check the link on our [website/confirmation email/etc.]. If it is determined you require a physical exam you may still need to be assessed in person. You should also understand that virtual care is not a substitute for attending the Emergency Department if urgent care is needed. Are you ok to continue?"

A note should be placed in the patient's file:

Informed verbal consent was obtained from this patient to communicate and provide care using virtual and other telecommunications tools. This patient has been explained the risks related to unauthorized disclosure or interception of personal health information and steps they can take to help protect their information. We have discussed that care provided through video or audio communication cannot replace the need for physical examination or an in person visit for some disorders or urgent problems and patient understands the need to seek urgent care in an Emergency Department as necessary.

The more detailed information is available for your use on the following page and must be made available to patients.

Information for Patient for Virtual Care provided through K080, K081, K082 and K083

COVID-19 is placing stress on Canada's public health system. Our clinic is starting to offer virtual care to make sure that we can continue to care for our patients safely and effectively. This means that we will be using video and audio technologies for some patient visits rather than asking all patients to come into our office. Some of these technologies are provided by the Province. Others have been provided by vendors like Google, or Apple to help make discussions with your care provider as easy as possible during these difficult times. Some health concerns can be addressed with virtual care alone, but in some cases your doctor may ask you to visit a hospital or other health care facility if necessary, for a physical examination.

We do our best to make sure that any information you give to us during virtual care visits is private and secure, but no video or audio tools are ever completely secure. There is an increased security risk that your health information may be intercepted or disclosed to third parties when using video or audio communications tools. To help us keep your information safe and secure, you can:

- Understand that this method of communication is not secure in the same way as a private appointment in an exam room.

- Use a private computer/device (i.e., not an employer's or third party's computer/device) and a secure internet connection. For example, using a personal computer or tablet is more secure than at a library, and your access to the Internet on your home network will generally be more secure than an open guest Wi-Fi connection.

You should also understand that virtual care is not a substitute for in-person communication or clinical examinations, where appropriate, or for attending the Emergency Department when needed (including for any urgent care that may be required).

If you are concerned about using video or audio tools for virtual care, you can ask our office to arrange for you to visit a different healthcare provider or other health care center where you can be seen in person. However, please note that visiting a health care provider in person comes with a higher risk of coming into contact with COVID-19 and the possibility of spreading the virus.

By providing your information, you agree to let us collect, use, or disclose your personal health information through video or audio communications (while following applicable privacy laws) in order to provide you with care. In particular, the following means of electronic communication may be used (identify all that apply): videoconferencing (including Skype, Facetime, etc.).