

Memorandum / Note de service

To: All Island Physicians
Mark Kickham, Manager Medicare

From: Dr. André Celliers
Executive Director Medical Affairs

Date : April 16, 2020

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**Subject : UPDATED: Temporary Billing
Instructions for Care During COVID-19 Pandemic**

Email: acelliers@ihis.org

Please find below a summary of the updated temporary billing instructions for care during the COVID-19 pandemic.

VIRTUAL CODES:

Effective March 16, 2020, physicians are eligible to bill for following fee codes for services delivered via virtual care (telephone, secure videoconferencing, and secure email/text) during the COVID-19 pandemic:

- Limited Office Visit – fee code xx13 (including at a walk in clinic)
- Health Promotion Counseling – fee code 2505
- Psychotherapy – fee code 2501 or 2504
- Diagnostic and Therapeutic Interview – fee code 2588, 2586, 2886
- Consultation – fee code xx60
- Repeat consultation – fee code xx62
- Geriatric follow up visit – fee code 2863
- Postnatal visit – fee code 0705
- **FOR SPECIALIST USE ONLY:** Comprehensive Office Visit – fee code xx10 for patients who have been initially referred for consultation and a subsequent visit relates to the same diagnosis

Billing Instructions:

- Service must be direct patient care by a physician to a patient, in lieu of a face-to-face visit.
- Service can be initiated by either the physician or the patient.
- These services are only billable for medically necessary services that can be safely and competently delivered via virtual care.
- Physical examination not required when completed by virtual care for fee code xx13.
- Postnatal visit will not require pelvic exam when completed by virtual care. Pelvic exam can be delayed until non-pandemic times.
- For time based codes (2501, 2504, 2505, 2586, 2588, 2886) please make sure the time of day is on the claim. Also these codes are a minimum of 15 minutes.
- Patient chart must document that it was a telemedicine (telephone, secure email/text, and secure videoconferencing) in lieu of physical visit for COVID-19.
- Physicians must continue to document in patient chart as per Tariff of Fees Preamble requirements.
- For patients in self-isolation, the billing claim must include "COVID-19 self-isolation".
- For all other patient care delivered via telephone, the billing claim must include a comment "COVID-19 telemedicine"

Please note that this is a temporary measure and continue to be reviewed on a regular basis.

TELEPHONE PRESCRIPTION RENEWALS:

Physicians cannot bill for a telephone prescription renewal on the same day that they bill virtually for a Limited Office Visit – fee code xx13; Health Promotion Counseling – fee code 2505; Psychotherapy – fee code 2501 or 2504; or Diagnostic and Therapeutic Interview – fee code 2588, 2586, 2886; Comprehensive office visit - fee code xx10.

However, Health PEI will temporarily suspend the restriction to bill telephone prescription renewal on Day 2 and Day 3 after a visit code is billed.

COVID-19 PLANNING MEETINGS:

For those physicians who are participating in COVID-19 planning meetings, you are eligible to bill fee code 0050 Administrative Meetings for time spent in these meetings. In the billing claim, please include in the comment "COVID-19 meeting".

ADMINISTRATIVE MEETINGS:

Given the unique situation that we find ourselves in with COVID-19, and as part of our temporary billing measures, we will temporarily allow billings for one staff meeting per week. This will continue to be reviewed on an ongoing basis.

DELEGATED FUNCTIONS:

For those physicians who have been approved by Health PEI to bill under Preamble 5B of the Master Agreement, your staff can also use the virtual codes that would be normally allowed under delegated function. The billing instructions laid out in above in the virtual care section still apply in addition to the regular comment for delegated functions. You can still only bill 75% of the fee code for any delegated function.

Virtual fee codes that would be applicable would be: 0113, 2501 and 2505.

COUGH & FEVER ASSESSMENT CLINIC:

Physicians working at the Cough and Fever Assessment clinic will be paid an hourly rate of \$165 regardless whether they are a Family Physician or Specialist. This rate is not eligible for blended payment nor any premiums.

There are two Cough and Fever Assessment clinics operating – one in Charlottetown and one in Summerside. The clinic is intended to be staffed by two physicians. The clinic will run 8 hours per day, 7 days per week.

ICD-9 CODES:

Please use ICD-9 code 487.8 for COVID-19 cases.

QUESTIONS:

If you have any further questions on billing, please contact Lauren Kelly Weyman, Manager Physician Services – Family Medicine by email lekelly@ihis.org or by phone 902-393-6657.