

March 25, 2020

Updates to GPSC Planning Fees & Mental Health Management Fees

Effective March 23, 2020 (until further notice):

GPSC Planning Fees 14033 Complex Care, 14075 Frailty, 14043 Mental Health, 14063 Palliative Care

- All **face-to-face planning** required under the GPSC planning fees may now be provided by Telehealth: video or phone. Think of it as physician:patient planning.
- The existing time and documentation requirements will not change: total planning time (30 minutes) and physician:patient planning time (minimum 16 minutes).
- If medically indicated, a telehealth visit (13037) may be billed in addition. The time spent on this visit cannot be concurrent with the physician:patient planning time.
- Submit the appropriate planning fee code with a claim note record: service provided via Telehealth.

GPSC Mental Health Management Fees 14044, 14045, 14046, 14047, 14048

- Mental Health Management fees currently allow videoconferencing. This has been expanded to include telephone counselling.
- Submit the appropriate MH management fee code with a claim note record: service provided via Telehealth.

GPSC CDM fees 14050, 14051, 14052, 14053

- No changes have been made to the CDM fees. Existing rules already allow one of the two required visits in the previous 12 months to be provided by Telehealth – video or phone.
- This will be reviewed in the future if the pandemic situation continues.

GPSC Prevention fee 14066

- No changes have been made to allow this service to be provided by Telehealth.
- This will be reviewed in the future if the pandemic situation continues.

Physicians should continue to use their professional judgement to determine whether use of virtual technology is clinically appropriate based on the circumstances of each patient.

Effective March 20, 2020 (until further notice):

Long Term Care Facility Visit 00114

- If the patient **is able to independently use a phone** and the physician feels that the encounter could be appropriately provided by Telehealth (video or telephone), then physicians will bill their face to face Long Term Care facility fee 00114 and include the claim note record “service provided via Telehealth”.
- If the patient **cannot independently use a phone** (e.g. due to dementia, hearing loss etc.) or does not have their own phone, the physician may review the patient’s medical status and any problems by telephone with an RN/LPN at

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the LTC facility, and bill the visit using 00114 and include the claim note record "Service provided via Telehealth with RN/LPN.

- 13334 LTC First visit of the day bonus is not billable with 00114 provided via Telehealth

Palliative Care Patient Facility visit 00127

- If the patient **is able to independently use a phone** and the physician feels that the encounter could be appropriately provided by Telehealth (video or telephone), then physicians will bill 00127 and include the claim note record "service provided via Telehealth".
- If the patient **cannot independently use a phone** or does not have their own phone, the physician may review the patient's medical status and any problems by telephone with an RN/LPN where the palliative care is provided, and bill the visit using 00127 and include the claim note record "Service provided via Telehealth with RN/LPN.
- 13338 First visit of the day bonus is not billable with 00127 provided via Telehealth

For more information, please join the GPSC billing support webinar:

April 2020 changes and COVID-19 fee changes for family physicians

GPSC billing experts will review the April 1 changes, any COVID-19 related fee changes that affect family physicians, and Pathways tools for COVID-19 care.

- **GPSC Billing Support Webinar:** Monday, March 30, 2020 at 6:00-7:30 p.m.
[Click here to register.](#)
- GPSC Billing Guides can be found [here](#).

New COVID-19 fees in progress

New, time-limited fees are under discussion to better enable communication between providers, and between providers and their patients. More information will be shared when available.