



VIRTUAL CARE IN PRIVATE PRACTICE GUIDE

Updated: March 2019

Billing & Incentives for GP's e-Communication with Patients

Document Purpose

This guide provides an overview of the virtual care fees and incentive payments available to BC family physicians for patient videoconference visits and patient clinical discussions conducted over the phone, through email or instant messaging.

Service fees listed in this overview are based on the [MSC Payment Schedule](#) available online. The actual amount provided here might not be accurate as the online Schedule is published only twice a year. The [Doctors of BC Fees Guide](#) is updated frequently throughout the year with fee values as well as with new, amended or deleted fee items.

Please refer to the Online Resources section at the end of this document to access information sources.

Videoconferencing with Patients

For the fees below, "telehealth service" is defined as a direct interactive video with a patient through the use of video technology.

Similarly to face-to-face visits, physicians (or clinical practitioners) can claim one telehealth service on the same day for the same patient. MSP will pay up to 4 such services for one patient per calendar year. Compensation for physician's travel, scheduling and other logistics is the responsibility of the Regional Health Authority (RHA). Rural Retention fee-for-service premiums are applicable to telehealth services and are payable based on the location of the receiving medical practitioner in eligible RHA communities.

Please Note: We highly recommend that you refer to **Preamble D.1. Telehealth Services** in the [MSC Payment Schedule](#) (pages 1-19) for a full description of notes and restrictions related to providing telehealth services.

Scenario: A physician **conducts an in-office telehealth service** with a patient or group of patients while physically present in their own office.

Billing Code	Service	MSP Fee (\$)	Non-MSP Fee (\$)*
P13036	Telehealth GP in-office Consultation	82.43	203.00
P13037	Telehealth GP in-office Visit	34.44	84.90
P13038	Telehealth GP in-office Individual counselling for a prolonged visit for counselling (minimum time per visit – 20 minutes)	58.46	146.00
P13041	Telehealth GP in-office Group Counselling For groups of two or more patients (First Full Hour)	86.94	214.00
P13042	Telehealth GP in-office Group Counselling For groups of two or more patients (Second Hour, per ½ Hour or Major Portion Thereof)	43.50	107.00

*Non-MSP fees apply to services delivered to patients with no MSP coverage and to be charged directly.

Scenario: A physician **provides an out-of-office telehealth service** with a patient or a group of patients while physically present in an health-authority approved telehealth facility. The name of the facility and the results of the telehealth service must be recorded in the patient chart.

Billing Code	Service	MSP Fee (\$)	Non-MSP Fee (\$)
P13016	Telehealth GP out-of-office Consultation	109.02	266.00
P13017	Telehealth GP out-of-office Visit	41.10	102.00
P13018	Telehealth GP out-of-office Individual counselling for a prolonged visit for counselling (minimum time per visit – 20 minutes)	75.32	185.00
P13021	Telehealth GP out-of-office Group Counselling For groups of two or more patients (First Full Hour)	87.46	214.00
P13022	Telehealth GP out-of-office Group Counselling For groups of two or more patients (Second Hour, per ½ Hour or Major Portion Thereof)	43.76	107.00

Scenario: A physician **assists with an in-person physical assessment of a patient** who is receiving telehealth services from a specialist. Applicable only if GP is required at the referring end to assist with essential physical assessment, without which the specialist service would be ineffective. Applies only to period spent during consultation with specialist.

Billing Code	Service	MSP Fee (\$)	Non-MSP Fee (\$)
P13020	Telehealth General Practitioner Assistant – Physical Assessment as requested by receiving specialist (for each 15 minutes of portion)	31.46	74.80

Email/Text/Telephone Medical Advice to Patients

Clinical discussion providing medical advice to patients via telephone or secure email/text message is covered by GP Patient Telephone Management fee. This fee does not include notifications for appointments and referrals, prescription renewals, or anti-coagulation therapy. Physicians can claim maximum of 1500 patient telephone management claims per physician per calendar year (EMR billing feature can help to monitor number of services provided).

To access the Telephone Management fee, family physicians must submit the GPSC Portal Code (G14070) for the patient once per calendar year (or is following prior claims for locum or other providers).

Patient Telephone Management fee cannot be claimed if physician has already claimed a visit or another service for this patient on the same calendar day. If physician has a telephone clinical discussion following an in-person clinic visit earlier the same day, the telephone management fee cannot be claimed. Some exceptions may apply (such as G14077, G14018 G14050, G14051, G14052, G14053, G14250, G14251, G14252, G14253 described in the Virtual Care Guide for Incentives and Billing for Team-Based Care). See also the GPSC Billing Guide for more details.

Scenario: A physician or college-certified allied care provider **has a clinical discussion with a patient by telephone.**

Billing Code	Service	MSP Fee (\$)	Non-MSP Fee (\$)
G14076	GP Patient Telephone Management Fee	20.00	33.00

Note: College-certified provider must be employed within an eligible physician practice. Not payable to physicians working under salary, service contract or sessional arrangements that include provision of this care.

Online Resources

[Society of General Practitioners – Simplified Guide to Fees](#)

Online user-friendly resource for 34 specialities and general practice. Website provides sample scenarios. SGP is a registered Society in BC. Requires an account and login.

[GP Services Committee – Conferencing and Telephone Management Billing Guide](#)

A 25-page guide on incentive payments available to B.C.'s eligible family physicians.

[Doctors of BC Fees Guide](#)

Published on the Doctors of BC website. Mirrors the MSC Payment Schedule and also provides the Non-MSP Insured fees for services delivered to patients who are not beneficiaries of MSP. Requires an account and login.

[MSC Payment Schedule](#)

Online list of fees approved by the Medical Services Commission payable to enrolled physicians for insured medical services provided to beneficiaries enrolled with MSP. Information current only at the time of publication and updated two times a year. No special login is required.

This document provides a general overview only and is intended to provide initial information to physicians exploring virtual care options. For the most current information, please refer to documents listed under the Online Resources section.

For questions around eligibility, definitions, or interpretation of service fees, contact Doctors of BC Economics Department at economics@doctorsofbc.ca.

Please contact Doctors Technology Office for questions and comments regarding virtual care services.

For more information, guidance or support contact:

Doctors Technology Office

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