

How to Bill OTN Codes

Quick Reference Guide

This short guide will provide you with key information on how to bill for OTN billing codes for virtual care.

Challenge

DoctorCare Best Practices and Recommendations

What are the OTN codes for tracking?

OTN Codes for Tracking

Fee Code	Description	Value
B103A	Video visit when patient is physically located and supported at a patient host site	\$0.00
B203A	Video visit with a patient in the home or another location of their choice	\$0.00

What are the billing requirements?

Billing Requirements for OTN Codes

To be eligible for the video visit codes, all physicians must:

- Be eligible to submit claims for the video visits (must have registered with the Ministry).
- Be eligible for services rendered where all participating physicians and patients are in attendance via an approved OTN video solution in Ontario.
- Include the OTN SLI code to indicate a consult was done as a video visit.
- The code must include the applicable Virtual Care Program B-code (i.e. B103A or B203A).
- Not include fee codes for services excluded from the Virtual Care Program.

For more details on the requirements, read the <u>OHIP Telemedicine</u> Information Manual here.



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What are the requirements for documentation?

Documentation for OTN Codes

If you meet the following requirements, these visits can be billed (and are paid) at the same amount as an in-person visit.

- You can only bill OTN codes for rostered patients. Non-rostered patients must be billed using the K-Codes (K080, K081, K082).
- If you are not registered for OTN, you can bill the K-Codes (K080, K081, K082) where appropriate.
- These visits must be documented properly. We suggest you use a slightly modified SOAP note for these visits that includes documentation of patient consent and start/stop times. We can guide you in setting this up in your EMR and can remotely add stamps/templates for your use.

Note: there are no restrictions on the platform you use to set up virtual care, however if your technology of choice has not passed PHIPA rules (where consent is received upon sign up (e.g. with OTN Invite), then you must obtain consent from the patient and ensure it is documented in their chat. The OMA has put together legal verbiage and patient-centred messaging that physicians can use here.

What are the error codes applicable to the virtual care claims?

Error Condition and Explanatory Code Messages

Error Code	Description	
ET1	Provider Not Registered for Virtual Care Program	
ET4	Virtual Care Program B-Code Missing or SLI Code Invalid	
ET5	Virtual Care Program SLI Code Missing	
TM1	Duplicate Virtual Care Claim for Same Patient	
TM3	Service Not Payable Under Virtual Care Program	
TM4	Non-Virtual Care Claim Already Paid for This Patient	
TM5	Virtual Care Claim Already Paid for This Patient	
TM6	Virtual Care Program Registration Not In Effect On Service Date	
TM7	Dental Services Not Payable Under Virtual Care Program	