

# Palliative Care

## Quick Reference Guide

This short guide will provide you with key information to bill for palliative care services

Read below for best practice recommendations on how to take advantage of the palliative care fee codes and maximize your billings

Challenge	DoctorCare Best Practices and Recommendations
What is Palliative Care?	Care provided to a terminally ill patient in the final year of life where the decision has been made that there will be no aggressive treatment of the underlying disease and care is to be directed to maintaining the comfort of the patient until death occurs.
Special Palliative Care Consultation Codes	<p>A Special Palliative Care Consultation is a consultation requested because of the need for specialized management for palliative care where the physician spends a minimum of 50 minutes with the patient and/or patient's representative/family in consultation (majority of time must be spent in consultation with the patient).</p> <ul style="list-style-type: none"> <li>● A945 – Special Palliative Care Consultation (Office, home, OPD) - \$159.20</li> <li>● C945 – Special Palliative Care Consultation (Hospital) - \$159.20</li> <li>● K023 – Palliative Care Support (&gt;20 min.) - \$72.15</li> </ul>
Palliative Care Case Management Fee Code	<p>The Palliative Care Case Management Fee is payment for a service rendered for providing supervision of palliative care to a patient for a period of one week, commencing at midnight Sunday.</p> <ul style="list-style-type: none"> <li>● G512 – Palliative Care Case Management Fee - \$67.75</li> </ul>
Telephone Management of Palliative Care Code	<p>The Palliative Care Telephone Management Fee is payment for the provision by telephone of medical advice, direction or information at the request of the patient, patient's relative(s), patient's representative or other caregiver(s), regarding a patient receiving palliative care at home.</p> <ul style="list-style-type: none"> <li>● G511 – Telephone Management of Palliative Care (per call) - \$17.75</li> </ul>

## Challenge

## DoctorCare Best Practices and Recommendations

### Office Visits for Palliative Care Codes

Visits that are less than 20 minutes in length are billed according to the usual family practice fee codes; i.e., bill the applicable fee code that best reflects the service rendered. If the visit is 20 minutes or greater and is directed at providing pain and symptom management, emotional support and counseling, the Palliative Care Support (K023) code may be billed.

- K023 – Palliative Care Support - \$72.15
- K015 – Counselling of Relatives (scheduled visit) - \$67.75

### Home Visits for Palliative Care codes

Home visits for providing palliative care are often eligible to be billed with special visit premiums specified below:

- K023 – Palliative Care Support (>20 min.) - \$72.15
- A900 – Complex House Call Assessment - \$45.15
- A902 – Pronouncement of Death in the Home (includes death certificate) - \$45.15
- A771 – Certification of Death (completion of death certificate alone) - \$20.60
- G511 – Telephone Management of Palliative Care - \$17.75
- K070 – Home Care Application - \$31.75
- K071 – Acute Home Care Supervision - \$21.40
- K072 – Chronic Home Care Supervision - \$21.40

### What is the Special Premium Bonus?

The Special Premium Bonus is an annual bonus given to physicians who have accumulated the required thresholds for enrolled and non-enrolled patients for the following codes: K023, C882, A945, C945, W882, B997, B998.

Required thresholds:

Bonus Level	Level A	Level C
Necessary annual criteria	4 or more patients served	10 or more patients served
Annual Bonus	\$2,000	\$5,000

Note:

- All family physicians are eligible for the level “A” bonus
- Only PEM physicians are eligible for the level “C” bonus