# LFP Payment Model Billing Made Easy

## Interaction Codes:

*You can bill only 1 interaction code per patient except for 98022.*

*Max of 50 per day can be billed except for 98022.*

**98020** - $110.00 - In-person Interaction with an Advanced procedure (Biopsy, nail removal, laceration etc...)

**98021** - $60.00 - In-person Interaction with a Standard procedure (PAP, IUD removal, Trigger point Injections etc...)

**98022** - $10.00, max 2 - Minor Procedure or Diagnosis Test provided with an In Person Interaction (Injection, Cryotherapy, urine test, pregnancy test etc...) Only can bill max one of each type.

*98022 can be billed with 98020, 98021, 98030, 98031, 98033, and cannot be billed on its own and is not payable with 98032 or 98034.*

**98030** - $60.00 - Consultation - Need referring practitioner's written request

**98031** - $25.00 - In person Interaction in a Clinic

**98032** - $25.00 - Virtual Interaction by Phone or Video

**98033** - $100.00 - In-person Interaction in the Patient's home

**98034** - $25.00 - In person or Video Group Interaction

*When billing interaction codes you can bill up to three Dx codes as applicable, this may be used in calculating your patient panel payment.*

*Procedures such as dressing changes, suture removal and ear syringing are billed as 98031 code.*

## Time Codes:

*Billable one at a time, requires start and end times, along with number of units (15 min) payable at max 14 hours day. For a 14 day period there is a maximum of 120 hours that can be billed.*

**98010** - $32.50 - Direct Patient Care Time (per 15 minutes) Billed for time spent providing direct patient care: clinic-based services with a patient in attendance .

**98011** - $32.50 - Indirect Patient Care Time (per 15 minutes) Billed for time spent on indirect patient care: patient- specific services provided when the patient is not present.

**98012** - $32.50 - Clinical Administration Time (per 15 minutes) This time code includes services such as panel management, EMR management, medical director responsibilities, privacy officer responsibilities etc... duties that require the professional expertise of a physician. Max time payable as clinical administration is 10% of total hours paid as 98010, 98011, and 98012 per calendar year.

## Non-LFP payment model services

*Physicians cannot claim for time spent on these exlcuded services.*

WS, ICBC, out of province (except Quebec – private), Drivers Medical, Services at a facility - bill as fee for service. Best practice as per MSP is to include start and end times for these claims. *Do not bill LFP time codes under these patients.*

*You can bill an interaction code along with WS and/or ICBC claims (different dx code needed) if the patient was seen for a different reason.*

*Please note this is simplified, for further in depth information see the LFP Payment Schedule.*