

This quick reference guide will provide you with key information on how to bill for services performed in the hospital by Ontario family physicians.

Challenge

DoctorCare Best Practices and Recommendations

What are the most common billing codes for consultations?

Consultations

Fee Code	Description	Value
C005	Consultation	\$87.90
C911	Special family and general practice consultation (minimum 50 mins.)	\$150.70
C912	Comprehensive family and general practice consultation (minimum 75 mins.)	\$226.05
C905	Limited consultation	\$74.25
C006	Repeat consultation	\$45.90

Recommendation:

When the admitting physician is the Most Responsible Physician (MRP), add billing code E082 to an admission consultation or assessment.

What are the most common codes to bill for assessments?

Assessments

Fee Code	Description	Value
C003	General assessment	\$87.35
C004	General re-assessment	\$38.35
C933	On-call admission assessment	\$79.90
C904	Pre-dental/pre-operative assessment	\$33.70

Recommendation:

When the admitting physician is the Most Responsible Physician (MRP), add billing code E082 to an admission consultation or assessment.

What codes do you bill for forms and home care supervision?

Forms and Home Care Supervision

Fee Code	Description	Value
K070	Home care application	\$31.75
K038	Completion of LTC health report form	\$45.15
K071	Acute home care supervision (first 8 weeks following admission to homecare program)	\$21.40
K072	Chronic home care supervision (after 8 th week following admission to home care program)	\$21.40

Billing Requirement:

K070 must be rendered by the MRP and is limited to one per home care admission per patient.

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What are the billing codes for subsequent visits?

Subsequent Visits

Fee Code	Description	Value
C002	First five weeks- per visit	\$34.10
C007	Sixth to thirteenth week inclusive- per visit	\$34.10
C009	After thirteenth week- per visit	\$34.10
C122	Day following the hospital admission assessment	\$61.15
C123	Second day following the hospital assessment	\$61.15
C124	Day of discharge	\$61.15

Recommendations:

- If you are the Most Responsible Physician (MRP) and bill a subsequent visit on a Saturday, Sunday or holiday, add billing code E084.
- If you are the Most Responsible Physician (MRP) and bill a subsequent visit on a weekday, add billing code E083.

Billing Requirement:

All C-prefix codes require an admission date and master/facility number included in the claim or it will come back as the following error: **AH8-Hospital and/or Admission date is missing or invalid.**

What are the codes for counselling and conference?

Counselling and Conference

Fee code	Description	Value
K002	Interview with relatives	\$70.10
K013	Individual counselling	\$70.10
K015	Counselling of relatives- on behalf of catastrophically or terminally ill patient	\$70.10
K121	Hospital In-patient conference	\$32.45

What other visits can I bill for?

Other Visits

Fee Code	Description	Value
C121	Additional visits due to intercurrent illness	\$34.10
C008	Concurrent care	\$34.10
C010	Supportive care	\$34.10

When to bill:

C121- After 5 weeks of hospitalization, any assessment required as a result of an acute intercurrent illness constitutes as C121.

C008- Any routine assessment by the consultant after the consultants first major assessment of the patient when the family physician remains the MRP.

C010- Any routine visit rendered in hospital by the family physician who is not actively treating the case.

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What are the special visit premiums?

Hospital In-Patient

Premium	Weekdays Daytime	Weekdays Daytime - Sacrifice of Office Hours	Evenings Monday through Friday	Saturday, Sunday and Holidays	Nights
Time	07:00-17:00	07:00-17:00	17:00-24:00	07:00-24:00	00:00-07:00
Travel Premium	\$36.40 C960	\$36.40 C961	\$36.40 C962	\$36.40 C963	\$36.40 C964
First person seen	\$20.00 C990	\$40.00 C992	\$60.00 C994	\$75.00 C986	\$100.00 C996
Additional person(s) seen	\$20.00 C991	\$40.00 C993	\$60.00 C995	\$75.00 C987	\$100.00 C997

*Note: When billing with Special Visit Premiums, use **A-prefix** consultations or assessments. C-prefix consultations and assessments are **not** eligible to be billed in conjunction with special visit premiums.*

Emergency Department

Premium	Weekdays Daytime	Weekdays Daytime - Sacrifice of Office Hours	Evenings Monday through Friday	Saturday, Sunday and Holidays	Nights
Time	07:00-17:00	07:00-17:00	17:00-24:00	07:00-24:00	00:00-07:00
Travel Premium	\$36.40 K960	\$36.40 K961	\$36.40 K962	\$36.40 K963	\$36.40 K964
First person seen	\$20.00 K990	\$40.00 K992	\$60.00 K994	\$75.00 K998	\$100.00 K996
Additional person(s) seen	\$20.00 K991	\$40.00 K993	\$60.00 K995	\$75.00 K999	\$100.00 K997



To view more hospital billing codes, please refer to the Schedule of Benefits [here](#).

*Note: When billing with Special Visit Premiums, use **A-prefix** consultations or assessments. C-prefix consultations and assessments are **not** eligible to be billed in conjunction with special visit premiums.*

QUESTIONS?

Call our special Billing Hotline at 1-844-224-6244 or email support@doctorcare.ca