

Out of Basket Billing

Quick Reference Guide

This guide will provide you with key information on out-of-basket billing with references to guides on the most common out-of-basket codes.

Challenge	DoctorCare Best Practices and Recommendations									
<p>What are out-of-basket codes?</p>	<p>Under the FHO model, physicians can bill in-basket or out-of-basket codes.</p> <table border="1" data-bbox="407 751 1541 1001"> <thead> <tr> <th></th> <th>In-Basket Service Code Payout</th> <th>Out of Basket Service Code Payout</th> </tr> </thead> <tbody> <tr> <td>Rostered Patient</td> <td>19%</td> <td>100%</td> </tr> <tr> <td>Non-Rostered Patient</td> <td>100% (Hard Cap)</td> <td>100%</td> </tr> </tbody> </table> <p>In-basket codes include services such as: minor assessments, counselling, etc. Out-of-basket codes include services such as: diabetes, congestive heart failure, smoking cessation, etc.</p>		In-Basket Service Code Payout	Out of Basket Service Code Payout	Rostered Patient	19%	100%	Non-Rostered Patient	100% (Hard Cap)	100%
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Non-Rostered Patient	100% (Hard Cap)	100%								
<p>Why do I need to bill out-of-basket codes?</p>	<p>Billing the appropriate out-of-basket codes for the services you provide is important in ensuring that you are paid for the full value of the service. Doctors miss out on a higher revenue potential when billing an in-basket code for their rostered patients when they could have billed for an out-of-basket equivalent.</p>									
<p>Example</p>	<p>A physician provides in-person counselling for a rostered patient requiring palliative care support for more than 20 minutes. The physician has the option to bill the counselling code (K013) or the palliative care support code (K023).</p> <table border="1" data-bbox="407 1570 1541 1780"> <thead> <tr> <th>In-basket</th> <th>Out-of-basket</th> </tr> </thead> <tbody> <tr> <td> Code: K013 - Counselling Bill: \$70.10 Receives: \$13.32 (19%) </td> <td> Code: K023 - Palliative Care support Bill: \$74.70 Receives: \$74.70 (100%) </td> </tr> </tbody> </table> <p>As shown in the table, the physician is paid 19% of the fee amount billing the in-basket code but if they billed the appropriate out of basket code, they would receive a higher return.</p> <p>For more information on how to bill for palliative care codes, read our blog here.</p>	In-basket	Out-of-basket	Code: K013 - Counselling Bill: \$70.10 Receives: \$13.32 (19%)	Code: K023 - Palliative Care support Bill: \$74.70 Receives: \$74.70 (100%)					
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Challenge

What are the most common out-of-basket billing codes?

DoctorCare Best Practices and Recommendations

Smoking Cessation

Fee Code	Description	Fee value
E079	Smoking cessation: Initial discussion with patient	\$15.55 (in-person/video) \$13.20 (phone)
K039	Smoking cessation follow-up visit	\$33.45
Q042	Smoking cessation counselling fee	\$7.50 / 30min

[Download our smoking cessation flow sheet here.](#)
[Download our smoking cessation billing guide here.](#)

Congestive Heart Failure

Fee Code	Description	Fee value
Q050	Congestive heart failure management	\$125

[Download our congestive heart failure flow sheet here.](#)
[Download our congestive heart failure guide here.](#)

Diabetes Management

Fee Code	Description	Fee value
K030A	Diabetes management assessment	\$40.55
Q040A	Diabetes management incentive	\$60
K029A	Insulin therapy support	\$70.10 / 20min

[Download our diabetes flow sheet here.](#)
[Download our diabetes billing guide here.](#)

For a more comprehensive list of all the common FHO practice billing codes, [download our quick reference guide here.](#)

