

Quick Reference Guide: FHO In-Basket Billing Codes



Assessments		
A001	Minor Assessment	\$23.75
A003	General Assessment	\$87.35
A007	Intermediate Assessment	\$37.95
A008	Mini Assessment	\$13.05
A777	Intermediate Assessment - Pronouncement of Death	\$37.95
A900	Complex House Call Assessment	\$45.15
A110	Periodic Oculo-Visual Assessment (aged 19 years and below)	\$48.90
A112	Periodic Oculo-Visual Assessment (aged 65 years and above)	\$48.90

Time Based Counselling and Complex Care (per unit, 1 unit = minimum 20min)		
K013	Counselling	\$70.10
K005	Mental Health Counselling	\$70.10
K007	Psychotherapy Individual Care	\$70.10
K008	Dianostic interview with child/parent for psychological problem	\$70.10

Electrocardiogram		
G310	Technical Component	\$77.20
G313	Professional Component (must include written interpretation)	\$36.85

Spirometry		Technical	Professional
J301	Simple Spirometry- Volume vs Time study	\$ 9.85	\$7.85
J304	Flow Volume Loop- Volume vs Flow Study	\$ 19.60	\$11.50
J324	Simple Spirometry- Repeat after bronchodilator	\$ 2.97	\$4.20
J327	Flow volume Loop- Repeat after bronchodilator	\$ 2.97	\$6.90

Biposies/Incisions/Cryotherapy		
Z113	Biopsy- any method, when sutures are not used	\$29.60
Z114	Foreign body removal- local anesthetic	\$25.25
Z116	Biopsy- any method, when sutures are used	\$29.60
Z117	Chemical/cryotherapy treatment- one or more lesions	\$11.65

Physician to Physician Consult Fees		
K730	Physician-physician telephone consult- referring physician	\$32.45
K371	Physician-physician telephone consult- consult phys.	\$41.85
K372	CritiCall telephone consult- referring physician	\$32.45
K373	CritiCall telephone consult- consultant physician	\$41.85

Office Laboratory Procedures		
G001	Cholesterol, total	\$5.70
G002	Glucose, quantitative or semi-quantitative	\$2.26
G004	Occult Blood	\$1.58
G005	Pregnancy Test	\$3.88
G009	Urinalysis, routine	\$4.45
G010	One or more parts above without microscopy	\$8.65
G011	Fungus culture including KOH preparation and smear	\$8.65
G014	Rapid Streptococcol test	\$8.65
G482	Venipuncture- child	\$7.35
G489	Venipuncture- adolescent/adult	\$3.34
G420	Ear syringing and/or curetting or debridement	\$13.15

Immunizations		
G538	Other immunizing agents not listed below	\$5.70
G539	Influenza Agent	\$5.70
G840	DTaP-IPV Pediatric	\$5.70
G841	DTaP-IPV-Hib Pediatric	\$5.70
G842	Hepatitis B	\$5.70
G843	HPV	\$5.70
G844	Men-C Conjugate	\$5.70
G845	MMR	\$5.70
G846	Pneumococcal Conjugate	\$5.70
G847	Tdap-Adult	\$5.70
G848	Varicella	\$5.70

Injections/Infusions/Infiltration		
G370	Injection of bursa, or injection/aspiration of joint	\$20.25
G371	Each additional injection of bursa, to a maximum of 5	\$19.90
G372	Intramuscular/intradermal/subcutaneous- with visit	\$3.89
G373	Intramuscular/intradermal/subcutaneous- sole reason	\$5.70
G375	Intralesional infiltration- one or two lesions	\$5.70
G377	Intralesional infiltration- three or more lesions	\$5.70

Special Visit Premiums		
Special Visit to Patients Home (non-LTC Facility)		
1st Person Seen (Non-Elective)		
B990	Weekdays Daytime (7:00am-5:00pm)	\$22.50
B992	Weekdays Daytime (7:00am-5:00pm) Sacrifice Hours	\$44.00
B993	Weekends & Holidays (7:00am-12:00am)	\$82.50
B994	Weekday Evenings (5:00pm-12:00am)	\$66.00
B996	Nights (12:00am-7:00am)	\$110.00

Focused Practice Assessment (FPA)		
A917	Sports Medicine FPA	\$37.95
A927	Allergy FPA	\$37.95
A937	Pain Management FPA	\$37.95
A947	Sleep Medicine FPA	\$37.95
A957	Addiction Medicine FPA	\$37.95
A967	Care of the elderly FPA	\$37.95

Periodic Health Visit/Female Wellness		
K017	Child 2-15 years	\$45.25
K130	Adolescent 16-17 years	\$77.20
K131	Adult 18-64 years	\$56.95
K132	Adult 65 years +	\$80.95
K133	Adult with IDD	\$160.00
G365	Papanicolaou Smear	\$12.00
G378	Insertion of intrauterine contraceptive device	\$39.95
G552	Removal of intrauterine contraceptive device	\$20.00

Non-Emergency Long Term Care In-Patient		
W002	First 4 subsequent visits per patient per month	\$34.10
W102	Type 1 admission assessment	\$69.35
W105	Consultation	\$87.75
W121	Additional visits due to intercurrent illnesses	\$34.10
W771	Certification of death	\$20.60
W777	Intermediate Assessment- pronouncement of death	\$37.95
W010	Monthly management fee- nursing home	\$115.25

Questions about billing? Contact us any time!

Toll-Free: 1.844.853.6396
 Email: support@doctorcare.ca
www.doctorcare.ca