

GP Services Committee Update

December 14, 2010

Telephone Consultation with Specialist and Specialty Trained General Practitioners

The following incentive payments are available to B.C.'s eligible family physicians. The purpose of the incentive payments is to improve patient care. GPSC retains the right to modify or change fees.

The following fee items are effective September 1, 2010:

1. General Practice Urgent Telephone Conference with a Specialist (or GP with Specialty Training) Fee (G14018)

The intent of this initiative is to improve management of the patient with acute needs, and reduce unnecessary ER or hospital admissions/transfers.

This fee is billable when the patient's condition requires urgent conferencing with a specialist or GP with specialty training, and the development and implementation of a care plan within the next 24 hours to keep the patient stable in their current environment.

This fee is not restricted by diagnosis or location of the patient, but by the urgency of the need for care.

The following fee item is effective September 1, 2010:

Eligibility:

This incentive payment is available to improve patient care to:

- All General Practitioners who have a valid B.C. MSP practitioner number (registered specialty 00), except those with access to any specialty consultation fee.
- Is considered the most responsible general practitioner for that patient at the time of service.
- Where the severity of the patient's condition justifies urgent conference with a specialist by telephone for the development of a clinical action plan to keep the patient safely in their location.

G14018	General Practice Urgent Telephone Conference with a Specialist Fee: Conferencing on an urgent basis (within 2 hours of request for a telephone conference) with a specialist or GP with specialty training by telephone followed by the creation, documentation, and implementation of a clinical action plan for the care of patients with acute needs; i.e. requiring attention within the next 24 hours and communication of that plan to the patient or patient's representative	\$40.00
---------------	---	----------------

Notes:

- i) Payable to the GP who initiates a two-way telephone communication (including other forms of electronic verbal communication) with a specialist or GP with specialty training regarding the urgent assessment and management of a patient but without the responding physician seeing the patient.
- ii) A GP with specialty training is defined as a GP who:
 - a. has specialty training and who provides services in that specialty area through a health authority supported or approved program;
 - b. Has not billed another GPSC fee item on the patient in the previous 18 months; Telephone advice must be related to the field in which the GP has received specialty training.
- iii) Conversation must take place within two hours of the GP's request and must be physician to physician. Not payable for written communication (i.e. fax, letter, e-mail).
- iv) Includes:
 - a. Discussion with the specialist of pertinent family/patient history, history of presenting complaint, and discussion of the patient's condition and management after reviewing laboratory and other data where indicated.

- b. *Developing, documenting and implementing a plan to manage the patient safely in their care setting.*
- c. *Communication of the plan to the patient or the patient's representative.*
- v) *The care plan must be recorded in the patients chart and include the following information:*
 - a. *Patient's Name.*
 - b. *Date of Service.*
 - c. *Diagnosis.*
 - d. *Reason for need of Clinical Action Plan.*
 - e. *Name of specialist/GP with specialty training & their role in provision of care.*
 - f. *Elements of the Clinical Action Plan determined.*
 - g. *Patient risks based on assessment of appropriate domains (list of relevant co-morbidities and safety risks).*
 - h. *What referral will be made, what follow-up has been arranged (including timelines), as well as advanced planning information if appropriate.*
 - i. *Start times of service.*
- vi) *Not payable to the same patient on the same date of service as any other Patient Conference (fee items G14015, G14016, G14017), complex care, mental health or palliative care planning (G14033, G14043, G14063) or telephone fees.*
- vii) *Not payable to physicians who are employed by, or who are under a contract to a facility, who would otherwise have provided the service as a requirement of their employment or contract with the facility; or physicians working under salary, service contract or sessional arrangement.*
- viii) *Include start time in time fields when submitting claim.*
- ix) *Not payable for situations where the primary purpose of the call is to:*
 - a. *book an appointment*
 - b. *arrange for transfer of care that occurs within 24 hours*
 - c. *arrange for an expedited consultation or procedure within 24 hours*
 - d. *arrange for laboratory or diagnostic investigations*
 - e. *inform the other physician of results of diagnostic investigations*
 - f. *arrange a hospital bed for the patient.*
 - g. *obtain non-urgent advice for patient management (i.e. not required within the next 24 hours).*
- x) *Limited to one claim per patient per physician per day.*
- xi) *Out-of-Office Hours Premiums and Rural Retention Premiums may not be claimed in addition.*
- xii) *Maximum of 6 (six) services per patient, per practitioner per calendar year.*
- xiii) *Visit payable on same date of service if medically required and does not take place concurrently with the clinical action plan.*

2. General Practitioners with Specialty Training Telephone Advice Fees (G14021, G14022, G14023)

Eligibility:

- Must not have billed another GPSC fee item on the specific patient in the previous 18 months.
- Service may be provided when physician is located in office or hospital.
- For the purpose of these telephone advice fee items a General Practitioner (GP) with specialty training is defined as:
A GP who has specialty training and who provides services in that specialty area through a health authority supported or approved program.
- Telephone advice must be related to the field in which the GP has received specialty training.

G14021 GP with Specialty Training Telephone Advice - Initiated by a Specialist or General Practitioner, Urgent **\$60.00**

Notes:

- i) Payable to a GP with specialty training for two-way telephone communication (including other forms of electronic verbal communication) regarding assessment and management of a patient but without the consulting physician seeing the patient.
- ii) Conversation must take place within two hours of the initiating physician's request. Not payable for written communication (i.e. fax, letter, e-mail).
- iii) Includes discussion of pertinent family/patient history, history of presenting complaint and discussion of the patient's condition and management after reviewing laboratory and other data where indicated.
- iv) Not payable for situations where the purpose of the call is to:
 - a. book an appointment
 - b. arrange for transfer of care that occurs within 24 hours
 - c. arrange for an expedited consultation or procedure within 24 hours
 - d. arrange for laboratory or diagnostic investigations
 - e. inform the referring physician of results of diagnostic investigations
 - f. arrange a hospital bed for the patient
- v) Not payable to physician initiating call.
- vi) No claim may be made where communication is with a proxy for either physician (e.g.: nurse or assistant).
- vii) Limited to one claim per patient per physician per day.
- viii) A chart entry, including advice given and to whom, is required.
- ix) Include start and end times in time fields when submitting claim.
- x) Not payable in addition to another service on the same day for the same patient by same practitioner.
- xi) Out-of-Office Hours Premiums and Rural Retention Premiums may not be claimed in addition.
- xii) Cannot be billed simultaneously with salary, sessional, or service contract arrangements.

G14022 GP with Specialty Training Telephone Patient Management - Initiated by a Specialist or General Practitioner, One Week **\$40.00**

Notes:

- i) Payable to a GP with specialty training for two-way telephone communication (including other forms of electronic verbal communication) regarding assessment and management of a patient but without the consulting physician seeing the patient.
- ii) Conversation must take place within 7 days of initiating physician's request. Initiation may be by phone or referral letter.
- iii) Includes discussion of pertinent family/patient history, history of presenting complaint and discussion of the patient's condition and management after reviewing laboratory and other data where indicated.
- iv) Not payable for situations where the purpose of the call is to:
 - a. book an appointment
 - b. arrange for transfer of care that occurs within 24 hours
 - c. arrange for an expedited consultation or procedure within 24 hours
 - d. arrange for laboratory or diagnostic investigations
 - e. inform the referring physician of results of diagnostic investigations
 - f. arrange a hospital bed for the patient
- v) Not payable to physician initiating call.
- vi) No claim may be made where communication is with a proxy for either physician (e.g.: nurse or assistant).
- vii) Limited to one claim per patient per physician per week.
- viii) A chart entry, including advice given and to whom, is required.
- ix) Include start and end times in time fields when submitting claim.
- x) Not payable in addition to another service on the same day for the same patient by same practitioner.
- xi) Out-of-Office Hours Premiums and Rural Retention Premiums may not be claimed in addition.
- xii) Cannot be billed simultaneously with salary, sessional, or service contract arrangements.

G14023 GP with Speciality Training Telephone Patient Management / Follow-Up **\$20.00**

Notes:

- i) *This fee applies to two-way direct telephone communication (including other forms of electronic verbal communication) between the GP with specialty training and patient, or a patient's representative. Not payable for written communication (i.e. fax, letter, e-mail).*
- ii) *This fee is only payable for scheduled telephone appointments with the patient.*
- iii) *Access to this fee is restricted to patients having received a consultation, visit, diagnostic procedure or surgical procedure from the same GP with specialty training, within the 6 months preceding this service.*
- iv) *Telephone management requires two-way communication between the patient and physician on a clinical level; the fee is not billable for administrative tasks such as appointment notification.*
- v) *No claim may be made where communication is with a proxy for the physician (e.g.: nurse or assistant).*
- vi) *Each physician may bill this service four (4) times per calendar year for each patient.*
- vii) *This fee requires chart entry as well as ensuring that patient understands and acknowledges the information provided.*
- viii) *Include start and end times in time fields when submitting claim.*
- ix) *Not payable in addition to another service on the same day for the same patient by the same practitioner.*
- x) *Out-of-Office Hours Premiums and Rural Retention Premiums may not be claimed in addition.*
- xi) *Cannot be billed simultaneously with salary, sessional, or service contract arrangements.*

Frequently Asked Questions**1. Can both the patient's GP and a GP with Specialty Training bill for these fees on the same patient?**

Yes, for urgent (less than 2 hours) telephone conferencing, the patient's GP (the requesting GP) would bill the G14018 for their part in the telephone conferencing and the resulting development and implementation of the clinical action plan, while the GP with specialty training would bill the G14021. For less urgent telephone conferencing, the GP with specialty training may bill the G14022 but the requesting GP cannot bill the G14018. However, if this less urgent teleconferencing is for a patient covered by the community patient conferencing fee (G14016) and fulfills the requirements outlined in this fee, then the appropriate units of G14016 may be billed by the patient's GP.

2. Are there any restrictions on the patient underlying medical conditions?

No, unlike the other GPSC patient conferencing fees (G14015, G14016, G14017) there are no specific medical condition requirements for these new fees. The intent of this initiative is to improve management of the patient with acute needs, and reduce unnecessary ER or hospital admissions/transfers. If a patient's condition is severe enough to warrant the telephone conferencing and the patient is not seen the same day by the specialist/GP with Specialty training, then the fees are billable.

3. Does the patient have to be seen in the office to be eligible for these new fees?

No, patient location in the community is not a requirement for these new fees. The patient could be in a community hospital and the teleconference with a specialist or GP with specialty training could be at a regional or tertiary care hospital. The main requirements for these new fees are based on the timing of the teleconferencing.

4. Are fee items G14018, G14021, G14022 and G14023 eligible for the rural retention premiums?

No these fee items are not eligible for rural retention premiums.

5. Can any of these fees be billed in addition to a visit or other service on the same day?

Only the G14018 is billable in addition to a visit or service on the same day. The fee items G14021, G14022 & G14023 are not payable in addition to another service on the same day by the same physician for the same patient.

