Visit Services – General Practitioners

Billing Information Sheet

Insured Services, Medical Services Branch

1.	**GENERAL INFORMATION (3B, 5B, 15B, 40B/41B)**
a)	A visit includes the assessment of **one or more conditions** during the same patient contact. • Length of visits can vary depending on the nature of the issue(s). • We recognize there is pressure managing patient flow efficiently. • All concerns cannot always be addressed at same visit. • Physician/patient dialogue is important – try to prioritize concerns. • Bill in accordance with the intent of the negotiated fee item (5B). • This is considered an overall payment that provides appropriate compensation for the average length of time for this type of visit.
b)	No additional payment is approved when more than one condition is involved or the visit takes longer than 'usual'.
c)	***Two visits on the same day*** by either the same physician or the same clinic/specialty must state: ✓ reason for second visit. ✓ time of visit. ✓ location. ✓ service(s) provided.
d)	***Only ONE (1) visit service is payable per patient contact.*** Example: • 5B + 40B are not payable together for the same patient contact. • 3B + 5B are not payable together for the same patient contact.
e)	***Time-based counseling codes (40B/41B)*** are not a substitute for 'long or lengthy' 5B services. ✓ Ensure you are following the criteria as set-out in the Payment Schedule
2.	**CHRONIC DISEASE MANAGEMENT (CDM) (64B, 65B, 66B, 67B, 68B)**
a)	***Does your patient have a confirmed diagnosis of:*** ✓ diabetes mellitus? ✓ coronary artery disease? ✓ congestive heart failure or chronic obstructive pulmonary disease (COPD)?

b)	***Do they require ongoing longitudinal care management of these diseases?*** If so, then you may be eligible to bill using the CDM service codes (64B, 65B, 66B, 67B, 68B) CDM fees are designed to encourage the use of accepted clinical care pathways to optimize the patient management.
c)	***You must use an SMA approved CDM flow sheet.***
d)	***You MUST use the diagnoses*** indicated in the Payment Schedule or your claim will be rejected without payment explanatory code **AT**.
e)	• 64B is considered the "base" code and cannot be billed alone. • 65B-68B would be billed in addition to the 64B. • **5B or other visit services are NOT payable in addition to these codes on the same day for the same patient, same contact.**
3.	**MONTHLY STIPENDS**
a)	• **Methadone Management (60B, 61B, 62B)** – must be a licensed methadone prescriber. • **Anticoagulant Therapy Monitoring (763A).** • **Diabetes Monitoring (764A-768A).** • **Hepatitis C (57B)** - practitioners must have prior approval from the SMA.
b)	• The same principles apply to all stipends -- a once monthly billing for overseeing patients with these conditions. • For ease of bookkeeping, **we recommend you bill them on the last day of every month**. • Payments are based on a **calendar month**. • Only payable one per patient per month. • **Any billing discrepancies are the responsibility of the physician and not MSB.**
4.	**REFERRAL TO A SPECIALIST - 55B**
a)	Use 55B instead of 5B for a visit where a specialist referral is made and continue using 5B for visits where a specialist referral is not made.
b)	There is no financial incentive – it is the same fee as a 5B. However, this is used to help track wait times between appointments.

5.	**AFTER HOURS PREMIUM – IN OFFICE – "F" location**
a)	The after-hours-clinic premium provides the physician with increased compensation when he/she performs most services in an office location from: • 7:00 p.m. and 7:00 a.m. on weekdays • All day on Saturday and Sunday • All day on statutory holidays
b)	This premium applies to scheduled or unscheduled after-hours-clinic work, but must be ***performed in your office***.
c)	This premium is **restricted to general practice physicians** in certain communities only: Moose Jaw, Prince Albert, Regina, Saskatoon, Balgonie, Clavet, Dalmeny, Emerald Park, Langham, Lumsden, Martensville, Pense, Pilot Butte, Warman, White City, Lloydminister, North Battleford, Swift Current and Yorkton.
d)	The premium is calculated at a rate of 10% for all in-office work performed during these times. There are several ***excluded services***; please refer to your payment schedule for the list.
e)	These services must be billed with a location of service of "**F**". The system will automatically calculate the premium, you do not need to do this.