



OMA SECTION  
ON GENERAL &  
FAMILY PRACTICE

*The Educated Voice  
in Healthcare*

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**Mission Statement**

"The Section on General & Family Practice of Ontario is the authoritative voice dedicated to enhancing the value and well being of its members and the provision of excellence in health care for patients."

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|      |   |        |
|------|---|--------|
| A001 | Minor Assessment  | 20.00  |
| A007 | Intermediate Assessment                                       | 32.35  |
| A003 | General Assessment  | 68.75  |
| A004 | General Reassessment  | 33.50  |
| A003 | Annual Health Exam - Use Diagnostic Code 917                  | 68.75  |
| A903 | Preoperative Assessment                                       | 61.00  |
| A008 | Mini Assessment - Billed With WSIB Minor Assess.              | 10.25  |
| A888 | n o Emergency Dept Equivalent                                 | 30.85  |
| K017 | Annual Health Exam - Child > 2 Yrs Of Age                     | 36.95  |
| A002 | n o 18 Month Developmental Assessment                         | 61.00  |
| K005 | Primary Mental Health Care                                    | 55.05  |
| K007 | Psychotherapy   | 55.05  |
| K013 | Counselling Up To 3 Units/Year                                | 55.05  |
| K623 | n o Form 1-Application for Psychiatric Assessment             | 85.65  |
| K022 | n o HIV - Primary Care  | 55.05  |
| K037 | n o Chronic Fatigue/Fibromyalgia Care                         | 55.05  |
| K028 | n o STD, BBD Mgmt-Max 2 Unit/Pat/Doc/Day & 4 Units/Pat/Doc/Yr | 55.05  |
| K030 | n o Diabetic Management Assessment 4 Per Year                 | 37.00  |
| K033 | n o Counselling - When Billing More Than 3 Units/Yr           | 34.05  |
| K050 | n o MCFSC HSR & ADL Amalgamated Form                          | 100.00 |
| K051 | n o Health Status Report (HSR) Form                           | 80.00  |
| K052 | n o MCFSC Activities Of Daily Living (ADL) Index              | 20.00  |
| K053 | n o Ont Works Progr. - Limit. To Participation                | 15.00  |
| K054 | n o MCFSC Mandatory Spec. Necessities Ben. Form               | 25.00  |
| K055 | n o MCFSC Special Diet Application Form                       | 20.00  |
| A901 | n o House Call Ass (1st Patient)+ Premiums                    | 41.75  |
| A902 | n o Pronounce Death In Home + Premium                         | 41.75  |
| K023 | n o Pall. Care Support-Allowable With A945>50Min              | 55.05  |
| K070 | n o Home Care Application                                     | 29.30  |
| K071 | n o Acute Home Care Sup'N(1/2W*12W)                           | 19.95  |
| K072 | n o Chronic Home Care Sup'N 1/M>12W                           | 17.75  |
| K035 | n o MTO Mandatory Reporting Medical Condition                 | 34.85  |
| K036 | n o Northern Travel Grant Application                         | 10.25  |
| K038 | n o Long Term Care Application                                | 43.50  |
| E080 | n o First Post Hospital Premium-Within Two Weeks              | 25.00  |
| E079 | n o Smoking Cessation Premium                                 | 15.40  |
| K039 | n o Smoking Cessation Followup                                | 33.45  |
| Q150 | n o FOBT Distribution and Counselling                         | 7.00   |
| Q152 | n o FOBT Completion(see restrictions-see last page)           | 5.00   |

**HOSPITAL CARE**

|         |  |         |
|---------|--|---------|
| C933    | n o On-Call Admission Assessment                         | 79.20   |
| C122    | n o Most Responsible Physician Day 1                     | 55.45   |
| C123    | n o Most Responsible Physician Day 2                     | 55.45   |
| C124    | n o Most Responsible Physician Discharge Day             | 55.45   |
| E082    | Admission assessment by the MRP, to admission assessment | add 30% |
| ***E083 | Subsequent visit by the MRP, to subsequent visit         | add 30% |
| C002    | n o Hospital Care  | 29.20   |
| C010    | n o Supportive Care                                      | 17.75   |
| H001    | n o Newborn Care (In Hospital Or In Home)                | 52.20   |

**SURGICAL ASSISTS PER UNIT (X2 AFTER 1 HR)**

|       |   |     |
|-------|---|-----|
| E400B | n o Evenings Mon-Fri(5Pm To Mid.), Sat/Sun/Hol. | 50% |
| E401B | n o Nights - Midnight To 7Am.                   | 75% |

**OBSTETRICS**

|      |   |        |
|------|---|--------|
| P006 | n o Vaginal Delivery                          | 462.85 |
| P009 | n o Attend Lab&Delivery - C-Section           | 445.79 |
| P023 | n o Oxytocin Stimulation                      | 67.75  |
| P030 | n o Cervical Ripening (Max 1 Per Pregnancy)   | 58.60  |
| C989 | n o Sacrifice Office Hours                    | 72.70  |
| P007 | n o Postnatal Care Hospital                   | 55.15  |
| P008 | n o Postnatal Care Office                     | 32.35  |
| E409 | n o Prem Days (5-12Pm), 24 Hrs Sat.Sun ** 50% | 231.43 |
| E410 | n o Prem Nights Midnights-7 Am ** 75%         | 347.14 |
| E411 | n o Sole Del Premium ** 100%                  | 462.85 |
| P004 | n o Minor Prenatal Assessment                 | 32.35  |
| P003 | n o Major Prenatal                            | 68.75  |
| P005 | n o Antenatal Preventative Assessment         | 41.65  |

**LONG TERM CARE (LTC) ONLY**

|       |  |       |
|-------|--|-------|
| *W010 | n o Monthly Management Fee                   | 87.20 |
| W003  | n o First 2 visits per month                 | 22.55 |
| W008  | n o Additional 2 subsequent visits per month | 13.40 |
| W872  | n o Palliative Care visit -no limit          | 29.20 |

**CCC AND CONVALESCENT CARE IN LTC**

|      |  |       |
|------|--|-------|
| W002 | n o First 4 visits per month             | 29.20 |
| W001 | n o Additional Subsequent Visits-4/month | 13.40 |
| W882 | n o Palliative Care visit -no limit      | 29.20 |

> E542 may be charged with these fees  
+ add G700 to these fees if sole reason for visit  
n common fees outside the FHN basket  
o common fees outside the FHO basket

**LTC AND COMPLEX CONTINUING CARE**

|      |   |       |
|------|---|-------|
| W102 | n o Admission Assessment Type 1             | 68.75 |
| W107 | n o Admiss Assess Type 3.readmit from acute | 30.70 |
| W109 | n o Annual Physical Examination             | 61.00 |
| W903 | n o Preoperative examination (2 per year)   | 61.00 |
| K002 | n o Interview with authorized individual    | 55.05 |
| K032 | n o Neurocognitive Assessment               | 55.05 |
| W121 | n o Intercurrent illness additional visit   | 22.55 |
| W777 | n o Pronouncement of Death                  | 32.35 |
| W771 | n o Cert. of Death(other HP pronounced)     | 17.75 |
| K124 | n o LTC Case Conference/1/2 hr unit 2/yr    | 55.05 |

**OFFICE PROCEDURES**

|        |  |       |
|--------|--|-------|
| + G700 | n o Basic Fee                              | 5.10  |
| > E542 | n Office Premium (Tray Fee)                | 11.15 |
| > Z101 | Abscess, Haematoma I&D (One)               | 24.05 |
| > Z106 | n o Abscess, Ischiorectal/Pilonidal I&D    | 44.35 |
| G271   | Anticoag Supervision                       | 12.00 |
| G202   | Allergy Inj. (1 Or More) With Visit        | 4.10  |
| G212   | Allergy Injection Alone                    | 9.30  |
| Z113   | n Biopsy, Shave, Punch, Curette            | 29.60 |
| > Z116 | n Biopsy with Sutures                      | 29.60 |
| Z139   | n o Breast Cyst Aspiration                 | 30.00 |
| + G370 | n o Injection Bursa,Jnt,Gangl,Inj/Asp'N    | 19.90 |
| Z153   | n Dressing, Major                          | 14.05 |
| > Z770 | n o Endometrial Sampling                   | 29.05 |
| + G420 | n Ear Syringe, Curette                     | 11.25 |
| Z314   | n Epistaxis - Nasal Cauterization          | 11.50 |
| Z315   | n Epistaxis - Unil. Anterior Packing       | 15.35 |
| + G310 | n ECG Technical                            | 6.75  |
| G313   | n ECG Professional                         | 9.75  |
| G403   | n o Epley (BPV) Particle Repos             | 21.15 |
| > Z114 | n Foreign Body Removal                     | 23.30 |
| > Z104 | n o Haematoma, Perianal                    | 20.10 |
| G538   | Immun'n With Visit - Each Injection        | 4.10  |
| G539   | Immun'n Alone- 1St Injection               | 9.00  |
| G590   | o Flu Shot With Visit                      | 4.10  |
| G591   | o Flu Shot Alone                           | 9.00  |
| G372   | Injection With Visit                       | 2.90  |
| G373   | Injection-Sole Reason                      | 6.35  |
| + G375 | Intralesional Infil - 1 Or 2 Lesions       | 8.85  |
| + G377 | " " 3 Or More                              | 13.30 |
| G384   | Injection Trigger Point                    | 8.85  |
| G385   | " " Each Additional (2Max) Add             | 4.55  |
| > G378 | n I.U.D. Insertion                         | 25.50 |
| > R048 | n Malignant Lesion-Face-single,Simple Exc  | 92.15 |
| > R094 | n Malignant Lesion-Other-Single-Simple Exc | 58.15 |
| > Z128 | n Nail Resection                           | 30.30 |
| + G365 | n Pap (One Yearly)                         | 6.75  |
| + G394 | n o Pap:If Prev Abnormal/Inadequate        | 6.75  |
| E430   | n o Pap Smear Tray Fee                     | 11.15 |
| D012   | n o Pulled Elbow                           | 39.00 |
| > Z176 | n Suture                                   | 20.00 |
| > Z154 | n Suture: Face, Layers, Bleeders           | 35.90 |
| Z543   | n Proctoscopy                              | 6.25  |
| Z117   | n Chem Rx Wart(Plantar,Genital)            | 11.05 |
| + G480 | n o Venipuncture-Infant <2 Yrs Of Age      | 9.25  |
| + G482 | n Child 2-15                               | 7.00  |
| + G489 | n Adult 16+                                | 2.90  |

**LABORATORY IN GP'S OFFICES**

|      |                |      |
|------|----------------|------|
| G010 | Urinalysis     | 1.86 |
| G002 | Glucose        | 2.01 |
| G012 | Wet Prep       | 1.86 |
| G004 | Stool For O.B. | 1.52 |
| G005 | Pregnancy Test | 3.88 |
| G014 | Rapid Strep    | 4.60 |

**Pulmonary Function**

|      |  |       |
|------|--|-------|
| J301 | n Simple Spirometry-\$7.85P,\$9.55T              | 17.40 |
| J324 | n --Repeat After Bronchodilator-\$4.20P,2.88T    | 7.08  |
| J304 | n Flow Volume Loop-\$10.25P, \$19.05T            | 29.30 |
| J327 | n -- Repeat After Bronchodilator-\$6.05P,\$2.88T | 8.93  |

Changes introduced since October 2008 are highlighted in red.

\*If you are billing the W010 monthly LTC code, the followingservices are included in the code and may not be billed as separate services: W003; W008; W121; W872; W102; W104; W107; W903; W109; W004; W777; W771; G271; K070; K071; K072; G489; G372; G373; G538; G539; G590; G591; G365; G394; E430; G379; G001; G002; G481; G003; G004; G005; G006; G007; G008; G009; G010; G011; G012 & G014

\*\*Dollar Value Calculated For P006

\*\*\*E083 applies to C122, C123, C124, C142, C143, C882 or C982

## Special Visit Premiums

|   |   |       | Maximum Patients | Maximum Travel | Additional Patient              | Travel Premium |
|---|---|-------|------------------|----------------|---------------------------------|----------------|
| <b>HOME VISIT PREMIUMS</b>  |   |       |                  |                |                                 |                |
|   |   |       |                  |                | <b>ADD TRAVEL PREMIUM 36.40</b> |                |
| B990  | n | 18.20 | 10               | 2              | visit fee                       | <b>B960</b>    |
| B992  | n | 36.30 | 10               | 2              | visit fee                       | <b>B961</b>    |
| B994  | n | 54.55 | 10               | 2              | visit fee                       | <b>B962</b>    |
| B993  | n | 56.25 | 20               | 6              | visit fee                       | <b>B963</b>    |
| B996  | n | 81.85 | no limit         | no limit       | visit fee                       | <b>B964</b>    |
| B997  | n | 81.85 | no limit         | no limit       | no limit                        | <b>B966</b>    |
| B998  | n | 61.90 | no limit         | no limit       | no limit                        | <b>B966</b>    |
| <b>OFFICE VISIT PREMIUM</b>   |   |       |                  |                |                                 |                |
|   |   |       |                  |                | <b>ADD TRAVEL PREMIUM 36.40</b> |                |
| A990  |   | 18.20 | 1                | 1              | visit fee                       | <b>A960</b>    |
| A994  |   | 54.55 | 1                | 1              | visit fee                       | <b>A962</b>    |
| A998  |   | 56.25 | 1                | 1              | visit fee                       | <b>A963</b>    |
| A996  |   | 81.85 | no limit         | no limit       |                                 | <b>A964</b>    |
| <b>HOSP PREM C=HOSP,K=ER,U=OPD,W=LTC - Substitute Appropriate Site Prefix for "C"</b> |   |       |                  |                |                                 |                |
|   |   |       |                  |                | <b>ADD TRAVEL PREMIUM 36.40</b> |                |
| C990  | n | 18.20 | 10               | 2              | C991                            | <b>C960</b>    |
| C992  | n | 36.30 | 10               | 2              | C993                            | <b>C961</b>    |
| C994  | n | 54.55 | 10               | 2              | C995                            | <b>C962</b>    |
| C998  | n | 56.25 | 20               | 6              | C999                            | <b>C963</b>    |
| C996  | n | 81.85 | no limit         | no limit       | C997                            | <b>C964</b>    |

## Emergency Room Codes

### ER D=DAY W=HOLI&WK'ND E=EVE N=NIGHT

|        |   |   |              |
|--------|---|---|--------------|
| A100   | n | Family Physician Er Department Ass                | 76.90        |
| D H102 | n | Comprehensive Assessment                          | 37.20        |
| H103   | n | Multiple Systems Assessment                       | <b>34.60</b> |
| H101   | n | Minor Assessment                                  | 15.00        |
| H104   | n | Reassess  | 15.00        |
| W H152 | n | Comprehensive Assessment                          | 63.30        |
| H153   | n | Multiple Systems Assessment                       | <b>55.85</b> |
| H151   | n | Minor Assessment                                  | 25.50        |
| H154   | n | Reassess  | 25.50        |
| E H132 | n | Comprehensive Assessment                          | 46.30        |
| H133   | n | Multiple Systems Assessment                       | <b>41.60</b> |
| H131   | n | Minor Assessment                                  | 18.70        |
| H134   | n | Re-Assessment                                     | 18.70        |
| H105   | n | Inpatient Interim Orders                          | 21.00        |
| N H122 | n | Comprehensive Assessment                          | 73.90        |
| H123   | n | Multiple Systems Assessment                       | <b>64.65</b> |
| H121   | n | Minor Assessment                                  | 29.80        |
| H124   | n | Reassess  | 29.80        |
| G521   | n | Life threatening emergency situation-first 1/4 hr | <b>98.70</b> |
| G523   | n | Life threatening emergency situation-2nd 1/4 hr   | <b>49.30</b> |
| G522   | n | “ “ “ after 1st half hour per 1/4 hr              | <b>32.45</b> |
| G395   | n | Other resuscitation-first 1/4 hour                | <b>50.70</b> |
| G391   | n | Other resuscitation-after first 1/4 hour          | <b>25.30</b> |

n common fees outside the FHN basket  
o common fees outside the FHO basket

Changes introduced since October 2008 are highlighted in red.

## Diagnostic Codes

|                        |     |
|------------------------|-----|
| Abdominal Pain         | 787 |
| Abortion (incomplete)  | 634 |
| Abortion(Therapeutic)  | 640 |
| Abortion(Threatened)   | 640 |
| Abrasions, Contusions  | 919 |
| Abscess(Skin)          | 685 |
| Acne                   | 706 |
| Adenitis               | 289 |
| Adjustment reaction    | 309 |
| Adverse Drug Reaction  | 977 |
| AIDS                   | 042 |
| Alcoholism             | 303 |
| Alopecia               | 704 |
| Amenorrhea             | 626 |
| Anemia (aplastic)      | 284 |
| Anemia (Iron Defic)    | 280 |
| Anemia (Pernicious)    | 281 |
| Angina                 | 413 |
| Ankle Strain           | 845 |
| Anorexia               | 787 |
| Anxiety                | 300 |
| Appendicitis           | 540 |
| Apthous Ulcer          | 528 |
| Arrythmia              | 427 |
| Arteriosclerosis       | 440 |
| ArteritisTemporal      | 441 |
| Arthritis(Osteo)       | 715 |
| Arthritis(Rheumatoid)  | 714 |
| ASHD                   | 412 |
| Asthma                 | 493 |
| Astigmatism            | 367 |
| Ataxia                 | 780 |
| Athletes foot          | 110 |
| Back Pain              | 847 |
| Bakers Cyst            | 739 |
| Balanitis              | 608 |
| Basal Cell Ca          | 173 |
| Behaviour Disorder     | 313 |
| Biliary Colic          | 574 |
| Birth Control          | 895 |
| Bite (Animal)          | 919 |
| Bite (Insect)          | 959 |
| Bleeding (Post Menop)  | 627 |
| Bleeding (rectal)      | 569 |
| Blepharitis            | 373 |
| Blocked Tear Duct      | 375 |
| Boil                   | 680 |
| BPH                    | 600 |
| Breast Abscess         | 611 |
| Breast Cancer          | 175 |
| Breast Disorder        | 611 |
| Breast Lump(benign)    | 217 |
| Bronchitis (chronic)   | 491 |
| Bronchitis Acute       | 466 |
| Bunions                | 727 |
| Burns                  | 949 |
| Bursitis               | 727 |
| Calculus (biliary)     | 576 |
| Cancer Cervix          | 180 |
| Cancer Prostate        | 185 |
| Cancer Uterus          | 182 |
| Candidiasis            | 112 |
| Cardiac Arrest         | 427 |
| Carpal Tunnel Syndrome | 739 |
| Cataracts              | 366 |
| Cellulitis             | 682 |
| Cervical Disc Disease  | 847 |

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## Diagnostic Codes

|                          |     |                      |     |                        |     |                         |     |                      |     |
|--------------------------|-----|----------------------|-----|------------------------|-----|-------------------------|-----|----------------------|-----|
| Cervical Erosion/dysplas | 622 | Fissure in ano       | 565 | Insect Bite            | 919 | PAT                     | 427 | Strabismus           | 378 |
| Cervicitis               | 622 | Flatfeet             | 734 | Insomnia               | 307 | Pediculosis             | 132 | Strep Throat         | 034 |
| Chalazion                | 373 | Flu                  | 487 | Intertrigo             | 695 | Pelvic Inflammatory Dis | 614 | Stress incontinence  | 625 |
| Chest Pain               | 785 | Food Poisoning       | 005 | Iritis                 | 364 | Peripheral Vascular Dis | 443 | Stroke               | 436 |
| Chicken Pox              | 052 | Foreign Body         | 930 | Irritable Colon        | 564 | Personality disorder    | 301 | Stye                 | 373 |
| Chlamydia                | 099 | Fractured Finger     | 816 | Jaundice               | 787 | Pharyngitis             | 460 | Sunburn              | 691 |
| Cholelithiasis           | 574 | Frequency            | 788 | Joint Pain             | 781 | Phimosis                | 605 | Syncope              | 785 |
| Cirrhosis                | 571 | Frostbite            | 944 | Keloid                 | 701 | Phlebitis               | 451 | Tachycardia          | 427 |
| Coccydynia               | 774 | Frozen Shoulder      | 729 | Keratitis              | 370 | Pilonidal Abscess       | 682 | TB test, conversion  | 010 |
| Colon Cancer             | 153 | Fungal Infection     | 117 | Keratosis              | 701 | Pinworms                | 127 | Tendonitis           | 727 |
| Concussion               | 850 | Furunculosis         | 680 | Kidney Stone           | 592 | Pleurisy                | 511 | Tennis elbow         | 739 |
| Condylomata              | 629 | Gall Stone           | 574 | Knee Pain              | 844 | Pneumonia               | 486 | Tenosynovitis        | 727 |
| Congestive Heart Failure | 428 | Ganglion             | 727 | Labyrinthitis          | 386 | Poison Ivy, Oak         | 692 | Tension Headache     | 307 |
| Conjunctivitis           | 372 | Gangrene             | 442 | Laceration Lower       | 894 | Poliomyelitis           | 045 | Threatened Abortion  | 640 |
| Constipation             | 564 | Gastric Ulcer        | 531 | Laceration Other       | 879 | Pregnancy (ectopic)     | 633 | Thrush               | 112 |
| Contraception            | 895 | Gastritis            | 535 | Laceration Upper       | 884 | Pregnancy (normal)      | 650 | Thyroiditis          | 245 |
| Contusion                | 919 | Gastroenteritis      | 009 | Laryngitis             | 464 | Prolapse Uterus         | 621 | Thyrototoxicosis     | 242 |
| COPD                     | 491 | Gastrointestinal     | 787 | Leg Cramps             | 781 | Prostate Cancer         | 185 | Tinnitus             | 388 |
| Corneal Ulcer            | 370 | Gingivitis           | 523 | Legal Problems         | 906 | Prostate Hypertrophy    | 600 | TIA                  | 435 |
| Cough                    | 786 | Glaucoma             | 365 | Leukorrhea             | 629 | Prostatitis             | 601 | Tonsillitis          | 463 |
| Corns, Calluses          | 700 | Glossitis            | 529 | Lipoma                 | 214 | Pruritus                | 698 | Toothache            | 525 |
| Coronary Artery Disease  | 412 | Goitre               | 240 | Liver Disease (other)  | 573 | Psoriasis               | 696 | Torticollis          | 739 |
| Crohn's disease          | 555 | Gout                 | 274 | Low Back Pain          | 724 | Pulmonary embolism      | 459 | Tracheitis           | 464 |
| Croup                    | 464 | Grief Reaction       | 300 | Lupus                  | 695 | Pylonephritis           | 590 | Trichomonas          | 131 |
| CVA                      | 436 | Gynecomastia         | 611 | Lymphangitis           | 457 | Pyrexia                 | 796 | Trigger Finger       | 727 |
| Cystitis                 | 595 | Hair Loss            | 704 | Malaise                | 799 | Pyuria                  | 599 | Ulcer (duodenal)     | 532 |
| Cystocoele               | 618 | Hallux Valgus        | 735 | Marital Problems       | 898 | Rash                    | 691 | Ulcer (Gastric)      | 531 |
| Deafness                 | 389 | Head Injury          | 854 | Mastitis (Abscess)     | 611 | Raynaud's Phenomenon    | 443 | Undescended testicle | 608 |
| Dementia                 | 290 | Headache NYD         | 780 | Mastitis (Cystic)      | 610 | Rectal Bleeding         | 569 | URI                  | 460 |
| Dental Abscess           | 525 | Headache(Migraine)   | 346 | Measles                | 055 | Reflux Esophagitis      | 530 | Uremia               | 585 |
| Dental Caries            | 521 | Headache(Tension)    | 307 | Melena                 | 787 | Renal Calculi           | 592 | Urethral Stricture   | 598 |
| Depression               | 311 | Heart Failure        | 428 | Meniscal tear          | 718 | Renal Colic             | 788 | Urethritis           | 597 |
| Dermatitis (Contact)     | 692 | Heart Murmur         | 429 | Menopause              | 627 | Renal Failure           | 584 | Urinary Infection    | 599 |
| Dermatitis (Seborrhea)   | 690 | Heartburn            | 787 | Menorrhagia            | 626 | Rheumatoid Arthritis    | 714 | Urticaria            | 708 |
| Deviated Nasal Septum    | 470 | Hemangioma           | 228 | Menstrual Disorder     | 626 | Rhinitis                | 477 | Ulcerative Colitis   | 556 |
| Diabetes                 | 250 | Hematoma             | 959 | Mental Retardation     | 319 | Ringworm (scalp, beard) | 110 | Umbilical Hernia     | 553 |
| Diaper Rash              | 692 | Hematuria            | 599 | Migraine               | 346 | Ringworm(other)         | 117 | Unemployment         | 905 |
| Diarrhea                 | 009 | Hemiplegia           | 349 | Miscarriage            | 634 | Rosacea                 | 695 | Vaginal Bleeding     | 626 |
| Disc Disease             | 722 | Hemoptysis           | 786 | Mitral Valve Prolapse  | 429 | Rubella                 | 056 | Vaginitis            | 616 |
| Diverticulitis           | 562 | Hemorrhoids          | 455 | Mole                   | 216 | Scabies                 | 133 | Varicose Vein, ulcer | 454 |
| Divorce                  | 901 | Hepatitis            | 070 | Mononucleosis          | 075 | Scarring                | 709 | Vasovagal attack     | 780 |
| Dizziness                | 780 | Hernia (Inguinal)    | 550 | Multiple Sclerosis     | 340 | Schizophrenia           | 295 | Venereal Disease     | 099 |
| Drug Dependence          | 304 | Hernia(other)        | 553 | Mumps                  | 072 | Sciatica                | 724 | Vertigo              | 780 |
| Drug Reaction            | 977 | Herpes Genitalis     | 099 | Muscle Spasm           | 728 | Scoliosis               | 737 | Viral illness        | 079 |
| DVT                      | 451 | Herpes Simplex       | 054 | Nausea or Vomiting     | 787 | Sebacaceous Cyst        | 706 | Viral Rash           | 057 |
| Dysmenorrhea             | 625 | HIV                  | 279 | Nephritis              | 580 | Seborrhea               | 690 | Vomiting             | 787 |
| Dyspareunia              | 625 | Hives                | 708 | Neuralgia (Trigeminal) | 350 | Seizure Disorder        | 345 | Vulvitis             | 616 |
| Dyspepsia                | 536 | Hydrocele            | 603 | Neuritis               | 356 | Senility                | 797 | Warts                | 078 |
| Dysphagia                | 787 | Hyperactivity        | 314 | Nevus                  | 216 | Sexual Dysfunction      | 306 | Wax                  | 388 |
| Dyspnea                  | 786 | Hernia (Inguinal)    | 550 | Nevus (Pigmented)      | 709 | Shingles                | 053 | Weight Loss          | 796 |
| Eczema                   | 691 | Hypercholesterolemia | 272 | Nosebleed              | 786 | Shortness of Breath     | 786 | Well Baby Visit      | 916 |
| Edema                    | 785 | Hyperemesis          | 643 | Obesity                | 278 | Sickle Cell             | 282 | Whiplash             | 847 |
| Emphysema                | 492 | Hypertension         | 401 | Occupational Problem   | 905 | Sinusitis               | 461 | Whooping Cough       | 033 |
| Endometriosis            | 617 | Hypertensive Heart   | 402 | Oral Ulcers            | 528 | Sinusitis (acute)       | 461 | Wound Infection      | 998 |
| Enuresis                 | 307 | Hypothyroid          | 242 | Osteoarthritis         | 715 | Sinusitis (chronic)     | 473 | Wry Neck             | 733 |
| Epididymo-orchitis       | 604 | Hyperventilation     | 786 | Osteomyelitis          | 730 | Sleep Disorder          | 307 | Yeast Vaginitis      | 616 |
| Epilepsy                 | 345 | Hypothyroid          | 244 | Osteoporosis           | 733 | Smoking Cessation       | 491 |                      |     |
| Epistaxis                | 786 | Hysteria             | 300 | Otitis Externa         | 380 | Social Maladjustment    | 904 |                      |     |
| Esophagitis              | 530 | Immunization         | 896 | Otitis Media           | 381 | Sprain (Foot, ankle)    | 845 |                      |     |
| Exhaustion               | 796 | Impetigo             | 684 | Ovarian Cyst           | 220 | Sprain (Leg, Knee)      | 844 |                      |     |
| Failure to Thrive        | 799 | Impotence            | 306 | Overdose               | 977 | Sprain (lumbar)         | 724 |                      |     |
| Family Planning          | 895 | Incontinence         | 599 | Pain (chest)           | 785 | Sprain (Neck)           | 847 |                      |     |
| Fatigue                  | 796 | Indigestion          | 536 | Pain(joint,leg,muscle) | 781 | Sprain(Shoulder)        | 840 |                      |     |
| Feeding Problem(Infant)  | 799 | Infertility (Female) | 628 | Pancreatitis           | 577 | Sprain (Wrist)          | 842 |                      |     |
| Fever                    | 796 | Infertility(male)    | 606 | Parkinson's            | 332 | Sprain, Strain (Other)  | 848 |                      |     |
| Fibroids                 | 218 | Influenza            | 487 | Paronychia             | 686 | STD                     | 099 |                      |     |
| Fibrositis               | 729 | Ingrown Toe Nail     | 703 |                        |     | Stomatitis              | 528 |                      |     |

## Patient Enrolled Models Q Codes

Updated to include changes implemented *since* **October 2008**

### Commonly Billed Q Codes

#### CCM,FHG,FHN & FHO (all models):

|   |                 |
|---|-----------------|
| Q200A Enrollment Fee (first year only)                          | \$5.00          |
| Q013A New patient premium max 55/year                           | \$100-\$180*    |
| Q023A Unattached pt. fee, from hospital, no max                 | \$150           |
| Q033A New Grad. New pt. fee (max 300,first year only)           | \$100-\$180*    |
| Q040A Diabetes Management incentive - Annual Flow Sheet         | \$75/yr         |
| Q042A Smoking Cessation Counselling Fee                         | \$7.50          |
| Q043A New Pt. fee FOBT +/-Colorectal increased risk             | \$150-230**     |
| <b>Q053A HCC Complex vulnerable new patient***</b>              | <b>\$350.00</b> |
| <b>Q054A Unattached mother/newborn (&lt;2 weeks from birth)</b> | <b>\$350.00</b> |
| <b>Q055A Unattached newborn,multiple births, each baby</b>      | <b>\$150.00</b> |
| Q150A FOBT Distribution and Counselling Fee                     | \$7             |
| Q050A Heart Failure Management Incentive                        | \$125           |

#### FHG, FHN and FHO only:

##### Primary Care Serious Mental illness

|  |            |
|--|------------|
| Q020A - Bi-polar Diagnostic Code 295 - Schizophrenia |            |
| 5-9 patients - \$1000/yr 10+ patients - \$2000/yr    |            |
| <b>Q012A After 5pm,W/E, holiday add-on</b>           | <b>20%</b> |

#### FHN and FHO automated claims:

|                  |             |
|------------------|-------------|
| Q555A Mainpro C  | \$25/15 min |
| Q556A Mainpro M1 | \$25/15 min |
| Q557A Other      | \$25/15 min |

Note: CME in 15 min increments.

#### FHN only:

|   |         |
|---|---------|
| Q014A Newborn Episodic Care (<1year old, max 8) | \$15.05 |
|---|---------|

#### FHO only:

|   |         |
|---|---------|
| Q015A Newborn Episodic Care (<1year old, max 8) | \$13.99 |
|---|---------|

#### FHG only:

FHGs-10% premium automatically added to A001, A003, A007,A008,A888,A901,A902,C010,C882,G365,G538, G539,G590,G591,K005,K017,K022,K023,K030

#### CCM only:

|  |            |
|--|------------|
| <b>Q016A After 5pm, W/E holiday add-on</b> | <b>20%</b> |
|--|------------|

#### Q012 (FHG, FHN, FHO) and Q016 (CCM) apply to:

**A001A,A003A,A004A,A007A,A008A,A888A, K005A,K013A,K030A.K017A, K030 & Q040.**

#### \*Q013A & Q033A

New patients over 75 - \$180  
New patients over 64 - \$120  
Patients up to 64 - \$100

#### \*\*Q043A

Patients 75 years and over - \$230  
Patients over 64 - \$170  
Patients up to 64 - \$150

#### \*\*\*Q053

**Same payment regardless of age**  
**Requires patient be registered with Health Care Connect**  
**No maximum number**

### Preventive Care Tracking Codes

(Enrolled Patients Only)

|                                  |
|----------------------------------|
| Q130A Influenza Vaccine over 65  |
| Q011A Pap 35-69                  |
| Q131A Mammogram 50-69            |
| Q132A Immunization 18-24 Months  |
| Q133A Colorectal Screening 50-74 |

#### Exclusion Code:

(Improves efficiency when calculating yearly bonus payments)

|                                  |
|----------------------------------|
| Q140A Pap 35-69                  |
| Q141A Mammogram 50-69            |
| Q142A Colorectal Screening 50-74 |

### Preventive Care Management Fees

FHN and FHO only

For billing rules go to:

<http://www.oma.org/PC/fhn/FHNGeneralBlendedTemplatev02.01.pdf>

|  |        |
|--|--------|
| Q001A Pap smear                              | \$6.86 |
| Q002A Mammogram                              | \$6.86 |
| Q003A Influenza vaccine (>65 years).         | \$6.86 |
| Q004A Childhood immunizations (18-24 months) | \$6.86 |
| <b>FHN, FHO, FHG &amp; CCM</b>               |        |
| Q005A Colorectal Screening 50-74             | \$6.86 |

### Preventive Care Service Enhancement Fees

#### FHN, FHO, FHG & CCM

Paid annually based on percentage of enrolled patients serviced

##### Influenza vaccine

|           |            |
|-----------|------------|
| Q100A 60% | \$220.00   |
| Q101A 65% | \$440.00   |
| Q102A 70% | \$770.00   |
| Q103A 75% | \$1,100.00 |
| Q104A 80% | \$2,200.00 |

##### Pap Smear

|           |            |
|-----------|------------|
| Q105A 60% | \$220.00   |
| Q106A 65% | \$440.00   |
| Q107A 70% | \$660.00   |
| Q108A 75% | \$1,320.00 |
| Q109A 80% | \$2,200.00 |

##### Mammogram

|           |            |
|-----------|------------|
| Q110A 55% | \$220.00   |
| Q111A 60% | \$440.00   |
| Q112A 65% | \$770.00   |
| Q113A 70% | \$1,320.00 |
| Q114A 75% | \$2,200.00 |

##### Childhood Immunizations

|           |            |
|-----------|------------|
| Q115A 85% | \$440.00   |
| Q116A 90% | \$1,100.00 |
| Q117A 95% | \$2,200.00 |

##### Colorectal Screening

|           |            |
|-----------|------------|
| Q118A 15% | \$220.00   |
| Q119A 20% | \$440.00   |
| Q120A 40% | \$1,100.00 |
| Q121A 50% | \$2,200.00 |
| Q122A 60% | \$3,300.00 |
| Q123A 70% | \$4,000.00 |

**APPLIES TO FFS OR PATIENT ENROLLED MODEL WITH LESS THAN MAXIMUM ROSTER SIZE as per Q152 on front page**

|                          |     |
|--------------------------|-----|
| Q152 FOBT completion fee | \$5 |
|--------------------------|-----|

For further information on CCMs, FHGs, FHNs and FHOs, you may access the OMA Primary Care Renewal Tutorials at

<http://www.oma.org/cybermed/online/pcr/>

or contact your Primary Health Care Team Ministry Site

at 1-866-766-0266

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