



Section on General & Family Practice

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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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Most Commonly Billed Family Doctor Fees (as of January 1, 2007)

A001	Minor Assessment	17.75	+ G700	n o Basic Fee	5.10
A007	Intermediate Assessment	30.95	> E542	n Office Premium (Tray Fee)	11.15
A003	General Assessment	61.00	> Z101	Abscess, Haematoma I&D (One)	20.10
A004	General Reassessment	30.70	> Z106	n o Abscess, Ischioirectal/Pilonidal I&D	44.35
A003	Annual Health Exam - Use Diagnostic Code 917	61.00	G271	Anticoag Supervision	10.60
A903	Preoperative Assessment	61.00	G202	Allergy Inj. (1 Or More) With Visit	3.83
A008	Mini Assessment - Billed With WSIB Minor Assess.	10.25	G212	Allergy Injection Alone	8.95
A888	n o Emergency Dept Equivalent	28.55	Z139	n o Breast Cyst Aspiration	25.15
A945	n o Spec. Palliative Care Consult.	127.50	+ G370	n Injection Bursa,Jnt,Gangl,Inj/Asp'N	19.90
K017	Annual Health Exam - Child > 2 Yrs Of Age	30.40	Z153	n Dressing, Major	14.05
K005	Primary Mental Health Care	51.70	Z770	n o Endometrial Sampling	29.05
K007	Psychotherapy	51.70	+ G420	Ear Syringe, Curette	11.25
K013	Counselling Up To 3 Units/Year	51.70	Z314	n Epistaxis - Nasal Cauterization	11.50
K022	n o HIV - Primary Care	51.70	Z315	n Epistaxis - Unil. Anterior Packing	15.35
K037	n o Chronic Fatigue/Fibromyalgia Care	51.70	+ G310	n ECG Technical	6.75
K028	n o STD, BBD Mgmt-Max 2 Unit/Pat/Doc/Day & 4 Units/Pat/Doc/Yr	51.70	G313	n ECG Professional	9.75
K030	n o Diabetic Management Assessment	36.00	G403	n o Epley (BPV) Particle Repos	21.15
K033	n o Counselling - When Billing More Than 3 Units/Yr	30.95	> Z114	n o Foreign Body Removal	18.80
K041	n o Grp Counselling Over 3 Units/Yr	30.95	> Z104	n o Haematoma, Perianal	20.10
K050	n o MCFSC HSR & ADL Amalgamated Form	100.00	G538	Immun'n With Visit - Each Injection	3.83
K051	n o Health Status Report (HSR) Form	80.00	G539	Immun'n Alone- 1St Injection	8.65
K052	n o MCFSC Activities Of Daily Living (ADL) Index	20.00	G590	n o Flu Shot With Visit	3.83
K053	n o Ont Works Progr. - Limit. To Participation	15.00	G591	o Flu Shot Alone	8.65
K054	n o MCFSC Mandatory Spec. Necessities Ben. Form	25.00	G372	Injection With Visit	2.32
K055	n o MCFSC Special Diet Application Form	20.00	G373	Injection-Sole Reason	5.30
A901	n House Call Ass (1st Patient)+ Premiums	41.75	+ G375	Intralesional Infil -1 Or 2 Lesions	8.85
A902	n o Pronounce Death In Home + Premium	41.75	+ G377	" " 3 Or More	13.30
K023	n o Pall. Care Support-Allowable With A945>50Min	51.70	G384	Injection Trigger Point	8.85
K070	n o Home Care Application	17.45	G385	" " Each Additional (2Max) Add	4.55
K071	n o Acute Home Care Sup'N(1/2W*12W)	10.95	> G378	n o I.U.D. Insertion	25.50
K072	n o Chronic Home Care Sup'N 1/M>12W	10.95	> Z128	n Nail Resection	23.80
K035	n o MTO Mandatory Reporting Medical Condition	34.85	+ G365	Pap (One Yearly)	6.75
K036	n o Northern Travel Grant Application	10.25	+ G394	n o Pap/If Prev Abnormal/Inadequate	6.75
E080	n o First Post Hospital Premium-Within Two Weeks	25.00	E430	n o Pap Smear Tray Fee	11.15
HOME PREMIUM VISITS					
B990	n Daytime Mon-Fri - 7Am To 5 Pm	20.90	D012	n o Pulled Elbow	39.00
B992	n Sacrifice Office Hours	41.75	> Z176	Suture	14.80
B994	n Evenings Mon-Fri, 24 Hrs Sat Sun	63.80	> Z154	n Suture: Face, Layers, Bleeders	35.90
B996	n Midnight To 7Am Every Day	95.80	Z543	n Proctoscopy	6.25
B998	n o Special Visit Palliative Care Patient	63.80	Z535	n Sigmoid (Add E746 Outs. Hosp \$5.85)	36.80
OFFICE VISIT PREMIUM					
A990	Day (0700-1700) Mon-Fri	18.20	G435	n Tonometry	5.10
A994	Evenings Mon-Fr, 24 Hrs Sat-Sun	54.55	Z117	n Chem Rx Wart(Plantar,Genital)	11.05
A996	Night (0000-0700) Every Day	81.85	+ G480	n o Venipuncture-Infant <2 Yrs Of Age	9.25
HOSP VISIT PREMS. PREFIX C=HOSP, K=ER, U=OPD					
C990	n o Day (0700-1700) Mon-Fri	18.20	+ G482	Child 2-15	6.25
C991	n o Add Prem 30% Max=18.20 Min=	10.35	+ G489	Adult 16+	2.32
C992	n o Sacrifice Office Hours	36.30	LABORATORY IN GP'S OFFICE		
C993	n o Ad'TI Patient Prem 30% Max=36.30, Min=	15.55	G010	Urinalysis	1.86
C994	n o Evenings Mon-Fri, 24 Hrs Sat-Sun	54.55	G002	Glucose	2.01
C995	n o Ad'TI Patient Prem 45% Max=54.55 Min=	27.30	G481	Hemoglobin	1.32
C996	n o Midnights To 7Am	81.85	G012	Wet Prep	1.86
C997	n o Ad'TI Prem 75% Max=81.85 Min=	40.95	G004	Stool For O.B.	1.52
HOSPITAL CARE					
C933	n o On-Call Admission Assessment	79.20	G005	Pregnancy Test	3.88
C122	n o Most Responsible Physician Day 1	55.45	G014	Rapid Strep	4.60
C123	n o Most Responsible Physician Day 2	55.45	ER D=DAY W=HOLI&WK'ND E=EVE N=NIGHT		
C124	n o Most Responsible Physician Discharge Day	55.45	A100	n o Family Physician Er Department Ass	76.90
C002	n o Hospital Care	29.20	D H102	n o Comprehensive Assessment	37.20
C010	n o Supportive Care	17.75	H103	n o Multiple Systems Assessment	32.25
H001	n o Newborn Care (In Hospital Or In Home)	52.20	H101	n o Minor Assessment	15.00
SURGICAL ASSISTS PER UNIT (X2 AFTER 1 HR.)					
E400B	n o Evenings Mon-Fri(5Pm To Mid.), Sat/Sun/Hol.	50%	H104	n o Reassess	15.00
E401B	n o Nights - Midnight To 7Am.	75%	W H152	n o Comprehensive Assessment	55.80
OBSTETRICS					
P006	n o Vaginal Delivery	395.75	H153	n o Multiple Systems Assessment	47.40
P009	n o Attend Lab&Delivery - C-Section	395.75	H151	n o Minor Assessment	22.50
P023	n o Oxytocin Stimulation	67.75	H154	n o Reassess	22.50
P030	n o Cervical Ripening (Max 1 Per Pregnancy)	58.60	E H132	n o Comprehensive Assessment	40.90
C989	n o Sacrifice Office Hours	36.30	H133	n o Multiple Systems Assessment	35.30
P007	n o Postnatal Care Hospital	55.15	H131	n o Minor Assessment	16.45
P008	n o Postnatal Care Office	30.95	H134	n o Re-Assessment	16.45
E409	n o Prem Days (5-12Pm), 24 Hrs Sat.Sun ** 50%	197.88	H105	n o Inpatient Interim Orders	18.45
E410	n o Prem Nights Midnights-7 Am ** 75%	296.81	N H122	n o Comprehensive Assessment	65.10
E411	n o Sole Del Premium ** 100%	395.75	H123	n o Multiple Systems Assessment	54.95
P004	n o Minor Prenatal Assessment	29.20	H121	n o Minor Assessment	26.25
P003	n o Major Prenatal	61.00	H124	n o Reassess	26.25
P005	n o Antenatal Preventative Assessment	41.65	J301	n Simple Spirometry-\$7.50P,\$9.55T	17.05
**Dollar Value Calculated For P006,P009					

> 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

Diagnostic Codes

Abdominal Pain	787	Cervical Erosion/dysplas	622	Fissure in ano	565
Abortion (incomplete)	634	Cervicitis	622	Flatfeet	734
Abortion(Therapeutic)	640	Chalazion	373	Flu	487
Abortion(Threatened)	640	Chest Pain	785	Food Poisoning	005
Abrasions, Contusions	919	Chicken Pox	052	Foreign Body	930
Abscess(Skin)	685	Chlamydia	099	Fractured Finger	816
Acne	706	Cholelithiasis	574	Frequency	788
Adenitis	289	Cirrhosis	571	Frostbite	944
Adjustment reaction	309	Coccydynia	774	Frozen Shoulder	729
Adverse Drug Reaction	977	Colon Cancer	153	Fungal Infection	117
AIDS	042	Concussion	850	Furunculosis	680
Alcoholism	303	Condylomata	629	Gall Stone	574
Alopecia	704	Congestive Heart Failure	428	Ganglion	727
Amenorrhea	626	Conjunctivitis	372	Gangrene	442
Anemia (aplastic)	284	Constipation	564	Gastric Ulcer	531
Anemia (Iron Defic)	280	Contraception	895	Gastritis	535
Anemia (Pernicious)	281	Contusion	919	Gastroenteritis	009
Angina	413	COPD	491	Gastrointestinal	787
Ankle Strain	845	Corneal Ulcer	370	Gingivitis	523
Anorexia	787	Cough	786	Glaucoma	365
Anxiety	300	Corns, Calluses	700	Glossitis	529
Appendicitis	540	Coronary Artery Disease	412	Goitre	240
Apthous Ulcer	528	Crohn's disease	555	Gout	274
Arrythmia	427	Croup	464	Grief Reaction	300
Arteriosclerosis	440	CVA	436	Gynecomastia	611
ArteritisTemporal	441	Cystitis	595	Hair Loss	704
Arthritis(Osteo)	715	Cystocoele	618	Hallux Valgus	735
Arthritis(Rheumatoid)	714	Deafness	389	Head Injury	854
ASHD	412	Dementia	290	Headache NYD	780
Asthma	493	Dental Abscess	525	Headache(Migraine)	346
Astigmatism	367	Dental Caries	521	Headache(Tension)	307
Ataxia	780	Depression	300	Heart Failure	428
Athletes foot	110	Dermatitis (Contact)	692	Heart Murmur	429
Back Pain	847	Dermatitis (Seborrhea)	690	Heartburn	787
Bakers Cyst	739	Deviated Nasal Septum	470	Hemangioma	228
Balanitis	608	Diabetes	250	Hematoma	959
Basal Cell Ca	173	Diaper Rash	692	Hematuria	599
Behaviour Disorder	313	Diarrhea	009	Hemiplegia	349
Biliary Colic	574	Disc Disease	722	Hemoptysis	786
Birth Control	895	Diverticulitis	562	Hemorrhoids	455
Bite (Animal)	919	Divorce	901	Hepatitis	070
Bite (Insect)	959	Dizziness	780	Hernia (Inguinal)	550
Bleeding (Post Menop)	627	Drug Dependence	304	Hernia(other)	553
Bleeding (rectal)	569	Drug Reaction	977	Herpes Genitalis	099
Blepharitis	373	DVT	451	Herpes Simplex	054
Blocked Tear Duct	375	Dysmenorrhea	625	Herpes Zoster	053
Boil	680	Dyspareunia	625	HIV	279
BPH	600	Dyspepsia	536	Hives	708
Breast Abscess	611	Dysphagia	787	Hydrocele	603
Breast Cancer	175	Dyspnea	786	Hyperactivity	314
Breast Disorder	611	Eczema	691	Hypercholesterolemia	272
Breast Lump(benign)	217	Edema	785	Hyperemesis	643
Bronchitis (chronic)	491	Emphysema	492	Hypertension	401
Bronchitis Acute	466	Endometriosis	617	Hypertensive Heart	402
Bunions	727	Enuresis	307	Hyperthyroid	242
Burns	949	Epididymo-orchitis	604	Hyperventilation	786
Bursitis	727	Epilepsy	345	Hypothyroid	244
Calculus (biliary)	576	Epistaxis	786	Hysteria	300
Cancer Cervix	180	Esophagitis	530	Immunization	896
Cancer Prostate	185	Exhaustion	796	Impetigo	684
Cancer Uterus	182	Failure to Thrive	799	Impotence	306
Candidiasis	112	Family Planning	895	Incontinence	599
Cardiac Arrest	427	Fatigue	796	Indigestion	536
Carpal Tunnel Syndrome	739	Feeding Problem(Infant)	799	Infertility (Female)	628
Cataracts	366	Fever	796	Infertility(male)	606
Cellulitis	682	Fibroids	218	Influenza	487
Cervical Disc Disease	847	Fibrositis	729	Ingrown Toe Nail	703

Diagnostic Codes

Insect Bite	919	Paronychia	686	STD	099
Insomnia	307	PAT	427	Stomatitis	528
Intertrigo	695	Pediculosis	132	Strabismus	378
Iritis	364	Pelvic Inflammatory Dis	614	Strep Throat	034
Irritable Colon	564	Peripheral Vascular Dis	443	Stress incontinence	625
Jaundice	787	Personality disorder	301	Stroke	436
Joint Pain	781	Pharyngitis	460	Stye	373
Keloid	701	Phimosis	605	Sunburn	691
Keratitis	370	Phlebitis	451	Syncope	785
Keratosi	701	Pilonidal Abscess	682	Tachycardia	427
Kidney Stone	592	Pinworms	127	TB test, conversion	010
Knee Pain	844	Pleurisy	511	Tendonitis	727
Labyrinthitis	386	Pnuemonia	486	Tennis elbow	739
Laceration Lower	894	Poison Ivy, Oak	692	Tenosynovitis	727
Laceration Other	879	Poliomyelitis	045	Tension Headache	307
Laceration Upper	884	Pregnancy (ectopic)	633	Threatened Abortion	640
Laryngitis	464	Pregnancy (normal)	650	Thrush	112
Leg Cramps	781	Prolapse Uterus	621	Thyroiditis	245
Legal Problems	906	Prostate Cancer	185	Thyrotoxicosis	242
Leukorrhea	629	Prostate Hypertrophy	600	Tinnitus	388
Lipoma	214	Prostatis	601	TIA	435
Liver Disease (other)	573	Pruritus	698	Tonsillitis	463
Low Back Pain	724	Psoriasis	696	Toothache	525
Lupus	695	Pulmonary embolism	459	Torticollis	739
Lymphangitis	457	Pyelonephritis	590	Tracheitis	464
Malaise	799	Pyrexia	796	Trichomonas	131
Marital Problems	898	Pyuria	599	Trigger Finger	727
Mastitis (Abscess)	611	Rash	691	Ulcer (duodenal)	532
Mastitis (Cystic)	610	Raynaud's Phenomenon	443	Ulcer (Gastric)	531
Measles	055	Rectal Bleeding	569	Undescended testicle	608
Melena	787	Reflux Esophagitis	530	URI	460
Meniscal tear	718	Renal Calculi	592	Uremia	585
Menopause	627	Renal Colic	788	Urethral Stricture	598
Menorrhagia	626	Renal Failure	584	Urethritis	597
Menstrual Disorder	626	Rheumatoid Arthritis	714	Urinary Infection	599
Mental Retardation	319	Rhinitis	477	Urticaria	708
Migraine	346	Ringworm (scalp, beard)	110	Ulcerative Colitis	556
Miscarriage	634	Ringworm(other)	117	Umbilical Hernia	553
Mitral Valve Prolapse	429	Rosacea	695	Unemployment	905
Mole	216	Rubella	056	Vaginal Bleeding	626
Mononucleosis	075	Scabies	133	Vaginitis	616
Multiple Sclerosis	340	Scarring	709	Varicose Vein, ulcer	454
Mumps	072	Schizophrenia	295	Vasovagal attack	780
Muscle Spasm	728	Sciatica	724	Venereal Disease	099
Myopia	367	Scoliosis	737	Vertigo	780
Nausea or Vomiting	787	Sebaceous Cyst	706	Viral illness	079
Nephritis	580	Seborrhea	690	Viral Rash	057
Neuralgia (Trigeminal)	350	Seizure Disorder	345	Vomiting	787
Neuritis	365	Senility	797	Vulvitis	616
Nevus	216	Sexual Dysfunction	306	Warts	078
Nevus (Pigmented)	709	Shingles	053	Wax	388
Nosebleed	786	Shortness of Breath	786	Weight Loss	796
Obesity	278	Sickle Cell	282	Well Baby Visit	916
Occupational Problem	905	Sinusitis	461	Whiplash	847
Oral Ulcers	528	Sinusitis (acute)	461	Whooping Cough	033
Osteoarthritis	715	Sinusitis (chronic)	473	Wound Infection	998
Osteomyelitis	730	Sleep Disorder	307	Wry Neck	733
Osteoporosis	733	Smoking Cessation	491	Yeast Vaginitis	616
Otitis Externa	380	Social Maladjustment	904		
Otitis Media	381	Sprain (Foot, ankle)	845		
Ovarian Cyst	220	Sprain (Leg, Knee)	844		
Overdose	977	Sprain (lumbar)	724		
Pain (chest)	785	Sprain (Neck)	847		
Pain(joint,leg,muscle)	781	Sprain (Shoulder)	840		
Pancreatitis	577	Sprain (Wrist)	842		
Parkinson's	332	Sprain, Strain (Other)	848		



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Patient Enrolled Models Q Codes (Resulting from the 2004 Master Agreement)

Preventative Care Bonus Codes

(Enrolled Patients Only)

Tracking codes

Q130A	Influenza Vaccine over 65
Q011A	Pap 35-70
Q131A	Mammogram 50-70
Q132A	Immunization 18-24 Months
Q133A	Colorectal Screening 50-74

Exclusion Code

(Improves efficiency when calculating yearly bonus payments.)

Q140A	Pap 35-70
Q141A	Mammogram 50-70
Q142A	Colorectal Screening 50-74

Preventative 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
Q005A	Colorectal Screening 50-74	\$6.86

Preventative Care Service Enhancement Fees

FHN, FHO (FHG, CCM effective 01/04/07)

Paid annually based on percentage of enrolled patients serviced

Influenza vaccine

Q100	60 percent	\$220.00
Q101	65 percent	\$440.00
Q102	70 percent	\$770.00
Q103	75 percent	\$1,100.00
Q104	80 percent	\$2,200.00

Pap Smear

Q105	60 percent	\$220.00
Q106	65 percent	\$440.00
Q107	70 percent	\$660.00
Q108	75 percent	\$1,320.00
Q109	80 percent	\$2,200.00

Mammogram

Q110	55 percent	\$220.00
Q111	60 percent	\$440.00
Q112	65 percent	\$770.00
Q113	70 percent	\$1,320.00
Q114	75 percent	\$2,200.00

Childhood Immunizations

Q115	85 percent	\$440.00
Q116	90 percent	\$1,100.00
Q117	95 percent	\$2,200.00

Colorectal Screening (FHN, CCM effective 01/04/06)

Q118	15%	\$220.00
Q119	20%	\$440.00
Q120	40%	\$1,100.00
Q121	50%	\$2,200.00

Commonly Billed Q Codes

CCM:

Q016A	After 5pm,W/E, holiday add-on	10%
Q200A	Enrollment Fee (first year only)	\$5.00
Q023A	Unattached pt. fee, from hospital, no max	\$150
Q033A	New Grad. New pt. fee (max 150,first year only)	\$100-\$120
Q040A	Diabetes Management incentive - Annual Flow Sheet	\$60/yr
Q041A	Initial smoking cessation Fee	\$15.00
Q042A	Smoking Cessation counselling fee	A007+ \$1.50

FHG:

Q012A	After 5pm,W/E, holiday add-on	20%
Q200A	Enrollment Fee (first year only)	\$5.00
Q013A	New patient premium max 50/yr	\$100-\$120
Q023A	Unattached pt. fee, from hospital, no max	\$150.00
Q033A	New Grad. New pt. fee (max 150,first year only)	\$100-\$120
Primary Care Serious Mental illness		
Q020A - Bi-polar Diagnostic Code 295 - Schizophrenia		
5-9 patients - \$1000/yr 10+ patients - \$2000/yr		
Q040A	Diabetes Management incentive - Annual Flow Sheet	\$60/yr
Q041A	Initial smoking cessation Fee	\$15
Q042A	Smoking Cessation counselling fee	A007+ \$1.50
FHGs-10% premium automatically added to A001, A003, A007,A008,A888,A901,A902,C010,C882,G365,G538, G539,G590,G591,K005,K013,K017,K022,K023,K030		

FHN:

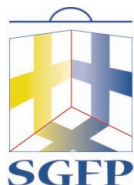
Q012A	After 5pm,W/E, holiday add-on	20%
Q200A	Enrollment Fee (first year only)	\$5.00
Q013A	New patient premium max 50/yr	\$100-\$120
Q023A	Unattached pt. fee, from hosp,seen within 2/52	\$150
Q033A	New Grad. New pt. fee (max 150,first year only)	\$100-\$120
Primary Care Serious Mental illness		
Q020A - Bi-polar Q021A - Schizophrenia		
5-9 patients - \$1000/yr 10+ patients - \$2000/yr		
Q040A	Diabetes Management incentive - Annual Flow Sheet	\$60/yr
Q014A	Newborn Episodic Care (<1year old, max 8)	\$14.58
Q041A	Initial smoking cessation Fee	\$15.00
Q042A	Smoking Cessation counselling fee	A007+ \$1.50

FHO:

Q012A	After 5pm,W/E, holiday add-on	20%
Q200A	Enrollment Fee (first year only)	\$5
Q013A	New patient premium max 50/yr	\$100-\$120
Q023A	Unattached pt.fee,from hosp,seen within 2/52	\$150
Q033A	New Grad. New pt. fee (max 150,first year only)	\$100-\$120
Primary Care Serious Mental illness		
Q020A - Bi-polar Q021A - Schizophrenia		
5-9 patients - \$1000/yr 10+ patients - \$2000/yr		
Q040A	Diabetes Management incentive - Annual Flow Sheet	\$60/yr
Q015A	Newborn Episodic Care (<1year old, max 8)	\$13.53
Q041A	Initial smoking cessation Fee	\$15
Q042A	Smoking Cessation counselling fee	A007+ \$1.50

Q012 (FHG, FHN, FHO) and Q016 (CCM) apply to: A001A,3A,4A,7A,8A,888A,K005A,K013A,K017A

For further information on CCMs, FHGs and FHNs, you may access the OMA Primary Care Renewal Tutorials at <http://www.oma.org/cybermed/online/pcr/>



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