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Ministry of Health

Ministry of Long-Term Care

Ontario Health Insurance Plan

INFOBulletin

COVID-19 Temporary Virtual Palliative Care Services

System changes allow billing temporary virtual palliative care codes K092A, K093A, K094A and K095A starting July 1, 2021.

To: All Providers

Category: Physician Services

Written by: Claims Services Branch, Ontario Health Insurance Plan Division

Date issued: June 29, 2021

Bulletin Number: 210605

Temporary Physician Funding Related to COVID-19

The Ministry of Health (ministry) continues to support the government's efforts to stop the spread of COVID-19 in Ontario. In accordance with an agreement between the ministry and the Ontario Medical Association (OMA), temporary physician funding initiatives under the Ontario Health Insurance Plan (OHIP) are being enhanced. This will ensure patients continue to have access to the health care they need.

Services by Phone or Video-Palliative Care

Effective July 1, 2021, new virtual palliative care services are eligible to be submitted. These fee schedule codes are effective for services provided between March 14, 2021 and September 30, 2021.

The four new fee codes are set out below:

Fee Schedule Code	Description	Value
K092A	Virtual Palliative Care Consultation-Telephone	\$159.20
K093A	Virtual Palliative Care Consultation-Video	\$159.20
K094A	Virtual Palliative Care Support-Telephone	\$72.15
K095A	Virtual Palliative Care Support-Video	\$72.15

Palliative Care Fee Code Descriptions

K092A and K093A are considered special palliative care consultations that are requested because of the need for specialized management for palliative care. The physician must spend a minimum of 50 minutes with the patient and/or patient's representative/family in consultation by video or telephone (the majority of time must be spent in consultation with the patient). In addition to the general requirements for a consultation, the service includes a psychosocial assessment, comprehensive review of pharmacotherapy, appropriate counselling and consideration of appropriate community services, where indicated.

K094A and K095A are considered palliative care support fee codes. These are time-based services payable for providing pain and symptom management, emotional support and counselling to patients receiving palliative care (by video or telephone). They are payable after a minimum of 20 minutes, and in increments of ½ hour (or major part thereof) and can be used as an extension of time for the consultation codes.

Please refer to the Schedule of Benefits for Physician Services (Schedule) for additional information.

Claims Processing

- Only one of A945A, C945, K092A or K093A is eligible per patient, per physician.
- If more than the above limit of A945A, C945, K092A or K093A are submitted for the same patient, per physician, per year, the additional services(s) will reject to the error report with 'AC1-Max Reached-Resub ALT Fee Schedule Code'.
- The payment rules in the Schedule for A945A apply to the K092A (telephone) and K093A (video) consultation.
- The payment rules in the Schedule for K023A apply to the K094A (telephone) and K095A (video) support fee.
- If a virtual palliative care visit (phone or video) has been submitted for a patient, an in-person palliative care visit cannot be billed on the same day. For example, if a K092A is submitted and a support fee is eligible, then either K094A or K095A must be submitted. It is assumed that all the required services would have been provided virtually when the palliative care support fee code is used as an extension of time for the consultation code. Where an in-person palliative care visit (A945, C945 or K023) is provided on the same day as a virtual palliative care visit (K092, K093, K094 or K095), claims must be submitted for manual review.
- A stale-date exemption on K092A, K093A, K094A, K095A has been applied until December 31, 2021 for submissions with service dates approaching stale-dating.

Primary Care Claims Processing

- K092A, K093A, K094A, K095A will accumulate toward the Palliative Care special premium.
- The four codes are exempt from outside use.
- Family Health Group (FHG) physicians will **not** be eligible to receive the 10% Comprehensive Care Premium on the K092A and K093A fee codes.
- FHG physicians will be eligible to receive the 10% Comprehensive Care Premium on the K094A and K095A fee codes.

The Schedule of Benefits for Physician Services

The latest version of the Schedule of Benefits for Physician Services is [available on the Ministry of Health website](http://www.health.gov.on.ca/english/providers/program/ohip/sob/sob_mn.html) [<http://www.health.gov.on.ca/english/providers/program/ohip/sob/sob_mn.html>](http://www.health.gov.on.ca/english/providers/program/ohip/sob/sob_mn.html). Hard copies of the Schedule of Benefits for Physician Services will not be distributed. If you would like to order a paper copy or compact disk (CD) of the Schedule for a fee, please visit [Publications Ontario](https://www.publications.gov.on.ca/) [<https://www.publications.gov.on.ca/>](https://www.publications.gov.on.ca/). Physicians without access to the Internet can contact ServiceOntario at 1-800-668-9938.

Keywords/Tags

OHIP; Physicians; COVID-19; Palliative; Virtual; Telephone; Video; K092; K093; K094; K095;

Contact Information

Do you have questions about this INFOBulletin? [Email the Service Support Contact Centre](mailto:SSContactCentre.MOH@ontario.ca) [<mailto:SSContactCentre.MOH@ontario.ca>](mailto:SSContactCentre.MOH@ontario.ca) or call 1-800-262-6524.

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For More Information

Call **ServiceOntario**, INFOline at:
[1-866-532-3161](tel:+1-866-532-3161) [<tel:+1-866-532-3161>](tel:+1-866-532-3161) (Toll-free)
In Toronto, [\(416\) 314-5518](tel:416-314-5518) [<tel:416-314-5518>](tel:416-314-5518)
TTY [1-800-387-5559](tel:+1-800-387-5559) [<tel:+1-800-387-5559>](tel:+1-800-387-5559).
In Toronto, TTY [\(416\) 327-4282](tel:416-327-4282) [<tel:416-327-4282>](tel:416-327-4282)
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