

Fee Code 03.03R

03-16-2020

For telephone (or synchronous electronic verbal communication) between the family physician and the patient (or the patient's parent, guardian or proxy as established by written consent):

- Maximum 4 calls per 12 months
- Patient meets one or more criteria: [65+ | mental illness meeting DSM criteria | 1+ chronic diseases]
- Chronic diseases are defined as "conditions expected to last at least 12 months or until the death of the patient, which places the patient at significant risk of acute exacerbation/decompensation, functional decline, or death"
- Patient seen within previous 9 months
- Patient NOT seen for same issue in previous 7 days
- Patient NOT seen by same physician for another issue same day as call
- Phone call does not result in patient being advised to be seen at next available office appointment
- Phone visit replaces face-to-face visit
- Must record on chart: Start time, Finish time:
- The start and stop time of the call must be included in the text field on the MSI service report
- Must be a minimum of 5 minutes of two-way communication with the patient.
- As with any encounter, chart note should include: Reason for encounter, Discussion, Management Decision
- The service is not claimable when the purpose of the communication is to:
 - Arrange a face to face appointment
 - Notify the patient of an appointment
 - Prescription renewal
 - Arranging to provide a sick note
 - Arrange a laboratory, other diagnostic test or procedure
 - Inform the patient of the results of diagnostic investigations with no change in management plan.