

DERMATOLOGY

These listings cannot be correctly interpreted without reference to the Preamble.

**\$ Anes.
Level**

Referred Cases

00210 **Consultation:** To include history and dermatological examination, with review of any previous X-ray and laboratory findings and written report60.68

00214 **Repeat or limited consultation:** To apply where a consultation is repeated for same condition within six months of the last visit by the consultant, or where in the judgment of the consultant the consultative service does not warrant a full consultative fee.....40.04
(laboratory test and biopsy when necessary, extra)
Note: Punch and shave biopsies are included in consultation or visit fees.

Continuing care by consultant:

00204 Directive care.....22.55
00207 Subsequent office visit.....22.55
00208 Subsequent hospital visit.....22.55
00209 Subsequent home visit41.58
00205 Emergency visit when specially called out of office92.79
(not paid in addition to out-of-office-hours premiums)
Note: Claim must state time service rendered.

Telehealth Service with Direct Interactive Video Link with the Patient:

20210 Telehealth Consultation: To include history and dermatological examination, with review of any previous x-ray and laboratory findings and written report.....60.68

20214 Telehealth repeat or limited consultations: To apply where a consultation is repeated for same condition within six months of the last visit by the consultant, or where in the judgement of the consultant the consultative service does not warrant a full consultative fee (laboratory test and biopsy when necessary, extra)40.04
Note: Punch and shave biopsies are included in consultation or visit fees.

20207 Telehealth subsequent office visit22.55
20208 Telehealth subsequent hospital visit22.55

Special Examinations

00206 For primary systemic diseases with cutaneous manifestations, to include complete history and physical examination, review of X-ray and laboratory findings, and a written report153.41

Special Therapy

00217	Treatment of skin disorders and lesions other than: ultraviolet, x-ray, grenz ray: such as cryosurgery, electrosurgery, etc., - extra (operation only)10.93	10.93	
	Notes:		
	i) Payable to specialists certified in Dermatology only.		
	ii) The treatment of benign skin lesions for cosmetic reasons, including common warts (<i>verrucae</i>) is not a benefit of the Plan. Refer to Preamble B. 9. 2. 4. a. and b. " <u>Surgery for the Alteration of Appearance.</u> "		
00218	Curettage and electrosurgery of skin carcinoma proven histopathologically (operation only)57.28	57.28	
00219	For each additional lesion – to a maximum of two additional lesions per day (operation only).....28.62	28.62	
	* These items are subject to the general regulations covering surgical procedures.		
00222	Psoralen Ultra Violet A treatment:		
	- whole body 19.94	19.94	
00223	- partial body.....19.94	19.94	
	Note: Both 00222 and 00223 include an office visit and have a maximum of 40 treatments per year.		
00224	Ultra Violet B treatment, whole or partial body		
	- includes office visit19.94	19.94	
00228	Photo epilation of facial hair – per ¼ hour (or major portion thereof) (operation only)27.88	27.88	
	Notes:		
	i) Billable to a maximum of ½ hour per session.		
	ii) Epilation of facial hair for familial hirsutism is not a benefit of the Plan.		
	iii) Pre-authorization is required (see Preamble D. 9. 2. 6.)		
00235	Pulsed laser surgery of the face and/or neck, treatment area less than 50 cm ² (operation only).....66.61	66.61	3
00236	Pulsed laser surgery of the face and/or neck, treatment area greater than or equal to 50 cm ² , <u>or</u> treatment of the eyelids with eye shield insertion (operation only)99.91	99.91	3
00237	Additional surgical professional fee billable when either of the above two procedures are performed under general anesthesia55.00	55.00	
	Notes:		
	(a) Only the following conditions qualify for payment under 00235, 00236, 00237:		
	i) Port wine stains involving the face and/or neck;		
	ii) Complicated superficial haemangiomas:		
	- lesions interfering with function (vision, breathing or feeding).		
	- lesions which are ulcerated, bleeding, or prone to infections where standard wound care has failed.		
	iii) Facial naevus of Ota		
	iv) Disfiguring facial pigmentary anomalies (eg: segmental or systematized).		
	(b) Only the following types of lasers qualify for payment under 00235, 00236, 00237:		
	i) Pulsed dye laser		
	ii) Q-Switched Ruby laser		
	iii) Q-Switched YAG laser		
	(c) Restricted to Dermatology and Plastic Surgery		
00019	Venesection for polycythaemia or phlebotomy - procedural fee30.06	30.06	

Surgical Procedures and Repairs

		\$	Anes. Level
Mohs' microscopically controlled excision:			
00225	Initial cut, including debulking.....	341.56	
00226	One or more additional cuts, extra	295.85	
00227	Special overhead and technical component, extra	318.49	
Notes:			
i) 00225, 00226, 00227 are billable only for complicated epithelial cancer and only by physicians specially qualified in this technique.			
ii) 00226, 00227 are billable only once, whether or not excision of the lesion extends to the subsequent day.			
iii) 00227 is not billable if the surgery is performed in a hospital setting.			
iv) Closure of the resulting defect by undermining and advancement flaps is included in the above fees. If more complicated closure is medically necessary, bill as an extra under appropriate listings for skin grafts.			
Skin Grafts			
Note: Additional procedures, other than skin grafts, are extra; e.g.: bone or tendon grafts, inlay grafts, etc.			
Local tissue shifts: Advancements, rotations, transpositions, "Z" plasty, etc.			
06019	Single or multiple flaps under 2 cm. in diameter used in repair of a defect (except for special areas as in 06024) (operation only)	155.32	2
06020	Single.....	318.49	2
06024	Eyebrow, eyelid, lip, ear, nose-single.....	289.45	3
Note: Repair of torn earlobe to be claimed under 06027.			
Free Skin Grafts (including mucosa):			
06041	Eyelid, nose, lips, ear	347.10	2
Tumours of the Skin:			
13600	Biopsy of skin or mucosa (operation only)	49.47	
13601	Biopsy of facial area (operation only)	49.47	2
Note: Punch or shave biopsies not to be charged under fee items 13600 or 13601.			
P20231	Biopsy, not sutured.....	22.55	
P20232	Biopsy, not sutured, multiples same sitting, maximum of four (extra).....	5.00	
Notes:			
i) Restricted to Dermatologists.			
ii) Fee items P20231 and P20232 include the visit fee.			
13605	Opening superficial abscess, including furuncle - operation only	42.38	2
13620	Excision of tumour of skin or subcutaneous tissue or small scar under local anesthetic - up to 5 cm (operation only).....	63.21	2
06069	- face (operation only).....	87.33	2
13621	- additional lesions removed at the same sitting (maximum per sitting, five) each (operation only).....	31.61	
Note: The treatment of benign skin lesions for cosmetic reasons, including common warts (verrucae) is not a benefit of the Plan. Refer to Preamble D. 9. 2. 4. a. and b. "Surgery for the Alteration of Appearance."			
13622	Localized carcinoma of skin, proven histopathological (operation only)	69.83	
06146	Lip shave - vermilionectomy	391.44	3

Diagnostic Procedures

Allergy, patch and photopatch tests:	
S00762	Scratch test, per antigen.....1.05 <i>Note: Minor tray fees may be paid in addition if a minimum of 16 antigens are used.</i>
S00763	- children under 5 years of age, per antigen.....2.27 <i>Note: Minor tray fees may be paid in addition if a minimum of 14 antigens are used.</i>
S00764	Intracutaneous test, per test2.10
S00765	Annual maximum (to include scratch or intracutaneous tests) for each physician - per patient33.73
S00767	Patch testing (extra) (annual maximum, 80 tests) per test.....1.31
S00768	Photopatch test, per test.....5.50
S00769	- annual maximum55.00
15136	Fungus, direct examination KOH preparation8.23