

## **Module 8:           Emergency Care – 00081, 00082, 00083, 00084 and Emergency Medicine**

- 8.1     Emergency Care – Fee Items 00081, 00082, 00083  
          and 00084
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### **8.1     Emergency Care – Fee Items 00081, 00082, 00083 and 00084**

#### **Fee Item 00081 – Emergency Care**

Fee items 00081 and 00082 are billed in cases where a physician must provide constant bedside care to a critically ill patient. Each item is billable per half hour or **major portion** thereof when the criteria outlined in the *MSC Payment Schedule* are met (See General Services: Emergency Care). The following information will help you determine when to bill these items.

#### **Fee item 00081 is appropriate for:**

The evaluation, diagnosis and **treatment** of a critically ill patient who requires constant bedside care by a physician. A critically ill patient is defined as a patient with an immediately life-threatening illness/injury. For example:

- Cardiac arrest
- Multiple trauma
- Acute respiratory failure
- Coma
- Shock
- Cardiac arrhythmia with haemodynamic compromise
- Hypothermia
- Other immediately life-threatening conditions

**Note:** Fee item 00081 may be billed for use and monitoring by the physician of pharmacologic agents, such as inotropic or thrombolytic drugs for the above conditions.

#### **Procedures included in fee item 00081:**

The following procedures are included in 00081 and cannot be billed in addition to this fee item:

- Defibrillation
- Cardioversion
- Peripheral intravenous lines
- Arterial blood gases

- Nasogastric tubes with or without lavage
- Urinary catheters (as part of a cardiac arrest)

**Procedures not included in fee item 00081:**

Procedures not included in 00081 may be charged in addition to this fee item. The time spent rendering other non-included services should be provided and deducted from the time billed for 00081. Examples of such procedures are as follows:

- Endotracheal intubation - as a separate entity, i.e., not part of a cardiac arrest or followed by an anesthetic
- Cricothyroidotomy
- Venous cutdown
- Arterial catheter
- Diagnostic peritoneal lavage
- Chest tube insertion
- Pacemaker

**Fee Item 00081 is not appropriate for:**

- The intensive care sometimes necessary to prepare a patient for surgery unless active resuscitation is performed.
- Constant attendance with a patient in labour.
- Standby time such as waiting for laboratory results.
- Simple monitoring of the patient.

**Tips:**

- When a consultation is billed in addition to 00081, the consultation constitutes the first half hour of time spent with the patient (i.e. 00081 may not be billed for that first half hour).
- Provide detailed information in your note record and/or correspondence regarding the patient's condition and the **active treatment** provided by the physician (e.g. resuscitation) provided for time billed as fee item 00081.
- You must include start and end times with your claim.

**Fee item 00082 - Monitoring of Critically Ill Patient**

Fee items 00081 and 00082 are billed in cases where a physician must provide constant bedside care to a critically ill patient. Each item is billable per half hour or **major portion** thereof when the criteria outlined in the *MSC Payment Schedule* are met (See General Services: Emergency Care). The following information will help you determine when to bill these items.

**Fee item 00082 is appropriate:**

In cases where a critically ill patient requires **continuous** monitoring by a physician when modification of care and active intervention is not required. For example, if a patient requires continuous monitoring following resuscitation as the result of cardiac arrest, fee item 00081 may be billed for the time spent providing active resuscitation, and fee item 00082 may be billed for the time spent providing continuous monitoring.

When the patient's condition has stabilized and continuous monitoring is no longer required, follow-up care may be billed under the appropriate visit fees (e.g. 00108 - hospital visit). We recommend that the time of the hospital visit be submitted in these cases.

**Note:** Fee item 00082 is not applicable for monitoring during labour.

**Tips:**

- Include start and end times with your claim.
- Provide details of the requirement for continuous monitoring by physician in your note record (e.g. “constant monitoring required for one hour following resuscitation for cardiac arrest”).

### Fee item 00083 - Crisis Intervention

Fee item 00083 applies when the attending physician is called upon to provide continuous medical assistance at the exclusion of all other services in periods of personal or family crisis caused by rape, sudden bereavement, suicidal behaviour or acute psychosis. The following information will help you determine under what conditions this fee item may be billed.

#### Fee Item 00083

- Is not a stand-alone item. If a consultation or complete physical examination is performed, bill the applicable item for the first full hour. Otherwise, bill the appropriate visit fee for the first full half hour.
- May be billed for each subsequent continuous **half hour or major portion** thereof.
- Is applicable in cases of sudden bereavement. Counselling rendered following death from long-term illness is not billable under fee item 00083, but may be billed under the applicable visit or counselling listing.
- Is only applicable for the initial crisis, and only for those services specifically mentioned in the description of the fee item. All subsequent care should be billed under the applicable fee(s).
- Counselling for foetal death can be paid to any physician (for initial counselling) under fee item 00083 as long as the criteria is met.

#### Note:

In cases of sexual assault, time spent collecting legal evidence is not a benefit of MSP and should be billed to the appropriate police agency (i.e. local police or RCMP). Refer to the *BCMA Guide to Fees* for further information on billing. Information regarding the collection and storage of medical forensic evidence was provided as an insert to the Winter 2000 edition of the *Physicians' Newsletter*.

#### Tips:

- To ensure prompt payment of your account, provide information regarding the nature of the crisis in your note record.
- Always include the total time spent with the patient in the "start time" and "end time" fields of your billing for fee item 00083.
- You must include start and end times with your claim.

**For example:** Patient is seen for grief counselling following sudden death of spouse from 10am to 11:10am. Bill as follows:

| <u>Fee Item</u> | <u>Time</u> | <u>Note Record</u>     |
|-----------------|-------------|------------------------|
| 00120           | n/a         | n/a                    |
| 00083 X 1       | 1000 - 1110 | sudden death of spouse |

**Explanation:** Fee item 00120 is billed for the first half hour. The criteria are met for fee item 00083 (i.e. sudden bereavement and major portion of half hour spent excluding first half hour). Only one unit of fee item 00083 is payable, as the additional 10 minutes spent is not the major portion of a half hour.

### Fee Item 00084

Fee item 00084 may be billed when it is medically required for a physician to accompany a patient to a distant hospital. The following information will help you determine how to use fee item 00084:

- "Portal to portal" time while the patient is under the exclusive care of the accompanying physician.

**Note:** Fee item 00084 may be billed once every full half hour or **major portion** thereof when the criteria outlined in the *MSC Payment Schedule* are met (See General Services: Emergency Care).

### Services not Included in 00084:

- Other medically required services provided **prior to time spent traveling** should be billed under the appropriate fee item(s) (e.g. visit fee, 00081) and the time for performing these services should **not** be included in the time billed under fee item 00084.
- Medically required services provided **at the distant hospital** should be billed under the appropriate fee item(s) and the time spent performing these services should **not** be included in the time billed under fee item 00084.

**Note:** Out-of-office hours premiums may be charged in addition to fee item 00084 when applicable.

### Do not bill fee item 00084 for:

- Layover or return travel time.
- Time spent waiting for the ambulance/air ambulance to arrive.

**Tips:** Always provide the total time spent accompanying the patient in the "start time" and "end time" fields of your claim. Provide the sites that the physician traveled "from" and "to" in your note record to ensure prompt payment of your claims. Timing for 00084 begins when the physician leaves the hospital with the patient, and ends when the distant hospital is reached.

eg. leave Crofton at 09:30 – arrive Victoria General Hospital 10:30. Bill 00084 X 2

Any services provided during travel time are included in the time billed under fee item 00084 and should not be billed in addition to this item.

You must include start and end times with your claim.

## 8.2 Emergency Medicine

### Services Provided in the Emergency Room

The following three factors determine the appropriate visit fee to bill when service is provided in the emergency room:

- whether the physician is the designated emergency room physician (doctor of the day);
- where the physician is located when called to the emergency room; and,
- the time of day.

The following examples illustrate the correct billing for three different situations:

#### Example 1:

Physician is the emergency physician designated by the medical staff, and is on hospital Emergency Department duty and is on-site:

#### What to bill:

Bill the appropriate fee item from the 01800 series in the Emergency Medicine section of the *MSC Payment Schedule*.

**Note:** The 01800 series is applicable to certified and non-certified Emergency Room Physicians (except for the consultation fee). Fee item 13200 is not appropriate in these cases.

#### Example 2:

Physician is already at the hospital when called to see a patient in the emergency room, but is not on a scheduled shift in the emergency room.

#### What to bill:

Bill the appropriate on-call, on-site hospital visit fee if service is between 1800 and 2300 hours, or on a weekend or statutory holiday (i.e., 00113, 00105, or 00123). For weekday services between 0800 and 1800 hours, bill the appropriate out-of-office visit fee (e.g., 13200).

#### Example 3:

Physician is called from home to attend a patient in the emergency room on an urgent basis.

#### What to bill:

Bill the appropriate visit fee plus call-out if out-of-office hours, or the appropriate emergency visit fee (e.g. 00112) if during the day.

## Emergency Medicine Preamble

1. The following listings apply only to examinations rendered by the emergency physician designated by the medical staff who is on hospital Emergency Department duty and on-site. Other physicians (e.g. on call) who choose to attend their patients in the Emergency Department but who are not the designated emergency physicians as defined above, shall not bill these listings but shall refer to other sections of the Payment Schedule for billing the appropriate examinations. The physicians working in hospital Emergency Departments that are covered on a call-in basis as opposed to an on-site basis shall not bill these listings but shall refer to the section on General Practice. Physicians working in diagnostic treatment centres or freestanding emergency clinics should also refer to the listings in the section of General Practice. Call-in fees (i.e. 00112) or service charges for patients seen in the Emergency Department are not applicable to emergency physicians while on duty and on-site in the hospital Emergency Department.
2. Separate day, evening, night and weekend/holiday listings are defined as follows:
  - Day Visit: 0800 to 1800, weekdays
  - Evening Visit: 1800 to 2300, weekdays
  - Night Visit: 2300 to 0800
  - Weekend/Holiday Visit: 0800 to 2300 on Saturday, Sunday and Statutory Holidays
3. Emergency Department visit listings are further categorized into three levels of complexity.

### LEVEL I

A level of service pertaining to the evaluation and treatment of a single condition requiring only an abbreviated history, examination and treatment. It shall include the review of appropriate laboratory tests and/or x-rays. This level of service shall also pertain to those patients who do not meet the criteria for Level II or III care.

### LEVEL II

Pertains to the evaluation of a new or existing medical condition that necessitates a detailed medical history, and necessary physical examination of three or more regions. It will also include a review of laboratory tests and x-rays where required, and the initiation of appropriate therapy. This level of service shall also pertain to those patients whose illness/injury require prolonged observation, continuous therapy, and multiple reassessments.

### LEVEL III

a) Pertains to evaluation of patients with serious multiple and/or complex medical problem(s) which often can be obscure and where the emergency condition necessitates a detailed history and complete physical examination by the emergency room physician. This shall include the chief complaint(s), history of past and present illness, relevant personal and family history, functional enquiry, and complete physical examination with special attention to local examination where indicated. It shall include the review and interpretation of appropriate laboratory, x-ray and ECG studies, full recording of the

findings, and discussion with the patient and/or family and/or personal physician, as well as the initiation of appropriate therapy.

**b)** This level of care shall also pertain to the management of a life threatening illness/injury which requires immediate evaluation and emergent treatment by the emergency physician. It shall include the review and interpretation of appropriate laboratory, x-ray and ECG studies, full recording of the findings, and discussion with the patient and/or family and/or personal physician.

### **Consultation**

01810 Emergency medicine consultation

#### **Level I emergency care:**

01811 day

01821 evening

01831 night

01841 Saturday, Sunday or Statutory Holiday

#### **Level II emergency care:**

01812 day

01822 evening

01832 night

01842 Saturday, Sunday or Statutory Holiday

#### **Level III emergency care:**

01813 day

01823 evening

01833 night

01843 Saturday, Sunday or Statutory Holiday