

The description and notes for the indicated fee items are amended to the following, effective April 26, 2017:

Section of General Services

Miscellaneous

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T00039 Oral opioid agonist treatment23.19

Notes:

- i) *The physician does not necessarily have to have direct face-to-face contact with the patient for these fees to be paid.*
- ii) *00039 is the only fee payable for any visit or medically necessary service associated with oral opioid agonist treatment. This includes but is not limited to the following:*
 - a) *At least one visit per week with the patient during the induction of oral opioid agonist treatment.*
 - b) *At least one visit per month with the patient after induction/ stabilization on oral opioid agonist treatment is complete. Exceptions to this criterion are where the patient resides/works in an isolated locale which is a significant distance from the prescribing physician.*
 - c) *Case management/treatment planning with care team.*
 - d) *Supervised urine drug screening and interpretation of results.*
 - e) *Counselling by a physician.*
 - f) *Communication with non-physician counsellor.*
 - g) *Communication with dispensing/supervising pharmacist.*
 - h) *Communication with primary care physician.*
 - i) *Communication with hospital-based physician when patient admitted to hospital.*
- iii) *Claims for visit fees are not payable in addition.*
- iv) *This fee is payable once per week per patient regardless of the number of visits per week.*
- v) *This fee is not payable with out of office hours premiums.*
- vi) *Eligibility to submit claims for this fee item is limited to physicians who are actively supervising the patient's continuing use of oral opioid agonist medications for treatment of opioid use disorder.*
- vii) *This payment stops when the patient stops oral opioid agonist treatment.*

P15039 GP Point of Care (POC) testing for opioid agonist treatment.....12.53

Notes:

- i) *Restricted to patients in opioid agonist treatment.*
- ii) *Maximum billable: 26 per annum, per patient.*
- iii) *Confirmatory testing (reanalyzing a specimen which is positive on the initial POC test using a different analytic method) is expensive and seldom necessary once a patient is in treatment for opioid use disorder. Accordingly, confirmatory testing should be utilized only when medically necessary and when a confirmed result would have a significant impact on patient management.*
- iv) *This fee includes the adulteration test.*
- v) *Only POC urine testing kits that have met Health Canada Standards are to be used.*

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15040 GP Point of Care (POC) testing for amphetamines, benzodiazepines, buprenorphine/naloxone, cocaine metabolites, methadone metabolites, opioids and oxycodone12.53

Notes:

- i) *Not billable for patients in opioid agonist treatment.*
- ii) *Confirmatory testing (re-analysing a specimen which is positive on the initial POC test using a different analytic method) is expensive and should be utilized only when medically necessary and when a confirmed result would have a significant impact on patient management.*
- iii) *This fee includes the adulteration test.*
- iv) *Only POC urine testing kits that have met Health Canada Standards are to be used.*