FHO+ In-Basket Billing Codes

Assessments		
A001	$26.80	Minor assessment
A003	$95.60	General assessment
A004	$39.35	General re-assessment
A007	$44.55	Intermediate assessment
A008	$13.40	Mini assessment
A777	$44.55	Pronouncement of death
A900	$64.80	Complex house call assessment
A110	$48.90	Periodic oculo-visual assessment (aged 19 years and below)
A112	$48.90	Periodic oculo-visual assessment (aged 65 years and above)

Virtual Care		
A101	$20.00	Limited virtual care service - video
A102	$15.00	Limited virtual care service - phone

Periodic Health Visit		
K017	$49.55	Child (age 2 to 15)
K130	$87.10	Adolescent (age 16-17)
K131	$64.25	Adult (aged 18 to 64 inclusive)
K132	$91.35	Adults (aged 65 years of age and older)
K133	$164.25	Periodic health visit for adults with Intellectual and Developmental Disabilities (IDD)

Cervical Screening/Pelvic Exam		
G365	$12.00	Collection of cervical cancer screening specimen(s)

Non-emergency Hospital In-patient Assessments		
C882	$40.05	Palliative care

Add-On Codes		
E089	20% of fee code	When rendered to a cisgender female or a transgender, nonbinary, gender fluid or agender patient, to K131 and K132
E542	$12.65	When performed outside of hospital. Applies to codes indicated with an asterisk "*" on this guide

Time Based Counselling and Complex Care (per unit: 1 unit = > 20 min, 2 units = > 43 min)		
K001	$21.10	Detention (per 15 minutes or major part thereof)
K002	$80.00	Interviews with relatives or a person who is authorized to make a treatment decision
K003	$80.00	Interviews with Children's Aid Society (CAS) or legal guardian
K004	$86.85	Psychotherapy family care (2 or more family members)
K005	$80.00	Mental health individual care
K007	$80.00	Psychotherapy individual care
K008	$80.00	Diagnostic interview/counselling with child and/or parent for psychological
K013	$80.00	Counselling individual care (first 3 units)
K015	$80.00	Counselling of relatives (on behalf of a terminally ill patient)
K125	$80.00	Intellectual and Developmental Disability Primary Care

Focused Practice Assessment (FPA)		
A917	$44.55	Sports medicine FPA
A927	$44.55	Allergy FPA
A937	$44.55	Pain management FPA
A947	$44.55	Sleep medicine FPA
A957	$44.55	Addiction medicine FPA
A967	$44.55	Care of the elderly FPA

Physician to Physician Consult Fees		
K730	$37.05	Physician to physician telephone consultation - Referring physician
K731	$47.75	Physician to physician telephone consultation – Consultant physician
K732	$37.05	CritiCall telephone consultation - Referring physician
K733	$47.75	CritiCall telephone consultation - Consulting physician

Special Visit Premiums		
A990, A994, A996, A998	$20.55, $61.70, $102.80, $77.10	First person seen at physician office
B990, B992, B993, B994, B996*	$28.25, $45.25, $84.80, $67.85, $113.10	First person seen for a house call (varies by time)
Q990, Q992, Q994, Q996, Q998	$20.55, $41.10, $61.70, $102,80, $77.10	First person seen for other (non-professional setting not listed in Schedule of Benefits)

Immunizations		
G462	$8.80	Administration of oral polio or rotavirus vaccine
G538	$8.80	Other immunizing agents not listed on Schedule of Benefits
G590	$8.80	Influenza agent
G840	$8.80	Diphtheria, Tetanus, and acellular Pertussis vaccine/ Inactivated Poliovirus vaccine (DTaP-IPV) - paediatric
G841	$8.80	Diphtheria, Tetanus, acellular Pertussis, Inactivated Polio Virus, Haemophilus influenza type b (DTaP-IPV-Hib) - paediatric
G842	$8.80	Hepatitis B (HB)
G843	$8.80	Human Papillomavirus (HPV)
G844	$8.80	Meningococcal C Conjugate (Men-C)

Immunizations Cont.		
G845	$8.80	Measles, Mumps, Rubella (MMR)
G846	$8.80	Pneumococcal Conjugate
G847	$8.80	Diphtheria, Tetanus, acellular Pertussis (Tdap) - adult
G848	$8.80	Varicella (VAR)
G849	$8.80	Respiratory Syncytial Virus (RSV)

Note: Suffix C is added to the service if the physician administers anaesthetic, fee varies.

Biopsies/Incisions/Cryotherapy		
R048/C*	$100.95	Malignant Lesions – Face or neck – Simple excision – single lesion
R051	$199.05	Laser surgery on Group 1-5 and malignant lesions
R094*	$63.70	Malignant Lesions – Other areas – Simple excision – single lesion
Z101*	$28.20	Incision – Skin-Inc.-Abscess-Subcut.-One-Loc.Anaes.
Z110	$19.15	Extensive debridement of onychogryphotic nail involving removal of multiple laminae
Z113	$32.45	Incision – Biopsy any method, when sutures are not used
Z114*	$27.65	Incision – Foreign body removal local anaesthetic
Z116*	$32.45	Incision – Biopsy(les) - Any Method, When Sutures Are Used
Z117	$12.75	Chemical And/Or Cryotherapy Treatment of Minor Skin Lesions – One or More Lesions, Per Treatment
Z122*	$42.20	Cyst, Haemangioma, Lipoma – Face or Neck - Local Anaesthetic - Single Lesion
Z125*	$35.05	Cyst, Haemangioma, Lipoma – Other Areas - Local Anaesthetic – Single Lesion

Biopsies/Incisions/Cryotherapy Cont.		
Z128/C*	$36.30	Simple, Partial Or Complete, Nail Plate Excision Requiring Anaesthesia - One
Z129/C*	$39.20	Simple, Partial Or Complete, Nail Plate Excision Requiring Anesthesia – Multiple
Z154/C*	$39.35	Suture of Lacerations – Up to 5 Cm If On Face And/Or Requires Tying of Bleeders And/Or Closure in Layers
Z156/C*	$21.90	Group 1 – Verruca, Keratosis, Pyogenic Granuloma – Removal By Excision and Suture – Single Lesion
Z157/C*	$29.05	Group 1 – Verruca, Keratosis, Pyogenic Granuloma – Removal By Excision and Suture – Two Lesions
Z158/C*	$48.50	Group 1 – Verucca, Keratosis, Pyogenic Granuloma – Removal By Excision and Suture – Three or More Lesions
Z159/C	$11.55	Group 1 - Verucca, Keratosis, Pyogenic Granuloma – Removal By Electrocoagulation And/Or Curetting – Single lesion
Z160/C	$17.35	Group 1 – Verucca, Keratosis, Pyogenic Granuloma – Removal By Electrocoagulation And/Or Curetting – Two Lesions
Z161/C	$28.70	Group 1 – Verucca, Keratosis, Pyogenic Granuloma – Removal By Electrocoagulation And/Or Curetting – Three or More Lesions
Z162/C*	$21.90	Group 2 – Nevus – Removal by Excision and Suture – Single Lesion
Z175/C*	$39.35	Skin-Suture-Laceration – 5.1 to 10 cm
Z176/C*	$21.90	Skin-Suture-Laceration – Up to 5cm

Anticoagulant Supervision		
G271	$13.10	Anticoagulant supervision - long-term, telephone advice (per month)

Treatment of Epistaxis		
Z314/C	$11.50	Cauterization – unilateral (add C suffix if anaesthesia is used, fee varies)
Z315	$15.35	Anterior packing - unilateral

Injections/Infusions/Infiltration/Debridement		
G370*	$20.25	Injection of bursa, or injection and/or aspiration of joint, ganglion or tendon sheath
G371	$19.90	each additional bursa, joint, ganglion or tendon sheath, to a maximum of 5
G372	$4.55	Intramuscular, subcutaneous or intradermal injection with visit (each injection, and each additional)
G373	$7.90	Intramuscular, subcutaneous or intradermal injection, sole reason (first injection)
G375	$10.50	Intravascular infiltration (one or two lesions)
G377	$15.80	Intravascular infiltration (3 or more lesions)
G379	$6.15	Intravenous injections or infusions- child, adolescent or adult
G381	$54.50	Standard chemotherapy - agents with minor toxicity that require physician monitoring, including any additional standard chemotherapy other than the initial agent
G384	$8.85	Infiltration of tissues for trigger point
G385	$4.55	Infiltration of tissues for trigger point, each additional site (max. 2)
G420	$13.15	Ear syringing and/or extensive curetting or debridement
G435	$5.10	Tonometry
G482	$7.35	Venipuncture- child
G489	$3.54	Venipuncture- adolescent or adult

Removal of Foreign Body (Cornea)		
Z847	$33.00	One foreign body – local anaesthetic

Basic Diagnostic Hearing Tests		
G525	$5.85	Professional component

Office Laboratory Services		
G001	$5.70	Cholesterol, total
G002	$2.26	Glucose, quantitative or semi-quantitative
G004	$1.58	Occult blood
G005	$3.88	Pregnancy test
G009	$4.90	Urinalysis, routine (includes microscopic examination of centrifuged specimen plus any of SG, pH, protein, sugar, haemoglobin, ketones, urobilinogen, bilirubin)
G010	$2.64	One or more parts of above without microscopy
G011	$13.05	Fungus culture including KOH preparation and smear
G012	$1.93	Wet preparation (for fungus, trichomonas, parasites)
G014	$6.80	Rapid streptococcal test
G481	$1.37	Haemoglobin screen and/or haematocrit (any method or instrument

Nerve Block/Skin Testing		
G123	$17.10	Obturator nerve, for each additional one (max. 4)
G197	$0.39	Skin testing, professional component (max. 50/ year)
G202	$7.15	Hyposensitisation, each injection
G205	$13.15	Insect venom desensitisation (immunotherapy) - per injection (max. 5/day)
G209	$0.80	Skin testing- technical component (max. 50/year)
G212	$12.85	Hyposensitisation, when sole reason for visit (including first injection)
G223	$17.10	Somatic or peripheral nerves not specifically listed- additional nerve(s) or site(s)
G227	$54.65	Obturator nerve- other cranial nerve block
G228	$34.10	Paravertebral nerve block of cervical, thoracic or lumbar or sacral orcoccygeal nerves
G231	$34.10	Somatic or peripheral nerves not specifically listed- one nerve or site
G235	$34.10	Nerve block s- supraorbital

Spirometry		
J301	T: $10.85 P: $7.85	Simple spirometry- Volume versus Time Study
J304	T: $21.55 P: $12.85	Flow volume loop- Volume versus Flow Study
J324	T: $3.25 P: $4.20	Simple spirometry- repeat after bronchodilator
J327	T: $3.25 P: $7.65	Flow volume loop- repeat after bronchodilator

Electrocardiogram		
G310	$7.70	Electrocardiogram- technical component
G313	$4.55	Electrocardiogram- professional component

Catheterization		
Z611	$9.15	Catheterization- Hospital or office

Out-patient Case Conference (per unit: 1 unit = > 20 min, 2 units = > 43 min)		
K700	$37.05	Palliative care out-patient case conference (per unit)
K702	$37.05	Bariatric out-patient case conference (per unit)

Contraceptive		
G378	$47.50	Insertion of intrauterine contraceptive device
G552	$23.80	Removal of intrauterine contraceptive device

Endoscopy/Incision		
Z535	$36.80	Sigmoidoscopy with or without anoscopy- with rigid scope
Z543	$8.70	Anoscopy (proctoscopy)
Z545	$25.25	Thrombosed haemorrhoid(s)