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## COVID-19 PANDEMIC FREQUENTLY ASKED QUESTIONS

**Q: Should I be using 03.03X or the regular health service codes when I do visits over the phone for non-COVID patients?**

**A:** For all non-procedural office services provided over the phone (or telehealth, virtual care) you may choose to use either 03.03X or you may choose to continue billing the way you always have, with the same codes, modifiers, and facility number as per usual.

- 03.03X pays at the GP ME=CARE limited visit rate. Regular codes will pay at their regular rate.

**Q: What do I need to put in the text?**

**A:**

- For claims submitted as 03.03X, the start and stop time of the call is required in the text field of the claim.
- For claims submitted using regular billing codes, the method of delivery of the service along with the word “Pandemic” is required. i.e.: “Pandemic Telephone” or “Pandemic Telehealth”. Claims that *typically* require other text (i.e. counselling, complex care etc.) continue to require that text as per preamble guidelines.

**Q: What modifiers do I use for 03.03X?**

**A:**

- No modifier should be used for services provided via telephone.
- ME=TELE should be used for services provided via the telehealth network.
- ME=VTCR should be used for services provided over a PHIA compliant virtual care platform.

**Q: Can Nurse Practitioners bill for the 03.03X or other phone/virtual visits?**

**A:** Nurse Practitioners are not able to submit claims to MSI for any non-face to face services including but not limited to 03.03X. However, this does not mean NP’s can’t provide virtual care services. As NP’s are salaried employees who are employed and paid through NSHA, if an agreement is in place with their employer (NSHA), Nurse Practitioners may provide services over the phone or through virtual care services, they just cannot claim for that service through MSI.

**Q: What about walk-in clinics? Can a walk-in clinic submit claims for non-face to face services?**

**A:** No. Services provided at a walk-in clinic must be face-to-face.

**Q: Can I bill for prescription renewals provided over the phone?**

**A:** Visits solely for the purpose of providing a prescription renewal are not an MSI insured service. The clinical encounter, medical assessment and decision making regarding the patient’s management plan are insured services. If that results in a renewal of a prescription, then the service is insured just like it would be if provided face-to-face.

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## COVID-19 PANDEMIC FREQUENTLY ASKED QUESTIONS

**Q: Can I still bill for counselling and psychotherapy if it's provided over the phone?**

**A:** Yes. All non-procedural office based services that would normally be provided can still be provided via telephone, telehealth or virtual care. All preamble requirements and documentation guidelines remain in place, including the requirement to track and report the time spent providing the service. Please include the words "Pandemic" and the method of delivery in the text, i.e.: "telehealth".

**Q: Can group therapy be provided virtually?**

**A:** Group therapy can continue to be billed provided the service is provided via a PHIA compliant platform and all members follow current social distancing guidelines.

**Q: Can I claim consultations over the phone?**

**A:** Yes, where appropriate, consultations can continue to be claimed, even if provided over the phone. We do recognize that the ability to perform a comprehensive physical exam may be limited under these circumstances so we ask that *physicians do their best to fulfill these requirements via telehealth or virtual care when possible*. Otherwise, the usual preamble requirements apply. The claim can be submitted using regular codes 03.07 or 03.08 with the words "Pandemic" and the method of delivery in the text.

**Q: What about Nursing Home visits? Can these services be provided over the phone?**

**A:** Yes. To report a facility-based care service such a nursing home visit, the encounter must be one that would normally be rendered face-to-face due to medical necessity and that reason must be documented in the health record. If the patient is not capable of communicating on their own, the call may be done via a nurse or other care provider. The claim should be submitted using LO=NRHM with the same nursing home facility number as you usually would with the above noted "Pandemic" text in the text field.

**Q: Can I continue to bill for WCB services?**

**A:** Yes, WCB12, WCB28, and WCB31 visit and assessment services can continue to be billed as per normal billing guidelines. Please indicate the word "Pandemic" and the method of delivery, i.e.: "telephone" in the text. For 8/10, WCB26 can also be submitted as usual.

**Q: I am currently self-isolating out of province. Can I claim for patients I am providing services to virtually, i.e. PHIA compliant platforms, telephone, while I am out of the province?**

**A:** No. Physicians must be physically located in Nova Scotia in order to be eligible claim for telephone, telehealth, or virtual care services.

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## COVID-19 PANDEMIC FREQUENTLY ASKED QUESTIONS

**Q: What is the difference between telehealth and virtual care?**

**A:**

- Telehealth is a telemedicine platform that is operated via the provincial telehealth network. It is typically accessible via hospital outpatient department, where a physician is in a room with audio/visual equipment and connects virtually to a patient usually located in another hospital with telehealth access.
- Virtual care is provided using a PHIA compliant virtual care platform that is not associated with the provincial telehealth network. The platform must be approved by NSHA or IWK such as ZOOM or Medeo, and is typically accessible from the physician's office computer.

**Q: Do the phone calls to patients have to be scheduled?**

**A:** Yes, all services should continue to be booked as they normally would have prior to the pandemic.

**Q: I am not doing random urine drug screens for my patients for whom I claim monthly OAT supervisory codes. Can I still claim these services?**

**A:** HSCs, including the OAT codes, may only be claimed if all requirements are met. If random urine drug screens are not being carried out, the OAT supervisory codes cannot be claimed. The physician income stabilization program recently announced will help bridge some of the gaps with respect to health service codes that cannot be claimed during the pandemic.

**Q: Can I claim my face-to-face services using 03.03X or using virtual care modifiers?**

**A:** Face-to face visits cannot be claimed using the pandemic codes. These health service codes are only to be used for services provided over the phone or virtually.

**Q: Can I get a list of all the NSHA approved virtual care platforms?**

**A:** The approved NSHA virtual platforms include [Zoom](#) and [Medeo](#).