

K070 - Home Care Application - Billing Group Interpretation

Question

We have had an issue with a submitted K070 claim being rejected because “the ER physician is not the physician providing on-going medical care”.

Details

According to Mel, this has only occurred the one time after a claim was re-submitted to WSIB. The claim was rejected by WSIB (not OHIP)

Interpretation of Schedule (See Schedule wording below)

I suspect this is and will be an isolated rejected claim. If this becomes an ongoing concern we could claim that we do provide ongoing care by providing the patient the instruction to return to our care if our Home Care plan for the submitted condition needs re-assessment. As such, we do satisfy the requirements for this code.

Impact

EMA submitted approximately 870 K070 claims in 2010 = ~\$27 000
This is likely a gross under estimate due to lack of coding by members.

Action

Monitoring by EMA Billing Clerks

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Home care application

The service rendered by the most responsible physician for completion and submission of a home care service request form to a Community Care Access Centre (CCAC) on behalf of a patient for whom the physician provides on-going medical care. The amount payable for this service is as shown and is in addition to the assessment fee payable, where applicable. The amount payable for completion of the home care service request form if completed in whole or in part by a person other than the physician or the physician's employee is nil.

K070 Application..... **31.75**

