



FAMILY PRACTICE RENEWAL PROGRAM

COPD MANAGEMENT CODE (522)

Frequently Asked Questions

1. What is meant by 'longitudinal care'?

As designated primary care physician, the physician has indicated his/her commitment to an established longitudinal relationship with the patient, whereby the physician commits to the overall responsibility of the coordination of patient care needs. If the physician does not provide a particular service needed at any given time (e.g. Obstetrics), he/she coordinates the referral to a colleague who is able to provide that service in a shared care arrangement with the family physician.

2. Can other codes applicable to the office visit be billed in addition to COPD fee code 522 on the same day?

This code is an add-on to an office or hospital outpatient partial assessment or to a chronic disease management visit. This code is also payable as an add-on to the following visits which occur in a home or DHCS long term care facility: 210, 246a, 252, 285, 286a, 292.

3. The COPD code requirements indicate a COPD diagnosis, by spirometry, must be confirmed for the third billing. Can I bill COPD fee code for the third billing if spirometry has been ordered but the patient refuses the test?

No, if the patient refuses to take the test, billing cannot take place. However, if there is a medical reason why the patient is unable to perform Pulmonary Function Testing, documentation is required, and billing can proceed.

4. What is an example of a medical reason why the patient is unable to perform Pulmonary Function Testing?

Acceptable medical reasons why a patient may not be able to perform spirometry include anxiety or active tuberculosis but is not limited to these two reasons.

5. In a group practice, is COPD fee code 522 billable for care provided by a family physician in relation to the patient of another family physician within the practice for whom he/she is providing coverage?

Yes, to support a patient-centered approach, COPD fee code 522 is billable for care

provided by a family physician in relation to the patient of another family physician within the same practice for whom he/she is covering.

6. What is the maximum number of payments allowed per patient?

The code can be billed to a maximum of two billings per patient for a maximum of eighty patients per physician per billing year.

7. Is COPD fee code **522** billable by physicians who are working under salary, service contract or sessional arrangements?

No, physicians working under salary, service contract or sessional arrangement would not qualify.

8. Are locum physicians able to access COPD fee code **522** when covering for a family physician enrolled in this fee code program?

Yes, locums will be eligible to bill 522 if:

- a) **The physician for whom the locum is covering is already a registrant; AND**
- b) **The locum is providing a period of replacement that is greater than three months, with at least 20 days in one calendar month considered one month of replacement service.**

9. Do I have to see the patient on the same day to bill COPD fee code 522?

Yes, the billing is associated with the patient visit as there is an assessment component and use of the COPD visit template is required.

10. What does each billing require?

Minimum medical record requirements are as follows:

- **Completed date, name, and MCP number on the COPD Visit Template.**
- **Completion of the “Spirometry” section of the COPD Visit Template, indicating:**
 - a) **the COPD diagnosis has been confirmed by a post-bronchodilator FEV₁/FVC ratio of < 0.7; OR**
 - b) **a medical reason why the patient is unable to perform spirometry.**
For example, acceptable medical reasons why a patient may not be able to perform spirometry include anxiety or active tuberculosis, etc.; OR
 - c) **spirometry has been ordered. Please note that if this option is chosen, it is only valid for the first two billings of fee code 522. For the third billing, one of a) or b) above must be satisfied for billing to proceed.**
- **Completion of the “Exacerbations” section of the COPD Visit Template.**

11. How do I start billing the code?

If you are not registered in the FPRP Fee Code Program:

- i) **If you have not already registered for FPRP's fee codes, please click [here](#) and follow the instructions.**

If you are already a registrant in the FPRP Fee Code Program:

- ii) **If you have the Med Access EMR: Please click [here](#) for a user guide with detailed instructions on accessing and using the Provincial COPD visit template. Please click [here](#) for an instructional video relating to use of the visit template.**
- iii) **For Non-Med Access EMR Users (i.e. other EMRs, paper-based clinics): click [here](#) to access a downloadable PDF of the COPD visit template.**

12. Can COPD Management Code 522 be billed in addition to Patient Care Telephone Code 521 and Shared Care Code 520 for the same patient on the same day?

Yes, though it is unlikely a patient would receive an in-office and telephone visit on the same day, all three codes can be billed for the same patient on the same day, if code conditions for each code are met.

13. Where can I find links to relevant COPD billing resources for family physicians?

The following links/resources are available on the Family Practice Renewal Program website:

- [One-Pager: COPD Code](#)
- [Visit Template User Guide](#)
- [Visit Template Instructional Video](#)

14. What types of financial supports are available for patients with COPD?

- **Some pharmaceutical companies have 'compassion' programs for medication coverage or may provide samples for eligible patients. Consult with the applicable company for specifics.**
- **Some patients may be eligible for a Disability Tax Credit. For more information visit: [T2201 Disability Tax Credit Certificate - Canada.ca](#)**
- **Some patients may also be eligible for nutritional support through the Government of NL.**

15. What additional resources are available relating to care of patients with COPD?

Please click [here](#) for useful links for COPD patient care including advance care plans, guidelines and protocols, patient guides, inhaler technique resources, pack year calculator, smoker's help line website, etc.