



Pandemic-Related Professional Billing Codes

Purpose

The Connect Care Professional Billing team continues work on changes to Professional Billing that are contemporaneous with the COVID-19 pandemic and changes the Schedule of Medical Benefits. This crib-sheet is updated to reflect Alberta Health directives and Connect Care service code navigator changes.

Pandemic-specific Billing Changes

- **Telephone Advice (03.01AD)** – available in Connect Care to claim for telephone or other remote encounters to provide care and support specific to COVID-19 conditions or concerns. [FAQ]
- **Virtual Care** – available to support virtual visits (03.03.CV, 03.03FV), virtual consultation (03.08CV, 08.19CX) and virtual mental health services (08.19CV, 08.19CW) retroactive to March 17, 2020. [FAQ]
- For any claims that may need to be resubmitted with the new billing codes, physicians are requested to connect with their biller who will receive instructions on modifying claims that have already been sent.

Cotemporaneous Billing Changes

- **Claim Submission Time Limit** – Effective March 31st, all claims will need to be sent to Alberta Health within 90 days (includes resubmissions). Billers and billers' supervisors are aware of this change and are working to eliminate backlogs.
 - Physicians are encouraged to enter any outstanding billing information from 2019 so their biller can submit as soon as possible. Claims may still be sent with the original 180-day timeline if the clinical date of service is prior to March 31st, 2020.
- **Facility Based Codes** – New “Z-codes” will be active on March 31st, 2020. The billing team will monitor if physicians input the incorrect code. Some additional guidance is required from Alberta Health affecting a small group of providers, with workarounds in place pending decisions.
- **Comprehensive Annual Care Plans** – This billing code will be removed from Connect Care for patients with a date of service on or after March 31st. The code will remain available for encounters on or prior to March 30th.
- **Good Faith Claims** – The ability to register patients with Good Faith coverage will be removed from Connect Care for patients with a date of service on or after March 31st. This option will remain available for encounters on or prior to March 30th.
- **Daily Visit Cap** – This change is awaiting further guidance from Alberta Health. Workarounds are in place for affected provider groups and will be handled by billers.
- **Driver Exams** – This will move to the uninsured procedure list as of March 31st for Albertans 74.5 and older. Self-pay workflows will be used thereafter.

Rescinded Billing Changes

- **Complex modifiers** – Changes were announced and then rescinded. Connect Care physicians will not experience any changes.

Resources

- [Manual: Professional Billing](#)
- [FAQ: Professional Billing](#)
- [Support: Professional Billing](#)