

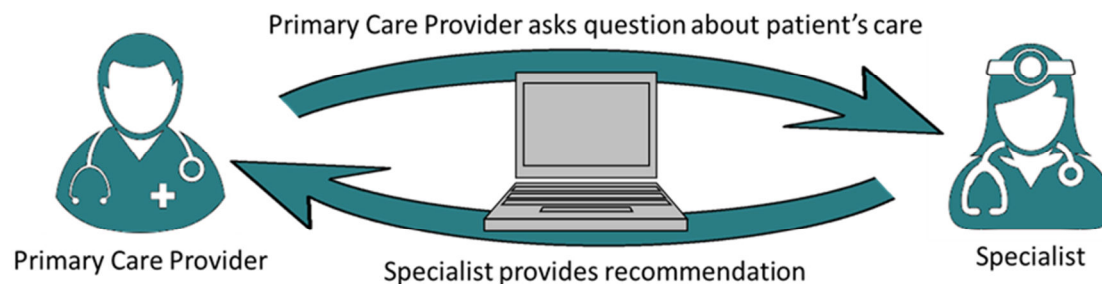
## Payment

### **Position Statement**

As eConsult services expand across Canada, new payment models are needed to ensure providers are appropriately remunerated.

### **What is eConsult?**

An eConsult service is an online application that supports prompt, secure communication between primary care providers (PCP) and specialists. PCPs log on and submit a question concerning a patient's care. Specialists respond with advice, recommendations for referral, or requests for additional info.



### **Remuneration for Providing eConsult Services**

Payment for eConsult services varies between services, clinics, and jurisdictions. Different models have been attempted, including fee-for-service, session fees, and salaried models. On the payer side, the rate for eConsult varies between jurisdictions, with some provinces/ territories having adopted fee codes for eConsult (see Table).

Some eConsult services remunerate providers using their own system (e.g. Champlain BASE™ pays most specialists \$200/hour prorated to time spent completing a case, with some variation based on individual payment models). As eConsult services become more common, a more concrete, streamlined approach will be necessary to support clear and reasonable remuneration strategies.

### **Recommendations/Key Considerations**

Policymakers and innovators must work together to develop new policies that clearly outline how health care providers are paid for eConsults. Key steps include:

- Developing a consistent set of fee codes for eConsult, which providers can use to bill the provincial/federal government as they do for other services. For guidance, look to provinces that have already established fee codes for eConsult services (e.g. Alberta).
- Encouraging consistency between jurisdictions. Creation of a national set of fee codes may raise significant policy challenges, but coordination between provinces/territories would facilitate eConsult's use across borders.
- Accounting for interjurisdictional eConsults by adopting a "payment follows patient" policy, with the patient's home jurisdiction ultimately responsible for covering the cost of their care.
- Engaging ministries of health, medical associations, and regulatory colleges from participating provinces/territories to create a consistent approach to provider remuneration.

**Table: Fee codes in each province/territory for eConsult and teleconsult services\***

Province/ Territory	Teleconsult		eConsult		In-Person
	Referring Physician	Consultant	Referring Physician	Consultant	Consultant
<b>NU</b>	N/A - physicians are paid sessional rates or via term contracts <sup>1</sup>				
<b>NT</b>	N/A	\$17.47 <sup>2a</sup> or \$29.13 <sup>2b</sup>	N/A - physicians are salaried		
<b>YT</b>	No	\$37.50 <sup>3a</sup> or \$41.60 <sup>3b</sup>	No	\$36.80 <sup>3c</sup> or	\$101.60 - \$468.00
<b>BC</b>	\$40.00 <sup>4a</sup>	\$15.14, <sup>4b</sup> \$15.16, <sup>4c</sup> \$40.00 <sup>4d</sup> or \$60.00 <sup>4e</sup>	No	\$10.10	\$64.00 - \$233.91
<b>AB</b>	\$32.90 - \$45.21 <sup>5a</sup>	\$77.35 - \$135.13 <sup>5a</sup> , \$17.23 - \$27.83 <sup>5b</sup> , \$17.23 <sup>5c</sup>	\$32.43	\$76.27	\$77.25 - \$241.82
<b>SK</b>	No	\$50.50 (major), \$20.40 (minor), <sup>6a</sup> or \$12.50 <sup>6b</sup>	No	\$12.50 <sup>6b</sup> or \$20.40 <sup>6c</sup>	\$61.20 - \$229.40
<b>MB</b>	\$15.35 <sup>7a</sup>	\$15.35, <sup>7b</sup> \$47.50, <sup>7c</sup> \$60.00 <sup>7d</sup>	No	\$15.35 <sup>7b</sup>	\$74.05 - \$252.60
<b>ON</b>	\$31.35	\$40.45	\$16.00	\$20.50 <sup>8a</sup>	\$65.90 - \$199.40 <sup>8b</sup>
<b>QC</b>	\$26.00 <sup>9a</sup>	\$17.00, <sup>9b</sup> \$35.00 <sup>9c</sup> or	No	No	\$74.05 - \$404.00
<b>NB</b>	No	No	No	No	\$100.00 - \$200.00
<b>NS</b>	\$27.83 <sup>10</sup>	\$60.50 <sup>10</sup>	No	No	\$150.04 <sup>10</sup>
<b>PE</b>	No	\$45.00 <sup>11</sup>	No	No	\$80.00 - \$205.00
<b>NL</b>	No	No	No	\$50 <sup>12</sup>	\$50.51 - \$250.00

- No information available regarding the provision of specialist services
- Physicians are salaried. Consultants from outside NT can bill NT as follows: a. Teleconference from physician, nurse practitioner (NP) or midwife; b. Review of imaging by a non-radiologist
- a. Telephone calls from community NPs to physicians providing scheduled emergency coverage in the hospital; b. Remote communication from physician; c. Remote communication from non-physician
- a. Billable only by a referring physician who is a general practitioner (GP); b. Calls initiated by a Community Health Representative from a First Nation Community; c. Remote communication from non-physician; d. GPs who are the consulting physician for a call from an NP; e. GPs with specialty training
- a. Telecommunication between physicians; b. Telecommunication initiated by select types of non-physicians; c. Telecommunication initiated by a pharmacist. Prices for a and b vary depending on time of day.
- a. In SK, the consultant may bill for a major or minor telephone assessment – for a major assessment, the consultant must provide a written submission of the consultant’s opinion and recommendations to the referring physician; for a minor assessment, the consultant may respond by telephone, fax or email. Remote telephone calls from nurses are billed at the minor rate; b. Communication with non-physicians via phone, fax or email; c. Consultant may respond to minor telephone request by e-mail
- a. Referring physicians can bill for telephone consultations with psychiatrists only; b. remote communication from other healthcare providers; c. billable by Psychiatrists if response is made within 48 hours; d. billable by Psychiatrists if response is made within 2 hours.
- a. Only dermatologists and ophthalmologists can bill "E-Assessments," an opinion and/or recommendation provided electronically through a secure server (e.g. secure messaging, electronic medical record). The consultant may choose to return their opinion by telephone; however, a written opinion must be provided electronically or by mail. These specialties can bill \$44.45 and \$45.85, respectively; b. Billable only when patient is referred by a physician or an NP
- a. Billable only by a referring physician who is a specialist; b. Billable when initiated by a pharmacist; c. Billable when initiated by a specialist or a non-physician (not billable when initiated by a GP); d. Billable by psychiatrists only
- Gastroenterology (GI) pilot only – in place since April 2013. The in-person consultation fee is for GI specialists only
- Only for internal medicine, pediatrics, dermatology and out-of-province specialists
- Consulting specialists are paid on a pro-rated basis of \$200/hour (average consult is 15 minutes)

\*Reprinted with permission from authors. Original source: Stanistreet K, Verma J, Kirvan K, Drimer N, Liddy C. Physician Remuneration for Remote Consults: An Overview of Approaches across Canada. Healthcare quarterly (Toronto, Ont). 2017;20(3):12.