

SECTION G:

MEDICAL GENETICS^

		Fee	Anae
Visits			
5G	Genetic Assessment -- includes the history of the presenting condition, the genetic history of the patient and of the family, examination of the affected part(s) or system(s) including any special techniques, diagnosis, necessary treatment, advice to the patient and record of service provided	\$176.00	
7G	Follow-up Assessment All Follow-ups if a Visit -- Not Counselling -- may include a review and update of the recorded genetic history, the necessary examination, review of diagnostic findings, necessary treatment, advice to the patient and record of service	\$119.00	
9G	Consultation -- includes all visits necessary, history and examination, review of the laboratory and/or other data and written submission of the consultant's opinion and recommendations to the referring doctor	\$340.00	
11G	-- repeat A formal consultation for the same or related condition repeated within 90 days by the same physician. It should not be used for routine follow-up of the patient for which either service code '5' "partial assessment or subsequent review" or service code '7' "follow-up assessment" are appropriate.	\$164.00	
13G	Review of Genetic Information -- Review of clinical information for patients seen exclusively by a genetic counsellor for the medical geneticist. Dictated letter generated from the visit must indicate medical geneticist involvement. Patient chart must include note that clinical information was reviewed by medical geneticist. Not payable if patient seen by geneticist within 30 days.	\$102.00 *	
Hospital Care (Payable on day of admission)			
25G	-- first 10 days, per day	\$62.00	
26G	-- 11-20 days, per day	\$62.00	
27G	-- 21-30 days, per day	\$60.00	
28G	-- thereafter, per day	\$60.00	

Note: for hospital discharge by physicians, see code 725A, Section A.

Procedures

Additional payments for diagnostic service excluding ECG's, 0, 10 or 42 day operative procedures performed on patients under one (1) year of age are automatically calculated and paid as explained in calculated and paid as explained in

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Genetic Interview or Counselling^

Billed in the name of the patient and indicating person interviewed and relationship to the patient

31G	Interview with other than the patient to complete the genetic history	\$60.80	
Counselling -- individual or family			
38G	-- for each complete 30 minutes	\$155.00	
39G	-- each additional 15 minutes or part thereof	\$77.40	
40G	Chromosome analysis -- interpretation only	\$144.00 *	D
Determination of probability of			
43G	-- zygoty in twins	\$66.60	D
50G	Genetic examination of the products of conception (fetus and/or placenta) following intrauterine fetal death or pregnancy termination for multiple congenital anomalies -- includes visit (only payable to physicians with appropriate genetic training)	\$340.00	0

^ This section is restricted to those physicians who have been designated by the Council of the College of Physicians and Surgeons as eligible to receive payment for these services.