HEMATOLOGY AND ONCOLOGY

These listings cannot be correctly interpreted without reference to the Preamble.

Referral Cases

33510 Consultation: To consist of examination, review of history, laboratory, X-ray findings, and additional visits necessary to render a written report .................................................. 183.40

33512 Repeat or limited consultation: Where a consultation for same illness is repeated within six months of the last visit by the consultant, or where in the judgment of the consultant the consultative services do not warrant a full consultative fee ........................................................................................................ 88.00

33514 Prolonged visit for counselling (maximum, four per year) ........................................ 54.47

Note: See Preamble, Clause D. 3. 3.

Group counselling for groups of two or more patients:

33513 - first full hour ........................................................................................................ 111.57
33515 - second hour, per 1/2 hour or major portion thereof ............................................ 55.75

Continuing care by consultant:

33506 Directive care ........................................................................................................ 62.00
33507 Subsequent office visit ......................................................................................... 48.49
33508 Subsequent hospital visit .................................................................................. 28.58
33509 Subsequent home visit ....................................................................................... 51.03
33505 Emergency visit when specially called ................................................................ 113.09

(not paid in addition to out-of-office-hours premiums)

Note: Claim must state time service rendered.

Examination by Certified Hematologist and Oncologist

33538 Plasmapheresis – therapeutic ........................................................................... 136.91

Diagnostic Procedures - Needle Biopsy Procedures

ST00748 Bone biopsy under local/regional anesthetic .................................................. 61.31

Puncture Procedure for obtaining body fluids (when performed for diagnostic purposes)

S00753 Marrow aspiration - procedural fee ................................................................. 42.93 2

Chemotherapy

a) Where a patient has been administered high intensity cancer chemotherapy, the fees for limited cancer chemotherapy are not payable within the interim of 28 days.

b) Hospital visits are not payable on the same day.

c) Visit fees are payable on subsequent days, when rendered.

d) A consultation, when rendered, is payable in addition to fee item 33581, high intensity cancer chemotherapy, in situations where it is important that chemotherapy be administered immediately, e.g.: for out of town patients. A letter of explanation is required when both services are performed on the same day.

e) The administering of chemotherapy via intrathecal and intrabladder methods is payable under the chemotherapy listings. Other methods of administration, such as oral and rectal, are not payable under these listings.
33581 **High intensity cancer chemotherapy:**
To include admission history and physical examination, review of pertinent laboratory and radiological data, counselling of patient and/or family, venesection and institution of an intravenous line, and administration of a parenteral chemotherapeutic program which must be given on an in-patient basis..............................199.36

*Note:* This service is not payable more frequently than once every 28 days.

The following treatments fall into this category:

a) chemotherapy for acute leukemia;

b) chemotherapy utilizing cisplatinum given in a dose exceeding 50 mg/m² per treatment;

c) chemotherapy utilizing isophosphamide in combination with bladder protector Mesna;

d) chemotherapy using DTIC in a dose exceeding 100 mg/m²;

e) chemotherapy utilizing methotrexate in dose exceeding 1 g/m² (and combined with the folinic acid rescue regimen);

f) chemotherapy using continuous infusion technique exceeding a period of 8 hours per session (except for the infusional 5-FU treatment protocol).

33582 **Major Cancer Chemotherapy:**
To include history and physical examination as necessary to document disease status, review of pertinent laboratory and radiological data, counselling of patient and/or family, venesection and institution of an intravenous line and administration of multiple parenteral chemotherapeutic agents .................................................................116.91

*Note:* This service is not payable more than once every 7 days.

33583 **Limited Cancer Chemotherapy:**
To include the administration of single parenteral chemotherapeutic agents, history and physical examination as necessary to document disease status, counselling of patient and/or family, review of pertinent laboratory and radiologic data, venesection and institution of an intravenous line ...............................................................66.80

*Note:* This item is not payable more than once every 7 days. Neither is it to be billed for routine IV push administration of 5-flourouracil as a single agent.