

# FHO+ hourly rate reference guide

For examples of tasks in each category, refer to page two.

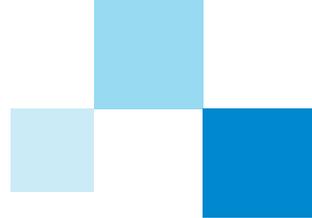
Hourly rate category	Notes	Fee code	Rate	Tips
<b>Direct care</b> In office: in-person, virtual video and telephone  Out-of-office: virtual video		Q310 - Direct Patient Care - In-Person or Video	\$80/hr	<ul style="list-style-type: none"> <li>Hourly rate applies to enrolled patients only</li> <li>Document hours daily</li> <li>Document the total times for each category per day, no per patient</li> <li>Maximum of 14 hours per day, 240 hours per 28 days (pro-rated for each month)</li> <li>Maximum 25% of total hours per month can be for indirect care and clinical administration (together)</li> <li>Maximum 5% of direct care and indirect care hours per month can be for clinical administration</li> <li>Note that the hourly rate is billed in 15-minute units, calculated cumulatively across the day. Any remainder of eight minutes or more should be rounded up to a full 15-minute unit</li> <li>In addition to the hourly rate, you can continue to bill applicable fee codes for each service</li> </ul>
<b>Indirect care</b> Time spent on patient-specific tasks without direct contact, in or out-of-office	Document a daily summary list of tasks performed	Q312 - Indirect Patient Care	\$80/hr	
<b>Clinical administration</b> Time spent on patient-specific tasks that require physician expertise but do not involve direct contact, in or out-of-office	Document a daily summary list of tasks performed	Q313 - Clinical Administration Time	\$80/hr	
<b>Direct care</b> by telephone when out-of-office		Q311 - Direct Telephone-based Patient Care - Not in Office	\$68/hr	

## Maximum daily limits per month

The maximum number of hours payable per single day is 14. The maximum number of hours payable per month is 240 hours per 28 days, prorated by the number of days per month.

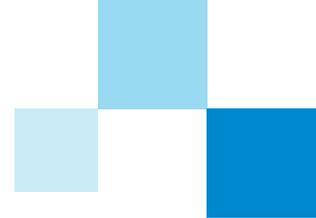
Month	Maximum number of hours payable per month
Jan., Mar., May, Jul., Aug., Oct., Dec. (31 days)	265.7
Apr., Jun., Sept., Nov. (30 days)	257.1
Feb. (28 or 29 days)	240 or 248.6 in a leap year

For full details on the hourly rate, refer to: [FHO+ model hourly rate | OMA](#)



## What is eligible for the hourly rate?

	Eligible	Not eligible
Direct patient care	<ul style="list-style-type: none"> <li>✓ Time spent <b>personally delivering insured clinical services to enrolled patients</b>, including enrolled patients in <b>long-term care and home visits</b></li> <li>✓ <b>In-person and virtual care</b></li> <li>✓ Clinical <b>teaching done concurrently</b> with patient care</li> </ul>	<ul style="list-style-type: none"> <li>✗ <b>Care provided outside of the usual family practice setting</b> (for example, services provided in emergency departments)</li> <li>✗ <b>Care delivered by another team member</b> (for example, delegated tasks, such as immunizations and injections done by nurses)</li> <li>✗ Care provided to <b>non-enrolled patients</b></li> <li>✗ Care that involves <b>uninsured services</b> (e.g. cosmetic procedures, etc.)</li> </ul>
Indirect patient care	<ul style="list-style-type: none"> <li>✓ <b>Paperwork</b> (e.g. charting; referrals and requisitions; completing clinical forms excluding third-party requests)</li> <li>✓ <b>Coordinating and planning care</b> (e.g. chart reviews; reviewing labs, imaging, consult notes)</li> <li>✓ Conferencing, consulting and meeting with <b>other physicians and healthcare professionals</b> for a specific patient or patients</li> <li>✓ Conferencing and meeting with <b>family members</b> and/or patient medical representatives</li> <li>✓ <b>Discussion with, and providing advice and information</b> to the patient or the patient’s representative that is an insured service directly related to pre- or post-direct patient care, via synchronous or asynchronous care communication</li> <li>✓ <b>Reviewing clinical information or research</b> directly related to the needs of a particular patient</li> <li>✓ <b>Patient-specific clinical teaching</b> arising from direct patient care</li> </ul>	<ul style="list-style-type: none"> <li>✗ <b>Work related to uninsured services</b> (e.g. doctor’s notes, insurance forms, etc.)</li> <li>✗ Travel time</li> </ul>
Clinical administrative	<ul style="list-style-type: none"> <li>✓ <b>Proactive patient population management</b> (e.g. screening rate, chronic disease care gaps in patient population)</li> <li>✓ <b>EMR updates</b> requiring physician expertise</li> <li>✓ <b>Quality improvement initiatives</b></li> </ul>	<ul style="list-style-type: none"> <li>✗ Non-clinical administrative <b>tasks related to clinic management</b> (e.g. HR, finance, supply ordering)</li> <li>✗ Time spent <b>documenting your hours</b></li> </ul>



## Examples of how to apply the hourly rate:

Example scenarios:	For the hourly rate, the physician would bill:
<p>1. Dr. Sally sees patients in her office from 9am-12pm (3hrs). In the afternoon from 1-3pm (2 hrs.) she does virtual care by phone from her office, and from 3-4:30pm (1.5 hrs.) she reviews patient charts and labs.</p>	<ul style="list-style-type: none"> <li>■ 5 hours of direct care</li> <li>■ 1.5 hours of indirect patient care</li> </ul>
<p>2. On Fridays, Dr. Sally works from home. She does virtual care by phone from 9-10:30am (1.5 hrs.), but her appointment from 10-10:30am (.5 hrs.) is with a non-enrolled patient. Then from 10:30am-1pm (2.5 hrs.) she catches up on paperwork.</p>	<ul style="list-style-type: none"> <li>■ 1 hour of direct care by phone out-of-office</li> <li>■ 2.5 hours of indirect care</li> </ul> <p>She would not bill the hourly rate for the time spent with the non-enrolled patient.</p>