
Appendix C – Goods, Administration, and Other Codes (GAP). March 2011

What are GAP Codes?

GAP codes were developed by Insurance Bureau of Canada in conjunction with automobile insurers and health care providers to cover those items billed to automobile insurers by providers that are not covered by the Canadian Classification of Health Interventions (CCI) or may be more efficiently coded using the GAP codes.

Items that may fall outside of the realm of a medical / rehabilitation procedure, intervention, or service, are coded by providers using GAP codes. These include: goods, supplies, assistive devices, mileage, travel time, pre-approved framework reimbursement codes, telephone consultation between the Insurer Examiner and the proposing health practitioner and session codes. These GAP codes are also used to identify various types of assessments and examinations including: Insurer Initiated Examinations, and Health Care Provider Initiated Examinations (for treatment and rehabilitation purposes)

The hierarchical coding structure of GAP codes is similar to CCI codes to allow summarizing at various levels. GAP codes can be immediately distinguished from CCI codes by the leading alphabetic character, as all CCI codes begin with a numeric code.

PROVIDERS SHOULD CONTACT THEIR ASSOCIATIONS FOR GUIDANCE WITH CODING.

GAP Code Structure

The code structure of GAP codes is modeled after 5-digit CCI base codes.

GAP Base (Mandatory)		
Position 1	Position 2-3	Position 4-5
Section	Group	Intervention

GAP codes include the following broad categories:

Section Code	Section Description
A	Administrative Charges
G	Goods and Supplies
H	Health Provider Initiated Examinations (Sec 24)
I	Insurer Initiated Examinations (Sec 42)
M	Minor Injury Guideline
P	Pre-approved Frameworks
S	Session Codes
T	Telephone Consultation between Insurer Examiner and Proposing Health Professional (Sec 24.1)

Presentation Format

The presentation format for a GAP code includes a decimal after the Section code and Group code. HCAI will accept codes with or without decimals. As GAP codes are immediately distinguished from CCI codes by the leading alphabetic character, there is never a need for an asterisk.

Data Storage and Transmission (for Practice Management Software)

Decimals should not be included in machine-readable data. The current maximum length of a GAP code is 5 alphanumeric characters.

Using Session Fee Codes

Session Fee codes are billing codes that providers may wish to use for a group of **physical** rehabilitation services. If the insurer approves use of the Session Fee and the Treatment Plan contains a complete description of each of the interventions included (bundled) in a Session, these codes allow you to use a session fee code on the invoice, thereby eliminating the need to itemize each service or intervention rendered on each specific date of service.

NB: Use of session codes in the invoice is limited to those facilities that have obtained insurer approval through the Treatment Plan (OCF-18). Failure to supply details of the proposed component interventions will be considered incomplete.

A physical rehabilitation Session Fee code:

- Can be proposed on a Treatment Plan for an injury requiring these services, providing the injuries are not subject to a Guideline (such as MIG).
- Session Fee codes may not be used in conjunction with Guideline treatment, nor can they be used to replace a Guideline.
- Session Codes may only be used for physical rehabilitation treatments such as manual therapies, exercise, education, and other physical interventions.
- When Session Fee codes are used on invoices, any physical rehabilitation modalities and interventions over and above the Session Fee codes are not separately reimbursable.

The fees that are declared on the treatment plan should be clear and allow comparison with the Superintendent of Insurance's professional fee guidelines. As well, they should appropriately reflect the provider-to-patient ratio for services rendered in group settings. Component interventions should clearly indicate the provider rendering the service, the cost of the service, and, where appropriate, the amount of time spent with the patient by each provider. As described in the next paragraph, there are some circumstances where the time spent is not required. **The total cost of the session is the sum of the component services or interventions.**

While the session code must be used with the unit measure "SN", the services bundled in the session should be coded with time (HR) as the unit measure for health care services and interventions when they have historically done so. This means that use of the 'pr' code for procedure should be limited to interventions where there is a history of invoicing on a procedure basis – examples of this are radiology, manipulation, forms completion. The compensation rate for interventions coded as 'pr' should be consistent with the intent of the Superintendent's fee guidelines.

Sample Session (web application)

Part 12: Proposed Goods or Services Requiring Insurer Approval

To the extent possible, this Treatment and Assessment Plan should include all Goods & Services contemplated by the Regulated Health Professional/Facility referred to in Part 5 for the period of this Treatment and Assessment Plan. Please fill out all Goods and Services and associated information. To create a session, select the check box for each Goods & Services to be included in this session and then click the Create Session button. To delete any items from a session code, select the session code in question and use the Separate Session button. If HST applies to a good or service, check Proposed Tax checkbox on that line item.

SEPARATE SESSION

GS Ref#	Code	Description	Provider Reference	Quantity /Measure	Cost/Day	Total Count	Total Cost	Proposed Tax
<input type="checkbox"/>	1	SZZPR	Physical Rehabilitat...	1	SN	80.04	12	
	1SJ02	"Exercise, back NEC"	John.Wilson	0.25	HR	26.68		<input type="checkbox"/>
	1SC05	"Manipulation, spina..."	John.Wilson	0.25	HR	26.68		<input type="checkbox"/>
	1SG09	"Stimulation, muscle..."	John.Wilson	0.25	HR	26.68		<input type="checkbox"/>

Sample Session (DEC Users)

Part 12 Proposed Goods or Services Requiring Insurer Approval	G/S Ref	Description	*Code	*Attribute	Provider Ref	Estimated			Projected	
						Quantity	*Measure	Cost	Total Count	Total Cost
	1	Assessment	HXXMR		B	1.5	HR	141.55	1	141.55
	2	Cold Pack	GXX18		B	1	GD	10.00	1	10.00
	3	Education	7SP80		B	.75	HR	70.78	6	849.36
	4	Session	SZZPR		A	1	SN	33.59	12	177.15
	5	Wrist exercise	1UB02		A	.5	HR	47.19		0.00
	6	Wrist mobilization	1UB04		A	.25	HR	25.59		0.00
	7	Education	7SP80		B	.75	HR	70.78		0.00

To the extent possible, this Treatment and Assessment Plan should include all goods and services (G/S) contemplated by

Treatment Plan with Session Codes

The fee for treatment sessions is indicated with the goods and service reference number and session code as shown in the examples above. The interventions or procedures which will be rendered in the sessions are itemized but have no separate goods and service reference number, as they will not be itemized when invoicing.

Invoice with Session Codes

Providing the insurer has previously agreed, when invoicing, the provider need only indicate the date of the session, the session code, the providers involved in rendering services each day and the approved session fee.

GAP Code List

Code	Description	Unit Measure
A	<u>Administrative/Other Services</u>	
AXXCN	Cancelled Appointment	PR
AXXCT	Claimant Transportation	HR, KM, PR
AXXKM	Mileage (Provider to treatment)	KM
AXXNS	Missed Appointment ("no show")	HR, PR
AXXOT	Other (Be sure to provide description in narrative part of form)	HR, PR, PG
AXXTT	Travel Time (Provider to treatment)	HR
Note: Claimant translation services can be coded with the CCI code: 7SF19		
H	<u>Health Provider Initiated Examinations and reports (Sec 25)</u>	
HXXAC	Attendent Care	PR, HR, PG
HXXCA	Catastrophic	PR, HR, PG
HXXCO	Combined Assessments (addressing more than one type of benefit application)	PR, HR, PG
HXXDI	Disability Pre 104 weeks	PR, HR, PG
HXXMR	Med/Rehab	PR, HR, PG
HXXPW	Disability Post 104 Weeks	PR, HR, PG
I	<u>Insurer Initiated Examinations and reports (Sec 44)</u>	
IXXAC	Attendent Care	PR, HR, PG
IXXCA	Catastrophic	PR, HR, PG
IXXCO	Combined Assessments (addressing more than one type of benefit application)	PR, HR, PG
IXXDI	Disability Pre 104 weeks	PR, HR, PG
IXXMR	Med/Rehab	PR, HR, PG
IXXPW	Disability Post 104 Weeks	PR, HR, PG
IXXDR	Involvement in subsequent dispute resolution	PR, HR, PG
M	<u>Minor Injury Guideline Block Billing Codes</u>	See Appendix D
P	<u>Pre-Approved Framework Block Billing Codes (only for MVA PRIOR to Sept 1, 2011)</u>	See Appendix D
S	<u>Session Codes</u>	
SZZPR	Physical Rehabilitation	SN
T	<u>Telephone Consultation between Insurer Examiner and Proposing Health Professional</u>	
TXXTC	Telephone consultation between Insurer Examiner and Proposing Health Professional	HR, PR
G	<u>Goods and Supplies</u>	
GXX01	Back Roll	GD
GXX02	Back Support (e.g. back support with rigid shell))	GD
GXX03	Bath Bench	GD
GXX04	Bath Scrubber (long-handled)	GD
GXX05	Bath Tub Seat	GD
GXX06	Brace	GD
GXX07	Cane	GD

Code	Description	Unit	Measure
GXX08	Collar (cervical)	GD	
GXX09	Crutches	GD	
GXX10	Dusting Device (long-handled)	GD	
GXX11	Educational Material (handouts, books)	GD	
GXX12	Elastic Bandage	GD	
GXX13	Ergonomic Mat	GD	
GXX14	Exercise Equipment	GD	
GXX15	Gloves (protective and therapeutic)	GD	
GXX16	Heat Lamp	GD	
GXX17	Heat Pad	GD	
GXX18	Hot/Cold Gel Pack	GD	
GXX19	Laundry Bag – mesh	GD	
GXX20	Long-handled Reacher	GD	
GXX21	Lumbar Support (high)	GD	
GXX22	Lumbar Support (low)	GD	
GXX23	Massager (personal)	GD	
GXX24	Orthopaedic Devices	GD	
GXX25	Orthotic Devices	GD	
GXX26	Pillow (aqua)	GD	
GXX27	Pillow (cervical)	GD	
GXX28	Pails/Mops (light weight)	GD	
GXX29	Shower Hose/Head (hand held)	GD	
GXX30	Sleep Roll	GD	
GXX31	Sling	GD	
GXX32	Splint	GD	
GXX33	Stool	GD	
GXX34	TENS Unit	GD	
GXX35	TENS Unit Accessories	GD	
GXX36	Therapy Ball	GD	
GXX37	Toenail Clipper - long reach	GD	
GXX38	Toilet Seat (raised)	GD	
GXX39	Traction Equipment	GD	
GXX40	Vacuum Cleaner (light weight)	GD	
GXX41	Walker	GD	
GXX42	Wristband	GD	
GXX99	Other (be sure to provide description in narrative part of OCF)	GD	