

Billing Information Sheet

Why use the 55B Billing Code

Overview:

The 55B physician billing code is used to measure the time from when a patient is referred to a specialist to when the patient sees the specialist for their first consult appointment. It enables the health system to measure and report on how long patients wait to see a specialist in a particular specialty (Wait 1).

Regular use of this code (where appropriate) contributes to better data and enables the health system to make improvements to achieve better wait time results.

What happens when I use 55B instead of 5B?

The 55B fee code pays the Primary Care Providers (PCP) the same as the 5B partial assessment fee code. What is different is the 55B starts a wait time clock for your patient in the billing system. Using the 55B billing code tells the billing system that the patient's appointment resulted in a referral to a specialist. An algorithm in the billing system will monitor that referral until the patient is seen by the specialist.

When the specialist sees the patient and submits their claim, the wait time clock stops and the algorithm measures the lapsed time. Those results are aggregated with the results of other patients referred to that same speciality to create a wait time measure for each specialty.

In 2018 enhancements were made to the software used to calculate specialist's wait times. The revised data was validated with multiple specialist's offices and found to be 96 per cent accurate at the median (50th percentile) and 77 per cent accuracy at the 75th percentile.

To find out more information about the 55B billing code, please contact the Medical Services Branch.