

Vancouver PCN Attachment Reporting for Family Physicians and Nurse Practitioners

Vancouver PCN Attachment Reporting for Registered Nurses in Primary Care Clinics

What is Attachment Reporting?

All clinics with a Primary Care Network (PCN) Registered Nurse (RN) are expected to attach 500 patients in total over the course of 3 years. These patients will be attached to existing Family Physicians (FPs) or Nurse Practitioners (NPs) in the clinic. To confirm attachments, new patients should be coded in the EMR with the zero-sum attachment code as described in the PCN Service Plan Approval.

Why does the program require Attachment Reporting?

The attachment code allows the PCN to record how many new patients are seen by the FP/NP and is a key component of the Ministry's evaluation process. Data collected through the submission of attachment records will be used for tracking, and measuring attachment against the PCN's objectives.

Who is required to Attachment Report?

FP's and NP's in the clinic with a PCN RN are required to use the attachment codes with all newly attached patients regardless of whether they are utilizing the services of the PCN RN or not.

When is Attachment Reporting Required?

Providers must start attachment coding from the start date of the PCN RN in their clinic. The attachment code must be submitted within 90 days of attaching a new patient.

PCN Attachment Code

As of February 1st, 2024 all FPs and NPs participating in the PCN are required to use the same zero-fee attachment code to identify new patients who are attached to their practice as described in the PCN Service Plan Approval.

Attachment Code	98990
------------------------	--------------

What information is included in an attachment record?

- Patient's Name (and PHN)
- Practitioner Number (MSP/clinic payee number)
- Service Location Code
- Service Date
- Payment Method/Status
- Attachment Code 98990
- International Classification of Diseases (ICD)-9 diagnostic codes (1 code mandatory, 3 maximum)
- Location code (L –Longitudinal Primary Care Practice)

Vancouver PCN Attachment Reporting for Family Physicians and Nurse Practitioners

Attachment Reporting Step by Step Guide

The following is a step-by-step process for applying the zero-fee patient attachment code

Step 1	Communicate \$0 Fee Attachment Reporting procedure with all FPs, NPs and MOAs.
Step 2	Establish a workflow. For example, for all new patients attaching, • MOA to book an initial visit to go over the attachment conversation • MOA or FP/NP to make notes on the chart to remind FP/NP to bill attachment record billing and the separate visit billing. • Once visit is complete, submit both billing forms. If only the attachment conversation was performed, then only the attachment record billing is submitted, however no funding is attached.
Step 3	Book an appointment with patient, FP or NP to have a conversation with the patient regarding their commitment to: • Provide the patient with safe and appropriate care • Coordinate any specialty care the patient may need • Offer timely access to care, to the best of the team's ability and as reasonably possible in the circumstances • Maintain an ongoing record of the patient's health • Keep the patient updated on any changes to services offered at the clinic • Communicate with the patient honestly and openly to best address the patient's health care needs • The patient is asked to commit to: ○ Seek their health care from the practitioner and/or their team whenever possible ○ Name the practitioner as their primary care provider if they must visit an emergency facility or another provider ○ Communicate with the practitioner honestly and openly to best address their health care needs
Step 4	Complete the appointment and submit the attachment record. As the Attachment billing is administrative, please submit a separate billing for the clinic visit if more than the attachment conversation was completed.

Vancouver PCN Attachment Reporting for Family Physicians and Nurse Practitioners

Important Considerations

- Attachment records must be submitted in the format approved for electronic submission through Teleplan and must include all the necessary information.
- An attachment record is submitted only once per patient, per year and should not be submitted when attachment is not established.
- FPs on the Group Contract for Practicing Full-Service Family Physicians may submit an attachment code prior to an attachment conversation with an existing patient, however, the attachment conversation must occur during the patient's first visit with the clinic.

Need Help?

For more support and training on attachment reporting, please reach out to HealthBcSupport@phsa.ca, or your [Community Network Manager](#).