Appendix V: Databases and codes used to identify palliative care settings

Service	Database	Codes
Clinic based palliative	*OHIP*	• *A945 + OHIP location code "Office": Special palliative care consultation in clinic, office, home; minimum 50 min* • *K023 + OHIP location code "Office": Palliative care support in half hour increments; may be used to add time for longer consultations following a code for A945, or for any palliative care support visit. Exclude if patient is in hospital, long-term care (LTC), complex continuing care (CCC), or rehabilitation* • *K700: Palliative care outpatient case conference*
Home based palliative care		
Home MD visits	*OHIP*	• *B966: Travel premium for palliative care (billed with B998/B996)* • *B998: Home visit for palliative care between 07:00 and 24:00* • *B997: Home visit for palliative care between 24:00 and 07:00* • *A945 + OHIP location code "Home": Special palliative care consultation in clinic, office, home; minimum 50 min* • *K023 + OHIP location code "Home":* Palliative Care Support (>20 min.) • *A901:* House call Assessment (< 20 min.) • A900: Complex House call Assessment Assign any physician billings from clinic based to home-based if includes attached special visit premiums for palliative care home visit: B966, B997, or B998 (e.g. A945 w/B966, K023 w/ B966).). If there are multiple special visit codes billed for the same patient by the same physician on the same day, then this hierarchy will be used: 1. Special visit premium hospital inpatient codes (most important) 2. Special visit premium long-term care codes 3. Special visit premium home codes
Home Care (non-MD)	*RAI-Home Care*	• *P2S = 1 or 2: Hospice care was provided with complete or partial adherence* • *CC3f goals of care = palliative care*

Service	Database	Codes
	HCD	• *SRC_admission = 95 or 54: Service recipient code (i.e., classification) of end of life on admission* • *Service_RPC = 95 or 54: Service care goal of end of life; patient provided service under end-of-life designation* • *Residence_type = 2000: Staying in hospice or palliative care unit while receiving service* • *SRC_discharge = 95 or 54: Service recipient code of end of life on discharge*
Acute care palliative care		
Inpatient palliative care	*CIHI-DAD*	• *ICD-10 Code: Z51.5* • *PATSERV = 58: main patient service of "palliative care" was responsible for care* • *PRVSERV[1-8] or INSERV[1-20] = 00121: "palliative medicine" was a provider who provided service, or an intervention service code of palliative medicine was provided*
	OHIP	• *A945 + OHIP location code "inpatient"* • *C945: Special palliative care consult, hospital (minimum 50 min)* • *C882: Family medicine palliative care, non-emergency (routine) hospital inpatient service, <20 minutes* • *C982: Specialist palliative care, non-emergency (routine) hospital inpatient service, <20minutes* • *K023 + OHIP location code "inpatient": Palliative care support in half hour increments, if patient was in hospital during date of claim* Assign any A945, C945 or k023 to inpatient if includes attached special visit premium hospital inpatient visit: *C960, C961, C962, C963, C964, C990, C992, C994, C986, C996, C991, C993, C995, C999, C997* (e.g. A945 w/C960, k023 w/ C961). If there are multiple special visit codes billed for the same patient by the same physician on the same day, then this hierarchy will be used: 1. Special visit premium hospital inpatient codes (most important) 2. Special visit premium long-term care codes 3. Special visit premium home codes

Service	Database	Codes
	NACRS	• *PRVSERV [1-10] = 00121: Provider service code of palliative medicine* • *CONSULTSERV1 to CONSULTSERV3 = 00121: Consult service of palliative medicine was called*
Long-term care institutes		• *W872: Family physician palliative care subsequent visit* - Nursing home or home for the aged - Palliative Care • *W972: Specialist physician palliative care subsequent visit* • *K023 + OHIP location code "LTC"* • *W882: Family physician palliative care subsequent visit (<20 min)*- Chronic care or convalescent hospital - Palliative Care • *W982:* Palliative Care Assessment (<20 min) – Specialist, Chronic care/Convalescent • *K706:* Convalescent care program case conference (per unit) Assign any A945, C945 or K023 to LTC if includes attached LTC special visit premium travel code: *W960, W961, W962, W963, W964, W990, W992, W994, W998, W996, W991, W993, W995, W999, W997* (e.g. A945 w/W960, K023 w/ W960).). If there are multiple special visit codes billed for the same patient by the same physician on the same day, then this hierarchy will be used: 1. Special visit premium hospital inpatient codes (most important) 2. Special visit premium long-term care codes 3. Special visit premium home codes
	CCRS	• *CCRS_P1AO = 1: Received hospice care in last 14 days*

Legend
OHIP = Ontario Health Insurance Plan
CIHI-DAD = Canadian Institute for Health Information – Discharge Abstract Database
NACRS = National Ambulatory Care Reporting System
RAI = Residential Assessment Instrument
HCD = Home Care Data
CCRS = Continuing Care Reporting System