Additional file 3

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| **Definitions of Physician Mental Health Services**  |
| **Physician model of practice** | **OHIP fee code** |  |
| **Psychiatry** | **A190** Special psychiatric consultation**A193** Specific assessment**A194** Partial assessment**A195** Consultation**A196** Repeat consultation**A395** Limited consultation**A695** Neurodevelopmental consultation**A795** Geriatric psychiatric consultation**A895** Consultation in association with special visit to a hospital in-patient, long-term care in-patient or emergency department patient**K187** Acute post-discharge community psychiatric care, to K195, K196, K197 or K198**K188** High risk community psychiatric care, to A190, A191, A192, A195, A197, A198, A695, A795, K195, K196, K197 or K198**K189** Urgent community psychiatric follow-up, to A190, A195, A695 or A795**K192** Individual hypnotherapy**K195** Family psychotherapy - out-patients **K197** Individual out-patient psychotherapy **K203** 4 people group therapy**K204** 5 people group therapy**K205** 6 to 12 people group therapy**K208** 2 people group therapy**K209** 3 people group therapy**K630** Psychiatric consultation extension**K701** Mental health out-patient case conference |  |