

INFOBulletin

Keeping health care providers informed of payment, policy or program changes

To: Physicians, Registered Nurse Practitioners, Community Laboratories, Hospitals, and Clinics

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Re: OHIP-insured Vitamin D Testing

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1. Background

There has been a marked trend towards increased vitamin D testing. As a result of this marked increase, OHIP requested an evidence based review to determine when vitamin D testing was medically required and whether current evidence on the role of vitamin D in health justified the marked increase in testing.

2. OHIP Eligibility for Vitamin D Testing

The recommendations contained in the June 2010 report by the Ontario Health Technology Advisory Committee (OHTAC) based on current evidence and guidelines recommend appropriate diet and supplementation for those individuals at risk of vitamin D deficiency. To ensure that individuals meet the minimum vitamin D intake, practitioners should be aware of Health Canada's recommendations for vitamin D and the use of these guidelines should be promoted. In addition,

OHTAC did not recommend routine vitamin D testing except in identified circumstances. Therefore, effective December 1, 2010, OHIP-insured eligibility for the 25-hydroxy vitamin D test will be limited to evidence-based, medically necessary testing for those patients with the following medical conditions:

- Osteoporosis
- Rickets
- Osteopenia
- Malabsorption syndromes
- Renal disease
- Drugs that affect vitamin D metabolism.

Examples of medications that may affect vitamin D metabolism:

- Drugs affecting absorption phase of metabolism
 - Cholestyramine
 - Colestipol
 - Chronic use of mineral oil
 - Chronic use of stimulant laxatives
 - Cholestyramine (Questran)
 - Orlistat (Xenical)
 - Olestra
 - Corticosteroids
- Drugs affecting vitamin D breakdown phase of metabolism
 - Anti-seizure medication – phenytoin (Dilantin), fosphenytoin, phenobarbital, carbamazepine, primidone and rifampin
 - Note: This list is not exhaustive. Practitioners should confirm whether use of a medication affects vitamin D metabolism.

Malabsorption Syndromes

- Some individuals have malabsorption due to a variety of disorders such as Crohn's disease, or celiac disease. Others may have malabsorption due to surgery such as following gallbladder removal or gastric bypass surgery.
- Where it is known that a malabsorption state will occur such as roux-en-y gastric bypass surgery, it may be appropriate to order vitamin D levels during pre-bariatric surgery assessment to assist in the management of the patient following surgery. In this circumstance, the vitamin D test is insured.

25-hydroxy Vitamin D

- Effective December 1, 2010, 25-hydroxy vitamin D testing relating to evidence-based indications noted above will continue to be an insured service in the community laboratory sector as outlined in O.Reg. 522 and the Schedule of Laboratory Benefits.
- The 25-hydroxy vitamin D test for purposes other than those cited in O.Reg. 552 will no longer be OHIP-insured. Those patients who do not meet the OHIP eligibility criteria, may have the test performed at a community laboratory, but the patient will be responsible for payment to the laboratory service provider.

1,25-dihydroxy Vitamin D

- OHIP eligibility for the 1,25-dihydroxy vitamin D test continues to be an insured service. However, it should be noted that this test is only indicated in limited clinical circumstances where the test is medically necessary, such as patients with chronic kidney disease.

3. Laboratory Requisition Form – Revisions / Information

The OHIP Laboratory Requisition Form (#4482-84) has been revised to include insured / uninsured order boxes for 25-hydroxy vitamin D testing consistent with the evidence-based indications as recommended by OHTAC. Healthcare practitioners must identify when ordering this vitamin D test whether the test is insured or uninsured as per the eligibility criteria outlined above.

Uninsured tests may continue to be ordered by checking the **Uninsured - Patient responsible for payment** box in the 25-hydroxy vitamin D area of the Laboratory Requisition Form.

Older versions of the Laboratory Requisition Form may continue to be used, but practitioners ordering the insured 25-hydroxy vitamin D test must indicate so in the “Other Tests” section by writing “Insured vitamin D”. If this is not specified, the testing laboratory will assume that the test is uninsured and the patient will be responsible for payment for the test.

OHIP eligibility criteria for the 1,25-dihydroxy vitamin D tests remains unchanged. Order in the “Other Test” section of the requisition form.

Pre-completed forms dated prior to December 1, 2010

For the purpose of determining whether a laboratory service is an insured service, the standard date of laboratory service is defined as the date on which the patient or the specimen arrives at the laboratory with the requisition. (See OHIP Bulletin No. 4135, April 1980).

Laboratory requisition forms dated prior to December 1, 2010 will be subject to the amended vitamin D regulations which come into effect on December 1, 2010, if the patient or specimen arrives at the laboratory on or after December 1, 2010.

4. Amendments to Ontario Regulation 552, section 1 and the Schedule of Laboratory Benefits, under the *Health Insurance Act*

www.e-laws.gov.on.ca/html/regs/english/elaws_regs_900552_e.htm

www.health.gov.on.ca/english/providers/program/ohip/sob/lab/lab_mn.html

5. Schedule of Benefits for Laboratory Services - Fee codes effective December 1, 2010

The amendments to the L-codes and U-codes as outlined below will come into effect on December 1, 2010.

Unchanged code:

- Insured 25-hydroxy vitamin D test: L-606

New codes:

- Uninsured 25-hydroxy vitamin D test: U-792
- Insured 1,25-dihydroxy vitamin D test: L-588

Discontinued code:

- Insured 1,25-dihydroxy vitamin D test: L-605

6. Links

Health Canada Vitamin D Recommendations and Review Status:

www.hc-sc.gc.ca/fn-an/nutrition/vitamin/vita-d-eng.php

OHTAC Recommendation – Clinical Utility of Vitamin D Testing, June 2010:

www.health.gov.on.ca/english/providers/program/ohtac/tech/recommend/rec_vitamin%20d_201002.pdf

Laboratory Requisition Form:

www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf/FormDetail?OpenForm&ACT=RDR&TAB=PROFILE&ENV=WWE&NO=014-4422-84

7. Patient Support Materials

Patient Materials: To help you communicate these changes to your patients, non-technical, patient focused fact sheets and Frequently Asked Questions have been developed for vitamin D testing. They are available on-line at:

www.health.gov.on.ca/en/public/programs/ohip/changes/vitamin_d.aspx

Provider Fact Sheets: The ministry posts fact sheets on OHIP coverage and/or programs on the public internet site. Physicians may refer to these fact sheets and/or print these for use in their practice. They are available on-line at

www.health.gov.on.ca/en/pro/programs/ohip/changes/vitamin_d.aspx

An updated fact sheet regarding vitamin D testing is available at this site.

ADDENDUM DATED AUGUST 30, 2010

***(Effective as of December 1, 2010) TO THE SCHEDULE OF BENEFITS FOR
LABORATORY SERVICES***

Effective December 1, 2010, the Schedule of Benefits for Laboratory Services is changed as follows:

The code for the following test has been changed from L605 to L588 in the Schedule:

Code	Description	LMS Units
L588	1,25-dihydroxy vitamin D	150

The following paragraph is added to the Preamble of the Schedule:

Paragraph #34: L606 25-hydroxy vitamin D is insured for insured persons with the following conditions: osteoporosis, rickets, osteopenia, malabsorption syndromes and renal disease, or for insured persons who are on medications that affect vitamin D metabolism.

ONTARIO REGULATION

made under the

HEALTH INSURANCE ACT

Amending Reg. 552 of R.R.O. 1990

(General)

Note: Regulation 552 has previously been amended. For the legislative history of the Regulation, see the Table of Consolidated Regulations – Detailed Legislative History at www.e-Laws.gov.on.ca.

1. The definition of “schedule of laboratory benefits” in subsection 1 (1) of Regulation 552 of the Revised Regulations of Ontario, 1990 is amended by adding the following paragraph:

8. The Ministry of Health and Long-Term Care document titled “Addendum Dated August 30, 2010 (Effective as of December 1, 2010) to the Schedule of Benefits for Laboratory Services”;

2. This Regulation comes into force on the later of December 1, 2010 and the day it is filed.