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Bulletin Number 4305	Date February 27, 1998	Direct inquiries to Ministry of Health Processing Office <i>(address below)</i>
Distribution Physicians, Hospitals, Clinics, and Laboratories		

Subject **GOOD FAITH CLAIMS PAYMENT POLICY UPDATE**

Effective March 1, 1998 (see [Bulletin #4303](#)), the Ministry will not make payment in good faith for claims submitted for services rendered when the eligibility of an Ontario Health Card holder is not in effect or for services rendered in a hospital setting when the Health Number has a missing or incorrect version code.

The following information and guidelines will assist you with the implementation of this policy.

- Validate the most recent patient's Health Card at each visit and update your patient records with any changes (validation will give you access to the Ministry's database to confirm eligibility and Health Card status)
 - i. If the Health Card is not available, advise patients to carry and present their most recent Health Card every time they require services. A Ministry advertisement campaign reinforces this message to the public.
 - ii. Refer back to the patient, to previous health records, or to a person accompanying the patient who may have a record of the Health Number and version code.
- If validation indicates
 - i. there is no eligibility and/or if you are not reasonably satisfied that the patient is eligible, the patient should be directed to a MOH office where eligibility will be assessed and applied retroactively, if appropriate. The patient may also be billed for the service, however, if billed, the patient is to be reimbursed in full by the provider upon the patient subsequently providing proof of eligibility to you. When correct information is received, submit the claim to the Ministry for payment.

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Office locations

Barrie 30 Poyntz St. L4M 3P2	Hamilton 119 King St. W P.O. Box 2280, Stn. A L8N 4C8	Kenora 220-808 Robertson St. P9N 1X9	Kingston 1055 Princess St. P.O. Box 9000 K7L 5A9	Kitchener Canada Life Square Main Floor 235 King St. E., N2G 4N5
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London 217 York St., 5th FloorP. O. Box 5700 Terminal A N6A 1B7	Mississauga 201 City Centre Dr. P.O. Box 7020, Stn. A L5A 3M1	North Bay 101-447 McKeown St. P1B 9S9	Oshawa Exec. Tower, Oshawa Centre. 419 King St. W. P.O. Box 635 L1H 8L4	Ottawa Fuller Building 75 Albert Street K1P 5Y9
Owen Sound 981 2nd Avenue E. N4K 2H5	Peterborough 550 Lansdowne St. W. K9J 8J8	St. Catharines 59 Church St 3rd Floor L2R 3C3	Sarnia 452 Christina St. N. N7T 5W4	Sault Ste. Marie Roberta Bondar Place 70 Foster Dr., Ste. 100 P6A 6V4
Sudbury 199 Larch St., Suite 801 P3E 5R1	Thunder Bay 435 James St. S. , Suite 113 P7E 6T1	Timmins 38 Pine St. N., Ste. 110 P4N 6K6	Toronto 2195 Yonge St. P.O Box 1700 Stn. A M5W 1G9	Windsor 1427 Ouellette Ave. N8X 1K1
		Head Office P.O. Box 38 Kingston, ON K7L 5J2		

- ii. there is eligibility, but there is a version code problem with the card presented and you cannot obtain the correct version code from the patient or the patient's previous records, have the patient complete a Health Number Release form. In most cases updated information will be made available from the Ministry within three days. When correct information is received from the Ministry, update the claim with corrected information and submit for payment. If you choose to bill the patient rather than submit a Health Number Release form, the patient is to be reimbursed in full by the provider upon the patient subsequently providing the updated version code to you.
- Billing the patient under the following circumstances is considered contrary to the **Health Insurance Act**, s. 15, (3) (b) and is subject to prosecution, i.e., where:
 - i. the Health Number and correct version code is provided by the client at the time of service
 - ii. the correct Health Number and version code is obtainable from your records
 - iii. you refuse to reimburse the patient in full when the patient subsequently provides an updated version code.
- Failure of a provider to refund monies billed to an eligible (insured) patient in excess of the OHIP Schedule of Benefits to the patient is "extra billing" and is contrary to the **Health Care Accessibility Act**.
- If the claim is rejected by the Ministry for an incorrect or missing version code, obtain correct information (by forwarding a Health Number Release form to your local Ministry of Health OHIP office) and re-submit the claim within the six month claim submission period.
- The current payment policy associated with claims for newborns and provincial correctional inmates is not affected by the ending of the Good Faith Policy.

EMERGENCY ROOM SUPPORT

The Ministry recognizes that physicians providing services in emergency departments may have difficulty in acquiring the patient's correct Health Number and version code for payment purposes. The Ministry is implementing an accelerated process for the release of Health Number/version codes to hospital Emergency Rooms, as follows. To comply with **Freedom of Information and Protection of Privacy Act** (FIPPA) regulations, the hospital must acquire the consent of the individual to allow the Ministry to release the Health Number or version code to the hospital. The hospital Emergency Room staff should:

- request that the patient complete a Health Number Release form (1);

- call the Ministry's new, dedicated 1-800 Emergency Support number (2) where Ministry agents will be available on a 24 hour, 7 day a week basis to accept calls from identified Hospital Emergency Rooms specifically to provide requested Health Number/version codes;
- confirm with the agent that the Health Number Release form has been signed and will be forwarded;
- if only a version code is required, provide the agent with the patient's Health Number and last name;
- if a Health Number is not available, provide the agent with minimal information, that is, last name, sex and either the date of birth or the postal code of the patient — this information is required to identify the patient on the Registered Persons Database;
- receive the Health Number and/or valid version code, if one is available, from the Help Desk agent during the same telephone conversation;
- label the Health Number Release form with the ticket number provided by the agent; and
- fax the Health Number Release form to the Ministry at the provided fax number (2) by 12 o'clock noon the following business day.

If the Ministry agent is unable to locate the patient in the Registered Persons Database, the hospital may bill the patient. The patient is to be reimbursed in full by the hospital upon the patient subsequently providing the updated version code.

This service is only being offered to Hospital Emergency Rooms. An evaluation will be undertaken after a reasonable period of introduction to determine the utility and results of the process, and to introduce modifications, where warranted.

The Ministry will follow up all instances where Health Number Release forms are not faxed as required. Please be aware that failure by an Emergency Room to return the form may jeopardize the hospital's opportunity to participate in this validation process.

(1) Health Number Release forms can be ordered from:

Reproduction and Stationery Services
99 Adesso Drive
Concord On L4K 3C7
Tel: (416) 327-8222
Fax: (416) 327-0329

Cat #7530-4626
Form #1265-84

or down loaded from the Ministry's website : www.health.gov.on.ca

- (2) The appropriate 1-800 Emergency Support number and Ministry fax number will be released specifically to Hospital Emergency Rooms. Their utilization will be logged. Sharing of these numbers for other than Emergency Room purposes could impact on the continuing availability of this service.

VALID RED AND WHITE HEALTH CARDS

Most Ontario residents still carry valid red and white Health Cards and do not currently require a photo Health Card. Photo Health Cards are only issued to new or returning residents, when a Health Card is reported as lost, stolen, or damaged, or when there is a change of personal information such as a name change. The Ministry is reviewing plans to re-register all Ontario residents, however, once this re-registration process is initiated it will take several years to complete.

We wish to emphasize that:

- Both red and white Health Cards and photo Health Cards may be acceptable; and
- Fee-for-service claims rejected because of eligibility or version code problems can be re-submitted with corrected information within the normal six month claim submission period.

REIMBURSEMENT FOR MALPRACTICE FEES - 1998 PROGRAM

Please be advised that the 1998 Malpractice Reimbursement Program will continue to use the same methodology as used in previous years, for calculating reimbursements. Eligible physicians will be reimbursed the difference between the 1986 base year and the 1998 fee paid. Applications for the 1998 Program will be distributed in January 1999.

Enquiries regarding the elimination of "good faith" payments or the reimbursement of malpractice fees should be directed to your local Ministry of Health OHIP office.

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