

INFOBulletin

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

To: Physicians, Hospitals, Clinics and Laboratories

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Re: Claim Submission Instructions for Immunization and G700

This bulletin pertains to payment of G700 when billed in addition to immunization codes G538, G590, G840, G841, G842, G843, G844, G845, G846, G847 or G848.

G700 is an add-on code eligible for payment in addition to an associated immunization service. If an immunization code and G700 are not submitted on the same claim, G700 will be rejected by the OHIP claims processing system with explanatory code D8 (Allowed with specific procedures only). Claims will also reject if G700 is submitted before the immunization code (e.g., G590).

If your billing software uses an accounting number system, then the G590 must have an accounting number less than the G700 claim.

For example:

G700 pays because G590 and G700 were submitted on the same claim (have same accounting number):

X12301 → G700

X12301 → G590

G700 pays because base code G590 was claimed before G700 (G590 has an accounting number that precedes G700s):

X12301 → G590

X12302 → G700

G700 rejects because base code G590 was claimed after G700. (Because G700 has an accounting number that precedes G590s, the OHIP system does not recognize that G700 is being submitted with G590 and rejects):

X12301 → G700

X12302 → G590

To avoid G700 rejections, it is recommended that claims for G590 and G700 be submitted on the same claim or enter the immunization code prior to the G700 claim.