INFOBulletin

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

To: **Physician Services**

Published By: **Claims Services Branch**

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Re: Automation of Reciprocal Medical Billing Claim Submissions for patients from the Outaouais Region of Quebec

The ministry has been working with l'Agence de la Santé et des Services Sociaux de l'Outaouais (l'Agence) to automate the submission of reciprocal medical billings for patients from the Outaouais region of Quebec that are treated by Ottawa area health care providers.

In 1989, Ontario, the Quebec ministry of health (Régie de l'assurance-maladie du Quebec (RAMQ)) and the l'Agence entered into an agreement to compensate Ontario health care providers who provide specialized services that are not available locally to Outaouais residents. The RAMQ reimburses the ministry at the Quebec rate for the service and l'Agence reimburses the difference between the Quebec rate and the Ontario rate.

Claim Submissions

Currently claims are submitted by Ontario physicians to l'Agence on paper claim cards with a l'Agence billing form, this process is not changing at this point.

Once approved for payment by the l'Agence the claim cards and any associated supporting documentation have been forwarded to the Claims Services Branch (CSB) Ottawa office for processing. Effective immediately, these claims will be submitted electronically to the ministry by l'Agence via the Medical Claims Electronic Data Transfer Service. Claims will be processed upon receipt and will be paid in the next billing cycle provided they are received by the monthly claims cut off date.

Supporting documention for claims should continue to be sent to l'Agence along with the claim card and will be forwarded to the ministry once the claim has been approved for payment.

Ontario

Claim Errors/Resubmissions

The Outaouais claims are subject to the same medical rules and edits applied to all in-province medical claims. It is important that all required claim data is included on the submission to l'Agence or the claim(s) will reject as per normal processing and be included in your Error Report along with any in-province claim rejects.

Any rejects should be corrected and resubmitted to l'Agence on a new paper claim form. To expedite the reprocessing of the claim, the resubmission will require the original 7 digit l'Agence reference number. This number is identified on your Error Report as the "Accounting Number" and needs to be added to the resubmitted claim form in the upper right corner next to the specialty number.

Additionally, all claim payment support services for Ottawa area health care providers, including Outaouais claims, will be consolidated in the CSB Oshawa office. Any inquiries about rejected claims should be directed to the Oshawa office at 1 855-250-3696.

Inquiries about claims that have not been sent to the ministry should be directed to l'Agence.

For additional information about the transition to automated claim submission, please contact the Service Support Contact Center at 1 800 262-6524.