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Ministry of Health

Ministry of Long-Term Care

Ontario Health Insurance Plan

INFOBulletin

Update: Claim Submission Timeframe for In-Province Accounts

The new three-month claims submission period for in-province accounts is now in effect.

To: All Physicians, Hospitals, Community Laboratories, community surgical and diagnostic centres (Independent Health Facilities), Optometrists, Hospital-based Dentists, Podiatrists, Nurse Practitioners; OHIP Billing Software Vendors

Category: Physician Services, Primary Health Care Services, Independent Health Facilities, Optometrist Services, Dentist Services, Podiatrist Services, Registered Nurse with Extended Class; Billing Software Specifications

Written by: Claims Services Branch; Health Programs and Delivery Division

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Claims Submission Period

As per INFOBulletins [220907](https://health.gov.on.ca/en/pro/programs/ohip/bulletins/redux/bul220907.aspx) <https://health.gov.on.ca/en/pro/programs/ohip/bulletins/redux/bul220907.aspx>, [221206](https://www.health.gov.on.ca/en/pro/programs/ohip/bulletins/redux/bul221206.aspx) <https://www.health.gov.on.ca/en/pro/programs/ohip/bulletins/redux/bul221206.aspx>, and [230301](https://www.health.gov.on.ca/en/pro/programs/ohip/bulletins/redux/bul230301.aspx) <https://www.health.gov.on.ca/en/pro/programs/ohip/bulletins/redux/bul230301.aspx>, the claims submission period for OHIP fee-for-service insured and related services is now 3 months from the date a service is rendered in Ontario.

This applies to any services rendered on or after April 1, 2023.

Services rendered prior to April 1, 2023 will still have 6 months for submission.

This change will have no impact on claims for insured services rendered outside of the province of Ontario.

“W3” Explanatory Code

In order to assist providers during this transition, the explanatory code ‘W3-Service date is older than 3 months’ will continue to appear on the Remittance Advice (RA) for claims with a service date prior to April 1, 2023.

This will alert providers that a claim was submitted more than three months from the service date.

Claims that receive the “W3” explanatory code will still be processed for payment.

Update to the Stale-Date Review Process

The ministry's current process for reviewing stale-dated claims will be updated to allow claims submitted within 3 months of the date of service that are rejected to a Claims Error Report to be corrected and resubmitted after the 3 month claims submission timeframe.

This change is only effective for services rendered on or after April 1, 2023. Details regarding the new process will be communicated in the summer of 2023, closer to when these claims may start to become stale dated.

Providers are encouraged to submit all their claims, including claims that reject to an error report, within 3 months to ensure timely payment.

Update to the Remittance Advice Inquiries Review Process

The submission period for Remittance Advice Inquiries has also been changed from the previous maximum of 4 months from the date of the Remittance Advice, to 7 months from the date of the Remittance Advice for services rendered on or after April 1, 2023.

Keywords/Tags

Claims submission window; six months; three months; submission timeframe; remittance advice inquiry; RAI; stale-date; stale date; 3 months; 6 months

Contact Information

Do you have questions about this INFOBulletin? [Email the Service Support Contact Centre](mailto:SSContactCentre.MOH@ontario.ca) <<mailto:SSContactCentre.MOH@ontario.ca>> or call 1-800-262-6524.

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