

Education and Prevention Committee Interpretive Bulletin

Volume 4, No. 2

OHIP Billing Numbers

INTRODUCTION

What is the Education and Prevention Committee?

The Ministry of Health and Long-Term Care (MOHLTC) and the Ontario Medical Association (OMA) have jointly established the Education and Prevention Committee (EPC). The EPC's primary goal is to educate physicians about submitting OHIP claims that accurately reflect the service provided so that the need for recovery of inappropriately submitted claims is reduced.

What is an Interpretive Bulletin?

In order to achieve this goal, the EPC is developing a number of educational initiatives that are intended to help physicians submit accurate OHIP claims. One of these initiatives is the provision of regular "Interpretive Bulletins." Interpretive Bulletins will be jointly prepared by the MOHLTC and the OMA. The purpose of these Bulletins will be to provide general advice and guidance to physicians on specific billing matters.

Interpretive Bulletins are provided for education and information purposes only, and express the MOHLTC's and OMA's understanding of the law at the time of publication. The information provided in this Bulletin is based on the October 2005 Schedule of Benefits - Physician Services (Schedule). While the OMA and MOHLTC make every effort to ensure that this Bulletin is accurate, the Health Insurance Act (HIA) and Regulations are the only authority in this regard and should be referred to by physicians. Changes in the statutes, regulations or case law may affect the accuracy or currency of the information provided in this Bulletin. In the event of a discrepancy between this Bulletin and the HIA or its Regulations and/or Schedule under the regulations, the text of the HIA, Regulations and/or Schedule prevail.

OHIP Billing Numbers

Purpose

The purpose of this Interpretive Bulletin is to provide physicians with information on physician Billing Numbers. Similar information appeared previously in the October 2003 edition of the *Ontario Medical Review*. This Bulletin provides additional information pertaining to the rights and responsibilities associated with having a Billing Number.

Physicians submitting claims to OHIP must do so using their MOHLTC-assigned Billing Number. Once assigned, an OHIP Billing Number remains in effect unless:

- There is a change limiting or restricting a physician's CPSO licence; or
- The physician notifies the Registry unit at his or her district office, in writing, of the intention to cease submitting OHIP claims.

Responsibilities associated with an OHIP Billing Number

Physicians are legally responsible for all OHIP claims submitted and paid in conjunction with their Billing Number, regardless of whether or not the physician personally submitted the claims or whether the physician personally received the payment. For these reasons, physicians should always be aware of the claims submitted and the payments made under their Billing Number.

There have been situations where physicians who stopped billing OHIP, or who left the province, did not notify the MOHLTC, and billings continued under their Billing Number. Situations such as these have potential serious consequences. By notifying the MOHLTC in writing that OHIP services will no longer be provided, the physician removes any concerns or risks which may be associated with incorrect billing under his or her Billing Number.

Physicians should also be aware of and review all claims submitted in conjunction with their Billing Number for other reasons such as:

- Claims payments could be used as a record of income for a physician in some circumstances.
- Claims may be used to determine a patient's eligibility or entitlement to insurance benefits.
- Claims may be used in other legal action.

Group numbers

A group number is a number that allows individual physicians to have their OHIP payments directed into an account associated with a group they are affiliated with. A group number is not a Billing Number, it is simply a number to which one or more physicians are affiliated for the purpose of directing where the MOHLTC makes payment for claims submitted with the group number.

The MOHLTC does not and is not required to have any knowledge of individual group arrangements. Similarly, the MOHLTC has no knowledge of how monies are disbursed among physicians affiliated with the group. The MOHLTC enables this option for directing payment by setting up the affiliation of a physician to a group or groups. Please note, however, that under the Health Insurance Act, only individual physicians are legally entitled to receive payment for OHIP claims and are consequently responsible for all claims and payments made in conjunction with

the Billing Number, including those associated with a group number or directed into a group account.

- If a physician wishes to be affiliated with a group, the physician must apply in writing to the MOHLTC to become affiliated with the group in order to submit claims under the group number.
- If a physician wishes to terminate a group affiliation, the physician must also notify the MOHLTC in writing.
 Failure to do this may result in serious ramifications for the physician in situations where a recovery of incorrect payments is initiated.

As noted above, physicians should be aware of and carefully review any claims that are being submitted with a group number and paid to a group account using their Billing Number. When incorrect claims are submitted to OHIP under a group number, the physician whose Billing Number was used with the group number to submit the claim is legally responsible for the claim, regardless of how or to whom the payment is actually made.

Your feedback is welcome and appreciated!

The Education and Prevention Committee welcomes your feedback on the Bulletins in order to help ensure that these are effective educational tools. If you have comments on this Bulletin, or suggestions for future Bulletin topics, etc., please contact:

Physician Services Committee Secretariat

525 University Avenue, 4th Floor

Toronto, Ontario M5G 2K7

Telephone: (416) 340-2255 or

1-800-268-7215, ext. 2255

Fax: (416) 340-2933

E-mail: secretariat@physician-services-committee.ca

Dr. Garry Salisbury, Co-Chair

Dr. Larry Patrick, Co-Chair

Education and Prevention Committee

For specific inquiries regarding claims submission, please submit your questions IN WRITING to:

Provider Services Branch

Physician Schedule Inquiries

370 Select Drive

P.O. Box 168

Kingston, Ontario K7M 8T4