

Education and Prevention Committee Interpretive Bulletin

Volume 5, No. 5

Identification of Patient for a Major Eye Examination (E077)

Introduction

What is the Education and Prevention Committee (EPC)?

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?

Interpretive Bulletins are prepared jointly by the MOHLTC and the OMA to provide general advice and guidance to physicians on specific billing matters. 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 April 2007 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.

EPC Interpretive Bulletins and all other MOHLTC bulletins are available on the Ministry website: (http://www.health.gov. on.ca/english/providers/program/ohip/bulletins/bulletin_mn.html).

<u>Purpose</u>

The purpose of this Interpretive Bulletin is to provide physicians with information on the proper billing of E077 (Identification of Patient for a Major Eye Examination).

Who will find this information most useful?

Family physicians, internists, or endocrinologists who see patients with eye problems, or who suggest their patient see an optometrist, may find this Bulletin helpful.

When is E077 eligible for payment?

E077 is eligible for payment when:

- A physician identifies a patient, between the ages of 20 and 64 inclusive, with a medical condition* (other than diabetes mellitus, glaucoma, cataract, retinal disease, amblyopia, visual field defects, cornea disease or strabismus) that requires a major eye examination; and
- A completed requisition form (form 4347-84) is provided to the patient.

* Refraction or a vision problem that may result in a suggestion to seek optometric care are not considered medical conditions for the purposes of this form.

E077 is not eligible for payment:

- When the requisition form is completed for a patient who has one of the following conditions: diabetes mellitus, glaucoma, cataract, retinal disease, amblyopia, visual field defects, cornea disease or strabismus; or
- For patients under the age of 20 and over the age of 64.

Note: patients under the age of 20 or over the age of 64, or those with any of the preceding conditions, have direct access to OHIP-insured eye examinations and do not require the form; therefore, E077 is not payable under these circumstances.

How often is E077 eligible for payment to a physician for an individual patient?

E077 is eligible for payment:

- Only once every four fiscal years** to the same physician for the same patient (except if the patient seeks a major eye examination from an optometrist or general practitioner other than the one to whom the original requisition was provided); and
- To only one physician in a fiscal year for an individual patient.
- ** The completed requisition form entitles the patient to receive annual OHIP-insured eye examinations for up to five years.

What is the requisition form that must be completed and provided to the patient in order for E077 to be eligible for payment?

The form the patient requires in order receive OHIP-insured major eye examinations is form #4347-84 (Request for Major Eye Examination). The form is posted online (http://www. health.gov.on.ca/english/providers/forms/form_menus/ ohip_prof_fm.html).

Who can provide the patient with the completed Request for Major Eye Examination form?

The patient's physician, or a registered nurse with an extended certificate of registration (RNEC), may provide the patient with a completed and signed Request for Major Eye Examination form after determining that it is medically necessary for the patient to have regular insured eye examinations. As noted above, this form is only required when the patient (between the ages of 20 and 64 inclu-

sive) does not have diabetes mellitus, glaucoma, cataract, retinal disease, amblyopia, visual field defects, corneal disease or strabismus.

Example 1

Mr. Smith is 55 years old and visits his family physician with polydipsia and polyuria. The physician diagnoses him with diabetes. It is a standard of care for patients with diabetes to have vision assessments (examinations) on a regular basis. Vision assessments may be provided by a physician or an optometrist.

Is the physician eligible for payment of E077?

No. The patient has a medical condition that does not require the physician to further identify the patient for a major eye examination or complete the Request for Major Eye Examination form. Mr. Smith, due to his diagnosis of diabetes, has direct access to OHIP-insured eye examinations without the form.

Example 2

Mr. Jones, aged 50, goes to his family physician with increasing problems reading the newspaper. After an examination, the physician diagnoses presbyopia and suggests Mr. Jones visit an optometrist.

Is the physician eligible for payment of E077?

No. The suggested eye exam is for refraction and therefore does not constitute the need for the completion of the Request for Major Eye Examination form.

In the event that the physician had completed a form for Mr. Jones, and submitted a claim for E077, the claim would not have been eligible for payment. Furthermore, the completed form does not entitle Mr. Jones to OHIP-insured eye examinations, as the refraction service is not insured.

Example 3

Mr. Aye (a 30-year-old who does not suffer from diabetes mellitus, glaucoma, cataract, retinal disease, amblyopia, visual field defects, corneal disease or strabismus) is on medication that may affect vision. His physician determines that he requires a regular eye examination to monitor the impact of the medication on his vision. The physician recommends that Mr. Aye visit a local optometrist, and completes a Request for Major Eye Examination form.

Is the physician eligible for payment of E077?

Yes. The physician identified Mr. Aye (who does not suffer from one of the listed conditions that allows for direct access to insured optometric services) as requiring a medically necessary eye examination, and provided a requisition form.

Example 4

Mrs. Fast, whose only medical condition is hypertension, sees an internist who has noticed some retinal changes confirmed by an ophthalmologist. The internist recommends that Mrs. Fast see an optometrist for regular eye exams, and completes a Request for Major Eye Examination form.

Is the internist eligible for payment of E077?

Yes. The physician identified Mrs. Fast (who does not suffer from one of the listed conditions that allows for direct access to insured optometric services) as requiring a medically necessary eye examination, and provided a completed and signed requisition form. This form entitles Mrs. Fast to an OHIP-insured annual eye examination for five years. If Mrs. Fast wishes to see a different optometrist in the second year, the internist or her physician must provide a new requisition form for which E077 is payable.

Your feedback is welcomed 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 submit them in writing to:

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Education and Prevention Committee

Note: The Physician Services Committee Secretariat will anonymously forward all comments/suggestions to the Co-Chairs of the EPC for review and consideration.

For specific inquiries on Schedule interpretation, please submit your questions IN WRITING to:

Provider Services Branch, Physician Schedule Inquiries, 370 Select Drive, P.O. Box 168, Kingston, Ontario, K7M 8T4