Subject: Revised Medical Audit Process

This bulletin provides information about revisions to the way physician fee-for-service claims are reviewed.

Schedule G of the Health System Improvements Act (HSIA) has received royal assent and will become law as sections are proclaimed.

Revised Audit Process

The HSIA amends the Health Insurance Act (HIA) to revise the medical claims review process based on Mr. Peter Cory’s recommendations as stated in his “Medical Audit Practice in Ontario” report. The revised process provides for a more transparent system for auditing physician OHIP claims and is supported by the Ontario Medical Association (OMA).

The revised medical audit process is in keeping with Mr. Peter Cory’s recommendations and includes:

- Education – a focus on educating and assisting physicians in complying with the billing requirements of OHIP
- OHIP Payment Review Program (OPRP) – a modified continuation of the current program to provide an initial claims review process
- Physician Payment Review Board (PPRB) – a new board independent of the ministry to conduct hearings to give a physician and the ministry an early opportunity to resolve a claims dispute
- New committees – to support the revised audit process

Education

Mr. Cory’s report recommended the continuation and enhancement of the ministry’s Physician Education Program.
This program:

• assists physicians in ensuring they have the information needed to submit claims
• provides physicians the opportunity to receive corrective information and advice from the ministry to resolve payment discrepancies
• provides physicians the opportunity to resolve disputes with the ministry at an early stage to avoid further action

Enhancements to this program include:

• additional communications to providers explaining the audit process and what they can expect through the program.

**OHIP Payment Review Program (OPRP)**

Mr. Cory’s report recommended the continuation of this program, which:

• provides an initial claims review process with potential for early resolution of a dispute between the ministry and a physician
• provides a fast turn around time and saves time, effort and money where claim issues can be solved quickly

**New Board**

The Physician Payment Review Board (PPRB)

The board will consist of no fewer than 26 and no more than 40 members (20-30 physicians of whom one-half are OMA nominees; and also 6-10 public members) and should represent a broad range of physician practices.

This board will:

• hold hearings regarding incorrect or inappropriate payment matters that cannot be resolved between the General Manager and a physician through the provision of education and other assistance
• conduct a hearing in a timely manner and make an order with written reasons within 30 business days of the close of the submissions.

Note that the Transitional Physician Audit Panel (TPAP) will be the interim review body until the PPRB is functional. The TPAP was established under the *Transitional Physician Payment Review Act, 2004,* which suspended the Medical Review Committee at the beginning of Mr. Cory’s work.

**New Committees**

The Joint Committee on the Schedule of Benefits

This committee of physicians (one-half of whom are OMA nominees) will:

• provide an interpretation of a provision of the schedule of benefits upon written request by a physician or the General Manager within 30 business days
• publish, maintain and amend the payment correction list (a list of circumstances for which the ministry may adjust claims subject to a physician requesting a review by the Physician Payment Review Board)