This bulletin advises of a Ministry policy change effective with the October, 2015, Remittance Advice (RA). The Bulletin describes the timeframes for inquiry or dispute of a payment decision.

Note: the policy described in this bulletin is separate from, and has no impact, on the prescribed timeframe in which physicians have to submit a claim (and correct any errors identified on their Error Report) to OHIP for processing of payment. Physicians continue to have six months from the date of a service to submit a claim for payment to OHIP.

INQUIRY REGARDING PAYMENT DECISION:

An RA is a monthly statement of processed claims. The RA may contain codes that indicate why payment for a service has been reduced, adjusted, or disallowed. All claims appearing on the RA have been processed in accordance with OHIP payment rules and policies.

Physicians have the option to submit an inquiry on a claim once it appears on an RA. Inquiries must be made by completing a Remittance Advice Inquiry (RAI) form (form #0918-84 at http://www.health.gov.on.ca/en/pro/forms/ohip_fm.aspx) and submitting to the designated OHIP Claims Office. Submission of supporting documentation is encouraged to assist in reviewing the inquiry on the claim.

Note the new and updated on-line fill and print RAI form. Please refer to INFOBulletin # 4659 for more information on the new RAI form.
Effective with the October 2015, RA, all inquiries must be submitted within four months of the date on the RA.

Ministry staff will review the inquiry and any supporting documents provided. Notification of the review findings will be communicated in writing to the physician either through the returned RAI form or, if required, by letter.

If the inquiry is initiated (i.e., RAI submitted) within the four month period, the dialogue with regard to that inquiry may continue beyond the four month period, only if new and relevant information is provided in a timely manner and until (or unless) the physician has been notified that the ministry payment decision is ‘final’.

If the RAI is not submitted within four months of the date of the RA then the inquiry will not be accepted for consideration of review.

Inquiries on RAs dated prior to October 2015, will be accepted and processed up to six months from the date of the RA.

Note: inquiries where a correction is required (e.g., an incorrect health number, service date, diagnostic code, ‘once-in-a-lifetime’ code mistakenly submitted or where the service was not actually provided or a higher paying fee code was mistakenly submitted (i.e., overpayment)) should also be submitted within four months but will be accepted beyond the timeframe.

DISAGREEMENT OR DISPUTE REGARDING PAYMENT DECISION

Physicians disputing or disagreeing with the ministry’s payment decision may request a hearing at the Physician Payment Review Board (PPRB). Requests to the PPRB must be made within 20 business days of receipt of a payment decision notice (i.e., the RA, the returned RAI form or a final payment decision letter from the Ministry).

NOTE: While physicians can go directly to the PPRB with a payment dispute immediately after receiving their RA, physicians are encouraged to first try and resolve the issue through the inquiry process described above, as the process of the PPRB is a formal one. However, if an RAI is submitted and once the ministry has informed the physician that the payment decision is ‘final’, the ministry will not continue the inquiry dialogue and the physician can only request a hearing at the PPRB if he/she still wishes to dispute the payment decision.

As noted above, a request for a hearing at the PPRB must be made within 20 business of receipt of the ministry’s decision on payment (i.e., the date the RA is received if no RAI is submitted or, if an RAI has been submitted, the date the ministry’s ‘final payment’ decision is received).
A request for a hearing at the PPRB must be sent to:

Physician Payment Review Board
Health Services Appeal and Review Board
151 Bloor Street West, 9th Floor
Toronto ON M5S 2T5

And a copy of the request letter sent to:

Ministry of Health and Long-Term Care
Payment Accountability
Health Services Branch
Negotiations and Accountability Management Division
1055 Princess Street, Box 168
Kingston ON K7L 5V1

The PPRB will acknowledge the request and forward a copy of its procedural guidelines to assist in preparing for the hearing. Upon receipt of the notification the Ministry may conduct a further review of its decision.

This Bulletin is a general summary provided for information purposes. Physicians are directed to review the Health Insurance Act for the complete text of the provisions. This information can be accessed at http://www.e-laws.gov.on.ca. In the event of a conflict or inconsistency between this bulletin and the applicable legislation and/or regulations, the legislation and/or regulations prevail.