



OHIP Payments for Emergency Department Equivalent Services (A888)

Quick Reference Guide

Economics, Policy & Research

OHIP Payments for Emergency Department Equivalent Services (A888) Quick Reference Guide¹

The purpose of this reference guide is to provide a general overview on the payment rules for billing A888 Emergency Department Equivalent. The OHIP Schedule of Benefits² (the “Schedule”) defines “emergency department equivalent” in the General Preamble and lists the fee and payment rules in the Consultations & Visits section.³

The guide contains the following sections:

- (A) How does the Schedule define A888 Emergency department equivalent – partial assessment?
- (B) What level of service is required to claim A888?
- (C) When is A888 applicable?
- (D) Scheduled vs. unscheduled patient visits
- (E) Procedure and premium codes

A: How does the Schedule define A888 Emergency department equivalent – partial assessment?

A888 (Emergency department equivalent – partial assessment) is an assessment rendered in an *emergency department equivalent* on a Saturday, Sunday or *Holiday* for the purpose of dealing with an emergency.

The Schedule defines *emergency department equivalent* as:

“an office or other place, including Urgent Care Centres, Walk-in Clinics, Extended Hours Clinics, or other settings (other than a hospital emergency department) in which the only insured services provided are to patients who do not have pre-arranged appointments”⁴

B: What level of service is required to claim A888?

In order to claim A888, the level of service required is at minimum, a partial assessment. A partial assessment is defined as:

“the limited service that constitutes a history of the presenting complaint, the necessary physical examination, advice to the patient and appropriate record”⁵

¹ **Disclaimer:** Every effort has been made to ensure that the contents of this Guide are accurate. Members should, however, be aware that the laws, regulations and other agreements may change over time. The Ontario Medical Association assumes no responsibility for any discrepancies or differences of interpretation of applicable Regulations with the Government of Ontario including but not limited to the Ministry of Health (MOH), and the College of Physicians and Surgeons of Ontario (CPSO). Members are advised that the ultimate authority in matters of interpretation and payment of insured services (as well as determination of what constitutes an uninsured service) are in the purview of the government. Members are advised to request updated billing information and interpretations – in writing – by contacting their regional OHIP office.

² OHIP Schedule of Benefits (SOB), Physician Services, March 19, 2020 (effective April 1, 2020):

<http://www.health.gov.on.ca/en/pro/programs/ohip/sob/>

³ OHIP Schedule of Benefits (SOB), April 2020, page A2

⁴ OHIP SOB, April 2020, page GP2

⁵ OHIP SOB, April 2020, page GP25

C: When is A888 applicable?

A888 is eligible for all assessments rendered in an emergency department equivalent when the service occurs on a Saturday, Sunday or Holiday.

The Schedule defines *holiday* in the Definitions section of the General Preamble. The term holiday, **with reference to A888**, means all of the following:

Family Day, Good Friday, Victoria Day, Canada Day, Civic Holiday, Labour Day, Thanksgiving, New Year's Day, December 25 through December 31 (inclusive) and,

- a) if Christmas Day falls on a Saturday or Sunday, the Friday before Christmas Day; and*
- b) if New Year's Day falls on a Saturday or Sunday, the Monday following New Year's Day; and*
- c) if Canada Day falls on a Saturday or Sunday either the Friday before or the Monday following Canada Day, as determined at the choice of the physician⁶.*

Physicians are restricted to using A888 for all assessments rendered in an emergency department equivalent, when the service occurs on a Saturday, Sunday or Holiday. **The only assessment that can be claimed in an emergency department equivalent is A888, regardless of the level of assessment rendered.**

D: Scheduled vs. unscheduled patient visits

A888 is only applicable for unscheduled appointments. A888 is not applicable to scheduled appointments. A scheduled appointment is one that has been pre-arranged, regardless of when that appointment was pre-arranged. For example, if a patient contacts a physician's office at 9:00 am and schedules a same-day appointment for 11:00 am, the appointment is considered one that is scheduled.

The role of an emergency department equivalent is all-or-nothing: if even one patient is scheduled for an appointment, then none of the assessments rendered (even to walk-in/emergency patients) can be claimed as A888. Assessments must be claimed using the appropriate assessment fee (e.g. A001, A007, etc.).

In situations where physicians would like to mix scheduled patients and emergency department equivalent (i.e. unscheduled) patients on the same clinic day, it is suggested that a clear divide be created between scheduled appointment times and walk-in hours. For example, a physician might decide to have scheduled appointments in the morning (claiming the appropriate assessment fees such as A001 or A007, etc.) and then after closing the office for lunch, he/she may operate an emergency department equivalent in the afternoon, where A888 is billed for all assessments rendered.

E: Procedure codes and premium codes

All assessments rendered in an emergency department equivalent must be claimed as A888. Some emergency department equivalent visits may require a physician to perform a procedure (e.g. Z176

⁶ OHIP SOB, April 2020, page GP3

repair of laceration – up to 5 cm), in which case it would be acceptable to claim the appropriate procedure code(s) with A888.

When patients present for allergy injections as the sole reason for the visit, these services should be claimed as G212 (Hyposensitisation – when sole reason for visit), which includes a brief assessment of the allergy condition. This also applies to other types of injections as the sole reason for the visit. Claims for A888 are not correct in these situations.

When a procedure is performed in an emergency department equivalent, physicians are not eligible to claim E409 (Saturday, Sunday and Holiday - increase procedural fee by 50%) in addition to the procedural fee(s). Likewise, Special Visit Premiums are not eligible to be claimed with A888. Payment rule #2 for A888 specifies that no premiums are payable for services rendered in an emergency department equivalent.⁷

For physicians in a Primary Care Model, the After Hours Q code (Q012 or Q016 for CCM) is eligible for payment with the A888 for enrolled patients only.

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⁷ OHIP SOB, April 2020, page A2