

Physician remuneration for expired health cards

The following provides guidance on physician remuneration and how physicians should approach remuneration for services rendered to patients with expired or expiring health cards, patients with invalid health cards and patients without OHIP coverage.

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Expired and expiring health cards

Expanded coverage since March 2020:

- most expired OHIP cards remain valid; health card validation response codes 50-55 (inclusive) indicate that the card is valid to access insured services
- only the most recent version code will be accepted for expired health cards
- red and white health cards will be accepted unless invalid.

Patients without health insurance (uninsured)

Expanded coverage since March 2020:

- **all medically necessary hospital services** for patients who are not covered by OHIP, another provincial/territorial or federal health care plan or private insurance are funded. Hospitals were provided a spreadsheet to submit billings to OHIP. After receiving remuneration, hospitals are responsible for distributing payments to physicians.
- **limited medically necessary physician services performed in-person or by telephone or video in the community are also funded for patients who are not covered by OHIP or another provincial/territorial or federal health care plan.** These fee codes are to be claimed through the OHIP claims payment system:
 - minor assessments (K087)
 - Intermediate assessments (K088)
 - psychotherapy, psychiatric or primary mental health care, counselling or interview (K088 or K089 depending on the duration)
- services performed in the community that are not captured by the codes above (for example, procedures) can be billed to patients until they can provide a valid health card indicating they were insured on the date the service was provided. Providers should then reimburse the patient.

- reference: OHIP INFOBulletin [201107](#) and [4749](#)

Patients with invalid health cards (lost, stolen, damaged or voided)

- In all cases providers should follow existing health card validation services to determine health card validity, as they would have before the pandemic.
- Patients should be provided the ServiceOntario INFOLine (1-800-268-1154) or be advised to visit their local ServiceOntario centre.
- The provider can contact the ServiceOntario help desk (1-866-532-3161) to obtain accelerated release of health card numbers and version codes.
- If by using the ministry's health card validation mechanisms it is determined that a patient's health card is invalid:
 - services performed in the hospital may be claimed to the ministry on the hospital's spreadsheet of claims for services provided to uninsured patients.
 - services provided to uninsured patients in the community may not be claimed to the ministry and providers should use existing processes for expired or invalid health cards in these scenarios (for example, bill the patient directly for the health care service(s) provided).
 - if the patient is billed directly and subsequently provides proof they were insured on the date of service (for example, through providing updated health card information), then the provider would be required to reimburse the patient and bill OHIP accordingly.

Reference: OHIP INFOBulletin [201107](#) and [4749](#)

Patients with other provincial, federal, or private health insurance

Billing submission to insurance providers should continue as before the pandemic.