Health Care Connect Clinical Fact Sheet

What is the purpose of this document?

Through the work of the Primary Care Action Team, led by Dr. Jane Philpott, the government has committed to attaching everyone who was on the Health Care Connect (HCC) waitlist as of January 1, 2025 to primary care by Spring 2026.

This Fact Sheet has been developed to support family physicians, nurse practitioners and primary care teams working with Ontario Health Teams (OHTs) and Primary Care Networks (PCNs) in attaching everyone on their HCC waitlist to primary care.

What is Health Care Connect (HCC)?

HCC is a centralized provincial registry to help people find a family physician, nurse practitioner or primary care team. Care Connectors (CCs), who are registered nurses that work for Ontario Health atHome, support anyone with a valid OHIP card who registers online or calls 811.

Why is the Health Care Connect waitlist a priority for this year?

The Ontario government is investing $2.1 billion to connect two million more people to a publicly funded family physician, nurse practitioner or primary care team by 2029, which will achieve the government's goal of connecting everyone in the province to primary care. Focusing this year on connecting people from the HCC waitlist will support patients that have relied on HCC to connect them. Attaching all patients to primary care is a common goal for OHTs, PCNs, CCs and local family physicians, nurse practitioners and primary care teams as they build strong, sustained relationships. This strategic focus on HCC will help demonstrate measurable progress toward connecting everyone in the province to the care they need.

What is the government doing to support the HCC waitlist effort?

We are taking steps to improve the HCC experience for family physicians, nurse practitioners and primary care teams so that patients are attached to the care they need. This includes:

- **Validating patient information:** We are making sure the waitlist is accurate. We are contacting everyone on the waitlist as of January 1, 2025 – first by letter or email, then through a phone call from a CC to verify their information and ongoing need for primary care. CCs are ensuring patient information is up to date, including their health needs, where they live and whether they are still looking to be connected to primary care.
- **Improving partnerships and planning between primary care and HCC:** Locally, CCs are being connected with OHTs and their PCNs and guidance is being provided to build strong, lasting partnerships and increase collective impact. CCs will work closely with

OHTs and PCNs to support matching patients on the HCC waitlist. OHTs and PCNs will lead outreach to family physicians, nurse practitioners and primary care teams. This outreach will not be a 'cold call'; instead, it will build on existing relationships with primary care and focus on what supports and resources can be provided to practices who participate.

- **Improving access to HCC patient information:** OHTs are being asked to select a lead organization that will be able to access provincial HCC data systems that contain patient health information, on behalf of OHTs. The role of this lead organization will be to coordinate with CCs and local primary care partners to help match patients based on their needs. CCs will continue to be the main point of contact with HCC patients
- **Increasing support through primary care teams:** Through the Primary Care Action Plan, the government is making record investments in primary care teams across the province. For family physicians and nurse practitioners, access to a team of health care professionals working to their full scope of practice can support their ability to provide comprehensive care to more patients. Up to 130 teams will receive funding in Summer 2025, following a call for proposals in areas with the highest levels of unattachment and those with a large numbers of people on the HCC waitlist.

What Do We Know About Patients on the Waitlist?

Information captured through the HCC registration process includes a person's age and their complex-vulnerable status (based on self-reported capture of general health status, chronic conditions, activity-limiting disability, mental health issues, and/or obesity). Patients on the HCC waitlist span all ages and health needs. The largest group is those under the age of 40. Five per cent identified that they had complex needs. Currently, OHTs have aggregate data for those on the waitlist in their geographic area. As the waitlist data is verified, more accurate and detailed data (e.g. time spent waiting, complexity) will be available.

When the government announced the goal of clearing the waitlist in January 2025, there were approximately 235,000 people registered. Thanks to recent efforts to validate the information of individuals registered, as well as work by OHTs, their PCNs, and local partners to refer to primary care where available, the waitlist has already decreased by more than 30 per cent.

I can't take on more patients - what are the expectations of family physicians and NPs at this time?

We recognize the pressures Ontario's dedicated family physicians, nurse practitioners and primary care teams face. Participation in HCC for physicians and nurse practitioners is voluntary and we are grateful for any support you can provide.

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You may be contacted by the local OHT or PCN in the coming weeks to better understand your practice's ability to accept new patients. All OHTs are being asked to connect and collaborate with local family physicians, nurse practitioners, and primary care teams to achieve the goals set out in the Primary Care Action Plan. All efforts are appreciated. Attaching even one more patient helps us achieve our goal!

In recognition of the important role of physicians in attaching patients to primary care, enhancements will be available through new funding initiatives under the Physician Services Agreement to provide incentives to certain physicians to attach more patients, including complex patients from the Health Care Connect waitlist.

Additional payments to enhanced attachment include:

- Complex Vulnerable New Patient Fee: Fee code increased from $350 to $500.
- Mother Newborn New Patient Fee ($350): Billed when enrolling both an unattached mother and newborn within two weeks of birth or an unattached woman after 30 weeks of pregnancy.
- Multiple/Newborn Fee ($150): In case of multiple births, a physician may bill this code per newborn in addition to the Mother Newborn New Patient Fee code.
- HCC Upgrade Patient Status ($500): If a physician accepts a HCC-referred non-complex/vulnerable patient that they assess to be complex/vulnerable.

Implementation details for the new codes are being developed by the parties, as the newly agreed to codes are not yet ready for billing. Physicians will be paid retroactively back to July 1, 2025.

The government and its agencies (Ontario Health, Ontario Health atHome) are dedicated to supporting you and remain open to hearing how processes can be improved and where more supports are needed by working with your OHT and PCN clinician leads. Attaching everyone on the HCC waitlist to primary care by Spring 2026 will require the collective effort of everyone in the health system. Together, we can achieve this goal and make a real difference in the lives of Ontarians.

Questions? Please contact ontariohealthteams@ontariohealth.ca.

For additional information on Health Care Connect please visit Find a doctor or nurse practitioner | ontario.ca