

Temporary Physician Billing Process for Hospital Services Provided to Uninsured Patients

Frequently Asked Questions (FAQs)

April 2021

Contents

[Eligible Services](#)

[Eligible Patients](#)

[Submission Method and Format](#)

[Timelines](#)

[Payment](#)

Eligible Services

1. Does this process only apply to services provided to COVID positive uninsured patients?

No, this process applies to all medically necessary insured services provided to uninsured patients from March 20, 2020 until further notice.

2. Historically, HHS has billed on behalf of my practice for some diagnostic services for uninsured patients. Do I now need to include these services on my monthly uninsured billing template?

No, this process only applies to charges that you would have previously billed a patient for directly.

3. I provided an uninsured service (such as a cosmetic procedure or circumcision which were not medically necessary) to an uninsured patient. Can I include these services on my monthly uninsured billing template?

No, this process only applies to insured services provided to uninsured patients.

4. I provided insured services to an uninsured patient outside of the hospital. Can I include these services on my monthly uninsured billing template?

No, this process only applies to insured services performed in a hospital.

For services performed outside the hospital setting, the ministry introduced temporary fee codes for the provision of medically necessary physician services provided to uninsured patients in the community. These codes came into effect March 21, 2020.

For more information, refer to this [OHIP Bulletin](#).

5. I provided insured services to an uninsured patient at a hospital that is not part of HHS. Can I include these services on my monthly uninsured billing template?

No, this process only applies to insured hospital services provided at HHS. Please reach out to the hospital you provided the services at to determine how they are collecting this information.

6. I provided insured services to an uninsured patient both before and after March 20, 2020. Can I include all of these services on my monthly uninsured billing template?

No, this process only applies to services provided from March 20, 2020 onwards. For any services provided prior to that date, please follow your normal billing practices for uninsured patients.

Eligible Patients

7. Can I include all patients who do not have OHIP coverage on my uninsured billing template?

No. Physicians should continue to use existing billing methods (e.g. reciprocal billing arrangements) for patients who have coverage from another provincial health insurance plan, for those who have federal coverage (e.g. Interim Federal Health) and for those who have private insurance coverage.

8. I provided services for a patient who claims to have private insurance, however I am unsure whether I will receive payment from the private insurance. Can I include them on my uninsured billing template instead of billing the third party insurance?

No. You must first attempt to collect payment from the private insurance provider. If payment is denied, then you may add them to your uninsured billing template.

9. I provided services for a patient who did not have their OHIP card with them. What should I do?

In cases where the person has valid OHIP coverage but cannot demonstrate proof of coverage at the time of service, please call the 24/7 helpdesk to immediately receive the patient's health number for use in billing.

Please see [INFOBulletin 4797](#) for detailed instructions regarding the 24/7 ServiceOntario helpdesk.

10. I provided services for a patient whose OHIP card was invalid. Can I include them on my uninsured billing template?

Yes. You will be required to include the patient's invalid OHIP card number as part of the uninsured billing template.

Submission Method and Format

11. I use a third party agency to manage my billing. Can they collect payment from the Ministry?

No. The Ministry will only pay for uninsured patients when the information is collected and submitted by the hospital.

However, your third party agency can submit your billing spreadsheet to HHS. If a third party agency submits your billing spreadsheet, HHS will remit payment to the third party billing agency. HHS has consulted Regional Medical Associates (RMA) in the development of this process.

12. I use a billing system which can provide similar information to the uninsured billing template. Can I submit an extract from that system instead of completing the uninsured billing template?

No. Submissions will not be accepted in any other format. The province has been prescriptive on format and content required.

13. Can I submit a scanned copy of the uninsured billing template?

No. All documents must be submitted as a Microsoft Excel worksheet (or equivalent). Submissions will not be accepted in any other format.

14. I do not have all of the information required to complete the uninsured billing template. Can HHS populate the missing information for me based on hospital records?

No. HHS will not validate or correct data included in the billing template.

15. Can I submit a separate uninsured billing template to HHS for each patient I see or for each day that I work at HHS?

No. For timely payment, please submit a consolidated uninsured billing template including all services/fee codes for an entire month.

Timelines

16. How often should I submit my uninsured billing template to HHS?

For timely payment, please submit an uninsured billing template including all services/fee codes for one month by the 15th of the subsequent month.

17. I missed submitting my uninsured billing template for the month. Can I still submit it?

Yes. Spreadsheets may be submitted to the Ministry as late as one year from the date of the earliest service documented on the file. HHS requires at least two months to compile submissions therefore physicians may send spreadsheets to HHS as late as 10 months from the date of the earliest service documented on the file.

Payment

18. I submitted a billing template to uninsuredbilling@HHSC.CA. When will I be paid?

You will be paid after HHS receives payment from the Ministry.

19. I submitted a billing template to uninsuredbilling@HHSC.CA. How will I be paid?

You will be paid via EFT.

20. I am not registered as a vendor with HHS. How do I ensure the HHS Accounts Payable department has all the necessary information to pay me?

If you do not already receive payment from the HHS Accounts Payable department, please complete the Vendor Registration Form and email it to apfinance@hhsc.ca with the subject line “*Uninsured Patient Billing - [Physician Name] Vendor Form*”.

21. I received a partial payment from HHS for one of my uninsured billing templates. Why did I not receive the entire amount I submitted?

HHS will only reimburse you for payments received from the Ministry. Any submissions which are rejected or remain unpaid by the Ministry will not be paid out to physicians. HHS will collect rejection information provided by the Ministry but will not correct rejections or pursue additional details. We will provide you the rejection details from the Ministry. It is your responsibility to make the required corrections and resubmit to HHS within the required timelines for resubmission on your behalf.