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Ministry of Health

Ministry of Long-Term Care

## Ontario Health Insurance Plan

### INFOBulletin

## Weekend Access for Family Health Organization (FHO) Patients

### New fee schedule code Q888A to support the 2021 Physician Services Agreement effective July 1, 2022

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**To:** All Family Health Organization Physicians

**Category:** Physician Services; Primary Health Care Services

**Written by:** Negotiations Branch; OHIP, Pharmaceuticals and Devices Division

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## Background

The Ministry of Health (the ministry) and the Ontario Medical Association (OMA) are working together to implement changes to primary care contracts in accordance with the 2021 Physician Services Agreement (PSA).

To support increased access to scheduled weekend visits for rostered patients and to increase quality of care by promoting continuity, a new Fee Schedule Code (FSC) (Q888A) has been created. This new FSC is to be submitted by Family Health Organization (FHO) physicians who provide services to the enrolled patients in their FHO group for unscheduled visits on Saturday, Sunday or Holidays.

The new FSC is available to FHO physicians who offer at least three scheduled visits for each three-hour Saturday, Sunday or Holiday block. Scheduled visits rendered during the three-hour blocks should continue to be billed using existing FSCs and cannot be claimed under Q888A.

## Claims Payment for Physicians

Effective July 1, 2022, FHO physicians can submit Q888A on Saturday, Sunday and Holidays when all the following conditions are met:

- The patient is enrolled to the FHO group of the billing physician.
- The service provided is an unscheduled in-person visit. Virtual visits by phone/video cannot be claimed as Q888A.
- The billing physician has offered at least three scheduled visits for each three-hour Saturday, Sunday or Holiday block.

The Q888A will pay fee-for-service for a rostered patient. The temporary 2.01% increase in the PSA makes the value of this FSC \$37.60 until March 31, 2023.

## **Q012 After Hours Eligibility**

The Q888 has been added to the list of codes eligible to be billed with the Q012 when rendered on rostered patients in accordance with all After Hours billing rules.

## **Error Handling**

### **Q888A cannot be billed with A888A on the same service date for the same patient**

- If Q888A and A888A are billed on the same incoming claim for the same service date/patient/provider, the claim will reject with an error code of 'ADH- Cannot be billed together'.
- If A888A has been previously paid for the same patient on the same service date by the same provider, Q888A will pay at \$0.00 with an explanatory code of 'D7 - Not allowed in addition to other procedure'.
- If Q888A has been previously paid for the same patient on the same service date by the same provider, A888A will pay at \$0.00 with an explanatory code of 'D7-Not allowed in addition to other procedure'.

### **Q888A must be billed with a valid diagnostic code**

- Submitting Q888A without a diagnostic code will result in the claim rejecting to the physician's error report with an error code of 'V21-Diag. Code Required'.

### **Q888A can only be billed by a FHO physician providing services to the enrolled patients in their group**

- If Q888A is submitted by a signatory physician for a patient not enrolled to their FHO group on the service date of the claim, it will pay at \$0.00 with an explanatory code of 'I6-Premium Not Applicable'.
- Signatory physicians must submit Q888A using their FHO group number or solo.
- Locum physicians must submit Q888A using the FHO group number where they are providing services to rostered patients. A claim for Q888A submitted by a locum without their FHO group number will result in the claim rejecting to the error report with the error code of 'EPA - Network billing not approved'.
- Locum physicians submitting Q888A using a FHO group number where the patient is not enrolled will receive the error code of EPA.

### **Income Stabilization (IS) and New Graduate Entry Program (NGEP) physicians**

- IS or NGEP physicians should submit the Q888A using their FHO group number and the FSC will pay at \$0.00 with an explanatory code of 'I2-Service is Globally Funded'.

## Q888A is ineligible for Reciprocal Medical Billing (RMB) claims

- Q888A will reject for RMB claims with an error code of 'R04-Service Excluded from RMBS'.

## Q888A is ineligible for Workplace Safety and Insurance Board (WSIB) claims

- Q888A will reject for WSIB claims with an error code of 'VW1-Invalid WCB Service'.

## Update Billing Software

Physicians will need to ensure to update their billing software to include the new FSC Q888A. This must be done prior to submitting any services rendered on or after July 1, 2022.

[The updated Fee Schedule Master](#)

[<https://www.health.gov.on.ca/en/pro/programs/ohip/sob/>](https://www.health.gov.on.ca/en/pro/programs/ohip/sob/) can be found on the Ministry of Health website. This file will be available for download by July 6, 2022.

## Keywords/Tags

Physician Services Agreement; PSA; Weekend Access; Q888A; Family Health Organization; FHO

## Contact Information

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## For More Information

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