

Module 11: Reciprocal, Out of Province (OOP) and Out of Country (OOC) Billing

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11.1 Reciprocal Billing Agreement - OOP

Residents of all the Canadian provinces and territories (except Quebec) are covered under the Interprovincial Reciprocal Payment Agreement for Physician Services (the Agreement).

There is an Interprovincial Reciprocal Payment Agreement for Hospital Services to manage payment for in-patient hospital services, for Canadian patients.

To be eligible for coverage under the physician Agreement, Canadian residents must **present** a valid provincial health care identification card. The providing physician must check the identification card to confirm the coverage has not expired, as some provinces issue cards with expiry dates.

In the spirit of the *Canada Health Act*, the Ministry encourages physicians in BC to bill reciprocally when an out-of-province patient presents a valid health care card. If a patient does not present a valid health care card, the physician may bill the patient.

Out of province patients who are billed directly may seek reimbursement from their home province medical plans.

Health Insurance BC (HIBC) is unable to accept reciprocal claims after 90 days, from the date of service.

For assistance, please call HIBC, Billing Support:

Vancouver phone: 604 456-6950

Vancouver phone: 1 866 456-6950

11.2 Billing Reciprocal Claims

Reciprocal claims can be billed either electronically or by card.

A claim for an out-of-province patient must include the following information:

- the code for the province or territory in which the patient resides (see provincial codes below)
- the patient's registration (identity) number;
- the patient's name, sex, and date of birth; and
- the patient's home or British Columbia address.

When entering the patient's registration (identity) number:

- enter it into the "Reciprocal Registration Number" field (for assistance, check with your vendor or refer to your billing software guide); and
- ensure that the number has 12 digits by entering the number "flush right" and backfilling empty spaces at the left (front) of the 12-character field with zeroes.

Example: Enter 987654321 (9 digits) as 000987654321 (12 digits).

Province or Territory Codes Registration Numbers

Province or Territory	Code	Registration Number
Alberta	*	AB 9 digits
Manitoba		MB 9 digits
Newfoundland		NF 12 digits
New Brunswick		NB 9 digits
Northwest Territories		NT 7 digits
Nova Scotia		NS 10 digits
Nunavut		NU 9 digits
Ontario	**	ON 10 digits
Prince Edward Island		PE 8 digits
Saskatchewan		SK 9 digits
Yukon		YT 9 digits

* Alberta provides each family member with a unique lifetime personal health number.

** Ontario is issuing photo health cards to beneficiaries over the age of 16 years. Most beneficiaries over 16 years of age now have photo health cards.

11.3 Reciprocal Claims for Patients Who Move to BC

When a patient moves from one province or territory to another, the province or territory will generally provide coverage for the balance of the month of departure, plus two months. The patient will use their ‘moved from’ health care coverage during the eligibility period in the ‘moved to’ province or territory during the wait period.

The previous provincial coverage is temporary; therefore, it is not recommended to enter the ‘moved from’ health care number in to an electronic billing file. Please record out-of-province health numbers in a written file for reference while the patient in the wait period in BC.

11.4 Physician Services Excluded from the Agreement

The following services are **not paid** under the Agreement. The patient may be eligible for reimbursement from their provincial plan and prior approval by the home province may be required.

- Surgery for alteration of appearance (cosmetic surgery).
- Gender-reassignment surgery.
- Surgery for reversal of sterilization.
- Therapeutic abortion.¹
- Routine periodic health examinations, including routine eye examinations.
- In-vitro fertilization; artificial insemination.
- Acupuncture; acupressure; transcutaneous electro-nerve stimulation (TENS); moxibustion; biofeedback; hypnotherapy.
- Services to persons covered by these agencies:
 - Canadian Armed Forces
 - WorkSafe BC
 - Veterans Affairs Canada
 - Correctional Services of Canada (federal penitentiaries)
- Services requested by a ‘third party’.
- Team conferences.
- Genetic screening and other genetic investigations, including DNA probes.
- Procedures still in the experimental or developmental phase
- Anesthetic services and surgical assistant services associated with all of the excluded services mentioned above
- Supplementary practitioners’ services (e.g. chiropractic, physiotherapy, naturopathy)
- Oral surgery/dental surgery may be reimburseable; however the scope of treatment may vary according to terms of other individual provincial benefit plans.

¹ British Columbia and the Yukon have a separate reciprocal agreement to cover abortion services.

11.5 Out of Country Referrals

A specialist physician in BC must research medical resources that are available in BC and elsewhere in Canada before considering a referral outside Canada. Patients who are referred outside Canada must pay the costs for non-medical services such as the travel, accommodation, travel companions, and out-patient medication.

The Ministry of Health provides information to explain the provincial coverage for emergency and elective out-of-country medical services on the website:

<http://www.health.gov.bc.ca/msp/infoprac/oocc.html>

If a medical specialist in BC considers it necessary to send a patient outside Canada for medical services, the specialist must provide:

- Evidence of the medical necessity for the out-of-country services; and
- Details of the investigations already carried out in BC and Canada; and
- Recommendations of the physicians who were consulted within Canada

The medical specialist must send the Out-of-Country Medical Services Funding Application (the Application) to HIBC, Out of Country Claims and allow at least 14 working days for a response. If the referral is for urgent medical treatment, please indicate the urgency on the Application.

The Application is available on the Ministry website:

<https://www.health.gov.bc.ca/exforms/mspprac/2810fil.pdf>

Please contact Out-of-Country Claims for assistance:

Vancouver phone:	604 456-6950
Toll Free:	1 866 456-6950
Fax submissions to:	250 405-3588

Mail submissions to:	Out of Country Claims Medical Services Plan PO Box 9480, Stn Prov Govt Victoria, BC V8W 9E7
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