Bulletin



Financial Services
Commission of Ontario

Commission des services financiers de l'Ontario

No. A-10/01 Property & Casualty – Auto

Auto Insurance Standard Invoice (OCF-21/59) and Registration System for health care providers billing automobile insurance companies

To the attention of all insurance companies licensed to transact automobile insurance

With this Bulletin, the Financial Services Commission of Ontario (FSCO) is authorizing the use of a new claims form, the Auto Insurance Standard Invoice (OCF-21/59), for use by automobile insurers where they arrange or agree to be invoiced directly for medical and rehabilitation goods and services, assessments and examinations. Automobile insurers will have the option of requesting health care providers to use this form for applicable goods and services where direct invoicing is used or requested. Health care providers, who currently invoice auto insurance companies directly, should check with insurers to determine if this form will be required.

The Standard Invoice will be applicable to goods and services provided to insured persons on or after November 12, 2001.

Effective November 12, 2001, insurers may require health care providers or facilities to use the Standard Invoice where an arrangement has been made to have an insurer invoiced directly for medical and rehabilitation goods and services provided to the insured person. The application of the Standard Invoice is listed in Chart 1 attached to this Bulletin. The Standard Invoice can also be accepted by insurers for attendant care services provided by health care providers and other professional care providers. Insurers are also authorized to accept the Standard Invoice for specified assessments, examinations, certificates, reports and treatment plans under section 24 of the *Statutory Accident Benefits Schedule - Accidents on or after November 1, 1996* (SABS). The Standard Invoice will be used by all Designated Assessment Centres when billing for assessment services.

The Standard Invoice does not apply to claims under Bill 164 or OMPP. The Standard Invoice does not apply where providers bill their clients directly.

Questions regarding the application of the Standard Invoice are to be directed to the Insurance Bureau of Canada (IBC) Consumer Information Centre at (416)362-9528 or toll free 1-800-387-2880 (from Ontario only) or can be submitted at the Standard Invoice website at www.standardinvoice.on.ca.

The Standard Invoice replaces the Treatment Plan Expense Form (OCF-18A/59) which was released by the Ontario Insurance Commission with OIC Bulletin No. A-10/96, dated October 23, 1996.

Background

This new form was developed by the IBC with the assistance of FSCO. Last year FSCO contracted with the Canadian Institute for Health Information (CIHI) to begin developing a standard invoice for health care providers. The introduction of a Standard Invoice is also a commitment made by FSCO in its most recent Statement of Priorities.

The introduction of the Standard Invoice is Phase 1 of the Standard Invoice project. FSCO released a Request for Comment on Proposal for Standard Invoice, dated August 28, 2001, seeking feedback on other phases of the Standard Invoice project as proposed by the IBC. The Request for Comment seeks input on the proposed development of an agency for centrally collecting data, a database, a mandatory registration system, an electronic version of the Standard Invoice, privacy concerns, and other issues. The proposed establishment of a database is intended to provide government, the insurance industry, and the rehabilitation sector with useful information on rehabilitation costs for auto accidents. The future phases of this project will be determined following a review of responses to the Request for Comment.

Registration of Health Care Providers

It is being proposed that one day all providers and facilities that bill insurance companies using the Standard Invoice will be required to register with a designated agency. The registration process will ensure that each provider and facility has a unique identifier. A provider is considered the individual that provides the goods or service. A facility is considered the entity or individual that submits an invoice and receives the payment. Sole practitioners will need to register as a provider and facility.

The following health professionals will be automatically registered by their regulatory college as providers: physiotherapists, occupational therapists, massage therapists, and speech-language pathologists and audiologists. However, colleges will not be registering any facilities. Sole practitioners would have to register as a facility on their own.

A voluntary registration system is currently being operated by the IBC. Registration can be conducted online through the Internet. The website address for the registration system is: www.aisiregistration.on.ca. Instructions for registering are found at www.standardinvoice.on.ca. For those unable to register over the Internet, a registration form can be obtained by calling the IBC Consumer Information Centre at (416) 362-9528 or toll free 1-800-387-2880 (from Ontario only). Questions concerning the registration system can also be directed by e-mail to aisiregistration@ibc.ca. The completed registration form should be sent to: AISI Registration, Suite 700, 240 Duncan Mill Road, Don Mills, ON M3B 1Z4.

User Manual

To assist health care providers in completing and submitting a Standard Invoice for payment, the IBC has developed a User Manual. The manual contains instructions on completing the Standard Invoice as well as a list of the most common procedural codes for the major health care provider groups. The IBC will automatically send a copy of the User Manual to each health care facility that registers with the IBC. Copies of the manual can also be downloaded through the Internet. The website address where the User Manual can be found is: www.standardinvoice.on.ca.

Coding

The Standard Invoice adopts the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Canada (ICD-10-CA) for coding injuries and sequelae. The ICD-10-CA is the new national standard for coding injuries. The Standard Invoice contains a Quick Pick List developed by the IBC in consultation with health provider associations of the most common injury codes for auto accident victims. If none of the Quick Pick List selections are appropriate, health care providers will be able to use other ICD-10-CA codes.

The other coding system adopted in the Standard Invoice is the Canadian Classification of Health Interventions (CCI). These codes have been developed by the CIHI to classify health interventions and procedures. The User Manual contains a Quick Pick List of the most common CCI codes for auto accident victims. This list was also developed by the IBC in consultation with health provider associations. If none of the Quick Pick List selections are appropriate, health care providers will be able to use other CCI codes.

The User Manual also contains a short list of codes for goods and supplies provided to insured persons by health care providers. These codes were developed by the IBC.

Health care providers who have questions concerning the injury or intervention codes may wish to contact their respective associations or the IBC. Further information on coding assistance will be made available at the Standard Invoice website at www.standardinvoice.on.ca.

This first phase of the Standard Invoice will give insurers and health care providers experience in the use of the form and coding. Consultations will be undertaken prior to launch of future phases on the adequacy of the quick-pick list codes and the ease and use of the form. Health care provider associations may wish to consider developing supplementary coding lists to assist their members if necessary.

Further information on ICD-10-CA and CCI codes may be obtained from the CIHI. The CIHI website is: www.cihi.ca. Questions regarding the completion of the Standard Invoice should be directed to the IBC Consumer Information Centre at (416) 362-9528 or toll free 1-800-387-2880 (from Ontario only) or may be submitted at the Standard Invoice website at www.standardinvoice.on.ca.

How to obtain copies of the Standard Invoice

Copies of the Standard Invoice can be downloaded from FSCO in PDF format through the Internet. The FSCO website is: www.fsco.gov.on.ca. The form can also be downloaded from the Standard Invoice website: www.standardinvoice.on.ca.

Insurance companies will initially be expected to provide copies of the Standard Invoice to health care providers and facilities that are currently billing applicable medical and rehabilitation goods and services.

A French version of the Auto Insurance Standard Invoice (OCF-21/59) will be made available pending the completion of an authorized translation.

Philip Howell Chief Executive Officer and Superintendent of Financial Services (Acting)

October 1, 2001

Attachment: Auto Insurance Standard Invoice (OFC-21/59)

Chart 1- Application of Standard Invoice by Type of Service/Goods under the Statutory Accident Benefits Schedule (SABS)				
SABS Section	Type of Service/Goods	Subject to Standard Invoice	Not Subject to Standard Invoice	
	Medical Benefits			
14 (2) (a)	medical, surgical, dental, optometric, hospital, nursing, ambulance, audiometric and speech-language pathology services	medical, nursing, audiometric and speech-language pathology services	surgical, dental, optometric, hospital, and ambulance services	
14 (2) (b)	chiropractic, psychological, occupational therapy and physiotherapy services	~		
14 (2) (c)	medication		~	
14 (2) (d)	prescription eyewear		~	
14 (2) (e)	dentures and other dental devices		~	
14 (2) (f)	hearing aids, wheelchairs or other mobility devices, prostheses, orthotics and other assistive devices	supplies provided to the patient by health care providers	supplies purchased by the patient	
14 (2) (g)	transportation for the insured person to and from treatment sessions, including transportation for an aide or attendant		~	
14 (2) (h)	other goods and services of a medical nature	V		
	Rehabilitation Benefits			
15 (5) (a)	life skills training	V		
15 (5) (b)	family counselling	V		
15 (5) (c)	social rehabilitation counselling	V		
15 (5) (d)	financial counselling		~	
15 (5) (e)	employment counselling		~	
15 (5) (f)	vocational assessments	~		
15 (5) (g)	vocational or academic training		~	
15 (5) (h)	workplace modifications and workplace devices including communication aids		~	

Chart 1- Application of Standard Invoice by Type of Service/Goods under the Statutory Accident Benefits Schedule (SABS)				
SABS Section	Type of Service/Goods	Subject to Standard Invoice	Not Subject to Standard Invoice	
15 (5) (i)	home modifications and home devices including communication aids, or a new home instead of home modifications		•	
15 (5) (j)	vehicle modifications or a new vehicle instead of modifying an existing vehicle		~	
15 (5) (k)	transportation for the insured person to and from counselling sessions training sessions and assessments, including transportation for an aide or attendant		•	
15 (5) (l)	other goods and services other than case management		'	
16	attendant care services	provided by health care providers and other professional care providers	provided by family, neighbours and other non-professional care providers	
17	case manager services	~		
24	Assessments and Reports Disability Certificate (OCF-3/59) Certificate for Attendant Care (OCF-15/59) Treatment Plan (OCF-18/59) Application for Determination of Catastrophic Impairment (OCF- 19/59) Assessment of Attendant Care Needs (Form 1) Designated Assessment Centre Summary Report (OCF 11B)			
42	insurer examinations	v		