

SECTION 18 – PRIMARY CARE NURSE PRACTITIONER AFFILIATION

The attached fact sheets provide information on applicable Special Premiums, After Hours and Steps required to affiliate a Primary Care Nurse Practitioner (PCNP) with your FHO so that his/her applicable services contribute towards FHO physicians Special Premium accumulations.

Special Premiums

- Effective April 1, 2007, any eligible services provided by an affiliated PCNP (submitted with the RN (EC) billing number) with service dates of April 1, 2007 or later will contribute to accumulations for Special Premium payments for Home Visits, Prenatal Care, and Office Procedures.
- There is no limit on the number of PCNPs that may be affiliated with your group, and a PCNP may be affiliated with more than one Primary Care Model at the same time.
- An affiliated RN (EC) may submit claims using his/her six (6) digit RN (EC) billing number for eligible services that are within his/her scope of practice as described in the *Regulated Health Professions Act, 1991 (RHPA)* and the *Nursing Act, 1991*, are delegated by physician(s), or are covered by a medical directive in the appropriate situation.
- Services submitted by a PCNP affiliated with your FHO will be reported on the Payment Summary Report on your solo and group RA. An example of Special Premiums reporting with PCNP contributions is attached for your reference.

After Hours Services

- PCNPs can fulfill the obligation of one session of after hours care per week for your FHO.
- PCNPs should only submit claims for eligible services that will contribute to physicians' Special Premiums.

MINISTRY OF HEALTH AND LONG-TERM CARE
Primary Health Care Team

FACT SHEET

Title: Primary Care Nurse Practitioners: Special Premiums and After Hours Services

Date: March 2007

Eligible Patient Enrolment Models (PEMs):

- | | |
|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Family Health Networks (FHNs) | <input checked="" type="checkbox"/> Rural and Northern Physician Group Agreement (RNPGA) |
| <input checked="" type="checkbox"/> Group Health Centre (GHC) | <input checked="" type="checkbox"/> South Eastern Ontario Academic Medical Organization (SEAMO) |
| <input checked="" type="checkbox"/> St. Joseph's Health Centre | <input checked="" type="checkbox"/> Weeneebayko Health Ahtuskaywin (WHA) |
| <input checked="" type="checkbox"/> Family Health Organization (FHO) | |

The 2004 Memorandum of Agreement (MOA) between the Ministry of Health and Long-Term Care (MOHLTC) and the Ontario Medical Association (OMA) includes provisions that allow eligible services provided by Registered Nurses in the Extended Class (RN (EC)), commonly known as Primary Care Nurse Practitioners (PCNPs), to accumulate to physicians' Special Premiums effective April 1st, 2005. In addition, the MOA allows PCNPs to fulfill the obligation for one session of after hours care per week for a primary care group.

This fact sheet provides information on applicable Special Premiums and reporting, After Hours and the steps required to affiliate a PCNP with your Harmonized Model (HM) so that his/her Special Premium contributions provided during both regular and after hours are captured.

Special Premiums

- Beginning on April 1st, 2007, any eligible services provided by an affiliated PCNP (submitted with the RN (EC) billing number) with service dates of April 1st, 2007 or later will contribute to accumulations for Special Premium payments for Home Visits, Prenatal Care, and Office Procedures. (See below "Steps to Affiliate a PCNP".)
- There is no limit on the number of PCNPs that may be affiliated with your group.
- A PCNP may be affiliated with more than one HM at the same time.
- An affiliated RN(EC) may submit claims using his/her six (6) digit RN (EC) billing number for eligible services that are within his/her scope of practice as described in the *Regulated Health Professions Act*, 1991 (RHPA) and the *Nursing Act*, 1991, are delegated by physician(s), or are covered by a medical directive in the appropriate situation.

Note: This does not in any way change or affect the delegation of service rules as set out in the Physician Schedule of Benefits or the RN (EC) Scope of Practice as described in the *Regulated Health Professions Act*, 1991 (RHPA) and the *Nursing Act*, 1991¹. In addition, submission of claims for these premiums does not change any program requirements the PCNP may currently have with regards to performance reporting.

¹ See also: College of Nurses of Ontario documents: CNO Practice Standard, Registered Nurses in the Extended Class (2005)
CNO Reference Document: Legislation and Regulation: RHPA: Scope of Practice, Controlled Acts Model (2005)

- Following receipt of confirmation of a PCNP's affiliation with your group, he/she may submit claims for eligible services that contribute to Special Premiums. Regular state-dating rules will apply to claims submitted with the RN (EC) billing number.
- A PCNP may submit claims for eligible services with his/her RN (EC) billing number using your existing billing system/software. It may be necessary for you to consult with your software vendor to add the PCNP to your current billing system.
Note: If your group submits claims with a B-group number, the PCNP may also submit for eligible services using your HM's B-group number.
- Eligible services submitted with the RN (EC) billing number will be processed and paid at zero dollars. Any services that are not eligible for contribution to a physician's Special Premiums will reject to the PCNP's claims error report with the error code 'EPA – PCN billing not approved'. Please refer to your primary care agreement for the list of eligible services that contribute to each of the applicable Special Premiums.
- Services submitted by a PCNP affiliated with your group will be reported on the Payment Summary Report on your solo and group RA. An example of Special Premiums reporting with PCNP contributions is attached for your reference.
- The implementation of this initiative has been delayed; please contact your Ministry site team if you have any concerns regarding services provided by a PCNP during the 2005/2006 and 2006/2007 fiscal years that may have contributed to your special premiums for Home Visits, Pre-Natal, and Office Procedures.

After Hours Services

- PCNPs can fulfill the obligation of one session of after hours care per week for your group.
- PCNPs should only submit claims for eligible services that will contribute to physicians' Special Premiums.

Steps to Affiliate a PCNP:

Note: The process below applies to those PCNPs who already have an RN (EC) billing number. Those who do not should contact their local Ministry office for information on how to obtain an RN (EC) billing number.

1. The PCNP and Lead Physician must complete and sign a *Nurse Practitioner Authorization for Primary Care Harmonized Model Agreements* form (attached).
2. The PCNP must also complete and sign:
 - *Undertaking by Physician/Practitioner for Participation in Machine Readable Input (MRI)* form, and
 - *Electronic Data Transfer (EDT) Undertaking and Acknowledgement* form (if applicable).
3. Completed forms must be sent to your Ministry site contact.
4. The Ministry will confirm the PCNP's affiliation with your group in writing to the Lead/Contact Physician.
5. The PCNP may begin to submit claims for eligible services once the above confirmation has been received and the PCNP is approved for diskette/electronic submission.

Note: If a PCNP was associated with your group prior to April 1st, 2007, he/she should date the *Nurse Practitioner Authorization for Primary Care Harmonized Model Agreements* form April 1st, 2007.

For more information please contact your Ministry site team at 1-866-766-0266.

Example of Special Premium reporting on the RA:

| CURRENT FISCAL (2005/2006) | PREMIUM ACCUMULATIONS | | PREMIUM PAYMENT | |
|----------------------------------------------|-----------------------|---------|------------------|----------|
| | CURRENT MONTH | YTD | CURRENT MONTH | YTD |
| HOSPITAL: | | | | |
| MIN SERVICE LEVEL \$2000 | | | | |
| PREMIUM (\$5000) | 220.90 | 820.90 | .00 | .00 |
| OBSTETRICS: | | | | |
| MIN SERVICE LEVEL 5 | | | | |
| PREMIUM (\$3200) | 1 | 3 | .00 | .00 |
| OFFICE PROC: | | | | |
| MIN SERVICE LEVEL \$1200 | | | | |
| PREMIUM (\$2000) | 272.50 | 1287.40 | 2,000.00 | 2,000.00 |
| * (NP) | 101.25 | 665.35 | | |
| PALLIATIVE CARE: | | | | |
| MIN SERVICE LEVEL 4 | | | | |
| PREMIUM (\$2000) | 0 | 0 | .00 | .00 |
| HOME VISITS: | | | | |
| MIN SERVICE LEVEL 100 | | | | |
| PREMIUM (\$2000) | 11 | 21 | .00 | .00 |
| * (NP) | 6 | 12 | | |
| PRENATAL: | | | | |
| MIN SERVICE LEVEL 5 | | | | |
| PREMIUM (\$2000) | 3 | 9 | 2,000.00 | 2,000.00 |
| * (NP) | 2 | 6 | | |
| PC-SERIOUS MENTAL ILLNESS: | | | | |
| MIN SERVICE LEVEL 5, 10 | | | | |
| PREMIUM (\$1000, \$2000) | 0 | 1 | .00 | .00 |
| CURRENT FISCAL TOTALS | | | 4,000.00 | 4,000.00 |
| PREVIOUS/CURRENT FISCAL TOTALS | | | 6,000.00 | 6,000.00 |
| * AMOUNT INCLUDED IN THE TOTAL ACCUMULATIONS | | | | |

Nurse Practitioner Authorization for Primary Care Harmonized Model Agreements

We the undersigned agree that services rendered by the Primary Care Nurse Practitioner(s) that we employ, within the scope of his/her practice will be counted towards our targets for Home Visits, Prenatal Care and Office Procedure Special Premiums in accordance with Appendix E, section 7.4 of the 2004 Memorandum of Agreement. Furthermore we agree that such services will be shadow billed and paid at zero for the exclusive purposes of tracking such services and including them when calculating Special Premiums under our Primary Care Harmonized Model Agreements.

AGREED:

| | | |
|----------------------------------------------|-----------------------------------|---------------|
| _____ Name of Primary Care Group | _____ Group ID | |
| _____ Name of Primary Care Lead Physician | _____ Lead Physician Signature | _____ Date |

Nurse Practitioner(s):

| | | | |
|---------------|---------------------------------|--------------------|-------------------------|
| _____ Name | _____ RN (EC) Billing Number | _____ Signature | _____ Effective Date |
| _____ Name | _____ RN (EC) Billing Number | _____ Signature | _____ Effective Date |
| _____ Name | _____ RN (EC) Billing Number | _____ Signature | _____ Effective Date |

Additional Requirements: (forms to be completed by the Primary Care Nurse Practitioner (PCNP))

- 1) *Undertaking by Physician/Practitioner for Participation in Machine Readable Input (MRI) form*
- 2) *Electronic Data Transfer (EDT) Undertaking and Acknowledgement form*

Note:

- The PCNP must wait for confirmation from PHCT that he/she has been affiliated with the group prior to submitting his/her services.
- The PCNP must be approved for diskette/electronic submission prior to submitting his/her services.
- The PCNP must be added to your billing software system and PCNP services must be submitted using his/her RN (EC) Billing Number (starts with 7#####).
- PCNP services will be subject to normal OHIP processing rules and regulations (e.g. must have valid Health Number and Version Code, six month submission deadline, etc.).
- PCNP services will be subject to any processing rules associated with your Primary Care Harmonized Model Agreement (e.g. only services provided to your enrolled patients will accumulate).
- The PCNP should only shadow bill for claims associated with the Home Visit, Prenatal Care, and Office Procedures Special Premiums.
- Where the PCNP is Ministry-funded, submission of claims for these premiums does not change any program requirements the PCNP currently has with regards to performance reporting (e.g. continue to submit reports as per Ministry funding contract).
- Shadow billed claims should be submitted with the fee billed amount listed in the current Schedule of Benefits, but will be processed and reported at zero payment. You may wish to discuss this with your software vendor.

Please complete and return forms to your Ministry site team at the appropriate address below:

Ministry of Health and Long-term Care
Primary Health Care Team
1075 Bay Street, 9th Floor
Toronto ON M5S 2B1

Ministry of Health and Long-term Care
Primary Health Care Team
80 Queen Street, 3rd Floor
Kingston, ON K7K 6W7