INDIVICA

Bonus Codes and CME's

In order to bill for bonus codes and CME's, you will have to create an invoice for a patient. You will then have to choose a special type of Billing Type (Bonus Codes) before you submit the invoice to OHIP.

I. Create a Bonus, Patient
1. Create a new demographic. Give it an easily recognizable name (e.g. Bonus, Patient).
   Note: Demographics in OSCAR require a valid date of birth. This value does not affect the bonus billing process.

2. Be sure this patient's health card information is left blank.
   Note: If anything is placed inside the health card information field, the invoice will be rejected.

II. Create the Invoice
1. Create an invoice for this Bonus, Patient. This can be done through the master demographic file.

I N D I V I C A

2. Bill this patient for the appropriate bonus codes or CME codes.

Code	Time	%
Q555A x	@	
Q104A x	@	
x	@	
x	@	
x	@	

3. Be sure to set the Billing Type as Bonus Codes.
    Note: If this step is not done, the bill will be rejected.

Billing Type	Bill OHIP ⬍
⬍ Manual:	Bill OHIP / WSIB
⬍	Do Not Bill / IFH
Billing form:	3rd Party / –OCF / –ODSP / –CPP / –STD/LTD
Description	**Bonus Codes** / RMB

4. Choose the appropriate billing date and physician. For CME's, specify the date of the session.

BONUS, PATIENT M 112 years ▦ 2012-05-17

5. Click Next. A warning will appear because there is no diagnostic code. Click OK. Click Save on the next screen. When you generate your next batch of invoices to OHIP, this invoice will also be sent.
    Note: Prevention bonus codes will show $0.00 as a fee. This is not an error; you will receive the appropriate amount when the bill is settled by OHIP.

Note: It is recommended that you create single invoices for each prevention code and each CME claim. In the event of an error, this will make correcting invoices easier.