# REGISTRATION GUIDELINE FOR ENTERING INSURANCE INFORMATION IN REGIONAL MEDITECH SYSTEMS

Approved by the
Provincial Health Information Management Leadership Committee
April 26, 2023
EFFECTIVE IMMEDIATELY

## Background

Proper collection of insurance information is imperative to ensuring appropriate payment for services rendered. The lack of or incorrect collection of insurance information can result in the loss of millions of dollars in the health care system.

## Guiding Principles

- Accurate data entry in these fields is essential to ensure proper billing so that the appropriate collection of payment for services can be implemented.
- Some services are not covered by MCP, regardless of whether the patient has valid coverage. Typically, clinicians have this discussion with the patient or Finance will determine the need for billing.
- **The registration staff are responsible for asking who is responsible for the payment of the visit. There are posters at each registration area asking patients to let staff know who is responsible for payment of their visit.**
- Due to the restrictions and limitations of the regional Meditech platforms, each RHA has varying processes for how to capture insurance information. Once a new Health Information System (HIS) is implemented, these processes will be standardized, and this guideline will be updated.

## Procedures

The table in Appendix 1 outlines the standard registration requirements when completing the Insurances portion of the ADMISSIONS module in Meditech, during the registration process, for each RHA. Accurate data entry in these fields is essential to ensure proper billing so that the appropriate collection of payment for services can be implemented. The table demonstrates a variety of registration scenarios, states the correct way to enter the information, and provides a visual reference for each type, for each RHA.

For out-of-province health cards, the card should be photocopied (both sides) and the copy retained on the health record.

Declaration Forms will be completed as per regional policies.

Self-paying patients may be billed a pre-authorization fee, as per regional policies.

## APPENDIX 1- Regional Instructions for Capturing Insurance Information

| In Province Patient: Patient is eligible to receive MCP coverage and has permanent residence in NL | | | | | |
|---|---|---|---|---|---|
| **Scenario** | **Field** | **EH** | **CH** | **WH** | **LGH** |
| 1. In-province Patient with a valid MCP and accepted expiry date, and service is covered by MCP. | HCN | MCP, eligible flag "y" | MCP, eligible flag "y" | MCP, eligible flag "y" | MCP, eligible flag "y" |
| | Ins#1 | NHI | NL | MCP | NHI |
| | Policy#1 | MCP number | MCP number | MCP number | MCP number |
| | FIN Class Default | NHI | PROV | P | NHI |
| 2. In-province Patient with a valid MCP and accepted expiry date; service is NOT covered by MCP when the clerk knows that the service is not covered (Most of the time clerks do not know if the service is covered or not and will follow the process for Scenario 1 and Finance will need to correct it and issue a bill.) | HCN | MCP, eligible flag "y" | MCP, eligible flag "y" | MCP, eligible flag "y" | MCP, eligible flag "y" |
| | Ins#1 | PAT | SP | Not entered | SP |
| | Policy#1 | MCP number | MCP number | MCP number | MCP number |
| | FIN Class Default | FOR | SP | Not entered | PAT |
| 3. In-province Patient with an Expired MCP | HCN | MCP, eligible flag "n" | MCP, eligible flag "n" | MCP, eligible flag "n" | MCP, eligible flag "n" |
| | Ins#1 | PAT | SP | Not entered | SP |
| | Policy#1 | MCP number | MCP number | MCP number | MCP number |
| | FIN Class Default | FOR | SP | Not entered | PAT |
| 4. In-province Patient without an MCP or other Health Care Number (HCN) - person is resident but for some reason has no HCN/MCP. | HCN | 0 | Blank | Blank | Blank |
| | Ins#1 | PAT | SP | Not entered | SP |
| | Policy#1 | Blank | Blank | Blank | Blank |
| | FIN Class Default | FOR | SP | Not entered | SP |

| Interprovincial Patient: Patient is not eligible for MCP coverage but receives Health Care coverage from another Canadian Province | | | | | |
|---|---|---|---|---|---|
| **Scenario** | **Field** | **EH** | **CH** | **WH** | **LGH** |
| 1. Interprovincial patient presents with actual provincial Health Care Card, and it has a valid expiry date (for those provinces that require it). | **HCN** | 0 (zero) | HCN number and expiry date if applicable | Blank | Blank |
| | **Ins#1** | Mnemonic for the province | Mnemonic for the province | Mnemonic for the province | Mnemonic for the province |
| | **Policy#1** | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable |
| | **FIN Class Default** | OP | OOP | O | OP |
| 2. Interprovincial patient presents the actual provincial Health Care Card, but it does not have a valid expiry date (for those provinces that require it) OR Interprovincial patient does not have card | **HCN** | 0 (zero) | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable |
| | **Ins#1** | PAT | Mnemonic for the province | Mnemonic for the province | SP |
| | **Policy#1** | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable |
| | **FIN Class Default** | FOR | OOP | O | SP |

| Foreign Patient: Patient is not from Canada and not eligible for Canadian health care coverage or has travel insurance only | | | | | |
|---|---|---|---|---|---|
| **Scenario** | **Field** | **EH** | **CH** | **WH** | **LGH** |
| 1. Foreign Patient presents for service.<br>*Exceptions:<br>• St. Pierre-Miquelon residents<br>• Foreign Sailors<br>See below | HCN | 0 | Blank | Blank | Blank |
| | Ins#1 | PAT | Out of Country (OOC) | NR | SP |
| | Policy#1 | Blank | Blank | Blank | Blank |
| | FIN Class Default | FOR | OOC | NR | SP |
| 2. St. Pierre-Miquelon Patient presents with appropriate insurance information | HCN | 0 | Blank | Blank | Blank |
| | Ins#1 | STP | Out of Country (OOC) | Non-Resident (NR) | SP |
| | Policy#1 | 13 digit insurance number | Blank | Blank | Blank |
| | FIN Class Default | FOR | OOC | NR | SP |
| 3. Foreign Sailor presents for service. | HCN | 0 | Blank | Blank | Blank |
| | Ins#1 | AG | Out of Country (OOC) | Non-Resident (NR) | SP |
| | Policy#1 | Blank | Blank | Blank | Blank |
| | FIN Class Default | FOR | OOC | NR | SP |
| 4. Immigration – Immigrations Canada/Interim Federal Health Program | HCN | 0 | Blank | Blank | Blank |
| | Ins#1 | IFHP | Refugee | Blue Cross | SP |
| | Policy#1 | UCI number from program | Client ID number | UCI number | Blank |
| | FIN Class Default | FOR | OOC | N | SP |

## Patient's service is covered by Worker's Compensation, RCMP Worker Injuries, Department of Veteran's Affairs (DVA), Department of National Defense (DND), Canadian Forces Base (CFB), Air Traffic Controllers (ATC) – used in Central for EKGs only

| Scenario | Field | EH | CH | WH | LGH |
|---|---|---|---|---|---|
| 1. Patient presents, and the service is covered by Worker's Compensation. | HCN | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable |
| | Ins#1 | WCCNF (or other province responsible e.g., WCALB) | WCC-NL (or other province responsible e.g., WCC-AB) | WCC | WCCNF (or other province responsible e.g., WCALB) |
| | Policy#1 | Claim Number | Claim Number | Claim number. If no claim number enter "New Claim" | Blank |
| | FIN Class Default | WCC | WCC | W | WCC |
| 2. Patient presents, and the service is covered by Department of Veteran's Affairs (DVA). | HCN | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable |
| | Ins#1 | DVA in Ins#1; NHI in Ins#2 | NL in Ins#1; DVA in Ins#2 | DVA in Ins#1; MCP in Ins#2 | NHI in Ins#1; DVA in Ins#2 |
| | Policy#1 | "K" number in Ins#1; HCN in Ins#2; | HCN in Ins#1; "K" number in Ins#2 | "K" number in Ins#1; MCP in Ins#2 | HCN in Ins#1; "K" number in Ins#2 |
| | FIN Class Default | DVA/NHI | PROV/Other | F/P | NHI/DVA |
| 3. Patient presents, and the service is covered by the Department of National Defense (DND). | HCN | 0 | Service Number | Blank | Blank |
| | Ins#1 | DND | DND CFB - Out CFB - Special | CFB and closest station (e.g., CFB - Gander) | PAT |
| | Policy#1 | Serial Number | Service Number | Serial Number | Blank |
| | FIN Class Default | DND | Other | F | PAT |

| Patient's service is covered by Worker's Compensation, RCMP Worker Injuries, Department of Veteran's Affairs (DVA), Department of National Defense (DND), Canadian Forces Base (CFB), Air Traffic Controllers (ATC) – used in Central for EKGs only | | | | | |
|---|---|---|---|---|---|
| **Scenario** | **Field** | **EH** | **CH** | **WH** | **LGH** |
| 4. Air Traffic Controllers for **Central Health ONLY** | HCN | N/A | HCN number and expiry date if applicable | N/A | N/A |
| | Ins#1 | N/A | Air Traffic Controller (ATC) | N/A | N/A |
| | Policy#1 | N/A | MCP number | N/A | N/A |
| | FIN Class Default | N/A | Other | N/A | N/A |
| 5. International students with Student Insurance such as Guard Me (those without this insurance would be registered as one of the appropriate categories above). | HCN | 0 | Blank | Blank | Blank |
| | Ins#1 | GUARD.ME | GUARD.ME | GUARD.ME | SP |
| | Policy#1 | Guard Me Number | Guard Me number | Guard Me Number | Blank |
| | FIN Class Default | NHI | OOC | N | SP |
| 6. An RCMP member presents with a work related injury. | HCN | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable | HCN number and expiry date if applicable |
| | Ins#1 | RCMP | RCMP WCC | RCMP | RCMP member completes their own paperwork |
| | Policy#1 | Claim number | Claim number or blank | Armistice number from Blue Cross Card | N/A |
| | FIN Class Default | DND (This may need to be updated in the future) | OTH | W | N/A |

| Other Provincial Health Care Number Mnemonics | | | | | |
|---|---|---|---|---|---|
| Province | Field | EH | CH | WH | LGH |
| Alberta | Ins# | ALB | AB | AB | ALB |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | NOT REQUIRED | | | |
| British Columbia | Ins# | BCOLUM | BC | BC | BCOLUM |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | NOT REQUIRED | | | |
| Manitoba | Ins# | MAN | MB | MB | MAN |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | NOT REQUIRED | | | |
| New Brunswick | Ins# | NB | NB | NB | NB |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | DD/MM/YY | | | |
| Northwest Territories | Ins# | NWT | NT | NWT | NWT |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | DD/MM/YY | | | |
| Nova Scotia | Ins# | NS | NS | NS | NS |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | DD/MM/YY | | | |
| Nunavut | Ins# | NUNAVUT | NU | NT | NUNAVUT |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | DD/MM/YY | | | |
| Ontario | Ins# | ONT | ON | OHIP | ONT |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | DD/MM/YY | | | |
| Prince Edward Island | Ins# | PEI | PE | PEI | PEI |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | DD/MM/YY | | | |
| Quebec | Ins# | QUE | QC | QUE | QUE |
| | FIN Class Default | OP | OOP | O | OP |
| | Expiry Date Required | DD/MM/YY | | | |

| Other Provincial Health Care Number Mnemonics | | | | | |
|---|---|---|---|---|---|
| **Province** | **Field** | **EH** | **CH** | **WH** | **LGH** |
| Saskatchewan | **Ins#** | SASK | SK | SK | SASK |
| | **FIN Class Default** | OP | OOP | O | OP |
| | **Expiry Date Required** | DD/MM/YY | | | |
| Yukon | **Ins#** | YUKON | YT | YT | YUKON |
| | **FIN Class Default** | OP | OOP | O | OP |
| | **Expiry Date Required** | DD/MM/YY | | | |

**IF THERE IS NO EXPIRY DD (DAY OF MONTH) ON THE OUT-OF-PROVINCE CARD, USE THE LAST DAY OF THE EXPIRY MONTH*

Questions regarding this Standard can be directed to:

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Master Index Reference No: 2023-01
Issued: April 26, 2023
Distribution:  Provincial HIM Leadership Committee, Provincial Registration Committee, all RHAs and NLCHI