

Technical Specification for OHIP Payment Report Summary and OHIP Roster & Capitation Payment Reconciliation Reports

Ministry of Health and Long-Term Care

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**Technical Specification for OHIP
Payment Reporting Redesign (PRR) Project**

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Glossary

Term	Definition
Claim Submission Number (CSN, a.k.a., Billing Number)	A unique identifier that is assigned to a Health Care Provider who is registered with MOHLTC for the purpose of submitting claims for insured services.
MCEDT Service Schedule	A Service Schedule to the Master Service agreement that forms part of the agreement between the Service Requestor and MOHLTC and captures the roles and responsibilities that relate to the MCEDT via EBS.
Health Care Provider (HCP)	Individual, group or facility licensed to provide health care services to eligible residents of Ontario.
Health Information Custodian (HIC)	Health Information Custodian in or under <i>Personal Health & Information Privacy Act (PHIPA)</i> .
Identity Provider (IDP)	A party or organization that creates, maintains, and manages identity information for <i>principals</i> and performs principal authentication for other parties or organizations
Master Services Agreement (MSA)	The binding legal agreement through which MOHLTC accepts the identity of an end user at face value based on authenticating the end user's organization at the time of the service request.
MOHLTC	The Ontario Ministry of Health and Long-Term Care.
MOHLTC Electronic Business Services (EBS)	The Electronic Business Service is a framework which provides an electronic business gateway that exposes MOHLTC services to the Broader Health Sector and provides a full featured IAM suite of provisioning, business enrolment, business and IT federation agreements, technical specifications and terms of acceptable use governance.
Message Transmission Optimization Mechanism (MTOM)	A method of efficiently sending binary data to and from web services. For more information refer to http://www.w3.org/TR/soap12-mtom/ .
Output (Response) Message Fields	Output (Response) Message fields are those fields which are returned by the Medical Claims Electronic Data Transfer web service.
Service Provider (SP)	Throughout this document, Service Provider refers exclusively to MOHLTC, as the provider of the Medical Claims Electronic Data Transfer service via EBS.

Term	Definition
Simple Object Access Protocol (SOAP)	Simple Object Access Protocol: an XML-based protocol for exchanging structured information between computer systems. For more information refer to http://www.w3.org/TR/soap/ .
UUID	A version 4 Universally Unique Identifier (UUID) .
Web Services Description Language (WSDL)	Web Services Description Language: an XML-based language for describing web services and how to access them. For more information refer to http://www.w3.org/TR/wsdl .

Notice to Reader

All possible measures are exerted to ensure the accuracy of the contents of this technical specification document; however, the document may contain typographical or printing or other errors. The reader is cautioned against complete reliance upon the contents of the document without confirming the accuracy and currency of the information contained in it. The Crown in Right of Ontario, as represented by the Ministry of Health and Long-Term Care (MOHLTC), assumes no responsibility for errors or omissions in any of the information contained in this manual, or for any person's use of the material therein, or for any costs or damages associated with such use. In no event shall the Crown in Right of Ontario be liable for any errors or omissions, or for any damages including, without limitation, damages for direct, indirect, incidental, special, consequential or punitive damages arising out of or related to the use of information contained in this manual.

This technical specification is intended only to assist and guide the development of software and information management to access the reports outlined in this document.

This document does contain sample reports, XML files. The Ministry of Health and Long-Term Care will make revisions to the specification as required and will make every effort to give as much advance notice as possible of such revisions. It is essential that software developers keep current regarding any changes to this specification.

- Please direct any questions to the **Service Support Contact Centre (SSCC)** at **1 800 262-6524** or SSContactCentre.MOH@ontario.ca.

Intended Audience for this Technical Specification Document

This document is intended for use by developers of various software applications and products. It describes the XML schemas for the OHIP Summary Report and the OHIP Roster & Capitation Payment Reconciliation Report.

About This Document

This document is intended to provide the reader with sufficient information to decompose XML documents related to medical claims payment information. More specifically, the technical specifications contain annotated XML schema decomposition information for two (2) reports; namely, (1) the OHIP Payment Summary Report, and (2) the OHIP Roster & Capitation Payment Reconciliation Report.

The introduction provides an overview of the OHIP Payment Summary Report, OHIP Roster & Capitation Payment Reconciliation Report, the MCEDT service and provides a glossary of the terminology used throughout the document.

Appendices provided:

- Glossary of Terms contained in the Reports
- Abbreviations
- MCEDT Service
- Data Models
- Sample Reports
- Schema specifications
- Sample XML Files

Introduction

The reports will be available in PDF and XML format via the Medical Claims Electronic Data Transfer service which adheres to the EBS security model (IDP) and as such requires that the unique ministry identifier for a Service Requestor (SR) has been established .

Although the ministry does provide an MCEDT Web user interface for Enrolled Service Users to also download these PDF reports and XML files, all program to program interfaces to consume these reports and files MUST use the MCEDT web service and should never interface to the user interface. The user interface can and will change from time to time without notification.

See [Appendices](#) within this document for a more information on the MC EDT Service.

OHIP Payment Summary Report

This is a new monthly report containing information to summarize payments made to providers for reconciliation. See [Appendices](#) within this document for a sample report, schema and XML file.

MCEDT Resource Types

PSP – Payment Summary Report PDF

PSX – Payment Summary Report XML

OHIP Roster & Capitation Payment Reconciliation Report

The Roster and Capitation Payment Reconciliation report is a new report that consolidates information currently provided in 6 paper reports as well as providing the health care providers with a complete roster list every month. See [Appendices](#) of this document for a sample report, schema and XML file.

MCEDT Resource Types

RCP – Roster Capitation Report PDF

RCX – Roster Capitation Report XML

The new Roster & Capitation Payment Reconciliation Report will replace the following **existing** reports:

- 1) Base Rate and Comprehensive Care and Complex Capitation Payment Reconciliation Detail Report
- 2) Base Rate, Comprehensive Care and Complex Capitation Payment Detail Report / Comprehensive Care and Complex Capitation Payment Details Report / Comprehensive Care Capitation Payment Detail Report
- 3) Comprehensive Care Capitation Payment Reconciliation Detail Report
- 4) Comprehensive Care and Complex Capitation Payment Reconciliation Detail Report
- 5) Enrolment Report – Patient Detail
- 6) Enrolment Report – Patient Summary

XML Schemas

The XML Schema definitions (XSD) for the OHIP Payment Summary Report and the OHIP Roster & Capitation Payment Reconciliation Report are well-formed and valid. The schema for each report is included in the [Appendices](#).

Validation of a XML document against the XSD

A valid XML document contains a reference to a XML Schema Definition (XSD), and its elements and attributes follow the grammatical rules that the XSD specifies.

The fields described in the schema definition are necessarily generic in order to follow the XML data typing standards.

This format consists of a dataset element, which contains a metadata element and a data element. The metadata element contains the data item information in item elements. The data element contains all the row and value elements.

Testing

Testing of the XML Schemas has been performed according to W3C Standards. The W3C organization has an XML Schema (XSD) Validation Tool, which is available online over the World Wide Web.

APPENDIX A: Abbreviations

Abbreviation

The table below lists each abbreviation used in the creation of XML field names that are found in the Glossary of Terms.

Abbreviation	Full Word
Actv	Activity
Amt	Amount
BR	Base Rate
CC	Comp Care
CM	Current Month
Col	Column
Ctgy	Category
CV	Complex Vulnerable
Desc	Description
Enrl	Enrolment
ID	Identifier
Org	Organization
Pymt	Payment
RA	Remittance Advice
Recon	Reconciliation
YTD	Year to Date

APPENDIX B: Glossary of Terms

GLOSSARY OF TERMS	
Report Field Name	Description
Activity End Date	End date of the member activity.
Activity Start Date	Start date of the member activity.
Network Base Rate Payment	Network Base Rate Payment for Roster Members with Enrolment Activity (Additions/Removals to Roster)
Comp Care Capitation	Comp Care Capitation for Roster Members with Enrolment Activity (Additions/Removals to Roster)
Complex Vulnerable Capitation Payment	Complex Vulnerable Capitation Payment for Roster Members with Enrolment Activity (Additions/Removals to Roster)
Network Base Rate Payment	Network Base Rate Payment for Roster Members with No Activity
Comp Care Capitation	Comp Care Capitation for Roster Members with No Activity
Complex Vulnerable Capitation Payment	Complex Vulnerable Capitation Payment for Roster Members with No Activity

GLOSSARY OF TERMS	
Report Field Name	Description
Group Payments, Exception Payments, Group Payments to Provider, Group Payments to Providers, Provider Summary, Providers Summary	Categories of Payment
Group, Group #	A ministry registration number assigned to organizations to facilitate payment consolidation.
Group	The name of the organization which facilitates payment consolidation.
Group/Solo Level, Payment To	Name to describe the type of group (will be either Group or Solo).

Status Column, Reason Code Column	
Status Code, Reason Code	
Status Description, Reason Description	
Member Days	
Reason Code	
Roster End	
Roster Start	
Status	
Term Code	
Total Members	Grand total for all of the member types (total for re-enrolled is excluded from this total).
Assigned Members Enrolled Members Pre-Members Unconfirmed Members Transferred Member Re-enrolled Members	Types of patients/members rostered to a physician who is participating in a primary care model.
N/A	Total for each type of member (assigned, enrolled, pre-member, unconfirmed, transferred and re-enrolled).
Age	Age of patient in years.
Date of Birth, Birth Date, Birthdate	Date patient was born. (YYYY-MM-DD)
Patient Name, First Name	Patient's first name.
Health Number, Patient HN	The unique 10 digit individual health identification number assigned by the ministry to eligible Ontario residents.
Patient Name, Last Name	Patient's last name.
Sex, Sex Code	Sex of patient either M or F.
Provider First Name, Provider (Last Name, First Name)	Provider's first name.
Provider Last Name, Provider (Last Name, First Name)	Provider's last name.

Status Column, Reason Code Column	
Provider Middle Name	Provider's middle name.
Provider #	A ministry registration number assigned to individual providers who are lawfully entitled to provide insured services.
Current Month	
N/A	Payment description from the Clerk ID list of possible payments.
N/A	Payment ID for the Payment Description
Year to Date	Year-to-date total for each category of payment.
Current Month	Current month total for each payment category.
N/A	Date of Payment that was made by MOHLTC.
Total Payment (A+B), Total Group + Exception Payments (A), Group Payments To Provider Total, Group Payments To Providers Total (B), Provider Summary Total, Providers Summary Total	Total payment for each payment category.
Year to Date	Year-to-date total for each category of payment.
Base Rate Reconciliation Adjmt	
Comp Care Reconciliation	
Complex Vulnerable Capitation Adjmt	
Reconciliation End Date	The end date of the Reconciliation activity.
Reconciliation Start Date	The start date of the Reconciliation activity.
Report As Of Date	Date the report used to summarize the activity. YYYY-MM-DD

Status Column, Reason Code Column	
Report Date, Run Date	Date the report was generated. YYYY-MM-DDTHH:MM:SS
Report ID	Unique identifier assigned to the report by MOHLTC.
Report Name, Report	Name/title of the report.
Ministry of Health and Long-Term Care	Name of Reporting Organization.
For the Period, Report Period, For Period	Date the reporting period ended. YYYY-MM-DD
Remittance Advice	Calendar Month of the remittance advice. MM
Remittance Advice	Calendar Year of the remittance advice. YYYY
For the Period, Report Period, For Period	Date the reporting period started. YYYY-MM-DD
N/A	Indicates the reporting level at which the XML Data is being produced (e.g. Group or Provider level)
Roster Summary	Roster Summary Count
Roster Summary	Roster Summary Description
Roster Type	Roster Type Count
Roster Type	Roster Type Description
Fee Paid	Amount of payment.
Fee Code	Code which appears opposite the description of insured benefits listed in the various MOHLTC Schedules of Benefits and Facility Fee Schedule.
Service Date	Date the patient received the service. YYYY-MM-DD
Description	Description of the service code.
N/A	Subtotal patient categories include: Enrolled Patients Network Colleague Non-Enrolled Patients WSIB Pre-Network Payment Activation
Subtotal (# of patients, amount paid)	Subtotal amount for each patient category.

Status Column, Reason Code Column	
Subtotal (# of patients, amount paid)	Subtotal count for each patient category.
Total Amount for # Enrolled Patients Current Month's Total	Grand total amount for payments.
Total Amount for # Enrolled Patients, Current Month Total Network Base Rate Payment	Grand total amount for the Base Rate payments.
Total Amount for # Enrolled Patients, Current Month Total Comp Care Capitation	Grand total amount for the Comprehensive Care Capitation payments.
Total Amount for # Enrolled Patients Current Month's Total	Grand total number of patients.
Current Month Total Complex Vulnerable Capitation Payment	
Total Reconciliation Amount Shown on Remittance Advice	Grand total for Reconciliation payments.
Total Reconciliation Amount Shown on Remittance Advice, Total Base Rate Reconciliation Adjmt	Grand total for Base Rate Reconciliation payments.
Total Reconciliation Amount Shown on Remittance Advice, Total Comp Care Reconciliation	Grand total for Comprehensive Care Capitation Reconciliation payments.
Total Complex Vulnerable Capitation Adjmt	Grand total for Complex Vulnerable Capitation payments.

APPENDIX C: Medical Claims Electronic Data Transfer

The MCEDT service is a framework which allows electronic file processing to and from the ministry's adjudication and reporting systems. Service users who are authenticated to the MCEDT service can upload (send) files to the ministry for processing. Related reports can also be retrieved through this information channel by authorized users or their agents (designates). Service users and their agents must first register and enroll for a set of security credentials and be authenticated to the MCEDT service before they can upload (send) or download (receive) reports or files. The contents and format of files remain exactly as transmitted from the service user or from the ministry's information technology systems.

For more information on the MCEDT Service please refer to the current version of the technical specification for Medical Claims Electronic Data Transfer (MCEDT) Service at the following URL:

http://www.health.gov.on.ca/english/providers/pub/pub_menus/pub_ohip.html

APPENDIX D: Sample Reports

OHIP Payment Summary Report

Ministry of Health and Long-Term Care

REPORT: OHIP PAYMENT SUMMARY REPORT
GROUP: SAMPLE FAMILY HEATH ORGANIZATION
GROUP #: BZZZ

FOR PERIOD (YYYY-MM-DD): 2011-10-01 TO 2011-10-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: November 2011

TOTAL PAYMENT (A+B)		25,103.89	2011-11-15
GROUP PAYMENTS		CURRENT MONTH	YEAR TO DATE
	ACCESS BONUS PAYMENT	300.56	463.24
	ACCESS BONUS RECONCILIATION	-55.00	-155.00
	LTC ACCESS BONUS	75.55	752.36
	LTC ACCESS BONUS RECONCILIATION	-40.20	-40.20
	GROUP MANAGEMENT LEADERSHIP PAYMENT	1,074.77	7,443.62
	TELEPHONE HEALTH ADVISORY SERVICE PYMT	2,000.00	14,000.00
	FFS CORE SERVICE PAYMENT CEILING ADJMT	-100.00	-200.00
EXCEPTION PAYMENTS		CURRENT MONTH	YEAR TO DATE
	OFFICE PRACTICE ADMINISTRATION PAYMENT	1,586.38	1,586.38
	ESTIMATED PAYMENT - UNPROCESSED CLAIMS	0.00	4,000.00
	HCC MANUAL PATIENT REGISTRATION PYMT	600.00	1,200.00
	PRIMARY CARE ACCOUNTING ADJUSTMENT	-2,400.00	-2,400.00
	RECOVERY - AUTOMATED ESTIMATED PAYMENT	-2,000.00	-4,000.00
SAMPLE FAMILY HEATH ORGANIZATION	BZZZ	GROUP + EXCEPTION PAYMENTS TOTAL (A)	22,650.40

Report ID: PR945R1

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Ministry of Health and Long-Term Care

REPORT: OHIP PAYMENT SUMMARY REPORT
GROUP: SAMPLE FAMILY HEATH ORGANIZATION
GROUP #: BZZZ

FOR PERIOD (YYYY-MM-DD): 2011-10-01 TO 2011-10-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: November 2011

GROUP PAYMENTS TO PROVIDER				
POLONYTSKY, VASILI 101010			CURRENT MONTH	YEAR TO DATE
		TOTAL CLAIMS PAYABLE	3,054.28	9,584.26
		AGE PREMIUM PAYMENT	22.68	85.36
		OMA DUES	-125.00	-125.00
		PROCESSING CHARGE - MOH	-2.00	-6.00
		PROCESSING CHARGE-HST (R#124668666)	-3.00	-9.00
POLONYTSKY, VASILI 101010		GROUP PAYMENTS TO PROVIDER TOTAL	2,946.96	9,529.62

Report ID: PR945R1

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Ministry of Health and Long-Term Care

REPORT: OHIP PAYMENT SUMMARY REPORT
GROUP: SAMPLE FAMILY HEATH ORGANIZATION
GROUP #: BZZZ

FOR PERIOD (YYYY-MM-DD): 2011-10-01 TO 2011-10-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: November 2011

GROUP PAYMENTS TO PROVIDER			
GROUP ID	PROVIDER ID		
GNIDENKO, ARTEM	131313		
		TOTAL CLAIMS PAYABLE	21,099.99
		AGE PREMIUM PAYMENT	14.88
		OMA DUES	0.00
		PROCESSING CHARGE - MOH	0.00
		PROCESSING CHARGE-HST (R#124668666)	0.00
GNIDENKO, ARTEM	131313	GROUP PAYMENTS TO PROVIDER TOTAL	21,114.87
			42,415.58

Report ID: PR945R1

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Ministry of Health and Long-Term Care

REPORT: OHIP PAYMENT SUMMARY REPORT
GROUP: SAMPLE FAMILY HEATH ORGANIZATION
GROUP #: BZZZ

FOR PERIOD (YYYY-MM-DD): 2011-10-01 TO 2011-10-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: November 2011

GROUP PAYMENTS TO PROVIDERS				
SAMPLE FAMILY HEATH ORGANIZATION	BZZZ		CURRENT MONTH	YEAR TO DATE
		TOTAL CLAIMS PAYABLE	24,154.27	52,269.59
		AGE PREMIUM PAYMENT	37.56	181.61
		OMA DUES	-125.00	-475.00
		PROCESSING CHARGE - MOH	-2.00	-10.00
		PROCESSING CHARGE-HST (R#124668666)	-3.00	-21.00
SAMPLE FAMILY HEATH ORGANIZATION	BZZZ	GROUP PAYMENTS TO PROVIDERS TOTAL (B)	24,061.83	51,945.2

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Ministry of Health and Long-Term Care

REPORT: OHIP PAYMENT SUMMARY REPORT
GROUP: SAMPLE FAMILY HEATH ORGANIZATION
GROUP #: BZZZ

FOR PERIOD (YYYY-MM-DD): 2011-10-01 TO 2011-10-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: November 2011

PROVIDER SUMMARY				
POLONYTSKY, VASILI	101010			
		CURRENT MONTH	YEAR TO DATE	
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	-245.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDICAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
POLONYTSKY, VASILI	101010	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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Ministry of Health and Long-Term Care

REPORT: OHIP PAYMENT SUMMARY REPORT
GROUP: SAMPLE FAMILY HEATH ORGANIZATION
GROUP #: BZZZ

FOR PERIOD (YYYY-MM-DD): 2011-10-01 TO 2011-10-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: November 2011

PROVIDER SUMMARY				
NAPNENKO, YEVGEN	202020			
		CURRENT MONTH	YEAR TO DATE	
		NETWORK BASE RATE PAYMENT	17,321.35	42,945.85
		BASE RATE PAYMENT RECONCILIATION ADJMT	-450.00	-2,934.13
		COMP CARE CAPITATION	4,057.64	16,055.68
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	2,031.38	9,347.63
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	2,000.00	9,400.00
		SPECIAL PREMIUM PAYMENT	200.00	800.00
		CONTINUING MEDICAL EDUCATION PAYMENT	250.00	675.00
		RURALITY GRADIENT PREMIUM	86.00	265.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-150.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	955.00
NAPNENKO, YEVGEN	202020	PROVIDER SUMMARY TOTAL	25,767.06	77,971.68

Report ID: PR945R1

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Ministry of Health and Long-Term Care

REPORT: OHIP PAYMENT SUMMARY REPORT
GROUP: SAMPLE FAMILY HEATH ORGANIZATION
GROUP #: BZZZ

FOR PERIOD (YYYY-MM-DD): 2011-10-01 TO 2011-10-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: November 2011

PROVIDER SUMMARY				
PETRUKHNO, DENIS	303030			
		CURRENT MONTH	YEAR TO DATE	
		NETWORK BASE RATE PAYMENT	35,265.24	59,032.76
		BASE RATE PAYMENT RECONCILIATION ADJMT	-500.00	-5,392.12
		COMP CARE CAPITATION	10,735.45	23,945.72
		COMP CARE RECONCILIATION	0.00	-535.23
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	95.33
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62.00
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	15,829.12
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	1,190.23
		PREVENTIVE CARE BONUS	1,325.00	9,400.00
		SPECIAL PREMIUM PAYMENT	200.00	1,850.00
		CONTINUING MEDICAL EDUCATION PAYMENT	250.00	1,345.00
		RURALITY GRADIENT PREMIUM	86.00	429.00
		RURALITY GRADIENT ADJUSTMENT	-75.00	-350.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	2,250.00
PETRUKHNO, DENIS	303030	PROVIDER SUMMARY TOTAL	51,182.59	109,077.19

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Ministry of Health and Long-Term Care

REPORT: OHIP PAYMENT SUMMARY REPORT
GROUP: SAMPLE FAMILY HEATH ORGANIZATION
GROUP #: BZZZ

FOR PERIOD (YYYY-MM-DD): 2011-10-01 TO 2011-10-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: November 2011

PROVIDERS SUMMARY			
SAMPLE FAMILY HEATH ORGANIZATION	BZZZ		
		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	81,149.91 149,034.30
		BASE RATE PAYMENT RECONCILIATION ADJMT	-1,195.00 -11,382.50
		COMP CARE CAPITATION	20,880.34 59,035.18
		COMP CARE RECONCILIATION	0.00 -1,048.93
		COMPLEX VULNERABLE CAPITATION PAYMENT	136.71 292.63
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00 -37.86
		BLENDED FEE-FOR-SERVICE PREMIUM	9,281.80 38,162.41
		BLENDED FEE-FOR-SERVICE PREMIUM	375.36 2,755.17
		PREVENTIVE CARE BONUS	4,325 27,300.00
		SPECIAL PREMIUM PAYMENT	600.00 3,850.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	750.00 2,770.00
		RURALITY GRADIENT PREMIUM	258.00 949.00
		RURALITY GRADIENT ADJUSTMENT	-75.00 -600.00
		IN OFFICE SERVICE BONUS PAYMENT	300.00 4,405.00
SAMPLE FAMILY HEATH ORGANIZATION	BZZZ	PROVIDERS SUMMARY TOTAL	117,032.12 275,484.4

Report ID: PR945R1

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OHIP Roster & Capitation Payment Reconciliation Report

Ministry of Health and Long-Term Care

REPORT: ROSTER & CAPITATION PAYMENT RECONCILIATION REPORT
GROUP: SAMPLE FAMILY HEALTH ORGANIZATION
GROUP #: BZZZ
PROVIDER: POLONYTSKY, VASILI
PROVIDER #: 101010

FOR PERIOD (YYYY-MM-DD): 2011-05-01 TO 2011-05-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: June 2011

ROSTER SUMMARY	
PREVIOUS MONTH - Total Patients	25
CURRENT MONTH - Total Patients	18
ROSTER TYPE	
Enrolled Patients	14
LTC Enrolled Patients	3
Pre-Members	0
FHG Assigned Patients	1
Frail Elderly Enrolled Patients	1

Report ID: PR867R2

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Ministry of Health and Long-Term Care

REPORT: ROSTER & CAPITATION PAYMENT RECONCILIATION REPORT **FOR PERIOD (YYYY-MM-DD):** 2011-05-01 TO 2011-05-31
GROUP: SAMPLE FAMILY HEALTH ORGANIZATION **PAYMENT TO:** GROUP
GROUP #: BZZZ **REMITTANCE ADVICE:** June 2011
PROVIDER: POLONYTSKY, VASILI
PROVIDER #: 101010

ROSTER				RECONCILIATION PERIOD				CAPITATION							
HEALTH NUMBER	SEX	BIRTH DATE	AGE	PATIENT NAME	STATUS	ROSTER START	ROSTER END	TC ORDER	RECONCILIATION START	RECONCILIATION END	MEDICATIONS	REASON	BASE RATE RECONCILIATION ADJMT	COMP CARE RECONCILIATION	COMPLEX VULNERABLE CAPITATION ADJMT
RECONCILIATION ACTIVITY															
6666666666	F	1995-03-14	16	BLACKMORE,SAMANTHA		2011-02-14			2011-02-14	2011-04-30	44		29.06	6.48	0.00
9012901290	M	1939-05-20	72	DANIELS, SAM	LTC	2006-04-01					0	RND	0.01	0.00	0.00
9999999999	M	2000-05-31	11	PALMER, DEBBIE		2009-01-10	2011-04-30	57			0		0.00	0.00	0.00
2222222222	F	1966-05-19	44	ERIN, SALLY		2009-12-31	2011-03-09	91	2011-03-10	2011-04-30	22		-2.08	-1.47	0.00
2452452452	F	1958-03-26	53	HARPER, TRACEY					2010-05-01	2011-04-30	365	74D	-174.68	-30.29	0.00
9797979797	F	2000-05-31	11	KINGSTON, KATE	FHG	2005-05-15	2011-04-25	39							
3939393939	F	1958-03-26	53	MCGUNIGAL, CAROL					2010-09-01	2011-04-30	241	24D	-80.20	-14.65	0.00
5558884445	M	1963-01-15	48	MANVILLE, GEORGE		2011-03-01			2011-03-01	2011-03-31	31		10.00	5.00	0.00
2112211221	F	1925-07-27	105	PLASTIC, MARY	LTC	2009-05-05			2011-04-26	2011-04-30	5		2.52	1.43	0.00
2563256326	M	1932-02-27	79	WOOD, TRACEY		2011-01-01			2011-01-01	2011-04-30	120		12.00	9,000,042.00	4.67
9898989898	F	1979-08-01	32	ZOOLANDER, KEN		2010-05-01			2010-05-01	2011-04-30	334		16.00	9,000,086.00	2.54
9898989898	F	1979-08-01	32	ZOOLANDER, KEN	FHG	2005-05-15	2010-04-30	30							
TOTAL													9,000,024.63	-187.37	-26.29

Ministry of Health and Long-Term Care

REPORT: ROSTER & CAPITATION PAYMENT RECONCILIATION REPORT **FOR PERIOD (YYYY-MM-DD):** 2011-05-01 TO 2011-05-31
GROUP: SAMPLE FAMILY HEALTH ORGANIZATION **PAYMENT TO:** GROUP
GROUP #: BZZZ **REMITTANCE ADVICE:** June 2011
PROVIDER: POLONYTSKY, VASILI
PROVIDER #: 101010

ROSTER										ACTIVITY PERIOD			CAPITATION		
HEALTH NUMBER	SEX	BIRTH DATE	AGE	PATIENT NAME	STATUS	ROSTER START	ROSTER END	TEOR ME	ACTIVITY START	ACTIVITY END	MEMBERS	REASON	NETWORK BASE RATE PAYMENT	COMP CARE CAPITATION	COMPLEX VULNERABLE CAPITATION PAYMENT
CURRENT MONTH - ENROLMENT ADDITIONS/REMOVALS															
1000011111	M	1983-05-29	28	MALVE, AJAY		2011-05-01	2011-05-05	57	2011-05-01	2011-05-05	5		0.25	0.10	0.00
1000011111	M	1983-05-29	28	MALVE, AJAY		2011-05-15			2011-05-15	2011-05-31	17		3.85	1.34	0.00
4545454545	M	1979-09-27	32	STEEL, JIM		2011-05-01	2011-10-31	45	2011-05-01	2011-05-31	31		10.00	5.00	0.00
1111111111	F	1956-01-01	55	ZELLER, JANE		2011-05-10			2011-05-10	2011-05-31	21		1.98	2.19	0.00
2121212121	M	1976-07-08	35	ZINGER, BOB		2009-12-02	2011-05-20	57	2011-05-01	2011-05-20	20		2.01	2.15	0.00

Ministry of Health and Long-Term Care

REPORT: ROSTER & CAPITATION PAYMENT RECONCILIATION REPORT **FOR PERIOD (YYYY-MM-DD):** 2011-05-01 TO 2011-05-31
GROUP: SAMPLE FAMILY HEALTH ORGANIZATION **PAYMENT TO:** GROUP
GROUP #: BZZZ **REMITTANCE ADVICE:** June 2011
PROVIDER: POLONYTSKY, VASILI
PROVIDER #: 101010

ROSTER				ACTIVITY PERIOD				CAPITATION							
HEALTH NUMBER	SEX	BIRTH DATE	AGE	PATIENT NAME	STATUS	ROSTER START	ROSTER END	TC ORDER	ACTIVITY START	ACTIVITY END	REASON	REASON	NETWORK BASE RATE PAYMENT	COMP CARE CAPITATION	COMPLEX VULNERABLE CAPITATION PAYMENT
CURRENT MONTH - NO ACTIVITY															
666666666	F	1995-03-14	16	BLACKMORE, SAMANTHA		2011-02-14							10.00	5.00	0.00
555555555	F	1981-05-29	30	BOND, SARA		2009-05-24						AGE	12.39	7.77	0.00
9012901290	M	1939-05-20	72	DANIELS, SAM	LTC	2006-04-01						NME	10.00	5.00	0.00
6664443336	F	1985-09-17	25	GREY, BARB		2007-05-01							10.00	5.00	0.00
4646464646	F	1950-08-11	61	JOHNSON, KEN	FHG	2005-05-15									
8888888888	F	1916-10-11	95	MCMURPHY, DONNA	LTC	2011-03-05							10.00	5.00	0.00
2828282822	M	1963-02-25	48	NEEDHAM, DAVID		2011-04-01	2011-09-30	45					10.00	5.00	0.00
2112211221	F	1925-07-27	85	PLASTIC, MARY	LTC	2009-05-05							16.00	9.00	0.00
5558884445	M	1963-01-15	48	MANVILLE, GEORGE		2011-03-01							10.00	5.00	0.00
1123123123	F	1981-05-01	30	SILK, DORIS		2004-02-01						AGE	10.00	5.00	0.00
9009900990	M	1941-07-01	69	SILVER, TOM		2011-01-01							16.25	8.90	0.00
2563256326	M	1932-02-27	79	WOOD, TRACEY		2011-01-01							10.00	5.00	0.00
9898989898	F	1979-08-01	32	ZOOLANDER, KENDRA		2010-05-01							10.00	5.00	0.00
CURRENT MONTH TOTAL												152.73	81.45	0.00	

Report ID: PR867R2

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Run Date: 2013-10-18 11:52 AM

Ministry of Health and Long-Term Care

REPORT: ROSTER & CAPITATION PAYMENT RECONCILIATION REPORT
GROUP: SAMPLE FAMILY HEALTH ORGANIZATION
GROUP #: BZZZ
PROVIDER: POLONYTSKY, VASILI
PROVIDER #: 101010

FOR PERIOD (YYYY-MM-DD): 2011-05-01 TO 2011-05-31
PAYMENT TO: GROUP
REMITTANCE ADVICE: June 2011

LEGEND: STATUS Column

STATUS CODE	STATUS DESCRIPTION
FHG	FHG ASSIGNED PATIENT
LTC	LONG TERM CARE PATIENT
PME	PRE-MEMBER
PRM	PRE-MEMBERS
FEP	Frail Elderly Patient

LEGEND: REASON CODE Column

REASON CODE	REASON DESCRIPTION
01D	REMOVED FROM ROSTER - 01D
02D	REMOVED FROM ROSTER - 02D
03D	REMOVED FROM ROSTER - 03D
04D	REMOVED FROM ROSTER - 04D
05D	REMOVED FROM ROSTER - 05D
12D	REMOVED FROM ROSTER - 12D
13D	REMOVED FROM ROSTER - 13D
24D	REMOVED FROM ROSTER - 24D
40D	REMOVED FROM ROSTER - 40D
42D	REMOVED FROM ROSTER - 42D
44D	REMOVED FROM ROSTER - 44D
53D	REMOVED FROM ROSTER - 53D
54D	REMOVED FROM ROSTER - 54D
56D	REMOVED FROM ROSTER - 56D
60D	REMOVED FROM ROSTER - 60D
73D	REMOVED FROM ROSTER - 73D
74D	REMOVED FROM ROSTER - 74D
82D	REMOVED FROM ROSTER - 82D
90D	REMOVED FROM ROSTER - 90D
91D	REMOVED FROM ROSTER - 91D
99D	REMOVED FROM ROSTER - 99D
AGE	AGE CHANGE
NME	NAME CHANGE
RND	ROUNDING ADJUSTMENT

APPENDIX E: XML Schema

```
<?xml version="1.0" encoding="UTF-8"?>
<xs:schema xmlns:d="http://developer.cognos.com/schemas/xmldata/1/" xmlns:xs="http://www.w3.org/2001/XMLSchema"
targetNamespace="http://developer.cognos.com/schemas/xmldata/1/" elementFormDefault="qualified">
  <xs:element name="dataset">
    <xs:complexType>
      <xs:sequence>
        <xs:element name="Fault" type="xs:string" minOccurs="0" maxOccurs="1"/>
        <xs:element name="metadata" type="d:metadataType"/>
        <xs:element name="data" type="d:dataType"/>
      </xs:sequence>
    </xs:complexType>
  </xs:element>
  <xs:complexType name="metadataType">
    <xs:sequence>
      <xs:element name="item" type="d:itemType" maxOccurs="unbounded"/>
    </xs:sequence>
  </xs:complexType>
  <xs:complexType name="itemType">
    <xs:attribute name="name" type="xs:token" use="required"/>
    <xs:attribute name="type" use="required">
      <xs:simpleType>
        <xs:restriction base="xs:NMTOKEN">
          <xs:enumeration value="xs:ENTITIES"/>
          <xs:enumeration value="xs:ENTITY"/>
          <xs:enumeration value="xs:ID"/>
          <xs:enumeration value="xs:IDREF"/>
          <xs:enumeration value="xs:IDREFS"/>
          <xs:enumeration value="xs:NCName"/>
          <xs:enumeration value="xs:NMTOKEN"/>
          <xs:enumeration value="xs:NMTOKENS"/>
          <xs:enumeration value="xs:NOTATION"/>
          <xs:enumeration value="xs:Name"/>
        </xs:restriction>
      </xs:simpleType>
    </xs:attribute>
  </xs:complexType>
</xs:schema>
```



```
<xs:enumeration value="xs:QName"/>
<xs:enumeration value="xs:anyURI"/>
<xs:enumeration value="xs:base64Binary"/>
<xs:enumeration value="xs:boolean"/>
<xs:enumeration value="xs:byte"/>
<xs:enumeration value="xs:date"/>
<xs:enumeration value="xs:dateTime"/>
<xs:enumeration value="xs:decimal"/>
<xs:enumeration value="xs:double"/>
<xs:enumeration value="xs:duration"/>
<xs:enumeration value="xs:float"/>
<xs:enumeration value="xs:gDay"/>
<xs:enumeration value="xs:gMonth"/>
<xs:enumeration value="xs:gMonthDay"/>
<xs:enumeration value="xs:gYear"/>
<xs:enumeration value="xs:gYearMonth"/>
<xs:enumeration value="xs:hexBinary"/>
<xs:enumeration value="xs:int"/>
<xs:enumeration value="xs:integer"/>
<xs:enumeration value="xs:language"/>
<xs:enumeration value="xs:long"/>
<xs:enumeration value="xs:negativeInteger"/>
<xs:enumeration value="xs:nonNegativeInteger"/>
<xs:enumeration value="xs:nonPositiveInteger"/>
<xs:enumeration value="xs:normalizedString"/>
<xs:enumeration value="xs:positiveInteger"/>
<xs:enumeration value="xs:short"/>
<xs:enumeration value="xs:string"/>
<xs:enumeration value="xs:time"/>
<xs:enumeration value="xs:token"/>
<xs:enumeration value="xs:unsignedByte"/>
<xs:enumeration value="xs:unsignedInt"/>
<xs:enumeration value="xs:unsignedLong"/>
```

```

        <xs:enumeration value="xs:unsignedShort"/>
    </xs:restriction>
</xs:simpleType>
</xs:attribute>
<xs:attribute name="length" type="xs:int" use="optional"/>
<xs:attribute name="scale" type="xs:int" use="optional"/>
<xs:attribute name="precision" type="xs:int" use="optional"/>
<!--precision is usually tied to decimal type (xs:decimal), but it is also used specify the interval qualifier for interval
type (xs:duration). In this case the following values represent different interval qualifier: 0 for unknown, 1 for second, 2 for minute,
3 for minute to second, 4 for hour, 6 for hour to minute, 7 for hour to second, 8 for day, 12 for day to hour, 14 for day to minute, 15
for day to second, 16 for month, 32 for year, 48 for year to month.-->
</xs:complexType>
<xs:complexType name="dataType">
    <xs:sequence>
        <xs:element ref="d:row" minOccurs="0" maxOccurs="unbounded"/>
    </xs:sequence>
</xs:complexType>
<xs:element name="row">
    <xs:complexType>
        <xs:sequence>
            <xs:element name="value" nillable="true" maxOccurs="unbounded">
                <xs:complexType mixed="true">
                    <xs:simpleContent>
                        <xs:extension base="xs:string">
                            <xs:attribute name="currency"/>
                        </xs:extension>
                    </xs:simpleContent>
                </xs:complexType>
            </xs:element>
        </xs:sequence>
    </xs:complexType>
</xs:element>
</xs:schema>

```

APPENDIX G: XML Samples

OHIP Payment Summary Report



PSX_0A250_MAY2011.xml

OHIP Roster & Capitation Payment Reconciliation Report



RCX_0AA25_010011_MAY2011.xml