MINISTRY OF HEALTH AND LONG-TERM CARE
Primary Health Care and Family Health Teams

FACT SHEET

Title: Group Enrolment and Consent Principles and Procedures

Date: July 2008

Eligible Patient Enrolment Models (PEMs):

- ☑ Family Health Networks (FHNs)
- ☑ Family Health Organizations (FHOs)
- ☑ Family Health Groups (FHGs)
- ☑ Group Health Centre (GHC)
- ☑ St. Joseph's Health Centre
- ☑ Rural and Northern Physician Group Agreement (RNPGA)
- ☑ Community Sponsored Agreement Blended Salary Model (BSM)
- ☑ South Eastern Ontario Academic Medical Organization (SEAMO)
- ☑ Weeneebayko Health Ahtuskaywin (WHA)

The Primary and Community Care Committee (PCCC), a joint committee of the Ontario Medical Association (OMA) and the Ministry of Health and Long-Term Care (Ministry), has agreed to offer eligible physician groups in all Patient Enrolment Models (PEMs) excluding the Comprehensive Care Model (CCM), the option of selecting Group Enrolment and Consent.

Under group enrolment and consent, patients will enrol with an individual designated physician and provide consent for the Ministry's disclosure of specified personal health information to the group of physicians within the PEM model to which the designated physician belongs. The key benefit of this approach is that it facilitates the transfer of patients within the group following changes in physician membership and avoids the need for patient re-enrolment following a physician's departure if the patient remains with the same PEM.

PCCC has established a number of principles to facilitate the implementation.

1. All PEMs with the exception of the Comprehensive Care Model (CCM) will be eligible for group enrolment and consent.
2. Participation in group enrolment and consent is by physician choice. However, the entire group of physicians must opt for the same enrolment and consent approach. Unless the Ministry is officially notified, it will be assumed that the group has chosen to enrol to individual physicians rather than the group.
3. If group enrolment and consent is chosen, the obligation to coordinate and oversee the provision of comprehensive primary care to patients is assumed by the group on a best efforts basis.

4. A physician must be designated for each enrolled patient. The physician/group must notify patients of who their designated physician is and the designated physician must acknowledge the arrangement on the Patient Enrolment and Consent to Release Personal Health Information Form (4391-80).
5. Patients enrol with a designated physician by completing the Patient Enrolment and Consent to Release Personal Health Information Form. By signing the Patient Enrolment and Consent to Release Personal Health Information Form the patient is consenting to the Ministry's disclosure of specific personal health information to the group.
6. Physicians/groups migrating from individual to group enrolment and consent, or vice versa, must provide their patients with the prescribed notice regarding the changes in enrolment and consent.
7. The group's governance agreement should address the disposition of patient rosters when a physician leaves the group. In the absence of a specific governance provision, the designated physician must choose the disposition of the patients.
8. Subject to patient choice, when a physician leaves, the departing physician's patient roster can be transferred to another designated physician in the group and re-enrolment will not be required. The group must notify the Ministry of the physician's departure and the proposed disposition of the roster. The group must also notify patients of the change in designated physician.
9. Payment will remain the same.

2. PROCEDURES

While group enrolment and consent is by physician choice, all physicians in the group must unanimously opt for the same enrolment approach. If a group chooses group enrolment and consent, any physicians joining the group in the future must follow the same approach.

In the event that a group wishes to switch back to individual enrolment or a new physician with an existing roster of enrolled patients joins the group, a similar process to that outlined below should be followed. Please contact your Ministry site team at 1-866-766-0266 to discuss specific circumstances.

A. Governance

PEM agreements permit patient enrolment and consent to individual physicians. The Ministry and OMA are finalizing contract amendments in respect of group enrolment and consent and notices of these amendments will be sent in the future. Groups opting for group enrolment and consent should execute a governance agreement or make amendments to the existing agreement that includes provisions for the disposition of patient rosters upon a physician's departure from the group.

In the absence of a specific governance provision, the designated physician will choose the disposition of his/her patients and the Group will abide by the decision made by the designated physician.

B. Physicians/Group with Enrolled Patients - Notice to Patients

The collection, use and disclosure of personal health information in Ontario by health information custodians is governed by the *Personal Health Information Protection Act, 2004* (PHIPA), and the provision of a notice to enrolled patients is necessary to satisfy the consent requirements of PHIPA.

For physicians/PEM groups with enrolled patients, notice to patients regarding the transition to group enrolment and consent must be sent a minimum of 60 days prior to the completion of the *Group Enrolment and Consent Election Form* and submission to the Ministry. This is to allow patients sufficient time to cancel their enrolment or revoke their consent should they choose to do so. Following receipt of the patient notice, no action is required of patients who agree to change to group enrolment and consent.

Notice to Patients – Communication of Change

- The Ministry recommends that the notice to patients be personalized and communicates the PEM group's unique situation, including listing the physicians in the group and the reason for the transition. The Ministry and OMA require the following approved wording be incorporated into the letter:

> *"When you joined our Primary Health Care Group, you signed a Patient Enrolment and Consent to Release Personal Health Information Form for yourself or on behalf of a child or someone you hold a power of attorney for personal care. By signing this form, you authorized the Ministry of Health and Long-Term Care (Ministry) to share certain health-related information about you with your family physician, specifically:*
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> - *your name, address and health number*
> - *the dates you were immunized or received preventive care screening services*
> - *the dates and primary health care services that you received by family physicians outside our group*
>
> *Our group is extending access to this information to all family physicians within our group. The primary advantage of this change is that you will not have to re-enrol should your family physician leave our group (e.g. retire/move). All the other consents, patient commitments and cancellation conditions you agreed to when you signed the Form remain the same.*
>
> *The Ministry will assume that you agree to this change, unless you call or write to say that you do not accept the change. If you do not want to be enrolled and/or want to withdraw your consent, please contact our office or the Ministry at:*
>
> *Ministry of Health and Long-Term Care*
> *P.O. Box 48, Station Main*
> *Kingston, ON K7L 9Z9*
> *Phone: 1-888-218-9929*
> *TTY: 1-800-387-5559"*

- If there are multiple patients living at the same address, one notice can be mailed but the envelope must be addressed to all of the individuals (e.g. Mary, John and Baby Smith).
- The Ministry recommends posting patient notices in waiting areas.

- The enrolment and consent of any patient who did not receive a letter must be ended as the patient's original enrolment and consent was only to the enrolling designated physician and, without the patient's receipt of the prescribed notice, cannot be transferred to the group.
- The Ministry recommends following up on undelivered mail and resending the patient notice. In circumstances where the notice was returned as undelivered and an updated address for the patient cannot be obtained or notice could not otherwise be delivered to the enrolled patient, physicians must end the patient's enrolment and consent by completing a *Primary Care Request to Remove a Patient Form* (3624-84).

C. Election Form and Effective Date

All groups opting for group enrolment and consent must complete a *Group Enrolment and Consent Election Form*.

- For physicians/groups with enrolled patients, patient notices must be provided 60 days prior to completing the form and submitting it to the Ministry.
- For groups with a governance agreement or executed amendments, only the lead physician must complete and sign the form prior to submitting it to the Ministry.
- For groups without a governance agreement or executed amendments, all physicians in the group must sign and date the form prior to submitting it to the Ministry.
- For physicians with individual enrolment and consent transitioning into a group with group enrolment and consent they must also follow the 60-day notice period and, if the group has no governance agreement or executed amendments, sign the group's existing *Group Enrolment and Consent Election Form*, and forward the updated signature sheet to the Ministry.
- The effective date of group enrolment and consent will be five (5) business days following receipt by the Ministry of the *Group Enrolment and Consent Election Form*

D. Patient Enrolment and Consent to Release Personal Health Information Forms

During the transition period to group enrolment and consent, continue to enrol using the *Patient Enrolment and Consent to Release Personal Health Information (4383-80) Individual Form* and provide a copy of the notice to the newly enrolling patients.

On the effective date of group enrolment and consent, physicians must start using the *Patient Enrolment and Consent to Release Personal Health Information (4391-80) Group Form.* The forms can be distinguished by the form number in the bottom left corner or by first paragraph on the cover page.

	Individual Form	***Group Form***
English / Bilingual Form #	4383-80 / 4408-80	4391-80 / 4453-80
Cover page wording	Your family doctor is a member of a primary health care **Patient Enrolment Model (PEM).**	You are being asked to enrol with a primary health care **Group/Community Health Centre (Group/Centre).**

The way in which patients complete the form will remain unchanged. The designated physician will either sign the form and include their billing number and group number, or the designated physician can acknowledge the enrolment with the rubber stamp provided by the Ministry (stamp contains physician name, billing number and group name).

E. Physician Departure

The primary advantage of group enrolment and consent is that when a physician leaves a group, his/her patient roster can be transferred to another designated physician (if the patient remains with the group), the consent will remain valid for the group, and re-enrolment will not be required.

Should a physician leave a group (e.g. retire or move), the departing physician must notify the Ministry in writing in accordance with the notice requirements for departing physicians contained in the group's funding agreement with the Ministry. In this letter physicians must notify the Ministry of the disposition of the roster (e.g. Dr. Jones is retiring and a new physician joining the group, Dr. Brown, has agreed to assume responsibility for Dr. Jones roster). As part of this process, the group must inform patients about the change in designated physician, including information on how to cancel their enrolment or revoke their consent.

F. Changing the Designated Physician for Individual Patients

To change the designated physician for an individual patient, the patient can complete and sign a new *Patient Enrolment and Consent to Release Personal Health Information Form* OR physicians can submit a *Request to Change Designated Physician Form*. The completed *Request to Change Designated Physician Form* should be submitted with the next batch of *Patient Enrolment and Consent to Release Personal Health Information Forms*. The patient must be notified of this change in designated physician.

If you would like to choose group enrolment and consent, please contact your Ministry site team at 1-866-766-0266.