

# Executive Officer Notice: Update to Funding for Minor Ailment Services in Ontario Pharmacies

**Effective July 29, 2023**

As of January 1, 2023, Ontario pharmacists<sup>1</sup> are authorized to prescribe certain medications for the 13 minor ailments listed below (“minor ailments”), in accordance with the *Pharmacy Act, 1991* and Ontario Regulation 202/94 under that Act.

## List of Minor Ailments<sup>2</sup>

- Allergic rhinitis
- Candidal stomatitis (oral thrush)
- Conjunctivitis (bacterial, allergic or viral)
- Dermatitis (atopic, eczema, allergic or contact)
- Dysmenorrhea
- Gastroesophageal reflux disease (GERD)
- Hemorrhoids
- Herpes labialis (cold sores)
- Impetigo
- Insect bites and urticaria (hives)
- Tick bites, post-exposure prophylaxis to prevent Lyme disease
- Musculoskeletal sprains and strains
- Urinary tract infections (uncomplicated)

The medications that may be prescribed by a pharmacist for the above minor ailments are set out in Schedule 4 to Ontario Regulation 202/94 under the *Pharmacy Act, 1991* (“allowable medication”).

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<sup>1</sup> For the purposes of this Notice, where the term “pharmacist” is used it is inclusive of pharmacy interns and registered pharmacy students, and subject to any terms, conditions, and limitations on their certificates of registration. Where this is not the case, it will be clearly identified.

<sup>2</sup> The Ontario College of Pharmacists describe minor ailments as health conditions that can be managed with minimal treatment and/or self-care strategies that are usually a short-term condition, where lab results are not usually required, there is a low risk of treatment masking underlying conditions, no medication/medical history red flags that could suggest a more serious condition and only minimal or short-term follow-up required.

This Executive Officer (EO) Notice and the accompanying Questions and Answers (Qs & As) document set out the terms and conditions for an eligible pharmacy's submission of claims for payment (claims) for providing a therapeutic assessment regarding the appropriateness of an allowable medication to treat a minor ailment for an eligible person (the "minor ailment services"). Each document is a Ministry of Health (ministry) policy that pharmacy operators must comply with under section 3.2 of the Health Network System (HNS) Subscription Agreement for Pharmacy Operators.

**This EO Notice replaces the previous EO notice on the same topic that was effective April 30, 2023.**

Eligible pharmacies that decide to participate in this publicly funded program must comply with all of the terms and conditions set out in the EO Notice and Qs & As.

### Overview of Change:

This EO Notice provides an update to the maximum allowable number of minor ailment claims per year for tick bites, post-exposure prophylaxis for Lyme disease (see Table 1 below). The limit has been increased from 2 claims to a maximum of 4 claims per year effective July 29, 2023. This increase reflects the increased prevalence and risk for tick bites and possible [Lyme disease in Ontario](#). The HNS will continue to look back 365 days from the claim's date of service to determine whether the maximum number of claims has been exceeded based on the new limit. The ministry will continue to monitor the impact of the program. There are no other changes at this time.

## General Description

- There is no cost to eligible persons (see definition in section below) who receive a minor ailment service from an eligible pharmacy (see definition in section below).
- The minor ailment service must be provided in-person at an eligible pharmacy or virtually (including by phone) from the location of the pharmacy. Note that claims for virtual care must follow the requirements provided by the Ontario College of Pharmacists [Virtual Care Policy](#).
- Prescriptions provided by the pharmacist must adhere to Ontario Regulation 202/94 under the *Pharmacy Act, 1991*, as well as the guidelines and requirements provided by the Ontario College of Pharmacists, including the guideline on [Initiating, Adapting and Renewing Prescriptions](#).
- For each valid claim submitted for minor ailment services using one of the Product Identification Numbers (PINs) in Table 1 below, a pharmacy will receive \$19 as

payment for services provided in-person or \$15 for services provided virtually regardless of whether a prescription is issued. The minor ailment services include the following:

- Obtaining informed consent from the eligible person or the eligible person's substitute decision maker to provide the minor ailment services (consent may be given verbally or in writing).
- Collecting and reviewing all relevant information about the eligible person to evaluate them and the situation (e.g., history of presenting complaint, person's health and medication history, etc.).
- Assessing the eligible person to verify the person's self-diagnosis and identifying the best course of action.
- Determining through a shared decision-making process the appropriate care plan.
- Implementing the care plan which may include issuing a prescription (if applicable) or referring the eligible person to their primary care provider, providing education for the eligible person, documentation, and notification of the eligible person's primary care provider (if any) if an allowable medication is prescribed.
- If applicable, prescription requirements including:
  - Date prescribed
  - Eligible person's name, address, and date of birth
  - Drug name and strength, directions for use, quantity authorized
  - Pharmacist's signature / authorization (including registration #)
- Following-up with the eligible person (or their substitute decision-maker) to establish monitoring parameters, evaluate safety and efficacy of the care plan, and additional next steps as required.
- Table 1 lists the PINs to submit claims for providing minor ailment services to eligible persons, including a description of each PIN and any restrictions.
- If a prescription for an allowable medication is issued, the eligible person must be informed that they are permitted to take the prescription to any pharmacy of their choice for dispensing. Where the eligible person decides to have their prescription filled at another pharmacy, the pharmacy/pharmacist that provided the minor ailment services must follow-up with the eligible person as part of the care plan.

## Eligible pharmacies

Pharmacies that meet the following criteria ("eligible pharmacies") are eligible to submit claims for providing minor ailment services for eligible persons:

- Have a valid HNS Subscription Agreement with the ministry
- Ensure that only pharmacists (see definition on page 1) who have completed the Ontario College of Pharmacists' [Mandatory Orientation for Minor Ailments Module](#) and who comply with applicable legislative and OCP requirements provide the minor ailment services.

Eligible pharmacies are strongly encouraged to enrol in one of the provincial clinical viewers ([ConnectingOntario or ClinicalConnect](#)) at no cost through [Ontario Health](#). The viewers provide health information about eligible persons, including laboratory test results and dispensed medications that could enhance clinical decision-making and help improve health outcomes. It also provides a history of publicly funded professional services.

## Eligible persons

A person who meets the following criteria (“eligible person”) is eligible to receive publicly funded minor ailment services from an eligible pharmacy:

- Has a valid Ontario health number<sup>3</sup>
- Presents with one of the minor ailments listed in Table 1 below; and
- Is not precluded from receiving minor ailment services based on the claim maximums listed in Table 1 below.

## Table 1: PINs to Support Payment of Publicly Funded Minor Ailment Services<sup>4</sup>

### Claim maximums:

The Table below includes claim maximums. When a claim for a minor ailment service fee is submitted, the HNS will look back 365 days from the claim’s date of service to determine whether the maximum number of claims for that particular minor ailment has been exceeded. For example, if a patient receives a minor ailment service at one pharmacy and submits the PIN for “No Rx Issued (In Person)” and the next day, receives another minor

<sup>3</sup> In this Executive Officer Notice and the accompanying Qs & As, “Ontario health number” means Ontario Health Insurance Plan (OHIP) Card Number or Ontario Drug Benefit (ODB) eligibility number issued by the Ministry of Children, Community and Social Services or by a Home and Community Care Support Service organization for some ODB eligible recipients.

<sup>4</sup> Primary pharmacy service providers of long-term care (LTC) homes are paid for providing minor ailment services for residents of LTC homes through the LTC home capitation model and will not be paid a minor ailment service fee. Except in emergency situations, secondary pharmacy service providers (i.e., those that do not have a contract with a LTC home) are also not eligible for a service fee for providing minor ailment services for LTC home residents. Pharmacies ineligible to receive a service fee must submit claims for minor ailment services with a zero dollar fee.

ailment service (for the same minor ailment) at another pharmacy and submits the PIN for “Rx Issued (In Person)”, this will count as 2 claims against the maximum number of claims.

- Claims that are within the limits will be processed.
- If a claim is submitted to the HNS for a minor ailment service fee that exceeds the maximum number of claims allowed for a particular minor ailment, the claim will be rejected with the response code “LO – Benefit Maximum Exceeded”. No intervention code can be used to override the claim.

Where the claim maximum has been met, the pharmacy cannot submit a claim to the HNS for reimbursement for minor ailment services and the pharmacist must exercise their professional judgment in deciding whether to refer the individual to another health care provider, such as a physician or nurse practitioner. Refer to ‘Red flags’.

### **Red flags:**

Pharmacists must also adhere to the OCP guidelines, appropriate clinical guidance and applicable algorithms for a particular condition when determining whether minor ailment services can be provided and billed to the ministry. This includes identifying situations (also known as “red flags”) where an individual may not have a minor ailment or has signs or symptoms that may not be solely attributed to a minor ailment. Where such “red flags” occur, the individual should be referred to another health care provider. See OCP’s [Infographic](#) for an overview for treating minor ailments, including identifying and responding to red flags.

The red flags are also reflected in the claim maximums established for each PIN. The claim maximums are intended to identify situations where an individual may not have a minor ailment or has signs or symptoms that may not be solely attributed to a minor ailment, based on the frequency in which the individual is self-reporting a minor ailment and receiving minor ailment services from a pharmacy in a year.

<b>Minor Ailment</b>	<b>Maximum number of claims per year<sup>5</sup></b>	<b>Rx Issued (In-Person)* Total Amount Paid \$19</b>	<b>No Rx Issued (In-Person)** Total Amount Paid \$19</b>	<b>Rx Issued (Virtual)*** Total Amount Paid \$15</b>	<b>No Rx Issued (Virtual)**** Total Amount Paid \$15</b>
Allergic Rhinitis	4	9858181	9858182	9858183	9858184
Candidal Stomatitis	4	9858185	9858186	9858187	9858188
Conjunctivitis	3	9858189	9858190	9858191	9858192
Dermatitis	4	9858193	9858194	9858195	9858196
Dysmenorrhea	2	9858197	9858198	9858199	9858200
GERD	3	9858201	9858202	9858203	9858204
Hemorrhoids	3	9858205	9858206	9858207	9858208
Herpes Labialis	8	9858209	9858210	9858211	9858212
Impetigo	2	9858213	9858214	9858215	9858216
Insect Bites/Urticaria (cannot be combined with PINs for tick bites on the same day)	8	9858217	9858218	9858219	9858220
Musculoskeletal Sprains & Strains	4	9858221	9858222	9858223	9858224
Tick Bites (cannot be combined with PINs for insect bites on the same day)	4	9858225	9858226	9858227	9858228

<sup>5</sup> The maximum number of claims per year will be based the individual's claim history in the last 365-day period.

Minor Ailment	Maximum number of claims per year <sup>5</sup>	Rx Issued (In-Person)* Total Amount Paid \$19	No Rx Issued (In-Person)** Total Amount Paid \$19	Rx Issued (Virtual)*** Total Amount Paid \$15	No Rx Issued (Virtual)**** Total Amount Paid \$15
Urinary Tract Infections (uncomplicated <sup>6</sup> )	3	9858229	9858230	9858231	9858232

\* Rx Issued (In-Person) refers to minor ailment services provided in-person at the pharmacy for an eligible person that result in a prescription for an allowable medication being issued for the eligible person.

\*\* No Rx Issued (In-Person) refers to minor ailment services provided in-person at the pharmacy for an eligible person that do NOT result in a prescription being issued (e.g., individual needs to be seen by a physician or nurse; or there is a recommendation to provide alternative treatments like non-pharmacological therapies and/or over-the-counter medications).

\*\*\* Rx Issued (Virtual) refers to minor ailment services conducted virtually (including by telephone) from the location of the pharmacy for an eligible person that result in a prescription for an allowable medication being issued for the eligible person.

\*\*\*\* No Rx Issued (Virtual) refers to minor ailment services conducted virtually (including by telephone) from the location of the pharmacy for an eligible person that do NOT result in a prescription being issued (e.g., individual needs to be seen by a physician or nurse practitioner; or there is a recommendation to provide alternative treatments like non-pharmacological therapies and/or over-the-counter medications).

## Billing Procedures – Summary

- Claims for providing minor ailment services can only be submitted electronically using the HNS (see “Billing Procedures - Detailed” below). No manual paper claims will be accepted unless 3 intervention codes are required in order to process the claim.

<sup>6</sup> Refer to OCP’s Assessment and Prescribing Algorithm for Uncomplicated Urinary Tract Infection (Cystitis) for complicating factors (e.g., male sex, pregnancy, age < 12 years, etc.) that may require referral to a physician or nurse practitioner.

- The Part A pharmacist who provides the minor ailment services or who is supervising a registered pharmacy student or an intern who is providing the service must be identified in the prescriber field on the claim.
  - Prescriber ID Reference must be entered as '09' (not '01' or '99'). Any other Prescriber ID Reference code will be rejected with response code "60 – Prescriber License Code Error".
- Each claim must include the PIN corresponding to the service provided to the eligible recipient (see Table 1 above).
- For clarity, a claim can be submitted for minor ailment services that do not result in the issuance of a prescription for an allowable medication. Please choose the appropriate PIN in Table 1 for this scenario.
- The person submitting the claim on behalf of the pharmacy operator must ensure that the eligible person's date of birth, Ontario health number and name (as it appears on the health card / document) are included in the claim. Failure to do so – especially for non-Ontario Drug Benefit (ODB) Program recipients – may impact the ability to submit future claims for these persons.

## Pharmacy Documentation Requirements

Eligible pharmacies must keep a record of their provision of minor ailment services that result in a claims submission.

Pharmacists shall keep records consistent with their obligations under the *Pharmacy Act, 1991*, the *Drug and Pharmacies Regulation Act*, and any instructions or guidelines provided by the OCP or the ministry.

For purposes of post-payment verification, pharmacy records related to claims for minor ailment services must be maintained in a readily available format for the purpose of ministry inspection for a minimum of 10 years from the last recorded pharmacy service provided to the individual, or until 10 years after the day on which the individual reached or would have reached the age of 18 years, whichever is longer.

Overpayments due to inappropriate claim submissions are subject to recovery.

Pharmacy documentation must be maintained in a readily retrievable format and recordkeeping requirements include the following records:

- Record of name, address, date of birth and Ontario health number of eligible person.



- Record confirming the consent of the eligible person or their substitute decision maker to the minor ailment services (whether such consent was provided verbally or in writing)
- Record of:
  - The minor ailment service including whether a prescription for an allowable medication was issued:
    - If a prescription was issued – a copy of the prescription including but not limited to: date prescribed; eligible person’s name, address and date of birth; name, strength (where applicable) and quantity of drug prescribed; directions for use including dose, frequency, route of administration; name, address, telephone number and OCP registration number of pharmacist issuing the prescription
    - If a prescription was not issued – rationale must be provided including whether referral to another health care provider is warranted, that other non-pharmacological therapies and/or over-the-counter medications were recommended
  - The care plan including date and method of notification to the primary care provider (if any) if a prescription is issued
  - The follow-up with the individual including any monitoring parameters or next steps

## Billing Procedures – Detailed

Claims submission requirements for minor ailment services are as follows:

### **For ODB-eligible recipients**

The claim submission follows the usual process (See [Section 5](#) of the Ontario Drug Program Reference Manual) for submitting claims on the HNS with the following additional information:

- Intervention code ‘PS’: (Professional Care Services)
- Product Identification Number (PIN): for the applicable minor ailment services provided (see Table 1 above)
- Valid Pharmacist ID
- Professional Fee: see Table 1 above for ‘Total Amount Paid’

### **For Non-ODB recipients**

When submitting a claim for an eligible person who does not have ODB coverage, pharmacists must submit the following information:

- Patient Gender: 'F' = female; 'M' = male; 'U' = unknown
- Patient Date of Birth: Valid YYYYMMDD
- Patient's Ontario Health Card number\*
- Intervention codes:
  - PS: Professional Care Services
  - ML: Established eligibility coverage (i.e., 1 day of the Plan 'S' coverage)
- Carrier ID: 'S'
- Product Identification Number (PIN): for the applicable minor ailment services provided (see Table 1 above)
- Valid Pharmacist ID
- Professional Fee: see Table 1 above for 'Total Amount Paid'

## Exclusions and Restrictions

- Individuals who do not have a valid Ontario health number are not eligible to receive publicly funded minor ailment services.
- Pharmacists cannot conduct minor ailment services for themselves or a family member. See OCP's policy on [Treating Self and Family Members](#).
- Only one claim for minor ailment services can be submitted by a pharmacy per day per eligible person for a particular minor ailment (e.g., if a minor ailment service is provided and claimed for Urinary Tract Infections (UTIs) by one pharmacy that does not result in a prescription, another minor ailment service for UTI that results in a prescription by the same pharmacy cannot be conducted and claimed on the same day).
- Claims for the minor ailment service must be submitted electronically using the HNS on the day the service was provided.
- Pharmacies cannot claim a fee for a minor ailment service if the individual does not qualify and/or where they should automatically be referred to another health care provider (e.g., "red flags" like a UTI in pregnancy).
- Minor ailment services for an eligible person who is a resident of a LTC home are paid under the LTC capitation funding model and must be provided by the LTC home's contracted primary pharmacy service provider. A LTC home primary pharmacy service provider is not eligible for the fee described in this Notice for providing minor ailment services for a LTC home resident.

- In emergency situations, secondary pharmacy service providers (i.e., those that do not have a contract with a LTC home) are eligible for the professional fee described in this Notice for providing minor ailment services for LTC home residents.
- Pharmacies not eligible for a professional fee must submit claims for minor ailment services with a zero dollar fee. If a dollar amount is submitted as a professional fee on the claim, it will be rejected with the response code “68 – Professional Fee Error”. Only secondary pharmacy service providers will be allowed to override the claim with intervention code “LT – LTCH Dispensing Fee Payment for Emergency Rx”.
- A professional intervention fee for a Pharmaceutical Opinion Program (POP) service **cannot** be claimed in relation to a pharmacist prescribing allowable medications for minor ailments.
- A fee for a MedsCheck Follow-Up **cannot** be claimed in combination with minor ailment services that result in a prescription for an allowable medication.

**Additional Information:**

**For pharmacy billing:** Please call ODB Pharmacy Help Desk at: 1-800-668-6641

**For all other Health Care Providers and the Public:** Please call ServiceOntario, Infoline at 1-866-532-3161 TTY 1-800-387-5559. In Toronto, TTY 416-327-4282.