

Health Care Connect Clinician Fact Sheet

What is the purpose of this document? To provide primary care clinicians with key information about Ontario's Health Care Connect (HCC) program.

What is Health Care Connect (HCC)? HCC is a provincial program to connect Ontarians with family physicians, nurse practitioners, and primary care teams who are accepting new patients.

How do I join HCC? There are multiple pathways. Your Ontario Health Team (OHT)/Primary Care Network (PCN) or HCC Care Connectors at Ontario Health atHome will help create a profile for you. This profile includes contact information and characteristics such as language(s) spoken, practice specialty (e.g. if your practice mostly cares for elder adults) and accessibility of your office.

To set up a profile today, please contact your [local OHT](#) or a HCC Care Connector by calling 1-888-579-6707.

What is my information used for? The information in your profile is only used to match with HCC registrants.

What if my ability to take on new patients changes? Your profile can specify your capacity to accept referrals and can be updated at any time by contacting your local OHT/PCN or HCC Care Connector.

How clinician and registrant matching works: HCC Care Connectors make best efforts to match registrants and clinicians based on the information shared by registrants during registration and clinicians when signing up for HCC. This may include supporting tailored matching by geography, language, complexity, health condition, or equity-deserving populations. A match is first made referencing location (i.e. a registrant's home or work address, how far they are willing or able to travel, etc.), then based on preferences such as language or specific care needs.

What happens before receiving a referral: HCC Care Connectors will confirm your contact details, preferences, capacity (i.e., number of patients you are able to accept), and coordinate referrals based on the information you provide in your profile. While HCC Care Connectors make best efforts to confirm contact information with clinicians prior to referrals, clinicians are responsible for ensuring their contact information remains up-to-date in both HCC and in the Corporate Provider Database (see below).



What You Need to Know about Referrals

- **Once a referral is processed, referral letters are sent to the clinician and registrant.**
 - Clinicians/teams are asked in the letter to contact the referred registrant to set up an initial meeting.
 - Registrants are removed from the HCC waitlist upon referral.
 - Registrants are informed that clinicians/teams will reach out to them to set up an initial meeting.
 - **Clinician contact information included in referral letters is pulled from the ministry's Corporate Provider Database.** Please ensure this information is up-to-date, it is easy to update your information online using the [provider registration change request form](#).
 - If upon the initial meeting the referred registrant or the clinician chooses to decline the match, the individual may re-register with HCC.
- Requesting batch referrals (referrals of multiple registrants at a time) is a great way to connect people quickly to your practice.
 - To receive a batch referral, clinicians provide HCC Care Connectors with the number of registrants requested and frequency of referral (e.g. 10 per week, 500 one time).
 - Batch referrals are sent to clinicians **via secure email and password**.

Billing and Compensation Quick Facts

- **Who is eligible for HCC incentives?** Physicians working within Patient Enrolment Models are eligible for unattached patient incentives, including but not limited to attaching complex vulnerable patients from HCC. Physicians and other clinicians working in other primary care models will continue to be compensated according to their respective funding agreements.
- **While waiting for increased HCC incentives to be available, how should clinicians bill for attaching new and complex vulnerable patients from HCC?** While new billing codes are being developed, physicians can use the existing HCC complex vulnerable patient codes (Q053 - \$350) and the Q200A code for attaching new patients. The increased amount (\$150) will be paid retroactively to July 1, 2025. Physicians may also use the existing Q200A code for attaching new patients and wait to submit the new HCC complex vulnerable patient codes once implemented and applied to July 1, 2025. Physicians should keep records of new patient attachments including from the HCC waitlist.
- **What if a physician determines an HCC patient is complex after accepting a patient referral?** If after receiving a referral from HCC, a physician clinically assesses a patient as having complex needs, they may bill the new HCC complex vulnerable patient code once available (do not bill Q053). Physicians must keep documentation of the rationale for the decision to bill the code (i.e., how the patient was more complex than indicated in the HC systems).

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Appendix: Health Care Connect Infographic

For more information on the Health Care Connect process, please refer to the below infographic.

