

FHO+ Hourly Rate: Activity Tracking – ACCURO

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This guide provides recommendations to help physicians document time-based FHO+ hourly rate activities with step-by-step EMR instructions.

Effective **April 1, 2026**, a new hourly rate will compensate FHO physicians for time spent on direct and indirect patient care, as well as clinical administrative work.

Review and Update your Roster in your EMR

Reviewing your roster helps keep your patient panel accurate and up to date.

Why this matters

Time-based activities apply only to care provided to **FHO rostered patients**. Maintaining an accurate roster helps distinguish care provided to rostered versus non-rostered patients.

When to do this

It is recommended that you review your roster monthly or quarterly. Using the provided roster reconciliation tools and processing the files regularly ensures updates are quick and manageable.

Helpful tools

Use the [Roster Reconciliation Tool](#), developed by Dr. Kevin Brophy and Dr. Alex Duong, to identify discrepancies and improve roster data quality.

Understand How to Identify Rostered Patients in your EMR

Know how your EMR displays **rostered versus non-rostered** patients. Indicators may be automatic or require manual action.

Indicators that may be available:

- Roster or enrollment fields
- Patient status labels or demographic bands
- Custom flags, colours or attributes

Why this matters

Understanding how your EMR identifies roster status helps with identifying and tracking **FHO+ hourly rate hours and activities only for eligible (rostered) patients**.

When to do this

Complete this as a one-time review when setting up workflows. Revisit if EMR settings or clinic processes change.

Tip: Ensure staff understand how roster status can be identified in your EMR, whether automatically or manually.

Helpful tools

Explore your EMR's roster and enrollment indicators to understand how rostered patients are identified and displayed within charts, schedules, or demographic views, and check whether indicators are automated or require manual action.

Review how Accuro identifies rostered versus non-rostered patients. Staff can assist with these tasks.

- **Patients Demographics:** View a patient's enrollment status in the **Provider Enrollment History** tab.

Status History	Provider	Reason	Date
Enrolled	Aris, Esteban		01 Feb 2022

Screenshot showing Patient Demographics

- **Global Patient:** Add the enrollment status to the patient's demographic status bar at the Global level for ongoing visibility when working with patients.

Patient: Vamp, Nick (Mr.) Age: 60 Yr DOB: 1965-Apr-17, Gender: M
MD: Aris, Esteban Enrolled: Enrolled

Display Enrollment Status at the Global Level

- Click Menu > File > User Preferences > Display > Display tab
- In the **Demographics Status Bar**, choose where the **Enrollment Status** should appear:
 - Right click > select **Patient** > select **Patient Enrollment Status**

User Preferences

Display and Workflow

General Alerts Display Configure Actions Scheduler Workflow EMR Workflow

Demographics Status Bar

ent:<PATLASTNAME>,<PATFIRSTNAME>,<PATTITLE>) Age: <PATAGEUNITS> DOB:<PATBIRTHDATE>, Gender:<PATGENDER>

Status Bar Line 2

MD: <OFFPHYSLASTNAME>, <OFFPHYSFIRSTNAME> Enrolled: <PATENROLLMENTSTATUS>

Patient

Patient Enrollment Status

Screenshot showing Global Patient Display settings in User Preferences

Flag Appointments for Non-Rostered Patients

Consider **flagging non-rostered patient appointments** in your schedule to assist with end-of-day calculations for **Direct Patient Care** and identify visits that are eligible for hourly rate billing.

Why this matters

Flagging non-rostered patient appointments helps ensure you calculate **Direct Patient Care hours only for eligible (rostered) patients** and separate time spent with non-rostered patients.

When to do this

This can be completed during appointment booking or when reviewing scheduled appointments in the schedule. Staff can assist by identifying and flagging non-rostered patient appointments.

Helpful tools

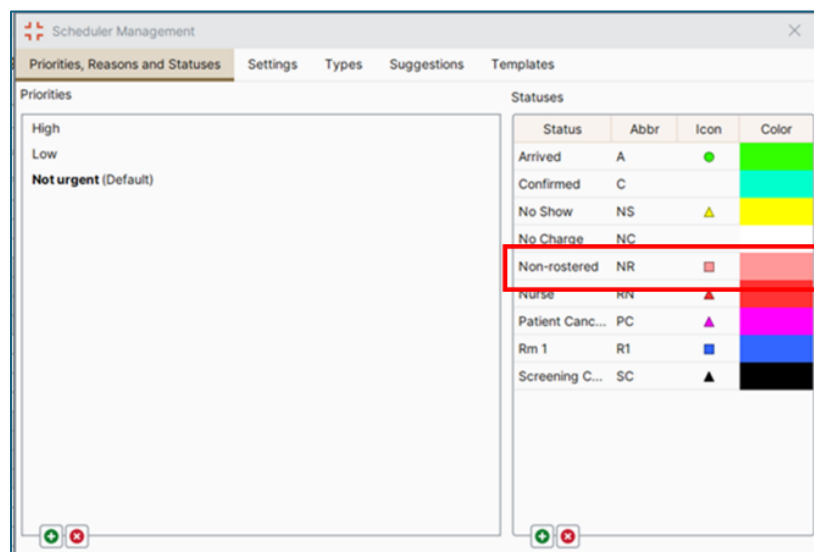
Flag **non-rostered patient** appointments in your schedule using EMR features like **labels, icons, schedule notes** or **colour coding** to **easily distinguish** them from **rostered visits**.

Tip: There are **multiple ways to flag appointments** - your EMR may offer additional options. **Choose the method that works best for your practice.**

Creating and assigning **statuses to flag non-rostered patient appointments** displays them on the **Day Sheet** and **Schedule** to help physicians quickly recognize rostered patient **visits eligible for hourly rate billing**.

Create Statuses for Flagging Non-Rostered Appointments

- Click Menu > Scheduler > Schedule Management
- Select the **Priorities, Reasons and Statuses** tab
- Click the green plus symbol to add a new status
- Enter a name (e.g.: 'non-rostered') and assign an abbreviation, icon and colour

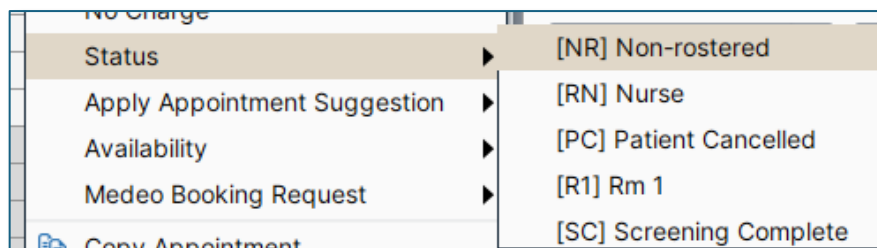


Screenshot showing options for Priorities, Reasons and Statues in the Scheduler Management

If you require further assistance, please contact OntarioMD at 1-866-744-8668 support@ontariomd.com

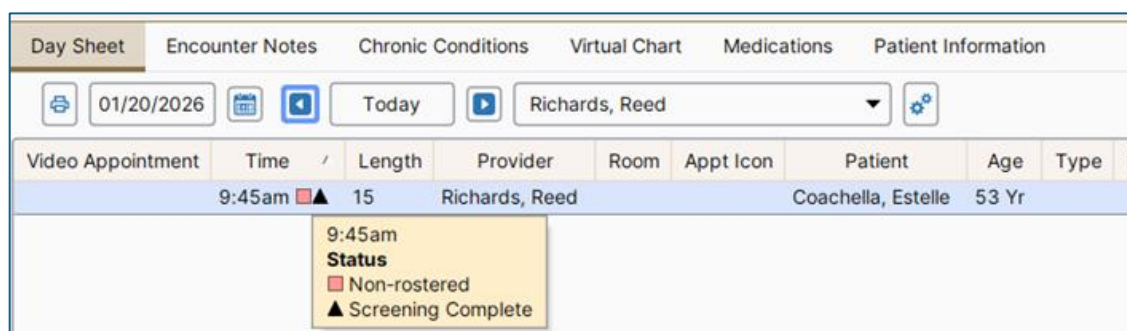
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- **To assign a status to an appointment**
 - Right click on the appointment and select the **Status**

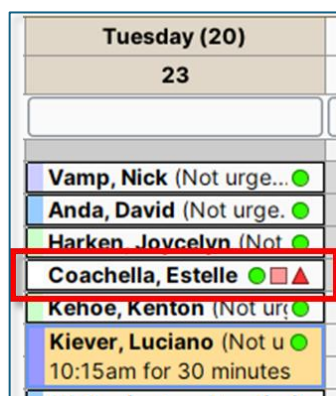


Screenshot showing appointment status options

- The status will be displayed on the **Day Sheet and Schedule** for easy reference



Day Sheet showing statuses



Schedule showing statuses

Categorize FHO+ Hourly Rate Care Categories

Consider categorizing appointments by FHO+ care types in your schedule to easily delineate:

- **Direct Care:** In-person & Virtual
- **Direct Care:** Phone Out-of-Office
- **Indirect Care**
- **Clinical Administration**

Why this matters

Categorizing appointments helps ensure accurate tracking of FHO+ hourly rate care categories and allows you to quickly identify the type of care provided.

When to do this

Categories can be applied when booking appointments, when reviewing scheduled appointments, or when recording additional unscheduled care such as Indirect or Clinical Administration.

Helpful tools

Use EMR features like **labels, icons, schedule notes, appointment types or colour coding** to categorize care types. Consistently naming, colour coding or visually flagging care categories (e.g. “Direct Care: In-person/Virtual,” “Direct Care: Phone Out-of-Office,” “Indirect Care,” “Clinical Admin”) makes it easier to track and report hours.

Tip: There are **multiple ways to categorize appointments** - your EMR may have additional options. **Choose the method that works best for your practice.**

Categorize Appointments Using Statuses (*appears on Daysheet and Schedule*)

Creating and assigning category statuses to appointments for FHO+ hourly rate care types displays them on the Day Sheet and Schedule, helping physicians quickly differentiate the care provided.

- **To create statuses for care categories**
 - Click Menu > Scheduler > Schedule Management
 - Select the **Priorities, Reasons and Statuses** tab
 - Click the green plus symbol to add a new status
 - Enter a name (e.g.: ‘Indirect care’) and assign an abbreviation, icon and colour

Scheduler Management

Priorities, Reasons and Statuses Settings Types Suggestions Templates

Priorities

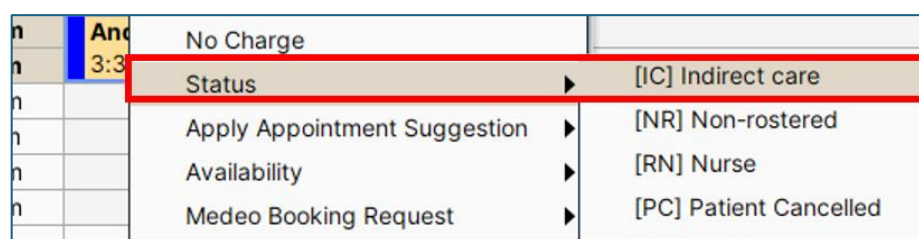
High
Low
Not urgent (Default)

Statuses

Status	Abbr	Icon	Color
Arrived	A	●	Green
Confirmed	C		Cyan
No Show	NS	▲	Yellow
No Charge	NC		White
Non-rostered	NR	□	Light Red
Nurse	RN	▲	Red
Patient Cancelled	PC	▲	Magenta
Rm 1	R1	■	Blue
Screening Complete	SC	▲	Black
Indirect care	IC	●	Orange

Showing Scheduler Management settings for Appointment Priorities, Reasons and Statuses

- **To assign a category to an appointment**
 - Right click on the appointment and select the **Status**



Appointment status showing category selections

- The status will be displayed on the **Day Sheet and Schedule** for easy reference

Time	Len...	Provider	Patient	Age	Type	Reason	Note
8:30am	30	Farra, G...	FHO+, ...	n/a	FHO+ Indirect Care (Appt Type)	FHO+ Indirect Care (Appt Reason)	Indierct Care (Appt Note)
3:30pm	30	Farra, G...	FHO+, ...	70 Yr	FHO+ Indirect Care (Appt Type)	FHO+ Indirect Care (Appt Reason)	

8:30am
Status
● Indirect care
▲ Screening Complete

Day Sheet showing category icons

	Monday (9)
	3
8:00am	
8:15am	
8:30am	FHO+, Hourly Rate (Not urgent) 🟡▲
8:45am	Indirect Care (Appt Note)

Schedule showing category icons

Alternative Options for Categorizing Appointments

- **Appointment Types, Reasons, Icons or Notes** – These appointment details can be used to categorize appointments in the **Schedule and Day Sheet**.

Note: The appointment must be associated with a patient to appear on the Day Sheet. For appointments created to log Indirect Care or Clinical Administration, we recommend using the FHO+ tracking patient for categorization (see [Use a Designated "Tracking" Patient](#)).

Appointment Details Toronto Office

☒ Loads Settings from this Patient's Previous Appointment

Details

Appointment Date: 2026-Mar-13

Appointment Time: 10:30am

Appointment Length: 15 minutes (10:45am)

Referred By: --None--

Other Providers:

Room: --None--

Type: FHO+ Indirect Care (Appt Type)

Reason: FHO+ Indirect Care (Appt Reason)

Location: O Provider's Office

Priority: Not urgent

Insurer: OHIP

☐ Video Appointment

Video appointment unavailable. Provider is not configured for Video Appointments.

Notes

Indirect (Appt Note)

Popup Notes

☐ No Patient ☒ FHO+, Hourly Rate

Screenshot showing appointment details including Type, Reason, Notes

FHO+, Hourly Rate (Not urg ●)	
Indirect (Appt Note)	
11:45am for 45 minutes	
FHO+, Hourly Rate (Not urg ●)	
Clinical Administration (Appt Note)	

Patient
 FHO+, Hourly Rate
Type
 FHO+ Indirect Care (Appt Type)
Status
● Indirect care
 (Not urgent) Indirect (Appt Note)
 Health Card Passed Validation: Not Checked
 Last Updated: Never

Screenshot showing appointment details from Schedule

Provider	Patient	Age	Type	Reason	Note
Farra, ...	Harken,...	31 Yr	Follow Up		
Farra, G...	FHO+, ...	n/a	FHO+ Indirect Care (Appt Type)	FHO+ Indirect Care (Appt Reason)	Indirect (Appt Note)
Farra, G...	Coachel...	53 Yr	Consult	Counselling	
Farra, G...	Kehoe, ...	60 Yr	Follow Up		
Farra, G...	FHO+, ...	n/a	FHO+ Clinical Administration (Appt Type)	FHO+ Clinical Administration (Appt Reason)	Clinical Administration (Appt Note)

Screenshot showing appointment details from Day Sheet

Tip: Choose the method that works best for your practice - your EMR may offer additional options.

Reminder: Ensure any care requiring documentation (time and activities) is recorded in the structured encounter note (see [Record Daily Hours and Activities in a Structured Encounter Note](#)).

- **Appointment Suggestions** – Time for Indirect Care or Clinical Administration can be blocked in the schedule.

Note: Appointment Suggestions appear in the Schedule view only and do not display on the Day Sheet.

The screenshot displays the 'Scheduler Management' window with the 'Suggestions' tab selected. On the left, a list of appointment suggestions is shown, with 'Admin Time' highlighted in red. The main area shows a 'Day Sheet' for Tuesday, 01/20/2026, with a list of appointments. The 'Admin Time' block is also highlighted in red in the day sheet view.

Screenshot showing Scheduler with Admin Time blocked but not showing in Day Sheet

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Use a Designated “Tracking” Patient

Create a designated “**tracking**” patient in your EMR to document your daily hours and activities. In some EMRs, it can also be used to submit FHO+ hourly rate billing. This “tracking patient” **contains no real patient information** and may be set up by staff.

Why this matters

- Establishes a consistent place to document your daily hours and activities.
- Allows you to follow a familiar workflow: open chart → create note → document.
- Keeps all documentation EMR-first and audit ready.

When to do this

Set up this tracking patient **once at the start** as part of preparing your FHO+ hourly rate documentation workflow. After setup, this tracking patient will be used **every day** to record your hours and activities.

Revisit if EMR settings, clinic workflows, or staff responsibilities change.

For example:

- A new physician begins using the same EMR.
- EMR updates affect the tracking patient, charting or template functionality.
- Clinic workflows change how daily tracking or billing is performed.

Helpful tools

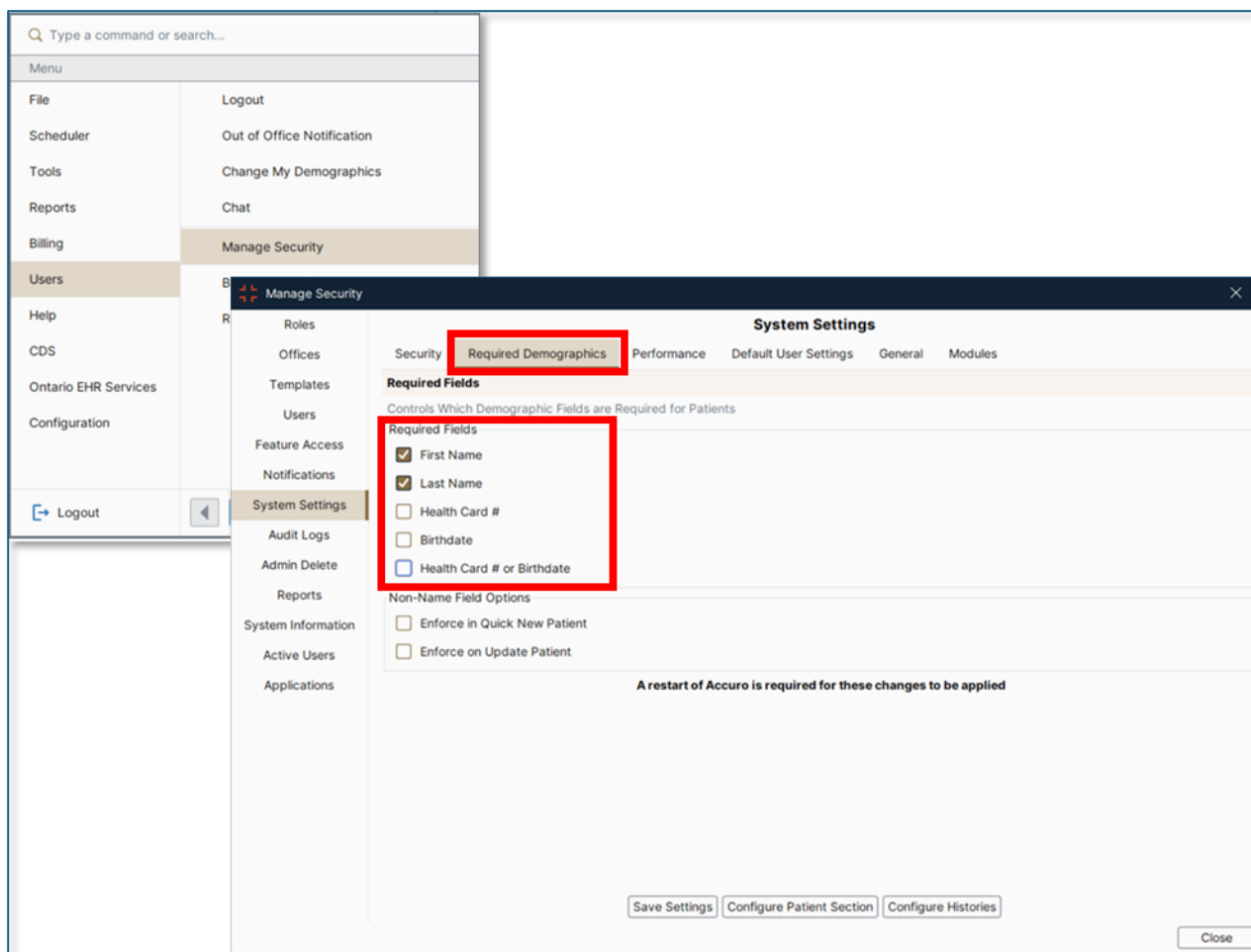
- Create **one tracking patient per clinician** who will be documenting and billing FHO+ hourly rate.
- Name the tracking patient clearly and meaningfully (e.g. “Smith - FHO+ Hourly Rate”).
- If multiple physicians share one EMR, include the physician’s name or initials in the tracking patient’s name to keep charts separate.
- This tracking patient may later be used to submit the hourly rate billing claims where supported.

Update Demographics Settings (as needed)

ACCURO EMR system settings may prevent the creation of a patient record unless a Health Card Number and/or Date of Birth is entered. For workflows that require creating temporary or placeholder patient records, these requirements may need to be adjusted.

⚠ Important: These settings apply globally and will affect all EMR users. Only users with appropriate administrative permissions should make these changes.

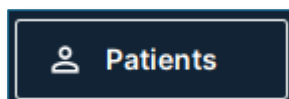
- Select **Menu > Users > Manage Security**
- In the **Manage Security** window, select **System Settings > Required Demographics**
- Under the **Required Demographics** tab, deselect the following fields as applicable:
 - **Health Card #**
 - **Birthdate**
 - **Health Card # or Birthdate**
- Select **Save Settings**, then click **Close**
- **Restart ACCURO** for changes to take effect



Screenshot showing Required Demographics options in Manage Security configuration window

Create the Designated Tracking Patient

- Select the **Patient** tab to open the demographic window



- Click **Clear (F1)** to clear the current patient
- Enter **Last name, First name, Gender and Office Provider** for the tracking patient
Note: Gender is required to create the tracking patient but will be masked or removed when billed appropriately (see [Create Claims for Each Date of Service that FHO+ Hourly Rate Care was Performed](#))
- Click **Add Patient**

The screenshot displays the 'Patient Demographic' window. At the top, there are fields for 'Last Name', 'First Name', 'Middle Name', 'Birthdate', 'Health #', 'Identifier', and 'Office Provider'. Below these are tabs for 'Demographics', 'Other', 'Relationships', 'Notes', 'Status History', 'Private Billing', 'Insurer Rules', 'Providers', and 'Provider Enrollment History'. The 'Demographics' tab is active, showing fields for 'Health #', 'Expiry', 'File Number', 'Birthdate', 'Age', 'Gender', 'Deceased', 'Family Phys', 'Referring Phys', 'Address', 'City', 'Postal/Zip', 'Type', 'Phone #s', 'Email Address', 'Alias', 'Pharmacy Contact', 'Default Insurer', 'Current Enrollment Status', 'Admission Date', 'Discharge Date', 'Master Number', and 'Last Updated'. At the bottom, there are buttons for 'Manage Cohorts', 'Delete Patient', 'Patient Relationships...', 'Merge', 'Add Patient', and 'Clear (F1)'.

Screenshot showing Patient Demographic window

Create Recurring Daily Appointment as a Reminder

Schedule a recurring end-of-day appointment for the designated tracking patient (see [Use a Designated "Tracking" Patient](#)). This serves as a reminder to calculate and document your daily FHO+ hourly rate time-based activities and hours. Staff can assist with setting up this recurring appointment.

Why this matters

- Acts as a reminder to integrate time tracking and documentation into the daily workflow.
- Reduces the risk of missed or forgotten hours.
- Encourages adherence to consistently track FHO+ hourly rate time and activities.
- Allocates flexible time in the EMR schedule for end-of-day documentation.

When to do this

- Set up the recurring appointment at the **start of the month, or as early as possible**, to avoid conflicts.
- Schedule the appointment at the end of the day, after the last booked patient, to avoid double-booking or interference with regularly scheduled appointments.
- Booking the appointment for every day of the month can help capture all eligible hours, since work may occur on any day.
- Consider colour coding or flagging the appointment to make it easily identifiable in the schedule.

Helpful tools

- If your EMR does not allow booking a tracking patient, consider creating an **end of day prompt**.
- If you record and submit **Online Appointment Booking (OAB) metrics**, be sure to subtract the recurring appointment(s) from your totals (1 x the number of days in the month the tracking patient appointment is added).

Add Recurring Appointment

Recurring appointments are created in the Scheduler:

- On the first day of the month, schedule a recurring end-of-day appointment for your tracking patient.
- At the bottom of the new appointment window, select **Create a Recurring Appointment**.
- Set the recurrence to **Every: 1; Interval: Days** until the End of Month.
- Click **Simulate** once all information is correct.

The screenshot shows the 'Appointment Details' window for 'Toronto Office'. The 'Details' section includes fields for Appointment Date (2026-Feb-01), Appointment Time (5:00pm), Appointment Length (15 minutes (5:15pm)), Referred By (--None--), Other Providers, Room (--None--), Type, Reason, Location (O Provider's Office), Priority (Not urgent), and Insurer (OHIP). A message states 'Video appointment unavailable. Provider is not configured for Video Appointments.' Below this are 'Notes' and 'Popup Notes' sections. At the bottom, the 'Recurring Appointment' section is highlighted with a red box, showing 'Every 1 Interval Days until 02/28/2026' for patient 'Richards, Reed'. The 'Simulate' button is visible. At the very bottom, there are radio buttons for 'No Patient' and 'Hourly Rate, TimeTracking', along with 'OK' and 'Cancel' buttons.

Screenshot showing Recurring Appointment Details

- A window will open showing all the appointments for your review.
- Adjust the time of any conflicting appointment using the **Action** drop-down menu.

Tip: the time shown is the next available appointment.

The screenshot shows the 'Recurring Appointment' window with a table of appointments. The table has columns for Date, Action, and Time. The appointments are for 2026-Feb-10 to 2026-Feb-14. The 'Action' dropdown menu is open for the 2026-Feb-12 entry, showing options: Double Book, Change Time, Double Book, and Don't Book. The 'Change Time' option is highlighted. 'Run' and 'Cancel' buttons are at the bottom.

Date	Action	Time
2026-Feb-10	Double Book	5:15pm
2026-Feb-11	Book	5:00pm
2026-Feb-12	Double Book	5:15pm
2026-Feb-13	Change Time	5:15pm
2026-Feb-14	Double Book	5:15pm

- If you select **Double Book**, a second column will appear in the **Scheduler** for that day.

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The recurring appointment(s) appear in both the **Schedule** view and the **Day Sheet** and serve as a reminder to document your daily hours and activities.

Tuesday (20) 23		Day Sheet Encounter Notes Chronic Conditions Virtual Chart Medications Patient Information							
		01/20/2026 Today Richards, Reed							
Admin Time									
Vamp, Nick (Not urgent)		Video Appointment	Time	Length	Provider	Patient	Age	Type	Reason
Anda, David (Not urgent)			9:00am	15	Richards, Reed	Vamp, Nick	8 Yr	Visit	Influenza like...
Harken, Joycelyn (Not urgent)			9:15am	15	Richards, Reed	Anda, David	70 Yr	Medication Refill	
Coachella, Estelle (Not urgent)			9:30am	15	Richards, Reed	Harken, Joycelyn	31 Yr	Follow Up	
Kehoe, Kenton (Not urgent)			9:45am	15	Richards, Reed	Coachella, Estelle	53 Yr	Consult	Counselling
Kiever, Luciano (Not urgent)			10:00am	15	Richards, Reed	Kehoe, Kenton	60 Yr	Follow Up	
Wetherington, Arcelia (Not urgent)			10:15am	30	Richards, Reed	Kiever, Luciano	69 Yr	Diabetes F/U	
Vanasse, Georgia (Not urgent)			10:45am	15	Richards, Reed	Wetherington, Arcelia	80 Yr	Medication Refill	
Talladino, Sabine (Not urgent)			11:00am	15	Richards, Reed	Vanasse, Georgia	48 Yr	Follow Up	
Timberlake, Mariann (Not urgent)			11:15am	15	Richards, Reed	Talladino, Sabine	73 Yr	Follow Up	
Johnson, Sandra (Not urgent)			11:30am	15	Richards, Reed	Timberlake, Mariann	75 Yr	Telephone Visit	Diabetes F/U
Lunch			11:45am	15	Richards, Reed	Johnson, Sandra	68 Yr	Telephone Visit	
Admin Time			1:00pm	15	Richards, Reed	Jones, Michael	8 Yr	Follow Up	
Jones, Michael (Not urgent)			1:15pm	15	Richards, Reed	Foster, Madison	32 Yr	Follow Up	
Foster, Madison (Not urgent)			1:30pm	15	Richards, Reed	Greenblatt, Margret	67 Yr	Follow Up	
Greenblatt, Margret (Not urgent)			1:45pm	15	Richards, Reed	Jones, Doug	55 Yr	Medication Refill	
Jones, Doug (Not urgent)			2:00pm	15	Richards, Reed	Mayton, Nathanael	36 Yr	Immunizations	
Mayton, Nathanael (Not urgent)			2:15pm	30	Richards, Reed	Steinbock, Tammara	69 Yr	Consult	Counselling
Steinbock, Tammara (Not urgent)			2:45pm	15	Richards, Reed	Swimm, Carmel	48 Yr	Follow Up	Chest Pain
Swimm, Carmel (Not urgent)			3:30pm	15	Richards, Reed	Willims, Maricela	63 Yr	Follow Up	
Admin Time			3:45pm	15	Richards, Reed	Ramirez, Maria	9 Yr	Follow Up	
Willims, Maricela (Not urgent)			4:00pm	15	Richards, Reed	Stanowski, Dewayne	82 Yr	Follow Up	
Ramirez, Maria (Not urgent)			4:15pm	15	Richards, Reed	Stirling, Archer	67 Yr	Follow Up	
Stanowski, Dewayne (Not urgent)			4:30pm	30	Richards, Reed	Stewert, Seifried	96 Yr	Diabetes F/U	
Stirling, Archer (Not urgent)			5:00pm	15	Richards, Reed	FHO+, Hourly Rate	n/a		
Stewert, Seifried (Not urgent)									
FHO+, Hourly Rate (Not urgent)									

Screenshot showing Day Sheet with Recurring Appointment as reminder

Record Daily Hours and Activities in a Structured Encounter Note

Each day, use the **provided structured encounter note template** for your tracking patient to record your daily FHO+ hourly-rate time and activities **for the work performed that day**. This ensures that time spent on each eligible category is documented consistently and that supporting details are available if requested for audit purposes.

- In the **encounter note template**, enter the **total time spent providing Direct Care, Direct Phone Care, Indirect Care, and Clinical Administration for that day**.
- **Document the activities performed for Indirect Care and Clinical Administration.**
- Record any Direct Care provided (e.g. in-person, virtual, or phone care) in your schedule for audit purposes.

Why this matters

- Ensures accurate documentation of **actual time** spent on **Direct Care, Direct Phone Care, Indirect Care** and **Clinical Administration**.
- Demonstrates the work performed for claimed Indirect and Clinical Administration hours if requested by the Ministry of Health (MOH).
- EMR audit and security reports may not provide a full picture of daily activities. Using the daily note template ensures a complete record, including work performed outside the EMR.

When to do this

- Physicians are required to enter a **daily record each day for the work performed** (including time spent and activities, as applicable).
- The hourly rate is billed in **15-minute units**, calculated cumulatively across the day. **Note:** Any remainder of **eight (8) minutes or more** is rounded up to a full 15-minute unit.
- **Start and stop times do not** need to be recorded for activities.
- Activities do **not** need to be recorded on a patient-by-patient basis.
- Refer to the [OMA FHO+ hourly rate reference guide](#) for more information.

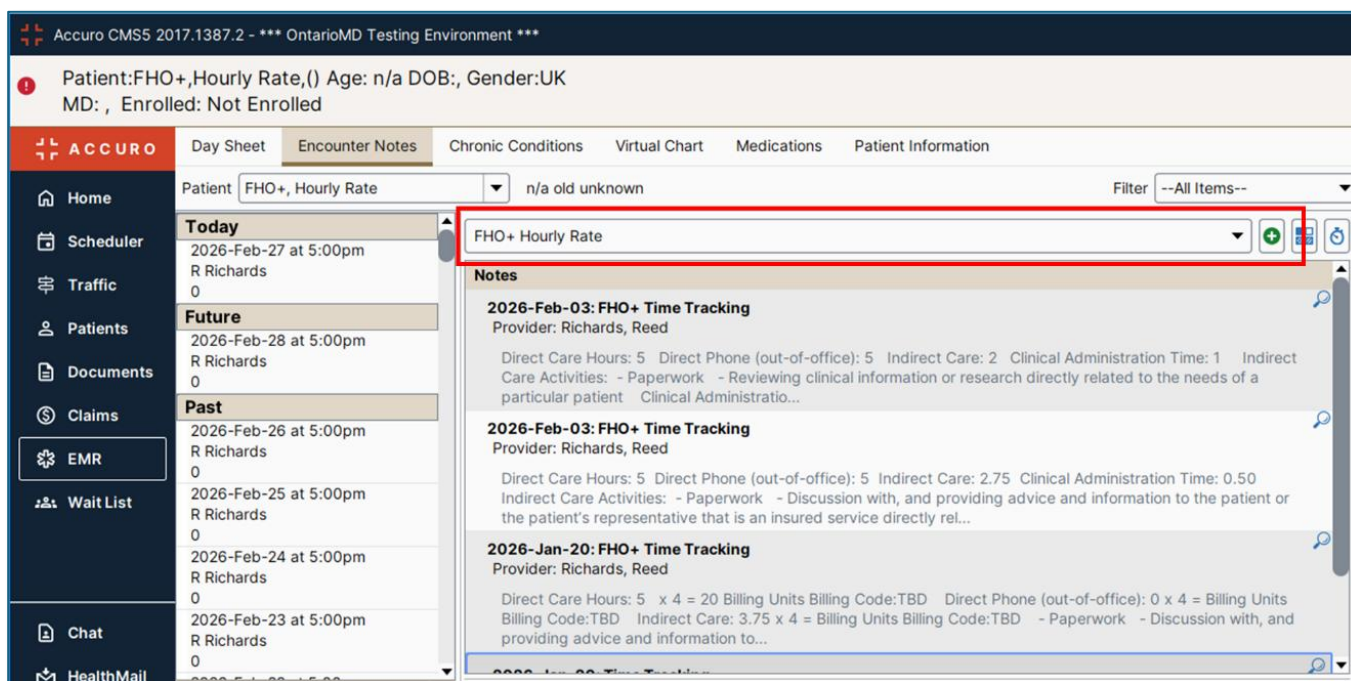
Helpful tools

- Use a consistent tool to speed up documentation like a **template, stamp, or macro**.
- Using the same method each day improves clarity, consistency and efficiency.

The ACCURO FHO+ Hourly Rate package that you downloaded includes a sample template.

Add Note in the Tracking Patient Chart

It is recommended to create a customized **Note template** that can be used in the tracking patient encounter notes to document daily hours and activities. Use the provided Note template or create one to match your workflow. Templates are stored in your Electronic Drawer for easy access.



Screenshot illustrating the Electronic Drawer in the Encounter Notes

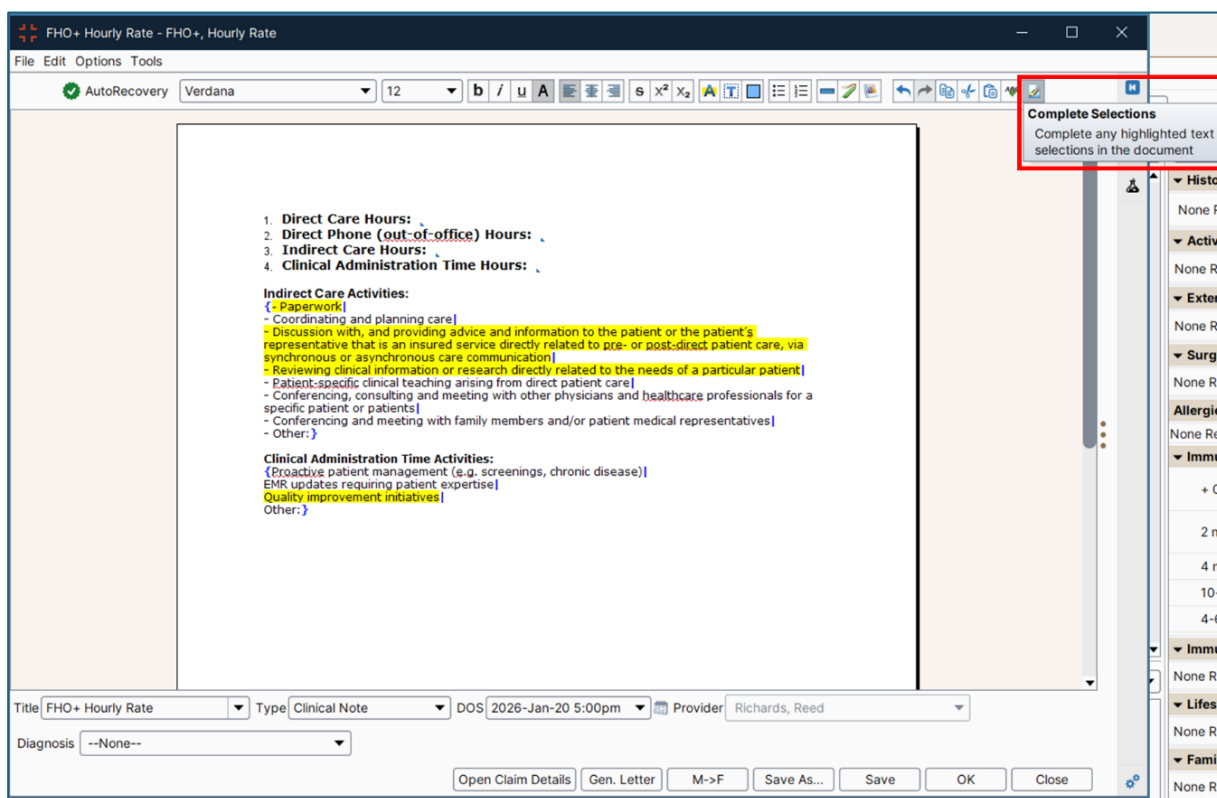
Tip: Mark any note in your **Electronic Drawer** as a favourite to have it appear in the **Favourites** section at the top of the drawer. This makes it easy to quickly access your frequently used notes without searching through the full list.

Creating Templates

Templates can be created in the **Template Wizard**, customized to match your workflow, and are stored in your **Electronic Drawer** for easy access. A standardized template helps maintain consistent documentation of daily activities while still allowing flexibility to update the content as needed.

- **Insert bookmarks** at the end of each to **easily navigate** between them using **Ctrl + UP/Down arrows** on your keyboard (**Ctrl + ↑** / **Ctrl + ↓**)
- To complete the template, click once on each phrase you wish to include (selected items will highlight yellow). Then double-click your final selection or use the **Complete Selections** button to finish the note.

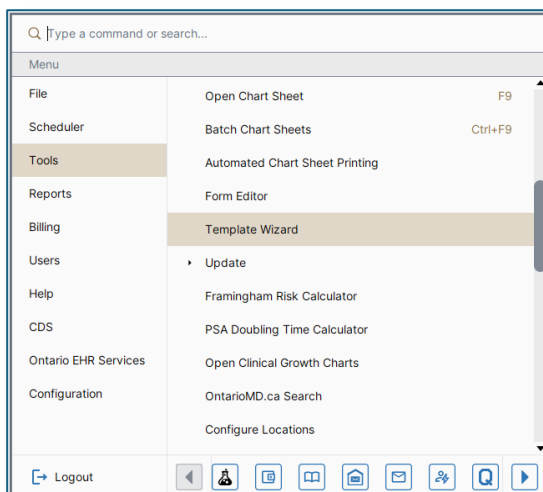
When inserting a template or note, include or remove additional details as needed to match your workflow and accurately reflect the FHO+ hourly rate activities completed that day.



Screenshot illustrating the ACCURO sample template

Add Template

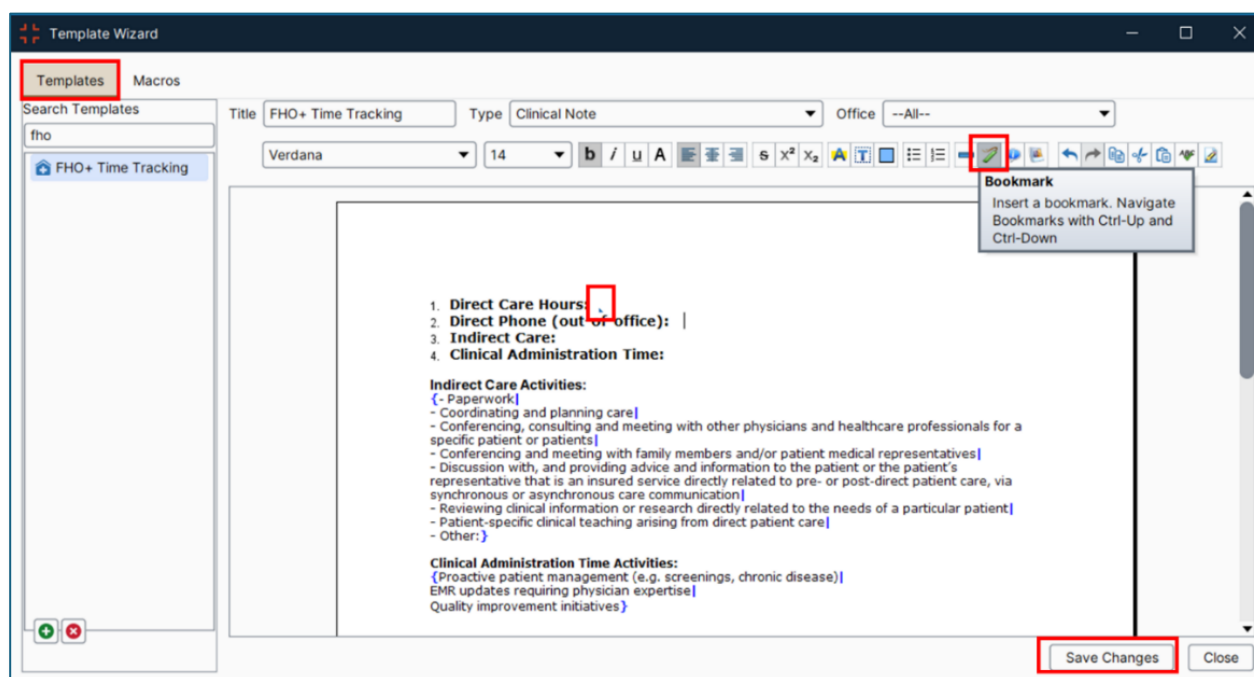
- Select **Menu > Tools > Template Wizard** (or type “template” in the Menu search field).



Screenshot illustrating Template Wizard option

- Ensure the **Template** tab is selected (not the **Macro** tab).
- Click the **green plus (+)** button to add a new template.

- Start with a blank template or copy and paste the provided sample template.
- Enter a clear and recognizable **Title** for the template.
- Leave **Type** set to *Clinical Note*.
- Add **Bookmarks** where needed to make navigation easier (see [Add Bookmarks to Sample Template](#)).
- Customize the template to reflect your clinic processes and the types of FHO+ activity documentation you complete regularly.
- Click **Save Changes**.



Screenshot illustrating the Bookmark option in the Template Wizard

Add Bookmarks to Sample Template

Bookmarks act as placeholders to mark where information should be entered, making templates easier and faster to complete while guiding data entry. Once inserted, you can quickly navigate between

Bookmarks using (Ctrl + ↑ / Ctrl + ↓)

- Select **Menu > Tools > Template Wizard** (or type “template” in the Menu search field).
- Click in the template where you want to insert a **Bookmark**.
- Select the **Bookmark** icon at the top right to add the **Bookmark**.



- A small arrow will appear within the template, indicating the placement of the **Bookmark**.

1. **Direct Care Hours** 

- Repeat for each category you want to **Bookmark**.
- Select **Save Changes** when finished.

ACCURO Sample Template

Copy and paste the text below into the **Template Wizard** and customize it to match your workflow. Add **bookmarks** to mark where information goes and quickly navigate between fields. When using this template in a patient chart, include additional details as needed to accurately reflect the FHO+ hourly rate activities completed that day.

1. Direct Care Hours:
2. Direct Phone (out-of-office) Hours:
3. Indirect Care Hours:
4. Clinical Administration Time Hours:

Indirect Care Activities:

{- Paperwork|

- Coordinating and planning care|
- Discussion with, and providing advice and information to the patient or the patient's representative that is an insured service directly related to pre- or post-direct patient care, via synchronous or asynchronous care communication|
- Reviewing clinical information or research directly related to the needs of a particular patient|
- Patient-specific clinical teaching arising from direct patient care|
- Conferencing, consulting and meeting with other physicians and healthcare professionals for a specific patient or patients|
- Conferencing and meeting with family members and/or patient medical representatives|
- Other:}

Clinical Administration Time Activities:

{Proactive patient management (e.g. screenings, chronic disease)|

EMR updates requiring patient expertise|

Quality improvement initiatives|

Other:}

Billing FHO+ Hourly Rate in your EMR

The **new FHO+ hourly rate billing codes may need to be added manually to your EMR**, as they are not part of the OHIP schedule of benefits and may not be included in automatic vendor updates. Instructions for adding these codes are provided in this guide. You may also contact your vendor for assistance.

Tip: Billing for the hourly rate is handled similarly to CME or the preventive care annual bonus.

Why this matters

Adding the codes will allow physicians to accurately record and submit FHO+ hourly rate claims. Ensuring the codes are in place helps maintain smooth billing workflows and supports consistent tracking of eligible hours.

When to do this

Add the billing codes to your EMR before April 1, 2026, so they are available when you begin recording FHO+ hourly rate activities.

Helpful tools

Considerations for FHO+ hourly rate billing claims

- Submitted claims **must not contain** a health number, version code or birthdate
- Billing codes are submitted at the fee per unit and paid based on the number of units billed.
- Adjust the units or quantity to reflect claimed hours (1 unit = 15 minutes)
- Daily claims cannot exceed 14 hours
- Service codes do not require an associated diagnosis code

Note: [Review Ministry of Health Information Bulletin for full details](#)

FHO+ Hourly Rate Billing Codes		
Care Category	Code	Description
Direct care: In-person or video	Q310	Personally delivering insured clinical services to rostered patients, including in-person and virtual care, and clinical teaching done concurrently with patient care.
Direct: Phone out-of-office	Q311	Care provided by telephone when you are out of office.
Indirect patient care	Q312	Charting, referrals, requisitions, clinical forms, reports, chart reviews, reviewing results, and family or representative conferences tied to patient care.
Clinical administration time	Q313	Proactive patient management, EMR updates requiring physician expertise, and quality improvement initiatives.

Table listing FHO+ Hourly Rate billing codes

Use your EMR's built-in functions to streamline billing entry and validate claims

- **Create a billing shortcut** - Depending on your EMR, group FHO+ hourly rate codes you regularly bill in a shortcut and adjust the time units to reflect hours worked
- **Check defaults** - EMRs may automatically assign a minimum of 1 unit or quantity for each code. Delete any codes not applicable to that date of service
- **Verify claims** - Some EMRs provide reports for **unbilled appointments**. Regularly use these reports or other clinic-approved billing checks/reports, to ensure claims have been created and submitted

Add FHO+ Hourly Rate Billing Codes to ACCURO

Please refer to the ACCURO Support 'Add Procedure Codes' section:

[Claims - Ontario - FHO+ \(Add Procedure Codes\)](#)

Create Claims for Each Date of Service that FHO+ Hourly Rate Care was Performed

Please refer to the ACCURO Support 'Create Claims' section:

[Claims - Ontario - FHO+ \(Create Claims\)](#)

Create Billing Macro

Consider creating a **Billing Macro** to streamline billing by grouping commonly submitted FHO+ procedure codes together. This can improve efficiency but **works best when all codes in the macro correspond to care that will actually be billed**.

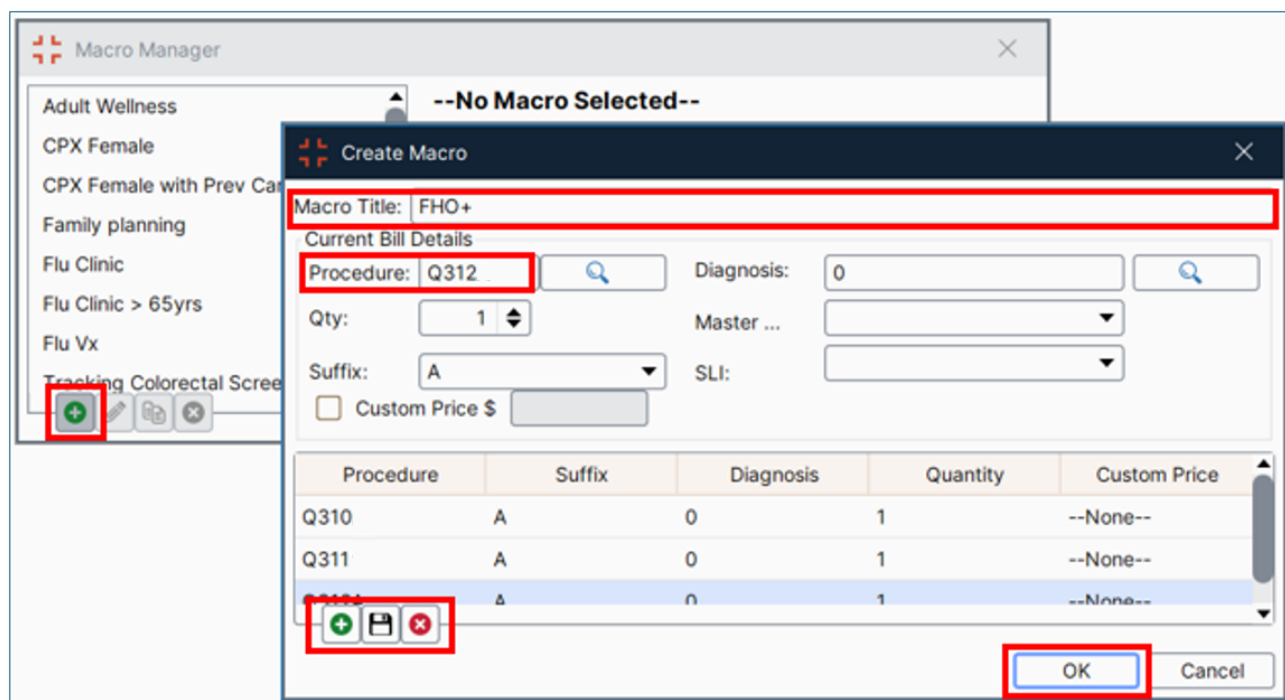
If any codes are not applicable because the work was not performed and would otherwise have a quantity of 0, they **must be deleted**. The system will default the quantity to one unit (1), which will result in incorrect billing.

- Go to **Menu → Billing → Billing Options → Manage Macros**
- In **Macro Manager**, click **Add**  to create a new **Macro** (or **Edit/Copy** as needed)
- Enter a meaningful **Macro Title** (minimum 3 characters)
- Enter the **Procedure** code and details
- Click **Save**  to add the code
- Click **Add**  to add another code
- **Repeat Save and Add steps** for each additional code to include in the **Macro**
- Click **OK** to save the **Macro**

Best Practices for Billing Macros

Optimize Your Macro for Your Clinic: If using a **Macro** is appropriate for your clinic and certain categories will rarely or never apply, consider excluding those codes and building your macro around the ones most likely to be used.

Avoid Incorrect Billing - When billing with a **Macro**, remove any procedure codes that do not apply before saving the claim, since they cannot be set to 0 and will default to a quantity (**Qty**) of 1



Screenshot illustrating the creation of a billing Macro

Monitor Billing Hours to Stay Within Required Limits

Track your daily hours to **stay within allowable daily and monthly billing limits**. This helps you keep an accurate record, monitor your hours, and avoid rejected claims. The [FHO+ Hourly Rate Calculator](#) automates calculations and supports ongoing tracking and monitoring of your daily entries. Physicians may use the **FHO+ Hourly Rate Calculator** or other preferred tracking tools to ensure alignment with billing limits.

Why this matters

- Physicians must adhere to billing limits to avoid **claim rejections or overpayments**
- The OHIP system will reject claims that exceed the **14-hour daily limit** or the **prorated monthly limit of 240 hours**. Physicians are responsible for staying within the percentage caps:
 - 25 per cent of your total billable hours monthly can be for indirect care and clinical administration (together)
 - Five per cent of your total direct and indirect care hours monthly can be for clinical administration
- As of April 1, 2026, only absolute hour caps (14/day, 240/month) will be in place. The Ministry of Health will reject billings over these amounts
- As of April 1, 2026, the percentages caps will **NOT** be in place. If a physician submits hours exceeding these caps, payment for the extra hours will be adjusted at a future date (to be determined)

When to do this

- Daily, weekly or as convenient, enter the **daily hours from the EMR tracking patient** (documented daily) **into the FHO+ Hourly Rate Calculator**, with each day entered separately
- Work month-by-month in the **FHO+ Hourly Rate Calculator** and **clear data between monthly periods** to avoid confusion
- Staff can assist with transposing hours from the EMR into the calculator as needed.
- The **calculator is optional** and is meant only to **complement the required daily documentation (maintained in the EMR as recommended)**. Physicians can use it to **monitor ongoing totals and alignment with billing limits** by transposing cumulative hours from the EMR.

Important: The **FHO+ Hourly Rate Calculator** is a supplementary tool and does not replace EMR documentation nor capture FHO+ hourly rate care category activities for audit purposes.

Helpful tools

Download the [FHO+ Hourly Rate Calculator](#)