

KHSC Bundled Care Payment Request Portal

Instructions for Non-partners

Non-partners must complete the ***Non-partner Bundled Care Payment Request Template*** in order to receive payment for care delivered that relates to elective unilateral hip and knee replacement surgeries or shoulder arthroplasty and shoulder reverse arthroplasty surgeries. Patients must have agreed to receive publicly funded care, which is not paid for in any other way such as private insurance.

Let us know you've completed care. By the 20th of any given month, please submit one record in the ***Non-partner Bundled Care Payment Request Template*** for each patient whose last visit or discharged date was in the previous month. For example, by May 20, submit for any patient whose last visit occurred in the month of April.

Please refer to the *instructions* and *field list* worksheets included in the ***Non-partner Bundled Care Payment Request Template*** for a detailed list of information required for each patient.

If you require assistance with the ***Non-partner Bundled Care Payment Request Template***, please contact KHSC Decision Support: decisionsupport@kingstonhsc.ca

Instructions for Partners

Please contact KHSC Decision Support: decisionsupport@kingstonhsc.ca