

Ministry of Health

Ontario Health Insurance
Plan Division
Health Services Branch
49 Place d'Armes, 5th Floor
Kingston ON K7L 5J3

Ministère de la Santé

Division de l'Assurance-santé
de l'Ontario
Direction des services de santé
5ème étage, 49 Place d'Armes
Kingston ON K7L 5J3



December 14, 2020

Anthony Martini
Via E-mail

**OHIP Eligibility Review Committee – Notice of Decision
Request for Ontario Health Insurance Coverage – DENIED**

This letter is in response to your request for an eligibility review for you and your wife, Annette Martini, under the Ontario Health Insurance Plan (OHIP). We are sorry to hear of your health issues.

In order to be considered a resident of Ontario for OHIP-purposes, Regulation 552 under the **Health Insurance Act (HIA)**, in general states that, a person must:

- have Canadian citizenship or an OHIP-eligible immigration status as listed in the Regulation, and
- make his or her primary place of residence in Ontario, and
- be physically present in Ontario for 153 days in any 12-month period, and
- be physically present in Ontario for at least 153 days of the first 183 days after establishing residency in Ontario

The ministry requires that individuals provide specific information and documentation to demonstrate eligibility for Ontario health insurance coverage.

When applying for OHIP, all applicants must present original documents to confirm their Canadian citizenship or OHIP-eligible immigration status, their Ontario residency, and their identity.

The ministry has reviewed the information and documentation submitted to date and it does not support that you and your wife have an OHIP-eligible immigration status as listed in the Regulation.

The HIA provides no discretion for the ministry or any other person to provide eligibility for health coverage to persons not defined as eligible under Regulation 552 of the Act.

Should you wish to provide further information and documentation to support your OHIP-eligible immigration status and registration for OHIP, you may submit that documentation to our office for further review and consideration.

Please Note: Effective March 20th, the Ministry established temporary funding for medically necessary hospital and limited community based physician services provided to patients who are not currently insured under OHIP or another provincial/federal/private health care plan. This funding is a temporary measure to ensure all people in Ontario receive urgent medically necessary services during this COVID 19 outbreak.

You may decide to request an appeal of this decision before the Health Services Appeal and Review Board (the HSARB). The HSARB is an independent, adjudicative body. It is not part of the Ontario Health Insurance Plan or the Ontario Ministry of Health.

Prior to making your appeal to the HSARB, you may find it helpful to:

1. Review the reasons that OHIP gives for its decision, including the relevant sections of the HIA and its Regulations;
2. Learn more about the powers of the HSARB by visiting <http://www.hsarb.on.ca/scripts/english/faq.asp>, including the section entitled, "If I Appeal, What Can the Board Do For Me?"; and
3. Look at previous decisions of the HSARB that may be similar to your circumstances at: <http://www.canlii.org/en/on/onhsarb/>.

If you believe the HIA and its Regulations were incorrectly applied to your circumstances, you must notify the HSARB that you wish to appeal OHIP's decision.

The HSARB's address is:
The Health Services Appeal and Review Board
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4
Attention: Registrar

Sincerely,



Kathryn Fleming
Program Manager
Health Services Branch