

OMA FORMS COMMITTEE – Form Guiding Principles

DIGITAL FIRST

- Fully digital forms are **NOT** fillable PDF versions of paper forms, they leverage automation and business intelligence processes to minimize the human effort required to complete the form and transmit the information to the requesting party.
- Existing paper & PDF form owners should have a plan and process to fully digitize forms.
- Eliminate portals where possible. If one is necessary, it **MUST** be fully integrated before deployment.
- Integration is defined as:
 - Single Sign-on.
 - OntarioMD Certified EMRs & HIS must be included in the integration.
 - Documents/data can be attached to the form using secure methods within the EMR/HIS* directly.
 - Electronic submission of the form & attachments using secure standards.
 - Bidirectional interface to support electronic requests for forms (with attached signed consent) directly from form creators.

PATIENT ATTESTATION

- Do **NOT** ask for information that is best provided through patient attestation.
Examples:
 - Dates/types of treatment by other health-care providers.
 - Dates of illness, injury, off work, return to work.
 - Functional impacts.
 - Employer's ability/willingness to accommodate.

APPROPRIATENESS

- Information requested **MUST** fall within the physician's scope of practice.
- Request objective data only, for example: history, exam findings, test results, consultant reports, diagnoses & differential diagnoses.
- Functional assessments are **NOT** within the scope of practice for most physicians. For physicians who offer functional assessments as part of their work, this information is part of their existing clinical documentation.
- Avoid requesting speculative opinions about the patient.
- Do **NOT** request the interpretation of tests ordered by others.
- Do **NOT** request an opinion regarding recommendations made by others.
- Do **NOT** request eligibility for patient benefits assessments.
- It is inappropriate to ask a physician to certify patient attestation information.

REMUNERATION

- Remuneration **MUST** reflect the time, effort and expertise required to complete the form.
- Appropriate remuneration can be calculated on behalf of form creators, upon request to the OMA Forms Committee.
- All forms **MUST** clearly state who is responsible for the cost of the form's completion.

**EMR: In Ontario, an Electronic Medical Record is a software system used by community-based clinicians for clinical, scheduling, and billing purposes. Ontario maintains a certification program which is delivered by OntarioMD ("OntarioMD-certified EMR") which ensures baseline clinical, workflow, and technological functionality and this certification is a prerequisite for EMR integration with provincial services. For the purposes of this document, "EMR" refers to OntarioMD-certified EMRs. *HIS: A Hospital Information System is enterprise software system hospitals use for internal hospital need, for patient management, workflow and for financial management purposes.