Medical Escort Reimbursement Form

ornge

Medical escorts are physicians, nurses or respiratory therapists who accompany and provide medical care to patients during transport. The following information is required in order to assess your account:

- General Information
- Patient Information
- Expenses

GENERAL INFORMATION:

Hospital (Claimant) Name and Address:

Contact Name and Telephone Number:

Escort Name:

> PATIENT INFORMATION:

Patient's OHIP No: Patient's Last Name: Initials: Patient's First Name: Sex: Date of Birth: Patients Ontario Address: Home Telephone No: Business Telephone No: City, Town: Province: Postal Code:

Flight Number:

Patient Number:

> EXPENSES:

ITEM DESCRIPTION	TOTAL EXPENSE	LESS HST	TOTAL TO BE REIMBURSED
TOTAL			

Please complete this form submit a copy to finance-ap@ornge.ca, or to the address below:

ATTN: Accounts Payable Ornge 5310 Explorer Drive, Mississauga, ON L4W 5H8

If you have any questions, feel free to visit our online Healthcare Partner Portal at:

www.ornge.ca/healthcare



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