

SUMMARY of the Decision of the Inquiries, Complaints and Reports Committee (the Committee)

(Information is available about the complaints process [here](#) and about the Committee [here](#))

Dr. Ngoc Binh Van (CPSO #93752) (the Respondent)

INTRODUCTION

The College received information raising concerns about the Respondent's conduct in relation to his OHIP billing and medical recordkeeping. Subsequently, the Committee approved the Registrar's appointment of investigators to conduct an investigation into the Respondent's practice.

COMMITTEE'S DECISION

The Committee considered this matter at its meeting of March 6, 2026. The Committee required the Respondent to appear before a Panel of the Committee to be cautioned with respect to repeated deficiencies in medical recordkeeping, the responsibility of a physician to ensure accurate OHIP billing, and following the appropriate procedure when adding a late medical note into a patient's chart.

The Committee also accepted an undertaking from the Respondent.

COMMITTEE'S ANALYSIS

As a result of this investigation, the Committee had serious concerns about the Respondent's oversight and management of his OHIP billings. In particular, the Committee was concerned that the Respondent exercised poor professional judgement to resolve alleged discrepancies with his OHIP billing with the Ministry of Health Ontario (the Ministry), and to ensure accurate and appropriate OHIP billing. The Respondent acknowledged that he did not follow up directly with the Ministry once he became aware of the billings issues, and ultimately assumed the issue had resolved. The Committee was of the view that the Respondent was responsible for directly making inquiries with the Ministry once he became aware of any possible issue, given that physicians are responsible for any billings that are submitted under their name.

The Committee also had serious concerns about the Respondent's medical recordkeeping. The Respondent acknowledged that he failed to contemporaneously document a patient encounter and that when he learned of this documentation error, he failed to follow the appropriate procedure to correct the medical record to add a late medical note, which is clearly set out in the College's policy, *Medical Records Documentation*, and did not date and initial the changes. The Respondent also acknowledged that he relied on second-hand information to draft the medical note

without independently verifying the accuracy and completeness of the information provided to him, which the Committee felt was especially concerning as he has told the College that he did not have any recollection of the patient encounter in question.

The Committee's concerns in this matter were heightened due to the Respondent's prior history with the College, which includes remediation on similar medical recordkeeping deficiencies, and overall, the Committee was left with the impression that, despite his history with the College, the Respondent demonstrated an ongoing lack of insight into his professional responsibilities.

The Committee felt that the Respondent would benefit from a discussion with his peers and agreed that the most appropriate disposition was to caution the Respondent with respect to repeated deficiencies in medical recordkeeping, the responsibility of a physician to ensure accurate OHIP billing, and following the appropriate procedure when adding a late medical note into a patient's chart.

This is a summary of the Committee's decision as it relates to the caution disposition.