

**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. Clement Ka-Chun Yeung (CPSO #32020)  
(the Respondent)**

**INTRODUCTION**

The College received information raising concerns about the Respondent's over-billing for medical services. Subsequently, the Committee approved the Registrar's appointment of investigators to conduct a broad review of the Respondent's practice.

**COMMITTEE'S DECISION**

A General Panel of the Committee considered this matter at its meeting of February 17, 2021. The Committee required the Respondent to appear before it to be cautioned in person with respect to inappropriate OHIP billing. The Committee also requested that the Respondent provide a written report, prior to his caution, reviewing the parameters used to justify the use of the A001, A003, A004, A007, and K030 OHIP billing codes.

**COMMITTEE'S ANALYSIS**

As part of this investigation, the Registrar appointed an independent Assessor to review a number of the Respondent's patient charts and OHIP billing records, interview the Respondent, and submit a written report to the Committee. The Assessor reviewed the Respondent's OHIP billings from January 1, 2014, to December 31, 2016, and determined that the services rendered by the Respondent were not billed in accordance with the standard of practice of the profession and in accordance with the OHIP Schedule of Benefits. The Assessor also commented on shortcomings in a variety of other aspects of the Respondent's practice.

The Committee considered the Assessor's report in the context of the Respondent's significant history with the College, including referrals to the Discipline Committee, education and clinical supervision in part related to billing practices, and a prior public complaint that resulted in a caution in person involving medical record-keeping and OHIP billing issues.

The Committee noted that the Respondent admitted to excess use of some billing codes which he attributed to ignorance of billing rules after returning to practise in Ontario from the United States. The Committee indicated the Respondent ought to have been aware of the OHIP billing rules and remarked that it was difficult to accept that the Respondent's inappropriate use of a variety of billing codes was merely the result of ignorance. The Committee was concerned that the Respondent did not acknowledge

the extent of his inappropriate billing, which was clearly outlined in the Assessor's report.

The Respondent voluntarily paid back a large sum of money to OHIP and the Committee acknowledged this reparation. The Committee noted that the amount repaid may or may not be equal to the amount the Respondent over billed.

In the circumstances, and considering the amount of inappropriate and excess billing that occurred and the obvious financial gain that accrued to him, the Committee cautioned the Respondent as outlined above.