



Dear Patient:

This information sheet is our latest attempt to keep you informed of changes in our office policy. For your information, OHIP does not pay for all services that you request from your doctor(s). Services that OHIP does not pay for are called “non-insured or uninsured services” and it is illegal and fraudulent for doctors to bill OHIP for them. In order to maintain the financial viability of our practice and ensure prompt service, it is necessary (and legal) for our practice to charge for these services.

Every effort has been made to account for most of the commonly requested services in this information sheet. If the uninsured service you are requesting is not listed below, please communicate this to me or my office staff for further clarification. To help speed up our service, please let the office staff know when you are making your appointment that you are requesting a service that is in the list below or a service for which you have been charged in the past by this office or another doctor’s office.

The fees contained in the list below are based on the Ontario Medical Association’s suggested fees as found in the 2016 edition of the OMA Physician’s Guide to Uninsured Services.

All uninsured services must be paid in full when rendered. You have the right to receive a receipt and the office staff will provide you with one upon settlement of your account. Should you be unable to pay for the uninsured service at the time it is provided, please let the office staff know when and how you intend to settle your outstanding account. We will make every effort possible to assist you in the settlement of your outstanding account. Please note that our office accepts cheques, credit card and Interac payments. Where applicable, a charge of \$35.00 for personal cheques that are returned N.S.F. by financial institutions will be added to a patient’s account. Thank you for your co-operation.

Please acknowledge receipt and acceptance of the above office policy by signing below and returning the detachable portion by either fax, mail, email or in person to the office (Fax: 1-888-972-1932 Address: The Village Clinic, 101 Thompsons Road, Penetanguishene, Ontario, L9M 0V3 Email Address: admin@tvccare.ca). Should you have any further questions, please contact the administration staff at the office phone number: 705-300-0016

Sincerely,

The Village Clinic 2017

UNINSURED/NON-INSURED SERVICES

Physicians at The Village Clinic are committed to helping our patients with all of their health care needs. The [Ontario Health Insurance Plan \(OHIP\)](#) covers most aspects of your care; however, some medical and administrative services are not covered by OHIP and require separate payment. The typical cost of such services are enumerated below and are set in line with the guidelines set by the Ontario Medical Association (OMA) and the College of Physicians and Surgeons of Ontario (CPSO).

Ontario's health Insurance Plan (OHIP) pays for most medical services but many administrative services and some medical procedures are deemed by OHIP to be not medically necessary and are therefore uninsured. It is The Village Clinic policy that these services are billable directly to the patient and payment is due on receipt of the service.

(Excluding Examination unless otherwise noted. Cost of physical examination is \$135)

Service	Payment
Missed Routine Visit (Low to moderate complexity) (24 hours cancellation notice required)	\$60
Missed Complex Visit (24 hours cancellation notice required)	\$120
Prescription Refills By Phone or Fax *(Emergency Short Term Refills at Physicians Discretion Only)*	\$30
Driver Medical Examinations	\$85
Complex Driver Medical Examinations (e.g. Additional tests/referrals required)	\$135
One Step TB Testing & Form/School or Daycare Form	\$45 & up
Two Step TB Testing & Form/School or Daycare Form	\$65 & up
Telephone Advice (M.D. Available in some Emergency Situations) *(For Serious Medical Emergencies, patient's should dial 9-1-1 immediately)*	\$30/Unit
Complex Forms with Physical Examinations Required By a Third-Party	\$135 & up
Medical Supplies (Splints, Dressings, etc.)	Individual Pricing
Transfer of Individual Records First 20 pages: Per Additional Page:	\$30 \$0.30
USB Copy of Medical Record	\$50
Legal Reports, Depositions, etc.	\$300/hr
Photocopying of Lab Results/Imaging Results: (Per Page)	\$1
Travel Medical Advice	\$55 & up
Forms Required for Volunteers at Nursing Homes/Hospitals	\$30 & up
Forms Required for Commercial Weight Loss Programs	\$30 & up
Illness/Return to Work Notes (Simple)	\$15
Private Insurance Sickness Forms	\$30 & up
Forms for Insurance Coverage of Physiotherapy, Massage Therapy, Acupuncture, Compression Stockings & Orthotics (at the request of insurance company)	\$35 to be paid by insurance company
Fitness Club Forms	\$30 & up
Federal Tax Credit and Related Forms	\$50
Attending Physician's Statements Including Disability Form (May Include Examination)	\$155 & up
Replacement of Immunization Card	\$25
Life Insurance Death Certificate	\$50 & up
Employment Insurance/Maternity Certificate	\$30
Day Care Application Form	\$30
Camp Form	\$30
School/College/University Medical Certificate	\$30
Travel Cancellation Insurance Form (with examination)	\$85 & up
All Other Uninsured Services Not Listed	Individual Pricing

Continued...

UNINSURED SERVICES

** Prescription renewals ordinarily require an office visit to re-assess the condition requiring the prescription. If you are unable to schedule an appointment to review your medication, we will charge for this service.*

Please anticipate your renewals, ask for renewals at each visit and bring your medications to your appointments.

Uninsured Fees follow the recommendations of the College of Physicians and Surgeons of Ontario and the Ontario Medical Association. The Village Clinic uninsured services policy rigorously adheres to these guidelines. Above fees are for services of average complexity. Actual fee charged may be increased based on complexity of service provided.

NOTE: All services not necessarily offered at The Village Clinic. ALL PRICES MAY INCLUDE HST, WHERE APPLICABLE.