

Uninsured Services

The Ontario Health Insurance Plan (OHIP) provides coverage for a vast majority of physician services however, there are some services that are not covered by your health card. Physicians are pleased to still offer these valuable services, however, the responsibility for payment lies with the patient or the third party requesting the service. Patients that do not have a health card are also responsible to pay for the services provided by the physician. Prices are set according to the OMA Guide to Uninsured Services. Please refer to the fee schedule below. Some items may not be listed and exceptions may apply.

<b>UNINSURED SERVICES/FORMS</b>	<b>OMA FEE</b>
MINOR ASSESSMENT (VISITOR-NO HEALTHCARD)	\$55.00
INTERMEDIATE ASSESSMENT (VISITOR-NO HEALTHCARD)	\$85.15
GENERAL ASSESSMENT/ANNUAL PHYSICAL (VISITOR-NO HEALTHCARD)	\$195.10
CONSULTATION/COUNSELLING (VISITOR-NO HEALTHCARD)	\$156.50
CHARGES FOR REPRODUCTION/TRANSMISSION OF MEDICAL RECORDS/ PHOTOCOPIES/USB	\$30 (first 20 pgs) +\$0.25/additional page
FORM FOR SCHOOL/CAMP/UNIVERSITY/DAYCARE	\$30.00
PRE-EMPLOYMENT CERTIFICATION FORM (CAMP, PRESCHOOL, DAYCARE, UNIVERSITY, EDUCATIONAL INSTITUTIONS)	\$38.25
BACK TO WORK NOTE/SICK NOTE/DAYCARE NOTE	\$20.00
INSURANCE CERTIFICATE OCF-3 DISABILITY CERTIFICATE	\$146.00
INSURANCE CERTIFICATE OCF-18 TREATMENT PLAN	\$146.00
INSURANCE CERTIFICATE OCF-19 DETERMINATION OF CATASTROPHIC IMPAIRMENT	\$120.00
INSURANCE CERTIFICATE OCF-23 TREATMENT CONFIRMATION	\$145.00
ATTENDING PHYSICIAN STATEMENT	\$146.00
INSURANCE MEDICAL EXAMINATION (ASSESSMENT&REPORT)	\$238.00
REVENUE CANADA, FEDERAL DISABILITY TAX CREDIT	\$75
CANADA PENSION PLAN(CPP) DISABILITY REPORT FORM	\$85.00
CANADA PENSION PLAN(CPP) NARRATIVE MEDICAL REPORT	\$150.00
CERTIFICATE OF FREEDOM FROM COMMUNICABLE DISEASES	\$20.00
ADMISSION TO DAYCARE/UNI/PRE-SCHOOL (INCLUDES OUT-OF - PROVINCE/INTERNATIONAL STUDENTS	\$28.50

MOT/DRIVERS MEDICAL PHYSICAL AND FORM	\$120.00
DRIVERS MEDICAL FORM ONLY (PHYSICAL NOT INLCUDED)	\$59.00
LETTERS	\$25 AND UP
CAS APPLICATION FOR FOSTER PARENT	\$59.00
MEDICAL CERTIFICATE EMPLOYMENT INSURANCE SICKNESS BENEFITS INS5140	\$40.00
LIFE INSURANCE FORM/DEATH CERTIFICATE	\$48.75
TRAVEL CANCELLATION INSURANCE FORM	\$39.00
MEDICAL CERTIFICATE EMPLOYMENT COMPASSIONATE CARE BENEFITS	\$56.00
MEDICAL RECORDS TRANSFER TO NEW PHYSICIAN	\$50 AND UP
TB TEST ASSESSMENT	\$44.48
TB TEST READING AND/OR FORM/IMMUNIZATION FORM	\$22.03
CITIZENSHIP/ IMMIGRATION MEDICAL REPORT	\$130.00
WORK/UNIVERSITY MEDICAL ABSENCE NOTE	\$30
EAR SYRINGING/EAR	\$25.00
TRAVEL INJECTIONS/PER INJECTION (DOES NOT INCLUDE CONSULT)	\$15.00