

**BILLING FORM FOR  
 UNINSURED PHYSICIAN SERVICES**

Last Updated August 28, 2024

 Lebovic Building, 4<sup>th</sup> floor  
 60 Murray Street, Box 25  
 Toronto, ON M5T 3L9  
 t. 416-586-4800 x 2028 f. 416-586-3175

<b>Missed Appointments (We require 24 hours' notice for cancellation of any appointments)</b>		<b>Fee</b>
Office Visit		\$50.00
Periodic Health Examination/ 30 min. counselling appointment		\$100.00
<b>Uninsured Reports, Forms or Letters <b>**per 2024 OMA Guideline for Uninsured Physician Services**</b></b>		<b>Fee</b>
School or Camp		\$40.00
Admission to Day-care, Pre-school, or University		\$40.00
Pre-employment Certification of Fitness		\$50.00
Fitness Club Forms		\$50.00
Forms required for commercial weight loss programs		\$30.00
Physical examinations required by a third-party including completion of form		\$80.00
Hospital/ Nursing Home Employee		\$50.00
Forms required for volunteers		\$30.00
Immunization Summary Form		\$25.00
Immunization Summary Form with 1 step TB test		\$45.00
Immunization Summary Form with 2 step TB test		\$65.00
Prescription Renewal		\$0.00 (no charge)
Drivers Medical Examination Form		\$80.00
Certificate of health verification		\$45.00
Sick Note		\$30.00
Return to Work or School Note		\$30.00
Jury Duty Note		\$30.00
Lost Notes		\$25.00
Legal Reports and requests		\$50.00/ 6 min
Photocopying charts (patient requested)		\$30 First 20 pages 0.25 per page thereafter
Employment Insurance/ Maternity Certificate		\$30.00
Certificate of Freedom from Communicable Diseases		\$30.00
CRA Disability Tax Credit Certificate (Form T 2201)	<i>**patient portion after CRA max. \$85.00**</i>	\$85.00
CPP Disability Medical Report (ISP 2519)		\$95.00
CPP Terminal Illness Medical Attestation for Disability Benefit (ISP 2530B)		\$95.00
CPP Reassessment Medical Report (ISP 2509)		\$30.00
CPP Scannable Impairment Evaluation (IMPAIR)		\$55.00
CPP Recurrence of the Same Medical Problem (ISP 2525)		\$30.00
CPP Narrative Medical Report	<i>**patient portion after CRA max. \$85.00**</i>	\$85.00
OCF-3 Disability Certificate		\$270.00
OCF-18 Treatment Plan		\$290.00
OCF-19 Determination of Catastrophic Impairment		\$160.00
OCF-Treatment Confirmation		\$270.00
Travel Advice in the office		\$50.00
Travel Cancellation Insurance Form		\$170.00
Attending Physician Statement (APS)		\$180.00
Medical Certificate for Employment Insurance Compassionate Care Benefits		\$75.00
Medical Certificate for Employment Insurance Sickness Benefits		\$55.00
System or Disease Specific Questionnaire		\$130.00
Insurance Medical Examination		\$285.00
All other forms, letters, etc.		\$25.00 and up
<b>Other Insured Reports or Forms</b>		<b>** Fees at Physician's Discretion**</b>
Civil Aviation Medical Examination Report		
Comprehensive Fitness to Work Report		
Physician's Review of Record(s)	<i>**\$45.00 per unit of 15 minutes**</i>	
Other(s):		

We accept payment by debit, credit (Visa, Master Card, AMEX) or cheque only.

Accommodations available for financial hardships.

All Fees are based on the Ontario Medical Association Physician's Guide to Uninsured Services 2024. Last updated March 2024



BILLING FORM FOR  
**UNINSURED PHYSICIAN SERVICES**  
Last Updated August 28, 2024

<b>Procedures</b>	<b>Fee</b>
Injections for travel purposes (per injection) eg. Twinrix	\$20.00
Lipoma Removal	\$75-\$200
Cryotherapy of warts (not plantar or genital) and keratosis	\$25.00 for first and \$10.00 each additional max. \$75.00
Removal of sebaceous cysts	\$75.00-\$200.00
Cosmetic Mole Removal of nevus by excision	\$75.00-\$200.00
Skin tag removal (one or multiple)	\$50.00-\$200.00
<b>Uninsured Visits for Patients without Coverage (do not have a valid OHIP card) **per 2024 OMA Guideline for Uninsured Physician Services**</b>	<b>Fee</b>
Minor Assessment (A001)	\$65.00
General Assessment (A003)	\$235.00
Intermediate Assessment (A007)	\$100.00
Minor Prenatal Assessment (P004)	\$105.00
Antenatal Preventative Health Assessment (P005)	\$130.00
Well-Baby (18month) Assessment (A002)	\$170.00

We accept payment by debit, credit (Visa, Master Card, AMEX) or cheque only.  
Accommodations available for financial hardships.

All Fees are based on the Ontario Medical Association Physician's Guide to Uninsured Services 2024. Last updated March 2024