

Dr Bart Kaczmarek and Associates at 1550 Ouellette Avenue, unit 101, Windsor, Ontario
UNINSURED SERVICES POLICY
September 28, 2025

The Following Uninsured (out of pocket) Services ARE COVERED by paying the Annual Fee

| General Uninsured Services | Pay-As-You-Go Rate | Annual Fee Coverage | |
|---|---|----------------------------|--|
| Prescription Renewals by phone/fax | \$30.00 – per request | ✓ | Prescription renewals may require an office visit to reassess the medical condition requiring the prescription |
| Illness and Return to Work Notes | \$30.00 | ✓ | |
| Ear Wash | \$35.00/one \$55.00/both | ✓ | |
| Note for Insurance Coverage - Massage Therapy, Orthotics, Chiropractic, Physiotherapy | \$30.00 | ✓ | |
| Letters on behalf of patients | \$30.00 – \$150.00 | ✓ | Depending on time and work involved |
| Lost Prescriptions, Notes, Referrals | \$30.00 | ✓ | |
| TB Skin Testing | \$40.00 – Test \$15.00 – Reading | ✓ | |
| Medical Examination for Return to Work requested by Employer | \$75.00 | ✓ | |
| Medical Supplies prescriptions for dressings, etc. | \$30.00 | ✓ | |
| Transfer of Medical Records | \$35.00 First 20 Pages Each page after 20 \$0.25 | ✓ | If records require physicians review, it will be charged at \$45 per 15-minute review, after first 15 minutes |
| Photocopying | \$1.00 per page | ✓ | |
| Parking | \$3.00 each time | ✓ | No retrospect reimbursements |
| Medical Report / Forms | | | |
| Employment Insurance / Maternity Certificate | \$50.00 | ✓ | |
| Fitness Club Forms | \$50.00 | ✓ | |
| Pre-employment Certificate of Fitness | \$50.00 | ✓ | |
| Travel Cancellation Forms | \$50.00 - \$100.00 | ✓ | Depending on time and work involved |
| Jury Duty Exemption Letter | \$50.00 - \$150.00 | ✓ | Depending on time and work involved |
| Certificate of Medical Status | \$50.00 | ✓ | |
| Day Care / School / Camp / Volunteer Forms | \$30.00 | ✓ | |
| Immunization Records Replacement | \$30.00 | ✓ | |

The Following Uninsured (out of pocket) Services ARE NOT COVERED by the Annual Fee

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|--|-------------------------|---|-------------------------------------|
| Missed First Appointment/ Physical | \$150.00 | × | Without 24 hours notice |
| Missed Regular Appointment | \$50.00 | × | Without 24 hours notice |
| Private Consultation/Visit | \$200 / each 15 minutes | × | |
| Insurance/Disability Forms/Legal Reports | OMA Rate | × | Depending on time and work involved |
| Attending Physician Statement (APS) | \$50.00 - \$150.00 | × | |
| Disability Tax Credit Certificate | \$300.00 | ✓ | |
| Third Party Physical Exam | \$250.00 | × | |
| OCF-3 Disability Certificate | \$250.00 | × | |
| OCF-18 Treatment Plan | \$270.00 | × | |
| OCF-23 Treatment Confirmation | \$250.00 | × | |
| Drivers Medical (MOT) Exam | \$200.00 | × | |
| Children's Aid Society Forms | \$250.00 | × | For prospective foster parents |
| Cortisone Injection Medication Fee | \$30.00 | × | |
| Durolan Medication Fee | \$500.00 | × | |
| PRP Fee | \$950.00 - \$1500.00 | × | |
| Cosmetic Procedure Fee | Starting at \$100.00 | × | |
| Liquid Nitrogen Treatment per each (uninsured) | \$50.00 | × | |