

SP 21.0 Payment of Fees in Advance (prepayment for services)

Effective: April 2003
Amended: July 1, 2010

Purpose and Objective

Patients should have the option of being able to prepay for services if they so desire. The intent of this Standard of Practice is to provide an “opportunity of convenience of choice” to patients who may wish to make prepayments for services rather than pay at each office visit.

This financial option:

- is at the sole discretion and choice of each patient
- has a defined maximum amount that may be prepaid
- has a defined maximum amount that may be held as a credit on a patient’s account
- provides that there shall be a full refund of any unused portion of the prepaid amount at the request of the patient
- is in no way to be construed or presented as a “discount for services”

Definition(s)

A member may accept payment of fees in advance of services under the following conditions:

- Payment of fees in advance is optional and will always be at the sole discretion of the patient
- Fees paid in advance must not exceed \$500 per individual patient but may be less as determined by the patient
- The credit balance on account shall not, at any time, exceed 120% (\$600) of the prepayment limit
- A refund for any unused fees paid in advance will be provided within seven days of a request from the patient
- Charging additional processing or administrative fees related to the provision of a refund is prohibited
- A patient may not gain financially from a requested refund (i.e. refund may not exceed what has been paid by the patient)
- All financial policies of the member’s practice, including those related to payment of fees in advance of services, will be reviewed with each patient prior to payment of any sort being charged or made
- An administrative discount of up to 10% of the total prepayment may be provided to the patient. This administrative discount may not be presented or construed as a discount for services provided.

Enforceability

Any member identified to the Complaints Director as non-compliant in the Standard of Practice related to payment of fees in advance of services is subject to the investigations and complaints process under Part 4 of the *Health Professions Act*. Identification of non-compliance may occur as a result of Practice Visit process, patient complaint or any other means by which this information may be brought to the attention of the Complaints Director.

