

Telma Grant Physio & Sports Therapy

Fee Schedule — Additional Policies & Information

This section, together with the front page of our fee schedule, is our complete fee schedule. It lists all of our fees and billing policies so you know what to expect. We provide this information to meet the College of Physiotherapists of Ontario's Funding, Fees and Billing Standard and to ensure patients understand all possible fees and billing practices.

Attendance & Missed Appointments

- We understand that life happens — illness, emergencies, and unexpected events can interfere with your schedule.
- If you ever need to cancel, please give us at least one full business day (24 hours) notice so we can offer your time to another patient.
- Missed or late-cancelled appointments are charged the full current scheduled fee.
- These charges are not covered by the Ministry of Health, WSIB, or private insurers.
- On the second missed or late-cancelled appointment (without 24-hour notice), all of your future booked appointments will be cancelled.
- You are welcome to rebook once your schedule allows you to attend reliably, and all missed fees are paid.
- For WSIB patients: WSIB does not pay for missed appointments. Frequent missed visits must be reported to WSIB, and this can affect whether additional physiotherapy is approved.

Keeping Your Publicly Funded Care Active (formerly OHIP)

- This policy applies to all patients receiving publicly funded physiotherapy through the Ontario Ministry of Health.
- To keep your plan active and safe, you must attend regularly.
- If you do not attend for 30 consecutive days, your plan will be closed and considered a self-discharge.
- You are always welcome to return when your schedule allows, but you will need a new assessment with a physiotherapist to restart care.
- If there is a waitlist, you will be placed in line again.
- Bottom Line: Publicly funded care must remain active and goal-focused under Ministry of Health rules. If you haven't been seen in over a month, your plan will be closed, and you will need to start fresh with a new assessment.

Bundled Care Programs

- We provide Bundled Care Programs only through our contract with certain hospitals (such as Lakeridge Health) for specific surgeries (hips, knees, and shoulders).
- These programs are exercise-based only, because exercise is the recommended modality for recovery and long-term outcomes.
- We follow the recommended exercise programs outlined in the Lakeridge Health Total Knee and Total Hip Replacement booklets, as this is the standard of care expected in bundled care.
- Exercise is the safest and most effective way to restore strength, mobility, and function after surgery.

- These programs do not include modalities (such as ultrasound or laser).
- The hospital pays for this care, not you.
- If you would like to explore additional treatments later, you can do so privately at our regular clinic rates.
- Once your hospital program ends, you are welcome to keep coming for private physiotherapy at our regular clinic fees.

Copies of Records or Reports

- If you need a copy of your chart or a report, we can provide this.
- The cost is a flat \$100 for a full chart request.

Equipment or Extra Costs

- If you need extra supplies (like braces or supports), we will tell you the cost ahead of time.
- We don't charge extra fees unless we have discussed it with you first.

Refunds

- Physiotherapy is a professional health service, so once the appointment has happened, the fee is not refundable.

Invoices and Receipts

- All invoices and receipts will clearly show:
 - Your physiotherapist's name and credentials
 - The names of any physiotherapy assistants (PTAs) involved in your care
 - What service you received
 - The fee charged and how you paid
 - Any payment terms

Sticking to the Fee Schedule

- We will never charge more than what is listed in our fee schedule.

Billing Errors

- If a mistake is made in your bill, we will fix it right away and note the correction in your file.