

Guideline G-008  
Quality Assurance Committee  
Approved by Council: November 29, 2007

*Note to Readers: In the event of any inconsistency between this document and the legislation that affects chiropractic practice, the legislation governs.*

### Intent

To advise members of acceptable business practices, including but not limited to the disclosure of fees and the use of block fees<sup>1</sup> and/or payment plans in a clinical practice.

### Objectives

- To clarify for members the Professional Misconduct Regulation 852/93 concerning Business Practices.
- To ensure members provide accurate, complete information to patients regarding fees, block fees and/or payment plans.
- To ensure members clearly communicate to patients their right to choose and/or refuse block fees and/or payment plans and their right to opt out of such plans at any time during treatment.

### Description of Guideline

#### Fees:

When creating and implementing fees for service in clinical practice, members must adhere to the following conditions:

- fees must be for a treatment that is clinically necessary;
- fees must be fair and reasonable;
- members must fully disclose to patients their billing practices in advance of any treatment.

#### Fees For Service as Provided

Members charging a fee for the service as provided must meet the conditions as set out above.

#### Block Fees and/or Payment Plans

A member offering a block fee and/or payment plan must ensure that:

- the member has given the patient the option to pay for each service as provided
- the member has disclosed to the patient the specific unit cost per service and the specific unit cost per service established by the block fee and/or payment plan;
- the member must fully inform the patient of his/her right to opt out of a block fee and/or payment plan at any time during treatment, and the patient's right to a refund of any unspent portion of the block fee and/or payment plan, calculated by reference to the number of services provided multiplied by the block fee/payment plan unit cost per service;
- the member does not subject the patient to any undue pressure and/or duress when offering a block fee and/or payment plan;
- any agreement with respect to block fees and/or payment plans is evidenced in a written agreement signed by the member and the patient;
- a re-assessment, as set out in standard of practice S-002: Record Keeping, must:
  - be conducted on or before each 24<sup>th</sup> visit;
  - be sufficiently comprehensive for the member to:
    - evaluate the patient's current condition;
    - assess the effectiveness of the member's chiropractic care;
    - discuss with the patient, the patient's goals and expectations for his/her ongoing care; and
    - affirm or revise the member's plan of management for the patient

### Repayment of Unused Block Fee and/or Payment Plan

- A patient may choose to opt out of a block fee and/or payment plan at any time during treatment, even if an agreement has been previously signed.
- 2 • The member may not subject the patient to any undue pressure and/or duress when the patient chooses to opt out of a block fee and/or payment plan.
- The member must fully refund to the patient any unused portion of the block fee and/or payment plan calculated by multiplying the number of services provided by the established unit cost per service of the block fee/payment plan agreement.

### Example of Calculation of Refund

- Refund = (total amount of block fee) - (block fee/ payment plan unit cost per service \$20 x number of services provided)
- Normal unit cost per service = \$30
- Block fee/ payment plan agreement unit cost per service = \$20

### Legislative Content

#### Regulation R-008: Professional Misconduct

1. The following are acts of professional misconduct for the purposes of clause 51(1)(c) of the Health Professions Procedural Code:

#### The Practice of the Profession and the Care of and Relationship with Patients

1. Contravening a standard of practice of the profession or failing to maintain the standard of practice expected of members of the profession.
11. Breaching an agreement with a patient relating to professional services for the patient or fees for such services

#### Business Practices

23. Submitting an account or charge for services the member knows is false or misleading.
24. Failing to disclose to a patient the fee for a service before the service is provided, including a fee not payable by the patient.
25. Charging a block fee unless,
  - i. the patient is given the option of paying for each service as it is provided,
  - ii a unit cost per service is specified,
  - ii. the member agrees to refund to the patient the unspent portion of the block fee, calculated by reference to the number of services provided multiplied by the unit cost per service.

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26. Failing to itemize an account for professional services,
- i. if requested to do so by the patient or person or agency who is to pay, in whole or in part, for the services, or
  - ii. if the account includes a fee for a product or device or a service other than a treatment.
27. Selling any debt owed to the member for professional services. This does not include the use of credit cards to pay for professional services.

#### **Miscellaneous Matters**

33. Engaging in conduct or performing an act that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable, or unprofessional.

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<sup>1</sup> A block fee is any fee where the patient is charged for multiple services and/or treatments at any time other than when the services and/or treatments are provided.