



## Charging for Uninsured Professional Services

**Standards of Practice** of the Yukon Medical Council (“the Council”) are the minimum standards of professional behavior and ethical conduct expected of all physicians registered in the Yukon. Standards of Practice will be referenced in the management of complaints and in discipline.

- (1) Amounts charged for uninsured professional services<sup>1</sup> including block fees<sup>2</sup> must reasonably reflect physician professional costs, administrative costs and the patient’s ability to pay. When asked, a physician must be able to account for the fee charged for the service.
- (2) A physician must inform a patient or third party of any fee to be charged before the provision of an uninsured professional service.
- (3) A physician’s agent may give preliminary information to a patient about the billing policies in his or her medical practice, but the physician remains responsible for the final decision and explanation to the patient when the patient disputes a fee or requests clarification.
- (4) A general notice to patients in a physician’s office is not sufficient by itself to fulfill the requirements in subsections (2) and (3).
- (5) A physician may not demand payment from an individual patient in advance of urgently required uninsured professional services that are not readily available elsewhere.
- (6) A physician must not charge a fee to the patient in advance for “being available” to render professional services.
- (7) If a physician offers a block fee option the physician **must**:
  - (a) allow the patient the choice of paying the block fee or for each professional service individually as provided;
  - (b) provide the patient with the block fee option in writing; and
  - (c) ensure the patient is given sufficient information to make an informed choice, including:
    - (i) a list of fees that will be charged individually for each professional service if the patient declines the block fee option; and
    - (ii) a copy of this standard.
- (8) If a physician offers a block fee option, the physician **must not**:
  - (a) refuse to provide an insured professional service because a patient has not paid a block fee for uninsured services;
  - (b) include in a block fee any service for which the physician is compensated through any other means, including any charge for a professional service which is included as part of an insured professional service; and
  - (c) promise or provide preferential services to a patient who paid a block fee.

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**Terms used in the Standards of Practice:**

- *Physician* means any person who is registered or who is required to be registered under the Medical Profession Act.
- *Must* refers to a mandatory requirement.
- *May* means that the physician may exercise reasonable discretion.
- *Patient* includes, where applicable, the patient’s legal guardian or substitute decision maker.

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<sup>1</sup>A professional service includes both medical and non-medical services.

<sup>2</sup>For the purpose of this standard a block fee is a fixed fee for all designated uninsured services provided during a specified time period.

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