

Extraordinary Caring. Every Person. Every Time.

Patient Rate Schedule

Effective October 1, 2024

Includes hospital fee only. Physician fees will be billed separately.

Inpatient Services	Non-Resident of Canada (no Canadian Citizenship or Permanent Resident card)	Uninsured Resident (no valid OHIP card)
Acute - Ward Acute - ICU/CCU Nursery	\$ 3,700 per day \$ 4,400 per day \$ 2,300 per day	\$ 1,470 per day \$ 2,200 per day \$ 1,147 per day
Outpatient Services Emergency or Clinic Visit Day Surgery Cat Scan MRI Ambulance (including ER surcharge)	\$ 750 \$ 3,150 \$ 1,700 per test \$ 1,600 per test \$ 450	\$ 386 \$ 1,600 \$ 856 per test \$ 801 per test \$ 240

For Non-residents of Canada, please be advised that US Medicare, Medicaid and HMOs do not cover hospital visits outside of the United States. Payment for hospital charges & physician fees are the patient's responsibility and are due prior to receiving treatment. If you register & then leave before treatment a \$ 50 fee will be billed to you.

All fees are subject to change without prior notice





