



QUESTIONS TO ASK YOUR INSURANCE COMPANY ABOUT ORDERING ORTHOTICS:

In order for our patients to fully understand the process of ordering custom made orthotics and to ensure the out of pocket expenses (if any) are understood before any order is placed, we have listed some questions below that we strongly recommend you have answered before placing your order with us.

Having answers to these questions will allow you to have confidence in your purchase at Peak Health and Wellness and allow you to get the orthotic that will help improve your foot function and health, without any hassles or unexpected fees.

Question	Answer
#1. Do I need a prescription for custom made orthotics to be covered under my benefit plan, and, if so, who can write this prescription?	
#2. Can a chiropractor write the prescription for the orthotics?	
#3. Can a chiropractor distribute/sell the orthotic?	
#4. Can the same person that writes the prescription for the orthotic also distribute/sell the orthotic to me?	
#5. How much coverage do I have for custom made orthotics?	
#6. How often can I order custom made orthotics (once a year, once every 2 years, every 24 months etc.)?	
#7. Must the custom made orthotic be produced in a certain way (for example from a foam cast of my foot)?	
#8. Do I have to wait until the orthotics are dispensed (picked up) before I can send the claim in to be reimbursed?	

Please note that once an orthotic order is placed, the patient will be liable for all costs. The orthotic that we distribute is custom made for your foot and cannot be resold or returned.

Please see over...



200 Carnwith Drive E, Unit 5 Brooklin, Ontario L1M 0A1 905-425-2448

INFORMED CONSENT TO ORTHOTICS

Orthotics allow lower limbs to function in a more natural and efficient manner. Our orthotics are custom designed for each individual based upon the degree of biomechanical control required, activity level, and/or physical status.

Some patients report a little discomfort when first wearing their orthotics. This discomfort can occur in the feet, legs, knees, hips, and/or lower back. Small changes will occur throughout your musculoskeletal structure and it will take time to adjust to these changes. These aches are usually transitory and will disappear in time. However, if at any time you have a question or concern, please contact our office.

I consent to the orthotic care offered or recommended to me and I intend this consent to apply to all my present and future orthotic care.

Dated this _____ day of _____, 20_____

Patient Signature (Legal Guardian): _____

Name: _____
(Please print.)

Witness Signature: _____

Name: _____
(Please print.)