

Out of Province Physiotherapists and Fee Schedule

If you are a physiotherapist providing services to WorkSafeBC Injured Workers outside of British Columbia, please note the following:

- 1) The physiotherapist is responsible for determining the status of an Injured Worker's claim. When booking an Initial appointment with an Injured Worker, please ask them for their claim number. If the Injured Worker does not yet have a claim number, please ask the worker to provide the number as soon as they receive one. You may confirm a WorkSafeBC claim status by calling the WorkSafeBC Call Centre at (604) 231-8888 or 1-888-969-5377.
- 2) A Physician's referral is not required for treatment under Stream 1, but is required for treatment under Stream 2, 3 and 4. Please see the "WorkSafeBC Physiotherapy Agreement" and "Physiotherapy Services Model" on the website to determine which Stream workers should be treated under.
- 3) If treating under Stream 1, please submit a "[Physiotherapy Initial Notification Form](#)" (83W5) within three business days of the Initial Visit. If treating under Stream 2, 3, or 4 please submit a "Physiotherapy Report" within three business days of the Initial Visit. The "Physiotherapy Report" should also be submitted when requested by the Board Officer.
- 4) When invoicing for treatment:
 - Use the "[Invoice for Treatment Services](#)" (267) located on the website
 - List each day of service separately on the invoice (i.e. do not bill a bulk amount for all Services provided, as this will be denied)
 - Bill using the "Out of Province" Fee Code, 1114881 for all Services provided
- 5) Reports and invoices are to be faxed to (604) 276-3195 or 1-888-922-3299.
- 6) A copy of the WorkSafeBC Fee Schedule is located on the second page of this document.
- 7) Further details can be found under "Physiotherapy Reference Manual" and the "FAQ Physiotherapy Agreement" located on the website.



WORKING TO MAKE A DIFFERENCE

Health Care Services

Mailing Address

PO Box 5350 Stn Terminal
Vancouver BC V6B 5L5

Location

6951 Westminster Highway
Richmond BC

www.worksafebc.com

Telephone 604 232-7787

Toll-free within BC 1 888 967-5377

Fax 604 231-8424

Standard Treatment – Stream 1	Fee Item Code	WorkSafeBC Business Rules	July 1, 2011 to June 30, 2013
Initial Visit with PT Initial Notification Form received <u>within</u> three (3) business days	1114881	Limit ONE (1) Initial Notification Form per payee per claim. Will be reimbursed only for accepted claims. Billable if ‘Initial Notification Form’ received within THREE (3) business days of Initial Visit. Form Required.	\$62.75
Initial Visit with PT Initial Notification Form received <u>after</u> three (3) business days	1114881	Limit ONE (1) Initial Notification Form per payee per claim. Will be reimbursed only for accepted claims. Billable if ‘Initial Notification Form’ received after THREE (3) business days of Initial Visit. Form Required.	\$56.75
Standard Treatment - <i>Subsequent Visit</i>	1114881	Limit ONE (1) Subsequent Visit per payee per day per accepted claim. Service date must be later than that of Initial Visit. No concurrent treatments are allowed unless approved by a Board Officer.	\$41.98
Standard Treatment Report	1114881	Limit ONE (1) Report per payee per accepted claim. Received at least five (5) business days prior to the treatment end date if the Worker is not expected to return to pre-injury hours and duties. When using in conjunction with a transfer from Stream 1 to Stream 2 the timeliness of report must be received within FIVE (5) business days of the transfer.	\$37.62
Late Standard Treatment Report	1114881	Limit ONE (1) Report per payee per accepted claim. Received less than five (5) business days prior to the treatment end date if the Worker is not expected to return to pre-injury hours and duties. When using in conjunction with a transfer from Stream 1 to Stream 2 the timeliness of report must be received within FIVE (5) business days of the transfer.	\$32.42



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Exceptions to Standard Treatment – Stream 2	Fee Item Code	WorkSafeBC Business Rules	July 1, 2011 to June 30, 2013
Exceptions to Standard Treatment - <i>Initial Visit</i>	1114881	Limit ONE (1) Initial Visit per payee per accepted claim. Will be reimbursed only for accepted claims. Not billable for Injured Workers that have been transferred from Stream 1.	\$51.75
Exceptions to Standard Treatment - <i>Subsequent Visit</i>	1114881	Limit ONE (1) Subsequent Visit per payee per day per accepted claim. Service date must be later than that of Initial Visit. No concurrent treatments are allowed unless approved by a Board Officer.	\$41.98
Exceptions to Standard Treatment Physiotherapy Report	1114881	Limit ONE (1) Report per payee per accepted claim. If using in conjunction with the Initial Visit, the timeliness of report must be received within THREE (3) business days of Initial. 'Exceptions to Standard Treatment' Visit. Report required for Stream 2 Initial Visit only.	\$37.62
Exceptions to Standard Treatment Late Physiotherapy Report	1114881	Limit ONE (1) Report per payee per accepted claim. Billable if using in conjunction with the Initial Visit and the timeliness of the report is received later than THREE (3) business days of Initial 'Exceptions to Standard Treatment' Visit. Report required for Stream 2 Initial Visit only.	\$32.42



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Home Visits – Stream 3	Fee Item Code	WorkSafeBC Business Rules	July 1, 2011 to June 30, 2013
Home Visit – <i>Initial Visit</i>	1114881	Limit of ONE (1) Initial Home Visit per payee per accepted claim. Will be reimbursed only for accepted claims. ONE (1) Service-Unit equals FIFTEEN (15) minutes of treatment. Maximum of EIGHT (8) Service - Units per visit.	\$27.15 per Service-Unit
Home Visit – <i>Subsequent Visit</i>	1114881	Limit of ONE (1) Subsequent Home Visit per payee per accepted claim per day. Service date must be later than that of the Initial Home Visit. ONE (1) Service-Unit equals FIFTEEN (15) minutes of treatment. Maximum of EIGHT (8) Service - Units per visit.	\$27.15 per Service-Unit
Physiotherapy Report for Home Visit	1114881	Limit ONE (1) Home Visit Report per payee per accepted claim. Report must be received within THREE (3) business days of the Initial Home Visit. Limit of ONE (1) item per payee per claim. Report required.	\$37.62
Late Physiotherapy Report for Home Visit	1114881	Limit ONE (1) Home Visit Report per payee per accepted claim. Limit ONE (1) item per payee per claim. Billable if report received after THREE (3) business days of the Initial Home Visit. Report required.	\$32.42
Travel for Home Visit	1114881	ONE (1) Service-Unit equals up to SIXTY (60) kms of travel. ONE (1) Service-Unit does not require pre-approval. More than ONE (1) Service-Unit must be pre-approved.	\$27.15 per Service-Unit



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CNS Disorder Treatments – Stream 4	Fee Item Code	WorkSafeBC Business Rules	July 1, 2011 to June 30, 2013
Central Nervous System (CNS) Disorders Visit – <i>Initial Visit</i>	1114881	Limit of ONE (1) CNS Disorders Initial Visit per payee per accepted claim. Will be reimbursed only for accepted claims. ONE (1) Service-Unit equals FIFTEEN (15) minutes of treatment. Maximum of EIGHT (8) Service-Units per visit.	\$27.15 per Service-Unit
Central Nervous System (CNS) Disorders Visit – <i>Subsequent Visit</i>	1114881	Limit of ONE (1) CNS Disorders Subsequent Visit per payee per accepted claim per day. ONE (1) Service-Unit equals FIFTEEN (15) minutes of treatment. Maximum of EIGHT (8) Service-Units per visit.	\$27.15per Service-Unit
Physiotherapy Report for CNS Disorders	1114881	Limit ONE (1) CNS Disorders Visit Report per payee per accepted claim. Report date must be received within THREE (3) business days of the Initial CNS Disorders Visit. Report required.	\$37.62
Late Physiotherapy Report for CNS Disorders	1114881	Limit ONE (1) CNS Disorders Visit Report per payee per accepted claim. Billable if report received after THREE (3) business days of the Initial CNS Disorder Visit. Report required.	\$32.42



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Hydrotherapy	Fee Item Code	WorkSafeBC Business Rules	July 1, 2011 to June 30, 2013
Hydrotherapy Session- <i>Small Group</i>	1114881	Up to three (3) patients maximum. ONE (1) Service-Unit equals FIFTEEN (15) minutes of treatment. Limit FOUR (4) Service-Units per payee per accepted claim per day. Hydrotherapy cannot be invoiced with any other treatment service. One (1) Hydrotherapy Session equals one (1) Subsequent Visit and is counted toward the maximum Subsequent Visit count. Service date must be later than that of Initial Visit. No concurrent treatments are allowed unless approved by a Board Officer. Includes the cost of pool admission and all other associated costs. Service Unit of fifteen (15) minutes. Not billable for Home Visits.	\$27.15 per Service-Unit
Hydrotherapy Session- <i>Large Group</i>	1114881	Between four (4) and fifteen (15) patients. Limit ONE (1) Hydrotherapy Session per payee per accepted claim per day. Hydrotherapy cannot be invoiced with any other treatment service. One (1) Hydrotherapy Session equals one (1) Subsequent Visit and is counted toward the maximum Subsequent Visit count. Service date must be later than that of Initial Visit. No concurrent treatments are allowed unless approved by a Board Officer. Includes the cost of pool admission and all other associated costs. Not billable for Home Visits.	\$35.91 per Session



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Other Reports	Fee Item Code	WorkSafeBC Business Rules	July 1, 2011 to June 30, 2013
Requested Report	1114881	Requested by a Board Officer. Must be received by WorkSafeBC within THREE (3) business days from the date of request. For invoicing purposes the date of request is considered day ZERO (0). Only billable if the report that is requested is NOT a report that is part of the normal process for any Stream (1-4) or Transfer Request and is being requested because it was never received by WorkSafeBC or the report received by WorkSafeBC is illegible.	\$37.62
Late Requested Report	1114881	Requested by a Board Officer. Billable if the report is received by WorkSafeBC later than THREE (3) business days from the date of request. Only billable if the report that is requested is NOT a report that is part of the normal process for any Stream (1-4) or Transfer Request and is being requested because it was never received by WorkSafeBC or the report received by WorkSafeBC is illegible.	\$32.42
Medical Review Report	1114881	Requested by a Board Officer Comprehensive report, which includes but is not limited to the Injured Worker's history including: symptoms, treatment, results and present condition. The report may be requested to answer a specific question. Must be received by WorkSafeBC within THREE (3) business days from the date of request. For invoicing purposes the date of request is considered day ZERO (0).	\$374.54



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Other Fee Codes	Fee Item Code	WorkSafeBC Business Rules	July 1, 2011 to June 30, 2013
Telephone Consultation with Board Officer	1114881	Initiated by a Board Officer. To discuss treatment services, return to work and discharge planning only. Or: Telephone consultation that is initiated by the Physical Therapist and is contractually required to contact a Board Officer. Telephone consultations are billable for conversation time or a detailed message regarding RTW and other related treatment matters only and must be documented in clinical notes; Billable for consultations up to FIFTEEN (15) minutes per increment. Not billable for routine/billing/administrative issues.	\$27.59 per 15 min. increment
Telephone Consultation for Return to Work and Other Related Issues	1114881	For telephone communication with a Health Care Provider Limited to 'Return to Work Support Services' and 'Occupational Therapy Services'. To discuss return to work and/or other related issues. Telephone consultations are billable for conversation time or a detailed message regarding RTW and other related treatment matters only and must be documented in clinical notes; Telephone consultations are billable for conversation time only; Billable for consultations up to FIFTEEN (15) minutes per increment. Not billable for routine/billing/administrative issues.	\$27.59 per 15 min. increment
Photocopies (first 5 pages)	1114881	Requested by WorkSafeBC.	\$27.15
Photocopies (every page over 5 pages)	1114881	Requested by WorkSafeBC.	\$1.27 per page
Non-Electronic Invoicing Fee	1114881	Processing fees charged for each fee line item invoiced by paper and fax transmission.	\$4.50



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Other Fee Codes	Fee Item Code	WorkSafeBC Business Rules	July 1, 2011 to June 30, 2013
Pending Claim Report Fee	1114881	<p>Limit ONE item per payee per claim. Claim decision date must be later than Initial Visit date. Will be reimbursed for claims which are pending on the date of the Initial Visit and are subsequently <u>not</u> accepted. PT Initial Notification Form or Physiotherapy Report must be received.</p> <p><u>Note:</u></p> <ul style="list-style-type: none"> • This fee code is used to re-submit an invoice if the Initial Visit fee has been rejected and the claim was pending at the time of the Initial Visit for all streams. • This fee code may also be used if invoices have not been submitted and the pending claim has been disallowed, suspended or rejected. • Do not use this fee code for pending claims where the decision is under review by the Board Officer. 	\$59.41