

## **SCHEDULE B**

### **FEES**

#### **TERMS AND CONDITIONS**

1. The fees set out in the table below (except fee code 19370, 19371, 19372, 19171, 19172) will increase by the prior calendar year's percentage change in the Canada-wide annual average consumer price index to a maximum of 4% on May 1 of each year.
2. WorkSafeBC may, without obligation, increase any fee set out in this Schedule B at its discretion on 30 days' written notice to the Contractor which includes a revised Schedule B incorporating such increase.
3. The Contractor will be entitled to invoice for and receive payment for Services provided in accordance with this Agreement if at the time Services are commenced the Injured Worker's claim has been accepted and the WorkSafeBC officer has approved Concussion and Vestibular Physiotherapy Services.
4. If the Contractor provides Services to an Injured Worker before the Injured Worker has an accepted claim or before the Injured Worker has initiated a claim, the Injured Worker is responsible to pay the Contractor for the Services. If the Injured Worker's claim is subsequently accepted by WorkSafeBC, and Services are approved by the WorkSafeBC Officer:
  - (a) within 90 days of the Injured Worker's Initial Visit for the purposes of assessment, the Contractor will refund all amounts paid for Services, whether directly to the Injured Worker for those amounts paid by the Injured Worker and/or to the Injured Worker's third party insurance provider where the Contractor directly invoiced and was paid by such third party insurance provider, and then invoice WorkSafeBC for all applicable amounts under this Schedule B for the Services that have been performed in accordance with this Agreement; or
  - (b) more than 90 days of the Injured Worker's Initial Visit for the purposes of assessment, WorkSafeBC will reimburse the Injured Worker directly for amounts paid by the Injured Worker for Services.
5. The Contractor shall not invoice for, and WorkSafeBC shall not be liable for, any additional fees or other compensation where the Contractor provides Services on non-Business Days or otherwise outside of regular business hours.
6. The Contractor shall not invoice WorkSafeBC or the Injured Worker for, and WorkSafeBC shall not be liable for:
  - (a) the cost of any supplies or equipment that the Contractor may use or provide to the Injured Worker in the course of delivering the Services (including without limitation electrical modalities, manual therapy, and any non-durable medical supplies; i.e. theraband, or athletic tape); and
  - (b) the cost of missed or cancelled appointments.

7. Subject to receipt of an invoice that complies with this Agreement, WorkSafeBC will reimburse the Contractor only for expenses that are expressly authorized herein, actually incurred and without markup as set out in this Schedule B.
8. If any reports are incomplete or otherwise do not meet the requirements set out in Schedule A, the Contractor will properly complete the report and resubmit it to WorkSafeBC without any additional payment. The Contractor will not be entitled to receive any payment until the report has been completed properly and received by WorkSafeBC.

REFERENCE ONLY

## FEE CODES AND RULES

Fee Code	Description	Rules Applicable to Eligibility to Invoice Fee Code and Fee Code Included Items	Amount
19365	CVPT Initial Visit and Assessment Report	<ul style="list-style-type: none"> <li>• Fee includes all Services required to complete and submit the Assessment Report.</li> <li>• Billable once per claim.</li> <li>• Eligible to be invoiced only when all services included in the Concussion and Vestibular Initial Assessment have been performed and the Assessment Report is received by WorkSafeBC.</li> <li>• Invoice DOS on the Assessment Report must be the date of the Initial Visit.</li> <li>• Not eligible to be invoiced with the Extension Request Report, Discharge Report, or Treatment Visit.</li> <li>• Services must be in-person</li> </ul>	\$220
19367	CVPT Treatment Visit	<ul style="list-style-type: none"> <li>• Eligible to be invoiced when an Injured Worker attends for an in-person treatment visit in the Treatment Period or an Extension.</li> <li>• DOS on invoice must match Injured Worker visit date.</li> <li>• Not eligible to be invoiced with CVPT Initial Visit and Assessment Report.</li> </ul>	\$96
19370	CVPT Extension Request Report	<ul style="list-style-type: none"> <li>• Fee includes all Services required to complete and submit the Extension Request Report.</li> <li>• Eligible to be invoiced when the Extension Request Report is received by WorkSafeBC.</li> <li>• DOS on the invoice must match the DOS (date of report) on the Extension Request Report.</li> <li>• Not eligible to be invoiced with the CVPT Initial Assessment and Report.</li> </ul>	\$60
19371	CVPT Discharge Report	<ul style="list-style-type: none"> <li>• Fee includes all Services required to complete and submit the Discharge Report.</li> <li>• Eligible to be invoiced when the Discharge Report is received by WorkSafeBC.</li> <li>• DOS on the invoice must match the DOS (last Injured Worker visit) on the Discharge Report.</li> <li>• Cannot be invoiced with the CVPT Initial Assessment.</li> </ul>	\$50

<b>Other Fee Codes</b>			
19372	CVPT Telephone Consultation for Return to Work and Other Related Issues	<ul style="list-style-type: none"> <li>• Fee may be invoiced for telephone communication with a health care provider, WorkSafeBC Officer, or with an employer if the telephone conversation with the employer occurs outside of an Initial Assessment where: <ul style="list-style-type: none"> <li>○ the telephone communication is for the purpose of discussing treatment, return to work, discharge planning and/or other related issues;</li> <li>○ the discussion is documented in clinical records; and</li> <li>○ actual contact is made or a detailed message is left.</li> </ul> </li> <li>• Fee cannot be invoiced for telephone calls for routine matters, invoicing/payment, administrative, contract or performance issues.</li> </ul>	\$30.00 per 15 min. increment
19171	Photocopies (first 20 pages)	<ul style="list-style-type: none"> <li>• Fee may be invoiced for the first 20 pages of WorkSafeBC requested copy of chart notes, provided that the copies are received within two Business Days of request and are legible.</li> <li>• DOS on the invoice must be the date the chart notes are requested.</li> <li>• The Contractor must ensure chart notes use the minimum number of pages and a font size reasonable for the content.</li> <li>• Submissions with excessive sections of blank space may have the total number of payable pages reduced by WorkSafeBC in its sole discretion.</li> </ul>	\$42.00
19172	Photocopies (every page over 20 pages)	<ul style="list-style-type: none"> <li>• Fee may be invoiced for each page after the first 20 pages of WorkSafeBC requested copy of chart notes, provided that the copies are received within two Business Days of request and are legible.</li> <li>• The Contractor must ensure chart notes use the minimum number of pages and a font size reasonable for the content.</li> <li>• Submissions with excessive sections of blank space may have the total number of payable pages reduced by WorkSafeBC in its sole discretion.</li> </ul>	\$1.26 per page