

**Doctors of BC/WorkSafeBC Unique Fee Schedule**  
 (Agreement rates effective April 1, 2022 - March 31, 2025)  
 Updated February 2024

Fee Code	FEE ITEM	Effective April 1, 2022 (\$)	Effective April 1, 2023 unless otherwise stated (\$)	Effective April 1, 2024 (\$)
<b>FIRST REPORT OF INJURY (FORM 8)</b>				
19937	WorkSafeBC Teleplan E-Form 8 Received within 1 Business Day	67.40	72.42	74.97
	WorkSafeBC Teleplan E-Form 8 Received within 2 Business Days	N/A	67.89	70.28
	WorkSafeBC Teleplan E-Form 8 Received within 3 Business Days	59.01	63.41	65.64
	WorkSafeBC Teleplan E-Form Received within 4-6 Business Days	41.65	44.75	46.33
19900	WorkSafeBC First Report Of Injury (Form 8) Received Within 3 Business Days - Fax	38.95	41.85	43.33
	WorkSafeBC First Report Of Injury (Form 8) Received Within 4-6 Business Days - Fax	25.97	27.90	28.89
19927	WorkSafeBC First Report Of Injury (Form 8) Requested, Received within 10 Business Days	59.01	63.41	65.64
<b>PROGRESS REPORT (FORM 11)</b>				
19940	WorkSafeBC Teleplan E-Form 11 Received Within 3 Business Days	48.13	51.71	53.54
	WorkSafeBC Teleplan E-Form 11 Received Within 4-6 Business Days	21.85	23.48	24.30
19902	WorkSafeBC Progress Report (Form 11) Received Within 3 Business Days - Fax	35.06	37.67	39.00
	WorkSafeBC Progress Report (Form 11) Received Within 4-6 Business Days - Fax	17.52	18.83	19.49
19559	WorkSafeBC Progress Report (Form 11) Requested, Received within 10 Business Days	48.13	51.71	53.54
<b>CLINICAL RECORDS</b>				
19904	WorkSafeBC Request for a copy of consultation, operative, or other existing report, Received Within 3 Business Days	47.40	50.93	52.73
19953	WorkSafeBC Requested Copy of an Existing Report or Chart Note (Isolating Information)	142.23	152.83	158.22
<b>COMMUNICATION</b>				
19930	Telephone or Office Consultation (in 15-min increments up to 45 mins daily maximum; i.e. 3 units)	84.15	90.42	93.61
<b>RETURN TO WORK PLANNING</b>				
19942	WorkSafeBC Job Site Meeting	349.65	375.70	388.94
19950	WorkSafeBC Return To Work Consultation	335.62	360.62	373.33
19976	WorkSafeBC Return To Work Planning Request	48.98	52.63	54.48
19931	WorkSafeBC Post-Operative Consult + Form 11 Received Within 5 Business Days	99.60	107.03	110.80
19558	Activities and Limitation Form	153.60	165.04	170.86
<b>EMERGENCY VISITS AND TRAY SERVICE</b>				
00129	WorkSafeBC Emergency Call Out	79.64	85.57	88.59
19922	WorkSafeBC Tray Service - Actual Costs	Actual cost	Actual cost	Actual cost
<b>COMPREHENSIVE ASSESSMENTS</b>				
19909*	WorkSafeBC Standardized Assessment Form Received Within 15 Business Days	88.88	95.50	N/A
19910*	WorkSafeBC Standardized Assessment Form Received After 15 Business Days	82.96	89.15	N/A
19978**	Pre-operative or Standardized Assessment Form Received Within 15 Business Days	N/A	238.76	247.18
	Pre-operative or Standardized Assessment Form Received After 15 Business Days	N/A	222.86	230.72
19977**	Opioid Extension Form - received within 15 business days	N/A	95.50	98.87
	Opioid Extension Form - received after 15 business days	N/A	89.15	92.29
19929	WorkSafeBC Excessively Prolonged Or Complex Case-Report	190.69	204.90	212.12
19907	WorkSafeBC Factual Written Summary or a Reasoned Medical Opinion	302.24	324.76	336.21
19932	WorkSafeBC Medical-Legal Report - Factual Summary	1,197.03	1,286.20	1,331.54
19933	WorkSafeBC Medical-Legal Opinion - Expert Opinion	2,002.90	2,152.12	2,227.98
<b>COMPLEX SPINAL CORD INJURY</b>				
19509	Complex Spinal Cord Injury Initial Visit or Yearly Assessment. Includes a Complete Physical Exam, Updated Care Plan documented on a Form 8/11. Paid annually to Noted Regular Physician. Form 8/11 will be paid in addition	174.30	187.28	193.88
19510	Complex Spinal Cord Injury Office Visit, Cannot bill in addition to a Yearly Assessment Fee (19509) for one visit. Form 8/11 may be reimbursed if condition changes	116.20	124.86	129.26
19511	Complex Spinal Cord Injury Home Visit. The Physician must also complete and bill for a Form 8/11. This Fee cannot be billed with office visit (19510)	232.40	249.71	258.51
<b>EXPEDITED COMPREHENSIVE CONSULTATION</b>				
19911	WorkSafeBC Initial Expedited Comprehensive Consultation	415.34	446.29	462.02
19912	WorkSafeBC Repeat Expedited Comprehensive Consultation after 19911	202.15	217.21	224.86
19934	WorkSafeBC Initial Expedited Consult - Anaesthesiologist	403.06	433.08	448.35
19935	WorkSafeBC Repeat Consult - Anaesthesiologist	196.00	210.61	218.03
19936	Cancellation Fee - Fee To Be Billed If An Expedited Consultation Is Cancelled By Patient - Less than 24 hours' notice	86.06	92.47	95.73
19945	Initial Expedited Comprehensive Consultation from a Physician With Areas of Expertise. Only referred by WorkSafeBC.	324.35	348.52	360.80
19946	Repeat Expedited Comprehensive Consultation from a Physician With Areas of Expertise.	157.90	169.66	175.65
<b>NON EXPEDITED CONSULTATION</b>				
19908	WorkSafeBC Non-Expedited Specialist Consultation Report	47.75	51.31	53.11
<b>EXPEDITED SURGERY OUT OF OFFICE HOURS SURCHARGES BILLABLE BY SURGEONS</b>				
19320	Expedited Surgery, Out of Office Hours Surcharge, Operative Evening (18:00 to 23:00 hours) - applied to MSP surgical fee code(s)	The greater of \$69.65 or 17.50% of the paid MSP surgery procedure fees	The greater of \$74.84 or 17.50% of the paid MSP surgery procedure rate	The greater of \$77.48 or 17.50% of the paid MSP surgery procedure rate

19321	Expedited Surgery, Out of Office Hours Surcharge, Operative Night (23:00 to 08:00) - applied to MSP surgical fee code(s)	The greater of \$112.53 or 28.00% of the paid MSP surgery procedure fees	The greater of \$120.91 or 28.00% of the paid MSP surgery procedure fees	The greater of \$125.17 or 28.00% of the paid MSP surgery procedure fees
19322	Expedited Surgery, Out of Office Hours Surcharge, Operative Sat/Sun/Holidays - applied to MSP surgical fee code(s)	The greater of \$69.65 or 17.50% of the paid MSP surgery procedure fees	The greater of \$74.84 or 17.50% of the paid MSP surgery procedure fees	The greater of \$77.48 or 17.50% of the paid MSP surgery procedure fees
<b>EXPEDITED SURGICAL ASSIST</b>				
19545	Expedited Surgical Assist - Level 1 (Surgery Time Up To 1.5 Hours)	263.77	283.42	293.41
19546	Expedited Surgical Assist - Level 2 (Surgery Time 1.51 To 2.0 Hours)	381.14	409.54	423.97
19547	Expedited Surgical Assist - Level 3 (Surgery Time 2.01 To 2.5 Hours)	522.89	561.84	581.64
19548	Expedited Surgical Assist - Level 4 (Surgery Time 2.51 To 3.0 Hours)	639.10	686.71	710.92
19549	Expedited Surgical Assist - Level 5 (Surgery Time 3.01 To 3.5 Hours)	761.11	817.81	846.64
19551	Expedited Surgical Assist - Level 6 (Surgery Time 3.51 To 5.99 Hours)	1,121.32	1,204.86	1,247.33
19552	Expedited Surgical Assist - Level 7 (Surgery Time 6.00 Hours Plus)	1,719.76	1,847.88	1,913.02
19410	Expedited Surgical Assist, Out of Office Hours Surcharge, Operative Evening (18:00 to 23:00 hours) - applied to Expedited Assist Level	32.77%	32.77%	32.77%
19411	Expedited Surgical Assist, Out of Office Hours Surcharge, Operative Night (23:00 to 08:00) - applied to Expedited Assist Level	52.54%	52.54%	52.54%
19412	Expedited Surgical Assist, Out of Office Hours Surcharge, Operative Sat/Sun/Holidays - applied to Expedited Assist Level	32.77%	32.77%	32.77%
<b>EXPEDITED SPINE SURGERY</b>				
19516	Expedited Sessional Extensive Spine Surgery	4,429.20	4,759.17	4,926.94
19517	Expedited Sessional Extensive Spine Surgical Assist	1,727.38	1,856.06	1,921.49
19518	Expedited Sessional Extensive Spine Anaesthesiology	2,693.57	2,894.24	2,996.26
<b>EXPEDITED ANESTHESIOLOGY</b>				
19507	Expedited Anaesthesiology, Time Based (15 Min) Blocks of time	87.56	94.09	97.40
19405	Expedited Anaesthesiology, Out of Office Hours Surcharge, Operative Evening (18:00 to 23:00 hours) -- applied to 19507	32.77%	32.77%	32.77%
19406	Expedited Anaesthesiology, Out of Office Hours Surcharge, Operative Night (23:00 to 08:00 hours) -- applied to 19507	52.54%	52.54%	52.54%
19407	Expedited Anaesthesiology, Out of Office Hours Surcharge, Operative Sat/Sun/Holidays -- applied to 19507	32.77%	32.77%	32.77%
<b>VISITING SPECIALISTS CLINIC</b>				
1150464	Expedited Initial Consultation Service Fees / Sessional Rate (VSC Only)	2,431.99	2,613.17	2,705.29
1150465	Expedited Follow-up Consultation Service Fees / Sessional Rate (VSC Only)	2,431.99	2,613.17	2,705.29
<b>INJECTION</b>				
19556	Image-guided diagnostic and therapeutic injection.	257.70	276.90	286.66
19557	Use of physician's own imaging equipment for image-guided diagnostic and therapeutic injection	150.91	162.15	167.87

Legend:

\*Fee Code expire on February 29, 2024

\*\*New Fee Code Effective March 1, 2024