SCHEDULE B

FEES

Fee Code	Description	Rules Applicable to Eligibility to Invoice Fee Code and Fee Code Included Items	Amount
1280000	Service Visit & Foot Care Services Initial Assessment Report	 Flat Fee. Fee includes all expenses related to the provision of Foot Care Services, regardless of the time spent, including vehicle expenses (travel time, mileage, etc.), tools, supplies, and equipment used for sterilization, etc. 	\$85 per visit
		• Fee includes the in-person Service Visit with the Injured Worker and the time required to complete and submit the Foot Care Services Initial Assessment Report form 83D605, and is eligible to be paid when this form is received by WorkSafeBC along with the invoice.	
1280001	Service Visit & Foot Care Services Progress Assessment Report	 Flat Fee. Fee includes all expenses related to the provision of Foot Care Services, regardless of the time spent, including vehicle expenses (travel time, mileage, etc.), tools, supplies, and equipment used for sterilization, etc. 	\$85 per visit
		 Fee includes the in-person Service Visit with the Injured Worker and the time required to complete and submit the Foot Care Services Progress Assessment Report form 83D606, and is eligible to be paid when this form is received by WorkSafeBC along with the invoice. 	

1280002	Service Visit & Foot Care Services Discharge Assessment Report	 Flat Fee. Fee includes all expenses related to the provision of Foot Care Services, regardless of the time spent, including vehicle expenses (travel time, mileage, etc.), tools, supplies, and equipment used for sterilization, etc. Fee includes the in-person Service Visit with the Injured Worker and the time required to complete and submit the Foot Care Services Discharge Assessment Report form 83D607, and is eligible to be paid when this form is received by WorkSafeBC along with the invoice. 	\$85 per visit
1280003	Indirect Time	 Fee may be invoiced for communication with a health care provider or WorkSafeBC Officer where: (a) The communication is for the purpose of discussing treatment and/or other related clinical service matters related to the injured workers compensable foot condition; (b) The discussion is documented in clinical records; and (c) Actual contact is made, or a detailed phone message is left, or a detailed email is sent. Billable on a per minute basis to the nearest five minute increment up to a maximum of four hours every three months per claim. 	\$1.00 per minute