

Service Fee and Fee Codes For Saskatchewan Workers' Compensation Board Primary Chiropractic Service Providers

An intervention is an appropriate WCB coded service provided to the injured worker by the treating practitioner during the acute, sub-acute or chronic phase of the injury. This intervention or service can include the following:

- Initial visit.
- Subsequent visit (biomechanical treatment, movement patterns, myofascial therapy, electrotherapy, advice and reassurance).
- Initial conditioning assessment.
- Individual conditioning instruction.
- Group supervised exercise therapy.
- Functional conditioning.

Interventions are limited to the phases of soft tissue healing (acute, sub-acute and chronic).

Following are the fees payable by the WCB. These fees are payable where the negative response process utilizing the initial report (CHI) and progress/discharge report (CHP) has been followed as per Schedule A.

Where a flat rate fee is indicated, the fee is intended to represent the average time required to treat a WCB customer. Where a prorated fee is indicated, the provider will bill to the next higher quarter (1/4) hour. To prepare for electronic invoicing, chiropractors are asked to bill these prorated fees using "units of care" rather than number of treatments or visits. A unit of care = the unit by which the fee is listed below (e.g., a 15 minute fee code (1/4 hour) = 0.25 unit -- Fee Code 407; \$74.26/hr/0.25 = \$18.57).

The WCB retains the right to audit the records and invoices of care providers who have provided services to a WCB customer.

Service	Fee Code	June 1, 2016	January 1, 2017	June 1, 2017	June 1, 2018
Initial Visit	400	\$64.89	\$64.89	\$66.16	\$67.45
Subsequent Visit	401	\$38.99	\$38.99	\$39.75	\$40.53
Emergency Visit	402	\$66.05	\$66.05	\$67.34	\$68.65
Initial Report with Function Outcome Information (PPI)****	403	\$62.95	\$76.22	\$77.70	\$79.22
Initial Report without Functional Outcome Information****	422	\$51.81	\$65.07	\$66.34	\$67.64



Service	Fee Code	June 1, 2016	January 1, 2017	June 1, 2017	June 1, 2018
Progress/Discharge Report with Functional Outcome Information (PPP)****	404	\$39.10	\$52.36	\$53.38	\$54.42
Progress/Discharge Report without Functional Outcome Information (PPP)****	423	\$28.85	\$42.12	\$42.94	\$43.77
Telephone Fee	405	\$22.29/10 min	\$22.29/10 min	\$22.72/10min	\$23.16/10min
Research Fee	406	\$33.19/10 min	\$33.19/10 min	\$33.84/10min	\$34.50/10min
Return to Work Plan Development and Monitoring **	407	\$77.98/hr	\$77.98/hr	\$79.50/hr	\$81.05/hr
Functional Conditioning **	408	\$77.98/hr	\$77.98/hr	\$79.50/hr	\$81.05/hr
Initial Conditioning Assessment	409	\$100.26	\$100.26	\$102.21	\$104.21
Individual Conditioning Instruction ***	410	\$33.42	\$33.42	\$34.07	\$34.74
Group Supervised Exercise Therapy	411	\$16.71/day	\$16.71/day	\$17.04/day	\$17.37/day
Conference	412	\$83.56/hr	\$83.56/hr	\$85.19/hr	86.85/hr
Job Site Evaluation	413	\$83.56/hr	\$83.56/hr	\$85.19/hr	86.85/hr
Education	414	\$83.56/hr/# in group	\$83.56/hr/# in group	\$85.19/hr/# in group	86.85/hr/# in group
Functional Ability Evaluation	415	\$77.98/hr	\$77.98/hr	\$79.50/hr	81.05/hr
Appliances and Supplies	31	Cost plus 5%	Cost plus 5%	Cost plus 5%	Cost plus 5%
Orthotics	31	As approved by CM	As approved by CM	As approved by CM	As approved by CM
Practitioner RTW Form	424	\$19.50	\$19.50	\$19.88	\$20.27
On-Line Submission of any WCB Reports	430	\$13.26	n/a	n/a	n/a
Response to WCB Request for PFI Rating Info	427	\$200.53	\$200.53	\$204.44	\$208.42



Service	Fee Code	June 1, 2016	January 1, 2017	June 1, 2017	June 1, 2018
WCB RHCS4 form	425	\$35.09	\$35.09	\$35.78	\$36.47
WCB RHCS4 form: Returned within 5 days of WCB request date	426	\$27.84	\$27.84	\$28.39	\$28.94

Note:

* Includes initial assessment plus first treatment.

** Partial units of time should be rounded up to the next ¼ hour.

*** 1.25 units of care per week may be invoiced as Individual instruction; time spent with the injured worker after that time is billed using fee code 411 though the worker may be the sole attendee.

****Commencing January 1, 2017, only one line reports will be accepted by the WCB

- X-rays will be billable using MSB (Medical Services Branch) fee codes and fees.
- Only 1 Chiropractic subsequent visit service per day will be funded by WCB.
- Subsequent visits are inclusive of modalities.

Contact numbers:

- Medical Accounts Inquiry Line at 306.337.4094 for all billing inquiries.
- Manager of Health Care Services, at 306.787.7760 for inquiries concerning fees and/or service agreements.