

## Telehealth temporary service fees and fee codes

The following fee codes and fees apply to healthcare services provided via telehealth due to the risks of the COVID-19 pandemic to in-person care.

The reporting guidelines will remain as established in current practice standards as after every 10 visits. All initial assessment reports, progress reports and visit notes must clearly identify when care has been provided via telehealth methods. The frequency and time unit per code will remain as established in the current Practice Standards of Care for [Physical Therapy](#) and [Exercise Therapy](#). Additional telehealth guidelines are outlined in [Appendix A](#).

Service	Fee code	Description	Effective July 1, 2020
Telehealth initial assessment	2000T		\$82.00
Telehealth individual regional/global conditioning	2008T	Per 20 minutes.	\$47.64
Telehealth education	2011T		\$47.64
Telehealth return to work planning and monitoring	2002T		\$49.95
Telehealth telephone consultation	2015T	Per 10 minutes.	\$22.63
Telehealth initial assessment report code	2017T	Payable for online submissions only.	\$61.38

## APPENDIX A

### Telehealth fee guidelines – Physical therapy

Physical therapists utilizing telehealth services for the treatment of injured workers are expected to be compliant with Saskatchewan College of Physical Therapy (SCPT) Practice Guideline 24 – telerehabilitation.

Physical therapists must continue to meet all of the same legal, ethical and professional obligations that apply to in-person services. The practitioner must abide by the accreditation standards and Service Provider Guidelines for physical therapists providing services to Saskatchewan Workers Compensation Board Injured Workers.

#### **Telerehabilitation initial assessment**

Physical therapists are expected to be compliant with The SCPT Practice Guideline # 1 – Assessment and Analysis.

Telehealth initial assessment should include the following:

- An assessment and analysis to determine the nature and extent of a client's dysfunction in order to determine the need for physical therapy service and/or referral to another health care provider.
- Documentation of the client's history and relevant subjective information, the physical therapist's objective findings, clinical diagnosis, treatment plan, procedures and explanation to the client.
- The physical therapist shall incorporate relevant information into the client's record relating to the client's health status, health history and previous health management having made a reasonable effort to obtain the information.
- Collects relevant data by interviewing the client and performing a clinical examination as determined by the nature of the presenting disease, impairment and/or disability and limitations of telehealth.
- Where available and appropriate, uses standardized measures.

#### **Telehealth individual regional reassessment and conditioning**

During the individual regional/global conditioning appointment, the worker should receive:

- Individual regional/global conditioning as indicated for injury specific strength and movement deficits relative to the work injury. The indication for this code is to develop and review home exercise programs.
- Reassessment relative to their regional conditioning status.

- Individual regional/global conditioning progressions as appropriate to assist with improving worker tolerance for job demands.
- Record of interaction.
- Fee code billed per 20 minutes.

### **Telehealth education**

During an educational session, education should include, but not be limited to:

- The stages of tissue healing.
- Self-management including self-directed reactivation strategies.
- The recovery and return-to-work process (return-to-work during the early stages of recovery is safe when clinically appropriate).
- Pain management, where indicated.
- Maintenance of normal activity such as walking, swimming and suitable employment as appropriate with safe clinical findings.
- Record of interaction.
- Fee code billed per 20 minutes.

### **Telehealth return-to-work planning and monitoring**

Return-to-work planning and monitoring should include:

- Development of a return-to-work plan which may include:
  - Calling the employer to discuss the return-to-work, job information and worker's estimated functional ability relative to job demands.
  - Meeting (via telehealth) with the worker in the development of the return-to-work plan.
  - Creating a return-to-work document.
- Reassessment, within the limits of telehealth, of the injured worker who is participating on a return-to-work program.
- Education of the worker relative to the return-to-work program and progression.
- Completion of and transmitting PRTW or other documentation to WCB.

- Fee code billed per 20 minutes.

### **Telehealth telephone contact**

Intended for communication by telephone between caregivers outside of your treatment facility to discuss the injured worker (i.e., physical therapist calling a physician, or other therapist if examining the worker in person in order to discuss relevant case history). This includes:

- Record of the interaction.
- Fee code billed per 10 minutes.