

Physiotherapy Billing Guide (HC966)

January 1, 2025-December 31, 2027

Workers' Compensation
Board – Alberta

General Instructions

These instructions are for the Physiotherapy (PT) contract, **January 1, 2025, to December 31, 2027.**

- Physiotherapy billing guide (HC966) will serve as an interpretive guideline for submission of all contract billings. Health Care Strategy will update the billing guide on an as needed basis to include additional points of clarification or any new scenario rulings that have arisen since the last publication.
- If a scenario arises that is not currently covered in the guide, PT providers are instructed to contact Health Care Strategy at hcs.physiotherapy@wcb.ab.ca for a billing rule prior to submission of the invoice.
- Assessment and progress reports, along with invoices are to be submitted online using [myWCB](#) electronic injury reporting portal.
- For codes/services not available online, use a Physiotherapy Invoice form (C019).

Invoice Submission

- All billings must be submitted online using either the online invoice or the paper invoice (C019) within six (6) months of performing the service.
- Invoices utilizing billing rules other than those described in the contract and clarified in this Billing Guide will not be paid.
- Failure to deliver services as outlined in the contract as determined by the Worker's Compensation Board (WCB) may result in non-payment/fee recovery of such service.
- An online invoice is required to be submitted along with the Physiotherapy Progress/Discharge Report (C534).

Invoicing Errors

- If an error is identified on a previously submitted invoice, use the Physiotherapy Invoice Correction Form (C570T) for revisions on invoice errors **within 60 days** of notification of the error. Failure to utilize the Physical Therapy Invoice Correction Form (C570T) may result in a billing error for which the contractor may bear the associated costs if an overpayment occurs.

Physiotherapy (PT) Service codes

Service	WCB Health Services Code	WCB Fee	Maximum units
Assessment	07.38AA	\$80.00	
Standard Treatment – Phase 1 (Weeks 0-4 or 0-8 for fracture/surgery injuries)	07.38AC	\$70.00	8 sessions (standard) or 16 sessions (fracture/surgery)
Standard Treatment – Phase 2	07.38AB	\$50.00	
Extended Duration Treatment Fee	07.38AE	\$100.00	7 sessions
Specialized Physiotherapy			
Vestibular Assessment	07.38SA	\$150.00	1 session
Vestibular Therapy	07.38SB	\$120.00	5 sessions
Hydrotherapy	07.38SC	\$120.00	5 sessions
Intra-pelvic floor Therapy	07.38SD	\$120.00	5 sessions
Hand Assessment	07.38SG	\$120.00	1 session
Hand Therapy	07.38SH	\$120.00	10 sessions
In-home Physiotherapy	07.38SE	\$120.00	10 sessions
Transitional Return to Work Visit	07.38AF	\$50.00	4 sessions
Interim Visit	07.38AG	\$50.00	4 sessions
Assessment Report	RPT01	\$40.00	
Progress, Discharge Report	RPT02	\$40.00	
Case Conference Fee (calls to WCB staff)	07.38CC	\$27.50	5 units
Case Conference Fee (calls to external to WCB stakeholders)	07.38CE	\$27.50	5 units
Cancellation < 24 hrs / No show (initial authorization only)	07.38CN	\$70.00	1 unit
Chart copies requested by WCB	RF04	\$26.52 plus \$0.47 per page	
Summary of chart information, requiring the extraction of relevant information, but not an opinion	RF05	\$93.15 for the first thirty (30) minutes plus \$36.23 for each 15 minute increment	
Summary of chart information, requiring the extraction of relevant information, and including an opinion	RF06	\$113.85 for the first thirty (30) minutes plus \$36.23 for each 15 minute increment	

Non-contracted Sundry Item	NCPTS	PT Consultant Approval required if >\$23.00	
Non-contracted Service	NCS	HCC Approval Required	
Professional Travel for in-home PT service	07.38PF	\$14.38 per 15 mins interval	12 units (3 hours)
Mileage (outside of city limits only)		Paid at the WCB rate	

Telehealth/Virtual Care Services	WCB Health Services Code	WCB Fee	Maximum units
Assessment (virtual care)	07.38AV	\$80.00	
Initial Treatment (Weeks 0-4 or 0-8 for fracture/surgery injuries)	07.38CV	\$70.00	8 or 16 sessions
Treatment (Standard)	07.38BV	\$50.00	
Transitional Return to Work Visit (virtual care)	07.38FV	\$50.00	4 sessions
Interim Visit	07.38GV	\$50.00	4 sessions

07.38AA / 07.38AV Physiotherapy (PT) Assessment or Virtual/Telehealth PT Assessment

07.38AC / 07.38CV Initial PT Treatment (Phase 1) or Initial Virtual/Telehealth PT Treatment (Phase 1)

- Standard authorization (i.e., soft tissue injuries): Up to 8 visits over 4 weeks
- Fracture/Surgery Injuries: Up to 16 visits over 8 weeks
- PT will contact WCB to update the timeframe if surgeon’s protocol differs. **Any treatment authorized beyond eight (8) weeks is paid at the phase 2 rate (\$50/visit)**

07.38AB / 07.38BV PT Treatment after initial authorization (Phase 2) / Virtual/Telehealth PT Treatment after initial authorization (Phase 2)

- An assessment (07.38AA/07.38AV) and first treatment (07.38AC/07.38CV/07.38AB/07.38BV) can be invoiced on the same day.

07.38AE Extended Duration Treatment

- If the initial assessment identifies that the Worker meets criteria outlined in Schedule C, **up to seven (7) sessions** are preauthorized. Refer to Appendix C for further details.
- 07.38AE cannot be billed in conjunction with an assessment (07.38AA)
- Invoice online as part of your regular electronic billing submission.
- For treatments beyond these guidelines (e.g., extended duration treatments > 7 or triple billing), PT Consultant approval is required.

07.38SA ~ 07.38SE Specialized Physiotherapy

- If the Worker meets criteria outlined in Schedule C, PT Consultant Authorization is not required for Specialized PT. Refer to Appendix B for further details.
 - **07.38SA** – Vestibular Assessment (up to 1 visit)
 - **07.38SB** – Vestibular treatment (up to 5 treatments)
 - **07.38SC** – One on one hydrotherapy (up to 5 treatments)
 - **07.38SD** – Intra-pelvic floor treatment (up to 5 treatments)
 - **07.38SG** – Hand Assessment (up to 1 visit)
 - **07.38SH** – Hand Therapy (up to 10 treatments)
 - **07.38SE** – In-home PT treatments (up to 10 treatments)
- For treatments beyond these guidelines (e.g., an extension of treatments), PT Consultant approval is required.
- Invoice online as part of your regular electronic billing submission.

07.38AF / 07.38FV Transitional Return to Work Visit / Transitional Return to Work Visit (Virtual)

- Four (4) transitional visits OR four (4) virtual transitional visits are allowed within four (4) consecutive weeks following the last authorized treatment after the discharge.
- Authorization is not required for these visits.

07.38AG / 07.38GV Interim Visit / Interim Visit (Virtual)

- PT can continue while waiting for PT consultant's review on extension request or a return-to-work assessment/program to be booked via using Interim Visit service code.
- Up to four (4) interim visits OR four (4) virtual interim visits are allowed over four (4) weeks period.

07.38CC / 07.38CE Case Conference Fees

- PT can invoice case conferences between Physiotherapist, CO, PT Consultant, Employer, Physician, specialist/surgeon (or their team), or RTW Centre clinician to discuss treatment, return to work, recovery progress and discharge planning.
- Invoiced per call not unit of time.
- Case conference to WCB staff (CO or PT Consultant): **07.38CC**
- Case conference external to WCB staff (Employer, Physician, or RTW clinician): **07.38CE**

07.38CN No-show/Late cancellation (Less than 24 hours)

- No-show/Late cancellation (Less than 24 hours) can be invoiced within initial authorization period only.

RPT01/02 Assessment/progress/discharge report fees.

- Report fees are automatically paid when an online report is submitted.
- RPT01/02 may be invoiced when submitting a paper invoice, if applicable.

RF04 Chart copies requested by WCB.

RF05 Summary of chart information, requiring the extraction of relevant information but no opinion required

RF06 Summary of chart information, requiring the extraction of relevant information, with an opinion required

* **Note:** RF04, RF05, and RF06 can be invoiced on the paper invoice form available online ([C019](#)).

NCPTS Non-contracted (unlisted) sundry item

- When the cost of the unlisted sundry item is \$23.00 or less, PT consultant authorization is not required. WCB is GST exempt. Submit a paper C019 using the NCPTS billing code.
- When the cost of the unlisted sundry item is greater than \$23.00 or the total costs of sundry items exceed \$250, PT Consultant approval is required prior to invoicing. Submit a Sundry Item Request (HC-948) to the PT Consultant fax line: 780-498-3226. Once approved, submit a paper C019 using the NCPTS billing code.

NCS Non-contracted service

- This code is to be used for any non-contracted PT service not otherwise outlined in the PT contract.
- Health Care Consultant (HCC) approval is required prior to proceeding with the services and invoicing.

Note: Claim Owners do not have the authority to authorize NCPTS or NCS billings and any authorization received from claim owners is not binding.

07.38PF Professional Travel for in-home PT Service

- Professional Travel is payable (\$14.38/15min) for PT travel within their clinic city to provide in-home PT services. If the PT travels outside their clinic city to provide in-home PT services, professional travel time (\$14.38/15min) and mileage at the WCB travel allowance is payable. Contact [HCS](#) for the current rate.

Ineligible Billings

Examples of items that cannot be billed to WCB include (but not limited to):

- Gels, creams, liniments (including Biofreeze) and in clinic supplies (including needles) are not payable.
- Home TENS units, commercial exercise equipment, custom bracing and orthotics from PTs are not supported.

Exceptional Billing Circumstances

Situations considered to be exceptional billing circumstances require PT Consultant approval prior to invoicing. This includes:

- Treatment frequency outside of the contract guidelines
- Treatment beyond initial authorization (Phase 2 treatment)
- Treatments beyond initial authorization for Extended Duration Treatments or Specialized PT.

PT Consultant Approval Process:

- a. On a PT First Report (C533) or a PT Progress Report (C534), select “Case Conference with WCB PT Consultant” under the “Recommendations” report field; or
 - b. Submit a faxed request to the PT Consultant fax line (780-498-3226). The request should include duration, frequency, and functional rationale for the exceptional billing requirement.
- The PT Consultant will make reasonable efforts to make and communicate a written decision within three (3) Business Days of receiving the request. If an expedited response is required once a written request has been submitted, the Contractor may contact a PT Consultant at the general PT Consultant enquiry line (780-498-3899).

Sundry Item list

Maximum cumulative cost of \$250 for listed Sundry Items. Beyond \$250 requires PT Consultant approval.

Home Exercise Equipment	Service Code	WCB Fees	Max Quantity
Airex Brand Balance Pad	BP01	\$126.50	1
Classic Wobble Board	WB02	\$57.50	1
Flex Bar Yellow	FB04	\$22.94	1
Flex Bar Red	FB01	\$27.20	1
Flex Bar Green	FB02	\$33.18	1
Flex Bar Blue	FB03	\$37.89	1
Foam roller full (6")	FR01	\$42.49	1
Foam roller half (6")	FR02	\$29.84	1
Hand Digitisers (all resistances)	HD01	\$31.05	1
Myofascial balls	MB01	\$36.00	1
Pedal Exerciser	PE01	\$102.29	1
Exercise Ball 55cm SDS	EB55	\$41.33	1
Exercise Ball 65 cm SDS	EB65	\$45.37	1
Exercise Ball 75 cm SDS	EB75	\$56.29	1
Exercise Ball 85 cm	EB85	\$67.23	1
Power-web Beige, least	PW01	\$45.94	1
Power-web Black, ultimate	PW06	\$45.94	1
Power-web Blue, super	PW05	\$45.94	1
Power-web Green	PW04	\$45.94	1
Power-web Red, moderate	PW03	\$45.94	1
Power-web Yellow, slight	PW02	\$45.94	1
ProStretch	PR01	\$56.35	1
Pulleys	PU01	\$28.75	1
Putty (2oz)	TP01	\$7.99	3
Slo-Mo Balls	BL01	\$17.19	1
Theraband (1 meter)	TB01	\$4.43	6
Wobble Board 20"	WB01	\$166.75	1
Tubigrip (1 meter)	TG01	\$6.60	6

Braces and Supports	Service Code	WCB Fees	Max Quantity
Ankle Brace	BA01	\$73.54	1
Bolster (10")	LB02	\$138.00	1
Cervical Rolls	CR01	\$37.89	1
Chair support (lumbar/thoracic)	CS01	\$101.20	1
Knee Brace - non-hinged, non-custom	BK01	\$68.99	1
Knee Brace - hinged, non-custom	BK02	\$114.94	1

Lumbar roll	LR01	\$37.89	1
Lumbar Pad	LP01	\$13.20	1
McKenzie night rolls 24-34"	NR01	\$57.44	1
Posture Medic	PS01	\$44.79	1
Wrist Brace	BW01	\$45.94	1
Wrist/Thumb Brace	BT01	\$58.59	1
Trochanteric Supports	TR01	\$25.18	1
Tennis Elbow splint	TE01	\$51.75	1
CHT Custom Fabricated Splint (up to 8 units/date of service)	FS01	\$25.00/unit	8

Home Management Supplies	Service Code	WCB Fees	Max Quantity
Cervical Pillow	CP01	\$43.20	1
Coban 2" x 5 yds	CB01	\$6.10	6
Home Neck Traction Unit	HN01	\$41.39	1
Kinesio Tape Roll (2" x 16.4 ft or 5cm x 5 m)	KT01	\$23.29	6
Leukotape 1 1/2" x 15 yds	LT01	\$14.78	2
MediBeads hot pack	MB02	\$34.44	2
Mediflow Pillow	MP01	\$69.35	1
Mefix adhesive cloth	MA01	\$8.49	6
Reusable hot/cold pack – large	CH02	\$11.92	2
Reusable hot/cold pack – small	CH01	\$5.05	2
Shepherd's Crook	SC01	\$57.44	1
Tensor bandages (one roll)	TS01	\$5.75	6
Tiger Tail	TT01	\$53.99	1
Trainer grade Tape 1 1/2" x 15yds (Athletic Tape (1 Roll))	AT01	\$6.89	6
Ultra light athletic (stretch) 2" x 5 yds	UA01	\$6.13	6
Underwrap (prowrap)	UT01	\$3.22	6