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Physiotherapy and massage for injured workers: Who gets covered?

hysicians often ask about WorkSafeBC coverage for injured workers requiring physiotherapy or massage therapy. In fact, once a WorkSafeBC claim has been accepted, patients with a range of medical issues are eligible for treatment. Nonetheless, they may not be reimbursed if they attend treatment prior to acceptance of their claims.

Physiotherapy for stream 1: Coverage is provided to address simple strains/sprains, such as a Grade 1 ankle sprain, but is limited to 8 weeks or 22 visits.

Physiotherapy for stream 2: Coverage is provided for more complex injuries, such as a fracture or a dislocation of a complex joint, or for treatment after surgery or upon referral from a specialist. The treating physiotherapist and WorkSafeBC case manager determine treatment length and frequency based on joint discussions and medical evidence provided to the case manager.

Physiotherapy for stream 3: Coverage is provided for home visits for injured workers unable to attend a physiotherapy clinic. The goal is to activate the worker toward attending treatment in a clinic. Eligibility is determined through discussions between a physiotherapist and case manager.

Physiotherapy for stream 4: Coverage is provided for central nervous system disorders, vestibular conditions, and brain injuries, acknowledging claim complexity and the high degree of one-on-one time with the injured worker.

Hydrotherapy programs: Coverage will only be provided if it in-

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volves the direct, on-site supervision of a physiotherapist (although a delegate may do the program). This form of physiotherapy may take place in conjunction with any of the above physiotherapy streams, and coverage includes all associated costs, with the exception of a worker attending the pool to do exercises on his or her own

Massage therapy: Coverage is provided for injured workers with an accepted claim and a physician's referral for up to 5 weeks of treatment, with a maximum of three visits per week and one treatment per day. For treatment beyond 5 weeks, the registered massage therapist must submit a report to WorkSafeBC documenting the need for ongoing treatment, and wait for approval. Concurrent massage therapy and physiotherapy are approved only at the case manager's discretion.

Frequently asked questions

- Q. What if I have recommended physiotherapy but my patient has yet to begin treatment?
- **A.** The worker may be unwilling to begin treatment, or may be waiting for claim approval. If the claim is not accepted, prior costs may not be eligible for reimbursement. If the claim is accepted, the worker may attend a WorkSafeBC-specified physiotherapy program.
- **Q.** Why am I unaware of my patient attending physiotherapy for a workrelated injury?
- A. Physiotherapists may not seek information about a patient's physician, and will therefore not send you their reports. WorkSafeBC may also be unaware of an injured worker/ patient undergoing treatment.

- Q. Why has WorkSafeBC declined the extended physiotherapy or massage treatments I've recommended to my patient?
- A. The WorkSafeBC case manager weighs all evidence on a patient's file and determines further entitlement to physiotherapy or massage treatment.
- Q. Who can I speak with regarding a patient who might benefit from a more structured program, after failing to progress through standard physiotherapy treatments?
- **A.** You can make a recommendation in your Form 11 report, or mark the box in Form 11, asking for WorkSafeBC to contact you, or you can phone the case manager. Your patient may be entitled to referral to one of Work-SafeBC's many structured rehabilitation programs, such as occupational rehabilitation or hand therapy. Watch for more details about these programs in a subsequent article.

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Don't forget to register for the annual WorkSafeBC Physician **Education Conference**, 20 October in Nanaimo.

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