

New agreement between Doctors of BC and WorkSafeBC

Recent negotiations between WorkSafeBC and Doctors of BC have resulted in a new agreement, which recognizes the importance of the work and time put in by physicians to help injured workers. Here are some of the big changes to note from the new agreement, valid from 1 April 2019 to 31 March 2022.

In Year 1, there is a rate increase to specific WorkSafeBC fee codes. In Years 2 and 3, a 2.3% rate increase will be applied to all WorkSafeBC fee codes. There are also increases to the expedited surgery premium (ESP) for surgeries. Please refer to the new fee schedule for more information.

The family doctor of an injured worker will receive the Form 8 fee even if the injured worker previously saw a doctor at a walk-in clinic or hospital. The agreement recognizes that family physicians have a better understanding of their patient's health history and that they can provide insight that other physicians may not. To receive the Form 8 fee (fee code 19937), physicians must answer "yes" to the question, "Are you the injured worker's regular practitioner?" In addition, the Form 8 must be received within 10 business days of the date that the first Form 8 was received by WorkSafeBC.

To improve the process of starting a claim, WorkSafeBC has added a timeliness tier for sending Form 8. If you send a Form 8 within 1 business day of treating the injured worker,

you will receive a financial bonus. Offering a financial incentive should result in physicians sending their assessments sooner, which will in turn create a WorkSafeBC claim faster.

As part of this agreement, WorkSafeBC can no longer request unsevered medical records. When requesting a copy of an existing report, such as a consult report or an imaging report, clinics can bill fee code 19904. This is a flat

fee regardless of the number of pages sent. A new fee code has been created (19959) for use if WorkSafeBC requests a copy of a Form 11. This fee code has the same rate as fee code 19940 (the code for electronically sending Form 11). When you receive a request for severed medical records, you can continue to bill fee code 19953. If you receive the request but your clinic has

no files to send as a result, your clinic can still invoice the fee code for severed medical records.

Billing for WorkSafeBC-related telephone calls has been simplified. If there is a phone call or office consultation between a treating physician and either a WorkSafeBC officer, a medical advisor, a WorkSafeBC-sponsored treatment program physician, a community physician, and/or a community allied health provider, your clinic should bill fee code 19930. This new agreement has eliminated fee codes 19919 and 19508.

For surgeons, a new zero dollar fee code (19326) has been created to allow them to start the 40-day clock for ESP. A surgeon can bill this new fee code after receiving approval for submitting Form 83D6, Authorization Request for Surgery. If code 19326 is not billed, surgeons can still use fee codes 19911, 19912, and 19908 to start the 40-day clock for ESP.

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For more details on these changes and the new rates, please refer to the new Doctors of BC agreement with WorkSafeBC at www.worksafebc.com/en/resources/health-care-providers/guides/physicians-and-surgeons-worksafebc-services-agreement. Remember to invoice WorkSafeBC within 90 days of the date of treatment to prevent any delays in processing payments. Should you require assistance, please call WorkSafeBC Payment Services at 604 276-3085 or toll free at 1 888 422-2228. You can also arrange a learning opportunity through our accredited academic detailing program by calling 1 855 476-3049 or emailing MedicalServicesEvents@worksafebc.com. ■

—Ernest Salcedo

WorkSafeBC Health Care Services Client Representative



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#CollaborateOnHealthBC: Patient care toolbox expands with virtual care

Dr John Yap remembers the exact date he and his four colleagues knew the way they provide care was about to change dramatically: Friday, March 13.

Read the article: bit.ly/3aFnZib#page=3

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