

Program of Care (POC) for Mild Traumatic Brain Injury Fees Effective November 30, 2006



Block 1 – Education Stream – for workers who are less than 3 months post date of injury

Service Description	Service Code	Minimum Visits	Fee
Initial Assessment and Initial Assessment Report	MTBIAE	1	\$70.00
Education – weeks 1-12	MTBIE	2	\$90.00
Care & Outcomes Summary Report – whenever the worker is discharged	MTBICOS	N/A	\$40.00

Block 2 – Active Treatment & Education Stream – for workers who require active treatment and education who are more than 3 months and less than 1 year post date of injury

Service Description	Service Code	Minimum Visits	Fee
Initial Assessment and Initial Assessment Report – only if worker did not enter Block 1	MTBIAT	1	\$75.00
Cognitive Rehabilitation and Education – weeks 13-24, if required	MTBIC	6	\$330.00
Manual Mobilization Therapy and Education – weeks 13-24, if required	MTBIM	5	\$240.00
Care & Outcomes Summary Report – whenever the worker is discharged	MTBICOS	N/A	\$40.00

Block 1 & 2 – Education/Active Treatment & Education Stream – for workers who require both education and active treatment who enter the program less than 3 months post date of injury

Service Description	Service Code	Minimum Visits	Fee
Initial Assessment and Initial Assessment Report	MTBIAE	1	\$70.00
Education – weeks 1-12	MTBIE	2	\$90.00
Cognitive Rehabilitation – weeks 13-24, if required	MTBIC	6	\$330.00
Manual Mobilization Therapy – weeks 13-24, if required	MTBIM	5	\$240.00
Care & Outcomes Summary Report – whenever the worker is discharged	MTBICOS	N/A	\$40.00

Program of Care (POC) for Mild Traumatic Brain Injury Billing Instructions



Completion of Reports

Initial Assessment Report

- Only 1 report is to be completed
- The report is to be completed prior to Block 1 OR Block 2 if the worker presents for the first time.

Care & Outcomes Summary Report

- The report is to be completed when the worker is discharged from the POC
- Only 1 report is to be completed.

Billing for Reports

- All reports are to be **mailed** or **faxed** within 2 days working days of assessment or discharge
 - The completed RAND SF-36 Survey and the Rivermead Questionnaire do not have to be submitted to the WSIB. Ensure that you include the scores on the report.
- Billing Information section of the reports is to be completed in full for prompt payment
- Do not bill electronically for the payment of reports.

Billing for treatment

- Minimum number of visits must be met
- Billing to occur at the end of treatment or whenever the worker is discharged
- Payment for the last block of service provided will be processed only when the Care & Summary Report is received and paid
- Enter the appropriate service dates (last treatment date), service codes, minimum number of visits (units) and corresponding fees
- Bill **electronically** through WSIB's payment processor, Emergis Inc.
- Physicians continue to bill all insured services through the Ministry of Health and Long-Term Care (MOHLTC) according to the MOHLTC's Physician's Schedule of Benefits

For further information on electronic billing:

Contact the Emergis Support Centre
1-866-240-7492 or:
via e-mail at provider.registry@emergis.com

Please submit completed forms by fax to:

(416) 344-4684 or 1-888-313-7373
or by mail to:
200 Front Street West
Toronto, ON M5V 3J1