



# **Information for Health Professionals billing the WSIB**



## **BILLING METHODS**

The WSIB accepts:

- e-billing for services provided by health professionals
- Mail or fax for all reports
- Manual submissions for services (as appropriate)

## **E-BILLING FOR SERVICES**

Telus Health Solutions, through its eHealth Solution Group, processes invoices that are submitted to WSIB via a **secure** server. The requirements are minimal, and Telus Health Solutions will provide any necessary assistance.

Online billing makes it easier to submit invoices and receive accurate payments faster. If there are any questions, please call the Telus Health Solutions Help Desk at 1-866-240-7492.

Through electronic billing, you can:

- Submit bills
- Update bills
- Void bills
- View status of all bills
- View on-line remittance statement

## **BILLING ON A WSIB FORM**

Most WSIB forms have a billing section. The following reports include a billing information section to be completed fully for prompt payment:

- Health Professional's Report (Form 8)
- Health Professional's Continuity Report (Form REO8)
- Health Professional's Progress Report (Form 26)
- Functional Abilities Form for Planning Early and Safe Return to Work (Form FAF)
- Physiotherapy Assessment Report (PAR Form 0856C)

**NOTE:** If the WSIB requests photocopies of the above forms, place a payment label over the billing section on these forms or cross out the service code and enter the service code for photocopies of clinical reports as per your WSIB fee schedule. If this is not done, the photocopied report will be flagged as a duplicate report and payment may be rejected.



**INSTRUCTIONS**

- Include your 9-digit WSIB Provider ID. **This is a mandatory field.** Payment of your report cannot be processed without your WSIB Provider ID.
- Specify the date the worker was assessed as the Service Date. **This is a mandatory field.**
- Include, as an option, your own invoice number.
- **Ensure that your name, address and telephone number are legible, and that all reports are signed.**

**BILLING USING A PAYMENT LABEL (FORM 0150C)**

Use a payment label for:

- Health Professional’s Progress Report (when the report is submitted as a narrative)
- X-ray Report
- Photocopies
- Review of patient records/clinical literature

**NOTE:** If billing for more than 15 minutes, indicate units of time or the total amount being billed.

**Please refer to your WSIB fee schedule for appropriate service codes and contact the Health Professional Access Line to request payment labels.**

**INSTRUCTIONS**

- Affix only one completed payment label to the bottom right-hand corner of the first page of photocopies, or on a multiple-page report submitted on letterhead.
- Include your 9-digit WSIB Provider ID. **This is a mandatory field.** Payment of your report cannot be processed without your WSIB Provider ID.
- Service date. **This is a mandatory field.**



- Photocopies: Use the date the photocopy was made.
- Reports: Use the date the worker was assessed.
- Review of patient records: Use the date of review.
- Include, as an option, your own invoice number.
- Enter the appropriate service code.
- **Ensure that your name, address and telephone number is legible, and that all reports are signed.**

**NOTE:** 1. Do not affix a second label to a multiple-page report.  
2. Do not cover pertinent information on the report with a payment label.

## **MANUAL BILLING FOR SERVICES**

If it is not possible to e-bill, then complete a Provider Payment Request Form (3947A) or Provider Payment Request for Equipment and Supplies Form (3941A) for products and/or services.

The WSIB requires information about the worker, the health professional and the service/treatment provided. Please print all information accurately and legibly **using black ink**.

[Instructions & Illustration of Provider Payment Request form \(3947A\)](#)

## **REMITTANCE STATEMENTS**

Remittance statements provide details regarding the processing of bills (e.g. amount allowed, worker's name and explanation, etc.). Payments to health professionals are made on a weekly cycle. **Please allow six weeks from the date of submission for paper bills to be paid and allow 10 calendar days for electronic bills.**

If you have not received payment for a bill, view your online remittance statement or contact 1-800-668-9958 for further information. **Do not resubmit requests for payment. Resubmissions will be rejected as duplicates.**

## **DIRECT DEPOSIT**

Requests for direct deposit or changes to banking information must be provided in writing to:

Provider Registration  
c/o Telus Health Solutions  
5090 Explorer Drive, Suite 1000  
Mississauga On L4W 4X6

Direct deposit enrollment forms can be downloaded from the Health Care Practitioners page on the WSIB website ([www.wsib.on.ca](http://www.wsib.on.ca)) in the Forms section. If there are any questions, please call the **Telus Health Solutions Help Desk at 1-866-240-7492**.



## **CANCELLED/MISSED APPOINTMENTS**

The WSIB does not pay for cancelled or missed appointments.

## **HARMONIZED SALES TAX (HST)**

Effective July 1, 2010, the WSIB is required to pay the new Harmonized Sales Tax (HST). It is the responsibility of the vendors, suppliers and service providers to determine which of their goods or services are subject to HST.

Please ensure that HST is charged separately and the total billed on one line for all of the goods and services provided, using the new service code “ONHST”.

## **LATE ACCOUNTS**

Section 33 (4) of the Workplace Safety and Insurance Act provides the WSIB with the authority to reduce payments to health professionals for late billing. Therefore, the WSIB may impose a percentage reduction penalty for late submissions of accounts. Accounts received after the 6th month from the date of service may be reduced as follows:

<b>Submission from the date of service</b>	<b>Reduction By:</b>
7th - 9th month	25%
10th - 12th month	50%
Over 1 year	100%

## **CONTACTING THE WSIB**

### **HEALTH PROFESSIONAL ACCESS LINE**

Call the Health Professional Access Line at 416-344-4526 or toll-free at 1-800-569-7919 if you have questions related to:

- Registration and changes to your mailing information
- Billing the WSIB (e.g. appropriate forms, Provider ID)
- Health care programs
- The name/number of the worker’s case manager/nurse
- Ordering supplies (e.g. forms).

### **HEALTH CARE PAYMENT INQUIRIES**

For questions regarding accounts and/or remittance statements please call 1-800-668-9958.

**NOTE:** Please have your WSIB Provider ID available.



#### WSIB MAILING ADDRESS

Health professionals have one central location to mail forms, reports and manual payment requests. The WSIB mailing address is:

Workplace Safety and Insurance Board  
200 Front Street West, 15th Floor  
Toronto ON M5V 3J1

#### FAXING REPORTS

The fax number for submitting a report is 416-344-4684 or toll-free 1-888-313-7373.

#### ADDITIONAL INFORMATION

Visit the WSIB website for more information at [www.wsib.on.ca](http://www.wsib.on.ca).