



# Questions and Answers



## Program Overview

### 1. What is the Non-Surgical Fracture Episode of Care (EOC)?

An Episode of Care (EOC) is a new WSIB payment model to bundle health care services together for a particular diagnosis. The Non-Surgical Fracture EOC is for workers who sustained a fracture which did not require surgical intervention. The Non-Surgical Fracture EOC is delivered by regulated health professionals if their scope of practice includes the treatment of non-surgical fractures.

The Non-Surgical Fracture EOC includes an initial assessment, an initial assessment report, treatment, outcome measurement, communications and a summary (discharge) report.

### 2. Is the Non-Surgical Fracture EOC the first line of rehabilitation, similar to the Musculoskeletal, Shoulder and Low Back Programs of Care (POCs)?

Yes, the target population as outlined in the admissions criteria below must be treated through the Non-Surgical Fracture EOC as the first line of rehabilitation.

### 3. Why does the WSIB require all eligible workers to be treated through the Non-Surgical Fracture EOC?

The WSIB designed the Non-Surgical Fracture EOC in order to provide treatment that supports functional recovery and return to work goals. The Non-Surgical Fracture EOC also promotes improved communication with the WSIB to support case management activities via new reports.

### 4. Who should health professionals call for general questions about the Non-Surgical Fracture EOC?

Health professionals should call the WSIB Health Care Practitioner Access Line at 1-800-569-7919 or 416-344-4526 to discuss any general questions about the Non-Surgical Fracture EOC or any Programs of Care (POC).

### 5. What's the difference between an Episode of Care (EOC) and Program of Care (POC)?

A Program of Care (POC) is an evidence-based health care delivery plan that describes treatment shown to be effective for specific injuries and illnesses. In contrast, an Episode of Care (EOC) is a payment model to bundle health care services together for a specific diagnosis

over a pre-determined length of time. An EOC does not stipulate specific interventions to be delivered, whereas the POC does include specific evidence-based interventions. Both the EOC and POCs are similar in that all rehabilitation services and modalities delivered as treatment are included in the bundled fee.

## Eligibility & Admission Requirements

### 1. What are the admission criteria for the Non-Surgical Fracture EOC?

The target population is workers with an allowed claim and who meet the following criteria:

- have a fracture that did not require surgical intervention;
- be medically cleared to begin rehabilitation;
- no longer have a fracture that is casted or immobilized OR have a fracture that is immobilized with a removable device (such as a splint, walking boot, etc.);
- begin the EOC within four months (16 weeks) from the date of injury;
- not have any additional injuries that prevent participation in this EOC;
- be at work (regular or modified), or are not working; and
- not be hospitalized.

The Non-Surgical Fracture EOC is not recommended for workers who are not medically cleared to begin rehabilitation or workers who have contraindications to receiving treatment in the EOC. The EOC is not appropriate for workers with pathological fractures (e.g., osteoporosis, infection, tumour, etc.).

In the context of this EOC, the terms immobilized and immobilization refer to the use of any device intended to restrict mobility, for example a cast, splint, slab, sling, brace, walking boot, or other restrictive device.

The non-surgical fracture EOC is for injuries that occur on or after May 31, 2017.

### 2. Does the Non-Surgical Fracture EOC apply to fractures that have been casted as well as those which were not casted?

Yes. However, the WSIB will monitor the experience of different populations being treated in the program.

**3. How should a health professional proceed if they assess a worker and determine them to be ineligible for the Non-Surgical Fracture EOC?**

The health professional must contact the WSIB Clinical Expert to discuss the case to determine the appropriate way to proceed. The WSIB Clinical Expert will discuss the presence of clinical red flags or other reasons why the worker may not benefit from the Non-Surgical Fracture EOC. The WSIB Clinical Expert may suggest a referral for further assessment to determine whether care is required.

The WSIB Clinical Expert can be reached by calling 1-866-716-1299 or 416-344-5739.

**4. How would a health professional or worker know if a worker has entitlement to health care benefits and treatment in the Non-Surgical Fracture EOC?**

The health professional should always confirm whether a worker has entitlement to health care benefits under the claim before initiating treatment. The health professional should confirm at the time of assessment whether the injury is work related. If the injury is work related, they should clarify whether the claim was registered with the WSIB and if a claim number was assigned. It is recommended that the health professional contact the WSIB prior to the initial assessment to confirm the status of entitlement to health care benefits.

The assignment of a claim number does not equate to entitlement to health care benefits.

If the worker is uncertain whether they are entitled to health care benefits, the worker or health professional may call the WSIB at 1-800-387-0750 or 416-344-1000 to verify the status of the claim. The WSIB will not pay for services delivered to a worker who does not have entitlement to health care benefits.

**WSIB Clinical Expert Role**

**1. What is a Clinical Expert and what is their role?**

A Clinical Expert is a regulated health professional who has clinical experience with the use of WSIB treatment programs, such as the Programs of Care and the Non-Surgical Fracture EOC. The Clinical Expert's role is to discuss clinical aspects of the claim including worker diagnosis, appropriate treatment as well as barriers to recovery. Clinical Experts will help treating health professionals to determine the suitability of a worker for

the Non-Surgical Fracture EOC and/or POC's. They can discuss appropriate treatment for a worker and provide an opinion on next steps where a worker is not progressing as expected.

**2. How do I reach a Clinical Expert?**

Clinical Experts are available by telephone from Monday to Friday by calling 1-866-716-1299 or 416-344-5739.

**Program Delivery and Structure**

**1. Who can deliver the Non-Surgical Fracture EOC? When is a referral required?**

Regulated health professionals can deliver the Non-Surgical Fracture EOC if it is within their scope of practice. Health professionals who are not primary care providers must have a referral from a primary health professional (in the context of WSIB, primary health professionals include physicians, chiropractors, physiotherapists and/or nurse practitioners).

**2. What is required in order to register to deliver the Non-Surgical Fracture EOC?**

The health professional is required to review the relevant documents and materials available [here](#). These documents include the Non-Surgical Fracture EOC reference guide, the outcome measure, the Initial Assessment and Summary Reports, the fee schedule and other reference materials.

**3. What is the duration of the Non-Surgical Fracture EOC and how many visits must be completed?**

The duration of the Non-Surgical Fracture EOC is up to 8 weeks from the date of the initial assessment. A minimum of 6 visits is required to bill the full bundled fee; however, it is the expectation that health professional will treat the worker as often as is necessary to achieve the return to work and recovery goals.

**4. What if the worker needs fewer than the minimum number of visits or is discharged before 6 visits are delivered?**

In cases where the worker has completed care early or in cases of self-discharge, it may be possible that fewer than the minimum required number of visits were delivered. In these cases, indicate the actual number of units (visits) delivered on both the Summary Report and electronic invoice using the appropriate billing service codes.

**5. How is the first date of service/treatment determined?**

The date of the initial assessment is considered the first date of service. The date of initial assessment should be indicated on the Non-Surgical Fracture EOC Initial Assessment Report and should correspond to the date entered on the electronic billing system.

**6. Should a health professional complete a Form 8 and the Non-Surgical Fracture EOC Initial Assessment Report?**

When a health professional is the first health professional to assess the worker following the injury, both the Form 8 and the Non-Surgical Fracture EOC Initial Assessment Report should be completed.

When a health professional is not first to assess the patient following the work-related injury or if the worker was referred by another health professional, then only the Non-Surgical Fracture EOC Initial Assessment Report should be completed.

**7. Which outcome measures must be used to show functional progress during the Non-Surgical Fracture EOC?**

The Patient-Specific Functional Scale (PSFS) should be administered at initial assessment and at discharge, with the scores recorded on the Initial Assessment Report and the Summary Report. During the initial assessment, the PSFS is to be administered after the history taking and prior to the physical examination. The PSFS is also useful to monitor ongoing progress at the provider's discretion throughout the treatment period such as at reassessments or mid-point evaluations.

**8. As a regulated health professional, will I be able to continue determining the most appropriate treatment for a worker with a non-surgical fracture injury?**

Yes. While the Non-Surgical Fracture EOC does not stipulate specific interventions, treatment interventions must support SMART goals and relevant functional activities. Treatment interventions may be used if, in your clinical judgment, they are in the best interest of your patient. The bundled payment includes all rehabilitation services; additional services may not be billed in addition to the block fee.

If you have any questions related to treatment interventions, please call the WSIB Clinical Expert at 1-866-716-1299 or 416-344-5739.

**9. Can a worker receive treatment from multiple providers for the same area of injury, for example, a chiropractor and a physiotherapist, under two Non-Surgical Fracture EOCs?**

Treatment interventions can be delivered by multiple health professionals; however, billing must be submitted for one Non-Surgical Fracture EOC by only one health professional/clinic.

**10. Can a worker change to another health professional after beginning treatment in the Non-Surgical Fracture EOC?**

When the worker has received partial treatment in the Non-Surgical Fracture EOC and wishes to continue treatment with another health professional at a different facility, the worker must obtain approval from the WSIB Case Management Team. The WSIB Case Management Team can be reached by calling the WSIB at 1-800-387-0750 or 416-344-1000.

**11. When a worker has multiple non-surgical fractures, are separate Non-Surgical Fracture EOCs allowed for each area?**

A maximum of two EOCs can be delivered for the same claim, providing the worker meets the admissions criteria and there is entitlement to health care benefits. This would be done in instances where the worker had a fracture to the upper extremity as well as the lower extremity. In this scenario, the health care practitioner could bill the Non-Surgical Fracture EOC for both an upper body injury and a lower body injury.

If the health professional feels that the nature of the multiple injuries precludes the worker from receiving treatment in two EOCs, they may contact the WSIB Clinical Expert at 1-866-716-1299 or 416-344-5739 to discuss the case.

**12. What programs should I deliver if a worker has a multiple injuries including non-surgical fractures and soft tissue injuries?**

A maximum of two programs (EOCs or POCs) can be delivered for one claim where there are multiple injuries including both soft tissue injuries as well as non-surgical fractures. Where a worker has a non-surgical fracture, the provider must deliver a minimum of one Non-Surgical Fracture EOC. Depending on the nature of the injuries, the provider may then choose whether to deliver a second EOC or instead a POC for the soft tissue injury. For example, suppose a worker

has fractured humerus, fractured distal fibula, and a knee sprain. The provider must deliver one Non-Surgical Fracture EOC (humerus), but may choose to deliver a second Non-Surgical Fracture EOC (distal fibula) or a Musculoskeletal POC (knee sprain). Treatment of the third area must be encompassed into the overall treatment plan.

If the health professional feels that the nature of the multiple injuries precludes the worker from receiving treatment in two EOCs or EOC and POC, they may contact the WSIB Clinical Expert at 416-344-5739 or 1-866-716-1299 to discuss the case.

## Recovery, Return to Work, and Communication with the WSIB

### 1. Should I submit a Treatment Extension Request Form if I want to request further treatment after the Non-Surgical Fracture EOC?

No. If the provider would like to request further treatment beyond the EOC, they should contact the WSIB Clinical Expert at 1-866-716-1299 or 416-344-5739 to discuss the case. The WSIB Clinical Expert may request further information regarding: the type and frequency of treatment provided during the EOC; the workers response to treatment; description of any persistent barriers; updated clinical and return to work information. The Clinical Expert will also request rationale for further treatment, including type, frequency and duration. Once the Clinical Expert has reviewed the details of the claim, they will make a recommendation regarding the request for further treatment.

### 2. How is return to work defined in the Non-Surgical Fracture EOC? What are the expectations of the health professional to support return to work during the EOC?

Staying at or returning to work enhances recovery, is part of the rehabilitation process and can be effective in reducing work disability. Return to work means being able to return to all regular duties and regular hours. It is expected that the health professional's opinion about the worker's ability to return to work at the conclusion of the EOC has been discussed with the worker.

### 3. How is staying at work or returning to work part of the Non-Surgical Fracture EOC?

WSIB has adopted the 'Better at Work' approach as a rehabilitation principle, which is the integration of

rehabilitation with return to work. Staying at work or returning to work is not only the result of successful rehabilitation, but is an important part of successful rehabilitation. This approach reflects evidence based practice which shows that people heal faster and that permanent psychological and physical impairments may be reduced with early reactivation, including safe recovery in the workplace.

### 4. How should the Initial Assessment and Summary reports be submitted to the WSIB?

The reports should be faxed to 1-888-313-7373 or 416-344-4684. Alternatively, the reports can be mailed to WSIB's head office:

Workplace Safety & Insurance Board  
200 Front Street West  
Toronto, Ontario M5V 3J1

The Non-Surgical Fracture EOC Initial Assessment Report should be submitted within two working days from the date of assessment. The Summary Report should be submitted within two working days of discharge or the last visit.

## Billing

### 1. Can a health professional bill a worker directly for treatment provided for a non-surgical fracture?

The health professional may not bill the worker. Section 33(5) of the Workplace Safety and Insurance Act (WSIA) states: "No health care practitioner shall request a worker to pay for health care or any related service provided under the insurance plan."

### 2. If a worker does not yet have entitlement to health care benefits under their claim but they want to start treatment, should I bill them directly?

The WSIB strives to make timely decisions on the status of claims. If a worker presents with for an assessment and wants to commence treatment, we recommend the health professional and/or worker contact the WSIB at 1-800-387-0750 or 416-344-1000 to verify the status of the claim.

If the WSIB cannot confirm entitlement to health care benefits and the worker would still like to proceed with treatment, the health professional should discuss payment responsibility with the worker. The health professional should explain that payment would be the

responsibility of the worker should it be decided that there is no entitlement to health care benefits under the claim. If there is entitlement to health care benefits, the WSIB will pay for approved health care according to the WSIB Fees, and any prior payments made by the worker should be reimbursed by the provider.

It is the responsibility of the health professional and worker to check back regularly with the WSIB until a decision has been made on the status of the claim.

**3. What will happen if the health professional does not submit the Summary Report when the worker is discharged?**

Health professionals who deliver the Non-Surgical Fracture EOC must submit the Summary Report within two working days of the worker's discharge or last visit. Failure to submit the Summary Report may impact payment of services.

If the Summary Report is not received within 14 days of the worker's discharge or last visit in the 8 week EOC, the form fee will not be paid. In addition, the EOC service payment will be held until receipt of the form.

**4. What are the fees for the Non-Surgical Fracture EOC?**

Please refer to the Non-Surgical Fracture EOC Fee Schedule available on the [WSIB website](#).

**5. Is there a requirement for health professionals to bill electronically?**

Yes, all bills for services must be submitted electronically for efficient payment. Please bill electronically through the WSIB's payment processor, TELUS Health Solutions.

Please do not bill electronically for the payment of reports. The report form includes a billing information section and if fully completed, WSIB will process the report for payment.

For further information on electronic billing, please contact the TELUS Health Solutions Support Centre at 1-866-240-7492 or visit [www.telushealth.com/wsib](http://www.telushealth.com/wsib).

**6. How do I bill for services if I assess a worker but then determine that they are not appropriate for the Non-Surgical Fracture EOC?**

If you assess a worker but then determine that they are not appropriate for the Non-Surgical Fracture EOC, please contact the WSIB Clinical Expert at 1-866-716-1299 or 416-344-5739 to discuss the best way to proceed.

**7. Who can the health professional contact if they have questions regarding payment?**

The health professional can contact the WSIB at 1-800-387-0750 or 416-344-1000 and ask for the Health Care Payment Inquiry Line.

**8. Where can I find more information about the Non-Surgical Fracture EOC?**

Click [here](#) for more information about the Non-Surgical Fracture EOC.