

FEE SCHEDULE

Podiatry

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PROGRAMS OF CARE

Workers who require treatment for a musculoskeletal injury or recurrence will be treated in a Program of Care (POC). Three Programs of Care address musculoskeletal injuries:

- workers with low back pain will be treated in the Low Back Program of Care,
- workers with a shoulder injury will be treated in the Shoulder Program of Care and
- workers with other musculoskeletal injuries will be treated in the Musculoskeletal Program of Care

Please refer to the WSIB website, wsib.ca for details on Programs of Care, including fees.

SCHEDULE OF FEES

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Podiatry Services

SERVICE CODE	DESCRIPTION	FEE
A005	Initial Visit	\$59.39
A006	Continuing Treatment (per visit)	\$44.81
A001	Follow-up Visit (with no further treatment)	\$18.77
K992	Emergency Call - First Patient Seen	\$38.61
K993	Emergency Call - Each additional patient (includes travel time)	\$16.54
5130	Acupuncture (per visit) <ul style="list-style-type: none"> • An initial trial of up to six treatments may be allowed. • Requests for extensions must be submitted in writing and pre-approved by the WSIB. • Must be delivered by a regulated health professional with appropriate training completed at an educational facility that offers a certification program in acupuncture and adheres to the standards of the College of Podiatrists of Ontario. <p>Note: Payment for reports is included in the fee for podiatry services. Therefore, a separate report fee should not be submitted to the WSIB.</p>	\$43.34

Radiological Services

SERVICE CODE	DESCRIPTION	FEE
X069	Foot - two or three views	\$20.65
X229	Foot - four or more views	\$31.00
X072	Toe - two views	\$15.65
X230	Toe - three or more views	\$22.90

Injections

SERVICE CODE	DESCRIPTION	FEE
G370	Steroids - puncture of aspiration of joint effusion or injection of medication	\$18.90
G371	Steroids - each additional site	\$9.50
G231	Anaesthesia - One Nerve or more	\$32.45
G223	Anaesthesia - Additional Nerve(s) or Sites(s) - Add	\$16.25

Surgical Services

SERVICE CODE	DESCRIPTION	FEE
	All fees include: • Use of the facility • Dressing and follow up	
Skin and Soft tissue		
Z101	Incision & Drainage of Onychia or Paronychia (without nail avulsion)	\$84.13
Z128	Drainage of Onychia or Paronychia: with nail avulsion	\$87.68
	with complete nail avulsion	\$87.68
Z103	Drainage of Abscess	\$107.23
Z114	Removal of Foreign Body Minor	\$82.93
	Major	\$82.93
R549	Excision of Ganglion	\$179.93
N295	Excision of Neuroma	\$169.68
Nails		
Z110	Avulsion - one toe	\$81.63
Z128	Excision - Partial nail and Matrisectomy - one toe	\$87.68
Z130	Onychoplasty	\$124.73
R299	Complete nail, Matrix, Partial Phalanx (terminal, Symes)	\$186.03
Tendon		
R579	Tenotomy	\$148.03
R578	Suture of Ruptured Tendon (tenorrhaphy)	\$185.13
R579	Tenotomy & Capsulotomy	\$148.03
R557	Tendon Lengthening (tenoplasty)	\$277.88
R560	Tendon Transplant	\$306.13
Bursa		
G370G700	Drainage of Bursa	\$88.78
G370G700	Puncture of Bursa for Aspiration	\$88.78
R506	Excision of Bursa	\$207.23
	Interphalangeal Adventitious Bursa	\$207.23
	Postero-Achille's Bursa	\$207.23
	Retrocalcaneal Bursa	\$207.23
Repairs		
Z176	Wounds - less than 2" skin depth	\$79.08
Z175	Wounds - larger than 2" skin depth	\$99.18
Bone (fractures to include immobilization technique)		
F058	Digits - Closed reduction	\$133.88
F060	Digits - Open reduction	\$228.98
F063	Metatarsals - Closed reduction	\$158.63
F064	Metatarsals - Open reduction	\$234.58

Surgical Services (continued)

SERVICE CODE	DESCRIPTION	FEE
Bone (Ostectomy)		
R282	Exostectomy Subungual	\$160.38
R309	Ostectomy, partial	\$231.98
R309	Condylectomy, plantar-metatarsal	\$231.98
R309	Metatarsectomy partial (head resection) with implant	\$231.98 \$231.98
R299R579	Phalangectomy, partial (arthroplasty)	\$269.03
R299	Phalangectomy, partial with tenotomy	\$186.03
R305	Ostectomy, accessory ossicle	\$213.43
R301	Sesamoidectomy	\$200.13
Bone (Osteotomy)		
R276	Osteotomy First Metatarsal Fifth Metatarsal (Tailor's Bunion) Lesser Metatarsal	\$202.83 \$202.83 \$202.83
Bone (Joints)		
	Capsulotomy with tenotomy for overlapping fifth digit	\$277.83
R446R579	Capsulotomy, without tenotomy for overlapping fifth digit	\$194.83
R446	Arthrotomy for drainage or removal loose body	\$202.83
R505	Capsulotomy First metatarso-phalangeal joint First metatarso-phalangeal joint with shortening of capsule	\$202.83 \$202.83
R471	Arthrodesis of toes (per)	\$209.53
R477	Arthrodesis of metatarso-phalangeal joint	\$300.33
G370G700	Arthrocentesis: Puncture for aspiration of hemarthrosis Initial Subsequent	\$88.78 \$88.78
G370G700	Arthrocentesis: Puncture for aspiration of joint effusion (not traumatic) or injection of medication Initial Subsequent	\$88.78 \$88.78
Miscellaneous		
Z199	Surgical Shoes (cast)	\$79.18
Z200	Unnaboot Application	\$79.18
Z231	Plantar Fasciotomy (case-by-case subject to pre-approval)	
N188	Nerve Decompression	\$211.88

Other Services

SERVICE CODE	DESCRIPTION	FEE
FAF	Functional Abilities Form for Planning Early and Safe Return to Work (FAF) Request for the completion of the form must be initiated by either the worker or employer. Do not include clinical/ diagnostic information on the form	\$45.00
	Telephone consultation with treating health professional • Call must be initiated by the WSIB to treating health professional. • Paid at a flat rate fee regardless of the duration of the discussion.	\$45.00

Billing the WSIB

For more information about the WSIB, please visit the WSIB's website (wsib.ca) and refer to the Health Care Practitioners page, which includes billing information for health professionals.

The WSIB encourages you to bill electronically for services. The advantages of electronic billing are:

- Easier submission of invoices
- Faster receipt of payments

For information on electronic billing, please contact Telus at 1-866-240-7492, via e-mail at provider.mgmt@telus.com or visit their website at telushealth.com

Health Care Payment Inquiries

For questions regarding accounts and/or remittance statements please call 1-800-387-0750.

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 Consultant
- Ordering supplies (e.g. forms).

Visit the WSIB website for more information at wsib.ca.