

Service fees and fee codes for Saskatchewan Workers' Compensation Board primary chiropractic service providers

An **intervention** is an appropriate WCB-coded service provided to the worker by the treating practitioner during the acute, sub-acute or chronic phase of the injury. This intervention or service can include:

- an initial visit
- a subsequent visit (biomechanical treatment, movement patterns, myofascial therapy, electrotherapy, advice, education and reassurance)
- an individual conditioning instruction

Practitioners limit interventions to the phases of soft-tissue healing (acute, sub-acute and chronic).

The WCB pays the fees listed in the table below. The WCB pays these fees when the provider has followed the negative response process using the initial report (CHI) and progress/discharge report (CHP).

Where a flat rate fee appears, it represents the average time required to treat a WCB customer. Where the table lists a prorated fee, **the provider bills using the major portion thereof method**. (Providers may bill an additional unit only after at least half of the minimum time stated in the code has elapsed.)

The WCB retains the right to audit the records and invoices of health-care providers who have provided services to a WCB customer.

Service	Fee code	Description	Jul. 1, 2024 to Dec. 31, 2024	Jan. 1, 2025 to Dec. 31, 2025	Jan. 1, 2026 to Dec. 31, 2026	Jan. 1, 2027 to Dec. 31, 2027
Initial visit ¹	400	Per visit	\$75.11	\$78.11	\$80.45	\$82.06
Subsequent visit	401	Per visit	\$49.19	\$51.16	\$52.70	\$53.75
Complex case – additional time ²	429	Per visit	\$49.19	\$51.16	\$52.70	\$53.75
Emergency visit	402	Per visit	\$72.08	\$74.97	\$77.21	\$78.76
Initial report with function outcome information (CHI)	403	Per report	\$83.18	\$86.51	\$89.10	\$90.89
Progress/discharge report with functional outcome information (CHP)	404	Per report	\$57.14	\$59.43	\$61.21	\$62.43

Conferencing	412	Per 10 minutes	\$16.81	\$17.48	\$18.01	\$18.37
Research fee	406	Per 10 minutes	\$36.23	\$37.67	\$38.80	\$39.58
Return-to-work plan development and monitoring	407	Per 10 minutes	\$14.18	\$14.75	\$15.19	\$15.49
Practitioner return-to-work form	424	Per form	\$21.28	\$22.13	\$22.80	\$23.25
Individual conditioning instruction	410	Per 10 minutes	\$24.32	\$25.29	\$26.05	\$26.57
Functional ability evaluation	415	Per 10 minutes	\$24.32	\$25.29	\$26.05	\$26.57
Appliances and supplies	31	Cost plus five per cent				
Orthotics	31	As approved by the case manager				
Response to WCB request for permanent functional impairment rating information	427	Per response	\$218.84	\$227.59	\$234.42	\$239.11
WCB RHCS4 form	425	Per form	\$38.29	\$39.83	\$41.02	\$41.84
WCB RHCS4 form: returned within five business days of WCB request date	426	Per form	\$30.39	\$31.60	\$32.55	\$33.20

Notes:

- ¹ Includes initial assessment plus treatment.
- ² Must meet complex case criteria.
 - X-rays will be billable using medical service plan (MSP) fee codes and fees.
 - The WCB will fund only one chiropractic follow-up visit per day.
 - Subsequent visits include all modalities.

Refer to the [practice standards for primary level chiropractic service providers](#) document for a detailed description of the services listed on this fee schedule.

Contact numbers:

- Medical accounts inquiry line: 306.787.4412, for all billing inquiries.
- Manager of health-care services: 306.787.1803, for inquiries concerning:
 - fee and/or service agreement
 - procedure