



Kinesiologists

Twelve (12) kinesiology sessions are pre-authorized for ICBC customers within the first 12 weeks from the date of their crash.

Fee table for crashes on or after May 1st, 2021

| Line item | Fee | Additional Information |
|---------------------------------|-------------|--|
| Initial assessment visit | \$114/visit | <ul style="list-style-type: none"> This fee may be billed only once per customer, unless otherwise approved by ICBC This fee includes the assessment and any treatment provided that day The invoice/receipt for customer reimbursements should indicate an initial visit This fee applies for initial assessment visits on or after April 1, 2024 |
| Standard treatment | \$92/visit | <ul style="list-style-type: none"> This fee applies for treatments administered on or after April 1, 2024 A standard treatment includes a minimum forty-five (45) minute session one-on-one with the customer and Kinesiologist The standard treatment fee is inclusive of administrative duties performed such as charting or session preparation |
| Progress report | \$84/report | <ul style="list-style-type: none"> Progress reports must only be completed upon ICBC's request This fee applies to the progress report template provided by ICBC A progress report must be completed in its entirety before it can be submitted and billed to ICBC |

Fee table for crashes before May 1st, 2021

| Line item | Fee | Additional Information |
|--|----------------------|---|
| Initial assessment visit & report | \$158/visit & report | <ul style="list-style-type: none"> This fee may be billed only once per customer, unless otherwise approved by ICBC This fee includes the assessment and any treatment provided that day An initial assessment report must be completed in its entirety before it can be billed to ICBC The invoice/receipt for customer reimbursements should indicate an initial visit This fee applies for visits on or after April 1, 2024 |
| Standard treatment | \$92/visit | <ul style="list-style-type: none"> This fee applies for treatments administered on or after April 1, 2024 A standard treatment includes a minimum forty-five (45) minute session one-on-one with the customer and Kinesiologist The standard treatment fee is inclusive of administrative duties performed such as charting or session preparation |
| Progress report | \$84/report | <ul style="list-style-type: none"> Progress reports must only be completed upon ICBC's request |





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| | | <ul style="list-style-type: none"> • This fee applies to the progress report template provided by ICBC • A progress report must be completed in its entirety before it can be submitted and billed to ICBC |
|--|--|--|

Telehealth

- Pre-approval from a claims representative is required prior to initiation of telehealth services
- Practitioners are expected to adhere to the same in-person expectations of a standard treatment session.
- Practitioners must adhere to their association’s guidelines on telehealth services.
- ICBC’s expectation is that telehealth sessions must include both audio and video technology e.g. telephone only sessions cannot be billed to ICBC.

Care plan meetings

Care plan meetings must be initiated, approved, scheduled and facilitated by an ICBC claim representative, and have the purpose of aligning goals, objectives and overall case management of a shared client. This line item cannot be used to invoice for time spent discussing a shared client or general correspondence, where the ICBC claim representative has not scheduled the call and is not present for the meeting.

Fee table

| Line item | Fee | Additional Information |
|-------------------|------------------------|---|
| Care plan meeting | \$5/5-minute increment | <ul style="list-style-type: none"> • Time spent by the health care provider in preparation for the care plan meeting is not billable |

Rehabilitation assistance services provided by Kinesiologists

Kinesiologists providing rehabilitation assistance or life skills services must adhere to the rehabilitation assistant rates outlined in the [Rehabilitation Assistant](#) section of this fee guide.

Telephone consultation

Funding for telephone consultations requires explicit pre-authorization from ICBC. **Telephone consultations will only be funded for customers with a date of crash on or after May 1, 2021.**

The telephone consultation fee has been established to support cooperation between health care providers and ICBC, or between treating health care providers where direct conversation is necessary to address functional limitations or recovery barriers.

The following will not be funded as telephone consultations:

- administrative or routine correspondence and communication;
- correspondence or communication pertaining to invoicing, reports, records, or treatment plan clarification or authorization;
- correspondence or communication regarding perceived or actual supplier performance issues;
- time involved with leaving a voice message;
- correspondence or communication between providers located within the same facility engaging in regular business practices, such as rounds;
- any written correspondence;





- time spent by the health care provider in preparation for the telephone consultation; and correspondence or communication time for customers with a date of crash prior to May 1, 2021.

Fee table

| Line item | Fee | Additional Information |
|-------------------------------|---------------|---|
| Telephone consultation | \$15 flat fee | <ul style="list-style-type: none"> Explicit funding authorization must be obtained from ICBC prior to the telephone consultation This is a flat fee for telephone consultations up to 15 minutes in duration When using the HCPIR application or the Health Care Provider Portal, the provider must input "15" into the "minutes" field Telephone consultations in excess of 15 minutes will not be approved unless there are exceptional circumstances; the health care provider must engage the ICBC claim representative to discuss further funding approval |

Travel & mileage fees

ICBC does not pay travel or mileage fees for providers who provide treatment out of a facility owned or leased by, or that is otherwise affiliated with or controlled by the provider/firm or on their premises.

When a provider has to travel to an appointment that is taking place at an outside facility, such as a community/recreational centre, mileage and travel time is to be calculated between the facility and the closer of: the provider's primary residence OR the nearest clinic location (whether the primary location or a satellite location).

Fee table

| Line item | Fee | Additional Information |
|--------------------|------------|---|
| Travel time | \$0.65/min | <ul style="list-style-type: none"> One unit = 60 minutes of travel time using the HCPIR/HCPP Actual travel time for treatment purposes must be billed by the decimal hour (for example: twelve minutes of travel time is 12/60 = .20. Enter .20 into HCPIR/HCPP for \$7.80 of travel time) up to a maximum of 60 minutes total per treatment session Travel and mileage must be allocated so that travel time and mileage to a location where multiple customers, ICBC or otherwise, are treated, the cost is shared across those clients/claims in an equal manner |
| Mileage | \$0.47/km | |

Mileage and travel time example: travel time of 20 minutes to and 22 minutes from the treatment location and a total of 24 km. Two clients are seen at the same location. In this case, half of the travel time and half of the mileage is billable to either client. For example, total travel time of 42 minutes = .7 of an hour: bill .35 per client. Total mileage of 24 km: bill 12 km per client. If the second client is not an ICBC customer, the cost sharing must still be applied.

