



## **Physiotherapy Services**

(as of 22 December 2006)

| Service code | Service   | \$      |
|--------------|---|---------|
| PA001        | Initial Consultation  | Set Fee |
|              | A consultation with the physiotherapist including the following elements —  | \$59.55 |
|              | Subjective assessment   |         |
|              | Major symptoms and lifestyle dysfunction; current history and treatment; past history and treatment; pain, 24-hour behaviour, aggravating and relieving factors; general health, medication, risk factors.  |         |
|              | Objective assessment  |         |
|              | Movement – active, passive, resisted, repeated; muscle tone, spasm, weakness; accessory movements, passive intervertebral movements etc. Appropriate procedures/tests as indicated.   |         |
|              | Appropriate initial management, treatment or advice   |         |
|              | Provisional diagnosis; goals of treatment; treatment plan. Discussion with the patient regarding working hypothesis and treatment goals and expected outcomes; initial treatment and response; advice regarding home care including any exercise programs to be followed. |         |
|              | <b>Documentation of consultation</b>  |         |
|              | Recording all of the above in the clinical record of the patient, as well as: x-ray and results of other relevant tests and warnings (if applicable).   |         |
|              | Includes individual services provided in rooms, home or hospital; hydrotherapy treatment; extended treatments; and services provided outside of normal business hours.  |         |
|              | Includes courtesy communication by the physiotherapist with the medical practitioner such as acknowledgement of referral.   |         |
|              | Includes the physiotherapist's brief communication with the medical practitioner regarding the injured worker's management.   |         |

"Workers' compensation and injury management – protecting workers and employers in WA"





Does not include any verbal or written communication by the physiotherapist with a third party initiated by or requested by the insurer and/or the employer relating to the treatment or rehabilitation of a specific worker (such as suitable work duties).

Communication by the physiotherapist with a third party initiated by or requested by the insurer and/or the employer has a specific item number in this table (PK001).

Does not include the physiotherapist's involvement in case conferences. The physiotherapist's involvement in case conferences has a specific item number in this table (PQ001).

## PB001 Standard Consultation

**Set Fee** \$47.80

Consultation for one body area or condition including the following elements —

Subjective re-assessment

Objective re-assessment

Appropriate management, treatment or advice

## **Documentation of consultation**

Includes individual services provided in rooms, home or hospital; hydrotherapy treatment; extended treatments; and services provided outside of normal business hours.

Includes courtesy communication by the physiotherapist such as brief verbal and/or written updates to the medical practitioner.

Does not include any verbal or written communication by the physiotherapist with a third party initiated by or requested by the insurer and/or the employer relating to the treatment or rehabilitation of a specific worker (such as suitable work duties).

Communication by the physiotherapist with a third party initiated by or requested by the insurer and/or the employer has a specific item number in this table (PK001).

Does not include the physiotherapist's involvement in case conferences. The physiotherapist's involvement in case conferences has a specific item number in this table (PO001).

## PC001 Two distinct areas of treatment per visit

Set Fee

Same description as PB001 except relates to the treatment/management of 2 distinct areas/conditions

\$60.45





| PG001 | Group Consultation – per person   | Cost per<br>participa        |
|-------|---|------------------------------|
|       | Includes non-individualised services provided to more than one individual whether —   | <b>nt</b><br>\$14.70         |
|       | in rooms, home or hospital  |                              |
|       | hydrotherapy treatment  |                              |
|       | extended treatments   |                              |
|       | services provided outside of normal business hours  |                              |
| PE001 | Worksite Visit  | Hourly rate**                |
|       | Does not include reports or travel  | \$135.80                     |
|       | Maximum duration of visit of 2 hours without prior approval from insurer.   |                              |
| PR001 | Reports   |                              |
|       | Any report required by or requested by —  |                              |
|       | Medical Specialist  |                              |
|       | Medical Practitioner  |                              |
|       | Employer  |                              |
|       | Insurer   |                              |
|       | relating to a specific worker   |                              |
|       | Excludes unsolicited reports from the physiotherapist and courtesy communication such as acknowledgement of referral and brief updates to the   |                              |
|       | medical practitioner.  Progress/Standard report   | Set Fee                      |
|       | Report should contain summarised information or assessment findings, treatment services provided, results obtained with specific recommendations for further management and return to work if applicable. | \$59.55                      |
| PR002 | Comprehensive report  | Hourly rate**                |
|       | As above for progress/standard report and contains information relating to more detailed assessments and interventions performed.   | \$135.80                     |
|       | The hourly rate is to be negotiated with the insurer with a suggested maximum of 2 hours.   |                              |
| PT001 | Travel (within metropolitan area)   | Set Fee                      |
|       | Outside metropolitan area to be negotiated prior to consult with insurer  | \$33.85<br>per<br>journey to |
|       | If a physiotherapist consults with more than one worker before leaving a venue, the fee for the journey   | a venue                      |





|       | is to be apportioned equally between workers.  |   |  |  |  |
|-------|--|---|--|--|--|
| PQ001 | Case Conferences  Face-to-face or telephone communication involving the physiotherapist with one or more of the following — doctor, employer, insurer/claims manager,  |   | \$13.60<br>Calculated<br>per<br>6 minute           |  |  |
|       | rehabilitation providers and worker  The aim of the case conference is to plan, implemanage or review treatment options and/or rehabilitation plan.  | ement,                                    | block.   |  |  |
| PK001 | Communication  |   |  |  |  |
|       | Any verbal communication by the physiotherapist with<br>a third party initiated by or requested by the insurer<br>and/or the employer relating to the treatment or<br>rehabilitation of a specific worker (such as suitable<br>work duties).   |   | \$13.60<br>Calculated<br>per<br>6 minute<br>block. |  |  |
|       | Does not include unsolicited communication from the physiotherapist.   |   |  |  |  |
|       | Maximum time allowable per communication ominutes.   | of 30                                     |  |  |  |
| PS001 | Specific Physiotherapy Assessment – Prior approval from insurer required   | Hourly Rate**<br>\$135.80                 |  |  |  |
|       | Includes specific types of assessments not classified elsewhere in the table/ <i>Gazette</i> required by the insurer which physiotherapists may undertake (eg. diagnostic ultrasound imaging, Functional Capacity Assessments (FCE's), seating and wheelchair assessments).  | Max duration of service provision 2 hours |  |  |  |
| PW001 | Specific Physiotherapy Intervention –<br>Prior approval from insurer required  | Hourly Rate**                             |  |  |  |
|       | (*replaces PD001)  | \$135.80                                  |  |  |  |
|       | Includes treatments not classified elsewhere in the table/ <i>Gazette</i> required by the insurer which physiotherapists may undertake (eg. treatment of severe multiple area trauma, burns, neurologically injured patients and patients with severe spinal injuries, ergonomic corrections of workplace, specialised real-time ultrasound imaging, short consultations). | Max duration of service provision 2 hours |  |  |  |

<sup>\*\*</sup> Denotes that where the service provided is a fraction of one hour, the amount chargeable is to be calculated as that fraction of the maximum amount.