

## **Professional Fees Guideline - Physiotherapists**

This guideline is issued pursuant to Subsections 14 (4), 15 (6), 17 (2) and 24 (2) of the *Statutory Accident Benefits Schedule - Accidents on or After November 1, 1996* (SABS) and applies to expenses incurred on or after November 22, 1997.

### **Purpose**

This guideline sets out the maximum rate or amount of expenses for the services of a physiotherapist that an insurer is liable to pay for:

- a medical benefit under Subsections 14 (2) (b) or (h) of the SABS;
- a rehabilitation benefit under Subsections 15 (5) (a) to (g) or 15 (5) (l) of the SABS; or
- conducting an examination or assessment or providing a certificate, report or treatment plan under Subsection 24 (1) (a) of the SABS.

### **Fees for Physiotherapists**

The range of fees for services provided by physiotherapists is \$95.00 per hour to \$120.00 per hour for direct (one on one) treatment time (including administrative time such as report writing, treatment plan preparation, inter-professional and professional-insurer consultations).

The range of fees per unit (15 minutes) of service is \$23.75 to \$30.00.

Where a physiotherapist's bill falls within the range of fees, it should be based on the physiotherapist's assessment of their practice outcomes and on objective and verifiable data, not on overhead, professional certification, accreditation or other factors.

### **Physiotherapy Utilization Guidelines for Soft Tissue Disorders of the Spine**

Where applicable, physiotherapists and insurers should consider the clinical intervention and duration of treatment set out in the Physiotherapy Utilization Guidelines for Soft Tissue Disorders of the Spine that were published in The Ontario Gazette on November 22, 1997 pursuant to Section 268.3 of the *Insurance Act*.