

POLICY NUMBER: POL-25

Chapter:
CLAIMS

Subject:
CHIROPRACTIC SERVICES

Effective Date:
November 15, 1994

Last Update:
August 9, 2018

PURPOSE STATEMENT:

The purpose of the policy is to explain how the Workers Compensation Board determines an injured worker's entitlement to chiropractic services and to outline treatment approval.

REFERENCE:

Workers Compensation Act R.S.P.E.I. 1988, Cap. W-7.1, Section 18
Chiropractic Act R.S.P.E.I., 1988, C-7.1.
Workers Compensation Board Policy, POL-64, Health Care Providers

DEFINITION:

In this policy:

“Chiropractic treatment” means the provision of any professional service usually performed by a chiropractor, and includes the prevention, diagnosis, and treatment of biomechanical disorders of the neuro-musculoskeletal system by methods that include the use of imaging, laboratory and clinical diagnostic procedures; joint manipulation or other manual therapies; exercise and patient education; without the use of prescription drugs or surgery.

“Impairment” means a medically measurable permanent anatomical loss or disfigurement and includes, amputation, loss of vision, loss of hearing, impaired nerve function, scarring causing disfigurement, joint ankylosis, or joint fusion from surgery.

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“Pension” means an award based on a medically assessed disability awarded by the Workers Compensation Board prior to January 1, 1995 and was paid in recognition of a permanent partial or total disability.

“Recurrence” means a return of a work injury that is reasonably related to a previous work-related accident and from which the worker has previously recovered or plateaued. Recurrence of the injury must be medically compatible with the previous injury and may include additional loss of earnings, as supported by objective medical information.

“Return to work” means modified duties, alternate duties or tasks, or ease back, including approved employer-initiated ease backs. Return to work includes transition from light, alternative or modified duties and modified or alternative work.

“Supportive care” means treatment that is therapeutically necessary for workers, who have reached their maximum recovery from a work related injury, to maintain a maximum level of recovery. Supportive care would only be considered after the appropriate application of active and passive care either from health care providers or through lifestyle modifications.

“Work conditioning” is an exercise based rehabilitation program designed specifically to restore function, improve strength and endurance, and provide education to increase the capacity of a worker to return to work.

“Work hardening” is an individualized, job specific program of daily education and activity with the goal of return to work. Work Hardening programs use real or simulated work tasks and progressively graded conditioning exercises that are based on the individual’s measured tolerances.

POLICY:

Guiding Principles

1. The Workers Compensation Board is committed to providing medical aid that focuses on injury recovery and facilitates a worker remaining at work or returning to work in a safe and timely manner.
 2. The Workers Compensation Board recognizes chiropractic treatment as an acceptable form of medical aid when it is provided by a licensed Chiropractor recognized as a health care provider by the Workers Compensation Board.
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3. Chiropractors are considered primary care providers and can be selected by workers as their principal provider of care for a compensable injury. Chiropractic treatment can also be provided following a referral by a physician.
4. The Workers Compensation Board will establish a service standard and a fee schedule agreement with the Prince Edward Island Chiropractic Association.
5. Chiropractic treatment shall promote the principle of functional restoration and shall focus on injury recovery to enable a worker to remain at work or to return to work in a safe and timely manner.
6. The Workers Compensation Board recognizes that education is an important component of chiropractic treatment and expects the treating chiropractor to provide education to an injured worker on the following:
 - appropriate care and treatment goals;
 - self-management to include a home exercise program;
 - prevention of re-injury; and
 - benefits of remaining at work or safe and timely return to work.

Worker Responsibilities

7. The injured worker is required to attend all scheduled chiropractic treatment appointments. Temporary wage loss benefits may be reduced, suspended, or terminated if a worker fails to attend scheduled chiropractic treatment.

The worker is required to comply with a home exercise program when recommended as part of chiropractic treatment and to participate in appropriate physical activity to avoid deconditioning during recovery from a workplace injury.

Treatment Approval

8. To support timely provision of treatment for a new injury, the Workers Compensation Board will approve payment of an initial assessment by a Chiropractor where a worker has filed a Workers Report (Form 6) with the Board.
9. Following the initial assessment, the Chiropractor will contact the Workers Compensation Board to establish approval for payment of treatment and will provide an injury diagnosis in order for the Board to determine the number of treatments approved

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for payment and the associated timeframe.

10. The Workers Compensation Board will approve treatment based on credible, evidence-based disability guidelines and shall advise the Chiropractor of the number of treatments approved for payment and the associated timeframe.

The Workers Compensation Board is not responsible to pay for treatment beyond the initial assessment unless the WCB has pre-approved payment of further treatment.

The Workers Compensation Board is not responsible to pay for treatment that exceeds the amount approved.

11. The Board will notify the Chiropractor where it determines it is not responsible for providing benefits to a worker (for example, if a claim is not accepted) and shall not be responsible for payment of treatments beyond the date of notification.

Supportive Care

12. Supportive care chiropractic treatment may be appropriate to enable a worker to maintain function at a maximum level of recovery.

The Workers Compensation Board will approve payment of supportive care treatment where a worker:

- has incurred an impairment or is awaiting an impairment assessment as a result of a work related injury; or
- is a pre-1995 pensioner.

Supportive care chiropractic treatment includes up to one initial assessment and twelve chiropractic treatments in a twelve-month period. A written request from a treating chiropractor may be required.

Recurrence of a Previous Compensable Injury

13. Where a worker files a claim for a recurrence of a previous compensable injury, the chiropractor will complete and submit an initial assessment report including a current diagnosis.

The Workers Compensation Board may approve treatment if the current diagnosis is

determined to be compatible with the original compensable injury. Treatment beyond an initial assessment will not be approved until the claim is adjudicated. The worker may pay for chiropractic treatment and submit receipts for consideration for reimbursement if the claim is approved. If costs are eligible for reimbursement, the amount of treatment for which costs are reimbursed will be based on the evidence based disability guidelines used by the Workers Compensation Board.

Work Conditioning and Work Hardening Programs

14. Work conditioning and work hardening programs must provide objective functional information and ongoing goal setting, and will consist of treatment over a specific period which, where possible, should occur in conjunction with a return to work.

A worker must have a documented return to work date or be in an active return to work prior to approval for work conditioning or work hardening.

The Workers Compensation Board may request a medical examination from a treating physician to support a request for work conditioning or work hardening.

If determined to be appropriate, work conditioning and work hardening will be approved based on the evidence based disability guidelines used by the Workers Compensation Board.

HISTORY:

August 9, 2018 – Non-substantive changes to definitions.

June 20, 2018 – Non-substantive changes to definitions.

September 26, 2016 - Non-substantive changes to align with amendments to other policies approved by the Board of Directors.

July 28, 2016 - Non-substantive changes to reflect amendments to definitions approved by the Board of Directors.

March 31, 2016 - Amended to provide clarification related to chiropractic treatment entitlement and approval, and to reflect the Workers Compensation Board's service agreement with the Prince Edward Island Chiropractic Association.

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September 30, 2009 - Amended to clarify the Workers Compensation Board requires that chiropractic treatment be pre-approved.

February 12, 2004 - Amended to ensure the policy is clear with respect to approval of supportive care, extensions of treatments, recurrences, and in limited circumstances physiotherapy treatment in conjunction with chiropractic services.

July 19, 2001- Replaces Policy and Practice "Chiropractic Treatment" dated November 15, 1994.

Board of Directors Approval Date: November 15, 1994