



October 2023

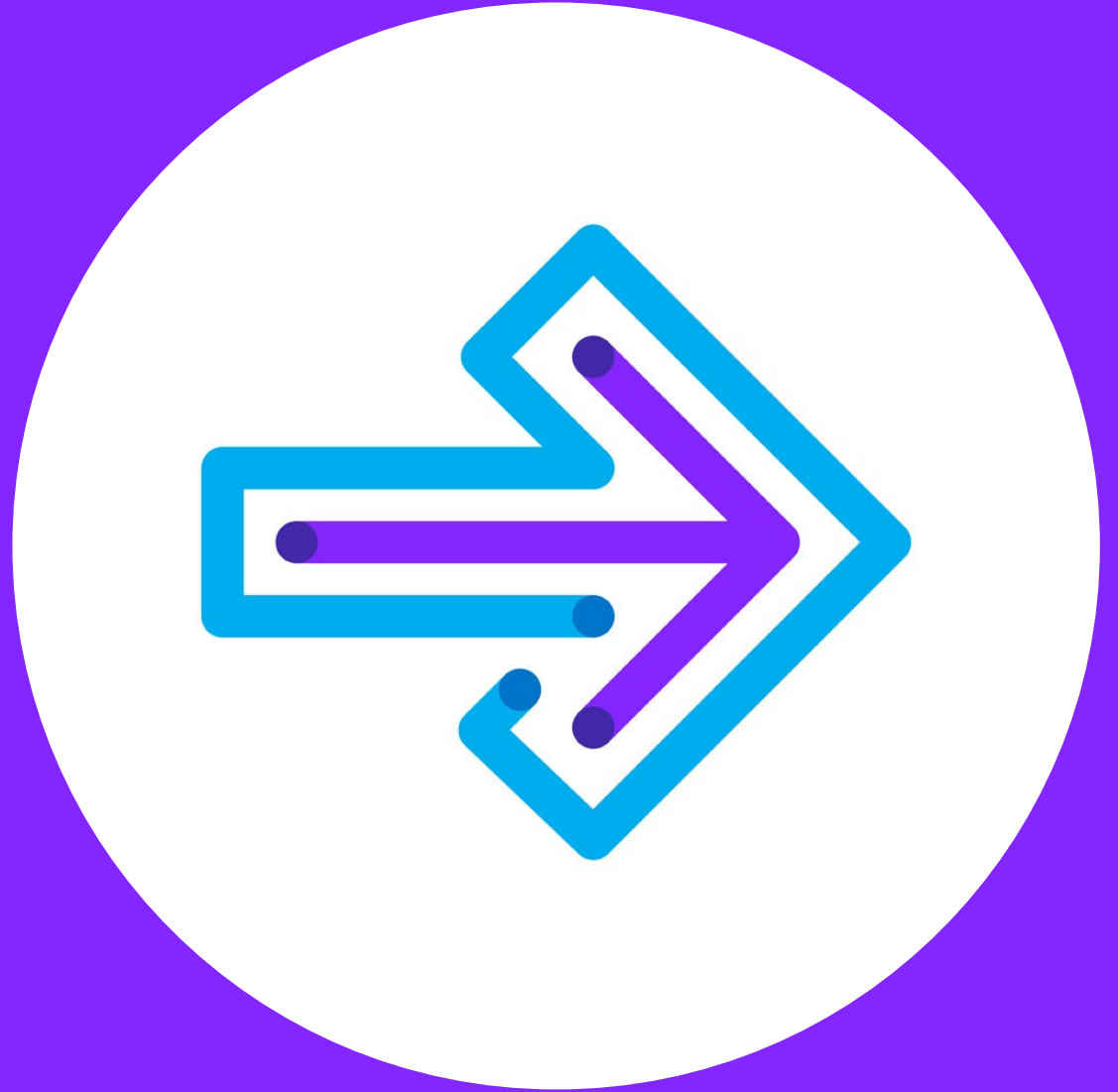
# Working with ICBC: For Psychologists

# Table of Contents



- 1 ICBC funded Psychology services**
- 2 ICBC Vendor number application requirements**
- 3 Funding considerations**
- 4 Treatment plan templates and Progress reports**
- 5 Roles & Responsibilities**
- 6 Frequently asked questions**
- 7 Resources**

# 1. ICBC funded Psychology services



# ICBC Fees for Psychology services

Line item	Fee	Applicable
Initial assessment visit & report (as per Insurance (Vehicle) Regulation)	\$383/visit & report	Visit on or after April 1, 2023
Standard treatment (as per Insurance (Vehicle Regulation))	\$219	Visit on or after April 1, 2023
Progress Report	\$80	Report date on/before July 31, 2023
Progress Report	\$219	Report date on / after August 1, 2023
Care Plan meeting	\$15/5 minute increment	Any accident date
Telephone Consultation	\$30 flat fee	Accident date on/after May 1, 2021
Travel	\$1.63/minute	Psychologists submitting approved travel time invoices for exposure-based therapy
Mileage	\$0.47/km	Psychologists submitting approved mileage invoices for exposure-based therapy

<https://www.icbc.com/partners/health-services/providers/Documents/ICBC-fee-guide-for-health-care-providers.pdf>



**2. Vendor number application requirements**



# ICBC Vendor Number



- Direct billing relationship with ICBC
- Access to the Health Care Provider Invoicing and Reporting application and the Health Care Provider Portal for invoicing, reporting and treatment plans
- Confirm that ICBC health care provider business partners have met the minimum standards of requirements to qualify for this direct billing privilege



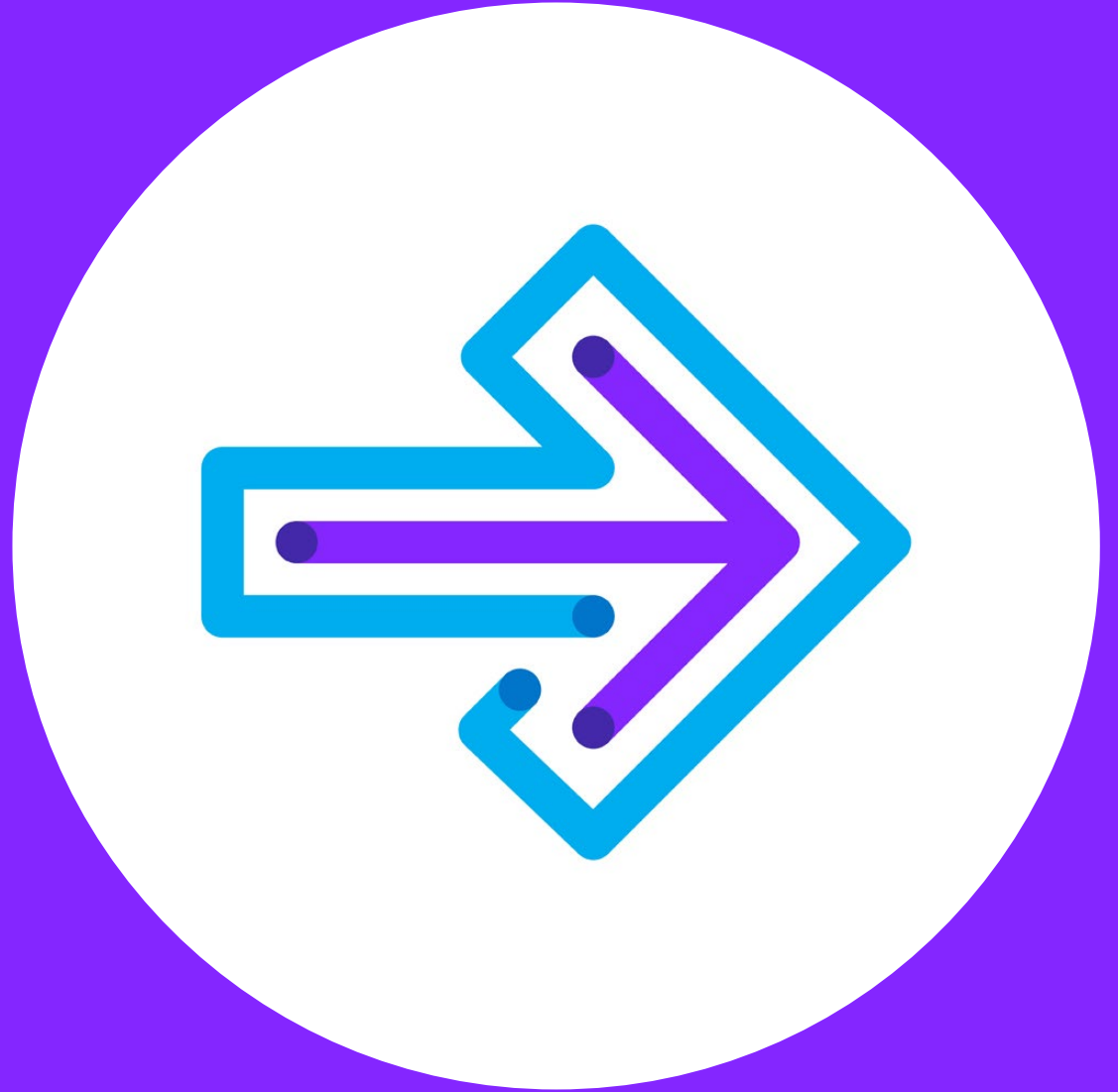
# Apply for or update a direct billing vendor number

The screenshot shows a web page with a blue header 'Health services' and a breadcrumb trail: Home » Health services » Invoicing and reporting » Apply for or update a direct billing vendor number. On the left is a navigation menu with items like 'Enhanced Care', 'Apply for or update a direct billing vendor number', 'Invoicing and reporting', 'Treatment plan', 'Disability advocacy organizations', 'Health care providers', 'Physicians', 'Vocational rehabilitation', and 'Contact us'. The main content area is titled 'Apply for or update a direct billing vendor number' and contains an information icon with text: 'Our Supplier Programs Coordinators are in the process of emailing vendors to request documentation to reconcile accounts. Please note: If you are treating ICBC customers prior to receiving an approved ICBC vendor number or a practitioner addition request approval, you are required to collect payment directly from the customer for those services. We will not accept backdated invoicing for services provided prior to notification of an approved ICBC vendor number.' Below this is a green heading: 'Apply for a vendor number or add a practitioner to an existing vendor account' and a paragraph: 'Ensure to review all requirements listed in the document links below prior to applying for a vendor number or applying to add a practitioner to an existing vendor account. If your application does not include all of the required documents and meet all of the qualifications, it will be rejected and you will need to re-apply.' At the bottom are two green boxes with buttons: 'ICBC vendor number application requirements' with an 'Apply for a vendor number' button, and 'Applying to add practitioners to an existing vendor account' with an 'Add a practitioner to a vendor account' button. A note says 'To log in, you'll need a vendor number and PIN.' On the right is a 'Vendor number resources' section with links: 'Vendor number account FAQs', 'Health service vendor account/change (CL174G)', 'Vendor programs privacy checklist (CL174M)', 'Authorization for direct bank deposit (ACG364)', and 'Occupational therapist participation agreement'.

<https://www.icbc.com/partners/health-services/invoicing-reporting/Pages/vendor-number.aspx>



### 3. Funding considerations





# Early Access Period



For the first 12 weeks after a crash, your patients can get treatment with the following health care practitioners:

Type of practitioner:	Number of approved treatments:
Acupuncturist	12
Chiropractor	25
Counsellor	12
Kinesiologist	12
Massage Therapist	12
Physiotherapist	25
<b>Psychologist</b>	<b>12</b>

# ICBC Funding considerations after the early access period:

To be considered for funding, the treatment must:

1. be necessary or advisable,
2. contribute to the rehabilitation, lessen the disability, or facilitate recovery from the crash, and
3. be goal oriented, evidence-informed and clinically justified.
4. be for injuries directly related to the crash.

**TIP:**

Early access period:  
(within first 12 weeks  
after a crash)



# How to initiate care after the early access period?



There may be situations when a customer seeks treatment outside of the early access period. Funding must be approved by ICBC prior to commencing treatment.

*If the early access period (the first 12 weeks following a crash) has passed*

**Step 1:** Contact a claim representative by phone or email to request approval for the number of standard treatments required (up to four) to assess the customer's injuries.

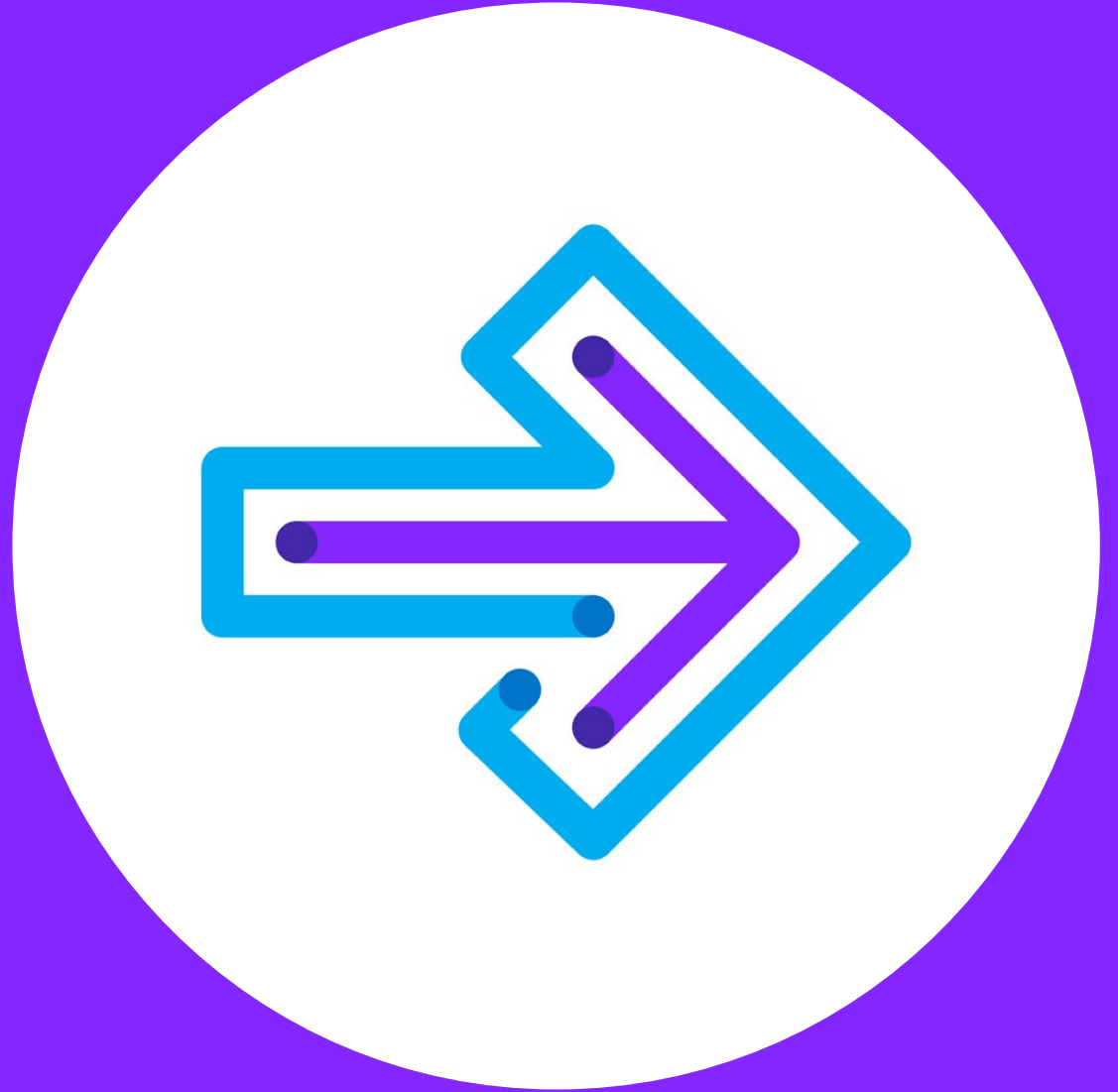
**Step 2:** Invoice for the approved and completed session(s) via the HCPIR/HCPP

**Step 3:** If additional treatment is recommended, submit a completed Treatment Plan form via HCPIR/HCPP.

Note: If, in your assessment, you identified information that we should be aware of, you are encouraged to request a conversation with the claim representative.



## 4. Roles & Responsibilities



# The Recovery Specialist Roles



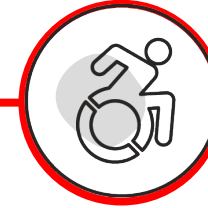
## Support and Recovery Specialist

- Operates in a team and shared case file environment.
- Responsible for facilitating access to treatment and health care services to recover from non-complex injuries (no loss of work or functional abilities).
- Administer benefits and promote early intervention through interactions with customers and health care providers and proactively engage with customers to help them return to function.



## Senior Support and Recovery Specialist

- Support customers in their return to work/function.
- Use critical thinking to understand customer's baseline level of function, support recovery goals, facilitate a return to function plan and identify recovery milestones based on functional improvements.



## Advanced Support and Recovery Specialist

- Support customers navigating treatment and healthcare services following a crash that results in severe or catastrophic injuries, where return to pre-injury function is not likely or not possible.

# Roles & Responsibilities – Treatment Plans



## Psychologist

Completes the Mental Health treatment plan form by capturing the customer's:

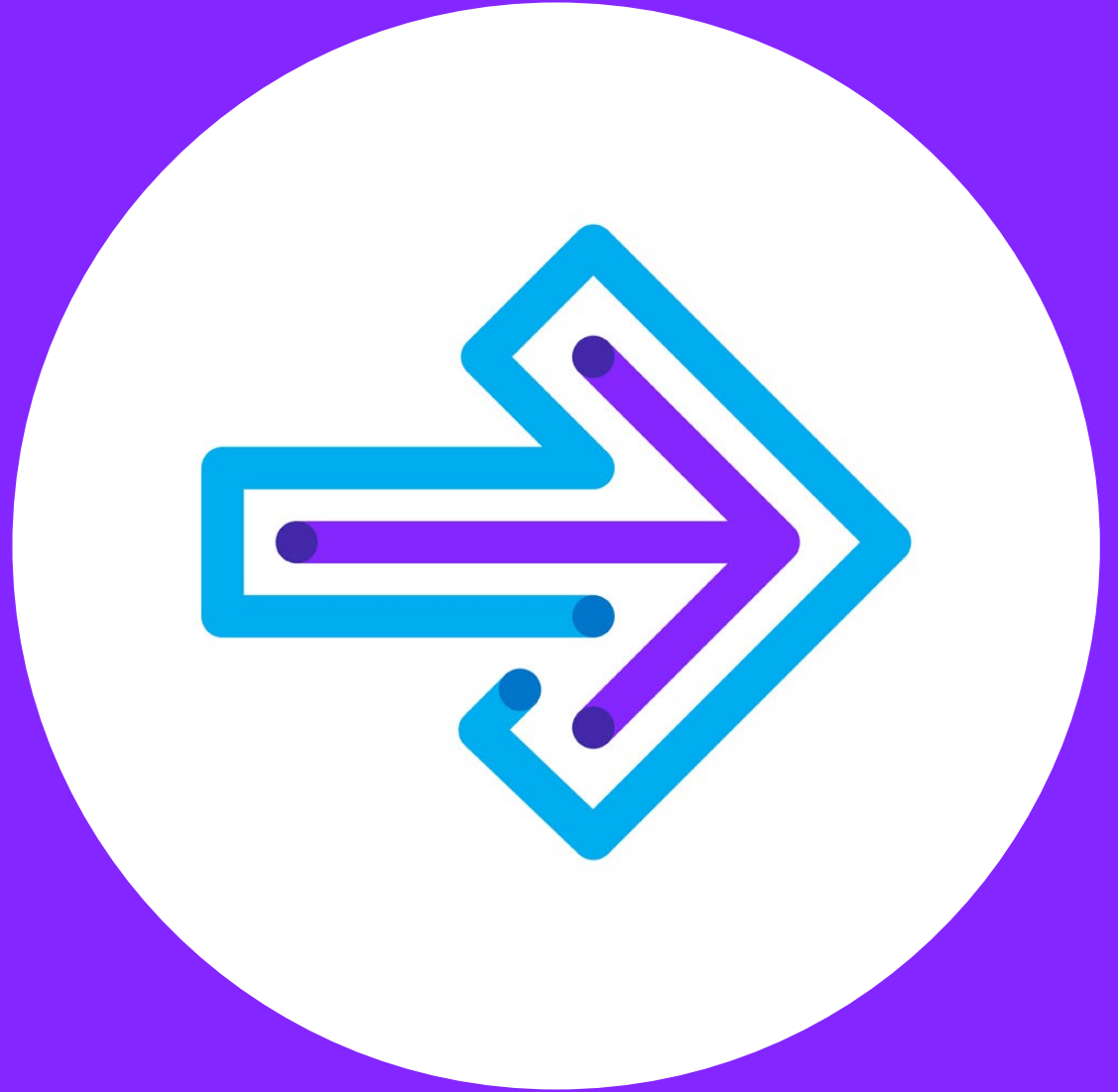
- functional goals,
- nature and duration of the recommended treatment plan for achieving functional goals,
- progress in treatment and functional goals to be made, when additional treatment is requested, and
- barriers to recovery and plans to address them.

## ICBC Claim representative

Reviews the treatment plan form to make a funding decision that is timely, fair & consistent by:

- reviewing other available information, (reports, notes, consults with the customer and their health care team,
- using other resources such as: care plan meetings, telephone consults, ICBC Clinical Advisory Group, case conference (if required),
- communicating the decision and rationale to the Psychologist within 5 business days.

## 5. Treatment Plans and Progress reports



# ICBC Treatment Plans

**TIP:** To prevent a disruption in care, submit a completed treatment plan as soon as you recognize that the ICBC customer would benefit from care beyond the early access period.

## They document:

- ✓ our customers' recovery progress to date
- ✓ the functional outcomes that they will achieve with further treatment
- ✓ other factors that may be contributing to our customers' recovery

## The information:

- ✓ enables timely and informed benefit decisions
- ✓ provides knowledge of the active interventions that are planned to achieve the customer's functional goals



# New ICBC Treatment Plan templates

In effect since  
June 10, 2023

ICBC implemented three new treatment plan templates

1. Physical modalities (Acupuncture, Chiropractic, Kinesiology, Massage, Physiotherapy)
2. **Mental health (Counselling, Psychology)**
3. Occupational Therapists

The re-design of the Treatment plan was in response to the feedback we received about the old treatment plan, which took too much time to complete. ICBC and leads from the Associations provided input during the development of the new Treatment Plan form that allows the health care provider to relay the information ICBC needs to make treatment funding decisions in a quicker and more streamlined way.

With drop down menus & check boxes there is a reduced need for open text boxes and the time required to complete.



# Treatment Plan and Progress Report

## TREATMENT PLAN (non-compensable)

- Proactively submitted by Psychologist when treatment is being recommended outside Early Access Period.
- Used to document client's progress to date and the functional outcomes anticipated with further treatment.

## Progress Report \$219 fee

- Psychologist is required to submit upon request from ICBC under Section 28 or 28.1 of the *Insurance (Vehicle) Act*.
- Requested when the customer remains off work or is demonstrating signs of delayed recovery, or barriers to recovery.
- A comprehensive summary of the customer's progress towards meeting functional goals.

# Submit invoices and reports from the invoicing and reporting web page



## Health Care Provider Portal

To log in, you'll need a vendor number and PIN.

The Health Care Provider Portal will help you submit invoices quicker, and you'll have the ability to:

- Auto-populate customer information (e.g., customer name, PHN)
- View the status of invoice submissions
- View the status of your payments from ICBC

If you do not have a PIN and would like one, please contact the HCIU to have a PIN provisioned to you.

Launch the  
Health Care  
Provider Portal

## HCPIR Application

Vendors with a vendor number may still choose to submit documentation through the HCPIR application. However, this option does not include the same features as the Health Care Provider Portal.

Entering your patient's PHN is optional; however, doing so will improve the timeliness of your payment by matching the submission to the correct patient in ICBC's claim system.

To improve payment timelines, ensure you are entering the patient's legal first name, legal last name and date of birth as displayed on their B.C. driver's licence or BC Services Card.

[Launch the HCPIR Application](#) <sup>Ⓔ</sup>

[www.icbc.com/partners/health-services/invoicing-reporting/Pages/default.aspx](http://www.icbc.com/partners/health-services/invoicing-reporting/Pages/default.aspx)

## 6. Frequently asked questions



**Question:** How much time should I be spending on a Treatment Plan?

**Answer:** ICBC's estimate is that it should not take too long, about 10-15 minutes to complete the Treatment plan. We recognize that it might take more time to complete the first one, but over time it will get easier.



**Question:** Is the process for requesting funding for treatment the same regardless of the date of the crash?

**Answer:** The requirements for Treatment plan forms is the same, regardless of the crash date.



**Question:** What is the process I should follow if my plan was partially approved, or denied - who do I contact?

**Answer:** If you disagree with a decision or your plan **was partially approved**, or denied, please talk to the claim representative to understand why.

If you have further questions the claim representative cannot answer, or, remain unsatisfied with their response, you can ask to talk to their manager. Following that conversation, if you still disagree, please take your concern to your Association for review and feedback.

Your contact at the Association can provide guidance and coaching and if necessary, and will contact ICBC's Relationship Specialist for further input.



**Question:** I sometimes don't get a timely response on the treatment plan I submitted. What is a reasonable amount of time to wait for a response?

**Answer:** You can expect a response to your treatment plan or inquiry within five business days for Enhanced Care files (there is more of delay right now for older files).

If you haven't had a response by then, please contact the claim representative on file first, and if no response, reach out to the Health Care Inquiry Unit for support.





## 7. Resources



# Resources for you – Contacting ICBC



## Contact Us

If you are unable to resolve your issue after viewing our Health Services site, you have several ways to reach us:



### Health Care Inquiry Unit (HCIU)

Available by phone or email which can be found on the Contact Us page.

#### Ask us about:

- Billing and invoicing
- Claim information
- HCPIR application
- Health Care Provider Portal
- PIN provisioning
- Treatment plans

Email: [HealthCareInquiry@icbc.com](mailto:HealthCareInquiry@icbc.com)

Hours: Monday to Friday, 8:30AM – 4PM PT

Lower Mainland: 604-587-7150

Toll-free: 1-888-717-7150



### Claims Vendor Inquiry Unit (CVIU)

Available by email. Response time is within 4 business days.

#### Ask us about:

- Payment status
- Specific payment information
- Payment Statements
- HCPIR submission errors
- Financial document receipt verification

Email: [claimsvendorinquiry@icbc.com](mailto:claimsvendorinquiry@icbc.com)

Thank You!

