

Workers Compensation Board of Manitoba

Physiotherapy Manual

June 2015



TABLE OF CONTENTS

Introduction.....	2
Overview of Workers Compensation.....	3
Governance of The Workers Compensation Board.....	4
WCB Organizational Structure	5
WCB Benefits	7
General Principles of Adjudication	9
Fundamental Questions	9
Particular Injury Situations.....	10
Examples of Situations Not Covered by the WCB	11
Healthcare Legislation and the WCB	12
Personal Health Information	13
Treatment Philosophy	14
Treatment of Uncomplicated Soft Tissue Injuries	14
Clinical Practice Guidelines	14
Outcome Measures	14
Administrative Processes	16
Treatment Process and Reports	16
WCB Healthcare Reports	18
Fees	18
Billing Instructions	18
Physiotherapy Remittance Statements	19
Who to call at the WCB	21

WCB Physiotherapy Manual

Introduction

The Workers Compensation Board of Manitoba (WCB) strives to provide the best possible healthcare services for its clients. We work with our partners to promote safe and healthy workplaces, recovery from injury or disease, return to work, compassionate and supportive compensation services for injured workers, and to ensure responsible financial stewardship.

Physiotherapy treatment should be timely, effective, and meet the needs of all parties involved. Therapy should be active, aimed at facilitating an injured worker's early recovery, safe return to work, and minimize risk of recurrence.

This document provides an overview of the workers compensation program, including its history, legislation, board structure, and decision or adjudicative principles. It also includes information about personal health information, payment and billing processes, and other day-to-day administrative information.

References and website links are provided for more information at the WCB website. If you have questions or concerns about any part of this document, please do not hesitate to contact us. Simply call the WCB's enquiry line at 204-954-4922 or toll free at 1-800-362-3340 and ask to speak with a WCB Physiotherapy Consultant or fax your questions to 204-954-4167.

OVERVIEW OF WORKERS COMPENSATION

Although there have been many variations in the compensation program over the years, a Canadian compromise was struck in the early twentieth century and is essentially maintained to this day. Injured workers, including those suffering from an occupational disease, give up their right to sue their employers in exchange for guaranteed no-fault benefits; and employers pay for the compensation system in exchange for protection against lawsuits.

In addition, the original principles have expanded and are embedded in current legislation:

- ***Immunity of employers and workers from civil action*** – Injured workers gave up their right of legal action in return for guaranteed benefits and employers agreed to pay for the compensation system in exchange for protection against lawsuits. This historic compromise removes the formality of court proceedings and allows for the quick handling of compensation matters without unnecessary cost and uncertainty;
- ***Compensation for injured workers and their dependants, regardless of fault*** – Benefits are paid to injured workers or their dependants regardless of contributory negligence on the part of the worker or employer;
- ***Collective financial responsibility of employers for workplace injuries and diseases*** – All employers share responsibility for the costs of the system. Compensation is paid by the WCB and does not depend on an employer's ability to pay WCB premiums;
- ***Income replacement benefits based upon loss of earning capacity*** – Injured workers receive income replacement based on a calculation of wages lost as a result of the workplace injury or illness. Under the current *WCA*, injured workers receive 90% of their net loss of earning capacity.
- ***Independent administration by an arm's length agency of the government*** – The WCB assumes responsibility for the collection of employer contributions and the provision of benefits to injured workers and their dependants;
- ***Prevention of workplace injuries and diseases*** – The WCB and the Workplace Safety and Health Division of the Government of Manitoba work together to help prevent workplace injuries and illnesses from occurring;
- ***Timely and safe return to health and work*** – Injured workers receive optimum recovery through effective healthcare treatment paid for by the WCB. In addition, the WCB partners with employers, workers and healthcare providers to help injured workers return to work in a timely and safe manner;
- ***Support for accident prevention*** – The WCB works to create awareness of the need for safe work practices, provides grant funding for research and programs that prevent occupational accidents and illnesses, and recognizes improved injury experience in the setting of assessment rates.

WCB Physiotherapy Manual

- ***Inquiry Model*** - It is not the responsibility of an injured worker to prove a compensation claim, nor is it the responsibility of the employer to help prove or disprove a claim. Rather, the WCB is obligated to investigate the circumstances of an injury or illness and decide whether or not compensation benefits are appropriate under the *Workers Compensation Act (WCA)*.
- The WCB ensures that sufficient information has been gathered to evaluate a case and make a decision. ***Workers, employers, and healthcare professionals are required to report to the WCB.*** The WCB then makes any additional inquiries that are necessary to determine eligibility for compensation benefits.
- ***Balance of Probabilities*** - Decisions on the entitlement to benefits are made on the basis of the balance of probabilities. The evidence gathered about a compensation issue must show that it is “more likely than not” that the injuries or illness are related to the workplace injury. Some workers compensation acts in other jurisdictions contain “benefit of the doubt” provisions favouring the worker. In Manitoba there is no such statutory benefit of doubt favouring the injured worker or the employer. Each case in Manitoba is decided individually.

GOVERNANCE OF THE WORKERS COMPENSATION BOARD

The WCB is a statutory corporation created by the Manitoba Legislature in *The Workers Compensation Act* of Manitoba: [The Workers Compensation Act of Manitoba](#). The WCB operates at arm’s length from government. The WCB’s funding is obtained by charging employers assessments rather than through receipt of provincial tax revenues.

The Board of Directors is the centre of the governance structure for the WCB. It is comprised of a chair, three representatives of workers, three representatives of employers, three representatives of the public interest and the WCB’s Chief Executive. For more information visit:

[Board of Directors, Governance and Executive Committee](#)

WCB Physiotherapy Manual

WCB ORGANIZATIONAL STRUCTURE

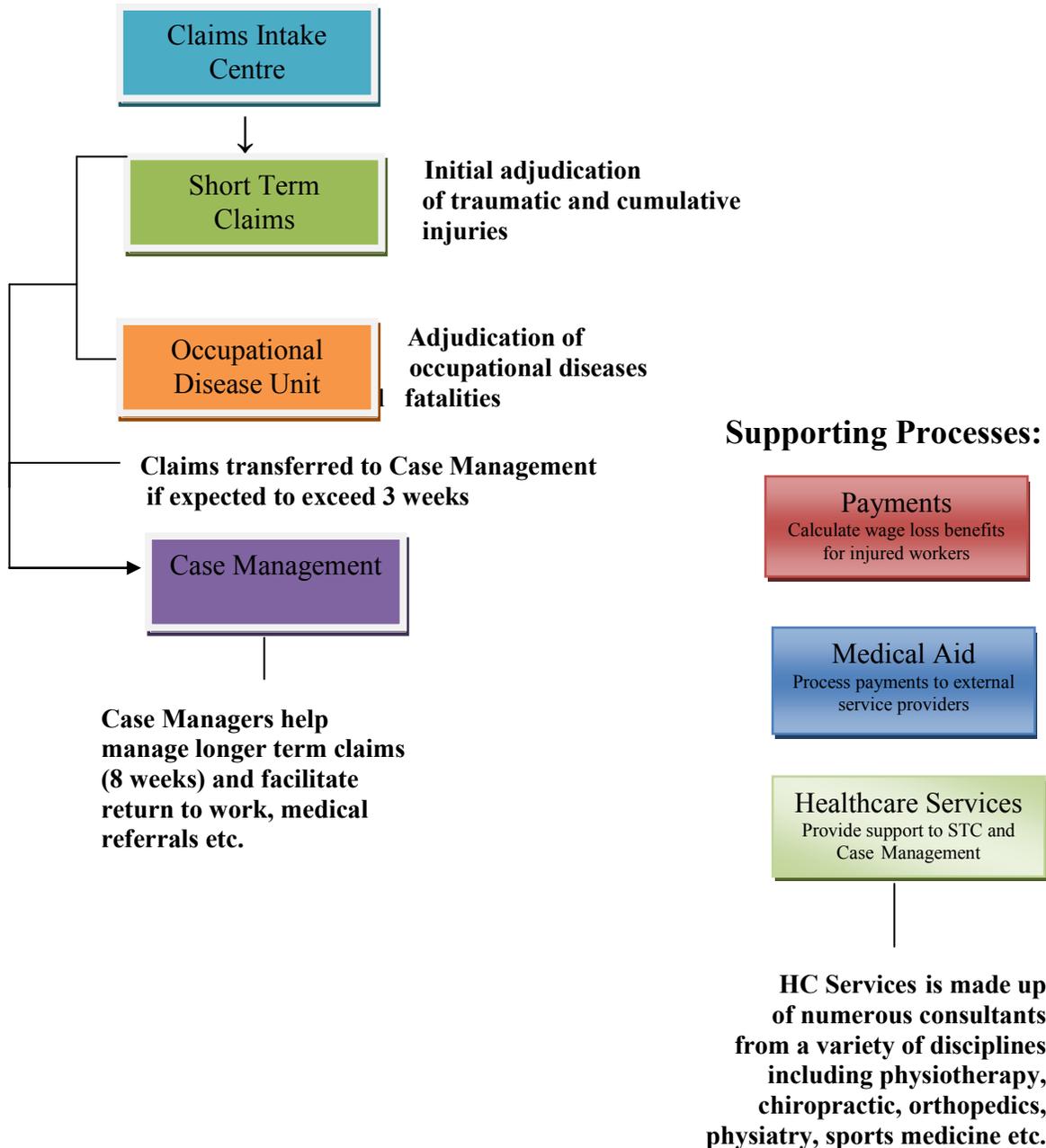
The Short Term Claims Department, comprised of adjudicators, is responsible for the initial review and investigation of all new claims that are reported. Claims acceptance and associated decisions regarding entitlement to benefits are made here. Most claims resolve within a few days or weeks, but in those cases where a claim surpasses eight weeks in duration, the adjudicator transfers the claim to Case Management. Short Term Claims and Case Management are distinct departments. Case managers are responsible for the ongoing management of claims beyond the eight week mark. They facilitate the injured worker's return to work, as well as, assist with issues regarding their medical care.

The WCB Healthcare Department is comprised of a variety of contracted healthcare professionals from different backgrounds whose main responsibility is to provide support to Short Term Claims and Case Management staff. They help to clarify any medical matters involving injured workers for internal staff, they review and provide authorization for various requests for treatment and liaise with external healthcare professionals. WCB Healthcare Advisors have the benefit of being able to review medical information submitted by all treating healthcare practitioners in the community, but may also arrange to examine injured workers at the WCB when deemed appropriate.

The Medical Aid Department is responsible for the review and payment of invoices from external service providers.

It is important for physiotherapists to remember this structure so that questions or concerns can be efficiently directed to the appropriate department.

WCB Organization Structure



WCB Benefits

Applicable Legislation

Once entitlement to compensation benefits is established, WCB's main role of providing wage loss benefits, vocational rehabilitation, permanent impairment awards and healthcare benefits begins.

[The Workers Compensation Act \(WCA\) Legislative Overview 2009](#)

Wage Loss Benefits

Under the current *WCA*, injured workers receive 90% of their net loss of earning capacity. Beginning with gross earnings, deductions are made for probable income tax, employment insurance and Canada Pension Plan contributions. This figure is called the net average earnings.

Under the *WCA*, employers must pay the lost wages for the full day when the injury happens. Afterwards, the WCB pays wage-loss benefits for the duration of time the worker remains injured and unable to return to work.

Wage loss calculations can be complex. Injured workers should be referred to the WCB for assistance.

Vocational Rehabilitation Services

Vocational rehabilitation services may be offered to an injured worker if the injury or disease prevents the workers from returning to their job. The goal of vocational rehabilitation is to help the worker to achieve a return to sustainable employment in an occupation which reasonably takes into consideration the worker's post-injury physical capacity, skills, aptitudes and, where possible, interests. Vocational rehabilitation strives to return workers to the salary level they were earning before the injury or illness.

To meet these objectives, the following solutions will be considered and pursued in the sequence below:

- a. Return to the same work with the same employer.
- b. Return to the same work (modified) with the same employer.
- c. Return to different work with the same employer.
- d. Return to similar work with a different employer.
- e. Return to different work with a different employer.
- f. Vocational retraining.

WCB Physiotherapy Manual

Impairment Awards

Injured workers who suffer a permanent impairment to a body function may be eligible for a monetary award based on the percentage of impairment of the whole body.

[WCB Policy 44.90.10 Permanent Impairment](#)

Medical Aid Benefits

The cost of healthcare resulting from a workplace injury is paid by the WCB from an accident fund which is created through premiums received from covered employers.

GENERAL PRINCIPLES OF ADJUDICATION

FUNDAMENTAL QUESTIONS

1. Is the person an insured worker?

The WCB must first determine whether or not the injured worker is from an industry that is covered by workers compensation insurance. Injured workers are covered under the *WCA* and are entitled to compensation benefits even if a covered employer has not paid assessments to the WCB. Similarly, injured workers do not have the right to sue their employers in covered industries even if the employer has not paid assessments.

2. Is the employer in a covered industry?

To be entitled to coverage, an injured worker must be working for an employer in a covered industry.

3. Is there personal injury?

The WCB has the jurisdiction under the *WCA* to determine whether a person's physical or psychological injury is related to a workplace accident. Usually it is not difficult to establish that a personal injury has occurred. However, the key issue that must be determined is whether or not the personal injury or ongoing symptoms are related to a workplace accident. This can sometimes be challenging when the onset of symptoms is gradual and not related to a specific event. The WCB uses medical evidence provided by healthcare professionals to help make this determination.

4. Was there an accident?

The definition of "accident" in the *WCA* means a chance event occasioned by a physical or natural cause, including intentional acts, events arising out of and in the course of employment, and occupational diseases.

5. Did the accident arise out of and in the course of employment?

Workers compensation is not a general insurance program that covers injuries that happen at home or during recreational activities. The injury must be related to employment. The incident must have happened at work, or while working for the employer, or carrying out one's employment duties.

PARTICULAR INJURY SITUATIONS

1. *Injury on employer's property*

Workers are covered from the time they arrive to work until the time they leave, providing the worker is onsite for job-related reasons. A worker is covered if there is a hazard on the employer's property, such as an icy parking lot. A worker who is visiting another employer's property or travelling on work business is also covered.

2. *Preexisting conditions*

Two situations may arise:

Aggravation: a work-related injury that aggravates a pre-existing or underlying condition for a temporary period may be accepted; however, the benefits are limited to the period of temporary aggravation.

Enhancement: if the work-related injury makes the pre-existing condition permanently worse, the WCB will accept responsibility for the full injurious result of the accident.

[WCB Policy 44-10-20-10 Pre-existing Conditions](#)

3. *Recurrence*

If a worker has trouble working due to the effects of a previously accepted work-related injury, this is generally considered a recurrence and a new claim does not need to be filed with the WCB. However, the worker and the healthcare professional must report the recurrence to the WCB. A case manager will then review the situation to make sure it is WCB responsibility and related to the original claim.

4. *Stress*

If the stress is caused by an acute reaction to a major traumatic event at work (e.g. robbery, assault) then benefits may be paid; however, stress related to personnel actions (such as demotion, discipline or lay-off) is not covered by the WCB.

WCB Physiotherapy Manual

EXAMPLES OF SITUATIONS NOT COVERED BY THE WCB

1. Injuries that happen outside of work	Injuries that take place during leisure time are not covered.
2. Traveling to and from work	Although there may be exceptions, traveling to and from work is not covered.
3. Diseases that are not work related	Often the cause of a disease is multi-factorial. If the workplace was the dominant cause of the disease, the WCB will cover occupational disease. All possible causes (lifestyle, heredity, etc.) must be considered.
4. Preexisting conditions	The WCB only covers injured workers for a disability caused by a workplace injury. If a workplace injury makes a non-work-related condition (such as strained back from playing sports, for example) worse, the WCB will only cover the effects of the workplace injury. Once those effects have resolved, benefits will stop.
5. Subsequent, unrelated injuries or diseases	If an injured worker is receiving WCB benefits, and suffers another injury or disease (such as heart attack, stroke, etc.) that is not related to work, the WCB continues benefits for as long as the work related injury could reasonably be considered a factor in the person's inability to work.
6. Serious and willful misconduct	If a worker is aware of a safety rule at the workplace and chooses to ignore it, the worker may not be eligible for benefits for the first three weeks of disability.
7. Risking re-injury	A worker with a history of recurrent injuries due to a particular type of work may be offered rehabilitation by the WCB in order to obtain alternate employment. If a worker refuses rehabilitation or returns to the risky work after receiving retraining, he or she may not be eligible for benefits if future injuries occur.

HEALTHCARE LEGISLATION AND THE WCB

The main sections of the *WCA* regarding the provision of healthcare services are set out in the statutory form below:

Duty of those providing care to an injured worker:

20 Every healthcare provider, hospital or health care facility that provides care to a worker who has been injured in an accident within the scope of this Part must (a) provide reports in respect of the injury in the form and manner required by the board; and (b) give reasonable and necessary information, advice and assistance to the injured worker and the dependants of the worker in making application for compensation, including any certificates and reports that may be required by the board, without charge to the worker or the dependants of the worker.

Provision of medical aid:

27(1) The board may provide a worker with such medical aid as the board considers necessary to cure and provide relief from an injury resulting from an accident.

Medical aid to be under supervision of board:

27(10) Medical aid furnished or provided under any of the preceding subsections of this section shall at all times be subject to the supervision and control of the board; and the board may contract with healthcare providers, hospitals or other healthcare facilities for any medical aid required, and agree on a scale of fees or remuneration for any such medical aid.

Fees for medical aid

27(11) The fees or charges payable for medical aid and medical reports (a) shall be fixed by the board; and (b) shall not be more than the board considers reasonable and proper for service rendered to a worker; and no action lies for an amount larger than is fixed by WCB.

PERSONAL HEALTH INFORMATION

Healthcare professionals providing reports ask about the WCB's right to collect, use and disclose the patient's personal health information. The WCB is subject to the provisions of *The Freedom of Information and Protection of Privacy Act* ("FIPPA") and *The Personal Health Information Act* ("PHIA"). FIPPA and PHIA provide rules regarding the collection, use, and disclosure of information. However, the *WCA* permits the WCB to collect information from workers and their dependants, employers, healthcare practitioners and others in order to fulfill its mandate. ***It is important that healthcare providers report injuries to the WCB when they believe the injury arose from, or in the course of, the patient's employment. The physiotherapist is paid for the initial assessment and report even if the claim is ultimately not accepted.***

[The Personal Health Information Act](#)

Trustees:

Both the WCB and physiotherapists are "trustees" under the definitions in the *Personal Health Information Act* (PHIA):

Definitions

[1\(1\)](#) In this Act,

"trustee" means a health professional, healthcare facility, **public body**, or health services agency that collects or maintain personal health information.

Collection:

The WCB is permitted under PHIA to collect personal health information for the purpose of determining entitlement to and providing compensation benefits to injured workers: s. 13(1) PHIA

Physiotherapists are permitted by PHIA and required by the *WCA* to provide reports about the treatment of injured workers to the WCB. From the physiotherapist's point of view, disclosing information and reports to the WCB is permissible under PHIA, without the need to obtain formal consent from the injured worker, under subsection 22(2):

Disclosure without individual's consent

[22\(2\)](#) A trustee may disclose personal health information without the consent of the individual the information is about if the disclosure is

(g) for the purpose of

(i) delivering, evaluating or monitoring a program of the trustee that relates to the provision of healthcare or payment for healthcare, or

(o) authorized or required by an enactment of Manitoba or Canada.

TREATMENT PHILOSOPHY

TREATMENT OF UNCOMPLICATED SOFT TISSUE INJURIES

In the WCB's view, the primary goal of physiotherapy is to assist the injured worker in reaching the functional level required to return to work. In addition, the WCB expects physiotherapists to promote self-management of the injury to prevent long term dependence on physiotherapy or medical treatment.

The physiotherapy rehabilitation plan should include education about the diagnosis and self-management of the injury. A physiotherapist's role as educator and specialist in the assessment and treatment of musculoskeletal injury is a key component of early intervention and the prevention of chronic injuries. Once soft tissue healing is sufficient, treatment should emphasize progressive functional exercises specific to the worker's job demands.

CLINICAL PRACTICE GUIDELINES

The WCB supports the Canadian Physiotherapy Association's (CPA) position of using evidence based practice ([Canadian Physiotherapy Association Position Statements](#)). Physiotherapist's treatment and rehabilitation plans should use current evidence and best practices to return injured workers to health and work in a timely manner.

CPA has published a "Practice Guidelines Inventory" - an inventory of resources to assist physiotherapists when researching evidence-based and best-practices: [CPA Professional Resources](#)

OUTCOME MEASURES

It is very important to determine whether or not treatment is proceeding as planned. The use of outcome measures has been demonstrated to be a useful standard in reporting changes in disability perceptions.

Outcome measures, in the form of self-report disability, are completed by the injured worker and scored by the physiotherapist.

At the initial assessment, the physiotherapist should select at least two outcome measures for the claimant to complete. The scores should be included in all WCB reporting forms. The same measures should be repeated regularly throughout the treatment period.

WCB Physiotherapy Manual

Outcome measures (see Appendix "A") recommended for use are the following:

Pain Intensity:	1. Numeric Pain Rating Scale (NPRS)
Disorder Specific:	2. Roland Morris Back Pain Questionnaire
	3. Neck Disability Index (NDI)
	4. Lower Extremity Activity Profile (LEFS)
	5. Disabilities of the Arm, Shoulder and Hand (DASH)
Generic Functional Status:	6. Health Status Disability

These outcome measures have been chosen because they are available online from Canadian Physiotherapy Association, are well researched, and are simple to complete and to score.

[CPA Online Database of Outcome Measures](#)

The WCB uses the scores reported from the outcome measures to assess the relationship between subjective perceptions of disability and the objective assessments of functional improvement. The relationship can be summarized in the diagram below:

If there is functional improvement	and the perception of disability is...	then....
Yes	Better	Recovery or return to work is imminent.
Yes	Worse	Patient may show early signs of pain focus, fear of re-injury, or workplace issues. More education may be required.
No	Better	Risk of re-injury; worker may believe to be physically more capable than the clinical findings indicate. Further evaluation required.
No	Worse	Clinical status of soft tissue injury is unchanged or worsening. Further evaluation required.

The WCB supports continued physiotherapy treatment when there is measurable evidence of a sustained improvement of function as determined by validated outcome measures and the movement towards return to work.

ADMINISTRATIVE PROCESSES

TREATMENT PROCESS AND REPORTS

In order to prevent the worker financial hardship and unnecessary distress, it is essential to provide timely and complete reports.

1. An injured worker contacts a physiotherapist for the first time after an injury.
 - Use the [WCB - Physiotherapy Initial Assessment Form](#).
 - Complete all sections of the report, including outcome measures.
 - Submit the report within one week of the initial assessment to the WCB:

Attn: Case Manager
Workers Compensation Board
333 Broadway • Winnipeg R3C 4W3
Fax: Winnipeg: 9544999
Fax: Toll free: 18778723804

*** Do not use email when sharing personal health information.**

2. Multi-site treatment will be considered for two (or more) distinct anatomical sites. An additional fee can be billed in these cases but must be preapproved by the WCB.
 - Check the "multi-site treatment" box on the WCB Initial Assessment form.
 - Fax forms to the WCB:
3. The WCB Initial Assessment form is scanned electronically and added to the injured worker's WCB claim file.
 - A WCB case manager or adjudicator then reviews the report. A request that a WCB physiotherapy consultant review and provide treatment recommendations may also occur.
 - The case manager or adjudicator then informs the injured worker and physiotherapy clinic of the coverage decision.
4. If coverage is approved, the WCB will cover the cost of one initial assessment plus 14 follow up treatments.
 - The initial assessment and report will be paid for even if the claim is not approved.
 - Funding beyond 20 treatments will **not** be covered without pre-approval.

WCB Physiotherapy Manual

5. If treatments are required beyond 20 visits, prior WCB approval is required.
 - Make a request for additional treatments at approximately the 15th visit.
 - Use the [WCB - Physiotherapy Progress/Discharge Form](#)
 - Fax the extension request to the attention of the case manager
 - Treatments beyond 20 visits without WCB approval will not be funded. If further treatment is approved, the facility can resume billing on the date of notification.
 - The WCB responds to requests for additional treatment as soon as possible, but approval may be delayed for a variety of reasons including:
 - a pending WCB medical or physiotherapy examination;
 - adjudicative review;
 - delays related to outstanding reports; etc.
 - If a decision is pending, approved treatments have been exhausted, and it is felt that continuity of treatment is critical in the rehabilitation of an injured worker, please contact the case manager directly, or ask to speak to a WCB physiotherapy consultant. Efforts will be made to expedite the review when appropriate.
6. A case manager or adjudicator can authorize up to three additional physiotherapy visits, beyond the first 20, without review by the WCB's physiotherapy consultant.
 - Only use this process if discharge is expected by the 21st visit.
 - Send authorization requests to the case manager by fax or phone.
 - Treatment should not proceed until authorized by the WCB.
7. Post-operative physiotherapy will automatically be authorized upon specialist referral.
 - Surgery must have been authorized by the WCB.
 - Clinics do not have to apply for post-operative funding.
 - Submit the Initial Assessment Form within one week of commencing physiotherapy.
 - The post-operative course of physiotherapy includes one assessment and 20 (maximum) treatments.
 - Unused visits from a pre-operative course of treatment cannot be carried over.
8. The WCB should be informed of any change in physiotherapy facility. A full course of treatment at a new facility may not necessarily be approved if treatment already commenced elsewhere.

WCB HEALTHCARE REPORTS

Physiotherapy reports are available online at www.wcb.mb.ca.

[WCB - Physiotherapy Initial Assessment Form](#)

[WCB - Physiotherapy Progress-Discharge Assessment](#)

These forms can be filled out on your computer and printed. Patient information cannot be stored electronically with these forms. Healthcare providers can then send the printed form to the WCB by fax or regular mail.

Fax in Winnipeg: 2049544999

Fax outside of Winnipeg: 18778723804

Forms cannot be emailed to the WCB due to privacy concerns.

FEES

Fees are negotiated between the Manitoba Branch of the Canadian Physiotherapy Association (MBCPA) and the WCB. Please refer to the current agreement for a copy of the fee schedule.

Physiotherapists and other healthcare professionals cannot "extra bill" an injured worker. Under section 27(1) of the *WCA*, the fees payable for medical aid and medical reports shall not be more than the WCB considers reasonable for services rendered to an injured worker. As well, no civil legal action can be taken against an injured worker or the WCB for an amount larger than is set out in the fee schedule by the WCB.

Physiotherapists who cannot provide care to injured workers at the negotiated rates should notify the WCB that injured workers will not be treated.

BILLING INSTRUCTIONS

Please submit invoices bi-weekly or monthly.

- Address invoices to

Attn: Medical Aid Department
Workers Compensation Board
333 Broadway • Winnipeg R3C 4W3

Fax: 2049544999

Fax Within Canada Toll Free: 18778723804

Telephone: 2049544922

Within Canada Toll Free Telephone: 18003623340

WCB Physiotherapy Manual

Please be sure to include the following information with the invoice:

Invoice type.....	Must include....
All invoices ...	Injured worker's full name
	WCB claim number
	Clinic registration or billing number
Treatment invoices ...	Dates of treatment
	WCB approved fee (i.e. initial assessment or subsequent treatment)
Invoices for reporting forms...	Date the report was completed
Invoices for goods or supplies...	Description of the item
	Amount
	Name of WCB staff person who authorized purchase of the item.

PHYSIOTHERAPY REMITTANCE STATEMENTS

A remittance statement provides information for healthcare service providers about payments that either have been processed, are pending approval, or claims that have not been approved. This allows both WCB and service provider to keep track of which invoices and treatments have been paid and which are waiting for WCB approval.

The WCB's Medical Aid department processes invoices for payment. Remittance statements are prepared automatically by the WCB's financial systems and issued at time of payment.

When an invoice for physiotherapy services is received by the WCB's Medical Aid Department, a staff person enters the invoice details onto the payment portion of the injured worker's electronic claim file.

Approved invoices appear as paid costs on the remittance statement. If the claim is approved, the payment is released. If the claim is not approved, the statement will indicate that it was disallowed (previously pending). A notice of overpayment will appear when a physiotherapy treatment has been paid in error.

WCB Physiotherapy Manual

Claim status...	Note that appears on the remittance statement...
Accepted	Paid cost
No decision yet	No payment processed/pending adjudication
Denied	Previously pending - now disallowed
Mistaken claim number or other error	Overpayment

If you have questions about your remittance statement, contact the adjudicator/case manager handling the file, or the Medical Aid department.

WCB Physiotherapy Manual

WHO TO CALL AT THE WCB

WCB STAFF	QUESTION	TELEPHONE CONTACT
WCB General Inquiries:		204-954-4922 Within Canada Toll Free: 1-800-362-3340
Physiotherapy Consultant:		
	Medical/physiotherapy management	Attn: WCB Physiotherapy Consultant
	Need for WCB examination	204-954-4922
	Treatment concerns or pending/delayed decisions for additional treatment	Within Canada Toll Free: 1-800-362-3340 Fax: 204-954-4167
Adjudicator or Case Manager:		
	Attendance issues	204-954-4922 Within Canada Toll Free: 1-800-362-3340
	Claim acceptance	
	Job descriptions	
	Physical demands analysis	
	Return to work plans or concerns	
	Treatment extension requests (Approval for up to three additional treatments when appropriate)	
Medical Aid :		
	Invoices	Medical Aid Assessor 204-954-4800
	Payments	Fax: 204-954-4999 Toll Free Fax: 1-877-872-3804
	Remittance Statements	