



# *Nova Scotia College of Chiropractors*

## *Guidelines: Recommended Maximum Fees*

<i>Approved by the Board of the NSCC</i>	<i>Effective May 19, 2001</i>	<i>Revised June 11, 2005 January 12, 2008</i>	<i>Pages 5</i>
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### **1. Fee Schedule**

The fees for the following chiropractic services are approved by the Nova Scotia College of Chiropractors as recommended maximum fees (RMF).

a.) Initial consultation/examination (\$100.00)

The large majority of first evaluations will be Initial or Primary Examinations. For a new or established patient, the appointment shall comprise a full case history of the presenting complaint, a detailed inquiry concerning the complaint and detailed examination of the affected area as required to:

- (i.) establish a clinical impression or diagnosis;
- (ii.) advise the patient on a recommended course of treatment or treatment options (including, when appropriate, referral to another health care professional)

b.) Extended initial consultation/examination (\$165.00)

For a new or established patient shall comprise an initial examination as described above but in circumstances where this is extended to a more detailed examination, or an examination of multiple areas or injuries, or where the complaint(s) is (are) of a complicated nature necessitating significantly more time and a comprehensive examination to establish a clinical impression or diagnosis and a plan of management.

c.) Re-examination / Re-assessment / Re-evaluation (\$75.00)

This can refer to an inactive case which requires review of history and examination for current complaints or health concerns, or existing or current patient presents with a new injury or complaint, or evaluation of a current patient at periodic intervals to assess progress to date, and determine need to continue treatment, modification of care or treatment frequency, discharge or referral. Also refers to additional assessment of a case which requires extra time or a subsequent appointment to allow for completion of the examination due to the complicity of the case or multiple areas of complaint.

d.) Treatment/office visit (\$60.00)

Refers to a patient presenting for treatment or an appointment which requires discussion and/or examination. Treatment may include, but is not limited to, specific chiropractic manipulation/adjustments.

e.) Emergency appointment

The fee for professional services (i.e.: Initial Consultation/Examination or Treatment) provided outside of regular posted office/clinic hours will be twice the fee charged for a similar service provided during normal clinic hours.

f.) Home visits

Fee for professional or emergency services (i.e.: Initial Consultation / Examination or Treatment) provided at the home of a patient or at a site other than the practitioner's usual office/clinic. The RMF for such services will be twice the fee charged for a similar service provided during normal clinic hours. No additional fee for mileage.

g.) Missed appointments

Appointments scheduled by a patient and not attended without reasonable notice being given may result in a patient's account being assessed a fee equal to the value of the service which had been scheduled.

h.) Professional Consultation Fees

The practitioner, as with any health care professional, will establish a fee for professional consultation services which is reasonable and justifiable. This fee would apply, but is not limited to, the following situations:

(i.) Telephone/Office Consultation

Opinion, advice or discussion regarding evaluation and/or management of a specific problem is requested by a patient, another chiropractor or third party (with appropriate authorization) may also include coordinating of evaluation and/or management care with other providers, agencies or appropriate sources. Any such requests should be documented in the patient's record along with any advice and services described and/or recommended.

(ii.) Detailed case report/medico-legal report

At the request of the patient, third party payer, agency, legal counsel or other appropriate source, a detailed case report, such as medico-legal reports and narratives to insurers, may be prepared with respect to the patient's case. Prior to preparation and release of such a report, authorization by the patient must be received and kept in the patient's file. Consideration for review of the file and documentation and report preparation - all aspects of time spent in arriving at a final report - are included in the fee. Reports are to be single-spaced with standard margins.

(iii.) Preparation and court appearances as witness

This fee applies, and is not limited to, reviewing the patient's file and any documentation provided, time spent in discussions with the attorney for the patient or another member of their firm, and any requested appearance at any level of the litigation process, including, but not limited to, any meetings, discoveries, trials, disciplinary procedure, formal or informal hearing, or any such process where the attendance of a chiropractor is requested. In the event of a practitioner being required to appear as a witness at a discovery, hearing, or trial, the practitioner may establish a half-day or full-day fee. The lawyer should be advised of the practitioner's fee schedule at the time the request for an appearance is received. The practitioner must advise of any cancellation fees pertaining to

any scheduled meetings, conferences, discoveries, hearings or trials. The request for such services must be kept on record, along with any documentation of the information presented at the appearance. Travel expenses, associated with a practitioner's attendance, are reimbursable and in addition to any professional consulting fees.

(iv.) Auto/personal injury insurance form (\$40.00 - \$80.00)

Completion of detailed insurance forms by the chiropractor, especially, but not limited to MVA-related injuries.

## **2. Additional Services**

a.) Copies - patient files

Requests for copies of pertinent clinical information contained within a patient's file must be accompanied by an appropriate signed authorization which must be kept on file. The fee for such a service may include a maximum administrative fee of \$25.00 plus copying fee of \$1.00 per page.

b.) Therapeutic and supportive products

Appropriate therapeutic and supportive products may be made available in individual offices/clinics at the discretion of the practitioner(s). These products may include, but are not limited to, exercise/rehab equipment, braces, cervical pillows, heel lifts, orthotic and orthotic shoes, ice packs and nutritional products/supplements. The fee charged will include, but is not limited to, any related professional services which are rendered and the product provided. RMF's have been established for the following products:

(i.) Orthotics (\$500)

(ii.) Orthotic shoes (\$700)

c.) Adjunctive therapy and modalities

In certain circumstances, a special fee may be established at the discretion of the practitioner for additional services.

d.) Rehabilitative services

Many aspects of rehabilitation services are an integral component of chiropractic care. Provision of rehabilitative education and/or services enhances the patient's response to chiropractic care. These services will vary depending upon the equipment and staff available at the chiropractic office/clinic. The fee for any related services will be established by each individual practitioner.

e.) Radiographs

Each diagnostic radiological procedure is comprised of a professional and a technical component.

The professional component, performed by a chiropractor, consists of:

- (i.) interpretation of the results, including the preparation of a written report, and;
- (ii.) responsibility for all aspects of quality control.

The technical component consists of:

- (iii.) provision of premises, clinical supplies, equipment, and personnel required, and;
- (iv.) preparation of patient, and;
- (v.) procedure performance, or supervising of its performance, and;
- (vi.) maintenance of appropriate records.

For a given radiological study, a chiropractor may provide the professional component, the technical component, or both.

A chiropractor taking and interpreting his/her own films, or taking and interpreting films requested by another practitioner, will bill for both the technical and professional components.

A chiropractor taking, but not interpreting, films requested by another practitioner will bill only the technical component.

A chiropractor interpreting films taken at his/her request at another location will bill only for the professional component. A chiropractor will not bill for interpreting the results of films where an interpretation has already been made and is available.



## *Nova Scotia College of Chiropractors*

### *Recommended Maximum Fees for Static or Motion Radiographic Studies*

<b>SPINE</b>		
C-spine	2-3 views	\$80.00
	3-5 views	\$110.00
	>5 views	\$130.00
T-spine	2 views	\$80.00
	>2 views	\$100.00
L-spine	2-3 views	\$80.00
	4-5 views	\$110.00
	>5 views	\$130.00
Sacrum/coccyx	2 views	\$70.00
	>2 views	\$90.00
SI Joints	2-3 views	\$70.00
Pelvis &/or hip	1 view	\$60.00
	2 views	\$80.00
	>2 views	\$100.00
Complete Spine		\$190.00
<b>LOWER EXTREMITY</b>		
Hip (unilateral)	≥2 views	\$70.00
Femur (incl. 1 joint)	2 views	\$70.00
	>2 views	\$90.00
Knee &/or patella	2 views	\$60.00
	3-4 views	\$80.00
	>4 views	\$100.00
Tibia &/or fibula (incl. 1 joint/study)	2 views	\$70.00
	>2 views	\$90.00
Ankle	2-3 views	\$70.00
	>3 views	\$90.00
Calcaneus	2 views	\$60.00
	>2 views	\$80.00
Foot	2-3 views	\$70.00
	>3 views	\$90.00
Toe	2 views	\$60.00
	>2 views	\$70.00

<b>UPPER EXTREMITY</b>		
Clavicle	2 views	\$60.00
	>2 views	\$80.00
A/C Joint	2 views	\$60.00
	>2 views	\$80.00
S/C Joint	2-3 views	\$60.00
Shoulder	2 views	\$60.00
	>2 views	\$80.00
Scapula	2 views	\$60.00
	>2 views	\$80.00
Humerus (incl. 1 joint/study)	2 views	\$70.00
	>2 views	\$90.00
Elbow (incl. 1 joint/study)	2 views	\$60.00
	3-4 views	\$80.00
	>4 views	\$100.00
Forearm (incl. 1 joint/study)	2 views	\$70.00
	>2 views	\$90.00
Wrist	2-3 views	\$70.00
	>3 views	\$90.00
Hand	2-3 views	\$60.00
	>3 views	\$80.00
Wrist & hand	2-3 views	\$80.00
	>3 views	\$100.00
Finger or thumb	2 views	\$60.00
	>2 views	\$70.00
<b>MISCELLANEOUS</b>		
Ribs	≥2 views	\$70.00
Chest	1 view	\$50.00
	>1 view	\$70.00
Abdomen	1 view	\$50.00
	>1 view	\$70.00
Skull	≥2 views	\$80.00
Sinuses	1 view	\$50.00
	>1 view	\$70.00