



Counsellor Report Completion Guide

This guide is applicable to the CL489G and CL489H only.

Purpose of Reports

ICBC requests reports (CL489G & CL489H) from counsellors for a variety of purposes, including, but not limited to the following:

- Assessing the client's psychological status with respect to injuries caused by the accident
- Establishing a baseline measure to monitor the client's care and recovery
- Evaluating the reasonability and necessity of treatment under Accident Benefits and Enhanced Accident Benefits
- Understanding the client's functional limitations, in order to develop suitable treatment plans
- Appropriately addressing barriers to the client's recovery

Report Fees

The *Insurance (Vehicle) Regulation and Enhanced Accident Benefit Regulation* establishes a fee limit for the initial assessment visit and report (CL489G), while ICBC policy has established a rate for the progress report (CL489H). The initial assessment visit and report fee is billable once.

Of note, ICBC will only provide funding for the progress report (CL489H) when the report has been requested by the ICBC claim representative. Progress reports may be requested in instances where a client is not recovering as expected, or additional barriers to recovery have been identified. ICBC will not provide funding for progress reports (CL489H) that have been completed and invoiced to ICBC when the ICBC claim representative has not requested the report.

Consent

It is important for counsellors to discuss the purpose of the medical reports with their clients and to ensure that consent has been obtained to share the report with ICBC, consistent with the counsellor's association information-sharing guidelines.

Where client consent has not been granted to share the report with ICBC, ICBC will send the counsellor a request letter (CL491) outlining applicable legislation that permits ICBC to obtain the report without client consent.

ICBC is not permitted to obtain any other reports, diagnostic test results, or clinical records without client consent.

CL489G

The CL489G is the initial assessment report completed by a counsellor and provided to ICBC immediately following the completion of an intake assessment.

Assessment: Below invoice information, client information and practitioner information, is a field titled 'Assessment Date(s)'. This section includes four different date fields, which permits a counsellor to indicate that more than one visit was needed to conduct an assessment. By providing a counsellor with up to four visits to complete an initial assessment report, the



counsellor is able to utilize an additional three visits billable at the standard treatment fee, to conduct a fulsome assessment and to ensure that the report is completed in its entirety.

For example, if a counsellor required three visits to complete the initial assessment report and obtained client consent, the first two visits would be invoiced to ICBC at the standard treatment fee per session and the third visit would be invoiced at the initial visit and report fee, as it is the third visit where the report was completed and provided to ICBC.

Visit One	Visit Two	Visit Three
Standard treatment fee	Standard treatment fee	Initial assessment visit and report fee

Duplicate invoices submitted for the same service date are subject to rejection by ICBC. Please refrain from this to expedite payment and prevent delay.

Work Status: This section requests information related to the client's employment duties and hours, in instances where the client's employment routine has changed as a result of an accident. Counsellors may use the comments box below if the drop down options do not apply.

Return to Work Planning: This section should only be completed if the client was gainfully employed at the date of crash and is not currently working, or working for modified hours/duties.

Chief Complaints: This portion of the report should capture psychological, psychosocial, cognitive and physical symptoms, as appropriate, based on subjective report from the client.

Functional Status at the Time of the Accident: This section should be completed based on observation during assessment, as well as self-report from the client. Functional status information is required in order to understand how the client's symptoms and condition are affecting their activities of daily living. This information will also assist in determining whether additional services ought to be considered to assist the client with their recovery, and will help to inform the goals and treatment plan of the client.

History of Present Illness: ICBC requests the client's pre-accident mental health history in order to determine the nature and extent of the client's injuries. ICBC is required to pay reasonable expenses incurred by the client for necessary health care services as a result of the injury. By understanding the client's condition prior to the accident, ICBC, in addition to health care providers involved in the client's care, can have a better understanding of the client's baseline status in order to monitor recovery.

Current Observed Findings: This section is based on observation of the client by the counsellor. Where the word 'appropriate' is used, the counsellor should exercise clinical judgment and professional competency in determining whether or not the client's behaviour, grooming and/or cognition appears suitable to the present circumstances.



Suicide Risk: This section is **optional**, and should only be completed in instances where the counsellor deems this information pertinent. The counsellor should indicate N/A, for not applicable, should this section not be relevant to the claim.

Psychological Assessment Methods Used: This section is **optional**, and provides counsellors who are appropriately trained with the opportunity to indicate psychological screens and measures that have been used during the assessment of the client. The counsellor should indicate N/A, for not applicable, in the comments box should this section not be relevant to the claim. Objective psychological measures may be helpful in identifying client progress in subsequent reports.

Medications: This section provides the counsellor with the opportunity to indicate the current medication regime of the client, as it pertains to the client's psychological condition.

Treatment Goals and Plan: This section provides the counsellor with the opportunity to clearly indicate up to five client-centered treatment goals. These goals should correlate with the client's symptoms, functional deficiencies and overall presentation in order to rehabilitate the client to their condition at the time of the accident. The treatment plan should be reflective of recovery barriers related to the accident, in addition to client goals. Importantly, this portion of the report is where the counsellor should indicate how the client will benefit from treatment, and what the expected outcomes might be. Additionally, the treatment plan should indicate the number and frequency of treatments requested.

Communication Request: Should the counsellor wish to speak with either the ICBC claim representative, or another health care practitioner involved in the client's care, they may indicate here.

Section 28 or 28.1 of the *Insurance (Vehicle) Act* permits ICBC to receive the above information, as it relates to the client's treatment recommendations, condition at the time care was provided and the nature and extent of the injuries, to the extent that the information is known by the counsellor.

Note: Incomplete reports may result in delays or denials in funding approval, should the ICBC claim representative not have sufficient information to authorize benefits.