

Quick Reference Fee Card

Effective July 1, 2022 through June 30, 2023

This handout is based on Washington State Dept. of Labor & Industries' Medical Aid Rules and Fee Schedules. For complete billing rules and payment policies, see www.Lni.wa.gov/FeeSchedules.

Procedure Description	Limits*	Procedure Codes	Non-Facility Fee	Facility Fee
Activity Prescription (APF) Form	Attending Physician (AP), per insurer request or self-generate (see limits*)	1073M	\$57.77	\$57.77
Chiropractic care (Level 1–3)	One per day	2050A – 2052A	\$48.38-\$75.52	\$48.38-\$75.52
Consultation including report	MD, DO, ARNP Approved Chiropractic Consultants	99241–99245 99241–99244	\$82.65-\$386.49 \$82.65-\$316.92	\$55.89 - \$328.22 \$55.89 - \$265.19
Electronic communication	Physician Non-physician	9918M	\$50.81	\$48.14
Final Report by AP	AP	1026M	\$29.37	\$29.37
Functional Capacity Evaluation Report (review)	AP, per insurer request	1097M	\$57.77	\$57.77
Impairment Rating by AP (limited to these provider types)	MD, DO, DPM, DDS. Also DCs, if approved IME examiners	1191M – 1192M	\$700.56-\$875.69	\$700.56-\$875.69
Independent Medical Exam (IME), Report review Written report post review	AP, per insurer request	1063M 1065M	\$44.45 \$33.34	\$44.45 \$33.34
Job descriptions or analysis (first one reviewed), or	AP, per insurer, employer or vocational provider (VRC) request	1038M	\$57.77	\$57.77
Job offer or analysis: each additional review	AP, per insurer, employer or vocational provider (VRC) request	1028M	\$43.34	\$43.34
Loss of Earning Power	AP, per insurer request	1027M	\$22.23	\$22.23
Occupational Disease History Report, Review of worker information and preparation of report	AP, per insurer request	1055M	\$215.60	\$215.60
Opioids: Chronic opioid request form	AP / Prescriber	1078M	\$35.56	\$35.56
Opioids: Subacute opioid request form with documentation	AP / Prescriber	1077M	\$66.68	\$66.68
Opioids: Subacute opioid request form without documentation	AP / Prescriber	1076M	\$35.56	\$35.56
Physical medicine procedures by non-physical medicine AP	6 units per claim	1044M	\$50.54	\$50.54
Reopening Application	AP	1041M	\$57.77	\$57.77
Report of Accident (ROA) or the Provider's Initial Report (PIR) Note: Add an additional \$10 to your fee when filing online.	AP, if received within: 5 business days 6–8 business days 9 or more business days	1040M	\$44.44 \$34.44 \$24.44	\$44.44 \$34.44 \$24.44 OVER

Procedure Description	Limits*	Procedure Codes	Non-Facility Fee	Facility Fee
Return to Work request, written response to	AP, per insurer, employer or VRC request – one per day	1074M	\$35.56	\$35.56
60 day report (must be in SOAPER format)	AP, one per 60 days	99080	\$51.11	\$51.11
Special Report	AP, per insurer, employer or VRC request – one per day	99080	\$51.11	\$51.11
Team conference, patient present	Physician only Non-physician	Approp. E&M 99366	Varies by code \$74.92	Varies by code \$73.14
Team conference, patient not present	Physician only Non-physician	99367 99368	\$97.51 \$64.22	\$97.51 \$64.22
Telephone calls with employer, claim manager, other providers, or \ensuremath{VRC}	Physician only Non-physician	99441–99443 98966–98968	\$100.49-\$228.92 \$23.19 – \$59.46	\$62.43-\$172.43 \$19.62-\$55.89

*Limits

AP – Attending provider: A person licensed to practice as: MD, DO, ND, DC, DM, PAC or ARNP. (PACs are paid at a maximum of 90% of the allowed fee.)

Non-physician: ARNP, PAC, PhD, PT, and OT must bill using non-physician codes.

APF Limits: A network provider may submit up to 6 APFs per worker within the first 60 days of the initial visit date and then up to 4 times per 60 days thereafter.

Note: Beyond the initial visit to file the Report of Accident, only network providers can treat injured workers. Learn more at **www.Lni.wa.gov/ProviderNetwork**.

Working with L&I

For Medical Providers: www.Lni.wa.gov/patient-care

- Authorizations and referrals
- Billing L&I (fee schedules and payment policies)
- Coverage of conditions and treatments
- Become a provider (partnerships and best practices)
- Workshops and training (free CMEs)

Billing Self-Insured Employers: www.Lni.wa.gov/SelfInsuredBilling

- Find the list of self-insured employers, including contact information
- Get help resolving billing disputes
- Note: Self-insurers must follow the same rules and fee schedules as L&I.

Attending Provider Resource Center: www.Lni.wa.gov/APResourceCenter

- What attending providers need to know
- Online CME activity for a maximum of 3 AMA PRA Category 1 Credits[™]

My L&I for Providers: www.Lni.wa.gov/MyL&I

- Find and use claim-related data (e.g. claim status, file notes, and medical reports)
- Send a secure message to the claim manager
- Use Provider Express Billing and retrieve copies of Remittance Advice
- Submit a Report of Accident online

Upon request, foreign language support and formats for persons with disabilities are available. Call 1-800-547-8367. TDD users, call 711. L&I is an equal opportunity employer.