

COHE Program Fee Schedule

Effective July 1, 2025 Administrative Fee per COHE Claim = **\$65.65**

This document is a guide and not a comprehensive, stand-alone reference for documentation and billing requirements. For complete information, please refer to L&I's Medical Aid Rules and Fee Schedules (MARFS): https://lni.wa.gov/patient-care/billing-payments/fee-schedules-and-payment-policies/

As of June 1, 2025, the HSC and SHSC payment policy is now in <u>Chapter 5: Care Coordination</u>, and best practice provider incentives payment policy is now in <u>Chapter 18: Other Services</u>. Payment policies for reports and forms such as the Report of Accident (ROA) or Activity Prescription Form (APF) can be found in <u>Chapter 21: Reports and Forms</u>.

Attending Providers Enrolled in COHE

Service Description	Code	Details	Non-Facility Fee	Facility Fee
Report of Accident (ROA) received by L&I Dates Used to Calculate "Received" Time: • "This exam date" (Box 15b) • "Date you 1st saw patient for this condition" (Box 3) Note: If both boxes are blank, payment will be lowest reimbursement amount – there must be dates in order to calculate any incentives.	1040M	Within 2 business days (standard rate x 150%)	\$69.71 RVU: 1.19	\$69.71 RVU: 1.19
		3 to 5 business days (standard rate)	\$46.47 RVU: 0.80	\$46.47 RVU: 0.80
		6 to 8 business days (standard rate minus \$10)	\$36.47 RVU: 0.63	\$36.47 RVU: 0.63
		9 or more business days (standard rate minus \$20)	\$26.47 RVU: 0.45	\$26.47 RVU: 0.45
		Online filing via FileFast or HIE provides an additional \$10 incentive. This is to encourage adoption of electronic submission. No end-date for the incentive at this time.		
Assessment of Impediments to Return to Work (RTW)				
Must be documented in a detailed SOAP-ER note and must include an action plan to address barriers.	1068M	1 per claim	\$182.42 RVU: 3.13	\$128.85 RVU: 2.21

Assessment of Impediments to RTW

COHE Advisor Services

Service Description	Code	Details	Non-Facility Fee	Facility Fee
Assessment of Impediments to RTW Must be documented in a detailed SOAP-ER	1067M Low Complexity	\$268.25 RVU: 4.60	\$210.82 RVU: 3.61	
note and must include an action plan to address barriers. Charged in addition to E/M codes.	1067M-TF Moderate Complexity	1 per claim For complexity level guidelines, refer to CPT®	\$406.02 RVU: 6.96	\$338.89 RVU: 5.81
* 1067M code series includes 10% enhancement – do not add the 8R modifier.	1067M-TG High Complexity	codes 99243-99245	\$495.49 RVU: 8.49	\$418.52 RVU: 7.18

The -8R modifier can be added to the following codes when a COHE Advisor renders the below services on a COHE attending provider claim:

- Physician Advisor:
 - o Case management/team conference (E/M code or 99367),
 - Phone call/online communication (9919M, 9918M), or
 E/M consultation (99242-99245)
- Psychologist Advisor:
 - o Case management/team conference (99366, 99368),
 - o Phone call/online communication (9919M, 9918M)

^{*} Be sure to include the additional 10% in the total charged amount when billing with the -8R modifier code.

Health Service Coordinator (HSC) Services

Service Description	Code	Details	Non-Facility Fee	Facility Fee
To qualify for payment, the HSC must submit a case note which must document: • Discussion with or documentation from provider, or • Discussion with, or detailed voicemail or documented attempt to contact worker, or • Discussion with, or detailed voicemail or documented attempt to contact employer.	1087M	Max 16 hours per claim Use <u>-8S modifier</u> to bill multiple same day services Second and subsequent case notes will be paid at 50%.	\$10.12 per 6 minutes RVU: 0.17	\$10.12 per 6 minutes RVU: 0.17

For fees and policies on billable services related to COHE best practices and available to all providers (not exclusive to COHE), please refer to L&I's Medical Aid Rules & Fee Schedule (MARFS) for fees and policies. These codes include:

- Activity Prescription Form (APF): 1073M
- Medical conference to coordinate care:
 - o 99367 (physician),
 - o 99366, 99368 (ARNP, PA, psychologist)
- Telephone call consultation regarding care of injured worker (use modifier -32 for calls to employers or VRCs): 9919M
- Secure online communication (use modifier -32 for secure communication to employers): 9918M (all providers)
- Work-site visit and job modifications (requires claim manager authorization):
 - o 0389R (job modification/pre-job mod),
 - 0390R (work evaluation)
- Expenses incurred in providing 0389R or 0390R services (requires claim manager authorization):
 - o 0391R (travel/wait),
 - o 0392R (mileage),
 - o 0393R (ferry charges)
- Provider review of Job Analysis (JA) or Job Description (JD)
 - 1038M (initial review)
 - 1028M (subsequent review)