

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	\$56.09	\$56.09
Chiropractic care (Level 1–3)	One per day	2050A – 2052A	\$46.98 – \$73.32	\$46.98 – \$73.32
Consultation including report	MD, DO, ARNP Approved Chiropractic Consultants	99241–99245 99241–99244	\$80.48 – \$376.35 \$80.48 – \$308.61	\$54.43 – \$319.61 \$54.43 – \$258.23
Electronic communication	Physician Non-physician	9918M	\$49.33	\$46.74
Final Report by AP	AP	1026M	\$28.51	\$28.51
Functional Capacity Evaluation Report (review)	AP, per insurer request	1097M	\$56.09	\$56.09
Impairment Rating by AP (limited to these provider types)	MD, DO, DPM, DDS. Also DCs, if approved IME examiners	1191M – 1192M	\$615.14 – \$768.92	\$615.14 – \$768.92
Independent Medical Exam (IME), Report review Written report post review	AP, per insurer request	1063M 1065M	\$43.15 \$32.37	\$43.15 \$32.37
Job descriptions or analysis (first one reviewed), or	AP, per insurer, employer or vocational provider (VRC) request	1038M	\$56.09	\$56.09
Job offer or analysis: each additional review	AP, per insurer, employer or vocational provider (VRC) request	1028M	\$42.08	\$42.08
Loss of Earning Power	AP, per insurer request	1027M	\$21.58	\$21.58
Occupational Disease History Report, Review of worker information and preparation of report	AP, per insurer request	1055M	\$209.32	\$209.32
Opioids: Chronic opioid request form	AP / Prescriber	1078M	\$34.52	\$34.52
Opioids: Subacute opioid request form with documentation	AP / Prescriber	1077M	\$64.73	\$64.73
Opioids: Subacute opioid request form without documentation	AP / Prescriber	1076M	\$34.52	\$34.52
Physical medicine procedures by non-physical medicine AP	6 units per claim	1044M	\$49.06	\$49.06
Reopening Application	AP	1041M	\$56.09	\$56.09
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	\$43.15 \$33.15 \$23.15	\$43.15 \$33.15 \$23.15

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	\$34.52	\$34.52
60 day report (must be in SOAPER format)	AP, one per 60 days	99080	\$49.62	\$49.62
Special Report	AP, per insurer, employer or VRC request – one per day	99080	\$49.62	\$49.62
Team conference, patient present	Physician only Non-physician	Approp. E&M 99366	Varies by code \$72.95	Varies by code \$71.22
Team conference, patient not present	Physician only Non-physician	99367 99368	\$94.96 \$62.53	\$94.96 \$62.53
Telephone calls with employer, claim manager, other providers, or VRC	Physician only Non-physician	99441–99443 98966–98968	\$99.59 – \$226.97 \$24.32 – \$67.16	\$61.95 – \$170.23 \$21.42 – \$64.85

***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.