



# COHE Program Fee Schedule

Effective July 1, 2022

Administrative Fee per COHE Claim = **\$60.18**

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/>

## Attending Providers Enrolled in COHE

Service Description	Code	Details	Non-Facility Fee	Facility Fee
<b>Report of Accident (ROA) received by L&amp;I...</b>  Dates Used to Calculate "Received" Time: <ul style="list-style-type: none"> <li>"This exam date" (Box 15b)</li> <li>"Date you 1<sup>st</sup> saw patient for this condition" (Box 3)</li> </ul> <i>Note: If both boxes are blank, payment will be lowest reimbursement amount – there must be dates in order to calculate any incentives.</i>	<b>1040M</b>	<b>Within 2 business days</b> <i>(standard rate x 150%)</i>	<b>\$66.67</b> RVU: 1.12	<b>\$66.67</b> RVU: 1.12
		<b>3 to 5 business days</b> <i>(standard rate)</i>	<b>\$44.44</b> RVU: 0.75	<b>\$44.44</b> RVU: 0.75
		<b>6 to 8 business days</b> <i>(standard rate minus \$10)</i>	<b>\$34.44</b> RVU: 0.58	<b>\$34.44</b> RVU: 0.58
		<b>9 or more business days</b> <i>(standard rate minus \$20)</i>	<b>\$24.44</b> RVU: 0.41	<b>\$24.44</b> RVU: 0.41
		<b>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.</b>		
<b>Assessment of Impediments to Return to Work (RTW)</b>  Must be documented in a detailed SOAP-ER note and must include an action plan to address barriers.	<b>1068M</b>	<b>1 per claim</b>	<b>\$174.46</b> RVU: 2.93	<b>\$123.22</b> RVU: 2.07
<b>Referral to COHE Advisor for Assessment of Impediments to RTW</b>  Not payable to the provider who conducts the Assessment of Impediments to RTW	<b>1070M</b>	<b>1 per claim</b>	<b>\$35.56</b> RVU: 0.60	<b>\$35.56</b> RVU: 0.60

CPT® codes are copyright 2021 American Medical Association

Note: PA-C and HSC Assistants will continue to be paid at 90% of all fee schedule rates for professional services.

RVU Calculation = current year's max fee schedule amount divided by the current year's conversion factor of \$59.46. RVU is "total" RVU. To calculate "work" RVU for local codes, multiply "total" RVU by 0.5.

## COHE Advisor Services

Service Description	Code	Details	Non-Facility Fee	Facility Fee
<b>Assessment of Impediments to RTW</b> Must be documented in a detailed SOAP-ER note and must include an action plan to address barriers. Charged in addition to E/M codes.  * 1067M code series includes 10% enhancement – do not add the 8R modifier.	<b>1067M</b> <i>Low Complexity</i>	<b>1 per claim</b>  <i>For complexity level guidelines, refer to CPT® codes 99243-99245</i>	<b>\$256.54</b> RVU: 4.31	<b>\$201.62</b> RVU: 3.39
	<b>1067M-TF</b> <i>Moderate Complexity</i>		<b>\$388.29</b> RVU: 6.53	<b>\$324.09</b> RVU: 5.45
	<b>1067M-TG</b> <i>High Complexity</i>		<b>\$473.86</b> RVU: 7.97	<b>\$400.25</b> RVU: 6.73

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:
  - Case management/team conference (99367),
  - Phone call/online communication (99441-99444, 9918M), or
  - E/M consultation (99241-99245)
- Psychologist Advisor:
  - Case management/team conference (99366, 99368), or
  - Phone call/online communication (98966-98969, 9918M)

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

CPT® codes are copyright 2021 American Medical Association

Note: PA-C and HSC Assistants will continue to be paid at 90% of all fee schedule rates for professional services.

RVU Calculation = current year's max fee schedule amount divided by the current year's conversion factor of \$59.46. RVU is "total" RVU. To calculate "work" RVU for local codes, multiply "total" RVU by 0.5.

## Health Service Coordinator (HSC) Services

Service Description	Code	Details	Non-Facility Fee	Facility Fee
<b>HSC Service</b>  To qualify for payment, the HSC must submit a case note which must document: <ul style="list-style-type: none"> <li>• Discussion with or documentation from provider, <u>or</u></li> <li>• Discussion with, or detailed voicemail or documented attempt to contact worker, <u>or</u></li> <li>• Discussion with, or detailed voicemail or documented attempt to contact employer.</li> </ul>	<b>1087M</b>	<b>Max 16 hours per claim</b> <i>Use -8S modifier to bill multiple same day services</i>  <i>Second and subsequent case notes will be paid at 50%.</i>	<b>\$9.68 per 6 minutes</b> RVU: 0.16	<b>\$9.68 per 6 minutes</b> RVU: 0.16

CPT® codes are copyright 2021 American Medical Association

Note: PA-C and HSC Assistants will continue to be paid at 90% of all fee schedule rates for professional services.

RVU Calculation = current year's max fee schedule amount divided by the current year's conversion factor of \$59.46. RVU is "total" RVU. To calculate "work" RVU for local codes, multiply "total" RVU by 0.5.

**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:
  - 99367 (physician),
  - 99366, 99368 (ARNP, PA, psychologist)
- Telephone call consultation regarding care of injured worker (use modifier -32 for calls to employers):
  - 99441, 99442, 99443 (physician),
  - 98966, 98967, 98968 (ARNP, PA, psychologist)
- Telephone call with Vocational Rehabilitation Counselor (VRC) regarding care of injured worker without injured worker present (use modifier -32 for calls to VRCs):
  - 99367 (physician),
  - 99368 (ARNP, PA, psychologist)
- Secure online communication (use modifier -32 for secure communication to employers): 9918M (all providers)
- Work-site visit and job modifications (requires claim manager authorization):
  - 0389R (job modification/pre-job mod),
  - 0390R (work evaluation)
- Expenses incurred in providing 0389R or 0390R services (requires claim manager authorization):
  - 0391R (travel/wait),
  - 0392R (mileage),
  - 0393R (ferry charges)
- Provider review of Job Analysis (JA) or Job Description (JD)
  - 1038M (initial review)
  - 1028M (subsequent review)

---

CPT® codes are copyright 2021 American Medical Association

*Note: PA-C and HSC Assistants will continue to be paid at 90% of all fee schedule rates for professional services.*

*RVU Calculation = current year's max fee schedule amount divided by the current year's conversion factor of \$59.46. RVU is "total" RVU. To calculate "work" RVU for local codes, multiply "total" RVU by 0.5.*