



**Payment Policies for Healthcare Services
Provided to Injured Workers and Crime Victims**

Chapter 18: Modifications: Home, Job, and Vehicle

Effective July 1, 2018



Link: Look for possible **updates and corrections** to these payment policies at:

www.Lni.wa.gov/ClaimsIns/Providers/Billing/FeeSched/2018/



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Definitions

- ▶ **By report (BR):** A code listed in the fee schedule as BR doesn't have an established fee because the service is too unusual, variable, or new. When billing for the code, the provider must provide a report that defines or describes the services or procedures. The insurer will determine an appropriate fee based on the report.



Link: For the legal definition of By report, see: [WAC 296-20-01002](#).

- ▶ **Job modifications:** Job modifications are adjustments or alterations made to the way a job is performed to accommodate the restrictions imposed by an industrial injury or occupational disease. The purpose of job modification benefits is to encourage employers to modify jobs to retain or hire injured workers. Job modifications are used when an employer/employee relationship exists, and they may include worksite adjustment; job restructuring; and/or tools, equipment or appliances.



Link: For more information, see: [WAC 296-19A-010\(9\)](#).

- ▶ **Pre-job accommodations:** Pre-job are adjustments or alterations made to the way a job is performed to accommodate the restrictions imposed by an industrial injury or occupational disease. The purpose of pre-job accommodation benefits is to make it possible for the worker to perform the essential functions of a job. Accommodations are used when an industrially injured or ill worker is engaged in a vocational rehabilitation plan or in a job search, and they may include tools, equipment or appliances.



Link: For more information, see: [WAC 296-19A-010\(10\)](#).

- ▶ **Residence (home) modification:** A residence or home modification is a permanent change to an existing residence or a repair of a modification previously approved and paid for by the department or self-insured employer, or a modification made when constructing a new residence.



Link: For more information, see: [WAC 296-14-6200](#).



Payment policy: Home modifications

(See definition of **Home modification** in Definitions at the beginning of this chapter.)

▶ Prior authorization

A **consultation** for a:

- State Fund claimant must be pre-authorized by claim manager, *and*
- Self-insured employer claimant, you must contact the employer or their claim management representative for pre-authorization.

Construction and design work done for a:

- State Fund claimant must be preauthorized by the Assistant Director for the Insurance Services Program (AD), *and*
- Self-insured employer claimant can't be denied without L&I's AD's approval.

▶ Who must perform these services to qualify for payment

The home modification consultant must:

- Be a licensed nurse, occupational therapist, or physical therapist, *and*
- Have training or experience in both rehabilitation of catastrophic injuries and modifying homes.



Note: See more information about who can bill for specific services in the Home modifications fee schedule below.

► **Services that can be billed**

Home modifications fee schedule, effective July 1, 2018:

For this HCPCS or local billing code...	The provider that can bill is a:	And the insurer pays for:	With a maximum fee of:
8914H Home modification construction and design.	<ul style="list-style-type: none"> Contractor, Architect, Construction material supplier, <i>and</i> Worker. 	<ul style="list-style-type: none"> Construction materials, Labor & tax, Permits and inspections, <i>and</i> Architect plans. <p>If the worker pays for inspections, predesign, or planning services, the worker may be reimbursed if the modification request is approved.</p>	Each bill pays By report (as billed) up to the maximum amount authorized for the home modification.
8916H Home modification consultation.	Home modification consultant.	Time spent doing: <ul style="list-style-type: none"> Onsite home evaluation, Consultation, <i>or</i> Required reports. 	By report.
8917H Home modification mileage, lodging, bridge and ferry tolls, airfare, and car rental.	Home modification consultant.	Mileage Lodging for 1 person when the onsite visit requires: <ul style="list-style-type: none"> Two or more consecutive days, <i>and</i> Is greater than 125 miles one way. Airfare (economy) for 1 person when travel is greater than 180 miles one way. Car rental (economy) when air travel is involved.	State rates.
0391R Travel.	Home modification consultant.	Travel time or wait time	\$5.19 per unit (1 unit = 6 minutes)



Note: See definition of **By report** in Definitions at the beginning of this chapter.

▶ Requirements for billing

To get reimbursed, you must submit a copy of receipts for:

- Materials,
- Lodging,
- Airfare, *and*
- Car rental.

▶ Payment limits

The maximum payable for all home modification construction and design is the current Washington State average annual wage.



Note: For additional information about home modifications, see links in Related Topics at the end of this chapter.



Payment policy: Job modifications and pre-job accommodations

(See definition of **Job modification and pre-job accommodation** in Definitions at the beginning of this chapter.)



Link: More information about job modifications is available online at:
www.Lni.wa.gov/ClaimsIns/Providers/Vocational/Tools/PreJob/.

▶ Prior authorization

The need for a job modification or pre-job accommodation must be identified and documented by L&I, the attending healthcare provider, treating occupational or physical therapist, employer, worker, or vocational rehabilitation counselor.

Consultations for a specific job modification or pre-job accommodation must be preauthorized after the need has been identified.

Job modifications

Prior authorization is required for all job modification services.

Pre-job accommodations

Prior authorization is required for all pre-job accommodation services.

▶ Who must perform these services to qualify for payment

Consultations

The provider of a job modification or pre-job accommodation consultation must be a:

- Licensed occupational therapist or physical therapist, *or*
- Vocational rehabilitation provider, *or*
- Ergonomic specialist.

▶ Services that can be billed

Consultation services

In some cases, the department may reimburse for consultation services.

Consultations: Vocational providers in the firm assigned to the referral

Vocational providers in the firm assigned to the vocational referral must bill using procedure codes **0823V** or **0824V**.



Link: For more billing information, see: [Chapter 30: Vocational Services](#)

Consultations: Non-vocational providers and vocational providers that aren't with the firm assigned to referral must bill the following:

Billing code	Description	Activities	Maximum fee
0389R	Pre-job or job modification consultation, analysis of physical demands (non-VRC), per 6 minutes.	Consultation time with worker, Composing the report, Communication with others which may include the employers, healthcare provider and/or vocational provider. Instruction in work practices, When indicated: <ul style="list-style-type: none"> • Obtaining bids, • Completing and submitting assistance application packet, Analyzing job physical demands to assist a VRC in completing a job analysis (qualified PT or OT only).	\$11.46
0391R	Travel/wait time (non-VRC), per 6 minutes.	Traveling to work/training site or to an equipment vendor to meet with the worker as part of direct consultation services.	\$5.19
0392R	Mileage (non-VRC), per mile.	Mileage to work/training site or to an equipment vendor to meet with the worker as part of direct consultation services.	State rate
0393R	Ferry charges (non-VRC).	Ferry travel if required to travel to work/training site as part of direct consultation services.	State rate



Note: If services are provided to a worker with an open vocational referral, see: [Chapter 30: Vocational Services](#)

Authorized equipment vendors

The following codes can be billed by equipment vendors:

Billing code	Description	Activities	Maximum fee
0380R	Job modification	Equipment/tools: <ul style="list-style-type: none"> • Installation, • Set up, • Basic training in use, • Delivery (includes mileage), • Tax, • Custom modification/ fabrication. Work area modification or reconfiguration.	Maximum allowable for 0380R is \$5,000.00 per job or job site.
0385R	Pre-job accommodation	Equipment/tools: <ul style="list-style-type: none"> • Installation, • Set up, • Basic training in use, • Delivery (includes mileage), • Tax, • Custom modification/ fabrication. Work/training area modification or reconfiguration.	Maximum allowable for 0385R is \$5,000.00 per claim. Combined costs of 0380R and 0385R for the same return to work goal can't exceed \$5,000.00 .



Note: Consultants may supply the equipment/tools only if:

- Custom design and fabrication of unique equipment or tool modification is required, *and*
- Prior authorization is obtained, *and*
- Proper justification and cost estimates are provided.



Link: Additional information is available at:

www.Lni.wa.gov/ClaimsIns/Providers/Vocational/Tools/PreJob/ .

▶ Services that aren't covered

These services aren't covered:

- Performing vocational rehabilitation services as described in: [WAC 296-19A](#) on claims with open vocational referrals (except for activities noted in: [WAC 296-19A-180 through WAC 296-19A-200](#)), *and*



Link: Additional information is available in: [WAC 296-19A](#).

- Activities associated with reports other than composing or dictating complete draft of the report, including:
 - Editing, revising, or typing,
 - Filing, *or*
 - Distributing or mailing, *and*
- Time spent on any administrative and clerical activity, including:
 - Typing,
 - Copying,
 - Faxing, mailing, or distributing,
 - Filing,
 - Payroll,
 - Recordkeeping, *or*
 - Delivering or picking up mail.

▶ Requirements for billing

OTs, ergonomic specialists, and vocational providers not with firm assigned referral:

Use the **Statement for Retraining and Job Modification Services** ([F245-030-000](#)) form.

PTs

PTs should no longer use the Statement for Retraining and Job Modification Services (F245-030-000) form. Use a billing method that includes the diagnosis code field.

Vendors

If billing for job modification:

- Send in the **Statement for Retraining Job Modification Services** ([F245-030-000](#)) form
- Use billing code **0380R**, *and*
- Attach a copy of the approved **Job Modification Assistance Application** form.

If billing for pre-job accommodation:

- Send in the **Statement for Retraining Job Modification Services** ([F245-030-000](#)) form
- Use billing code **0385R**, *and*
- Attach a copy of the approved **Pre-job Accommodation Assistance Application** form



Note: These forms are supplied by the employer, therapist, or vocational provider, etc.

► Payment limits

The combined costs of both codes **0380R** and **0385R** for same return to work goal can't exceed **\$5,000.00**.

For self-insured claims, pre-job accommodations can't be approved.



Note: Self-insured employers may pay any pre-job accommodation expenses for injured workers who no longer work for them.



Payment policy: Vehicle modifications



Link: More information about vehicle modifications is available in: [RCW 51.36.020\(8\)](#).

▶ Prior authorization

Vehicle modifications require prior authorization based on approval by the Assistant Director of L&I's Insurance Services Program.

▶ Who must perform these services to qualify for payment

Consultations

The vehicle modification consultant must:

- Be a licensed occupational or physical therapist, or licensed medical professional, *and*
- Have training or experience in both rehabilitation and vehicle modification.

▶ Services that can be billed

If the HCPCS and local billing code is...	Then the provider who can bill is:	And the insurer pays for:	And the maximum fee is:
8915H: Vehicle modification	Contractor	Vehicle modification	Maximum payable for all work is $\frac{1}{2}$ the current Washington State average wage . The amount paid may be increased by no more than \$4,000.00 by written order of the Supervisor of Industrial Insurance (see Link below table).

If the HPCPS and local billing code is...	Then the provider who can bill is:	And the insurer pays for :	And the maximum fee is:
8917H: Vehicle modification mileage, lodging, bridge and ferry tolls, airfare, and car rental	Vehicle modification consultants	Mileage Lodging for 1 person when the onsite visit requires: <ul style="list-style-type: none"> • Two or more consecutive days, <i>and</i> • Is greater than 125 miles one way. Airfare (economy) for 1 person when travel is greater than 180 miles one way. Car rental (economy) when air travel is involved.	State rates
8918H Vehicle modification consultation or driving evaluation	Vehicle modification consultants	Time spent doing: <ul style="list-style-type: none"> • Onsite – vehicle and/or driving evaluation, • Consultation, <i>or</i> • Required reports. 	By report
0391R: Travel	Vehicle modification consultants	Travel time or wait time	\$5.19 per unit (1 unit = 6 minutes)



Link: For more information about vehicle modification payment increases, see: [RCW 51.36.020\(8\)\(b\)](#).

► **Requirements for billing**

To get reimbursed, you must submit copies of receipts for:

- Lodging,
- Airfare, *and*

- Car rental.

▶ Payment limits

For local billing code **8915H**, the maximum payable for all vehicle modification is 50% of the current Washington State average wage. The amount paid may be increased by no more than **\$4,000.00** by written order of the Supervisor of Industrial Insurance.



Link: For more information about vehicle modification payment increases, see: [RCW 51.36.020\(8\)\(b\)](#).



Links: Related topics

If you're looking for more information about...	Then go here:
Administrative rules for home modifications	Washington Administrative Code (WAC) 296-14-6200 through WAC 296-14-6238 available in WAC 296-14: http://apps.leg.wa.gov/WAC/default.aspx?cite=296-14
Administrative rules for vocational rehabilitation	Washington Administrative Code (WAC) 296-19A: http://apps.leg.wa.gov/WAC/default.aspx?cite=296-19A
Becoming an L&I provider	L&I's website: www.Lni.wa.gov/ClaimsIns/Providers/Becoming/
Billing instructions and forms	Chapter 2: Information for All Providers
Contractors' questions and answers about home modifications for workers with catastrophic injuries	L&I's website (form F252-061-000): www.Lni.wa.gov/FormPub/Detail.asp?DocID=2199
Fact sheet on home modifications for workers with catastrophic injuries	L&I's website (form F252-060-000): www.Lni.wa.gov/FormPub/Detail.asp?DocID=2194
Fee schedules for all healthcare and vocational services	L&I's website: http://feeschedules.Lni.wa.gov
Home Modification Acknowledgement of Responsibilities form	L&I's website (form F247-003-000): www.Lni.wa.gov/FormPub/Detail.asp?DocID=2189
Home modifications policies	L&I's website: www.Lni.wa.gov/ClaimsIns/Providers/TreatingPatients/ByCondition/HomeModification
Job modifications and pre-job accommodations policies	L&I's website: www.Lni.wa.gov/ClaimsIns/Providers/Vocational/Tools/PreJob/
Laws for definitions	Revised Code of Washington (RCW) 50.04.355: http://apps.leg.wa.gov/rcw/default.aspx?cite=50.04.355

If you're looking for more information about...	Then go here:
Laws for modification to residences or motor vehicles	RCW 51.36.020(7) and (8): http://apps.leg.wa.gov/rcw/default.aspx?cite=51.36.020
Laws for residence modification services	RCW 51.36.022: http://apps.leg.wa.gov/rcw/default.aspx?cite=51.36.022
Laws for right to and amount	RCW 51.32.095(4): http://apps.leg.wa.gov/rcw/default.aspx?cite=51.32.095 RCW 51.32.250: http://apps.leg.wa.gov/rcw/default.aspx?cite=51.32.250
Statement for Retraining and Job Modification Services form	L&I's website: www.Lni.wa.gov/FormPub/Detail.asp?DocID=1617

► **Need more help?** Call L&I's Provider Hotline at **1-800-848-0811**