

# **Administrative Examinations**

## **Program**

### **Rulebook**

**Includes:**

- 1) Table of Contents**
- 2) Current Update Information (changes since last update)**
- 3) Other Provider Resource Information**
- 4) Complete set of Administrative Examinations Program Administrative Rules**

**DEPARTMENT OF HUMAN SERVICES**

**MEDICAL ASSISTANCE PROGRAMS**

**Administrative Examination and Billing Services Program  
Division 150**

Update Information (most current Rulebook changes)

Other Provider Resources Information

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Administrative Examination Services Rulebook  
Update Information  
for  
July 1, 2006

OMAP updated information in the Administrative Examinations Services Program Rulebook as follows:

**Current order:**

- ✓ New Rulebook cover
- ✓ Table of Contents
- ✓ New Update Information page (instead of a cover letter)
- ✓ New “Other Provider Resources” page, following the Update Information. *Other Provider Resources* provides links to other important billing information to use in conjunction with the administrative rules.
- ✓ Rule and page numbers at the bottom of each rule

**Administrative rule revisions:**

OMAP revised OAR **410-150-0120** to comply with the Healthcare Common Procedure Coding System (HCPCS) and ensure continuity of payments for professional medical services provided to clients.

If you have questions, contact a Provider Services Representative toll-free at 1-800-336-6016 or direct at 503-378-3697.

## Other Provider Resources

OMAP has developed the following additional materials to help you bill accurately and receive timely payment for your services.

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### ■ Supplemental Information

The Administrative Examination and Medical Reports (Admin Exam) Supplemental Information booklet contains important information not found in the rulebook, including:

- ✓ Procedure codes and fee schedule information
- ✓ Guidelines to filling out the OMAP 729
- ✓ Sample authorization forms
- ✓ Billing information for CMS 1500 and UB-92
- ✓ Electronic claims information
- ✓ Other helpful information not found in the rulebook

Be sure to download a copy of the Admin Exam Supplemental Information booklet at:

<http://www.dhs.state.or.us/policy/healthplan/guides/adminexam/main.html>

Note: OMAP revises the supplement booklet throughout the year, without notice. Check the Web page regularly for changes to this document.

### ■ Provider Contact Booklet

This booklet lists general information phone numbers, frequent contacts, phone numbers to use to request prior authorization, and mailing addresses.

Download the Provider Contact Booklet at:

[http://www.dhs.state.or.us/healthplan/data\\_pubs/add\\_ph\\_conts.pdf](http://www.dhs.state.or.us/healthplan/data_pubs/add_ph_conts.pdf)

### ■ Other Resources

We have posted other helpful information, including provider announcements, at:

[http://www.oregon.gov/DHS/healthplan/tools\\_prov/main.shtml](http://www.oregon.gov/DHS/healthplan/tools_prov/main.shtml)

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## **410-150-0000 Purpose**

The Administrative Examination and Report rules are provided to use in conjunction with the General Rules of the Office of Medical Assistance Programs (OMAP) to assist providers in completing examinations requested and in preparing claims for administrative evaluations and reports. These rules do not apply to managed care plans.

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

10-1-03

## **410-150-0020 Definitions**

(1) Administrative Medical Examination -- An evaluation required by the Department of Human Services (DHS) to assist in determining eligibility and for casework planning for various assistance programs. An evaluation must be written and must contain a diagnosis, prognosis, and supporting objective findings. Functional impairments and expected duration of impairment must be included.

(2) Administrative Medical Reports -- Copies of existing records from a specified date. Progress notes, laboratory tests, x-ray reports, special test results and copies of other pertinent records must be included.

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

10-1-00

## **410-150-0040 Request Requirements**

(1) A copy of a completed OMAP 729 Administrative Medical Examination/Report Authorization is the authorization needed to perform an administrative examination, complete a form, or send copies of records.

(a) Only an employee of the Department of Human Services or Oregon Youth Authority (OYA), or OMAP may complete an OMAP 729.

(b) Keep a copy of the OMAP 729 for seven years.

(2) There are a series of OMAP 729s that may or may not be requested to be completed. Always follow the instructions on the OMAP 729.

(3) Examinations are only to be completed by the provider type listed on the various Procedure Code Tables in these rules.

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

4-1-03

## **410-150-0060 Additional Testing**

If testing is needed for medical diagnosis, instruct the ancillary service provider to bill using diagnosis code V68.89 and the appropriate CPT or HCPCS procedure codes. For psychiatric/psychological testing, contact the branch office.

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

10-1-00

**410-150-0080 Billing Instructions for Administrative Examinations:**

- (1) Medical and ancillary services providers must bill on a CMS – 1500.
- (2) Hospital services must be billed on a UB-92.
- (3) Copies of records by a copy service provider must be billed on a CMS -1500.
- (4) Do not attach the OMAP 729 or any documents to the CMS - 1500. Send the examination or copies of the reports to the branch office shown on the OMAP 729.
- (5) For Administrative Examination billing, the following are required on the appropriate billing form:
  - (a) The procedure code specified on the OMAP 729;
  - (b) The description as it appears on the OMAP 729;
  - (c) The correct type of service (TOS) per Procedure Code Tables; and
  - (d) The diagnosis V68.89.

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

10-1-03

## **410-150-0120 Procedure Code Table - Medical and Ancillary Services Providers**

Table - 150-0120 identifies the codes available for Administrative Examinations and Reports.

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

7-1-06

**Table 150-0120 Procedure Code Table—Medical & Ancillary Services Providers**

| Procedure Code | Procedure Name   | Provider  | TOS | POS |
|----------------|--|---|-----|-----|
| 97750          | Physical performance test or measurement (e.g. musculo-skeletal, functional capacity), with written report, each 15 minutes. Limited to 1 hour.  | Physical Therapist<br><br>American Indian/<br>Alaska Native                                     | S   | 3   |
|                |  | Occupational<br>3<br>Therapist<br><br>American Indian/<br>Alaska Native                         | S   | 3   |
| 99172          | Visual function screening, automated or semi-automated bilateral quantitative determination of visual acuity, ocular alignment, color vision by pseudoisochromatic plates, and field of vision. Complete Report on Eye Examination (OMAP 729C). See current CPT for details. | MD, DO<br>American Indian/<br>Alaska Native   | 1   | 3   |
|                |  | Optometrist   | F   | 3   |
| 96101          | Psychological testing with interpretation and report, per hour. See current CPT for details. Limited to 6 hours per day  | MD, DO<br><br>American Indian/<br>Alaska Native<br><br>Psychologist<br><br>Mental Health Clinic | R   | 3   |

|       |   |   |   |   |
|-------|---|---|---|---|
| 90801 | <p>Psychiatric diagnostic interview, examination. See Current CPT for details. See CPT assist Volume II, Issue 3, March 2001 for details. Narrative report per recommended outline in Comprehensive Psychiatric or Psychological Evaluation (OMAP 729A)</p> <p>OR</p> <p>Use for psychosexual evaluation including assessment of history and degree of offending behavior, cognitive distortions, empathy, hostility, compulsivity and impulsivity. Only for Child Welfare, OYA, and DD Services clients.</p> | <p>MD, DO</p> <p>American Indian/<br/>Alaska Native</p> <p>Psychologist</p> <p>Mental Health Clinic</p> | R | 3 |
| S9981 | <p>Medical records copying fee, administrative. Include progress notes, laboratory reports, X-ray reports, special study reports beginning with the date requested. Include recent hospital admission records, if available</p>   | <p>MD, DO</p> <p>American Indian/<br/>Alaska Native</p>   | 1 | 3 |

|                              |  |   |   |   |
|------------------------------|--|---|---|---|
| 99455<br><br>OR<br><br>99456 | Work related or medical disability examination by the treating physician. See current CPT for details. May be paid in addition to 99080  | Psychologist  | S | 3 |
|                              |  | Mental Health Clinic  | S | 3 |
|                              |  | Optometrist   | F | 3 |
|                              |  | MD, DO<br><br>American Indian/<br>Alaska Native                     | 1 | 3 |
| 99080                        | Special reports. See current CPT for details. Use for Physical Residual Function Capacity Report (OMAP 729E). Use for Mental Residual Function Capacity Report (OMAP 729F). Use for Rating of Impairment Severity Report (OMAP 729G). Used during examinations or based on existing records. | MD, DO<br><br>American Indian/<br>Alaska Native<br><br>Psychologist | R | 3 |
| 96118                        | Neuropsychological testing battery with interpretation and report, per hour. See current CPT for details. To be used in combination with 90801 if required. Limited to 3 hours.  | MD, DO<br>American Indian/<br>Alaska Native                         | R | 3 |
|                              |  | Psychologist<br><br>Mental Health Clinic                            | S | 3 |

|       |   |   |   |   |
|-------|---|---|---|---|
| 90889 | Preparation of report of patient's psychiatric status, history, treatment or progress. See current CPT for details. Use in conjunction with 90801 only.   | Psychologist<br>MD, DO<br>American Indian/<br>Alaska Native<br>Mental Health Clinic | R | 3 |
| 96111 | Developmental testing, extended with interpretation and report, per hour. See current CPT for details. Only for DD Services clients. Not paid in addition to 90889, 96117. May be combined with 96100 only if needed to determine mental retardation, and combined testing request approved by worker's supervisor or program policies. Limited to 5 hours. | Psychologist  | S | 3 |
| 54240 | Penile Plethysmography. Only for Child Welfare, OYA, and DD Services clients.   | MD, DO  | R | 3 |
| 80100 | Drug screen, qualitative; multiple drug classes chromatographic method, each procedure. Only for Child Welfare and OYA clients.   | Lab   | R | 3 |

|             |   |   |   |   |
|-------------|---|---|---|---|
| OR<br>80101 | Drug screen, qualitative; single drug class method, each drug class. Only for Child Welfare and OYA clients. See current CPT for details.                                 | Independent lab   | R | A |
| 80102       | Drug confirmation, each procedure. Only for Child Welfare and OYA clients.  | Lab   | R | 3 |
|             |   | Independent lab   | R | A |
| H0048       | Alcohol and/or drug testing: collection and handling only, specimen other than blood. Only for Child Welfare and OYA clients.   | Lab   | R | 3 |
|             |   | Independent lab   | R | A |
| H1011       | Family assessment by licensed behavioral health professional for state defined purposes. Use in combination with 96100 if needed. Only for Child Welfare and OYA clients. | MD, DO<br>American Indian/<br>Alaska Native<br>Psychologist<br>Mental Health Clinic | R | 3 |

7-1-06

## **410-150-0160 Procedure Code Table - Hospital Providers**

Table - 150-0160

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

04-1-03

**Table 150-0160 Procedure Code Table - Hospital Providers**

| Revenue Code | Procedure Code       | Procedure Name   | Provider            |
|--------------|----------------------|--|---------------------|
| 229          | N/A                  | Medical records copying fee, administrative  | Hospital            |
| 309          | 80100<br>or<br>80101 | Drug screen, qualitative; multiple drug classes, chromatographic method, each procedure. <i>Only for Child Welfare and OYA clients.</i><br><br>Drug screen, qualitative; single drug class method, each drug class. <i>Only for Child Welfare and OYA clients.</i> | Outpatient hospital |
| 309          | 80102                | Drug confirmation, each procedure. <i>Only for Child Welfare and OYA clients.</i>  | Outpatient hospital |
| 309          | H0048                | Alcohol and/or other drug testing; collection and handling only, specimens other than blood. <i>Only for Child Welfare and OYA clients.</i>  | Outpatient hospital |

|     |                         |   |                     |
|-----|-------------------------|---|---------------------|
| 424 | 97750                   | Physical performance test or measurement (e.g., musculoskeletal, functional capacity), with written report, each 15 minutes.  | Outpatient hospital |
| 434 | 97750                   | Physical performance test or measurement (e.g., musculoskeletal, functional capacity), with written report, each 15 minutes.  | Outpatient hospital |
| 500 | N/A                     | Work-related or medical disability examination by a treating physician, or other than treating physician. <i>May be paid in addition to 99080. See current CPT for details.</i> | Outpatient hospital |
| 918 | 96117<br>96111<br>96100 | Psychological testing with interpretation and report, per hour. (See description of service on OMAP 729.)   | Outpatient hospital |
| 919 | 90801<br>H1011          | Evaluation by a psychologist or psychiatrist employed by a hospital (see description of service on OMAP 729).   | Outpatient hospital |

April 1, 2003

## **410-150-0200 Billing Instructions - Licensed Polygrapher**

(1) Billing for licensed polygrapher services must be in writing on a CMS-1500.

(2) A polygraph does not qualify as a health care service and is therefore not subject to Health Insurance Portability and Accountability Act (HIPAA) regulations.

(3) Do not attach the OMAP 729 or any documents to the CMS-1500. Send the test results to the requesting branch office address shown on the OMAP 729.

(4) Send completed CMS - 1500 claim form to OMAP.

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

10-1-03

**410-150-0240 Procedure Code Table -- Licensed Polygrapher**

Table -- 0240

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

10-1-00

**Table 0240 Licensed Polygrapher**

| Procedure Code | Procedure Name  | TOS | POS |
|----------------|---|-----|-----|
| PIN02          | Polygraph testing by licensed polygrapher with narrative report | S   | 3   |

## **410-150-0300 Procedure Code Table -- Copy Services**

Table -- 150-0300. (Table rewritten)

Stat. Auth.: ORS 409

Stats. Implemented: ORS 414.065

10-1-03

**Table 0300 Procedure Code Table – Copy Services**

| Procedure Code | Procedure Name  | TOS  | POS |
|----------------|---|------|-----|
| S9981          | Medical records, copying fee, administrative. Include progress notes, laboratory reports, X-rays reports, special study reports beginning with the date requested. Include recent hospital admission records, if available. | S, 1 | 3   |
| S9982          | Medical records, copying fee, per page. Include progress notes, laboratory reports, X-rays reports, special study reports beginning with the date requested. Include recent hospital admission records, if available.       | S    | 3   |