

(Effective until July 1, 2024)

WAC 296-23-215 Office visits and special services—Naturopathic physicians. Definitions:

Routine office visit: A level of service pertaining to the evaluation and treatment of a condition requiring only an abbreviated history and exam.

Extended office visit: A level of service pertaining to an evaluation of patient with a new or existing problem requiring a detailed history, review of records, exam, and a formal conference with patient or family to evaluate and/or adjust therapeutic treatment management and progress.

Comprehensive office visit: A level of service pertaining to an indepth evaluation of a patient with a new or existing problem, requiring development or complete reevaluation of treatment data; includes recording of chief complaints and present illness, family history, past treatment history, personal history, system review; and a complete exam to evaluate and determine appropriate therapeutic treatment management and progress.

Reporting:

Reporting requirements are outlined in WAC 296-20-06101. The department or self-insurer will accept a brief narrative report of treatment received and the patient's progress as supporting documentation for billings in lieu of routine follow-up office notes.

Modifiers:

-22 Unusual services: When treatment services provided are greater than that usually required for listed procedures. Use of this modifier must be based on the injured worker's need for extended or unusual care. A report is required. The modifier -22 should be added to the procedure number.

-52 Reduced services: Under certain circumstances no treatment may be given, in these cases the procedure should be reduced by ten units and modifier -52 should be added to the procedure number.

Material supplied by doctor:

Department or self-insurer will reimburse the doctor for materials supplied, i.e., cervical collars, heel lifts, etc., at cost only. See RCW 19.68.010, professional license statutes.

All supplies and materials must be billed using HCPCS Level II codes as listed in the fee schedules.

The codes and reimbursement levels are listed in the fee schedules.

[Statutory Authority: RCW 51.04.020, 51.04.030 and 1993 c 159. WSR 93-16-072, § 296-23-215, filed 8/1/93, effective 9/1/93.]