

# Administrative Examinations and Reports

## Provider Guide

Use this guide as a supplement to the Administrative Medical Examinations and Reports (Admin Exam) Oregon Administrative Rules (Chapter 410 Division 150). See the current rules for official policies regarding billing.

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## Billing

Under the Administrative Examination program, Oregon Health Authority (OHA) only reimburses enrolled Oregon Medicaid providers for the specific services requested by Oregon Department of Human Services (ODHS), Oregon Youth Authority (OYA) or OHA staff using the OHP 729 (Administrative Exam Request) form.

Providers should only bill OHA for the services listed on the OHP 729. Do not attach any documents, including the OHP 729, to the claim.

- **Medical providers, ancillary service providers, licensed polygraphers, and copy services providers** must bill using the professional claim format.
- **Billing instructions for all claim types** are available on the [OHP provider billing tips page](#).
- **For information about getting started with electronic billing**, go to the [Electronic Business Practices page](#).

## Primary diagnosis code

Use diagnosis code Z02.89. Relay this code to Medicaid-enrolled ancillary providers if additional Division covered outpatient diagnostic services (e.g., lab, X-ray, special studies) are needed.

## Place of service

On professional claims, enter “11.”

## Procedure codes

Only use the procedure code(s) entered on the OHP 729 form(s) received from ODHS/OYA/OHA.

## To receive the Culturally or Linguistically Specific Service (CLSS) enhanced rate:

Eligible CLSS providers must bill each eligible service on the claim in two separate detail lines. The first detail line is billed following current billing practice for the service. The second detail line is a duplicate of the first and must also include either the modifier U9 or TN.

- **U9:** For non-rural providers will reimburse at 22 percent of OHA’s FFS rate.
- **TN:** For rural providers (as confirmed by OHA during the application process) will reimburse at 27 percent of OHA’s FFS rate.

[Refer to the CLSS Billing Guide](#) to learn more about provider eligibility, enrollment and billing.

## Claim status and adjustments

For information about the paper remittance advice and other ways to get claim status information via the MMIS Provider Portal, Automated Voice Response or EDI 835 (Electronic Remittance Advice), go to the [OHP remittance advice page](#).

For information about how to adjust a claim, refer to the [Claim Adjustment Handbook](#).

## Where to send administrative examination reports

Send the completed administrative examination and/or reports to the ODHS or OYA office listed on the OHP 729. Do not send them to OHA.

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You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact OHP Provider Services at [dmap.providerservices@odhsoha.oregon.gov](mailto:dmap.providerservices@odhsoha.oregon.gov) or 800-336-6016. We accept all relay calls.

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