

Department of Social and Health Services
 Community Services Division
Social Services Manual

Revision: # 136

Category: **Medical Evidence Reimbursements- Medical Evidence to Support SSI Applications (Fee Schedule)**

Issued: September 16, 2016

Revision Author: Nicholas Swiatkowski

Division: CSD

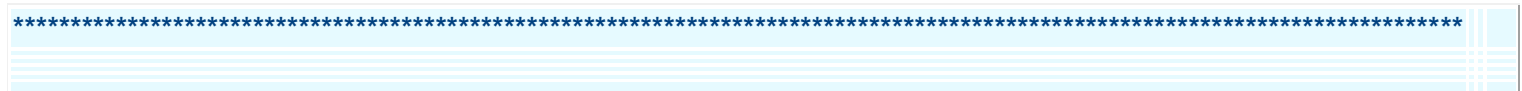
Mail Stop: 45440

Phone: 360-725-4638

Email: nicholas.swiatkowski@dshs.wa.gov

Summary

Removed this page. Reimbursement rates for services in this category are subject to approval through the Exception to Rule process in Barcode.



Created on: Aug-05-2015

~~**Medical Evidence Fee Schedule**~~

~~*Medical Evidence to Support SSI Applications*~~

-

~~**Note:** Reimbursement for services in this category are subject to prior authorization by CSD Headquarters.~~

-

Service Type*	Reimbursement Fee	ProviderOne Service Code
Special report for SSI	\$15.00 per 15 minute increment	99075

administrative hearing purposes	Limited to 3 hours maximum	
Narrative Psychological Evaluation	\$180.00	96101
Narrative Psychiatric Evaluation	\$218.67	90791
Comprehensive review of psychiatric history	\$60.00	90885

*This section details Aged, Blind, or Disabled (ABD) program medical evidence reimbursement rates. For a detailed service descriptions visit the Medical Evidence Reimbursements section of the ESA Social Services Manual.