

BUREAU OF DISABILITY ADJUDICATION
ATTACHMENT AA
SCOPE OF WORK
MEDICAL

Vendors agree to provide medical services to an applicant for Social Security Disability and Supplemental Security Disability benefits.

Consultative Examination Report Content:

The report must be complete enough to help the Disability Determination Services (DDS) adjudicative team determine the medical severity and duration of the impairment(s), the type(s) of treatment and extra care required in the management of the impairment(s), and functional limitations related to the impairment(s).

The examination report should include the claimant's claim number and a physical description of the claimant, to help ensure that the person being examined is the claimant.

The detail and format for reporting the results of the medical history, physical examination, laboratory findings, and discussion of conclusions should follow the standard reporting principles for a complete medical examination and meet the requirements of SSA publications, Green Book -- <https://www.ssa.gov/disability/professionals/greenbook/>. From five (5) to ten (10) new CE vendor reports will be reviewed by Bureau of Disability Adjudication (BDA) consultants for compliance and content and to assist new vendors to prepare proper CE reports. CE reports that do not meet the SSA requirements will be returned for revision and resubmission.

The report should be complete enough to enable an independent reviewer to determine the nature, severity and duration of the impairment, and, in adults, the claimant's ability to perform basic work-related functions. The history and physical examination must be provided as a narrative of the findings.

Conclusions in the report must be consistent with the objective clinical findings found on examination and the claimant's symptoms, laboratory studies, and demonstrated response to treatment and on all available information, including the reported history. The report, for adults, should include a description, based on the medical examiners own findings, of the individual's ability to do basic work-related activities. It should not include an opinion as to whether the claimant is disabled under the meaning of the law.

The CE report must:

- Provide evidence that serves as an adequate basis for disability decision-making in terms of the impairment the report assesses.
- Be internally consistent. Diseases, impairments and complaints described in the history adequately assessed and reported in the clinical findings.

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- Conclusions should correlate to the medical history, the clinical examination and laboratory tests, and explain all abnormalities.
- Discuss functional overlay if any, within the context of the assessment.
- Be consistent with the other information available within the specialty of the examination requested.
- Ensure that important or relevant complaint within that specialty that is noted in other evidence in the file (e.g., blindness in one eye, amputations, pain, alcoholism, depression).
- If examination of a child, exams will include growth and developmental information, growth milestones, pertinent negatives as well as positives and information received about intervention services in child assessments.
- Be adequate as compared to the standards set out in the course of medical education.
- Examinations: should include all elements of a standard examination in the applicable medical specialty unless only specific elements have been requested. This includes laboratory findings and other tests including x-rays if requested.

Refer to SSA publication – The Green Book for “How the DDS Reviews Consultative Examination Reports”. It covers report evidence, internal consistency, and adequacy and signature requirements. If the report is inadequate or incomplete, the DDS will contact the medical source and ask the medical source to furnish the missing information or prepare a revised report.

Reports and Invoicing –

All services must be pre-authorized by the Bureau of Disability Adjudication (BDA) according to the established BDA fee schedule. Reports and invoices must be received within 15 business days of the provided service and include a description of services. Services provided without prior authorization will not be paid by BDA. Providers will not bill BDA or the participant when no service has been provided. This includes billing a deposit for a scheduled appointment or for a missed appointment.

Providers serving underserved rural areas may be reimbursed mileage at the current General Services Administration (GSA) rate as identified on <http://www.gsa.gov>. Mileage must be preapproved by the Division and will only be authorized if the provider is travelling more than 50 miles in excess of his/her normal commute, a provider’s normal commute is considered the round trip mileage between the provider’s residence and official duty station. Provider’s shall complete and submit the Mileage Log and Reimbursement Form and a State of Nevada Travel Expense Reimbursement Claim form, provided by the Division, with the invoice for services.

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Payment may be delayed if the invoice is not submitted correctly, and/or the required reports are not submitted; vendors will not receive payment for claims submitted after 90 days from the date of the service.

Licensure and Credentials –

The practitioner providing the services, making the diagnosis or signing the report must be licensed with the State of Nevada and qualified in their discipline per their accreditation and must meet State of Nevada requirements for professional standards and certification.

Out of state practitioners must be licensed and qualified in their discipline per the accreditation and licensure requirements of the State of Nevada. The State of Nevada will not utilize the services of any non-licensed vendor.

All intern examiners must be under the direct and constant supervision of the examiner of record. Intern signatures will be counter signed by their internship supervisor acknowledging oversight of the examination.

Medical/Professional Relations information, including information related to SSA Disability programs, best practices, publications and guidelines can be found at <https://www.ssa.gov/disability/professionals/index.htm>