

## Administrative Exams

Also known as	<div><div></div><div><div>1. Administrative physical</div><div>2. Adoption physical</div><div>3. Camp physical</div><div>4. DOT physical</div><div>5. Employment physical</div><div>6. Green Card physical</div><div>7. Immigration physical</div><div>8. School physical</div><div>9. Sports physical</div></div></div>						
Description	<p>Administrative exams are done for clerical reasons, not medical reasons. The diagnosis code description is <i>other medical exams for administrative purposes</i> such as licenses, camp, sports, school, adoption, department of transportation, immigration, employment, and other clerical reasons.</p>						
Table of Contents	<p>The following topics are included in this document:</p> <div><div></div><div><div>• <a href="#">Commercial</a></div><div>• <a href="#">Government Programs</a></div><div>• <a href="#">Individual and Family Business (IFB)</a></div></div></div>						
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Commercial

Introduction	This section applies to all Commercial members. Benefit details depend on the member’s brand: Dean (including Dean Health Plan (DHP) and Prevea360), Mayo Medical Plan (MMP), or Medica (including MHPS).						
Dean (DHP, Prevea360)	<p>Most plans have a general exclusion that states: <i>Administrative examinations such as employment, licensing, insurance, adoption, or participation in athletics.</i></p> <ul style="list-style-type: none"><li>• Examinations, evaluations, and treatment may be considered for payment when the following conditions are met:<ul style="list-style-type: none"><li>– Medically necessary.</li><li>– Covered benefit.</li><li>– Services done by a plan provider with a written referral when required.</li></ul></li><li>• <b>Court ordered care:</b> Excluded unless medically necessary and otherwise covered in the plan.</li><li>• <b>DWI initial assessment:</b> Only covered if services are obtained at a plan provider and it is medically necessary treatment.</li><li>• <b>Self-Insured:</b> Check plan for specific services that may be excluded or covered per the group.</li></ul>						
Mayo Medical Plan (MMP)	<p>Most plans have general exclusions that state: <i>Exams, other evaluations or other services received solely for the purpose of employment, insurance or licensure. Exams, other evaluations or other services received solely for the purpose of judicial or administrative proceedings or research, except emergency examination of a child ordered by judicial authorities.</i></p> <ul style="list-style-type: none"><li>• Although most plans have an exclusion specific to administrative exams, routine physicals are covered (regardless of the reason), as long as it is a full physical.<ul style="list-style-type: none"><li>– Must be medically appropriate for preventive services.</li><li>– Must follow preventive guidelines on <a href="http://www.healthcare.gov">www.healthcare.gov</a>.</li><li>– As long as the administrative exam is part of a routine physical, covered under preventive benefits.</li></ul></li><li>• <b>Executive physicals:</b> A comprehensive physical in which the member may be admitted inpatient. These are commonly done at Mayo Clinic and North Memorial. Coverage depends on the plan type.<ul style="list-style-type: none"><li>– Check the plan to see if executive physicals are listed as a covered benefit. If not listed separately, not covered.</li></ul></li></ul>						
Medica (including MHPS)	<p>Most plans have a general exclusion that state: <i>Exams, other evaluations or other services for employment, insurance or licensure, unless otherwise covered under this certificate.</i></p> <ul style="list-style-type: none"><li>• Although most plans have an exclusion specific to administrative exams, routine physicals are covered (regardless of the reason), as long as it is a full physical.<ul style="list-style-type: none"><li>– Must be medically appropriate for preventive services.</li><li>– Must follow preventive guidelines on <a href="http://www.healthcare.gov">www.healthcare.gov</a>.</li><li>– As long as the administrative exam is part of a routine physical, it is covered under preventive benefits.</li></ul></li><li>• <b>Executive physicals:</b> A comprehensive physical in which the member may be admitted inpatient. These are commonly done at Mayo Clinic and North Memorial. Coverage depends on the plan type.<ul style="list-style-type: none"><li>– <b>Fully Insured:</b> Not covered.</li><li>– <b>Self-Insured:</b> Check plan to see if executive physicals are listed as a covered benefit. If not listed separately, not covered.</li></ul></li></ul>						
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Government Programs

Introduction	This section applies to all Medicaid and Medicare products.
AccessAbility (SNBC),  Minnesota Senior Care Plus (MSC+)	<p><a href="#">Medicaid only groups</a>:</p> <ul style="list-style-type: none"><li>• See <a href="#">Medicaid</a> below.</li></ul> <p><a href="#">Medicare eligible groups</a>:</p> <ul style="list-style-type: none"><li>• <b>No physical within last 12 months:</b> Members are allowed one (1) preventive exam every 12 months.<ul style="list-style-type: none"><li>– If they have NOT had a preventive exam in the past 12 months, covered as part of their physical exam.</li><li>– Must be medically appropriate for preventive services and established guidelines.</li><li>– Guidelines are on medica.com.</li><li>– If the claim is denying, submit a CPE. See <a href="#">Claim Adjustment Requests (Government Programs)</a>.</li></ul></li><li>• <b>Physical within last 12 months:</b> If they had a previous physical in the past 12 months, not covered as a contract exclusion.<ul style="list-style-type: none"><li>– If appropriate, offer the appropriate grievance option. See <a href="#">Appeals and Grievances Quick Reference</a>.</li></ul></li><li>• Follows Medicare guidelines.</li><li>• Medicare is the primary payer.</li><li>• If no Medicare eligibility, Medicaid applies. See <a href="#">Medicaid</a> below.</li></ul>
AccessAbility Enhanced (I-SNBC),  DUAL (MSHO)	<p>Coverage depends on when the member last had a physical.</p> <ul style="list-style-type: none"><li>• <b>No physical within last 12 months:</b> Members are allowed one (1) preventive exam every 12 months.<ul style="list-style-type: none"><li>– If they have NOT had a preventive exam in the past 12 months, covered as part of their physical exam.</li><li>– Must be medically appropriate for preventive services and established guidelines.</li><li>– Guidelines are on medica.com.</li><li>– If the claim is denying, submit a CPE. See <a href="#">Claim Adjustment Requests (Government Programs)</a>.</li></ul></li><li>• <b>Physical within last 12 months:</b> If they had a previous physical in the past 12 months, not covered as a contract exclusion.<ul style="list-style-type: none"><li>– If appropriate, offer the appropriate grievance option. See <a href="#">Appeals and Grievances Quick Reference</a>.</li></ul></li><li>• Medica is the only payer.</li></ul>
Cost (Prime)	<p>Coverage depends on when the member last had a physical.</p> <ul style="list-style-type: none"><li>• <b>No physical within last 12 months:</b> Members are allowed one (1) preventive exam every 12 months.<ul style="list-style-type: none"><li>– If they have NOT had a preventive exam in the past 12 months, covered as part of their physical exam.</li><li>– Must be medically appropriate for preventive services and established guidelines.</li><li>– Guidelines are on medica.com.</li><li>– If the claim is denying, submit a CPE. See <a href="#">Claim Adjustment Requests (Government Programs)</a>.</li></ul></li><li>• <b>Physical within last 12 months:</b> If they had a previous physical in the past 12 months, not covered as a contract exclusion.<ul style="list-style-type: none"><li>– If appropriate, offer the appropriate grievance option. See <a href="#">Appeals and Grievances Quick Reference</a>.</li></ul></li><li>• Follows Medicare guidelines.</li></ul>
Med Advantage	<p>Coverage depends on when the member last had a physical.</p> <ul style="list-style-type: none"><li>• <b>No physical within last 12 months:</b> Members are allowed one (1) preventive exam every 12 months.<ul style="list-style-type: none"><li>– If they have NOT had a preventive exam in the past 12 months, covered as part of their physical exam.</li><li>– Must be medically appropriate for preventive services and established guidelines.</li><li>– Guidelines are on medica.com.</li><li>– If the claim is denying, submit a CPE. See <a href="#">Claim Adjustment Requests (Government Programs)</a>.</li></ul></li><li>• <b>Physical within last 12 months:</b> If they had a previous physical in the past 12 months, not covered as a contract exclusion.<ul style="list-style-type: none"><li>– If appropriate, offer the appropriate grievance option. See <a href="#">Appeals and Grievances Quick Reference</a>.</li></ul></li><li>• Follows Medicare guidelines.</li><li>• Medica is the only payer.</li></ul>
Med Supp (Select, Signature)	<p>Coverage depends on when the member last had a physical.</p> <ul style="list-style-type: none"><li>• <b>No physical within last 12 months:</b> Members are allowed one (1) preventive exam every 12 months.<ul style="list-style-type: none"><li>– If they have NOT had a preventive exam in the past 12 months, covered as part of their physical exam.</li><li>– Must be medically appropriate for preventive services and established guidelines.</li><li>– Guidelines are on medica.com.</li><li>– If the claim is denying, submit a CPE. See <a href="#">Claim Adjustment Requests (Government Programs)</a>.</li></ul></li><li>• <b>Physical within last 12 months:</b> If they had a previous physical in the past 12 months, not covered as a contract exclusion.<ul style="list-style-type: none"><li>– If appropriate, offer the appropriate grievance option. See <a href="#">Appeals and Grievances Quick Reference</a>.</li></ul></li><li>• Follows Medicare guidelines.</li><li>• Medicare supplement.</li><li>• Medicare is the primary payer.</li></ul>

Continued on next page

Medicaid

The Department of Human Services (DHS) Manual has the following exclusion: *The following services are not covered as a preventive service: Services that are only for vocational or educational purposes that are not health related; Services that deal with external, social, or environmental factors that do not directly address the recipient's physical or mental health; Vocational or educational services, including functional evaluations or employment physicals, except as provided under IEP-related services.*

- Routine physicals are covered (regardless of the reason), as long as it is a full physical.
- Must be medically appropriate for preventive services.
- Must follow preventive guidelines on [www.healthcare.gov](http://www.healthcare.gov).
- As long as the administrative exam is included as part of a routine physical, covered under preventive benefits.
- **Executive physicals:** Not covered.
- **I-693 Form (Immigration Physical) and Supplement to I-693:**
  - To get a Green Card, the INS requires an asylee (refugee) to have a physical exam and provide a complete immunization history.
  - The exam form is the I-693.
  - The immunization history is the Supplement to the I-693.
  - A Civil Surgeon must sign the forms.
  - Applicants pay a fee for both forms.
  - Administrative fees to file the forms are NOT covered.
- **Member questions about the forms:**
  - Advise administrative fees are NOT COVERED.
  - Advise them immunizations and preventive care are covered.
  - Offer to find a Civil Surgeon INN. See [Minnesota Civil Surgeons](#).
  - If applicable, remind them to bring their MN Immunization Record (gold card).

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Individual and Family Business (IFB)

Introduction	<p>This section applies to all Individual and Family Business (IFB) members. Benefit details depend on the member’s brand: Dean (including Dean Health Plan (DHP), Medica (formerly WellFirst), and Prevea360) or Medica.</p>						
Dean (DHP, Medica formerly WellFirst, Prevea360)	<p>IFB policies have a general exclusion that states: <i>Administrative examinations such as employment, licensing, insurance, adoption, or participation in athletics.</i></p> <ul style="list-style-type: none"><li>Examinations, evaluations, and treatment may be considered for payment when the following conditions are met:<ul style="list-style-type: none"><li>Medically necessary.</li><li>Covered benefit.</li><li>Services done by a plan provider with a written referral when required.</li></ul></li><li><b>Court ordered care:</b> Excluded unless medically necessary and otherwise covered in the policy.</li><li><b>DWI initial assessment:</b> Only covered if services are obtained at a plan provider and it is medically necessary treatment.</li></ul>						
Medica	<p>IFB policies have a general exclusion that states: <i>exams, other evaluations or other services for employment, insurance or licensure, unless otherwise covered under this certificate.</i></p> <ul style="list-style-type: none"><li>Although most plans have an exclusion specific to administrative exams, routine physicals are covered (regardless of the reason), as long as it is a full physical.<ul style="list-style-type: none"><li>Must be medically appropriate for preventive services.</li><li>Must follow preventive guidelines on <a href="http://www.healthcare.gov">www.healthcare.gov</a>.</li><li>As long as the administrative exam is part of a routine physical, covered under preventive benefits.</li></ul></li><li><b>Executive physicals:</b> Not covered.</li></ul>						
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