

DOL OMSBUDSMAN

4/20/2017

I have several things I would like to share. Below shows why I have been in the DOL EEOICPA program.

Please notice that they are using ICD 9 codes on their website even thou they will refuse the bill if you use those codes. ACS requires ICD 10 codes now. I would like to share some experiences and frustrations with you.

ACS Web Bill Processing Portal Office of Workers' Compensation Programs

Home | ACS Contact Info | Portal FAQ | Forms & Links | FECA & DEEOIC Fee Schedule | Logout | HELP

Eligibility Response

04/11/2017 02:07 EST

Case File # 535603926 Card Id # 0038011500

The Claimant is eligible for the following:

OWCP will not convert current claimant ICD-9 accepted conditions to ICD-10 codes. Claimants will only be given ICD-10 codes for accepted conditions filed on or after 10/1/2015. Providers should submit bills with an ICD-10 diagnosis code(s) that is reflective of the condition(s) being treated.

ICD Indicator	Code	Modifier	Description	Start Date	End Date
ICD-09	173.32		SQM CEL SKN FACE NEC/NOS	02/21/2013	12/31/9999
ICD-09	492.8		EMPHYSEMA NEC	02/21/2013	12/31/9999
ICD-09	493.90		ASTHMA NOS	02/21/2013	12/31/9999
ICD-09	503		INORG DUST PNEUMOCON NEC	02/03/2014	12/31/9999

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DOL Home | OWCP Home | FECA Home | DCBWC Home | DEEOIC Home

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Dr. Cayetano, my Kadlec Hospital pulmonary doctor, has had to write numerous letters on my behalf trying to help me get the medical coverage needed for my lungs. She has had to resubmit billing information repeatedly because of ACS strict requirements and I believe even the errors of ACS and the CE. She told me a lot of the doctors are not taking the DOL medical cards because there is too much time required on the paperwork for them to get paid. I believe it.

Recently my Pulmonary Rehab for February 2016 was finally paid after a year of it going back and forth. This bill I believe was processed around nine times by ACS and DOL. The billing review cycle is 28 days, so during that 28 days everything freezes. Kadlec has hired a company in Spokane that handles their DOL claims due to all of the rules and reprocessing. I have worked with my CE, Kadlec, my doctor and ACS trying to get this bill resolved. The DOL Kadlec biller said that ACS does not look at the medical record like they do for Medicare patients. She said if ACS handled the bills like Medicare bills they would not have so many of the DOL bills go back and forth with denials. It is a great expense for bills to be repeatedly reprocessed. I believe it would have been cheaper to have paid my claim, especially since I have three lung conditions on my DOL card. Since my bills were not being processed I stopped my Pulmonary Rehab. My doctor has wrote I think 3 letters for this. Each letter was picked apart and sent back. When it was finally right, my CE failed to complete the paperwork needed by ACS so it is frozen

according to ACS when I last checked. I would like you to also note that some months were approved for Pulmonary Rehab before I quit. You are welcome to review those records.

My doctor also wrote asking for a gym membership to help me with my lungs and weight. I was not offered any help to initiate this by my CE. **I finally gave up and purchased a piece of equipment similar to the one I had used at Pulmonary Rehab. I would like ask for the money to be reimbursed for it. I have included the invoice.**

I would like to see ACS change the way they process our bills. I would like to see changes to ACS billing to make it easier like the Medicare billing processes or a claimant friendlier method used so our doctors will CONTINUE TO CARE FOR US and our BILLS WILL BE PAID IN A TIMELY FASHION.

I would like to see the ACS portal be more user friendly for claimants and providers. The staff could also be more helpful and friendlier. It would be helpful to know what is covered and what isn't under that medical card.

I have called DOL several times and they never could take my calls. Eventually they would call, usually when I was gone. I have heard they are required to call you back in 24 hours. If they leave a message on your phone or with another person it goes back to square one and you have to call them back and start the process over. Somehow I never seem to be able to talk to them or by the time I do I am totally frustrated or I just give up. The CE offer little help on how you can help yourself in their world of red tape. But they sound equally frustrated by the DOL EEOICPA program.

I would like to see an exact time appointment set up when the CE cannot take the call. This way you are not a prisoner waiting for their calls.

My primary care doctor, Dr Kalishman, told me to only use my DOL card for the higher dollar expenses, like CT's and PFT's not for office visits. When I went to the Kadlec Express Care for a viral pulmonary infection I was told they don't take the cards there and I would need to go to the hospital if I wanted to use it. If they didn't but Asthma on the bill it's not reimbursable even if I turn it in. There is often confusion over the right codes used. I fought hard to establish that card and now it seems almost useless. I think Bill Clinton signed the bill to help us. What happened!?! We did not ask to get sick so we could cheat the government. Give us a break. People get sicker and they just give up on the program....

I would like to see our doctors trained in the program and billing tools made so they can do their jobs easier and they will want to take us as patients. Maybe a data base with form letters for the thing they are requesting with blanks to be filled in on the patients case. This way all of the correct things are on the form to begin with and the doctor knows what DOL requires.

To recap:

I would like to see ACS change the way they process our bills. I would like to see changes to ACS billing to make it easier like the Medicare billing processes or a claimant friendlier method used so our doctors will CONTINUE TO CARE FOR US and our BILLS WILL BE PAID IN A TIMELY FASHION.

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I would like ask to be reimbursed for the exercise equipment I purchased when I could not get DOL/ACS to approve my Pulmonary Rehab or a gym. I have included the invoice.

On the big picture I would like to see the DOL EEOICPA program be reviewed and changed by a board of claimants, CE and ACS staff to make this much needed program work.

I have heard people in this program worry that the government is making it so hard to use it can be fazed out. I sure hope that is not happening.

I along with other claimants, have noticed depending on who your CE is, determines whether you get approvals or not.