

Submitting Medical Bills and Reimbursement Requests



Medical Benefits - Treatment

- One of the benefits available under the Federal Employees' Compensation Act (FECA) is payment for medical bills related to the accepted condition.
- Under the FECA, the Office of Workers' Compensation Programs (OWCP) authorizes medical services, appliances or supplies "likely to cure, give relief, reduce the degree or period of disability, or aid in lessening the amount of the monthly compensation." (5 USC 8103)
- Any qualified physician or hospital may provide such services, appliances or supplies.

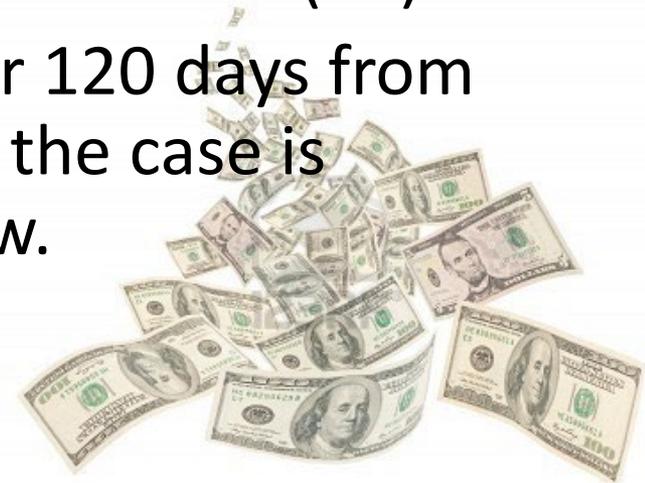
Medical Bills – Time Limit

- Bills must be submitted within **one year** of end of calendar year in which services were provided or the condition was accepted as work related by OWCP, **whichever is later**.
 - Note: A condition may be accepted several years after date of service, due to previous denial, and later acceptance, of a claim.
- This standard also applies to medical and travel reimbursement requests submitted by claimants.



Short Form Closure Cases

- In many cases, OWCP never pays monetary compensation and pays only medical bills.
- A short form closure (SFC) claim is a traumatic injury claim which is uncontested and appears to involve a relatively minor injury.
- SFC claims are administratively closed without review or adjudication by a Claims Examiner (CE).
- Bills are payable for up to \$1500 for 120 days from date of injury. If \$1500 is reached, the case is automatically opened for CE review.



Provider Enrollment

- In order to receive payment for services, **all** providers **must** enroll with OWCP's central bill payment unit to obtain a provider ID number.
- Any provider may enroll.
- Process requires completion of an enrollment form to provide information about provider. Provider may obtain form from the Medical Bill Pay Contractor website.
- Upon enrollment, provider receives a unique ID number necessary for bill processing.

Provider Enrollment

- Online enrollment is easy and user-friendly.
- It is a quick process – in most cases, a single page form with a copy of provider's licensure is all that is required.
- Providers can enroll online at:
<https://owcpmed.dol.gov>

Billing/Payment Process

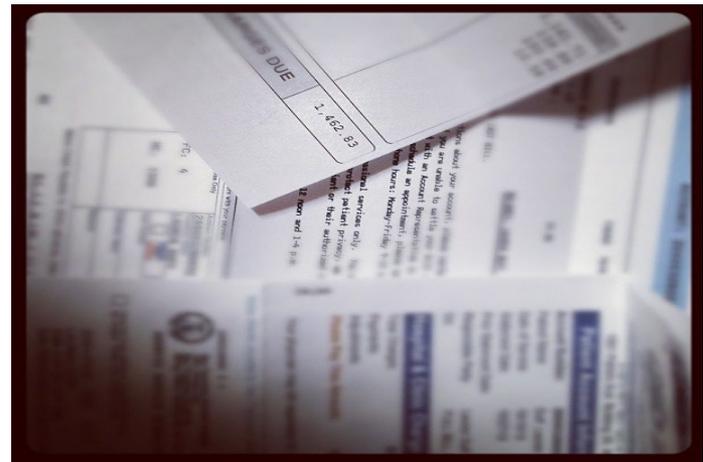
- Providers should confirm authorization for services before submitting a bill.
- Diagnosis listed by provider on bill must match condition accepted by OWCP.
- No bills are payable while a case is in development or denied status.
- OWCP may not pre-pay for any services.

Billing/Payment Process

- Providers may bill OWCP via paper claim or electronically.
- OWCP processes payments based on what is in system at time bill processes.
- OWCP issues checks once a week, and a single check can be for multiple patients and dates of service.
- A “clean” bill processes same day.

Billing/Payment Process

- Provider must bill for specific procedures and dates that have been approved.
- If procedure or dates need to be revised, provider should submit a revised authorization request.
- Retroactive authorizations may be issued at a later date, after an initial denial of authorization, upon review of bill by OWCP.



OWCP Fee Schedule

- Billed charges can be reduced in accordance with federal fee schedule.
- Fee schedule sets maximum allowable **fees** for each billing **code** for each geographic **area**.
- Fee schedule can be found online via main DOL website.
- Providers can appeal a fee reduction, but cannot bill claimant for unpaid amount. Providers must accept OWCP's payment as payment in full.
- Claimant reimbursements are also subject to fee schedule.



Reimbursement to Injured Worker

- Form OWCP-957 (Medical Travel Refund Request)
 - should be used for all medical travel reimbursement
- Form OWCP-915 (Claim for Medical Reimbursement) - Claimant should use this form to request reimbursement for out of pocket work related medical expenses. [Form OWCP-915 replaces Form CA-915.]



Travel Reimbursement to Injured Worker

Claimants may request reimbursement for reasonable and necessary transportation costs and expenses incurred to obtain authorized medical services or supplies. Generally, up to 100 miles roundtrip from claimant's work site, residence, or place of injury is considered reasonable. Claimant must complete and sign Form OWCP-957, Medical Travel Refund Request.

Mileage expenses will be reimbursed at GSA rate in effect on date of travel. There will be no reimbursement for meals or lodging when travel is for less than 12 hours in total or fewer than 500 miles round-trip. Lodging must receive prior authorization. Cab fare or hire of special conveyance in excess of \$75 requires prior authorization. Original itemized receipts are required for cabs and other transportation expenses (including parking and tolls), as well as for all lodging and meals for amounts in excess of \$75.

Additional Information about Bill Processing

- Automated information about bills and reimbursements is available at OWCP's third-party medical billing contractor website <https://owcpmed.dol.gov> or call 1- 866-335-8319 (TOLL-FREE).
- To speak to a customer service representative call (844) 493-1966 (TOLL-FREE) Monday – Friday, 8am – 8pm EST.



Billing Process

- Medical providers **must** be enrolled with OWCP's third-party medical billing contractor to obtain payment. All providers must submit bills on standard billing forms to London, Kentucky mailing address.
- Standard billing forms are HCFA-1500 for physicians, physical therapists, labs, etc., and UB-92 for hospitals.
- Claimants must submit bills for reimbursement on Forms OWCP-915 and 957.

How Agencies Can Help Providers

- Encourage providers to register/enroll with OWCP's third-party medical billing contractor.
- Encourage providers to use OWCP's third-party medical billing contractor web portal (<https://owcpmed.dol.gov>) to check:
 - Eligibility status
 - Authorization status
 - Bill payment status
 - Link to FAQs

How Agencies Can Help Providers

- Issue Form CA-16 when appropriate.
- Encourage use of web portal including WEEDS.
- Educate EA staff on process; see OWCP web site for tools.
- Give providers accepted condition information – ICD-10 codes and descriptions – when they request it.
- Do not submit bills or medical authorizations for providers.

How Agencies Can Help Injured Workers

- Educate IWs about authorization and bill pay processes.
- Advise IWs to use Employees' Compensation Operations and Management Portal (ECOMP).
- Provide forms for reimbursement: Forms OWCP-915 and OWCP-957.
- Do not ignore invoices or letters from collection agencies; enlist help of CE if needed.
- Advice from experienced CEs: Stress to IW and providers that *OWCP will only pay bills for the accepted conditions* so IW should tell provider exactly what conditions are accepted by giving provider a copy of acceptance letter.

Questions

Medical bills are considered timely if they are submitted within five years of either the end of the calendar year in which services were provided or when the conditions were accepted as work related by OWCP, whichever is later.

- a) True
- b) False

Questions

A short form closure claim is a traumatic injury claim which is uncontested and appears to involve a relatively minor injury. These claims are administratively closed without review or adjudication. Medical bills are authorized for payment up to:

- a) \$1500
- b) \$1750
- c) \$2000
- d) \$2500

Questions

A fee schedule sets the maximum allowable fees for each billing code for each geographical area. If a provider receives the fee schedule amount for a bill and that is less than the amount billed, they can then bill the claimant for the unpaid amount.

- a) True
- b) False

Questions

Claimants may request reimbursement for reasonable and necessary transportation costs and expenses incurred to obtain authorized medical services and supplies. Up to how many miles roundtrip from the claimant's work site, residence, or place of injury is considered reasonable?

- a) 100
- b) 75
- c) 50
- d) 25

Questions

Agencies can help injured workers by providing information regarding the billing process. This can be done by:

- a) Advising injured workers to use Employees' Compensation Operations and Management Portal (ECOMP).
- b) Providing forms for reimbursement, such as Forms OWCP-915 and OWCP-957.
- c) Advising them to not ignore invoices or letters from collection agencies.
- d) Educating injured workers about the authorization and bill pay process.
- e) Stressing to injured workers and providers that OWCP will only pay bills related to the accepted conditions.
- f) All of the above

Take Away Tips

- 1) One of the benefits available under the Federal Employees' Compensation Act (FECA) is payment for medical bills related to the accepted condition. Under the FECA, OWCP authorizes medical services, appliances or supplies "likely to cure, give relief, reduce the degree or period of disability, or aid in lessening the amount of the monthly compensation."
- 2) Bills must be submitted either within one year of end of calendar year in which services were provided or the condition was accepted as work related by OWCP, whichever is later.
- 3) In order to receive payment for services, all providers must enroll with OWCP's Medical Bill Pay Contractor to obtain a provider ID number.

Take Away Tips

- 4) Fee schedule sets maximum allowable fees for each billing code for each geographic area. Providers can appeal a fee reduction, but cannot bill claimant for unpaid amount. Providers must accept OWCP's payment as payment in full. Claimant reimbursements are also subject to fee schedule.
- 5) Form OWCP-957 (Medical Travel Refund Request) - should be used for all medical travel reimbursement. Claimants may request reimbursement for reasonable and necessary transportation costs and expenses incurred to obtain authorized medical services or supplies.
- 6) Form OWCP-915 (Claim for Medical Reimbursement) - Claimant should use this form to request reimbursement for out of pocket work related medical expenses. [Form OWCP-915 replaces Form CA-915.]