

Effective 05/13/2023, DCMWC requires medical providers and facilities to submit supporting medical documentation for services they provide to claimants for their covered black lung condition.

This quick reference guide outlines the process of attaching supporting documents for the various bill submission methods and highlights some new edits providers may encounter due to this change. It also provides examples of required supporting documentation that must be attached to the bill. More information is available on the Medical Bill processing Portal: DCMWC News | OFFICE OF WORKERS' COMPENSATION PROGRAMS (dol.gov)

Bill Submission via Direct Data Entry (DDE)

The process of submitting bills via DDE remains the same. This process is covered in detail in the Bills Tutorials (Bills Tutorial: Direct Data Entry (DDE) located on the Training & Tutorials for Provider page.

Once all bill data is entered, select Submit Bill.
 The Transaction Control Number (TCN) appears.

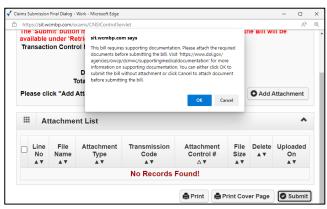


2. When the pop-up opens prompting to submit an attachment, select **OK**.

Note: Attachments are required. If **Submit** is selected without attaching any supporting documentation, the system displays a warning message. To close this message, **OK** can be selected.

Note: If a bill is submitted without attaching any supporting documentation, it will be denied.





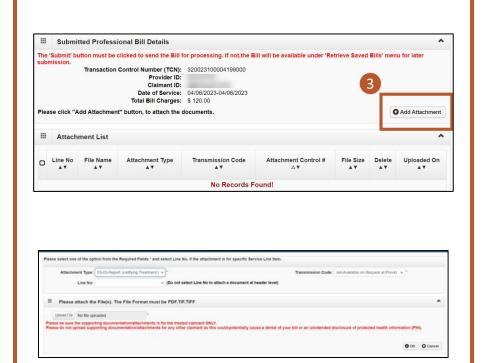




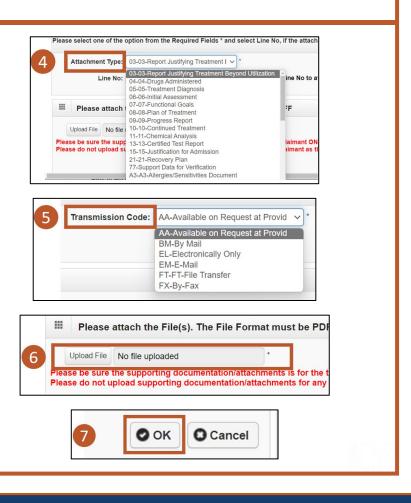
Bill Submission via Direct Data Entry (DDE), Continued (2 of 3)

3. Select **Add Attachment**. The Attachment window opens.

Note: Refer to the <u>Supporting Medical</u> <u>Documentation Requirement</u> section for details of required supporting documents.



- 4. Select the **Attachment Type** from the drop-down list.
- 5. Select **Transmission Code** from the drop-down list.
- 6. Use **Upload File** to upload documentation.
- 7. Select OK.





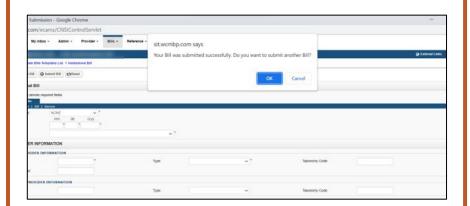


Bill Submission via Direct Data Entry (DDE), Continued (3 of 3)

Note: Once the attachment is added, it is listed in the **Attachment List** section.

Select **Submit** to submit a bill. A pop-up opens with a success message.





Note: When an attachment is submitted, the bill shows a status of "In Process," indicating that the attachment is under review.





Denials and Edits

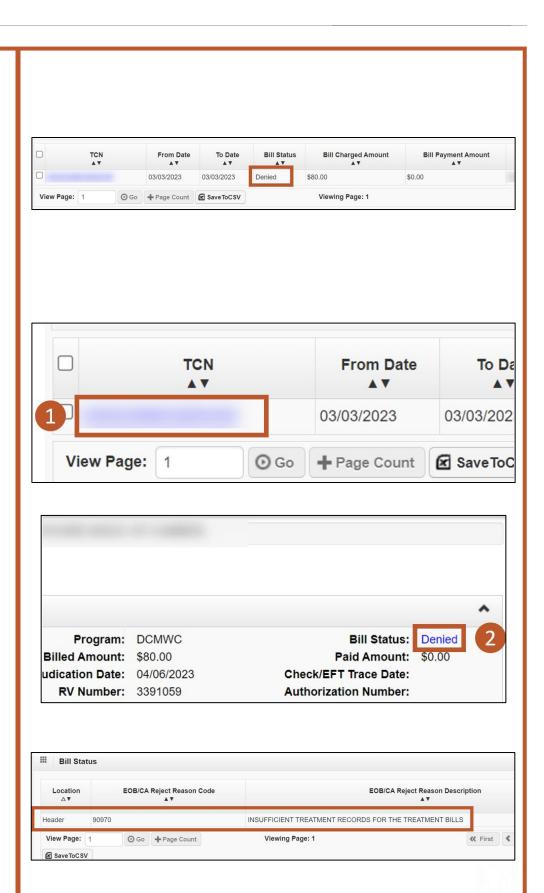
When no attachments are submitted, the bill is denied using **Edit 90970.**

EOB Message: Insufficient treatment records for the treatment bills.

To view the denial reason:

 Select the TCN link. The Bill Details page opens.

Select the **Denied** link. The **Bill Status** page opens providing details of the edit or edits due to which the bill was denied.



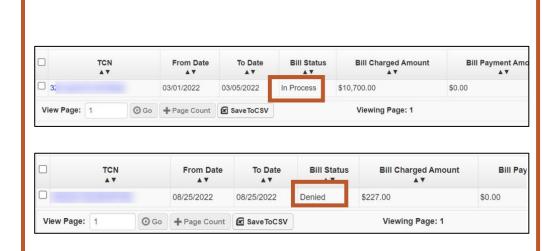


Bill Submission via Electronic Data Interchange (EDI)

The process of submitting bills via EDI remains the same. The process is outlined in the Bills Tutorials (Bills Tutorial: Direct Data Entry (DDE) located on the Training & Tutorials for Provider page. This sections walks through a new edit that Providers may see while submitting bills via EDI.

Notes:

- EDI bills remain in an In Process status while awaiting attachments.
- If supporting documents are not received within seven (7) days, the bill auto-denies with Edit 92970.



To view the denial reason:

- Select the TCN link. The Bill Details page opens.
- Select the **Denied** link. The **Bill Status** page opens providing details of the edit or edits due to which the bill was denied.

EOB message: Insufficient treatment records for the treatment bills.

Note: Refer to the Supporting Medical Documentation Requirement section of this document for details of required supporting documents.











Bill Submission via Paper

Providers can submit paper bills via mail. The process of submitting paper bills remains the same.

The following bill forms, along with instructions, are available on the WCMBP Web Portal.

- OWCP 1500/HCFA-1500 (Professional) Form: Standard form used by physicians and other providers when submitting bills pr claims for reimbursement for health services rendered to an OWCP claimant.
- OWCP UB 04 (Institutional) Form: Standard claim form that an Institutional provider can use for the billing of medical and mental health claims rendered to an OWCP claimant.

Send bills and supporting documentation to:

Federal Black Lung Program PO Box 8302 London, KY 40742-8302

Note: Refer to the Supporting Medical Documentation Requirement section of this document for details of required supporting documents.



Supporting Medical Documentation Requirement

Note: Providers are responsible for ensuring the appropriate supporting documentation is attached to bills.

The screenshots on this page and the following two pages are of the Bill Attachment Requirements table located in the document: BILLATTACHMENTREQUIREMENTS FinalforWeb030822.pdf (dol.gov).

Type of Bill	Procedure/Visit Type	Brief Description	Required Attachment Example
Professional	Office Visit	E&M visit, Follow Up visit	Physician Report, Office Note, Consultation Note/Report
Professional or Institutional	Pulmonary Rehab Bill	Pulmonary Rehab Session, Initial Evaluation, Re- Evaluation	Physician prescribed exercise (e.g., mode of exercise, target intensity, duration of each session, and frequency of sessions), Progress notes, and Assessments (e.g., Psychosocial assessment, and outcomes assessment), Individualized treatment plan.
Professional or Institutional	Radiology/CT/ MRI	Diagnostic test	Interpretation Report
Professional or Institutional	Chemotherapy	Treatment	Treatment Plan, Plan of Care



Supporting Medical Documentation Requirement, Continued (2 of 3)

Type of Bill	Procedure/Visit	Brief	Required Attachment			
	Type	Description	Example			
Professional or	Surgical	Surgical	Operative Report			
Institutional	Procedure	Procedure				
Professional	Ambulance	Transportation	Emergency Room			
		Services	Report, Certification of			
			Travel, Travel Log			
			sheet			
Professional	DME	DME	Approved Certificate			
			of Medical Necessity			
			(CMN)			
			(23.23.)			
Institutional	Outpatient	E&M visit,	Physician Report,			
	Services	Follow Up visit	E&M Visit Report,			
	Services	Tonow op visit	Treatment Note			
			110444110410			
Professional or	ER Visits	ER Visit	Emergency Room			
Institutional			Report, Itemized			
			Statement, Ambulance			
			Log From/To travel			
			Log Trom To Mayor			
Institutional	Inpatient	Inpatient	Admission History			
	Treatment	Services, Organ	Report, Admission and			
		Transplantation	Discharge Summary,			
			Itemized Statement			
Professional or	Any Type of	Unlisted	Supporting			
Institutional	services	Procedure	documentation that			
			documents the services			
			rendered.			
			Tondored.			



Supporting Medical Documentation Requirement, Continued (3 of 3)

Type of Bill	Procedure/Visit Type	Brief Description	Required Attachment Example
Carrier	Third Party Reimbursement	All services paid by other insurance carrier or other Government Agency	OWCP Carrier Reimbursement Form, Copy, attaching a copy of the original billed services submitted on the HCFA- 1500 or the UB04.