Office of Workers' Compensation Programs (OWCP) Connect for Authorized Representatives

Introduction

The purpose of this training is to inform Authorized Representatives (AREPs) on how to register with OWCP Connect.

1. What is OWCP Connect?

2. How to access OWCP Connect using the Workers' Compensation Medical Bill Process (WCMBP) Portal

3. How do you register?

For any OWCP Connect registration issues, speak to a customer service representative at 844-493-1966.

What is OWCP Connect?

OWCP Connect

A mechanism that authenticates authorized representative users. All users must register using OWCP Connect to gain access to the Workers' Compensation Medical Bill Process (WCMBP) system.

Accessing OWCP Connect through the WCMBP Portal (1)

1. Go to the OWCP Medical Bill Processing Portal (https://owcpmed.dol.gov).

Accessing OWCP Connect through the WCMBP Portal (2)

2. Select **Login**.

Accessing OWCP Connect through the WCMBP Portal (3)

3. Select **Representative**.

Viewing the Account Registration Section

To begin the OWCP Connect Account Registration process, select **CREATE ACCOUNT** under the **New User** section on the OWCP Connect home page.

OWCP Connect

Once your identity is verified, you can enroll and login to OWCP's Medical Bill Processing Portal to:

- Look up a claimant's case number
- Find a claimant's accepted diagnosis code(s)
- Check eligibility for specific procedures
- Submit prior authorization requests
- Submit/resubmit bills and adjustments
- View payment status
- View correspondence
- Utilize Fee Schedule Calculator
- Maintain provider enrollment information
- Add additional users who can use the portal

Existing User

Login Using Email Address:

[   ]

LOGIN

Forgot password?

PASSWORD RESET

Change Email?

CHANGE EMAIL

New User

First time using OWCP Connect?
Create a new account here.

CREATE ACCOUNT

Information for Medical Providers
1. This process generally takes 3-5 minutes
2. Enrollment Tutorials (Click Here)
3. Contact Us (Click Here)

1. Please enter required information (Name and email address).

Account Registration

Enter the below information to create the account

First Name*	Jane
Last Name*	Doe
Middle Initial	
Email*	janedoe@yahoo.com

Consider using an email address that is not associated with your current employment.

This email is available.

Retype Email*	Janedoe@yahoo.com

This email is available.

Enter result of addition from image below*

4 + 5

9

* Required Field

NEXT

OWCP Connect Registration (2)

2. A message will populate to notify you that the email you are entering is available to register and that it is not already registered with OWCP Connect to an existing user account.

3. Enter the result of the addition problem in the image.

Account Registration

Enter the below information to create the account

First Name* : Jane

Last Name* : Doe

Middle Initial :

Email* : janedoe@yahoo.com

Consider using an email address that is not associated with your current employment.

This email is available.

Retype Email* : Janedoe@yahoo.com

This email is available.

Enter result of addition from image below*

4 + 5

9

* Required Field

NEXT

4. Select **Next**.

OWCP Connect Registration (5)

5. Once the identity validation is completed, create and enter a password. Retype that password in the field below to confirm the password matches.

6. Select **Next**.

Note: Password Criteria requires:
- be at least 8 characters long,
- include an uppercase letter, a lowercase letter, a number, and a special character.

By selecting the "Next" button, providers will be taken to the security image page where they must select an image and create a "Key Phrase".

7. Select a security image, enter a key phrase.

8. Select **Next**.

OWCP Connect Registration (9)

9. Select and answer a security question from each drop-down list.

Security Questions

Please select security questions & answers. They may be used during the login process for login verification.

Security Questions *

1. What is the name of the boy or girl that you first kissed? ∨
   Doe

2. Who is your favorite actor, musician, or athlete? ∨
   Doe

3. What was the make and model of your first car? ∨
   Doe

* Required Field

PREV   SUBMIT

10. Select **Submit**.

Security Questions

Please select security questions & answers. They may be used during the login process for login verification.

Security Questions *

1. What is the name of the boy or girl that you first kissed? ⌄

   Doe

2. Who is your favorite actor, musician, or athlete? ⌄

   Doe

3. What was the make and model of your first car? ⌄

   Doe

* Required Field

PREV   SUBMIT

System creates an account and a link to activate the account is sent to your email address used in registration.

Note: The account must be activated within 24 hrs.

Select "Resend Email" if the email is not received within 10 minutes.

Account Creation

Your account creation request has been submitted successfully.

An email has been sent to the email address you provided, which includes a link that you will need to click in order to activate your account. The link provided in the email is available for 24 hours.

RESEND EMAIL

OWCP Connect Registration (12)
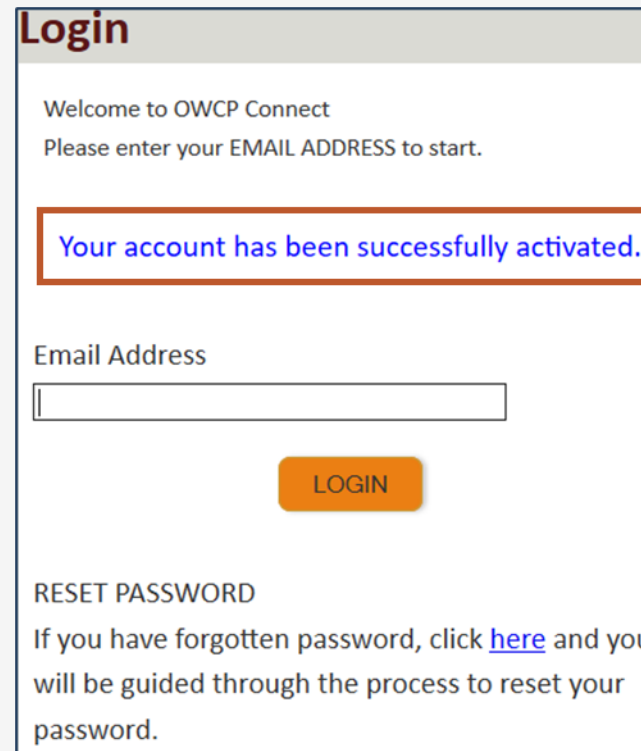
Look for email from: support@dol.gov.

11. Select link that says "**here**."
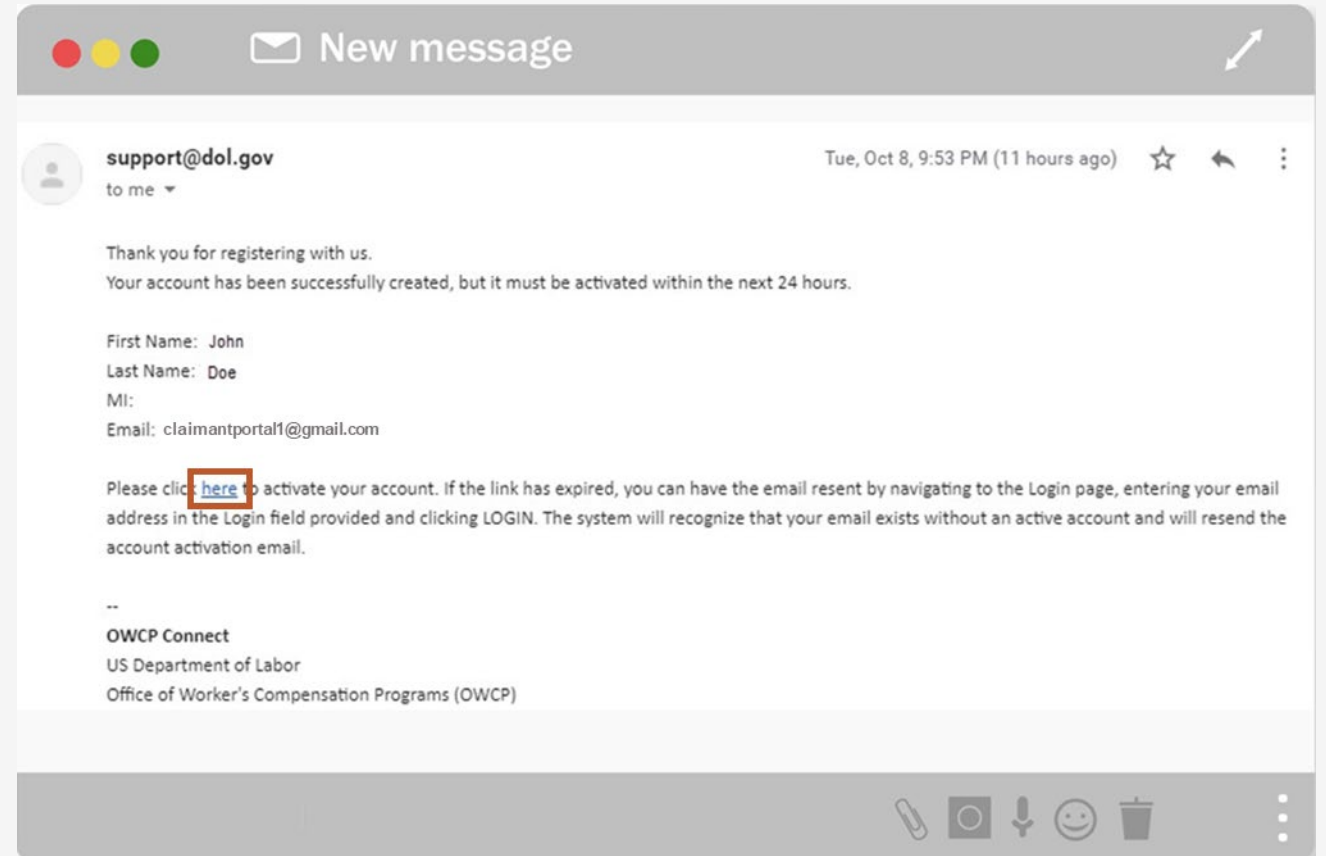
Logging In to the WCMBP Claimant Portal (1)

At the Login page, the system displays a banner message informing you that your account has been successfully activated.
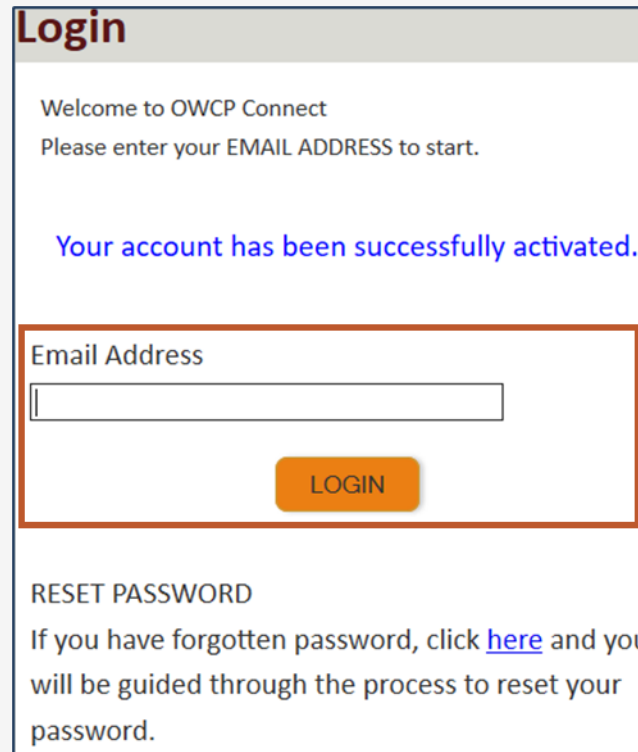
1. Enter your Email Address and select **LOGIN**.

Logging In to the WCMBP Claimant Portal (3)

The System displays your Security Image and Key Phrase for verification.

2. Enter your Password and select **SUBMIT**.

The system opens the WCMBP Claimant Portal.
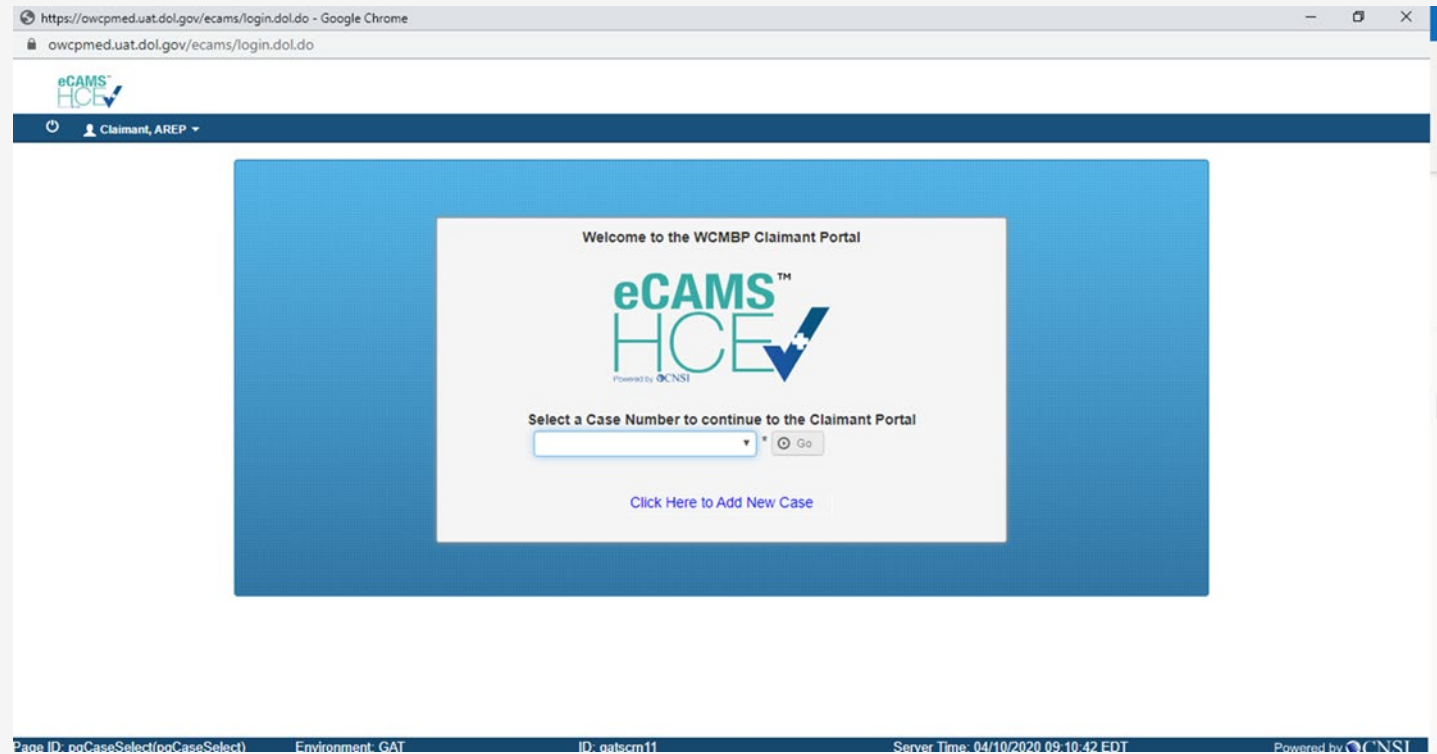
The Authorized Representative will land on the WCMBP Claimant Portal. To access associated cases, complete the following steps (these steps must be completed for each case associated with the Authorized Representative):

1. Select the hyperlink **Click Here to Add New Case**.
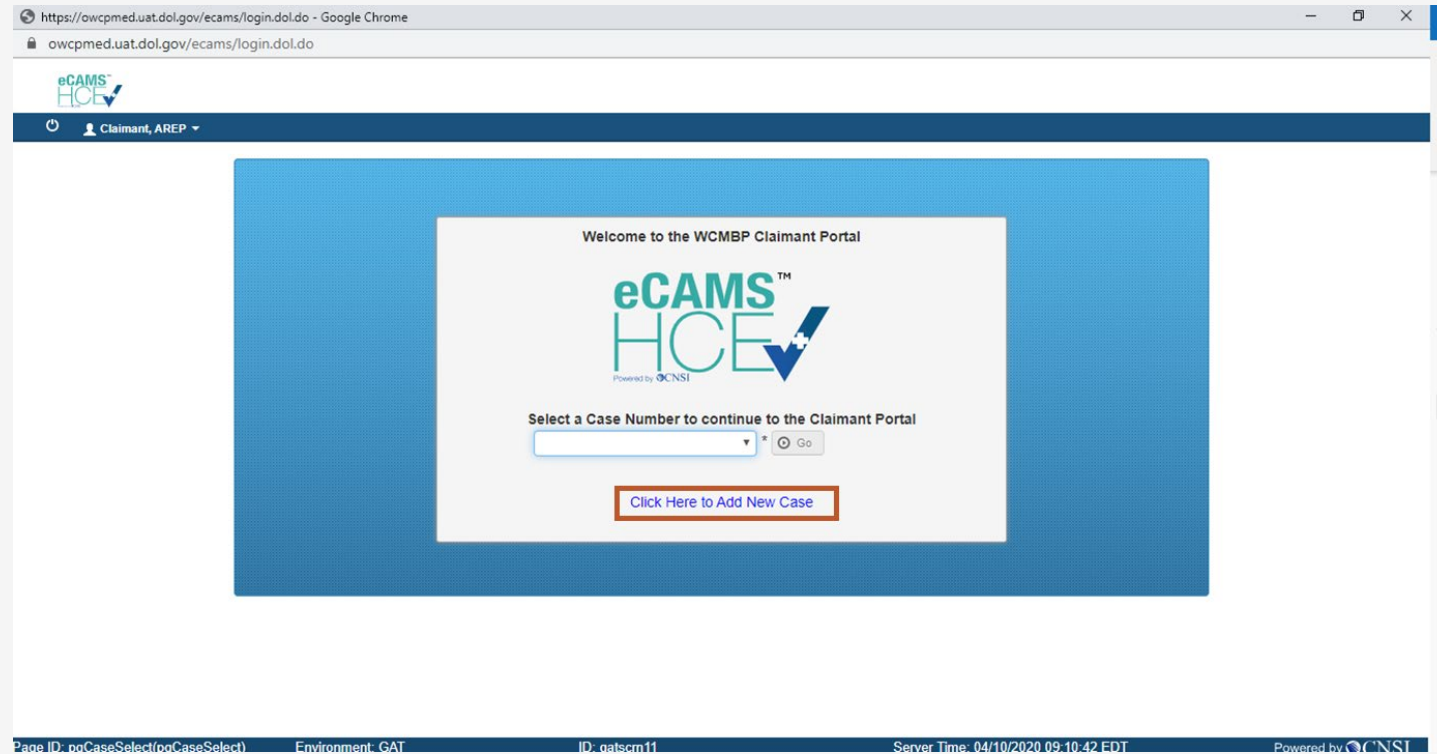
WCMBP Claimant Portal (2)

The Authorized Representative must complete all required fields.

2. Enter the **Authorized Representative/Power of Attorney Details** (First Name, Last Name, Representative ID)

3. Enter the **Case Details** (Program, First Name, Last Name, SSN, and Date of Birth)

4. Select **Submit**.

THANK YOU!