

Create Bill Templates



Introduction

The Workers' Compensation Medical Bill Process (WCMBP) System features templates that allow providers to create preset formats for billing Office of Workers' Compensation Programs (OWCP), reducing the need to recreate an entire bill with each submission. The purpose of this tutorial is to educate providers on the use of bill templates for Direct Data Entry (DDE) online bill submission. It is broken out into these three sections:

- [Creating and Managing Bill Templates](#)
- [Updating Bill Templates](#)
- [Deleting Bill Templates](#)



Creating and Managing Bill Templates



Creating and Managing Bill Templates (1 of 19)

1. Log in to the [WCMBP System](#). The system displays the **Select a Provider ID Number** page.
2. Select the **Ext Provider Bills Submitter** profile from the drop-down list and select **Go**.
3. From the **Bills** column, select the **Manage Templates** link.

Note: Under **Admin**, **Maintain Users** and **Switch OWCP Provider ID** are two different links.

Select a Provider ID Number to continue to the Provider Portal:

Available Provider IDs: 700  *

Select a profile to use during this session:

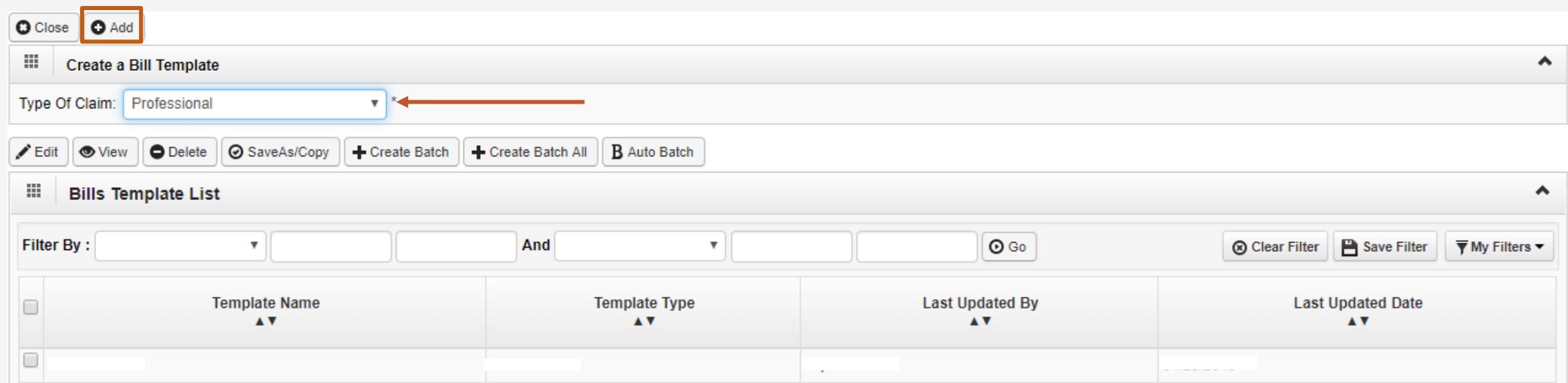
EXT Provider Bills Submitter  *

Bills
Bill Inquiry
View Payment
Bill Adjustment
On-line Bills Entry
Resubmit Denied Bill
Retrieve Saved Bills
Manage Templates
Create Bills from Saved Templates
View Accounts Receivable
Fee Schedule Calculator

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Create a Bill Template:

4. Select **Professional**, **Institutional**, or **Dental** from the **Type Of Claim** drop-down list dependent on the type of bill for which the provider wants to create a template and select **Add**.



The screenshot shows a software interface for managing bill templates. At the top, there are 'Close' and 'Add' buttons. The 'Add' button is highlighted with a red box. Below this is a section titled 'Create a Bill Template' with a 'Type Of Claim' dropdown set to 'Professional', which is also highlighted with a red arrow. A toolbar below the dropdown includes 'Edit', 'View', 'Delete', 'SaveAs/Copy', 'Create Batch', 'Create Batch All', and 'Auto Batch'. The main area is titled 'Bills Template List' and contains a 'Filter By' section with dropdowns and buttons for 'Clear Filter', 'Save Filter', and 'My Filters'. A table below shows columns for 'Template Name', 'Template Type', 'Last Updated By', and 'Last Updated Date'. Each row in the table has a checkbox in the first column.

	Template Name	Template Type	Last Updated By	Last Updated Date
<input type="checkbox"/>				
<input type="checkbox"/>				

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The **Professional Bill** page opens where the provider must enter Basic Bill information to create the provider template.

5. Select the program from the **Program** drop-down list at the top.
6. In the **Template Name** field, enter a name for the provider template.

Note: The **Submitter ID** is displayed at the top right side of the page, based on the provider login credentials.

Billing provider information populates based on the provider login credentials.

7. The Provider can enter rendering servicing facility information.

The screenshot shows the 'Professional Bill' interface. At the top, a note says 'Note: asterisks (*) denote required fields.' Below is the 'Basic Bill Info' section with tabs for Provider, Claimant, Bill, and Service. The 'Program' dropdown is set to 'DFEC - Division of Federal Employees' Compensation'. The 'Template Name' field is highlighted with a red box and contains the value 'Test'. The 'Submitter ID' field is also highlighted with a red box. The 'Provider Information' section is expanded, showing fields for Provider ID, NPI, Provider Name, Address Line 1, Address Line 2, City/Town, State/Province, County, Country, and Zip Code. A question 'Is the Billing Location also the Service Facility Location?' with radio button options 'Yes' and 'No' is visible at the bottom.

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8. Complete the following under the **CLAIMANT INFORMATION** section:
 - a. Enter the claimant ID in the **Claimant ID** field.
 - b. Select **CASE NUMBER** from the **Type** drop-down list.
 - c. Enter the claimant's name in the **Last Name**, **First Name**, and **Middle Name** fields.
 - d. Enter the claimant's date of birth (DOB) in the **Date of Birth** fields.
 - e. Select the gender from the **Gender** drop-down list.

The screenshot shows a software interface for entering claimant information. The 'CLAIMANT' section is the primary focus, enclosed in a red border. Within this section, the 'Claimant ID' field, the 'Type' dropdown menu (with 'CASE NUMBER' selected), and the 'Date of Birth' fields are also highlighted with red boxes. The 'Last Name', 'First Name', 'Middle Name', 'SSN', 'State/Province', and 'Zip Code' fields are shown but not highlighted.

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Note: Once the provider selects the case number type, the claimant information may auto-populate.

Note: The template can be reused for the same claimant or a different claimant.

If the template will be used for a different claimant but for same type of services, the claimant information need not be added.

9. Select **Yes or No** to the question **Does Bill have any Third-Party Liability Amount?**

- If **Yes** is selected, enter the TPL amount in the **Third Party Liability Amount** field below.

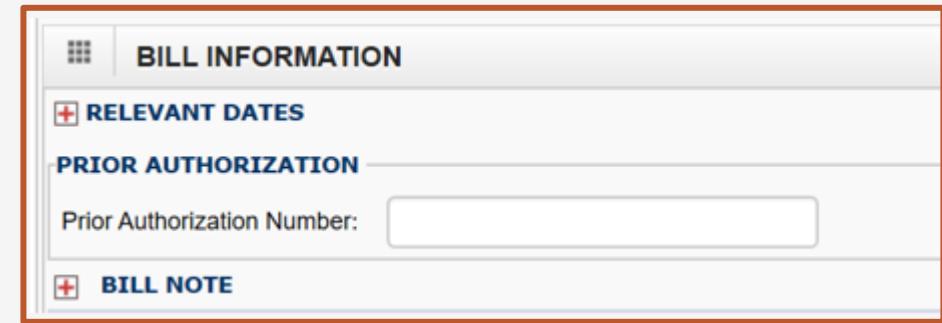


The screenshot shows a user interface element for managing bill templates. It features a question "Does Bill have any Third Party Liability Amount?" with a radio button group for "Yes" and "No". Below the question is a section titled "Third Party Liability Information" containing a text input field labeled "Third Party Liability Amount:".

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10. Below the **CLAIMANT INFORMATION** section on this page, enter the **BILL INFORMATION**.

Note: Although these are not required fields, providers can select the plus icons to open the screens to enter Relevant Dates or a Bill Note. These fields are optional.



The image shows a software interface for managing bill templates. A red box highlights the 'BILL INFORMATION' section. This section contains three main items: 'RELEVANT DATES', 'PRIOR AUTHORIZATION' (with a text input field for 'Prior Authorization Number'), and 'BILL NOTE'. Each item has a plus icon to its left, indicating it can be expanded.

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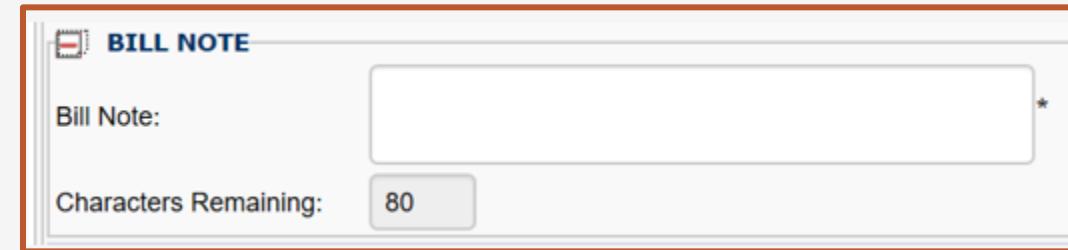
11. To enter relevant dates, select the plus icon next to **RELEVANT DATES**. A new dialogue box appears to enter the information.

RELEVANT DATES							
Onset of Current Illness/symptom Date:	mm	dd	ccyy	Admission Date:	mm	dd	ccyy
Discharge Date:	mm	dd	ccyy	Assumed Care Date:	mm	dd	ccyy
Relinquished Care Date:	mm	dd	ccyy	Hearing or Vision Prescription Date:	mm	dd	ccyy

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12. To enter a bill note related to the services the provider is entering on this bill, select the plus icon next to **BILL NOTE**. A new dialogue box appears to enter the information.

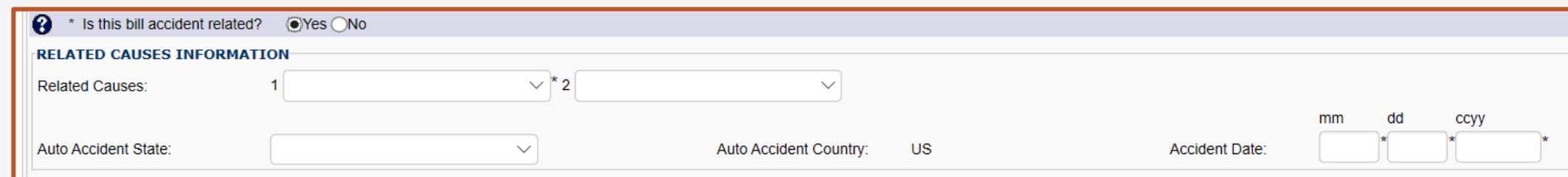
Note: Up to 80 characters can be entered.



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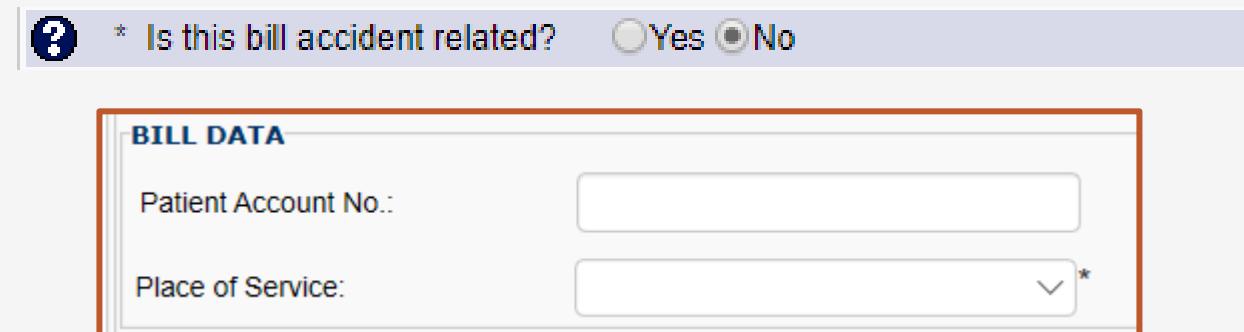
13. Proceed as applicable depending on the answer selected for "Is this bill accident related?"

- If "Yes" is selected, a screen opens for information to be entered. Select the applicable option from the **Related Causes** drop-down list.



The screenshot shows a form section titled "RELATED CAUSES INFORMATION". It includes a question "Is this bill accident related?" with radio buttons for "Yes" (selected) and "No". Below this is a "Related Causes" field with two dropdown menus, labeled "1" and "2". To the right are fields for "Auto Accident State" (dropdown), "Auto Accident Country" (set to "US"), and "Accident Date" (text input fields for mm, dd, ccyy). The entire "Related Causes Information" section is highlighted with an orange border.

- If "No" is selected, complete these steps:
 - Enter the patient account number in the **Patient Account No.** field.
 - Select the applicable option from the **Place of Service** drop-down list.



The screenshot shows a form section titled "BILL DATA". It includes a "Patient Account No." field and a "Place of Service" dropdown menu. The "Patient Account No." field is highlighted with an orange border. The entire "BILL DATA" section is highlighted with an orange border.

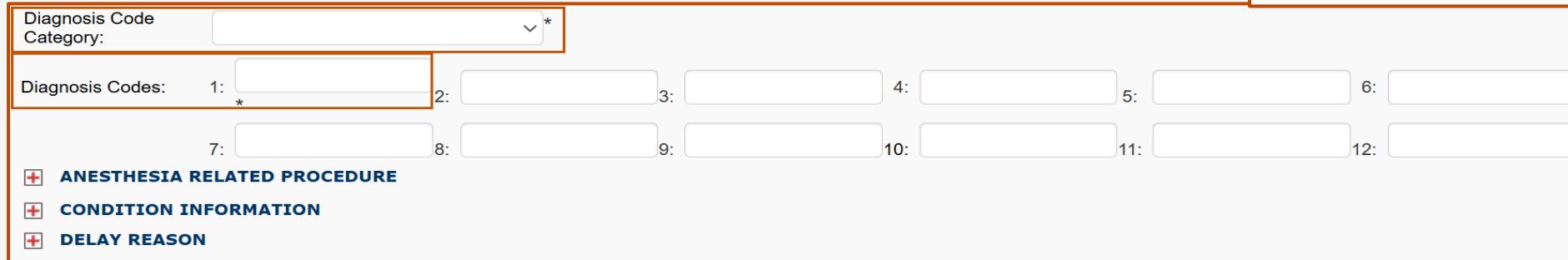
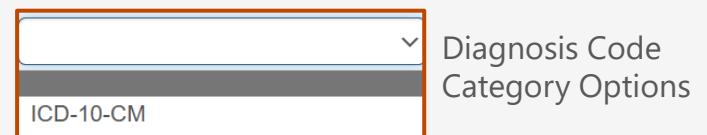
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In the Bill Data, Diagnosis Codes section enter the information as described herein:

14. From the **Diagnosis Code Category** drop-down list, select the code category the provider will be using, ICD-9 or ICD-10.
15. In the **Diagnosis Codes** fields, enter up to 12 diagnosis codes. List the ICD Codes in primary order.

Notes:

- All ICD-9 or ICD-10 codes must be listed based on the Date of Service (DOS).
- ICD Codes must be listed in sequential order, 1-12 (cannot skip a number).
- ICD-9 Diagnosis Codes (applies if DOS is on or prior to September 30, 2015).
- ICD-10 Diagnosis Codes (applies if DOS is on or after October 1, 2015).
- Information continues on next slide.



Diagnosis Code Category:

Diagnosis Codes: 1: 2: 3: 4: 5: 6:
7: 8: 9: 10: 11: 12:

ANESTHESIA RELATED PROCEDURE
 CONDITION INFORMATION
 DELAY REASON

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16. To add an **ANESTHESIA RELATED PROCEDURE**, **CONDITION INFORMATION**, and **DELAY REASON**, select the plus icon next each of these sections. These sections open to reveal required fields.

- In the **ANESTHESIA RELATED PROCEDURE** section, update **Principle HCPCS Code** or **Other HCPCS Code**.
- In the **CONDITION INFORMATION** section, update **Condition Code**. Add another **Code** if necessary.
- In the **DELAY REASON** section, select a reason from the **Delay Reason Code** drop-down list.

Note: Providers can select the minus icon next to each of these fields to minimize or exit the screen if it is no longer needed. Providers can select **Add Another** to add another Code.

ANESTHESIA RELATED PROCEDURE

Principle HCPCS Code: * Other HCPCS Code:

CONDITION INFORMATION

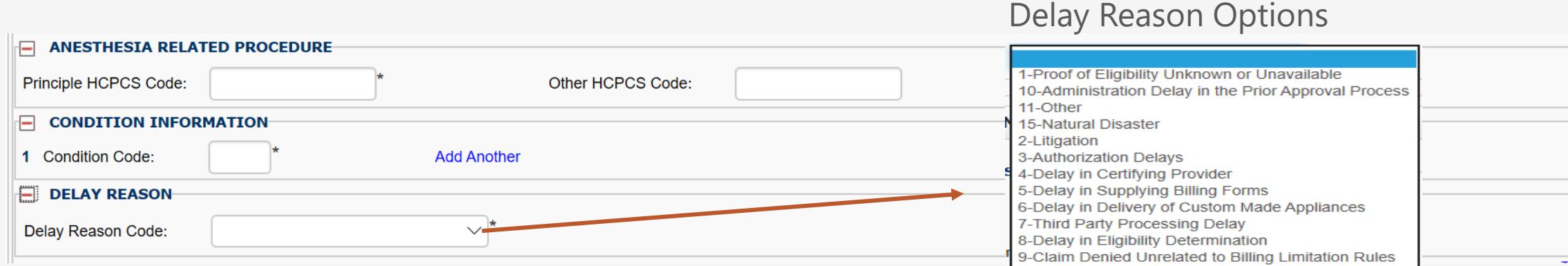
1 Condition Code: * Add Another

DELAY REASON

Delay Reason Code: *

Delay Reason Options

- 1-Proof of Eligibility Unknown or Unavailable
- 10-Administration Delay in the Prior Approval Process
- 11-Other
- 15-Natural Disaster
- 2-Litigation
- 3-Authorization Delays
- 4-Delay in Certifying Provider
- 5-Delay in Supplying Billing Forms
- 6-Delay in Delivery of Custom Made Appliances
- 7-Third Party Processing Delay
- 8-Delay in Eligibility Determination
- 9-Claim Denied Unrelated to Billing Limitation Rules



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17. In the **BASIC LINE ITEM INFORMATION** section, complete the following basic service line items:

- **Service Date From** and **Service Date To**: Enter the date of service range (when the services were rendered)
- **Place of Service**: (if different from header) Enter the two-digit POS Code representing where services were rendered
- **Procedure Code**: Enter the five-character HCPCS, CPT, or CDT.
- **Submitted Charges**: Enter the charge for the line item
- **Units/Quantity**: Enter the number of units provided during the DOS range listed

The screenshot shows the 'BASIC LINE ITEM INFORMATION' section of a software interface. The title 'BASIC LINE ITEM INFORMATION' is at the top. Below it is a sub-section titled 'BASIC SERVICE LINE ITEMS'. The form contains the following fields:

- Service Date From: Three input fields for mm, dd, and ccyy, each marked with an asterisk (*) indicating required input.
- Service Date To: Three input fields for mm, dd, and ccyy, each marked with an asterisk (*) indicating required input.
- Place of Service: A dropdown menu.
- Procedure Code: A text input field.
- Submitted Charges: A text input field.
- Units/Quantity: A text input field.
- Third Party Liability Amount: A text input field.
- EMG: A dropdown menu.
- Bill Note: A text input field.
- Diagnosis Pointers: Four dropdown menus labeled 1, 2, 3, and 4.
- Characters Remaining: A text box showing the number 80.

Remaining fields are covered on the next slide.

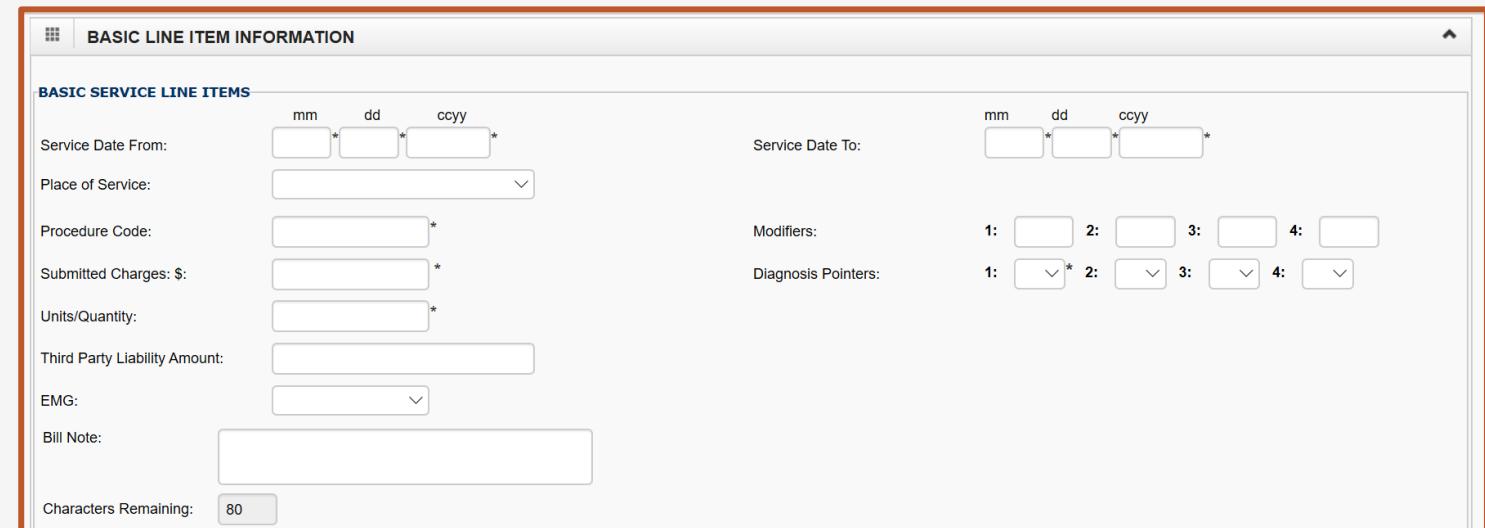
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18. In the **BASIC LINE ITEM INFORMATION** section, complete the following basic service line items:

- **Third Party Liability Amount:** Enter the amount that was paid by a third party

Note: If listed, monies will be deducted from the allowed reimbursement amount (Third Party Liability Amount).

- **EMG:** (Optional) Select **Yes** or **No** as to whether this is an emergency service
- **Bill Note:** (Optional) Enter a bill note, up to 500 characters
- **Modifiers:** These are separate fields (up to four modifiers can be entered)
- **Diagonal Pointers:** Enter the diagnostic reference number (one to twelve) from the **Bill Information** section) to relate the DOS and procedure performed to the appropriate DX



The screenshot shows the 'BASIC LINE ITEM INFORMATION' section of a software application. The title 'BASIC LINE ITEM INFORMATION' is at the top, followed by a sub-section title 'BASIC SERVICE LINE ITEMS'. The form contains the following fields:

- Service Date From: mm * dd * ccyy *
- Service Date To: mm * dd * ccyy *
- Place of Service: (dropdown menu)
- Procedure Code: (text box)
- Submitted Charges: \$ (text box)
- Units/Quantity: (text box)
- Third Party Liability Amount: (text box)
- EMG: (dropdown menu)
- Bill Note: (text box)
- Modifiers: 1: (text box) 2: (text box) 3: (text box) 4: (text box)
- Diagnosis Pointers: 1: (dropdown menu) * 2: (dropdown menu) 3: (dropdown menu) 4: (dropdown menu)

At the bottom, a note says 'Characters Remaining: 80'.

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18. In the **BASIC LINE ITEM INFORMATION** section, complete the following basic service line items:

- **Third Party Liability Amount:** Enter the amount that was paid by a third party

Note: If listed, monies will be deducted from the allowed reimbursement amount (Third Party Liability Amount).

- **EMG:** (Optional) Select **Yes** or **No** as to whether this is an emergency service
- **Bill Note:** (Optional) Enter a bill note, up to 500 characters
- **Modifiers:** These are separate fields (up to four modifiers can be entered)
- **Diagonal Pointers:** Enter the diagnostic reference number (one to twelve) from the **Bill Information** section) to relate the DOS and procedure performed to the appropriate DX

Creating and Managing Bill Templates

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19. In the **BASIC LINE ITEM INFORMATION** section, complete the following basic service line items:

Prior Authorization Number : Enter the provider authorization number

- **Rendering Provider ID (if different from header)**: Enter if different from the header provider information
- **Ordering Provider ID**: Enter if different from the header provider information
- **Referring Provider ID (if different from header)**: Enter if different from the header provider information

Note: The **Prior Authorization Number**, **Rendering Provider ID**, **Ordering Provider ID**, and **Referring Provider ID** fields are not required.

- Select the applicable response (Yes or No) next to **Is the Header Service Facility Location also the Service Line Facility Location?**

Note: If "No" is selected, a dialogue box will allow the provider to add the Servicing Facility Location (address), Provider ID, and Type information.

Prior Authorization Number:

Rendering Provider ID (If different from header):

Ordering Provider ID:

Referring Provider ID (If different from header):

Type:

Type:

Type:

Taxonomy Code:

Is the Header Service Facility Location also the Service Line Facility Location? Yes No

LINE DRUG INFORMATION

Add Service Line Item Update Service Line Item

Creating and Managing Bill Templates

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20. In the **BASIC LINE ITEM INFORMATION** section, complete the following basic service line items:

- **Is the Header Service Facility Location also the Service Line Facility Location?**: Proceed as applicable depending on the answer selected.
Note: This section automatically defaults to **Yes**.
 - If **Yes**, proceed to the next step.
 - If selecting **No**, a dialogue box opens to add the Service Line Facility Location in the Billing Provider Information.
 - In the **Provider ID** field, enter the Servicing Facility Provider ID.
 - Select **NPI** from the **Type** drop-down list.
 - Select the plus icon next to **Address** to enter the Servicing Facility Location address. The **Address details** window opens.
 - Complete the **Address Line 1** and **Zip Code** fields, then select **Validate Address**. The remaining address fields automatically populate.
 - To return to the **Professional Bills Online Submission** page, select **OK**.

The screenshot shows the 'Basic Line Item Information' section and an 'Address details' dialog box. In the main section, the 'Is the Header Service Facility Location also the Service Line Facility Location?' field is set to 'Yes'. The 'Servicing Facility Location' section includes fields for Provider ID (highlighted with a red box), Provider Name, Address Line 1 (highlighted with a red box), Address Line 2, Address Line 3, City/Town, State/Province, County, Country, and Zip Code. A plus icon next to 'Address' is highlighted with a red box. The 'Address details' dialog box is overlaid, showing fields for Address Line 1 (highlighted with a red box), Address Line 2, Address Line 3, City/Town, State/Province, County, Country, and Zip Code. A plus icon next to 'Address' and a 'Validate Address' button are highlighted with red boxes. 'OK' and 'Cancel' buttons are at the bottom right of the dialog.

Creating and Managing Bill Templates

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21. In the **BASIC LINE ITEM INFORMATION** section, complete the following basic service line items:

- To add an additional line, select the plus icon next to **LINE DRUG INFORMATION**.
- To add additional line items to the bill, select **Add Service Line Item**. Repeat this step for additional lines.

Note: Providers can select **Update Service Line Item** to update an existing line item.

The screenshot shows the 'Basic Line Item Information' and 'Line Drug Information' sections of a bill template creation interface. The 'Basic Line Item Information' section includes fields for Prior Authorization Number, Rendering Provider ID, Ordering Provider ID, Referring Provider ID, Type, and Taxonomy Code. It also includes a question about the Header Service Facility Location and a radio button for 'Yes'. The 'Line Drug Information' section includes fields for National Drug Code, Quantity, Unit, Qualifier, Prescription/Link No, and Prescription Date. Below these sections is a table for 'Previously Entered Line Item Information' with columns for Line No, Service Dates, Proc. Code, Modifiers, Diagnosis Ptnrs, Submitted Charges, Units, and PA Number. The table shows a single row with placeholder data.

Line No	Service Dates From	Service Dates To	Proc. Code	Modifiers 1 2 3 4	Diagnosis Ptnrs 1 2 3 4	Submitted Charges	Units	PA Number
1	01/01/2024	01/31/2024	99999-0000	1 2 3 4	1 2 3 4	\$0.00	1	PA0000000000000000

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22. Once a line item has been selected, the line item information added will be displayed.

Note: Providers can select the **Line No** link to make updates or they can select the **Delete** link to remove the line item.

23. Once providers have entered all line items, scroll back to the top of the page and select **Save Template** to save the provider bill template.

Note: Providers have an option to reset the bill if they want to start all over.

Previously Entered Line Item Information
Click a Line No. below to view/update that Line Item Information.

Line No	Service Dates From	To	Proc. Code	Modifiers				Diagnosis Ptnrs				Submitted Charges	Units	PA Number	
				1	2	3	4	1	2	3	4				
1			97140									\$ 100.00	3		Delete

Total Submitted Charges: \$ 100.00

This site says...
Do you want to save the Template?

OK Cancel

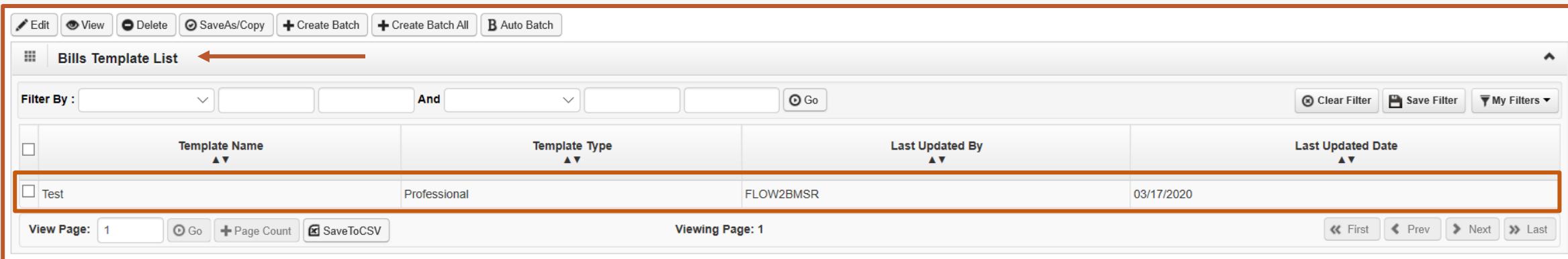
Close **Save Template** **Reset**

Note: A dialogue displays requesting confirmation that the provider wants to save the template.

Creating and Managing Bill Templates

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Note: Once the provider saves the provider template, it will be listed on the **Bills Template List** located at the top of the page.



The screenshot shows a software interface for managing bill templates. At the top, there is a toolbar with buttons for Edit, View, Delete, SaveAs/Copy, Create Batch, Create Batch All, and Auto Batch. Below the toolbar is a header bar with the title 'Bills Template List' and a back arrow icon. The main area is a table with the following columns: Template Name, Template Type, Last Updated By, and Last Updated Date. A single row is highlighted with a red box, representing a template named 'Test' which is of type 'Professional' and was last updated by 'FLOW2BMSR' on '03/17/2020'. At the bottom of the table, there are buttons for View Page (set to 1), Go, Page Count, SaveToCSV, and navigation links for First, Prev, Next, and Last.

	Template Name	Template Type	Last Updated By	Last Updated Date
<input type="checkbox"/>	Test	Professional	FLOW2BMSR	03/17/2020

Updating Bill Templates



Updating Bill Templates

(1 of 3)

1. Log in to the WCMBP System. The system will display the default **Select a Provider ID Number** page.
2. Select the appropriate profile, **EXT Provider Bills Submitter**, from the drop-down list and select **Go**.
3. In the column under **Bills**, select **Manage Templates**.

Select a Provider ID Number to continue to the Provider Portal:

Available Provider IDs: 700  *

Go

Select a profile to use during this session:

EXT Provider Bills Submitter  *  Go

Bills
Bill Inquiry
View Payment
Bill Adjustment
On-line Bills Entry
Resubmit Denied Bill
Retrieve Saved Bills
Manage Templates
Create Bills from Saved Templates
View Accounts Receivable
Fee Schedule Calculator

Updating Bill Templates

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4. Select the checkbox to the left of the Template Name the provider wants to modify.
5. Select **Edit**.

Bills Template List

Template Name	Template Type	Last Updated By	Last Updated Date
EN-P-25	Professional	[Grayscale Profile Picture]	09/23/2025

View Page: 1 Viewing Page: 1 First Prev Next Last

Updating Bill Templates

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The Bill Template displays with the data prepopulated.

6. Make the necessary updates and select **Save Template**, or select **Close** to return to the previous page.

The screenshot shows the 'Professional Bill' template update screen in the eCAMS HCE provider portal. The top navigation bar includes the eCAMS HCE logo, user profile, and links for Help, External Links, and Logout. The main content area shows the 'Professional Bill' section with a note about required fields. The 'Basic Bill Info' tab is selected, showing tabs for Provider, Claimant, Bill, and Service. The 'Program' field is set to 'DCMW - Division of Coal Mine Workers' Compensation'. The 'Special Bill Indicator' field is set to 'NONE'. The 'Submitter ID' field is populated with a redacted value. The 'Template Name' field is set to 'blung'. The bottom right corner of the screenshot is highlighted with a red box.

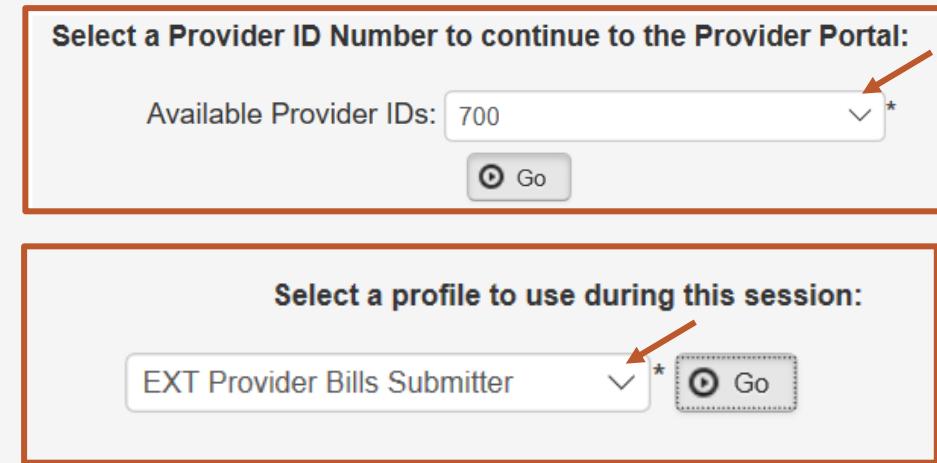
Deleting Bill Templates



Deleting Bill Templates

(1 of 3)

1. Log in to the WCMBP System. The system will display the default **Select a Provider ID Number** page.
2. Select the appropriate profile, **EXT Provider Bills Submitter**, from the drop-down list and select **Go**.
3. In the column under **Bills**, select **Manage Templates**.



Select a Provider ID Number to continue to the Provider Portal:

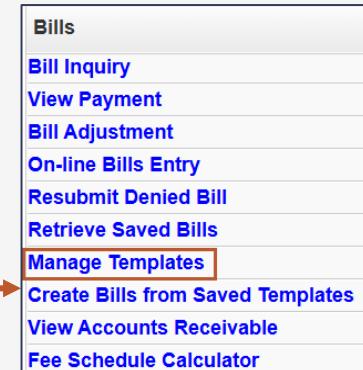
Available Provider IDs: 700 *

Go

Select a profile to use during this session:

EXT Provider Bills Submitter *

Go



Bills	
Bill Inquiry	
View Payment	
Bill Adjustment	
On-line Bills Entry	
Resubmit Denied Bill	
Retrieve Saved Bills	
Manage Templates	
Create Bills from Saved Templates	
View Accounts Receivable	
Fee Schedule Calculator	

Deleting Bill Templates

(2 of 3)

4. Select the checkbox to the left of the Template Name the provider wants to delete.
5. Select **Delete**. The system will display a dialogue requesting confirmation to delete the template.
6. Select **OK** to delete or select **Cancel** to keep it on the **Bill Template List**. When OK is selected, the system deletes the template.

The screenshot shows the 'Bills Template List' page. At the top, there is a toolbar with buttons for Edit, View, Delete, SaveAs/Copy, Create Batch, Create Batch All, and Auto Batch. A red arrow points to the 'Delete' button, which is highlighted with a red box. Below the toolbar is a filter bar with 'Filter By' dropdowns and buttons for Clear Filter, Save Filter, and My Filters. The main area displays a table of templates. The first row, 'Test', has a checked checkbox in the first column. A red box highlights this checkbox. The table columns are: Template Name, Template Type, Last Updated By, and Last Updated Date. The 'Test' row shows 'Professional' for Template Type, 'FLOW2BMSR' for Last Updated By, and '03/17/2020' for Last Updated Date. Below the table are buttons for View Page, Go, Page Count, and SaveToCSV. In the center, it says 'Viewing Page: 1'. At the bottom right are navigation buttons for First, Prev, Next, and Last. A red box highlights the 'Delete' button in the toolbar. A modal dialog box is open, asking 'Are you sure you want to delete the selected Templates?' with 'OK' and 'Cancel' buttons. The entire modal is also highlighted with a red box.

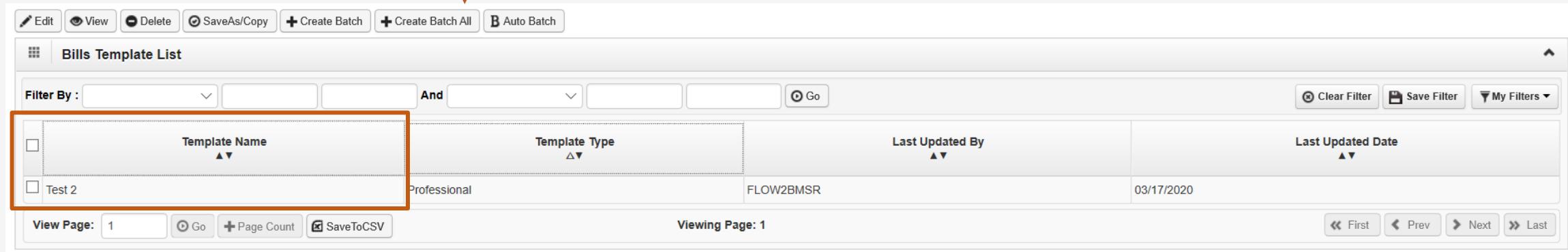
	Template Name	Template Type	Last Updated By	Last Updated Date
<input checked="" type="checkbox"/>	Test	Professional	FLOW2BMSR	03/17/2020
<input type="checkbox"/>	Test 2	Professional	FLOW2BMSR	03/17/2020

Deleting Bill Templates

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Note: Before deletion, the Bill Template List displayed two Template Names: Test and Test 2.

Note: After deletion, the deleted template – Test – no longer appears on the list page. Only Test 2 displays.



The screenshot shows the 'Bills Template List' interface. At the top, there is a toolbar with buttons for Edit, View, Delete, SaveAs/Copy, Create Batch, Create Batch All, and Auto Batch. Below the toolbar is a filter bar with 'Filter By' dropdowns and a 'Go' button. The main area displays a table with columns: Template Name, Template Type, Last Updated By, and Last Updated Date. The table shows two rows: one for 'Test' (Professional, FLOW2BMSR, 03/17/2020) and one for 'Test 2' (Professional, FLOW2BMSR, 03/17/2020). The 'Test' row is highlighted with a red box. At the bottom, there are buttons for View Page, Go, Page Count, and SaveToCSV, along with navigation links for First, Prev, Next, and Last.

Template Name	Template Type	Last Updated By	Last Updated Date
Test	Professional	FLOW2BMSR	03/17/2020
Test 2	Professional	FLOW2BMSR	03/17/2020

THANKS!

