Billing Agents and Clearinghouses
Change of Addresses – Effective August 1, 2020

GENERAL CORRESPONDENCE

Division of Federal Employees’ Compensation (DFEC)
General Correspondence
PO Box 8311
London, KY 40742-8311

Division of Energy Employees Occupational Illness Compensation (DEEOIC)
General Correspondence
PO Box 8306
London, KY 40742-8306

Division of Coal Mine Workers’ Compensation (DCMWC)
General Correspondence
PO Box 8307
London, KY 40742-8307
Change of Addresses – Effective August 1, 2020

PROVIDER ENROLLMENT

Provider Enrollment
PO Box 8312
London, KY 40742-8312
Change of Addresses – Effective August 1, 2020

BILLs AND AUTHORIZATIONS

**Division of Federal Employees’ Compensation (DFEC)**
General Bills  
PO Box 8300  
London, KY 40742-8300

**Division of Energy Employees Occupational Illness Compensation (DEEOIC)**
General Bills  
PO Box 8304  
London, KY 40742-8304

**Division of Coal Mine Workers’ Compensation (DCMWC)**
General Bills  
PO Box 8302  
London, KY 40742-8302
Introduction

This webinar will provide information about:

• New Billing Agent or Clearinghouse Enrollment
• Legacy Billing Agent and Clearinghouse Registration
• Provider Setup for Using a Billing Agent or Clearinghouse
• Submitting Bills via Web Batch or SFTP
• Questions
New Billing Agent or Clearinghouse Enrollment

This section applies to Billing Agents or Clearinghouses that either never participated in the legacy system (Conduent) and those that did participate but never had an OWCP ID, which is different than a Trading Partner ID.
Accessing OWCP Connect via the WCMBP Portal

Go to https://owcpmed.dol.gov

In the Providers box,
Click “Get Started”
Accessing OWCP Connect via the WCMBP Portal

Click the hyperlink in the **New Provider** box
Select **Billing Agent/Clearinghouse**

Click **Submit**
Basic Information

Select **FEIN**
Fill out the top of the form

-OR-

Select **SSN**
Fill out the bottom

Then click Next
Adding Address Information

Click Address
Address Information

Fill in just TWO fields:

**Address Line 1** (2, 3)
**Zip Code**

Then click **Validate Address**
Automatic Address Completion

All other fields are auto-populated!

Just click **OK**
Complete the Details

Add your Phone Number, Fax Number, and Email Address

Then click Finish

Phone Number: (222) 333-4444
Fax Number: (222) 333-4443
Email Address: doctorj76@gmail.com
Capture the Application Number

Step 1 is done! Make sure to make a note of your Application Number!

Note: If you provided your email on the Basic Information page during your enrollment, you should also receive the application number in an email. If you need the application number for future reference (i.e. returning to an incomplete application or to check application status) and you didn’t receive the email and if you didn’t make a note of the application number, you can contact the call center. Phone numbers can be found on the last slide of this presentation and also on the Medical Bill Processing Portal on the Contact Us page (https://owcpmed.dol.gov/portal/contactus).
Step 2 is to **Add Identifiers**

Most Billing Agents and Clearinghouses do not use this optional step.

The following is a list of identifiers a provider can select for this step. These will likely not apply to enrolling Billing Agents or Clearinghouses, which is why this is an optional step.

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Enforcement Agency (DEA) Number</td>
<td></td>
</tr>
<tr>
<td>NPI</td>
<td>Additional NPI the provider may have, e.g. for hospitals</td>
</tr>
<tr>
<td>Other Provider ID</td>
<td>Providers use this identifier for new enrollment after being terminated. Providers are not allowed to re-enroll under the same provider ID, for example when the provider is terminated due to HHS exclusion.</td>
</tr>
<tr>
<td>Previous Provider ID</td>
<td></td>
</tr>
<tr>
<td>Provider Medicare Number</td>
<td>Required for hospitals only</td>
</tr>
<tr>
<td>United Mine Workers' of America (UMWA) Number</td>
<td></td>
</tr>
<tr>
<td>NCPDP Number</td>
<td>Not displayed in identifier drop-down because all pharmacies will be created from the NCPDP file. This number is auto populated from NCPDP file. User is not allowed to change the number for pharmacy</td>
</tr>
<tr>
<td>Application Number</td>
<td>Listed only in maintenance/expert mode after enrollment is approved. Application Number is view only and cannot be updated.</td>
</tr>
</tbody>
</table>
EDI Submission Methods

Step 3 is to **Add EDI Submission Method**

![EDI Submission Method Diagram](image)

**Note:** This step is optional since billing agents may choose not to use EDI.
Select Submission Methods

EDI Submission Methods – Check off the appropriate checkboxes.

Mode of Submission: • Web Interactive • FTP Secured Batch • Web Batch • None

When to Use:
- Web Interactive: For entering (keying) bills directly in the system.
- FTP Batch: For submitting files via an SFTP site.
- Web Batch: For upload/download of files in the system.
- None: For submission through paper form ONLY.

- Web Batch method is often used by providers who submit their own HIPAA batch transactions. It allows a maximum file size of 50 MB.
- Your EDI submission method is FTP Secured Batch if you submit and retrieve batches at a secure web folder assigned to you by OWCP. This method was designed with clearinghouses and billing agents in mind. It allows a maximum file size of 100 MB.
- Don’t select “None” if other submission method is selected. You can always submit paper form in addition to EDI Submission.

Click OK
Step 4 is to **Add EDI Contact Information**

Click **Step 4**

- **Step 1: Provider Basic Information**
  - Required: Required
  - Start Date: 05/07/2020
  - End Date: 05/07/2020
  - Status: Complete

- **Step 2: Add Identifiers**
  - Required: Optional
  - Start Date: Incomplete
  - End Date: Incomplete
  - Status: Incomplete

- **Step 3: Add EDI Submission Method**
  - Required: Required
  - Start Date: Optional
  - End Date: Optional
  - Status: Incomplete

- **Step 4: Add EDI Contact Information**
  - Required: Required
  - Start Date: Incomplete
  - End Date: Incomplete
  - Status: Incomplete

- **Step 5: View/Upload Attachments**
  - Required: Optional
  - Start Date: Incomplete
  - End Date: Incomplete
  - Status: Incomplete

- **Step 6: Submit Enrollment Application for Review**
  - Required: Required
  - Start Date: Incomplete
  - End Date: Incomplete
  - Status: Incomplete
Add Contact Details

Add the Required Information in the top section, then click **Address**
Fast Address Lookup

Fill in **Address Line 1** and **Zip Code**, then click **Validate Address** button

Click **Validate Address** button
Address Validation

Address validation is successful – all required fields auto-populate

Click OK
EDI Contact Information

EDI Contact Information is complete

Add EDI Contact Information

Contact Title: Office Manager
Last Name: Salmon
Phone Number: (717) 556-1212
Email Address: 

Address Line 1: 91 Hill Dr
Address Line 2: 
City/Town: JONESTOWN
State/Province: Pennsylvania
County: Lebanon
Country: United States
Zip Code: 17038 - 7803

First Name: Pacific
Fax Number:

Click OK
Step 5 is View/Upload Attachments

Click Step 5
Attachment List

This is the list of attachments (empty)

To add attachments, click **Upload Attachments**
Select the **Document Type** from the drop-down list.

- Document Type: —SELECT—
- ACH Form
- Copy of License/Certification
- Other Supporting Document
- State Approval Letter

- Please select the file to be uploaded
- File Name: Choose File

The acceptable file extensions for the upload are .doc, .docx, .gif, .jpg, .jpeg, .png, .pdf, .ppt, .rtf, .tif, .tiff, .txt, .xls, .bmp, .pdf, .xlsx, .zip

Filename cannot be longer than 60 characters.
If you are unable to upload attachment(s) here, you can choose to mail or fax the copy following the instruction on the Submit Enrollment Application for Review step.
Choose a File to Upload

Choose a file to Upload and click **OK**

*Attachment*

Please select the file to be uploaded

**Document Type:** Other Supporting Document

**File Name:** Choose File

The acceptable file extensions for the upload are .doc, .docx, .gif, .gzzip, .htm, .html, .jpeg, .jpg, .ppt, .rtf, .tif, .tiff, .tst, .txt, .xls, .bmp, .pdf, .xlsx, .zip

Filename cannot be longer than 50 characters

If you are unable to upload attachment(s) here, you can choose to mail or fax the copy following the instruction on the Submit Enrollment Application for Review step.

Click **OK**
Attachment List

The file will be added to your list of attachments

Click **Close**
Submit Application

Step 6 is Submit Enrollment Application for Review

Click Step 6
Submit Application

Applications require a handwritten signature.

Click the link to download the signature page and cover sheet.

Then click **Submit Enrollment**.

Put your application number on the cover sheet and fax or mail your cover sheet and signature page to OWCP.
Legacy Billing Agent and Clearinghouse Registration

This section applies to Billing Agents or Clearinghouses that participated in the legacy system (Conduent) and had an OWCP ID, which is different than a Trading Partner ID.
Accessing OWCP Connect via the WCMBP Portal

Go to https://owcpmed.dol.gov

Click Provider

Click Get Started
Legacy Providers will click on the middle box at the top or the second drop-down menu at the bottom to access the link to begin the registration process.

Registration with OWCP Connect is required to obtain access to the new WCMBP system.
Click the link to begin the registration process with OWCP Connect.
On the OWCP Connect page, there are 2 links to begin the registration process. You can click on either link.
1. Please enter all required information (Name and Email address)

2. A message will populate to notify you if the email you are entering is available or if it is already linked to an existing user account.

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

4. Click **Next**.
5. Once the validation has been completed, enter a password and retype the password to confirm it.

6. Click **Next**.

**Note:** Password Criteria should:

- be at least 8 characters long,
- include an uppercase letter, a lowercase letter, a number, and a special character.

By clicking 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, and enter a key phrase.

8. Click **Next**.
Select security questions from the drop-down menus and answer the selected questions.

Click **Submit**.
The 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.

Click “Resend Email” if the email is not received within 10 minutes.

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.**
OWCP Connect Registration

Look for email from: support@dol.gov.

11. Click the “here” link.
The 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.

Click “Resend Email” if the email is not received within 10 minutes.
Access to the WCMBP Provider Portal

The Provider or System Administrator will need the Temporary ID and Temporary Key found in the Provider Letters to log into the WCMBP System.

**Welcome Letter**

<table>
<thead>
<tr>
<th>Current OWCP Provider ID</th>
<th>Temporary ID: [321000333] [123456789]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary Key:</td>
<td>Refer to Registration Instruction/Temporary Key letter.</td>
</tr>
<tr>
<td>Tax ID:</td>
<td>Social Security Number (SSN) or Federal Employer Identification Number (FEIN) used during enrollment.</td>
</tr>
</tbody>
</table>

**Registration Letter**

<table>
<thead>
<tr>
<th>OWCP Provider ID: [###1234] (Refer to the Welcome Letter.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary ID: Refer to the Welcome Letter.</td>
</tr>
<tr>
<td>Temporary Key: [1233444]</td>
</tr>
<tr>
<td>Tax ID: Social Security Number (SSN) or Federal Employer Identification Number (FEIN) used during enrollment.</td>
</tr>
</tbody>
</table>
Welcome to the WCMBP Provider Portal

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

Available Provider IDs: 700434700

Go
Provider Portal Profiles – Bill Processing
Provider Portal – Home Page

Online Services
- Bills
  - Bill Inquiry
  - View Payment
  - Bill Adjustment/Void
  - On-line Bills Entry
  - Resubmit Denied/Voided Bill
  - Retrieve Saved Bills
  - Manage Templates
  - Create Bills from Saved Templates

- Claimant

- Eligibility Inquiry

- Authorization

- On-line Authorization Submission

- Provider

- Maintain Provider Information

- HIPAA
  - Submit HIPAA Batch Transaction
  - Retrieve HIPAA Batch Responses
  - SFTP User Details

- Admin

- Maintain Users

- My Interactions

- Correspondences

My Reminders

Filter By: [ ]

Alert Type [ ] Alert Message [ ] Alert Date [ ] Due Date [ ]

No Records Found!

Your Recent Online Activities

- You have logged in with angel.roberts05 Account with IP Address 207.138.47.62
- Previous Site Visit: 04/15/2020 08:35:27 PM
- Last login failed attempt:
Billing Agents and Provider Requirement

Providers must be enrolled in the WCMBP System in order for billing agents to bill on their behalf. Billing agents will want to provide their OWCP ID to the providers they are billing for so that the provider can make the association within their profile. This will enable billing agents to view the response files (835). Otherwise, billing agents can still submit bills on behalf of the enrolled provider, but they will not receive the response files for the bills that are submitted.

**Note:** Providers will receive payments, not the Billing Agents.
Maintain Provider Information

Note: While the information in this section pertains to a provider audience, it will be helpful to know this information if you have to instruct providers on how to associate you (billing agent) to their profile. Remember, you will have to be enrolled, have an OWCP ID, and provide the OWCP ID to the provider for them to complete this process.

Providers who are approved and active will use **Maintain Provider Information**

The following profiles allow access to the Maintain Provider Information function:
- EXT Provider File Maintenance
- EXT Provider Eligibility Checker – ClaimsSubmitter
- EXT Provider Super User
Maintain Provider Information

New providers will use enrollment **steps 7 and 8**

Approved providers will see these same steps under **Maintain Provider Information**
Providers will check the box for Billing Agent/Clearinghouse

<table>
<thead>
<tr>
<th>Mode of Submission</th>
<th>Web Interactive</th>
<th>FTP Secured Batch</th>
<th>Web Batch</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Billing Agent/Clearinghouse ✔️</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Billing Agent/Clearinghouse**
  - For providers who use a 3rd party to bill
  - For entering (keying) bills directly in the System
  - For submitting files via an SFTP site
  - For upload/download of files in the System
  - For submission through paper form ONLY.

- **Web Interactive**
- **FTP Secured Batch**
- **Web Batch**
- **None**

- **Web Batch** method is often used by providers who submit their own HIPAA batch transactions. It allows a maximum file size of 50 MB.
- **Your EDI submission method is FTP Secured Batch** if you submit and retrieve batches at a secure web folder assigned to you by OWCP. This method was designed with clearinghouses and billing agents in mind. It allows a maximum file size of 100 MB.
- **Don’t select “None” if other submission method is selected. You can always submit paper form in addition to EDI Submission.**
New providers will use e-enrollment steps 7 and 8.

Approved providers will see these same steps under **Maintain Provider Information**.

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### Enroll Provider - Individual

<table>
<thead>
<tr>
<th>Step</th>
<th>Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1: Provider Basic Information</td>
<td>Required</td>
</tr>
<tr>
<td>Step 2: Add Location</td>
<td>Required</td>
</tr>
<tr>
<td>Step 3: Add Taxonomies</td>
<td>Required</td>
</tr>
<tr>
<td>Step 4: Add Ownership Details</td>
<td>Optional</td>
</tr>
<tr>
<td>Step 5: Add Licenses and Certifications</td>
<td>Required</td>
</tr>
<tr>
<td>Step 6: Add Identifiers</td>
<td>Optional</td>
</tr>
<tr>
<td>Step 7: Add EDI Submission Method</td>
<td>Optional</td>
</tr>
<tr>
<td>Step 8: Add EDI Submitter Details</td>
<td>Optional</td>
</tr>
<tr>
<td>Step 9: Add EDI Contact Information</td>
<td>Required</td>
</tr>
<tr>
<td>Step 10: Add Payment Details</td>
<td>Required</td>
</tr>
<tr>
<td>Step 11: Complete Provider Disclosure</td>
<td>Required</td>
</tr>
<tr>
<td>Step 12: View/Upload Attachments</td>
<td>Optional</td>
</tr>
<tr>
<td>Step 13: Submit Enrollment Application for Review</td>
<td>Required</td>
</tr>
</tbody>
</table>

---
Billing Agent/Clearinghouse List

This step shows the list of billing agents and clearinghouses already set up. To add to the list, the provider will click **Add**.

<table>
<thead>
<tr>
<th>OWCP ID</th>
<th>Billing Agent/Clearinghouse</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>700116000</td>
<td>BACH Org Name</td>
<td>05/07/2020</td>
<td>12/31/2999</td>
</tr>
</tbody>
</table>

[Image of the Billing Agent/Clearinghouse/Submitter List interface]
Billing Agent/Clearinghouse List

The only information required is the Billing Agent/Clearinghouse OWCP ID – and how long they will be authorized to represent the provider as their billing agent.

Billing Agents/Clearinghouses will need to provide their OWCP ID to the providers they are representing.
As they add you to their list, the OWCP ID auto-populates your name information and the dates they specified.

<table>
<thead>
<tr>
<th>OWCP ID</th>
<th>Billing Agent/Clearinghouse</th>
<th>Start Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>700116000</td>
<td>BACH Org Name</td>
<td>05/07/2020</td>
<td>12/31/2999</td>
</tr>
</tbody>
</table>
Submitting Billing Batches
Choosing Batch Submission Method

<table>
<thead>
<tr>
<th>WEB BATCH</th>
<th>VS</th>
<th>SFTP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cannot</strong> upload supporting documents</td>
<td><strong>Can</strong> upload supporting documents</td>
<td></td>
</tr>
<tr>
<td>File Size Limit is up to 50 MB</td>
<td></td>
<td>No File Size Limit</td>
</tr>
<tr>
<td><strong>No</strong> account set up process</td>
<td></td>
<td><strong>One-time</strong> account set up process</td>
</tr>
<tr>
<td>For both Providers and Billing Agents/Clearinghouses</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The following profiles allow access to the Submit HIPAA Batch Transaction function:

- **EXT Provider Bills Submitter**
- **EXT Provider Eligibility Checker – Claims Submitter**
- **EXT Provider Super User**

Submit HIPAA Batch Transaction
Select a File to Upload

Click **Choose File**

Select the file to Upload and click **Open**
Each batch is acknowledged after uploading completes.
Retrieve HIPAA Batch Responses
Retrieve HIPAA Batch Responses

1. Log in to the WCMBP System. The system will display the default “Select a provider ID Number” page. Select the appropriate profile from the drop-down list. The following profiles allow access to the Retrieve HIPAA Batch Responses function:
   - EXT Provider Bills Submitter
   - EXT Provider Eligibility Checker – Claims Submitter
   - EXT Provider Super User
   - EXT Provider System Administrator

2. Click on the “Retrieve HIPAA Batch Responses” hyperlink in the column on the left under HIPAA.
HIPAA Response/Acknowledgement for HIPAA Batch

The system will display the following:

- HIPAA File Name
- Transaction Type
- Status (Accepted/Rejected)
- Upload Date
- TA1 Response File
- 999 Response File

Use the filter options such as Transaction Type, Upload Date or HIPAA File (File Name) to search for the EDI files of interest. Click the hyperlink under the HIPAA File to retrieve the response.

**Note:** In order for billing agents to view 835s via the provider portal, the provider needs to associate the billing agent to their provider file as explained earlier in this presentation.
SFTP User Set Up
Accessing SFTP User Details

If you will be submitting bills via SFTP, follow these steps to setup your SFTP user details:

1. Log in to the WCMBP System. The system will display the default “Select a provider ID Number” page. Select the appropriate profile from the drop-down list. The following profiles allow access to the SFTP User Details function:
   - EXT Provider Bills Submitter
   - EXT Provider Eligibility Checker – Claims Submitter
   - EXT Provider Super User

2. Click on the SFTP User Details hyperlink in the column on the left under HIPAA.
3 Click the “Create SFTP User” button to create the SFTP User.

Note: If the SFTP user has been created already, this button will be disabled. The “Reset SFTP Password” button will be enabled.

4 The EDI SFTP User Info dialog box will be displayed allowing you to create a password and to confirm it. Click “OK.”

Note: Passwords must be 8-14 characters long, must include at least one letter, one number, and at least one special character (special character examples !@#$)
A User account will be created and an SFTP User ID will be displayed.

After completing the SFTP user setup within the Provider Portal, you will need to download an SFTP client or use the one you already have.
SFTP Client Connection
SFTP Login

Once the SFTP user account is set up, you can now access the SFTP folders using an SFTP client, such as WinSCP or Filezilla with your username/password. Please note the host name and port number displayed in the screenshot. These settings will be required for the SFTP connection.

**Note:** The example here shows the WinSCP SFTP client session setup screen. You can choose any SFTP client of your choice.
Once logged in, the folder structure will appear as follows:

• There will be 2 categories of folders:
  1. **TEST** - Trading Partners should submit and receive their test files under this folder.
  2. **PROD** - Trading Partners should submit and receive their production files under this folder.

• The folders are structured (as shown here) under TEST/PROD folders within the SFTP root.
SFTP Directory - Inbound

**Inbound** - This Inbound folder should be used to drop the inbound files that need to be submitted to WCMBP.

**Note:** After the inbound 837 file is dropped to the Inbound folder, WCMBP will rename the file following the inbound naming convention and perform the file level validation before processing.

- Files that pass the validation will be ready for processing. After being processed, the file name will be renamed with a “processed” extension. After the user logs out from the SFTP account, the processed file will be moved to the Inbound/Archive folder.

- Files that fail the validation will be renamed with an “error” extension. After the user logs out from the SFTP account, the error file will be moved to the Inbound/Error Folder.

**Note:** The files in both Inbound/Archive and Inbound/Error folders will be retained for 30 days before they are purged by the system automatically.
File Level Validation

EDI files must meet the following criteria:

File Size: The file cannot be empty, i.e. 0 kb.

File Name Extension: The file name extension must be .dat with all lower case (for example - My_Hipaa_File.dat).

File Name Length: The file name length (including the file name extension) cannot be greater than 50 characters.

File Name Special Characters: The file name should not contain special characters.

Note: It is recommended to limit the file size to 100MB while uploading a HIPAA file through SFTP.
When a HIPAA file is uploaded via the Web Portal or SFTP, the WCMBP System will rename the file per the Inbound Transaction naming conventions below:

**For Inbound Transactions Uploaded Via Web Portal and SFTP**

```
File Name: Hipaa.<TPId>.<datetimestamp>.<uploadmethod>.<originalfilename>.pgp
```

- `<TPId>` is the Trading Partner Id, which is also the OWCP Provider ID
- `<datetimestamp>` is the Date timestamp in format yyyyMMddHHmmss
- `<uploadmethod>` is the method how the HIPAA file is uploaded: F-FTP, WWeb
- `<originalfilename>` is the original file name which is submitted by the trading partner.

**Web Ex**: Hipaa.123456789.20200225151636.W.OriginalFileName.dat

**SFTP Ex**: Hipaa.123456789.20200225151636.F.OriginalFileName.dat.pgp

**SFTP Passed Validation Ex:**

```
123456789.20200225151636.F.OriginalFileName.dat.pgp.processed
```

**SFTP Failed Validation Ex:**

```
Hipaa.123456789.20200225151636.F.OriginalFileName.dat.pgp.error
```
Outbound - X12 outbound transactions generated by WCMBP will be available in this outbound folder.

- Trading partners should look for acknowledgments to the files submitted in the Outbound/Ack folder. TA1 and 999 will be available for all the files submitted by the Trading Partner that passed file-level validation.

- Trading Partners should look for an 835 file in the PROD/Outbound/Data folder. The 835 file will NOT be generated for the test 837 files uploaded in TEST folder.

Note: It’s recommended that the trading partner delete the acknowledgement and 835 files after they are downloaded. The files in both Outbound/Ack and Outbound/Data folders will be retained for 10 days before they are automatically moved to the Outbound/Archive folder by the system. The files in Outbound/Archive folder will be retained for 30 days before they are automatically purged by the system.
File Naming Convention for Outbound Transactions

Once the Inbound Transaction is uploaded, the system will generate the Acknowledgement/Response files per the Outbound naming conventions below:

### For Outbound TA1 Acknowledgement File:

<table>
<thead>
<tr>
<th>File Name</th>
<th>Description</th>
</tr>
</thead>
</table>
| Hipaa.<TPId>.<datetimestamp>.<uploadmethod>.<originalfilename>.<ta1extension>.dat | - <TPId> is the Trading Partner Id, which is also the OWCP Provider ID  
- <datetimestamp> is the Date timestamp in format yyyyMMddHHmmss  
- <uploadmethod> is the method how the HIPAA file is uploaded. F-FTP, WWeb.  
- <originalfilename> is the original file name which is submitted by the trading partner.  
- <ta1extension> is the system generate TA1 file extension |

**Ex:** Hipaa.123456789.20200225151745.F.OriginalFileName.dat.tmp_TA1.dat

### For Outbound 999 Acknowledgement File:

<table>
<thead>
<tr>
<th>File Name</th>
<th>Description</th>
</tr>
</thead>
</table>
| Hipaa.<TPId>.<datetimestamp>.<uploadmethod>.<originalfilename>.<999extension>.dat | - <TPId> is the Trading Partner Id, which is also the OWCP Provider ID  
- <datetimestamp> is the Date timestamp in format yyyyMMddHHmmss  
- <uploadmethod> is the method how the HIPAA file is uploaded. F-FTP, WWeb.  
- <originalfilename> is the original file name which is submitted by the trading partner. |

**Ex:** Hipaa.123456789.20200225152018.F.OriginalFileName.dat.tmp_G53031980_999.dat

### For Outbound 835 Transaction File:

<table>
<thead>
<tr>
<th>File Name</th>
<th>Description</th>
</tr>
</thead>
</table>
| Hipaa.<TPId>.<datetimestamp>.835.dat | - <TPId> is the Trading Partner Id, which is also the OWCP Provider ID  
- <datetimestamp> is the Date timestamp in format yyyyMMddHHmmss |

**Ex:** Hipaa.123456789.20200301010043.835.dat
EDI Transaction Specification Changes

- **You will need to enter the 9-digit OWCP Provider ID ONLY (1000 A Loop Segment)**
- Use the following Receiver ID for each program:
  - 77044 for DFEC
  - 77103 for DEEOIC
  - 77104 For DCMWC
- **OWCP Case Number. Please get updated Case Numbers from DCMWC and DEEOIC Claimants. (2010 BA Loop Segment NM1 REF - NM109 IG- S DOL- R)**
- **Attachments cannot be uploaded, but you can download a cover sheet that will require an Attachment Control Number. You will assign a unique Attachment Control Number and use it in the 2300 Loop PWK segment.**
- **Use the following Transaction Versions:**
  - ASC X12N 837 Professional (005010X222A1)
  - ASC X12N 837 Institutional (005010X223A2)
  - ASC X12N 837 Dental (005010X224A2)
EDI Contact and Resources
EDI Contact Information and Resources

Customer Service: 1-800-987-6717
Hours: 8:00 a.m. – 8:00 p.m. Eastern Time, Monday through Friday.
Information required for the phone call:
• Topic of Call (setup, procedures, etc.)
• Name of caller
• Submitter’s OWCP Provider ID
• Organization of caller
• Telephone number of caller
• Nature of problem (connection, receipt status, etc.)

HIPAA Help Desk email: owcp-hipaa-help@cns-inc.com

Companion Guides can be found at https://owcpmed.dol.gov:
• Click Provider
• Click Bill Submission
• Click Web Batch - Upload EDI files Online OR FTP
• Click Secured Batch – Upload EDI files to Secured FTP folder
• Click Companion Guide

EDI Enrollment Form can be found at https://owcpmed.dol.gov:
• Click Resources
• Click Forms & References
• Click EDI Enrollment Template
CNSI is excited about being the new medical bill processing agent for OWCP programs and to continue working with each of you!

Email: CNSIOWCPOutreach@cns-inc.com

Call Center:
Division of Federal Employees’ Compensation (DFEC) 1-844-493-1966

Division of Energy Employees Occupational Illness Compensation (DEEOIC) 1-866-272-2682

Division of Coal Mine Workers’ Compensation (DCMWC) 1-800-638-7072

Thank you!