Bill Status and Remittance Voucher
Introduction

In this webinar, we will cover the following:

• Logging Into the System
• Viewing Bills
• Viewing Payments
• Viewing Legacy Remittance Vouchers
• Finding More Information
• OWCP Portal Tour
• Questions
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

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
Change of Addresses – Effective August 1, 2020

PROVIDER ENROLLMENT

Provider Enrollment
PO Box 8312
London, KY 40742-8312
Logging In

...Just a quick review of log in procedures.
Navigating to Provider Login Page

1. Use the following link to access the WCMBP Portal [https://owcpmed.dol.gov](https://owcpmed.dol.gov).
2. Select the **Login** drop-down menu.
3. Select the **Provider** link.
On the Provider Login page, select the **Provider Login** button. You will be directed to OWCP Connect.
Since you’ve previously registered, you will only need to go through the OWCP Connect Login process.
6. After successfully logging in, you will be taken to this screen where you will select from the **Available Provider IDs**.  
**Note:** If you have registered multiple providers under one OWCP Connect Login, or if you have been added as a user to another Provider Portal, those available Provider IDs will be available in the drop-down menu.

7. Select **Go**.
8. After selecting the Provider ID, you will select a profile from the available profiles in the drop-down menu.
   • EXT Provider Bills Submitter
   • EXT Provider Eligibility Checker – Claims Submitter
   • EXT Provider Claims Payment Status Checker
   • EXT Provider Super User
9. Select Go.
Viewing Bills

Providers can view a list of their submitted bills to determine their processing status and review bill details.
Select Bill Inquiry
On the "Provider Bill Inquiry Search" screen, the provider can search for a bill using the following options.

- Enter the Transaction Control Number (TCN), if available

-OR-

- Enter the Claimant ID or SSN  
  - OR -  
  Enter the “from and to” service dates

**Note:** Date span cannot exceed 3 months.

Click the **Submit** button.
Inquire Provider Bills List

This section displays the information requested by the provider based on the search criteria.

The provider can click on the TCN hyperlink to view how each line item paid or denied.

The initial screen header provides the bill charged amount and bill payment amount.

**Note:** To see bill details, click the hyperlink under the TCN column.
Bill Details

The bill details and the provider data can be reviewed at the top of the page, and claimant data, payer data, and unit item detail data can be reviewed at the bottom of the page.
### Claimant Data

- **Name:** [Redacted]
- **Claimant ID:** [Redacted]
- **Patient Control Number:** [Redacted]

### Payer Data

- **Name:** [Redacted]
- **Identification:** [Redacted]

### Unit Item Detail Data

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td><strong>Status Effective Date:</strong> 02/13/2020</td>
<td><strong>Product or Service ID Qualifier:</strong> HC</td>
</tr>
<tr>
<td><strong>Status Category Code:</strong> F2</td>
<td></td>
</tr>
<tr>
<td><strong>Status:</strong> 1</td>
<td></td>
</tr>
<tr>
<td><strong>Procedure Code:</strong> 96100</td>
<td></td>
</tr>
<tr>
<td><strong>Service Line Date:</strong> From 10/01/2019 To 10/01/2019</td>
<td></td>
</tr>
<tr>
<td><strong>Charged Amount:</strong> $1,000.00</td>
<td></td>
</tr>
<tr>
<td><strong>Payment Amount:</strong> $0.00</td>
<td></td>
</tr>
<tr>
<td><strong>Procedure Modifier 1:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Procedure Modifier 2:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Revenue Code:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Units of Service:</strong> 1</td>
<td></td>
</tr>
<tr>
<td><strong>Procedure Modifier 3:</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Procedure Modifier 4:</strong></td>
<td></td>
</tr>
</tbody>
</table>
The following is a list of the different bill statuses you may see listed on your bills.

<table>
<thead>
<tr>
<th>Provider Status for Bills</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>F1: Finalized/Payment</td>
<td>The claim/line has been paid.</td>
</tr>
<tr>
<td>F2: Finalized/Denial</td>
<td>The claim/line has been denied.</td>
</tr>
<tr>
<td>F3: Finalized/Revised</td>
<td>Adjudication information has been changed.</td>
</tr>
<tr>
<td>F4: Finalized/Adjudication Complete</td>
<td>No Payment forthcoming-The claim has been adjudicated and no further payment is forthcoming.</td>
</tr>
<tr>
<td>F3: Finalized/Revised</td>
<td>Adjudication information has been changed</td>
</tr>
<tr>
<td>P1: Pending/In Process</td>
<td>The claim is in the adjudication system.</td>
</tr>
</tbody>
</table>
View Payments

Providers can view a list of their Remittance Voucher (RV) payments.

The Remittance Voucher can also be called an Explanation of Benefits (EOB) or a Remittance Advice (RA). These terms and their abbreviations are often used interchangeably.

(RV = EOB = RA)
Select **View Payment**
The **RV Payment List** includes all remittance vouchers by default. Use the filters to narrow your search as needed.

<table>
<thead>
<tr>
<th>RV Number</th>
<th>Check Number</th>
<th>Check Date</th>
<th>RV Date</th>
<th>Bill Count</th>
<th>Charges</th>
<th>Payment Amount</th>
<th>Adjusted Amount</th>
<th>Download</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>07/18/2019</td>
<td>07/18/2019</td>
<td>10</td>
<td>2,508.68</td>
<td>0.00</td>
<td>796.92</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Click on the **RV Number** to view the **Remittance Voucher**.

Click on the **Download** link to download the **Remittance Voucher**.
Remittance Voucher Sample - Cover Page

Remittance Voucher
FECA - Cleveland

RV Number: [redacted]
Billing Provider: [redacted]

Prepared Date: 04/19/2020
RV Date: 04/19/2020
Page 1

If you have questions about the format of this Remittance Voucher (RV), please see the Remittance Voucher guide at https://owcpmed.dol.gov.

If you have questions about this document, call 1-844-493-1966, select option for bills, then select option to speak to an agent.
### Remittance Voucher Sample – Summary Page

**RV Number:** [Redacted]  
**Payment #:** [Redacted]  
**Payment Amount:** $87.56

**Prepared Date:** 04/19/2020  
**RV Date:** 04/19/2020  
**Payment Date:** 04/24/2020  
**Payment Method:** EFT

#### Bills Summary

<table>
<thead>
<tr>
<th>Billing Provider</th>
<th>Category</th>
<th>Total Billed Amount</th>
<th>Total Allowed Amount</th>
<th>Total TPL Amount</th>
<th>Total Claimant Responsible Amount</th>
<th>Total Paid Amount</th>
<th>FIN Invoice Number/ Parent TCN</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Redacted]</td>
<td>Paid</td>
<td>$2000.00</td>
<td>$87.56</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$87.56</td>
<td></td>
</tr>
<tr>
<td>[Redacted]</td>
<td>Denied</td>
<td>$1000.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td></td>
</tr>
</tbody>
</table>

**Count of Bills In Process:** 0  
**Total Adjustment Amount:** $0.00
**Note:** RV/EOBs in a status of Paid, Denied, or Adjusted are mailed to the provider’s mailing address (on file) every Monday if they had bills adjudicated in the previous week.
Note: RV/EOBs in a status of Paid, Denied, or Adjusted are mailed to the provider’s mailing address (on file) every Monday if they had bills adjudicated in the previous week.
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Remittance Voucher Sample – Reason Codes Page

Adjustment Reason Codes

16 : Claim/service lacks information or has submission/billing error(s). Usage: Do not use this code for claims attachment(s)/other documentation. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.) Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.
45 : Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement. Usage: This adjustment amount cannot equal the total service or claim charge amount; and must not duplicate provider adjustment amounts (payments and contractual reductions) that have resulted from prior payer(s) adjudication. (Use only with Group Codes PR or CO depending upon liability)

EOB

50301 : THE PROVIDER TYPE YOU HAVE ENROLLED WITH IS NOT AUTHORIZED FOR THIS SERVICE. PLEASE CONTACT PROVIDER ENROLLMENT UNIT FOR RESOLUTION.
70863 : BILL DIAGNOSIS NOT RELATED TO ACCEPTED CONDITIONS. IF YOU DISAGREE SUBMIT MEDICAL DOCUMENTATION

Note: RV/EOBs in a status of Paid, Denied, or Adjusted are mailed to the provider’s mailing address (on file) every Monday if they had bills adjudicated in the previous week.
Viewing Legacy Remittance Vouchers
What are Legacy Remittance Vouchers?

The documents that the provider submitted in the legacy system, Conduent, or generated by the legacy system are referred to as legacy documents.

The providers that were enrolled and in "active" status in the legacy system, Conduent, and migrated to the WCMBP System are referred to as legacy providers.

**Legacy Remittance Vouchers** are the explanation of benefit documents of the legacy providers that migrated to the WCMBP System. These are for bills processed in the Conduent system prior to 4/27/2020.
Accessing Legacy Remittance Vouchers

How it works:

1. Log in to the WCMBP System. The system will display the default “Select a provider ID Number” page. Select a profile from the available profiles in the drop-down menu.
   - EXT Provider Bills Submitter
   - EXT Provider Eligibility Checker – Claims Submitter
   - EXT Provider Claims Payment Status Checker
   - EXT Provider File Maintenance
   - EXT Provider Super User
   - EXT Provider System Administrator

2. Select the “Correspondences” link under My Interactions.
In the second grid (Images/Attachments Retrieval) on this page, a search can be performed using the filters to search by TCN, Image Title or Case Number. For the filter Image Title, in the adjacent text field, enter Remit%, then click the Go button. The system will display all remittance vouchers.

**Note:** The percent symbol (%) is a “wildcard” character that allows you to substitute one or more characters in your search. In this case, the use of the percent symbol at the end of “Remit” will search for all Image Titles that begin with Remit. This wildcard character is especially useful if you are unsure of the full search term. The percent symbol can also be used in the beginning or middle of typed characters.
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