

# 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



# 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>.
2. Select the **Login** drop-down menu.
3. Select the **Provider** link.



# Provider Login

4. On the Provider Login page, select the **Provider Login** button. You will be directed to OWCP Connect.

The screenshot shows the top navigation bar with links: Home, Provider (selected), Login, Resources, Pharmacy/LMN, News, and Contact Us. Below the navigation bar is a breadcrumb trail: Home / Provider Home / Provider. The main heading is "Provider Login". Below this is a blue link: "Use the link below to log in to the new Workers' Compensation Medical Bill Process (WCMBP) system if...". This is followed by a bulleted list of conditions for login. Below the list is a paragraph explaining that the Provider Login button will take users to OWCP Connect for registration or validation. A callout box with the number 4 and an arrow points to the "Provider Login" button.

Home / Provider Home / Provider

## Provider Login

[Use the link below to log in to the new Workers' Compensation Medical Bill Process \(WCMBP\) system if...](#)

- Your online enrollment has been approved
- Your paper enrollment has been approved, and you have registered with OWCP Connect and have been authenticated in the new system
- You were enrolled in the previous system (prior to April 27, 2020), and have registered with OWCP Connect and have been authenticated in the new system
- Your request to be associated with an enrolled provider as an additional user has been approved by the provider's administrator

The Provider Login button will take you to OWCP Connect, where you can register or will validate your credentials and log you into the system.

4 → [Provider Login](#)

# OWCP Connect Login

5. Since you've previously registered, you will only need to go through the OWCP Connect Login process.

Programs

OWCP Workers' Compensation System

[Login](#) | [Account Registration](#) | [Reset Password](#) | [Change Email](#) | [Help](#) | [FAQ](#)

### Account Registration

If this is your first time using OWCP Connect, click [here](#) and follow the instructions in the process to create a new account.

WARNING....WARNING....WARNING....WARNING....WARNING

You are accessing a U.S. Government information system that is owned, developed, and operated by the Department of Labor. The information and systems are provided for the processing of official U.S. Government information only, and are not to be released, stored, or otherwise used, in whole or in part, for any other purpose, before, owned by the Department of Labor. Authorized users only.

### Login

Welcome to OWCP Connect  
Please enter your EMAIL ADDRESS to start.

Email Address

[LOGIN](#)


### RESET PASSWORD

If you have forgotten password, click [here](#) and you will be taken to the password reset page.


# Select Available Provider ID

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**.

Welcome to the WCMBP Provider Portal

**eCAMS<sup>TM</sup>**  
**HCE**   
Powered by CNSI

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

Available Provider IDs: 700434700 


 Go


Diagram annotations: A red box highlights the dropdown menu (labeled 6) and the Go button (labeled 7). An arrow points from the dropdown menu to the Go button.



# Select a Profile

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**.

Welcome to the Workers' Compensation Medical Bill Process System

**eCAMS<sup>TM</sup>**  
**HCE**   
Powered by CNSI

Select a profile to use during this session:

8 → Profile: EXT Provider Bills Submitter ▼\* → Go ← 9

The screenshot shows a web interface for the eCAMS HCE system. At the top, it says 'Welcome to the Workers' Compensation Medical Bill Process System'. Below that is the eCAMS HCE logo, which includes a blue checkmark with a white cross. Under the logo, it says 'Powered by CNSI'. The main instruction is 'Select a profile to use during this session:'. Below this, there is a form with a label 'Profile:' followed by a dropdown menu showing 'EXT Provider Bills Submitter' with a downward arrow and an asterisk. To the right of the dropdown is a 'Go' button with a circular arrow icon. Red annotations are present: a circle with the number 8 and an arrow pointing to the dropdown menu, and a circle with the number 9 and an arrow pointing to the 'Go' button.



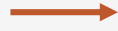
# Viewing Bills

Providers can view a list of their submitted bills to determine their processing status and review bill details.



# Select Bill Inquiry

Select **Bill Inquiry**



The screenshot displays the 'Provider Portal' interface. On the left, a sidebar menu lists various services under categories like 'Online Services', 'Claimant', 'Authorization', 'Provider', 'HIPAA', 'Admin', and 'My Interactions'. The 'Bills' category is expanded, and 'Bill Inquiry' is highlighted with a red box. To the right of the sidebar, the main content area shows a 'Manage Alerts' button, a 'My Reminders' section with a filter and 'Go' button, and a table with columns 'Alert Type' and 'Alert Message'. Below this, a 'Your Recent Online Activities' section shows login history. A red message 'No Records Found !' is displayed in the table area.

Provider Portal

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

Manage Alerts

My Reminders

Filter By : [dropdown] [input] - [input] Read Status [dropdown] [Go]

	Alert Type	Alert Message
No Records Found !		

Your Recent Online Activities

- You have logged in with [redacted]
- Previous Site Visit: 04/15/2020 08:35:27 PM
- Last login failed attempt:

# Bill Inquiry Search

Close Submit

### Provider Bill Inquiry Search

Please enter available information in the following fields before clicking 'Submit'.

- Required: TCN or Claimant ID/SSN AND Bill Service Period (To date is optional)
- You may request status for bills processed within the past seven years
- The Bill Service Period From and To date range cannot exceed 3 months

OWCP ID: \*

TCN:

Claimant ID:

SSN:

Bill Service Period From:

Bill Service Period To:

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 *-and-* 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.

OWCP ID: [REDACTED]


Bill Inquiry Providers List							
	TCN ▲▼	Date of Service ▲▼	Bill Status ▲▼	Bill Charged Amount ▲▼	Bill Payment Amount ▲▼	Claimant Name ▲▼	Claimant ID ▲▼
<input type="checkbox"/>	[REDACTED]	02/21/2018	1: For more detailed information, see remittance advice.	\$1,950.00	\$362.56	[REDACTED]	[REDACTED]


View Page: 1    Viewing Page: 1

**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.

 Close

 Bill Details

Status Information Effective Date: 02/13/2020


Status Category Code: F2:Finalized/Denial-The claim/line has been denied.

Service Period: From 10/01/2019 To 10/01/2019

Bill Type Identifier:

Charged Amount: \$1,000.00

Payment Amount: \$0.00

TCN: 


Status: 1: For more detailed information, see remittance advice.


Adjudication or Payment Date: 01/17/2020

Check Issue or EFT Effective Date:

Check or EFT Trace Number: 6060230











[Remit/Remark Codes](#)

 Provider Data

OWCP ID: 

Name or Servicing Organization:

# Bill Details Continued

	Claimant Data	
Name:  Claimant ID: 		
Patient Control Number:		
	Payer Data	
Name:  Identification: 		
	Unit Item Detail Data	
1	Status Effective Date: 02/13/2020 Product or Service ID Qualifier: HC	
	Status Category Code: F2	
	Status: 1	
	Procedure Code: 96100	
	Service Line Date: From 10/01/2019 To 10/01/2019	
	Charged Amount: \$1,000.00	Revenue Code:
	Payment Amount: \$0.00	Units of Service: 1
	Procedure Modifier 1:	Procedure Modifier 3:
	Procedure Modifier 2:	Procedure Modifier 4:
<a href="#">Remit/Remark Codes</a>		

# Bill Statuses

The following is a list of the different bill statuses you may see listed on your bills.

Provider Status for Bills
F1: Finalized/Payment-The claim/line has been paid.
F2: Finalized/Denial-The claim/line has been denied.
F3: Finalized/Revised-Adjudication information has been changed.
F4: Finalized/Adjudication Complete - No Payment forthcoming-The claim has been adjudicated and no further payment is forthcoming.
F3: Finalized/Revised-Adjudication information has been changed
P1: Pending/In Process-The claim is in the adjudication system.



# 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

Select **View Payment** →

The screenshot displays the 'Provider Portal' interface. On the left, a sidebar menu lists various services under categories like 'Online Services', 'Bills', 'Claimant', 'Authorization', 'Provider', 'HIPAA', 'Admin', and 'My Interactions'. The 'Bills' section is expanded, and the 'View Payment' link is highlighted with a red box. An orange arrow points from the text 'Select View Payment' to this box. The main content area on the right includes a 'Manage Alerts' button, a 'My Reminders' section with a filter and 'Go' button, and a table with columns 'Alert Type' and 'Alert Message'. Below the table, it states 'No Records Found !'. At the bottom, there is a 'Your Recent Online Activities' section showing login history.

Provider Portal

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

Manage Alerts

My Reminders

Filter By : [dropdown] [input] - [input] Read Status [dropdown] [Go]

	Alert Type ▲▼	Alert Message ▲▼
No Records Found !		

Your Recent Online Activities

- You have logged in with [redacted]
- Previous Site Visit: 04/15/2020 08:35:27 PM
- Last login failed attempt:

## RV Payment List

The **RV Payment List** includes all remittance vouchers by default. Use the filters to narrow your search as needed.

RV Payment List

Filter By :

And

Programs

All

Go

Clear Filter

Save Filter

My Filters

	RV Number	Check Number	Check Date	RV Date	Bill Count	Charges	Payment Amount	Adjusted Amount	Download	Program
			07/18/2019	07/18/2019	10	\$2,508.68	\$0.00	\$796.92		

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

Payment Date: 04/24/2020  
Payment Method: EFT

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

Page 2

## Bills Summary

## Financial Recoveries

Billing Provider	Category	Total Billed Amount	Total Allowed Amount	Total TPL Amount	Total Claimant Responsible Amount	Total Paid Amount	Billing Provider	FIN Invoice Number/ Parent TCN	Source	Adjustment Type	Previous Balance Amount	Adjustment Amount	Remaining Balance Amount
[REDACTED]	Paid	\$2000.00	\$87.56	\$0.00	\$0.00	\$87.56	[REDACTED]						
[REDACTED]	Denied	\$1000.00	\$0.00	\$0.00	\$0.00	\$0.00	[REDACTED]						

Count of Bills In Process: 0

Total Adjustment Amount: \$0.00

# Remittance Voucher Sample – Details Page with Category Total

RV Number: [REDACTED]	Payment #: [REDACTED]	Payment Date: 04/24/2020	Prepared Date: 04/19/2020	RV Date: 04/19/2020									
Category: Paid	Billing Provider: [REDACTED]	Page 3											
Claimant Name / Claimant ID / Med Record # / Patient Acct # / Original TCN/	TCN / Bill Type / RX Bill # / Inv # / Auth #	Line #	Rendering Provider / RX # / Auth office #	Service Date(s)	Svc Code or NDC / Mod / Rev Code	Total Units	Billed Amount	Allowed Amount	TPL Amount	Claimant Responsib le Amount	Paid Amount	EOB Codes	Adjustment Reason Codes
[REDACTED]	[REDACTED] Professional Bill	1		01/01/2019- 01/01/2019	97110	1.0000	\$1000.00	\$43.78	\$0.00	\$0.00	\$43.78		45 = \$956.22
Document Total: 01/01/2019-01/01/2019						1.0000	\$1000.00	\$43.78	\$0.00	\$0.00	\$43.78		
[REDACTED]	[REDACTED] Professional Bill	1		01/01/2019- 01/01/2019	97110	1.0000	\$1000.00	\$43.78	\$0.00	\$0.00	\$43.78		45 = \$956.22
Document Total: 01/01/2019-01/01/2019						1.0000	\$1000.00	\$43.78	\$0.00	\$0.00	\$43.78		
Category Total:						2.0000	\$2000.00	\$87.56	\$0.00	\$0.00	\$87.56		

**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.

# Remittance Voucher Sample – Details Page with Billing Provider Total

RV Number: [REDACTED]		Payment #: [REDACTED]		Payment Date: 04/24/2020		Prepared Date: 04/19/2020		RV Date: 04/19/2020		Page 4			
Category: Denied		Billing Provider: [REDACTED]											
Claimant Name / Claimant ID / Med Record # / Patient Acct # / Original TCN/	TCN / Bill Type / RX Bill # / Inv # / Auth #	Line #	Rendering Provider / RX # / Auth office #	Service Date(s)	Svc Code or NDC / Mod / Rev Code	Total Units	Billed Amount	Allowed Amount	TPL Amount	Claimant Responsib le Amount	Paid Amount	EOB Codes	Adjustment Reason Codes
[REDACTED]	[REDACTED] Professional Bill	1		01/01/2019- 01/01/2019	99214	1.0000	\$1000.00	\$0.00	\$0.00	\$0.00	\$0.00	70863~50 301	16 = \$1000.00
Document Total:				01/01/2019-01/01/2019		1.0000	\$1000.00	\$0.00	\$0.00	\$0.00	\$0.00		
Category Total:						1.0000	\$1000.00	\$0.00	\$0.00	\$0.00	\$0.00		
Billing Provider Total:						3.0000	\$3000.00	\$87.56	\$0.00	\$0.00	\$87.56		

**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.



# 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 DIAGNOSISES 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

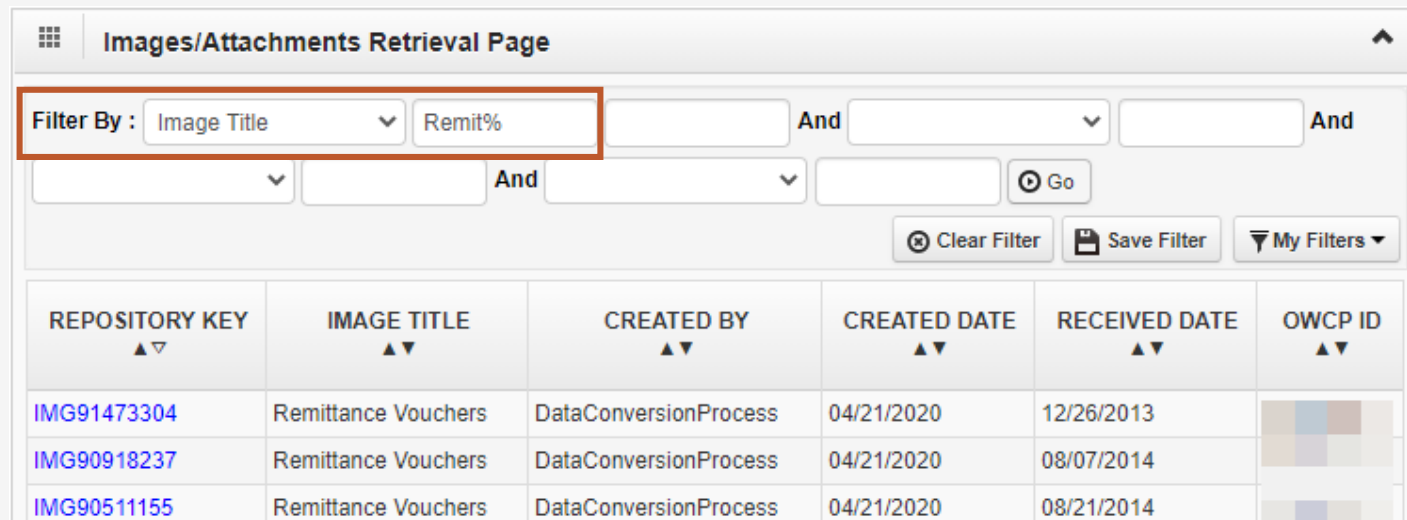
How it works:

- 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.

The image displays three screenshots of the WCMBP System interface, connected by arrows indicating the workflow. The first screenshot shows a page titled "Select a Provider ID Number to continue to the Provider Portal:". It features a dropdown menu labeled "Available Provider IDs:" with the value "700" selected. A "Go" button is located below the dropdown. An arrow points from this "Go" button to the second screenshot. The second screenshot shows a page titled "Select a profile to use during this session:". It has a dropdown menu with "EXT Provider Bills Submitter" selected and a "Go" button. An arrow points from this "Go" button to the third screenshot. The third screenshot shows a sidebar menu with three main sections: "HIPAA", "Admin", and "My Interactions". Under "My Interactions", the "Correspondences" link is highlighted with a red box. An arrow points from the "Correspondences" link back to the text of step 2 in the instructions.

# Images/Attachments Retrieval Page

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.



The screenshot shows the 'Images/Attachments Retrieval Page' interface. A search filter is applied to 'Image Title' with the value 'Remit%'. The search results table displays the following data:

REPOSITORY KEY ▲▼	IMAGE TITLE ▲▼	CREATED BY ▲▼	CREATED DATE ▲▼	RECEIVED DATE ▲▼	OWCP ID ▲▼
IMG91473304	Remittance Vouchers	DataConversionProcess	04/21/2020	12/26/2013	
IMG90918237	Remittance Vouchers	DataConversionProcess	04/21/2020	08/07/2014	
IMG90511155	Remittance Vouchers	DataConversionProcess	04/21/2020	08/21/2014	

**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.

# Thank you!

CNSI is excited about being the new medical bill processing agent for OWCP programs and to continue working with each of you!

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Email: [CNSIOWCPOutreach@cns-inc.com](mailto: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