

# DEEOIC Authorizations



# Introduction

This webinar will include pertinent information to discuss details and educate Providers about provider authorizations and the Workers' Compensation Medical Bill Process (WCMBP) System.

- ❖ Important Information
- ❖ Provider Expectations
- ❖ Authorization Submissions
- ❖ Checking Authorization Status
- ❖ Provider Preparation



# Important Information About This Webinar

- This webinar is intended for providers who will be submitting authorizations to CNSI.
- Questions can be submitted via email to [CNSIOWCPOutreach@cns-inc.com](mailto:CNSIOWCPOutreach@cns-inc.com).
- Pharmacy services will not transfer to CNSI at this time. For pharmacy related questions, please call Conduent at 1-866-664-5581 or visit their web site at <https://owcprx.dol.gov/>.
- The current <https://owcpmed.dol.gov> will continue to be the site for OWCP medical bill processing information.
- WCMBP – Workers' Compensation Medical Bill Process

# Provider Expectations



# Provider Expectations

**Providers** who are currently enrolled and active with Conduent on or before April 27, 2020, can expect the following with the transition to the new WCMBP system:

- Provider files will be transferred from Conduent system to WCMBP without any provider intervention, keeping the same provider ID
- **No** interruption in payments to the Providers
- Bill history data (last 7 years) will be viewable and all historical bills will transfer from Conduent system to the WCMBP system
- Webinars and training tutorials will be available on the WCMBP web portal to provide assistance and instructions on how to use the new system
- Web portal FAQs will be continuously updated to address provider questions
- No change to system go-live date due to COVID-19

# Authorization Submissions



# Authorization Submission Methods

Certain services that Providers render to an OWCP claimant require a prior authorization before those services can be reimbursed. Authorization requests can be submitted in the following methods:

- Direct Data Entry (DDE) online via WCMBP Provider Portal
- Paper- Authorization Templates and instructions can be downloaded at <https://owcpmed.dol.gov> under Resources and Forms & References.

**Note:** We encourage DDE online authorization as delays are expected with processing hardcopy/paper due to current conditions of the pandemic. Until further notice, paper forms need to be *faxed*, not mailed.

## Authorization Submission via Direct Data Entry

The Authorization Templates have been revamped and can be submitted electronically directly into the WCMBP system via Direct Data Entry (DDE). Effective April 27, 2020, the following Templates can be submitted via DDE:

- **Durable Medical Equipment** – requires a letter of Medical Necessity (LMN), a prescription, and information regarding the requested equipment and how it meets the physician’s prescription.
- **General Medical** – requires supporting documents about the need for the service as it relates to the accepted condition(s), such as a letter of medical necessity (LMN), medical records, treatment plan, etc.
- **Rehabilitative Therapies** – requires a therapy evaluation, LMN, evidence of a face to face exam, any medical documentation supporting the need for therapy as it relates to the accepted condition(s). Note: If services will be provided in the home, LMN must indicate whether or not claimant is homebound.

(Continued on next slide)



## Authorization Submission via Direct Data Entry (Continued)

- **Transplant** – requires LMN from the treating physician, the initial and recent clinical evaluation, and a copy of the treatment protocol.
- **Home Health** – requires LMN, evidence of face to face exam, plan of care, and any medical documentation supporting the need for care as it relates to the accepted condition(s).
- **Medical Transportation** – transportation invoice and supporting transportation documentation.

**Note:** All DEEOIC Authorizations require attachments. Authorizations that require attachments cannot be submitted via DDE without an attachment uploaded.

# Authorization Requirements

Before submitting an authorization to CNSI, confirm that the claimant is eligible and that an authorization is required for the services you are rendering.

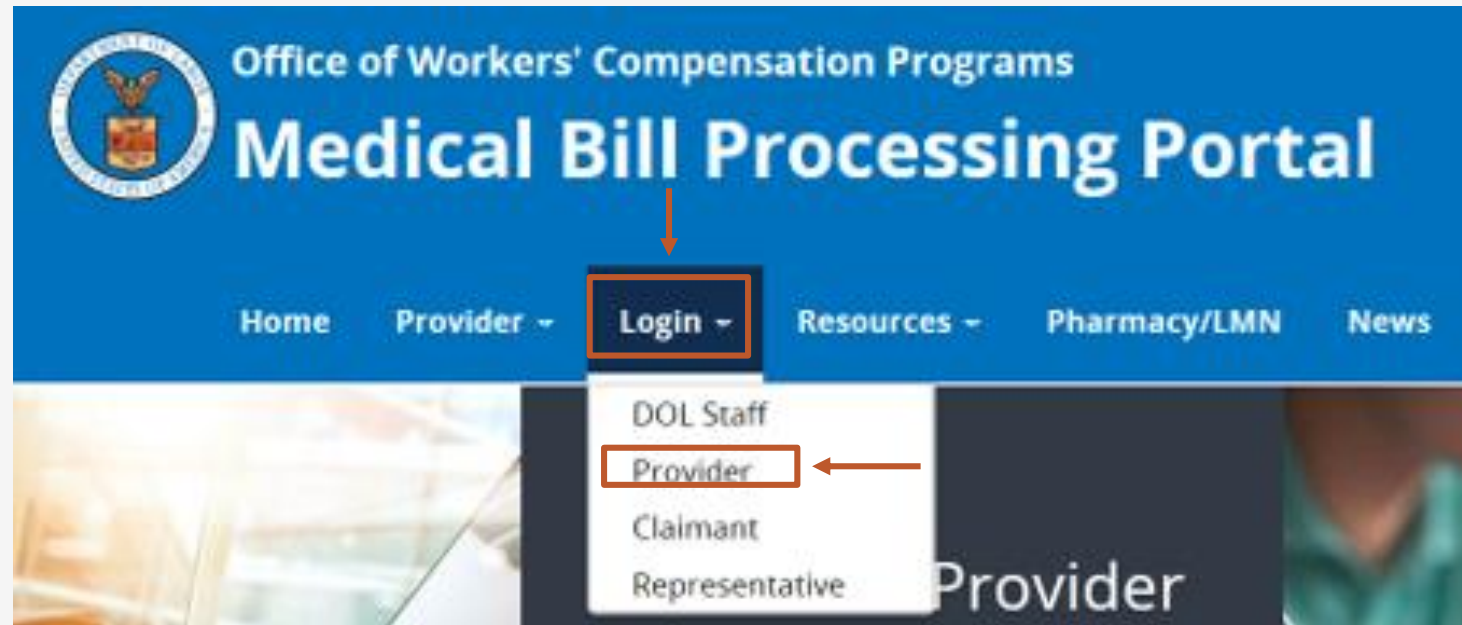
You can inquire on eligibility within the WCMBP Provider Portal or by speaking to a customer service representative at 866.272.2682.

Authorizations with a Level 2 or 3 require an authorization. Level 1 authorizations do not require an authorization.

# Accessing the WCMBP Portal

On or after April 27, 2020, go to <https://owcpmed.dol.gov>:

1. Click Login
2. Click Provider



# Accessing the WCMBP System


Click "Provider Login"

## 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.



Provider Login

# OWCP Connect Login

Once you have registered with OWCP Connect:

- The provider will enter their email address and click login.
- The provider will enter their password and click submit.
- The provider will then be taken to the WCMBP Provider Portal.

**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 guided through the process to reset your password.

# Access to WCMBP Provider Portal

1

The system will display the default **Select a Provider ID Number**.

Welcome to the WCMBP Provider Portal



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

Available Provider IDs:

2

**Select** the *appropriate profile* “**Ext Provider Bills Submitter**” from the drop-down menu.

Select a profile to use during this session:

EXT Provider Bills Submitter

# Provider Portal – Home Page

The screenshot displays the Provider Portal Home Page. On the left is a navigation menu with categories: Online Services, Bills, Claimant, Authorization, Provider, HIPAA, Admin, and My Interactions. The main content area includes a 'ManageAlerts' button, a 'My Reminders' section with a filter and a table (currently empty with 'No Records Found!'), and a 'Your Recent Online Activities' section listing login events.

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

ManageAlerts

My Reminders

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

Save Filter My Filters

|                    | Alert Type | Alert Message | Alert Date | Due Date | Read |
|--------------------|------------|---------------|------------|----------|------|
| No Records Found ! |            |               |            |          |      |

Your Recent Online Activities

- You have logged in with angelr.roberts05 Account with IP Address [redacted]
- Previous Site Visit: 04/15/2020 08:35:27 PM
- Last login failed attempt:

When first entering the Provider Portal, you are taken to the Provider Portal Home page.

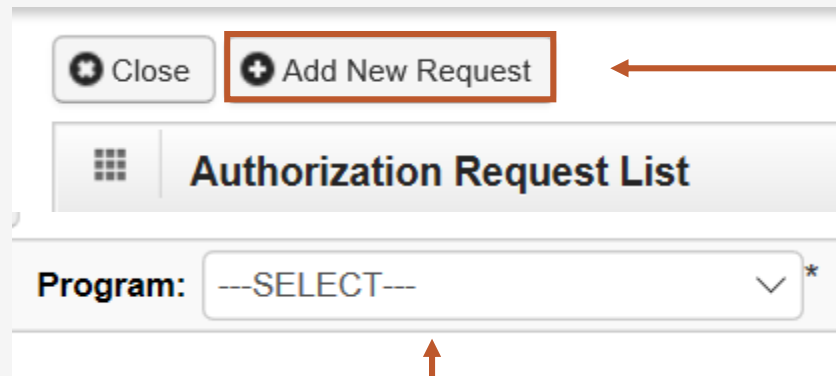
# Provider Portal – Authorizations

The screenshot displays the Provider Portal interface. On the left, the 'Online Services' sidebar is visible, with the 'Authorization' menu item highlighted by a red box. The 'Authorization' menu includes the sub-item 'On-line Authorization Submission'. The main content area shows 'My Reminders' with a filter bar and a table header with columns for Alert Type, Alert Message, Alert Date, Due Date, and Read. Below the header, a red message states 'No Records Found!'. Below that, the 'Your Recent Online Activities' section lists three activities: logging in, a previous site visit, and a failed login attempt.

**Authorization** online services allows the provider to create or update an authorization and check authorization status.



# Adding a New Request



The screenshot shows a user interface with a 'Close' button and an 'Add New Request' button. Below these is a header for 'Authorization Request List'. The 'Add New Request' button is highlighted with a red box and an arrow pointing to it from the first instruction.

1 To submit a new authorization request, click the "Add New Request" button.

2 Select the DEEOIC program from the "Program" drop-down.



The screenshot shows a 'Program' drop-down menu with the text '--SELECT--' and a downward arrow. An arrow points from the second instruction to this menu.

3 Select one the following authorization types from the "Authorization Type" drop-down.



The screenshot shows an 'Authorization Type' drop-down menu with a downward arrow. An arrow points from the third instruction to this menu.



The screenshot shows the expanded 'Authorization Type' drop-down menu with the following options: --SELECT--, Durable Medical Equipment, General Medical, Home Health Request, Rehabilitative Therapies, and Transplant. An arrow points from the third instruction to this menu.

# Authorization Submissions

- Some templates require an attachment and cannot be submitted unless the attachment is uploaded.
- Attachments can have a file size up to 50 MB.
- Once submitted, allow two business days for authorizations to process.
- For questions regarding the status of your authorizations, please call 866.272.2682 to speak with a customer service representative.

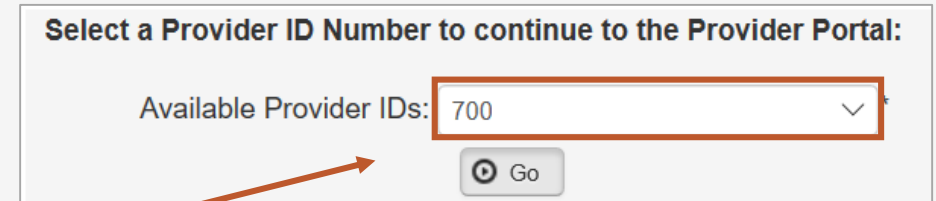
# Checking Authorization Status



# Accessing Authorizations in the WCMBP System

How it works:

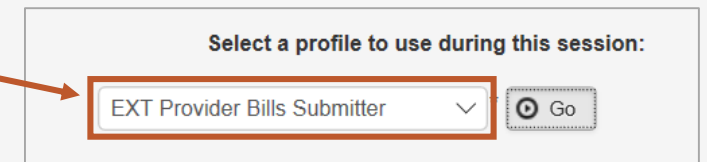
- 1 Log in to the WCMBP System. The system will display the default "Select a provider ID Number" page. Select the appropriate profile "Ext Provider Bills Submitter" from the drop-down.



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

Available Provider IDs: 700

Go

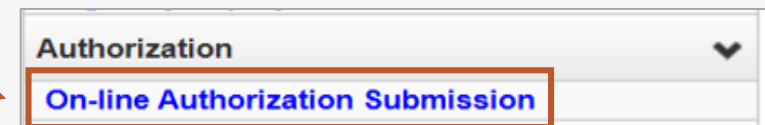


Select a profile to use during this session:

EXT Provider Bills Submitter

Go

- 2 Click on the "On-line Authorization Submission" tab in the column on the left under Authorization.



Authorization

On-line Authorization Submission

# Authorization Request List

The Authorization Request List will open.  
The features of this page are outlined here:

**Note:** Once your authorization request is submitted, the status of your authorization populates under the Authorization Request List.

1. Opens up a Dialogue box to display authorization details.

2. Displays the Auth Request #.

3. Displays the Claimant Case ID.

The screenshot shows the 'Authorization Request List' interface. At the top, there is a 'Close' button (callout 12) and an 'Add New Request' button. Below this is a header for the 'Authorization Request List'. The main area is a table with the following columns: 'Auth Request #' (callout 2), 'Claimant Case ID' (callout 3), 'Status' (callout 4), 'Auth Type' (callout 5), 'Last Updated' (callout 6), 'Submitted Date' (callout 7), 'Level' (callout 8), 'Program' (callout 9), 'Auth Request Type' (callout 10), and 'Source' (callout 11). A callout 1 points to a document icon in the first column. The table contains three rows of data, all with a 'Submitted Date' of 03/08/2020. The first row has Level 3, Program DFEC, Initial Request, and Source DDE. The second row has Level 2, Program DFEC, Initial Request, and Source DDE. The third row has Level 3, Program DFEC, Initial Request, and Source DDE.

|  | Auth Request # | Claimant Case ID | Status | Auth Type | Last Updated | Submitted Date | Level | Program | Auth Request Type | Source |
|--|----------------|------------------|--------|-----------|--------------|----------------|-------|---------|-------------------|--------|
|  |                |                  |        |           | 03/08/2020   |                | 3     | DFEC    | Initial Request   | DDE    |
|  |                |                  |        |           | 03/08/2020   |                | 2     | DFEC    | Initial Request   | DDE    |
|  |                |                  |        |           | 03/08/2020   |                | 3     | DFEC    | Initial Request   | DDE    |

\*Note: Steps are continued on the next two slides.

# Authorization Status

## 4. Displays the Status.

- Entering (started but not submitted).
- In Review (submitted).
- Approved.
- Denied (not approved).
- Cancelled (services no longer needed).
- Pending Further Development (additional information is needed or medical development is required before a determination can be made).

The screenshot shows a web interface for an 'Authorization Request List'. At the top, there are two buttons: 'Close' (callout 12) and 'Add New Request'. Below the buttons is a grid icon and the title 'Authorization Request List'. The main area is a table with 12 columns, each with a numbered callout (1-11) pointing to its header. The table contains three rows of data. The first row has a callout 1 pointing to a document icon in the first column.

| 1 | 2              | 3                | 4         | 5                                     | 6            | 7              | 8     | 9       | 10                | 11     |
|---|----------------|------------------|-----------|---------------------------------------|--------------|----------------|-------|---------|-------------------|--------|
|   | Auth Request # | Claimant Case ID | Status    | Auth Type                             | Last Updated | Submitted Date | Level | Program | Auth Request Type | Source |
| 1 |                |                  | In Review | Surgical Package                      | 03/08/2020   |                | 3     | DFEC    | Initial Request   | DDE    |
|   |                |                  | In Review | Physical Therapy/Occupational Therapy | 03/08/2020   |                | 2     | DFEC    | Initial Request   | DDE    |
|   |                |                  | In Review | General Medical                       | 03/08/2020   |                | 3     | DFEC    | Initial Request   | DDE    |

\*Note: more steps are covered on the next slide.

# Authorization Status

5. Displays the Auth Type.
6. Last date the Authorization was updated.
7. Date it was submitted.
8. Authorization Level.
9. OWCP Program the claimant is covered by.
10. Auth Request Type.
11. Source (How the authorization was submitted).
12. Click "Close" to return to Portal Home Page.

The screenshot shows a web interface for managing authorization requests. At the top, there are two buttons: "Close" (highlighted with a red box and callout 12) and "Add New Request". Below this is a header for the "Authorization Request List". The main content is a table with 12 columns, each with a numbered callout (1-11) pointing to its header. The table contains three rows of data.

| 1 | 2              | 3                | 4         | 5                                     | 6            | 7              | 8     | 9       | 10                | 11     |
|---|----------------|------------------|-----------|---------------------------------------|--------------|----------------|-------|---------|-------------------|--------|
|   | Auth Request # | Claimant Case ID | Status    | Auth Type                             | Last Updated | Submitted Date | Level | Program | Auth Request Type | Source |
|   |                |                  | In Review | Surgical Package                      | 03/08/2020   |                | 3     | DFEC    | Initial Request   | DDE    |
|   |                |                  | In Review | Physical Therapy/Occupational Therapy | 03/08/2020   |                | 2     | DFEC    | Initial Request   | DDE    |
|   |                |                  | In Review | General Medical                       | 03/08/2020   |                | 3     | DFEC    | Initial Request   | DDE    |

# Provider Preparation





# Provider Preparation Tips

- Look for two mailings from CNSI outlining registration information
- Continue to check the web portal for updated FAQs and training materials
- Capture the new mailing addresses for authorization submissions
- Attend webinars for additional information
- Check back on April 27, 2020 when the system launches in order to access the WCMBP web portal
- Be sure to confirm or update your provider profile information in the new system
- To avoid payment delays, required licenses and credentials must be active on the date of service

# Thank you!

---

Please continue to visit our Outreach web portal for updates, Frequently Asked Questions (FAQs) and webinar schedules.

The PowerPoint presented will be posted to the Outreach portal within 24 hours.

The Outreach portal at <https://prod.wcmbp.com/outreach/> will discontinue on April 24, 2020 and transition to the new WCMBP System at <https://owcpmed.dol.gov> on April 27, 2020.

CNSI looks forward to being the new medical bill processing agent for the OWCP programs and working with each of you!

---

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