### Navigating Bill Processing Portal



## Navigating Bill Processing Portal

- How to access DFEC's web bill processing portal
- Use the portal to check:
  - Eligibility and accepted conditions
  - Bill status
  - Medical authorizations
  - Provider search



## Web Bill Processing Portal

DFEC's Web Bill Processing Portal is used by providers, claimants and employing agencies.

- Provider Enrollment
- Online Provider Update
- Medical Bill Submission
- Medical Bill Inquiry
- Eligibility and Accepted Condition Inquiry
- Medical Authorization Request
- Medical Authorization Inquiry
- Provider Payment Status Inquiry
- Provider Search

## How to Access the Web Bill Processing Portal

• The easiest way to access the portal is through the Agency Query System (AQS)



### Accessing the Portal through AQS

 Log into ECOMP, click on AQS link, select the case, and then click on Bill Pay Inquiry link

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Injury Information						٠
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### Web Portal

- The default screen is Claimant Bill Inquiry List
- Click on Home icon to access the Query Options

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## Web Portal Query Options

### Web Portal

- Authorization History
- Bill History
- Eligibility Inquiry
- Correspondences



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Correspondences						

## **Medical Authorization List**

- Click on Auth Request # link for additional information on what was requested
- Use the Filter By option to narrow the search result

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## Claimant Bill Inquiry List

- Click on TCN link for additional information on each bill
- Use the Filter By option to narrow the search result

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## **Checking Eligibility**

Eligibility Inquiries include:

- Non-Pharmacy Services
- Accepted Conditions

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Claimant Eligibility Inquiry								
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Eligibility for Non-Pharmacy Ser	vices							^
Provider ID:								
Program Code:	DFEC V							
Case ID:		0.						
Diagnosis Codes:				(J	At least one Diagnosis Code	s required.)		
2015 - 11 - 240 - 1	Please Don't enter DO	T (".") When entering Diagnos	s code. For e.g. enter 0	0869, for the diagnosis code 008.69				
Procedure Code:		* OR		Revenue Code:				
NDC Code:		(Required for Unspecified	J-Codes)	Procedure Code:	(if req	uired by Revenue/Pro	cedure Code Matri	x)
Date of Sendoar								

## Accepted Condition Inquiry

• Select Accepted Conditions and click on Submit

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Please select the inquiry type, complete the fields in the applicable section below, and click "Submit".	
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Non-Pharmacy Services     Accepted Conditions (DFEC.DEEOIC and DLHWC Only)      Eligibility for Accepted Condition Services     Case ID:     Program Code: DFEC     V *	~

 Query returns all accepted conditions as of the date it is run or the Date or Service

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## Checking Eligibility for Non-Pharmacy Services

Enter the following and click on Submit:

- Diagnosis Code(s)
- Procedure Code
- Approximate Date of Service

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Case ID:			*			
Diagnosis Codes:	M5106			(At least one	Nagnosis Code is required.)	
	Please Dori'l enter D	DOT (".") When orders	ng Diagnosis code. For e.g	enter 00069, for the diagnosis code 000.69		
Procedure Code:	87750	1	* OR	Revenue Code:		
		(Required for U	Anspecified J-Codes)	Procedure Code:	(If required by Revenue Procedure Code Matrix)	
NDC Code:						

# Checking Eligibility for Non-Pharmacy Services

If both Diagnosis Code and Procedure Code are valid for case, user will see additional information:

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Info: Authorization Required, Please submit authorization for approval		
O Close		
III Claimant Eligibility Inquiry Response		•
Case ID:		
Procedure Code: 97750		
Date of Service: 09/02/2020	Request Date/Time: 09/02/2020 14:29:21	
Case Status on 09/02/2020: DR-FECA Payment on Daily Roll		
Diagnosis Codes: M5106		
Death Indicator: N		
Authorization Level: 2		

If either Diagnosis Code or Procedure Code is invalid for case, user will see an error message:

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Claimant Eligibility Inguiry > Claimant Eligibility Response		
gibility Inquiry Response		^
Case ID:		
Procedure Code: 29828		
Date of Service: 09/02/2020 Reguest Date/Time: 09/02/2020 14:39:52		
Case Status on 09/02/2020: DR-FECA Payment on Daily Roll		
Diagnosis Codes: M5106		
Death Indicator: N		
Authorization Level:		
		^
T RELATED TO THE ACCEPTED CONDITIONS.		

### **Pharmacy Benefits**

#### Log into ECOMP, click on AQS link, select the case, and then click on Pharmacy Benefits link

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CASE 252122909							<u>Exit Ca</u>
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### Pharmacy Bill Inquiry

- Choose either Resolved Bills or Bills in Process and click Submit
- Narrow your search by date of service and/or OWCP Provider ID

	Office of Workers' Compensation Programs Pharmacy Bill Processing Portal
Home Contact In	fo Provider FAQ Forms & Links Archived Announcements OWCP Fee Schedule Medical WCMBP Portal Logout
Inquiries Eligibility	Bill Status Inquiry
Bill Status	Case File #:
	View Option:
	O Bills In Process
	Date of Service From: dd / coyy - To: dd / coyy
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	Submit
	* denotes required fields

## Pharmacy Bill Inquiry

#### Click on TCN link for additional information

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	fulls Retrieved from	n Inquiry			Bills 1 - 25 of 201 Net
	L TCHI 6202230	00220	Date of Service:	08/10/2020 - 0	8/10/2020
	Bill Status: Billed Amount: Bill Type:	PAID § 33.01 PHARMACY CLAIMS	RV Number: Paid Amount :	117543 \$ 33.01	RV Date: 08/20/2020
	Payee Provider Payee Provider	ID: 801036	Provider Type:	PHARMACY	
	2. TCN: 6202160	002108	Date of Service:	08/03/2020 - 0	6/03/2020
	Bill Status: Billed Amount: Bill Type:	PAID § 33.01 PHARMACY CLAIMS	RV Number: Paid Amount :	116296 \$ 33.01	RV Date: 08/13/2020
	Payee Provider	ID: 801036	Provider Type:	PHARMACY	

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# Checking Eligibility for Pharmacy Services

• Click on Eligibility link

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Home   Contact Ir	nfo Provider FAQ Forms & Links Archived Announcements OWCP Fee Schedule Medical WCMBP Portal Logout
Inquiries Eligibility	Bill Status Inquiry
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	O Bills In Process
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	Provider ID :
	Submit Clear
	* denotes required fields

# Checking Eligibility for Pharmacy Services

Enter the following:

- Valid case file number
- Approximate date prescription filled
- Valid National Drug Code (NDC)

PI	ce of Workers' Compensation Programs narmacy Bill Processing Portal
Home Contact Info Pr	ovider FAQ Forms & Links Archived Announcements OWCP Fee Schedule Medical WCMBP Portal Logout
Inquiries Eligibility <u>Bill Status</u>	Eligibility Inquiry Please complete the fields in the appropriate section below and click 'Submit.' ELIGIBILITY FOR PHARMACY SERVICES Case File #: Date Prescription Filled: 09 01 2020 * NDC Code: 00378875006 Submit Clear
	* denotes required fields

## Checking Eligibility for Pharmacy Services

If NOC entered is valid and is related to accepted condition, user will see a message indicating approval level of procedure and other casespecific information:

<b>E</b>	ffice of Workers' Cor Pharmacy	<sup>npens</sup> Bill	ation Pr	ocessing Portal
Home Contact Into Inquiries Eligibility Bill Status	2 Provider FAQ Forms & Links Eligibility Response 09/02/2020 02:21 EST	Archived	Announcem	ments OWCP Fee Schedule Medical WCMBP Portal Logout
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	Case Status on 09/01/2020	DR 1	This case is op Dayment of Co	open for medical care of the accepted conditions and possible compensation.
	Deceased Indicator	N		
	Approval Level	1 ( a c c	WCP has de iccepted cond an provide ac ode/s. No wri procedure cod	letermined that this procedure is routine care for the worker's dition and does not require formal authorization. The worker additional information, such as the accepted condition ICD ritten authorization is required or will be provided for this ide. You may print a copy of this prompt for your records.
			Back to	to Eligibility Inquiry

### Correspondences

- Documents related to bill payment and authorization may be retrieved in the web portal
- Click on a link to view the document

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## Provider Search

- Search results within this function will list only physicians who have agreed to have practice information available to users.
- This feature may be useful in initial choice of physician. However, an IW must submit a written request to OWCP with his/her reasons for desiring a change of physician and obtain prior approval.



### **Provider Search**

From the main page of the Bill Processing Portal <u>https://owcpmed.dol.gov</u>, click on Find a Provider



### Provider Search

- Click on Agree button in the pop-up window, and select Filter By drop-down menu.
- Select a filter, enter a search term in the adjacent text box, and select Go.
- Providers matching filter criteria will be listed.

										9 H
III Provider Search										
To search for a provider, select         • For example, from the Fi         You may use the additional field         • For example, from the fir         adjacent text box, select         The results of your search will o	er Filter By drop- er By drop-down i on this page to I Filter By drop- he Provider Spe hly show 15 prov	-down menu, select a a list, select State, ente narrow your search fur down list, select State, iciality drop-down, sele iders per page. You wil	filter, enter a search te er the state name in th rther using multiple filt, enter the state name exct the provider special II need to select the Ne	erm in the adja te adjacent text ler criteria. In the adjacent ity, then select ext button at th	cent text box, t box, and the t text box, and Go. te bottom righ	and select Go. In select Go. If then after "and it of the list to vier	" select the se w additional re	cond Filter (ex. City), e suits.	enter the city nam	e in the
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Provider Name		A,	ddress ▲▼		NPI AT	Program	Phone Number	Provider Specialty	City	State
Provider Name	14546 S 32258	A T AUGUSTINE RD, SU	ddress ▲▼ JITE 107, JACKSONV	/ILLE, Florida	NPI △▼ 1063435600	Program	Phone Number ▲▼ (904) 880-1260	Provider Specialty	City	State
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Provider Name	14546 S 32258 9191 R.0 Florida 3 6817 SO Florida 3	A T AUGUSTINE RD, SL 3.SKINNER PARKWAY 2256 UTHPOINT PKWY, SL 2216	ddress JITE 107, JACKSONV Y, SUITE 103, JACKSON JITE 1704, JACKSON	VILLE, Florida ONVILLE, IVILLE,	NPI △▼ 1063435600 1194805085 1528521911	Program AT DFEC DFEC DFEC,DEEOIC	Phone Number ** (904) 880-1260 (904) 391-6862 (904) 206-4141	Provider Specialty TX-Orthopaedic Surgery 7X-Orthopaedic Surgery 7X-Orthopaedic Surgery	City JACKSONVILLE JACKSONVILLE	State The state State

### Injured Worker Access to Bill Processing Portal

Injured workers must verify their identities in ECOMP to access medical and pharmacy benefit information.

- Click <u>here</u> to read or print a tutorial on how to verify identity in ECOMP.
- Click <u>here</u> to view a video tutorial.

Identity-verified injured workers may access medical and pharmacy benefit information by clicking on a case on the ECOMP dashboard.

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### Injured Worker Access to Bill Processing Portal

 After selecting a case, click on either Bill Pay Inquiry or Pharmacy Benefits link to access medical or pharmacy benefit information for that case.

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Click <u>here</u> to read or print a tutorial on the verified claimant's ECOMP experience.

Click <u>here</u> to view a video tutorial.

DFEC's web bill processing portal is used by providers, claimants, and employing agencies for:

- a) Medical Bill Inquiry
- b) Eligibility and Accepted Condition Inquiry
- c) Medical Authorization Request
- d) Provider Payment Status Inquiry
- e) Provider Search
- f) All of the above

DFEC's web bill processing portal can be utilized to check eligibility for pharmacy, as well as nonpharmacy related services.

- a) True
- b) False

DFEC's web bill processing portal can help providers see all of the following except:

- a) If a bill is paid
- b) If OWCP received a medical report
- c) If a medical authorization request was received
- d) If a procedure is authorized
- e) Why a bill was denied

The Provider Search function on DFEC's web bill processing portal will list all physicians in the country, as well as overseas.

- a) True
- b) False

## Take Away Tips

- 1. The web bill processing portal is used by providers, claimants and employing agencies.
- 2. The injured workers and the employing agencies must access the bill processing portal through ECOMP.
- 3. The web portal can be used to check Eligibility & Accepted Conditions, Bill Status, Medical Authorization, and to perform a Provider Search.
- 4. When accessing the Provider Search, the results within this function will list only physicians who have agreed to have practice information available to users. This feature may be useful in initial choice of physician. However, an injured worker must submit a written request to OWCP with his/her reasons for desiring a change of physician and obtain prior approval.