

## INSTRUCTIONS TO MEDICAL PROVIDERS REGARDING MEDICAL TREATMENT OF FEDERAL EMPLOYEES COVERED BY THE FEDERAL WORKERS' COMPENSATION PROGRAMS (FECA)

**Note that your failure to follow these procedures in detail or attempting to bill the claimant directly will result in delay and possible denial of your claim for medical authorization and billing reimbursement**

**To be paid for treating federal employees covered by the FECA, you must enroll with the OWCP ACS.** As of March 31, 2004, **all bills submitted by unenrolled Providers will be returned** along with instructions on how to enroll. Enrollment is free and is simply a registration process to ensure proper payments. It is not a PPO enrollment. **Effective 10/1/06, your ACS/OWCP Provider Number/ID must be in Box 33 of any HCFA-1500 and in Box 51 of any UB-92 submitted for bill processing. Any billing form submitted without the Provider Number/ID in the designated box will not be processed and will be returned to the provider.** <http://www.dol.gov/esa/regs/compliance/owcp/infomedprov.htm>

***Each page of every medical report must bear the OWCP claim number and date of injury. Other than claimant name, patient identifiers such as the SSN shall be removed from reports.***

You can enroll online at <https://owcp.dol.acs-inc.com> – click on “Provider” in the FECA section in the shaded section on the top left side of the screen. Then click on “Provider Enrollment” and follow the instructions. Go to the portal at <http://owcp.dol.acs-inc.com>. Click on “Provider” in the FECA section. Then click on “Web Registration” and follow the instructions. If you try this and have questions or need additional help, call the Health Care Solutions Operations Center at 1-800-461-7485 or 1-850-558-1775A provider may use the eligibility inquiry function without enrolling as a provider and registering to use the web portal. To use the on-line authorization, bill status, and payment status functions, a provider must enroll and must register to use the web portal. Both enrollment and web registration can be accomplished online at <http://owcp.dol.acs-inc.com>.

***Whenever you treat an Injured Worker, check the ACS web portal (<http://owcp.dol.acs-inc.com>) or call the IVR at 866-335-8319 to see if the procedure requires authorization. Level 1 procedures (for example, Office Visits, MRIs, Routine Diagnostic Tests) do not require authorization. If you need a hard copy confirmation of this, complete an online authorization request at <http://owcp.dol.acs-inc.com> and print the message displayed after the request is submitted. Level 2, 3 and 4 procedures require authorization. These authorization requests can be made online at <http://owcp.dol.acs-inc.com> or via by faxing a completed authorization request and supporting documentation to 800-215-4901. The Medical Authorization forms are available online at <http://owcp.dol.acs-inc.com>. Click on “Forms and Links” and then choose FECA from the Program Specific Forms and Links box. Forms are available for Durable Medical Equipment, General Medical/Surgery, and Physical Therapy authorizations. These forms request the specific information needed to process each type of authorization request. **An authorization is not required when an Injured Worker is referred by her/his treating physician to a specialist for a consultation. However, you must be enrolled as a Provider to be paid for the consultation visit.*****

You may request authorization online at <http://owcp.dol.acs-inc.com>. Or, you may fax the appropriate Medical Authorization form and supporting documentation to 800-215-4901. The Medical Authorization forms are available online at <http://owcp.dol.acs-inc.com>. Click on “Forms and Links” and then choose FECA from the Program Specific Forms and Links box. Forms are available for Durable Medical Equipment, General Medical/Surgery, and Physical Therapy authorizations. Injured Workers, Providers, and Employing Agencies can check on the status of medical authorizations at <http://owcp.dol.acs-inc.com>. Having this information on the web is beneficial since authorization information is available 24 hours/day, 7 days/week without calling for an authorization number or waiting for the receipt of an authorization letter in the mail. Claimant eligibility, bill status, and medical authorization inquiry functionality is also available 24 hours a day via our Interactive Voice Response (IVR) system. To access the IVR, call 866-335-8319. To speak with a Customer Service Representative regarding an authorization, you may call 850-558-1818 which will be a toll call. This number is available Monday – Friday, 8am – 8pm, EST.

**To be a valid acceptable medical report your medical reports of treatment MUST follow these minimum OWCP guidelines:**

Code of Federal Regulations]

[Title 20, Volume 1]

[Revised as of April 1, 2007]

[CITE: [20 CFR 10.330](#)]

**20 CFR Sec. 10.330 What are the requirements for medical reports?**

**In all cases reported to OWCP, a medical report from the attending physician is required. This report should include:**

- (a) Dates of examination and treatment;
- (b) History given by the employee;
- (c) Physical findings;
- (d) Results of diagnostic tests;
- (e) Diagnosis;
- (f) Course of treatment;
- (g) A description of any other conditions found but not due to the claimed injury;
- (h) The treatment given or recommended for the claimed injury;
- (i) The physician's opinion, with medical reasons, as to causal relationship between the diagnosed condition(s) and the factors or conditions of the employment;
- (j) The extent of disability affecting the employee's ability to work due to the injury;
- (k) The prognosis for recovery; and
- (l) All other material findings