



What's New at WorkSafeBC

April 15, 2009

WORKING TO MAKE A DIFFERENCE

**Claims Management Solutions (CMS) system update for
Vocational Rehabilitation Providers (Third Party Agreement)**

Our CMS launch date is fast approaching! We will implement our new Claims Management System on May 11, 2009.

This bulletin provides information to help you with the transition period leading up to the implementation of CMS on May 11, 2009. It also outlines the changes in forms and procedures you need to be familiar with once CMS is operating.

If you have any questions, you can reach us several ways:

Web: www.worksafebc.com

Phone: (604) 276-3040 or 1-888 967-5377, extension 3040

Email: vradmin@worksafebc.com

CMS Web Page

An online resource is available to help providers with the transition to the new system. Many of your questions can be answered by visiting the CMS Web Page on our WorkSafeBC website. All of our previously released communication regarding CMS can be found on this page, which will be updated regularly.

<http://www.worksafebc.com/claims/cms/default.asp>

TRANSITION PERIOD

As of May 1, 2009, WorkSafeBC's existing systems will no longer be available while CMS is put into operation, effective May 11. During this time, staff will have limited access to claims information and no new information will be processed. This will affect many aspects of operation.

During this transition, WorkSafeBC will continue to provide the best service possible.

Payments

There may be some delays in processing payments during and immediately following the transition. Invoices received by April 17, 2009 will be processed prior to the transition period. Invoices submitted after April 17th will be held for processing following implementation of CMS, and we expect to issue some payments during the week of May 18 – 22, 2009.

We apologize for any inconvenience and appreciate your patience.

WHAT WORKSAFE WILL BE DOING DIFFERENTLY

Claim Number Changes

CMS will introduce a new structure for tracking workers and claims. The claim number will change, and the "Customer Care Number" and "Personal Access Number" will be introduced.

New Claim Number Format

New claim numbers will still have 8 digits, will always begin with a 1, and will be randomly assigned. There will no longer be a two-letter prefix preceding the number indicating which office is handling the claim. Claim numbers that were assigned prior to CMS implementation will remain the same.

Customer Care Number

CMS introduces a Customer Care Number (CCN) that uniquely identifies each worker in the system. The CCN is an 11-digit number that starts with a '9'. The CCN assigned to workers identifies them as workers for the rest of their working lives. Thus, workers will have one CCN but could have more than one claim number.

Personal Access Number

Workers will be issued a Personal Access Number (PAN), which is a confidential "PIN" style number, to be used to log in to web-based WorkSafeBC portals. This number should not be shared by workers, and providers will not need to use the PAN at anytime.

Terminology

CMS introduces new terminology, both on forms and in conversation with WorkSafeBC employees. For example, you may hear terms such as Earnings Equivalency, Service Plan and Milestones. These terms are explained on the web page in the glossary.

Electronic Funds Transfer (EFT) Payment Option

WorkSafeBC will offer a new EFT Direct Deposit payment process for providers and suppliers after the successful implementation of the new system. Further information about this option will be provided on the website shortly.

WorkSafeBC Assessment Registration

Firms required to register with WorkSafeBC under the Workers Compensation Act of British Columbia must do so before performing services and/or providing goods. Firms must maintain their accounts in good standing with WorkSafeBC. It is your responsibility to determine your registration status. For further information contact WorkSafeBC Employer Registration at (604) 244-6182 or www.worksafebc.com.

WHAT YOU NEED TO DO DIFFERENTLY

Payee Numbers

CMS will allow automatic invoice processing if all the correct data is entered, including a payee number unique to each firm. To invoice accurately for services or goods following CMS implementation, all invoices will require the correct payee number.

When CMS is implemented, each Vocational Rehabilitation Third Party Agreement (65D18) prepared for your firm must contain your new payee number. In order to bill WorkSafeBC accurately for vocational rehabilitation goods and/or services, please ensure your payee number appears on all invoices.

Authorization Number

The Vocational Rehabilitation Services Third Party Agreement Invoice (65D53) contains a field titled Authorization Number. Although this field is identified by an asterisk (*) as a 'mandatory' invoicing requirement, you can **disregard** this field unless an Authorization Number is specified in your Third Party Agreement.

Invoicing Requirements

Requirements for additional information on invoices represent the most significant change for vocational rehabilitation providers and suppliers under CMS. One term used frequently is "line item". Each billable item must be entered as a separate entry or "line item" on the invoice.

You can locate a copy of the invoice specifically providers delivering services under a Third Party Agreement (65D18) on our forms page.

Mandatory Fields

CMS will allow automatic processing of many invoices, provided they are completed accurately and in full; Mandatory fields are marked with an asterisk. Once CMS is in operation, invoices will be rejected if any field with an asterisk is not completed or contains inaccurate information.

The mandatory fields include:

- ❖ Invoice Date (yyyy-mm-dd)
- ❖ Authorization Number - if specified on the Third Party Agreement (65D52)
- ❖ Service location code
- ❖ Provider Postal Code
- ❖ Service Recipients First and Last name and birth date (yyyy-mm-dd)
- in most cases 'service recipient' will refer to the worker
- ❖ WorkSafeBC Claim Number

- ❖ Payee Number
- ❖ Service dates
 - service dates must fall within the service dates specified in the Third Party Agreement form (65D53)
 - the date of service on the invoice must match the date of service on the report related to the service
 - when the service is one day in length, enter the same date in both the start date and end date fields
- ❖ Fee Item Descriptions and Fee Codes
 - for services delivered by providers under the VR Third Party Agreement (65D53), the fee item descriptions and corresponding fee codes will remain the same in CMS
 - the fee item description and fee code should be confirmed in your Agreement
 - the descriptions and fee codes are listed on the Vocational Rehabilitation Services Third Party Agreement Invoice (65D53)
 - if you do not know the correct fee item description or fee code to use, please contact the Vocational Rehabilitation Consultant who authorized the service or visit the Voc Rehab Provider section on the Forms page at www.worksafefbc.com, or via email at vradmin@worksafefbc.com
- ❖ Provincial Sales Tax (PST)
 - the CMS system will require PST, where applicable, to be shown as a separate line item on the invoice
 - when there is more than one line item on the invoice that is subject to PST, the PST for each item does not need to be entered separately. The total amount of PST for the invoice can be entered as a single line item
 - Providers can determine what items are subject to PST by accessing the Provincial government's web site at:

http://www.sbr.gov.bc.ca/business/Consumer_Taxes/Provincial_Sales_Tax/faq.htm
- ❖ Number of units (number of hours, services or weeks); Cost Per Unit (maximum billable or rate per hour); Line Item Amount; Invoice Total

Proof Documents

In addition to using the information on the invoice, CMS will also look to see that certain documents are in the system, such as reports, before paying invoices. These specific documents are known as proof documents.

The date of service on the invoice must match the date of service on the proof documents. For example the date of service on a report must match the date of service on the associated invoice.

New Look to Payments and Explanation of Benefits

To enhance service, CMS will provide with each payment a statement called an Explanation of Benefits (EoB). This statement will provide details on which line items have been processed for that payment.

CMS processes each line item on an invoice separately, and each item must meet a number of tests before a payment is processed. Some line items may take longer to validate than others. As a result, payments may be made on some line items and not on others, from the same invoice. The EoB statement may also include payments for more than one worker.

Your EoB will provide details on the status of each line item, such as whether it has been paid, queued or rejected. A line item or invoice may be rejected because the fee codes do not match the payee number, or the information is incomplete, or the vocational rehabilitation consultant may not have entitled the specific item in CMS. The explanation(s) on the EoB will be in form of a code. An explanation of the payment codes will be included with the statement or in the "billing codes".

The system is designed to pay 30 days after receipt of the invoice.

Credit Memos

Providers must clearly distinguish credits from charges when invoicing. It is preferable that Providers submit credit memos separately, rather than combine credits and billings on the same invoice.

REMINDERS

Fee Schedule and Billing

As CMS will match and check information, it is important to adhere to the fee schedule applicable to your Agreement when invoicing for services or goods.

WorkSafeBC must receive all invoices within 90 days of service being provided.

Forms

VR report forms and invoices were modified in 2008 to align with CMS requirements and are currently in use by most vocational rehabilitation providers. CMS compatible forms and invoices can be identified by the black and white square barcode to the right of the WorkSafeBC logo. The most current versions of all vocational rehabilitation provider forms and invoices are located on the WorkSafeBC website at:

<http://www.worksafebc.com/forms/default.asp>

Click on the 'Forms' section and select 'Voc Rehab Providers'



Please ensure that you destroy any pre-existing versions of forms to avoid confusion.

Consolidated Fax Number

In an effort to streamline communication channels for clients, WorkSafeBC has adopted a single fax line for incoming documents: (604) 233-9777 or toll free 1 888-922-8807. The headers on the re-designed WorkSafeBC forms and invoices currently in use have the new fax numbers. Effective immediately, this fax number must be used by all vocational rehabilitation providers and suppliers who submit their reports, documents and invoices by fax.

Updating Contact Information

The information on your invoice must match the contact information in our system. Make sure that WorkSafeBC has the most current contact information on your organization. Allow WorkSafeBC 24 hours to update any revised information.

For more information, visit the Vocational Rehabilitation Services section of our web page: <http://www.worksafebc.com/claims/cms/serviceprovider.asp> or contact Vocational Rehabilitation Services at 604 276-3040 or 1-888 967-5377, extension 3040.

Thank you in advance for your cooperation and patience during the upcoming implementation of the Claims Management Solutions (CMS) system. We are available to help make the adjustment to our new system and processes as smooth as possible.

Vocational Rehabilitation Services
Worker and Employer Services Division
WorkSafeBC