



Hand Therapy Network

NETWORK NEWS – September 21, 2010

2009 and 2010 have been busy years for both WorkSafeBC and the Hand Network. The Hand Network has grown with new providers in Langley, Burnaby, White Rock, Kelowna, Port Coquitlam and a pilot program in Prince George. WorkSafeBC is also continuing to improve the payment process for providers.

1. New Hand Therapy Providers

We would like to welcome the following new providers who joined the network in 2010.

- Burke Mountain Hand Therapy Center in Port Coquitlam
- Langley Hand Therapy Center in Langley
- Burnaby Heights in Burnaby
- In Motion in White Rock
- Kelowna General Hospital and LifeMark Health in Kelowna

The WorkSafeBC Hand Therapy Network now consists of 30 providers throughout the province. To see an updated list, please visit the Health Care Providers page on the WorkSafeBC website at www.WorkSafeBC.com.

2. Process Changes

Extensions

Starting immediately, providers no longer need to contact Health Care Services for a treatment extension. Verbal approval from the Case Manager is sufficient. Providers should not bill for extensions for Treatment Program or Treatment Program including RTW that are less than 4 weeks. Partial Treatments of less than 4 visits should not be billed. You will no longer receive a referral form as confirmation of the extension. You will still need to submit a discharge report at 90 days in order to receive payment.

Referral Forms

The provider will only be faxed referral forms from Provider Referrals under the following circumstances:

- The Case Manager entitles a service after receiving notification of a direct hand referral from the hand provider. The referral will indicate if the Case Manager is requesting RTW coordination. Please ensure the “Direct Hand Referral Confirmation” is sent in a timely manner.
- Every time a Case Manager initiates a referral to the Hand Program where there has not been a direct referral.
- When the Case Manager adds RTW coordination to a Hand Treatment Program for which you have already received a referral.

Please remember that providers should only accept referrals from the physicians or the Registration Reps in Provider Referrals. Case Manager and Nurse Advisors should not refer directly to the programs.

3. Key Performance Indicators (KPIs) Feedback Summaries

With the ability of CMS to capture real time data, we are changing how we present the KPI's. Going forward we will be distributing a quarterly "Feedback Summary" that will have most of the old KPIs plus a few new ones. You will receive a detailed communication regarding the new summaries in early Fall and we anticipate the new summaries will be ready for distribution in late Fall 2010. The first summaries will cover the first two quarters of 2010.

4. Payments

Several changes have been made to the CMS system to facilitate payments. You should no longer receive \$0 payments with the rejection code 515 (maximum service units have been invoiced). We have now processed payments for invoices from 2009 that had been rejected with code 515 and are in the process of correcting rejections for 515 for 2010. Please do not resubmit invoices with this rejection code.

There are several things that you can do to make payments process successfully.

- Do not put explanatory notes on the invoices as our data entry process cannot use this information when entering the data into the system.
- Do not print the ERCS invoice before the discharge date. This will result in a 502 rejection (date of Service occurs after invoice date or invoice received date).
- Make sure that if you manually change the program end date in the demographic section of the invoice that you also change the date of service in the section where the invoiced amount is entered.
- Have clinicians or support staff include the appropriate Date of Service on the fax cover sheet for all reports. Dates of service are indicated below.
 - Date of Service for discharge report discharge date
 - Date of service for JSV report date of visit
 - Admission and progress reports date of report
- Send a generic invoice for invoicing Job Site visits that you forgot to invoice with the treatment invoice. Do not resubmit the original invoice with the Job Site Visit added. The generic invoice can be found at:
<http://www.worksafebc.com/forms/assets/WORD/83D128.doc>
- Always include the fee code and date of service for any service manually added to the ERCS invoice.
- Only resubmit invoices if the payment has been rejected for 501 (missing information) or 502 (date of service occurs after invoice date or invoice received date). Contact Payment Services for all other rejections codes or for invoices already submitted that have errors.
- Keep the same invoice number and write resubmission on any resubmitted invoices.

You can check the status of payments online at the link below. Click on the orange bar that says "Check invoice payment status" and enter the information for Option 1 "Providers who submit paper invoices by fax." You will need your payee number and invoice number. A status of "Pending" means that the invoice is in the system but is held up for verification. Do not resubmit invoices with a pending status.

http://www.worksafebc.com/health_care_providers/related_information/Check_invoice_payment_status/default.asp

Payment Services can be contacted at 604-276-3085.

5. Expectations around RTW within Hand Program

The requirements for RTW coordination are no different in the Hand Program than in any other Board Sponsored Rehab Program that includes RTW planning or monitoring. The following are some of the common requirements:

- Providers must submit a GRTW Plan with specific hours and duties.
- Weekly communication is required with the worker and the Case Manager
- Communication with the employer as necessary.
- Job site visits as needed for the purpose of: confirming job demands, exploration of simple job modifications, consultation with employer or stakeholder to develop a RTW plan, ongoing support of the GRTW, job coaching, or job shadowing.
- All job site visits need verbal approval from the Case Manager.
- The Case Manager can request a job site visit even for workers who are not in Hand Treatment including RTW stream.

6. Client Satisfaction Surveys

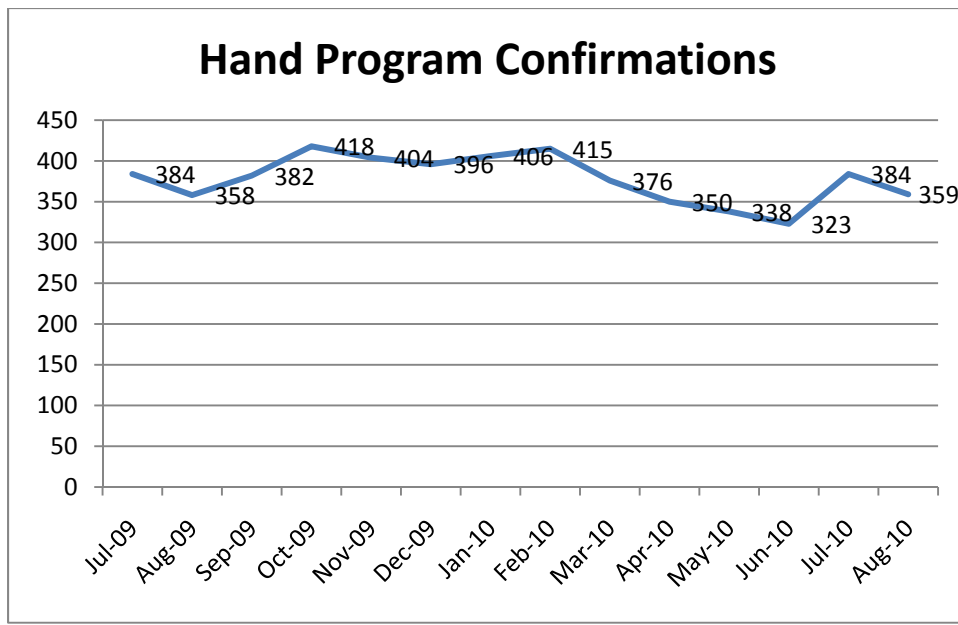
You should have received copies of the new client satisfaction answer sheets and laminated question sheet. If not, please contact Health Care Services Support at 604 232 7787

7. Worker having access to their file

The injured worker now has access to their claim file online. Please be mindful of this as there is the potential that a worker reads your telephone log with a Case Manager or reads the report before the Case Manager has a chance to read it.

8. Referral Volumes for 2010 for all services

Hand program referrals have been relatively stable over the past 14 months with an average of 378 confirmations per month across the network.



9. Bulletins online

Please note that we have posted bulletins from June 2009 onwards online at:
http://www.worksafefbc.com/health_care_providers/programs_and_services/hand_therapy/Default.asp#bulletins

It has been a pleasure working with the hand providers over the past several months. We appreciate your dedication and cooperation in treating our injured workers.

If you have any questions, please do not hesitate to call us.