

OR2 and ASTD Networks

September 28, 2009

2009 – 63

The purpose of this bulletin is to provide you with an update on issues resulting from the implementation of CMS.

First of all, we would like to acknowledge that the transition period has been difficult and continues to cause difficulties for many Providers. We appreciate your patience and your feedback regarding issues that are identified. We are working to resolve the issues as quickly as possible.

1. TIMELY REPORT FEES

The Difficulties:

With the implementation of CMS, the Provider process for invoicing for timely report fees and the WorkSafeBC payment process for these fees has changed. CMS was set up to pay these fees automatically when reports are submitted within the defined timelines. There were a number of issues with the system that resulted in timely report fees not being paid. One of these was with respect to the dates that were being used for measuring the timeliness of reports. As such a number of you did not receive the timely report fees, when in fact you should have.

One source of confusion occurred when Providers included the timely report fee on the invoice, either by writing it on manually, or generating it on the invoice. In these situations, the Remittance Statement showed that the invoiced report fee was rejected. However, as the automated uplifts were paid as designed by the system (in the situations where everything was working as planned), the actual paid amount for the service, did in fact, include the timely report fee.

The Future:

In response to provider feedback looking for improved reconciliation for timely report fees, WorkSafeBC is moving towards a model where the fee code for the specific service would include the timely report fee for the relevant report. In situations where the report is submitted outside of the required timeline, then a deduction would be applied (the value of the timely report fee). The timely report fee will be included for the **flat program** fee codes, as well as for the fee codes for **JSV's**, when the reports are submitted as required in the Agreement. For ASTD, this would include the timely report fee for the **ASTD Medical Assessment** and **Medical Follow-Up Visit**.

For example, if a worker participates in the OR2 program, but the discharge report is submitted more than three (3) business days from the discharge date, then the Provider will invoice fee code 1100167 (OR2 Flat Fee). On the Remittance Statement the Provider would see a payment of \$4,400, resulting from a deduction of \$150.00 from the invoiced amount of \$4,550.

For another worker, the report is submitted within the required timelines, so for that worker, the Provider would invoice the same fee code, 1100167 (OR2 Flat Fee \$4,550, which includes the timely report fee) and would see the full payment of \$4,550 on the Remittance Statement.

The timeline for implementation of this change will be:

- **ASTD Services – October 1, 2009**, as reflected in the Contract Amendment (Amendment packages should be received in the mail this week)
- **OR2 Services – November 1, 2009** (pending completion of ERCS upgrades)

Exceptions:

Effective immediately, a fee code for the timely report fee may be invoiced to WorkSafeBC in the following circumstances:

i. Daily Rates:

For both OR2 and ASTD Services, in situations where the Provider is invoicing the daily rate, the applicable “Daily Rate – Discharge Report” fee code from below may be invoiced. In these situations the Provider will invoice the applicable code, **only** when the discharge report is submitted within the required timelines as per the Agreement.

OR2 – Daily Rate – Discharge Report	1102033
ASTD – Daily Rate/RTW Monitoring – Discharge Report	1102034

ii. ASTD Workplace Based Services:

The October 1, 2009, amendment to the current ASTD Agreement includes a “Daily Rate/RTW Monitoring – Discharge Report” fee code (1102034). The Workplace Based Services fees do not include the timely report fee, so this fee code is payable for workers who participate in ASTD RTW Planning and Monitoring **AND** whose discharge report is submitted within three (3) business days of discharge.

What do I do about outstanding timely report fees?

For those of you who have outstanding report fees, Health Care Services is in the process of determining the simplest way to address this issue. Please do not re-invoice for these amounts. We will communicate more about how the outstanding fees will be addressed as soon as possible.

2. THE GOOD NEWS

Providers have done an excellent job of using the most up to date forms, which is one key factor in facilitating the payment process. Thank you!

Forms are available on www.worksafebc.com under “forms” / “health care providers”.

3. REMINDERS

When invoicing, please ensure:

- You use the correct date format (yyyy/mm/dd) on all invoices and forms;
- The **Discharge Date** on the **Discharge Invoice** MUST match the **Date of Service** on the Board Sponsored Rehabilitation Services (BSRS) **Fax Cover Sheet (83D12)**;
- You check off the correct Report **Index Code** at the bottom of the BSRS Fax Cover Sheet (e.g. Discharge Report = **BSRDR**; Job Site Visit Report = **BSRJSVR**) when submitting a report;
- You do not fax the Discharge Invoice and the Discharge Report in the same transmission. Invoices often get scanned as part of a lengthy report;
- You do not put invoices under or with the BSRS Fax Cover Sheet. Invoices do not need a fax cover sheet;
- You use the correct fee code for the service you are billing for, particularly in cases where the service provided changed from what was initially referred. In these cases, it would be helpful to remind the Claim Owner to entitle the applicable service(s)/fee code(s).

Please contact us, if you have questions/concerns or additional issues not listed above.