

U.S. Department of Labor

Employment Standards Administration
Office of Workers' Compensation Programs
Division of Federal Employees' Compensation
Washington, D.C. 20210



File Number:

Dear Medical Provider:

Our records show that you are a medical services provider who has treated injured federal employees. I first want to thank you for your participation in the federal workers' compensation program.

As you are probably aware, beginning in September of this year, we teamed up with a private sector contractor, ACS, to operate our medical bill payment and medical treatment authorization processes. The new system was designed to allow the contractor to approve services and payments based on established treatment guidelines and our staff's decisions regarding covered conditions. In turn, we anticipated being able to dedicate more time on the part of our staff to entitlement issues and return to work efforts.

Although OWCP and our contractor worked hard to make the transition to the new system as smooth as possible, we have encountered a far greater range and volume of start-up problems than we ever anticipated. We have received many complaints about the new system, and we are fully aware that our service has not met your or our expectations during its initial months of operation. I sincerely apologize for the disruption this change has caused to your operations.

We are diligently working with the contractor to correct the many problems providers and injured workers have encountered. A major short-coming has been the difficulty in getting through to ACS by telephone. Initially, the toll-free line did not distinguish between types of calls and the overall volume of calls meant that everyone – even providers seeking authorization for necessary treatment – experienced hold times far beyond the acceptable range. Callers can now specify whether they are calling for treatment authorization or billing inquiries. Call hold times are electronically tracked and have been reduced to an average of about one minute for medical authorizations. Hold times for billing inquiries, although reduced, are a continuing problem. Our contractor has more customer service representatives completing training at this time, and they soon will be manning additional phone lines for quicker access. Our goal is to drive average hold times below one minute for all inquiries.

We are doing everything we can to speed and improve our telephone service. The phones are in service from 8:00 a.m. to 8:00 p.m. EST and your best time to call for minimal delay is early in the day. Our toll free line is (866)335-8319, or requests for medical authorization can be faxed to (800)215-4901. (Please be sure to include a diagnosis, CPT treatment code, case number, physician's and claimant's name on any faxed request.)

We are also revisiting our processes so that appropriate treatment for a work-related injury can be authorized much more rapidly and smoothly. If you are seeking


authorization for treatment which falls outside the established guidelines, ACS will contact our staff and initiate the authorization process. Tight time frames are in place to ensure prompt action both by ACS and our own staff. In addition, we are making system changes to ensure that when we authorize a procedure in this way, the consequent bill will be accepted by the system without further intervention.

Using the ACS/FECA website at <http://owcp.dol.acs-inc.com>, enrolled providers can check the status of medical bills and verify whether treatment can be authorized. To check treatment authorization, you will need the ICD.9 code for the condition being treated and the CPT code for the requested service. The web site is currently being redesigned to simplify its use.

It is important that providers who are not yet enrolled in our system do so. Enrollment is necessary to ensure that we have accurate information to process your payments. This will also give you the opportunity to bill and receive payment electronically. Enrollment can be accomplished quickly; you may contact ACS on its dedicated enrollment line at (866)335-8319. Although we had originally planned to allow unenrolled providers to continue billing only through December 31, 2003, we are now extending the grace period through March 31, 2004. After that date, all bills submitted by unenrolled providers will be returned with instructions on how to enroll.

Through these changes, and many other improvements already put in place, we will achieve a more accessible, more transparent, and more responsive system. Within a few weeks, our service to you will be better than we were able to deliver prior to the change in September. In the interim, we need your continued patience while we make these significant enhancements. We truly appreciate your cooperation in our efforts to improve this system, and the critical work you do in providing treatment to injured federal employees.

Sincerely,



Edward G. Duncan
Deputy Director
Federal Employees' Compensation