

Workers' Compensation Automation and Integration System (WCAIS)



Tips to Avoid a Returned Medical Fee Review Application



Tips to Avoid a Returned Medical Fee Review Application

14 Day File Preservation

§ 121.3. Filing of forms.

(b) The bureau may return forms that are not properly completed or filed. If a form is returned, the bureau will notify the submitting party as to the reason the form was returned. For a form returned for the first time, the bureau will preserve the filing date if the submitting party files a corrected version of the form within 14 days of the written notice of the return of the form.

Return Reason:

The Bureau of Workers' Compensation is returning your Medical Fee Review Application. In accordance with 34 Pa. Code § 121.3(b), for a form returned for the first time, the bureau will preserve the filing date if the submitting party files a corrected version of the form within 14 calendar days of the written notice of the return of the form. Any changes to the original Medical Fee Application for corrected resubmission require an updated Proof of Service. This letter must be included with the corrected resubmission in order for the file date to be preserved. Resubmission applications received after the 14-day file preservation period has elapsed or submitted to the bureau without this letter will be treated as new original applications.

Premature Filing

§ 127.255. Premature applications for fee review.

The bureau will return applications for fee review prematurely filed by providers when one of the following exists:

- 1) The insurer denies liability for the alleged work injury.
- 2) The insurer has filed a request for utilization review of the treatment under Subchapter C (relating to medical treatment review).
- 3) The 30-day period allowed for payment has not yet elapsed, as computed under § 127.208 (relating to time for payment of medical bills).

Return Reason:

- 1) Issue of liability/compensability
- 2) In accordance with 34 Pa. Code § 127.255(3), the bureau will return applications for fee review prematurely filed by providers when the 30-day period allowed for payment has not yet elapsed.
- 3) Outstanding request for utilization review

14 Day File Preservation: No

Documentation for Other Individuals Included

Including documentation for individuals other than those listed on the Medical Fee Review Application or in WCAIS is a HIPAA violation.

Return Reason:

This Fee Review Application contains documentation for patients other than those listed on the Fee Review Application or in WCAIS.

14 Day File Preservation: Yes

CMS-1500/UB-04 Missing or Incomplete

§ 127.253.

Application for fee review—documents required generally.

(a) Providers reimbursed under the Medicare Part B Program shall submit the following documents with their application for fee review:

(1) The applicable Medicare billing form.

Return Reason:

CMS-1500 missing or incomplete.

OR

UB-04 missing or incomplete.

14 Day File Preservation: Yes

No Supporting Documentation

§ 127.253.

Application for fee review—documents required generally.

- 1) Providers reimbursed under the Medicare Part B Program shall submit the following documents with their application for fee review:
 - a) The required medical report form, office notes, and documentation supporting the procedures performed or services rendered.

Return Reason:

No supporting documentation, medical records, or prescription was submitted with the application.

14 Day File Preservation: Yes

Supporting Documentation

§ 127.253.

Application for fee review—documents required generally.

- 1) Providers reimbursed under the Medicare Part B Program shall submit the following documents with their application for fee review:
 - a) The required medical report form, office notes, and documentation supporting the procedures performed or services rendered.

Reason Code:

A02 - Documentation does not support and/or is not provided for the billed service(s), per Section 127.253(a)(2).

Out of State/Federal Claims

We cannot review Medical Fee Review Applications on out-of-state or federal claims. The only Medical Fee Review Applications we can review are those subject to the Pennsylvania Workers' Compensation Act.

Return Reason:

Services rendered are not subject to the Pennsylvania Workers' Compensation Act.

14 Day File Preservation: No

National Provider Identifier (NPI)

Each Keystone ID has NPI#s associated with it. If the NPI# in Box 56 of the UB-04 does not match what is in WCAIS, it may be due to how you have logged in. If you select the wrong NPI# in WCAIS, we cannot complete the review of your application.

Return Reason:

The registered provider's NPI# in WCAIS does not match the NPI# listed on the UB-04 form. Please log in to WCAIS to file the fee review under the correct Keystone ID.

14 Day File Preservation: Yes

Filing Medical Fee Review Applications Online in WCAIS

Virtual One-on-One Personal Training

The Healthcare Services Review Division is pleased to announce that we offer virtual one-on-one personal training for healthcare professionals, healthcare providers, and their attorneys or billers. We also provide virtual training for filing medical fee reviews online in WCAIS. In this training, you will be provided with step-by-step instructions on the following:

- How to file a new application for fee review
- How to resume a draft application for fee review that has already been started
- Completing all sections of the fee review
- What happens after the fee review has been submitted

If interested, please contact us at RA-LI-BWC-HCSRD@pa.gov.

We look forward to hearing from you!

Contact Us...

Bureau of Workers' Compensation (BWC)

Information Services Helpline:

Toll-Free inside PA: 800-482-2383

Local outside PA: 717-772-4447

Email: ra-li-bwc-helpline@pa.gov

Workers' Compensation Office of Adjudication (WCOA)

Phone: 844-237-6316

Email: wcoaresourcecenter@pa.gov

Workers' Compensation Appeal Board (WCAB)

Phone: 717-783-7838

Email: ra-li-wcab@pa.gov