

# **\*IMPORTANT\***

## **OWCP Billing Information for Providers**

### **Please note:**

- The person you are treating has filed a **FEDERAL WORKERS' COMPENSATION CLAIM** for their injury.
- **Dept of Labor uses a 3<sup>rd</sup> party billing company called CNSI to process/pay OWCP claims.**
- Bills can be submitted electronically or by paper to DOL/CNSI. Please see the information below on bill submission.
- Prior authorization from CNSI is required for certain procedures and services (for example: anything that breaks the skin, MRIs, physical therapy, tests, and surgery).
- The treating physician must be a "doctor" as defined by Dept of Labor (not a PA, PA-C, or RN).
- The Agency Offers Light Duty

### **Providers must be enrolled with CNSI to submit billing claims:**

#### **Provider Enrollment Address:**

CNSI- Enrollment Unit Dept. of Labor  
P.O. Box 34690  
San Antonio, TX 78265-4690

#### **Provider Enrollment Fax #:**

(888) 444-5335

### **Submit medical bills and medical documentation/correspondence via:**

#### **Address:**

U.S. Dept. of Labor OWCP-DFEC  
PO Box 34450  
San Antonio, TX 78265-4090

### **Prior authorization can be requested from CNSI via:**

#### **Fax #:**

(800) 215-4901

#### **CNSI Website:**

<https://owcpmed.dol.gov>

### **Additional Contact Info:**

#### **CNSI Phone #:**

(844) 493-1966 or Toll Free at (866) 335-8319

#### **CNSI Prescription Benefits and Processing Questions:**

(866) 664-5581

#### **CNSI Web Portal Administration/System Issues:**

Health Care Solutions Operations Center  
(800) 461-7485 or (850) 558-1775

#### **Dept of Labor Office—Cleveland (Claims Examiner):**

(216) 902-5600

### **Provider checklist for submitting a claim:**

- ✓ Provider is enrolled with CNSI and has their provider number.
- ✓ Include both the FECA 9-digit claim # and their CNSI Provider # on the medical bill and documentation.
- ✓ Submit the bill using the appropriate accepted condition/ICD-9 code(s) if available.
- ✓ Submit all medical documentation to Dept of Labor (DOL).
- ✓ Request prior authorization from CNSI for the necessary services, preferably beforehand.

### **Ohio National Guard Federal Workers' Comp POC information:**

#### **ICPA: Mrs. Tara Bennett**

**Phone#:** (614) 336-6000 ext. 7389

**Fax#:** (614) 336-7052

**Email:** [tara.l.bennett6.civ@mail.mil](mailto:tara.l.bennett6.civ@mail.mil)

#### **ICPA: Mrs. Brittany Melton**

**Phone#:** (614) 336-6000 ext. 7438

**Fax#:** (614) 336-7052

**Email:** [brittany.c.melton2.civ@mail.mil](mailto:brittany.c.melton2.civ@mail.mil)