



TITLE

REGISTRATION, INVOICING, AND INQUIRIES FOR WORKERS' COMPENSATION BOARD INCIDENTS

SCOPE

Provincial

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NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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OBJECTIVE

- To provide guidance and direction around the processes for registration, invoice generation and investigations of Workers' Compensation Board (WCB) insured incidents.

PRINCIPLES

Alberta Health Services (AHS) is committed to promoting sound financial stewardship through effective invoicing controls and monitoring processes. AHS has established and maintains consistent and transparent processes for invoicing third party insurers.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, Students, Volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

ELEMENTS

1. Background

- 1.1 AHS provides health care services to **patients** who have been injured at work and shall recover costs relating to the treatment of a work-related injury from WCB.
- 1.2 WCB routinely requires information from AHS related to health care services provided to patients injured on the job, including, but not limited to, the **health record** of a patient and/or supporting clinical documentation to reimburse costs or to validate an invoice.

- 1.3 Authority to disclose copies of **health information** to WCB in Alberta is authorized by the *Workers' Compensation Act*. Authority to disclose health information to WCB in other provinces in Canada is covered under the *Hospitals Act*.
- 1.4 All disclosures of health information to WCB shall be processed in compliance with the *Health Information Act* (HIA) by the department releasing the information to WCB.
- 1.5 Effective management of WCB insured incidents, including registration, invoice generation, and management of WCB inquiries increases AHS' ability to recover costs associated with medical treatment for patients injured at work.

2. Roles & Responsibilities

- 2.1 Staff performing registration activities shall be responsible for ensuring:
 - a) insurer information is accurate by asking the patient if their injury is work related;
 - b) patients receiving treatment for work related injuries are registered as WCB insured;
 - c) information captured at the point of registration is accurate, complete and contains the minimum required information, as indicated in Section 4.2 of this policy, to generate an invoice; and
 - d) errors in registration information are resolved and missing information is obtained, if required, in accordance with Section 4.3 of this policy.
- 2.2 Finance (Billing, Cash and Collections) shall be responsible for:
 - a) reviewing registration information to ensure information is complete and liaising with staff performing registration activities to correct errors or to obtain missing information, where required, in accordance with Section 4.3 of this policy;
 - b) ensuring charges in WCB invoices are accurate;
 - c) ensuring invoices are generated, and contain the minimum information required by WCB to process the invoice;
 - d) submitting invoices to WCB which do not require additional **supporting clinical documentation**, or to the applicable **health record holder or designate**, where additional supporting clinical documentation is required;
 - e) performing reconciliations and required follow up in accordance with Section 7.2 of this policy;

- f) resolving and/or responding to WCB inquiries in accordance with Section 8 of this policy;
- g) preparing reports on invoice processing and escalating to management, where required, in accordance with Section 9 of this policy;
- h) recording payments received from WCB or updating financial responsibility, where required; and
- i) investigating outstanding WCB invoices.

2.3 Health record holders (or designate) shall be responsible for:

- a) collecting all relevant supporting clinical documentation required to support WCB invoices;
- b) ensuring the supporting documentation collected is complete, accurate, and in accordance with WCB requirements;
- c) contacting Registration, Finance (Billing, Cash and Collections), or the author of the supporting documentation, where there is a discrepancy between the invoice and the supporting clinical documentation so the appropriate system can be updated and invoice reprinted, if required;
- d) advising Finance (Billing, Cash and Collections) when an invoice is considered non-recoverable or is not WCB related;
- e) tracking the disclosures of supporting clinical documentation to WCB as required by the *Health Information Act and Workers' Compensation Act*;
- f) submitting invoices to WCB where supporting clinical documentation is required;
- g) notifying Finance (Billing, Cash and Collections) when an invoice and supporting clinical documentation has been submitted to WCB;
- h) resolving and/or responding to WCB inquiries in accordance with Section 8 of this policy; and
- i) appointing a **key contact** for processing WCB related inquiries and invoices in accordance with Section 8 of this policy.

2.4 **Health care professionals** shall be responsible for:

- a) understanding and complying with applicable WCB regulations and requirements;
- b) preparing WCB medical reports for AHS in accordance with WCB requirements; and

- c) preparing and maintaining sufficient health records to support WCB invoices in a timely manner.

3. Segregation of Duties

- 3.1 Segregation of duties shall be maintained between the functions of registering, generating invoices, receiving and recording payments, and accounting for WCB invoices.

4. Registration Activities

- 4.1 All patients receiving medical treatment for a work related injury shall be identified and registered as WCB insured. Where WCB does not recognize the validity of the patient's work related injury and does not reimburse an invoice, the patient or appropriate insurer shall be held accountable.
- 4.2 Information captured at registration shall contain enough detail to generate an invoice. The following information, at a minimum, shall be captured or verified in the applicable registration system(s) at the time of registration or check-in:
 - a) WCB claim number, if applicable, or indication that it is a new claim;
 - b) worker/patient name, date of birth, address, telephone number and personal health number (PHN) and Unique Life time Identifier (ULI);
 - c) worker/patient position/job title at place of employment;
 - d) employer's name and address;
 - e) body part injured;
 - f) injury type; and
 - g) date of accident.
- 4.3 Where errors or incomplete information have been identified in the registration system, processes shall be developed by Registration in conjunction with the health record holder (or designate) to ensure:
 - a) errors are resolved and/or missing information is obtained;
 - b) the patient record and/or the insurer information is updated in the applicable registration system to reflect the resolution within five (5) business days of identifying the error;
 - c) Finance (Billing, Cash and Collections) shall be notified by the health record holder (or designate), where required, when any changes or updates are made to the registration system.

5. WCB Invoice Generation

- 5.1 Once all registration information is believed to be complete and accurate in accordance with Section 4 of this policy, invoices shall be generated by Finance (Billing, Cash and Collections) within 10 business days. The invoices are to be provided to the health record holder (or designate) within three (3) business days after generating the invoices, in accordance with the *AHS Invoices for Work Related Injury Visits Billed to Workers' Compensation Board Procedure*.
- 5.2 All invoices generated for WCB shall include the minimum relevant, complete and accurate supporting clinical documentation required for processing.
- 5.3 Health record holders (or designate) shall advise Finance (Billing, Cash and Collections), on a monthly basis, circumstances where supporting clinical documentation for a WCB incident has been identified but an invoice was not generated for the incident. Finance (Billing, Cash and Collections) shall investigate further and issue an invoice, if required.

6. Submission of Invoices to WCB

- 6.1 WCB invoices and supporting clinical documentation, where required, shall be submitted to WCB within 20 calendar days from the print date of the invoice. In situations where this deadline cannot be met, the health record holder (or designate) shall communicate the circumstances to Finance (Billing, Cash and Collections). Finance (Billing, Cash and Collections) shall notify WCB, if required, based on invoice recovery deadlines.
- 6.2 Invoices submitted to WCB shall be reconciled on a monthly basis. Appropriate investigation must be conducted with the department responsible for submitting the invoice to WCB in instances where invoices have not been submitted to WCB within the timelines outlined in this policy.

7. Additional Information Requested by WCB

- 7.1 WCB may from time to time, request additional information related to invoices submitted by AHS. Additional information requests include, but are not limited to **medical aid inquiries**.
- 7.2 Additional information requests from WCB for inquiries shall be:
 - a) reviewed and provided to the appropriate department for resolution within two (2) business days of receiving the inquiry;
 - b) responded to and completed in a timely manner, within 20 days from the date the inquiry was received by AHS; and
 - c) tracked and monitored to ensure that appropriate action is taken in a timely manner in accordance with Section 9.3 of this policy.

- 7.3 In cases where a request for additional information for a patient is received from WCB and the patient is not registered as WCB insured in AHS financial systems, appropriate investigation shall be conducted and invoicing records updated as required.
- 7.4 All health information disclosed to WCB in response to WCB inquiries shall be tracked, as per Section 42 of the *Health Information Act*, by the department responsible for releasing the information to WCB.

8. Non-Recoverable WCB Invoices

- 8.1 Where supporting clinical documentation does not meet WCB minimum requirements and all reasonable efforts have been made to obtain adequate documentation, the invoice shall be considered non-recoverable through WCB; the invoice should be referred to AHS Collections to be written off to bad debt. This decision shall be authorized, at a minimum, by a department Supervisor of the health record holder (or designate).
- 8.2 When invoices are denied by WCB as being non-recoverable due to not being relevant to a work related injury the financial responsibility shall be updated to the appropriate insurer and invoices shall be issued as required.

9. Monitoring and Reporting

- 9.1 Reports on invoice processing results shall be prepared by Finance quarterly and shall include:
- a) the number of WCB-approved invoices;
 - b) invoice-related inquiries;
 - c) rejected invoices as compared to the total number of invoice submissions made;
 - d) invoices submitted with missing, incorrect, or incomplete information; and
 - e) invoices considered non-recoverable due to inadequate supporting clinical documentation.
- 9.2 Where reoccurring issues on invoice processing are identified, reporting shall be escalated to management in the appropriate department in the following order:
- a) department Supervisor for the first instance;
 - b) department Manager for the second instance; and
 - c) Site/Program Director for all instances thereafter.

- 9.3 A reconciliation of claim related inquiries received from WCB and responded to by AHS shall be conducted on a monthly basis to ensure all WCB inquiries are responded to in a timely manner.

10. Supporting Documentation

- 10.1 Original supporting documentation shall be retained as part of the originating department's records and shall be made available for audit and examination purposes, if required.
- 10.2 All records related to WCB invoices shall be retained in accordance with AHS *Records Management Policy*.

DEFINITIONS

Health care professional means an individual who is a member of a regulated health discipline, as defined by the *Health Disciplines Act* (Alberta) or the *Health Professions Act* (Alberta), and who practises within scope and role.

Health information means information that identifies an individual and is stored in any format that relates to:

- a) diagnosis, treatment and care; and
- b) registration (e.g., demographics, residency, health services eligibility, or billing) (*Health Information Act* [Alberta]).

Health record means the Alberta Health Services legal record of the patient's diagnostic, treatment and care information.

Health record holder or designate means, for the purposes of this policy, the department, clinic, or office responsible for holding and the management of the patient's health records such as a Physician's office, AHS clinic or Health Information Management department.

Key contact means, for the purposes of this policy, an individual who is appointed by the health record holder (or designate) to represent the program area, department, clinic, or group of physicians who manages health records.

Medical aid inquires means, for the purposes of this policy, WCB inquiries related to invoices from AHS for treatment for work related injuries.

Patient means an adult or child who receives or has requested health care or services from AHS and its health care providers or individuals authorized to act on behalf of AHS. This term is inclusive of residents, clients and outpatients.

Supporting clinical documentation means, for the purposes of this policy, medical reports that relate to the health service provided and match the date of visit, body part and injury type as indicated in the Finance invoice.

REFERENCES

- Alberta Health Services Governance Documents:
 - *Records Management Policy* (#1133)
 - *Invoices for Work Related Injury Visits Billed to Workers' Compensation Board Procedure* (1171-01)
- Non-Alberta Health Services Documents:
 - *Health Information Act* (Alberta)
 - *Hospitals Act* (Alberta)
 - *Workers' Compensation Act* (Alberta)

VERSION HISTORY

Date	Action Taken