



**Bureau of Workers'
Compensation**

MEDICAL BILLING EFFICIENCIES: IMPLEMENTING DATE SPAN BILLING

What providers need to know

YVETTE CHRISTOPHER, MHA, CMPE

Medical and Health Division

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What Providers Need to Know

MEDICAL BILLING EFFICIENCIES: IMPLEMENTING DATE SPAN BILLING



**Bureau of Workers'
Compensation**

LEARNING OBJECTIVES

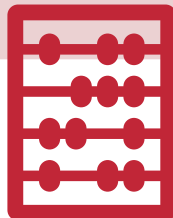
- Provide insight into BWC date span bill enhancement project
- Recognize the BWC Local Level Codes eligible for billing date spans on the CMS 1500
- Understand the consistent billing approach accepted by all MCOs
- Understand the implementation timeline when providers can begin to bill date spans.



MEDICAL BILLING EFFICIENCIES: IMPLEMENTING DATE SPAN BILLING

Align industry

Move toward further alignment to industry standard EDI and bill processing functionality.



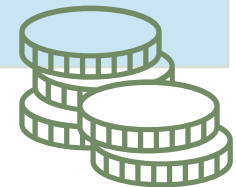
Efficiencies

Facilitate billing efficiencies.



Reduce Risk

Improve systematic edits to prevent inappropriate payments and reduce Agency risk.





PROFESSIONAL PROVIDER DATE SPANS

Date span is a range of dates billed at the line level. Represents dates of service that have a different “from” and “to” date

Example –
Date of service from
5/19 to 5/25

Date Span Industry Alignment

- Field 24a on the CMS-1500

I. _____		J. _____		K. _____					
24. A.	DATE(S) OF SERVICE					B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICE	
	From	To			(Explain Unusual Circumstances)			CPT/HCPCS	
MM	DD	YY	MM	DD	YY				
1									
2									
3									
4									
5									

Date Span Industry Alignment

- Billing and Reimbursement Manual, ***General Billing Guidelines Policy***
 4. **Specific BWC Billing Requirements for the CMS-1500 Form Submission:**
 - a. Line-Item Number 24A (Date(s) of Service) – The provider should enter the beginning date of service in month, day, and year format.
 - i. BWC will not accept any medical bill that contains more than one (1) date of service per line item;
 - ii. Except when submitted by a hospice or nursing home provider on a **hard copy** billing form for **consecutive** days.
 - a) The units of service in these instances shall reflect the total number of **consecutive** days represented in the date span.
 - b) If there is a break in service, where the service is not provided daily, the hospice or nursing home provider must bill using separate lines for each date of service or consecutive span.
 - iii. Except as noted in IV.D. 4. line items that contain a different “From” and “To” date will be denied with the following: *“EOB 269 – Payment is denied as BWC allows only one date of service per line item.”*

Date Span Industry Alignment

Ohio Bureau of Workers' Compensation

Segment: **DTP** Date - Service Date
Position: 4550
Loop: 2400 Optional (Must Use)
Level: Detail
Usage: Optional (Must Use)
Max Use: 1
Purpose: To specify any or all of a date, a time, or a time period
Syntax Notes:

837-P

Current specifications

p.87

			IMPLEMENTATION NAME: Date Time Qualifier	
		472	Service	
>>	DTP02	1250	Date Time Period Format Qualifier	M 1 ID 2/3
			Code indicating the date format, time format, or date and time format	
			RD8 is required only when the "To and From" dates are different. However, at the discretion of the submitter, RD8 can also be used when the "To and From" dates are the same.	
		D8	Date Expressed in Format CCYYMMDD	
		RD8	Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD	
>>	DTP03	1251	Date Time Period	M 1 AN 1/35
			Expression of a date, a time, or range of dates, times or dates and times	
			IMPLEMENTATION NAME: Service Date	
			<i>Line Item</i>	



MEDICAL BILLING EFFICIENCIES: IMPLEMENTING DATE SPAN BILLING

- **Provider Efficiency Benefits:**
 - Reduces paperwork and administration
 - Streamlines billing for eligible providers and codes
 - Providers can bill using varying billing cycles to fit billing process
 - Improves identification of billing overlaps to prevent provider recoveries
 - Will identify when dates within the date span overlap with another submitted bill

DATE SPAN ELIGIBLE BILLING CODES AND BILLING EXPECTATIONS

MEDICAL BILLING EFFICIENCIES: IMPLEMENTING DATE SPAN BILLING

BWC Local Level Codes Eligible for Date Span Billing on CMS 1500

Code	Description
W0171, W0200, W0201, W0202, W0203 and W0204	Skilled nursing facility (SNF)
W0177, W0178, W0179, W0181, W0182 and W0185	Traumatic brain injury facility (TBI)
Z0180	Assisted Living
Z0500, Z0550 and Z0560	Hospice
W5655 and W5660	Adult day care

MEDICAL BILLING EFFICIENCIES: IMPLEMENTING DATE SPAN BILLING

- BWC will publish date span eligible indicator in local level code descriptions on professional provider fee schedule.

W5655		Adult day care (full day 8-10 hrs) level 1: behavioral supervision, including transportation to and from, all-inclusive per diem, only authorized in lieu of home health services. <i>(date span eligible code)</i>	BR	75.00	75.00
W5660		Adult day care (full day 8-10 hrs) level 2: skilled medical needs, including transportation to and from, all-inclusive per diem, only authorized in lieu of home health services. <i>(date span eligible code)</i>	BR	115.00	115.00
		Genium all inclusive prosthetic device includes I 5828			

DATE SPAN BILLING GUIDELINES

- Only eligible services can be billed using a date span
 - Services not eligible for a date span, will be denied with **EOB 269: Payment is denied as BWC allows only one date of service per line item**
 - *Billed an eligible date span service, but for the date of service, the code was not eligible for date span billing; or*
 - *The service code is not eligible for date span billing.*

BWC BILLING REQUIREMENTS FOR DATE SPANS

- Single dates of service are permitted for each date of service where the injured worker received treatment.
- If the “from” and “to” date are the same, leave the “to” date blank or re-enter the “from” date.

	I. []			J. []			K. []			L. []			H. EPST Rate Per		
	24. A. DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)			E. DIAGNOSIS POINTER		F. \$ CHARGES	G. DAYS OR UNITS
	From	To		From	To				CPT/HCPCS	MODIFIER					
MM	DD	YY	MM	DD	YY										
1	01	06	24	01	06	24							1		
2															
3															
4															

BWC BILLING REQUIREMENTS FOR DATE SPANS

- As of April 1, 2024, providers will no longer be able to bill one single date of service for these codes, with more than 1 unit of service. (Example, Jan 1 with 31 units) (Deny with EOB 094)

I. L	J. L					K. L	L. L	24. A. DATE(S) OF SERVICE		B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS MODIFIER	E. DIAGNOSIS POINTER	F. \$ CHARGES	G. DAYS OR UNITS	H. EPST/Fam Plan
	From		To													
	MM	DD	YY	MM	DD			YY								
1	01	01	24	01	01	24								1		
2																
3																
4																



BWC BILLING REQUIREMENTS FOR DATE SPANS

- Date span billing is allowed only for services on consecutive days where the injured worker received services.
 - The number of days in CMS1500 field 24A must correspond to the number of units in 24G for each billed line.
 - If not, the line denies with **EOB 094 - Unable to process as the date span and units do not match.**

I. L	J. L						B. PLACE OF SERVICE	C. EMG	K. L		L. L	E. DIAGNOSIS POINTER	F. \$ CHARGES	G. DAYS OR UNITS	H. EPSE Fami Plan
	24. A. DATE(S) OF SERVICE								D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)						
	From	To							CPT/HCPCS	MODIFIER					
MM	DD	YY	MM	DD	YY										
1	01	02	24	01	06	24								5	
2	01	08	24	01	08	24								1	
3															
4															



DATE SPAN BILLING EXAMPLES

Consecutive Date Example: Code: W0182 TBI daily rate

- From date: May 1
- To date: May 5
- Units of Service = 5
- Daily reimbursement approved \$500

Correct example: 5 units = 5 days in span

Non-Consecutive Date Example: Code: W0182 TBI daily rate

- From date: May 1
- To date: May 10
- Units of Service = 5
- Daily reimbursement approved \$500

This example is incorrect and would be denied EOB094

DATE SPAN BILLING EXAMPLES

- **If there is a break in service (i.e., hospitalization or LOA) then bill using separate lines for each date span.**
 - Line 1: May 1-May 5: 5 units (end of first span)
 - May 6-10: not in facility (LOA not eligible for date span billing)
 - Line 2: May 11: return to facility (start of next billed span)

24. A.	DATE(S) OF SERVICE					B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)		E. DIAGNOSIS POINTER	F. \$ CHARGES	G. DAYS OR UNITS	H. EPSE Fam Plan
	From	To						CPT/HCPCS	MODIFIER				
	MM	DD	YY	MM	DD	YY							
1	05	01	24	05	05	24						5	
2	05	11	24	05	15	24						5	
3													
4													



BWC BILLING REQUIREMENTS FOR DATE SPANS

- Codes are not eligible for billing a date span when:
 - Not identified in the fee schedule as date span eligible for that period of time.
 - Residential stay and break (i.e., LOA or hospitalization).
 - Level of service changes/code changes (i.e., W0200 and W0203).
 - The span overlaps fee schedule rate years.
 - The rate changes*.

BWC BILLING REQUIREMENTS FOR DATE SPANS

- The rate must be the same for the span of the billed range.
 - Date spans cannot cross rate years due to potential for different daily rates. New rate year begins Jan. 1 (Deny with EOB 093)
 - Negotiated rate changes can't be billed in a date span without a BWC prior authorization number.

BWC BILLING REQUIREMENTS FOR DATE SPANS

- Billing statute of limitations (bill timeliness) is based on the “From” date

FROM DATE: April 5, 2024

TO DATE: April 10, 2024

Bill receipt date: April 8, 2025 *SPAN WILL HIT BILL TIMELINESS*

BWC BILLING REQUIREMENTS FOR DATE SPANS

After April 1, 2024:

- * Bill a date span with units matching the span; or
- * Bill each date on individual lines
- * For dates of service on or after January 1, 2024.

SUMMARY:

BWC Billing Requirements for Date Spans

- Eligible codes identified on PPFS.
- General Billing Guidelines policy in the BRM will include requirements.
- Consecutive date billing required and breaks in service = new span.
- Changes to rates or end of rate year = new span.
- Single dates are still permitted.
- Will apply to any date of service on or after 1/1/2024.
- Please note: providers cannot bill date spans for dates of service prior to 2024. (Deny with EOB 269)

QUESTIONS?

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THANK YOU

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