



John C. Rohde  
Executive Director/Chair

Office of  
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Maine Workers'  
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### *Medical Fee Schedule Training*

The Workers' Compensation Board offers Medical Fee Schedule training for health care providers as well as claims/medical bill review professionals. **The next classes are scheduled for August 1 (claims/medical bill review professionals) and August 2, 2019 (providers) at the SafetyWorks! training facility at the Department of Labor, 45 Commerce Drive, Augusta.** Contact Dolores to reserve a seat for this training.

### *Initial Diagnostic Medical Report (Form M-1)*

- Health care providers **must use the prescribed form** set forth in Appendix I of Chapter 5 of the Board's Rules effective 9/1/18. The use of a form other than the one set forth in Appendix I is prohibited and may subject the health care provider to penalty under 39-A M.R.S.A. § 360.
- The **form must be filled out completely**. Best practice is for registration staff to complete the M-1 header information. The healthcare provider who conducted the examination must complete the remainder of the form. Clinical support staff should verify the form has been completed by the provider. If the form is incomplete, it should be returned to the healthcare provider as soon as possible for completion.
- Health care providers may charge for completing an initial diagnostic medical report. The charge is to be identified by billing CPT<sup>®</sup> Code 99080. The maximum fee for completing an initial M-1 form is \$30.00.
- **Within 5 business days** from the completion of the initial medical examination, the health care provider **must forward the completed form to the employer** and the employee. Best practice is for support staff to contact the employer and after confirming the patient's employment relationship, fax the form to the employer. **It is not sufficient to send a copy of the form with the employee to give to his/her employer.** The Board may assess penalties up to \$500 per violation on health care providers who fail to comply with the 5-day requirement.
- The initial M-1 **form should be part of the health care records** required to accompany the bill for services submitted to the workers' compensation claim administrator. Health care providers may charge for copies of the health care records required to accompany the bill. The charge is to be identified on the bill using CPT<sup>®</sup> Code S9981 (units equal total number of pages). The maximum fee for copies is \$5 for the first page and 45¢ for each additional page, up to a maximum of \$250.00.



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### *Billing Procedures*

- Bills must specify the billing entity's tax identification number; the license number, registration number, certificate number, or National Provider Identifier of the health care provider; the employer; the employee; the date of injury/occurrence; the date of service; the work-related injury or disease treated; the appropriate procedure code(s) for the work-related injury or disease treated; and the charges for each procedure code. **Bills properly submitted on standardized claim forms prescribed by the Centers for Medicare & Medicaid (i.e. completed in accordance with the form instructions) are sufficient to comply with this requirement.**
- Bills for self-insured employers may be submitted to the employer or to the employer's designated claim administrator and/or medical bill processor. The Board provides a list of authorized self-insured employers and the corresponding claim administrators on its website.
- **Bills for insured employers must be submitted directly to the insurer of record on the date of injury/illness, or to the designated claim administrator or medical bill processor. Health care providers shall attempt to verify the name and address of the insurer that wrote the workers' compensation policy for the specific employer on the date of injury/illness prior to the submission of a bill.**
- The Board provides a link on its website to verify the insurer that wrote the workers' compensation policy for the specific employer on the date of injury at: <http://www.maine.gov/wcb/Departments/coverage/verification.html>. **Verifying coverage via the Board's link requires that you locate the employer address on the policy.** Please note, this tool has some limitations. For example, the insured name may not be the same as the employer's DBA ("doing business as") name. In addition, the tool only supplies the name of the workers' compensation insurer and not the name of any designated claim administrator and/or medical bill processor.
- **Anytime you cannot verify where to send a Maine workers' compensation claim, please send an email to [CoverageVerification.WCB@maine.gov](mailto:CoverageVerification.WCB@maine.gov) with the name and address of the employer and the date of injury/illness.**