

BRIAN P. KEMP
GOVERNOR



JAY NEAL
DIRECTOR

Dear Medical Provider,

This letter is to notify you of a very important legislative change that will impact all medical payments made to medical providers¹ on behalf of a crime victim by the Victims Compensation Program.

Effective July 1, 2022, in accordance with O.C.G.A. §17-15-8(b)(1)(1) *“Payments made by the board to medical service providers for compensation for medical services shall be made in accordance with the list of usual, customary, and reasonable charges for medical services published by the State Board of Workers' Compensation as provided for in Code Section 34-9-205 unless an investigation of the charges by the board determines that there is a reasonable health care justification for the deviation from such list of usual, customary, and reasonable charges. Payments made to and accepted by a medical provider shall be considered payment in full for the charges with respect to the board, victim, and claimant.”*

In order to ensure an understanding of acceptance by providers and appropriate processing by staff, beginning July 1, 2022, the aforementioned legislation will be operationalized as follows:

All providers who currently receive payment electronically (i.e., ACH) will need to review and sign the attached Agreement to Accept Electronic Payments, which defines acceptance of payment and provides instruction on how to reject a payment received electronically. ***Please note: if an executed Agreement is not received prior to July 1, 2022, all subsequent payments will be processed as checks until an Agreement is received.***

All providers who currently receive payment via check can continue to do so, understanding that upon depositing or cashing the check for all bills with a date of service on or after July 1, 2022, it will be considered accepted and deemed “payment in full” for the invoiced bill. If you currently receive checks as a form of payment from the Program, but would like to receive payment via ACH instead, please complete and return the attached Agreement and Vendor Management Form.

If you wish to change payment methods, address, or account for any reason then you may complete the attached Vendor Management Form. However, if you do not desire any changes to your State of Georgia vendor record then please do not return the Vendor Management Form with your acceptance. As an additional note, please be prepared to submit itemized bills in the format of HCFA-1500 or UB-04 to ensure timely payment.

If you have questions regarding the legislative change or the attached Agreement, contact Victims Compensation Division Director, Aisha Ford at Aisha.Ford@cjcc.ga.gov. If you have questions regarding the Vendor Management Form, contact Finance Liaison, Marcus Chatman at Marcus.Chatman@cjcc.ga.gov or (404) 654-5694.

Thank you for your attention to this matter. We look forward to working with you for a smooth transition.

Aisha Ford, Victims Compensation Division Director

¹ This change does not include dental bills submitted by dental providers.

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Agreement to Accept Electronic Payments

This Agreement is entered into as of this ____ day of _____ 2022, between the Criminal Justice Coordinating Council (“CJCC”) and _____ (“the Provider”).

In 2021, the Georgia legislature passed HB141.¹ Effective July 1, 2022, HB141 provides for the application of a workers’ compensation-based fee schedule in processing medical bills related to a victimization. In addition, HB141 asserts that all medical payments made to ***and accepted*** by medical providers shall be considered payment in full. Per the CJCC’s Administrative Rules, for all medical bills with a date of service on or after July 1, 2022, a payment shall be considered accepted if: a) a physical check is either cashed, deposited, or otherwise negotiated by the medical service provider or its assignee; or b) the medical service provider has entered into an agreement with CJCC to receive electronic payments and has not provided their intent to reject the payment and has not returned the funds within 45 days of issuance.²

By signing this agreement, the Provider agrees to receive electronic payments in lieu of physical checks. The Provider acknowledges and agrees that an electronic payment will be considered accepted by the provider unless the provider: a) notifies CJCC of the intent to reject the payment within 45 days of the date of issuance; and b) has returned the funds to CJCC within 45 days of the date of issuance. Instructions on how to notify and return funds to CJCC can be found at www.crimevictimscomp.ga.gov.

Please note: *If your agency currently receives electronic (ACH) payments from CJCC, but has not executed and returned this agreement prior to July 1, 2022, all payments by CJCC will subsequently be processed as checks until an executed agreement is received. If your agency currently receives checks, but would like to switch to ACH, please complete the attached vendor management form and return, along with this Agreement to marcus.chatman@cjcc.ga.gov or via mail to:*

Attn: Marcus Chatman, Finance Liaison
Criminal Justice Coordinating Council
104 Marietta Street, Suite 440
Atlanta, GA 30303

The Provider further acknowledges that this agreement will remain effective unless terminated in writing by the Provider.

Authorized Official Name (Printed): _____ Title: _____

Authorized Official Signature: _____ Date: _____

Provider/Agency Name: _____

Provider Tax Identification#: _____

Please provide contact information for any questions our staff may have in processing this form:

Contact Name: _____ Phone Number: _____

E-mail Address: _____

¹ In accordance with O.C.G.A §17-15-8 (b.1)(1), “payments made by the board to medical service providers for compensation for medical services shall be made in accordance with the list of usual, customary, and reasonable charges for medical services published by the State Board of Workers’ Compensation as provided for in Code Section 34-9-205 unless an investigation of the charges by the board determines that there is a reasonable health care justification for the deviation from such list of usual, customary and reasonable charges. Payments made by the board to and accepted by a medical provider shall be considered payment in full for the charges with respect to the board, victim and claimant.”

² The date of issuance for an ACH is the date that the funds are transmitted from the State Treasury account, also known as the payment date. When dealing with ACH payments the date of issuance and receipt should always be within 24 hours.