Modifying your individual provider domain in ProviderOne

ProviderOne User Guide

# Table of Contents

Accessing your ProviderOne domain

In order to make changes to information in your domain you will to log into your ProviderOne portal. Only the domain administrator or approved users in the organization are able to update information in ProviderOne.

Depending on how your ProviderOne administrator established their profile they will access ProviderOne one of two ways:

- OneHealthPort single sign on
- Direct Access (via Health Care Authority)

Note: As 8/9/2024 of all administrator access requests must be submitted using Health Care Authority's **Provider Contact Us Web Form.** From the "Select Topic" drop down menu choose "ProvideOne Access Request Form" and complete all of the required fields. It may take up to one week for the access request to be completed

- Once you have logged in select the **"EXT File Maintenance"** profile from the drop down.
- From the left hand tool bar select **Manage Provider Information.**
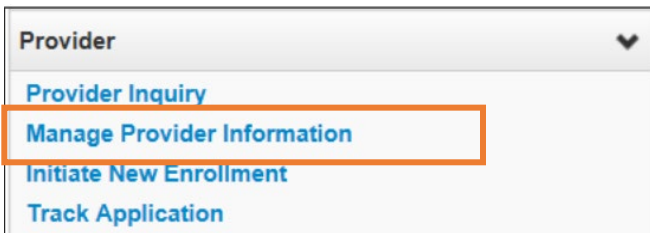
- You should now see the Business Process Wizard (BPW) with links you can click into to update information.

View/Update Provider Data - Individual				
Business Process Wizard - Provider Data Modification (Individual). In order to finalize submission of your requested changes, you must complete the FINAL Step - Submit Modification Request for Review.				
Step	**Required**	**Last Modification Date**	**Last Review Date**	**Status**
Step 1: Basic Information	Required	09/24/2024	09/24/2024	Complete
Step 2: Locations	Not Required	09/24/2024	09/24/2024	Complete
Step 3: Provider Additional Information	Optional	09/24/2024	09/24/2024	Complete
Step 4: Specializations	Required	09/24/2024	09/24/2024	Complete
Step 5: Ownership & Managing/Controlling Interest details	Not Required	09/24/2024	09/24/2024	Complete
Step 6: Licenses and Certifications	Required	09/24/2024	09/24/2024	Complete
Step 7: Training and Education	Optional	09/24/2024	09/24/2024	Complete
Step 8: Identifiers	Optional	09/24/2024	09/24/2024	Complete
Step 9: Contract Details	Not Required	09/24/2024	09/24/2024	Complete
Step 10: Federal Tax Details	Optional	09/24/2024	09/24/2024	Complete
Step 11: EDI Submission Method	Not Required	09/24/2024	09/24/2024	Complete
Step 12: EDI Billing Software Details	Not Required	09/24/2024	09/24/2024	Complete
Step 13: EDI Submitter Details	Not Required	09/24/2024	09/24/2024	Complete
Step 14: EDI Contact Information	Not Required	09/24/2024	09/24/2024	Complete
Step 15: Billing Provider Details	Required	09/24/2024	09/24/2024	Complete
Step 16: Servicing Provider Information	Not Required	09/24/2024	09/24/2024	Complete
Step 17: Payment and Remittance Details	Not Required	09/24/2024	09/24/2024	Complete
Step 18: View Union Information	Required	09/24/2024	09/24/2024	Complete
Step 19: Complete Enrollment Checklist	Required	09/24/2024	09/24/2024	Complete
Step 20: Submit Modification for Review	Required	09/24/2024	09/24/2024	Complete

View Page: 1   Go   Page Count   SaveToXLS   Viewing Page: 1

Step 1: Modify basic information

ADDING AND CHANGING BASIC INFORMATION

In this step you can add additional agencies (if you want to add L&I go to **Add L&I to Existing Account Guide**), and you can update any available field that is not greyed out

- After you make your changes, click **OK** in the bottom right hand corner of the screen.

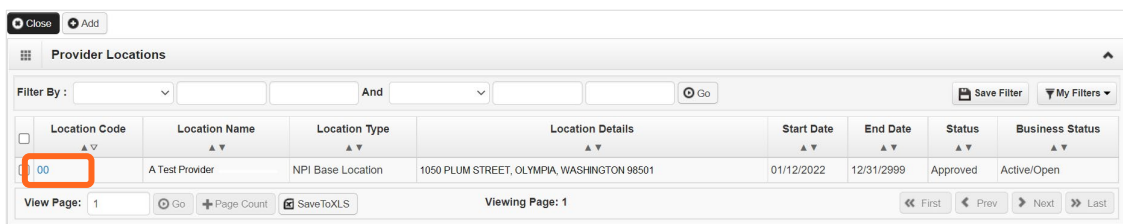Note: You should now see the step displaying an updated status in the BPW.

Step 2: Modify locations

This step isn't applicable for individual servicing providers. Only Regular Billing providers that **do not** bill L&I under a group payee will have location information that can be updated in this step.

MODIFY A LOCATION

Important Note: If your location has changed you should click into the existing location code and update the address information. Only Click "Add" if you open a new location where you will be treating injured workers.

- Click the link of the location you want to modify.
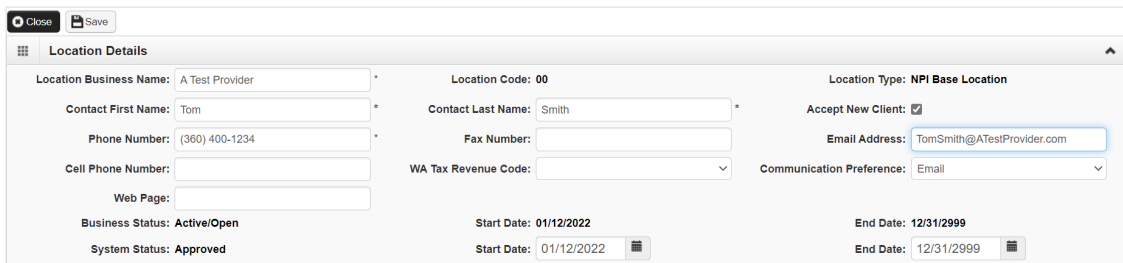

This step has three sections that can be updated:
- Location Details contains the contact information, and start and end date for the location.
- L&I Specific Information provides data for the L&I Find a Doctor directory.
- Address List: Each location contains a list with three address types:
  - **Location** (physical address of primary location).

Important! Include the phone number you want patients to call for each of your physical locations location.

  - **Mailing** (the place where you receive mail).
  - **Pay-To** (the place where a paper check and remittance advice is sent).

MODIFY LOCATION DETAILS

- Enter the new or changed information.

- Only change the end date if this location is closing.
- Click **Save**.

L&I SPECIFIC INFORMATION

This section allows you to choose if this individual location appears in the **Find a Doctor** directory on **www.Lni.wa.gov**.

- Select "**Yes**" to have this location appear in the L&I Find a Doctor directory. The remaining fields in this section are required.

- Selecting "**No**" will disable the remaining fields in this section.

- Click **Save** when finished.

ADDRESS LIST

- Click the link of the **Address Type** you want to modify.

- Make your changes.
- Click **Validate Address** to verify.
- Click **OK** and **Save**.

Note: If you **Close**, changes will not be saved.

ADD ADDRESS INFORMATION

To add a **NEW** location for your business

- Click **Add Address**.

- Select the type of input option:
  - Choose **Manually Input**. Click **Address**. Add Location Address.
  - Choose **Copy from Location Address** to copy a previously entered location.
  - Leave End Date blank

  - Click **OK** to save or **Cancel** to close without saving.
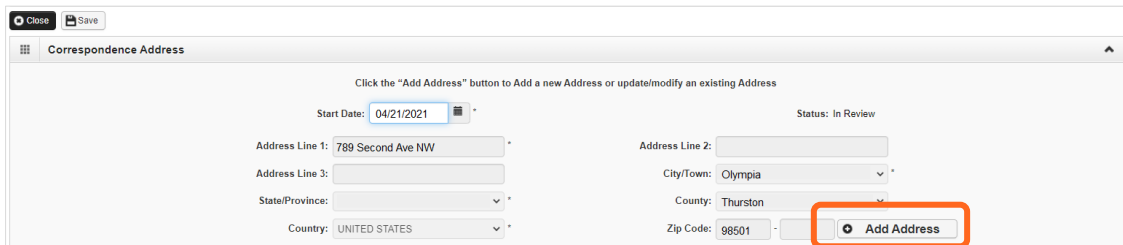 - Click **Close** on the three open windows to return to the BPW.

NEXT

Make additional changes or skip to Step 19 – Submit modification for review.

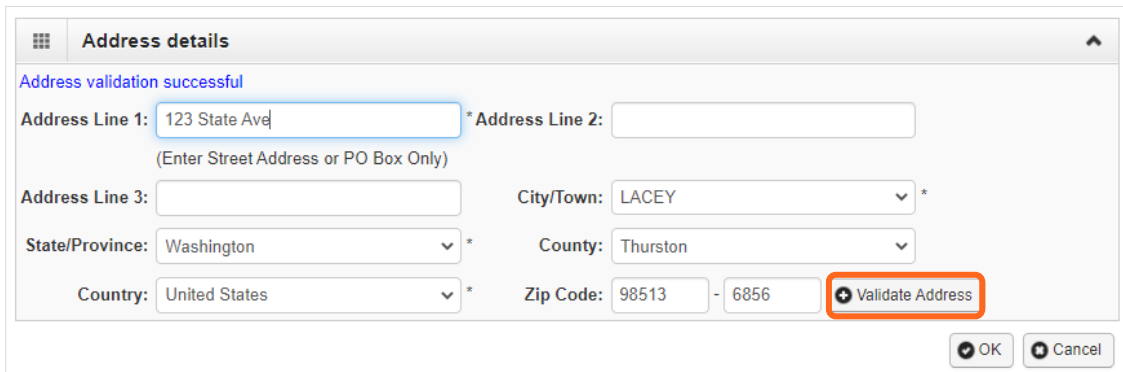# Step 3: Modify provider information

CORRESPONDENCE ADDRESS

L&I sends any requests or documentation about the care of an injured worker to this address.

- Click **Add Address**.

- Complete the **Address Line 1** and **Zip Code** fields.
- Click on **Validate Address**.

- Click **OK**.
- Enter the **Start Date** and click **Save**.

- Choose **Close** to return.

PROVIDER INFORMATION

- Complete this section.
- Click **Save** (at the top of the screen) and the choose **Close** to return.

Step 4: Modify specializations

This information is important for your L&I billing. You can modify the end date or add your new taxonomy, specialty, and subspecialty.

Note: There may be specific requirements for licensure or training for each specialty/taxonomy listed.

MODIFYING SPECIALIZATIONS

Note: Modifying an end date can cause issues with payment. We don't recommend changing the date from 12/31/2999 unless the specialty will no longer be used.

ADDING SPECIALIZATIONS

IMPORTANT NOTE: Do not modify this step unless you hold dual licensure in which you may add an additional specialization, however, any additional specialty you add in this step may result in additional billing accounts.

- Click **Add**.

- Select the appropriate location, or **All**, from the **Location** drop-down menu.
- Choose **L&I** from the **Administration** drop-down menu.

- Choose the **Provider Type** and **Specialty**. Don't enter an **End Date**. ProviderOne will auto-populate to 12/31/2999.

- The Provider Type selection will populate the options for Specialty, which displays the available taxonomy codes.
  - Use the double arrows to move taxonomy code from the **Available Taxonomy Codes** box to the **Associated Taxonomy Codes** box.

- Click **OK** to save or **Cancel** to close without saving.

INACTIVATING SPECIALIZATIONS

You can inactivate a specialty by adding an end-date to your specialty/subspecialty through the modification step above.

NEXT

Complete additional changes or go to Step 19: Submit modification for review.

VIEW SUBMITTED ITEMS

See your changes:
- Click **Step 4: Specializations**.

Note: The screen will show only "Approved" entries.

- In the drop-down next to **Filter By**, select **Status**.
- In the next field, enter **IN%** and click **Go**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.

Step 5: Modify ownership details

MODIFY OWNERSHIP INFORMATION

You can modify your "Doing Business As" address, and other ownership information.

■ Click the blue link in the **Owner/ME/BOD ID** column.

■ Enter the new or changed information.

   o   Click **Address** to enter new address information.

■ Click **Save** or **Close** to close without saving.

ADD OWNERSHIP INFORMATION

- Click **Add.**

- To auto-populate data, click **Copy Name and Tax** at the bottom of the screen.
- Complete the remaining required fields.

Note: If disclosure type "Organization" is selected, you'll need at least one individual owner or one individual managing employee (SSN, Date of Birth, and individual's legal name).

- Enter the first day of ownership as the **Disclosure Start Date**. Don't enter the **Disclosure End Date**, the end date will auto-populate to 12/31/2999.
- Enter an **Ownership Percentage**, e.g. 100.
- Click +**Address** to add the owner's address.
- Click **OK** to save or **Cancel** to close without saving.

INACTIVATE OWNERSHIP INFORMATION

Ownership and Managing/Controlling Interest can only be changed by inactivating the current ownership information first. You can inactivate the current information by adding an end date to your owner record if you use the *modify* step above.

NEXT

If no additional changes need to be made go to Step 19: Submit modification for review, or continue to Step 6 to continue.

Step 6: Modify licenses and certifications

Before clicking into Step 6, review **Required Credentials**.

Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

- Click **Required Credentials** from the BPW.
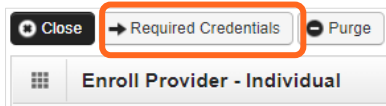
- To view the License Requirements, use the **Filter By** drop-down to select **01-License** and click **Go**.
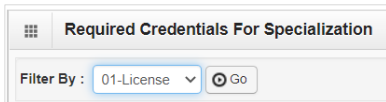
- License(s) will be displayed, if required.
- When finished, click **Cancel** to close.

MODIFY LICENSES/CERTIFICATIONS
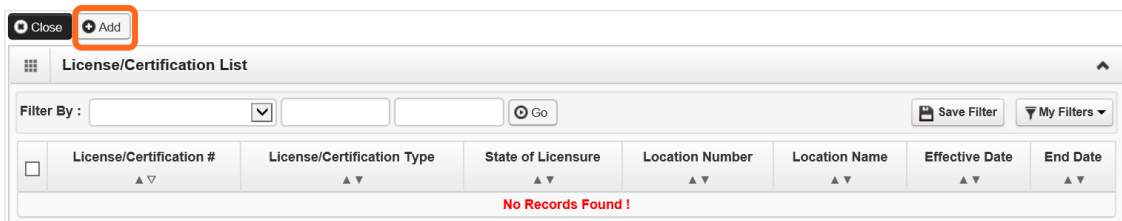
- Click the blue hyperlink in the **License/Certification #** column.
- Enter new or changed information.

ADD LICENSES/CERTIFICATIONS

- Licenses/Certifications may be required for each location with an added specialization. If you have a **DEA number**, you can enter it in this step.
- Click **Add**.

- Use the **Location** drop-down to add a license or certification to a specific provider location.
- Select All only if the license pertains to every location.

- Complete required fields and click **OK** to save or **Cancel** to close without saving.

NEXT

If no additional changes need to be made go to Step 19: Submit modification for review, or continue to Step 7 to continue.

## VIEW SUBMITTED ITEMS

See your changes:
- Click **Step 6: Licenses and Certifications.**

Note: The screen will show only "Approved" entries.

- In the drop-down next to **Filter By**, select **Status**.
- In the next field, enter **IN%** and click **Go**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.
- Click **Go**.

Step 7: Modify training and education

Before clicking into Step 7, review **Required Credentials**.

Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

- Click **Required Credentials** from the BPW.
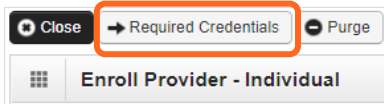
- To view the Training requirements, use the **Filter By** drop-down menu to select **03-Training** and click **Go**.
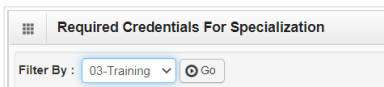
- Training(s) will be displayed, if required.
- When finished, click **Cancel** to close.

ADD TRAINING/EDUCATION TYPE

- Click **Add**.

- Use the **Location** drop-down menu to select **All**, or the applicable location.
- Select the required **Training/Education Type** from the drop-down menu. If you're not sure which applies to you, return to the main BPW page and check **Required Credentials**.
- Finish required fields.
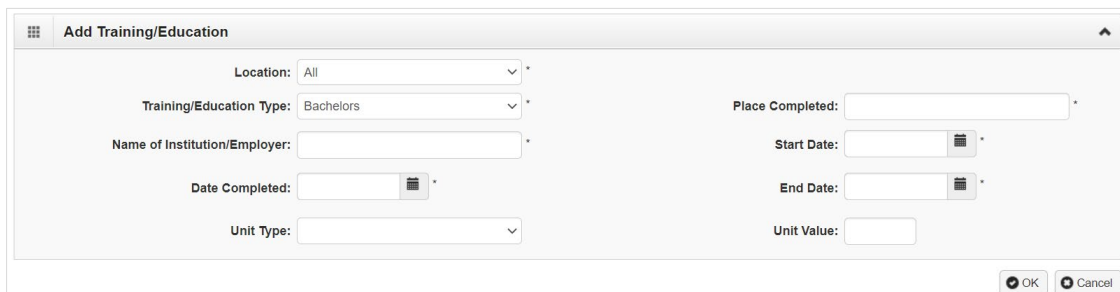
- The **Start Date** is when the training/education started.
- The **Date Completed** is when it was done, e.g. graduation date.

Important! In the **End Date** field, enter 12/31/2999. You must complete this field to continue enrollment.

- You don't need to finish the **Unit Type** or **Unit Value** field.
- Click **OK** and **Close**.

NEXT

If no additional changes need to be made go to Step 19: Submit modification for review, or continue to Step 8 to continue.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 7: Training and Education.**

Note: The screen will show only "Approved" entries.

- In the drop-down next to **Filter By**, select **Status**.
- In the next field, enter **IN%** and click **Go**. Any entries with an "In Review" status will be displayed.


Note: Enter **%** to see all entries.

Step 8: Modify identifiers

This step doesn't apply to all L&I providers. Follow the instructions below if the BPW step is **Required**. Before clicking into Step 8, review **Required Credentials**.

Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS
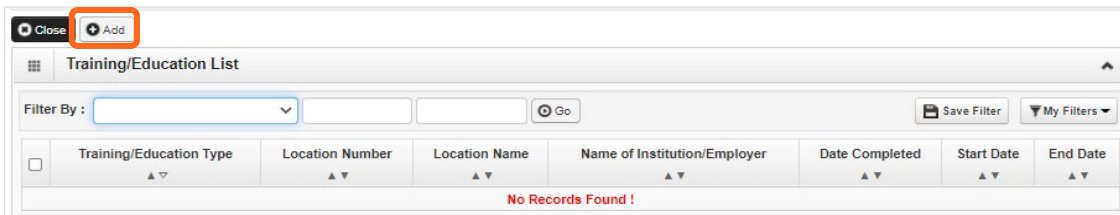
- Click **Required Credentials** from the BPW.
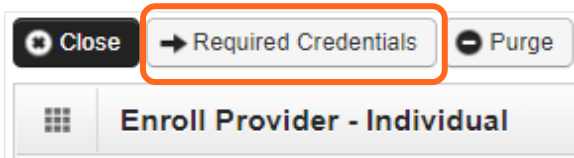
- To view the Identifier requirements, use the **Filter By** drop-down menu to select **02-Identifier** and click **Go**.
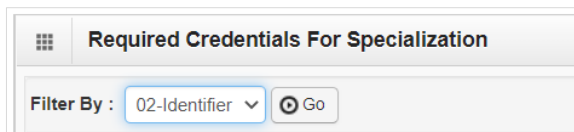
- Identifier(s) will be displayed, if required.
- When finished, click **Cancel** to close.

MODIFY IDENTIFIER

- Click the blue hyperlink in the **Identifier #** column.
- Enter new or changed information.
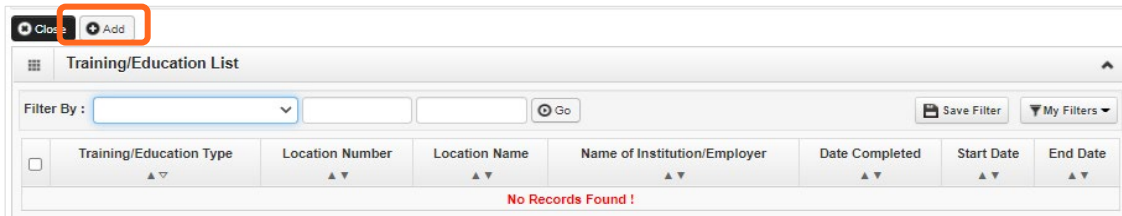
Note: For the End Date field, the date must be in the future (e.g. malpractice policy expiration date). If the identifier is required for an active specialization and you change the End Date to a past date, you can't finish this step.

Identifier Type	Identifier Value	Start Date	End Date	Status	Operational Status
Malpractice Insurance	MAL0012345	01/13/2020	01/13/2022	APPROVED	Active

- Click **Save** to save changes or **Close** to close without saving.
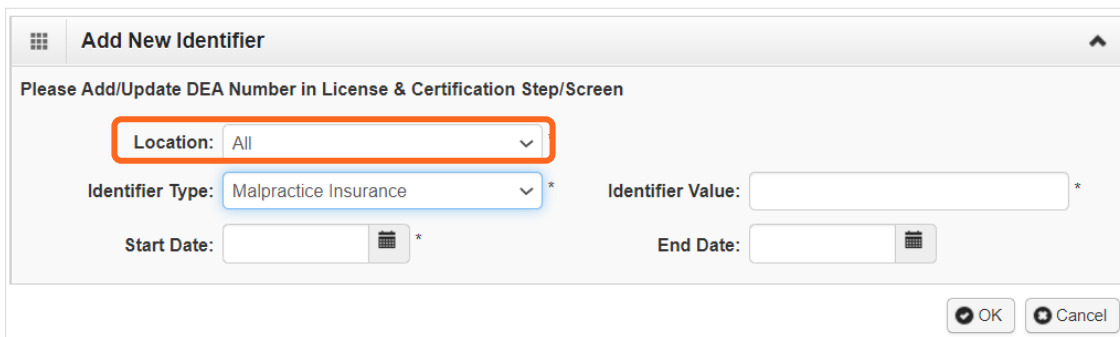
ADD MALPRACTICE INSURANCE

- Click **Add**.

- Use the **Location** drop-down menu to select **All**, or the applicable location.
- Use the **Identifier Type** drop-down to select **Malpractice Insurance**.
- In the **Identifier Value** field, enter your malpractice insurance policy number.
- Enter the **Start Date** and **End Date**, and click **OK** to close.

NEXT

If no additional changes need to be made go to Step 19: Submit modification for review, or continue to Step 9 to continue.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 8: Identifiers.**

Note: The screen will show only "Approved" entries.

- In the drop-down next to **Filter By**, select **Status**.

- In the next field, enter **IN%** and click **Go**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.

Step 9: Modify contract details

This step doesn't apply to L&I. L&I and Health Care Authority providers shouldn't enter contract information in this section.

Step 10: Modify federal tax details

MODIFY FEDERAL TAX DETAILS

From the **Federal Tax Details** list:

- Click the link of the form you wish to modify.

Note: To make changes to your Legal Name or W-9 Entity Type, go to Step 1: Basic Information.

- Enter new or changed information.
- Click **OK** to save or **Cancel** to close without saving.
- Complete additional changes or go to Step 19: Submit modification for review.

Steps 11-14: Not applicable to L&I providers

This information is applicable if you're applying for the Health Care Authority. Instructions can be found at the Enroll as a Provider website:

https://www.hca.wa.gov/billers-providers-partners/become-apple-health-provider/enroll-provider

Step 15: Modify billing provider information

This step only applies to servicing providers.

MODIFY BILLING PROVIDER INFORMATION

- Click on the blue hyperlink in the **ProviderOne ID** column.

	ProviderOne ID ▲▼	Billing Provider NPI ▲▽	Billing Provider Name ▲▼	Agency ▲▼	Billing Location Code ▲▼	Billing Location Name ▲▼	Start Date ▲▼	End Date ▲▼	Status ▲▼
☐	1234567	1111111111	Test, Bill	L&I	00	Test, Bill	07/25/2022	12/31/2999	Approved

- Enter new or changed information.
- Click **Save** to save changes or **Close** to close without saving.

ADD BILLING PROVIDER INFORMATION

- Click **Add**.

- Enter your group's information, then click **Confirm Provider**.

  o   If the provider is not found, go to **Provider does not exist in the database.**
  o   If the provider is found, L&I will display in the Available Agencies box.

- Click **L&I** and use the double right arrows to move it to the **Selected Agencies** box.
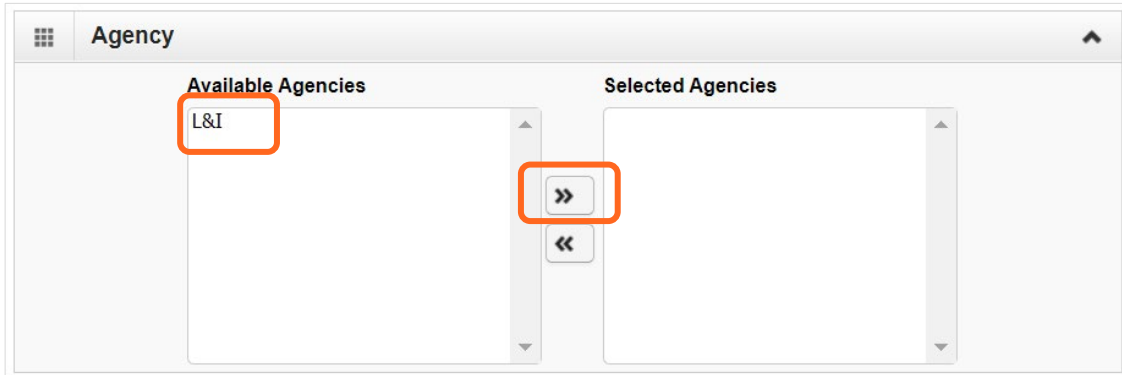
- In **Available Taxonomies**, select your primary taxonomy and use the double right arrow to move it to the **Selected Taxonomies** box.
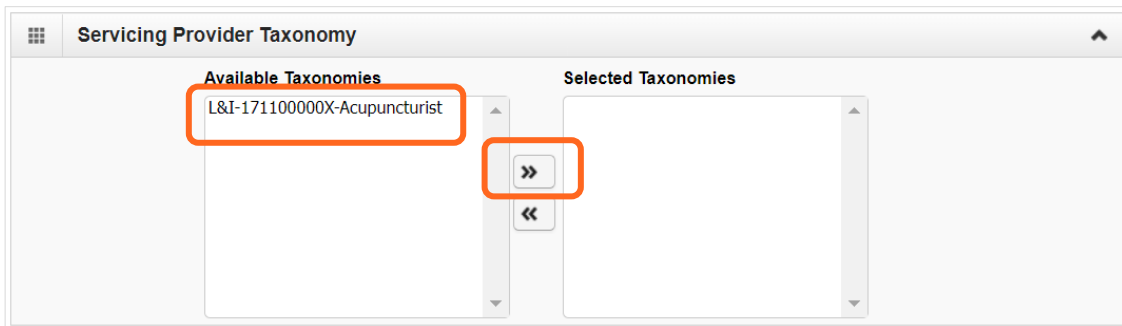
- Click the **Available Locations** and use the double right arrows to move it to the **Selected Locations** box. More than one may be selected, however doing so will result in multiple provider accounts, it is advised to only select the primary locations you will provide services.
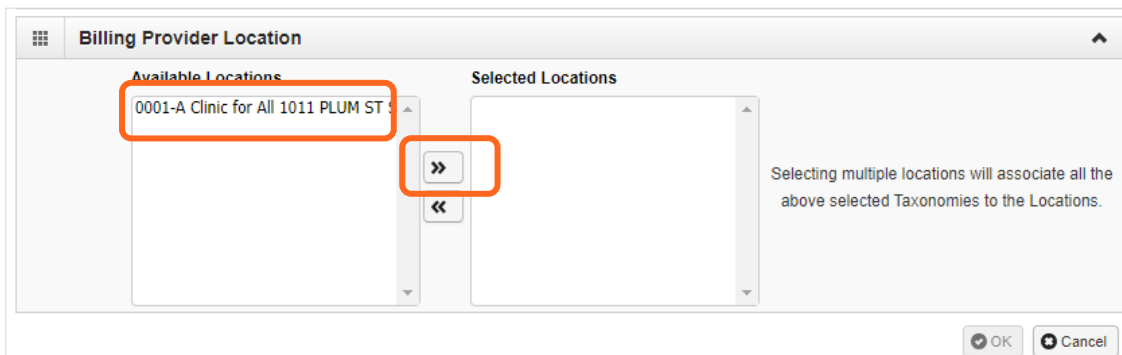
- Click **OK** to save or **Cancel** to close without saving.

- Ignore the **Social Service Servicing Only Provider List**. L&I doesn't use this.

PROVIDER DOESN'T EXIST IN DATABASE

If the provider doesn't exist in the database after searching with the SSN/FEIN and NPI, you'll be prompted to add the billing provider. See the **L&I enrollment guide for group providers** for more information.

- Click **OK** to start the enrollment process, **Back** to return to the previous page, or **Cancel** to return to the Servicing Provider List.

Important! If a new enrollment is started, copy the application ID that is generated for the billing provider. You'll need your Application ID to:

- Continue the billing provider application (if you exit before submitting)
- Check application status
- Update or add additional information if requested.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 15: Billing Provider Details.**

Note: The screen will show only "Approved" entries.

- In the drop-down next to **Filter By**, select **Status**.

- In the next field, enter **IN%** and click **Go**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.

Step 16: Not applicable to L&I providers

This step is optional and not needed for enrollment.

Step 17: Modify payment & remittance details

Payment information applies to all locations.

MODIFYING PAYMENT AND REMITTANCE DETAILS

- Click the location you want to modify in the Location Number column.

	Location Code ▲▽	Location Name ▲▼	Payment Method ▲▼	Start Date ▲▼	End Date ▲▼	Status ▲▼
☐	00	Test, Bill	Paper Check	07/25/2022	12/31/2999	APPROVED

- Enter new or changed information.
- Click **Save** to save changes or **Close** to close without saving.

ADDING PAYMENT AND REMITTANCE DETAILS

- Click **Add**.

⊗ Close | ⊕ Add

▦ **Payment Details** ⌃

Filter By : [▼] [ ] [ ] [⊙ Go]   [🖫 Save Filter] [▼ My Filters ▾]

	Location Number ▲▽	Location Name ▲▼	Payment Method ▲▼
☐			
		No Records Found !	

ELECTRONIC FUNDS TRANSFER (DIRECT DEPOSIT)

- Click **Electronic Funds Transfer (Direct Deposit).**

▦ **Payment Details** ⌃

Identify Payment Details

Location: [All ▼] *

Payment Method: ⦿ Electronic Funds Transfer(Direct Deposit) ◯ Paper Check

▦ **Financial Institution Information** ⌃

Financial Institution Name: [ ] * Financial Institution Routing Number: [ ] *

Providers Account Number with Financial Institution: [ ] * Re-enter Providers Account Number: [ ] *

Type of Account at Financial Institution: [Checking ▼] * EFT Account Type: [▼] *

Payment Notification Preference: [Email Notification ▼] *

Account Number Linkage to Provider Identifier: [1518397074] *

- Enter the required information for **Electronic Funds Transfer (direct deposit)**, the fastest payment method. No other forms are required.

- The **Payment Notification Preference** default is **Email Notification**. This requires an email entry in Step 2: Locations.
  - o If the error message below appears, you didn't provide an email in Step 2.

Note: If you don't want to provide an email, change the **Payment Notification Preference** to **Letter Notification**.
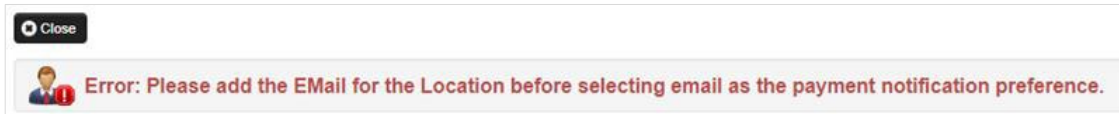
  - o Click **Close** to close the error message.
  - o Click **Cancel** to go back to the BPW and **complete Step 2** to continue with EFT enrollment.
- The bank will verify your data in approximately 7-10 days.
- When verified, there will be a status of Successful. If not verified, there will be a status Failed and payments will continue by paper check.

PAPER CHECK

- If changing from EFT to paper check, the EFT detail area will collapse and any existing EFT information will be removed.
- Click **Paper Check**. The check (warrant) will be mailed to the **Pay-to** address.

ELECTRONIC REMITTANCE ADVICE

Skip this section. Don't edit this for your L&I application. You'll continue to receive your remittance advice as you do today. If you're also applying with Health Care Authority, go to the **Enroll as a Provider website** for instructions.

SUBMISSION INFORMATION

- Use the drop-down menu to select **Change Enrollment** and enter the name of the person authorized to provide the payment choice.

- Click **OK** to save or **Cancel** to close without saving.

NEXT

Complete additional changes or go to Step 19: Submit modification for review.

Step 18: Not applicable to L&I providers

Step 19: Submit modification for review

Note: Before submitting your change(s), remember to upload required attachments.

- Upload a W-9 for **business legal name changes** and **address changes**. (see upload attachments section below)
    - When completing the W-9 form, **print** the form and add the **wet signature** (required by Washington State).

Note: Your W-9 form must match the information provided in Step 10: Add Tax Details.

    - Make sure to sign and date every form.
- Upload the applicable document if you're changing your individual legal name:
    - Marriage certificate.
    - Updated medical license.
    - Divorce decree.
    - Court ordered documents with your new name.
- After uploading your attachments, click **Submit Provider Modification**.
- A pop-up will appear with your modification request number.
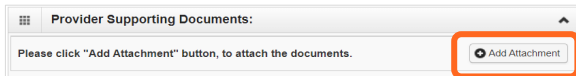

- Click **Close** on the Final Submission page.

UPLOADING ATTACHMENTS

■ Click **Upload Attachments**.
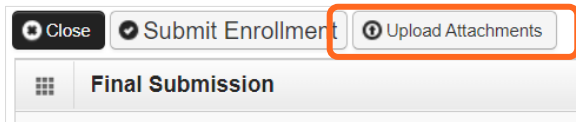
■ Click **Add Attachments**.

■ Use the **Attachment Type** drop-down menu to select the appropriate type.

■ Click **Choose File**.

■ Select your saved document and click Open, or the equivalent for your system.
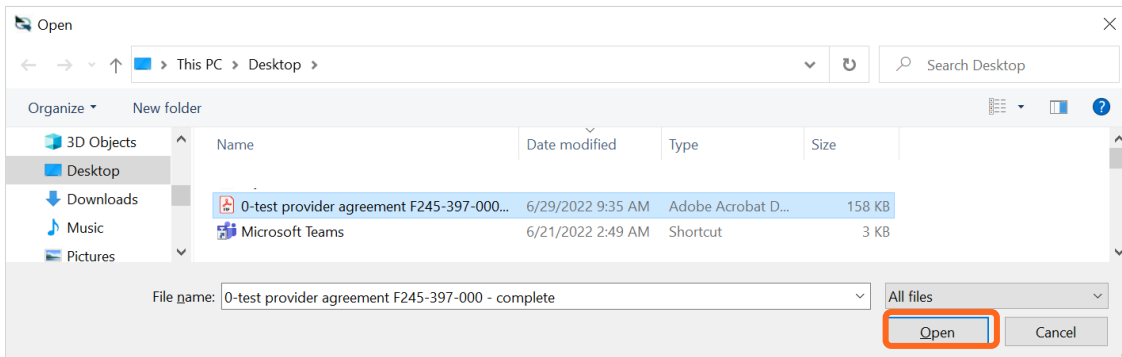
■ The name of the file will appear next to the **Choose File** button. Click **OK**.

■ The document is now uploaded and will display in the **Attachment List**. If the wrong document is selected, click the blue X in the delete column.

■ After uploading required attachments, click **Cancel**. Click **OK** to return.