

ProviderOne Provider System User Manual



Enrolling as a Facility, Agency, Organization Provider

*If you need assistance choosing
which provider type to enroll as,
please contact:*

*Provider Enrollment at
800-562-3022 ext: 16137*

Disclaimer:

A contract, known as the Core Provider Agreement, governs the relationship between DSHS and Medical Assistance providers. The Core Provider Agreement's terms and conditions incorporate federal laws, rules and regulations, state law, DSHS rules and regulations, and DSHS program policies, numbered memoranda, and billing instructions, including this Guide.

Providers must submit a claim in accordance with the DSHS rules, policies, numbered memoranda, and billing instructions in effect at the time they provided the service. Every effort has been made to ensure this Guide's accuracy. However, in the unlikely event of an actual or apparent conflict between this document and a department rule, the department rule controls."



ProviderOne Provider System User Manual

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Enrolling as a Facility, Agency, Organization Provider

The following ProviderOne topics and tasks are covered in this section:

- [Accessing the Enrollment Business Process Wizard](#)
- [Entering Provider Basic Information](#)
- [Completing the Business Process Wizard Steps](#)
- [Submitting the Enrollment Application to DSHS](#)

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Provider Enrollment Links

Start a New Provider Enrollment Application

<https://www.waproviderone.org/ecams/jsp/common/pgNewPrvdrEnrollment.jsp>

Resume or Track an Enrollment Application

<https://www.waproviderone.org/ecams/jsp/common/pgTrackPrvdrApplctn.jsp>

You will need your Application Id and either the Social Security Number (SSN) or Federal Employer Identification Number (FEIN) to login.

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Accessing the Enrollment Business Process Wizard

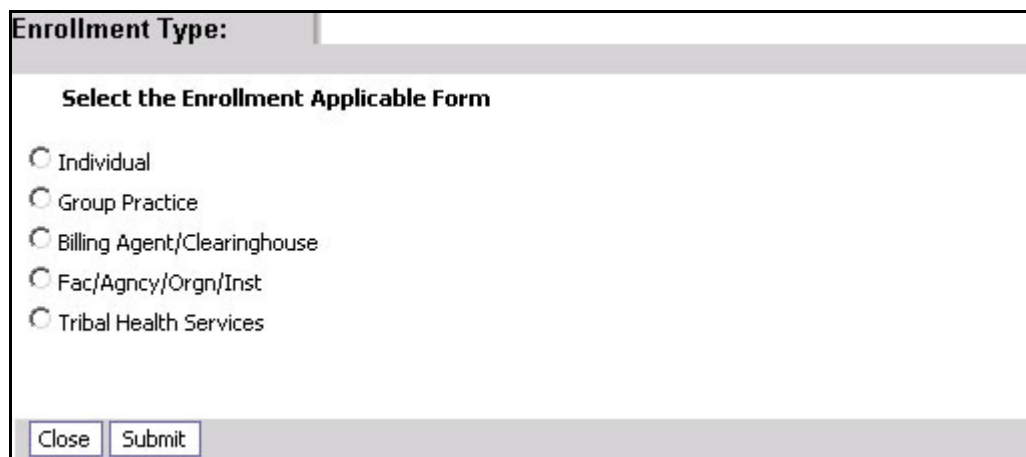
Selecting the Enrollment Type



Enter the following web address into your Internet Explorer Browser:
“<https://www.waproviderone.org/ecams/jsp/common/pgNewPrvdrEnrollment.jsp>”



ProviderOne displays the Enrollment Type page.



The screenshot shows a web form titled "Enrollment Type:". Below the title is a section header "Select the Enrollment Applicable Form". There are five radio button options listed: "Individual", "Group Practice", "Billing Agent/Clearinghouse", "Fac/Agncy/Orgn/Inst", and "Tribal Health Services". At the bottom of the form are two buttons: "Close" and "Submit".

Figure 1 - Enrollment Type



Select the Appropriate Enrollment form and click the Submit button.



ProviderOne displays the Basic Information page.

This page is intentionally blank.

Provider Basic Information

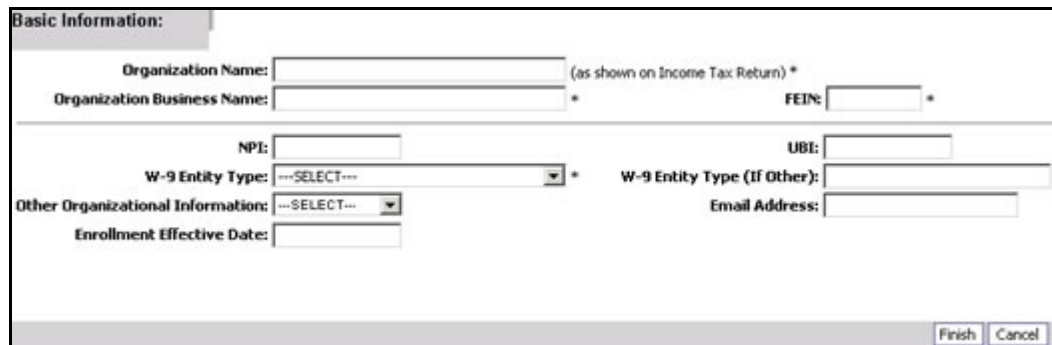
Entering your Provider Basic Information is the first step in the enrollment process.

Successful completion of this step will result in:

- Confirmation that a duplicate enrollment does not already exist
- Assignment of an Application Id
- Storage of the basic information in the Provider Enrollment Staging Area



ProviderOne displays the Basic Information page.



The screenshot shows a web form titled "Basic Information:". The form contains several input fields and dropdown menus:

- Organization Name: (as shown on Income Tax Return) *
- Organization Business Name: *
- FEIN: *
- NPI:
- UBI:
- W-9 Entity Type: ---SELECT---
- W-9 Entity Type (If Other):
- Other Organizational Information: ---SELECT---
- Email Address:
- Enrollment Effective Date:

At the bottom right of the form, there are two buttons: "Finish" and "Cancel".

Figure 2 - Basic Information Page (Institutional Version)

About the Basic Information Page

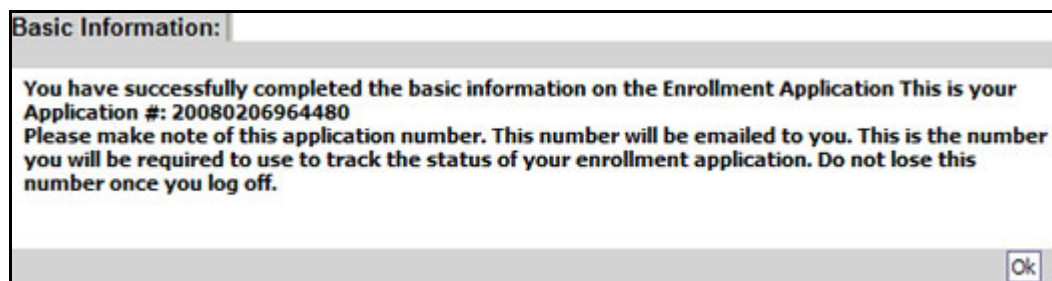
- The first time this page displays, the Application Id will be blank.



After completing all required input, click the Finish button.



ProviderOne displays the Basic Information – Application ID page.



The screenshot shows a message box titled "Basic Information:". The message reads:

You have successfully completed the basic information on the Enrollment Application This is your Application #: 20080206964480
Please make note of this application number. This number will be emailed to you. This is the number you will be required to use to track the status of your enrollment application. Do not lose this number once you log off.

An "Ok" button is located at the bottom right of the message box.

Figure 3 - Basic Information – Application ID

This page is intentionally blank.

About the Basic Information – Application ID Page:

- Print this page or copy the Application ID and store it in a safe place. If you exit the enrollment process prior to completion and want to return you will need this number.



Click Ok.

ProviderOne displays the Provider Enrollment Business Process Wizard. The Provider Basic Information status is now set to Complete.

Close Required Credentials					
Enroll Provider -Facility/Agency/Organization:					
Business Process Wizard-Provider Enrollment (Facility/Agency/Organization)					
Step	Required	Start Date	End Date	Status	Step Remark
Step 1: Provider Basic Information	Required	02/06/2008	02/06/2008	Complete	
Step 2: Add Locations	Required			Incomplete	
Step 3: Add Specializations	Required			Incomplete	
Step 4: Add Ownership Details	Required			Incomplete	
Step 5: Add Licenses and Certifications	Optional			Incomplete	
Step 6: Add Training and Education	Optional			Incomplete	
Step 7: Add Identifiers	Optional			Incomplete	
Step 8: Add Contract Details	Optional			Incomplete	
Step 9: Add Federal Tax Details	Required			Incomplete	
Step 10: Add Invoice Details	Optional			Incomplete	
Step 11: Add EDI Submission Method	Optional			Incomplete	
Step 12: Add EDI Billing Software Details	Optional			Incomplete	
Step 13: Add EDI Submitter Details	Optional			Incomplete	
Step 14: Add EDI Contact Information	Optional			Incomplete	
Step 15: Add Servicing Provider Information	Optional			Incomplete	
Step 16: Add Payment Details	Required			Incomplete	
Step 17: Complete Enrollment Checklist	Required			Incomplete	
Step 18: Submit Enrollment Application for Review	Required			Incomplete	

Figure 4 - Enrollment Business Process Wizard

About the Business Process Wizard



All steps marked as Required must have a status of Complete before the application can be submitted for review.

Required	Start Date	End Date	Status
Required	02/06/2008	02/06/2008	Complete

↑ ↑

Add Locations

Accessing the Locations List

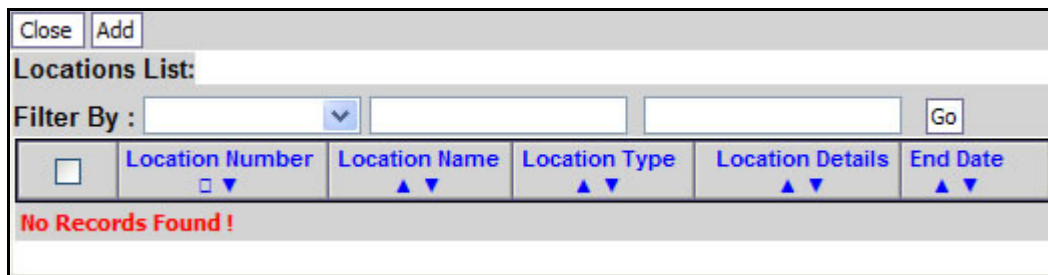


From the Business Process Wizard, click the Add Locations link.

Step #: Add Locations



ProviderOne displays the Locations List.



The screenshot shows a web interface for the 'Locations List'. At the top left are 'Close' and 'Add' buttons. Below them is the title 'Locations List:'. A 'Filter By:' section contains a dropdown menu, two text input fields, and a 'Go' button. Below the filter section is a table with the following columns: a checkbox, 'Location Number', 'Location Name', 'Location Type', 'Location Details', and 'End Date'. Each column header has a small square or triangle icon indicating sorting options. Below the table, the text 'No Records Found!' is displayed in red.

Figure 5 - Locations List for Enrollment

About the Locations List

- The first time this list displays it will be blank.
- The Locations List displays all locations associated with the Provider.

This page is intentionally blank.

Adding a Location



To add a new record, click the Add button.

ProviderOne displays the Add Provider Location form.

Add Provider Location

Please remember to enter both Pay-To and Mailing addresses for NPI Base Location and Social Services Location, and Mailing address only for NPI Servicing Location. On Approval of the Application, start date of location will be set to approval date.

<p>Location Type: <input type="text" value=""/> *</p> <p>Business Name at this Location: <input type="text"/></p> <p>Contact First Name: <input type="text" value=""/> *</p> <p>Address Line 1: <input type="text"/></p> <p>Line 3: <input type="text"/></p> <p>State/Province: <input type="text"/></p> <p>Country: <input type="text"/></p> <p>Fax Number: <input type="text"/></p> <p>Email Address: <input type="text"/></p> <p>Communication Preference: <input type="text" value="Email"/> *</p> <p>Web Page: <input type="text"/></p>	<p>End Date: <input type="text"/></p> <p>Contact Last Name: <input type="text" value=""/> *</p> <p>Line 2: <input type="text"/></p> <p>City/Town: <input type="text" value=""/> *</p> <p>County: <input type="text"/></p> <p>Zip: <input type="text" value=""/> - <input type="text" value=""/> <input type="text" value="Address"/></p> <p>Phone Number: <input type="text" value=""/> *</p> <p>Cell Phone Number: <input type="text"/></p> <p>WA Tax Revenue Code: <input type="text" value=""/> *</p>
---	---

Facility Details:

State Facility Id: <input type="text"/>	Accreditation: <input type="text" value="No"/> *
Distinct Part Unit: <input type="text" value="None"/> *	No. Of Licensed Beds: <input type="text" value=""/> *
	Fiscal Year End Date: <input type="text" value=""/> *

Pharmacy Details:

Pharmacy Store Number: <input type="text"/>	National Association of Board of Pharmacy Number: <input type="text"/>
340B: <input type="text" value="No"/> *	Pharmacy Type: <input type="text" value="Mail Order"/> *
Pharmacy Volume: <input type="text" value="High"/> *	Unit Dose Pharmacy: <input type="text" value="No"/> *

Regional Support Network Details:

R. U. ID:

Figure 6 - Add Provider Location - Institutional

About the Add Provider Location Form

- Every Provider enrolling with an NPI must have an NPI Base Location. The NPI Base Location is used to anchor all of the Provider's NPI-related specializations and related details.

- For NPI Base Location, Managed Care Location, and for Social Services Locations, three addresses are required:
 - A “Location” address
 - A “Pay-To” address
 - A “Mailing” address
- For an NPI Servicing Location, two addresses are required:
 - A “Location” address
 - A “Mailing” address
- Mailing and pay-to addresses are subordinate to the location address.
- If a “Base Location” is not identified, the BPW step will be “Incomplete”.



Click the OK button to save the information and close the window, or Cancel to close the window without saving.



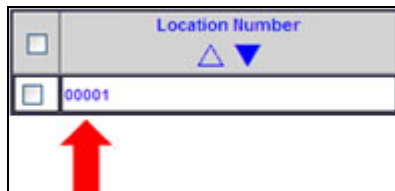
ProviderOne validates the information entered, saves and returns to the Locations List. The Locations List will display new locations.

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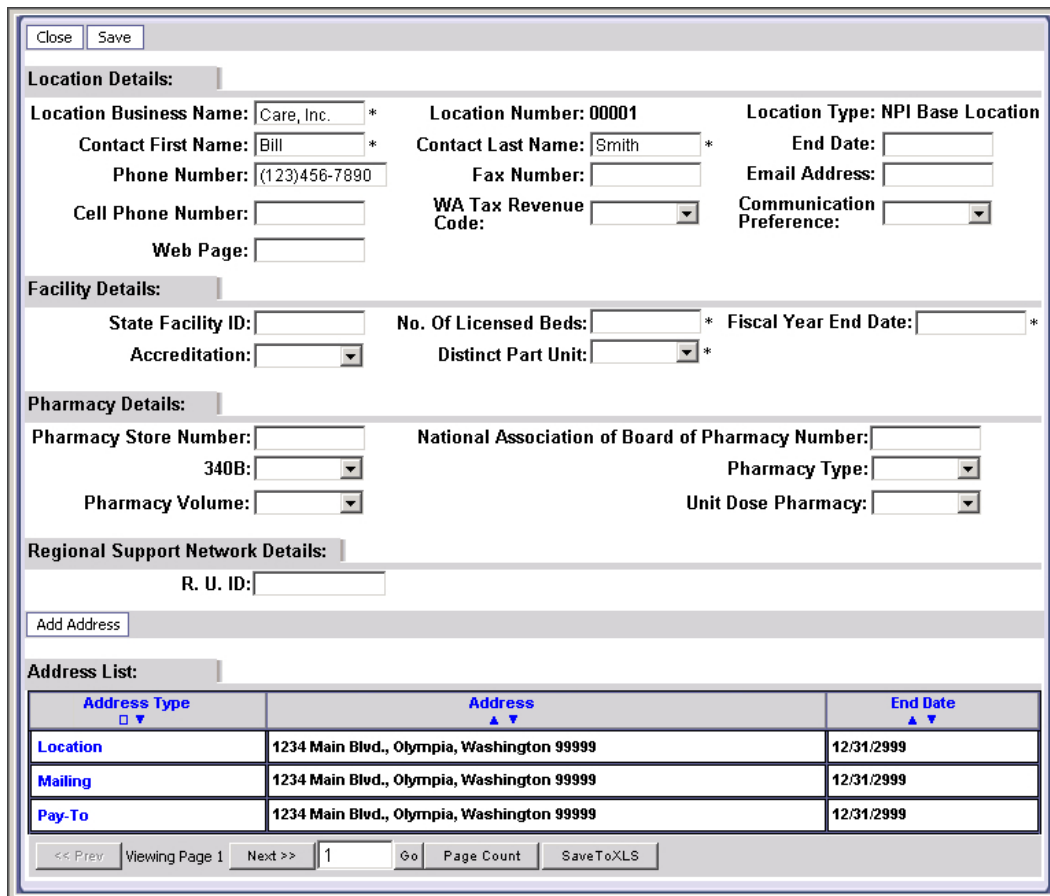
Modifying a Location Record



From the Locations List, click the link in the Location Number column.



ProviderOne displays the Location Details screen.



Close Save

Location Details:

Location Business Name: Care, Inc. * Location Number: 00001 Location Type: NPI Base Location
 Contact First Name: Bill * Contact Last Name: Smith * End Date:
 Phone Number: (123)456-7890 Fax Number: Email Address:
 Cell Phone Number: WA Tax Revenue Code: Communication Preference:
 Web Page:

Facility Details:

State Facility ID: No. Of Licensed Beds: * Fiscal Year End Date: *
 Accreditation: Distinct Part Unit: *

Pharmacy Details:

Pharmacy Store Number: National Association of Board of Pharmacy Number:
 340B: Pharmacy Type:
 Pharmacy Volume: Unit Dose Pharmacy:

Regional Support Network Details:

R. U. ID:

Add Address

Address List:

Address Type	Address	End Date
Location	1234 Main Blvd., Olympia, Washington 99999	12/31/2999
Mailing	1234 Main Blvd., Olympia, Washington 99999	12/31/2999
Pay-To	1234 Main Blvd., Olympia, Washington 99999	12/31/2999

<< Prev Viewing Page 1 Next >> 1 Go Page Count SaveToXLS

Figure 7 - Location Details for Institutions

About the Location Details Screen

- Use the Address List to add and edit location addresses.



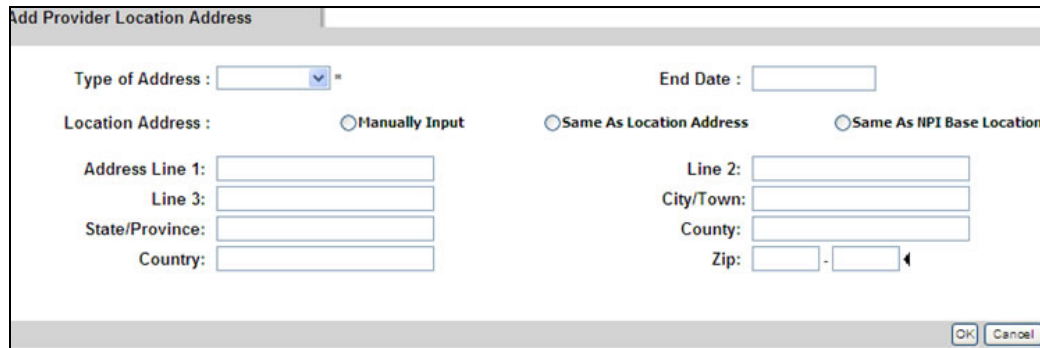
After making your changes, click the Save button to save, or the Close button to close the window without saving.

Add an Address to a Location



From the Location Details screen, click the Add Address button.

ProviderOne displays the Add Provider Location Address form.



The screenshot shows a web form titled "Add Provider Location Address". It contains the following fields and options:

- Type of Address :** A dropdown menu with a downward arrow and an asterisk.
- End Date :** A text input field.
- Location Address :** Three radio button options: Manually Input, Same As Location Address, and Same As NPI Base Location.
- Address Line 1 :** A text input field.
- Line 2 :** A text input field.
- Line 3 :** A text input field.
- City/Town :** A text input field.
- State/Province :** A text input field.
- County :** A text input field.
- Country :** A text input field.
- Zip :** A text input field with a hyphen and a right-pointing arrow.

At the bottom right of the form are two buttons: "OK" and "Cancel".

Figure 8 - Add Provider Location Address

About the Add Provider Location Address Form

- Selecting Same As Location Address or Same As NPI Base Location, copies the details of those locations to this form.



After completing the form, click the OK button to Save and return to the Location Details Screen or Click the Cancel button to close without saving.

Edit a Location Address



From the Location Details screen, click the link in the Address Type column.



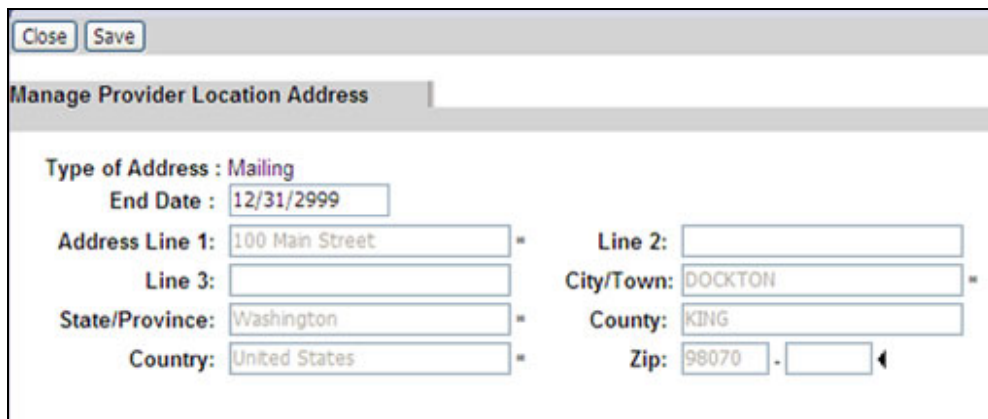
Address List:

Address Type
Location

A red arrow points to the 'Location' link in the table.



ProviderOne displays the Manage Provider Location Address form.



Close Save

Manage Provider Location Address

Type of Address : Mailing

End Date : 12/31/2999

Address Line 1: 100 Main Street = Line 2: =

Line 3: = City/Town: DOCKTON =

State/Province: Washington = County: KING

Country: United States = Zip: 98070 - =

Figure 9 - Manage Provider Location Address

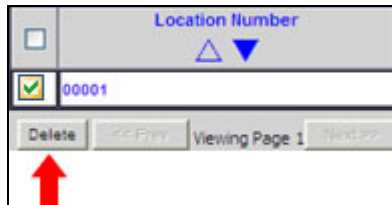


After completing the form, click the Save button to save and return to the Location Details screen or click the Close button to close without saving.

Deleting a Location



From the Locations List, check the box next to the record you want to delete and click the Delete button.



- When a location is deleted, all details associated with that location, including Address, Specialties, Licenses/Certifications will be deleted.

What happens next:



From the Locations List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step # :Add Locations	Required	02/06/2008	02/06/2008	Complete
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Add Specializations

Accessing the Specialty/Subspecialty List

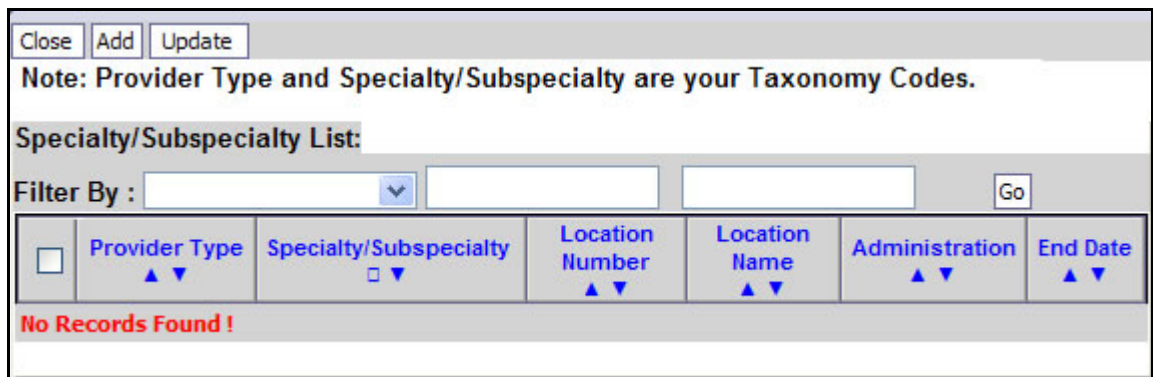


From the Business Process Wizard, click the Add Specializations link.

Step 3: Add Specializations



ProviderOne displays the Specialty/Subspecialty List.



Close Add Update

Note: Provider Type and Specialty/Subspecialty are your Taxonomy Codes.

Specialty/Subspecialty List:

Filter By : Go

<input type="checkbox"/>	Provider Type ▲ ▼	Specialty/Subspecialty □ ▼	Location Number ▲ ▼	Location Name ▲ ▼	Administration ▲ ▼	End Date ▲ ▼
No Records Found !						

Figure 10 - Specialty/Subspecialty List for Enrollment

About the Specialty/Subspecialty List for Enrollment

- The first time this list displays it will be blank.
- This list displays all specializations by location.

This page is intentionally blank.

Adding a Specialization



To add a new record, click the Add button.

ProviderOne displays the Add Specialty/Subspecialty form.

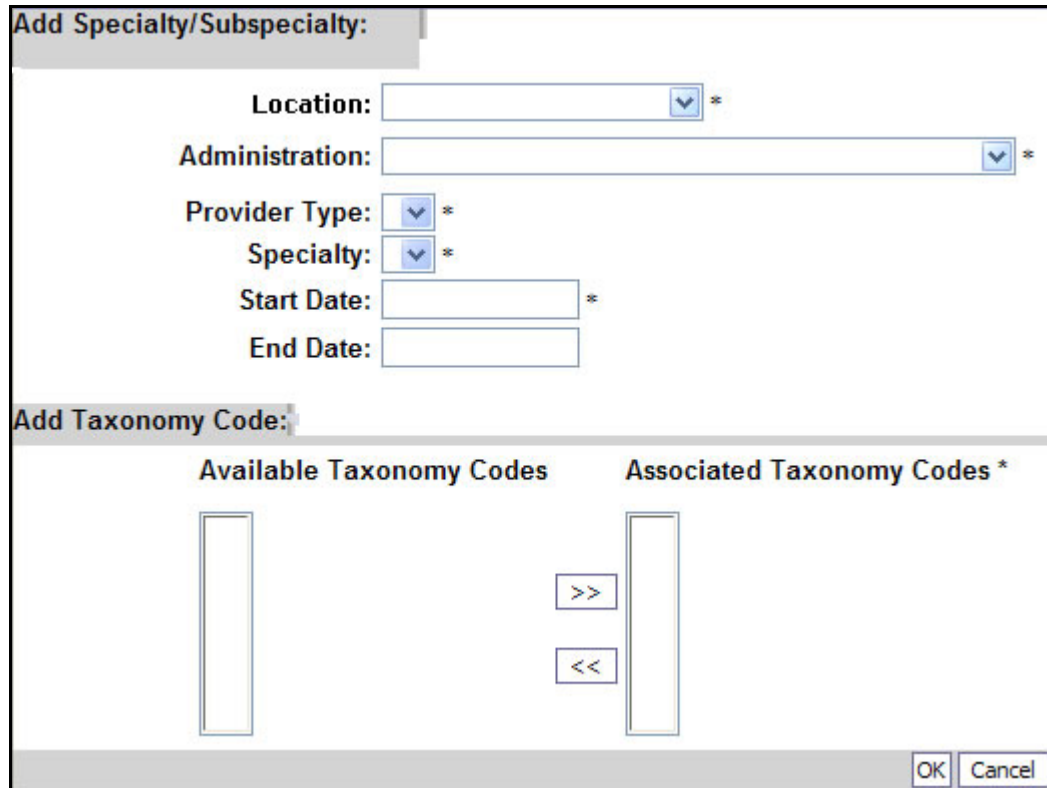


Figure 11 - Add Specialty/Subspecialty

About the Add Specialty/Subspecialty Form

- At least one Specialty must be selected and added to a Provider Location.
- To add a Specialty to all Provider Locations, select All from the Location drop-down.



Click the OK button to save the information and close the window, or Cancel to close the window without saving.

ProviderOne validates the information entered, saves and returns to the Specialty/Subspecialty List.

Modifying a Specialty/Subspecialty Record



From the Specialty/Subspecialty List, check the box next to the Specialty you wish to modify and click the Update button.



Close Add Update

Note: Provider Type and Specialty/Subspecialty are your Tax

Specialty/Subspecialty List:

Filter By : [dropdown]

<input type="checkbox"/>	Provider Type ▲ ▼	Specialty/Subspecialty □ ▼
<input checked="" type="checkbox"/>	22-Respiratory, Developmental, Rehabilitative and	78-Respiratory Therapist- Certified/C020 Care



ProviderOne displays the Manage Specialty/Subspecialty list.

Manage Specialty/Subspecialty:

Provider Type ▲ ▼	Specialty/Subspecialty □ ▼	Location Number ▲ ▼	Location Name ▲ ▼	Administration ▲ ▼	End Date ▲ ▼
22-Respiratory, Developmental, Rehabilitative and	78-Respiratory Therapist- Certified/C0205-Critical Care	00001	Casey Critical Care	HRSA	12/31/2999

Figure 12 - Manage Specialty/Subspecialty

About the Manage Specialty/Subspecialty List

- Only the End Date can be modified.



After making your changes, click the OK button to save, or the Cancel button to close the window without saving.

Deleting a Specialty/Subspecialty

Specialties and Subspecialties can only be deleted during the enrollment process.



From the Specialty/Subspecialty List, check the box next to the record you want to delete and click the Delete button.



Specialty/Subspecialty List:

Filter By :

<input type="checkbox"/>	Provider Type ▲ ▼
<input checked="" type="checkbox"/>	22-Respiratory, Developmental, Rehabilitative and

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What Happens Next:



From the Specialty/Subspecialty List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step 3: Add Specializations	Required	02/06/2008	02/06/2008	Complete
				↑

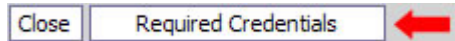
This page is intentionally blank.

View Required Credentials for Specializations

Accessing the Required Credentials For Specialization List



From the Business Process Wizard, click the Required Credentials button.



ProviderOne displays the Required Credentials For Specializations list.

Required Credentials For Specialization:			
Filter By : 01-License <input type="button" value="Go"/>			
Specialty/Subspecialty ▲ □	Provider Type ▲ ▼	Administration ▲ ▼	License ▲ ▼
84-Psychiatry & Neurology/N 0400-Neurology	20-Allopathic & Osteopathic Physicians	MHD	Graduation of Residency of Psychiatric Program Certificatio
84-Psychiatry & Neurology/N 0400-Neurology	20-Allopathic & Osteopathic Physicians	MHD	Professional License
84-Psychiatry & Neurology/N 0401-Addiction Medicine	20-Allopathic & Osteopathic Physicians	MHD	Graduation of Residency of Psychiatric Program Certificatio
84-Psychiatry & Neurology/N 0401-Addiction Medicine	20-Allopathic & Osteopathic Physicians	MHD	Professional License

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2

Page Count

Figure 13 - Required Credentials For Specialization



To view License, Identifier and Training requirements, use the Filter By drop-down.

Required Credentials For Specialization:	
Filter By :	<div style="border: 1px solid black; padding: 2px;"> 01-License ▼ 02-Identifier 03-Training </div> <input type="button" value=" Go"/>



When finished, click the Cancel button to close the window.

This page is intentionally blank.

Add Ownership Details

Accessing the Owners List



From the Business Process Wizard, click the Add Ownership Details link.

Step #: Add Ownership Details



ProviderOne displays the Owners List.

Close	Add				
Owners List:					
Filter By :	<input type="text"/> <input type="text"/> <input type="text"/> <input type="button" value="Go"/>				
Provide the list of owners owning 5% or more of the business.					
<input type="checkbox"/>	Owner Id	Owner Name	Owner Type	Start Date	End Date
<input type="checkbox"/>	777-88-3322	Casey, Benjamin	Individual Ownership	01/01/2008	12/31/2999
<input type="button" value="Delete"/>	<input type="button" value="Prev"/>	Viewing Page 1	<input type="button" value="Next"/>	1	<input type="button" value="Go"/> <input type="button" value="Page Count"/> <input type="button" value="SaveToXLS"/>

Figure 14 - Owners List

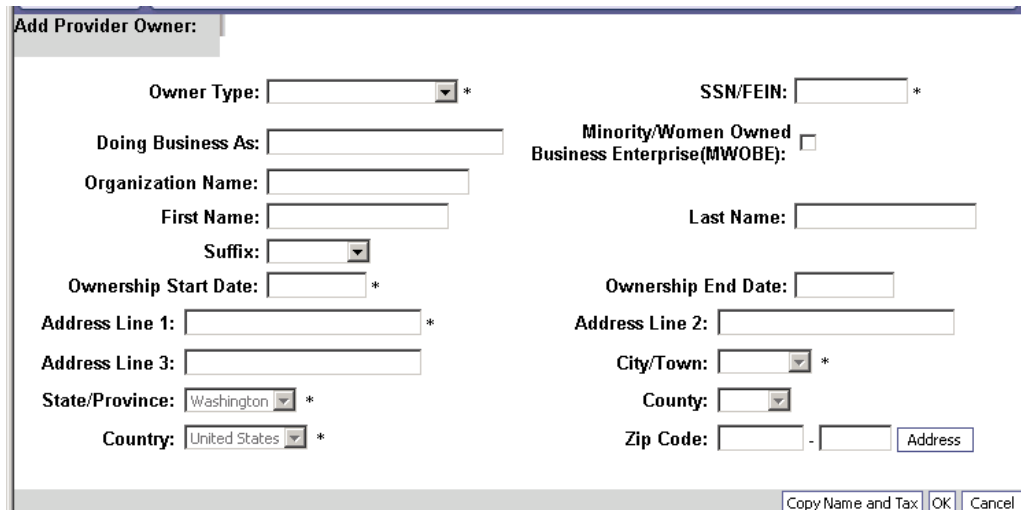
This page is intentionally blank.

Adding an Owner



To add a new record, click the Add button.

ProviderOne displays the Add Provider Owner form.



Add Provider Owner:

Owner Type: *

SSN/FEIN: *

Doing Business As:

Minority/Women Owned Business Enterprise(MWOBE):

Organization Name:

First Name:

Last Name:

Suffix:

Ownership Start Date: *

Ownership End Date:

Address Line 1: *

Address Line 2:

Address Line 3:

City/Town: *

State/Province: Washington *

County:

Country: United States *

Zip Code: -

Figure 15 - Add Provider Owner

About the Add Provider Owner Form

- If Owner Type is Organization, use FEIN.
- If Owner Type is Individual, use SSN (do not use dashes).
- The Start Date is the first day of ownership.
- To copy the First Name, Last Name, and SSN/FEIN fields from the Basic Information page to this page, click the Copy Name and Tax button.



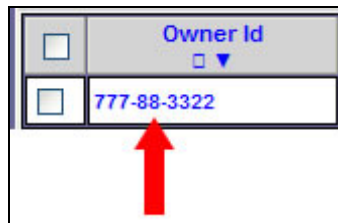
Click the OK button to save the information and close the window, or Cancel to close the window without saving.

ProviderOne validates the information entered, saves and returns to the Owners list. The Owners List will display new owners.

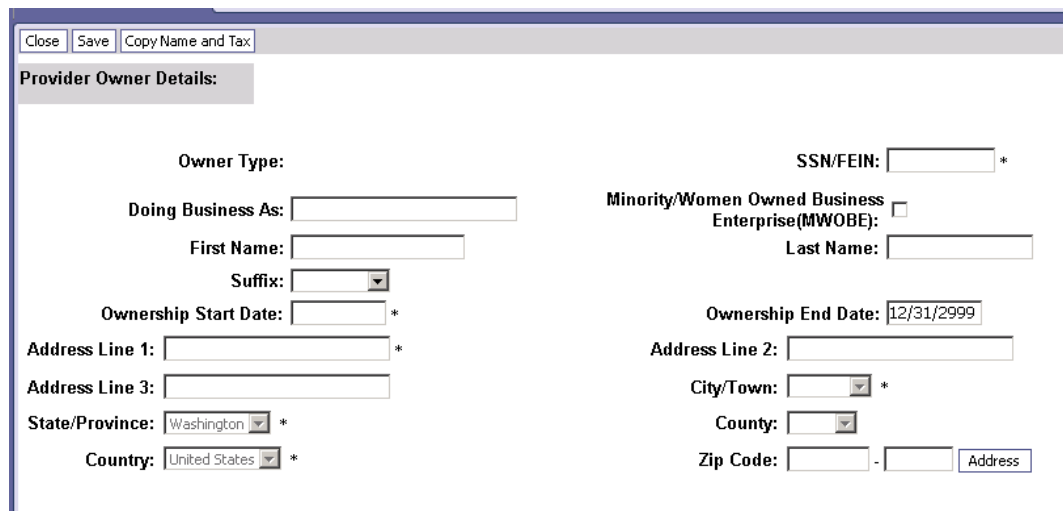
Modifying an Owner Record



From the ProviderOne Owners list, click the link in the Owner Id column.



ProviderOne displays the Provider Owner Details form.



Close Save Copy Name and Tax

Provider Owner Details:

Owner Type: _____

Doing Business As: _____

First Name: _____

Suffix: _____

Ownership Start Date: _____ *

Address Line 1: _____ *

Address Line 3: _____

State/Province: Washington *
Country: United States *

SSN/FEIN: _____ *

Minority/Women Owned Business Enterprise(MWBE):

Last Name: _____

Ownership End Date: 12/31/2999

Address Line 2: _____

City/Town: _____ *

County: _____

Zip Code: _____ - _____ Address

Figure 16 - Provider Owner Details

About the Provider Owner Details Form

- To change the address, click the Address button.
- To copy the First Name, Last Name, and SSN/FEIN fields from the Basic Information page to this page, click the Copy Name and Tax button.



After making your changes, click the Save button to save, or the Close button to close the window without saving.

Deleting an Owner Record



From the Owner list, check the box next to the record you want to delete and click the Delete button.

<input type="checkbox"/>	Owner Id	Owner Name
<input checked="" type="checkbox"/>	777-88-3322	Casey, Benjamin

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What happens Next:



From the Owners List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step #	Add Ownership Details	Required	02/06/2008	02/06/2008	Complete
					

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Add Licenses and Certifications

Accessing the License/Certification List

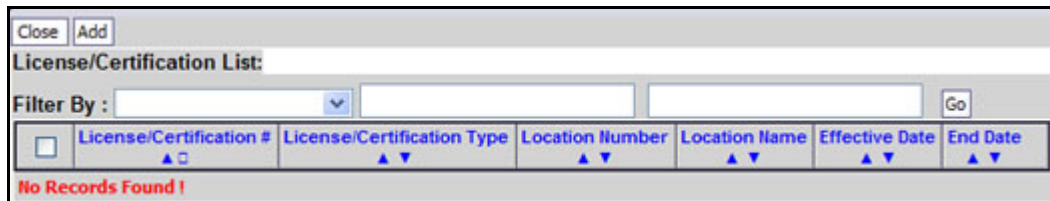


From the Business Process Wizard, click the Add Licenses and Certifications link.

Step #: Add Licenses and Certifications



ProviderOne displays the License/Certification List.



<input type="checkbox"/>	License/Certification #	License/Certification Type	Location Number	Location Name	Effective Date	End Date
No Records Found!						

Figure 17 - License/Certification List for Enrollment

About the License/Certification List for Enrollment

- The first time this list displays it will be blank.
- This list displays all Licenses/Certifications by location.

This page is intentionally blank.

Adding a License/Certification



To add a new record, click the Add button.

ProviderOne displays the Add License/Certification form.

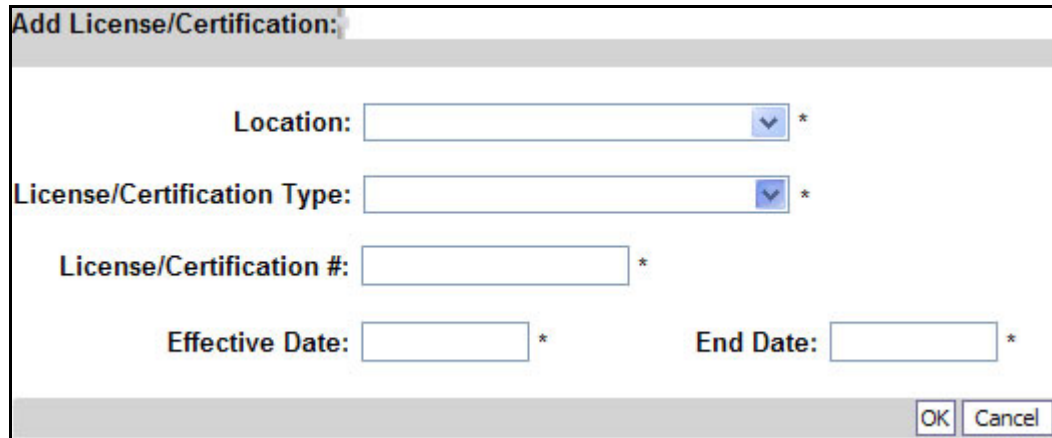


Figure 18 - Add License/Certification

About the Add License/Certification Form

- To add a License/Certification to all Provider Locations, select All from the Location drop-down.



Click the OK button to save the information and close the window, or Cancel to close the window without saving.



ProviderOne validates the information entered, saves and returns to the License/Certification List.

Modifying a License/Certification Record



From the License/Certification List, click the hyperlink in the License/Certification# column.

<input type="checkbox"/>	License/Certification # ▲ □	License/Certification Type ▲ ▼
<input type="checkbox"/>	258930413 ←	Professional License



ProviderOne displays the Manage License/Certification form.

Manage License/Certification :

Location: ▼ *

License/Certification Type: ▼ *

License/Certification #: *

Effective Date: * End Date: *

Figure 19 - Manage License/Certification




After making your changes, click the OK button to save, or the Cancel button to close the window without saving.

Deleting a License/Certification

Licenses and Certifications can only be deleted during the enrollment process.



From the License/Certification List, check the box next to the record you want to delete and click the Delete button.



License/Certification List:

Filter By :

<input type="checkbox"/>	License/Certification #	License/Certification Type
<input checked="" type="checkbox"/>	258930413	Professional License

Viewing Page 1

What Happens Next:



From the License/Certification List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step #: Add Licenses and Certifications	Optional	02/06/2008	02/06/2008	Complete
---	----------	------------	------------	----------



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Add Training and Education

Accessing the Training/Education List

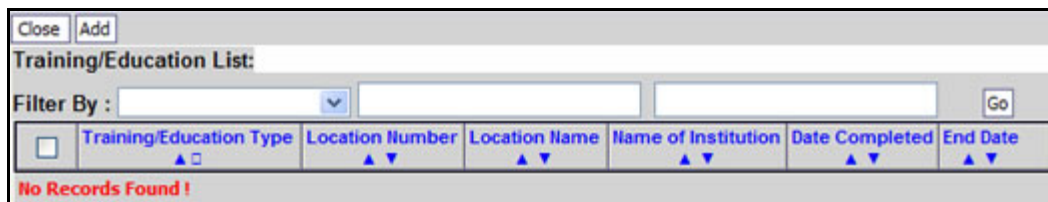


From the Business Process Wizard, click the Add Training and Education link.

Step #: Add Training and Education



ProviderOne displays the Training/Education List.



The screenshot shows a web interface for the Training/Education List. At the top left are 'Close' and 'Add' buttons. Below them is the title 'Training/Education List:'. A 'Filter By:' section contains a dropdown menu, two text input fields, and a 'Go' button. Below the filter section is a table with the following columns: 'Training/Education Type', 'Location Number', 'Location Name', 'Name of Institution', 'Date Completed', and 'End Date'. Each column has a small triangle icon below it, indicating it is a sortable column. The table is currently empty, and a red message 'No Records Found!' is displayed at the bottom of the table area.

Figure 20 - Training/Education List for Enrollment

About the Training/Education List for Enrollment

- The first time this list displays it will be blank.

This page is intentionally blank.

Adding a Training/Education Record



To add a new record, click the Add button.

ProviderOne displays the Add Training/Education form.

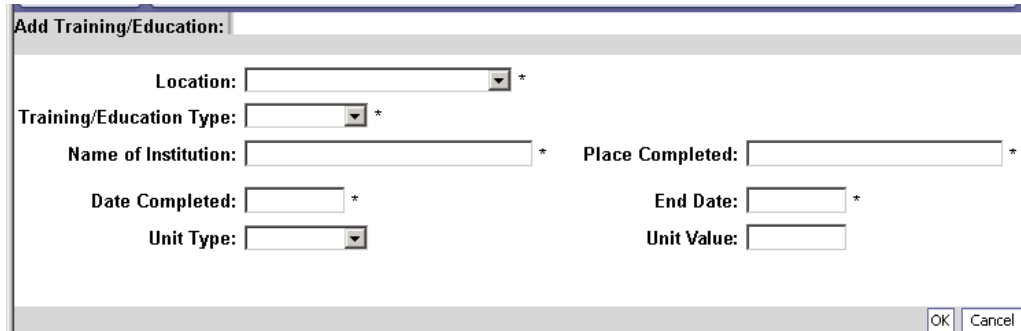


Figure 21 - Add Training/Education

About the Add Training/Education Form

- To add a Training/Education to all Provider Locations, select All from the Location drop-down.



Click the OK button to save the information and close the window, or Cancel to close the window without saving.



ProviderOne validates the information entered, saves and returns to the Training/Education List.

Modifying a Training/Education Record

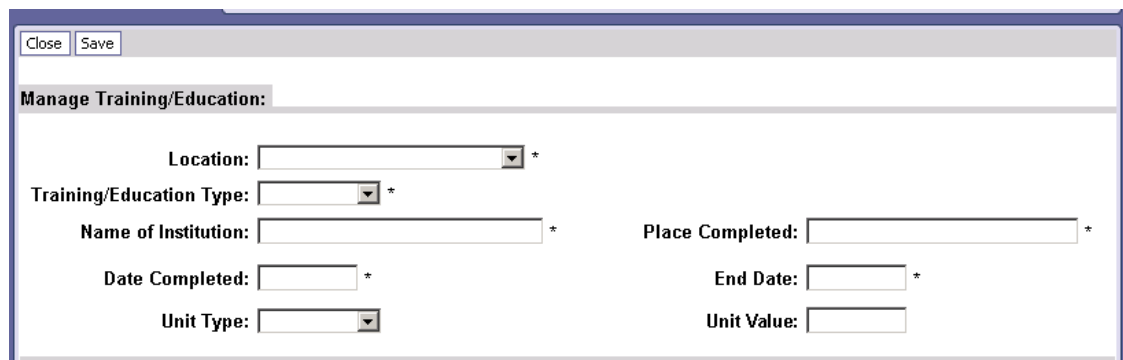


From the Training/Education List, click the hyperlink in the Training/Education Type column.

<input type="checkbox"/>	Training/Education Type ▲ □	Location Number ▲ ▼
<input type="checkbox"/>	SSPS Training ←	00001



ProviderOne displays the Manage Training/Education form.



The screenshot shows a web form titled "Manage Training/Education:" with a "Close" and "Save" button at the top left. The form contains several fields, each with an asterisk indicating it is required:

- Location: [dropdown menu] *
- Training/Education Type: [dropdown menu] *
- Name of Institution: [text input] *
- Place Completed: [text input] *
- Date Completed: [text input] *
- End Date: [text input] *
- Unit Type: [dropdown menu]
- Unit Value: [text input]

Figure 22 - Manage Training/Education



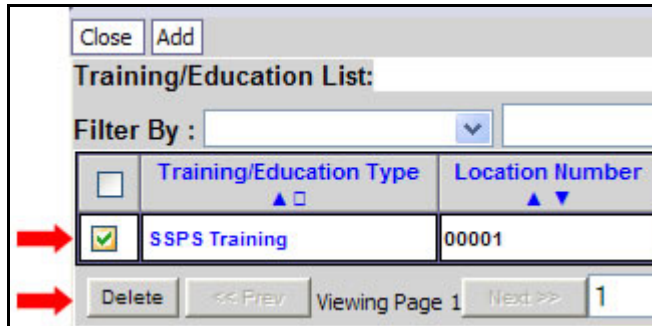
After making your changes, click the Save button to save, or the Close button to close the window without saving.

Deleting a Training/Education

Licenses and Certifications can only be deleted during the enrollment process.



From the Training/Education List, check the box next to the record you want to delete and click the Delete button.



Close Add

Training/Education List:

Filter By : [dropdown]

<input type="checkbox"/>	Training/Education Type ▲ □	Location Number ▲ ▼
<input checked="" type="checkbox"/>	SSPS Training	00001

Delete << Prev Viewing Page 1 Next >> 1

What Happens Next:




From the Training/Education List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step #: Add Training and Education	Optional	02/06/2008	02/06/2008	Complete
------------------------------------	----------	------------	------------	----------



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Add Identifiers

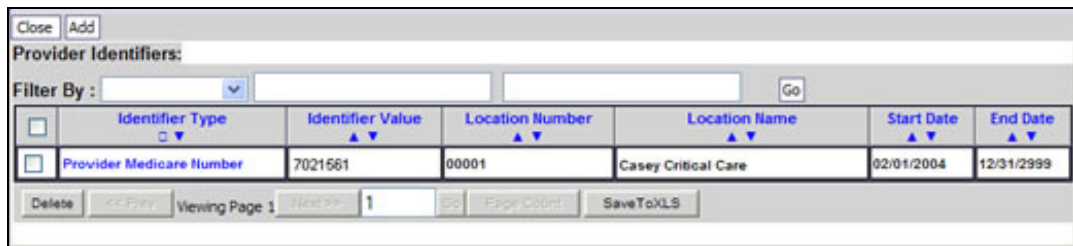
Accessing the Provider Identifiers List



From the Business Process Wizard, click the Add Identifiers link.



ProviderOne displays the Provider Identifiers List.



Identifier Type	Identifier Value	Location Number	Location Name	Start Date	End Date
Provider Medicare Number	7021561	00001	Casey Critical Care	02/01/2004	12/31/2999

Figure 23 - Provider Identifiers List

About the Provider Identifiers List

- The first time this list displays it will be blank.
- Each row displays a specific identifier for a location.
- Locations may have more than one identifier.

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Adding an Identifier



To add a new record, click the Add button.

ProviderOne displays the Add New Identifier form.

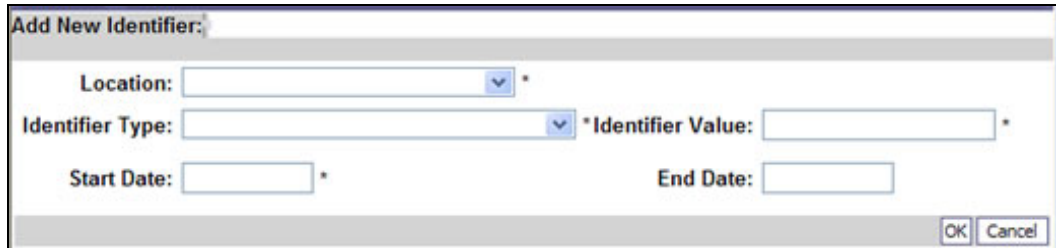


Figure 24 - Add New Identifier

About the Add New Identifier Form

- The Location drop-down will display all current Provider locations.
- To apply the Identifier to All locations, click the All option from the Location drop-down list.




Click the OK button to save the information and close the window, or Cancel to close the window without saving.

Modifying a Provider Identifier Record

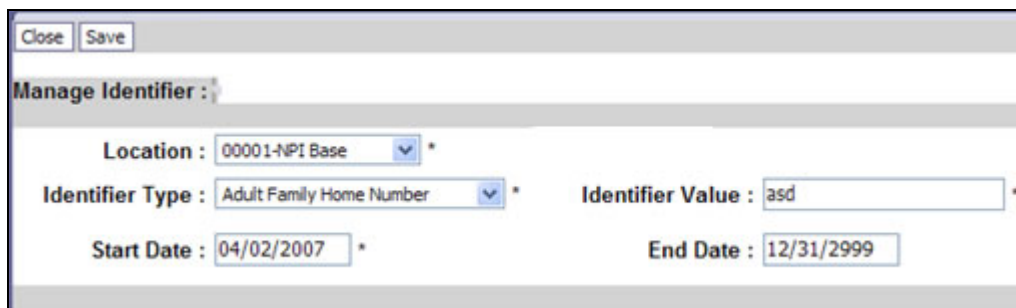


From the ProviderOne Provider Identifiers list, click the link in the Identifier Type column.

<input type="checkbox"/>	Identifier Type ▾
<input type="checkbox"/>	Provider Medicare Number



ProviderOne displays the Manage Identifier page.



The screenshot shows a web form titled "Manage Identifier :". At the top left are "Close" and "Save" buttons. The form contains the following fields:

- Location : 00001-NPI Base ▾ *
- Identifier Type : Adult Family Home Number ▾ *
- Identifier Value : asd *
- Start Date : 04/02/2007 *
- End Date : 12/31/2999

Figure 25 - Manage Identifier




After making your changes, click the Save button. Click the Close button to close the Manage Identifier page.

Deleting a Provider Identifier Record



From the Provider Identifiers list, check the box next to the record you want to delete and click the Delete button.

<input type="checkbox"/>	Identifier Type
<input checked="" type="checkbox"/>	Provider Medicare Number
<input type="button" value="Delete"/> <input type="button" value="« Prev"/> Viewing Page 1	



What happens Next:



From the Provider Identifiers list, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step # :Add Identifiers	Required	02/06/2008	02/06/2008	Complete
-------------------------	----------	------------	------------	----------



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Add Contract Details

Accessing the Payment Details List

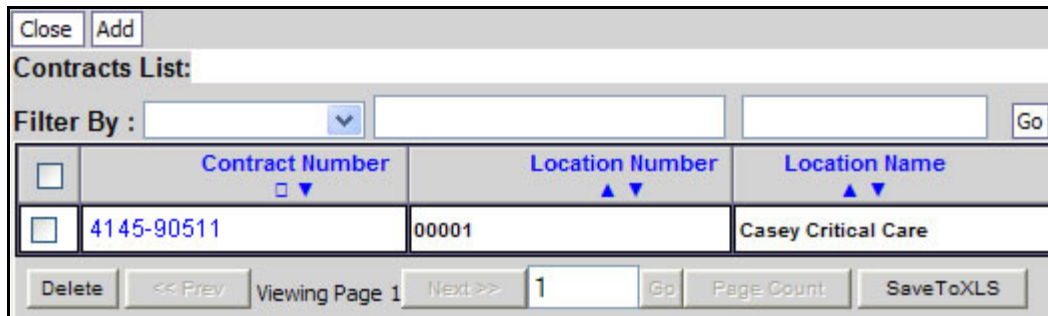


From the Business Process Wizard, click the Add Contracts link.

Step # :Add Contract Details



ProviderOne displays the Contracts List.



The screenshot shows a web interface for the 'Contracts List'. At the top, there are 'Close' and 'Add' buttons. Below is a search area with 'Filter By:' followed by a dropdown menu, two text input fields, and a 'Go' button. The main area is a table with columns: 'Contract Number', 'Location Number', and 'Location Name'. A single row is visible with the values '4145-90511', '00001', and 'Casey Critical Care'. At the bottom, there are navigation buttons: 'Delete', '<< Prev', 'Viewing Page 1', 'Next >>', '1', 'Go', 'Page Count', and 'SaveToXLS'.

<input type="checkbox"/>	Contract Number	Location Number	Location Name
<input type="checkbox"/>	4145-90511	00001	Casey Critical Care

Figure 26 - Contracts List

About the Contracts List

- The first time this list displays it will be blank.
- Provider Contracts are listed by location.

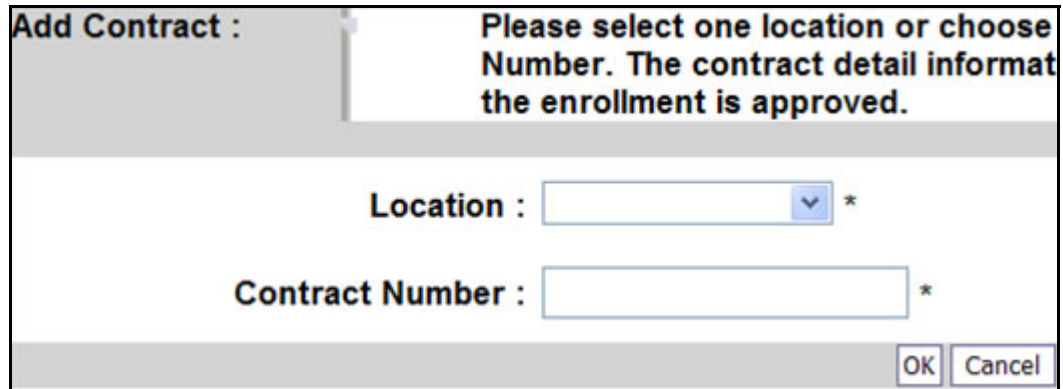
This page is intentionally blank.

Adding a Contract



To add a new record, click the Add button.

ProviderOne displays the Add Contract form.



Add Contract : Please select one location or choose Number. The contract detail information the enrollment is approved.

Location : *

Contract Number : *

Figure 27 - Add Contract

About the Add Contract Form

- Duplicate numbers are not allowed within a location.
- To apply the contract to all locations, click the All option from the Location drop-down.



Click the OK button to save the information and close the window, or Cancel to close the window without saving.



ProviderOne validates the information entered, saves and returns to the Contracts list. The list will display new contracts.

Modifying a Contract Record

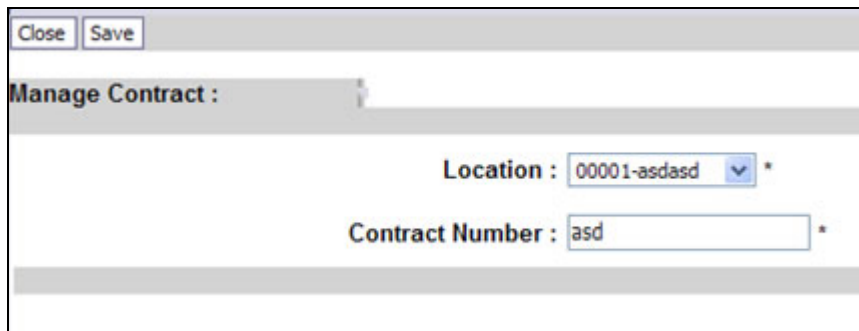


From the Contracts List, click the link in the Contract Number column.

<input type="checkbox"/>	Contract Number
<input type="checkbox"/>	4145-90511



ProviderOne displays the Manage Contract form.



The screenshot shows a web form titled "Manage Contract :". At the top left, there are "Close" and "Save" buttons. Below the title, there are two input fields: "Location : 00001-asdasd" with a dropdown arrow and an asterisk, and "Contract Number : asd" with an asterisk.

Figure 28 - Manage Contract

About the Manage Contract Form

- Duplicate contract numbers are not allowed within a location.




After making your changes, click the Save button to save, or the Close button to close the window without saving.

Deleting a Contract Record



From the Contracts List, check the box next to the record you want to delete and click the Delete button. The data is removed from the Enrollment Staging Area and will not be written to the ProviderOne database.

<input type="checkbox"/>	Contract Number
<input checked="" type="checkbox"/>	4145-90511
<input type="button" value="Delete"/> <input type="button" value=" << Prev"/> Viewing Page 1 <input type="button" value=" Next >>"/>	



What happens Next:




From the Contracts List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step # :Add Contract Details	Required	02/06/2008	02/06/2008	Complete
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Add Federal Tax Details

W-9 information is required and is collected for all Providers.

W-4 information is collected for Providers who have the appropriate Specializations.

W-5 information is optionally collected for Providers who complete a W-4 form.

Accessing the Federal Tax Details Page



From the Business Process Wizard, click the Add Federal Tax Details link.

Step #: Add Federal Tax Details



ProviderOne displays the Federal Tax Details page.

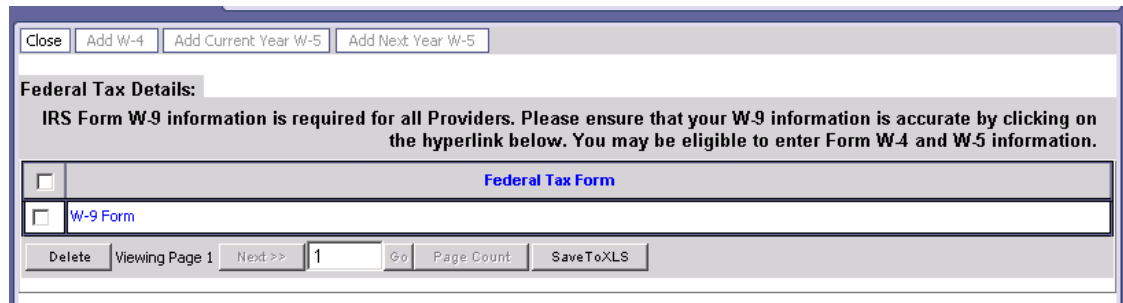


Figure 29 - Federal Tax Details Page

About the Federal Tax Details Page


- The W-9 Form is required for all Providers.
- If you are eligible for W-4 or W-5, the buttons will be active.
If you are not eligible for W-4 or W-5, the buttons will be inactive.

This page is intentionally blank.

Adding Form W-9 Information



To access the W-9 Form, click the W-9 hyperlink.

<input type="checkbox"/>	Federal Tax Form
<input type="checkbox"/>	W-9 Form 



ProviderOne displays the Form W-9 page.

Form W-9: To update/correct the data in the disabled fields, please go back to Basic Information step.

Legal Name: <input type="text" value="Casey, Benjamin"/>	SSN/FEIN: <input type="text" value="555-55-5555"/>
W-9 Entity Type: <input type="text" value="Individual/Sole Proprietor"/>	UBI: <input type="text" value="8988773342"/>
Business Name: <input type="text"/>	
Exempt from Backup Withholding: <input type="checkbox"/>	
Address:	
Use Pay-To address from the following location: <input type="text" value="---SELECT---"/>	
Address Line 1: <input type="text"/> *	Line 2: <input type="text"/>
Line 3: <input type="text"/>	City/Town: <input type="text"/> *
State/Province: <input type="text"/> *	County: <input type="text"/>
Country: <input type="text"/> *	Zip: <input type="text"/> - <input type="text"/> <input type="button" value="Address"/>
Phone Number: <input type="text"/> *	
<input type="button" value="OK"/> <input type="button" value="Cancel"/>	

Figure 30 - Form W-9



Complete the form and click the OK button to save the information.



ProviderOne displays the Federal Tax Details page.

Adding Form W-5 Information (if eligible)



Click the Add Current Year W-5 or Add Next Year W-5 button.

ProviderOne displays the Form W-5 page.

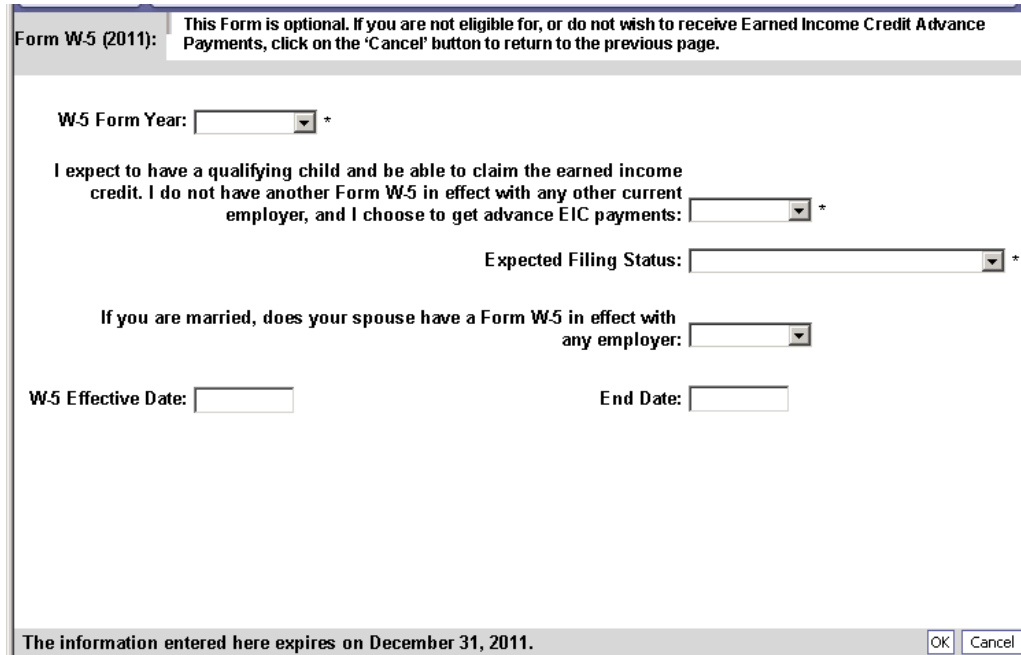


Figure 31 - Form W-5



Complete the form and click the OK button to save the information.

ProviderOne displays the Federal Tax Details page, a W5 Form record is added.

Adding Form W-4 Information (if eligible)



Click the Add W-4 button.

ProviderOne displays the Form W-4 page.

Form W-4: **Federal Withholding (W4) will only to certain services covered under Collective Bargaining Agreement. This form is optional. If you do not wish to have any Federal Income Tax Withheld, click on the 'Cancel' button to return to the previous page. Instructions on how to complete this page are on the IRS W-4 Form. you must turn in a complete, unaltered, signed W-4 for the changes to occur.**

Home Address:

Address Line 1: <input type="text"/> *	Address Line 2: <input type="text"/>
Address Line 3: <input type="text"/>	City/Town: <input type="text"/> *
State/Province: <input type="text"/> *	County: <input type="text"/>
Country: <input type="text"/> *	Zip Code: <input type="text"/> - <input type="text"/> <input type="button" value="Address"/>

Tax Form Year: <input type="text"/> *	(If married, but legally seperated, or spouse is a nonresident alien, select "Single")
Filing Status: <input type="text"/> *	
Number of Allowances: <input type="text"/> *	Additional Amount Withheld: <input type="text"/> *
I Claim Exemption from Withholding: <input type="checkbox"/>	
Tax Form Year Effective Date: <input type="text"/>	Tax Form Year End Date: <input type="text"/> *
IRS Lock Letter Exists: <input type="checkbox"/>	IRS Lock Letter Effective Date: <input type="text"/>
Request cancellation of Withholding in Writing: <input type="checkbox"/>	Request cancellation of Withholding in Writing Date: <input type="text"/>

Figure 32 - Form W-4



Complete the form and click the OK button to save the information.

ProviderOne displays the Federal Tax Details page, a W4 Form record is added.

Modifying a Tax Form Record



From the Federal Tax Details list, click the link in the hyperlink of the form you wish to modify.

<input type="checkbox"/>	Federal Tax Form
<input type="checkbox"/>	W-9 Form ←
<input type="checkbox"/>	W-4 Form ←
<input type="checkbox"/>	W-5 Form ←



ProviderOne displays the appropriate Tax Form page.



After making your changes, click the OK button to save, or the Cancel button to close the window without saving.

Deleting a Tax Form Record

Do not delete the W-9 Form record.



From the Federal Tax Details list, check the box next to the record you want to delete and click the Delete button.

<input type="checkbox"/>	Federal Tax Form
<input type="checkbox"/>	W-9 Form
<input type="checkbox"/>	W-4 Form
<input checked="" type="checkbox"/>	W-5 Form
<input type="button" value="Delete"/> <input type="button" value=" << Prev"/> Viewing Page 1 <input type="button" value=" Next >>"/> <input type="text" value="1"/>	

What happens next:



From the Provider Identifiers list, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step #: Add Federal Tax Details	Required	02/06/2008	02/06/2008	Complete
				

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Add Invoice Details

Accessing the Invoice Preferences List

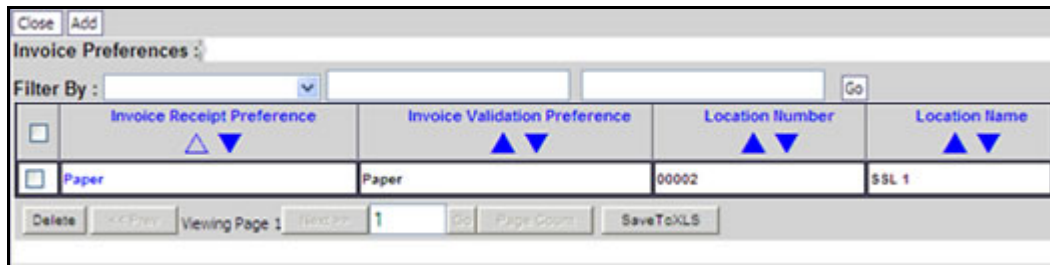


From the Business Process Wizard, click the Add Invoice Details link.

Step # : Add Invoice Details



ProviderOne displays the Invoices Preferences for Enrollment list.



<input type="checkbox"/>	Invoice Receipt Preference	Invoice Validation Preference	Location Number	Location Name
<input type="checkbox"/>	Paper	Paper	00002	SSL 1

Additional interface elements visible: Close, Add, Filter By, Go, Delete, Viewing Page 1, Page Count, SaveToXLS.

Figure 33 - Invoice Preferences List

About the Invoice Preference List

- The first time this list displays it will be blank.
- Invoice preferences apply to Provider locations.
- Each row of the Invoice Preferences list refers to a single Provider location.
- Each Provider location can have one, and only one, Invoice Preference record.

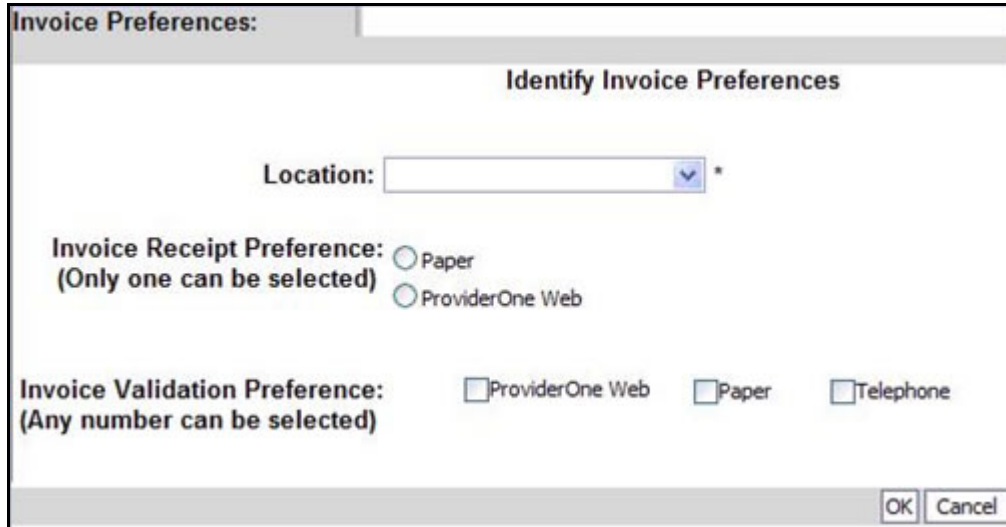
This page is intentionally blank.

Adding an Invoice Preference



To add a new record, click the Add button.

ProviderOne displays the Invoice Preferences Enrollment form.



The screenshot shows a window titled "Invoice Preferences:" with a sub-header "Identify Invoice Preferences". It contains a "Location:" dropdown menu with a blue arrow and an asterisk. Below this are two sections: "Invoice Receipt Preference: (Only one can be selected)" with radio buttons for "Paper" and "ProviderOne Web"; and "Invoice Validation Preference: (Any number can be selected)" with checkboxes for "ProviderOne Web", "Paper", and "Telephone". At the bottom right are "OK" and "Cancel" buttons.

Figure 34 - Add Invoice Preferences

About the Add Invoice Preference Form

- To apply the invoice preferences to all locations, select All from the Location dropdown. ProviderOne will automatically create a separate record for each location.



Click the OK button to save the information and close the window, or Cancel to close the window without saving.

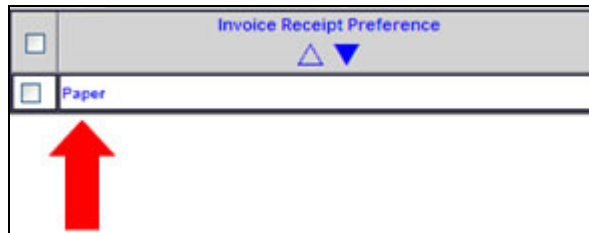


ProviderOne validates the information entered, saves and returns to the Adding Invoices Enrollment list. The Invoice Preferences List will be updated.

Modifying an Invoice Preference Record



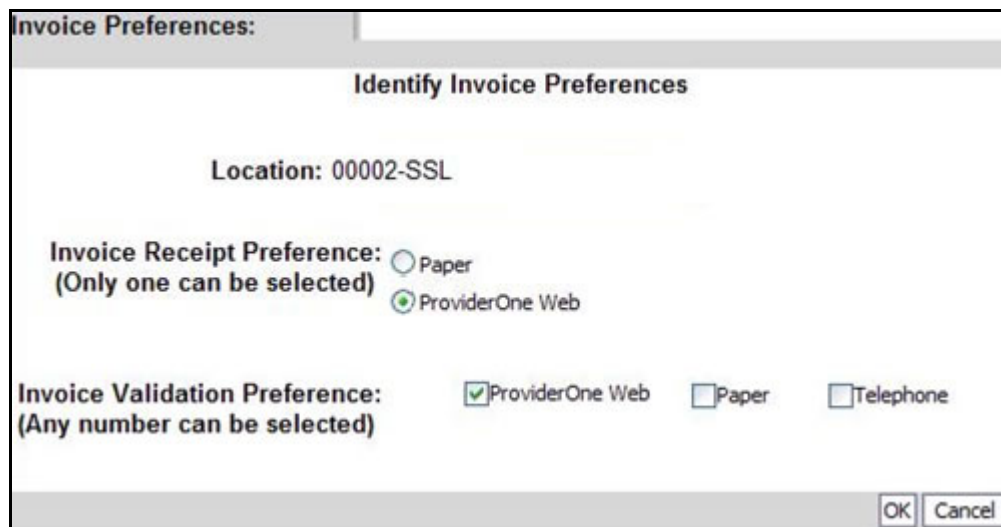
From the ProviderOne Invoice Preferences list, click the link in the Invoice Receipt Preference column.



<input type="checkbox"/>	Invoice Receipt Preference
<input type="checkbox"/>	Paper



ProviderOne displays the Update Invoice Preferences form.



Invoice Preferences:

Identify Invoice Preferences

Location: 00002-SSL

Invoice Receipt Preference: (Only one can be selected)

Paper

ProviderOne Web

Invoice Validation Preference: (Any number can be selected)

ProviderOne Web Paper Telephone

OK Cancel

Figure 35 - Update Invoice Preferences

About the Update Invoice Preference Form

- Once a record is created, the location value cannot be changed.

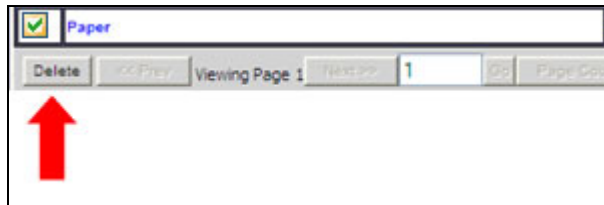


After making your changes, click the OK button to save, or the Cancel button to close the window without saving.

Deleting an Invoice Preference Record



From the Invoices Preferences list, check the box next to the record you want to delete and click the Delete button.



What happens Next:




From the Invoices Preference List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step 10: Add Invoice Details	Optional	02/06/2008	02/06/2008	Complete
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EDI Submission Method

Accessing the EDI Submission Details Page



From the Business Process Wizard, click the Add EDI Submission Details link.

Step # : Add EDI Submission Method



ProviderOne displays the EDI Submission Details page.

EDI Submission Details: You may check multiple Modes of Submission. NPI is required for all selections.

If Web Batch and/or FTP Secured Batch are selected, you must complete and mail a new ProviderOne Trading Partner Agreement.

Mode of Submission: Web Batch Billing Agent/Clearinghouse FTP Secured Batch Web Interactive

Status: In Review

Method	When to Use
Web Batch	For upload/download of files in ProviderOne
Billing Agent/Clearinghouse	For providers who use a 3rd party to bill
FTP Batch	For submitting files via an SFTP site
Web Interactive	For entering (keying) claims directly into ProviderOne

- Your EDI submission method is "Web Batch" if you currently upload and download batch files using WaMedWeb. This method is often used by providers who submit their own HIPAA batch transactions. It allows a maximum file size of 50MB.
- Your EDI submission method is "FTP Secured Batch" if you submit and retrieve batches at a secure web folder assigned to you by DSHS. This method was designed with clearinghouses and billing agents in mind. It allows a maximum file size of 100 MB.

OK Cancel

Figure 36 - EDI Submission Details

Selecting EDI Submission Method(s)



Place a check in the box next to the EDI Submission Method(s) you will use and click the OK button.

What Happens Next:



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step # : Add EDI Submission Method	Optional	02/06/2008	02/06/2008	Complete
				

Add EDI Billing Software Details

Accessing the EDI Billing Software Information List



From the Business Process Wizard, click the Add EDI Billing Software Details link.

Step # : Add EDI Billing Software Details



ProviderOne displays the EDI Billing Software Information list.

Close		Add		EDI Billing Software Information:			
Filter By :							Go
<input type="checkbox"/>	Software Name	Software Version	Software Vendor Name	Vendor Contact Title	Vendor Contact Name	Vendor Contact Phone Number	End Date
No Records Found !							

Figure 37 - EDI Billing Software Information for Enrollment

About the EDI Billing Software Information for Enrollment List

- The first time this list displays it will be blank.

This page is intentionally blank.

Adding an EDI Billing Software Record



To add a new record, click the Add button.

ProviderOne displays the Add EDI Billing Software Information page.

Add EDI Billing Software Information:

Software Vendor Company Name: *

Software Product Name: * Software Version: *

Software Protocol: * *<--See the note at the bottom of the page.*

Element Delimiter: * Default Delimiter * (asterisk)

Segment Delimiter: ~ Default Delimiter ~ (tilde)

Sub-Element Delimiter: : Default Delimiter : (colon)

Start Date: * End Date:

Status:

Software Vendor Contact Information:

Contact Title: *

Contact First Name: * Contact Last Name: *

Phone Number: * Fax Number:

Email Address:

Address Line 1: Address Line 2:

Address Line 3:

State/Province: City/Town:

Country: County:

Zip Code: -

Note:

- If "Web Batch" was chosen in step 11, indicate "Web Batch" in the Software Protocol field.
- If "FTP Secured Batch" was chosen in step 11, indicate "FTP Secured Batch" in the Software Protocol field.
- If both were chosen, indicate "Web Batch, FTP" in the software protocol field.

Figure 38 - Add EDI Billing Software Information for Enrollment

About the Add EDI Billing Software Information for Enrollment Page

- To add an Address, click the Address button. The Add Address form will display.

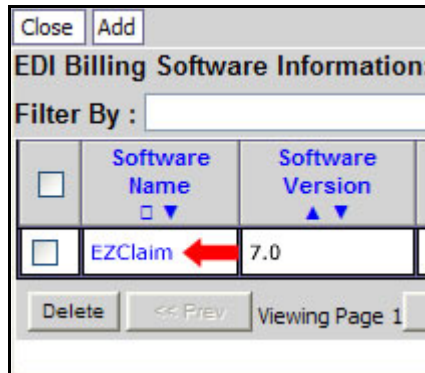


After completing the form, click the OK button to save the information and close the window, or Cancel to close the window without saving.

Modifying an EDI Billing Software Record



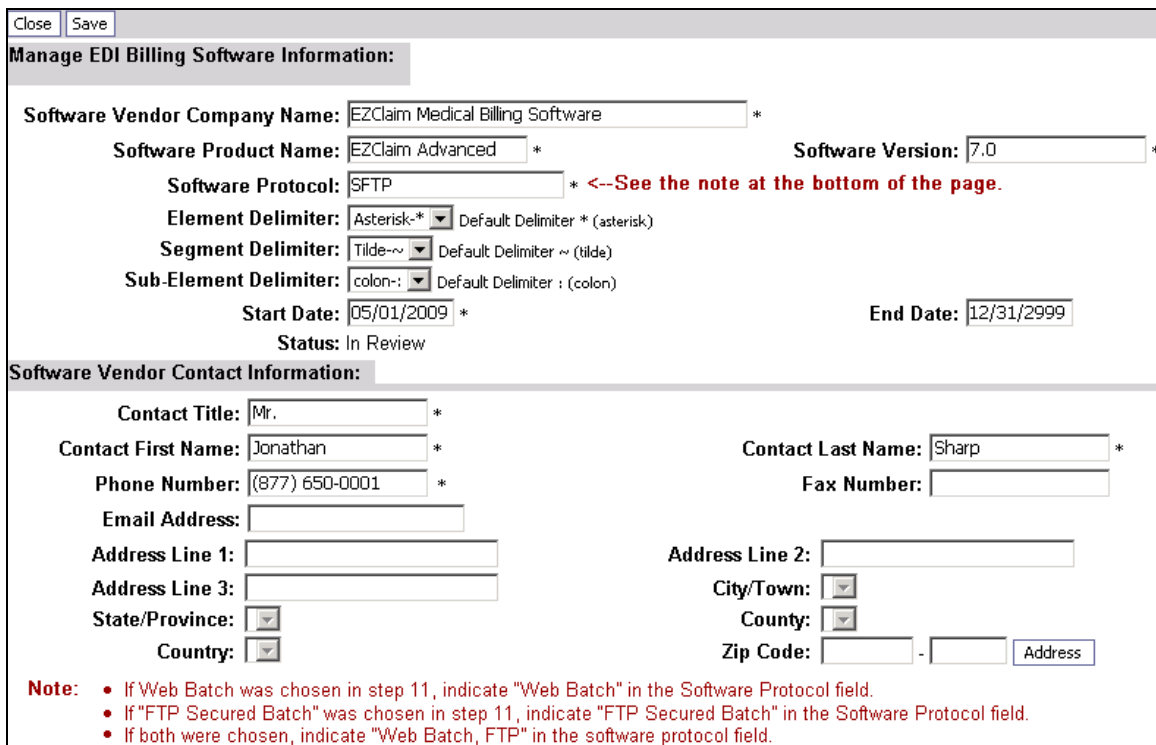
From the EDI Billing Software Information for Enrollment List, click the hyperlink in the Software Name column.



<input type="checkbox"/>	Software Name	Software Version
<input type="checkbox"/>	EZClaim	7.0



ProviderOne displays the Manage EDI Billing Software Information page.



Manage EDI Billing Software Information:

Software Vendor Company Name: *

Software Product Name: * Software Version: *

Software Protocol: * **<--See the note at the bottom of the page.**

Element Delimiter: Default Delimiter *(asterisk)

Segment Delimiter: Default Delimiter ~ (tilde)

Sub-Element Delimiter: Default Delimiter : (colon)

Start Date: * End Date:

Status: In Review

Software Vendor Contact Information:

Contact Title: *

Contact First Name: * Contact Last Name: *

Phone Number: * Fax Number:

Email Address:

Address Line 1: Address Line 2:

Address Line 3: City/Town:

State/Province: County:

Country: Zip Code: -

Note:

- If Web Batch was chosen in step 11, indicate "Web Batch" in the Software Protocol field.
- If "FTP Secured Batch" was chosen in step 11, indicate "FTP Secured Batch" in the Software Protocol field.
- If both were chosen, indicate "Web Batch, FTP" in the software protocol field.

Figure 39 - Manage EDI Billing Software Information



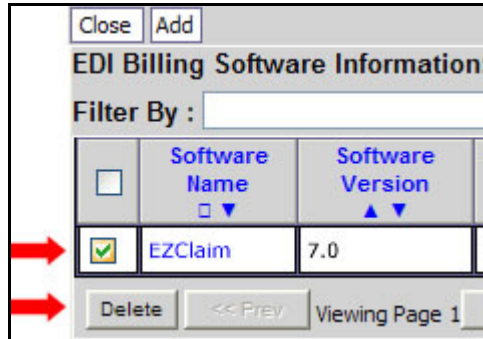
After making your changes, click the Save button to save and the Close button to exit the screen.

This page is intentionally blank.

Deleting a Billing Software Record



From the EDI Billing Software Information for Enrollment List check the box next to the record you want to delete and click the Delete button.



<input type="checkbox"/>	Software Name	Software Version
<input checked="" type="checkbox"/>	EZClaim	7.0

Buttons: Close, Add, Filter By: [text box], Delete, << Prev, Viewing Page 1

What Happens Next:



From the EDI Billing Software Information for Enrollment List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step #: Add EDI Billing Software Details	Optional	02/06/2008	02/06/2008	Complete
--	----------	------------	------------	----------



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Add EDI Submitter Details

Accessing the Billing Agent/Clearinghouse/Submitter List

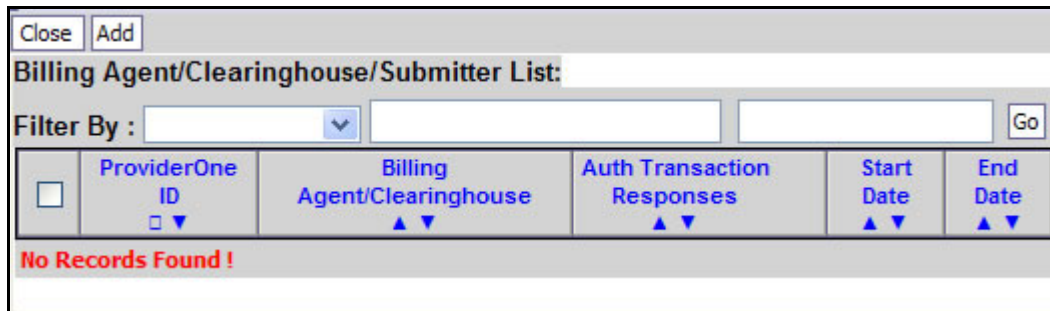


From the Business Process Wizard, click the Add EDI Submitter Details link.

Step #: Add EDI Submitter Details



ProviderOne displays the Billing Agent/Clearinghouse/Submitter List.



<input type="checkbox"/>	ProviderOne ID	Billing Agent/Clearinghouse	Auth Transaction Responses	Start Date	End Date
No Records Found!					

Figure 40 - Billing Agent/Clearinghouse/Submitter List for Enrollment

About the EDI Billing Agent/Clearinghouse/Submitter List for Enrollment

- The first time this list displays it will be blank.

This page is intentionally blank.

Associate a Billing Agent/Clearinghouse



To add a new record, click the Add button.

ProviderOne displays the Associate Billing Agent/Clearinghouse page.

Associate Billing Agent/Clearinghouse:

Billing Agent/Clearinghouse ProviderOne Id: *

Start Date: * End Date:

Status:

Note: In the "Authorized Transaction Responses" section, please select 'yes' for any outbound HIPAA transactions that your clearinghouse acquires on your behalf.

Authorized Transaction Responses:

Transaction Response	Authorized	Start Date	End Date
271-Eligibility Response	No <input type="button" value="v"/>	<input type="text"/>	<input type="text"/>
277-Claim Status Response	No <input type="button" value="v"/>	<input type="text"/>	<input type="text"/>
277U-Unsolicited Claims Status Response	No <input type="button" value="v"/>	<input type="text"/>	<input type="text"/>
278-Prior Authorization Response	No <input type="button" value="v"/>	<input type="text"/>	<input type="text"/>
820-Premium Payment	No <input type="button" value="v"/>	<input type="text"/>	<input type="text"/>
834-Benefit Enrollment	No <input type="button" value="v"/>	<input type="text"/>	<input type="text"/>
835-Healthcare Claim Payment Advice	No <input type="button" value="v"/>	<input type="text"/>	<input type="text"/>

Figure 41 - Associate Billing Agent/Clearinghouse

About the Associate Billing Agent/Clearinghouse Page

- A Transaction Response type can be assigned to only one Submitter.



After entering a Billing Agent/Clearinghouse ProviderOne Id, change the Authorized column to Yes for each transaction you wish to assign to the Submitter. Enter a Start Date and an End Date. When you are finished, click the OK button to save.

Modifying an EDI Billing Agent/Clearinghouse Submitter Record



From the EDI Billing Agent/Clearinghouse/Submitter List, click the hyperlink in the ProviderOne ID column.

Billing Agent/Clearinghouse/Submitter List:

Filter By :

<input type="checkbox"/>	ProviderOne ID	Billing Agent/Clearinghouse
<input type="checkbox"/>	794089WAO	EZBilling Agent



ProviderOne displays the Manage Billing Agent/Clearinghouse page.

Close Save

Manage Billing Agent/Clearinghouse Association:

Billing Agent/Clearinghouse ProviderOne Id: 794089WAO
 Start Date: 05/01/2009 * End Date: 12/31/2999

Note: In the "Authorized Transaction Responses" section, please select 'yes' for any outbound HIPAA transactions that your clearinghouse acquires on your behalf.

Authorized Transaction Responses:

Transaction Response	Authorized	Start Date	End Date
271-Eligibility Response	Yes	05/01/2009	12/31/2999
277-Claim Status Response	Yes	05/01/2009	12/31/2999
277U-Unsolicited Claims Status Response			
278-Prior Authorization Response			
820-Premium Payment			
834-Benefit Enrollment			
835-Healthcare Claim Payment Advice			

<< Prev Viewing Page 1 Next >> 1 Go Page Count SaveToXLS

Figure 42 - Manage Billing Agent/Clearinghouse Association



After making your changes, click the Save button to save, and the Close button to exit the screen.

Deleting a Billing Agent/Clearinghouse Association Record



From the Billing Agent/Clearinghouse/Submitter List, check the box next to the record you want to delete and click the Delete button.



Billing Agent/Clearinghouse/Submitter List:

Filter By :

<input type="checkbox"/>	ProviderOne ID	Billing Agent/Clearinghouse
<input checked="" type="checkbox"/>	794089WA0	EZBilling Agent

Viewing Page 1

What Happens Next:




From the Billing Agent/Clearinghouse/Submitter List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step #: Add EDI Submitter Details	Optional	02/06/2008	02/06/2008	Complete
-----------------------------------	----------	------------	------------	----------



This page is intentionally blank.

Add EDI Contact Information

Accessing the EDI Contact List



From the Business Process Wizard, click the Add EDI Contact Information link.

Step #: Add EDI Contact Information



ProviderOne displays the EDI Contact Information List.



<input type="checkbox"/>	Electronic Transaction ▲ ▼	Contact Title □ ▼	Contact Name ▲ ▼	Contact Phone Number ▲ ▼	Contact Email ▲ ▼	End Date ▲ ▼
No Records Found !						

Figure 43 - EDI Contact Information List

About the EDI Contact Information List

- The first time this list displays it will be blank.

This page is intentionally blank.

Add an EDI Contact



To add a new record, click the Add button.

ProviderOne displays the Add EDI Contact Information page.

Add EDI Contact Information:

Contact Title : * <-- Please enter your organizational contact information here.

Contact First Name : * **Contact Last Name :** *

Phone Number : * **Fax Number :**

Email Address : **Start Date :** * **End Date :**

Address Line 1: * **Address Line 2:**

Address Line 3:

State/Province: * **City/Town:** *

Country: * **County:**

Zip Code: -

Electronic Transactions:

Note: Please select all appropriate HIPAA transactions you will be using.

Available Transactions	>>	<<	Associated Transactions *
270-Eligibility Enquiry 271-Eligibility Response 276-Claim Status Inquiry 277-Claim Status Response 277U-Unsolicited Claims Status Response 278-Prior Authorization Request 278-Prior Authorization Response 820-Premium Payment 834-Benefit Enrollment 835-Healthcare Claim Payment Advice	>>	<<	

Figure 44 - Add EDI Contact Information

About the Add EDI Contact Information Page

- Identify a Contact and assign Transactions.



After creating the Contact and assigning transactions, click the OK button to save.

This page is intentionally blank.

Modifying an EDI Contact



From the EDI Contact Information List, click the hyperlink in the Contact Name column.

EDI Contact Information List:			
Filter By : <input type="text"/> <input type="text"/>			
<input type="checkbox"/>	Electronic Transaction ▲ ▼	Contact Title □ ▼	Contact Name ▲ ▼
<input type="checkbox"/>	270,271,278	Mr. 	Card, Kent



ProviderOne displays the Manage EDI Contact Information page.

Manage EDI Contact Information:

Contact Title : * <-- Please enter your organizational contact information here.

Contact First Name : *

Contact Last Name : *

Phone Number : *

Fax Number :

Email Address :

End Date :

Start Date : *

Status :

Address Line 1: *

Address Line 2:

Address Line 3:

City/Town: *

State/Province: *

County: *

Country: *

Zip Code: -

Electronic Transactions:

Note: Please select all appropriate HIPAA transactions you will be using.

Available Transactions		Associated Transactions *
276-Claim Status Inquiry	>>	270-Eligibility Inquiry
277-Claim Status Response		271-Eligibility Response
277U-Unsolicited Claims Status Response	<<	278-Prior Authorization Request
820-Premium Payment		278-Prior Authorization Response
834-Benefit Enrollment		
835-Healthcare Claim Payment Advice		
837D-Dental Claim		
837I-Institutional Claim		
837P-Professional Claim		

Figure 45 - Manage EDI Contact Information



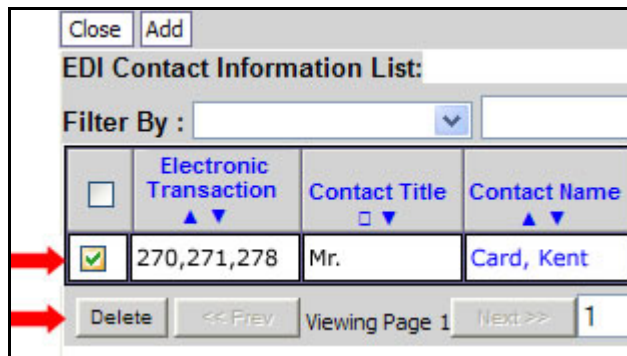
After making your changes, click the Save button to save, and the Close button to exit the screen.

This page is intentionally blank.

Deleting an EDI Contact Record



From the EDI Contact Information List, check the box next to the record you want to delete and click the Delete button.



Close Add

EDI Contact Information List:

Filter By : [dropdown]

<input type="checkbox"/>	Electronic Transaction ▲ ▼	Contact Title □ ▼	Contact Name ▲ ▼
<input checked="" type="checkbox"/>	270,271,278	Mr.	Card, Kent

Delete << Prev Viewing Page 1 Next >> 1

What Happens Next:




From the EDI Contact Information List, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step # : Add EDI Contact Information	Optional	02/06/2008	02/06/2008	Complete
--------------------------------------	----------	------------	------------	----------



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Add Servicing Provider Information

Accessing the Servicing Providers List



From the Business Process Wizard, click the Add Servicing Provider Information link.

Step # : Add Servicing Provider Information



ProviderOne displays the Servicing Providers List.

Close	Add				
Servicing Provider List:					
Filter By :	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Go
<input type="checkbox"/>	Servicing Provider NPI ▲ ▼	Servicing Provider SSN ▲ ▼	ProviderOne ID/Application # ▲ □	Start Date ▲ ▼	End Date ▲ ▼
No Records Found !					

Figure 46 - Servicing Providers

About the Servicing Providers List

- The first time this list displays it will be blank.

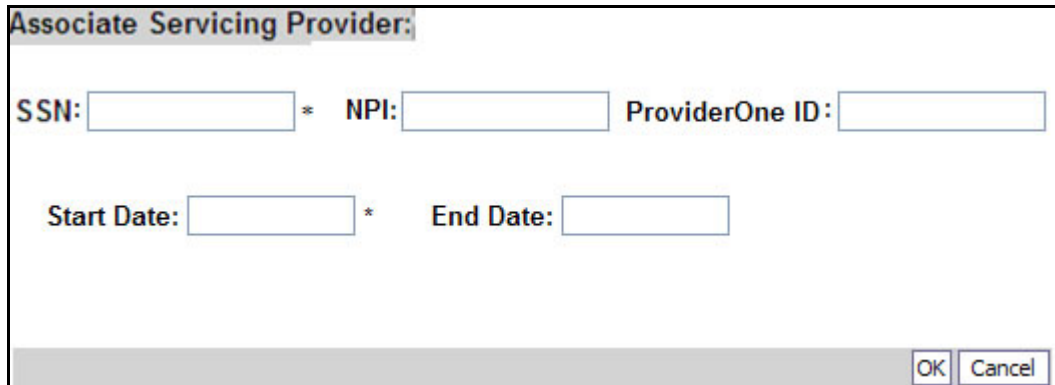
This page is intentionally blank.

Adding a Servicing Provider



To add a new record, click the Add button.

ProviderOne displays the Associate Servicing Provider page.



Associate Servicing Provider:

SSN: * NPI: ProviderOne ID:

Start Date: * End Date:

OK Cancel

Figure 47 - Associate Servicing Provider



Enter the required information and click the OK button.

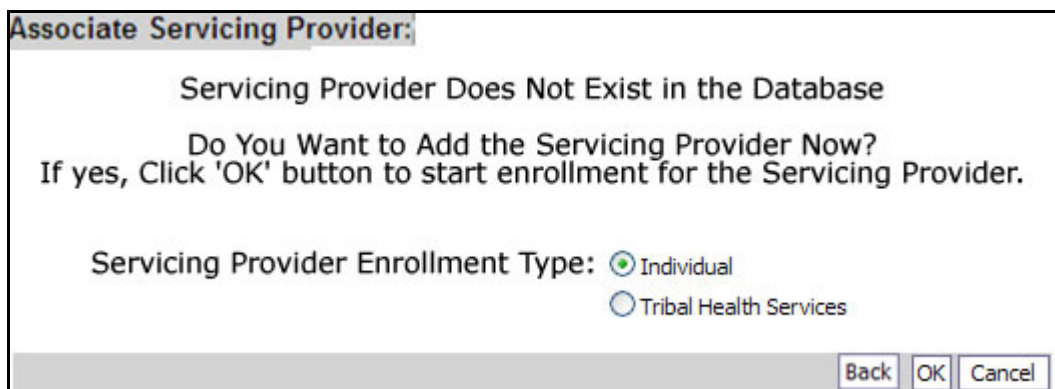
ProviderOne confirms the Servicing Provider and displays the Servicing Provider List.

If the Provider Does Not Exist in the Database

If the Provider does not exist in the Database you are prompted to add the Servicing Provider. See “How to Enroll a Servicing Provider” for details.



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



Associate Servicing Provider:

Servicing Provider Does Not Exist in the Database

Do You Want to Add the Servicing Provider Now?
If yes, Click 'OK' button to start enrollment for the Servicing Provider.

Servicing Provider Enrollment Type: Individual
 Tribal Health Services

Back OK Cancel

Modifying a Servicing Provider Record



From the Servicing Providers List, click the link in the ProviderOne ID/Application # column.

Servicing Provider List:			
Filter By :			
<input type="checkbox"/>	Servicing Provider NPI ▲ ▼	Servicing Provider SSN ▲ ▼	ProviderOne ID/Application # ▲ □
<input type="checkbox"/>	2345678900	555115555	20030020030080 ←



ProviderOne displays the Manage Servicing Provider Association page.

Active Service Provider

Associate Servicing Provider:			
SSN:	555115555	*	NPI: 2345678900
			ProviderOne ID: 20030045687
Start Date:	01/23/2008	*	End Date: 12/31/2999
			OK Cancel

Figure 48 - Manage Servicing Provider Association (Active Provider)

Servicing Provider – Enrollment Process Started But Not Completed

Associate Servicing Provider:			
SSN:	555115555		NPI: 2345678900
			Application #: 20030045687
Start Date:	01/23/2008	*	End Date: 12/31/2999
			OK Cancel

Figure 49 - Manage Servicing Provider Association (Pending Enrollment)



After making your changes, click the Save button, or the Close button to close the window without saving.

Deleting a Servicing Provider



From the Servicing Providers list, check the box next to the record you want to delete and click the Delete button.



Servicing Provider List:

Filter By :

<input type="checkbox"/>	Servicing Provider NPI	Se
<input checked="" type="checkbox"/>	2345678900	55

Buttons: Delete, << Prev, Viewir

What happens next:



From the Servicing Providers list, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step # : Add Servicing Provider Information	Required	02/06/2008	02/06/2008	Complete
---	----------	------------	------------	----------



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Add Payment Details

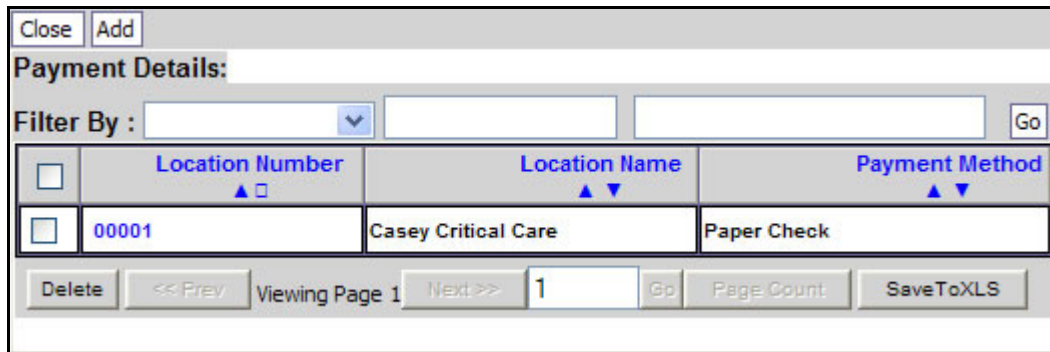
Accessing the Payment Details List



From the Business Process Wizard, click the Add Payment Details link.



ProviderOne displays the Payment Details list.



<input type="checkbox"/>	Location Number ▲ ▢	Location Name ▲ ▼	Payment Method ▲ ▼
<input type="checkbox"/>	00001	Casey Critical Care	Paper Check

Figure 50 - Payment Details List

About the Payment Details List

- The first time this list displays it will be blank.
- Provider payment methods are listed by location.
- Only one payment method is allowed per location.

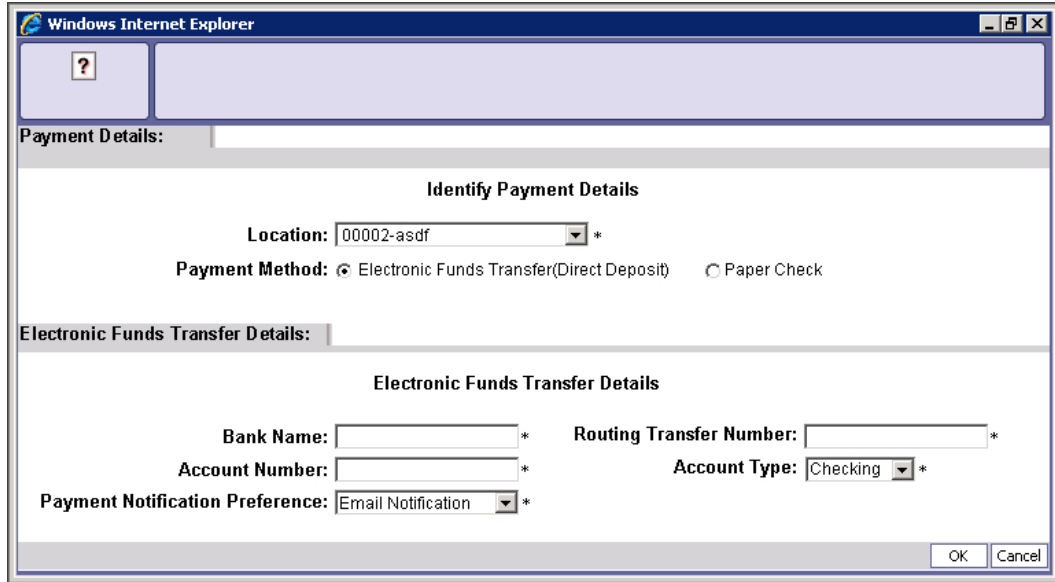
This page is intentionally blank.

Adding a Payment Method



To add a new record, click the Add button.

ProviderOne displays the Payment Details form.



The screenshot shows a web browser window titled "Windows Internet Explorer" displaying the "Payment Details" form. The form is divided into two main sections: "Identify Payment Details" and "Electronic Funds Transfer Details".

Identify Payment Details:

- Location: 00002-asdf *
- Payment Method: Electronic Funds Transfer(Direct Deposit) Paper Check

Electronic Funds Transfer Details:

- Bank Name: * (text input)
- Routing Transfer Number: * (text input)
- Account Number: * (text input)
- Account Type: Checking * (dropdown menu)
- Payment Notification Preference: Email Notification * (dropdown menu)

At the bottom right of the form, there are "OK" and "Cancel" buttons.

Figure 51 - Payment Details

About the Payment Details Form

- Selecting Electronic Funds Transfer displays the Electronic Funds Transfer Details section.
- Routing Transit number must start with 0, 1, 2, or 3.
- The Email Notification preference cannot be selected if the email address has not been defined for the location.



Click the OK button to save the information and close the window, or Cancel to close the window without saving.



ProviderOne validates the information entered, saves and returns to the Payments Details list. The list will display new payment methods.

This page is intentionally blank.

Modifying a Payment Detail Record



From the ProviderOne Payment Details list, click the link in the Location Number column.

	Location Number
<input type="checkbox"/>	00001



ProviderOne displays the Payment Details form.

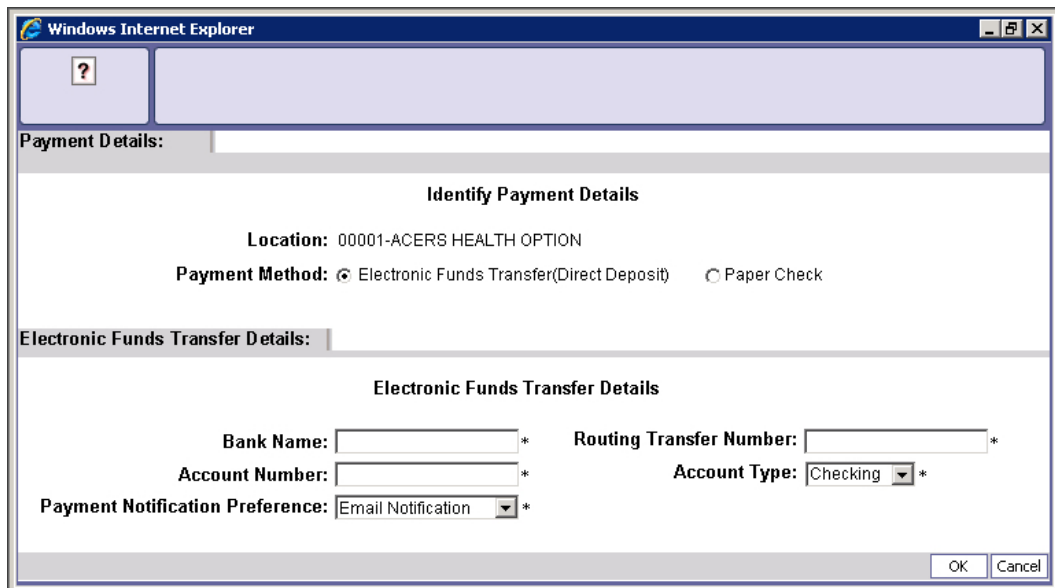


Figure 52 - Payment Details Form

About the Provider Owner Details Form

- This page allows the payment method to be edited for the location listed.
- The Electronic Funds Transfer Details section will only be viewable if the Payment Method is set to Electronic Funds Transfer.
- When changing from EFT to Paper all information pertaining to the EFT for this location will be lost.



After making your changes, click the OK button to save, or the Cancel button to close the window without saving.


Deleting a Payment Method Record



From the Payment Details list, check the box next to the record you want to delete and click the Delete button. The data is removed from the Enrollment Staging Area and will not be written to the ProviderOne database.

<input type="checkbox"/>	Location Number
<input checked="" type="checkbox"/>	00001

Viewing Page 1



What happens next:




From the Payment Details list, click the Close button and proceed to the next step in the Business Process Wizard.



ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step #: Add Payment Details	Required	02/06/2008	02/06/2008	Complete
-----------------------------	----------	------------	------------	----------



This page is intentionally blank.

Complete Enrollment Checklist

Accessing the Enrollment Checklist



From the Business Process Wizard, click the Complete Enrollment Checklist link.

Step #: Complete Enrollment Checklist



ProviderOne displays the Provider Checklist.

Question	Answer	Comments
Have you or any employee ever had an Assessment taken against you ?	Not Completed ▾	
Have you or any employee ever had an Administrative Sanction taken against you ?	Not Completed ▾	
Have you or any employee ever had a Suspension of Payment taken against you?	Not Completed ▾	
Have you or any employee ever had a Restitution Order taken against you ?	Not Completed ▾	
Have you or any employee ever had a Program Exclusion taken against you ?	Not Completed ▾	
Have you or any employee ever had a Program Debarment taken against you ?	Not Completed ▾	
Have you or any employee ever had a Pending Criminal Judgment taken against you ?	Not Completed ▾	
Have you or any employee ever had a Pending Civil Judgment taken against you ?	Not Completed ▾	
Have you or any employee had a Judgement Pending Under False Claims Act taken against you ?	Not Completed ▾	
Have you or any employee ever had a Criminal Fine taken against you ?	Not Completed ▾	
Have you or any employee ever had a Civil Monetary Penalty taken against you ?	Not Completed ▾	
Has Applicant, or employees, ever been convicted or any health related crimes ?	Not Completed ▾	
Has Applicant, or employees, ever been convicted of a crime involving the abuse of a child or an elderly adult ?	Not Completed ▾	

Figure 53 - Provider Checklist

About the Provider Checklist

- Every question must be answered with Yes or No.
- All Yes questions must have a corresponding comment.



After completing the Provider Checklist, click the Save button.

ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step #: Complete Enrollment Checklist	Required	02/06/2008	02/06/2008	Complete
				

Submit Enrollment Application for Review

Accessing the Final Submission Page



From the Business Process Wizard, click the Submit Enrollment Application for Review link.

Step # : Submit Enrollment Application for Review



ProviderOne displays the Final Submission page.

Close
Submit Enrollment

Final Submission

Application #: 20080206964480 **Enrollment Type:** Individual

The information submitted for enrollment shall be verified and reviewed by the DSHS. During this time, any changes to the information shall not be accepted.

I agree that the information submitted as a part of the application is correct (Privacy and Confidentiality).

Please use the Application # in all the documentation sent to the DSHS.

Instructions for submitting documentation:

1. Please click on [this link](#) to display the documentation cover sheet.
2. Print the cover sheet.
3. Write the Application number in the 'Application #' field of the cover sheet.
4. Include the cover sheet, with the Application number, when mailing or faxing documentation to the DSHS.

Application Document Checklist:

Forms/Documents ▲ □	Special Instructions ▲ ▼	Source ▲ ▼	Required ▲ ▼
Training and Education	Please provide a copy of all required Training and Documentation.		NO
Tax Documents	Please provide a copy of all required Tax Documents.	http://www.irs.gov	YES
Licenses and Certifications	Please provide a copy of all required Licenses and Certifications.	https://fortress.wa.gov/	NO
EDI Required Documentations	Please provide a copy of all require Trading Partner documents.		NO
Contracts and Agreements	Please provide a copy of Contracts, Agreements and current Core Provider.		YES
Business License	Please provide a copy of business license.	http://dor.wa.gov/content/home/brd/default.aspx	NO


Figure 54 - Final Submission

This page is intentionally blank.

Obtaining Documentation Source Documents



To download source documents, click the hyperlink in the Source column.


Tax Documents	Please provide a copy of all required Tax Documents.	http://www.irs.gov 	YES
---------------	--	---	-----

Printing the Documentation Cover Sheet



Click the [this link](#) hyperlink to display the documentation cover sheet.

Instructions for submitting documentation:
1. Please click on [this link](#) to display the documentation cover sheet.





ProviderOne displays a PDF version of the cover sheet.

ProviderOne

Provider Enrollment Document Submission Cover Sheet

Application #



Figure 55 - Enrollment Document Cover Sheet



Enter the Application# and print the cover sheet. Include this cover sheet with the documentation listed in the Application Document Checklist.

Re-printing the Documentation Cover Sheet



From the Business Process Wizard, click the Submit Enrollment Application for Review link.

Step # : Submit Enrollment Application for Review



Click the [this link](#) hyperlink to display the documentation cover sheet. Follow the steps on the previous page.

Instructions for submitting documentation:
1. Please click on [this link](#) to display the documentation cover sheet.

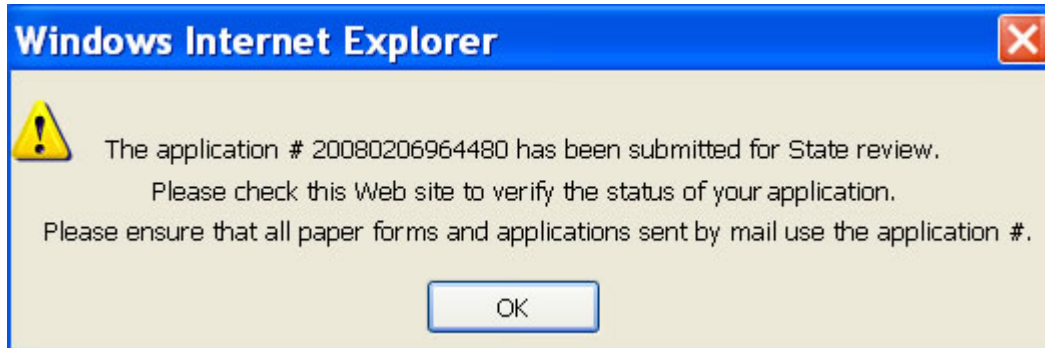


Submitting the Enrollment Application



From the Final Submission page, click the Submit Enrollment Button.

ProviderOne displays the following Internet Explorer message.



Click OK to close the message and then click the Close button.

ProviderOne displays the Business Process Wizard. The status is now set to Complete.

Step # : Submit Enrollment Application for Review	Required	02/06/2008	02/06/2008	Complete
				↑

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