

Instructions to Enroll Individual Servicing Only Providers

Servicing Only providers are individuals who perform services under a Group, Facility, Agency, Organization, or Institution. This includes individual network providers of Managed Care Entities and Behavioral Health Organizations.

Federal regulations require all individual providers who perform services to Washington State Medicaid clients be enrolled with the Washington State Health Care Authority (HCA).

This document provides guidance on completing the enrollment of the individual providers.

Return Instructions

Submit completed form via the HCA support portal at support.hca.wa.gov/hcasupport:

1. Select **Public inquiry** or **Agency to agency inquiry**.
2. Select **Make a request**.
3. Select the **Provider Enrollment** tile.
4. **Complete all required fields and submit with your documents attached.**

For provider enrollment assistance, use the support portal or call (800) 562-3022 extension 16137. Phones are open Tuesdays and Thursdays from 7:30 a.m. to 4:30 p.m. (closed from noon to 1 p.m.).

For provider enrollment assistance, use the online support portal or call HCA:

- **Online:** support.hca.wa.gov.
- **Call:** (800) 562-3022 extension 16137.
Phones are open: Tuesdays and Thursdays from 7:30 a.m. to 4:30 p.m. (closed from noon to 1 p.m.).
Phones are closed: Mondays, Wednesdays, Fridays, and weekends

Contents

If you are a practitioner asked to enroll yourself, follow this process:	1
Already Enrolled with HCA as a Group, Facility, Agency, Organization, or Institution:	2
Not Enrolled with HCA as a Group, Facility, Agency, Organization, or Institution:	2
Instructions on completing the individual servicing only application:	2
Are both the individual practitioner and the Group, Facility, Agency, Organization, or Institution already enrolled with HCA:	6

If you are a practitioner asked to enroll yourself, follow this process:

1. Go to <http://www.hca.wa.gov/provider-enrollment> to begin your application.
2. For instructions on completing your application, scroll down to page 2 on this document and follow the section titled, "Instructions on completing the individual servicing only application"

Already Enrolled with HCA as a Group, Facility, Agency, Organization, or Institution:

1. Log into your ProviderOne portal at <http://www.waproviderone.org> using your domain number, username, and password. For assistance with your username and/or password, please contact ProviderOne Security at provideronesecurity@hca.wa.gov
2. After logging into your ProviderOne portal, you will be asked to select a Profile to use. Please select either “EXT Provider File Maintenance” or “EXT Provider Super User” for the profile.
3. Next, click on “Initiate New Enrollment”



4. For instructions on completing the individual servicing only application, scroll down to page 2 on this document and follow the section titled, “Instructions on completing the individual servicing only application”

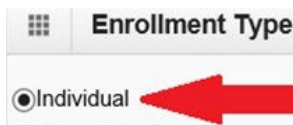
Not Enrolled with HCA as a Group, Facility, Agency, Organization, or Institution:

1. The Group, Facility, Agency, Organization, or Institution must be enrolled with HCA.
2. For Enrollment Instructions:
 - a. Go to <https://www.hca.wa.gov/enroll-as-a-provider>
 - b. Scroll down and click on the blue-hyperlink titled “Billing provider” – This will take you to the enrollment instructions for billing providers
3. After reading the enrollment instructions and compiling all requirements listed in the instructions, go to <http://www.hca.wa.gov/provider-enrollment> to begin your online application. The online application has up to 18-steps that must be completed.

Instructions on completing the individual servicing only application:

After accessing the ProviderOne Enrollment Portal, follow the below instructions for completing the individual servicing only application.

1. On the Enrollment Type list, select “Individual” and then hit the “Submit” button.



2. On the Basic Information Screen, complete the following sections:
 - Select “HCA” as the Agency. To do this:

- **Step 1:** Click on the appropriate agency (clicking on the agency will highlight the agency)

Basic Information

Available Agencies

Selected Agencies

Agency: DOC
DSHS
HCA

- **Step 2:** With the agency still highlighted, click on the arrows pointing to the right. This will move the agency over into the 'Selected Agencies' field.

Basic Information

Available Agencies

Selected Agencies

Agency: DOC
DSHS

HCA

- In the 'HCA Billing Type' dropdown, select 'NB-Non-billing'

HCA Billing Type: NB-Non-billing

- Select "SSN" – *For Individual Servicing Only providers, SSN must be selected
- Complete the following *required fields:
 - First Name, Last Name,
 - Gender, SSN, Date of Birth, Select "Servicing Only" for the Servicing Type dropdown,
 - Enter the Individual's National Provider Identifier (NPI),
 - Select "Other" for the W-9 Entity Type,
 - Type in "Servicing Only" in the W-9 Entity Type (If Other) field,
 - In the Other Organizational Information dropdown make the applicable selection,
 - Enter the Email Address.

Please also enter Middle Name, Suffix, and Title (if applicable)

- After entering required data, hit the 'Next' button.

Basic Information

If you don't have NPI and if you are Atypical provider then please contact DSHS worker to enroll.

Tax Identifier Type: FEIN SSN

Provider Name(Organization Name): (as shown on Income Tax Return)

Organization Business Name: Federal Employer Identification Number(FEIN):

Provider Name: (First Name) (Middle Name) (Last Name)

Suffix: Gender:

SSN: Title:

Date of Birth: Servicing Type:

National Provider Identifier(NPI): UBI:

W-9 Entity Type: W-9 Entity Type (If Other):

Other Organizational Information: Email Address:

Enrollment Effective Date:

Next

3. The next screen will provide your Application # which is a 14-digit number. Write your application # down in case you must return to the application at a later time. Then, click the 'Next' button.
4. This will take you to the Business Process Wizard (BPW) where all of the following required steps must be completed: Step 1, Step 3, Step 5, Step 14, Step 16, and Step 17

Step 1 (Provider Basic Information): This step will already show a status of Complete as this is the data you entered on the Basic Information screen you just completed.

Step 3 (Add Specializations): Add the individual provider's taxonomy to this step by doing the following:

- a. Click on the blue-link titled Step 3: Add Specializations
- b. Click on the 'Add' button



- c. For the Administration dropdown, select "HRSA"
- d. For the Provider Type dropdown, select the individual's provider type
- e. For the Specialty dropdown, select the individual's specialty
- f. After making those selections, a list of Available Taxonomy Codes will appear in the 'Available Taxonomy Codes' section – select the applicable taxonomy(s) for the individual provider being enrolled. To select a taxonomy, click on the taxonomy just once which will highlight the taxonomy in blue. Then, click the arrow >> to move the taxonomy to the 'Associated Taxonomy Codes' field.

- g. After all applicable taxonomies have been added to the 'Associated Taxonomy Codes' field, click the OK button.

The screenshot shows two stacked forms. The top form, titled 'Add Specialty/Subspecialty', contains the following fields: 'Administration' (a dropdown menu with a blue highlight), 'Provider Type' (a dropdown menu), 'Specialty' (a dropdown menu), and 'End Date' (a date picker). The bottom form, titled 'Add Taxonomy Code', features two large empty boxes: 'Available Taxonomy Codes' on the left and 'Associated Taxonomy Codes *' on the right. Between these boxes are two arrow buttons: a right-pointing double arrow (>>) and a left-pointing double arrow (<<). At the bottom right of the entire form area are 'OK' and 'Cancel' buttons.

5. **Step 5** (Add Licenses and Certifications):
- Click on the blue-link titled Step 5: Add Licenses and Certifications
 - Click on the 'Add' button



- c. The following screen will appear:

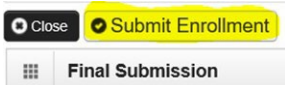
The screenshot shows the 'Add License/Certification' form. It includes the following fields: 'License/Certification Type' (a dropdown menu showing 'ABCD Certification'), 'License/Certification #' (a text input field), 'Effective Date' (a date picker), and 'End Date' (a date picker). At the bottom right are 'OK' and 'Cancel' buttons.

- In the License/Certification Type dropdown, select "Professional License"
 - In the License/Certification # field, enter the individual provider's professional license #. **Note:** For Washington State licensed providers, the professional license begins with 2-letters and is followed by 8-digits (no spaces, no dashes). Example: AA00000000
 - In the Effective Date field, enter the original start-date of the license
 - In the End Date field, enter the end-date as currently shown on your license
 - Then, click the OK button. **Note:** If the individual provider has a DEA #, the DEA # can also be added in Step 5. To do this select "Drug Enforcement (DEA) Number" from the dropdown, enter the DEA # into the License/Certification # field, enter the original start-date of the DEA #, and the end-date as currently shown on the DEA license.
6. **Step 14** (Add Billing Provider Details):
- Click on the blue-link titled Step 14: Add Billing Provider Details

- b. Click on the 'Add' button



- c. In the field titled "ProviderOne ID / NPI" enter either the ProviderOne ID or the NPI of the Group, Facility, Agency, Organization, or Institution that the individual provider is performing services under.
 - d. Click the "Confirm Provider" button to confirm the provider exists in ProviderOne – If the provider exists in ProviderOne, the Provider Name will appear in the "Provider Name" section
 - e. If the provider was confirmed as an existing provider, click the OK button. If the provider was not confirmed as an existing provider, then you will not be able to complete the servicing only application. At this point, please follow the instructions above on page 2 titled "Not enrolled with HCA as a Group, Facility, Agency, Organization, or Institution"
7. **Step 16** (Complete Enrollment Checklist):
 - a. Click on the blue-link titled Step 16: Complete Enrollment Checklist
 - b. The Provider Checklist page will appear. All questions on this page must be answered by selecting either "Yes" or "No" in each of the Answer dropdowns. If you mark "Yes" to any answer, you must also enter a comment in the Comments box to the right of the "Yes."
 - c. After answering all questions, click the Save button (located toward the upper-left-hand portion of the screen)
 8. **Step 17** (Final Enrollment Instructions):
 - a. Click on the blue-link titled Step 17: Final Enrollment Instructions
 - b. Click the "Submit Enrollment" button



- c. A pop-up message will appear that states, "Your application has been sent to the state for processing" – This indicates that you have successfully submitted the online application.
Important: Applications are worked on in the order they were received.

Are both the individual practitioner and the Group, Facility, Agency, Organization, or Institution already enrolled with HCA:

1. The Group, Facility, Agency, Organization, or Institution must log into their ProviderOne portal at <http://www.waproviderone.org> using their domain number, username, and password. For assistance with your username and/or password, please contact ProviderOne Security at hprovideronsecurity@hca.wa.gov.
2. After logging into your ProviderOne portal, you will be asked to select a Profile to use. Please select either "EXT Provider File Maintenance" or "EXT Provider Super User" for the profile.
3. Next, click on "Manage Provider Information"



4. Now on the Business Process Wizard (BPW), scroll down and click on the blue-link titled “Step 14: Servicing Provider Information”

View/Update Provider Data - Group Practice

Business Process Wizard Provider Data Modification (Group Practice). In order to finalize submission

Step	Required
<input type="checkbox"/> Step 1: Basic Information	Required
<input type="checkbox"/> Step 2: Locations	Required
<input type="checkbox"/> Step 3: Specializations	Required
<input type="checkbox"/> Step 4: Ownership & Managing/Controlling Interest details	Required
<input type="checkbox"/> Step 5: Licenses and Certifications	Required
<input type="checkbox"/> Step 6: Training and Education	Optional
<input type="checkbox"/> Step 7: Identifiers	Optional
<input type="checkbox"/> Step 8: Contract Details	Optional
<input type="checkbox"/> Step 9: Federal Tax Details	Required
<input type="checkbox"/> Step 10: EDI Submission Method	Optional
<input type="checkbox"/> Step 11: EDI Billing Software Details	Required
<input type="checkbox"/> Step 12: EDI Submitter Details	Optional
<input type="checkbox"/> Step 13: EDI Contact Information	Required
<input type="checkbox"/> Step 14: Servicing Provider Information	Required
<input type="checkbox"/> Step 15: Payment and Remittance Details	Required
<input type="checkbox"/> Step 16: Submit Modification for Review	Required

5. Now on the Servicing Provider List page, click on the “Add” button

Servicing Provider List

Filter By : [dropdown] [input] [input]

ProviderOne ID	Servicing Provider Name
▲▼	▲▼

6. On the Add Servicing Provider screen, enter the following information:
 - a. In the ProviderOne ID / NPI field, enter the individual practitioners NPI number. If you know the individual practitioners ProviderOne ID, you may enter that number instead of the NPI.
 - b. In the Start Date field, enter the date the individual practitioner will begin working for the Group, Facility, Agency, Organization, or Institution. Enter date in the following format: mm/dd/yyyy
 - c. In the End Date field, enter 12/31/2999. This date reflects that the individual practitioner is still working for your business.
 - d. Next, hit the “Confirm Provider” button.
 - e. If you entered the information correctly and the individual practitioner is in fact already enrolled, the individual practitioner’s name will appear in the Provider Name field.
 - f. Once you see the correct individual practitioner’s name in the Provider Name field, hit the “OK” button.
7. Now back on the Servicing Provider List page, you can view the individual practitioner by doing the following:
 - a. In the ‘Filter By’ dropdown, select ‘Status’ and in the box to the right of that enter ‘i%’ Then, hit “Go”.

Servicing Provider List

Filter By : Status [dropdown] i% [input] And [input] And Operational Status: Active [dropdown] **Go** [button]

b. You should now see the provider is in a Status of “In Review”

The screenshot shows a table titled "Servicing Provider List". The table has columns for ProviderOne ID, Servicing Provider Name, Servicing Provider NPI, Start Date, End Date, and Status. The Status column for the first row is highlighted with a blue box and labeled "In Review". A blue arrow points from a text box below to the "In Review" status.

ProviderOne ID	Servicing Provider Name	Servicing Provider NPI	Start Date	End Date	Status
ProviderOne ID will appear here	Individual Practitioner's Name will appear here	Individual Practitioner's NPI will appear here	Start Date you entered will appear here	12/31/2999	In Review

The Status shows it is "In Review"

8. Next, click on the “Close” button

The screenshot shows the "Servicing Provider List" interface. The "Close" button is highlighted with a red box.

9. Now back on the Business Process Wizard (BPW) screen, click on the blue link titled “Step 16: Submit Modification for Review”

The screenshot shows the "Business Process Wizard" screen. The "Step 16: Submit Modification for Review" link is highlighted with a red box and labeled "Click on this link".

Step	Required
Step 1: Basic Information	Required
Step 2: Locations	Required
Step 3: Specializations	Required
Step 4: Ownership & Managing/Controlling Interest details	Required
Step 5: Licenses and Certifications	Required
Step 6: Training and Education	Optional
Step 7: Identifiers	Optional
Step 8: Contract Details	Optional
Step 9: Federal Tax Details	Required
Step 10: EDI Submission Method	Optional
Step 11: EDI Billing Software Details	Optional
Step 12: EDI Submitter Details	Optional
Step 13: EDI Contact Information	Optional
Step 14: Servicing Provider Information	Required
Step 15: Payment and Remittance Details	Optional
Step 16: Submit Modification for Review	Required

Click on this link

10. Now on the Final Submission screen, click on the “Submit Provider Modification” button.

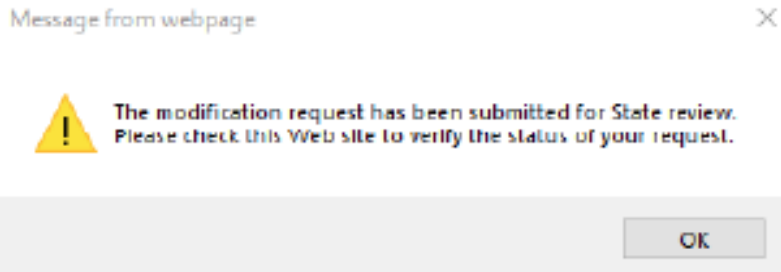
The screenshot shows the "Final Submission" screen. The "Submit Provider Modification" button is highlighted with a red box and labeled "Click on the 'Submit Provider Modification' button".

ProviderOne Id/NPI: The Group, Facility, Agency, Organization, or Institution's ProviderOne ID and NPI will be listed here. Name: The Group, Facility, Agency, Organization, or Institution's Name will be listed here.

Enrollment Type: Group Practice

The requested modifications submitted shall be verified and reviewed by the DSHS. During this time, you may not make additional changes.

11. The following pop-up message should appear:



12. You have now submitted this information for review by the Health Care Authority (HCA).