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# **ProviderOne for Social Services**

## Submitting and Adjusting Social Service Claims Guide



Updated June 2025

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# INTRODUCTION

This publication takes effect June 2025 and supersedes earlier billing guides for Social Service Providers.

Every effort has been made to ensure this guide's accuracy. If an actual or apparent conflict between this document and a Health Care Authority (HCA) or Department of Social & Health Services rule arises, the rule applies.

The purpose of this guide is to serve as a resource for Social Service providers and billing staff so they can:

- **Submit Social Service Claims**
  - This section outlines how to submit basic bills, also known as direct data entry (DDE) billing. For DDE, you must enter all billing information (Provider ID, Client ID, Authorization Number, Dates of Service, Service Code, and Units) each time you create & submit the claim.
- **Create Social Service Claim Templates**
  - This section outlines how to create and submit claim templates. Claim templates allow a provider to save claim information such as Provider ID, Client ID, and authorization number. This method can save time and reduce claiming errors.
- **Create and Submit Batch Claims**
  - This section outlines how to create & submit template batch claims. Template batch claims are a group of claims that share the same date of service. This method allows you to create a group (batch) of templates, change the date of service on all the templates at one time, and submit the batch all at once. This method can save time and reduce claiming errors.
- **Create and Submit .dat Batch Upload Claims**
  - This section outlines ProviderOne transaction standards and business rules for social service .dat batch upload billing. This method of claiming is only allowed for Social Services (non-medical) Providers.
- **Adjust, Void, and Resubmit Social Service Claims**
  - This section outlines how to adjust, modify, and void claims. This section also outlines how to resubmit a claim that has been denied or voided.

**Note: This billing guide contains attachments. To view these attachments, you must first download and save this guide as a PDF.**

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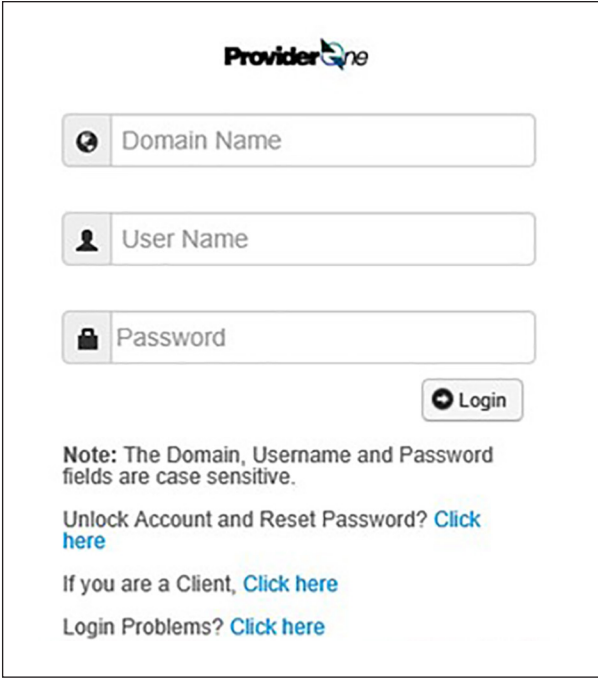
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# GETTING STARTED

Welcome to the *ProviderOne for Social Services: Submitting and Adjusting Social Service Claims Guide*. The following section explains the basics of the ProviderOne system, including:

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The screenshot shows the ProviderOne login interface. At the top is the ProviderOne logo. Below it are three input fields: 'Domain Name' with a globe icon, 'User Name' with a person icon, and 'Password' with a lock icon. To the right of the Password field is a 'Login' button with a right-pointing arrow. Below the input fields, there is a note: 'Note: The Domain, Username and Password fields are case sensitive.' followed by a link 'Unlock Account and Reset Password? Click here'. Below that is another link 'If you are a Client, Click here' and a final link 'Login Problems? Click here'.

## Note:

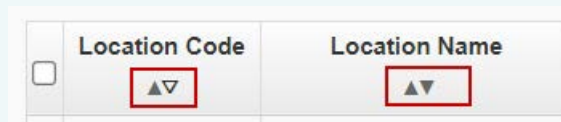
Please note some screen grabs in this section are from the Social Service Billing side and some are from the Social Service Medical Billing side of ProviderOne. The directions and information provided is applicable to both Provider types.



# GENERAL TIPS

## General Notes

- “OK” signifies a Yes response and “Cancel” a No Response
- Asterisk (\*) denotes a required field
- “%” acts as a wildcard, returning information that corresponds with the current search
  - For example, if searching for authorizations for multiple locations you could enter your seven digit Provider ID and add % to the end in order to return authorizations for each of your locations
- Make sure your Pop-Up Blockers are turned off on your preferred browser (i.e., Chrome, Edge ) you are using to access ProviderOne
  - If pop-up blockers are not turned off, it will result in errors when trying to submit claims.
  - If you chose to turn the pop-up blockers back on when you are not using ProviderOne, remember to turn them back off when you are utilizing ProviderOne.
  - Each specific browser has their own [instructions](#) on how to turn off pop-Up blockers.
- Clearing your browser history (Cache) regularly will help the overall performance of ProviderOne.
  - Clearing browser history will not delete saved favorites, book marks, or passwords.
- Columns can be sorted from A-Z or Z-A by using the controls below the name of each column:



## Passwords

### Passwords and Security Questions:

The first time you log into ProviderOne you will be required to change your temporary password and create a security question. Please note passwords and security questions are case sensitive.

When creating a password for ProviderOne they must contain the following:

- Cannot be the same as your last five passwords
- Must be at least eight characters long
- Must contain at least one letter
- Must contain at least one number
- Must contain at least one of the following special characters:  
!@#\$%^&\*()\_+-<>

After three unsuccessful attempts to login, your domain will be locked. You can unlock and reset your password by reaching out to ProviderOne Security here: [provideronesecurity@hca.wa.gov](mailto:provideronesecurity@hca.wa.gov)

When you update your password, you will be asked if you want to update your secret question. You can change it at this time or select No.

### Note:

*As an added security measure, ProviderOne passwords must be changed every 90 days.*

# ACRONYMS & DEFINITIONS

- **AAA** - Area Agency on Aging
- **CARS** - Collections and Accounts Receivable System. The system DSHS's Office of Financial Recovery uses to manage providers' debt (overpayments).
- **CMS** - Center for Medicare and Medicaid Services
- **COFF** - CARS Offset (lien)
- **DDE** - Direct Data Entry
- **Domain** - Also known as your ProviderOne ID.
- **DOS** - Date of Service
- **DSHS** - Department of Social and Health Services. State agency in charge of delivering a variety of social services, employment supports, safety programs, and court-ordered behavioral health care.
- **EFT** - Electronic Funds Transfer. This is when funds are deposited directly into a banking account for claims payments.
- **HCA** - Health Care Authority. HCA is WA State's Medicaid agency. HCA is in charge of managing the ProviderOne system.
- **HCLA** - Home and Community Living Administration. HCLA is a newly formed administration within DSHS effective May 1, 2025. This administration focuses on coordinating home and community-based services to support clients in their own environments. It was formed by merging key functions from the Developmental Disabilities Administration (DDA) and the Aging and Long-Term Support Administration (AL TSA).
- **HIPAA** - Health Insurance Portability & Accountability Act
- **MOS** - Month of Service
- **NOC** - Non-Offset to CARS
- **NPI** - National Provider Identifier. Most social service vendors are not required to have one.
- **OFIN** - Oracle Financial System
- **OFR** - Office of Financial Recovery
- **PPSU** - Payment Policy & Systems Unit. Housed within DSHS/HCLA, this unit manages the ProviderOne for Social Services webpage, P1 for Social Services billing guides & P1 for Social Services monthly newsletter. PPSU is also in charge of ProviderOne configuration for social service claims and post payment reviews/adjustments.
- **P1OFF** - ProviderOne Offset (claim adjustment)
- **PHI** - Protected Health Information
- **ProviderOne or P1** - ProviderOne is the Medicaid management information system (MMIS) utilized by WA State.
- **ProviderOne ID**. A 7-digit ID assigned to each provider's ProviderOne account. Also known as the Provider Domain ID or Domain Name.
- **RA** - Remittance Advice. RAs provides details about paid, denied, adjusted and in-process claims submitted in ProviderOne.
- **TCN** - Transaction Control Number. A unique tracking number assigned to each claim (also known as the claim number).
- **Warrant** - A paper check issued for claim payments

# CONTACT INFORMATION

I need help with ...	Contact ...
<ul style="list-style-type: none"> <li>• There is no active authorization</li> <li>• The authorization is 'in error' status</li> <li>• The dates, units, or rates on the authorization are wrong</li> </ul>	<b>The client's Case Manager</b>
<ul style="list-style-type: none"> <li>• Signing up to receive electronic payments (EFT)</li> <li>• Updating information in ProviderOne (location addresses, email addresses, communication preferences)</li> <li>• Social Service Medical providers only:               <ul style="list-style-type: none"> <li>○ Updating business license, taxonomy, NPI, or Dept. of Health license in ProviderOne</li> </ul> </li> </ul>	<b>Health Care Authority--Provider Enrollment</b> <b>Phone:</b> 1-800-562-3022 ext. 16137 <b>Phones are open:</b> Tuesdays and Thursdays from 7:30 a.m. to 4:30 p.m. (Closed from noon to 1 p.m.) <b>Email:</b> <a href="mailto:ProviderEnrollment@hca.wa.gov">ProviderEnrollment@hca.wa.gov</a> When emailing Provider Enrollment, you will get you a ticket/incident number. Save this ticket/incident # for future reference as needed.
<ul style="list-style-type: none"> <li>• Direct Data Entry (DDE) basic billing and claims assistance</li> <li>• Creating claim templates/template batch billing</li> <li>• Payment issues (lost checks)</li> <li>• Basic ProviderOne navigation &amp; questions</li> </ul>	<b>Health Care Authority--Medical Assistance Customer Service Center (MACSC)</b> <b>Phone:</b> 1-800-562-3022, choose "provider services" <b>Online:</b> <a href="#">HCA Secure form</a>
<ul style="list-style-type: none"> <li>• Accessing ProviderOne</li> <li>• Login issues (i.e., password reset, locked out)</li> <li>• Setting up additional users, profiles, or system administrators</li> </ul>	<b>Health Care Authority--ProviderOne Security</b> <b>Email:</b> <a href="mailto:ProviderOneSecurity@hca.wa.gov">ProviderOneSecurity@hca.wa.gov</a> <b>Online:</b> <a href="#">HCA Secure form</a>

## CONTACT INFORMATION *continued*

I need help with ...	Contact ...
<ul style="list-style-type: none"> <li>.dat file claim submissions/adjustments</li> </ul>	<p><b>Health Care Authority--HIPAA Help Desk</b>  <b>Email:</b> <a href="mailto:hipaa-help@hca.wa.gov">hipaa-help@hca.wa.gov</a></p> <p>In the subject line type: "Social Service Batch Upload"          In the body of the email include your:</p> <ul style="list-style-type: none"> <li>Name</li> <li>ProviderOne ID/domain</li> <li>Name of the batch file you are referencing ("SOC.xxxxxxx.20150131xxxxxx.SAMPLE_BATCH.dat")</li> <li>Description of your issue or what you need help with</li> <li>Your telephone number if you request a return call</li> </ul>
<ul style="list-style-type: none"> <li>Overpayment questions</li> </ul>	<p><b>DSHS--Office of Financial Recovery (OFR)</b>          Phone: 360-664-5700, option 3, 1-800-562-6114, or TTY WA 1-800-833-6388</p>
<ul style="list-style-type: none"> <li>Urgent payment issues</li> </ul> <p>Note: You should only contact the DSHS ProviderOne payment teams after you have tried resolving your issue through the appropriate channels (i.e., case manager, contract specialist, or HCA) AND client services are impacted.</p>	<p><b>DSHS--ALTSA or DDA ProviderOne payment teams</b></p> <p><b>DSHS ALTSA providers/clients</b>  <b>Email:</b> <a href="mailto:P1_escalation@dshs.wa.gov">P1_escalation@dshs.wa.gov</a></p> <p><b>DSHS DDA providers/clients</b>          Contact the DDA resource developer or contractor who will escalate to the regional payment specialist as needed.</p> <p>When emailing DSHS, please include your:</p> <ul style="list-style-type: none"> <li>Name (first and last)</li> <li>Name of your organization</li> <li>ProviderOne ID (also known as your P1 domain)</li> <li>The date you emailed HCA and the corresponding HCA Ticket #</li> <li>A brief description of your issue, who you've tried to contact, and how the issue impacts client services and/or your ability to receive payment</li> </ul>

# SUBMITTING SOCIAL SERVICE CLAIMS

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- Save Basic Bill ..... 23
- Retrieve Saved Claims ..... 24

This section outlines how to submit basic bills, also known as direct data entry (DDE) billing. For DDE, you must enter all billing information (Provider ID, Client ID, Authorization Number, Dates of Service, Service Code, and Units) each time you submit a claim.

Certain information needed for claim entry such as the authorization #, procedure code, modifier, etc. can be found on the client's authorization. See the [Getting Started & Billing Essentials](#) guide for directions on how to view your authorization list.

**Note:** The following directions are for non-medical Social Services Providers. If you are a Social Services Medical Provider, please use the [Submitting and Adjusting Social Service Medical Claims Guide](#).

# SUBMIT BASIC BILL

This section explains how to submit a basic bill for non-medical Social Services. This is also known as Direct Data Entry (DDE).

DDE means that you input all the needed information into the billing form.

To submit a basic bill:

- Log in to ProviderOne using the **EXT Provider Social Services** profile.
- Click on **Social Service Billing Screen**.

The screenshot displays the ProviderOne web application interface. At the top, the header shows 'Profile: EXT Provider Social Services' in a blue box. Below this, the left sidebar contains a menu with 'Social Services Authorization and Billing' expanded. The main content area shows 'Your Recent Online Activities' and a calendar. An arrow points to the 'Social Service Billing Screen' option in the expanded menu.

## SUBMIT BASIC BILL *continued*

The **Social Service Billing Screen** appears.

Enter the following information:

- **Provider ID** (your 7-digit domain/ProviderOne ID plus your 2 digit location code)
- **Client ID** (9-digit number that ends in WA)
- **Authorization Number**

### Notes:

*You must turn off your pop-up blocker before you begin billing.*

*Asterisks (\*) denote required fields.*

*The billing information is taken directly from the client's authorization. Exporting the authorization info to an Excel file allows you to copy and paste information for accuracy. Check your authorization before each billing as authorizations may change. View the [Getting Started & Billing Essentials Guide](#) for directions on how to view your authorization list.*

The screenshot shows the 'Social Service Billing Screen' in the ProviderOne system. The interface includes a top navigation bar with 'My Inbox' and 'Profile: EXT Provider Social Services'. Below this, there are tabs for 'Close', 'Save Claim', 'Submit Claim', and 'Reset'. The main section is titled 'Social Service Billing Screen' and contains a note: 'Note: asterisks (\*) denote required fields.' The form is divided into several sections: 'PROVIDER INFORMATION' with a 'BILLING PROVIDER' subsection containing a 'Provider ID' field; 'SUBSCRIBER/CLIENT INFORMATION' with a 'SUBSCRIBER/CLIENT' subsection containing a 'Client ID' field; 'CLAIM INFORMATION' with a '1. Authorization Number' field; and 'BASIC LINE ITEM INFORMATION' with a 'BASIC SERVICE LINE ITEMS' subsection. This subsection includes fields for 'Service Date From' and 'Service Date To' (each with mm, dd, ccyy sub-fields), 'Service Code', 'Patient Account No.', 'Modifiers' (1, 2, 3, 4), and 'Units'. At the bottom right, there are buttons for 'Add Service Line Item' and 'Update Service Line Item'. Orange arrows point to the 'Provider ID', 'Client ID', and 'Authorization Number' fields, indicating they are required.

## SUBMIT BASIC BILL *continued*

Under **Basic Line Item Information**, fill out the following information:

- **Service Date From**
- **Service Date To**
- **Service Code**
- **Modifier** (if applicable)
- **Units**

### Notes:

- Each service line spans a single day.
- All units of a specific code for the same day should be on the same line.
- A date range can be used only if:
  - The unit types are **daily** or **monthly**
  - Days are consecutive (worked in a row)
  - All days are within the same calendar month or include entire months
- The unit type can be found on the client's authorization

BASIC LINE ITEM INFORMATION															
BASIC SERVICE LINE ITEMS															
Service Date From:		mm	dd	ccyy	*	Service Date To:		mm	dd	ccyy	*				
		02	01	2024	*			02	01	2024	*				
Service Code:		T1019				*	Modifiers: 1:		U6	2:		3:		4:	
Patient Account No:															
						Units:		12	*						



## SUBMIT BASIC BILL *continued*

### Electronic Visit Verification (EVV) Items:

If you are billing for In-Home Personal Care Services or Respite Care Services, your claims must comply with Electronic Visit Verification (EVV) Items requirements. Click on the **red +** to expand this section.

**If you are not billing for In-Home Personal Care Services or Respite Care Services, you can skip these instructions and go to page 13.**

**BASIC SERVICE LINE ITEMS**

mm dd ccyy

\*Service Date From:

\*Service Code:

Patient Account No:

**+ ELECTRONIC VISIT VERIFICATION (EVV) ITEMS**

**ELECTRONIC VISIT VERIFICATION (EVV) ITEMS**

SS Servicing Only ProviderOne ID:

Manual Claims Indicator:

Hours Minutes Seconds

Service Start Time:

Service End Time:

Longitude (+/-000.00000 to 180.00000) Latitude (+/-00.00000 to 90.00000)

Service Start Time Geo-Data:

Service End Time Geo-Data:

Client-Provider Proximity for Start Time: ☐ Yes ☐ No

Client-Provider Proximity for End Time: ☐ Yes ☐ No

Client Verification for End Time: ☐ Yes ☐ No

## SUBMIT BASIC BILL *continued*

## EVV continued:

- In order to meet the Cures Act requirements, these fields are required for EVV billing:
  - **SS Servicing Only ProviderOne ID**
  - **Service Start/End Time**, Start and End times need to use 24 hour clock format. (example: 8:15am would be 08:15 and 8:15pm would be 20:15)
  - **Service Start/End Time Geo-Data.**
- **Additional required field for EVV basic billing (DDE):**
  - **Manual Claims Indicator**
- **These fields are optional at this time:**
  - **Client-Provider Proximity for Start/End Time**, this refers to if your EVV solution verifies that the provider and the client are nearby at the time the service starts/ends, such as through location technology or an affixed electronic device at the client's location.
  - **Client Verification for End Time**, this refers to if your EVV solution includes having the client verify that the service was performed at the end of the service episode.

**Note:**

*The Manual Claim Indicator was added as a mandatory element in April 2023 when submitting basic bill claims. This indicator explains why the data wasn't loaded electronically.*

**ELECTRONIC VISIT VERIFICATION (EVV) ITEMS**

<p>SS Servicing Only ProviderOne ID: <input type="text" value="12-12-01"/></p> <p>Hours Minutes Seconds</p> <p>Service Start Time: <input type="text" value="08"/> <input type="text" value="02"/> <input type="text" value="18"/></p> <p>Longitude (+/-000.00000 to 180.00000) Latitude (+/-00.00000 to 90.00000)</p> <p>Service Start Time Geo-Data: <input type="text" value="000.0000"/> <input type="text" value="00.0000"/></p> <p>Client-Provider Proximity for Start Time: <input type="radio"/> Yes <input checked="" type="radio"/> No</p>	<p>Manual Claims Indicator: <input type="text" value="--SELECT--"/></p> <p>Hours Minutes Seconds</p> <p>Service End Time: <input type="text" value="12"/> <input type="text" value="02"/> <input type="text" value="25"/></p> <p>Longitude (+/-000.00000 to 180.00000) Latitude (+/-00.00000 to 90.00000)</p> <p>Service End Time Geo-Data: <input type="text" value="000.0000"/> <input type="text" value="00.0000"/></p> <p>Client-Provider Proximity for End Time: <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Client Verification for End Time: <input type="radio"/> Yes <input checked="" type="radio"/> No</p>
--	--

## SUBMIT BASIC BILL *continued*

## EVV Notes about Geo-Data:

- All Geo-Data entries must be entered to at least 4 decimal places.
- Only the location(s) at **Service Start Time** and **Service End Time** must be captured and included in claim submission.
  - Geo-Data does not need to be gathered for the duration of the care encounter.

**Note:**

*When a caregiver is unable to utilize the agency's EVV software solution, billers should manually add Geo-Data coordinates and use the appropriate manual claims indicator code.*

ELECTRONIC VISIT VERIFICATION (EVV) ITEMS											
SS Servicing Only ProviderOne ID:				Manual Claims Indicator:							
<input type="text" value="01"/>				<input type="text" value="---SELECT---"/>							
Hours   Minutes   Seconds				Hours   Minutes   Seconds							
Service Start Time:		<input type="text" value="08"/>	<input type="text" value="02"/>	<input type="text" value="18"/>	Service End Time:		<input type="text" value="12"/>	<input type="text" value="02"/>	<input type="text" value="25"/>		
Longitude (+/-000.00000 to 180.00000)			Latitude (+/-00.00000 to 90.00000)			Longitude (+/-000.00000 to 180.00000)			Latitude (+/-00.00000 to 90.00000)		
Service Start Time Geo-Data:				Service End Time Geo-Data:							
<input type="text" value="000.0000"/> <input type="text" value="00.0000"/>				<input type="text" value="000.0000"/> <input type="text" value="00.0000"/>							
Client-Provider Proximity for Start Time:				Client-Provider Proximity for End Time:							
<input type="radio"/> Yes <input checked="" type="radio"/> No				<input type="radio"/> Yes <input checked="" type="radio"/> No							
Client Verification for End Time:											
<input type="radio"/> Yes <input checked="" type="radio"/> No											

## SUBMIT BASIC BILL *continued*

Once all billing information is entered on the **Basic Service Line Items** section and **EVV Items** section (if applicable), select **Add Service Line Item**.

BASIC LINE ITEM INFORMATION

BASIC SERVICE LINE ITEMS

mmddccyy

Service Date From: 02012024 \*

Service Code: T1019 \*

Patient Account No:

mmddccyy

Service Date To: 02012024 \*

Modifiers: 1: U6 2: 3: 4:

Units: 12 \*

+ ELECTRONIC VISIT VERIFICATION (EVV) ITEMS

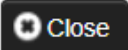
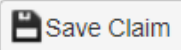


+ TPL INFORMATION

+ Add Service Line Item


Update Service Line Item

## SUBMIT BASIC BILL *continued*

If you entered a date range and are billing for a DAILY unit type, a note will appear telling you that the date range will be broken down into individual daily service lines when the claim is processed:

 Close  Save Claim  Submit Claim  Reset

**The service line will be split into separate service lines one for each day within the span you have entered.**

 **Social Service Billing Screen**

### Note:

ProviderOne will display instructional information before this message if any data entered is incorrect, i.e., *Provider ID*, *Client ID*, *Authorization Number*, or if *Service Date To* is earlier than *Service Date From*. Correct data per the message and continue.

## SUBMIT BASIC BILL *continued*

Once you click **Add Service Line Item** the **Basic Service Line Items** section clears. This allows entry of any subsequent service lines before submitting your claim.

**Additional service lines must be for the same authorization and client. Different service codes are allowed if they are from the same authorization.**

A claim service line appears under **Previously Entered Line Item Information**. The claim service line will show service dates, service code and modifier, as well as units entered. The total charges submitted will also be available to view.

**Check the line information for accuracy.**

### BASIC SERVICE LINE ITEMS

mm dd ccyy

\* Service Date From:

mm dd ccyy

\* Service Date To:

\* Service Code:

Modifiers: 1:  2:  3:  4:

Patient Account No:

\* Units:

Add Service Line Item

Update Service Line Item

#### Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.

Total Charges Submitting: \$ 5398.03

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/01/2017	01/31/2017	T1020	U1				31	Delete

## SUBMIT BASIC BILL *continued*

### Option 1 of entering additional service lines:

- Enter basic service line information in the cleared fields
  - ♦ **Service Date From/To,**
  - ♦ **Service Code,**
  - ♦ **Modifier,**
  - ♦ **Units.**
- Click on **Add Service Line Item.**  
 (The new service line appears;  
 shown below as line #2.)

#### Note:

You can add up to **31** service lines per claim.

**BASIC SERVICE LINE ITEMS**

mm dd ccyy      mm dd ccyy

\* Service Date From: 02 01 2017      \* Service Date To: 02 28 2017

\* Service Code: T1020      Modifiers: 1: U1 2: 3: 4:

Patient Account No:      \* Units: 28

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.      Total Charges Submitting: \$ 10273.67

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/01/2017	01/31/2017	T1020	U1				31	Delete
2	02/01/2017	02/28/2017	T1020	U1				28	Delete

#### Note:

The examples on page 16-18 shows a daily billing type. For billing types that are not daily or month, the Service Date From and Service Date To need to match.

## SUBMIT BASIC BILL *continued*

### Option 2 of entering additional service lines:

- Click on an existing **service line number**,
- The entered service line information populates,
- Enter **new data**,
- Click on 'Add Service Line Item'.
- **New service line appears.** (Shown below as line #3.)

**BASIC SERVICE LINE ITEMS**

\* Service Date From: mm dd ccyy 03 01 2017      \* Service Date To: mm dd ccyy 03 31 2017

\* Service Code: T1020      Modifiers: 1: U1 2: 3: 4:      Units: 31

Patient Account No:

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.      Total Charges Submitting: \$ 15671.70

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/01/2017	01/31/2017	T1020	U1				31	Delete
2	02/01/2017	02/28/2017	T1020	U1				28	Delete
3	03/01/2017	03/31/2017	T1020	U1				31	Delete



## SUBMIT BASIC BILL *continued*

### Editing a Service Line:

You may see the information previously entered has an error.  
To correct the data so that the service line is correct:

- Select the line number you wish to edit,
- The service line data appears,
- Make the needed correction to the service line data,
- Now select **Update Service Line Item**.

#### Note:

*The new data you have entered will now be shown on the chosen line. (Shown below as line #2.)*

**BASIC SERVICE LINE ITEMS**

mm dd ccyy      mm dd ccyy

\*Service Date From: 03 01 2017      \*Service Date To: 03 31 2017

\*Service Code: T1020      Modifiers: 1: U1 2: 3: 4:

Patient Account No:      Units: 31

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.

Total Charges Submitting: \$ 15671.70

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/01/2017	01/31/2017	T1020	U1				31	Delete
2	02/01/2017	02/28/2017	T1020	U1				28	Delete
3	03/01/2017	03/31/2017	T1020	U1				31	Delete

## SUBMIT BASIC BILL *continued*

### Deleting a Service Line:

You may see a line previously entered that was created in error and needs to be deleted in order to correct the data.

- Determine which line needs to be deleted in the **Previously Entered Line Item Information** section,
- Click **Delete** at the end of the line you wish to remove,

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.

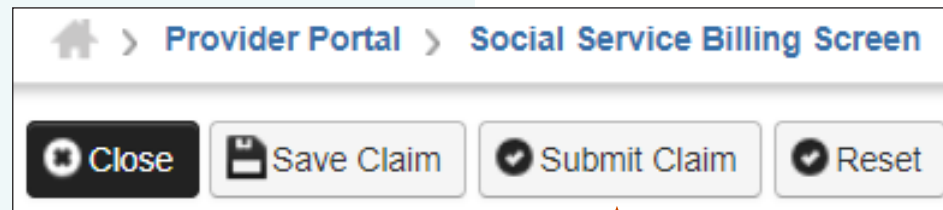
Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	09/21/2019	09/21/2019	T1019					1	<a href="#">Delete</a>
2	09/22/2019	09/22/2019	T1019					1	<a href="#">Delete</a>

- The line disappears from the claim.

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	09/21/2019	09/21/2019	T1019					1	<a href="#">Delete</a>

## SUBMIT BASIC BILL *continued*

Once all service line information is entered and checked for accuracy, click **Submit Claim** at the top of the screen.



## SUBMIT BASIC BILL *continued*

After selecting **Submit Claim**, the **Submitted Social Service Claim Details** screen appears.

**\*\*\*Your claim has not yet been submitted.\*\*\***

Here you will see the **Transaction Control Number (TCN)**, **Provider ID**, **Client ID**, **Date of Service** and **Total Claim Charge**.

If you do not receive a pop-up message displaying the TCN, Provider ID, etc., it is probably because your pop-up blockers are turned on. You will have to [turn off your pop-up blockers](#) and then try submitting the claim again.

Submitted Social Service Claim Details

TCN: [REDACTED]

Provider ID: [REDACTED]

Client ID: [REDACTED]WA

Date of Service: 03/01/2024-03/31/2024

Total Claim Charge: \$ 5115.00

Please click "Add Attachment" button, to attach the documents.

Add Attachment

Attachment List:

	Line No	File Name	Attachment Type	Transmission Code	Attachment Control #	File Size	Delete	Uploaded On
<input type="checkbox"/>	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼
No Records Found !								

Print Details

Print Cover Page

Submit

WARNING: You must click the 'Submit' button to complete the Claim Submission

### Note:

**'No Records Found!'** refers to attachments such as backup documentation. Social Service providers will not add attachments.

## SUBMIT BASIC BILL *continued*

When you see the **Submitted Social Service Claim Details** screen you may want to record the information. You can print a hard copy, print to a file on your computer, or record this information in another manner.

To complete claim submission, click on the **Submit** button (located on the bottom right corner of the page).

Submitted Social Service Claim Details:

TCN: [REDACTED]

Provider ID: [REDACTED]

Client ID: [REDACTED] WA

Date of Service: 03/01/2024-03/31/2024

Total Claim Charge: \$ 5115.00

Please click "Add Attachment" button, to attach the documents.

Add Attachment

Attachment List:

Line No	File Name	Attachment Type	Transmission Code	Attachment Control #	File Size	Delete	Uploaded On

No Records

Print Details

Print Cover Page

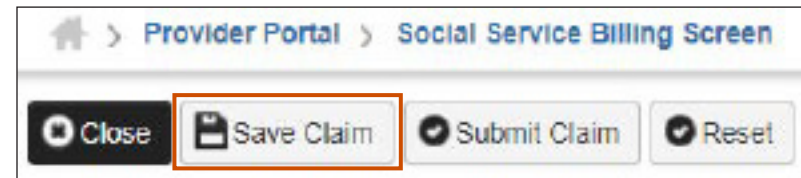
Submit

WARNING: You must click the 'Submit' button to complete the Claim Submission

# SAVE BASIC BILL


If you need to stop your work and return later to complete it, you can save the claim by:

- While in the **Social Service Billing Screen** make sure you have filled out at least these three fields:
  - ♦ **Provider ID**
  - ♦ **Client ID**
  - ♦ **Authorization Number**
- Click on **Save Claim**. (Located near the top left of the screen.)
- Confirm that you would like to save the claim by pressing **OK** on the pop-up message.



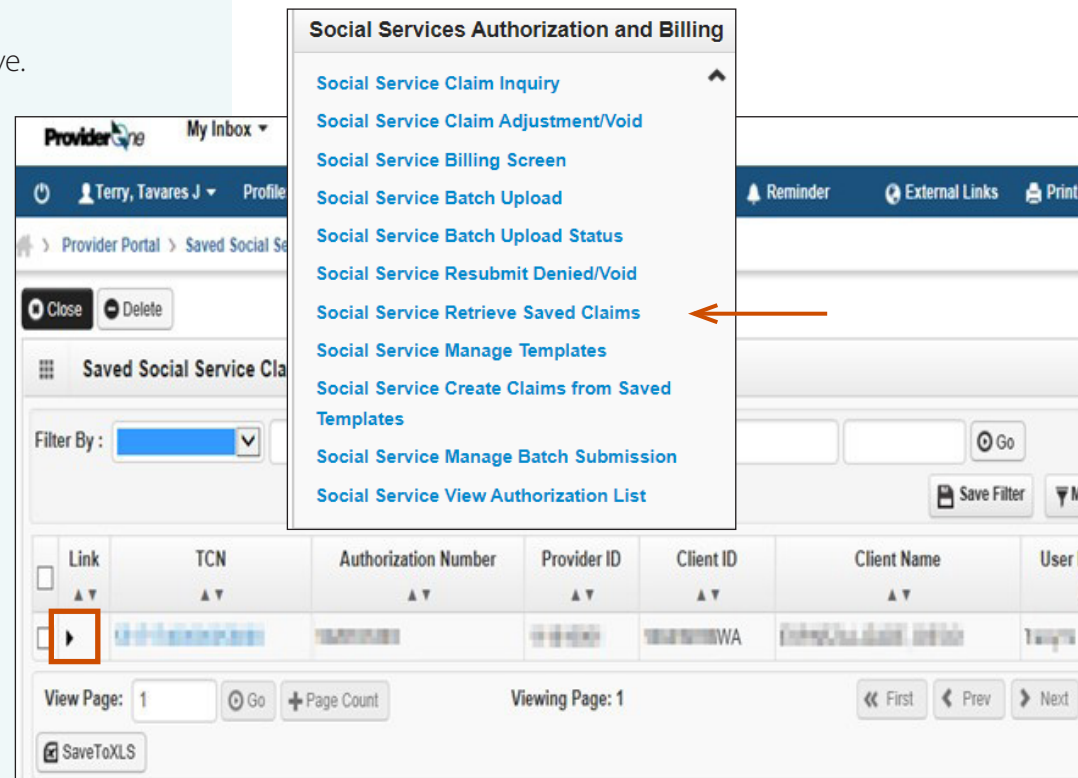
# RETRIEVE SAVED CLAIM

In order to retrieve a claim you saved:

- Log in to ProviderOne using the **EXT Provider Social Services** profile
- Click on **Social Service Retrieve Saved Claims**
- Click on the  next to the claim you want to retrieve.

## Note:

*You can see that a TCN has been created for the claim, however, this TCN has not been submitted for ProviderOne to process and will not be until you complete the claim submission.*



**Social Services Authorization and Billing**

- Social Service Claim Inquiry
- Social Service Claim Adjustment/Void
- Social Service Billing Screen
- Social Service Batch Upload
- Social Service Batch Upload Status
- Social Service Resubmit Denied/Void
- Social Service Retrieve Saved Claims**
- Social Service Manage Templates
- Social Service Create Claims from Saved Templates
- Social Service Manage Batch Submission
- Social Service View Authorization List

ProviderOne My Inbox


Terry, Tavares J Profile

Provider Portal > Saved Social Se

Close Delete

Saved Social Service Cla

Filter By:

Link	TCN	Authorization Number	Provider ID	Client ID	Client Name	User L
						

View Page: 1 Go Page Count Viewing Page: 1

SaveToXLS

Reminder External Links Print

Go Save Filter

First Prev Next

## RETRIEVE SAVED CLAIM *continued*

Once the claim you wish to finish has been selected, the basic billing screen appears.

The previously saved information will populate. From here the process continues the same as submitting any other claim. (Refer to pages 8-22 for instructions).

🏠 > [Provider Portal](#) > [Social Service Billing Screen](#)

Close Save Claim Submit Claim Reset

**Social Service Billing Screen**

Note: asterisks (\*) denote required fields.

**Basic Claim Info**

Billing Provider | Subscriber | Claim | Service

[Billing Instructions](#)

Submitter ID:

**PROVIDER INFORMATION**

**BILLING PROVIDER**

Provider ID:  \*

**SUBSCRIBER/CLIENT INFORMATION**

**SUBSCRIBER/CLIENT**

Client ID:  WA \*

**CLAIM INFORMATION**

1. Authorization Number:  \*



# CREATING SOCIAL SERVICE CLAIM TEMPLATES

- **Create a Template** ..... 27
- **Copy a Template** ..... 33
- **Submitting Claims from Saved Templates** .....37

This section explains how to create claim templates. Claim templates allow you to save data such as Provider ID, Client ID, and authorization number which helps eliminate errors by reducing the amount of data entry for each claim.

# CREATE A TEMPLATE

Creating claim templates are a good option if you have repetitive billing (i.e., the claim is the same or nearly the same each time you bill).

Using templates with previously saved information will help cut down on errors by reducing the amount of data entry for each claim, and is a great way to save time and make billing easier.

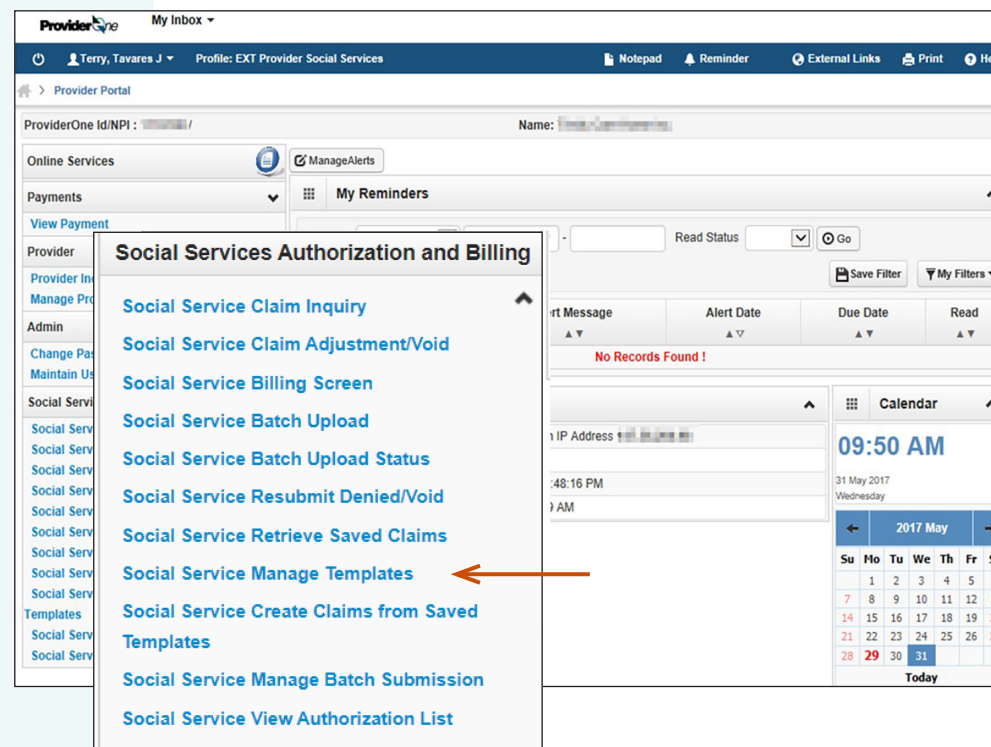
To create a Social Service Claim Template, first log in to ProviderOne using the **EXT Provider Social Services** profile. Then select **Social Service Manage Templates**.

## Note:

*Creating or 'managing' a template is not the same as submitting a claim.*

*The Manage Templates screen is for creating, editing, or removing templates. No claims can be submitted from the Manage Templates screen.*

*See pages 37-39 for directions on how to submit claims from a template.*



## CREATE A TEMPLATE *continued*

The **Create a Social Service Claim Template** page appears.

Here you will see any previously saved templates.

When there are a large number of templates, you can use the **Filter By** function to find a template.

**Note:**

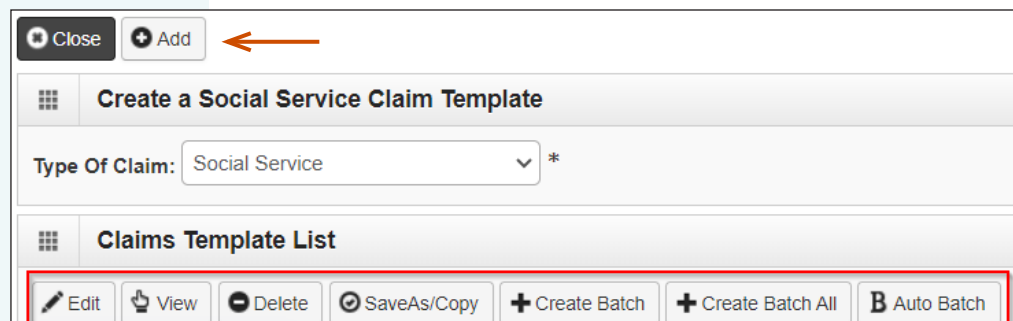
*The default **Type of Claim** is Social Service and should not be changed.*

The screenshot shows the 'Create a Social Service Claim Template' page. At the top, there are 'Close' and 'Add' buttons. Below them is a header bar with the title 'Create a Social Service Claim Template'. Under the header, there is a 'Type Of Claim' dropdown menu set to 'Social Service'. Below this is a section titled 'Claims Template List'. This section contains a toolbar with buttons for 'Edit', 'View', 'Delete', 'SaveAs/Copy', 'Create Batch', 'Create Batch All', and 'Auto Batch'. Below the toolbar is a 'Filter By' dropdown menu that is open, showing a list of fields: 'Filter By', 'Authorization Number', 'Client First Name', 'Client ID', 'Client Last Name', 'From Date of Service', 'Last Updated By', 'Last Updated Date', 'Provider ID', 'Service Code', 'Template Name', 'Template Type', and 'To Date of Service'. Below the filter menu is a table with columns for 'Template Name', 'Template Type', and 'Last Updated'. The table is currently empty, and a red message 'No Records Found!' is displayed at the bottom of the table area.

## CREATE A TEMPLATE *continued*

The **Create a Social Service Claim Template** page can be used to do several things:

- **Add** a new template
- **Edit** a saved template
- **View** a saved template
- **Delete** a saved template
- Change template name (**Save As**) or **Copy** a template
- **Create** a template batch



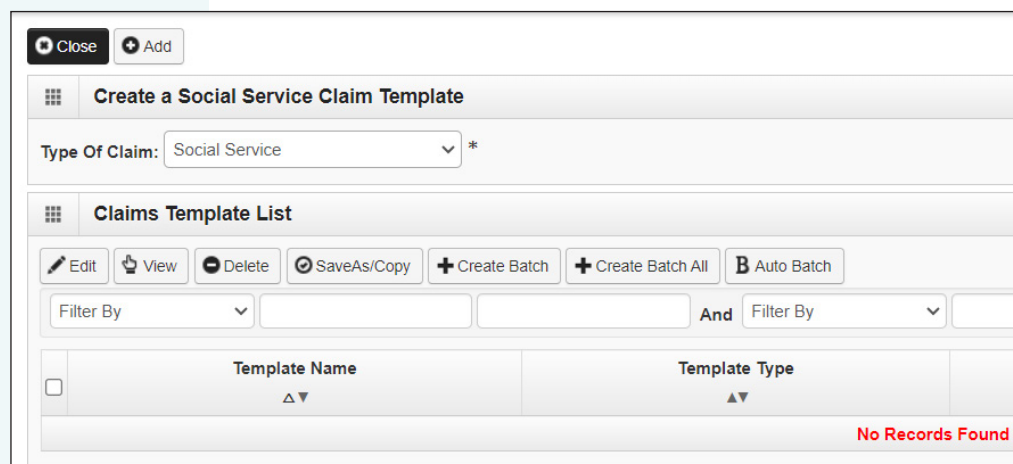
Close Add

Create a Social Service Claim Template

Type Of Claim: Social Service \*

Claims Template List

Edit View Delete SaveAs/Copy Create Batch Create Batch All Auto Batch



Close Add

Create a Social Service Claim Template

Type Of Claim: Social Service \*

Claims Template List

Edit View Delete SaveAs/Copy Create Batch Create Batch All Auto Batch

Filter By And Filter By

Template Name	Template Type
No Records Found !	

## CREATE A TEMPLATE *continued*

To create a new template, click on **Add**.

The **Social Service Provider Billing Screen** appears.

In order to save the template you must fill out these fields:

- **Template Name**. This is determined by you and is only used to identify the template.
- **Provider ID** as listed on the authorization.
- **Client ID** as listed on the authorization.
- **Authorization Number** as listed on the authorization.
- **Basic Line Item Information** as listed on the authorization, except for the "Service Date From" and Service Date To" data.

Once the required data elements have been entered, save the template by clicking on **Save Template** in the upper left corner of the screen.

Template Name:  \*

**PROVIDER INFORMATION**

**BILLING PROVIDER**

Provider ID:  \*

**SUBSCRIBER/CLIENT INFORMATION**

**SUBSCRIBER/CLIENT**

Client ID:  \*

**CLAIM INFORMATION**

1. Authorization Number:  \*

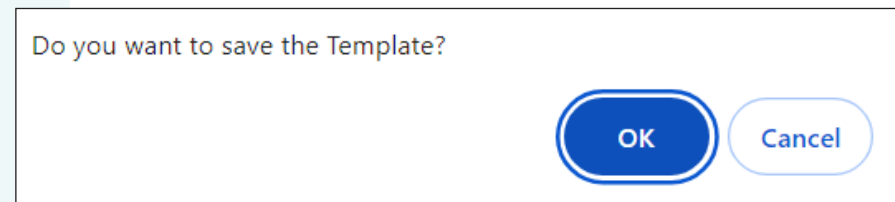
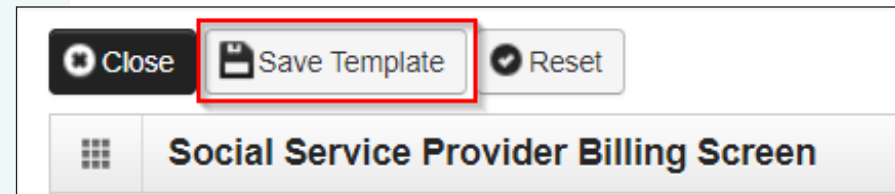
Close Save Template Reset

**Social Service Provider Billing Screen**

## CREATE A TEMPLATE *continued*

After choosing **Save Template**, you will be asked, **Do you want to save the Template?**

Select **OK** to confirm the save of the template. Select **Cancel** if you are not ready to save the template or need to make changes.

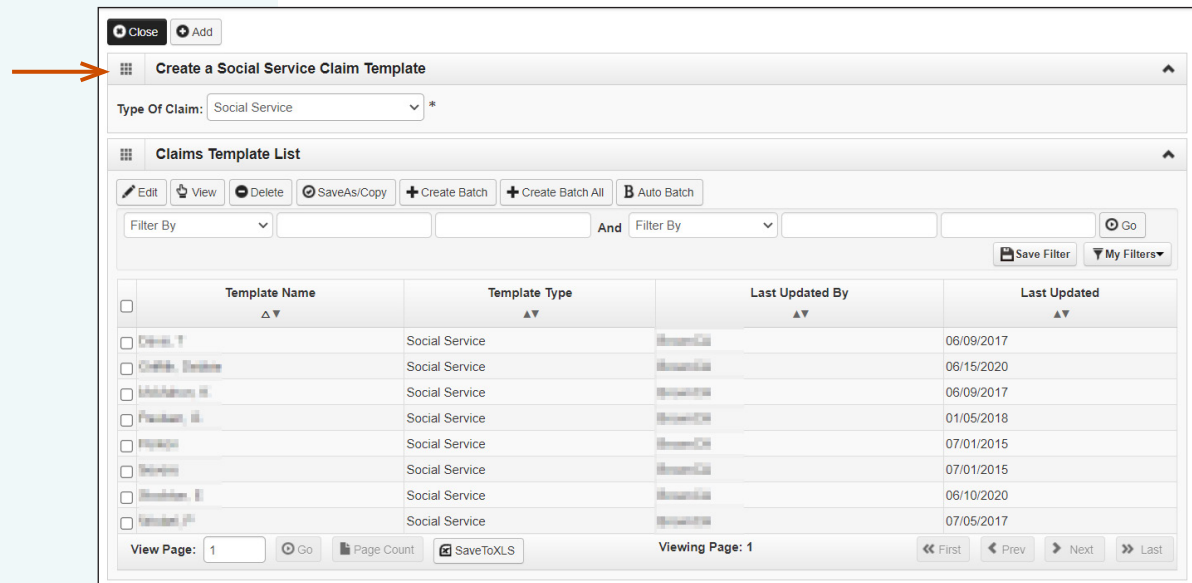


## CREATE A TEMPLATE *continued*

You will now be returned to the **Create a Social Service Claim Template** page.

Here, you will see the template you have created. You can see the template name, template type, the user who made the last update and the last updated date.

To view or delete the template, check the box next to the template name and choose the appropriate action button.



**Create a Social Service Claim Template**

Type Of Claim: Social Service \*

**Claims Template List**

Filter By  And Filter By

<input type="checkbox"/>	Template Name ▲▼	Template Type ▲▼	Last Updated By ▲▼	Last Updated ▲▼
<input type="checkbox"/>	Claim 1	Social Service	System	06/09/2017
<input type="checkbox"/>	Claim 2	Social Service	System	06/15/2020
<input type="checkbox"/>	Claim 3	Social Service	System	06/09/2017
<input type="checkbox"/>	Claim 4	Social Service	System	01/05/2018
<input type="checkbox"/>	Claim 5	Social Service	System	07/01/2015
<input type="checkbox"/>	Claim 6	Social Service	System	07/01/2015
<input type="checkbox"/>	Claim 7	Social Service	System	06/10/2020
<input type="checkbox"/>	Claim 8	Social Service	System	07/05/2017

View Page: 1  Page Count  Viewing Page: 1

# COPY A TEMPLATE

As a way to save time, you can use the template you just created to make similar templates for other clients.

To do this, you can make a copy of an existing template, change the client information, rename the template, and save.

## To Copy a Template:

- Check the box next to the desired template name, then
- Select **SaveAs/Copy**.

### Note:

*Creating new templates from a previously saved template can save you time. However, be mindful of the information being entered.*

*Incorrect authorization numbers, Provider IDs, or Client IDs will prevent the template from being saved.*

**Create a Social Service Claim Template**

Type Of Claim: Social Service \*

**Claims Template List**

Buttons: Edit, View, Delete, **SaveAs/Copy**, Create Batch

Filter By: [Dropdown]

	Template Name	Te
<input type="checkbox"/>		
<input checked="" type="checkbox"/>		Social Service
<input type="checkbox"/>		Social Service



## COPY A TEMPLATE *continued*

After choosing **SaveAs/Copy**, the original saved template appears.

To update the template , change any of the details below as needed:

- **Template Name**
- **Provider ID**
- **Client ID**
- **Authorization Number**
- To save the template, click on **Save Template**.

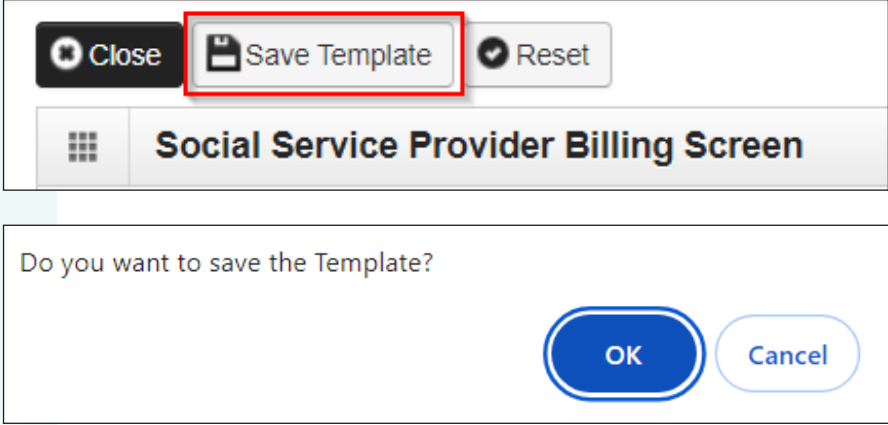
The screenshot displays the 'Social Service Provider Billing Screen' with the following sections and fields:

- Top Bar:** Includes 'Close', 'Save Template', and 'Reset' buttons. An orange arrow points to the 'Reset' button.
- Section Headers:** 'Basic Claim Information:', 'Billing Provider | Subscriber | Claim | Service', 'PROVIDER INFORMATION', 'SUBSCRIBER/CLIENT INFORMATION', 'CLAIM INFORMATION', and 'BASIC LINE ITEM INFORMATION'.
- Fields and Callouts:**
  - Template Name:** A text input field with a callout box labeled 'Change Template Name'.
  - Provider ID:** A text input field with a callout box labeled 'Change Client ID'.
  - Client ID:** A text input field with a callout box labeled 'Change Client ID'.
  - Authorization Number:** A text input field with a callout box labeled 'Change Authorization Number'.
- Other Elements:** A 'Submitter ID' field, a 'Note: asterisks (\*) denote required fields.' message, and a 'Billing Instructions' link.

## COPY A TEMPLATE *continued*

After choosing **Save Template**, you will be asked, **Do you want to save the Template?**

Select **OK** to confirm the save of the template. Select **Cancel** if you are not ready to save the template or need to make changes.



The screenshot shows the 'Social Service Provider Billing Screen' interface. At the top, there are three buttons: 'Close', 'Save Template' (which is highlighted with a red rectangular box), and 'Reset'. Below these buttons is a header bar with a grid icon and the text 'Social Service Provider Billing Screen'. Below the header bar is a confirmation dialog box with the text 'Do you want to save the Template?'. At the bottom right of the dialog box are two buttons: 'OK' (a solid blue button) and 'Cancel' (a light blue outlined button).

## COPY A TEMPLATE *continued*

You will now be returned to the **Create a Social Service Claim Template** page.

The newly saved template will be shown along with the original template.

Repeat the process as many times as needed.

Close

Add

Create a Social Service Claim Template

Type Of Claim: Social Service

Edit

View

Delete

SaveAs/Copy

Create Batch

Create Batch All

Auto Batch

Claims Template List

Filter By :

And

	Template Name ▲▼	Template Type ▲▼
<input type="checkbox"/>	Client, My	Social Service
<input type="checkbox"/>	Client, My Other	Social Service

View Page: 1

Go

Page Count

SaveToXLS

Viewing Page: 1

# SUBMITTING CLAIMS FROM SAVED TEMPLATES

As previously mentioned, claims cannot be submitted from the **Social Service Manage Templates** screen.

To submit claims using the templates you have saved, first log in to ProviderOne using the **EXT Provider Social Services** profile.

Then select **Social Services Create Claims from Saved Templates**.

The screenshot displays the ProviderOne Social Services Billing interface. At the top, a blue header bar reads "Profile: EXT Provider Social Services". Below this, a navigation bar includes "Terry, Tavares J." and links for "External Links", "Print", and "Help". The main content area is titled "Provider Portal" and shows "ProviderOne Id/NPI : [redacted]" and "Name: [redacted]". A sidebar on the left lists various functions under "Online Services", "Payments", "Provider", "Admin", "Social Services Autho", and "Templates". The "Social Services Autho" section is expanded, showing a dropdown menu with the following options: "Social Service Claim Inquiry", "Social Service Claim Adjustment/Void", "Social Service Billing Screen", "Social Service Batch Upload", "Social Service Batch Upload Status", "Social Service Resubmit Denied/Void", "Social Service Retrieve Saved Claims", "Social Service Manage Templates", "Social Service Create Claims from Saved Templates" (highlighted with an orange arrow), "Social Service Manage Batch Submission", and "Social Service View Authorization List". The main content area on the right shows a "Read Status" dropdown, a "Go" button, and a "Save Filter" button. Below this, there are fields for "Alert Date", "Due Date", and "Read". A red message "No Records Found!" is displayed. At the bottom right, there is a "Calendar" widget showing the date "31 May 2017 Wednesday" and a time "09:50 AM".

## SUBMITTING CLAIMS FROM SAVED TEMPLATES *continued*

- The **Create Social Service Claim from Saved Templates List** appears.
- Here you will see all your claim templates.

- To select a template, click on the blue hyperlinked name. ----->

ProviderOne My Inbox ▾

Profile: EXT Provider Eligibility Checker-Claims Submitter Notepad Reminder External Links ▾ Print Help

Provider Portal > Create Social Service Claim from Saved TemplatesList

Close

Create Social Service Claim from Saved TemplatesList

Filter By ▾ And Filter By ▾

Go Save Filter My Filters ▾

Template Name ▲▼	Type ▲▼	Last Updated By ▲▼	Last Updated ▲▼
<a href="#">Template 1</a>	Social Service	XXXXXX	06/09/2017
<a href="#">Template 2</a>	Social Service	XXXXXX	06/15/2020
<a href="#">Template 3</a>	Social Service	XXXXXX	06/09/2017

## SUBMITTING CLAIMS FROM SAVED TEMPLATES *continued*

After selecting a template, you will see the saved information from the chosen template. This will include:

- **Provider ID**
- **Client ID**
- **Authorization Number**

Next, fill out the rest of the claim information and then submit the claim as instructed on pages 19-22.

The screenshot displays the 'PROVIDER INFORMATION' section of the billing system. It includes the following sections and fields:

- PROVIDER INFORMATION**
  - BILLING PROVIDER**
    - \* Provider ID: [Field] (highlighted with an orange arrow)
  - SUBSCRIBER/CLIENT INFORMATION**
    - SUBSCRIBER/CLIENT**
      - \* Client ID: [Field] (highlighted with an orange arrow)
    - CLAIM INFORMATION**
      - 1. \* Authorization Number: [Field] (highlighted with an orange arrow)
- CLAIM INFORMATION**
  - 1. \* Authorization Number: [Field]
- BASIC LINE ITEM INFORMATION**
  - BASIC SERVICE LINE ITEMS**
    - \* Service Date From: [mm] [dd] [ccyy]
    - \* Service Date To: [mm] [dd] [ccyy]
    - \* Service Code: [Field]
    - Modifiers: 1: [Field] 2: [Field] 3: [Field] 4: [Field]
    - \* Units: [Field]
    - Patient Account No: [Field]
    - [Add Service Line Item] [Update Service Line Item]
- Previously Entered Line Item Information**
  - Click a Line No. below to view/update that Line Item Information.
  - Total Charges Submitting: \$ 0.00
- Table: Previously Entered Line Item Information**

Line No	Service Dates	To	Service Code	Modifiers	Units
	From			1 2 3 4	

# CREATING AND SUBMITTING SOCIAL SERVICE TEMPLATE BATCH CLAIMS

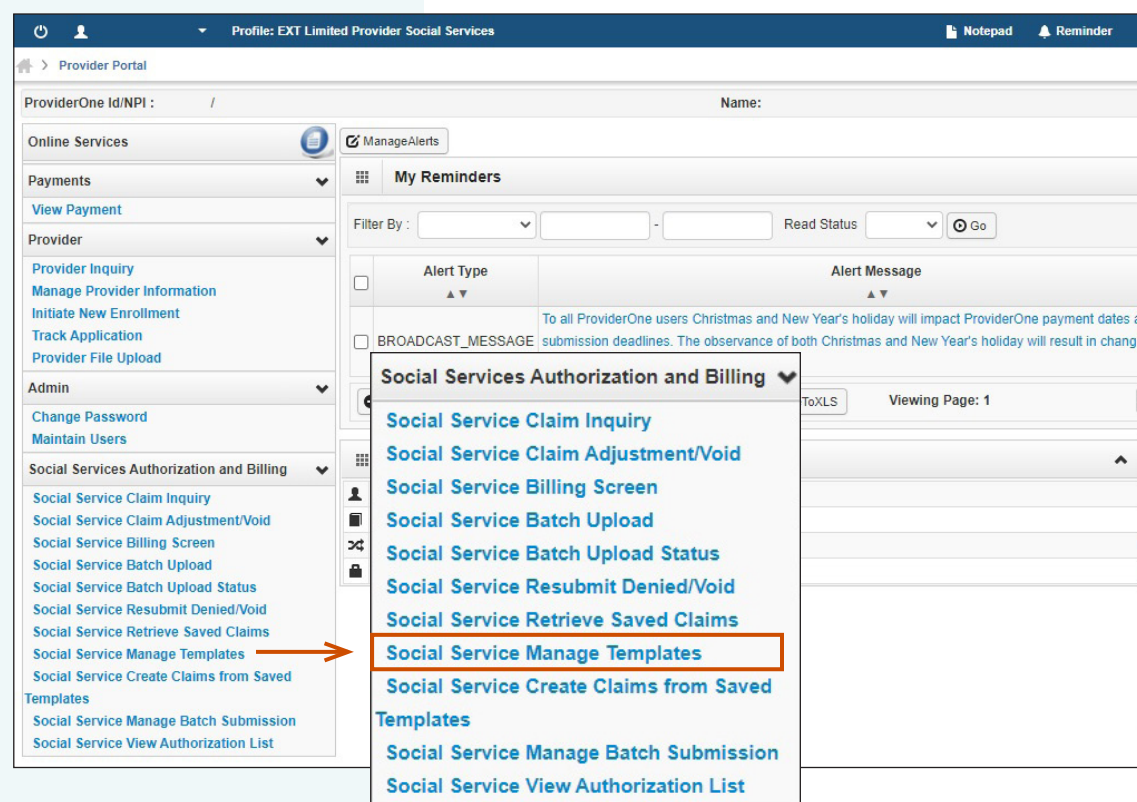
- **Create a Template Batch** .....41
- **Submit a Template Batch** .....47
- **Revalidate a Template Batch** ..... 56

A Batch (template) is a group of claims which share the same date of service. The Batch allows the provider to create a group (batch) of templates, change the date of service on all the templates at one time, and submit the batch all at once.

# CREATE A TEMPLATE BATCH

To create a template batch:

From the **Provider Portal**, click on **Social Service Manage Templates**:





## CREATE A TEMPLATE BATCH *continued*

- The **Create a Social Service Claim Template** page appears.
- You will see all the claim templates you have created.
- The **Template Type** should be **Social Service**.
- Before creating a Batch Template, review the individual templates.
  - Individual templates must include Basic Service Line Items.

### Note:

For information on how to review and edit a Claim Template, go to page 27.

Close Add

Create a Social Service Claim Template

Type Of Claim: Social Service

Edit View Delete SaveAs/Copy Create Batch Create Batch All Auto Batch

Claims Template List

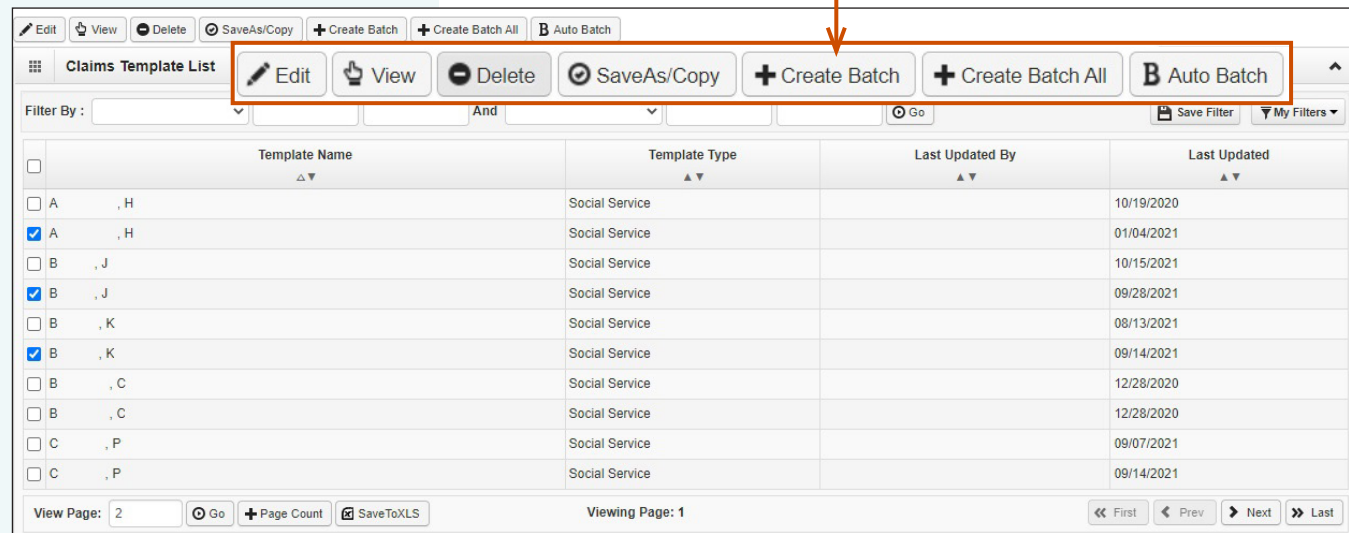
Filter By : And Go Save Filter My Filters

	Template Name	Template Type	Last Updated By	Last Updated
<input type="checkbox"/>	A , H	Social Service		10/19/2020
<input type="checkbox"/>	A , H	Social Service		01/04/2021
<input type="checkbox"/>	B , J	Social Service		10/15/2021
<input type="checkbox"/>	B , J	Social Service		09/28/2021
<input type="checkbox"/>	B , K	Social Service		08/13/2021
<input type="checkbox"/>	B , K	Social Service		09/14/2021
<input type="checkbox"/>	B , C	Social Service		12/28/2020
<input type="checkbox"/>	B , C	Social Service		12/28/2020
<input type="checkbox"/>	C , P	Social Service		09/07/2021
<input type="checkbox"/>	C , P	Social Service		09/14/2021

View Page: 2 Go Page Count SaveToXLS Viewing Page: 1 First Prev Next Last

## CREATE A TEMPLATE BATCH *continued*

- To submit selected templates in a batch:
  - Click on ☐ box next to the desired **Template Names** to include in the batch
  - Click **Create Batch**
- To submit all templates in a batch:
  - Click on **Create Batch All**
- Pop-up appears
- Click **OK**



	Template Name	Template Type	Last Updated By	Last Updated
<input type="checkbox"/>	A , H	Social Service		10/19/2020
<input checked="" type="checkbox"/>	A , H	Social Service		01/04/2021
<input type="checkbox"/>	B , J	Social Service		10/15/2021
<input checked="" type="checkbox"/>	B , J	Social Service		09/28/2021
<input type="checkbox"/>	B , K	Social Service		08/13/2021
<input checked="" type="checkbox"/>	B , K	Social Service		09/14/2021
<input type="checkbox"/>	B , C	Social Service		12/28/2020
<input type="checkbox"/>	B , C	Social Service		12/28/2020
<input type="checkbox"/>	C , P	Social Service		09/07/2021
<input type="checkbox"/>	C , P	Social Service		09/14/2021

Do you want to save the Template?

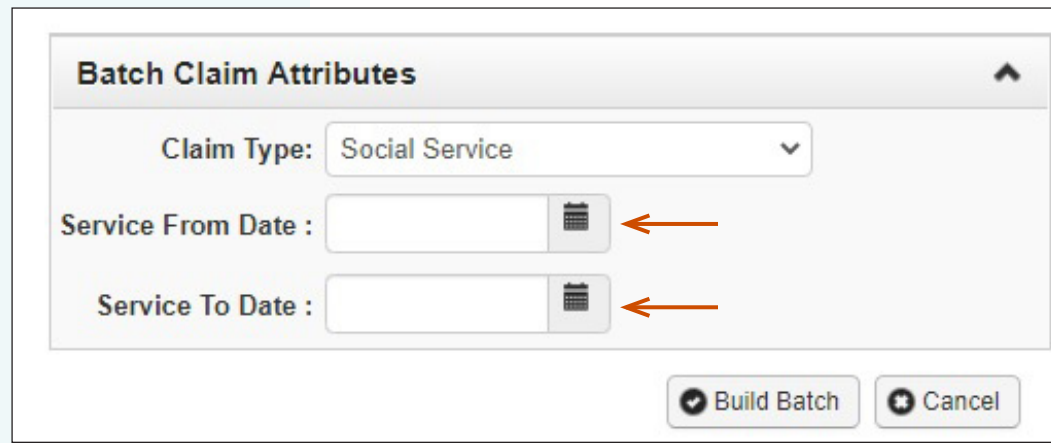
OK

Cancel

## CREATE A TEMPLATE BATCH *continued*


**Batch Claim Attributes** appears:


- **Claim Type** defaults to **Social Service** (do not change this)
- Enter **Service From Date**
- Enter **Service To Date**



**Batch Claim Attributes**

Claim Type: Social Service

Service From Date :   ←

Service To Date :   ←

### Note:

- The Date of Service will be changed on all the service lines on each template. All claims within the template must be for services provided on the date entered.
- The Date of Service can only be a single day.
- A date range can be used only if:
  - All unit types are **daily** or **monthly**
  - Days are consecutive (worked in a row)
  - All days are within the same calendar month or include entire months
  - # of units on templates equals the days or months within the range
  - All the templates have the same date range

## CREATE A TEMPLATE BATCH *continued*

- Click on **Build Batch**
- Assigned **Batch Number** appears along with the number of total claims included in the batch
- Click **Cancel**

**Note:**

*Your claim has now been built, **but not yet submitted.***

Batch Claim Attributes

Claim Type: Social Service

Service From Date : 12/01/2021

Service To Date : 12/22/2021

Build Batch

Cancel

Batch Claim Attributes

Claim Type: Social Service

Service From Date : 12/01/2021

Service To Date : 12/22/2021

Build Batch

Cancel

## CREATE A TEMPLATE BATCH *continued*

The **Create Claim Template** page appears.

You can repeat the process and create additional batches, or

Click **Close** to return to the Provider Portal.

**Create a Social Service Claim Template**

Type Of Claim: Social Service

Buttons: Edit, View, Delete, SaveAs/Copy, Create Batch, Create Batch All, Auto Batch

**Claims Template List**

Template Name	Template Type	Last Updated By	Last Updated
A, H	Social Service		10/19/2020
A, H	Social Service		01/04/2021
B, J	Social Service		10/15/2021
B, J	Social Service		09/28/2021
B, K	Social Service		08/13/2021
B, K	Social Service		09/14/2021
B, C	Social Service		12/28/2020
B, C	Social Service		12/28/2020
C, P	Social Service		09/07/2021
C, P	Social Service		09/14/2021

View Page: 2 | Viewing Page: 1

### Note:

After a batch is created, ProviderOne checks the batch to ensure the templates have complete claim information:

- **Pass Validation** means all the templates have complete, valid information and the batch can be submitted.
- **Failed Validation** means one or more items within the batch is not valid and the batch cannot be submitted. See [Revalidate a Template Batch](#) section which starts on page 56.

# SUBMIT A TEMPLATE BATCH

After you have created your template batch and the batch has passed validation, you are now ready to submit the template batch for processing.

- From the Provider Portal, click on **Social Service Manage Batch Submission**

The screenshot shows the Provider Portal interface. The left sidebar contains a menu with the following items:

- Online Services
  - View Payment
- Payments
  - Provider Inquiry
  - Manage Provider Information
  - Initiate New Enrollment
  - Track Application
  - Provider File Upload
- Admin
  - Change Password
  - Maintain Users
- Social Services Authorization and Billing
  - Social Service Claim Inquiry
  - Social Service Claim Adjustment/Void
  - Social Service Billing Screen
  - Social Service Batch Upload
  - Social Service Batch Upload Status
  - Social Service Resubmit Denied/Void
  - Social Service Retrieve Saved Claims
  - Social Service Manage Templates
  - Social Service Create Claims from Saved Templates
  - Social Service Manage Batch Submission
  - Social Service View Authorization List

The 'Social Services Authorization and Billing' menu is expanded, showing a list of options. An orange arrow points to the 'Social Service Manage Batch Submission' option.

The main content area shows the 'My Reminders' section with a filter by date and a table of reminders. The table has columns for 'Alert Type' and 'Alert Message'. The first row shows a 'BROADCAST\_MESSAGE' alert with a message about Christmas and New Year's holiday impacts on payment dates.

## SUBMIT A TEMPLATE BATCH *continued*

- Click on ☐ box next to the desired batch. (A batch must have **Passed Validation** before it can be submitted.)

<input type="checkbox"/>	Batch Number	Type	Created By	Batch Creation Date	Status	From DOS	To DOS	Total Billed Amount	Claim Count	Submitted Claim Count
<input type="checkbox"/>	1280791780383	Social Service		12/22/2021	Passed Validation	12/01/2021	12/22/2021	\$196.39	3	0

- Click on **View Claims**.

Close	<b>View Claims</b>	Revalidate	Delete	View Claims						
Social Service Batch Claim Submission Status List										
Filter By : <input type="text"/> And <input type="text"/> <input type="button" value="Go"/> <input type="button" value="Save Filter"/> <input type="button" value="My Filters"/>										
<input type="checkbox"/>	Batch Number	Type	Created By	Batch Creation Date	Status	From DOS	To DOS	Total Billed Amount	Claim Count	Submitted Claim Count
<input type="checkbox"/>	1280791780383	Social Service		12/22/2021	Passed Validation	12/01/2021	12/22/2021	\$196.39	3	0
<input type="checkbox"/>	1280791351764	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$1,410.96	2	2
<input type="checkbox"/>	1280791351763	Social Service		10/15/2021	Submitted for Claims Loading	09/01/2021	09/30/2021	\$3,527.40	2	2
<input type="checkbox"/>	1280791351751	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/05/2021	\$587.90	2	2
<input type="checkbox"/>	1280791351748	Social Service		10/15/2021	Submitted for Claims Loading	10/06/2021	10/12/2021	\$823.06	2	2
<input type="checkbox"/>	1280791351741	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$57.48	1	1
<input type="checkbox"/>	1280791351718	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$2,130.96	2	2
View Page: 2 <input type="button" value="Go"/> <input type="button" value="Page Count"/> <input type="button" value="SaveToXLS"/> Viewing Page: 1 <input type="button" value="First"/> <input type="button" value="Prev"/> <input type="button" value="Next"/> <input type="button" value="Last"/>										



## SUBMIT A TEMPLATE BATCH *continued*

- **Claims Created from Batch List** appears
- Each template is assigned a **System Generated Claim ID**:

Link	System Generated Claim ID	Template Name	Client ID	Client Name	Authorization Number	From Date Of Service	To Date Of Service
<input type="checkbox"/>	1280775980983-0001	K, M	WA	K, M		03/27/2018	03/31/2018

### Note:

*The System Generated Claim ID is the batch number and saved claim number.*

- You can modify a claim prior to submission of the Batch.
  - Click on the **System Generated Claim ID**
  - The template appears
  - Modify the template as needed
  - **Save** template

**Social Service Provider Billing Screen**

Note: asterisks (\*) denote required fields.

Billing Provider: 01 | Subscriber: WA | Claim: 1280775980983-0001 | Service: K, M

Submitter ID:

**PROVIDER INFORMATION**

BILLING PROVIDER

\* Provider ID: 01

**SUBSCRIBER/CLIENT INFORMATION**

SUBSCRIBER/CLIENT

\* Client ID: WA

**CLAIM INFORMATION**

1. \* Authorization Number:

**BASIC LINE ITEM INFORMATION**

BASIC SERVICE LINE ITEMS

\* Service Date From: mm dd yyyy 03/27/2018

\* Service Date To: mm dd yyyy 03/31/2018

\* Service Code: T1020

\* Modifiers: 1: 2: 3: 4:

\* Units: 5

\* Patient Account No:

**ELECTRONIC VISIT VERIFICATION (EVV) ITEMS**

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.

Line No.	From	To	Service Code	Modifiers	Units
1	03/27/2018	03/31/2018	T1020	U4	5

Total Charges Submitting: \$525.00



## SUBMIT A TEMPLATE BATCH *continued*

- To modify the claim
  - Click on** Line Number
  - Basic Line Information populates
  - Enter** modification
  - Click on** Update Service Line Item

**PROVIDER INFORMATION**

**BILLING PROVIDER**

\* Provider ID: 101

**SUBSCRIBER/CLIENT INFORMATION**

**SUBSCRIBER/CLIENT**

\* Client ID: WA

**CLAIM INFORMATION**

1. \* Authorization Number:

**BASIC LINE ITEM INFORMATION**

**BASIC SERVICE LINE ITEMS**

\* Service Date From: 03/27/2018

\* Service Code: T1020

Patient Account No:

\* Service Date To: 03/28/2018

Modifiers: 1: U4 2: 3: 4:

\* Units: 2

\* Units: 2

**ELECTRONIC VISIT VERIFICATION (EVV) ITEMS**

☒ Add Service Line Item ☒ Update Service Line Item

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.

Total Charges Submitting: \$ 525.00

Line No	Service Dates	Service Code	Modifiers	Units
No	From	To	1 2 3 4	
1	03/27/2018	03/31/2018	T1020 U4	5 <a href="#">Delete</a>

## SUBMIT A TEMPLATE BATCH *continued*

- Modified service line appears
- Click on** Save Claim

Close Save Claim

The service line will be split into separate service lines one for each day within the span you have entered.

Social Service Provider Billing Screen

Note: asterisks (\*) denote required fields.

Basic Claim Information:

Billing Provider | Subscriber | Claim | Service

Submitter ID:

PROVIDER INFORMATION

BILLING PROVIDER

\* Provider ID:

SUBSCRIBER/CLIENT INFORMATION

SUBSCRIBER/CLIENT

\* Client ID:

CLAIM INFORMATION

1. \* Authorization Number:

BASIC LINE ITEM INFORMATION

BASIC SERVICE LINE ITEMS

\* Service Date From:  \* Service Date To:

\* Service Code:  Modifiers: 1:  2:  3:  4:

Patient Account No:  \* Units:

ELECTRONIC VISIT VERIFICATION (EVV) ITEMS

Add Service Line Item Update Service Line Item

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.

Total Charges Submitting: \$ 210.00

Line Service Dates		Service Code	Modifiers				Units	
No	From To		1	2	3	4		
1	03/27/2018 03/28/2018	T1020	U4				2	Delete

## SUBMIT A TEMPLATE BATCH *continued*

- Claims Created from Batch List appears
- You can delete a claim prior to submission of the batch.  
**Click on** ☐ box next to the desired batch
- **Click on** Delete

The screenshot displays the 'Social Service Claims created from Batch List' interface. At the top, there are buttons for 'Close', 'Submit Selected', 'Submit Entire Batch', and 'Delete'. Below this is a filter section with 'Filter By' dropdowns and a 'Go' button. The main table lists claims with columns: Link, System Generated Claim ID, Template Name, Client ID, Client Name, Authorization Number, From Date Of Service, and To Date Of Service. Two claims are listed with System Generated Claim ID 6521 and 000. An orange arrow points to the 'Delete' button in the top toolbar. Another orange arrow points to the checkbox in the first row of the table, which is highlighted with a red box. A modal window is open, showing the same table with the first row selected (checkbox checked) and the 'Delete' button highlighted with a red box. The modal also has a 'View Page' section with '1' and a 'Go' button.

Link	System Generated Claim ID	Template Name	Client ID	Client Name	Authorization Number	From Date Of Service	To Date Of Service
<input type="checkbox"/>	6521 000	F , A	WA	F , A		10/01/2021	10/12/2021
<input type="checkbox"/>	6521 000	F , A				10/01/2021	10/12/2021

## SUBMIT A TEMPLATE BATCH *continued*

You can submit all or some of the listed claims.

- You select some of the claims, **click on** ☐ box next to the desired claims
- **Click on** Submit Selected
- To submit all of the listed claims, **click on** Submit Entire Batch

The screenshot displays the 'Social Service Claims created from Batch List' interface. At the top, there are buttons for 'Close', 'Submit Selected', 'Submit Entire Batch', and 'Delete'. Below this is a filter section with 'Filter By' dropdowns and a 'Go' button. The main area contains a table with columns: Link, System Generated Claim ID, Template Name, Client ID, Client Name, Authorization Number, From Date Of Service, and To Date Of Service. Two rows of data are visible, both with 'Link' 6521 and 'System Generated Claim ID' 000. An orange arrow points to the checkbox in the first row, which is highlighted with a red box. Another orange arrow points to the 'Submit Selected' button, which is also highlighted with a red box. A third orange arrow points to the 'Submit Entire Batch' button, which is also highlighted with a red box. At the bottom, there are buttons for 'View Page: 1', 'Go', '+ Page Count', and 'SaveToXLS'.

Link	System Generated Claim ID	Template Name	Client ID	Client Name	Authorization Number	From Date Of Service	To Date Of Service
6521	000	F, A	WA	F, A		10/01/2021	10/12/2021
6521	000	F, A				10/01/2021	10/12/2021

## SUBMIT A TEMPLATE BATCH *continued*

- After submitting the batch, the System Generated Claim ID is replaced with the Transaction Control Number (TCN)
- **Click on** Close

The screenshot shows the 'Social Service Claims created from Batch List' interface. The main window has a toolbar with buttons: Close, Submit Selected, Submit Entire Batch, and Delete. Below the toolbar is a table with columns: Link, System Generated Claim ID, Template Name, Client ID, Client Name, Authorization Number, From Date Of Service, and To Date Of Service. The table contains two rows of data. A modal window is open, showing a similar table with two rows of data. The 'Close' button in the modal's toolbar is highlighted with an orange arrow.

Link	System Generated Claim ID	Template Name	Client ID	Client Name	Authorization Number	From Date Of Service	To Date Of Service
<input type="checkbox"/>	6521 000	F, A	WA	F, A		10/01/2021	10/12/2021
<input type="checkbox"/>	6521 000	F, A				10/01/2021	10/12/2021

Link	System Generated Claim ID	Template Name
<input type="checkbox"/>	6521 000	F, A
<input type="checkbox"/>	6521 000	F, A

## SUBMIT A TEMPLATE BATCH *continued*

- Batch Claim Submission Status List appears
- Showing updated status
- Showing Submitted Claim Count
- **Click on** Close

Social Service Batch Claim Submission Status List										
<div> Filter By : <div></div> <div></div> And <div></div> <div></div> <div></div> Go Save Filter My Filters </div>										
	Batch Number	Type	Created By	Batch Creation Date	Status	From DOS	To DOS	Total Billed Amount	Claim Count	Submitted Claim Count
	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼	▲▼
<input type="checkbox"/>	1280791780383	Social Service		12/22/2021	Submitted for Claims Loading	12/01/2021	12/22/2021	\$196.39	3	0
<input type="checkbox"/>	1280791351764	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$1,410.96	2	2
<input type="checkbox"/>	1280791351763	Social Service		10/15/2021	Submitted for Claims Loading	09/01/2021	09/30/2021	\$3,527.40	2	2
<input type="checkbox"/>	1280791351751	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/05/2021	\$587.90	2	2
<input type="checkbox"/>	1280791351748	Social Service		10/15/2021	Submitted for Claims Loading	10/06/2021	10/12/2021	\$823.06	2	2
<input type="checkbox"/>	1280791351741	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$57.48	1	1
<input type="checkbox"/>	1280791351718	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$2,130.96	2	2
<div> View Page: 2 Go Page Count SaveToXLS Viewing Page: 1 </div>										
Submitted for Claims Loading					Claim Count		Submitted Claim Count			
					▲▼		▲▼			
					2		2			

# REVALIDATE A TEMPLATE BATCH

After a batch is created, ProviderOne checks the batch to ensure the billing data is valid. This section is on how to check the validation of a batch and revalidate a template batch which has Failed Validation.

- From the Provider Portal
- **Click on** Social Service Manage Batch Submission

The screenshot displays the ProviderOne Provider Portal interface. The top navigation bar includes a profile dropdown, a search bar, and links for Notepad, Reminder, External Links, Print, and Help. The main content area is divided into a left sidebar menu and a main workspace. The sidebar menu is expanded, showing the 'Social Services Authorization and Billing' section. An orange arrow points to the 'Social Service Manage Batch Submission' option in this menu. The main workspace shows a 'My Reminders' section with a table of alerts, including a broadcast message about holiday payment deadlines. A calendar widget on the right shows the current date as Wednesday, December 22, 2021, at 04:04 PM.

Alert Type	Alert Message	Alert Date	Due Date	Read
BROADCAST_MESSAGE	To all ProviderOne users Christmas and New Year's holiday will impact ProviderOne payment dates and claim submission deadlines. The observance of both Christmas and New Year's holiday will result in changes to the ProviderOne payment d...	12/09/2021	01/03/2022	

2021 December						
Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

## REVALIDATE A TEMPLATE BATCH *continued*

- The Batch Claim Submission Status List appears
- Pass Validation means the all the template have valid information and the batch can be submitted
- Failed Validation means one of more items within the batch is not valid and the batch can not be submitted
- To view why a batch failed validation, **click on** the batch number

### Note:

After a batch is created, ProviderOne checks the batch to ensure the billing data is valid.

Close

View Claims

Revalidate

Submission

Delete

Social Service Batch Claim Submission Status List

Filter By :

And

Go

Save Filter

My Filters

<input type="checkbox"/>	Batch Number	Type	Created By	Batch Creation Date	Status	From DOS	To DOS	Total Billed Amount	Claim Count	Submitted Claim Count
<input type="checkbox"/>	1280791780383	Social Service		12/22/2021	Failed in Validation	12/01/2021	12/22/2021	\$196.39	3	0
<input type="checkbox"/>	1280791351764	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$1,410.96	2	2
<input type="checkbox"/>	1280791351763	Social Service		10/15/2021	Passed Validation	09/01/2021	09/30/2021	\$3,527.40	2	2
<input type="checkbox"/>	1280791351751	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/05/2021	\$587.90	2	2
<input type="checkbox"/>	1280791351748	Social Service				10/06/2021	10/12/2021	\$823.06	2	2
<input type="checkbox"/>	1280791351741	Social Service				10/01/2021	10/12/2021	\$57.48	1	1
<input type="checkbox"/>	1280791351718	Social Service				10/01/2021	10/12/2021	\$2,130.96	2	2

View Page: 2GoPage Count

Batch Number

1280791780383

1280791351764

1280791351763

1280791351751

1280791351748

1280791351741

1280791351718

Status

Failed in Validation

Submitted for Claims Loading

Passed Validation

Submitted for Claims Loading

Submitted for Claims Loading

Submitted for Claims Loading

Submitted for Claims Loading



## REVALIDATE A TEMPLATE BATCH *continued*

- The View Template List from Batch appears
- **Click on** status
- Template Validation Errors appears
- View Error Description saying that the service code is invalid or empty
- **Click on** Cancel

Template Name	Status	Claim Type
A , H	I-Invalid	Social Service
B , J	V-Valid	Social Service
B , K	V-Valid	Social Service

**Template Validation Errors**

Template Name: A , H  
Client ID: WA

**Error Description:** Line 1 - Service Code and/or Modifier on the Claim do not match those on the Social Service Authorization for the Claim DOS

**Cancel**

## REVALIDATE A TEMPLATE BATCH *continued*

- The View Template List from Batch appears
- **Click on** template name
- The Saved Template appears

Social Service View Templates List from Batch			
Filter By : <input type="text"/> And <input type="text"/> <input type="text"/> Go Save Filter My Filters			
Template Name	Status	Claim Type	
A , H	I-Invalid	Social Service	
B , J	V-Valid	Social Service	
B , K	V-Valid	Social Service	

View Page: 1 Go Page Count SaveToXLS Viewing Page: 1 First Prev Next Last

Basic Claim Information:									
Billing Provider   Subscriber   Claim   Service								Submitter ID: <input type="text"/>	
* Template Name: <input type="text" value="A"/> , <input type="text" value="H"/>									
<div> <div></div> <div>PROVIDER INFORMATION</div> </div>									
BILLING PROVIDER									
* Provider ID: <input type="text" value="01"/>									
<div> <div></div> <div>SUBSCRIBER/CLIENT INFORMATION</div> </div>									
SUBSCRIBER/CLIENT									
* Client ID: <input type="text" value="WA"/>									
<div> <div></div> <div>CLAIM INFORMATION</div> </div>									
1. * Authorization Number: <input type="text"/>									
<div> <div></div> <div>BASIC LINE ITEM INFORMATION</div> </div>									
BASIC SERVICE LINE ITEMS									
<div> <div>mm</div> <div>dd</div> <div>ccyy</div> </div>					<div> <div>mm</div> <div>dd</div> <div>ccyy</div> </div>				
* Service Date From: <input type="text"/>					* Service Date To: <input type="text"/>				
* Service Code: <input type="text"/>					Modifiers: 1: <input type="text"/> 2: <input type="text"/> 3: <input type="text"/> 4: <input type="text"/>				
Patient Account No: <input type="text"/>					* Units: <input type="text"/>				
<div> <div></div> <div>ELECTRONIC VISIT VERIFICATION (EVV) ITEMS</div> </div>									
Previously Entered Line Item Information									
Click a Line No. below to view/update that Line Item Information.									
Total Charges Submitting: \$ 14.37									
Line Service Dates		Service Code	Modifiers				Units		
No	From To		1	2	3	4			
1	01/01/2021 01/03/2021	SA020	U4				3		

## REVALIDATE A TEMPLATE BATCH *continued*

- To correct the problem
  - Click on** Line Number
  - Basic Line Information populates
  - Enter** missing data/correct error
  - Click on** Update Service Line Item

**PROVIDER INFORMATION**

**BILLING PROVIDER**

\* Provider ID: 101

**SUBSCRIBER/CLIENT INFORMATION**

**SUBSCRIBER/CLIENT**

\* Client ID: WA

**CLAIM INFORMATION**

1. \* Authorization Number:

**BASIC LINE ITEM INFORMATION**

**BASIC SERVICE LINE ITEMS**

\* Service Date From: 03 27 2018 \* Service Date To: 03 28 2018

\* Service Code: T1020

Modifiers: 1: U4 2: 3: 4:

Patient Account No: \* Units: 2 \* Units: 2

**ELECTRONIC VISIT VERIFICATION (EVV) ITEMS**

Add Service Line Item Update Service Line Item

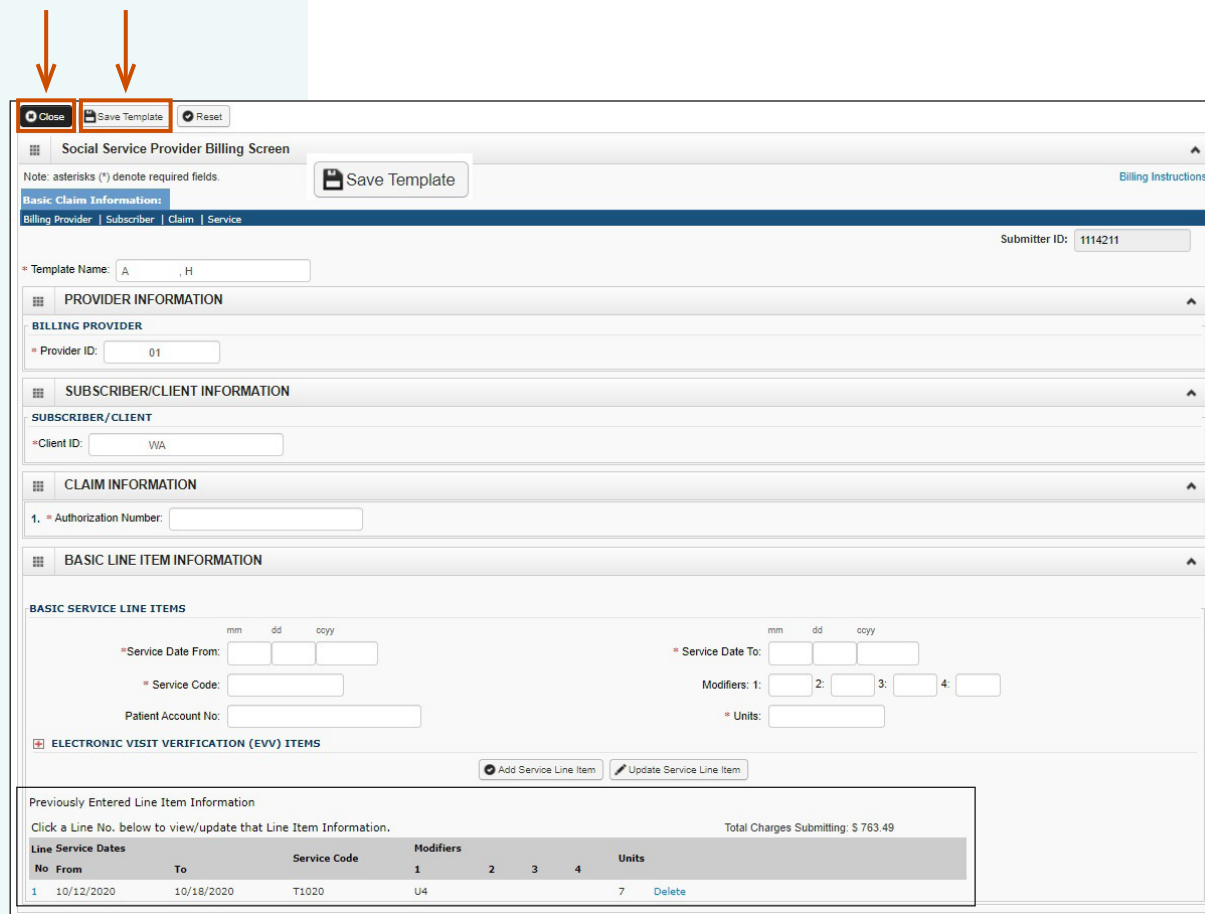
Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information. Total Charges Submitting: \$ 525.00

Line No.	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	03/27/2018	03/31/2018	T1020	U4				5	Delete

## REVALIDATE A TEMPLATE BATCH *continued*

- Corrected service line appears
- **Click on** Save Template
- Pop-up appears
- **Click on** OK
- **Click on** Close



The screenshot shows the 'Social Service Provider Billing Screen'. At the top, there are three buttons: 'Close', 'Save Template', and 'Reset'. Two orange arrows point to the 'Close' and 'Save Template' buttons. Below these buttons is a 'Save Template' button with a floppy disk icon. The screen is divided into several sections: 'Basic Claim Information', 'PROVIDER INFORMATION', 'SUBSCRIBER/CLIENT INFORMATION', 'CLAIM INFORMATION', and 'BASIC LINE ITEM INFORMATION'. The 'BASIC LINE ITEM INFORMATION' section contains a table for 'BASIC SERVICE LINE ITEMS' and a section for 'ELECTRONIC VISIT VERIFICATION (EVV) ITEMS'. At the bottom, there is a 'Previously Entered Line Item Information' section with a table showing line items.

Line Service Dates		Service Code	Modifiers				Units
No	From	To	1	2	3	4	
1	10/12/2020	10/18/2020	T1020	U4			7

Do you want to save the Template?



A pop-up dialog box with two buttons: 'OK' and 'Cancel'. An orange arrow points to the 'OK' button.

## REVALIDATE A TEMPLATE BATCH *continued*

- The View Template List from Batch appears
- **Click on** Revalidate
- The Batch Claim Submission Status List appears
- The updated Status is Waiting. It is most likely that the Status will have completed validation and the results will show
- If the status is Pass Validation, the batch can now be submitted

The screenshot shows the 'Social Service Batch Claim Submission Status List' interface. At the top, there are buttons for 'Close', 'View Claims', 'Revalidate', and 'Delete'. The 'Revalidate' button is highlighted with an orange box and an arrow. Below the buttons is a filter section with 'Filter By:' and 'And' dropdowns, a 'Go' button, and 'Save Filter' and 'My Filters' buttons. The main table has columns: Batch Number, Type, Created By, Batch Creation Date, Status, From DOS, To DOS, Total Billed Amount, Claim Count, and Submitted Claim Count. The first row is selected, showing a batch number of 1280791780383, Type Social Service, Created By, Batch Creation Date 12/22/2021, Status Failed in Validation, From DOS 12/01/2021, To DOS 12/22/2021, Total Billed Amount \$196.39, Claim Count 3, and Submitted Claim Count 0. Below the table, there is a 'View Page: 2' section with 'Go', 'Page Count', and 'SaveToXLS' buttons. The 'Viewing Page: 1' section shows 'Waiting' and 'Passed Validation' buttons, both highlighted with orange boxes. Navigation buttons 'First', 'Prev', 'Next', and 'Last' are at the bottom right.

Batch Number	Type	Created By	Batch Creation Date	Status	From DOS	To DOS	Total Billed Amount	Claim Count	Submitted Claim Count
1280791780383	Social Service		12/22/2021	Failed in Validation	12/01/2021	12/22/2021	\$196.39	3	0

Batch Number	Type	Created By	Batch Creation Date	Status	From DOS	To DOS	Total Billed Amount	Claim Count	Submitted Claim Count
1280791780383	Social Service		12/22/2021	Waiting	12/01/2021	12/22/2021	\$196.39	3	0
1280791351764	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$1,410.96	2	2
1280791351763	Social Service		10/15/2021	Passed Validation	09/01/2021	09/30/2021	\$3,527.40	2	2
1280791351751	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/05/2021	\$587.90	2	2
1280791351748	Social Service		10/15/2021	Submitted for Claims Loading	10/06/2021	10/12/2021	\$823.06	2	2
1280791351741	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$57.48	1	1
1280791351718	Social Service		10/15/2021	Submitted for Claims Loading	10/01/2021	10/12/2021	\$2,130.96	2	2

# .dat BATCH UPLOAD SETUP GUIDE

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  - Special Design Constraints or Considerations
  - Social service .dat batch upload format specification table
- **Social Service .dat batch file creation** .....69
  - .dat File Naming Convention
  - Converting your Excel (.xls) file to a .dat file
    - METHOD ONE: Create .dat file from EXCEL to CSV
    - METHOD TWO: Create .dat file from EXCEL to WORD
- **Uploading the Social Service .dat batch file** .....79

**Note:**

*For assistance with .dat batch claims, contact HCA's HIPAA Help Desk per the instructions on the contact pages 4-5.*

Social Service caret delimiter (.dat) batch upload billing is an optional billing method that allows Social Service (non-medical) providers to extract billing data elements from their current timekeeping and/or billing software and upload the claim(s) data into the ProviderOne system. Although .dat batch upload does require additional preparation, your agency could save time and effort with this option.

The .dat batch upload billing method is suitable for large providers and/or providers who are required to bill by date of service such as:

- *Home Care Agencies*
- *Consumer Directed Employer(s)*
- *Adult Day Care/Adult Day Health Centers*
- *Large Residential Facilities*
- *Home Delivered Meals Programs*
- *Personal Emergency Response Systems*

Please share the technical information found in this section with your timekeeping, billing, and/or EVV staff/vendor.

# SYSTEM PREPARATION

## Business Rules

- A provider can only upload one .dat file to ProviderOne at a time.
- Data is not required for 'Optional' fields for file upload (see pages 67-68).
- The provider must enter data for 'Required' fields for file upload (see pages 67-68).
  - Additional data may be required for claims payment (i.e., modifier or EVV data).
- Only '.dat' extension file types are accepted by the system. If provider attempts to upload a file whose extension is not '.dat', the system will display an error message.
- The file will be transmitted over secure HTTP using encryption.
- When a batch is successfully uploaded, the system will generate the file name while displaying the confirmation message.
  - **Example system generated file name after successful ProviderOne upload:**  
"SOC.xxxxxxx.20130131xxxxxx.SAMPLE\_BATCH.dat" (\*contains 'x' for numbers to mask provider and client information)
- When an uploaded .dat batch file contains no validation errors, the batch file status will be 'Accepted' and claims will be loaded into the system for processing.
- When a batch file has encountered errors during file validation, the status of the file will be 'Rejected' and claims will not be loaded into the system for processing.

## SYSTEM PREPARATION *continued*

### Special Design Constraints or Considerations

- All claim lines of the batch file must not exceed one day of service; with the exception of monthly unit types such as personal emergency response systems.
- The system will only accept one claim line per each day of service, service code, servicing provider (if applicable), and authorization number combination. The system will deny duplicate claim lines.
- The batch file layout and format must comply with the specifications outlined in the **Social Service .dat Batch Upload Format Specification Table** on page 67.

**Note:**

*Daily rates cannot span bill using batch upload method. Span billing is only used in the direct data entry and templates methods with daily or monthly unit types.*



## SYSTEM PREPARATION *continued*

### Special Design Constraints or Considerations

*continued*

- Unit types must be consistent with what is listed on the client's authorization. **Most billing hours are reported in 15 minute increments** (15 min = 1 unit).
- Each field in each .dat claim line must be separated/delimited by the ^ (caret symbol). This applies to all fields, regardless if they are required or not for the file to load. Do not add spaces between carets. Each claim line must have 32 carets (^) and include a tilde (~) at the end of the line.

#### Example .dat claim line w/ all claim fields filled in:

Provider ID^Client ID^Authorization Number^Service Date From^Service Date To^Service code^Mod 1^Mod 2^Mod 3^Mod 4^Units^Patient Account Number^SSSOP (ID)^Start Time^End Time^Service Start Time Geo-Data - Latitude^Service Start Time Geo-Data-Longitude^Service End Time Geo-Data - Latitude^Service End Time Geo-Data-Longitude^CI-Pr Prox ST^CI-Pr Prox ET^CI Ver End Time^Clm Freq Type^Parent TCN^Policy Number^Payer/Organization Name^Amount^Adjustment Reason Code^Policy Number^Payer/Organization Name^Amount^Adjustment Reason Code^Manual Claims Indicator~

**Note:** See page 70 for more .dat claim line examples.

- These .dat claim line fields require data for successful file upload\*:

- Provider ID
- Client ID
- Authorization Number
- Service Date From
- Service Date To
- Service Code
- Units
- Claim Frequency Type

\*Additional data may be required for claims to pay (i.e., modifier if a modifier is authorized with the service code).

- In addition to the above claim elements, these .dat claim line fields are required for **In-home Personal Care** and **In-Home Respite Care** for **EVV Compliance**:

- SS Servicing Only ProviderOne ID
- Service Start Time
- Service End Time
- Service Start Time Geo-Data
- Service End Time Geo-Data

## SYSTEM PREPARATION *continued*

In order for your .dat file to be accepted by ProviderOne, you must enter data for any 'Required' field. 'Optional' fields are not required for batch upload but may be required for claim payment (see page 66 for more information).

### Social Service .dat Batch Upload Format Specification Table:

**Note:**

A printable version of this table is available as an attachment. [Click here](#) for more information.

Claim Information	Required Field (Y / N)	Data Type	Maximum Size	String Format	Development Notes
Provider ID	Y	string-9	9 digits	numeric	9 digit Provider ID
Client ID	Y	string – up to 20	20 characters	alphanumeric	Client ID
Authorization Number	Y	string – 10	10 digits	Numeric	Authorization Number
Service Date From	Y	string – 8	8 digits	Date (mmddccyy)	Service Date From
Service Date To	Y	string – 8	8 digits	Date(mmddccyy)	Service Date To
Service code	Y	string – 5	5 digits	alphanumeric	Service code
Modifier 1	N	string – 2	2 digits	alphanumeric	Modifier 1
Modifier 2	N	string – 2	2 digits	alphanumeric	Modifier 2
Modifier 3	N	string – 2	2 digits	alphanumeric	Modifier 3
Modifier 4	N	string – 2	2 digits	alphanumeric	Modifier 4
Units	Y	string – up to 16	16 digits	numeric	Units (use whole numbers/not decimals)
Patient Account Number	N	string – up to 13	13 digits	alphanumeric	"Optional" Patient Account Number
SS Servicing Only ProviderOne ID	N	string-9	9 digits	numeric	SS Servicing Only ProviderOne ID
Service Start Time	N	string-6	6 digits	numeric (hhmmss)	Service Start Time, (24 hour format)
Service End Time	N	string-6	6 digits	numeric (hhmmss)	Service End Time, (24 hour format)
Service Start Time Geo-Data Latitude	N	string-9	6 or 7 digits with Sign and a decimal	numeric	Service Start Time Geo-Data – Latitude This will contain Sign. EX: "-12.99999" The system accepts either 4 or 5 digits after decimal
Service Start Time Geo-Data Longitude	N	string-10	7 or 8 digits with Sign and a decimal	numeric	Service Start Time Geo-Data – Longitude This will contain Sign. EX: "-122.99999" The system accepts either 4 or 5 digits after decimal
Service End Time Geo-Data Latitude	N	string-9	6 or 7 digits with Sign and a decimal	numeric	Service End Time Geo-Data – Latitude This will contain Sign. EX: "-12.99999" The system accepts either 4 or 5 digits after decimal
Service End Time Geo-Data Longitude	N	string-10	7 or 8 digits with Sign and a decimal	numeric	Service End Time Geo-Data – Longitude This will contain Sign. EX: "-122.99999" The system accepts either 4 or 5 digits after decimal

## SYSTEM PREPARATION *continued*

### Social Service .dat Batch Upload Format Specification Table, *continued*:

Column Name	Required Field (Y / N)	Data Type	Maximum Size	String Format	Development Notes
Client-Provider Proximity for Start Time	N	string – 1	1 Character	alphanumeric	Client-Provider Proximity for Start Time
Client-Provider Proximity for End Time	N	string – 1	1 Character	alphanumeric	Client-Provider Proximity for End Time
Client Verification for End Time	N	string – 1	1 Character	alphanumeric	Client Verification for End Time
Claim Frequency Type	Y	string – 1	1 digit	numeric	Values can be: 1 = Original Claim 7 = Adjustment 8 = Void
Parent TCN	N	string – 18	18 digits	numeric	18-digit TCN#
Policy Number (1)	N	string – 15	15 digits	alphanumeric	Policy Number This is 13 Characters in ProviderOne.
Payer / Organization Name (1)	N	string – 50	50 digits	alphanumeric	Payer / Organization Name. All CAPITAL LETTERS
Amount (1)	N	string – 17	13 digits with Sign and two decimals	Floating Number	TPL Amount by the the Payer/Org Example: 1000.00 -900.00 100.00
Adjustment Reason Code (1)	N	string – 3	3 digits	alphanumeric	Adjustment Reason Code.
Policy Number (2)	N	string – 15	15 digits	alphanumeric	<b>Policy Number</b> <b>This is 13 Characters in ProviderOne.</b>
Payer / Organization Name (2)	N	string – 50	50 digits	alphanumeric	Payer / Organization Name. All CAPITAL LETTERS
Amount (2)	N	string – 17	13 digits with Sign and two decimals	Floating Number	TPL Amount by the the Payer/Org Example: 1000.00 -900.00 100.00
Adjustment Reason Code (2)	N	string – 3	3 digits	alphanumeric	Adjustment Reason Code.
Manual Claims Indicator	N	string – 6	6 Character	alphanumeric	<b>Valid values include:</b> SPST01 SPET01 SPEV01 EVSF01 CLSD01

# SOCIAL SERVICE BATCH UPLOAD FILE CREATION

Below is a sample of what a Social Service Batch Excel file will look like before converting to a .dat file:

## Note:

A printable version of the Social Service Batch Upload Excel file is available as an attachment.  
[Click here](#) for more information.

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
Provider ID	Client ID	Authorization Number	Service Date From	Service Date To	Service code	Mod 1	Mod 2	Mod 3	Mod 4	Units	Patient Account Number	SSSOP (ID)	Start Time	End Time	Service Start Time Geo-Data-Latitude	Service Start Time Geo-Data-Longitude
123123101	444444444WA	999888555	10012024	10012024	S5161					1						
123123101	444444444WA	999888555	10012024	10012024	S5161	U1				1						
123123101	555555555WA	777555444	10012024	10012024	S5161					1						
123123101	666666666WA	666333222	10012024	10012024	S5161					1						

R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG
Service End Time Geo-Data-Latitude	Service End Time Geo-Data-Longitude	Cl-Pr Prox ST	Cl-Pr Prox ET	Cl Ver End Time	Clm Freq Type	Parent TCN	Policy Number (1)	Payer / Organization Name (1)	Amount (1)	Adjustment Reason Code (1)	Policy Number (2)	Payer / Organization Name (2)	Amount (2)	Adjustment Reason Code (2)	Manual Claims Indicator
					1										~
					1										~
					7	5522222222682000									~
					1										~

## SOCIAL SERVICE BATCH UPLOAD FILE CREATION *continued*

Here is an example of what the data should look like once it has been extracted from an excel format to a .dat file:

### Caret Delimiter (.dat) Format Sample

When creating or extracting the .dat file from your system, take extra care not to add extra spaces, characters, extra carriage returns, or column headers. You must remove any extra spaces, characters, returns, and column headers before uploading the .dat file to ProviderOne. Compare your .dat file side by side to the examples below. (Samples contain 'x' for numbers to mask provider and client information). As you can see, each line contains a total of 32 carets and a tilde at the end:

#### Sample original claim with optional patient account number and without EVV data:

```
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01012014^01012014^T1019^U6^8^xxxxxxxx^1^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01042014^01042014^T1019^U6^10^xxxxxxxx^1^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01102014^01102014^T1019^U6^15^xxxxxxxx^1^~
```

#### Sample original claim without optional patient account number and without EVV data:

```
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01012014^01012014^T1019^U6^8^xxxxxxxx^1^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01042014^01042014^T1019^U6^10^xxxxxxxx^1^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01102014^01102014^T1019^U6^15^xxxxxxxx^1^~
```

#### Sample adjusted claim with optional patient account number and without EVV data:

```
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01012014^01012014^T1019^U6^8^xxxxxxxx^7^551701000117107000^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01042014^01042014^T1019^U6^10^xxxxxxxx^7^551701000117107000^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01102014^01102014^T1019^U6^15^xxxxxxxx^7^551701000117107000^~
```

#### Sample adjusted claim without optional patient account number and without EVV data:

```
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01012014^01012014^T1019^U6^8^xxxxxxxx^7^551701000117107000^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01042014^01042014^T1019^U6^10^xxxxxxxx^7^551701000117107000^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01102014^01102014^T1019^U6^15^xxxxxxxx^7^551701000117107000^~
```

#### Sample adjusted claim with optional patient account number and with EVV data:

```
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01012020^01012020^T1019^U6^8^xxxxxxxx^99999999^083412^114413^-12.99999^-123.99999^-12.99999^-123.99999^7^551701000
117107000^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01042020^01042020^T1019^U6^10^xxxxxxxx^99999999^083412^114413^-12.99999^-123.99999^-12.99999^-123.99999^7^551701000
117107000^~
xxxxxxxx^xxxxxxxxWA^xxxxxxxx^01102020^01102020^T1019^U6^15^xxxxxxxx^99999999^083412^114413^-12.99999^-123.99999^-12.99999^-123.99999^7^5517010001
17107000^~
```

## SOCIAL SERVICE BATCH UPLOAD FILE CREATION *continued*

### Caret delimiter (.dat) File Naming Convention

Before converting your files to the caret delimiter (.dat) format, it is beneficial to create a naming convention to suit your business needs. Use a unique name for each file.

- You must include .dat at the end of the file name.
- File caret delimiter (.dat) names cannot contain spaces.
- File names are alphanumeric and can only allow the following special characters: . - \_
- Batch file names cannot contain any of the following characters: \ / : \* ? < >
- Batch file caret delimiter (.dat) names cannot exceed 50 characters including the four characters: '.dat'

When naming your .dat files, you may want to consider the following:

- Name the batch to identify the submitter.
- Name the batch to identify the location.
- Name the batch to identify the type of service provided.

Example file name:

123456701\_20250515\_PersonalCareServices\_.dat

When a batch is successfully uploaded, the system will generate the file name while displaying the confirmation message. The standard file name for the generated message is

"<SOC>.<Provider ID (7 digit)>.<Date & Time Stamp>.<Provider naming convention including '.dat' extension>". Example:  
"SOC.XXXXXXX.20130131XXXXXX.SAMPLE\_BATCH.dat"

(Samples contains 'x' for numbers to mask provider identification)

## **SOCIAL SERVICE BATCH UPLOAD FILE CREATION** *continued*

### **Converting your Excel (.xls) file to a .dat file**

If your billing or timekeeping vendor only allows .xls extraction and not .dat file extraction, the following pages show two methods for converting an Excel document into the .dat format.

If you do not want to use either of these methods, you can find and/or purchase utility programs online for Excel that will easily convert files into the .dat format. For the best results, try using a Google search and type "Excel utilities" or ".xls convert to .dat."

## SOCIAL SERVICE BATCH UPLOAD FILE CREATION *continued*

### METHOD ONE: Create a .dat file from EXCEL to CSV

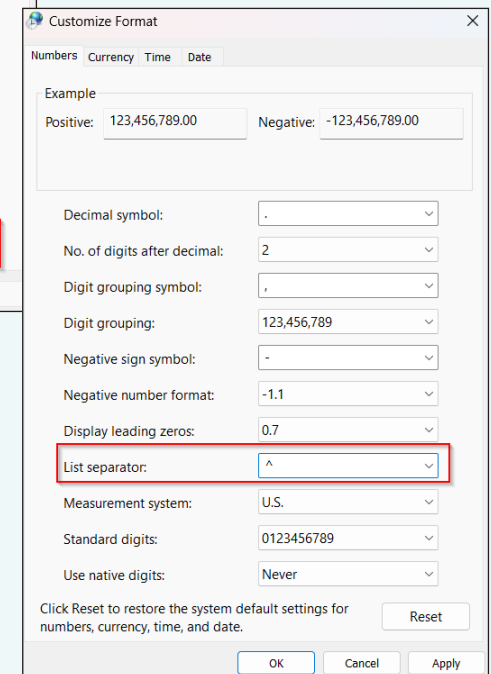
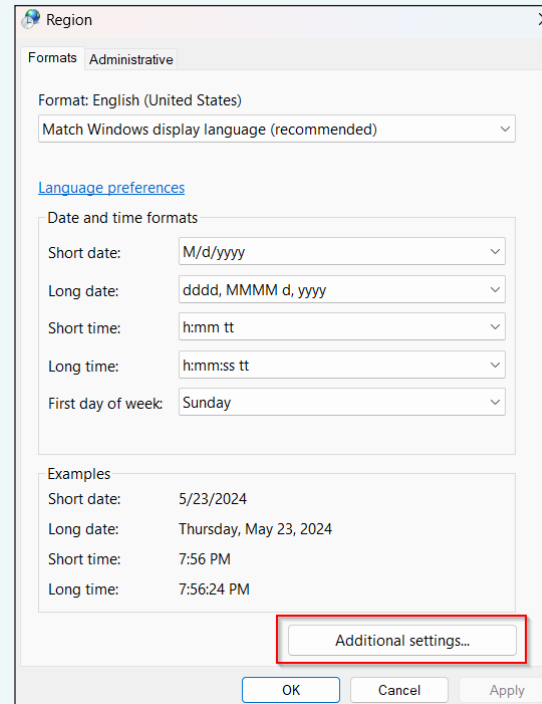
(This method is recommended for large .dat files with over 1000 to 1500 plus records.)

#### Step1: Change your computer's Regional settings:

- In Microsoft Windows, click inside the search icon and type 'Control Panel.'
- Click the 'Region' icon.
- Click 'Additional Settings'
- Find the 'list separator' drop down and type ^
- Click 'apply' and 'OK' twice.

#### Note:

*After you change the list separator character for your computer, all programs will use the new character as a list separator. You can change the character back to the default character by following the same procedure.*





## SOCIAL SERVICE BATCH UPLOAD FILE CREATION *continued*

### Step 2: Format date columns in Excel:

- Format your 'Service Date From' and 'Service Date To' cells to mmddyyyy by highlighting these columns then,
- Right click and select 'Format Cells'
- Select 'Custom' and place your cursor in the 'Type' field and type mmddyyyy.
- Click 'OK'

The screenshot shows the Microsoft Excel interface. The 'Format Cells' dialog box is open, displaying the 'Custom' category. The 'Type' field is set to 'mmddyyyy'. The 'OK' button is highlighted with a red box. A right-click context menu is visible over the spreadsheet data, showing options like 'Format Cells...'. The spreadsheet data includes columns for 'Provider ID', 'Client ID', 'Authorization Number', 'Service Date From', and 'Service Date To'.

Provider ID	Client ID	Authorization Number	Service Date From	Service Date To
XXXXX	XXXXXX	XXXXXXX	3012025	3312025
XXXXX	XXXXXX	XXXXXXX	4012025	43012025

## SOCIAL SERVICE BATCH UPLOAD FILE CREATION *continued*

### Step 3: Format additional fields:

- **If you do NOT add data in the Manual Claims Indicator column:**
  - In that cell add a tilde ~
- **If you do add data in the Manual Claims Indicator column:**
  - You will need to add a tilde ~ in the cell after the Manual Claims Indicator column

### Step 4: Delete the header row of your worksheet

### Step 5: Delete additional worksheets

### Step 6: Save your file:

- Click 'File' and then 'Save As'
- Locate the folder where you want to save your file
- In the 'File Name', name your file. Remember to add .dat to the end of the file name.
- In the 'Save As Type' drop down, select 'CSV (Comma Delimited) (\*.csv)'
- Click 'Save'
- The .dat in your file name may disappear. If it does, you will need to type it again.
- You have successfully created a .dat file!

AE	AF	AG
Amount (2)	Adjustment Reason Code (2)	Manual Claims Indicator
		~
		~
		~
		~

AE	AF	AG	AH
Amount (2)	Adjustment Reason Code (2)	Manual Claims Indicator	
		SPST01	~
		SPST01	~
		SPST01	~
		SPST01	~

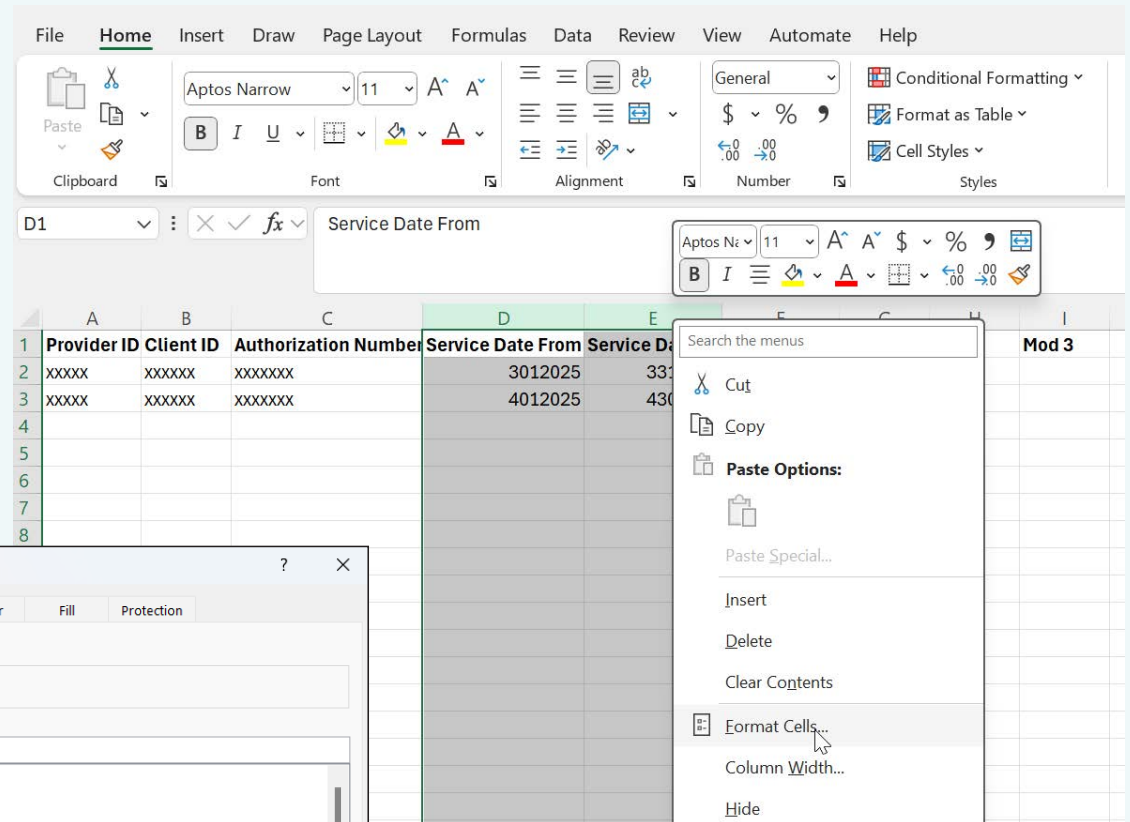
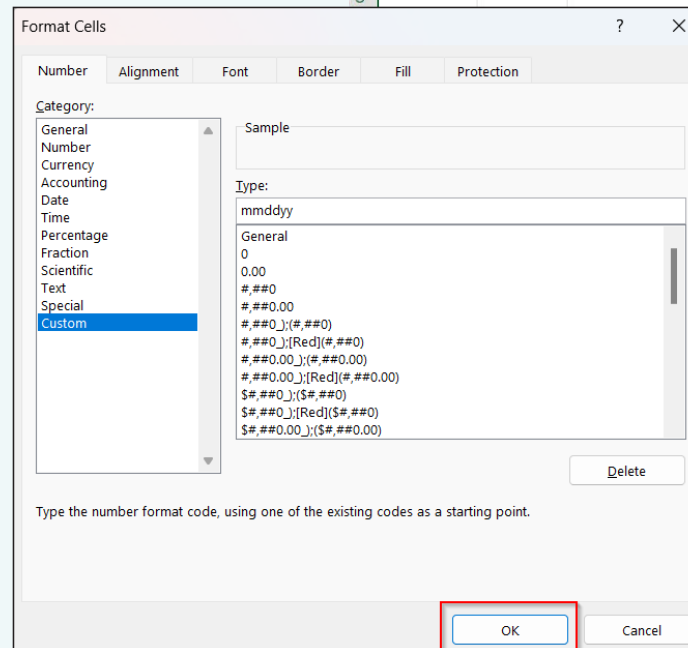
## SOCIAL SERVICE BATCH UPLOAD FILE CREATION *continued*

### METHOD TWO: Create a .dat file from EXCEL to WORD

**Step 1:** Correctly format the date columns  
in Excel:

Format your 'Service Date From' and Service  
Date To' date cells to mmddyyyy by  
highlighting these columns and then,

- Right click and select 'Format Cells'
- Select 'Custom' and place cursor in  
the 'Type' field and type mmddyyyy
- Click 'OK'



## SOCIAL SERVICE BATCH UPLOAD FILE CREATION *continued*

### Step 2: Format additional Excel fields:

- If you do NOT add data in the Manual Claims Indicator column:
  - In that cell add a tilde ~
- If you do add data in the Manual Claims Indicator column:
  - You will need to add a tilde ~ manually during Step 6.

AE	AF	AG
Amount (2)	Adjustment Reason Code (2)	Manual Claims Indicator
		~
		~
		~
		~

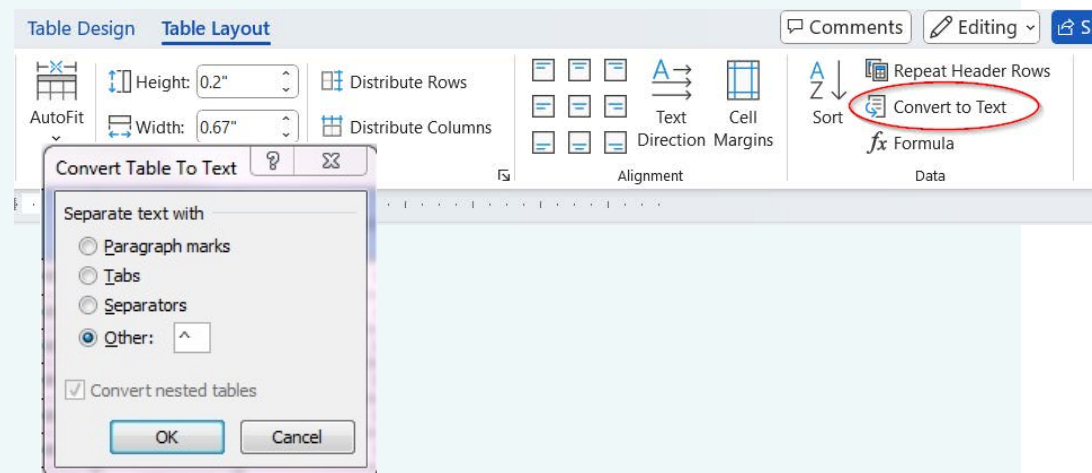
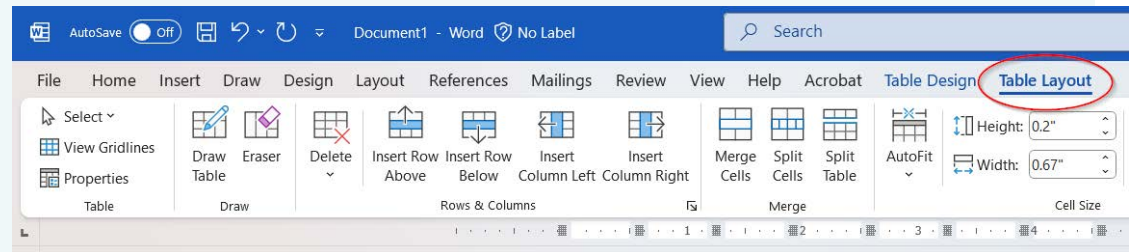
### Step 3: Delete the header row in your Excel spreadsheet

### Step 4: Delete additional worksheets

### Step 5: Copy the entire worksheet by clicking Ctrl A and then Ctrl C.

### Step 6: Paste into Word:

- Open a new blank Word document
- Paste the copied file into Word by clicking Ctrl V. Do not worry if the contents here do not fit onto the document margins.
- Select the table by clicking the box at the left hand top corner.
- Click on the 'Table Layout' Tab.
- On the Table Layout tab, select the box 'Convert to Text'
- You will be prompted to select 'Separate text with'
  - Select 'Other' and insert the caret symbol ^ and click 'OK'



## SOCIAL SERVICE BATCH UPLOAD FILE CREATION *continued*

- If you added data in the Manual Claims Indicator column, add a tilde ~ at the end of that line of data
- If there are any spaces between the ^, those must be removed before copying the data.
  - You can remove spaces by selecting the Replace button under the home tab.
  - Put a space in the "Find what" line and make sure there is no data or spaces in the "Replace with" line. Then click on "Replace All"
- Highlight the entire document (Ctrl A) and copy (Ctrl C)

### Step 7: Paste into Notepad

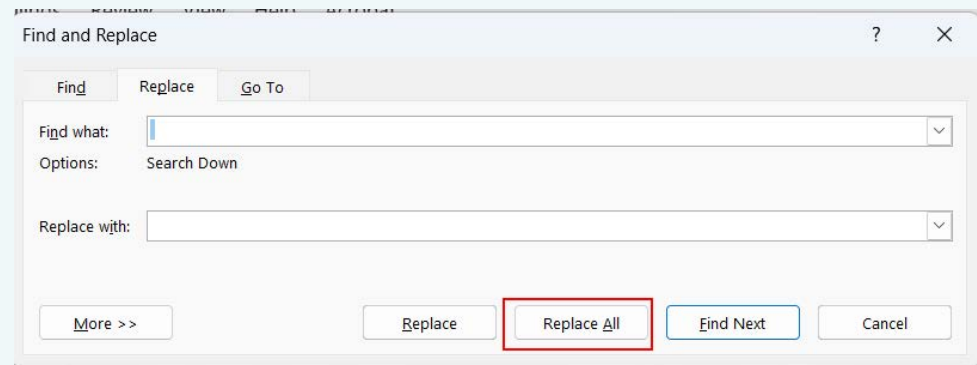
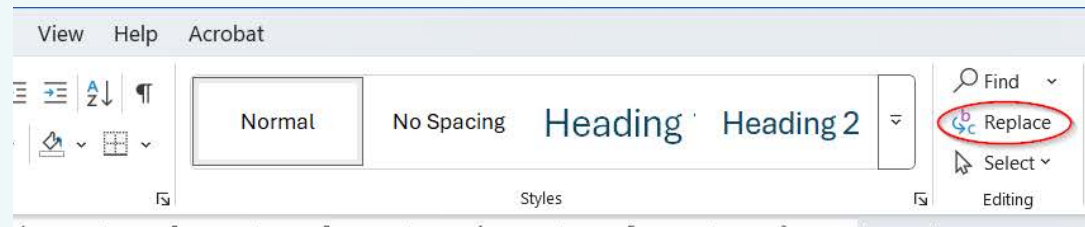
- Open Notepad (located in All Programs/Accessories file)
- Click Ctrl V to paste data into Notepad

### Step 8: Save your file

- Within Notepad, click on 'File' and select 'Save As'
  - Locate the folder you would like to save your file
  - In the 'File Name', name your file and add .dat at the end of the file name
  - In the 'Save As' section, click the drop down and select 'Text Documents' (\*.txt) and click 'Save'

### Step 9: You have successfully created a .dat file!

File name:	1234567_01.dat
Save as type:	Text Documents (*.txt)



**Note:** If the icon for notepad does not appear before the file name is saved to your computer, right click, select 'Open with' and choose 'default program.' Select 'Notepad' and make sure the box is checked for 'Always use the selected program to open this kind of file' and click OK. If this last step is not completed, an unexplained rejection will occur in the ProviderOne system.

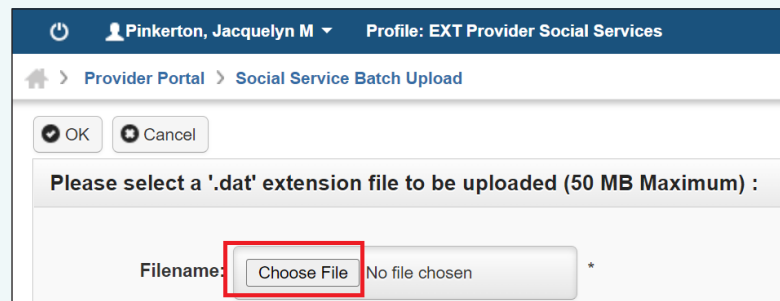
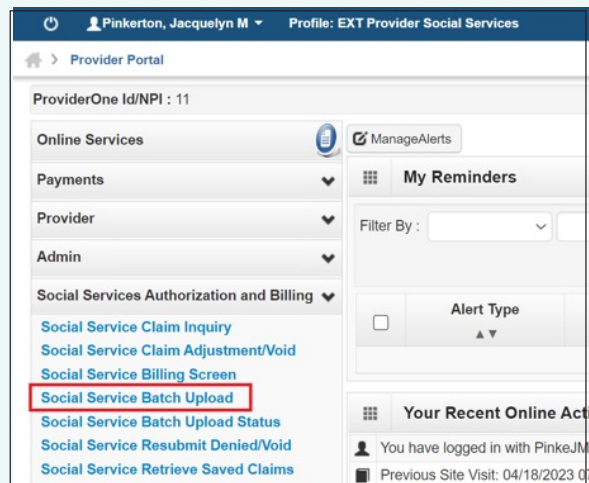
**Note:** If the computer changes the saved file extension and adds .txt to the .dat extension file name, go back to your saved document. Do not open the document. Highlight the document, right click and remove .txt from the name, and type .dat. If that does not solve the issue, consider using a different method of conversion. Try using an excel utility to convert your files to the .dat extension

# UPLOADING THE .dat BATCH FILE

After the .dat file is created and saved to your computer system, you are ready to upload the file into ProviderOne for claims submission.

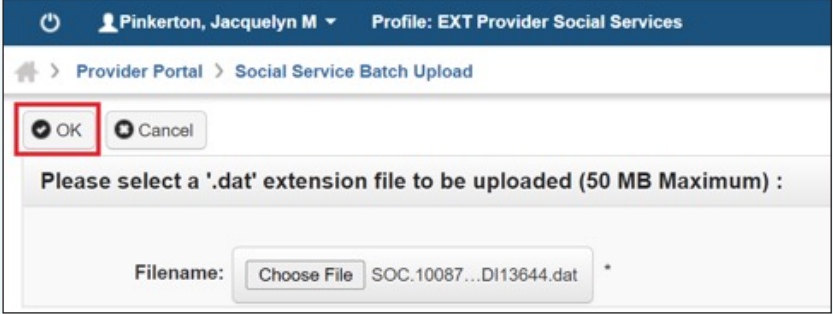
**Step 1:** On the Provider Portal click 'Social Service Batch Upload'

**Step 2:** Click 'Choose File'



## UPLOADING THE .dat BATCH FILE *continued*

**Step 3:** Select the saved .dat file located on your computer and select 'OK' to upload.



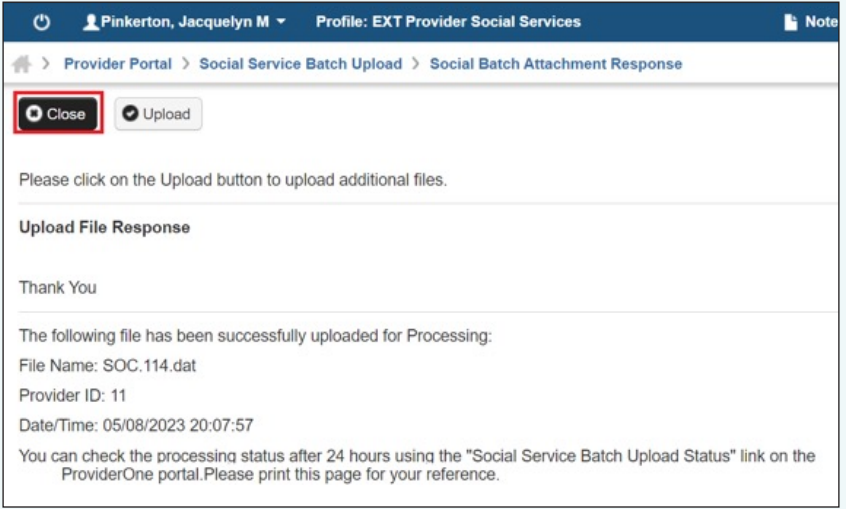
Provider Portal > Social Service Batch Upload

OK Cancel

Please select a '.dat' extension file to be uploaded (50 MB Maximum) :

Filename: Choose File SOC.10087...DI13644.dat \*

**Step 4:** Once the initial system check verifies the .dat file extension and file size meet the system requirements, a confirmation message will pop up. Click 'Close'.



Provider Portal > Social Service Batch Upload > Social Batch Attachment Response

Close Upload

Please click on the Upload button to upload additional files.

**Upload File Response**

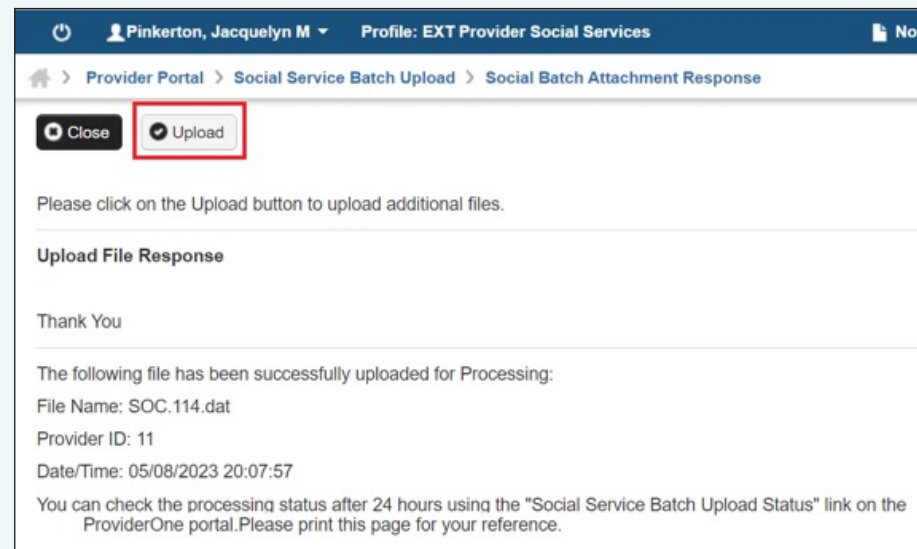
Thank You

The following file has been successfully uploaded for Processing:  
 File Name: SOC.114.dat  
 Provider ID: 11  
 Date/Time: 05/08/2023 20:07:57  
 You can check the processing status after 24 hours using the "Social Service Batch Upload Status" link on the ProviderOne portal. Please print this page for your reference.



## UPLOADING THE .dat BATCH FILE *continued*

**Step 5:** To upload additional files, select 'Upload' and repeat Steps 2-4 of this section.



The screenshot displays the 'Social Batch Attachment Response' page in the ProviderOne portal. The top navigation bar shows the user 'Pinkerton, Jacquelyn M' and the profile 'EXT Provider Social Services'. The breadcrumb trail indicates the path: 'Provider Portal > Social Service Batch Upload > Social Batch Attachment Response'. Below the breadcrumb, there are two buttons: 'Close' and 'Upload'. The 'Upload' button is highlighted with a red rectangular box. Below the buttons, a message states: 'Please click on the Upload button to upload additional files.' The section 'Upload File Response' follows, containing a 'Thank You' message and a confirmation that the file 'SOC.114.dat' has been successfully uploaded for processing. The response also includes the provider ID '11' and the date/time '05/08/2023 20:07:57'. A final instruction advises checking the processing status after 24 hours using the 'Social Service Batch Upload Status' link on the ProviderOne portal and to print the page for reference.

Close Upload

Please click on the Upload button to upload additional files.

**Upload File Response**

Thank You

The following file has been successfully uploaded for Processing:  
 File Name: SOC.114.dat  
 Provider ID: 11  
 Date/Time: 05/08/2023 20:07:57  
 You can check the processing status after 24 hours using the "Social Service Batch Upload Status" link on the ProviderOne portal. Please print this page for your reference.



## UPLOADING THE .dat BATCH FILE *continued*

### Acceptance Message

The next step will validate format and content. An acceptance message on the Social Service Batch Upload Status List page means the file passed format and content requirements. This means all your claim lines have been submitted for claims processing.

> **Provider Portal** > **Social Service Batch Upload Status List**

Close

**Social Service Batch Upload Status List**

Filter By  And Filter By   
 Go

Save Filter My Filters

This page by default displays the Status for Batches that are submitted during last 45 days. Please use the Filter Criteria to extend your search.

File Name ▲▼	Record Count ▲▼	Status ▲▼	Uploaded Date ▲▼
<a href="#">SOC. 1115865.20250424212312.fixedfile2.dat</a>	3	Accepted	04/24/2025 21:24:23
<a href="#">SOC. 1115865.20250424212134.fixedfile.dat</a>	3	Accepted	04/24/2025 21:21:45
<a href="#">SOC. 1115865.20250424211629.Testfile.dat</a>	3	Rejected	04/24/2025 21:17:20

View Page:  Go Page Count SaveToXLS Viewing Page: 1
 First Prev Next Last

## UPLOADING THE .dat BATCH FILE *continued*

### Rejection Messages

The social service batch upload file will be rejected if the file does not meet the social service batch upload standards and data structure outlined in section **Social Service Batch Upload File Creation**, starting on page 69.

You can extract a custom .xls report of the **Social Service Batch Upload Error Instance List** on page 85, that is user friendly and explains the record reference and the error code that caused the file to reject.

Sometimes the system will give one rejection reason for each submission. You may correct or remove the rejected lines and resubmit and find a new rejection message will appear.

You must remove the rejected lines from the .dat file and resubmit or correct the rejected lines and resubmit. The next page shows the error list for a rejected file and explains in more detail how to fix the line.

**IMPORTANT: If one line on the batch rejects, no claim lines are submitted for adjudication and payment.**

### Note:

*It is highly recommended providers remove the rejected lines and resubmit the caret delimiter (.dat) file to receive an accepted message for lines that do not contain errors to receive timely payment. Rejected lines require further research. Reasons may include:*

- Authorization error
- Authorization in canceled status
- SS Servicing Only ProviderOne ID issue\*

*\*If you need assistance please review [H24-045](#) or reach out to [EVVQuestions@dshs.wa.gov](mailto:EVVQuestions@dshs.wa.gov).*

Provider Portal > Social Service Batch Upload Status List

Close

### Social Service Batch Upload Status List

Filter By  And Filter By

Go

Save Filter My Filters

This page by default displays the Status for Batches that are submitted during last 45 days. Please use the Filter Criteria to extend your search.

File Name ▲▼	Record Count ▲▼	Status ▲▼	Uploaded Date ▲▼
SOC.1115865.20250424212312.fixedfile2.dat	3	Accepted	04/24/2025 21:24:23
SOC.1115865.20250424212134.fixedfile.dat	3	Accepted	04/24/2025 21:21:45
SOC.1115865.20250424211629.Testfile.dat	3	Rejected	04/24/2025 21:17:20

View Page: 1 Go Page Count SaveToXLS Viewing Page: 1 << First < Prev > Next >> Last

## UPLOADING THE .dat BATCH FILE *continued*

### Social Service Batch Upload Error Instance List

Social Service Batch Upload Error Instance List will list the line number in the batch (record reference number), the error code, the error message and an example of the caret delimiter (.dat) batch line in the 'Additional Message' column. Below is an example of what you will see in ProviderOne when you select the rejected list. The next page includes the full Error code reference table which contains all the system error types you may receive.

Record reference ▲ ▼	Error Code ▲ ▼	Error Message ▲ ▼	Additional Message ▲ ▼
Record Reference- 69	92141	Service Code and/or Modifier on the Claim do not match those on the Social Service Authorization for the Claims DOS	xxxxxxxx^xxxxxxxxWA^xxxxxxxx- ^01022014^01022014^T1019^12^
Record Reference- 70	92141	Service Code and/or Modifier on the Claim do not match those on the Social Service Authorization for the Claims DOS	xxxxxxxx^xxxxxxxxWA^xxxxxxxx- ^01102014^01102014^T1019^12^
Record Reference- 71	92141	Service Code and/or Modifier on the Claim do not match those on the Social Service Authorization for the Claims DOS	xxxxxxxx^xxxxxxxxWA^xxxxxxxx- ^01102014^01102014^T1019^12^

## UPLOADING THE .dat BATCH FILE *continued*

### Error Code Reference Table

The following table is the complete list of error code types when the social service batch upload file is rejected.

#### Note:

A printable version of the Error Code Reference Table is available as an attachment. [Click here](#) for more information.

Error Code	Error Message	Possible Causes
90001	File content is empty	There is no data in the caret delimiter (.dat) file.
90002	File not present in physical location	The file being attached is not present.
90003	Record does not end with ~ symbol	The line is missing the ~ symbol at the end of the record.
90004	Field does not end with ^ symbol	There is no ^ symbol after the units and before the ~ symbol.
90005	Field count in the record is not equal to the actual field count needed for that record	There are too few numbers in one of the date fields (example; Provider Id, Client ID, Authorization #, etc.
91011	Provider ID not present in file	This message can occur for different reasons: <ul style="list-style-type: none"> <li>• The provider ID is missing from the line and/or file.</li> <li>• Your provider record is in the process of being updated and may not be payable for the next 24 hours.</li> </ul>
91012	Provider ID must be numeric	The provider number contains letter(s).
91013	Provider ID length exceeds max allowed characters	The provider number is too long.
91021	Client ID not present in file	The client ID is missing.
91022	Client ID must be alphanumeric	The client ID number contains symbols or other characters.
91023	Client ID length exceeds max allowed characters	The client ID is too long.
91031	Authorization Number not present in file	The authorization number is missing.
91032	Authorization Number must be numeric	The authorization number contains symbols or other characters.
91033	Authorization Number length exceeds max allowed characters	The authorization number is too long.
91041	Service From Date not present in file	The service from date is missing.
91042	Service From Date is not a valid date	The service from date is not a date.
91043	Service From Date is a future date	The service from date is a future date

## UPLOADING THE .dat BATCH FILE *continued*

Error Code	Error Message	Possible Causes
91051	Service To Date not present in file	The service to date is missing.
91052	Service To Date is not a valid date	The service to date is not a date.
91053	Service To Date is prior to Service From Date	The service to date is before the service from date.
91054	Service To Date is a future date	The service to date is a future date
91055	'Service Date From' and 'Service Date To' must be within the same calendar month, please update the dates of service and submit a separate claim for each calendar month	The service from and service to date must occur in the same month.
91061	Service Code is not present in file	Service code is missing.
91062	Service Code must be alphanumeric	The service code contains symbols or other characters.
91063	Service code length exceeds max allowed characters	The service code is too long.
91071	Modifier Code 1 must be alphanumeric	The modifier contains symbols or other characters.
91072	Modifier Code 1 length exceeds max allowed characters	The modifier is too long.
91081	Modifier Code 2 must be alphanumeric	The modifier contains symbols or other characters.
91082	Modifier Code 2 length exceeds max allowed characters	The modifier is too long.
91091	Modifier Code 3 must be alphanumeric	The modifier contains symbols or other characters.
91092	Modifier Code 3 length exceeds max allowed characters	The modifier is too long.
91101	Modifier Code 4 must be alphanumeric	The modifier contains symbols or other characters.
91102	Modifier Code 4 length exceeds max allowed characters	The modifier is too long.
91111	Units not present in file	The number of units are not in the file.
91112	Units must be numeric	The units contain symbols or other characters.
91113	Units length exceeds max value	The units are too long
91131	Patient Account Number must be alphanumeric	The patient account number contains symbols or other characters.
91132	Patient Account Number length exceeds max allowed characters	The patient account number is too long.
92011	Provider ID does not exist in the system	The provider ID is not correct.
92012	Submitter Provider ID does not match with the Provider ID in the batch file	The provider ID is not assigned to your domain.
92021	Client ID does not exist in system	The client ID number is not correct.

## UPLOADING THE .dat BATCH FILE *continued*

Error Code	Error Message	Possible Causes
92031	Authorization Number does not exist in system	The authorization number is not correct.
92032	Provider ID mismatch in Authorization	The provider ID and authorization number are not authorized together.
92033	Client ID in batch does not match P1 authorization	The client ID does not match the authorization number.
92061	Service Code does not exist in system	The service code is not correct.
92062	Medical Proc/Svc Code cannot be billed on a Social Service Claim	Medical service codes cannot be billed in the social service billing page.
92063	A separate claim line is required for each date of service for the service/ service code entered	The unit type daily, hourly, each, and quarter hour must be billed by date of service using the batch upload method. Those unit types cannot be billed using span.
92064	The Proc/Svc Code Entered is designated for automated payment generated only. This code cannot be submitted or resubmitted for payment.	This service cannot be billed. Payment is sent after the authorizing worker end dates the authorization.
92071	Modifier Code 1 invalid	The modifier is not correct.
92081	Modifier Code 2 invalid	The modifier is not correct.
92091	Modifier Code 3 invalid	The modifier is not correct.
92101	Modifier Code 4 invalid	The modifier is not correct.
92140	Only one unit must be entered for a single day	You are billing more than one unit on a daily unit type.
92141	Service Code and/or Modifier on the Claim do not match those on the Social Service Authorization for the Claims DOS (date of service)	<p>This message can occur for different reasons:</p> <ol style="list-style-type: none"> <li>1. The authorization is in Error for the DOS</li> <li>2. The authorization has been canceled for the DOS</li> <li>3. The DOS on the claim is outside the authorization DOS.</li> <li>4. If none of the above notify ProviderOne Health Care Authority at <a href="mailto:hipaa-help@hca.wa.gov">hipaa-help@hca.wa.gov</a>. Type in the subject line: Social Service Batch Upload &lt;insert domain #&gt;</li> </ol> <p>In the body of the email include the name of the batch file you are referencing: sample:  SOC.xxxxxxx.20150131xxxxx.SAMPLE_BATCH.dat.  and other pertinent information. Include your telephone number if you request a return call.</p>
92145	SS Servicing Only ProviderOne (SSSOP) ID does not exist in the system	<ol style="list-style-type: none"> <li>1. Each SSSOP ID has a Start Date within ProviderOne. This error will post if the SSSOP ID is added to a claim for a date of service prior to the Start Date.</li> <li>2. The location code for the SSSOP ID is incorrect.</li> <li>3. The SSSOP ID is closed in ProviderOne. In this instance please reach out to the EVV PM at <a href="mailto:EVVQuestions@dshs.wa.gov">EVVQuestions@dshs.wa.gov</a>.</li> </ol>

## UPLOADING THE .dat BATCH FILE *continued*

### Analyzing error codes

To analyze rejection error codes follow the steps listed below:

**Step 1:** Download the .xls Social Service Batch Upload Error Instance List

**Step 2:** View the 'Error Message' and 'Additional Message' column that displays the line that was submitted. Compare the lines to the Caret delimiter (.dat) format example on page 67.

**Step 3:** Compare the line error message to the line in the submitted caret delimiter (.dat) file to find errors and make corrections.

**Step 4:** If no formatting errors are found, go to the authorization list page in ProviderOne and conduct a 'Filter by' search for the month you are submitting your claims. Note: You may need to add an additional filter for processing status % in order to see authorization history.

- a. Is the authorization in error for the date of service (DOS) you are billing?
  - i. If yes, contact the authorizing case worker.
- b. Has the authorization been canceled for the DOS you are billing?
  - i. If yes, contact the authorizing case worker
- c. Are the dates on the claim outside of the authorized DOS?
  - a. If yes, confirm the dates on the claim are correct. If they are not correct, correct the DOS. If they are correct, contact the authorizing case worker.

If you have checked all formatting errors and verified the authorization information and cannot find the source of the error, contact: ProviderOne Health Care Authority at [hipaa-help@hca.wa.gov](mailto:hipaa-help@hca.wa.gov)

**Step 1:** Type in the subject line: Social Service Batch Upload<insert domain #>

**Step 2:** In the body of the email include the name of the batch file you are referencing: sample: SOC. xxxxxxxx.20150131xxxxxx.SAMPLE\_BATCH.dat. and any other pertinent information.

**Step 3:** Include your telephone number if you request a return call.

## UPLOADING THE .dat BATCH FILE *continued*

### Note:

A printable version of the Common Error Code Table is available as an attachment. [Click here](#) for more information.

### Common Error Code Table

Many errors are common and some can be challenging to analyze. Below are several examples identified by other Social Service .dat batch upload providers. To increase your chances of a successful submission, pay special attention to NOT making the errors listed below:

Problem Description	Error Code and Description	Solution
Service dates reported are not for the month authorized.	<b>92141</b> Service Code and/or Modifier on the Claim do not match those on the Social Service Authorization for the Claim DOS (date of service).	Ensure the service dates fall within the month the service was authorized.
The authorization is in error or canceled for the dates of service submitted.	<b>92141</b> Service Code and/or Modifier on the Claim do not match those on the Social Service Authorization for the Claim DOS (date of service).	Contact the case worker to resolve error or explain why authorizations have been canceled.
Service dates are for span billing and not for the date the service was provided. Daily rates, quarter hours, and each unit types cannot use span billing. Span billing is considered a date range. <i>Only monthly service codes such as personal emergency response systems can use span billing for social service batch upload.</i>	<b>92063</b> A separate claim line is required for each date of service for the service/ service code entered.	Correct the dates and bill for services by indicating the day the services were provided. If you have questions about billing for date of service, call the specified social service batch upload contact. Below is an example.  CORRECT: From 12012013 To 12012013 From 12022013 To 12022013  ERROR: From 12012013 To 12312013
Service dates are not formatted correctly.	<b>91042</b> Service From Date is not a valid date. <b>91052</b> Service To Date is not a valid date.	Correct the date format to mmddyy. If you have questions call the specified social service batch upload contact. Below is an example.  CORRECT: From 12012013 To 12012013  ERROR: From 12/01/2013 To 12/01/2013



## UPLOADING THE .dat BATCH FILE *continued*

Problem Description	Error Code and Description	Solution
The file does not contain caret placeholders for the four service code modifiers even though there is no modifier assigned to the service code in the authorization list page.	90005 Field count in the record is not equal to the actual field count needed for that record.	Add the placeholder caret symbol for the service code modifiers. Do not add spaces between the carets. Below is an example of the service code and the caret placeholders in between the number of units.
The caret delimiter (.dat) file contains a caret after the last EVV field when data is entered.	90005 Field count in the record is not equal to the actual field count needed for that record.	Remove the caret. Below is an example of the units showing the caret placement after the last EVV field when data is entered.
There are too many or too few caret delimiters in your data string.	90005 Field count in the record is not equal to the actual field count needed for that record.	Count the total number of carets before the ~ and verify there are 32.*
File contains extra characters, spaces or delimiters that do not follow the required format. Do not use periods, commas, # symbols, etc.	90004 Field does not end with ^ symbol.	The client ID is missing.
Units must be in whole numbers.	90005 Field count in the record is not equal to the actual field count needed for that record.	<p>Only use whole numbers to represent the number of units and remove the .0000 that is displayed in the crosswalk file. Below is an example:</p> <p>CORRECT: ^13^</p> <p>ERROR: ^13.0000^</p>

## UPLOADING THE .dat BATCH FILE *continued*

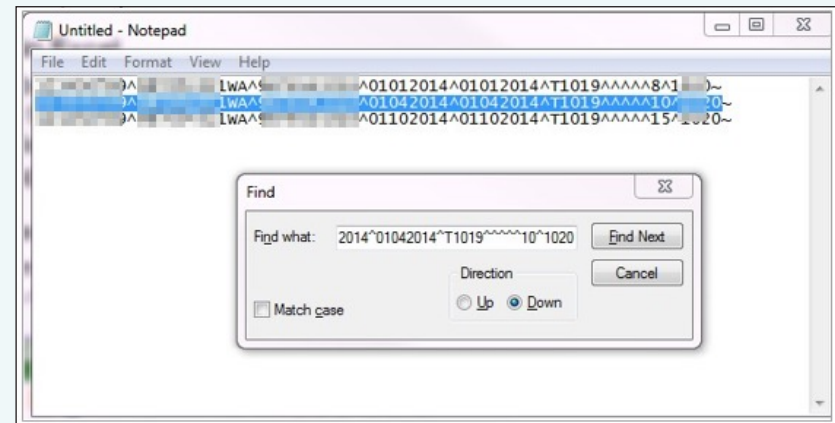
### Finding the record reference in error

After your batch has been rejected, it will be necessary to find the record reference in the .dat file to either remove the record or correct the record.

You can find the record one of two methods.

#### Method One:

- a. Open the .dat file that contains the errors.
- b. Download the 'Rejected' messages from ProviderOne.
- c. Copy the 'Additional Message' in the rejection list.
- d. Place your cursor at the top of the first record in the .dat file and click Ctrl F.
- e. Paste that record reference line in the 'Find what' box.
- f. Click 'Find Next' and the line will be highlighted in the .dat file.
- g. Remove the line or make corrections.
- h. Save and rename the .dat file.
- i. Upload the corrected .dat file into ProviderOne.



## **UPLOADING THE .dat BATCH FILE** *continued*

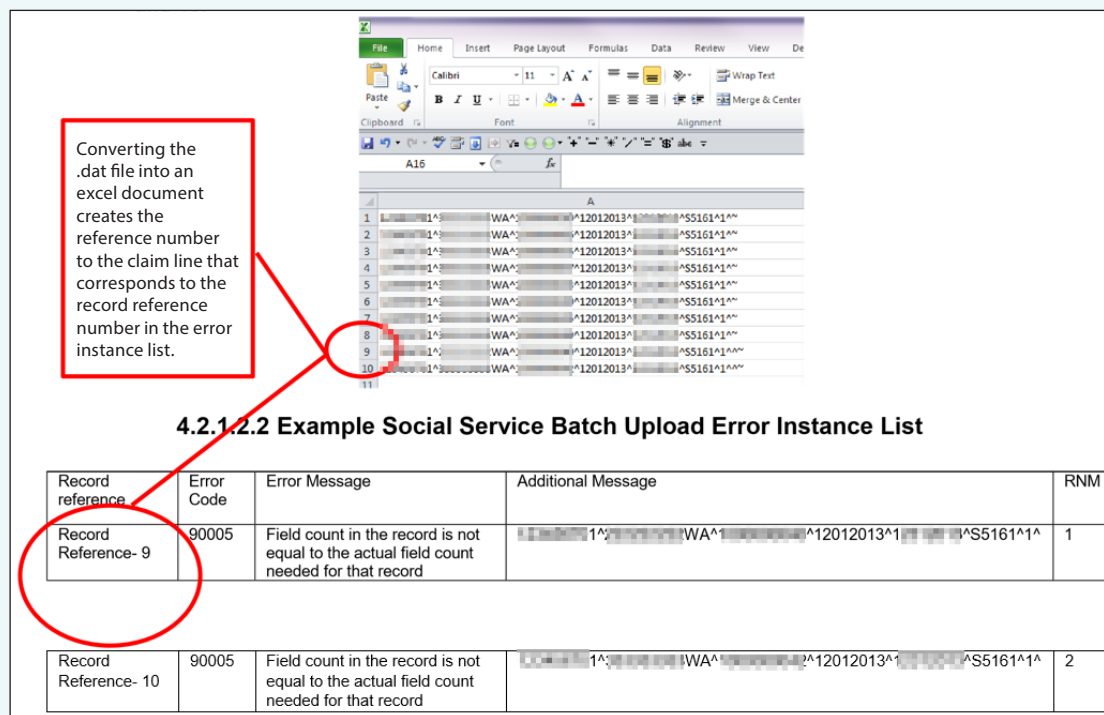
### **Method Two:**

- a. Convert the .dat file to Excel (see page 94 for directions).
- b. View the .dat file line number.
- c. The .dat file line number in Excel will correspond to the record reference error found in ProviderOne.
- d. Remove the line or make corrections.
- e. Save and rename the file to a .dat file.
- f. Upload the corrected .dat file to ProviderOne.

## UPLOADING THE .dat BATCH FILE *continued*

### .dat File converted to Excel screen shot

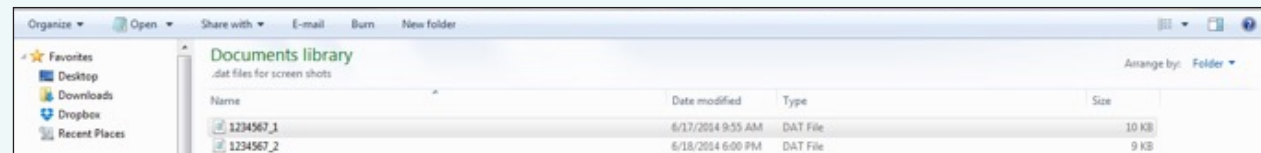
The example below demonstrates how to find the errors on a .dat file. The error message indicates the field record count is not accurate, meaning there is an extra caret in the line.



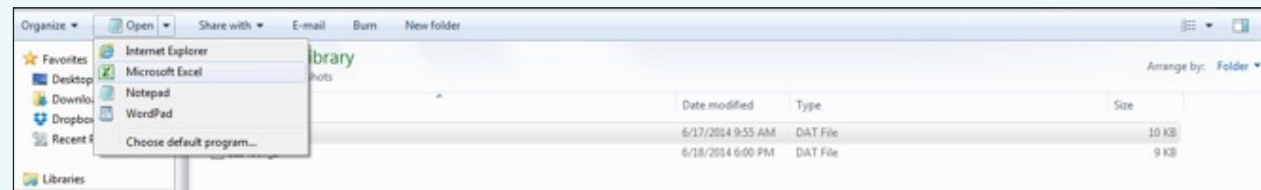
## UPLOADING THE .dat BATCH FILE *continued*

**Converting the caret delimiter (.dat) file to an Excel file. Follow the instructions below:**

1. Right click on the selected saved caret delimiter (.dat) file



2. Right click, or on the tabs above, click Open With: Excel



### IF EXCEL IS NOT LISTED

1. Right click, or on the tabs above, click Open With: Choose Default Program
2. Select the browse button.
3. In the search program files type Excel.
4. After the EXCEL program appears double click the EXCEL program.
5. Excel appears.
6. Select Excel.
7. Unclick the box: 'Always Use the Selected Program to Open This Kind of File,' if you do not want to change the default for NotePad. Click OK.

# ADJUST, VOID AND RESUBMIT SOCIAL SERVICE CLAIMS

- **Adjust Paid Claims**.....96
- **Void Paid Claims**.....105
- **Resubmit Denied or Voided Claims** .....108

This section explains how to adjust and void claims. A previously paid claim may need to be adjusted (to change the dates, units, or other details) or voided (changing the claim so it is no longer in paid status). This section also shows how to resubmit a claim that has been denied or voided.

# ADJUST PAID CLAIMS

## To adjust a paid claim:

- Log in to ProviderOne using the **EXT Provider Social Services** profile,
- Click on **Social Service Claim Adjustment/Void**.

## Note:

*Reasons you may want to adjust or void a claim include (but not limited to): realizing the original claim had incorrect data or finding out the client was not eligible for services on the dates claimed.*

**Social Services Authorization and Billing**

- [Social Service Claim Inquiry](#)
- [Social Service Claim Adjustment/Void](#) ←
- [Social Service Billing Screen](#)
- [Social Service Batch Upload](#)
- [Social Service Batch Upload Status](#)
- [Social Service Resubmit Denied/Void](#)
- [Social Service Retrieve Saved Claims](#)
- [Social Service Manage Templates](#)
- [Social Service Create Claims from Saved Templates](#)
- [Social Service Manage Batch Submission](#)
- [Social Service View Authorization List](#)

The screenshot shows the ProviderOne web interface. At the top, there's a header bar with the user's name 'Terry, Tavares J.' and a profile dropdown menu. Below the header, the page title is 'Profile: EXT Provider Social Services'. The main content area is divided into several sections: 'Online Services' with a 'Manage Alerts' button, 'Payments' with a 'View Payment' button, 'Provider' with 'Provider Inquiry' and 'Manage Provider Info', 'Admin' with 'Change Password' and 'Maintain Users', and 'Social Services Author' with a list of links including 'Social Service Claim Inquiry', 'Social Service Claim Adjustment/Void', 'Social Service Billing Screen', 'Social Service Batch Upload', 'Social Service Batch Upload Status', 'Social Service Resubmit Denied/Void', 'Social Service Retrieve Saved Claims', 'Social Service Manage Templates', 'Social Service Create Claims from Saved Templates', 'Social Service Manage Batch Submission', and 'Social Service View Authorization List'. The 'Social Service Claim Adjustment/Void' link is highlighted with an orange arrow. On the right side of the page, there's a 'Read Status' section with a dropdown menu and a 'Go' button. Below that, there's a 'Records Found!' message and a calendar for May 2017. The calendar shows the current date as Wednesday, May 31, 2017, at 09:50 AM. The calendar grid shows the days of the week and the dates, with the 31st of May highlighted.

## ADJUST PAID CLAIMS *continued*

The **Provider Social Service Claim Adjust/Void Search** page appears.

The **Provider ID** associated to the domain currently in use will automatically be listed in the Provider ID dropdown. You can search by:

- **TCN** (claim #) only

OR

- **Client ID** or **Authorization Number**, AND
- **Claim Service Period From Date**
  - When searching by Client ID Or Authorization Number, 'Claim Service Period From' is required but 'Claim Service Period To' is optional.

Close

Please enter a Provider ID and enter available information in the remaining fields before clicking 'Submit'.

Please enter

- Required: TCN or Client ID AND Claim Service Period (To Date is optional) or Authorization Number AND Claim Service Period (To Date is optional).
- You may Adjust/Void claims processed within the past four years
- The Claim Service Period From and To date range cannot exceed 3 months

Provider ID:

TCN:

Client ID:

Authorization Number:

Claim Service Period From:

Claim Service Period To:

### Note:

*Search requests must be for claims submitted within the past 4 years. If you enter 'Claim Service Period From' date, the range cannot exceed 3 months.*



## ADJUST PAID CLAIMS *continued*

The **Provider Social Service Claims Adjust Void List** appears.

### To Adjust a Paid Claim:

- Check the box ☐ next to the the TCN.
- Click on **Adjust**.

**Provider Social Service Claims Adjust Void List**

	TCN ▲▼	Date of Service ▲▼	Claim Status ▲▼	Claim Charged Amount ▲▼	Claim Payment Amount ▲▼	Client Name ▲▼	Client ID ▲▼	ADMINISTRATION ▲▼
<input type="checkbox"/>								
<input type="checkbox"/>		09/21/2016	1: For more detailed information, see remittance advice.	\$1,218.91	\$1,218.91			ADSA-H
<input type="checkbox"/>		09/14/2016	1: For more detailed information, see remittance advice.	\$1,218.91	\$1,218.91			ADSA-H

### Note:

The populated list will show the TCN, Date of Service, Claim Status, Claim Charged Amount, Claim Payment Amount, Client ID and the Administration providing services for the client.

## ADJUST PAID CLAIMS *continued*

The **Adjust Social Services Claim** page appears.

This screen is similar to the Billing Screen; however, the page includes an **Original TCN**.

If there has been a change that does not require you to change any data (example a change in the rate), simply click the **Submit** button to reprocess the claim. Then go to page 103 to finish the adjustment process.

If you need to change data, then continue onto the next pages where we will view the different options available when adjusting paid claims.

These include:

- Modifying Service Line data
- Adding Service Lines
- Voiding Service Lines

Close

Submit

Adjust Social Services Claim

Note: aster

Basic

Billing Prov

ADJUST

\* Original

ADJUSTMENT INFORMATION

\* Original TCN:

Submitter ID:

PROVIDER INFORMATION

BILLING PROVIDER

\* Provider ID:

SUBSCRIBER/CLIENT INFORMATION

SUBSCRIBER/CLIENT

\* Client ID:

CLAIM INFORMATION

CLAIM INFORMATION

1. \* Authorization Number:

BASIC LINE ITEM INFORMATION

BASIC SERVICE LINE ITEMS

\* Service Date From:

\* Service Date To:

\* Service Code:

Modifiers: 1: 2: 3: 4:

Patient Account No:

\* Units:

Add Service Line Item

Update Service Line Item

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.

Total Charges Submitting: \$ 1218.91

Line No	Service Dates	Service Code	Modifiers	Units	
	From To		1 2 3 4		
1	09/21/2016 09/21/2016	T1020	U1	1	Void
2	09/22/2016 09/22/2016	T1020	U1	1	Void

## ADJUST PAID CLAIMS: MODIFYING SERVICE LINE DATA

### Modifying Service Line Data:

- Click on a **Service Line Number**.
- The corresponding service line information appears in the **Basic Service Line Items** fields.
- Make needed changes to the data fields. Refer to page 9 for the data fields that can be changed.
- If you are billing for In-Home Personal Care Services or Respite Care Services, please remember that EVV information is required to be submitted with your claims. Refer to pages 10-12 to review EVV requirements.
- Click on **Update Service Line**.
- Go to page 103 to finish the adjustment process.

#### Note:

When adjusting paid claims, changes cannot be made to the Provider ID, Client ID, or Authorization number. If you need to make changes to one of the above 3, void the original claim and submit a new claim.

#### Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information.

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	09/21/2016	09/21/2016	T1020	U1				1	Void
2	09/23/2016	09/23/2016	T1020	U1				1	Void



**BASIC SERVICE LINE ITEMS**

\*Service Date From: mm dd cyyy 09 22 2016

\*Service Date To: mm dd cyyy 09 22 2016

\*Service Code: T1020

Modifiers: 1: U1 2: 3: 4:

\*Units: 1

Patient Account No:

**Update applicable data**

☒ Add Service Line Item ☐ Update Service Line Item

☒ Add Service Line Item

☐ Update Service Line Item



## ADJUST PAID CLAIMS: ADDING DATES OF SERVICES

To add a date of service to a previously paid claim:

- Enter **Basic Service Line** information.
- Click **Add Service Line** and enter applicable data.
- Go to page 103 to finish the adjustment process.

Click a Line No. below to view/update that Line Item Information. Total Charges Submitting: \$ 1218.91

Line No	Service Dates	Service Code	Modifiers	Units			
	From	To	1	2	3	4	
1	09/21/2016	09/21/2016	T1020	U1			1 Void
2	09/22/2016	09/22/2016	T1020	U1			1 Void

## ADJUST PAID CLAIMS: VOIDING SERVICE LINES

### Voiding Service Line Data within a Paid Claim:

- Determine which line(s) needs to be voided in the **Previously Entered Line Item Information** section.
- Click **Void** at the end of the line you wish to remove

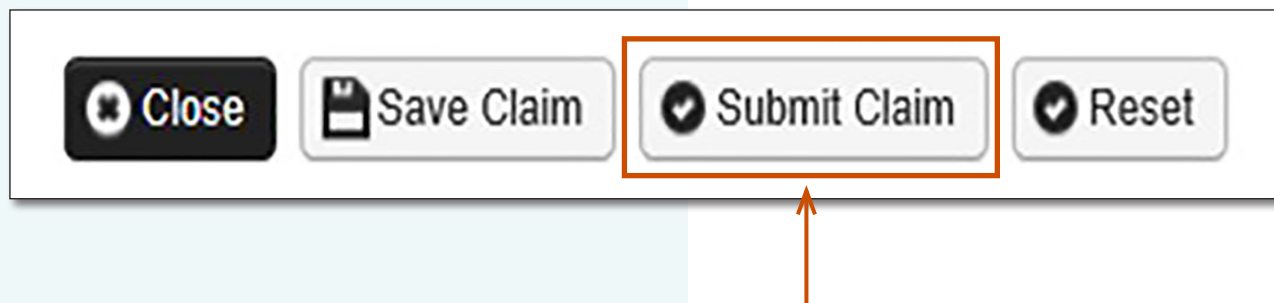
Previously Entered Line Item Information									
Click a Line No. below to view/update that Line Item Information.									
Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/23/2019	01/23/2019	T1019					32	Void
2	01/24/2019	01/24/2019	T1019					32	Void
3	01/22/2019	01/22/2019	T1019					32	Void
4	01/28/2019	01/28/2019	T1019					32	Void

- The line disappears from the claim, and any subsequent lines will change numbers to match the new order. (Notice that the line for 1/24/2019 (above) has been removed (below), and lines 3 and 4 have moved up in the order.)
- Go to page 103 to finish the adjustment process.

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/23/2019	01/23/2019	T1019					32	Void
2	01/22/2019	01/22/2019	T1019					32	Void
3	01/28/2019	01/28/2019	T1019					32	Void

## ADJUST PAID CLAIMS *continued*

Once all service line information is entered and checked for accuracy, click **Submit Claim** at the top of the screen.



## ADJUST PAID CLAIMS *continued*

Once you have clicked **Submit**, the **Adjust Social Service Claim Details** appears. The adjusted claim will have a new **TCN**. This allows for tracking of the changes made to the original claim.

Claim details will include the new **TCN**, **Original TCN**, **Provider ID**, **Client ID**, **Date of Service** and **Total Claim Charge**.

To complete claim submission, click on the **Submit** button (located on the bottom right corner of the page).

### Note:

Make sure to click **Submit** on this screen.

**No Records Found!** refers to attachments such as backup documentation. Social Service providers will not add attachments.

**Adjust Social Service Claim Details**

TCN: [REDACTED] ←

Original TCN: [REDACTED]

Provider ID: [REDACTED]

Client ID: [REDACTED] WA

Date of Service: 09/21/2016-09/27/2016

Total Claim Charge: \$ 1218.91

Please click "Add Attachment" button, to attach the documents.

**Adjust Social Service Claim Details**

Line No	File Name	Attachment Type	Transmission Code
No Records Found			

**Print Details** **Print Cover Page** **Submit**

Once the claim is processed by ProviderOne, the adjustment is complete. The claim details will be available in the Adjustments category of your Remittance Advice (RA). For more information about your RA, review the RA section in the [Viewing Claim Status and Payments Guide](#).

# VOID PAID CLAIMS

## To Void an entire paid claim:

- Locate and select the claim you wish to update (see page 102).
- Check the ☐ box next to the TCN.
- Click **Void Claim**.

Provider ID : [REDACTED]

Provider Social Service Claims Adjust Void List								
<input type="checkbox"/>	TCN ▲ ▼	Date of Service ▲ ▼	Claim Status ▲ ▼	Claim Charged Amount ▲ ▼	Claim Payment Amount ▲ ▼	Client Name ▲ ▼	Client ID ▲ ▼	ADMINISTRATION ▲ ▼
<input type="checkbox"/>	[REDACTED]	09/21/2016	1: For more detailed information, see remittance advice.	\$1,218.91	\$1,218.91	[REDACTED]	[REDACTED]	ADSA-H
<input type="checkbox"/>	[REDACTED]	09/14/2016	1: For more detailed information, see remittance advice.	\$1,218.91	\$1,218.91	[REDACTED]	[REDACTED]	ADSA-H

### Note:

You should only void an entire claim if you should not have been paid for any of the claim line details associated with the TCN. Voiding a claim will result in an overpayment. This means you must pay DSHS back the original paid amount. ProviderOne does not automatically take the money back. See the [Viewing Claim Status and Payments Guide](#) for more information about overpayments.



## VOID PAID CLAIMS *continued*

The **Void Social Services Claim** page appears with all the fields grayed out.

- Please note the specific TCN.
- To void this claim, click **Submit**. (Located near the top left corner of the page.)

Close Submit

### Void Social Services Claim

Note: asterisks (\*) denote required fields.

**Basic Claim Info**

Billing Provider | Subscriber | Claim

**VOID INFORMATION**

\* Original TCN: [Field]

**PROVIDER INFORMATION**

**BILLING PROVIDER**

\* Provider ID: [Field]

**SUBSCRIBER/CLIENT INFORMATION**

**SUBSCRIBER/CLIENT**

\* Client ID: [Field]

**CLAIM INFORMATION**

1. \* Authorization Number: [Field]

**BASIC LINE ITEM INFORMATION**

Submitter ID: [Field]

## VOID PAID CLAIMS *continued*

The **Adjust Social Services Claim Details** appears. The adjusted claim will have a new **TCN**. This allows for tracking of the changes made to the original claim.

Claim details will include the new **TCN**, **Original TCN**, **Provider ID**, **Client ID**, **Date of Service** and **Total Claim Charge**.

Click on **Submit** to submit the voided claim.

**Adjust Social Service Claim Details**

TCN: [REDACTED]  
 Original TCN: [REDACTED] ←  
 Provider ID: [REDACTED]  
 Client ID: [REDACTED] WA  
 Date of Service: 09/21/2016-09/27/2016  
 Total Claim Charge: \$ 1218.91

Please click "Add Attachment" button, to attach the documents. [Add Attachment](#)

Line No	File Name	Attachment Type	Transmission C
No Records Found			

[Print Details](#) [Print Cover Page](#) [Submit](#)

### Note:

Make sure to click **Submit** on this screen. **No Records Found!** refers to attachments such as backup documentation Social service providers will not add attachments. Voiding a PAID claim will result in an overpayment. You should review the claim details on your RA when your RA is available.

# RESUBMIT DENIED OR VOIDED CLAIMS

The main reasons a Denied claim may need to be resubmitted include:

- The authorization was in error when the claim was originally submitted and the error has been resolved.
- Basic data had incorrect date, service code, or units.

A Voided claim may need to be resubmitted if a provider discovers they voided the paid claim in error.

## To resubmit a denied or voided claim:

- Login to ProviderOne using the **EXT Provider Social Services** profile.
- Click on **Social Service Resubmit Denied/Void**.

The screenshot displays the ProviderOne user interface. At the top, a blue banner reads "Profile: EXT Provider Social Services". Below this, the user is logged in as "Terry, Tavares J". The main navigation area includes sections for "Online Services", "Payments", "Provider", "Admin", and "Social Services". The "Social Services" section is expanded, showing a list of options. A red arrow points to the "Social Service Resubmit Denied/Void" option in this list. To the right of the main menu, there is a "My Reminders" section, "Your Recent Online Activities", and a "Calendar" for June 2017.

**Social Services Authorization and Billing**

- Social Service Claim Inquiry
- Social Service Claim Adjustment/Void
- Social Service Billing Screen
- Social Service Batch Upload
- Social Service Batch Upload Status
- Social Service Resubmit Denied/Void
- Social Service Retrieve Saved Claims
- Social Service Manage Templates
- Social Service Create Claims from Saved Templates
- Social Service Manage Batch Submission
- Social Service View Authorization List

## RESUBMIT DENIED OR VOIDED CLAIMS *continued*

The **Provider Social Service Claim Model Search** page appears.

The **Provider ID** associated to the domain currently in use will automatically be listed in the Provider ID dropdown. You can search by:

- **TCN** or,
- **Client ID and Claim Service Period** (From and To Date).
- Once you enter the necessary search criteria, click **Submit**.

### Note:

*Search requests must be for claims submitted within the past 4 years. If you search using the **Claim Service Period From/To** dates, the date range cannot exceed 3 months.*

Close

**Provider Social Service Claim Model Search**

Please enter a Provider ID and enter available information in the remaining fields before clicking 'Submit'.

- Required: TCN or Client ID AND Claim Service Period (To Date is optional) or Authorization Number AND Claim Service Period (To Date is optional).
- The Claim Service Period From and To date range cannot exceed 3 months

Provider ID

TCN:

Client ID:

Authorization Number:

Claim Service Period From:

Claim Service Period To:

## RESUBMIT DENIED OR VOIDED CLAIMS *continued*

The **Social Service Claims Model List** appears.

### To Resubmit a Denied or Voided Claim:

- Check the ☐ box next to the **TCN**.
- Click on **Retrieve**.

#### Note:

*The populated list will show the TCN, Date of Service, Claim Status, Claim Charged Amount, Claim Payment Amount, Client ID and the Administration providing services for the client.*

Close
Retr

Close

Retrieve

☰ Social Service Claims Model List
▲

Only one check box can be selected

	TCN ▲ ▼	Date of Service ▲ ▼	Claim Status ▲ ▼	Claim Charged Amount ▲ ▼	Claim Payment Amount ▲ ▼	Client Name ▲ ▼	Client ID ▲ ▼	ADMINISTRATION ▲ ▼
<input type="checkbox"/>								
<input type="checkbox"/>		08/11/2016	1: For more detailed information, see remittance advice.	\$1,356.29	\$0.00			ADSA-H
<input type="checkbox"/>		08/11/2016	1: For more detailed information, see remittance advice.	\$942.30	\$0.00			ADSA-H

View Page: 
Go
+ Page Count
SaveToXLS

Viewing Page: 1

<< First
< Prev
> Next
>> Last

## RESUBMIT DENIED OR VOIDED CLAIMS *continued*

The basic billing screen appears.

This screen is similar to the Billing Screen. Locate the line you want to change and:

- Update Basic Service Line information,
- Click on Update Service Line Item.

Once the service line information is entered and checked for accuracy, click 'Submit Claim' at the top of the screen.

### Note:

*When resubmitting denied claims, changes cannot be made to the Provider ID, Client ID, or Authorization number. If you need to make changes to one of the above 3, submit a new claim.*

**Previously Entered Line Item Information**

Click a Line No. below to view/update that Line Item Information.

Line No	Service Dates	Service Code	Modifiers
	From	To	
1	09/21/2016	09/21/2016	T1020 U1
2	09/22/2016	09/22/2016	T1020 U1

**BILLING PROVIDER**

\* Provider ID:

**SUBSCRIBER/CLIENT INFORMATION**

**SUBSCRIBER/CLIENT**

\* Client ID:

**CLAIM INFORMATION**

1. \* Authorization Number:

**BASIC LINE ITEM INFORMATION**

**BASIC SERVICE LINE ITEMS**

\* Service Date From:  mm  dd  ccyy

\* Service Code:

Patient Account No:

\* Service Date To:  mm  dd  ccyy

Modifiers: 1:  2:  3:  4:

\* Units:

*Information previously entered will be populated*

## RESUBMIT DENIED OR VOIDED CLAIMS *continued*

The **Social Services Claim Details** appears. The resubmitted claim will have a new **TCN**. This allows for tracking of the changes made to the original claim.

Claim details will include the new **TCN**, **Original TCN**, **Provider ID**, **Client ID**, **Date of Service** and **Total Claim Charge**.

Click on **Submit** to resubmit the claim.

Print Help

**Adjust Social Service Claim Details**

TCN: XXXXXXXXXX ←

Original TCN: XXXXXXXXXX

Provider ID: XXXXXXXXXX

Client ID: XXXXXXXXXXWA

Date of Service: 09/21/2016-09/27/2016

Total Claim Charge: \$ 1218.91

Please click "Add Attachment" button, to attach the documents. Add Attachment

**Adjust Social Service Claim Details**

Line No	File Name	Attachment Type	Transmission Code
No Records Found			

Print Details
Print Cover Page
Submit

# Additional Resources

Visit the [ProviderOne for Social Services webpage](#) for more resources:

- Updates and newsletters
- Additional contact information
- Additional ProviderOne for Social Services Billing Guides:
  - Getting Started and Billing Essentials
  - Submitting and Adjusting Social Service Medical Claims
  - Viewing Claim Status & Payments

For questions, feedback, or suggested changes to this document, please email [p1\\_escalation@dshs.wa.gov](mailto:p1_escalation@dshs.wa.gov).