

ProviderOne Provider System User Manual



How to Enroll a Servicing Provider

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

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

Disclaimer:

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

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



ProviderOne Provider System User Manual

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Table of Contents

How to Enroll a Servicing Provider	5
Provider Enrollment Links.....	7
Accessing the Enrollment Business Process Wizard.....	9
Provider Basic Information.....	11
Add Specializations	15
View Required Credentials for Specializations	21
Add Licenses and Certifications	23
Add Training and Education.....	29
Add Identifiers	35
Add Federal Tax Details	41
Add Billing Provider Details	49
Add Payment Details	55
Complete Enrollment Checklist.....	63
Submit Enrollment Application for Review	65

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How to Enroll a Servicing Provider

A Servicing Provider is a Provider who provides services through a group or organization.

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

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

Important Note: Servicing Providers do not enroll themselves.

Servicing Providers are enrolled during:

- Group Practice Enrollment / File Maintenance
 - Tribal Services Enrollment / File Maintenance
 - Facility, Agency, Organization, and Institution Enrollment / File Maintenance
-

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Provider Enrollment Links

Start a New Provider Enrollment Application

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

Resume or Track an Enrollment Application

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

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

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Accessing the Enrollment Business Process Wizard

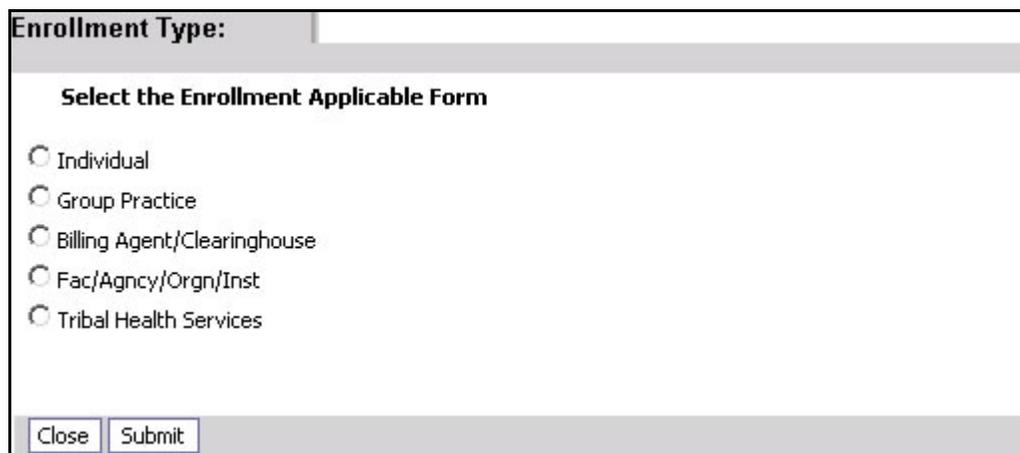
Selecting the Enrollment Type



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



ProviderOne displays the Enrollment Type page.



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

Figure 1 - Enrollment Type



Select the Appropriate Enrollment form and click the Submit button.



ProviderOne displays the Basic Information page.

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Provider Basic Information

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

Successful completion of this step will result in:

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



ProviderOne displays the Basic Information page.

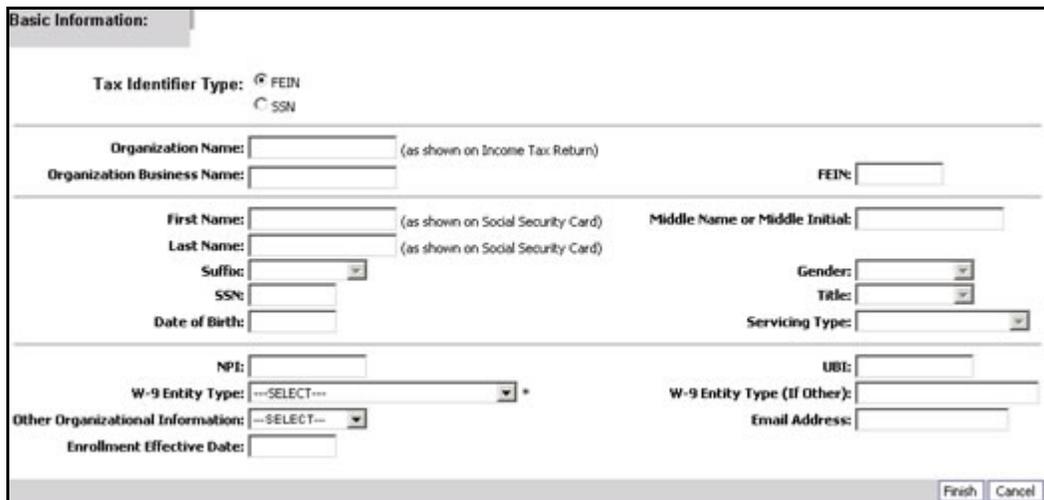


Figure 2 - Basic Information Page

About the Basic Information Page

- The first time this page displays, the Application Id in the header will be blank.
- The information collected on this screen will vary based on the type of Provider.



After completing all required input, click the Finish button.

ProviderOne displays the Basic Information – Application ID page.

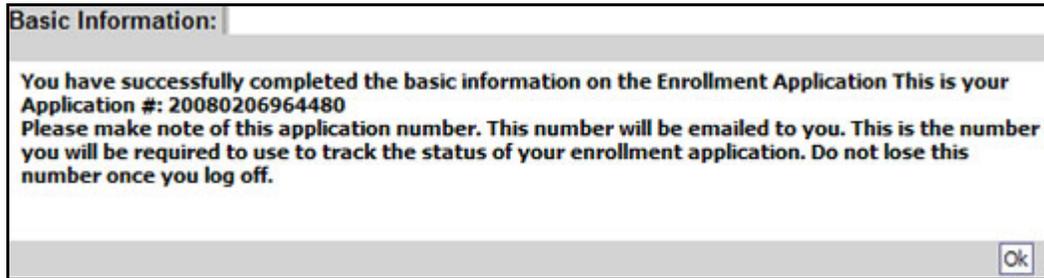


Figure 3 - Basic Information – Application ID

About the Basic Information – Application ID Page:

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



Click Ok.

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

Step	Required	Start Date	End Date	Status	Step Remark
Step 1 : Provider Basic Information	Required	04/01/2010	04/01/2010	Complete	
Step 2 : Add Locations	Not Required			Incomplete	
Step 3 : Add Specializations	Required			Incomplete	
Step 4 : Add Ownership Details	Not Required			Incomplete	
Step 5 : Add Licenses and Certifications	Optional			Incomplete	
Step 6 : Add Training and Education	Optional			Incomplete	
Step 7 : Add Identifiers	Optional			Incomplete	
Step 8 : Add Contract Details	Not Required			Incomplete	
Step 9 : Add Federal Tax Details	Optional			Incomplete	
Step 10 : Add Invoice Details	Optional			Incomplete	
Step 11 : Add EDI Submission Method	Not Required			Incomplete	
Step 12 : Add EDI Billing Software Details	Not Required			Incomplete	
Step 13 : Add EDI Submitter Details	Not Required			Incomplete	
Step 14 : Add EDI Contact Information	Not Required			Incomplete	
Step 15 : Add Billing Provider Information	Optional			Incomplete	
Step 16 : Add Payment Details	Not Required			Incomplete	
Step 17 : Complete Enrollment Checklist	Required			Incomplete	
Step 18 : Submit Enrollment Application for Review	Required			Incomplete	

Figure 4 - Enrollment Business Process Wizard

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Add Specializations

Accessing the Specialty/Subspecialty List

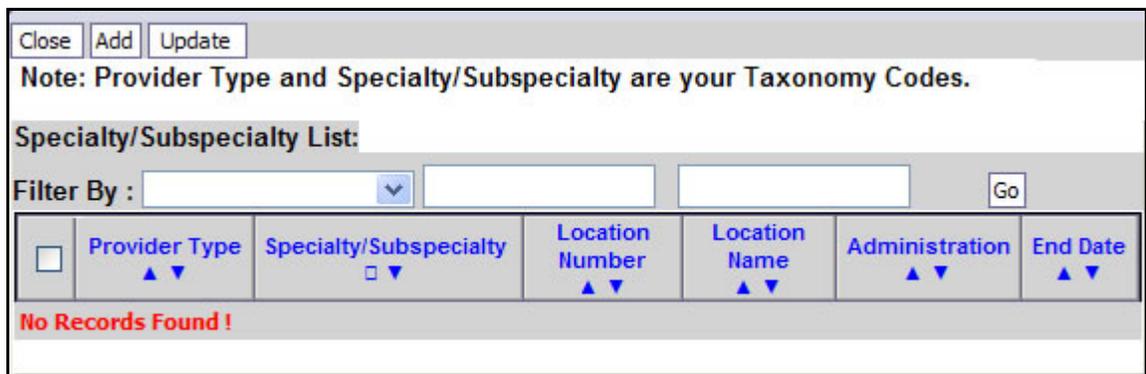


From the Business Process Wizard, click the Add Specializations link.

Step 3: Add Specializations



ProviderOne displays the Specialty/Subspecialty List.



Close Add Update

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

Specialty/Subspecialty List:

Filter By : Go

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

Figure 5 - Specialty/Subspecialty List for Enrollment

About the Specialty/Subspecialty List for Enrollment

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

This page is intentionally blank.

Adding a Specialization



To add a new record, click the Add button.

ProviderOne displays the Add Specialty/Subspecialty form.

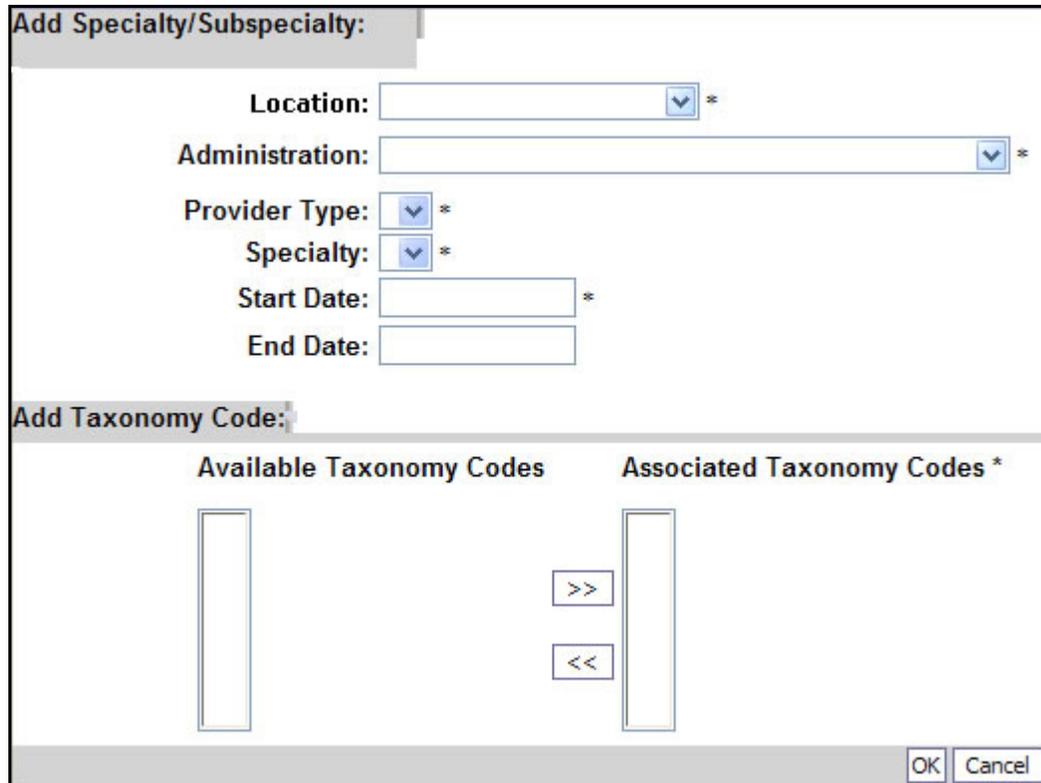


Figure 6 - Add Specialty/Subspecialty

About the Add Specialty/Subspecialty Form

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



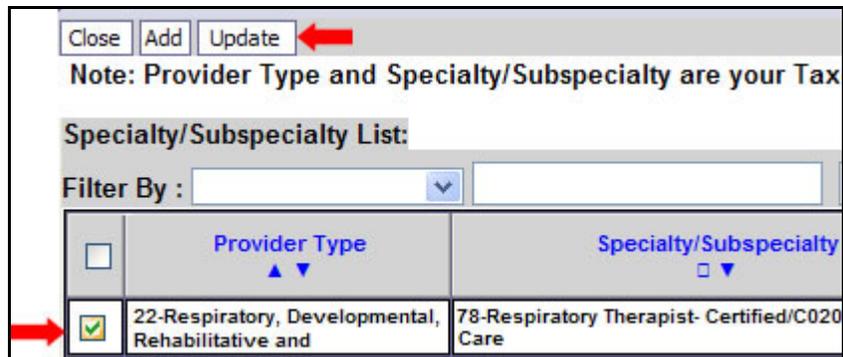
Click the OK button to save the information and close the window, or Cancel to close the window without saving..

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

Modifying a Specialty/Subspecialty Record



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



Close Add Update

Note: Provider Type and Specialty/Subspecialty are your Tax

Specialty/Subspecialty List:

Filter By : [dropdown]

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



ProviderOne displays the Manage Specialty/Subspecialty list.

Manage Specialty/Subspecialty:

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

Figure 7 - Manage Specialty/Subspecialty

About the Manage Specialty/Subspecialty List

- Only the End Date can be modified.



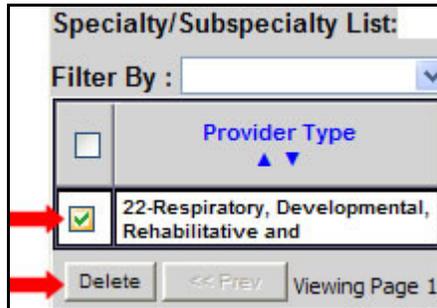
After making your changes, click the OK button to save, or the Cancel button to close the window without saving.

Deleting a Specialty/Subspecialty

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



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



Specialty/Subspecialty List:

Filter By :

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

Delete << Prev Viewing Page 1

What Happens Next:



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



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

Step 3: Add Specializations	Required	02/06/2008	02/06/2008	Complete
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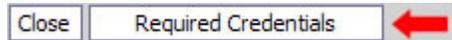
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View Required Credentials for Specializations

Accessing the Required Credentials For Specialization List



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



ProviderOne displays the Required Credentials For Specializations list.

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

<< Prev Viewing Page 1 Next >> 2 Go Page Count SaveToXLS

Cancel

Figure 8 - Required Credentials For Specialization



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

Required Credentials For Specialization:	
Filter By :	01-License [Go]
	01-License 02-Identifier 03-Training



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

This page is intentionally blank.

Add Licenses and Certifications

Accessing the License/Certification List

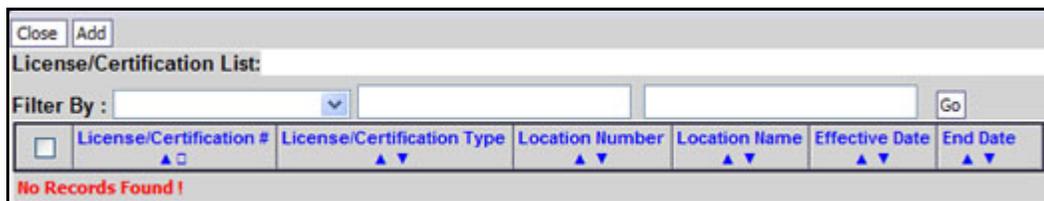


From the Business Process Wizard, click the Add Licenses and Certifications link.

Step #: Add Licenses and Certifications



ProviderOne displays the License/Certification List.



The screenshot shows a web interface for the License/Certification List. At the top, there are 'Close' and 'Add' buttons. Below them is the title 'License/Certification List:'. A 'Filter By:' section contains a dropdown menu, a text input field, and a 'Go' button. Below the filter section is a table with the following columns: License/Certification #, License/Certification Type, Location Number, Location Name, Effective Date, and End Date. Each column has a small icon (up/down arrow or square) indicating sorting or filtering options. At the bottom of the table, the text 'No Records Found!' is displayed in red.

Figure 9 - License/Certification List for Enrollment

About the License/Certification List for Enrollment

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

This page is intentionally blank.

Adding a License/Certification



To add a new record, click the Add button.

ProviderOne displays the Add License/Certification form.

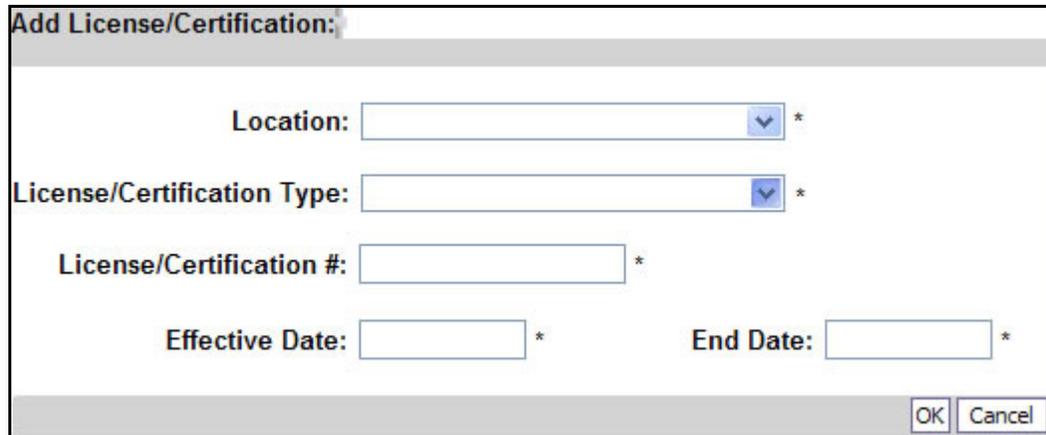


Figure 10 - Add License/Certification

About the Add License/Certification Form

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



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

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

Modifying a License/Certification Record



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

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



ProviderOne displays the Manage License/Certification form.

Manage License/Certification :

Location: ▼ *

License/Certification Type: ▼ *

License/Certification #: *

Effective Date: * End Date: *

Figure 11 - Manage License/Certification



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

Deleting a License/Certification

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



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



License/Certification List:

Filter By :

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

Viewing Page 1

What Happens Next:



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



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

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

Accessing the Training/Education List

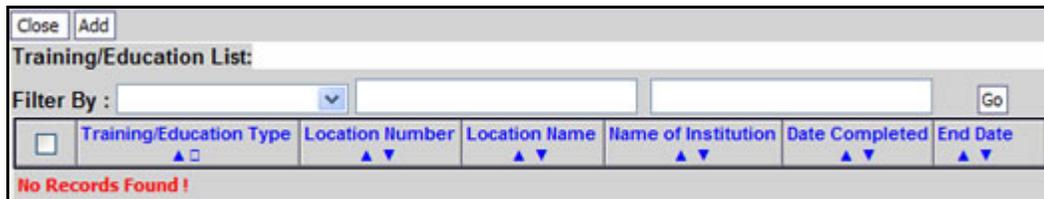


From the Business Process Wizard, click the Add Licenses and Certifications link.

Step #: Add Training and Education



ProviderOne displays the Training/Education List.



Close Add

Training/Education List:

Filter By :

<input type="checkbox"/>	Training/Education Type	Location Number	Location Name	Name of Institution	Date Completed	End Date
No Records Found!						

Figure 12 - Training/Education List for Enrollment

About the Training/Education List for Enrollment

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

This page is intentionally blank.

Adding a Training/Education Record



To add a new record, click the Add button.

ProviderOne displays the Add Training/Education form.

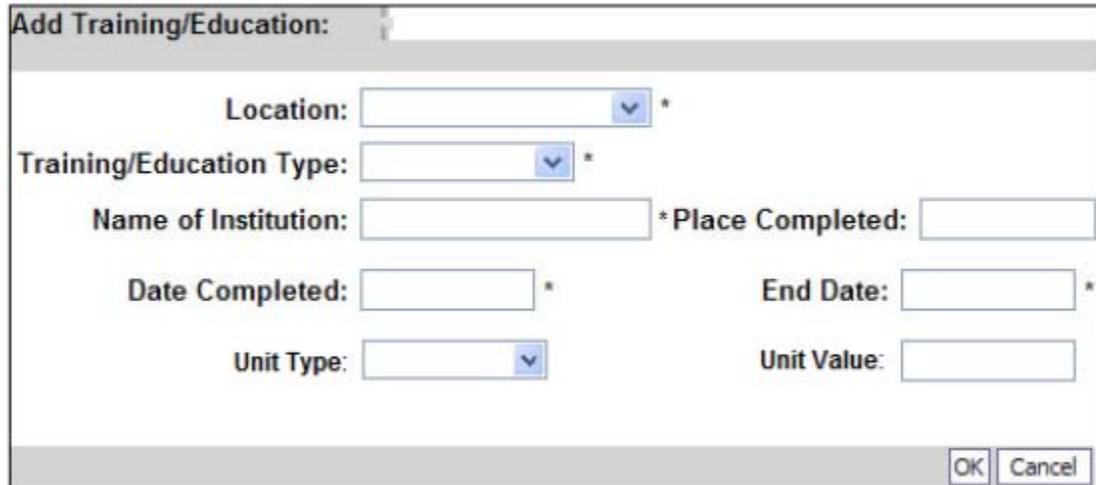


Figure 13 - Add Training/Education

About the Add Training/Education Form

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



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



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

Modifying a Training/Education Record

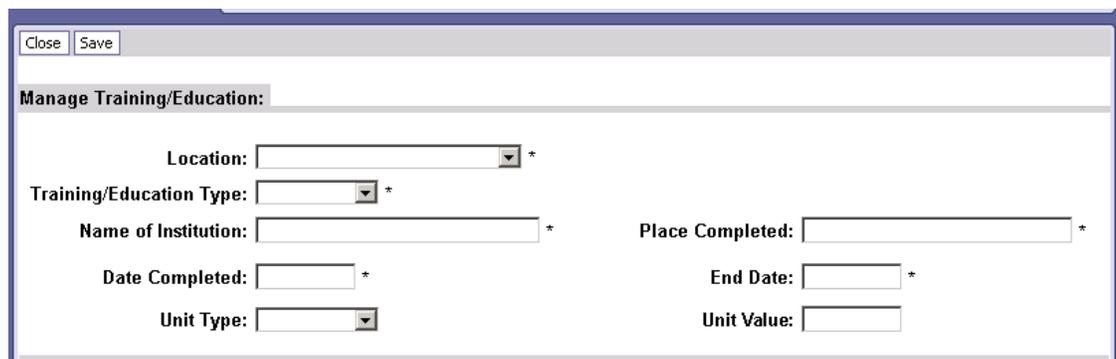


From the Training/Education List, click the hyperlink in the Training/Education Type column.

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



ProviderOne displays the Manage Training/Education form.



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

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

Figure 14 - Manage Training/Education



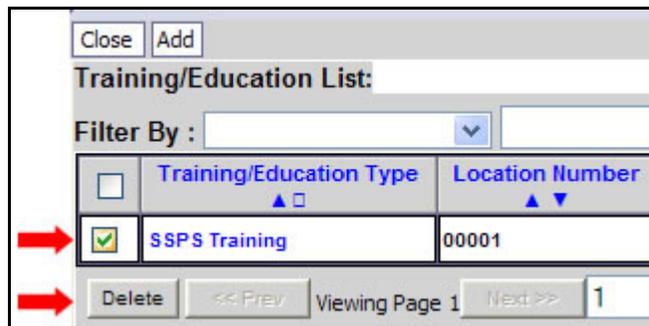
After making your changes, click the Save button to save, or the Close button to close the window without saving.

Deleting a Training/Education

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



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



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

What Happens Next:



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



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

Step #: Add Training and Education	Optional	02/06/2008	02/06/2008	Complete
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This page is intentionally blank.

Add Identifiers

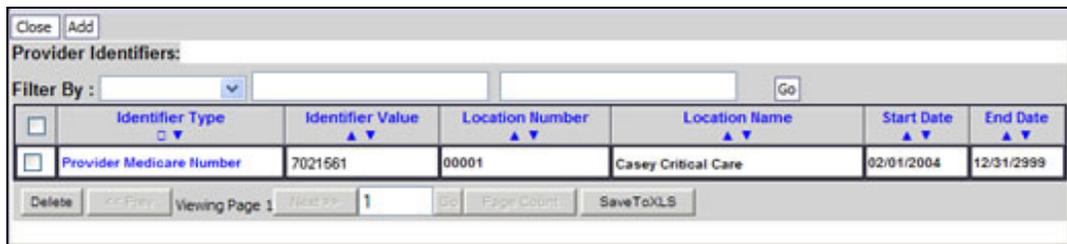
Accessing the Provider Identifiers List



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



ProviderOne displays the Provider Identifiers List.



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

Figure 15 - Provider Identifiers List

About the Provider Identifiers List

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

This page is intentionally blank.

Adding an Identifier



To add a new record, click the Add button.

ProviderOne displays the Add New Identifier form.



Figure 16 - Add New Identifier

About the Add New Identifier Form

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



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

Modifying a Provider Identifier Record

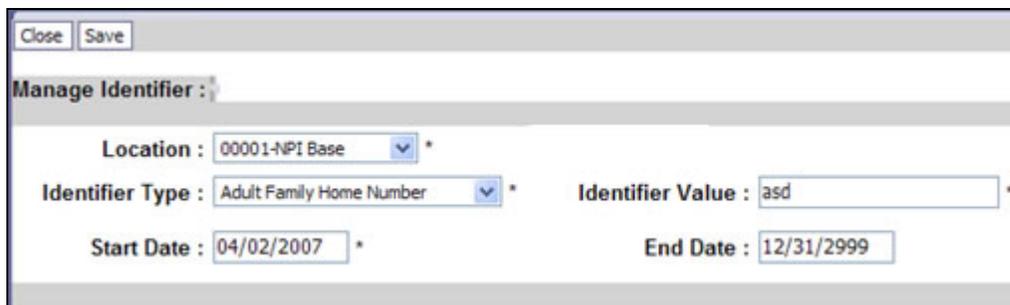


From the ProviderOne Provider Identifiers list, click the link in the Identifier Type column.

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



ProviderOne displays the Manage Identifier page.



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

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

Figure 17 - Manage Identifier



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

Deleting a Provider Identifier Record



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

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



What happens next:



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



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

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



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Add Federal Tax Details

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

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

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

Accessing the Federal Tax Details Page



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

Step #: Add Federal Tax Details



ProviderOne displays the Federal Tax Details page.

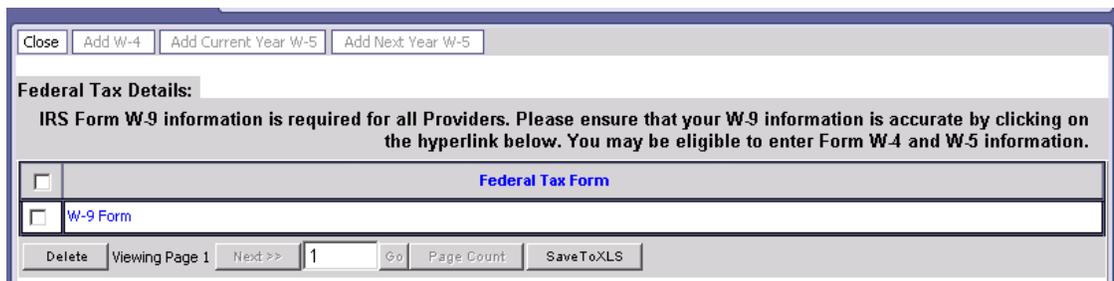


Figure 18 - Federal Tax Details Page

About the Federal Tax Details Page

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

This page is intentionally blank.

Adding Form W-9 Information



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

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



ProviderOne displays the Form W-9 page.

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

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

Figure 19 - Form W-9



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



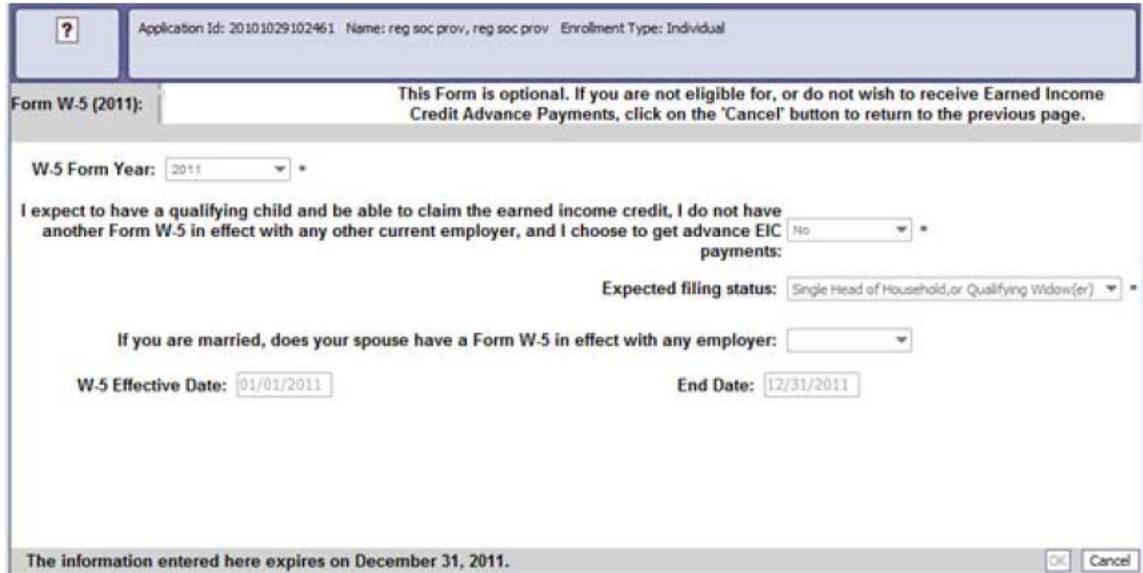
ProviderOne displays the Federal Tax Details page.

Adding Form W-5 Information (if eligible)



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

ProviderOne displays the Form W-5 page.



Application Id: 20101029102461 Name: reg soc prov, reg soc prov Enrollment Type: Individual

Form W-5 (2011): This Form is optional. If you are not eligible for, or do not wish to receive Earned Income Credit Advance Payments, click on the 'Cancel' button to return to the previous page.

W-5 Form Year: 2011 *

I expect to have a qualifying child and be able to claim the earned income credit, I do not have another Form W-5 in effect with any other current employer, and I choose to get advance EIC payments: No *

Expected filing status: Single Head of Household, or Qualifying Widow(er) *

If you are married, does your spouse have a Form W-5 in effect with any employer: *

W-5 Effective Date: 01/01/2011 End Date: 12/31/2011

The information entered here expires on December 31, 2011. OK Cancel

Figure 20 - Form W-5



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

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

Adding Form W-4 Information (if eligible)



Click the Add W-4 button.

ProviderOne displays the Form W-4 page.

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

Home Address:

Address Line 1: * Address Line 2:

Address Line 3: City/Town: *

State/Province: * County:

Country: * Zip Code: -

Tax Form Year: *

Filing Status: * (If married, but legally separated, or spouse is a nonresident alien, select "Single")

Number of Allowances: * Additional Amount Withheld: *

I Claim Exemption from Withholding:

Tax Form Year Effective Date: Tax Form Year End Date: *

IRS Lock Letter Exists?: IRS Lock Letter Effective Date:

Request cancellation of Withholding in Writing: Request cancellation of Withholding in Writing Date:

Figure 21 - Form W-4



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

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

Modifying a Tax Form Record



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

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



ProviderOne displays the appropriate Tax Form page.



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

Deleting a Tax Form Record

Do not delete the W-9 Form record.



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

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

What happens next:



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



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

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

This page is intentionally blank.

Add Billing Provider Details

Accessing the Payment Details List

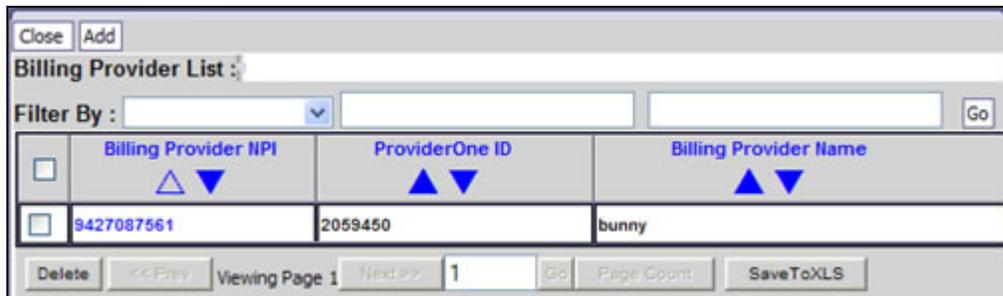


From the Business Process Wizard, click the Add Billing Provider Details link.

Step #: Add Billing Provider Details



ProviderOne displays Billing Provider List.



The screenshot shows a web application window titled "Billing Provider List". It features a "Close" button and an "Add" button. Below the title bar is a search bar with the text "Billing Provider List :". Underneath is a "Filter By:" section with a dropdown menu, two input fields, and a "Go" button. The main area contains a table with three columns: "Billing Provider NPI", "ProviderOne ID", and "Billing Provider Name". Each column header has a checkbox and up/down arrow icons. The table has one row with the following data: NPI: 9427087561, ID: 2059450, Name: bunny. At the bottom of the window, there are buttons for "Delete", "<< Prev", "Viewing Page 1", "Next >>", a page number input field containing "1", a "Go" button, "Page Count", and "Save To XLS".

<input type="checkbox"/>	Billing Provider NPI	ProviderOne ID	Billing Provider Name
<input type="checkbox"/>	9427087561	2059450	bunny

Figure 22 - Billing Provider List

About the Billing Provider List

- The first time this list displays it will be blank.
- Each row represents a ProviderOne Billing Provider.

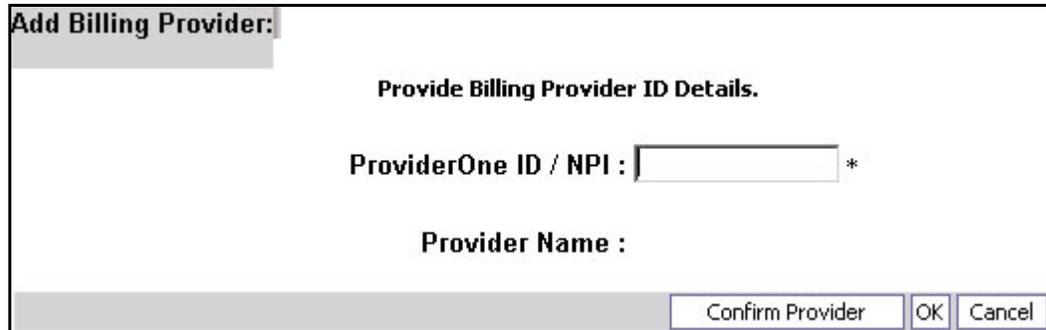
This page is intentionally blank.

Adding a Billing Provider



To add a new record, click the Add button.

ProviderOne displays the Add Billing Provider form.



Add Billing Provider:

Provide Billing Provider ID Details.

ProviderOne ID / NPI : *

Provider Name :

Confirm Provider OK Cancel

Figure 23 - Add Billing Provider

About the Payment Details Form

- You must know the ProviderOne Id, or NPI of the Billing Provider.



Enter the ProviderOne Id, or NPI number of the Billing Provider and click the Confirm Provider button.



If ProviderOne confirms the Billing Provider and displays the Provider Name. If a valid Provider is not found, ProviderOne displays an error message.



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



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

Modifying a Billing Provider Record

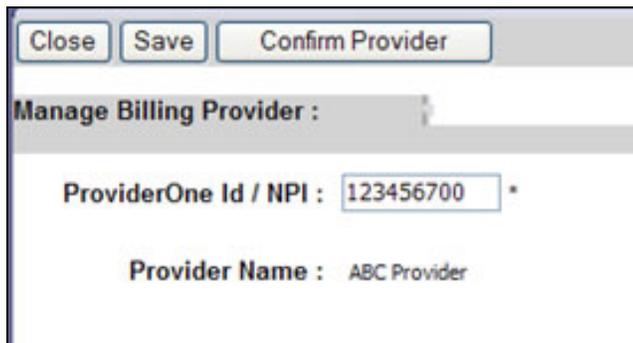


From the Billing Provider List, click the link in the Billing Provider NPI column.

<input type="checkbox"/>	Billing Provider NPI
<input type="checkbox"/>	9427087561



ProviderOne displays the Manage Billing Provider form.



The screenshot shows a window titled "Manage Billing Provider" with three buttons at the top: "Close", "Save", and "Confirm Provider". Below the title bar, the text "Manage Billing Provider :" is displayed. There are two input fields: "ProviderOne Id / NPI : 123456700" and "Provider Name : ABC Provider".

Figure 24 - Manage Billing Provider

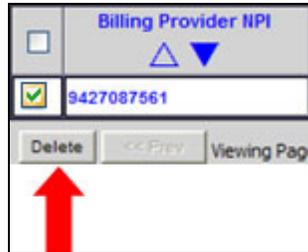


After making your changes, click the OK button to save, or the Cancel button to close the window without saving.

Deleting a Billing Provider



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



What happens next:



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



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

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



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Add Payment Details

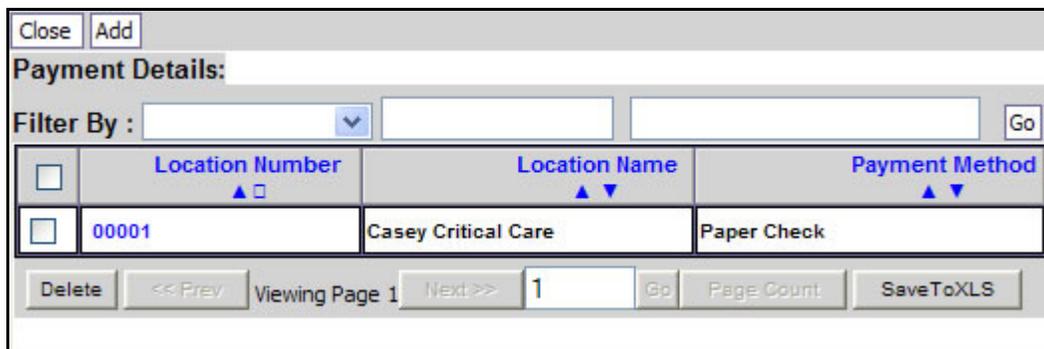
Accessing the Payment Details List



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



ProviderOne displays the Payment Details list.



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

Figure 25 - Payment Details List

About the Payment Details List

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

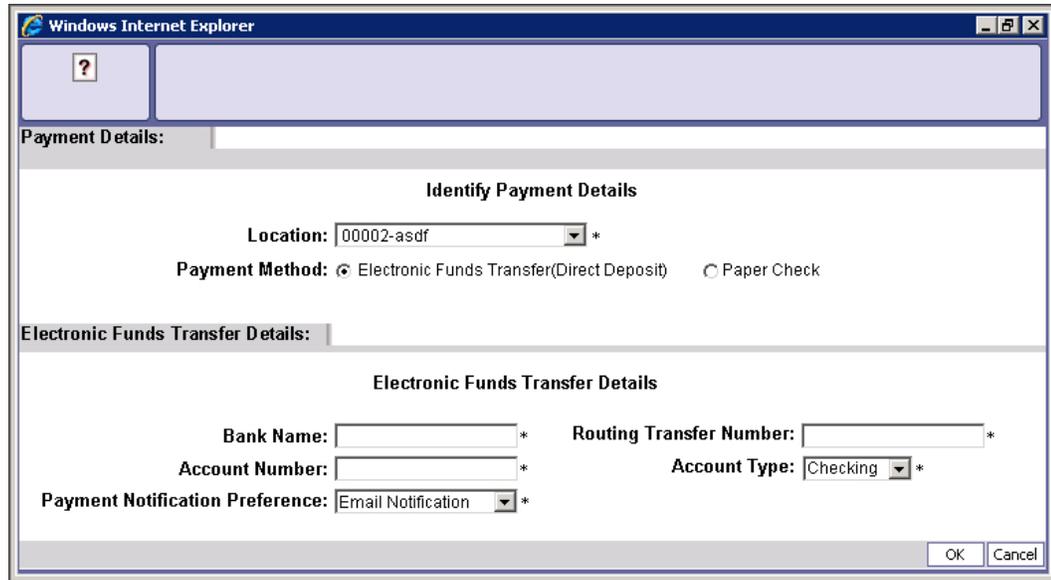
This page is intentionally blank.

Adding a Payment Method



To add a new record, click the Add button.

ProviderOne displays the Payment Details form.



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

Identify Payment Details:

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

Electronic Funds Transfer Details:

- Bank Name: *
- Routing Transfer Number: *
- Account Number: *
- Account Type: Checking *
- Payment Notification Preference: Email Notification *

Buttons for "OK" and "Cancel" are visible at the bottom right of the form.

Figure 26 - Payment Details

About the Payment Details Form

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



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



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

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Modifying a Payment Detail Record



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

	Location Number
	00001



ProviderOne displays the Payment Details form.

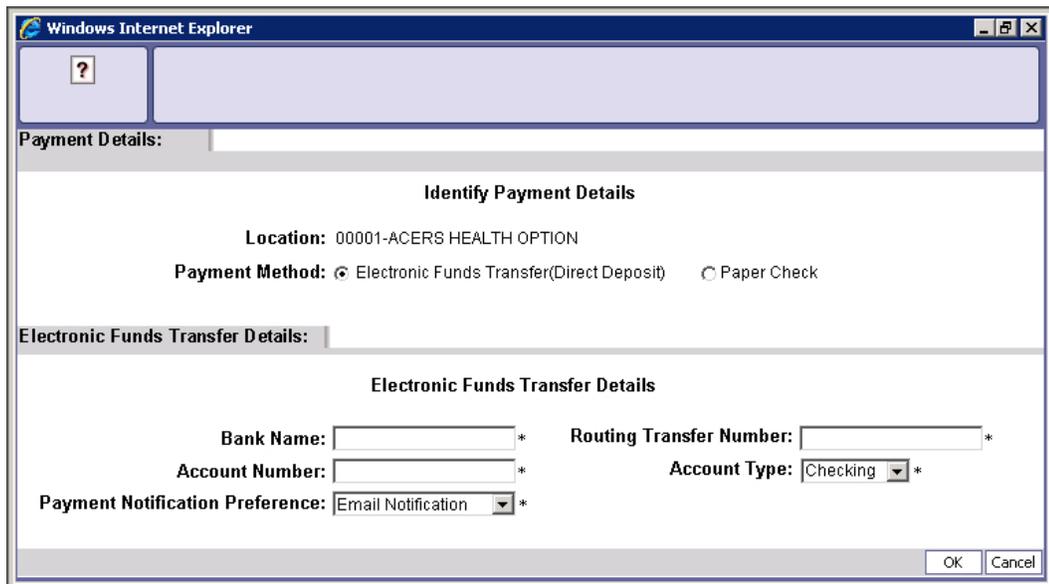


Figure 27 - Payment Details Form

About the Provider Owner Details Form

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



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

Deleting a Payment Method Record



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

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

Viewing Page 1

1



What happens next:



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



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

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



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Complete Enrollment Checklist

Accessing the Enrollment Checklist



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

Step #: Complete Enrollment Checklist



ProviderOne displays the Provider Checklist.

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

Figure 28 - Provider Checklist

About the Provider Checklist

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



After completing the Provider Checklist, click the Save button.

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

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

Submit Enrollment Application for Review

Accessing the Final Submission Page



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

Step # : Submit Enrollment Application for Review



ProviderOne displays the Final Submission page.

Close
Submit Enrollment

Final Submission

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

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

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

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

Instructions for submitting documentation:

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

Application Document Checklist:

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

Figure 29 - Final Submission

This page is intentionally blank.

Obtaining Documentation Source Documents



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

Tax Documents	Please provide a copy of all required Tax Documents.	http://www.irs.gov 	YES
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Printing the Documentation Cover Sheet



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

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




ProviderOne displays a PDF version of the cover sheet.



The screenshot shows a web form titled "ProviderOne" with the subtitle "Provider Enrollment Document Submission Cover Sheet". It features a text input field for "Application #", a barcode, and two buttons: "Print Cover Sheet" and "Clear Fields".

Figure 30 - Enrollment Document Cover Sheet



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

Re-printing the Documentation Cover Sheet



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

Step # : Submit Enrollment Application for Review



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

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



Submitting the Enrollment Application



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

ProviderOne displays the following Internet Explorer message.



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

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

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

Table of Figures

Figure 1 - Enrollment Type.....	9
Figure 2 - Basic Information Page	11
Figure 3 - Basic Information – Application ID.....	12
Figure 4 - Enrollment Business Process Wizard.....	12
Figure 5 - Specialty/Subspecialty List for Enrollment	15
Figure 6 - Add Specialty/Subspecialty	17
Figure 7 - Manage Specialty/Subspecialty	18
Figure 8 - Required Credentials For Specialization.....	21
Figure 9 - License/Certification List for Enrollment	23
Figure 10 - Add License/Certification	25
Figure 11 - Manage License/Certification	26
Figure 12 - Training/Education List for Enrollment.....	29
Figure 13 - Add Training/Education.....	31
Figure 14 - Manage Training/Education.....	32
Figure 15 - Provider Identifiers List	35
Figure 16 - Add New Identifier	37
Figure 17 - Manage Identifier	38
Figure 18 - Federal Tax Details Page	41
Figure 19 - Form W-9	43
Figure 20 - Form W-5	44
Figure 21 - Form W-4.....	45
Figure 22 - Billing Provider List.....	49
Figure 23 - Add Billing Provider	51
Figure 24 - Manage Billing Provider	52
Figure 25 - Payment Details List	55
Figure 26 - Payment Details	57
Figure 27 - Payment Details Form.....	59
Figure 28 - Provider Checklist.....	63
Figure 29 - Final Submission.....	65
Figure 30 - Enrollment Document Cover Sheet	67