



Dear Health-Care Provider and Staff:

We're sorry that we are unable to process the enclosed bill(s). See the reason checked below. After you have fixed the problem, please submit the bill to us again.

	Why we can't process your bill	How to fix the problem
<input type="checkbox"/>	Your required L&I Provider Number or NPI# (National Provider Identifier) is missing, inactive or invalid. <i>Do you bill with an NPI# only? It must be registered with L&I.</i>	Complete and return the enclosed Provider Application so we can send you an L&I Provider Number. Then you may resubmit your bill to us. Or, you may call Provider Accounts for information: 360-902-5140
<input type="checkbox"/>	The L&I Provider Number or NPI number on your bill doesn't match the information in our records.	Call Provider Accounts: 360-902-5140
<input type="checkbox"/>	There is missing information on your billing form.	Complete the highlighted fields on your bill and re-submit it to us.
<input type="checkbox"/>	There are multiple L&I Provider Numbers or NPI numbers in Box 24J of the attached CMS 1500 form.	Send a separate bill for each health-care provider's services.
<input type="checkbox"/>	We cannot read the writing on the form.	Send us a typed or neatly printed billing form.
<input type="checkbox"/>	The injured worker's name does not match the claim number you gave us.	Check your records.
<input type="checkbox"/>	You used the wrong billing form.	Call L&I's Provider Hotline: 1-800-848-0811 Or visit: www.Lni.wa.gov/FormPub/results.asp?Keyword=billing for guidelines and form downloads.
<input type="checkbox"/>	Other	

Consider billing L&I electronically!

We process approximately 90% of e-bills within 20 days. Here are your sign-up options:

- Online: www.ProviderElectronicBilling.Lni.wa.gov
- Call: L&I's Electronic Billing Unit at 360-902-6511
- E-mail: ebulni@Lni.wa.gov

Learn how to avoid billing errors in the future:

- For billing forms and guidelines, visit:
www.Lni.wa.gov/FormPub/results.asp?Keyword=billing
- Ask for our billing instructions booklet. E-mail: ProviderFeedback@Lni.wa.gov

Have you changed your address, business name, or federal tax information?

Call Provider Accounts: 360-902-5140

Thank you for treating Washington's injured workers.

See reverse for CMS 1500 form instructions 

L&I requires providers to complete only *eight* fields on the CMS 1500 form.

- 1** Patient's full name (Field 2)
- 2** L&I claim number (Field 1-A *or* 11)
- 3** Diagnosis code (Field 21)
- 4** Date(s) service was provided (Field 24-A)
- 5** Procedure code (Field 24-D)
- 6** Your individual L&I Provider Number and your L&I-registered NPI# (National Provider Identifier)* (Field 24-J)
- 7** Signature (*required, unless submitted electronically*) (Field 31)
- 8** Your individual business name and address. It must match your individual (not group) L&I Provider Number, which you entered in Step 6 (Field 24J). (Field 33)

* Important: Only one provider per form