Modifying your Group or Facility/Agency/Organization/ Institution (FAOI) ProviderOne account

ProviderOne User Guide

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Modify your group or FAOI provider account

A group provider is an organization of individual providers who offer services. An FAOI provider is a facility, agency, organization, or institution that doesn't have servicing providers.

For more information, see the corresponding enrollment guides:

- **Group**
- **FAOI**

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

- Starting your modification

Tip! Start with the step you want to update. Depending on your change, additional steps may be required before submitting your modification.

- Submitting the modification to ProviderOne

PROVIDER ENROLLMENT LINKS

Start a new provider enrollment application by going to:

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

Resume or track an enrollment application by going to:

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

You'll need your application ID and the Social Security Number or Federal Employer Identification Number associated with the account to log in.

Step 1: Modify basic information

ADDING AND CHANGING BASIC INFORMATION

In this step you can add additional agencies (if you want to add L&I go to **Add L&I to Existing Account Guide**), and you can change:

- Provider Name
- Organization Name
- Email
- W-9 entity type
- Other organizational information

Note: Disabled fields are grayed out.
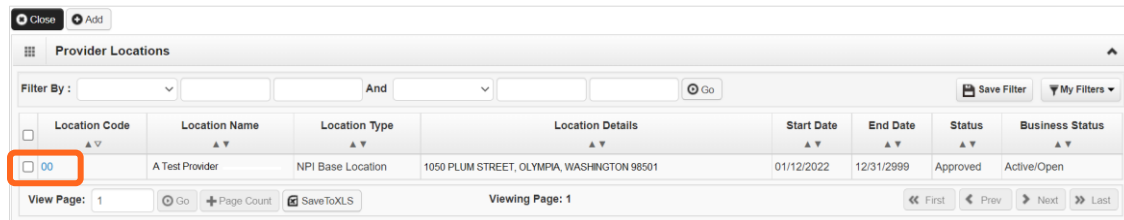
- After you make your changes, click **OK**.

Step 2: Modify locations

MODIFY LOCATIONS

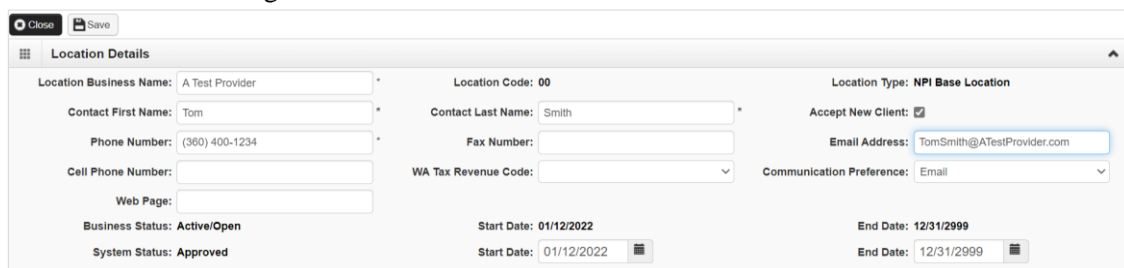- Click the link of the Location you want to modify.

- This step has multiple sections:
  - Location Details contains the contact information and start/end date for this location.
  - L&I Specific Information provides the data for the L&I Find a Doctor directory.
  - Address List: Each location contains a list with three address types:
    - **Location** (physical address of primary location)

Important! Include the phone number you want patients to call for each location.
    - **Mailing** (the place where you receive mail),
    - **Pay-To** (the place where a paper check and remittance advice is sent).
- FAOI accounts also contain:
  - **Facility Details** – No. of Licensed Beds and Accreditation.
  - **Pharmacy Details** – Pharmacy Type, Pharmacy Volume, Unit Dose Pharmacy.

MODIFY LOCATION DETAILS

- Enter the new or changed information.

- Only change the end date if this location is closing.
- Click **Save**.

L&I SPECIFIC INFORMATION

This section allows you to choose if this group or FAOI location appears in the **Find a Doctor** directory on **www.Lni.wa.gov**.

- Select **Yes** to have this location appear in the L&I Find a Doctor directory. The remaining fields in this section are required.

- Selecting **No** disables the remaining fields in this section.

- Click **Save** when finished.

ADDRESS LIST

- Click the link of the **Address Type** you want to modify.

- Make your changes
- Click **Validate Address** to verify.
- Click **OK** and **Save**.

Note: If you **Close**, changes will not be saved.

ADD ADDRESS INFORMATION
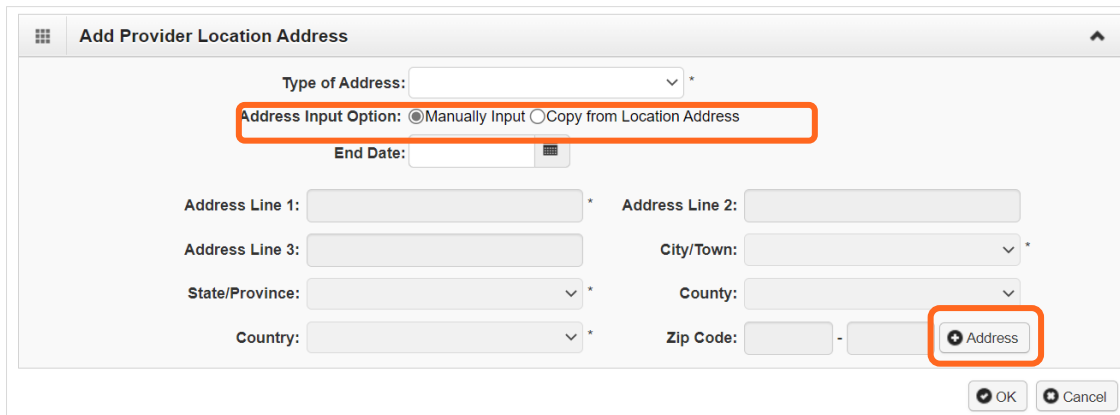
To add a Mailing or Pay-To Address:

- Click **Add Address**.

- Choose **Type of Address** from the drop-down, either Location, Mailing, Pay-To.
- Select the type of input option:
  - Choose **Manually Input**. Click **Address** and add location address.
  - Or, choose **Copy from Location Address** to copy a previously entered location.
  - Click **OK** to save or **Cancel** to close without saving.
  - Click **Close** on the three open windows to return to the BPW.

NEXT

- Make additional changes or go to Step 16: Submit Modification for Review.

Step 3: Modify specializations

This information is important for your L&I billing. You can modify the end date or add your new taxonomy, specialty, and subspecialty.

Note: There may be specific requirements for licensure or training for each specialty/taxonomy listed.

MODIFYING SPECIALIZATIONS

Note: Modifying an end date can cause issues with payment. We don't recommend changing the date from 12/31/2999 unless the specialty will no longer be used.

ADDING SPECIALIZATIONS

- Click **Add**.

Note: If you'd like to bill for multiple specialties, you'll need to repeat this step to add each specialty.

- Select the appropriate location, or **All**, from the **Location** drop-down menu.
  - o At least one specialty must be selected and added to **each** provider location.
- Choose **L&I** from the **Administration** drop-down menu.

- Choose the **Provider Type** and **Specialty**. Don't enter an **End Date**. ProviderOne will auto-populate to 12/31/2999.

- The Provider Type selection will populate the options for Specialty, which displays the available taxonomy codes.
  - Use the double arrows to move taxonomy code from the **Available Taxonomy Codes** box to the **Associated Taxonomy Codes** box.
  - Select all applicable taxonomies for each license you have to allow for accurate billing.

- Click **OK** to save or **Cancel** to close without saving.

DELETING SPECIALIZATIONS

Specialties and sub-specialties can only be deleted during the enrollment process. You can end-date your specialty/subspecialty through the modification step above.

NEXT

Complete additional changes or go to Step 19: Submit modification for review.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 4: Specializations**.

Note: The screen will show only "Approved" entries.

- In the drop-down next to **Filter By**, select **Status**.
- In the next field, enter **IN%**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.

- Click **Go**.

Step 4: Modify ownership details

MODIFY OWNERSHIP INFORMATION

You can modify your "Doing Business As" name, address, and other ownership infromation.

- Click the blue link in the **Owner/ME/BOD ID** column.

- Enter the new or changed information.
  - o Click **Address** to enter new address information.

- Click **Save** or **Close** to close without saving.

ADD INDIVIDUAL OWNER

- Click **Add.**
- Select **Disclosure Category** Owner or Managing Employee.
- Select **Disclosure Type** Individual.
- Enter the individual's SSN.
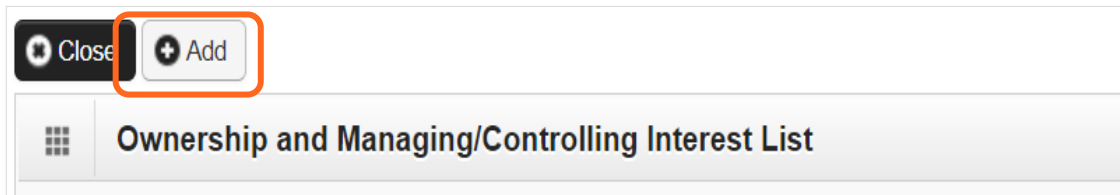
- Finish the remaining required fields.
  - o Enter the first day of ownership as the **Disclosure Start Date**. Don't enter the **Disclosure End Date**, the end date will auto-populate to 12/31/2999.
  - o Enter an **Ownership Percentage**. If you have more than one owner, the total percentage of all owners must equal 100. The organization owner percentage isn't included in this total.

- Click **OK** to save or **Cancel** to close without saving.

ADD ORGANIZATION OWNER

- Click **Add**.
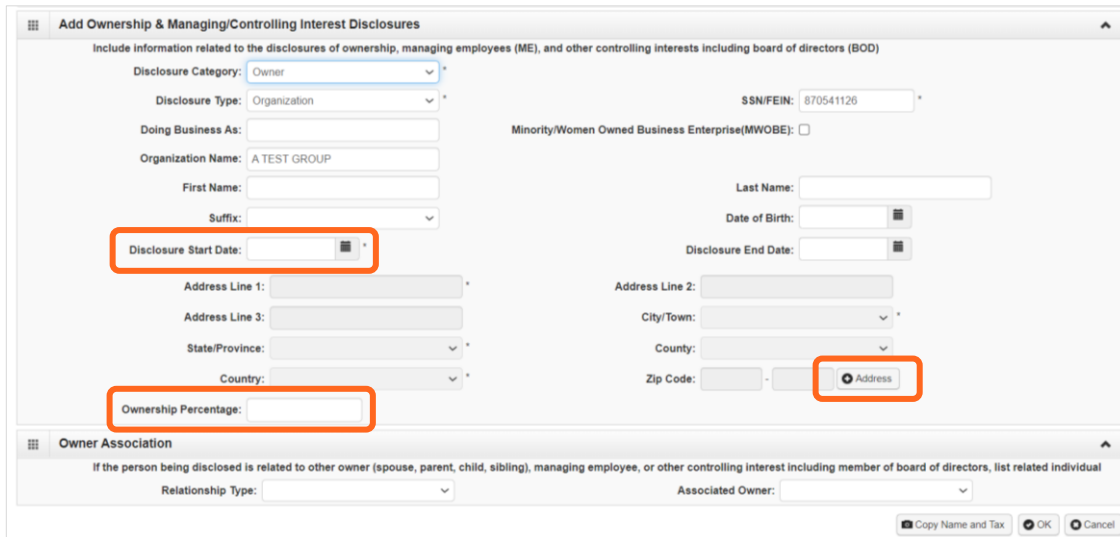
- To auto-populate data, click **Copy Name and Tax** at the bottom of the screen.

- Complete the remaining required fields:
- Enter the first day of ownership as the **Disclosure Start Date**. Don't enter the **Disclosure End Date**, the end date will auto-populate to 12/31/2999.
- Click +**Address** to add the owner's address.
- Enter an **Ownership Percentage**, e.g. 100.

- Click **OK** to save or **Cancel** to close without saving.

DELETE OWNERSHIP INFORMATION

Ownership and Managing/Controlling Interest can only be deleted during enrollment. You can end date your owner record if you use the *modify* step above.

NEXT

Complete additional changes or go to Step 19: Submit modification for review.

Step 5: Modify licenses and certifications

Before clicking into Step 5, review **Required Credentials**.

Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

- Click **Required Credentials** from the BPW.
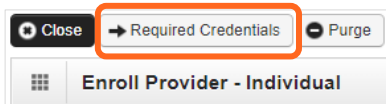
- To view the License Requirements, use the **Filter By** drop-down to select **01-License** and click **Go**.
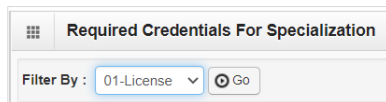
- License(s) will be displayed, if required.
- When finished, click **Cancel** to close.

MODIFY LICENSES/CERTIFICATIONS

- Click the blue hyperlink in the **License/Certification #** column.
- Enter new or changed information.

ADD LICENSES/CERTIFICATIONS

- Licenses/Certifications may be required for each location with an added specialization. If you have a **DEA number**, you can enter it in this step.
- Click **Add**.
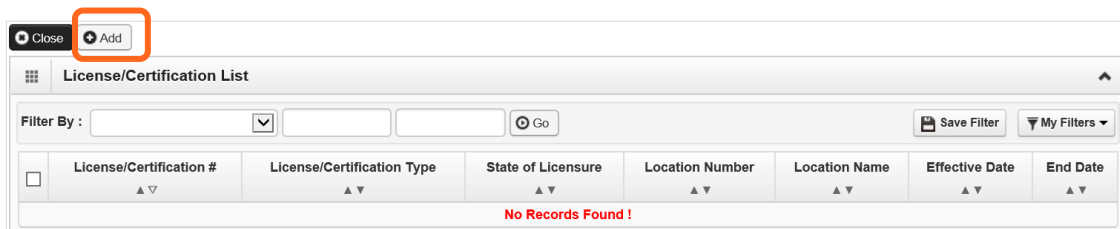
- Use the **Location** drop-down to add a license or certification to a specific provider location.
- Select "All" only if the license pertains to every location.

- Complete required fields and click **OK** to save or **Cancel** to close without saving.

DELETE LICENSES/CERTIFICATIONS

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

NEXT

Complete additional changes or go to Step 19: Submit modification for review.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 5: Licenses and Certifications.**

Note: The screen will show only "Approved" entries.

- In the drop-down next to **Filter By**, select **Status**.
- In the next field, enter **IN%**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.

- Click **Go**.

Step 6: Modify training and education

Before clicking into Step 6, review **Required Credentials**.

Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

- Click **Required Credentials** from the BPW.
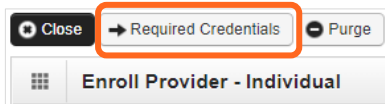
- To view the Training requirements, use the **Filter By** drop-down menu to select **03-Training** and click **Go**.
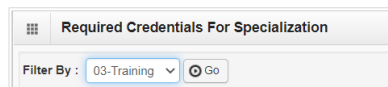
- Training(s) will be displayed, if required.
- When finished, click **Cancel** to close.

MODIFY TRAINING/EDUCATION TYPE

- Click the blue hyperlink in the **Training/Education #** column.
- Enter new or changed information.
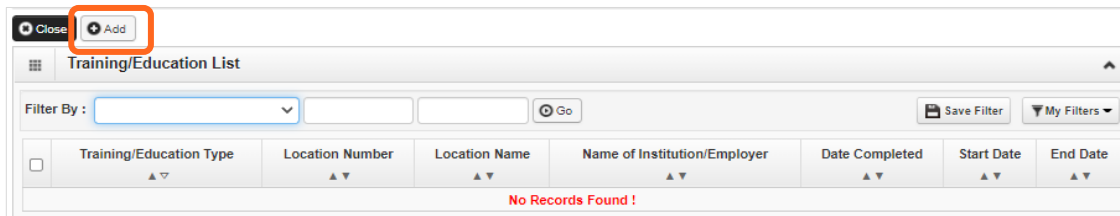
Note: Enter 12/31/2999 in the **End Date** field.

	Training/Education Type ▲▽	Name of Institution/Employer ▲▼	Date Completed ▲▼	Start Date ▲▼	End Date ▲▼	Status ▲▼	Operational Status ▲▼	Inactivation Date ▲▼	Location Code ▲▼	Location Name ▲▼
☐	Medical school	University	12/31/2021	10/01/2017	12/31/2999	Approved	Active		00	

- Click **Save** to save changes or **Close** to close without saving.

ADD TRAINING/EDUCATION TYPE

- Click **Add**.

- Use the **Location** drop-down menu to select **All**, or the applicable location.
- Select the required **Training/Education Type** from the drop-down menu. If you're not sure which applies to you, return to the main BPW page and check **Required Credentials**.

- Finish required fields.
- The **Start Date** is when the training/education started.
- The **Date Completed** is when it was done, e.g. graduation date.

Important! In the **End Date** field, enter 12/31/2999. You must complete this field to continue enrollment.

- You don't need to finish the **Unit Type** or **Unit Value** field.
- Click **OK** and **Close**.

DELETE TRAINING/EDUCATION INFORMATION

Training and education can only be deleted during enrollment.

NEXT

Complete additional changes or go to Step 19: Submit modification for review.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 6: Training and Education.**

Note: The screen will show only "Approved" entries.

- In the drop-down next to **Filter By**, select **Status**.

- In the next field, enter **IN%**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.

- Click **Go**.

Step 7: Modify identifiers

This step doesn't apply to all L&I providers. Follow the instructions below if the BPW step is **Required**. Before clicking into Step 7, review **Required Credentials**.

Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

- Click **Required Credentials** from the BPW.
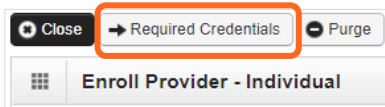
- To view the Identifier requirements, use the **Filter By** drop-down menu to select **02-Identifier** and click **Go**.
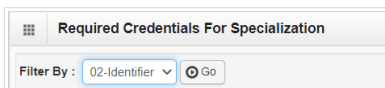
- Identifier(s) will be displayed, if required.
- When finished, click **Cancel** to close.

MODIFY IDENTIFIER

- Click the blue hyperlink in the **Identifier #** column.
- Enter new or changed information.
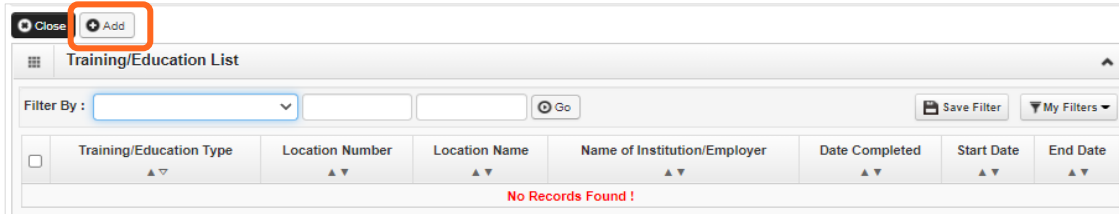
Note: For the End Date field, the date must be in the future (e.g. malpractice policy expiration date). If the identifier is required for an active specialization and you change the End Date to a past date, you can't finish this step.

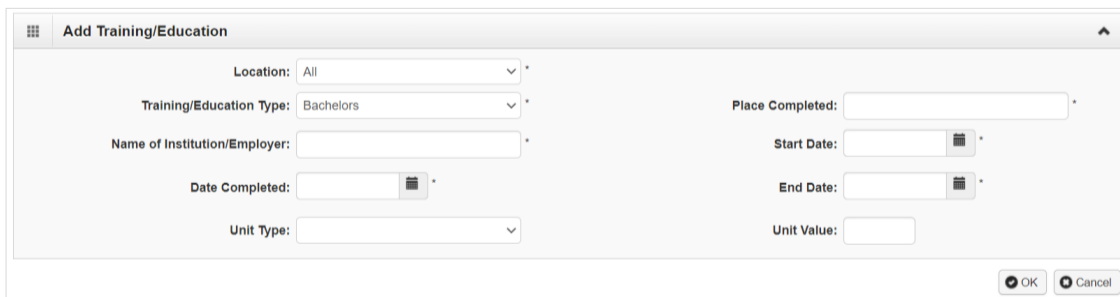|	Identifier Type ▲▽	Identifier Value ▲▼	Start Date ▲▼	End Date ▲▼	Status ▲▼	Operational Status ▲▼
☐	Malpractice Insurance	MAL0012345	01/13/2020	01/13/2022	APPROVED	Active

- Click **Save** to save changes or **Close** to close without saving.
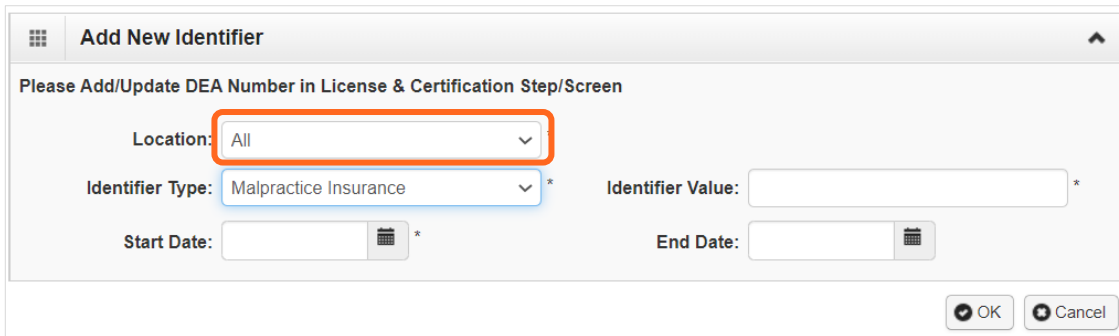
ADD AN IDENTIFIER

- Click **Add**.

- Use the **Location** drop-down menu to select **All**, or the applicable location.
- Use the **Identifier Type** drop-down to select the required identifier.
- In the **Identifier Value** field, enter your information.
- Enter the **Start Date** and **End Date**, and click **OK** to close.

DELETE IDENTIFIER INFORMATION

Identifiers can only be deleted during enrollment. You can change your end date if you use the *modify* step above.

NEXT

Complete additional changes or go to Step 19: Submit modification for review.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 7: Identifiers.**

Note: The screen will show only "Approved" entries.

- In the next field, enter **IN%**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.

- Click **Go**.

Step 8: Modify contract details

This step doesn't apply to L&I. L&I and Health Care Authority providers shouldn't enter contract information in this section.

Step 9: Modify federal tax details

MODIFY FEDERAL TAX DETAILS

From the **Federal Tax Details** list:

- Click the link of the form you wish to modify.

Note: To make changes to your Legal Name or W-9 Entity Type, go to Step 1: Basic Information.

- Enter new or changed information.
- Click **OK** to save or **Cancel** to close without saving.
- Complete additional changes or go to Step 19: Submit modification for review.

DELETE FEDERAL TAX DETAILS

Adding federal tax details is required for all providers. ProviderOne doesn't allow you to delete this form. You can click the W-9 link to modify the information in this step.

Steps 10-13: Not applicable to L&I providers

This information is applicable if you're applying for the Health Care Authority. Instructions can be found at the Enroll as a Provider website:

https://www.hca.wa.gov/billers-providers-partners/become-apple-health-provider/enroll-provider

Step 14: Modify servicing provider information

This step doesn't apply to L&I FAOI providers. In ProviderOne, a servicing provider renders billable services for your organization.

MODIFY SERVICING PROVIDER INFORMATION

- Click on the blue hyperlink in the **ProviderOne ID** column.

	ProviderOne ID ▲▼	Billing Provider NPI ▲▽	Billing Provider Name ▲▼	Agency ▲▼	Billing Location Code ▲▼	Billing Location Name ▲▼	Start Date ▲▼	End Date ▲▼	Status ▲▼
☐	1234567	1111111111	Test, Bill	L&I	00	Test, Bill	07/25/2022	12/31/2999	Approved

- Enter new or changed information.
- Click **Save** to save changes or **Close** to close without saving.

ADD SERVICING PROVIDER INFORMATION

- Click **Add**.

	Servicing Provider SSN/FEIN ▲▼	Servicing Provider NPI △▼	ProviderOne ID / Application # ▲▼	ProviderOne/Application Name ▲▼	Agency ▲▼	Billing Location Code ▲▼	Billing Location Name ▲▼	Start Date ▲▼	End Date ▲▼
☐									

No Records Found !

- Enter the **SSN/FEIN** of the servicing provider and one of the following: **NPI**, **Application #** or **ProviderOne ID**.

- Enter the **Start Date**. The End Date will auto-populate to 12/31/2999.

Add Servicing Provider Association

SSN/FEIN:	[ ] *	NPI: [ ]
Application Id:	[ ]	ProviderOne Id: [ ]
Start Date:	[ ] 📅 *	End Date: [ ] 📅

✔ Confirm Provider

- Click **Confirm Provider**.
  - o If the provider is not found, go to **Provider does not exist in the database.**
  - o If the provider is found, L&I will display in the Available Agencies box.

Agency

Available Agencies

L&I

Selected Agencies

» «

- Click **L&I** and use the double right arrows to move it to the **Selected Agencies** box.

- In **Available Taxonomies**, click all applicable taxonomies and use the double right arrow to move it to the **Selected Taxonomies** box.

Servicing Provider Taxonomy

Available Taxonomies

L&I-171100000X-Acupuncturist

Selected Taxonomies

» «

- Click the **Available Locations** and use the double right arrows to move it to the **Selected Locations** box. More than one may be selected.
- Click **OK** to save or **Cancel** to close without saving.

- Ignore the **Social Service Servicing Only Provider List**. L&I doesn't use this.

PROVIDER DOESN'T EXIST IN THE DATABASE

If the provider doesn't exist in the database after searching with the SSN/FEIN and NPI, you'll be prompted to add the servicing provider. See the **Enrollment guide for individual servicing providers** for more information.

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

Note: If a new enrollment process is started, copy the application ID that's generated for the servicing provider. You'll need that ID to:
- Continue the servicing provider application (if you exit before submitting).
- Check application status.
- Update or add additional information, if requested.

Note: If you have more than one servicing provider in your group, you may add the remaining servicing providers after your group application is approved. A roster upload process is available, as well.

DELETE A SERVICING PROVIDER

- Check the box next to the record you want to delete and click Delete.
  - This will delete the association between the servicing provider and your group, but doesn't delete the record from ProviderOne.

- Click **Close**.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 14: Servicing Provider Information.**

Note: The screen will show only "Approved" entries.

- In the next field, enter **IN%**. Any entries with an "In Review" status will be displayed.

Note: Enter **%** to see all entries.

- Click **Go**.

Step 15: Modify payment and remittance details

Payment information applies to all locations.

MODIFYING PAYMENT AND REMITTANCE DETAILS

- Click the location you want to modify in the Location Number column.

	Location Code ▲▽	Location Name ▲▼	Payment Method ▲▼	Start Date ▲▼	End Date ▲▼	Status ▲▼
☐	00	Test, Bill	Paper Check	07/25/2022	12/31/2999	APPROVED

- Enter new or changed information.
- Click **Save** to save changes or **Close** to close without saving.

ADDING PAYMENT AND REMITTANCE DETAILS

- Click **Add**.

ELECTRONIC FUNDS TRANSFER (DIRECT DEPOSIT)

- Click **Electronic Funds Transfer (Direct Deposit).**

- Enter the required information for **Electronic Funds Transfer (direct deposit)**, the fastest payment method. No other forms are required.

- The **Payment Notification Preference** default is **Email Notification**. This requires an email entry in Step 2: Locations.
  - o If the error message below appears, you didn't provide an email in Step 2.

    Note: If you don't want to provide an email, change the **Payment Notification Preference** to **Letter Notification**.
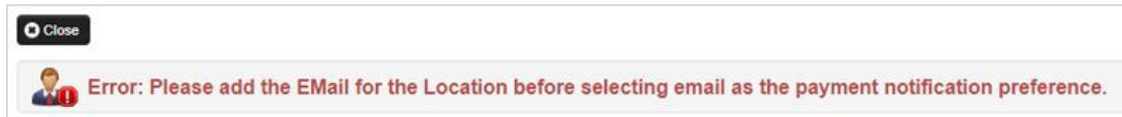
  - o Click **Close** to close the error message.
  - o Click **Cancel** to go back to the BPW and **complete Step 2** to continue with EFT enrollment. The bank will verify your data in approximately 7-10 days.

PAPER CHECK

- If changing from EFT to paper check, the EFT detail area will collapse and any existing EFT information will be removed.
- Click **Paper Check**. The check (warrant) will be mailed to the **Pay-to** address.

ELECTRONIC REMITTANCE ADVICE

Skip this section. Don't edit this for your L&I application. You'll continue to receive your remittance advice as you do today. If you're also applying with Health Care Authority, go to the **Enroll as a Provider website** for instructions.

SUBMISSION INFORMATION

- Use the drop-down menu to select **Change Enrollment** and enter the name of the person authorized to provide the payment choice.

- Click **OK** to save or **Cancel** to close without saving.

DELETE PAYMENT AND REMITTANCE DETAILS

You can modify these details, but you can't delete.

NEXT

Complete additional changes or go to Step 19: Submit modification for review.

Step 16: Not applicable to L&I providers

Step 17: Submit modification for review

Note: Before submitting your change(s), remember to upload required attachments.

- Upload a W-9 for **business legal name changes** and **address changes**.
  - When completing the W-9 form, **print** the form and add the **wet signature** (required by Washington State).

Note: Your W-9 form must match the information provided in Step 10: Add Tax Details.

  - Make sure to sign and date every form.
- After uploading your attachments, click **Submit Provider Modification**.
- A pop-up will appear with your modification request number.

- Click **Close** on the Final Submission page.

UPLOAD INFORMATION

- Click **Upload Attachments**.

- Click **Add Attachments**.

- Use the **Attachment Type** drop-down menu to select the appropriate type.
- Click **Choose File**.

- Select your saved document and click Open, or the equivalent for your system.
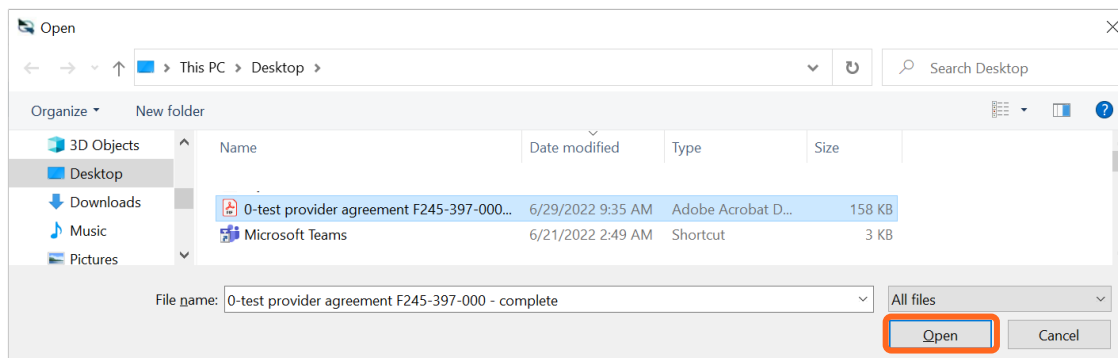
- The name of the file will appear next to the **Choose File** button. Click **OK**.
- The document is now uploaded and will display in the **Attachment List**. If the wrong document is selected, click the blue X in the delete column.
- After uploading required attachments, click **Cancel**. A pop-up will appear (see below). Click **OK** to return.