



Adding L&I to an existing provider Domain

ProviderOne User Guide

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Adding L&I to an existing provider domain

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

Modifying the domain. Finishing application steps.

Submitting the application to ProviderOne.

SELECTING THE RIGHT ENROLLMENT TYPE

This guide includes different instructions based on your enrollment type. Use the table below to identify which enrollment type applies to you. Click on the corresponding link for instructions.

An individual billing provider works for themselves and submits their own bills.	An individual servicing provider works for someone else who bills on their behalf.
A group provider is an organization of individual providers who offer services.	An FAOI provider is a facility, agency, organization, institution of other service vendors.

Individual billing provider

An individual billing provider works for themselves and submits their own bills. To add L&I to your agency list, follow instructions below to finish required steps.

The Step Remark column will display instructions for required steps.

View/Update Provider Data - Individual							
Business Process Waard - Provider Data Modification (Individual)	to order to finalize	submission of your requirem	d charges, you must a	replate the Fi	Will Ring - Balant Mode	Loton Persent	ta Nevilee
C Bep	Reported	Last Modification Date	Last Review Date	Stetus	Wodffication Status	Decision By	Step Remark
C They I Date Monadam	Regiment	10/12/2020	101-12-01020	Complete			
C) they 2 Locatives	Repaired	03/02/2007	00102020	Circlete			
C Ship 3 Provide Address Information	Optenal	drx m 2022	91112022	Homesta			
C Mag & Specializations.	Heart	63122800	01/22029	Company			
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() they 2 Theory and Education	Optimil	03122000	03122520	Conside			
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C, Ske 10 Februar Tax Details	Report	10/12/2020	03/12/2020	Complete			
T She 11 224 Education Method	Optional	10122000	0312208	Complete			
C Item 12 EDI Using Suthern Details	Optavial	03/12/2005	05/12/2620	Complete			
C 194g 12 E28 Subvertier Details	Optenut	03-12-20020	105/10/2020	Complete			
C They 14 EDI-Carded Information	Opternal	10122100	03/12/2080	Omplete			
C Step 15 Milling Provider Details	Optowel	1512205	10.012120080	Complete			
Imp III Service Provide Internation	NEFEquend	101020000	65/12/2020	Corplate			
C Blac 17 Pagesett and Handbaros Databa	Report	03/12/2020	10311212020	Conskele			
C Bag 10 vice Over Ithroation	Repeat	03122000	03-12-2020	Completie			
The New York States and Additional States and Street and	Required	83122800	01/12/2020	Complete			

Individual billing provider – Step 1: Basic information

Click L&I in the Available Agencies box, then click the double right arrows.

-88	Basic information					•
			If you don't have		are Alyphon provider they please contact CSHS worker to enroll.	
		Available Agencies		Released Age	encies	
		DOC	(e)	HCA	A	
		1951				
	Agency	1.00			- 67	
			-	N		
					*	

Verify or add an email address.

4-9 Entity Type (If Other):	
Email Address:]

Note: We'll use this email address if we have questions about your application.

Click OK to save or Cancel to close without saving.

Individual billing provider – Step 3: Provider additional information

Enter Start Date.

Verify address or Add Address to update.

O Chem Balance						
El Correspondence Address						
	Chick the "Add Add	laas" batter te Adli a oow A	divers a splatered by so as	eing Address		
	Start Date 04/21/2021				ikatun: in Raviaw	
Adde	e Live 1: 199 Second Ave NW		Address Line 2			
Addre	a 10 e 3		CilpTown	Olympia	* 1	
State	Tradition -	- *	County	Thereis		
	Cawery: UNITED STATES	2.1	Zip Caste:	19501	O Add Address	

Click Save and Close.

Step 4: Specializations

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

ADDING SPECIALIZATIONS

Click Add.

		T	ou must choose an admin	for each agency(s) selec	ted in Step 1,		
Specialty/Subspecialty List							
itter By	E	V		(Q Go		B Saye Filter	W Ny Filters
	Provider Type		Specialty/Subspecialty	Location Number	Location Name	Administration	End Date

Note: Only select the provider's Primary specialty/taxonomy.

Select the appropriate location, or All, from the Location drop-down menu.

Choose L&I from the Administration drop-down menu.

=	Add Specialty/Subspecialty		
	Location:	All ~	*
	Administration:	L&I-Labor And Industries Administri 🗸	-

Choose the **Provider Type** and **Specialty**.

Add Specialty/Subsp	ecialty		^
Location:	All		
Administration:	L&I-Labor And Industries Adminis	5. ¥ *	
Provider Type	19-Group	× *	
Specialty	32 Multi-Specialty 👻 *		
End Date:			

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 primary taxonomy to allow for accurate billing.

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

225X00000W-Occupational Therapist 225XH1200X-Hand 225XH1200X-Human Fiscurs 225XH1300X-Human Fiscurs 225XR0403X-Driving and Community Mobility		Associated Taxonomy Codes *	Available Taxonomy Codes
225XH1200X-Hand 225XH1300X-Human Fectors 225XR1300X-Hoursehabilitation 225XR1403X-Driving and Community Mobility 44			225X00000X-Do;upational Therapist
			225XH1200X-Hand 225XH1300X-Human Factors 225XN1300X-Neuronehabilitation

VIEW SUBMITTED ITEMS

See your changes:

Click Step 4: Specializations.

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

(iba	Thar By v		And	(M)			And Operational Status: Autor 👻 🙆 🕼			
								B*	en Filter 🖓	Wy Filters •
	Contract Number	Provider Type + *	Specialty/Subspecialty # 17	Administration + *	Start Date	End Date	Operational Status	Statue 	Inactivation Date	End Reason 4 7
p		35 Physician Associations & Advanced Practice Nurskig Providers	3L Norse Practitioner/P0005-Psychiatric/Mercul Health	HRSA	85352247	12/31/2999	Adve	Approved		
0		36-Physician Assistants & Advanced Practice Numero Providers	3L Name Presidence/50000-Name Practitioner	HRSA	06/16/22:07	12/31/2996	Addes	Approval		

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.

Her By L. Conus	. w [10 %	And	¥.	And Operational Balance Act	0-
				B bare fitter	Thy fibers -
0.					

Click Go.

D	License-Certification Type	License Type DOH Prefix	License/Certification #	State of Licensury	Effective Date	End Class	. 7
Ö	BUSINESS LICENSE		12345878	www.ytashington	06/01/2021	99/01/202	NR

Note: Enter % to see all entries.

Step 6: Licenses and certifications

Before clicking into Step 6, review **Required Credentials**. The **Required Credentials** tool helps identify what type of license and certification information you need to provide to continue with enrollment.

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, click Go.

	Rec	uired Creden	tials For Specialization
Filte	By :	01 License 🗸 🗸	@#in

Required license(s) will be displayed, if required (see highlighted below).

II Required Credentials For Specia	alization		
Filter By I Of-Locense - Oca		B Save Filter	WMy Filters •
Specially Subspecially	Provider Type	Administration	License
47	**		1.7
71-Radiologic Technologist/00000-00000-	24-Technologiata, Technicians & Other Technical Service Providers	1.61	actity License

Make a note of your required license as you'll need it to complete Step 6.

When finished, click Cancel to close.

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 for this step.

Click Add.

	Net							
E Lice	nse/Certification Li	и						
ther By :		<u>×</u>		0 100			B Sann Filter	W My Fillers
2 100	enserCertification #		illuation Type	State of Licensure	Location Number	Location Name	Effective Data	End Date

Use the **Location** drop-down to add a license or certification to a specific provider location.

VIEW SUBMITTED ITEMS

See your changes:

Click Step 6: Licenses and Certifications.

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

Ш	License/Certification List								
Filte	er By t		And	*			And Open	ntional Status: Act	va → ⊙ Go ∓My Filtors •
0	License/Certification Type	License Type DOH Prefix	License/Certification g 	State of Licensure	Effective Date	End Date	Status 4.*	Operational Status	Inactivation Data
	PROFESSIONAL LICENSE	RN	RN.	WA - Washington	04/07/2017	01/11/2023	APPROVED	Active	
	PROFESSIONALLICENSE	ARNP	AP.	WA-Washington	04/10/2017	01/11/2024	APPROVED	Active	

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.

Her By L. Conus	*[10]	And	w]	And Operational Blatters: Active	
				B terr free	My fillers +

Click Go.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	
D BUSINESS LICENSE		12345678	WA - Washington	09/01/2021	09/01/202	IN REVIEW

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

Step 7: Training and education

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**. The **Required Credentials** tool helps identify what type of training and education information you need to provide to continue with enrollment.

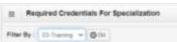
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

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**.



Required training will be displayed, if required (see highlighted below).

III Required Credentials For Specialization					
Filter By : 03-Training 🗸 💿 Go		🗎 Save Filte	r Y My Filters •		
Specialty/Subspecialty	Provider Type	Administration	Training		
*☆	A ¥	**	A Y		

Make a note of your required training as you'll need it to complete Step 7.

When finished, click Cancel to close.

ADD TRAINING/EDUCATION TYPE

Click Add.

Training/Education List						
Ther Dy :	-		Dice		Sara Titler	Tim Filmer
. Towning Education Type	Location Norbber	Location Name	None of DathatarcEmployer	Date Completed	Bart Date	End Date

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.

Training/Education Type:	Medical school	× *	Place Completed:				
Name of Institution/Employer:			Start Date:		m	•	
Date Completed:			End Date:	12/31/2999	86		
Unit Type:		×	Unit Value:				

Click OK and Close.

VIEW SUBMITTED ITEMS

See your changes:

Click Step 7: Training and Education.

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

I Training/Educat	tion List								
ttur By (int	•			And Operational Status	Adle .	0.00
							BSte	eFilter 👾	ly Fillen
TrainingEdoca	tion Type	Name of Institution/Employer	Date Completed	Start Date	End Date	Satus	Operational Status	Inactivat	on Deter
2. 2.7		4.7		4.7	4.7	47			

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.

Her By L. Conus	*[#%	(And)	•]	And Operational Robust. Active	0.0
				B terr from To	ly Filters +

Click Go.

þ	License-Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
	BUSINESS LICENSE		12345878	WA- Plastington	09/01/2021	09/01/202	IN REVIEW

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

Step 8: 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**. The **Required Credentials** tool helps identify what type of training and education information you need to provide to continue with enrollment.

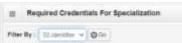
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

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**.



Required identifier(s) will be displayed, if needed (see highlighted below).

Required Credentials For Specialization								
Filter By : 02-Identifier 🗸 💿 Go		B	iave Filter	₩ My Filters ▼				
Specialty/Subspecialty	Provider Type	Administration	I	dentifier ∡▼				
7Q-Family Medicine/00000-00000-	20-Allopathic & Osteopathic Physicians	L&I	Malpracti	ce Insurance				

Make a note of your required identifier(s) as you'll need it to complete Step 8.

When finished, click Cancel to close.

ADD MALPRACTICE INSURANCE

Click Add.

Training/Education List						
rimer fig :	v)		(Ge		Sara Titler	¥ 19: 111-11 -
Training Education Type	Location Wordser	Location Name	Name of trablation Cospinger	Date Completest	Start Date	End Date

Use the Location drop-down menu to select All, or the applicable location.

Use the Identifier Type drop-down to select Malpractice Insurance.

In the Identifier Value field, enter your malpractice insurance policy number.

Please Add/Update DEA	Number in License & Certifi		Screen		
Location	All				
identifier Type:	Malpractica Insurance	× *	Identifier Value:		1
Start Date:	H *		End Date:		

Enter the Start Date and End Date, and click OK to close.

- The **Start Date** is when your policy was first issued.
- The **End Date** is the policy's expiration date.

VIEW SUBMITTED ITEMS

See your changes:

Click Step 8: Identifiers.

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

Ш	Provider Ident	tifiers						
Filt	er By :	¥			And	Ŷ		And
Оре	erational Status:	vctive >	• 0 Go				🗎 Save Fi	iter YMy Filters •
0	ldentifier Type ▲ ♥		Identifier Value	Start Date	End Date	Status	Operational Status ▲ ▼	Inactivation Date
	Provider Application	ID 2		10/28/2022	12/31/2999	APPROVED	Active	

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.

Mer By L. Conus	*[10	And	¥.	And Operational Status: Actual Colds
				🗎 baue fitten - TMg fitters -

Click Go.

License-Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345878	wk-mastington	09/01/2021	09/01/252	IN REVIEW

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

Step 19: Submit modification for review

Finish and/or upload the required L&I documents.

Click Submit Provider Modification.

# Application Docum	ert Checklet				
FarmeDosements	Special Instructions	Apres		1048 A.V	
Proof of Record-Materia		1.00			
10		18	trips from an presidence pathol and		
Printle Agricent		18	The family is an growthing antisother of \$10, \$27 and off		
Cave Provider Agrication	Complete and logs for all applications	1654	Mp. News his as portion provide appendix		

A confirmation box will display; click **Close** to exit. (This step is not required to enroll a servicing provider)

The modification request has been submitted for State revier check this Web site to verify the status of your request.	w. Please
	OK

Individual servicing provider

An individual servicing provider works for someone else who bills on their behalf. To add L&I to your agency list, follow instructions below to finish required steps.

• The **Step Remark** column will display instructions for required steps.

III View/Update Provider Data - Individual							24
National Process Ward: Provide Data Mathematics (public)	al. In order to be	distantiation of your re-	and there in	- end some	n belief the b	And Martin and	in Hagard for Norma
C Ser	Report	Last Monthsaller Date	Last Ravies Date	Sala	Multication Salars	Decision By	They Recent
The Theorematics	Report	At receipt	10010-0011	Company.	100ml	HEA	
C The I Lauren	Per Property	11112008	2121228	The state of the local division of			
C the & Provide Addition Thimsel	Hearer	STATISTICS.	111111111	ACCURATE			
C The A Specialization	Heaterd	4751-248	1711.018	-			Passe and Regard Specialization
C Day & Sevening & Menaging/Contriding Internet Addate	NUMBER	0101008	101012008	Training failed			
C Net 6 Common and Cambrahama	Negint .	54192216	140323010	Company			
C day / Traing and Malazare	(united	01012498	0101208	Corgana			
C Step 8 standberg	Optional	4111204	101228	Corpora			
C they a Connectioned	Part Hospital	0101208	1111208	Congase			
C. Bing this Products Tex Contradio	(Inner	ATTY (2008	0741208	Tecogene			
C they 10, 609 Submittee Stational	Cohered	2101288	2101238	-			
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C the 14 KD Greet elements	diam'r	10101-2008	11111208	Thursday.			
CT How till Service Provider Calable	Report	all yes and in	17111238	nonphile			Phone and Personal Agency States Provide
I Say II Senang Provide Manufact	And Harported	10.01110423	1001108	Garghea			
C Day 17 Payment and Rendmann Dalate	Spane	07010000	01012008	-			
C Had M. Very Street Schemation	Taking	AT ITY DATA	station	Company			
Comp Titl Suband Middlindow for Facility	Insent	10101-2004	analogue.	Taxanglered.			

Step 1: Basic information

• Click **L&I** in the **Available Agencies** box, then click the double right arrows.

Hypera date to see KHPI and Pysice are Afgebrain provider their presess contact DBHS worker to entroll. Average Agencies DOC DOC	
- M	

• Select the **Servicing Type** drop-down and select **Servicing Only**.

ider Kene: (Frid hene)	philde have:
hitter v	Genier v
55%	The v
Date of Both:	Services Type: Services Drive w

- Verify or add an Email Address.
- Note: We'll use this email address if we have questions about your application.

Step 3: Provider additional information

- Enter **Start Date**.
- Verify address or **Add Address** to update.

O Chan Blan						
E Correspondence Address						
	Chick the VALE AREA	rer" batter to Aitil a new A	ddiwes or aphabolicality or eal	sing Address		
81	art Date: 04/21/2021				anun: In Review	
Address Live 1	TBI Second Ave NW	•	Address Line 2			
Adding Line 5			City Rows	Olympia	* (1)	
StateProvince		- 1	Canada	Thattin		
Canay	UNITED STATES	21	Zip Cade:	99501	O Add Address	

• Click **Save** and **Close**.

Step 4: Specializations

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

ADDING SPECIALIZATIONS

Click Add.

		10	a most choose an aumin	for each agency(s) selected in	Corection 1		
⊞ Sp	ecialty/Subspecial	Ity List					
itter By	s [v		0.60		🗎 Saye Filter	W My Filters
-	Provider Type	4	Specialty/Subspecialty	Location Number	Location Name	Administration	End Date

- Note: Only select the provider's primary specialty/taxonomy.
- Select the appropriate location, or **All**, from the **Location** drop-down menu.
- Choose L&I from the Administration drop-down menu.

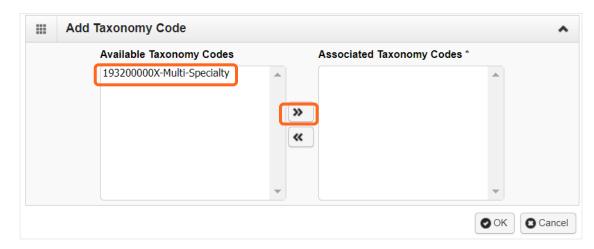
=	Add Specialty/Subspecialty		
	Location:	All ~	*
	Administration:	L&I-Labor And Industries Administr; ~	

• Choose the **Provider Type** and **Specialty**.

Add Specialty/Subsp	ecialty				^
Location:	All	v	-		
Administration:	L&I-Labor And Industries Administr-	v	*		
Provider Type	19-Group	v	*		
Specialty	32 Multi-Specialty 👻 *				
End Date:					

- 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 only the primary taxonomy/specialty to allow for accurate billing.

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

VIEW SUBMITTED ITEMS

See your changes:

- Click Step 4: Specializations.
- Note: The screen will show only "Approved" entries.

ш	Specialt	//\$ubspecialty List								
i me	the l		And				And Ope	ational Stat	tim: Action .	0.01
								B	erefiller 🛉 f	Ny Fillers *
ö	Contract Number	Provider Type	Specially Subspecially 4 =	Administration	Start Dam + Y	End Dure a Y	Operational Status + *	Bunes a v	Inactivation Data	End Reason
		26 Physician Associates & Advanced Practice Nursing Providers	31, Name Practitional (PDDD: Psychiatric Methal Health)	HRSA	85/15/2017		Activa	Approval		
		36 Physician Assistants & Advanced Practice Network Previders	3, Auron Precidenter/20003-Russe Precidenter	HELA.	05/15/2017	121112949	Addes	Apprint		

- 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.

6	Rec By L. Chatum	.*[105		And		w]		And Operational Robot: Act	
								😫 bare fitter	The fibers -
Click	Go.								
	License-Certification Type			State of Licensure	Effective Date	End Date	Status		
		4.9	47	4.4	4.9				
-	BUSINESS LICENSE		12345678	WA - Washington	09/01/2021	09/01/202	IN REVIEW		

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

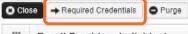
Step 6: Licenses and certifications

Before clicking into Step 6, review **Required Credentials**. The **Required Credentials** tool helps identify what type of license and certification information you need to provide to continue with enrollment.

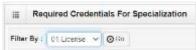
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

• Click **Required Credentials** from the BPW.



- III Enroll Provider Individual
- To view the License Requirements, use the Filter By drop-down to select 01-License and click Go.



Required license(s) will be displayed, if required (see highlighted below).

II Required Credentials For Specia	dization		^
Filter By I O'LCense - O'Ce		B Save Filter	W My Fillers •
Specially Subspecially	Provider Type	Administration	License
47	47		1.4
71-Radiologic Technologist/00000-00000-	24-Technologiats, Technicians & Other Technical Service Providers	1.01 19	Factility License

- Make a note of your required license as you'll need it to complete Step 6.
- When finished, click **Cancel** to close.

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 for this step.
- Click **Add**.

0 Cas	O Ace							
=	License/Certification Li	м						16
filler 1	by :	M		0 100			B Sann Filter	W My Filters
	LicensorCertification #	License/Cer	tilitation 7yp4 a 7	State of Licensure	Location Number	Location Name	Effective Data	End Date
				No Records Pound				

• 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.

Location;	M.				
Jamas Certification Type	Facilities	- Userer	Certification #	"Bais of Liverson	
Effective Cale.		11	Erst Date		

- Complete the **License** # and **State** fields.
- The **Effective Date** is when the license was first issued.
- In the **End Date** field, enter the expiration date.
- Click **OK** to save or **Cancel** to close without saving.

VIEW SUBMITTED ITEMS

- See your changes:
- Click **Step 6: Licenses and Certifications.**
 - Note: The screen will show only "Approved" entries.

Ш	License/Certification List									-
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								B Save Fill	or YM	y Fillons -
	License/Certification Type	Licanse Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status	Operational Status		livation late
		4.7		4.7	4.7	1.47				4.4
	PROFESSIONAL LICENSE	RN	RN	WA - Washington	04/07/2017	01/11/2023	APPROVED	Active		
n	PROFESSIONALLICENSE	ARNP	AP.	WA-Washington	04/10/2017	01/11/2024	APPROVED	Active		

0

- 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.

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		_						B tere fitter	The fibers -
Click G	~								
Click G	·0.								
Click G	0.								
License/Certification P	pe License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status			
License/Certification P		License/Certification #	State of Licensure	Effective Date	End Date	Status			

• Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne

Step 7: Training and education

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**. The **Required Credentials** tool helps identify what type of training and education information you need to provide to continue with enrollment.

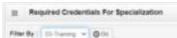
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

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.



Required training will be displayed, if required (see highlighted below).

Required Credentials For Specialization						
Filter By : 03-Training 🗸 💿 Go		🗎 Save Filt	er 🛛 🎔 My Filters 🕶			
Specialty/Subspecialty ▲♡	Provider Type	Administration	Training			
7Q-Family Medicine/00000-00000-	20-Allopathic & Osteopathic Physicians	L&I	Medical school			

- Make a note of your required training as you'll need it to complete Step 7.
- When finished, click **Cancel** to close.

ADD TRAINING/EDUCATION TYPE

• Click Add.

O Ant							
Training/E	Education List						
Tiller By 1	v)		0.00			B Sara Titler	With Filters
Tearrengt		in Meriber Loca	dian Name Name	of traitation Employer	Date Completed	Start Date	Erst Data

- 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.

Training/Education Type:	Medical school	× *	Place Completed:				
Name of Institution/Employer:			Start Date:		m	ł.	
Date Completed:			End Date:	12/31/2999	86	ŀ	
Unit Type:		×	Unit Value:				

• Click **OK** and **Close**.

VIEW SUBMITTED ITEMS

- See your changes:
- Click Step 7: Training and Education.
- Note: The screen will show only "Approved" entries.

II Train	ng/Education List									
itor By :	*		And					And Operational Status	Active	~ © 00
								B Ser	Filter	Y My Fotors
Tra	ningitiducation Type	Name of Institution/Employer		Date Completed	Start Date	End Date	Status	Operational Status	Inactiv	ation Date
3:		47		4.7	4.7	4.7		4.4		4.7

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

MercBy L. Charlas	 And	¥.	And Operational Batter: Active Gross
			🖹 Save fitten 👎 My fitters *

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

License/Certification Type	License Type DOH Prefix	License/Certification #				
D BUSINESS LICENSE		12345678	WA - Hastington	09/01/2021	99/01/202	IN REVIEW

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne

Step 8: 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 8, review **Required Credentials**. The **Required Credentials** tool helps identify what type of identifier information you need to provide to continue with enrollment.

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**.



Required identifier(s) will be displayed, if required (see highlighted below).

Required Credentials For Specialization							
Filter By : 02-Identifier V 🛇 Go		B	iave Filter	₩ My Filters ▼			
Specialty/Subspecialty ▲ ♡	Provider Type ▲ ▼	Administration	1	dentifier ▲ ▼			
7Q-Family Medicine/00000-00000-	20-Allopathic & Osteopathic Physicians	L&I	Malpracti	ce Insurance			

- Make a note of your required identifier(s) as you'll need it to complete Step 8.
- When finished, click **Cancel** to close.

ADD MALPRACTICE INSURANCE

Click Add.

o c	O + et						
= Te	aining/Education List						
Filler By	1	V		00	B	Sara Filler	The Print -
0 0	Training/Education Type	Location Number	Location Name	Name of traitistor Countryer	Data Completed	Start Date	End Date
	**	**	A T	cantle Finand I	+ *	4.1	.4.

• Use the **Location** drop-down menu to select **All**, or the applicable location.

lease Add/Update DEA	Number in License & Certifi	tation Step/S	creen		
Location	All				
Identifier Type:	Malpractica Insurance		Identifier Value:		1
Start Date:			End Date:		

- Use the Identifier Type drop-down to select Malpractice Insurance.
- In the **Identifier Value** field, enter your malpractice insurance policy number.
- Enter the **Start Date** and **End Date**, and click **OK** to close.
 - The **Start Date** is when your policy was first issued.
 - The **End Date** is the policy's expiration date.

VIEW SUBMITTED ITEMS

- See your changes:
- Click Step 8: Identifiers.
 - Note: The screen will show only "Approved" entries.

III P	rovider Identifiers						
Filter By	/: v			And	Ŷ		And
Operatio	onal Status: Active	✓ O Go				🗎 Save Fil	ter YMy Filters -
0	ldentifier Type ▲ ♡	Identifier Value	Start Date	End Date	Status	Operational Status ▲ ▼	Inactivation Date
CT Prov	ider Application ID		10/28/2022	12/31/2999	APPROVED	Active	

- 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.

Mer By L. Conus	*[x6	And	v.	And Operational Babaic Active	
				B tare from T	My Filters +

Click Go.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
D BUSINESS LICENSE		12345678	wa-mastegten	09/01/2021	09/01/202	IN REVIEW

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

Step 15: Billing provider details

This step creates a link between your organization and this servicing provider.

Note: L&I must be listed on your organization's ProviderOne Domain.

ADD BILLING PROVIDER INFORMATION

• Click Add.

8	Servicing Provide	irs.							
iter	By:			(@04			B Save Filter	Ψ×r,	Pillers +
	Servicing Provider SSN/FEIN	Bervicing Provider NPS	ProviderOne ID / Application #	ProviderOne/Application Name	Agency	Billing Location Code	Billing Location Name	Start Dete	End Oute

- Enter your group's ProviderOne ID or NPI, then click **Confirm Provider**.
- Click L&I and use the double right arrows to move it to the Selected Agencies box.

 Agency			^
Available Agencies		Selected Agencies	
L&I			
	»		
	**		

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

III S	ervicing Provider Taxonomy			^
	Available Taxonomies L&I-171100000X-Acupuncturist	Select 33 44	ted Taxonomies	

Available Locations	Selected Locations		
0001-A Clinic for All 1011 PLUM ST S	» «	Selecting multiple locations will asso above selected Taxonomies to the L	
	•	-	

Click the **Available Locations** and use the double right arrows to move it to the **Selected Locations** box.

Click OK to save or Cancel to close without saving.

VIEW SUBMITTED ITEMS

- See your changes:
- Click **Step 15: Billing Provider Details.**

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

ш	Billing Pro	ovider List									1
Filts	er By :		-		And					And Operationa	l Status:
Ac	tve 🗸 🞯 🛛	ю.								🗎 Save Filter	₩ My Filters
0	ProviderOne ID A V	Billing Provider NPI ∗ ♥	Billing Provider Name	Agency	Billing Location Code	Billing Location Name	Start Date	End Date	Status 4 T	Operational Status * *	Inactivation Date
0		1111111111	A New Clinic	1.61	00	A New Clinic	10/28/2022	12/31/2996	Approved	Active	

IN REVIEW

- 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.

Her By L Conus	*[10]	And	w.]	And Operational Status: A	00 m
				B beer fitte	The filters *
Click Go.					
chen go.					
	ton Type License Type DOH Prefix				

06/01/2021

WA. Washinston

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne

12345878

Step 19: Submit modification for review

- Finish and/or upload the required L&I documents.
- Click Submit Provider Modification.

 Application Docume 	et Checklet				
FarmeDocaments	Special Instructions	Apres		1048 A.V	
Price of Approximation		LIR.			
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Postle Agricent		18	The family of preferre antications' \$10,001 million		
Tow Provider Agreement	Constrain and age for of additions	16A	Man Team Tria and gen have an other agreement of		

• A confirmation box will display; click **Close** to exit.



FAOI and group providers

To add L&I to your agency list, you may need to update your existing information (e.g. expired license). Group and FAOI domains may have different requirements. Follow instructions below to finish required steps.

• The **Step Remark** column will display instructions for required steps.

o	Step	Required	Last Modification Date	Last Review Date	Status	Modification Status	Decision By	Step Remark
O	Step 1: Besic Information	Required	09/08/2022	06/17/2014	Complete	Updated		
Ö	Step 2. Locations	Required	09/28/2021	09/30/2021	Complete		-	
0	Step 3 Specializations	Required	06/17/2014	06/17/2014	Incomplete			Please add Required Specialization
0	Step 4: Ownership & Managing/Controlling Interest details	Required	06/17/2014	06/17/2014	Complete			
O	Step 5: Licenses and Certifications	Required	09/28/2021	09/30/2021	Complete			
Ò	Step 6. Training and Education	Optional	06/17/2014	06/17/2014	Complete			
O	Step 7. Identifiers	Required	06/17/2014	06/17/2014	Complete			
Ö	Step 8: Contract Details	Optional	06/17/2014	06/17/2014	Complete			
0	Step 9: Federal Tax Details	Required	06/17/2014	06/17/2014	Complete			
0	Step 10: EDI Submission Method	Optional	11/21/2014	06/17/2014	Incomplete			
۵	Step 11: EDI Billing Software Datails	Optional	06/17/2014	06/17/2014	Incomplete			
Ð	Step 12: EDI Submitter Oetaks	Optional	07/18/2019	07/18/2019	Incomplete			
0	Step 13: EDI Contact Information	Optional	05/17/2014	06/17/2014	Incomplete			
Ö	Step 14: Servicing Provider Information	Optional	06/17/2014	06/17/2014	Complete			
Ö	Step 15: Payment and Remittance Details	Required	06/17/2014	06/17/2014	Complete			
0	Step 16: Submit Modification for Review	Required	06/17/2014	06/17/2014	incomplete			

Step 1: Basic information

• Click **L&I** in the **Available Agencies** box, then click the double right arrows.

Basic Information			
		Nypical provider they please contact 05H5 worker to enroll.	
Available Agencies	Bolestei Agence		
000		A.	
Dim			
August 1.8.		- 60 -	

• Verify or add an Email Address.

Note: We'll use this email address if there are questions about your application.

Step 3: Specializations

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

ADDING SPECIALIZATIONS

Click Add.

distant	O Add Opdate	Yo	u must choose an admin	Subspecialty are your Taxor for each agency(s) selected in	n Step 1,		
≣ Sp	ecialty/Subspecie	Ity List					,
itter By :		V		@ Go		🗎 Saye Filter	W My Filters •
D	Provider Type	5	Specially/Subspecially	Location Number	Location Name	Administration	End Date

Note: Only select the primary taxonomy/specialty to avoid billing issues.

- Select the appropriate location, or **All**, from the **Location** drop-down menu.
- Choose L&I from the Administration drop-down menu.

 Add Specialty/Subspecialty		
Location:	All ~	*
Administration:	L&I-Labor And Industries Administr: V	

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

Add Specialty/Subsp	ecialty		^
Location:	All	~	· ·
Administration:	L&I-Labor And Industries Administry	4	
Provider Type	19-Group	~	
Specialty	32 Multi-Specialty 👻 *		
End Date:			

- The Provider Type selection will populate the options for Specialty, which displays the available taxonomy codes.
 - Use the double arrows to move the primary taxonomy code from the Available Taxonomy Codes box to the Associated Taxonomy Codes box.

- Select primary taxonomy only to allow for accurate billing.
- Click **OK** to save or **Cancel** to close without saving.

A	dd Taxonomy Code		^
	Available Taxonomy Codes	Associated Taxo	onomy Codes *
	193200000X-Multi-Specialty	* *	
		-	-
			OK Scancel

VIEW SUBMITTED ITEMS

• See your changes:

• Click Step 3: Specializations.

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

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0	Combact Number	Provider Type + 7	Specialty/Subspecialty + 1	Administration A *	Start Date	End Date	Operational Status + *	Statue 4 T	Inactivation Date	End Roosce 4 *
2		35-Physician Associations & Advanced Practice Nueskig Providers	31. Norse Practitioner/P0005-Practilatric/Mercul Health	HRSA.	851522-0	(2/31/2999	Adhe	Approved		
2		36-Physician Assistants & Advanced Practice Numeric Providers	3L Name Practitioner/01020-Name Practitioner	HRIA	16/15/2017	12/11/2999	Adhe	Approved		

- 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.

Click Go.	Mer By L. Conus	(w) (n h)	 And		¥.		And Operato	onal Baton:	Adre	00
License/Certification Type License Type DOH Prefix License/Certification # State of Licensure Effective Date End Date Status								B Seer FR	- 7	My Filters
License/Certification Type License Type DOH Prefix License/Certification # State of Licensure Effective Date End Date Status	Tlick Go									
	chen do.									
	License/Certification Type		State of Licensure	Effective Date	End Date	Status				

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

FAOI and group providers – Step 5: Licenses and certifications

Before clicking into Step 5, review **Required Credentials**. The **Required Credentials** tool helps identify what type of license and certification information you need to provide to continue with enrollment.

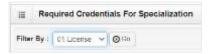
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

Click Required Credentials from the BPW.



• To view the License Requirements, use the Filter By drop-down to select 01-License, click Go.



Required license(s) will be displayed, if required (see highlighted below).

II Required Credentials For Specia			
Filter By) 01-Lorence - @Ga		B fare Fr	ter YMy Filters •
Specially Subspecially	Provider Type	Administration	License
A.T.	4.7		1.7
71-Radiologic Technologist/00000-00000-	24-Technologiata, Techniciana & Other Technical Service Providera	1.67	Facility License

- Make a note of your required license as you'll need it to complete Step 5.
- When finished, click **Cancel** to close.

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 for this step.

Click Add.	

D Dem O Ade						
License/Certification L	sz.					16
filler By :	MI 1	0 100			E Sann Filter	W My Fillers
LitersolCertification #	License/Certification Type	State of Licensure	Location Humber	Location Name	Effective Date	End Data
	.*	No Records Point	4.7	4.9	4.4	

• 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 the License # and State fields.
- The **Effective Date** is when the license was first issued.
- In the **End Date** field, enter the expiration date
- Click **OK** to save or **Cancel** to close without saving.

VIEW SUBMITTED ITEMS

- See your changes:
- Click Step 5: Licenses and Certifications.

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

O Close O	Add.								
III Lice	enseiCertification List								
Filter By :	*		And	*			And Oper	ational Status: Ac	2ve v 000
								🖹 Save Filter	₩ My Filters -
٥	License/Centification Type	License Type DOH Prefix	License/Certification # # *	State of Licensure	Effective Dete	End Date	Statue	Operational Status * *	Inactivation Date
D PROFE	ISIONAL LICENSE	RN	RN	WA - Washington	04/07/2017	01/11/2023	APPROVED	Active	
D PROFE	SSIONAL LICENSE	ARNP	AP	WA - Washington	94/10/2017	81/11/2024	APPROVED	Active	

- 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.

Her By L. Conut	(w) HN	10	And		(m)		And Operator	onal Blatton: Act	- Go
								B tare fitter	The Citars
Click Go.									
License-Certification Type	License Type DGH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status			
License-Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status			

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

Step 6: Training and education

This step doesn't apply to all L&I providers. Follow the instructions below if the BPW step is Required. Before clicking into Step 6, review **Required Credentials**. The **Required Credentials** tool helps identify what type of training and education information you need to provide to continue with enrollment.

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**.

=	Require	d Credenti	ais For Specialization	
Film	9y (=	harry w	00	

Required training will be displayed, if required (see highlighted below).

Required Credentials For	Specialization		
Filter By : 03-Training 🗸 🛇 Go		B Save Filt	er Y My Filters •
Specialty/Subspecialty ▲ ♡	Provider Type	Administration	Training
7Q-Family Medicine/00000-00000-	20-Allopathic & Osteopathic Physicians	L&I	Medical school

- Make a note of your required training as you'll need it to complete Step 6.
- When finished, click **Cancel** to close.

ADD TRAINING/EDUCATION TYPE

Click Add.

Tra	Ining/Education List						
mer fly 1		Y.		@ 0e		E Sara Titler	With Fillers
19	wining Kalucation Type	Location Wamber	Societion Name	Name of traitstore Employer	Date Completed	Board Dank	End Dat
	4.7	4.4	4.7		4.7	4.4	4.7

- 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.

Adding L&I to an existing provider account

- 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.

Training/Education Type:	Medical school	× *	Place Completed:				
Name of Institution/Employer:			Start Date:	-	8	ł	
Date Completed:			End Date:	12/31/2999	86		
Unit Type:		~	Unit Value:				

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

VIEW SUBMITTED ITEMS

See your changes:

- Click Step 6: Training and Education.
 - Note: The screen will show only "Approved" entries.

E Training/Education	on List								
Rer By :		And	1				And Operational Statu	Adle -	- OG
							Bar	effter ¥	Wy Fillers
Training/Educatio	in Tame	Name of InstitutionEmployer	Date Completed	Start Cety	End Date	Status	Operational Status	Inactivat	ion Dete

- 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.

Mer By I. Christ	.*[H%	And	w]	And Operational Balance: Active	0.0
				B terr free T	My Fillers +

• Click Go.

License-Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
D BUSINESS LICENSE		12345678	www.ytashington	09/01/2021	99/01/202	IN REVIEW

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

Step 7: 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**. The **Required Credentials** tool helps identify what type of identifier information you need to provide to continue with enrollment.

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

CHECK REQUIRED CREDENTIALS

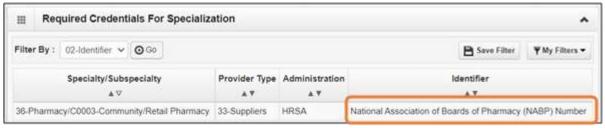
• Click **Required Credentials** from the BPW.



• To view the Identifier requirements, use the **Filter By** drop-down menu to select **02-Identifier** and click **Go**.



- Required identifier(s) will be displayed, if required (see highlighted below).
- Make note of your required identifier(s) as you'll need it to complete Step 7.



When finished, click Cancel to close.

ADD AN IDENTIFIER

Click Add.

utae V		000 J		Sara Titler	
			-	Contractor and	
Type Location Norther	Location Name	Name of traitation Couplinger	Date Completed	Board Dank	Ent Dat
		4.4		47 AT AT 47	ar ar ar ar ar

• Use the **Location** drop-down menu to select **All**, or the applicable location.

Please Add Update DEA	Number in License & Certific	cation Step/Sc	creen	
Location	AL			
identifier Type:	Malpractica Insurance	× *	Identifier Value:	1
Start Date:			End Date:	

- 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.

VIEW SUBMITTED ITEMS

See your changes:

• Click Step 7: Identifiers.

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

III P	rovider Ide	nurlers									
Filter By	:	Ý				And	Ý				And
Operatio	nal Status:	Active	~	O Go					B Save Fi	ter	₩ My Filters •
0	ldentifier Ty ▲ ♥	/pe	lder	ntifier Value ∡ ▼	Start Date	End Date	Statur	Operati	nal Status	Inac	tivation Date
Prov	ider Applicati	on ID			10/28/2022	12/31/2999	APPROVED	Active			

- 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.

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Clic	ck Go.									
		License Type DOH Drefts	Licenso-Certification #	State of Licensure	Ethective Date	Fod Date	Status			
		License Type DOH Prefix	License-Certification #	State of Licensure	Effective Date	End Date	Status			

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne

Step 14: Servicing provider information

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

If you're a Group, you must add at least one servicing provider with L&I already listed. If you're a FAOI, this step doesn't apply. Skip to Step 19.

ADD SERVICING PROVIDER INFORMATION

Click Add.

10	Servicing Provide	irs.							^
-	e By:			(O Der			B Save Filter	¥ 10	Pillers -
	Servicing Provider SSN/FEIN	Bervicing Provider NPS	ProviderOne ID / Application #	ProviderOnerApplication Name	Agency	Billing Location Code	Billing Location Name	Blart Dele	End Oate

- Enter the SSN/FEIN of the servicing provider, and one of the following: NPI, Application ID or ProviderOne ID.
- Enter the **Start Date**. The End Date will auto-populate as 12/31/2999.

ш	Add Servicing Pro	ovider Association			^
	SSN/FEIN:		•	NPI:	
	Application Id: Start Date:		•	End Date:	
		Confirm Provider			

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

Ш	Agency		^
	Available Agencies	Selected Agen	cies
	L&I	~	^
		35	
		**	
		*	-

• 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.

ш	Servicing Pr	rovider Taxonomy				^
		Available Taxonomies L&I-171100000X-Acupuncturist	Ċ	Selected T	axonomies *	

 Click the Available Locations and use the double right arrows to move it to the Selected Locations box. More than one may be selected.

III Billi	ng Provider Location			^
	Available Locations	Selected Locations		
	0001-A Clinic for All 1011 PLUM ST		*	Selecting multiple locations will associate all the above selected Taxonomies to the Locations.
	· · · · · · · · · · · · · · · · · · ·		-	
				OK Cancel

- 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 DOES NOT EXIST IN THE DATABASE

If the L&I provider does not exist in the database, you'll be prompted to add the servicing provider. See the L&I enrollment guide for individual servicing only providers for more information.



- Click OK to start enrolling a servicing provider, Back to return to the previous page, or Cancel to return to the Servicing Provider List.
- Note: If you start a new enrollment, copy the Application ID that's generated for the servicing provider. You'll need it 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 use the roster upload process to add multiple servicing providers at once.

Adding L&I to an existing provider account

VIEW SUBMITTED ITEMS

See your changes:

• Click Step 14: Servicing Provider Information.

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

Ш	Servicing	Provider List									
Filte	er By :		~			And	~				And
Ope	irational Status	: Active 🛩 🧿	Go							🖹 Save Filter	W My Filters
0	ProviderOne ID + *	Servicing Provider Name	Agency	Servicing Provider NPI ▲ ♡	Billing Location Code	Billing Location Name ▲ ♥	Start Date ▲ Ŧ	End Date ▲ ₹	Status 4 V	Operational Status	Inactivatio Date
	2222222	New, Servicing	HCA	22222222222	00	A New Clinic	02/01/2022	12/31/2996	Approved	Active	

- 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.

Herbyi Data v Jah	And	w.	And Operational Status:	Adus -	0.0
			B 1000	THE TR	y filters +

Click Go.

Note: Enter % to see all entries. The percentage symbol is a shortcut in ProviderOne.

D	License-Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
O	BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	09/01/202	IN REVIEW

Step 19: Submit modification for review

- Finish and/or upload the required L&I documents.
- Click Submit Provider Modification.

 Application Docume 	ert Checklet				
FormiDisprants	Special Instructions	Apres		1.74 A.V	
Price of Approximation		Liki .			
10		18	When income presidence pathol and		
Privitie Agricement		18	The family of preferre antications' \$10,001 million		
Cave Provider Agricement	Complete and sign for all adultiations	1654	Mycheering as peters press appended		

• A confirmation box will display; click **Close** to exit.

