



Washington State Department of
Labor & Industries

Providerne



Adding L&I to an existing provider Domain

ProviderOne User Guide

Updated March 2025

Disclaimer: Every effort was made to ensure this manual's accuracy. However, in the unlikely event of an actual or apparent conflict between this document and department rule, the department rule controls.

Table of Contents

Adding L&I to an existing provider domain	1
Individual billing provider	2
Step 1: Basic information.....	3
Step 3: Provider additional information	4
Step 4: Specializations	5
Step 6: Licenses and certifications	7
Step 7: Training and education.....	9
Step 8: Identifiers.....	11
Step 19: Submit modification for review	13
Individual servicing provider	14
Step 1: Basic information.....	15
Step 3: Provider additional information	16
Step 4: Specializations	17
Step 6: Licenses and certifications	19
Step 7: Training and education.....	21
Step 8: Identifiers.....	23
Step 15: Billing provider details	25
Step 19: Submit modification for review	27
FAOI and group providers.....	28
Step 1: Basic information.....	29
Step 2: Basic information.....	Error! Bookmark not defined.
Step 3: Specializations	30
Step 5: Licenses and certifications	32
Step 6: Training and education.....	34
Step 7: Identifiers.....	36
Step 14: Servicing provider information	38
Step 19: Submit modification for review	41

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

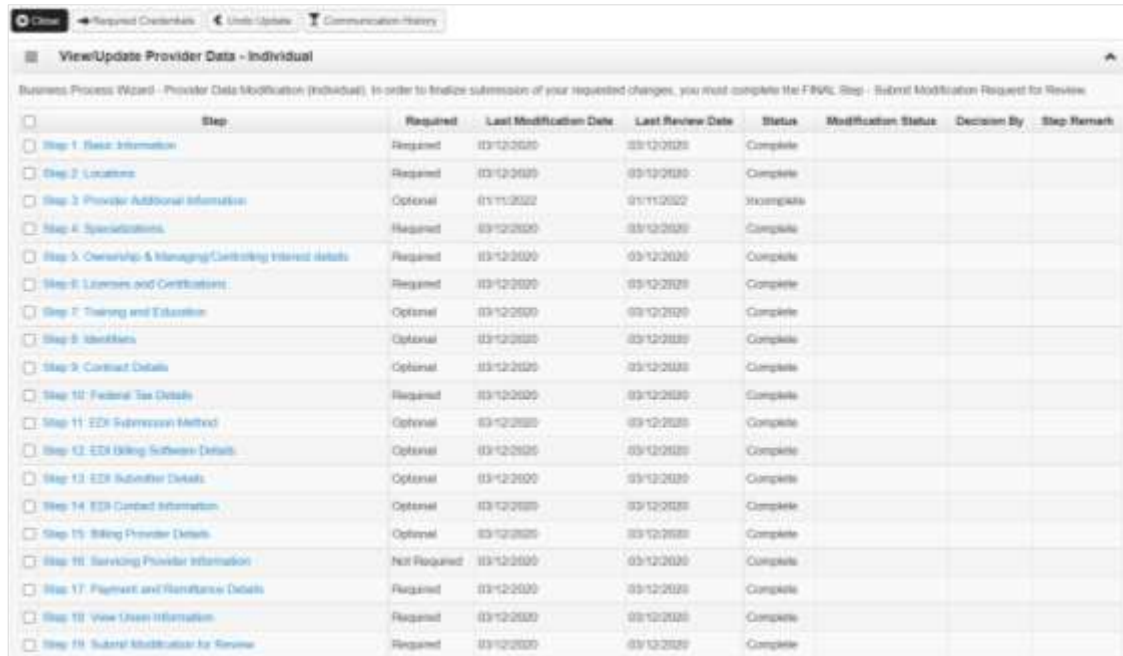
This guide includes different instructions based on your enrollment type. Use the table below to identify which enrollment type applies to you. Click on the corresponding link for instructions.

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.



Close Required Checklist Update Communication History

View/Update Provider Data - Individual

Business Process Wizard - Provider Data Modification (Individual): In order to finalize submission of your requested changes, you must complete the FINAL Step - Submit Modification Request for Review.

<input type="checkbox"/>	Step	Required	Last Modification Date	Last Review Date	Status	Modification Status	Decision By	Step Remark
<input type="checkbox"/>	Step 1: Basic Information	Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 2: Location	Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 3: Provider Additional Information	Optional	01/11/2022	01/11/2022	Incomplete			
<input type="checkbox"/>	Step 4: Specializations	Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 5: Ownership & Managing/Controlling Interest Details	Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 6: Licenses and Certifications	Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 7: Training and Education	Optional	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 8: Identifiers	Optional	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 9: Contract Details	Optional	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 10: Federal Tax Details	Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 11: EDR Submission Method	Optional	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 12: EDR Billing Software Details	Optional	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 13: EDR Submitter Details	Optional	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 14: EDR Contact Information	Optional	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 15: Billing Provider Details	Optional	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 16: Servicing Provider Information	Not Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 17: Payment and Remittance Details	Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 18: View User Information	Required	03/12/2020	03/12/2020	Complete			
<input type="checkbox"/>	Step 19: Submit Modification for Review	Required	03/12/2020	03/12/2020	Complete			

Individual billing provider –

Step 1: Basic information

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



The screenshot shows a window titled "Basic Information" with a subtitle: "If you don't have RPI and if you are Atypical provider then please contact DSHS worker to enroll." Inside the window, there are two lists of agencies. The "Available Agencies" list on the left contains "DOC", "DSHS", and "L&I". The "Selected Agencies" list on the right contains "HCA" and "W". A red box highlights "L&I" in the "Available Agencies" list, and another red box highlights the double right arrow button between the two lists.

Verify or add an **email address**.



The screenshot shows a section of the form with the label "W-9 Entity Type (If Other):" followed by a text input field. Below this, the label "Email Address:" is followed by a text input field, which is highlighted with a red box.

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.

The screenshot shows a 'Correspondence Address' form. At the top, there are 'Close' and 'Save' buttons. Below them is a title bar 'Correspondence Address' and a subtitle 'Click the "Add Address" button to Add a new Address or update/modify an existing Address'. The form contains the following fields: 'Start Date' with a calendar icon and the value '04/21/2021'; 'Address Line 1' with the value '788 Second Ave NW'; 'Address Line 2' which is empty; 'City/Town' with the value 'Olympia'; 'State/Province' which is empty; 'Country' with the value 'UNITED STATES'; and 'Zip Code' with the value '98501'. There is also a 'Status: In Review' label. The 'Add Address' button, located at the bottom right, is highlighted with an orange rectangle.

Click **Save** and **Close**.

Step 4: Specializations

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

ADDING SPECIALIZATIONS

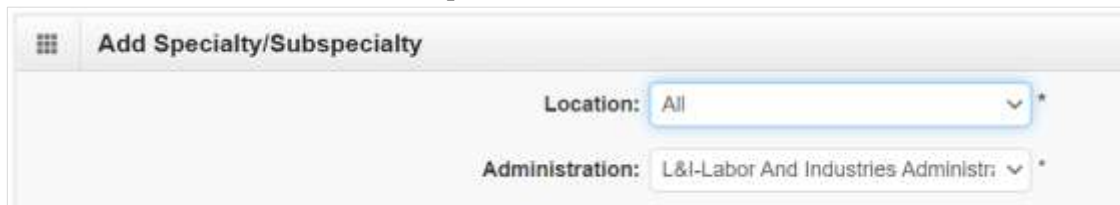
Click **Add**.



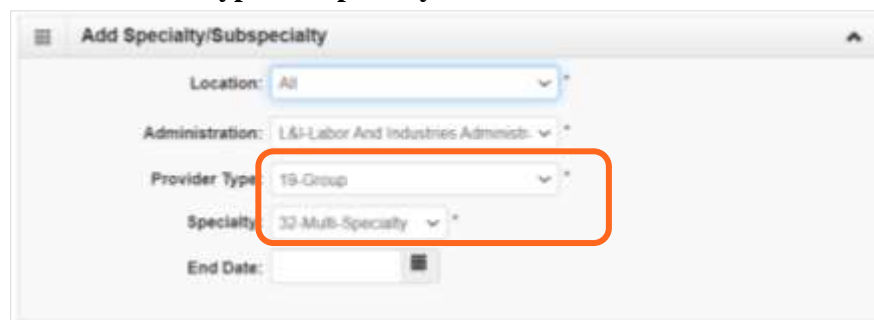
Note: Only select the provider's Primary specialty/taxonomy.

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

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



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 primary taxonomy 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.

Contact Number	Provider Type	Specialty/Subspecialty	Administration	Start Date	End Date	Operational Status	Status	Inactivation Date	Reason
	36-Physician Assistants & Advanced Practice Nursing Providers	3L Nurse Practitioner/P0005-Psychiatric/Mental Health	HRSA	05/15/2017	12/31/2099	Active	Approved		
	36-Physician Assistants & Advanced Practice Nursing Providers	3L Nurse Practitioner/P0005-Nurse Practitioner	HRSA	05/15/2017	12/31/2099	Active	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**.

License/Certification Type	License Type DOH Profile	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	08/01/2021	08/01/2025	IN REVIEW

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.

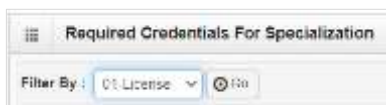
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

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**.



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



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**.



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**.

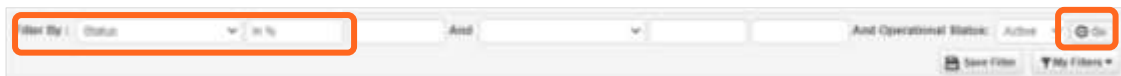
Note: The screen will show only “Approved” entries.



License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status	Operational Status	Inactivation Date
PROFESSIONAL LICENSE	RN	RN	WA - Washington	04/07/2017	01/11/2023	APPROVED	Active	
PROFESSIONAL LICENSE	ARNP	AP	WA - Washington	04/19/2017	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.



Filter By: Status And Operational Status: Active Go

Click **Go**.



License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2023	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.

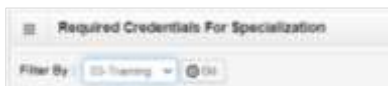
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

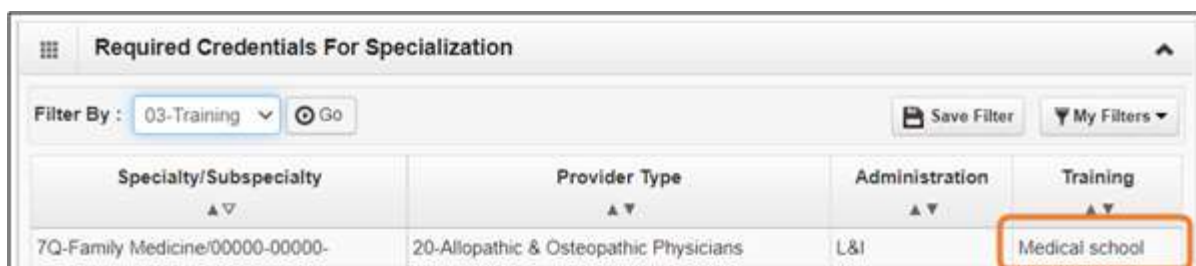
Click **Required Credentials** from the BPW.



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).



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**.



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.

The screenshot shows the 'Add Training/Education' form. The 'End Date' field is highlighted with a red box and contains the value '12/31/2999'. Other fields include 'Training/Education Type' (Medical school), 'Place Completed', 'Name of Institution/Employer', 'Start Date', 'Date Completed', 'Unit Type', and 'Unit Value'. The 'OK' and 'Cancel' buttons are at the bottom right.

Click **OK** and **Close**.

VIEW SUBMITTED ITEMS

See your changes:

Click **Step 7: Training and Education**.

Note: The screen will show only “Approved” entries.

The screenshot shows the 'Training/Education List' table. The 'Status' column header is highlighted with a red box. The table has columns: Training/Education Type, Name of Institution/Employer, Date Completed, Start Date, End Date, Status, Operational Status, and Inactivation Date. Below the table, it says 'No Records Found!'.

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.

The screenshot shows the filter section. The 'Filter By' dropdown is set to 'Status' and the input field contains 'IN%'. The 'Go' button is highlighted with a red box. Other options include 'And Operational Status: Active' and 'Save Filter'.

Click **Go**.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	09/01/2021	09/01/2022	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

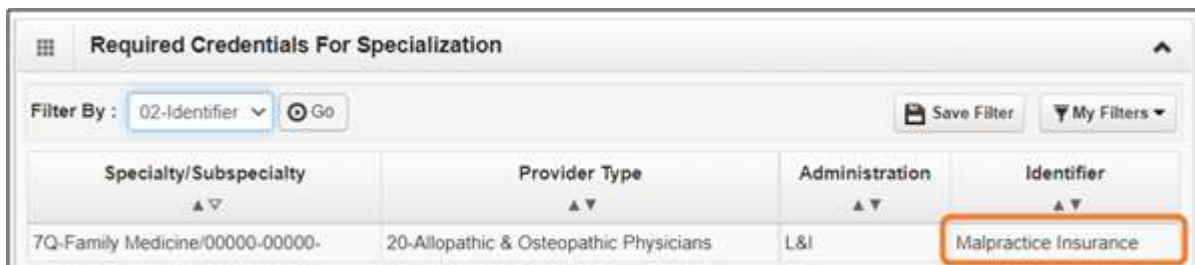
Click **Required Credentials** from the BPW.



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).



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

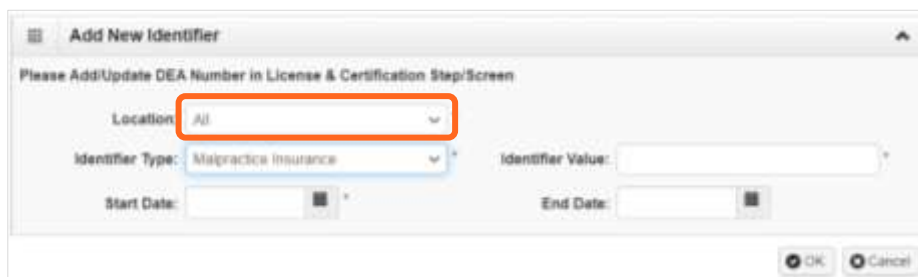
Click **Add**.



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.



Add New Identifier

Please Add/Update DEA Number in License & Certification Step/Screen

Location:

Identifier Type: Identifier Value:

Start Date: End Date:

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

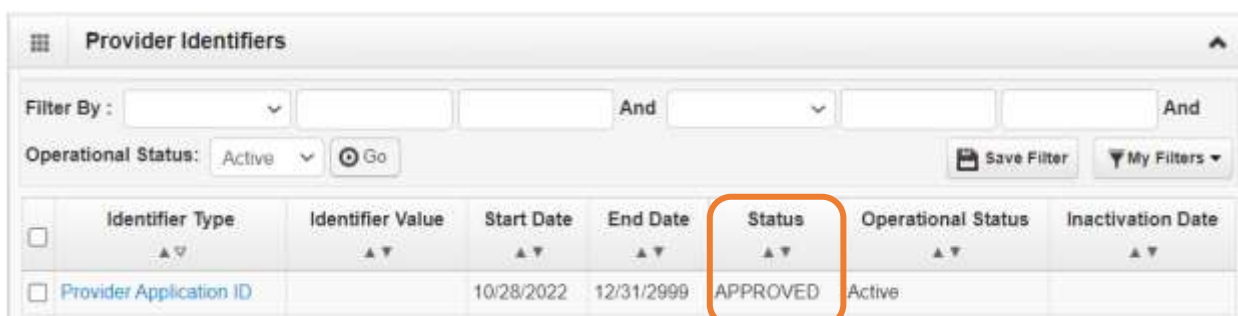
- The **Start Date** is when your policy was first issued.
- The **End Date** is the policy's expiration date.

VIEW SUBMITTED ITEMS

See your changes:

Click **Step 8: Identifiers**.

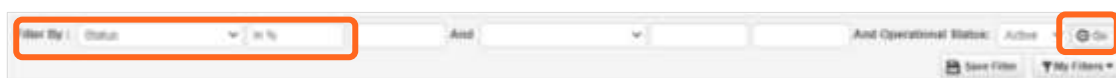
Note: The screen will show only “Approved” entries.



	Identifier Type	Identifier Value	Start Date	End Date	Status	Operational Status	Inactivation Date
<input type="checkbox"/>	Provider 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.



Filter By: And And Operational Status:

Click **Go**.



	License/Certification Type	License Type DOH Profile	License/Certification #	State of Licensure	Effective Date	End Date	Status
<input type="checkbox"/>	BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2022	IN REVIEW

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

Step 19: Submit modification for review

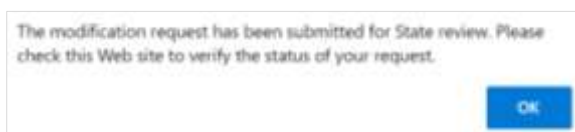
Finish and/or upload the required L&I documents.

Click **Submit Provider Modification**.



Forms/Documents A-F	Special Instructions A-F	Agency A-F	Link A-F
Proof of Accreditation		IRS	
SOS		IRS	http://www.irs.gov/irs/pdffiles/pdffile.pdf
Provider Agreement		IRS	http://www.irs.gov/irs/pdffiles/pdffile.pdf
Core Provider Agreement	Complete and sign for all applications	FECA	http://www.irs.gov/irs/pdffiles/pdffile.pdf

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



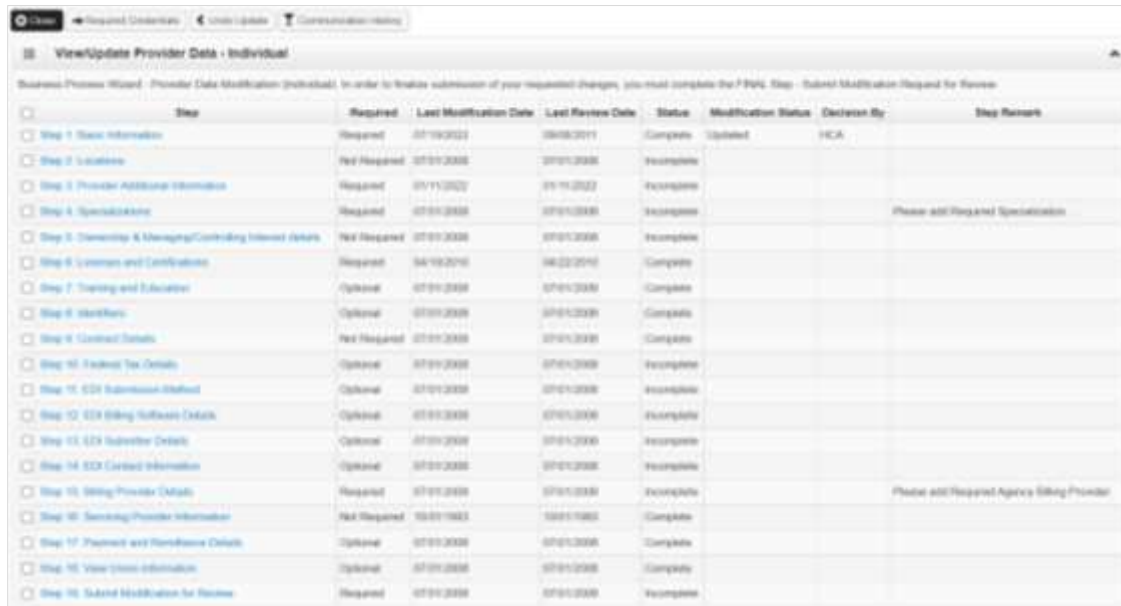
The modification request has been submitted for State review. Please check this Web site to verify the status of your request.

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.



The screenshot shows a web application interface for managing provider data. At the top, there are navigation tabs: 'Home', 'Required Updates', 'Last Update', and 'Communication History'. Below these is a header 'View/Update Provider Data - Individual'. A message states: 'Business Process Wizard - Provider Data Modification (Individual): In order to finalize submission of your requested changes, you must complete the PPA's Step - Submit Modification Request for Review.' Below this is a table with columns: Step, Required, Last Modification Date, Last Review Date, Status, Modification Status, Decision By, and Step Remark.

Step	Required	Last Modification Date	Last Review Date	Status	Modification Status	Decision By	Step Remark
Step 1 Basic Information	Required	07/19/2022	08/18/2021	Complete	Updated	HCA	
Step 2 Location	Not Required	07/19/2022	07/19/2022	Incomplete			
Step 3 Provider Additional Information	Required	07/19/2022	07/19/2022	Incomplete			
Step 4 Specializations	Required	07/19/2022	07/19/2022	Incomplete			Please add Required Specialization
Step 5 Ownership & Managing/Controlling Interest Details	Not Required	07/19/2022	07/19/2022	Incomplete			
Step 6 License and Certifications	Required	04/18/2016	04/22/2016	Complete			
Step 7 Training and Education	Optional	07/19/2022	07/19/2022	Complete			
Step 8 Identifiers	Optional	07/19/2022	07/19/2022	Complete			
Step 9 Contract Details	Not Required	07/19/2022	07/19/2022	Complete			
Step 10 Federal Tax Details	Optional	07/19/2022	07/19/2022	Incomplete			
Step 11 E24 Submission Method	Optional	07/19/2022	07/19/2022	Incomplete			
Step 12 E24 Billing Software Details	Optional	07/19/2022	07/19/2022	Incomplete			
Step 13 E24 Submitter Details	Optional	07/19/2022	07/19/2022	Incomplete			
Step 14 E24 Contact Information	Optional	07/19/2022	07/19/2022	Incomplete			
Step 15 Billing Provider Details	Required	07/19/2022	07/19/2022	Incomplete			Please add Required Agency Billing Provider
Step 16 Secondary Provider Information	Not Required	10/01/2022	10/01/2022	Complete			
Step 17 Payment and Remittance Details	Optional	07/19/2022	07/19/2022	Complete			
Step 18 View/Print Information	Optional	07/19/2022	07/19/2022	Complete			
Step 19 Submit Modification for Review	Required	07/19/2022	07/19/2022	Incomplete			

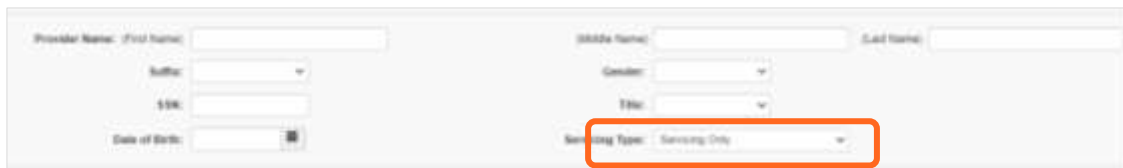
Step 1: Basic information

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



The screenshot shows a 'Basic Information' form. At the top, there is a note: 'If you don't have NPI and if you are Atypical provider then please contact CDHS worker to enroll.' Below this, there are two columns: 'Available Agencies' and 'Selected Agencies'. In the 'Available Agencies' column, 'L&I' is highlighted with an orange box. In the 'Selected Agencies' column, 'H' is highlighted with an orange box. Double right arrows are visible between the two columns, indicating the action to move 'L&I' to the 'Selected Agencies' list.

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



The screenshot shows the 'Basic Information' form with various fields for provider information. The 'Servicing Type' drop-down menu is highlighted with an orange box, and it is set to 'Servicing Only'.

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



The screenshot shows the 'Basic Information' form with the 'Email Address' field highlighted with an orange box. The field is labeled 'Email Address:' and is currently empty.

Step 3: Provider additional information

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

The screenshot shows a web form titled "Correspondence Address". At the top, there are "Close" and "Save" buttons. Below the title, a message reads: "Click the 'Add Address' button to Add a new Address or update an existing Address". The form contains the following fields:

- Start Date:** A date picker showing "04/21/2021".
- Status:** A dropdown menu showing "In Review".
- Address Line 1:** A text field containing "788 Second Ave NW".
- Address Line 2:** An empty text field.
- State/Province:** A dropdown menu.
- Country:** A dropdown menu showing "UNITED STATES".
- Address Line 2 (right):** An empty text field.
- City/Town:** A dropdown menu showing "Olympia".
- County:** A dropdown menu showing "Thurston".
- Zip Code:** A text field showing "98501".
- Add Address:** A button with a plus icon, highlighted with an orange rectangle.

- Click **Save** and **Close**.

Step 4: Specializations

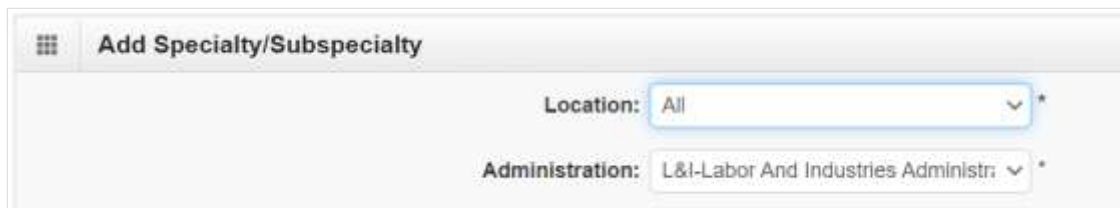
Note: There may be specific requirements for licensure or training for each specialty/taxonomy listed.

ADDING SPECIALIZATIONS

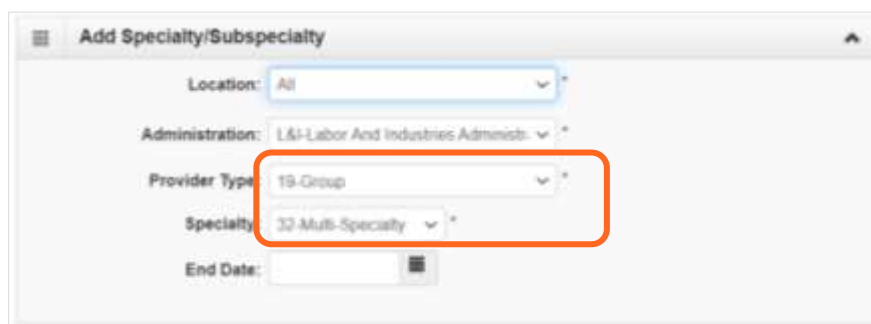
- Click **Add**.



- **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.



- 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 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.

Contract Number	Provider Type	Specialty/Subspecialty	Administration	Start Date	End Date	Operational Status	Status	Inactivation Date	End Reason
	36-Physician Assistants & Advanced Practice Nursing Providers	35-Nurse Practitioner/P00025-Psychiatric/Mental Health	HRSA	05/15/2017	12/31/2019	Active	Approved		
	36-Physician Assistants & Advanced Practice Nursing Providers	35-Nurse Practitioner/P00025-Nurse Practitioner	HRSA	05/15/2017	12/31/2019	Active	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**.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2025	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.

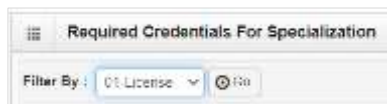
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

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



- 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).



- 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**.



- 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 6: Licenses and Certifications**.
 - **Note:** The screen will show only “Approved” entries.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status	Operational Status	Inactivation Date
PROFESSIONAL LICENSE	RN	RN	WA - Washington	04/07/2017	01/11/2023	APPROVED	Active	
PROFESSIONAL LICENSE	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.

- Click **Go**.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2022	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.

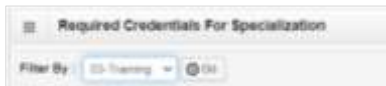
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

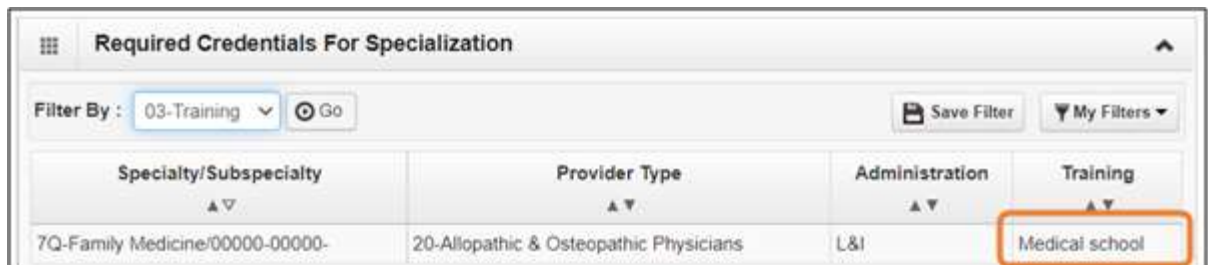
- Click **Required Credentials** from the BPW.



- 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).



- 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**.



- 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.

The screenshot shows the 'Add Training/Education' form. The 'End Date' field is highlighted with a red box and contains the text '12/31/2999'. Other fields include 'Training/Education Type' (Medical school), 'Place Completed', 'Name of Institution/Employer', 'Start Date', 'Date Completed', 'Unit Type', and 'Unit Value'. There are 'OK' and 'Cancel' buttons at the bottom right.

- Click **OK** and **Close**.

VIEW SUBMITTED ITEMS

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

The screenshot shows the 'Training/Education List' table. The table is empty, showing 'No Records Found!'. The table has columns: Training/Education Type, Name of Institution/Employer, Date Completed, Start Date, End Date, Status, Operational Status, and Inactivation Date. There are filter buttons and a 'Go' button at the top right.

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

The screenshot shows the filter section. The 'Filter By' dropdown is set to 'Status' and the 'Go' button is highlighted with a red box. There is also a 'Save Filter' button and a 'My Filters' dropdown.

- 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 #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2022	IN REVIEW

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

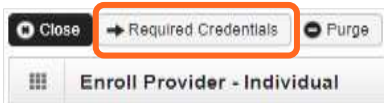
Step 8: Identifiers

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

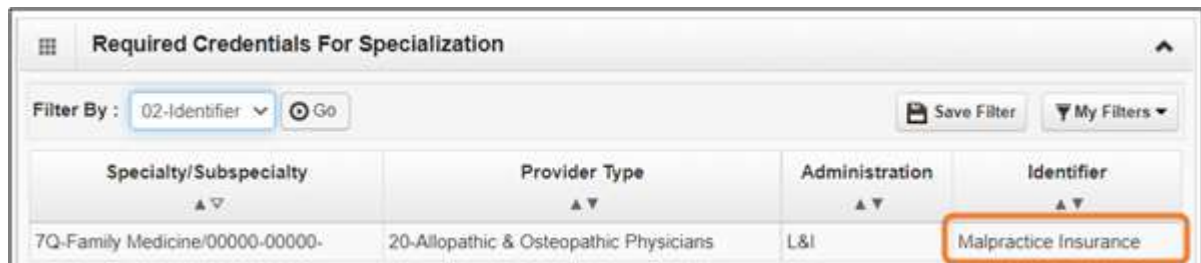
- Click **Required Credentials** from the BPW.



- 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).



- 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**.



- 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.
- 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.

	Identifier Type	Identifier Value	Start Date	End Date	Status	Operational Status	Inactivation Date
<input type="checkbox"/>	Provider 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.

- Click **Go**.

	License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
<input type="checkbox"/>	BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2022	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.

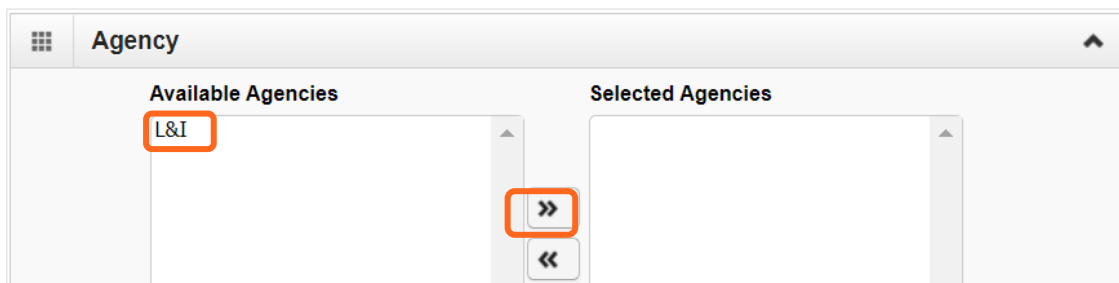
Note: L&I must be listed on your organization's ProviderOne Domain.

ADD BILLING PROVIDER INFORMATION

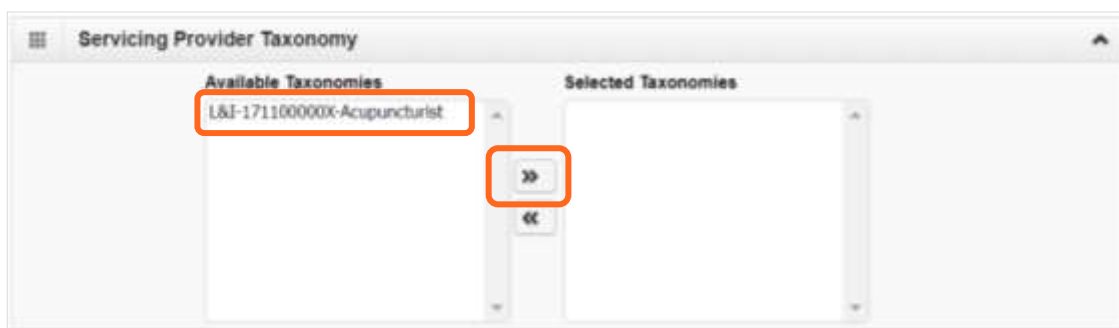
- Click **Add**.



- 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.



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



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

Billing Provider Location

Available Locations

0001-A Clinic for All 1011 PLUM ST S

Selected Locations

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.

VIEW SUBMITTED ITEMS

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

Note: The screen will show only “Approved” entries.

Billing Provider List

Filter By: [] And [] And Operational Status: []

Active [Go] Save Filter My Filters

ProviderOne ID	Billing Provider NPI	Billing Provider Name	Agency	Billing Location Code	Billing Location Name	Start Date	End Date	Status	Operational Status	Inactivation Date
11111111	1111111111	A New Clinic	L&I	00	A New Clinic	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.

Filter By: Status [IN%] And [] And Operational Status: Active [Go] Save Filter My Filters

- Click **Go**.

License/Certification Type	License Type DOH Profile	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2022	IN REVIEW

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

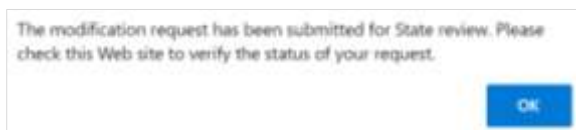
Step 19: Submit modification for review

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



Form/Documents	Special Instructions	Agency	Link
Proof of Accreditation		L&I	
IBS		L&I	http://www.lis.state.pa.us/ibis/pdfs/ibis.pdf
Provider Agreement		L&I	http://www.lis.state.pa.us/ibis/pdfs/provider_agreement.pdf
State Provider Agreement	Complete and sign for all applications	FEA	http://www.lis.state.pa.us/ibis/pdfs/provider_agreement.pdf

- 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.

<input type="checkbox"/>	Step	Required	Last Modification Date	Last Review Date	Status	Modification Status	Decision By	Step Remark
<input type="checkbox"/>	Step 1: Basic Information	Required	09/08/2022	06/17/2014	Complete	Updated		
<input type="checkbox"/>	Step 2: Locations	Required	09/28/2021	09/30/2021	Complete			
<input type="checkbox"/>	Step 3: Specializations	Required	06/17/2014	06/17/2014	Incomplete			Please add Required Specialization.
<input type="checkbox"/>	Step 4: Ownership & Managing/Controlling Interest details	Required	06/17/2014	06/17/2014	Complete			
<input type="checkbox"/>	Step 5: Licenses and Certifications	Required	09/28/2021	09/30/2021	Complete			
<input type="checkbox"/>	Step 6: Training and Education	Optional	06/17/2014	06/17/2014	Complete			
<input type="checkbox"/>	Step 7: Identifiers	Required	06/17/2014	06/17/2014	Complete			
<input type="checkbox"/>	Step 8: Contract Details	Optional	06/17/2014	06/17/2014	Complete			
<input type="checkbox"/>	Step 9: Federal Tax Details	Required	06/17/2014	06/17/2014	Complete			
<input type="checkbox"/>	Step 10: EDI Submission Method	Optional	11/21/2014	06/17/2014	Incomplete			
<input type="checkbox"/>	Step 11: EDI Billing Software Details	Optional	06/17/2014	06/17/2014	Incomplete			
<input type="checkbox"/>	Step 12: EDI Submitter Details	Optional	07/18/2019	07/18/2019	Incomplete			
<input type="checkbox"/>	Step 13: EDI Contact Information	Optional	06/17/2014	06/17/2014	Incomplete			
<input type="checkbox"/>	Step 14: Servicing Provider Information	Optional	06/17/2014	06/17/2014	Complete			
<input type="checkbox"/>	Step 15: Payment and Remittance Details	Required	06/17/2014	06/17/2014	Complete			
<input type="checkbox"/>	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.



The screenshot shows a window titled "Basic Information" with a subtitle "If you don't have RPI and if you are a typical provider then please contact DHS worker to enroll." Inside the window, there are two lists: "Available Agencies" on the left and "Selected Agencies" on the right. In the "Available Agencies" list, "L&I" is highlighted with an orange box. In the "Selected Agencies" list, "H" is highlighted with an orange box. A double right arrow button is positioned between the two lists, indicating the action to move the selected agency from the available list to the selected list.

- Verify or add an **Email Address**.



The screenshot shows a form section titled "W-9 Entity Type (If Other):" with a text input field. Below this, the "Email Address:" label is followed by a text input field, which is highlighted with an orange box.

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**.

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.

- 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 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.

VIEW SUBMITTED ITEMS

- See your changes:
- Click **Step 3: Specializations**.

Note: The screen will show only “Approved” entries.

Contract Number	Provider Type	Specialty/Subspecialty	Administration	Start Date	End Date	Operational Status	Status	Inactivation Date	End Reason
	36-Physician Assistants & Advanced Practice Nursing Providers	3L-Nurse Practitioner/PO000-Psychiatric/Mental Health	HRSA	05/15/2017	12/31/2999	Active	Approved		
	36-Physician Assistants & Advanced Practice Nursing Providers	3L-Nurse Practitioner/0000-Nurse Practitioner	HRSA	05/15/2017	12/31/2999	Active	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**.

License/Certification Type	License Type DOH Profile	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2025	IN REVIEW

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.

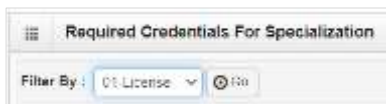
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

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).



- 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**.



- 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.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status	Operational Status	Inactivation Date
PROFESSIONAL LICENSE	RN	RN	WA - Washington	04/07/2017	01/11/2023	APPROVED	Active	
PROFESSIONAL LICENSE	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.

- Click **Go**.

<input type="checkbox"/>	License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
<input type="checkbox"/>	BUSINESS LICENSE		12345678	WA - Washington	09/01/2021	09/01/2023	IN REVIEW

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.

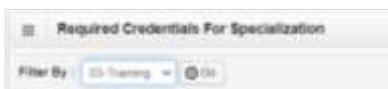
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

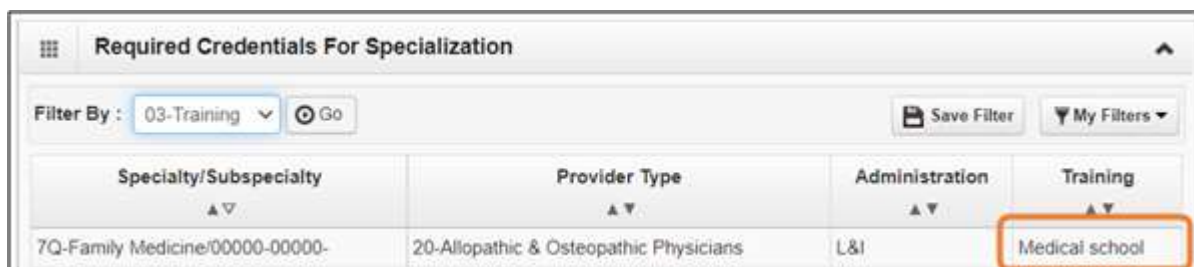
- Click **Required Credentials** from the BPW.



- To view the Training requirements, use the **Filter By** drop-down menu to select **03-Training** and click **Go**.



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



- 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**.



- 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.

The screenshot shows the 'Add Training/Education' form. The 'End Date' field is highlighted with a red box and contains the text '12/31/2999'. Other fields include 'Training/Education Type' (Medical school), 'Place Completed', 'Name of Institution/Employer', 'Start Date', 'Date Completed', 'Unit Type', and 'Unit Value'. There are 'OK' and 'Cancel' buttons at the bottom right.

- 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.

The screenshot shows the 'Training/Education List' table. The 'Status' column header is highlighted with a red box. The table has columns: Training/Education Type, Name of Institution/Employer, Date Completed, Start Date, End Date, Status, Operational Status, and Inactivation Date. Below the table, it says 'No Records Found!'. There are 'Filter By' and 'And Operational Status' dropdowns at the top.

- 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.

The screenshot shows the 'Filter By' dropdown menu. The 'Status' dropdown is highlighted with a red box, and the 'Go' button is also highlighted with a red box. The dropdown menu shows 'Status' selected, and the 'Go' button is next to it.

- Click **Go**.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	06/01/2021	06/01/2022	IN REVIEW

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

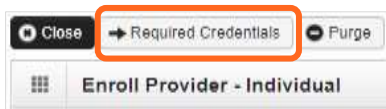
Step 7: Identifiers

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.

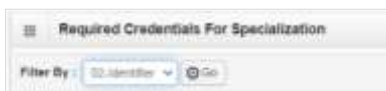
Tip: Make note of all requirements. You may use the Required Credentials tool for multiple steps.

CHECK REQUIRED CREDENTIALS

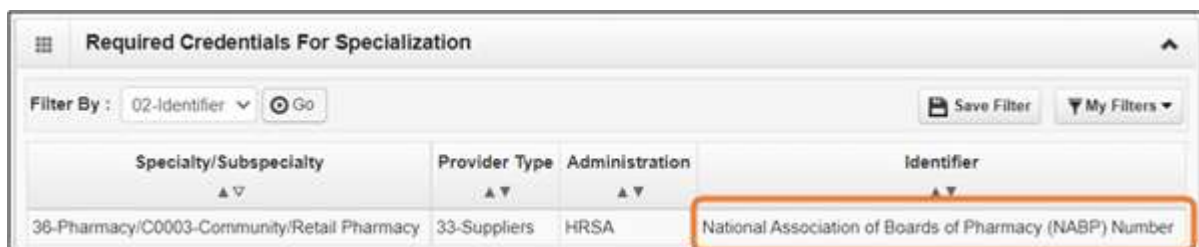
- Click **Required Credentials** from the BPW.



- 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**.



- 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.

VIEW SUBMITTED ITEMS

See your changes:

- Click **Step 7: Identifiers**.

Note: The screen will show only “Approved” entries.

Identifier Type	Identifier Value	Start Date	End Date	Status	Operational Status	Inactivation Date
Provider 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.

- Click **Go**.

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
BUSINESS LICENSE		12345678	WA - Washington	08/01/2021	08/01/2025	IN REVIEW

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

Step 14: Servicing provider information

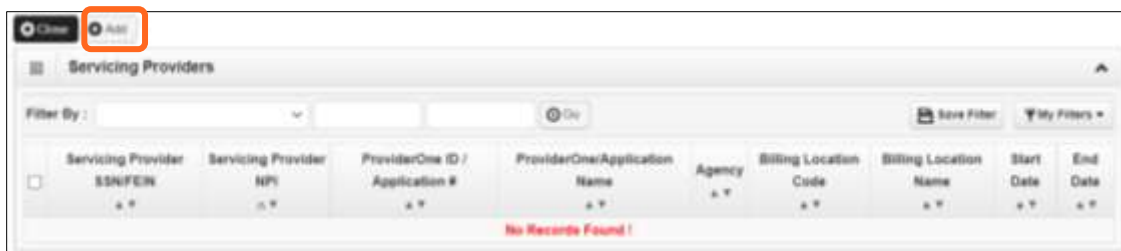
This step doesn't apply to all L&I providers. In ProviderOne, a servicing provider renders billable services for your organization.

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**.



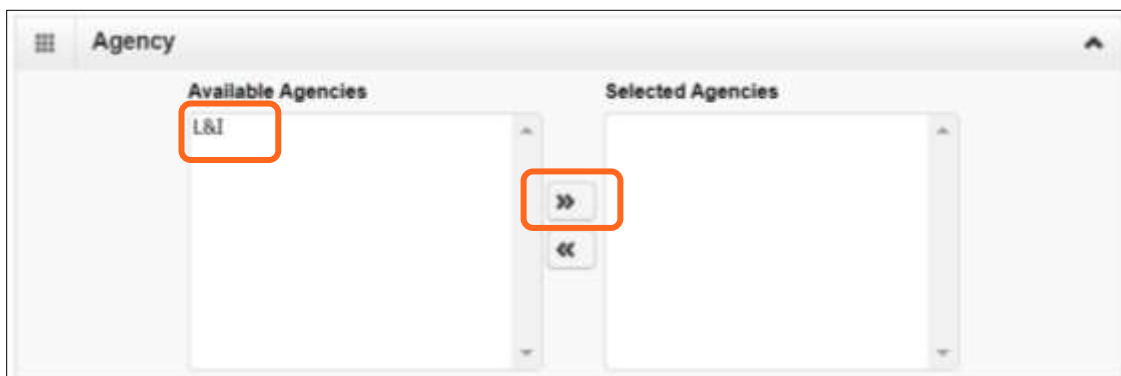
The screenshot shows a table titled "Servicing Providers". Above the table, there are buttons for "Close" and "Add", with the "Add" button highlighted by a red box. The table has columns for "Servicing Provider SSN/FEIN", "Servicing Provider NPI", "ProviderOne ID / Application #", "ProviderOne/Application Name", "Agency", "Billing Location Code", "Billing Location Name", "Start Date", and "End Date". A red message "No Records Found!" is displayed at the bottom of the table.

- 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.



The screenshot shows the "Add Servicing Provider Association" form. It contains input fields for "SSN/FEIN:", "NPI:", "Application Id:", "ProviderOne Id:", "Start Date:", and "End Date:". There is a "Confirm Provider" button at the bottom.

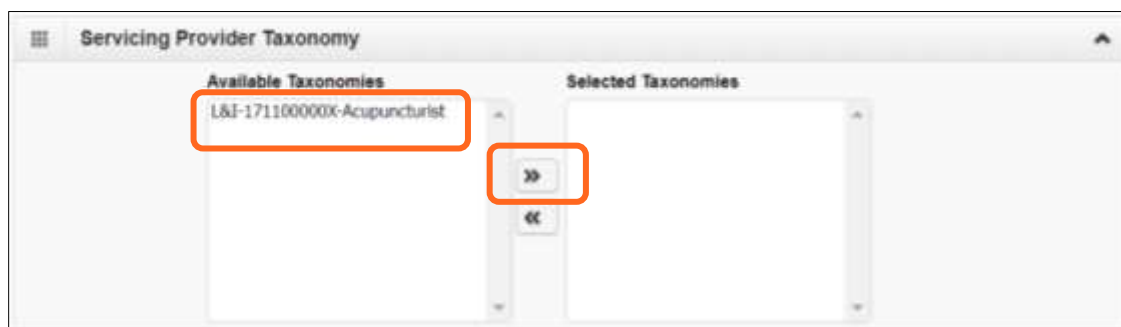
- Click **Confirm Provider**.
- If the provider is not found, go to **Provider does not exist in the database**.
- If the provider is found, L&I will display in the Available Agencies box.



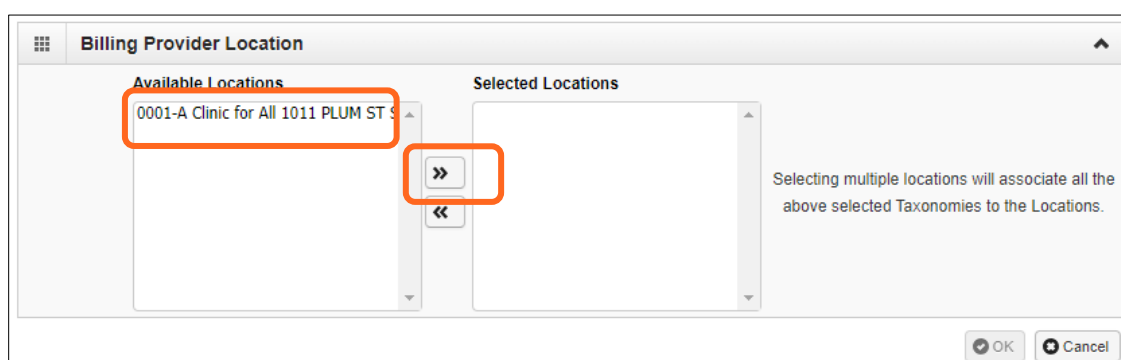
The screenshot shows the "Agency" selection interface. It has two boxes: "Available Agencies" and "Selected Agencies". In the "Available Agencies" box, "L&I" is listed and highlighted with a red box. Between the two boxes, there are double right arrows (») and double left arrows («), with the double right arrows highlighted by a red box.

- 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.



- 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 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.

VIEW SUBMITTED ITEMS

See your changes:

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

Note: The screen will show only “Approved” entries.

Servicing Provider List										
Filter By :			And					And		
Operational Status:		Active	Go							
		Save Filter		My Filters						
ProviderOne ID	Servicing Provider Name	Agency	Servicing Provider NPI	Billing Location Code	Billing Location Name	Start Date	End Date	Status	Operational Status	Inactivation Date
<input type="checkbox"/> 2222222	New, Servicing	HCA	222222222	00	A New Clinic	02/01/2022	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.

Filter By :	Status	IN %	And		And Operational Status:	Active	Go
							Save Filter My Filters

- Click **Go**.

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

License/Certification Type	License Type DOH Prefix	License/Certification #	State of Licensure	Effective Date	End Date	Status
<input type="checkbox"/> BUSINESS LICENSE		12345678	WA - Washington	08/01/2021	08/01/2022	IN REVIEW

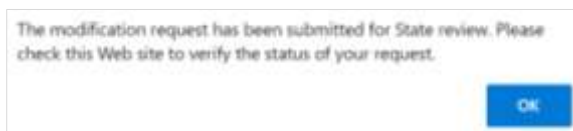
Step 19: Submit modification for review

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



Forms/Documents	Special Instructions	Agency	Link
Proof of Accreditation		L&I	
MS		L&I	http://www.ms.gov/forms/pdform.pdf
Provider Agreement		L&I	http://www.lsi.net.gov/forms/collaborationof2010.pdf
Care Provider Agreement	Complete and sign for all applications	FECA	http://www.lsi.net.gov/care-provider-agreement

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



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

OK