

How to get an L&I Provider ID and access to OHMS for Surgical Health Service Coordinators (SHSCs) and Health Services Coordinators (HSCs)¹

Step 1a (Standard setup): Best Practices Program Director or Designee –

Please work with whomever in your organization is responsible for credentialing and enrollment with L&I, also known as the “submitter”. The submitter will need to obtain a non-network L&I Provider ID for the (S)HSC by following steps found on [Become a Provider \(wa.gov\)](#).

For other questions, please contact your L&I contract manager/project lead or L&I’s Provider Accounts & Credentialing (PAC) Unit for assistance as needed. PAC Contact Information: PacMail@Lni.wa.gov.

The next step will be either 1b or 1c, dependent upon desired remittance type for HSC billing.

Step 1b (to include (S)HSC billing on existing remittance): Best practices program manager or Designee –

If a break-out by best practices program within the same remittance is desired for multiple best practices programs (ex: COHE or SQCP), a separate L&I Provider ID is needed. To get an additional L&I Provider ID, the submitter should obtain an additional Organizational NPI and establish a new domain when submitting through ProviderOne.

Step 1c (to get a separate (S)HSC best practice remittance): best practices -program manager

For multiple best practices programs (ex: COHE or SQCP), a separate L&I Payee ID is needed and (S)HSC L&I Provider IDs should be moved under it. To get an additional L&I Provider ID, the submitter should obtain an additional Organizational NPI and establish a new domain when submitting through ProviderOne.

Step 2: Best Practices Program Director or Designee –

Once the new HSC has their L&I Provider ID and a supplemental application has been completed (dependent upon best practices program requirements), the new (S)HSC needs to be enrolled in the best practices program via the OHMS enrollment process.

¹ The two roles together will be referred to as (S)HSC throughout this document.

Step 3: L&I Contract Manager/Project Lead –

Approves the new (S)HSC enrollment (the (S)HSC’s OHMS information will be updated in an overnight process). The new HSC will not be able to complete/submit any case notes in OHMS until their enrollment in the best practices program is processed.

Step 4: (S)HSC –

The new (S)HSC needs to create a My L&I account via [My L&I: Login or sign up \(wa.gov\)](https://www.wa.gov/myl-i), if they do not have one already, and request access to OHMS as a member of the specific best practices program.

For assistance navigating the My L&I account creation process please contact L&I’s Web Support Unit at 360-902-5000 or WebSupport@Lni.wa.gov.

For technical assistance not related to the My L&I account creation process, please email the OHMS Help Desk (OHMSHelp@Lni.wa.gov).

Step 5: Best Practices Program Director or Designee –

Needs to send the following information to the OHMS Help Desk so that the new (S)HSC’s user profile can be built in OHMS:

- a. My L&I (SAW/SEAP) User Login ID – this will also be their OHMS userid
- b. Work email
- c. L&I Provider ID (associated with the best practices program)
- d. Legal first name and last name
- e. Title
- f. Work phone number

Step 6: OHMS Help Desk –

Will set up the new (S)HSC’s user profile in OHMS, approve the My L&I access request and notify everyone that the new (S)HSC that their set-up is complete.

At this point, the new (S)HSC will be able to come into OHMS, view best practices program claims and create (S)HSC case note to document care coordination work.

Step 7: Best Practices Program Director or Designee –

If the new (S)HSC is going to be assigned to work on claims for specific best practices program’s enrolled providers, those providers’ care coordinator assignments in OHMS need to be updated to the new (S)HSC.

For technical assistance, please email the OHMS Help Desk (OHMSHelp@Lni.wa.gov).

The Care Coordinator Assignments by Provider Report in OHMS can be run to assist with this effort.

Notes for more information regarding:

- Types of billing: MAVEN Billing vs. Manual Billing Overview document.
- Transitioning billing types: Transition a BP to OHMS Billing document
- Individual provider billing codes: MARFS Chapter 22.