

The Department of Social and Health Services implemented a new payment system named ProviderOne on May 9, 2010. While the implementation has been better than anticipated, the Department recognizes there are some stumbling blocks for provider organizations.

If you are experiencing problems in the following areas, please give the tips below a try.

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Paper Claim Processing

For a variety of reasons paper claim processing is slow (taking up to 45 days) and once processed, less than 10% currently result in payment. If you need to make a correction and resubmit your claim, that's a long time to wait for payment. The Department is urging providers to try directly entering claims in ProviderOne where you can see immediate results.

You may wonder why the paper processing takes so long and so few paper claims are paying. While there is new equipment to automate, it is still a very manual process – particularly if forms are handwritten. The Department receives about 13-15,000 documents for processing each day and is working the bugs out of new equipment that staff are adjusting to using. Other contributing factors are that some providers are using old forms that can't be processed in the new system; some are not providing the right information or in the right spot on the form; and some are sending in duplicate claims before they show up on remittance advice which contributes to the backlog.

Tips:

- Try billing electronically! Claims entered on the web are paying at 60% with payment usually received within one (1) week. Visit the ProviderOne training page for live webinar opportunities to ask questions, recorded step-by-step instructions called E-Learning and manuals <http://hrsa.dshs.wa.gov/providerone/Provider%20Training.htm>
- If you have no option but to bill on paper, follow the *Tips for Successful Paper Billing* at <http://hrsa.dshs.wa.gov/providerone/Providers/Fact%20Sheets/P1PR018.pdf>

- Ensure you are billing correctly.
Please refer to the *ProviderOne Billing and Resource Guide* and the *Billing Instructions* to ensure you are billing correctly. The *Billing and Resource Guide* is a user friendly guide that takes providers through the processes for billing covered services. It includes system screen shots, information required and where to put it.

ProviderOne Billing and Resource Guide

http://hrsa.dshs.wa.gov/download/ProviderOne_Billing_and_Resource_Guide.html

Billing Instructions

<http://hrsa.dshs.wa.gov/Download/BI.html>

Telephone Inquiries through 1-800-562-3022

The Department is receiving 3 to 4 times the normal volume of calls. With tough budget times, there are just not enough staff to meet the call demand. Providers have self-service options for many of the top call reasons (obtaining the ProviderOne client ID, client eligibility, claim status, authorization numbers, warrant information, using the system, and billing correctly).

Tips:

- Use self-service options whenever possible to avoid waiting
- Refer to the fact sheet *Provider Call Flow* to help you navigate self-service options through the telephone and common extensions
<http://hrsa.dshs.wa.gov/providerone/Providers/Fact%20Sheets/P1PR016.pdf>
- Hints about calling: If you press “0” to speak to an agent before self-selecting options, you will wait even longer in a general queue. Wait times are typically less early in the morning from 7-8:00 a.m.

Electronic Claim Processing

Overall, electronic claim processing in ProviderOne is going extremely well. If you haven’t tried electronic transactions in ProviderOne, you should give it a try. Providers who try it for the first time often tell the Department they will not go back to paper.

Tips:

- Overall, the system is performing well. But, with any system of this size there are some bugs to work out. Check our Discovery Log for any known issues that are open and potential workarounds
<http://hrsa.dshs.wa.gov/ProviderOne/documentation/DiscoveryLog.xls>
- New to electronic billing? Visit the Department’s training page for live webinar opportunities throughout July to see a demonstration and an opportunity to ask questions
<http://hrsa.dshs.wa.gov/providerone/Provider%20Training.htm>
- Ready to give it a try – or just need a quick reminder on a certain step like making an adjustment? Visit the ProviderOne E-Learning center
<http://hrsa.dshs.wa.gov/providerone/ELearning.htm>

Prior Authorization

With ProviderOne there is a new Authorization Form (13-835), some processes have changed, and there are self-service options to monitor the status of an authorization.

Tips:

- Visit our training page for a recorded webinar or the PowerPoint slides on *Prior Authorization and ProviderOne*. The webinar includes an overview, instructions, and tips on what to do and what not to do.
<http://hrsa.dshs.wa.gov/providerone/Provider%20Training.htm>
- Read frequently asked questions, helpful hints, and authorization instructions for the most common service types at <http://hrsa.dshs.wa.gov/Authorization>
- You can check the status of a PA through a 2-step process – obtain the number via self-service features by calling 1-800-562-3022 and following the prompts. Once you have the number, you can check the status via ProviderOne (start on slide 25 of presentation <http://hrsa.dshs.wa.gov/providerone/Webinars/MedicalPriorAuthWebinar.ppt>)

Obtaining the Client's ProviderOne Client ID Number – the 9-digit “WA” number

The ProviderOne client ID number is needed for verifying eligibility, submitting prior authorizations, and billing. Some refer to it as the “WA” number because all IDs contain 9 numerals followed by WA.

Tips:

- The ProviderOne client ID number is printed on the client's Services Card – if they have it (it can take several days to receive after becoming eligible for services).
- If you know the Personal ID Code (PIC) that was assigned to the client in the old payment system (even if you did not bill us for the client), we have a web based tool that you can use to look up the new ProviderOne client ID. It is a simple tool meant only to look up one ID at time – there is no download feature. It will not return eligibility or other client information. The tool is available at <https://fortress.wa.gov/dshs/npicaphrsa/FrontDoor.aspx> Select “Find P1 Client ID from any PIC”. You will need your National Provider Identifier (NPI) and tax ID to access the tool. This tool will not work for new clients who became eligible for services after April 23, 2010, since these clients were not assigned a PIC. This is a temporary tool meant only to assist with the transition.
- Use the eligibility inquiry feature in ProviderOne using the client's name, date of birth, or social security number.

We are working on an enhancement in ProviderOne that will return the ProviderOne client ID on the automated telephone system. That feature is anticipated to be available near the end of July.

Client Eligibility

You should always verify the services a client is eligible for. There are several free and low cost options to verify eligibility through ProviderOne outlined in the fact sheet below.

Tips:

- Review *Options for Verifying Client Eligibility*
<http://hrsa.dshs.wa.gov/providerone/Providers/Fact%20Sheets/P1PR003-Options%20for%20Verifying%20Client%20Eligibility%20050508.pdf>
- Visit our training page for a recorded webinar or the PowerPoint slides on *Interpreting Client Eligibility Information* <http://hrsa.dshs.wa.gov/providerone/Provider%20Training.htm>

Taxonomy

One of the top reasons claims deny in ProviderOne is for missing or incorrect taxonomy. Taxonomies are new with ProviderOne and one of the biggest challenges when billing ProviderOne.

Tips:

- Review the recorded webinar or PowerPoint slides on Billing Using Taxonomies on Claims on our training page <http://hrsa.dshs.wa.gov/providerone/Provider%20Training.htm>
- Review the fact sheet *Using Taxonomy in ProviderOne* <http://hrsa.dshs.wa.gov/providerone/Providers/Fact%20Sheets/P1PR009%20taxonomy.pdf>
- Review the Numbered Memo 10-22 for details on taxonomy code requirements and where to place them on a claim at <http://hrsa.dshs.wa.gov/download/Memos/2010Memos/10-22.pdf>

Common Reasons Claims deny

Information about two of the top claim denial reasons are covered above – ProviderOne client ID and taxonomy. Some other common reasons claims deny is a mismatch on the client's date-of-birth or duplicate claims.

Tips:

- Ensure the correct ProviderOne client ID and taxonomies are correct and inserted correctly in the claim.
- Verify that the client's date of birth on your claim matches the ProviderOne eligibility inquiry. If the date is different on the inquiry, your claim will deny. DO NOT USE the client ID from the test system. In many cases it is for a different client and as a result the claim denies because the date of birth doesn't match our records (because it is for a different person).
- Please wait for your initial claim to pay or deny. If your claim is in process, it is being worked by our claims team and has not finished processing yet. Please wait to call about these claims until they pay or deny.

Remittance Advice

The Department is exploring what can be changed on the new ProviderOne Remittance Advice (RA) – available electronically only. A workgroup is being formed to explore changes based on comments from providers that the RA is too long, there is missing data that was provided on the old RA that providers find useful, and overall usability.

Tip:

- Learn how to view/download remittance advice through E-Learning. You will need to select Professional Fee-for-Service Claims, Institutional Fee-for-Service Claims, or Dental Fee-for-Service claims and then "View and/or Download the Remittance Advice." **It only takes about two minutes to review!** <http://hrsa.dshs.wa.gov/providerone/ELearning.htm>

Choosing the Appropriate Provider from the “Managed Care Information” Screen

ProviderOne’s Benefits Inquiry screens show enhanced managed care information. We have included more information than you’ve seen before, including regional support networks (RSNs) and chronic care providers; **some of it is not applicable to clients only accessing medical services**. This has caused some confusion for providers when trying to coordinate managed care services.

Tip:

- Read *Choosing the Appropriate Provider from the “Managed Care Information” Screen* at <http://hrsa.dshs.wa.gov/providerone/documentation/RSNs-ManagedCare.pdf>

Learning How to Use ProviderOne

Maybe you are just beginning to learn the new system or just need a refresher. Several options are available.

Tips:

- E-Learning – watch, listen and learn how to use various features of the system. The nice thing about these sessions is you don’t have to spend hours watching – each step can be viewed separately and the run time is indicated so you will know how long it will take. For example, the step for viewing/downloading remittance advice is 2 minutes 17 seconds! You can access E-Learning topics at <http://hrsa.dshs.wa.gov/providerone/ELearning.htm>
- Tutorials <http://hrsa.dshs.wa.gov/providerone/ProviderTutorials.htm>
- ProviderOne System User Manual <http://hrsa.dshs.wa.gov/providerone/Provider%20System%20User%20Manual.htm>

New Provider Enrollment

With ProviderOne there’s a new web site for providers to self-enroll as a new Medicaid provider.

Tip:

- Visit enrollment website <http://www.dshs.wa.gov/provider/enroll.shtml>! Once there, providers will be walked through the online application process, and given a list of documentation they’ll need handy in order to enroll.

The Department of Social and Health Services will continue to process paper applications already received and any new paper applications received by July 1, 2010. After July 1, enrollment applications must be made online.

Billed in Old System but no Idea Where to Start with ProviderOne?

Maybe you only bill Medicaid every now and then and haven’t done any of the preparation steps to ensure you can bill, be paid correctly, and obtain your remittance advice in ProviderOne.

Tip:

- Start with the Department’s Short-Cut Guide to Getting Ready for ProviderOne on the web at <http://hrsa.dshs.wa.gov/providerone/documentation/6-step%20guide%20to%20post.pdf>

What is Different with ProviderOne?

You can read about the key changes that occurred with the ProviderOne implementation at <http://hrsa.dshs.wa.gov/providerone/Providers/Fact%20Sheets/P1PR012.pdf>

Keeping Informed

The Department has a robust provider website for ProviderOne with general updates, questions and answers, fact sheets, tips, training, reports, system discoveries and more at <http://hrsa.dshs.wa.gov/providerone/Providers>

Tips:

- Review the Discovery log for known issues and workarounds
<http://hrsa.dshs.wa.gov/ProviderOne/documentation/DiscoveryLog.xls>
- Reports are available for providers by tax ID on experience in the old system as well as ProviderOne. Daily dashboard reports are available as well
<http://hrsa.dshs.wa.gov/ProviderOne/reports.htm>
- Sign up for an email list for ProviderOne
http://listserv.wa.gov/archives/providerone_provider_readiness.html
- Sign up for other Department email lists for information about policy, rates, and other information at <https://fortress.wa.gov/dshs/hrsalistsrvsignup/>