How to Get Paid

- 1) Set up Direct Deposit
- 2) <u>Register for the Provider Portal</u>
- 3) <u>Claim an Invoice</u>

Set up Direct Deposit

DCYF highly recommends setting up Direct Deposit to streamline payments. With Direct Deposit you do not have to wait for paper checks to be sent through the mail.

Forms are available at <u>https://ofm.wa.gov/it-systems/accounting-systems/statewide-vendorpayee-</u> <u>services</u> under the *DCYF and SSPS Provider Registration Forms* heading when you scroll down on the page. You may choose to download and manually complete, sign, and submit PDF forms OR use the DocuSign option to fill out the forms online and sign electronically from the OFM site. PDF forms that can be printed, signed and submitted are also available on the SSPS Direct Deposit site (<u>Direct Deposit</u>] <u>Washington State Department of Children, Youth, and Families</u>) under the *Registration and Change Forms* header. You cannot use DocuSign to electronically submit using forms accessed on the SSPS Direct Deposit site.

To use DocuSign, you must first validate your email address with an access code. Please follow the instructions in the following link if you would like to set up DocuSign: <u>SubmitVendorFormsWithDocuSign.docx (live.com)</u>

To sign up for Direct Deposit, you must complete two forms:

1) Complete the Direct Deposit Authorization Form online with DocuSign or print and complete manually.

Link to form: <u>DocuSign</u> or PDF <u>Provider Direct Deposit Authorization Form (wa.gov)</u>

- If you complete the PDF manually, you must print and sign the form and submit to DCYF. To submit you may:
 - Scan the signed form to PDF and email to ProviderFileUnit@dshs.wa.gov.
 - Mail a printed and signed copy to DCYF, PO Box 45812, Olympia, WA 98504.
- 2) Complete the DCYF Provider Registration Form online with DocuSign or print and complete manually.

Link to form: DocuSign or PDF Provider Registration Form (wa.gov)

- o In Part B section 3 of the form, foster parents should check the box for Individual.
- If you complete the PDF manually, you must print and sign the form and submit to OFM. To submit you may:
 - Scan the signed form to PDF and email to <u>ProviderFileUnit@dshs.wa.gov</u>.
 - Mail a printed and signed copy to DCYF, PO Box 45812, Olympia, WA 98504.

Note that it takes about 4-6 weeks to process forms and get Direct Deposit setup. It is likely that you will receive at least one paper check between when you submit the forms and when the deposit is set up. You may call (360-664-6161) or email (<u>DSHS_SSPSMail@dshs.wa.gov</u>) SSPS Customer Service to check the status of your Direct Deposit. With Direct Deposit you will still receive by mail social service notice letters notifying you of an entered or closed payment with your provider number and paper remittance advices that notify of the reason for a payment.

Register for SSPS Provider Portal

Sign up for the Social Services Payment System (SSPS) Provider Portal to simplify the payment process. In the portal you can:

- Review the invoice information you have provided and make changes
- Easily update an address, phone number, or email address
- Contact SSPS with questions
- View real-time invoicing and see all remittances, invoices and tax documents in one place

More information about the Provider Portal at <u>https://www.dcyf.wa.gov/services/ssps</u>

You must have a Secure Access Washington (SAW) account to register for the SSPS Provider Portal.

Link to instructions: SSPS PortalSAW Access Guide

To register for a SAW Account:

- 1) Go to https://secureaccess.wa.gov
- 2) Click SIGN UP on the login page:

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USERNAME	WASHINGTON		
PASEATORD	AGENCIES		
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3) Check to make sure you do not already have an account by clicking the "check here" link on the Sign Up page and following the directions. If an account already exists associated with your email, the system will help you recover your username and password.





4) If no account exists, click the "create a new account" link.



- 5) Enter you information as prompted on the Sign Up for Account screen.
 - a. First Name
 - b. Last Name
 - c. Primary Email
 - d. You may also choose to enter an additional email address and / or mobile phone number to receive security codes and reduce the change of losing access to your account. This is optional.
- 6) Create a Username and Password, check the reCAPTCHA checkbox then click the "Create my account" button.



Username and Password

Username	
Password	
Confirm Password	
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Privacy Policy Create my a	iccount

7) Activate your account by clicking on the link sent via email from <u>secureaccess@cts.wa.gov</u> to the email address you have registered.

S secureAccess@cts.wa.gov SecureAccess Washington : Welcome to SecureAccess Washington
You are almost finished,
Thank you for signing up with Secure Access Washington.
Your username is: ABC123
To activate your account, please click: https://secureaccess.wa.gov/public/saw/pub/regConfirm.do?s=76937&userid=ABC123
For questions or concerns about your SecureAccess Washington account, please visit https://secureaccess.wa.gov/public/saw/pub/help.do
Thank you,

The Secure Access Washington Team

- 8) Login to your account on the SAW Login page: <u>https://secureaccess.wa.gov</u>
- 9) Click the "Add a New Service" button.





10) Select "I have been given a code by an agency".



11) Enter the agency code 2795 in the box displayed and click "Submit".

12) Enter your SSPS provider number in the box. This is not the same as your FamLink provider number listed on your placement letter. If you do not know your provider number, you can email <u>DSHS_SSPSMail@dshs.wa.gov</u> or call SSPS Customer Service at 360-664-6161 to get it.



13) Enter your First and Last name and a security token and click submit.

a. Email <u>DSHS_SSPSMail@dshs.wa.gov</u> or call SSPS Customer Service at 360-664-6161 to request your security token.

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14) A Registration Complete box will show up. Click OK.

- a. If your registration says pending or anything other than complete, email <u>DSHS_SSPSMail@dshs.wa.gov</u> and provide your SSPS Provider Number and the issue will be corrected.
- 15) The service page will now show SSPS Provider Portal provided by Department of Social and Health Services. Click on the "Access Now" button next to the service.
- 16) Select a multi-factor authentication option, phone or email. You will receive a security code sent to whichever you select.
- 17) Enter your security code in the MFA box and hit "Submit"
- 18) Click "Continue" to connect to the portal.



To access the portal in the future, login to your SAW account from the login page (<u>https://secureaccess.wa.gov</u>) and select "Access Now" next to the service which will now be listed - SSPS Provider Portal provided by Department of Social and Health Services.

Opt in to Email Notifications from the Portal

Once you are registered for the SSPS Provider Portal, you may opt to receive email notification when an invoice is available in the portal for review. To opt in, while in the Portal select Message Center from the dropdown menu under Provider Information on the top left of the home screen. Then toggle the button ON in the top right of the Message Center where it says "send



me an email when I have a new message". When this is ON you will receive email notification when a new invoice is available in the Portal and when a payment is generated.



Claim an Invoice

Invoices can be verified using Invoice Express telephone entry. You can also verify invoices using the Provider Portal, which DCYF recommends. Do not verify invoices using both Invoice Express and the Portal as this will cause payment issues and delays.

Follow the directions below to claim an invoice online in the SSPS Provider Portal.

- 1. From the **Claims** link on the menu bar, click on the **Invoices** link in the dropdown list.
- 2. Click on the invoice number of the invoice you would like to view/claim.
- 3. Click on any page number whose Status is Unclaimed (preferably the lowest unclaimed page number.)
- 4. You will be able to tab through each field in which data entry is allowed.
- 5. You may use the SAVE function to save an incomplete page or for later review and submission.
 - a. When you click the SAVE button, there is no validation for correct or complete data.
 - b. You may save a page as many times as needed.
 - c. No saved data will be processed for payment; you must return to the page and click SUBMIT in order to be paid for that page.
- 6. When you have completed all the required fields on the page and checked your entries, click SUBMIT.
 - a. When submitting an invoice in SSPS Provider Portal, the only field you should modify is the Total Authorized field. Do not make changes to other fields.
- 7. You will see a message telling you the page has been submitted.
- 8. <u>Once a page has been submitted for claiming, you cannot change it</u>. If you discover that you have entered something incorrectly, you must contact your client's caseworker to submit a payment adjustment.
- 9. Click on NEXT PAGE to continue claiming or click on Return to Invoice Pages list.

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Please see the <u>SSPS Provider Portal Invoice Information</u> document or the <u>How To Use This Site</u> document for more details about the Portal functionality.

Follow the directions below for verifying invoices using Invoice Express. When you see numbers in parentheses after the step, example ⁽¹⁾, refer to that number in the visual below the numbered steps.

Link to Invoice Express Call-In Script: Welcome-Invoice-Express.pdf (wa.gov)

- 1) Call 1-888-461-8855 and follow voice prompts.
- 2) Press 1 to complete an invoice.
 - a. You can also press 2 to check on the status of a payment.
- 3) Enter the type of invoice which is listed in the upper left corner of your invoice⁽¹⁾.
 - a. Press 1 for Regular.
 - b. Press 2 for Supplemental.
- 4) Press 1 to confirm the invoice type you have selected is correct.
 - a. If you have selected the incorrect invoice type, press 2 to go back to the invoice type selection.
- 5) Enter the first three numbers of your invoice number which is listed in the first gray shaded box of your invoice⁽²⁾.
- 6) Enter the last six numbers of your invoice number. These are the six numbers that follow the first three numbers of the invoice number, a letter, and a dash⁽²⁾.
- 7) Enter your Payee Number listed in the box next to your invoice number⁽³⁾.
- 8) Wait for a verbal confirmation that your invoice has finished processing.
- 9) Enter the page number you want to complete, followed by the pound (#) sign. The page number is listed at the top left of the invoice, in between the invoice number and the Payee Number. Line items from each page number must be submitted separately.
- 10) Enter each of the line items from the current page of your invoice:
 - a. Each line has a reference number in a gray box⁽⁴⁾ that shows the amount you will receive for your service and how many units in hours, days or both, that you are authorized to receive payment.
 - b. Enter the number of hours, days or both that you are authorized to receive payment for as listed following the reference number and press pound (#).
 - i. The system will state the number of units you have entered and ask you to confirm it is correct. If it is correct, press one. If the number is not correct, press 2 and you can reenter the number.
- 11) For monthly service, the system will ask if you provided any of the services listed. Press 1 if you have or press 2 if you have not.

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- a. If you provided all of the days authorized, Press 1. Press 2 if you did not provide all of the days authorized.
 - i. If you press 2, enter the number of days you provided service then press pound (#).
- 12) After all lines have been entered, you may choose to review your invoice by pressing 1 and the system will read back your entries. Press 2 if you do not want to hear the entries.
 - a. After the entries are reviewed, or if you press 2, the system will ask you to confirm that your entries are correct.
- 13) To confirm that your entries are correct, press 1.
 - a. If you do not believe entries are correct, press 2 and the system will allow you to change entries.
- 14) Press star (*) to submit the current page of your invoice.
- 15) Wait for the verbal confirmation from the system "You have successfully submitted your invoice."
- 16) To complete another page of the invoice, Press 1.
 - a. Press 2 to complete a different invoice or to end the submission process.
- 17) Complete steps 10-16 again until each additional invoice page has been submitted.



 Jse your invoice o report services telephone You will be asked to use numbers on your telephot to enter the first 3 digits then the 6 digits after the letter and dash of your In Number. 	the and e tvoice	ur first question to a lling Invoice Express voice is Regular or Su swer to that question To make sure no your invoice by te asked to enter th in this gray shade	nswer when is whether yo pplemental. 1 is found her other person slephone, you e payee numl ed box.	ur The e. can get to will be ber shown	Invoice Express will read the last 4 digits of your reference number, so that you will know which line you are on. The lines will be read to you starting with 0001, until you have entered the number of units you have served or a 0 on all service lines.
INVOICE CUPPLEMENTAL Pacific HUBBER Pacific	001 PAYER HILL 99999 PARTICULAR ERVICE PAYMENT SYST	999999 INS 1. Fill in all blank 2. Do not send n attachments dolayed. 3. Sign the invoic 3. Sign the invoic	FOR MONTHERICING. 05-31-9 TRUCTIONS TO VEND pink boxes on all line bas or attachments. Ill be returned to you e and keep the blue (9 DR: s with services, Any notes or and payment will be copy for your records.	6 Invoice Express will read to you the type of service unit. In the case of months (MON), you will be able to report either a full month or a partial month by reporting the number of days served (DA).
P Rardin, Franida ♀ 401 W Mullan St E Spokane, WA 99223		Rardin, Franida 401 W Mullan St Spokane, WA 993	223		When you are asked to enter the units, use the numbers on your telephone number pad.
SERVICE RECIPIENT CHARLES, CHAZ SERVICE NAME FS RESPITE CARE-HOURLY CASE NAME CASE NAME CHARLES, CHAZ SERVICE RECIPIENT CHARLES, CHAZ DDD FS TRANSP - MILES TATE NAME NUMERIAL CHARLES, CHAZ SERVICE NAME SERV	SERVICE PERED 05/01/99 70 05/31/99 WORKERID 2 368/016 HINDO 05/01/99 70 05/31/99 10 05/31/99 10 05/31/99 10 05/31/99	ANCOURT AUTHORIZED AUTHOR \$689,9,2 AUTHOR 001-01-0001 AUTHOR AND ALL AND AUTHOR SPECIAL AND ALL AND AUTHOR AUTHOR \$100 - 000 AUTHOR AND ALL AND AUTHOR AUTHOR \$100 - 000 AUTHOR \$100 - 000 AUTHOR \$100 - 000 AUTHOR	9410RATE SERVICE 6 • 18 HR HR HR REEDRATE SERVICE 0 • 31 MI	1944 1958 1944 1958 1944 1945	These are the bolded boxes



Updated November 8, 2023