

Developmental Disabilities Administration Frequently Asked Questions Contracts

I have a contract with the Developmental Disabilities Administration (DDA) – what next?

This Frequently Asked Questions is for all contracted 1099 providers (Independent Providers). If you are not a 1099 provider, please call your local DDA office and ask for the contracts department:

<i>Office Location</i>	<i>Phone Number</i>
Everett	425-740-6500
Seattle	206-568-5685
Spokane	509-329-2900
Tacoma	253-404-5500
Tumwater	360-725-4250
Yakima	509-225-7970

Q: How do I get referrals to my business?

A: DDA clients, their family/representative or a DDA Case Manager may contact you.

Q: A client would like to use my service. What do I need to do?

A: DDA must approve services. DDA will send you the DDA client assessment and Person Centered Service Plan (PCSP), which lists you the provider and how many support hours you are authorized. You cannot be reimbursed for services unless you are listed as a provider on the client's PCSP. Initial consultation is not a paid service.

Q: How am I paid for the services?

A: The DDA Case Manager authorizes payment through the ProviderOne payment system. Most contracts require that you be pre-authorized in ProviderOne. After you work, you can claim and be paid weekly. Some contracts specify whether you must provide the case manager with a report/invoice before payment is made. If invoices/reports are required, you may not have an authorization in ProviderOne or the ability to submit claims until after the invoice is reviewed by the Case Manager.

By contracting with DSHS, you are a provider with Medicaid. The contract enrolls you as a Medicaid provider and all rules governing Medicaid apply to you. If the service you are contracting to perform is classified as a healthcare service, you will be required to provide your National Provider Identifier and be enrolled with the Health Care Authority (HCA) as a medical provider in addition to your social service contract.

All new providers will receive a "welcome" letter from HCA with your new ProviderOne

instructions. After you receive the welcome letter, you can finish setting up your account in ProviderOne.

[Training Materials](#) from HCA

Q: What do I do after my ProviderOne registration is complete?

You will receive notification every time an authorization is changed for each individual you serve. You will need the authorization details when you submit your claim. Once a service has been authorized, you can log into your account and claim payment for services provided. If you are unsure if you are a 'social services' or 'social services medical' provider, please call your local DDA office and ask for the resource developer.

Q: Who do I call if I need help submitting a claim to ProviderOne?

A: Technical Support: Health Care Authority (HCA) contact: 800-562-3022 press 5 then 1, or by submitting an online [form](#).

Q: What if the rate authorized is different than I expected?

A: Contact the authorizing DDA case manager.

[Rate information](#)

Q: What are contract documentation requirements?

A: Some services require you to provide documentation such as quarterly reports. You can locate requirements in your contract in the Statement of Work section.

Q: Where can I find information about Waiver services?

A: You can contact the assigned case manager for service or program information.

- [Information](#) on Home and Community Based Services Waiver programs
- [Service descriptions and limitations](#)

Q: Who do I call if I have questions about being a DDA provider?

A: Visit [DDA Contracts](#) to locate the phone number to the office nearest you or refer to the contacts at the top of this document.