Updating Provider Information: Table of Contents

This quick reference guide (QRG) provides examples of steps from a provider enrolled as a group, individual, or facility. The Servicing Providers step is applicable to groups.

The ability to update provider information requires users be assigned one or more of the following profiles:

- **EXT Provider File Maintenance**

- **EXT Provider Super User**

Note: This QRG is intended for Providers with an existing Provider Portal account. To be redirected to the steps required to update Provider information within the Provider Portal, select a link above.

Selecting Provider ID and Profile

1. After logging into the WCMBP System portal with the applicable username and password, select the appropriate Provider ID from the **Available Provider IDs** drop-down list.

2. To continue to the Provider Portal, select **Go**.

Selecting Provider ID and Profile

3. Select the applicable profile from the **Profile** drop-down list:
- EXT Provider File Maintenance
- EXT Provider Super User

Note: If a Provider does not have access, they can contact the institution's administrator

Welcome to the Workers' Compensation Medical Bill Process System

eCAMS™ HCE✓

Select a profile to use during this session:

Profile: EXT Provider File Maintenance ⌄ * ⊙ Go

4. Select **Go**.

Welcome to the Workers' Compensation Medical Bill Process System

eCAMS™ HCE✓

Select a profile to use during this session:

Profile: EXT Provider File Maintenance ▼ * ⊙ Go

Updating Information

To navigate to the **View/Update Provider Data** page, select the **Maintain Provider Information** link from the **View/Update Provider Data-Individual** page.

Bills
Bill Inquiry
View Payment
Bill Adjustment
On-line Bills Entry
Resubmit Denied Bill
Retrieve Saved Bills
Manage Templates
Create Bills from Saved Templates
View Accounts Receivable
Fee Schedule Calculator
Claimant
Eligibility Inquiry
Case Look-up
Authorization
On-line Authorization Submission
Provider
Maintain Provider Information
HIPAA
Submit HIPAA Batch Transaction
Retrieve HIPAA Batch Responses
SFTP User Details
Admin
Maintain Users
Switch OWCP Provider ID
My Interactions
Correspondences

Updating Basic Information

1. Select **Step 1: Basic Information**.

2. Make the necessary updates to any of the editable fields, then select **OK**.

Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.

Updating Location

1. Select **Step 2: Location**.

2. To review the physical and mailing addresses, select the **Location Name**. The **Location Details** page opens.

Updating Location

3. On the **Location Details** page, verify the **Contact Last Name**, **Contact First Name**, and **Phone Number** fields.

4. To modify the Mailing or Physical address, select the hyperlink corresponding to the address type, which will allow updates to the address.

Updating Location

5. Enter the new address and zip code in the relevant fields.

6. Select **+ Validate Address**.
Note: If the address is valid, the **City/Town**, **State/Province**, **County**, and **Country** fields will auto-populate.

Updating Location

7. Once the system validates the address, select **OK** at the bottom right.

8. Review your information, then select **Save**.
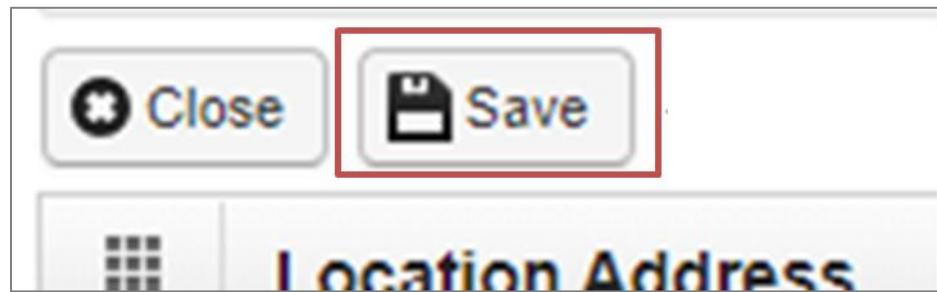
Updating Location

9. Select **Close**.

Note: When the updated location is approved, the new entry will replace the previous location entry. This ensures that any modifications are reflected accurately in the system without removing historical data until approval.
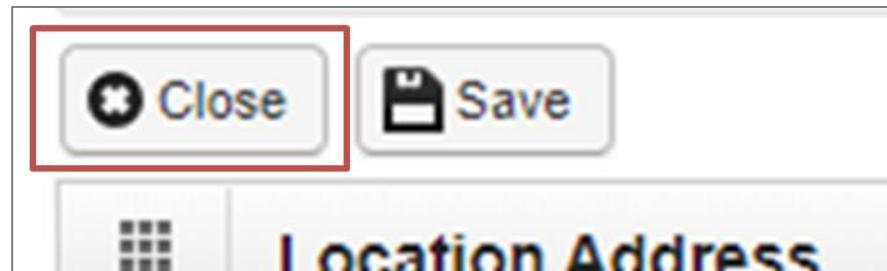

10. To exit, select **Close** at the top of the **Provider Locations List** page.

Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.
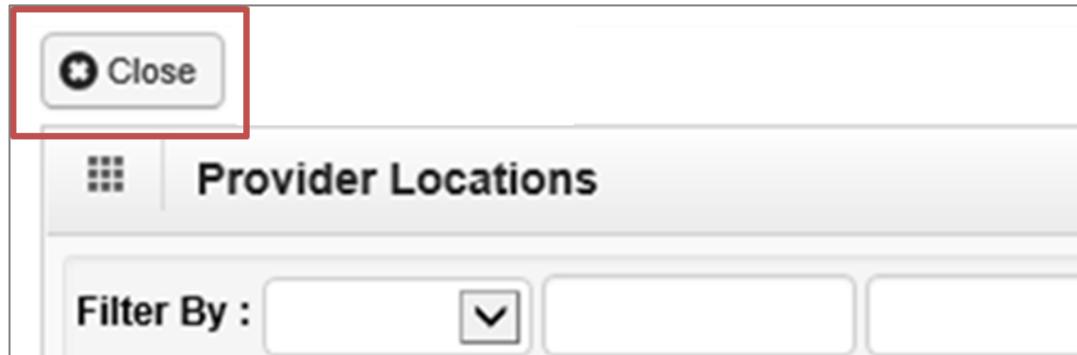
Updating Taxonomies

1. Select **Step 3: Taxonomies**.

Note: Depending on the Provider Type selected during enrollment, this step may not be required.

The provider can choose to add more taxonomies with the **Add** button, remove or modify an existing taxonomy with the **Update** button, or exit this page with the **Close** button. There is no limit to the number of taxonomies that can be added to an application.

Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.

Updating Taxonomies

2. To add more taxonomies, select **Add**.

3. Select the taxonomy code and specialty from the **Taxonomy Code Type** and **Specialty** drop-down lists.

Updating Taxonomies

4. To update an existing taxonomy, select the taxonomy code the provider wishes to update then select **Update.**

☑	Taxonomy Code ▲▽	Type ▲▼	Specialty/Subspecialty ▲▼	Start Date ▲▼	End Date ▲▼	Operational Status ▲▼	Status ▲▼	Inactivation Date ▲▼	End Reason ▲▼
☑		20-Allopathic & Osteopathic Physicians	7R-Internal Medicine/00000-Internal Medicine			Active	Approved		

Note: The **Update** button is located on the right side of the **Add** button.

Close   **Add**   **Update**

Updating Taxonomies

The **Manage Taxonomy** page opens.

5.   Make the necessary updates to any of the editable fields, then select **OK**.

Note: If this is the only step requiring an update, the provider can proceed to the final step, [Submitting Maintenance Request for Review](#). Otherwise, the provider proceeds to the next step.

Taxonomy Code	Taxonomy Type	Specialty/Subspecialty	Start Date	End Date	Status
	20-Allopathic & Osteopathic Physicians	7R-Internal Medicine/00000-Internal Medicine			Approved

Manage Taxonomy

View Page: 1   ⊙ Go   ＋ Page Count   **Viewing Page: 1**   « First   ‹ Prev   › Next   » Last

⊠ SaveToCSV

● OK   ● Cancel

Updating Ownership Details

1. Select **Step 4: Ownership Details**.

2. To add ownership details, select **Add**.

Updating Ownership Details

3. To update the Ownership List, select the **Owner ID** link and make the designated changes.

   Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.

Updating Licenses and Certifications

3. On the **License/Certification List** page, select the **License Category** field to display the link for License and Certification.

4. Select **Add** at the top of the **License/Certification List** page.

Note: The **Add** button is available to add a new license number and info.

Updating Licenses and Certifications

5. To save the license or certification information, select **Save** at the top of the section.

6. After saving, a message will appear indicating a copy of the license or certification must be uploaded in the **View/Upload Attachments** step.

7. Select **Close** to proceed.

Updating Licenses and Certifications

Note: Should there be a need to add more licenses or certifications to the **Licenses/Certification List** page, refer to Steps 2-5 for each item mentioned to complete the update.

8. After updating the licenses and certifications, select **Close** at the top of the **Licenses/Certification List** page to return to the **View/Update Provider Data-Group Practice** page. There is not a limit to the number of licenses and certification that can be added to an application.

Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.

Updating Licenses and Certifications

1. Select **Step 5: Professional Licenses and Certifications** (based on enrollment type). The example used here reflects Individual Provider Enrollment.

- Individual providers will select "Step 5: Professional Licenses and Certifications."
- Facility, Agency, Organization, and Institution Provider will select "Step 5: Business Licenses and Certifications."

Note: Group Providers will select step 10 for updating professional license details for servicing providers.

	Step ▲▼	Required ▲▼	Last Modification Date	Last Review Date	Status	Modification Status	Step Remark
☐	Step 1: Basic Information	Required	07/07/2025	07/07/2025	Complete		
☐	Step 2: Location	Required	07/07/2025	07/07/2025	Complete		
☐	Step 3: Taxonomies	Required	07/07/2025	07/07/2025	Complete		
☐	Step 4: Ownership Details	Optional	07/07/2025	07/07/2025	Complete		
☐	Step 5: Professional Licenses and Certifications	Required	07/07/2025	07/07/2025	Complete		

Updating Licenses and Certifications

2. On the **License/Certification List** page, select the **License Category** field to view the links for License and Certification.

3. Update the desired field(s) on the "**Manage <Business/Professional> License/Certification**" page.

Note: Fields with the "*" are required. Verify the information is present and correct before proceeding.

Updating Licenses and Certifications

4. To save the license or certification information, select **Save** at the top of the section.

5. After saving, a message will appear indicating a copy of the license or certification must be uploaded in the **View/Upload Attachments** step.

6. Select **Close** to proceed.

Updating Licenses and Certifications

Note: Should there be a need to add more licenses or certifications to the **Licenses/Certification List** page, select **Add** and refer to Steps 2-6 for each item mentioned to complete the update.

7. After updating the licenses and certifications, select **Close** at the top of the **Licenses/Certification List** page to return to the **View/Update Provider Data** page. There is not a limit to the number of licenses and certification that can be added to an application.

Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.

Updating Payment Details

1. Select **Step 5: Payment Details**.

Note: If you are enrolled as a **Group Provider**, one additional step, **Servicing Provider Information** is required before completing the **Payment Details** and the step number may be **Step 6**.

	Step ▲▼	Required ▲▼
☐	Step 1: Basic Information	Required
☐	Step 2: Location	Required
☐	Step 3: Taxonomies	Required
☐	Step 4: Professional Licenses and Certifications	Required
☐	Step 5: Payment Details	Required

After selecting **Payment Details**, the **Payment Details** page will display.

2. To add payment details when there are no current payment details listed, select **Add** at the top of the page.

⊗ Close   ⊕ Add

⠿ **Payment Details**

Filter By :   [⌄]   [   ]   [   ]   And   [⌄]

☐	Account Number ▲▽	Account Type ▲▼	Bank Name ▲▼
☐	*****1901	Checking	

Updating Payment Details

3. On the **Payment Details** page, enter the **Requested Electronic Fund Transfer (EFT) Start Date** and **End Date**.

4. Complete the required **Financial Institution Information** section.

Updating Payment Details

5. Select **Close**.

Note: If this is the only step requiring an update, the provider can proceed to the final step, [Submitting Maintenance Request for Review](#).

Updating Payment Details

6. To update the account information, select the link under the **Account Number** section.

7. On the **Payment Details** page, update the desired information and select **OK**.

Updating Payment Details

8. Select **Close**.

⊗ Close   ⊕ Add

⠿   **Payment Details**

Filter By : [⌄] [   ] [   ] And [⌄] [

☐	Account Number ▲▽	Account Type ▲▼	Bank Name ▲▼
☐	*****1901	Checking	

Updating Identifiers

1. Select **Step 6: Identifiers**.

	Step ▲▼	Required ▲▼	Last Modifi
☐	Step 1: Basic Information	Required	11/04/2024
☐	Step 2: Location	Required	12/07/2020
☐	Step 3: Taxonomies	Required	12/07/2020
☐	Step 4: Ownership Details	Optional	
☐	Step 5: Professional Licenses and Certifications	Required	06/21/2023
☐	Step 6: Identifiers	Optional	

2. To add Identifiers, select **Add**.

✖ Close	⊕ Add	➡ Required Credentials

Provider Identifiers

Filter By : [▼] [   ]

☐	Identifier Type ▲▽
☐	
☐	
☐	

Updating Identifiers

3. Select the identifier type from the **Identifier Type** drop-down list.

4. Enter the identifier value in the **Identifier Value** field.

Updating Identifiers

5. Enter or select the start and end dates in the **Start Date** and **End Date** fields.

6. Select **OK**.

Updating Identifiers

7. To update an identifier type, select the **Identifier Type** link.

	⊘ Close	⊕ Add	➔ Required Credentials

⠿ **Provider Identifiers** ⌃

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

[Active ⌄] ⊙ Go   ⊗ Clear Filter   💾 Save Filter   ▼ My Filters ▾

☐	Identifier Type ▲▽	Identifier Value ▲▼	Start Date ▲▼	End Date ▲▼	Status ▲▼	Operational Status ▲▼	Inactivation Date ▲▼
☐	Provider Medicare Number						
☐							
☐							
☐							
☐							
☐							

View Page: [1] ⊙ Go ➕ Page Count   **Viewing Page: 1**   ≪ First   ‹ Prev   › Next   ≫ Last

☒ SaveToCSV

Updating Identifiers

8. Make the necessary changes then select **Save** and **Close**.

Note: If updating more than one Identifier type, repeat step 3 for each.

OWCP ID/NPI: [blurred]   Name:

[⊗ Close]   [💾 Save]

⊞   Manage Identifier

IdentifierType: Provider Medicare Number

Status: Approved

Start Date: [blurred] 📅 *

Note: If this is the only step requiring an update, the provider can proceed to the final step, [Submitting Maintenance Request for Review](#). Otherwise, the provider proceeds to the next step.

Updating the EDI Submission Method

1. Select **Step 7: EDI Submission Method**.

	Step ▲▼	Required ▲▼	Last Modific
☐	Step 1: Basic Information	Required	11/04/2024
☐	Step 2: Location	Required	12/07/2020
☐	Step 3: Taxonomies	Required	12/07/2020
☐	Step 4: Ownership Details	Optional	
☐	Step 5: Professional Licenses and Certifications	Required	06/21/2023
☐	Step 6: Identifiers	Optional	
☐	Step 7: EDI Submission Method	Optional	

2. To add one or more EDI submission methods, select **Add**; or to update EDI submission methods, select the **EDI Submission Method** link.

⊗ Close   ⊕ Add

EDI Submission Method

Filter By : ⬇

☐	EDI Submission Method △▼
☐	Web Interactive

Updating the EDI Submission Method

3. To update previously selected modes of submission, select the **EDI Submission Method** link.

4. After completing the updates, select **Close**.
Note: If this is the only step requiring an update, the provider can proceed to the final step, [Submitting Maintenance Request for Review](#).

Updating EDI Submitter Details

The provider's billing agent or clearinghouse must first enroll with OWCP. The provider must obtain the billing agent or clearinghouse's OWCP ID to complete this section. If the provider is not yet enrolled, they can still complete their enrollment by temporarily choosing not to use a billing agent or clearinghouse. The provider can add this information later after they are enrolled with OWCP.

1. **Step 8: EDI Submitter Details** is only required to be completed if EDI Submission Method of Billing Agent/clearinghouse was selected in the previous step.

Step 4: Ownership Details	Optional
Step 5: Professional Licenses and Certifications	Required
Step 6: Identifiers	Optional
Step 7: EDI Submission Method	Optional
Step 8: EDI Submitter Details	Optional

Updating EDI Submitter Details

2. The **Billing Agent/Clearinghouse/Submitter List** displays, select **Add**.

3. In the **Associate Billing Agent/Clearinghouse** page, enter the **OWCP ID** and **Start** and **End Dates**, then select **OK**.

Note: Instructions are included in the system for this step.

Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.

Updating EDI Submitter Details

4. To update the EDI Submitter Details, select the **OWCP ID** link.

5. After making updates to the billing agent or clearinghouse submitter, select **Save** on the **Manage Billing Agent/Clearinghouse Association** page.

Updating EDI Submitter Details

6. After saving the update, select **Close**.

Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.

Updating Payment Details

1. Select **Step 10: Payment Details**.

   Note: If you are enrolled as a **Group Provider**, one additional step, **Servicing Provider Information** is required before completing the **Payment Details** and the step number may be **Step 11**.

Step 7: EDI Submission Method		Optional
☐ Step 8: EDI Submitter Details		Optional
☐ Step 9: EDI Contact Information		Optional
☐ Step 10: Payment Details		Required
☐ Step 11: Complete Provider Disclosure		Required
☐ Step 12: View/Upload Attachments		Optional

After selecting **Payment Details**, the **Payment Details** page will display.

2. To add payment details when there are no current payment details listed, select **Add** at the top of the page.

	Account Number ▲▽	Account Type ▲▼	Bank Name ▲▼
☐	*****1901	Checking	

Updating Payment Details

3. On the **Payment Details** page, enter the **Requested Electronic Fund Transfer (EFT) Start Date** and **End Date**.

4. Complete the required **Financial Institution Information** section.

Updating Payment Details

5. Select **Close**.

Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review.

Updating Payment Details

6. To update the account information, select the link under the **Account Number** section.

7. On the **Payment Details** page, update the desired information and select **OK**.

Updating Payment Details

8. Select **Close**.

⊗ Close   ⊕ Add

▦   **Payment Details**

Filter By : [⌄] [   ] [   ] **And** [⌄] [

☐	**Account Number** ▲▽	**Account Type** ▲▼	**Bank Name** ▲▼
☐	*****1901	Checking	

Updating Licenses and Certifications

1. Select **Step 4: Professional Licenses and Certifications**

OWCP ID/NPI:

⊗ Close | ➜ Required Credentials | ❮ Undo Update

⊞ View/Update Provider Data - Individual

Business Process Wizard - Provider Data Modification (Individual). In order
Request for Review.

☐	Step ▲▼	Required ▲▼
☐	Step 1: Basic Information	Required
☐	Step 2: Location	Required
☐	Step 3: Taxonomies	Required
☐	Step 4: Professional Licenses and Certifications	Required

2. To add ownership details, select **Add**.

⊗ Close | ⊕ Add

⊞ Ownership List (Optional)

Filter By : [⌄]

☐	Owner ID ▲▽
☐	

Updating Ownership Details

3. To update the Ownership List, select the **Owner ID** link and make the designated changes.

   Note: If this is the only step requiring an update, the provider can proceed to the final step, Submitting Maintenance Request for Review. Otherwise, the provider proceeds to the next step.

Updating Licenses and Certifications

1. Select **Step 5: Professional Licenses and Certifications** (based on enrollment type). The example used here reflects Individual Provider Enrollment.

- Individual providers will select "Step 5: Professional Licenses and Certifications."
- Facility, Agency, Organization, and Institution Provider will select "Step 5: Business Licenses and Certifications."

Note: Group Providers will select step 10 for updating professional license details for servicing providers.

	Step ▲▼	Required ▲▼	Last Modification Date	Last Review Date	Status	Modification Status	Step Remark
☐	Step 1: Basic Information	Required	07/07/2025	07/07/2025	Complete		
☐	Step 2: Location	Required	07/07/2025	07/07/2025	Complete		
☐	Step 3: Taxonomies	Required	07/07/2025	07/07/2025	Complete		
☐	Step 4: Ownership Details	Optional	07/07/2025	07/07/2025	Complete		
☐	Step 5: Professional Licenses and Certifications	Required	07/07/2025	07/07/2025	Complete		

Updating EDI Contact Information

1. Select **Step 9: EDI Contact Information**.

    Note: Open the link for Step 9: EDI Contact Information, which is mandatory *if you opted for Web Batch or FTP Secured Batch* as the EDI Submission Method in the earlier step.

2. To add EDI contacts, select **Add**.

Updating EDI Contact Information

3. When adding a contact, enter the required information in the **Add EDI Contact Information** section, then select **OK**.

Updating EDI Contact Information

4. On the **EDI Contact Information List** page, select the link under **Contact Title** to manage the EDI contact screen shown below , and select **Save**.

5. After saving the update, select **Close**.

Note: If this is the only step requiring an update, the provider can proceed to the final step, [Submitting Maintenance Request for Review](#). Otherwise, the provider proceeds to the next step.

Completing Provider Disclosure

1. Select **Step 11: Complete Provider Disclosure** link. The **Provider Disclosure** page opens.

2. On the lower right side of the **Provider Disclosure** page, update the answers to the two questions on the left and add comments if needed.

Completing Provider Disclosure

3. After completing the required information on the **Provider Disclosure** page, select **Save** at the top of the page.

⊗ Close	💾 Save

⠿ **Provider Disclosure**

If you answer Yes to the first Disclosure question, provide details including type of action, Agency undertaking adverse action and date

Question
Within ten years of the date of this statement have you or any individual listed on this application had an action related to fraud or abuse in a government program taken against him or her resulting in (1) a felony or misdemeanor conviction; (2) a liability finding in civil proceedings; or (3) a settlement entered into in lieu of conviction?
(Required for FECA providers) For Provider Type "Medical Supplies/Durable Medical Equipment (DME) / Prosthetics / Orthotics" (75) only: Are you an accredited DMEPOS supplier enrolled with Medicare? If Yes; provide the phone number that you used in your Medicare DMEPOS enrollment.

4. Select **Close**

⊗ Close	💾 Save

⠿ **Provider Disclosure**

If you answer Yes to the first Disclosure question, provide details including type of action, Agency undertaking adverse action and date

Question
Within ten years of the date of this statement have you or any individual listed on this application had an action related to fraud or abuse in a government program taken against him or her resulting in (1) a felony or misdemeanor conviction; (2) a liability finding in civil proceedings; or (3) a settlement entered into in lieu of conviction?
(Required for FECA providers) For Provider Type "Medical Supplies/Durable Medical Equipment (DME) / Prosthetics / Orthotics" (75) only: Are you an accredited DMEPOS supplier enrolled with Medicare? If Yes; provide the phone number that you used in your Medicare DMEPOS enrollment.

Viewing and Uploading Attachments

1. If a license, certification, or any other correspondence is necessary for processing the modification, select **Step 12: View/Upload Attachments**. The **Attachment List** page opens to upload documentation.

2. To upload attachments, select **Upload Attachments** at the top of the page.

Viewing and Uploading Attachments

3. To view previously uploaded attachments, select the **Repository Key** link.

4. Select **Close** on the top left side of the page.

Submitting Maintenance Request for Review

Step 13: Submit Maintenance Request for Review is required when submitting updated information.

1. Select **Step 13: Submit Maintenance Request for Review**. The **Final Modification Submission** page opens.

2. Read the instructions on this page carefully and check the **First Name** and **Last Name** fields at the bottom to ensure they are correct and make changes if needed. The **Title** field is optional.

Submitting Maintenance Request for Review

3. Select **Submit Modification** at the very bottom of the page.
Note: Acentra Health staff must first complete their review of this submitted modified content. Only after this step are additional modifications to the submitted information allowed.

:and that payment of a claim by OWCP is conditioned upon the claim and the underlying ons.

Last Name: [redacted] *

Signature Date: 01/27/2025 12:39:35

:shore and Harbor Workers' Compensation Act and the Energy Employees Occupational Illness :ed will be used to ensure accurate payment of medical and vocational rehabilitation provider)L/OWCP-9 and DOL/OWCP-11, published in the Federal Register, Vol. 81, page 25766, April 29, ill result in substantially delayed payment of bills. This information will be furnished to OWCP the Department of Justice for litigation purposes, and to medical and other provider review

⊗ Close   ⊘ Submit Modification

Submitting Maintenance Request for Review

4. Existing Group Practice Providers must read and select the checkbox next to the revised attestation verbiage to acknowledge their consent.

OWCP has removed the requirement that Group Practices submit business license annually and have replaced it with revised attestation verbiage. Please read and acknowledge the following:

☐ I certify that I and my agents have currently in effect all necessary licenses, certifications, approvals, insurance, etc. required to properly provide the services and/or supplies for the OWCP in the state, county, locality, or jurisdiction where the services and/or supplies are provided. I will provide proof of such licenses, certifications, approvals, insurance, etc. upon the OWCP's request. I understand that any revocation, withdrawal, or non-renewal of necessary license, certification, approval, insurance, etc. required for me to properly provide services, shall be grounds for termination of enrollment/registration by the OWCP.

By selecting the checkbox, I agree to this attestation.

Updating Servicing Provider Information (*For Providers Enrolled as Group Providers*)

For the Providers enrolled as Group Providers, an additional Step 10: Servicing Provider Information link will appear before Step 11: Payment Details.

1. Select **Step 10: Servicing Provider Information**. The **Servicing Provider List** page opens.

☐ Step 9: EDI Contact Information		Required
☐ Step 10: Servicing Provider Information		Required
☐ Step 11: Payment Details		Required

2. In the **Servicing Provider List**, select **Add**, enter the required information, and select **OK**. The new provider will then be added to the **Servicing Provider List**.

Updating Servicing Provider Information (*For Providers Enrolled as Group Providers*)

3. To inactivate a servicing provider, select the checkbox next to the **SSN/FEIN** link.

4. Select **Inactivate** at the top of the page.

Updating Servicing Provider Information (*For Providers Enrolled as Group Providers*)

5. To confirm, select **OK** on the confirmation window.

sit.wcmbp.com says

Do you want to Inactivate the selected record?

OK   Cancel
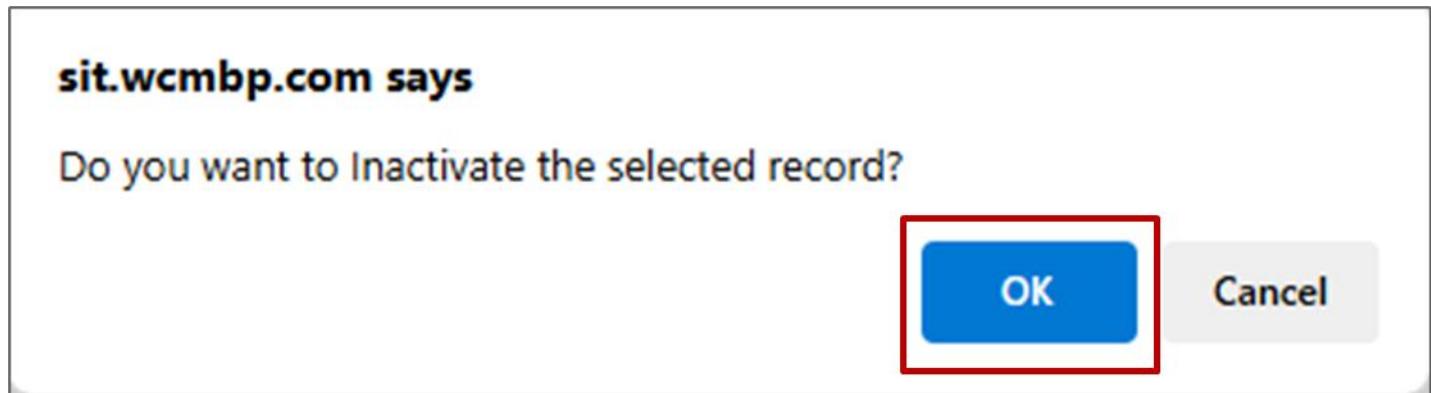
6. To update the respective servicing provider information, select the **SSN/FEIN** links.

	SSN/FEIN ▲▽	Provider Name ▲▼	NPI ▲▼	Provider Type ▲▼	Business Status ▲▼	Business Status Effective Date ▲▼	Status ▲▼	Operational Status ▲▼	Inactivation Date ▲▼
☐	👁 UnMask			30 - Advanced Registered Nurse Practitioner (ARNP)	Inactivate servicing providers	02/03/2023	In Review	Active	
☐	👁 UnMask			30 - Advanced Registered Nurse Practitioner (ARNP)			In Review	Active	

Updating Servicing Provider Information (*For Providers Enrolled as Group Providers*)

7. When updates have been made to the selected servicing providers, select **Save** and return to the list of steps.

8. After saving the updated information, select **Close** at the top of the **Servicing Provider List** page.

Note: If these are the only updates needed, proceed to the required final step, Submitting Maintenance Request for Review.

Changing Profiles

Notes:

- Profiles can be switched at any point while you are in the Provider Portal. Providers can select the **Profile** link in the menu bar near the top of the **Provider Portal** page to view the drop-down list for a list of profiles.

- By selecting the applicable profile from the drop-down list, the Provider Portal functions are accessible to a provider to be updated.

Profile: EXT Provider Bills Submitter ▾

EXT Provider Claims Payment Status Checker

EXT Provider Eligibility Checker - Auth Submitter

EXT Provider Eligibility Checker-Claims Submitter

EXT Provider File Maintenance

EXT Provider Super User

EXT Provider System Administrator