Schedule an Interpreter Appointment with WordBridge

1. **Access the scheduling screen**: Navigate to the Schedule Interpreter icon, second from the top left, and click it to open the scheduling screen.
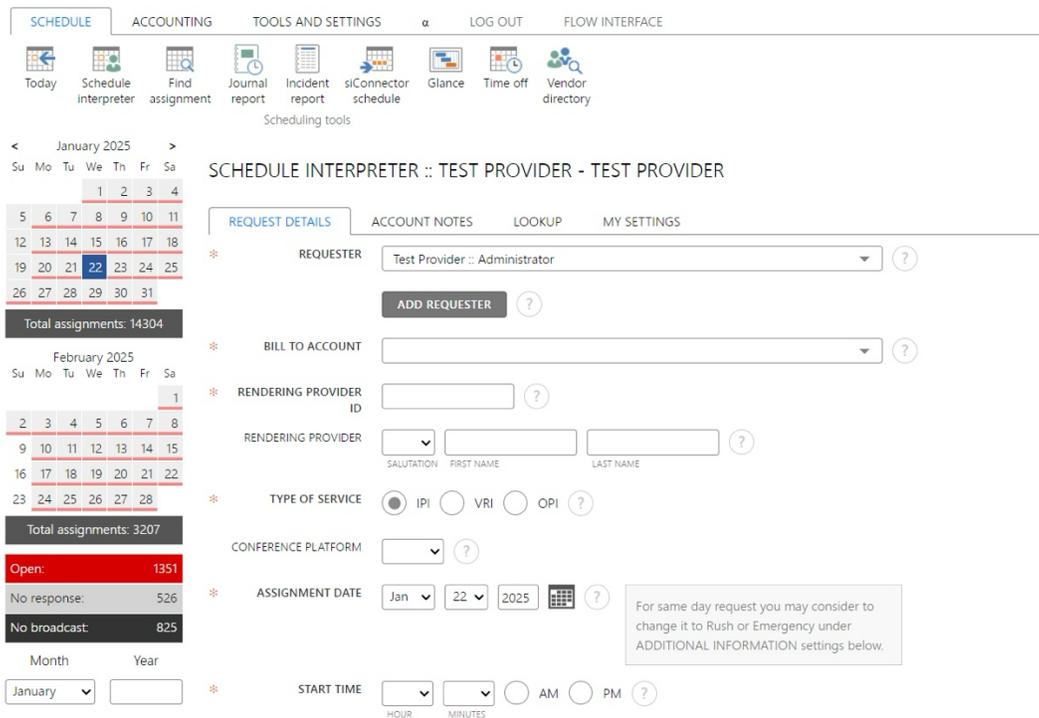
2. **Choose the Requester Account**: If your account does not appear then choose it from the drop-down menu.

3. **Select "Bill To Account"**: in the Bill To Account field, use the drop-down menu to enter the party responsible for payment.

   State Fund and Crime Victim Claims
   Select "**State of Washington (L&I)**" only for State Fund claims that begin with the letters A, B, C, F, G, H, J, K, L, M, N, P, X, Y, or Z followed by six digits, or double alpha letters (example AA) followed by five digits and Crime Victims claims that begin with a V followed by six digits, or double alpha letters.

   Self-Insured Claims
   Select the appropriate **self-insured employer**, not the Third Party Administrator, for **Self-Insured** claims that begin with an S, T, or W followed by six digits, or double alpha letters

followed by five digits.

If you cannot find the name of the self-insured employer on the list, send an email to L&I's interpretation program at Interpretation@Lni.wa.gov, and include the name of the patient and the claim number that begins with S, T, or W.

4. **Enter Rendering Provider ID, Name, and Service Type**: Input the provider's ID, name, and select the type of service: In-Person (IPI), Video (VRI), or Over-the-phone (OPI). The default is IPI, but you can change it to VRI or OPI if needed.

5. **Set Date and Time and Estimated Length of appointment**: The assignment date defaults to today, but you can select a different date using the dropdowns on the calendar. For the start time, use the dropdowns to specify the time, ensuring to indicate AM or PM. At the estimated length, enter the expected duration of the appointment.

6. **Language Selection, Tags, and Preferred Interpreter**: The source language is predetermined, but you can select the required target language from a drop-down list of options.

Preferred Interpreter Reason can be chosen from the dropdown menu. The Preferred Interpreter Name should be entered in the box provided. Additionally, the "USE TAGS AS QUALIFIERS" box must be checked, and a tag selected, so that the opportunity to accept the encounter does not get transmitted to all the qualified Interpreters, but the preferred Interpreter can be scheduled by the WordBridge staff.

Only use the tags when you are entering the NAME of a preferred interpreter in the text box located below the tags

Preferred Interpreter should be used only when warranted, and within Washington L&I Guidelines per [Chapter 14: Language Access Services for Spoken Languages (wa.gov)](#).

Then choose the VISIT TYPE from the drop-down menu.

7. **Visit Type, Gender Preference (OPTIONAL):** From the drop-down box enter the Visit Type and an optional gender preference.

8. **Address Confirmation**: The address will auto-populate based on the account, but you can manually change it if necessary.

9. **Claim Information**: Enter Claim ID, enter claimant's name in Claimant Information fields, and enter Date of Injury. **It's important that you enter the correct claim information in WordBridge to ensure prompt payment to SOSi, who can then pay the interpreters**. Do not include any spaces or symbols in the claim ID field and the patient's name has to match the spelling in the L&I system.

   Then, add any additional information on the appointment in the comments section and a brief description of services.

   Description Field is also required.

10. **Prior to clicking SUBMIT**: Please click on "Validate Eligibility". This will verify the claim number, patient name, and date of injury against the claim information provided by L&I. If all data entered is correct, you will receive a message notifying you that you may proceed with your submission.
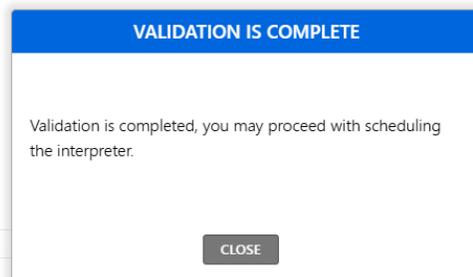
If the claim number is valid but does not match the last name and/or Date of Injury, you will receive a message similar to the one below.
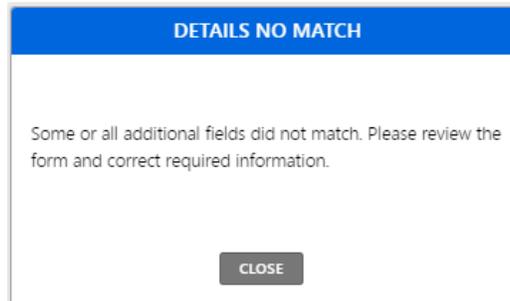
If the claim number is invalid, you will receive a message with a statement similar to: "Please verify accuracy of your entry and try again."
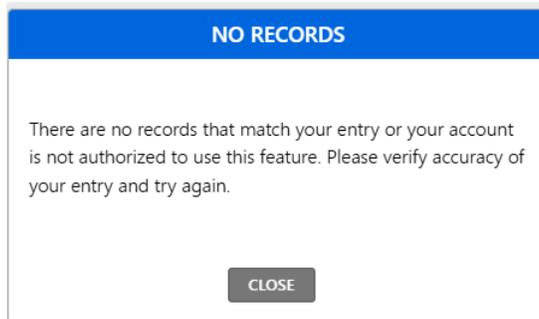
The claim may not be active, or claim information you entered may be incorrect. If the interpretation services are not compensable by L&I, an SIE or their TPA, or the Crime Victims Compensation program, you will be responsible for the interpreter services. Please note that if the services were requested by L&I on a closed claim (i.e., IME appointments), L&I will pay for the services.

Need to verify a claim? Call 1-800-831-5227 for state fund claims or the adjuster for self- insured claims.

If the claim cannot be verified, you may still schedule the appointment by clicking submit; however, if the claim is not validated at a later date, the requesting entity may be responsible for the payment of services rendered.

11. **Click SUBMIT**: If you click SUBMIT prior to attempting to validate the claim number, the message below will appear.

CAN'T PROCEED

Please use VALIDATE ELIGIBILITY button to make sure an assignment can be scheduled for this consumer.

CLOSE

12. **Confirmation screen**: Select FINISH to complete the request.

WordBridge
by SOSi

REQUEST #137543

PROVIDER			
REQUESTER NAME	Test Provider	**Phone Number**	301.555.5555
PROVIDER NAME	test provider		

REQUEST DETAILS					
Visit Type	Office Visit	**Modality**	on-site		
Address	123 abcdef st	**CPT Code**			
City	sunrise	**State**	FL	**ZIP Code**	33351
Date	January 22, 2025	**Start Time**	9:00 pm	**End Time**	10:00 pm
Preferred Interpreter Reason					
Preferred Interpreter Name					
Notes					

CLAIMANT DETAILS			
Claimant Name	Test Person	**Language**	TEST LANGUAGE
Date of Injury	01/01/2025	**Claim ID**	AB00000
Bill To	State of Washington (LNI)	**Attention To**	

AUTHORIZATION
I am an authorized requestor of services listed above for test provider and hereby authorize WordbridgeLNI to provide interpreting services, subject to fee schedules, terms and conditions.

Requestor's Signature:	Test Provider	**Date Signed:**	January 22, 2025

CONFIRMATION			
Assignment Number:	137543	**Assigned Interpreter:**	

FINISH   PRINT   CLONE   CONTROL CENTER