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Attention...

New providers must enroll online in the Alaska Medical Assistance Program using the Provider Enrollment Portal (PEP).

You are considered a new provider if:

- * You have never been enrolled in the program, or
- * You are enrolling with a different Tax ID, or
- * You are enrolling as a different provider type

New Providers may go directly to **PEP** and complete your enrollment process online. **Computer Based Training (CBT)** is also available to assist you.

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Enrollment Requirements for In-State and Out-of-State Providers

Note: NPIs are required for all health care providers that conduct electronic transactions.

Provider Type	Enrollment Requirements	Provider Type	Enrollment Requirements
Advanced Nurse Practitioner	Occupational license (all specialties)	EPSDT Screener	Occupational license of one RN, one LPN or one MD. Can enroll school districts, ILPs, or municipal health dept. or DHSS grantees.
Advanced Nurse Practitioner Group	Business license and list of rendering providers	Family Planning Clinic	Occupational license of all staff AND occupational license of physician in license field. Physician directed and NP on staff
Air Ambulance	Air Ambulance Certificate or license specifically for air ambulance (not an Alaska Business License)	Federally Qualified Health Center (FQHC)	<p>All FQHCs must submit:</p> <ul style="list-style-type: none"> • a list of providers employed by or on contract with the FQHC; and • proof of Medicare enrollment (a Medicare welcome letter or a current Medicare EOB) <p>Non-IHS clinics must submit:</p> <ul style="list-style-type: none"> • CMS letter certifying clinic as FQHC • copy of grant notice as a community health center, migrant health center or health care for the homeless (or letter stating provider meets the requirements for such a grant) • state certification or copy of federal certification report <p>Note: All FQHCs that bill for dental services must obtain a separate dental group enrollment.</p>
Airline	Air Taxi Certificate or business license	Free-Standing or Portable X-ray	State Certification*
Ambulatory Surgery Center*	State license AND certification	Ground Ambulance	EMS Certificate or other ambulance license
Audiologist	Occupational license	Hearing Aid Supplier	Occupational license
Audiologist Group	Business license and list of rendering providers	Home & Community-Based Agency	DSDS** Provider Certification
Behavioral Rehab Center	OCS award grant letter	Home Health Agency *	State license, certification, and surety bond
Care Coordination Agency	DSDS** Provider Certification and list of rendering providers (Note: Individual rendering providers in the agency must also be enrolled.)	Hospice *	State license, certification AND facility agreements. Provider must be in Alaska
Care Coordinator	Letter from enrolled care coordination agency (CCA) verifying employment and date employed (Note: Services of a Care Coordinator are only covered for services provided as a renderer at the CCA.) DSDS provider certification	Hospital *	
Certified Registered Nurse Anesthetist	Occupational license	<ul style="list-style-type: none"> • Administrative Wait Bed See requirements for in/outpatient hospital • IHS Inpatient/Outpatient JCAHO accreditation and designation on National IHS Facility List • Inpatient/Outpatient <ul style="list-style-type: none"> 1) In-State: State license and either certification or JCAHO accreditation 2) Out-of-State: State license and either certification or JCAHO accreditation 	
Chiropractor, Group	Business license and list of rendering providers. (Note: Individual rendering providers must also be enrolled.)	<ul style="list-style-type: none"> • Inpatient Psychiatric (Private or State) State license and certification or JCAHO accreditation 	
Chiropractor, Individual	Occupational license	Hotel/Motel with Restaurant	Business license and fire/safety inspection report (from Municipality, City, or State), and food service permit (from Municipality, City, or State)
Community Behavioral Health Services Providers	DBH*** Community Behavioral Health Services Grant DBH***Program Approval	Hotel/Motel without Restaurant	Business license, fire/safety inspection report (from Municipality, City, or State)
Dental, Group	Business license and list of rendering providers. (Note: Individual rendering providers must also be enrolled.)	ICF/MR Facility *	State license and certification
Dental, Individual	Occupational license. (Note: Interns and residents excluded from enrollment)	IHS Clinic	Designated on National IHS Facility List
Dietician/Nutritionist	Occupational license	Independent Laboratory*	CLIA Certificate of Registration or Certificate of Waiver
Direct Entry Midwife	Occupational license	Licensed Clinical Social Worker (LCSW) Group	Business license, list of rendering providers, proof of FQHC contract or employment. (Note: Individual rendering providers must also be enrolled.)
Dispensing MD, PA, NP, NM, DPM, and FPC	Occupational license and Drug Enforcement Agency certificate, Dispensing Provider Addendum, NCPDP#	Licensed Clinical Social Worker (LCSW) Individual	Occupational license and proof of FQHC contract or employment
Durable Medical Equipment Supplier (DME) and Medical Supplier (MS)	Business license. Must be enrolled as a Medicare provider. To bill for respiratory therapy assessment visits, RT renderer required. To bill for home infusion therapy, a Home Infusion Provider Addendum is required. May not also enroll as a Prosthetic & Orthotic Supplier. May bill for durable medical equipment, medical supplies, respiratory therapy assessment visits, home infusion therapy services, or noncustomized-fabricated orthotics.	Licensed Practical Nurse (LPN)	Occupational license (Note: Enrollment is limited to LPNs who are rendering providers in an enrolled private duty nursing agency)
End Stage Renal Disease Facility (ESRD)	State certification		
Environmental Modification Provider	DSDS** Provider Certification		

Note: When an IHS desires reimbursement for services rendered in non-IHS settings, the IHS employed dentist must apply for an individual ID number.
 * For information regarding Alaska licensing and certification requirements, contact the State of Alaska Health Facilities Licensing and Certification office at (907) 334-2483.
 ** DSDS = Division of Senior and Disabilities Services
 *** DBH = Division of Behavioral Health
 ***** OCS = Office of Children's Services

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Enrollment Requirements for In-State and Out-of-State Providers

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Provider Type	Enrollment Requirements	Provider Type	Enrollment Requirements
Mental Health Physician Clinic (MHPC)	1) Signed Mental Health Physician Clinic Addendum 2) Occupational licenses: > operating/directing psychiatrist with verification of psychiatry residency > all clinicians rendering Medicaid-covered services within the clinic (i.e., psychologist, psychological associate, clinical social worker, physician assistant, nurse practitioner, psychiatric nursing clinical specialist, marital and family therapist, or professional counselor)	Private Duty Nursing Agency *	Certificate as a Home Health Agency or hospice, needs renderer
Nurse Midwife	Occupational license	Prosthetics and Orthotics Supplier	Business license, a copy of your Welcome to Medicare Enrollment Letter and certification under 7 AAC 120.200(a)(2)(A)(B). May not also enroll as a DME provider.
Occupational Therapist Group	Business license List of all therapists and assistants associated with group. Therapists and assistants must be separately enrolled.	Psychologist, Group	Business license and list of rendering providers (Individual rendering providers must also be enrolled.)
Occupational Therapist	Occupational license	Psychologist, Individual	Occupational license.
Occupational Therapy Assistant	Occupational license	Radiology	Certification
Optician	Occupational license	Registered Nurse (RN)	Occupational license (Note: Enrollment is limited to RNs rendering providers in a private duty nursing agency or CCA enrolled in Alaska Medicaid.)
Optometrist	Occupational license	Residential Psychiatric Treatment Center	Licensure under 7 AAC 50 by DHSS and accreditation by either the Joint Commission or the Commission on Accreditation of Rehabilitation Facilities or the Council on Accreditation of Services
Outpatient Physical, Occupational or Speech Therapy Center	State certification List of all therapists and assistants associated with group. Therapists and assistants must be separately enrolled.	Residential Supported Living Arrangements	DSDS provider certification
Agency-Based Personal Care Agency	Current Alaska Business License DSDS** approval letter	Respiratory Therapist	Respiratory Therapist Certification or Respiratory Therapist Technician Certification (Note: Enrollment is limited to Respiratory Therapists who are rendering providers employed by or contracted with an enrolled Durable Medical Equipment Supplier.)
Consumer Directed Personal Care Agency	Current Alaska Business License DSDS** approval letter	Rural Health Clinic* (RHC)	State certification, FQHC-Non-IHS: CMS cert., federal grant notice, Medicare enrolled. IHS: federal designation as FQHC; IHS own/lease
Pharmacy/Dispensing Providers	Occupational license of pharmacist, physician or Retail Pharmacy License, DEA#, NABP/NCPDP# Pharmacy Addendum, Provider Information Submission payment billing through POS	School-based Services	Referenced as a school district as listed under AS 14.17.460
Physician Assistant (PA)	Occupational license – Physician's Assistant – Certified Signed Physician Assistant Addendum of Agreement	SNF/ICF Facility *	State license and certification
Physical Therapist Group	Business license List of all therapists and assistants associated with group. Therapists and assistants must be separately enrolled.	Speech Language Pathologist Group	Business license List of all therapists and assistants associated with group. Therapists and assistants must be separately enrolled.
Physical Therapist	Occupational license	Speech Language Pathologist (SLP)	Occupational license
Physical Therapy Assistant	Occupational license	Speech Language Pathologist Assistant	Current registration from Occupational license
Health Practitioner Group	Business license List of rendering providers associated with the group. All providers must be separately enrolled. Note: This group can consist of a combination of physicians, physician assistants, ANPs, DEMs, CRNAs, optometrists, opticians, PTs and PT assistants, OTs and OT assistants, SLPs and SLP assistants, and audiologists.	Swing Bed * AW Bed	State license and certification
Physician/Osteopath, Individual	Occupational license Alaska Medicaid Physician Addendum (in-state only)	Targeted Case Management	OCS grant. No renderer required
Podiatrist, Group	Business license and list of rendering providers (Note: Individual rendering providers must also be enrolled.)	Taxi (includes wheelchair vans)	Business license
Podiatrist, Individual (DPM)	Occupational license	Travel, Other (bus, train, ferry, travel agency, etc.)	Business license
		Vision Group	Business license and list of rendering providers (Note: Individual rendering providers must also be enrolled.)

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