

FOCUSMD

HEALTHCARE SOLUTIONS, LLC

INDIVIDUAL PROVIDER(S)

- CV (WITH NEW PRACTICE LISTED)
- NPI
- NPI LOGIN
- PECOS LOGIN (IF MEDICARE CONTRACTS/ REASSIGNMENTS ARE NEEDED)
- MEDICARE #'S
- MEDI-CAL #'S
- MEDICAL LICENSE
- DEA
- MEDICAL MALPRACTICE CERTIFICATE
- MEDICAL MALPRACTICE CLAIM DETAILS (5 YEARS)
- COPY OF PAST MED MAL INSURANCES (7 YEARS)
- CAQH #, LOGIN
- BOARD CERTIFICATION(S)
- CME
- MISC. EDUCATIONAL DOCUMENTS
- DRIVERS LICENSE
- CPPA (REQUIRED IF NO CAQH ACCOUNT EXISTS)
- HOSPITAL PRIVILEGES/ APPOINTMENT DATES
- LIST OF ALL CONTRACTED INSURANCE PLANS

GROUP INFORMATION NEEDED

- SS4/IRS OFFICIAL LETTER STATING GROUP NAME AND TIN
- TIN
- FICTITIOUS BUSINESS NAME PERMIT (FROM THE MEDICAL BOARD OF CA)
- W9 (EACH LOCATION AND PAY TO ADDRESS)
- BILLING COMPANY AND PAY TO ADDRESS
- BUSINESS LICENSE(LOCAL)
- GROUP NPI
- PTAN MEDICARE
- PTAN DME
- GROUP ROSTER WITH SPECIALTY
- LIST OF ALL CONTRACTED INSURANCE PLANS
- PROVIDERS SCHEDULE AT EACH LOCATION (HOURS AND DAYS)