

NURSING FACILITY

TYPE	SPECIALTY
03 – Custodial Care Facility	011 – Psychiatric
	034 – ICF/IID Private
	035 – Skilled Nursing Facility

State (FFS) Requirements:

011,034,034- Signed and dated W9. within 1 year from receipt)

011,034,035- MS-1 form from KDADS with provider rates listed

011,034,035- Purchase Lease Agreement

011,034,035- NPI Update Form

011,034,035- CMS 671

011,034,035- Certification Letter from CMS

011,034,035- Kansas Organization Provider Credentialing/Recredentialing Application

MCO Credentialing Requirements:

N/A