

TYPE	SPECIALTY
06 – Hospice	060 – Hospice
	400 – Screening, Brief Intervention and Referral for Treatment

State (FFS) Requirements:

All specialties- Signed and dated W9. (Within 1 year from receipt)

400- An attestation or Certificate of Completion

060- Letter from the Department of Health and Human Services

060- Letter from Medicare including the provider number

MCO Credentialing Requirements:

All specialties- Copy of Declaration Sheet and/ or Certificate of Insurance (Professional Malpractice and Comprehensive General Liability Insurance Policies)

All specialties- Section 12 Attestation/ Consent and Release Form