

TYPE	SPECIALTY
08 – Clinic	080 – Federally Qualified Health Center
	081 – Rural Health Clinic
	083 – Family Planning Clinic
	181 – Maternity
	183 – Early Childhood Intervention Services
	400 – Screening, Brief Intervention and Referral for Treatment (SBIRT)
	401 – Screening, Brief Intervention and Referral for Treatment (SBIRT) (ENC)

State (FFS) Required Requirements

- All Specialties - Signed and dated W9. (Within 1 year from receipt)
- 183 -Approval letter from the Local Infant-Toddler Services Network
- 181 - KDHE Approval letter
- 400-401 –Certificate of Completion
- 080- Letter from the Department of Health and Human Services
- 081-Confirmation of Interim Reimbursement/Payment Rate

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