

Provider Enrollment Checklist for Provider Type 21

Podiatrist

The following is a list of required enrollment documents for this provider type. A copy of each document listed below must be included with your Provider Enrollment or Revalidation.

If you have any questions, please contact the Provider Enrollment Unit at (877) 638-3472 from 8:00 a.m. to 5:00 p.m. Monday through Friday.

Facility/Group

Documentation showing Taxpayer Identification Number (SS-4 or CP575, W-9 or Social Security card)



Nevada Secretary of State Business License

Individual

Documentation showing Taxpayer Identification Number (SS-4 or CP575 or W-9) if using a Tax ID issued separately from the Social Security Number

State Board of Podiatry License

Out-of-State and Out-of-Catchment Urgent/Emergent Enrollment

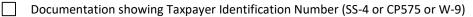
Full Nevada Medicaid enrollment is not required for out-of-state, out-of-catchment providers that render urgent/emergent services to recipients outside of Nevada borders.

If you are enrolling to be reimbursed for urgent/emergent services provided to a Nevada Medicaid recipient, please complete an Urgent/Emergent enrollment.

The following documentation will need to be submitted along with the urgent/emergent enrollment.

Proof of Medicaid Enrollment in Home State

The proof must show the rendering provider's name and National Provider Identifier (NPI) and your State's Medicaid name and be dated within 5 years from the date of service.



Voided Check or Bank Letter to Confirm Electronic Funds Transfer (EFT) Information

Letter of intent including information on recipient such as name, Nevada Medicaid ID number, dates of service, CPT/HCPCS/revenue codes, etc.

Resources:

The <u>Provider Enrollment</u> webpage provides instruction materials that will assist providers with enrolling in Nevada Medicaid.

You do not need to submit this checklist with your enrollment or revalidation.