

Requirements For Provider Type 10 - Midlevel Practitioner

Specialty Code

Please indicate the specialty and code:

100 - Physician Assistant

Provider Eligibility Program (PEPs)

Please indicate the following PEPs:

- Enrolled not Paid

Additional Required Documents for Provider Type 10:

The following documents and supporting information are required by the Bureau of Fee-For-Service Programs to enroll as a provider: ALL DOCUMENTS MUST BE LEGIBLE TO BE ACCEPTED.

- Provider Enrollment Application with signed provider agreement.
- Copy of Social Security Card or W-2. Note: W-9 is not acceptable.
- If the Social Security card states "Valid for work only with INS authorization", please submit the paperwork generated by the INS or Department of Homeland Security showing proof of authorization to work in the United States.
- Copy of the provider's license.
- Copy of the **NPPES Confirmation letter** showing the NPI Number and Taxonomy(s) assigned to the individual applying for enrollment.
- Proof of home state Medicaid participation, if applicable (out of state providers only).
- Written agreement which identifies and is signed by each physician the physician assistant will be assisting which has been approved by the State Board of Medicine.

Submit the application and supporting documents to:

DHS Provider Enrollment
PO Box 8045
Harrisburg, PA 17105-8045

Applications can also be submitted via fax: 717- 265-8284 or via email ra-provapp@pa.gov