

Requirements For Provider Type 28 – Laboratory

Specialty Type

Please indicate for the specialty and code:

280 - Independent Laboratory

Provider Eligibility Program (PEPs)

Please indicate the following PEP:

- Fee-for-Service

Additional Required Documents For Provider Type 28

The following documents and supporting information are required by the Bureau of Fee-for-Service Programs for enrollment: ALL DOCUMENTS MUST BE LEGIBLE TO BE ACCEPTED.

- Provider Enrollment Application with signed provider agreement
- Copy of IRS generated paperwork that shows both name and FEIN of the laboratory applying for enrollment.
- Copy of Corporation Papers, if applicable
- Copy of the **NPPES Confirmation letter** showing the NPI Number and Taxonomy(s) assigned to the laboratory applying for enrollment
- Copy of CLIA Certification
- Copy of the Clinical Laboratory Permit from the PA Department of Health
- Proof of home state Medicaid participation (out of state providers only)
- Copy of the Clinical Laboratory Permit from your home state Department of Health, if applicable

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