

MPI	Provider Name	Specialty	Enhanced Level	Qualification Status	Reason (If not qualified)	Qualification Begin Date	Qualification End Date	Provider Status	Assigned AE	Region
900002437	ABC	512. RESPITE CARE - HOME BASED	Yes	Qualified		07/01/2017	06/30/2020	Existing	PHILADELPHIA	Southeast
900002437	ABC	514. ADULT TRAINING - 2380	No	Not Qualified	Did Not Meet Qualification Requirements	07/01/2017	06/30/2020	Existing	PHILADELPHIA	Southeast
300316669	ABC Provider Services Inc.	510. HOME AND COMMUNITY	Yes	Expired		08/01/2017	06/30/2018	Existing	ALLEGHENY	West
200084839	ALLEGHENY DISABILITY SERVICES	512. RESPITE CARE - HOME BASED	N/A	Qualified		07/01/2017	06/30/2020	Existing	ALLEGHENY	West
200084820	ALLEGHENY UTILITY SERVICES	170. PHYSICAL THERAPIST	N/A	Not Qualified	ODP Terminated Provider	01/01/2017	07/01/2018	Existing	ALLEGHENY	West
300508265	CLW UAT TEST THREE	510. HOME AND COMMUNITY HABILITATION	Yes	Qualified		01/01/2017	06/30/2021	Existing	DAUPHIN	Central
300460116	DTT DOH Test Provider Two	510. HOME AND COMMUNITY HABILITATION	Yes	Expired	Did Not Meet Qualification Requirements	01/03/2017	03/24/2019	Existing	ALLEGHENY	West
300453640	Dauphin County SCO for testing TSM	214. Supports Coordination Agency	N/A	Qualified		01/01/2017	06/30/2021	Existing	DAUPHIN	Central
300497967	Healthy Home Services	264. MASS TRANSIT	N/A	Not Qualified	Voluntary Termination of Specialty	01/01/2017	01/01/2017	Existing	ALLEGHENY	West
300497967	Healthy Home	410. ADULT DAY CARE	N/A	Qualified		06/01/2017	12/31/2020	Existing	ALLEGHENY	West
300497967	Healthy Home Services	512. RESPITE CARE - HOME BASED	No	Expired		07/01/2017	06/30/2018	Existing	ALLEGHENY	West
900001229	KEYSTONE, RESIDENCE A.	051. PRIVATE DUTY NURSING	N/A	Expired		07/01/2018	06/30/2019	Existing	ARMSTRONG/DIANA	West
900001581	KEYSTONE (LAUREL RES.)	522. FAMILY LIVING HOMES - 6500	N/A	Qualified		07/01/2019	06/30/2023	Existing	ALLEGHENY	West
300346185	KEYSTONE AUTISM SERVICES	126. BEHAVIORAL SUPPORT	N/A	Qualified		07/01/2018	06/30/2023	New	ALLEGHENY	West
300346185	KEYSTONE AUTISM SERVICES	162. PSYCHIATRIC NURSE	N/A	Qualified		07/01/2018	06/30/2023	New	ALLEGHENY	West
300346185	KEYSTONE AUTISM SERVICES	420. Autism Behavioral Specialist	N/A	Qualified		07/01/2018	06/30/2023	New	ALLEGHENY	West
300346185	KEYSTONE AUTISM SERVICES	424. Autism Counseling Agency	N/A	Qualified		07/01/2018	06/30/2023	New	ALLEGHENY	West
100001038	KEYSTONE SERVICE	126. BEHAVIORAL	N/A	Qualified		07/01/2017	06/30/2020	Existing	ALLEGHENY	West