



**Application Checklist for
Home and Community Based Services (HCBS)
AmeriHealth Caritas Iowa**

Please use the following checklist as a reference and cover sheet to complete the credentialing process. All items listed below are required for each Practitioner/Contractor/Facility to participate with AmeriHealth Caritas Iowa. Please send this cover sheet and below listed credentialing documents to the AmeriHealth Caritas Iowa Corporate Provider Network Operations (CPNO) @ PO Box 406, Essington, PA 19029-0406, or by faxing to CPNO: 1 (888)-498-8751.

Practitioner/Contractor/Facility Information
Legal Business Name:
Practice/Company Name:
Practitioner/Individual Name:
Group/Individual NPI or Social Security #:
Medicaid #:

Please provide current signed copies of the following documents if applicable:

- Practitioner/Contractor/Facility (LTSS) Standard Application
- State License (if applicable)
- State Certification/Accreditation (if applicable)
- State Bond (if applicable)
- CV/Resume' (If applicable)
- W-9
- Insurance Liability policy face sheet (*showing expiration dates and limits*)

Please contact the Credentialing Department at 1-800-642-3510 and follow the prompts to “Check the Status of your Application” or if you have any questions and/or concerns regarding this process.