



Hospital, Inpatient

The following is a list of required enrollment documents for this provider type. Include with your Provider Enrollment Packet a copy of each document listed below.

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.

- Documentation showing Tax Payer Identification Number (SS-4 or CP575 or W-9)
- Bureau of Health Care Quality and Compliance (BHCQC) license
- Certification from Medicare or The Joint Commission (TJC) or the American Osteopathic Association (AOA)
- FDA Certification for Mammography, if applicable
- [Disclosure of Ownership and Control Interest Statement](#)
- Clinical Laboratories Improvement Act (CLIA) certification

You do not need to mail this checklist with your enrollment documents.