



Provider Enrollment Checklist for Provider Type 17

Special Clinic - Specialty 183, Comprehensive Outpatient Rehabilitation Facility

The following is a list of required enrollment documents for this provider type. A copy of each document listed below must be included with your provider enrollment or revalidation.

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 Taxpayer Identification Number (SS-4 or CP575 or W-9)
- Active enrollment in Medicare is required. Enrollment will be validated by Nevada Medicaid. The information on the application must match Medicare enrollment.

Resources:

The [Provider Enrollment](#) webpage provides instruction materials that will assist providers with enrolling in Nevada Medicaid.

You do not need to submit this checklist with your enrollment or revalidation.