

## Professional Provider Type Credentialing Requirements

| Provider Type   | Criteria   |
|---|--|
| <p><b>Advanced Practice Nurse Practitioner (APRN)</b></p>     | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• KS DEA, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>  |
| <p><b>Audiologist</b></p>                                     | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p><b>Certified Nurse Midwife (CNM)</b></p>                   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• KS DEA, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• Board Certification</li> <li>• KHCSF, Kansas Health Care Stabilization Fund</li> </ul> |
| <p><b>Certified Occupational Therapy Assistant (COTA)</b></p> | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• Supervising Occupational Therapist</li> </ul>   |
| <p><b>Certified Physical Therapy Assistant (CPTA)</b></p>     | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• Supervising Physical Therapist</li> </ul>   |

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|---|---|
| <p><b>Certified Registered Nurse Anesthetist (CRNA)</b></p>   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• KS DEA, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• AANA, American Association of Nurse Anesthesiology</li> <li>• KHCSF, Kansas Health Care Stabilization Fund</li> </ul>                             |
| <p><b>Doctor of Chiropractic (DC)</b></p>   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• KHCSF, Kansas Health Care Stabilization Fund</li> </ul>  |
| <p><b>Doctor of Dental Surgery (DDS)<br/>Doctor of Medicine in Dentistry (DMD)</b><br/><b>Includes Dental Sub-Specialties:</b><br/>Endodontist, Periodontist, Prosthodontist,<br/>Pediatric Dentistry, Orthodontist</p> | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• KS DEA, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• KHCSF, Kansas Health Care Stabilization Fund</li> </ul>   |
| <p><b>Doctor of Osteopathic (DO)<br/>Doctor of Medicine (MD)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• Hospital Privileges if applicable</li> <li>• License</li> <li>• KS DEA, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Board Certification if applicable</li> <li>• Signed Authorization</li> <li>• KHCSF, Kansas Health Care Stabilization Fund</li> </ul> |
| <p><b>Doctor of Podiatric Medicine (DPM)</b><br/>Podiatric Medicine or Podiatric Surgery</p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• Hospital Privileges if applicable</li> <li>• License</li> <li>• KS DEA, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Board Certification if applicable</li> <li>• Signed Authorization</li> <li>• KHCSF, Kansas Health Care Stabilization Fund</li> </ul> |

| Provider Type  | Criteria   |
|--|--|
| <p><b>Licensed Assistant Behavioral Analyst (LABA)</b></p> <p><b>Bachelor Level</b></p> <p><i>(also known as ABA with appropriate license/certification)</i></p> <p><i>(may also be classified as Autism Specialist with appropriate (CCTS) certification)</i></p> | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• CCTS Certification letter from KDADS, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Board Certification – Board Certified Assistant Behavior Analyst</li> <li>• Signed Authorization</li> <li>• Supervising Licensed Behavioral Analyst</li> </ul> |
| <p><b>Licensed Athletic Trainer (AT)</b></p>   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Board Certification (BOC)</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• Supervising MD or DO</li> </ul>  |
| <p><b>Licensed Dietician (LD)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p><b>Licensed Behavioral Analyst (LBA)</b></p> <p><b>Master Level</b></p> <p><i>(may also be classified as Autism Specialist with appropriate (CCTS) certification)</i></p>   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• CCTS Certification letter from KDADS, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Board Certification – Behavior Analyst Certification Board</li> <li>• Signed Authorization</li> </ul>  |
| <p><b>Licensed Clinical Addition Counselor (LCAC)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p><b>Licensed Clinical Psychotherapist (LCP)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p><b>Licensed Clinical Professional Counselor (LCPC)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |

| Provider Type   | Criteria   |
|---|--|
| <p align="center"><b>Licensed Professional Counselor (LPC)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p align="center"><b>Licensed Masters Addiction Counselor (LMAC)</b></p>                                    | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p align="center"><b>Licensed Marriage and Family Therapist (LMFT)</b><br/><br/><b>Clinical (LCMFT)</b></p> | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p align="center"><b>Licensed Master Social Worker (LMSW)</b></p>   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p align="center"><b>Licensed Respiratory Therapist (LRT)</b></p>   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p align="center"><b>Licensed Specialist Clinical Social Worker (LSCSW)</b></p>                             | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p align="center"><b>Occupation Therapy (OT)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Board Certification</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• Board Certification if applicable</li> </ul> |

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| <p><b>Optometry (OD)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• KS DEA, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>   |
| <p><b>Physician Assistant (PA)</b></p>  | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• KS DEA, if applicable</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> <li>• Board Certification – National Commission on Certification of Physician Assistants</li> <li>• KHCSF, Kansas Health Care Stabilization Fund</li> <li>• Supervising MD or DO</li> </ul> |
| <p><b>Psychologist (Ph.D.)<br/>Licensed Master Level Psychologist (LMLP)<br/>Licensed Psychologist (LP)</b></p>                       | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>  |
| <p><b>Physical Therapy (PT)</b><br/><br/><b>Doctorate</b><br/>(Not needed for licensure prior to 2016)</p>                            | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>  |
| <p><b>Registered Behavior Technician (RBT)</b><br/><br/><i>(Individual Supports (IIS) with appropriate license/certification)</i></p> | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• Certification as a Registered Behavior Technician</li> <li>• IIS Certification letter from KDADS</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Signed Authorization</li> <li>• Supervising Licensed Behavioral Analyst</li> </ul>   |
| <p><b>Registered Pharmacist (RPh)</b></p>   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>  |
| <p><b>Speech – Language Pathologist (SLP)</b></p>   | <ul style="list-style-type: none"> <li>• 10-yr Work History Post Grad (No more than a 90-day gap)</li> <li>• License</li> <li>• Professional Malpractice Insurance Certificate</li> <li>• Malpractice History – <b>Judgement or settled claims only</b></li> <li>• Education and Training (Start and end month and year)</li> <li>• Degree Earned</li> <li>• Signed Authorization</li> </ul>  |