



MARYLAND Department of Health

NEW INDIVIDUAL RENDERING PROVIDERS

Checklist for ePREP Provider Application

In order to complete and submit a new individual rendering provider application, you will need the following information and corresponding documentation ready. PDFs are recommended.

| INFORMATION | DOCUMENTATION |
|---|---|
| <input type="checkbox"/> Group Information: NPI, Name, Service Address (must be enrolled in Maryland Medicaid) | |
| <input type="checkbox"/> Applicant's Social Security Number | |
| <input type="checkbox"/> Applicant's Professional Licenses | <input type="checkbox"/> Clear copies of all Licenses |

If any of the following applies to you, you will need the following information and corresponding documentation ready.

| IF APPLICABLE: | |
|--|---|
| INFORMATION | DOCUMENTATION |
| <input type="checkbox"/> Specialties | <input type="checkbox"/> Specialty Certification |
| <input type="checkbox"/> Drug Enforcement Agency Number | <input type="checkbox"/> DEA Certificate |
| <input type="checkbox"/> Clinical Laboratory Improvement Amendment (CLIA) Number | <input type="checkbox"/> CLIA Certificate |
| <input type="checkbox"/> Maryland Lab Permit Number | <input type="checkbox"/> Maryland Lab Permit Registration |

Please Note: If you are completing this application on behalf of a new provider, please see credentialer instructions available at

health.maryland.gov/ePREP