USER MANUAL

Delegated Credentialing

Delegates / Delegate Admin

Ohio Department of Medicaid

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Introduction

This document discusses the steps and functions of Delegated Credentialing in PNM.

Being a Delegate allows users to:

1. Add new individual affiliates that are <u>currently enrolled</u> with Ohio Medicaid and have been assigned a Medicaid ID.

2. Add service locations to affiliates, if the location is <u>presently listed</u> as a Primary Service Address or Other Service Location for the group record in PNM.

3. Indicate a provider is in a Delegated group for Credentialing.

<u>NOTE:</u> Administrators for delegates are responsible for making sure their delegate roster information is updated, correct, and is accurately uploaded in PNM. It is imperative that an updated Roster is uploaded to PNM once providers have been affiliated with your group.

For more information on Delegated Credentialing, please contact credentialing@medicaid.ohio.gov.
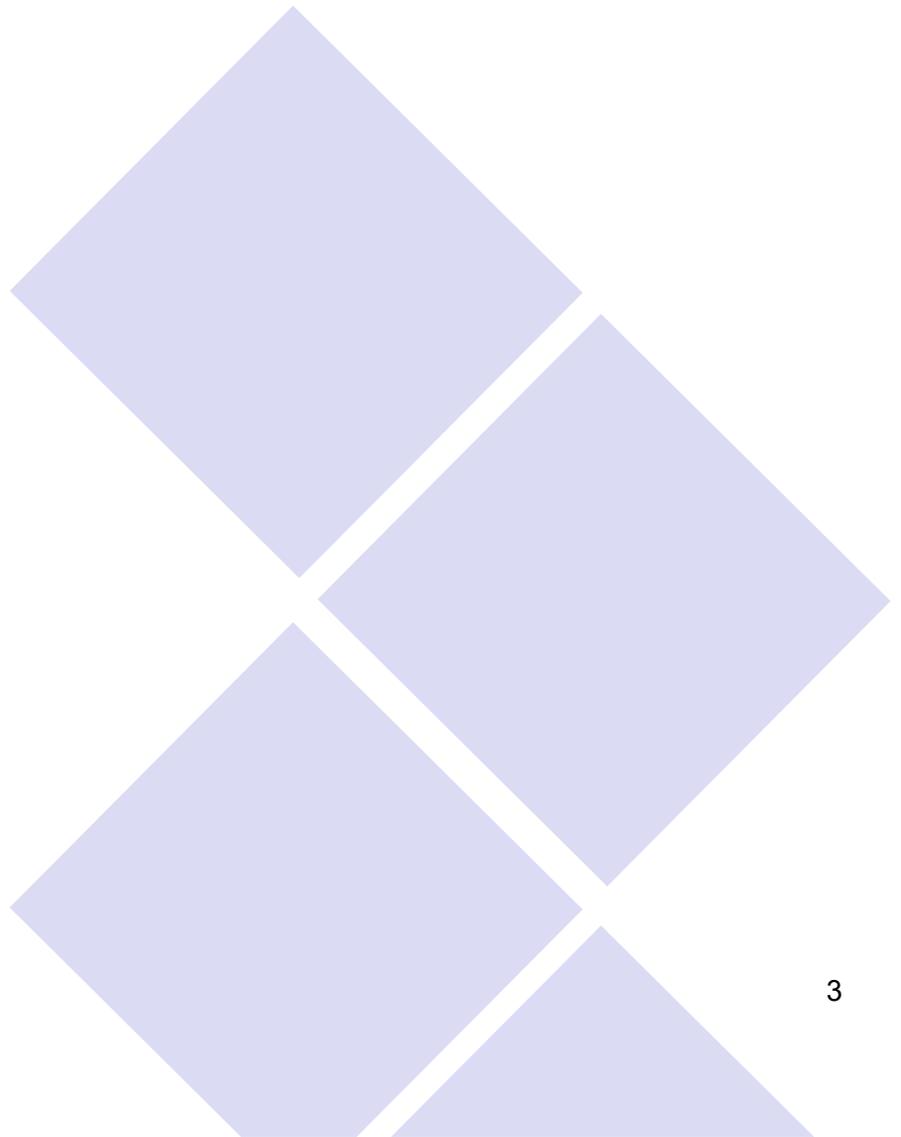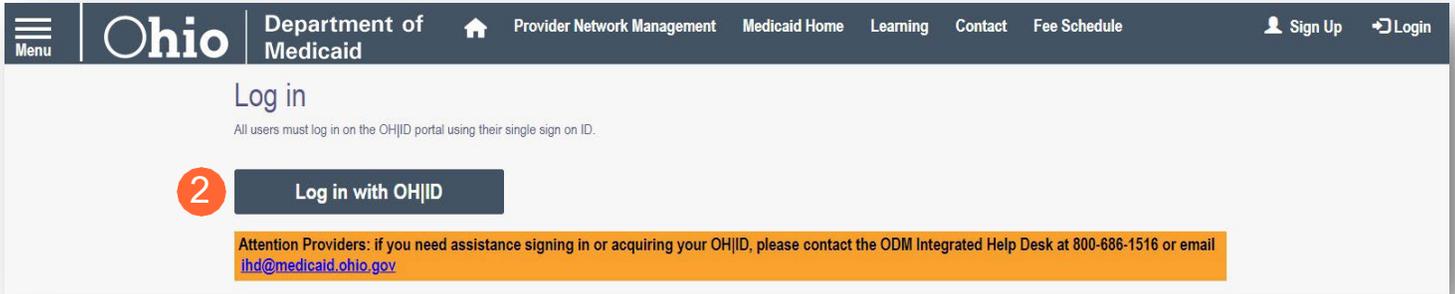
Initial Login to PNM

In this section of the user guide we will review the initial steps of logging into PNM. All users will log into the PNM system by using IOP (Innovate Ohio Platform).

Step 1: Visit the PNM web address: https://ohpnm.omes.maximus.com/OH_PNM_PROD/Account/Login.aspx.

Step 2: Click **Log in with OH|ID**.

Step 3: The system will prompt you to enter your username and password on the IOP login screen. Once entered, click **Log in**.

- If you have not created an IOP account previously, you can click **Create Account** and follow the steps to create a new account.

Step 4: You will be redirected to the PNM system. Read the Terms of Use and click "Yes, I have read the agreement" to proceed into PNM.

Terms

This system contains State of Ohio Department of Medicaid information and is restricted to authorized users ONLY. Per the OH|ID terms and conditions you agreed to when signing up for your user credentials you are certifying that you are the individual owner and user of your OH|ID account used to access this system. You are responsible for all activities occurring under your account. Whoever knowingly or intentionally accesses a computer or computer system without authorization or exceeds the access to which that person is authorized, and by means of such access, obtains, alters, damages, destroys, or discloses information, or prevents authorized use of the information, shall be subject to such penalties allowed by law or policy.

In the event of a violation of law or policy, or because of any suspicious activity occurring on your OH|ID account, we may refuse service, terminate account access, or cancel transactions related to your OH|ID account.

All activities on this system may be recorded and/or monitored. Anyone using this system expressly consents to such monitoring. Users who access this system consent to the provisions of confidentiality of the information being accessed, but have no expectation of privacy while using this system.

In the event you discover that you can access any information to which you are not entitled, you must immediately contact ihd@medicaid.ohio.gov

☐ **Yes, I have read the agreement**

Cancel

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Delegated Provider Administrator – New Enrollment Functionality

A Delegated Administrator or Power Agent assigned under the Delegated Administrator can begin a new enrollment application for a provider using the '**New Provider?**' button or **New Streamlined Provider**' button located on their dashboard.

- The '**New Provider?**' button will begin a new enrollment application without any pre-filled information.

- The **New Streamlined Provider**' button streamlines the new enrollment application process with pre-filled address pages.
  - Green checkmarks will display in the enrollment navigation bar for the pages where the address information has been pre-filled.
    - The pre-filled address pages are based on the address entered on the Key Identifiers page, but the pre-filled information can be typed over and updated if needed.
    - The Correspondence Address page will not be pre-filled and required to complete this page manually when using the New Streamlined Provider option, although the Same as Practice Location option is still available on the Correspondence Address page.
  - The '**New Streamlined Provider**' button allows for the optional enrollment pages to be submitted without a green checkmark.
    - Optional enrollment pages do not have a red asterisk next to the page name on the navigation bar.
  - The '**New Streamlined Provider**' button will automatically check mark the box on the Group, Facility & Hospital Affiliations page of the application that states: "*Select this box if you have delegated credentialing that does not display below.*"
    - The Delegated Credentialing indicator box is still editable and can be unchecked for providers that are not covered under the ODM Delegated Credentialing Agreement.

Follow these steps to begin a streamlined new enrollment application.

Step 1: Click the '**New Streamlined Provider**' button.

								DD Contract Number	DD Facility Number					Revalidation Due Date
Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty				Location	Effective Date	Submit Date		
		All				All								
		Complete	21 - Professional Medical Group			Professional Medical Group					10/06/2025	10/06/2025		10/06/2030

NOTE: The **New Streamlined Provider**' button option is only available for individual provider types.

NOTE: The **New Streamlined Provider**' button is only available to the specific provider types and specialties listed below. See Appendix 1 for the full listing of provider types and specialties that can use the streamlined enrollment feature.

After clicking the **New Streamlined Provider**' button, PNM will redirect to the Key Identifiers page to begin a streamlined new enrollment application.

Step 2: Enter the required information indicated by an asterisk (*).

Step 3: Click the **Validate NPI** button.

> **NOTE:** After the NPI is validated the Taxonomy and Specialty dropdowns appear below
> the Validate NPI button.

Streamlined Application

"Please note that you have 10 days to complete your application. After 10 days, your information will be removed and you will have to re-start the process from the beginning of the application."

Provider Key Identifiers - Entered values will populate throughout application

Provider Type:	
First Name:	
Middle Initial:	
Last Name:	
Tax ID Type:	○ EIN ◉ SSN
Tax ID:	
NPI:	
Requested Effective Date:	10/28/2025
Gender:	
DateofBirth:	mm/dd/yyyy

Validate NPI

Cancel

Step 4: Select the taxonomy from the drop-down menu.

Step 5: Select the primary Specialty from the drop-down menu.

> **NOTE:** Additional or secondary specialties can only be added by submitting an update to the application after the streamlined application is processed.

Step 6: Enter the address that is to be pre-filled on the address pages for the new enrollment application.

> **NOTE:** The Correspondence Address page will still be required to complete when using the New Streamlined Provider option, although the Same as Practice Location option is still available on the Correspondence Address page.

Step 7: Click the '**USPS'** button to begin to verify the address through the USPS database.

Step 8: In the USPS Confirmation pop-up, confirm the address found in the USPS database is correct, and then click the '**Accept**' button.

Step 9: Review the entire page, then click the '**Continue to Main Application'** button.

NOTE: PNM will direct to the first page of the new enrollment application.

DELEGATED CREDENTIALING

The first new enrollment application page to display is the Provider Information page. The current page of the application will be highlighted in yellow. **(A)**

- Green checkmarks will display in the enrollment navigation bar for the pages where the address information has been pre-filled. **(B)**
    - The pre-filled address pages are based on the address entered on the Key Identifiers page, but the pre-filled information can be typed over and updated if needed.
    - Correct or replace any pre-filled address information by navigating to the page and typing over the information on the page
    - The Correspondence Address page will not be pre-filled and required to complete this page manually when using the New Streamlined Provider option, although the Same as Practice Location option is still available on the Correspondence Address page.
- Required enrollment pages display a red asterisk(*) next to the page in the navigation bar. **(C)**
    - Users will only need to complete the required pages indicated by a red asterisk.
    - Optional pages can be skipped completely if users do not need to enter information on those pages.
- Click the '**Next**' button to save and continue to the next page of the new enrollment application. **(D)**
- The '**New Streamlined Provider**' button will automatically check mark the box on the Group, Facility & Hospital Affiliations page of the application that states: "*Select this box if you have delegated credentialing that does not display below.*"
    - The Delegated Credentialing indicator box is still editable and can be unchecked for providers that are not covered under the ODM Delegated Credentialing Agreement.
- All required pages need completed before submitting the new enrollment application.

Indicating Delegated Credentialing on a Enrollment Application

An Administrator or Power Agent can indicate that a provider has delegated credentialing when completing a new enrollment application using the '**New Provider?**' button or the '**New Streamlined Provider**' button.

> **NOTE:** Indicating that a provider has delegated credentialing is completed on the Group, Facility & Hospital Affiliations page of the application in PNM.

Step 1: On the Group, Facility & Hospital Affiliations page of the application, scroll down towards the bottom of the page (below the Hospital Affiliations section) to find the **Delegated Credentialing** section.

Step 2: In the Delegated Credentialing section, check the box that states: "*Select this box if you have delegated credentialing that does not display below."*

> **NOTE:** The box will automatically be checked if using the '**New Streamlined Provider**' button.

> **NOTE:** For new enrollment applications, there will be no delegates that appear in the box. The ODM Credentialing staff will review the application after submission and add the Assigned Delegates.

Delegated Credentialing

☐ Select this box if you have delegated credentialing that does not display below.
Credentialing delegates are assigned by ODM Credentialing staff.

Assigned Delegates

Delegate Name	Delegate MED ID
No delegates.	

The credentialing pages listed below are optional for Delegates after checking the Delegated Credentialing indicator box on the Group, Facility & Hospital Affiliations page and removes the need to 'bypass' these credentialing pages:

- Professional Liability Insurance page
- Education page
- Malpractice Claims History page
- Work History page

> **NOTE:** For accurate data report in the PNM directory, the board certification and hospital privileges information will need to be entered on the appropriate screens in PNM.

Review the User Guides on the Provider Education & Training Resources page in PNM for more details.

Credentialing Delegate Tasks in PNM

The delegate is responsible for all credentialing functions for the providers in their program, and for communication of credentialing information to ODM. This includes credentialing, recredentialing, and routine sanction monitoring of providers. *All individual affiliates and the service (rendering) locations where those affiliates practice, are managed by the Delegate Administrator.*

Rosters

Rosters are used to keep the group's affiliate information up to date for all service (rendering) locations by individual. ODM has developed a roster that the Delegated Credentialing Administrator for your organization is able to upload directly into the PNM system.

Adding Affiliates

For providers who are currently enrolled, please add them on this roster once they have completed the credentialing process and are fully enrolled in Medicaid (assigned a Medicaid ID).

Updating Affiliates

Rosters are also used to update information for individuals who are presently affiliated. This serves to automatically update the affiliations for your group providers quickly and efficiently. The information contained on this roster is utilized in the system to affiliate individual providers to specific addresses that you currently have listed for your group.

- End dating affiliations for your group.
- Adding service (rendering) locations to individuals in your group.

NOTE: To affiliate a provider to an address, the address itself must be an address that currently exists for your group in the PNM system. If a new location needs to be added for your group, or needs to be removed from your group, you must use the Other Service Location page in PNM to complete an update on your group's Medicaid enrollment record. Be sure to note of what the added address is.

The affiliate spreadsheet document can be uploaded by the Delegate Admin in PNM by clicking the **Affiliate Update** button (A).

NOTE: This roster should be uploaded as frequently as information changes for each group.

| My Providers | Power Agent Access Mgmt | Account Administration | Affiliate Update | Agent Bulk Upload | | | | | | XLS PDF | | New Provider ? |

(A)

New Streamlined Provider

Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidation Due Date
		All				All						
		Complete	21 - Professional Medical Group			Professional Medical Group				10/06/2025	10/06/2025	10/06/2030

Roster Requirements

Rosters will be uploaded to PNM using an Excel spreadsheet template. For information to be accurately captured in PNM, the lines (columns and rows) within the spreadsheet must be completed in the proper format.

- When adding new affiliates (selecting the Update Type 'A'), the infinite End Date that needs to be entered is 12/31/2299.

- Individual start dates cannot be prior to the individual's or group's effective date with Ohio Medicaid.

- Any rendering location address added in the roster for an affiliate must be present and listed as the group's Primary Service Location or Other Service Locations in PNM.

- To update information for an affiliate, select Update Type 'E' on the roster.

  o The Rendering Location field and the End Date field are the only fields that can be changed when selecting the Update Type 'E.'

  NOTE: The table on the next page lists each field contained within the roster and requirements for completing.

Field Name	Data Type	Max Length	Required	Description
Update Type	String	1	Yes	A = Add; E = End/Update
Group Med ID	String	10	Yes	Medicaid ID of the Group Provider
Affiliate Med ID	String	10	Yes	Medicaid ID of the Individual Provider
Affiliate NPI	String	10	Yes	NPI of the Individual Provider
Affiliate Start Date	Date	10	Yes	Start date of the new affiliation required with the Update Type is **'Add'** (Should be in MM/DD/YYYY format) Start date is required when end dating a provider at a location
Affiliate End Date	Date	10	Yes	End date of the new affiliation required when the Update Type is **'Add'** (12/31/2299) or if you are end dating a provider when the Update Type **'End'** (Should be in MM/DD/YYYY format)
Rendering Location Address Line 1	String	60	Yes	Rendering location Address Line 1 of the affiliate – must match **Primary Service Location** or **Other Service Locations** that exist in PNM for the group provider
Rendering Location Address Line 2	String	60	No	Rendering location Address Line 2 of the affiliate – must match **Primary Service Location** or **Other Service Locations** that exist in PNM for the group provider
Rendering Location Address City	String	30	Yes	Rendering location Address City of the affiliate – must match **Primary Service Location** or **Other Service Locations** that exist in PNM for the group provider
Rendering Location Address State	String	2	Yes	Rendering location Address State of the affiliate – must match **Primary Service Location** or **Other Service Locations** that exist in PNM for the group provider
Rendering Location Address Zip	String	5	Yes	Rendering location Address Zip of the affiliate – must match **Primary Service Location** or **Other Service Locations** that exist in PNM for the group provider
Rendering Location Phone	String	12	Yes	Rendering location Phone Number of the affiliate – must match **Primary Service Location or Other Service Locations** that exist in PNM for the group provider (Should be in XXX-XXX-XXXX format)

Uploading Roster in PNM

The below steps outline the process for uploading a Roster in the PNM system. One Administrator for each delegated group will have the ability granted in PNM to upload the roster document. To designate the administrator that will complete this function, please e-mail angela.cage@medicaid.ohio.gov the Med ID for the delegated group and Name and User ID of the Administrator user.

> **NOTE:** It is imperative that the addresses on the roster document match with the addresses that are listed for the group in PNM.

Step 1: After logging into PNM, click the **Affiliate Update** button location near the top of the page.

> **NOTE:** Only users designated to upload delegate rosters will have the 'Affiliate Update' button appear. If you should have access, but do not see the button, reach out to the ODM Integrated Help Desk for support.

Reg ID	Provider	Status	Provider Type	NPI	Medicaid ID	Specialty	DD Contract Number	DD Facility Number	Location	Effective Date	Submit Date	Revalidation Due Date
517949	Amanda Trainer	Approved	26 - Non-Agency Home Care Attendant	1083018287	9999886	ODM WAIVER NON-AGENCY HOME CARE ATTENDANT				02/22/2022	01/24/2023	02/16/2027

Step 2: The Affiliate Update page will display.

- Download a clean copy of the current affiliate template (A).
- To view the last document uploaded, click 'View Upload' under the Upload heading (B).
- A status message of *Processing, Complete,* or *Rejected* displays under the Affiliate File Upload Status heading (C). (Status definitions are listed in Step 8.)
- When a *Complete* or *Rejected* status is received, click 'View Response' to review responses from PNM for the individual line items on the roster, including error codes (D).

Step 3: When your document is ready to upload, click **Upload File**.

Affiliate Update

Please download the affiliate update template here

Affiliate File Upload Date	Affiliate File Name	Affiliate File Upload Status	Upload	Response
03/26/2024	Delegated Credentialing Roster	Processing	View Upload	
01/05/2024	Delegated Credentialing Roster	Complete	View Upload	View Response

Upload File

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Step 4: A pop-up window will display for the Affiliate Update. Click **Choose File** to locate the document on your computer.
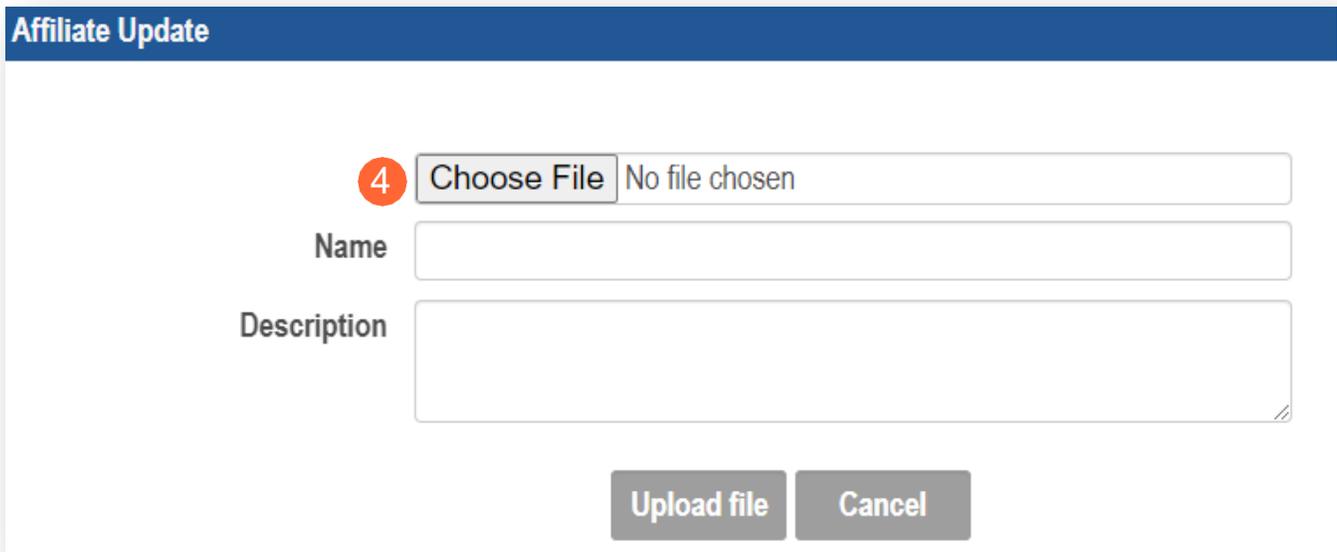
Step 5: Select the document you wish to upload and click **Open**.
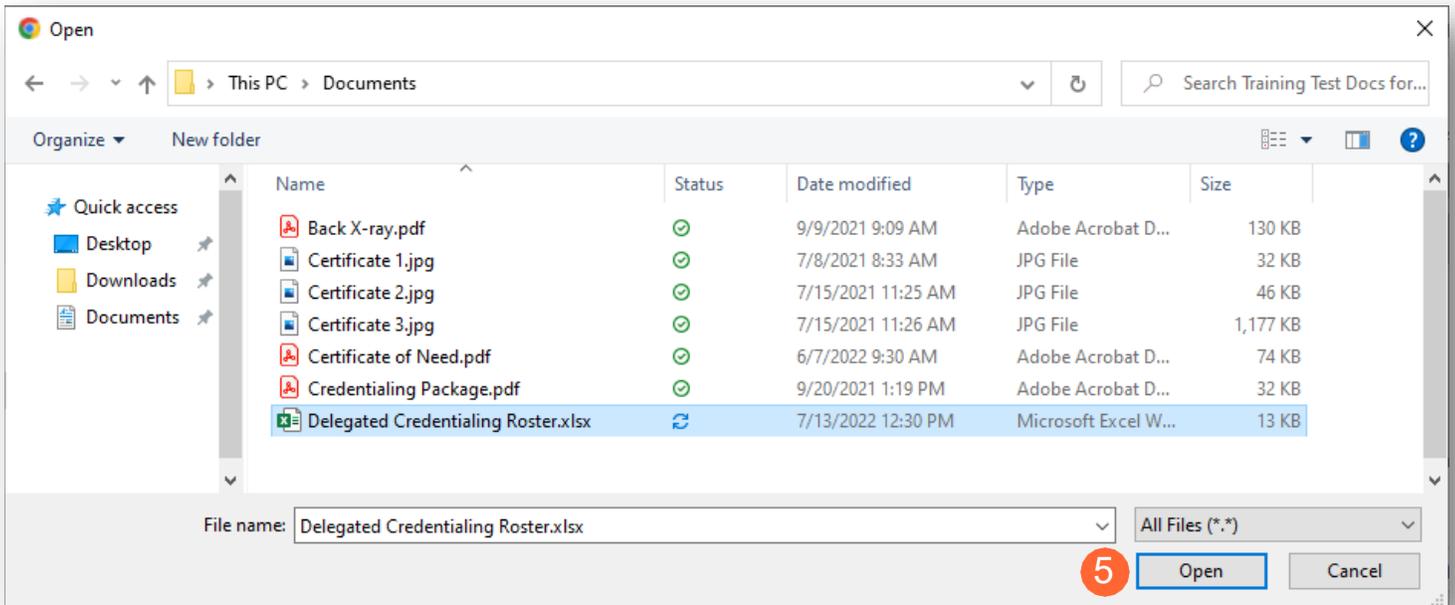
Step 6: The document will appear next to 'Choose File' and the Name line will auto-fill with the document name. You can add a description of the document if you would like, but one is not required.

Step 7: Click **Upload File** to upload the file.

- Click **Cancel** if you do not want to proceed with the upload of this document.

Step 8: The uploaded file will appear on the Affiliate Update list.

> **NOTE:** The most recent file(s) will appear at the top of the list.

In the Affiliate File Upload Status column:

- **Complete** – Indicates the uploaded file was processed and the user can review the Uploaded file and Response file. When you click 'View Response,' the excel document opens and you can view:
  - If individual lines in response file say "Accepted", the record is uploaded into PNM.
  - If individual lines in response file have Error Codes, review the Error Code definitions to troubleshoot. You will need to reupload the document with these corrected items.
- **Processing** – This indicates the uploaded file was received and is currently being processed. The user can only view the uploaded file.
- **Rejected** – This indicates the uploaded file was not in the correct format and could not be processed. Review the formatting, following the roster requirements, and try again.

Error Codes

If you receive an error code, review the Error Code Definitions Table listed on the Affiliate Update page to determine the reason for the error and work to correct/update the uploaded document.

For questions regarding the error codes, please contact the PNM Support Team at 1-800-686-1516 (Option 2) or email ihd@medicaid.ohio.gov and note this is for a Delegated Roster.

Error Code	Definition
DA001	Affiliated Provider is not present/enrolled in the system
DA002	Affiliated Provider is not active in the system
DA003	Affiliated Group is not present/enrolled in the system
DA004	Affiliated Group is not active in the system
DA005	Affiliated Provider at this rendering location is a duplicate
DA006	When editing an affiliation start date cannot be before the Group's start date
DA007	Affiliation start date cannot be changed
DA008	Affiliation end date in system cannot be earlier than Affiliations start date
DA009	Affiliated Provider's NPI and Medicaid ID do not match
DA010	Affiliation End Date cannot be after the Group's end date
DA011	Affiliated Provider is already end dated at this rendering location
DA012	An Individual Provider cannot have affiliations
DA013	A Group Provider cannot be affiliated with another Group
DA014	Required data elements are missing, the upload could not be completed
DA015	You currently do not have the authorization to update the Group Provider
DA016	Rendering Location does not exist for this provider
DA017	Data in this row is incorrectly formatted. Please re-download template and try again
DA017.A	Update Type column should be A or E
DA017.B	Group Medicaid ID column should be numeric and 10 characters or less
DA017.C	Affiliate Medicaid ID column should be numeric and 10 characters or less
DA017.D	Affiliate provider's NPI should be exact 10 characters
DA017.E	Affiliate Start Date should be in MM/DD/YYYY format
DA017.F	Affiliate End Date should be in MM/DD/YYYY format
DA017.G	Rendering Location Address Line 1 is required and should not exceed more than 60 characters
DA017.H	Rendering Location Address Line 2 should not exceed more than 60 characters if provided
DA017.I	Rendering Location Address City is required and should not exceed more than 30 characters
DA017.J	Rendering Location Address State is required and should not exceed more than 30 characters
DA017.K	Rendering Location Address Zip is required and should be 5 characters
DA018	Phone number not in the expected format
DA019	When adding an affiliate, the individual affiliation start date cannot be prior to the group's effective date

DA20	Affiliate provider start date cannot be prior to the individual's effective date
DA21	Affiliated provider start date cannot be prior to the individual's conversion to standard effective date
DA022	Affiliation Start date or rendering location does not match an existing record
DA023	End date of rendering location is prior to the start date of provider at this location
DA024	End date of providers affiliation at the rendering location is greater than the end date of the location

Appendix 1

The following list contains the provider types and specialties that can use the streamlined application process.

MMIS Provider Type	Provider Type Name	MMIS Specialty Type	Specialty Type Name
7	REGISTERED DIETITIAN NUTRITIONIST	70	REGISTERED DIETITIAN NUTRITIONIST
20	Physician/Osteopath Individual	201	GENERAL PRACTICE
20	Physician/Osteopath Individual	202	GENERAL SURGERY
20	Physician/Osteopath Individual	203	ALLERGY & IMMUNOLOGY
20	Physician/Osteopath Individual	204	ANESTHESIOLOGY
20	Physician/Osteopath Individual	205	OTOLARYNGOLOGY
20	Physician/Osteopath Individual	206	CARDIOLOGY
20	Physician/Osteopath Individual	207	Family Practice
20	Physician/Osteopath Individual	208	GASTROENTEROLOGY
20	Physician/Osteopath Individual	209	INTERNAL MEDICINE
20	Physician/Osteopath Individual	210	NEUROLOGY
20	Physician/Osteopath Individual	211	NEUROLOGICAL SURGERY
20	Physician/Osteopath Individual	212	Obstetrics & Gynecology
20	Physician/Osteopath Individual	213	Psychiatric
20	Physician/Osteopath Individual	214	PULMONARY DISEASE
20	Physician/Osteopath Individual	215	Pediatric
20	Physician/Osteopath Individual	216	Geriatric
20	Physician/Osteopath Individual	217	CARDIOVASCULAR SURGERY
20	Physician/Osteopath Individual	218	HEMATOLOGY/ONCOLOGY
20	Physician/Osteopath Individual	219	GYNECOLOGY
20	Physician/Osteopath Individual	220	Oncology
20	Physician/Osteopath Individual	221	SURGICAL ONCOLOGY
20	Physician/Osteopath Individual	222	RADIATION ONCOLOGY
20	Physician/Osteopath Individual	223	GYNECOLOGICAL ONCOLOGY
20	Physician/Osteopath Individual	224	EMERGENCY MEDICINE
20	Physician/Osteopath Individual	226	ADDICTION MEDICINE
20	Physician/Osteopath Individual	227	ADDICTION PSYCHIATRY
20	Physician/Osteopath Individual	228	ADULT RECONSTRUCTIVE ORTHOPEDICS
20	Physician/Osteopath Individual	229	ALLERGY
20	Physician/Osteopath Individual	230	ANATOMIC PATHOLOGY
20	Physician/Osteopath Individual	231	ANATOMIC/CLINICAL PATHOLOGY
20	Physician/Osteopath Individual	232	CARDIOTHORACIC SURGERY
20	Physician/Osteopath Individual	233	CARDIOVASCULAR DISEASE
20	Physician/Osteopath Individual	234	CHILD & ADOLESCENT PSYCHIATRY

20	Physician/Osteopath Individual	235	CHILD NEUROLOGY	
20	Physician/Osteopath Individual	236	Clin. & Lab. Dermatological Imm.	
20	Physician/Osteopath Individual	237	Clin. & Lab. Immunology (Pediatrics)	
20	Physician/Osteopath Individual	238	Clin. & Lab. Immunology(Internal Med.)	
20	Physician/Osteopath Individual	239	ACA PRIMARY CARE (ATTESTATION REQUIRED)	
20	Physician/Osteopath Individual	241	Clinical Cardiac Electrophysiology	
20	Physician/Osteopath Individual	242	Clinical Cytogenetics	
20	Physician/Osteopath Individual	243	Clinical Lab.Immunology(Allerg & Imm)	
20	Physician/Osteopath Individual	244	Clinical Neurophysiology	
20	Physician/Osteopath Individual	245	CLINICAL PATHOLOGY	
20	Physician/Osteopath Individual	246	CLINICAL PHARMACOLOGY	
20	Physician/Osteopath Individual	247	COLON & RECTAL SURGERY	
20	Physician/Osteopath Individual	248	CRITICAL CARE MED. (NEUROLOGICAL SUR.)	
20	Physician/Osteopath Individual	249	CRITICAL CARE MED.(ANESTHESIOLOGY)	
20	Physician/Osteopath Individual	251	CRITICAL CARE MED.(INTERNAL MED.)	
20	Physician/Osteopath Individual	252	CYTOPATHOLOGY	
20	Physician/Osteopath Individual	253	DERMATOLOGIC SURGERY	
20	Physician/Osteopath Individual	254	DERMATOLOGY	
20	Physician/Osteopath Individual	255	DERMATOPATHOLOGY (PATHOLOGY)	
20	Physician/Osteopath Individual	256	DIABETES	
20	Physician/Osteopath Individual	257	DIAGNOSTIC RADIOLOGY	
20	Physician/Osteopath Individual	258	ENDOCRINOLOGY/DIABETES & METABOLISM	
20	Physician/Osteopath Individual	259	EPIDEMIOLOGY	
20	Physician/Osteopath Individual	261	FACIAL PLASTIC SURGERY	
20	Physician/Osteopath Individual	262	Foot & Ankle, Orthopedics	
20	Physician/Osteopath Individual	263	General Preventive Medicine	
20	Physician/Osteopath Individual	264	Geriatric Psychiatry	
20	Physician/Osteopath Individual	265	Hand Surgery	
20	Physician/Osteopath Individual	266	Head & Neck Surgery	
20	Physician/Osteopath Individual	267	HEMATOLOGY	
20	Physician/Osteopath Individual	268	HEPATOLOGY	
20	Physician/Osteopath Individual	269	IMMUNOLOGY	
20	Physician/Osteopath Individual	273	MAXILLOFACIAL SURGERY	
20	Physician/Osteopath Individual	274	Internal Medicine/Pediatrics	
20	Physician/Osteopath Individual	275	Maternal & Fetal Medicine	
20	Physician/Osteopath Individual	276	Maxillofacial Radiology	
20	Physician/Osteopath Individual	277	Medical Toxicology(Emer. Medicine)	

20	Physician/Osteopath Individual	278	Medical Toxicology(Pediatrics)	
20	Physician/Osteopath Individual	279	Medical Toxicology(Prevent. Medicine)	
20	Physician/Osteopath Individual	281	Musculoskeletal Oncology	
20	Physician/Osteopath Individual	282	NEONATAL-PERINATAL MEDICINE	
20	Physician/Osteopath Individual	283	NEPHROLOGY	
20	Physician/Osteopath Individual	284	Neurology/Diag Rad/	
20	Physician/Osteopath Individual	285	Neuropathology	
20	Physician/Osteopath Individual	286	Neuroradiology	
20	Physician/Osteopath Individual	287	Nuclear Medicine	
20	Physician/Osteopath Individual	288	Nuclear Radiology	
20	Physician/Osteopath Individual	289	Nutrition	
20	Physician/Osteopath Individual	290	OBSTETRICS	
20	Physician/Osteopath Individual	291	Occupational Medicine	
20	Physician/Osteopath Individual	292	OPHTHALMOLOGY	
20	Physician/Osteopath Individual	293	ORTHOPEDIC SURGERY	
20	Physician/Osteopath Individual	294	Orthopedic Surgery Of The Spine	
20	Physician/Osteopath Individual	295	Orthopedic Trauma	
20	Physician/Osteopath Individual	296	Osteopathic Manipulative Medicine	
20	Physician/Osteopath Individual	297	Otology/neurotology	
20	Physician/Osteopath Individual	298	Pain Medicine	
20	Physician/Osteopath Individual	299	Palliative Medicine	
20	Physician/Osteopath Individual	320	Pediatric Allergy	
20	Physician/Osteopath Individual	321	Pediatric Cardiology	
20	Physician/Osteopath Individual	322	PEDIATRIC CRITICAL CARE MEDICINE	
20	Physician/Osteopath Individual	323	Pediatric Emergency Medicine	
20	Physician/Osteopath Individual	324	Pediatric Endocrinology	
20	Physician/Osteopath Individual	325	Pediatric Gastroenterology	
20	Physician/Osteopath Individual	326	Pediatric Hematology/ Oncology	
20	Physician/Osteopath Individual	327	Pediatric Infectious Disease	
20	Physician/Osteopath Individual	328	Pediatric Nephrology	
20	Physician/Osteopath Individual	329	Pediatric Ophthalmology	
20	Physician/Osteopath Individual	330	Pediatric Orthopedics	
20	Physician/Osteopath Individual	331	Pediatric Otolaryngology	
20	Physician/Osteopath Individual	332	Pediatric Pathology	
20	Physician/Osteopath Individual	333	Pediatric Pulmonology	
20	Physician/Osteopath Individual	334	Pediatric Radiology	
20	Physician/Osteopath Individual	335	Pediatric Rheumatology	
20	Physician/Osteopath Individual	336	PEDIATRIC SURGERY	
20	Physician/Osteopath Individual	337	Pediatric Urology	
20	Physician/Osteopath Individual	338	PHYSICAL MEDICINE & REHABILITATION	

20	Physician/Osteopath Individual	339	PLASTIC SURGERY
20	Physician/Osteopath Individual	340	Proctology
20	Physician/Osteopath Individual	341	Psychoanalysis
20	Physician/Osteopath Individual	342	Public Health & Gen Preventive Med
20	Physician/Osteopath Individual	343	Pulmonary Critical Care Medicine
20	Physician/Osteopath Individual	344	Radioisotopic Pathology
20	Physician/Osteopath Individual	345	RADIOLOGY
20	Physician/Osteopath Individual	346	Reproductive Endocrinology
20	Physician/Osteopath Individual	347	Rheumatology
20	Physician/Osteopath Individual	348	Selective Pathology
20	Physician/Osteopath Individual	349	Spinal Cord Injury
20	Physician/Osteopath Individual	351	Sports Medicine (Emer. Med.)
20	Physician/Osteopath Individual	352	Sports Medicine (Family Practice)
20	Physician/Osteopath Individual	353	Sports Medicine (Internal Medicine)
20	Physician/Osteopath Individual	354	Sports Medicine (Orthopedic Surgery)
20	Physician/Osteopath Individual	355	Sports Medicine (Pediatrics)
20	Physician/Osteopath Individual	356	INFECTIOUS DISEASE
20	Physician/Osteopath Individual	357	SURGICAL CRITICAL CARE(SURGERY)
20	Physician/Osteopath Individual	358	THORACIC SURGERY
20	Physician/Osteopath Individual	359	TRANSPLANT SURGERY
20	Physician/Osteopath Individual	361	TRAUMA SURGERY
20	Physician/Osteopath Individual	363	UROLOGY
20	Physician/Osteopath Individual	364	VASCULAR & INTERVENTIONAL
20	Physician/Osteopath Individual	365	VASCULAR SURGERY
20	Physician/Osteopath Individual	470	Immunopathology
20	Physician/Osteopath Individual	555	Dual Licensed Dentist and Licensed MD/DO.
23	Acupuncturist	23	Acupuncture
24	PHYSICIAN ASSISTANT	240	PHYSICIAN ASSISTANT
27	Chiropractor Individual	270	Chiropractic Services
27	Chiropractor Individual	271	Chiro-Mechanotherapy
27	Chiropractor Individual	272	Mechanotherapy
30	Dentist Individual	300	General Dentistry
30	Dentist Individual	302	Endodontics
30	Dentist Individual	303	Oral Surgery
30	Dentist Individual	304	Orthodontics
30	Dentist Individual	305	Pediatric Dentistry
30	Dentist Individual	306	Periodontics
30	Dentist Individual	307	Prosthodontics
30	Dentist Individual	308	Other
30	Dentist Individual	348	Selective Pathology

30	Dentist Individual	555	Dual Licensed Dentist and Licensed MD/DO.	
35	Optometrist Individual	350	Optometry	
36	Podiatrist Individual	360	Podiatry	
39	Physical Therapist, Individual	391	Physical Therapy	
40	SPEECH LANGUAGE PATHOLOGIST INDIVIDUAL	400	SPEECH LANGUAGE PATHOLOGY/THERAPY	
41	Occupational Therapist, Individual	410	Occupational Therapy	
42	PSYCHOLOGY	420	LICENSED PSYCHOLOGIST	
43	AUDIOLOGIST INDIVIDUAL	430	AUDIOLOGY	
65	Clinical Nurse Specialist Individual	213	Psychiatric	
65	Clinical Nurse Specialist Individual	215	Pediatric	
65	Clinical Nurse Specialist Individual	216	Geriatric	
65	Clinical Nurse Specialist Individual	220	Oncology	
65	Clinical Nurse Specialist Individual	650	Clinical Nurse Specialist	
65	Clinical Nurse Specialist Individual	651	Adult Health	
65	Clinical Nurse Specialist Individual	652	Palliative Care	
65	Clinical Nurse Specialist Individual	653	Acute Care	
65	Clinical Nurse Specialist Individual	996	PSYCH	
68	Anesthesia Assistant Individual	680	Anesthesia Assistant Individual	
69	Pharmacist	690	PHARMACIST	
71	Nurse Midwife Individual	710	Nurse Midwife	
72	Nurse Practitioner Individual	207	Family Practice	
72	Nurse Practitioner Individual	212	Obstetrics & Gynecology	
72	Nurse Practitioner Individual	213	Psychiatric	
72	Nurse Practitioner Individual	215	Pediatric	
72	Nurse Practitioner Individual	216	Geriatric	
72	Nurse Practitioner Individual	282	NEONATAL-PERINATAL MEDICINE	
72	Nurse Practitioner Individual	651	Adult Health	
72	Nurse Practitioner Individual	652	Palliative Care	
72	Nurse Practitioner Individual	653	Acute Care	
73	CERTIFIED REGISTERED NURSE ANESTHETIST INDIVIDUAL	730	Anesthesia CRNA	
75	OPTICIAN/OCULARIST	750	Solo Practice Optician	