





CREDENTIALING APPLICATION ADDENDUM PCP Eligible

Provider NPI: Provider Name: Group NPI: Group Name:	
Ethnicity/Race:	
American Indian/Alaska Native Asian, Pacific Islander Black, non-Hispani	С
Hispanic Native Hawaiian/Other Pacific Islander White, non-Hispanic	
Decline to provide	
Specific Services:	
Do you perform Obstetrical services? Yes No	
If yes, do you perform Obstetrical deliveries? Yes No	
Do you provide Telehealth/Telemedicine services? Yes No	
Will you be practicing solely as a Hospitalist provider? Yes No	
Provider Type:	
Primary Care Provider (PCP) Specialist Provider Both (PCP and Specialist	ist)
f applying as a PCP, do you meet the attached requirements? Yes No	
Authorized Signature: Date:	
Authorized Name:	
Authorized Title:	







PCP Requirements

- Practices in any of the following practice areas:
 - General Practice, Family Practice, Internal Medicine, Pediatrics, Obstetrics/Gynecology
 - Advanced Practice Registered Nurse/Physician Assistant
 - Under the supervision of a physician specializing in General Practice,
 Family Practice, Internal Medicine, Pediatrics or Obstetrics/Gynecology
- Must be available to membership twenty-four (24) hours a day, seven (7) days a week.
- If providing services to children birth through age 20, must provide preventive services in accordance with the THSteps periodicity schedule, as well as with the American Academy of Pediatrics (AAP) recommendations.
- If providing services to children birth through age 18, must be a participant in the Vaccines for Children program.
- If providing services to adults aged 21 and over, must provide preventive services in accordance with the US Preventive Services Task Force requirements.
- Must have either admitting privileges at a DHP network hospital or make referral arrangements with a Provider who has admitting privileges at a DHP network hospital.
- Must have acceptable after-hours availability including:
 - The office telephone is answered after-hours by an answering service that meets the language requirements of the Major Population Groups and that can contact the PCP or another designated medical practitioner. All calls answered by an answering service must be returned within 30 minutes.
 - The office telephone is answered after normal business hours by a recording in the language of each of the Major Population Groups served, directing the Member to call another number to reach the PCP or another provider designated by the PCP. Someone must be available to answer the designated provider's telephone, another record is not acceptable.
 - The office telephone is transferred to another location where someone will answer the telephone and be able to contact the PCP or another designated medical provider, who can return the call within 30 minutes.