



NON PAR PROVIDER/PRACTITIONER SET-UP CHECKLIST

PLEASE INCLUDE THE FOLLOWING INFORMATION FOR A NON PAR SET UP REQUEST

INSTRUCTIONS	<i>In order to ensure accurate set-up for provider/practitioner non par set-up request received due to pre-authorization, the following information is require (as applicable):</i>
NETWORK (S)	
START DATE	
PROVIDER NAME	
TAX IDENTIFICATION NUMBER (TIN)	
PROVIDER/GROUP NPI	
SERVICE LOCATION	
PHONE NUMBER	
BILLING ADDRESS	
SPECIALTY	
PRACTITIONER NAME	
PRACTITIONER/INDIVIDUAL NPI	
SERVICE LOCATION	
PHONE NUMBER	
BILLING ADDRESS	
SPECIALTY	