Credentialing Guide and Requirements

Last updated July 29, 2026

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Credentialing Guide and Requirements

All providers must complete the enrollment process; however, credentialing is only required for certain provider types and specialties (see Appendix A). For both initial credentialing and recredentialing, the process is combined with enrollment or revalidation—there is no separate credentialing application.

The Council for Affordable Quality Healthcare (CAQH) form is required for all individual providers who require credentialing. CAQH is an external system separate from the Provider Network Management (PNM) portal, and both must contain accurate information. If the provider does not have a CAQH profile, they must register in the CAQH Proview Portal. The CAQH ID number (from the CAQH Proview portal) must be entered on the first page of the enrollment/credentialing or revalidation/recredentialing application. Providers must attest to the accuracy of their CAQH information at least every 120 days. If the provider's CAQH profile is missing, incomplete, or the attestation is out of date, the Ohio Department of Medicaid (ODM) will return the Medicaid provider application to the provider for additional information.

The Ohio Department of Insurance (ODI) Standardized Credentialing Form Part B (ODI form) is required for facilities and organizations that require credentialing. Facility and organization providers must complete and sign pages 1 – 8 of the ODI form. Additional documentation (e.g., licenses, certifications, etc.) is not needed as this information should already be uploaded to the PNM portal. If any Disclose Questions are answered "yes," provide a written explanation on a separate page and submit it with the completed form. The 'Subcontract with Other Providers' question and References section are optional. Upload the completed ODI form to the Required Documents page. If this form is not uploaded to the application, the facility or organization will receive a request to submit the completed copy of the ODI form.

Credentialing Requirements – Individuals

The following are required for all individual providers:

1. CAQH Form.
2. Licensure in the state(s) where the provider practices.
3. Professional liability insurance must cover the provider or provider group at state-required minimums.

4. Education Information:
    - Physicians: List education for all specialties practiced in both the PNM portal and CAQH form.
    - Other providers: Enter the highest level of education (e.g., Master of Nursing for nurse practitioners) in both the PNM portal and CAQH form.
5. Malpractice Claims History: All malpractice claims—pending, closed, or settled—must be disclosed.
6. Work History: Five years of work history are required on the CAQH form, including current or future employment. For newly licensed providers, work history begins at licensure; five years are not required. Any employment gap of longer than six months requires an explanation on the CAQH form.

The following are required for certain individual provider types:

Board Certification: This requirement applies to advanced nurse practitioners, clinical nurse specialists, certified nurse midwives, and physician assistants. While it is only required for these provider types, enter any board certifications held by the providers in the PNM portal, as this information is verified during credentialing and displayed in the directory.

Drug Enforcement Agency (DEA) Certificate: This requirement applies to doctors, podiatrists, oral surgeons, and dental anesthesiologists. The DEA certificate must be valid in the state(s) where the provider practices. The DEA registration information must be listed on the DEA page in the PNM portal or on the CAQH form. If the provider does not have a DEA for the state(s) of practice, upload a statement explaining why a DEA is not required (e.g., prescribing arrangement including DEA information of the prescriber, not prescribing controlled substances, etc.).

Hospital Privileges (Clinical Privileges): The purpose of this requirement is to ensure patient safety and continuity of care in the event of a medical emergency. Referrals to local emergency departments or primary care physicians do not meet the requirement for hospital privileges or admitting arrangements.

This requirement is based on provider type and specialty. The providers listed below must have either active hospital privileges or active admitting

arrangements with another provider. These privileges or arrangements must include a start date in the PNM portal or the CAQH form.

- Type 20 MDs/DOs:
  - Anesthesiology
  - Cardiovascular Disease/Cardiology (and all sub-specialties)
  - Critical Care Medicine (and all sub-specialties)
  - Gastroenterology
  - Hematology/Oncology
  - Medical Oncology
  - Nephrology
  - Neurology
  - Obstetrics/Gynecology (and all sub-specialties)
  - Otolaryngology
  - Physical Medicine and Rehabilitation
  - Pulmonary Disease
  - Radiation Oncology
  - Surgery (and all sub-specialties)
  - Surgery Related Specialties
  - Urology
- Type 71 Certified Nurse Midwives
- Type 30 Dentists
  - Dental Anesthesiology
  - Oral Surgery

Credentialing Requirements – Facilities/Organizations

The following are required for all facilities/organizations that must be credentialed:

- ODI Form.
- Licensure in the proper state.
- Malpractice Insurance.
- Accreditation or Site Visit: If the facility or organization is not accredited, upload a copy of the site visit completed by the Ohio Department of Health or Ohio Department of Behavioral Health.
- Hospitals with a maternity ward and license must provide a bed letter from the Centers for Medicare and Medicaid Services (CMS).

Processes for Returning Application to Provider

If additional information is needed during the credentialing process, the contact listed on the Correspondence Address page of the application will receive a notice via email advising them to log into the PNM portal to view the Return to Provider (RTP) letter for details.

Instructions for accessing the RTP letter are provided in the Provider Correspondence/Communications Quick Reference Guide at https://ohpnm.omes.maximus.com/OH_PNM_PROD/pages/ShowFiles.aspx?mode=inline&FileName=QRG%20-%20Accessing%20Provider%20Correspondence.pdf.

Common errors include missing or incomplete CAQH profiles or ODI forms, outdated CAQH profile attestations or ODI signature, or missing malpractice insurance.

To submit the updated information in the PNM portal:

- From provider administrator or agent dashboard, select the provider by clicking on the provider's hyperlinked name or application registration number (Reg ID).
- Click Enrollment Actions then click Continue Registration.
- Enter the requested information or upload documents based on the request. If the requested information is related to the provider's CAQH profile, log into the CAQH Proview portal, update the requested information, then complete a new attestation to save the updates to the CAQH profile. Once completed, log back into the PNM portal to complete the steps below.
- Click the 'Save' button then click the 'Submit for Review' button.

The Medicaid provider application must be returned to ODM in the PNM portal within **9 days** of the issuance of RTP letter. Failure to respond will result in application cancellation and denial, which will terminate the Medicaid provider agreement for active providers. A new application will be required if this occurs.

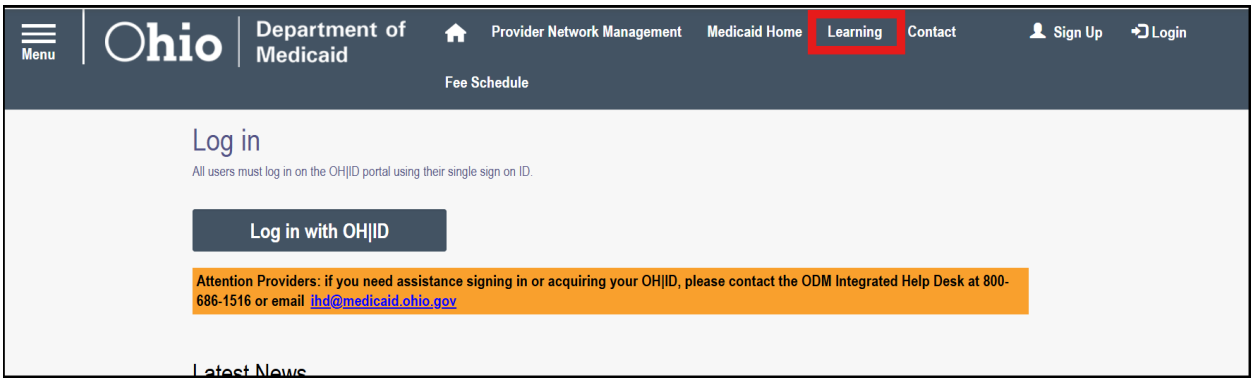
Requests for additional credentialing information may also be sent via email from OhioCredentialing@maximus.com to the correspondence and primary contacts listed on the application, as well as the provider administrator. The contacts must respond by the due date listed in the email to avoid denial or termination.

Timelines for Credentialing

Providers requiring credentialing or recredentialing must first go through the enrollment/revalidation process. Credentialing and recredentialing are separate from the enrollment and revalidation processes, though both use the same provider application. Please allow 30 business days before inquiring about application status. If an application has been returned for additional information, processing time will be extended. The fastest way to complete the enrollment and credentialing processes is to submit all required information (including the completed CAQH profile or ODI form) during initial submission of the Medicaid provider application.

Provider Network Management (PNM)Portal Resources

For help navigating the PNM portal, please visit the Provider Education and Training Resources page, accessible by clicking the Learning tab in the top banner of the PNM portal (see below) or at https://ohpnm.omes.maximus.com/OH_PNM_PROD/Resources.aspx. This page includes quick reference guides and user manuals such as Individual Practitioner User Manual, Provider Correspondence/Communications Quick Reference Guide, and Edit Key Provider Identifiers Quick Reference Guide.



For questions regarding ODM Centralized Credentialing or credentialing requirements, contact the ODM Integrated Help Desk (IHD) at 1-800-686-1516 (select the options for Provider Enrollment and request transfer to Credentialing) or email Credentialing@medicaid.ohio.gov.

Appendix A

The following individual providers are required to complete credentialing. Most are credentialed based on provider type, while some are credentialed based on specialty.

Non-physician Provider Types/Specialties:

Provider Type 07 – Registered Dietitian Nutritionist
Provider Type 23 – Acupuncturist
Provider Type 24 – Physician Assistant
Provider Type 27 – Chiropractor
Provider Type 30 – Dentist
Provider Type 35 – Optometrist
Provider Type 36 – Podiatrist
Provider Type 37 – Social Worker (with the following specialties)
- 370 Licensed Independent Social Worker
- 399 – Multi-Independent Licensure
- 47I – Clinical Counselor – Independent
- 52I – IMFT - Independent
- 54I – Chemical Counselor – Independent

Provider Type 39 – Physical Therapist
Provider Type 40 – Speech Language Pathologist
Provider Type 41 – Occupational Therapist
Provider Type 42 – Psychologist (with the following specialties)
- 399 – Multi-Independent Licensure
- 420 – Licensed Psychologist
- 421 – Board Licensed School Psychologist
- 425 – Clinical Psychologist
- 426 – Child and Adolescent Psychologist
- 37I – Social Worker – Independent
- 47I – Clinical Counselor – Independent
- 52I – IMFT – Independent
- 54I – Chemical Counselor – Independent

Provider Type 43 – Audiologist
Provider Type 47 – Clinical Counselor (with the following specialties)
- 399 – Multi-Independent Licensure
- 474 – Licensed Professional Clinical Counselor
- 37I – Social Worker – Independent

47I – Clinical Counselor – Independent
52I – IMFT – Independent
54I – Chemical Counselor – Independent

Provider Type 52 – Marriage and Family Therapist (with the following specialties)
399 – Multi-Independent Licensure
520 – Licensed Independent Marriage and Family Counselor
47I – Clinical Counselor – Independent
52I – IMFT – Independent
54I – Chemical Counselor – Independent

Provider Type 54 – Chemical Dependency (with the following specialties)
399 – Multi-Independent Licensure
540 – Licensed Independent Chemical Dependency Counselor
37I – Social Worker – Independent
47I – Clinical Counselor – Independent
52I – IMFT – Independent
54I – Chemical Counselor – Independent

Provider Type 65 – Clinical Nurse Specialist
Provider Type 69 – Pharmacist
Provider Type 71 – Nurse Midwife
Provider Type 72 – Nurse Practitioner

Physician Provider Type/Specialties:

Provider Type 20 – Physician/Osteopath Individual (with the following specialties)
023 - Acupuncture
201 - General Practice
202 - General Surgery
203 - Allergy & Immunology
205 - Otolaryngology
206 - Cardiology
207 - Family Practice
208 - Gastroenterology
209 - Internal Medicine
210 - Neurology
211 - Neurological Surgery
212 - Obstetrics & Gynecology

213 - Psychiatry
214 - Pulmonary Disease
215 - Pediatric
216 - Geriatric
217 - Cardiovascular Surgery
218 - Hematology/Oncology
219 - Gynecology
220 - Oncology
221 - Surgical Oncology
222 - Radiation Oncology
223 - Gynecological Oncology
226 - Addiction Medicine
227 - Addiction Psychiatry
228 - Adult Reconstructive Orthopedics
229 - Allergy
232 - Cardiothoracic Surgery
233 - Cardiovascular Disease
234 - Child & Adolescent Psychiatry
235 - Child Neurology
241 - Clinical Cardiac Electrophysiology
242 - Medical Genetics
247 - Colon & Rectal Surgery
248 - Critical Care Medicine (Neurological Sur.)
249 - Critical Care Medicine (Anesthesiology)
251 - Critical Care Medicine (Internal Med)
253 - Dermatologic Surgery
254 - Dermatology
256 - Diabetes
258 - Endocrinology/Diabetes & Metabolism
261 - Facial Plastic Surgery
262 - Foot & Ankle, Orthopedics
263 - General Preventive Medicine
264 - Geriatric Psychiatry
265 - Hand Surgery
266 - Head & Neck Surgery
267 - Hematology
268 - Hepatology
269 - Immunology

273 - Maxillofacial Surgery
274 - Internal Medicine/Pediatrics
275 - Maternal/Fetal Medicine
278 - Medical Toxicology/Pediatrics
279 - Medical Toxicology/Preventative Medicine
281 - Musculoskeletal Oncology
282 - Neonatal-Perinatal Medicine
283 - Nephrology
287 - Nuclear Medicine
289 - Nutrition
290 - Obstetrics
292 - Ophthalmology
291 - Occupational Medicine
293 - Orthopedic Surgery
294 - Orthopedic Surgery of the Spine
295 - Orthopedic Trauma
296 - Neuromusculoskeletal Medicine
297 - Otology/Neurotology
298 - Pain Medicine
299 - Palliative Medicine
320 - Pediatric Allergy
321 - Pediatric Cardiology
322 - Pediatric Critical Care Medicine
324 - Pediatric Endocrinology
325 - Pediatric Gastroenterology
326 - Pediatric Hematology/Oncology
327 - Pediatric Infectious Disease
328 - Pediatric Nephrology
329 - Pediatric Ophthalmology
330 - Pediatric Orthopedics
331 - Pediatric Otolaryngology
333 - Pediatric Pulmonology
335 - Pediatric Rheumatology
336 - Pediatric Surgery
337 - Pediatric Urology
338 - Physical Medicine & Rehabilitation
339 - Plastic Surgery
340 - Proctology

341 - Psychoanalysis
342 - Public Health & Preventative Medicine
343 - Pulmonary Critical Care Medicine
346 - Reproductive Endocrinology
347 - Rheumatology
349 - Spinal Cord Injury
352 - Sports Medicine (Family Practice)
353 - Sports Medicine (Internal Medicine)
354 - Sports Medicine (Orthopedic Surgery)
355 - Sports Medicine (Pediatrics)
356 - Infectious Disease
357 - Surgical Critical Care
358 - Thoracic Surgery
359 - Transplant Surgery
361 - Trauma Surgery
362 - Unspecified
363 - Urology
365 - Vascular Surgery
470 – Immunopathology
555 - Dual Licensed Dentist and Licensed MD/DO

The following facilities/organizations are required to go through credentialing:

Provider Type 01 – Hospital
Provider Type 02 – Psychiatric Hospital
Provider Type 03 – Psychiatric Residential Treatment Facility
Provider Type 44 – Hospice
Provider Type 46 – Ambulatory Surgery Center
Provider Type 59 – End-Stage Renal Disease Dialysis Clinic
Provider Type 60 – Medicare Certified Home Health Agency
Provider Type 79 – Independent Diagnostic Testing Facility
Provider Type 84 – Ohio Department of Mental Health (Community Mental Health Center)
Provider Type 86 – Nursing Facility
Provider Type 95 – Ohio Mental Health and Addiction Services (OMHAS) Certified/Licensed Treatment Program (Substance Use Disorder Clinic)