



Credentialing Step-by-Step Process

1. Provider submits Letter of Interest (LOI) to ccp.cms.loi@ccpcares.org (Visit the [CMS T19 Provider Resources](#) page for a list of LOI requirements).
2. LOI is reviewed by Provider Operations to verify if provider is already in a contracted group or delegated arrangement.
3. When the LOI is accepted, CCP sends an Application request to the provider's credentialing contact email address listed on the LOI.
4. Provider returns Application via email (credentialingdept@ccpcares.org), fax (954) 417-7016), MSOW or CAQH.

The following documents are required by CCP to complete the application:

- Application (Signed and currently dated)
 - CV (date/month/year format. Written explanation of gap greater than 180 days)
 - License to Practice
 - Professional Liability Insurance Cover (Face/Declaration sheet or Bare Letter)
 - Financial Responsibility Waiver
 - W9 form (with TIN, dated within one year)
 - Provider ID Numbers (NPI, TIN, Medicaid)
 - DEA Certificate (if applicable)
 - Two Peer References (like specialty or higher degreed provider, must be known for at least one year)
 - Board Certification or Proof of Eligibility Letter/Recertification (if applicable)
 - Education Diploma or Transcript (Medical School or Professional University)
 - Training Certificate (Internship/Resident/Fellowship)
 - ECFMG (if applicable)
5. The credentialing process starts once a COMPLETE Application with ALL required documents is received (Note: Industry standard allows for up to 180 days for processing but CCP aims to complete credentialing within 45 days of receiving a complete application package).



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6. The credentialing process includes primary source verifications of the following:

- License to Practice
- Provider ID Numbers (NPI, Medicaid)
- DEA Certificate (if applicable)
- Board Certification or Proof of Eligibility Letter/Recertification (if applicable)
- Education Diploma or Transcript (Medical School or Professional University)
- Training Certificate (Internship/Resident/Fellowship)

If verifications cannot be completed, a credentialing specialist will contact provider to resolve the issue.

7. When the provider's credentials have been verified, the Application is reviewed by a Medical Director.

8. Reviewed files are presented to the credentialing committee for approval on a monthly basis.

9. Upon approval/denial, the provider is notified:

- Approval letters are sent via email
- Denial letters are sent out by Certified US Postal Mail

If you have questions or need assistance with the CCP credentialing process, please call 1-844-618-5773 or email credentialingdept@ccpcare.org.