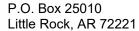


## **Atypical Practitioner Roster Frequently Asked Questions**

- 1. Q: Which practitioners should be submitted on the roster?
  - A: Non-licensed, atypical practitioners who have been issued a provider type 95 Medicaid ID.
- 2. Q: When I have new providers to add to the roster, should I submit only the new providers, or resubmit the entire roster each month?
  - A: Once a complete roster has been submitted, future submissions should only include additions, terminations, or updates. If we need a new complete roster, that request will come from your Arkansas Total Care Provider Relations Representative or from our Credentialing Team.
- 3. Q: What if I have already submitted applications for some of these atypical practitioners?
  - A: You do not have to resubmit atypical practitioners on a roster if you have already completed an application. They will be loaded without having to complete the credentialing process.
- 4. Q: What is the attestation listed on the Individual Adds tab of the roster?
  - A: This is a confirmation by your group that you have completed all appropriate checks required by the state (background, maltreatment lists, etc.). We must have this information in order to load your practitioners by roster instead of credentialing.
- 5. Q: What practice address should be listed on the Individual Adds tab of the roster?
  - A: This address should match your provider locations. We do not need the home address of your members or the person providing services to the members.
- 6. Q: How do I notify Arkansas Total Care if one of my non-licensed practitioners becomes licensed?
  - A: The practitioner will need to complete an Allied Application and submit it to <a href="mailto:arkcredentialing@centene.com">arkcredentialing@centene.com</a>
- 7. Q: How do I submit my roster?
  - A: Rosters should be submitted in Excel format via email to <a href="mailto:arkcredentialing@Centene.com">arkcredentialing@Centene.com</a>. All other formats will be returned (Word, PDF, etc.).





8. Q: What information should I enter on each of the tabs on the roster?

A: The Provider Info tab is for your group information such as locations, billing and hours.

The Individual Adds tab is where you enter information for all of your non-licensed, atypical practitioners.

The Individual Terms tab is used to indicate terminations of any practitioner no longer associated with your group.