



Nurse Practitioner Credentialing Checklist

Documents You Need

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MedSole RCM Resource

Missing or expired documents are the #1 cause of credentialing delays we see across practices.

Before you submit a single application, gather everything on this list. One absent form can stall your entire timeline by weeks. Some of these documents take time to obtain, so start collecting them well before you plan to begin the credentialing process. Having your NP credentialing file complete on day one makes everything downstream move faster.

Essential Documents

Ensure all documents are current, legible, and scanned in high resolution.

 **Current CV/Resume**

Use month/year format (mm/yyyy) for every education, training, and employment entry. Gaps longer than six months need a written explanation.

 **State NP License**

Current and unrestricted. Verify directly with your state Board of Nursing that your license status shows as active.

 **Board Certification**

Documentation from ANCC, AANP, NCC, or PNCB confirming your active certification and expiration date.

 **NPI Number**

Type 1 for individual practitioners. Type 2 if you own or bill under a group practice entity. Obtain through NPPES.

 **DEA Registration**

Required if you prescribe controlled substances. If you don't hold a DEA certificate, have a prescribing arrangement letter ready instead.

 **State CDS Certificate**

Some states require a separate Controlled Dangerous Substance certificate on top of your federal DEA. Check your state's requirements.

 **Completed CAQH Provider Data Portal Profile**

Every section filled, all documents uploaded, and attestation current. Payers pull directly from CAQH; an incomplete profile blocks everything.

✓ **Malpractice Insurance Face Sheet**

Current professional liability coverage showing your name, coverage dates, per-occurrence limits, and aggregate limits.

✓ **Diploma and Transcripts**

From your highest level of nursing education (MSN or DNP). Some payers require official transcripts sent directly.

✓ **Collaborative Practice Agreement**

Required in reduced and restricted practice states. Must be fully executed, current, and compliant with state requirements.

✓ **Hospital Admitting Arrangement Letter**

If you don't have privileges, a letter from a physician who does, stating they'll handle inpatient admissions.

✓ **W-9 and Tax ID/EIN**

Business entity documentation tying your practice to its federal tax identification number.

✓ **Work History (Min. 5 Years)**

Month-and-year entries for every position. No unexplained gaps.

✓ **Professional References**

typically three to five peers or supervisors who can attest to clinical competence.

Ready to streamline your billing?

Don't let credentialing delays hurt your cash flow.

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