



DENTIST CREDENTIALING CHECKLIST

LICENSES & CERTIFICATIONS

- ✓ Active state dental license (valid 60+ days from submission)
- ✓ DEA registration (if prescribing controlled substances)
- ✓ NPI Number – Type 1 (individual provider)
- ✓ NPI Number – Type 2 (group/practice, if applicable)
- ✓ DDS or DMD degree verification (diploma or official transcript)
- ✓ Specialty board certification (if applicable)
- ✓ BLS/CPR certification (current) |
- ✓ Infection control certification (if required by state)

INSURANCE & BUSINESS DOCUMENTS

- ✓ Professional liability insurance certificate
 - Policy dates, coverage limits, carrier info included
 - Minimum \$1M per occurrence (verify payer requirements)
 - Tail coverage dates included if carrier recently changed
- ✓ W-9 form (current year)
- ✓ Practice Tax ID / EIN (or individual Tax ID for sole proprietors)
- ✓ Business license (if required by state/municipality)
- ✓ Facility accreditation certificate (AAAHC or similar, if surgical center)

WORK HISTORY & BACKGROUND VERIFICATION

- ✓ Complete CV or work history
 - No gaps longer than 30 days
 - Include: practice name, address, dates, supervisor contact
- ✓ Professional references (3 peers or supervisors)
- ✓ Hospital privileges documentation (if applicable)
- ✓ Gap explanation letters (for any period over 30 days)
- ✓ Malpractice claim explanation letters (if applicable) |
- ✓ License action explanation letters (if applicable) |



✓ Signed background check authorization |

BEFORE YOU SUBMIT

- ✓ All licenses valid for 60+ days from submission date
- ✓ No gaps in malpractice coverage history |
- ✓ All documents dated within acceptable timeframes |
- ✓ Copies made for your records |

***IMPORTANT REMINDERS:**

- Missing documents delay approval 30–60 days
- Payers do not request missing items - they hold the file
- Licenses expiring within 30 days trigger automatic holds
- One-day gaps in malpractice coverage can disqualify applications

Submission Date: _____ Payer: _____

Follow-Up Date: _____ Status: _____