

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

PROVIDER TYPE NAME	PROVIDER TYPE	NPI NUMBER REQUIRED (YES/NO)	ACA SCREENING RISK LEVEL (LIMITED, MODERATE, HIGH)	ENROLLMENT FEE COLLECTED (YES/NO)	SITE VISIT PERFORMED (YES/NO)	REGULATORY AGENCY
COMMUNITY SERVICE AGENCY	A3	Y	M	Y	Y	Arizona Health Care Cost Containment System AMPM Chapter 900 Policy 961-C www.azahcccs.gov ¹
LICENSED INDEPENDENT SUBSTANCE ABUSE COUNSELOR (LISAC)	A4	Y	L	N	N	Arizona Board of Behavioral Health Examiners www.azbbhe.us

¹ ~~Removed hyperlink~~

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

PROVIDER TYPE NAME	PROVIDER TYPE	NPI NUMBER REQUIRED (YES/NO)	ACA SCREENING RISK LEVEL (LIMITED, MODERATE, HIGH)	ENROLLMENT FEE COLLECTED (YES/NO)	SITE VISIT PERFORMED (YES/NO)	REGULATORY AGENCY
BEHAVIORAL HEALTH THERAPEUTIC HOME	A5	Y	L	N	N	Child services: Arizona Department of Child Safety www.dcs.az.gov www.dcs.az.gov Adult services: Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
RURAL SUBSTANCE ABUSE TRANSITIONAL AGENCY	A6	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

PROVIDER TYPE NAME	PROVIDER TYPE	NPI NUMBER REQUIRED (YES/NO)	ACA SCREENING RISK LEVEL (LIMITED, MODERATE, HIGH)	ENROLLMENT FEE COLLECTED (YES/NO)	SITE VISIT PERFORMED (YES/NO)	REGULATORY AGENCY
THR INDIVIDUAL HOME RESPITE	A8	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
RESIDENTIAL TREATMENT CTR- SECURE (17+BEDS)(IMD)	B1	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

RESIDENTIAL TREATMENT CENTER NON-SECURE (1-16 BEDS)	B2	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
RESIDENTIAL TREATMENT CTR- NON-SECURE (17+BEDS)(IMD)	B3	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
SUBACUTE FACILITY (1-16 BEDS)	B5	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

SUBACUTE FACILITY (17+BEDS)(IMD)	B6	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
CRISIS SERVICES PROVIDER	B7	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
BEHAVIORAL HEALTH RESIDENTIAL FACILITY (BHRF)	B8	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
BOARD CERTIFIED BEHAVIOR ANALYSTS (BCBA)	BC	Y	L	N	N	Arizona Board of Psychologist Examiners https://psychboard.az.gov https://psychboard.az.gov

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

FEDERALLY QUALIFIED HEALTH CENTER (FQHC)	C2	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Proof of FQHC Designation
SPECIALTY PER DIEM HOSPITAL	C4	Y	L	N	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Medicare Certification www.cms.gov www.cms.gov (Survey & Certification – Certification & Compliance)
<u>638 Federally Qualified Health Center (FOHC)2</u>	<u>C5</u>	<u>Y</u>	<u>L</u>	<u>Y</u>	<u>N</u>	<u>Refer to Arizona Health Care Cost Containment – Provider Registration Section</u>

² Hyperlink removed throughout
nt

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

<p align="center">INDEPENDENT TESTING FACILITIES</p>	<p align="center">E1</p>	<p align="center">Y</p>	<p align="center">L</p>	<p align="center">Y</p>	<p align="center">N</p>	<p align="center">Arizona Department of Health Services www.azdhs.gov & Accredited by the American Academy of Sleep Medicine (AASM) http://www.aasmnet.org Additional registration options are included on the Provider Type Profile E1 www.azahcccs.gov/PlansProviders</p>
<p align="center">FREE STANDING EMERGENCY DEPARTMENT</p>	<p align="center">ED</p>	<p align="center">Y</p>	<p align="center">L</p>	<p align="center">N</p>	<p align="center">N</p>	<p align="center">Arizona Department of Health Services www.azdhs.gov & Medicare Certification www.cms.gov (Survey & Certification – Certification & Compliance)</p>
<p align="center">FISCAL INTERMEDIARIES</p>	<p align="center">F1</p>	<p align="center">N</p>		<p align="center">Y</p>	<p align="center">N</p>	<p align="center">N/A Provider type is intended for AHCCCS' internal use only. Applications are subject to review and approval.</p>

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

DD DAY TREATMENT/ CBE	G2	N	L	N	N	Arizona Department of Economic Security www.des.az.gov www.des.az.gov
ONE TIME ONLY OUT OF STATE HOSPITAL	H2	N	L	N	N	Department of Health Services & Medicare Certification License must be issued by the State, where the Hospital is located. Cities and states, that border Arizona, may be excluded from this provider types.
IMMUNIZATION CLINICS	I1	Y	L	Y	N	Provider Type Profile (I1) available at Provider Registration's website www.azahcccs.gov/PlansProvider www.azahcccs.gov/PlansProvide rs

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

INTEGRATED CLINIC	IC	Y	M	Y	Y	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
SPEECH LANGUAGE PATHOLOGY ASSISTANT	SA	Y	L	N	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov
TREAT & REFER	TR	Y	M	Y	Y	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov
TRAVEL SERVICES	TS	N	L	N	N	Vendor Contract Required
GROUP PAYMENT ID	01	Y	L	N	N	N/A
HOSPITAL	02	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Medicare Certification www.cms.gov www.cms.gov (Survey & Certification –

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

						<u>Certification & Compliance</u>
PHARMACY	03	Y	L	Y	N	Arizona Board of Pharmacy www.Pharmacy.az.gov www.Pharmacy.az.gov & Drug Enforcement Administration Registration www.deadiversion.usdoj.gov www.deadiversion.usdoj.gov

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

LABORATORY	04	Y	M	Y	Y	<p>Arizona Department of Health Services www.azdhs.govwww.azdhs.gov</p> <p>Laboratory: Clinical Laboratory Improvement Act (CLIA) www.azdhs.govwww.azdhs.gov</p> <p>Radiology / Medical Imaging: Arizona Radiation Regulatory Agency www.azrra.govwww.azrra.gov</p> <p>If only non-invasive: Supply list of HCPCS, for review</p>
CLINIC	05	Y	L	Y	N	<p>Arizona Department of Health Services www.azdhs.govwww.azdhs.gov</p>
EMERGENCY TRANSPORTATION	06	Y	M	Y	Y	<p>Certificate of Necessity Arizona Department of Health Services www.azdhs.govwww.azdhs.gov</p>
DENTIST	07	Y	L	N	N	<p>Arizona Board of Dental Examiners www.Dentalboard.az.govwww.</p>

THIS IS A COMPLETE LIST OF AHCCCS MEDICAID PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

						Dentalboard.az.gov
MD-PHYSICIAN	08	Y	L	N	N	Arizona Board of Medical Examiners www.azmd.gov www.azmd.gov
CERTIFIED NURSE-MIDWIFE (CNM)	09	Y	L	N	N	Arizona State Board of Nursing www.azbn.gov www.azbn.gov & Provider Type Profile (09) available at Provider Registration's website www.azahcccs.gov/PlansProviders www.azahcccs.gov/PlansProviders
PODIATRIST	10	Y	L	N	N	Arizona State Board of Podiatry Examiners https://podiatry.az.gov https://podiatry.az.gov
PSYCHOLOGIST	11	Y	L	N	N	Arizona Board of Psychologist Examiners https://psychboard.az.gov https://psychboard.az.gov

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

CERTIFIED REGISTERED NURSE-ANESTHETIST	12	Y	L	N	N	Arizona State Board of Nursing www.azbn.gov & American Association of Nurse Anesthetists (AANA/NBCRNA) www.aana.com
OCCUPATIONAL THERAPIST	13	Y	L	N	N	Arizona Board of Occupational Therapy Examiners https://ot.az.gov
PHYSICAL THERAPIST	14	Y	M	N	Y	Arizona State Board of Physical Therapy https://ptboard.az.gov
SPEECH/HEARING THERAPIST	15	Y	L	N	N	Arizona Department of Health Services www.azdhs.gov
CHIROPRACTOR	16	Y	L	N	N	Arizona Board of Chiropractic Examiners https://chiroboard.az.gov
NATUROPATH	17	Y	L	N	N	Arizona Board of Naturopathic Physicians Examiners https://nd.az.gov

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

PHYSICIAN'S ASSISTANT	18	Y	L	N	N	Arizona Regulatory Board of Physician Assistants www.azpa.gov If Behavioral Health Medical Practitioner: Provider Type Profile (18) available at Provider Registration's website www.azahcccs.gov/PlansProviders
REGISTERED NURSE PRACTITIONER	19	Y	L	N	N	Arizona State Board of Nursing (Both RN & NP license types are required) www.azbn.gov
RESPIRATORY THERAPIST	20	Y	L	N	N	Arizona State Board of Respiratory Care Examiners https://respiratoryboard.az.gov
NURSING HOME	22	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov & Medicare Certification www.cms.gov (Survey & Certification –

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

						<u>Certification & Compliance</u>
HOME HEALTH AGENCY	23	Y	H	N	N	Arizona Department of Health Services www.azdhs.gov & Medicare Certification www.cms.gov (Survey & Certification – <u>Certification & Compliance</u>)
GROUP HOME (DEVELOPMENTALLY DISABLED)	25	N	L	N	N	Arizona Department of Economic Security www.des.az.gov
ADULT DAY HEALTH	27	N	L	Y	N	Arizona Department of Health Services www.azdhs.gov
NON-EMERGENCY TRANSPORTATION PROVIDER	28	N	M	Y	Y	Refer to Provider Type Profile (28) for an outline of registration requirements Visit Provider Registration website www.azahcccs.gov/PlansProvide

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

						www.azahcccs.gov/PlansProviders
COMMUNITY/ RURAL HEALTH CENTER (RQHC)	29	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov & Proof of RHC Designation
<u>MEDICAL EQUIPMENT AND SUPPLIES DME SUPPLIER</u>	30	Y	H	Y	Y	N/A
DO-PHYSICIAN OSTEOPATH	31	Y	L	N	N	Arizona Board of Osteopathic Examiners www.azdo.gov
MEDICAL FOODS	32	N	L	Y	N	N/A Applications are submit to review and approval
HOSPICE	35	Y	M	Y	Y	Arizona Department of Health Services www.azdhs.gov & Medicare Certification www.cms.gov (Survey & Certification –

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

						<u>Certification & Compliance)</u>
ASSISTED LIVING HOME	36	N	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov
HOMEMAKER	37	N	L	N	N	<u>Individual:</u> CPR & First Aid Certification 3 Letters of Reference (from non-family members) <u>Company:</u> Provider Type Profile (37) available at Provider Registration's website www.azahcccs.gov/PlansProviders www.azahcccs.gov/PlansProviders
HABILITATION PROVIDER	39	N	L	N	N	Arizona Department of Economic Security www.des.az.gov www.des.az.gov

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

ATTENDANT CARE (COMPANIES ONLY)	40	N	LM	Y	N	Provider Type Profile (40) available at Provider Registration's website www.azahcccs.gov/PlansProviders & List of Employees
DIALYSIS CLINIC	41	Y	L	N	N	Arizona Department of Health Services www.azdhs.gov & Medicare Certification www.cms.gov (Survey & Certification – Certification & Compliance)
AMBULATORY SURGICAL CENTER	43	Y	L	N	N	Arizona Department of Health Services www.azdhs.gov & Medicare Certification www.cms.gov (Survey & Certification – Certification & Compliance)
ENVIRONMENTAL (LTC)	44	N	L	Y	N	Arizona Registrar of Contractors www.azroc.gov

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

NURSE (PRIVATE-RN/LPN) INDEPENDENT RN)	46	Y	L	N	N	Letter of Intent from Health Plan & Arizona State Board of Nursing www.azbn.gov www.azbn.gov
REGISTERED DIETICIAN (RD)	47	N	L	N	N	Commission on Dietetic Registration https://cdrnet.org https://cdrnet.org
NUTRITIONIST	48	N	L	N	N	N/A Applications are subject to review and approval.
ASSISTED LIVING CENTER	49	N	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov
ADULT FOSTER CARE	50	N	L	N	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov
AFFILIATED PRACTICE HYGIENIST	54	Y	L	N	N	Arizona Board of Dental Examiners www.Dentalboard.az.gov www.Dentalboard.az.gov & Provider Type Profile (54) available at Provider Registration's website

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

						www.azahcccs.gov/PlansProviders
HOTELS	55	N	L	Y	N	N/A Application is subject to review and approval
BOARDING HOME	56	N	L	Y	N	N/A Application is subject to review and approval
AUDIOLOGIST	62	Y	L	N	N	Arizona Department of Health Services www.azdhs.gov
PERFUSIONIST	67	Y	L	N	N	American Board of Cardiovascular Perfusion http://www.abcp.org/index.html
HOMEOPATHIC	68	Y	L	N	N	Arizona Board of Homeopathic Examiners www.azhomeopathbd.az.gov
OPTOMETRIST	69	Y	L	N	N	Arizona State Board of Optometry https://optometry.az.gov

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

HOME DELIVERED MEALS	70	N	L	Y	N	County Health Services or Arizona Department of Health Services www.azdhs.gov www.azdhs.gov
PSYCHIATRIC HOSPITAL	71	Y	L	N	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T) & Medicare Certification www.cms.gov www.cms.gov (Survey & Certification – Certification & Compliance)
REGIONAL BEHAVIORAL HEALTH AUTHORITY (RBHA)³	72	N	L	Y	N	For AHCCCS' Internal Use Only AHCCCS CONTRACTOR Arizona Department of Health Services www.azdhs.gov www.azdhs.gov

³ Included acronym

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

OUT OF STATE – 1 TIME WAIVER OF REGISTRATION REQUIREMENTS	73	N	L	N	N	Professional or Med-Level Practitioner: State License and/or Certification Entity: State license and/or Certification & Medicare Certification
BEHAVIORAL OUTPATIENT CLINIC	77	Y	M	Y	Y	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
MENTAL HEALTH RESIDENTIAL TREATMENT CENTER	78	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov www.azdhs.gov & Behavioral Health Provider Certification and Transmittal (BH C&T)
VISION CENTER	79	Y	L	Y	N	Arizona State Board of Dispensing Opticians https://do.az.gov https://do.az.gov v/

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

EPD HCBS	81	N	L	Y	N	N/A Applications are subject to review and approval.
SURGICAL FIRST ASSISTANT	82	Y	L	N	N	See Provider Type Profile (82) for an outline of registration requirements Visit Provider Registration website www.azahcccs.gov/PlansProviders
FREE-STANDING BIRTHING CENTER	83	Y	L	Y	N	Arizona Department of Health Services www.azdhs.gov & Commission for the Accreditation of Freestanding Birth Centers www.birthcenteraccreditation.org
LICENSED MIDWIFE	84	Y	L	N	N	Arizona Department of Health Services www.azdhs.gov
LICENSED CLINICAL SOCIAL WORKER (LCSW)	85	Y	L	N	N	Arizona Board of Behavioral Health Examiners www.azbbhe.us

THIS IS A COMPLETE LIST OF AHCCCS ~~MEDICAID~~ PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5

LICENSED MARRIAGE & FAMILY THERAPIST	86	Y	L	N	N	Arizona Board of Behavioral Health Examiners www.azbbhe.us www.azbbhe.us
LICENSED PROFESSIONAL COUNSELOR (LPC)	87	Y	L	N	N	Arizona Board of Behavioral Health Examiners www.azbbhe.us www.azbbhe.us
QUALIFIED MEDICARE BENEFICIARY ⁴ (QMB)-ONLY PROVIDER	90	N	L	N	N	N/A Provider Type is intended for AHCCCS' internal use only.
SCHOOL BASED BUS TRANSPORTATION	92	N	L	Y	N	Provider Type Profile (92) available at Provider Registration's website www.azahcccs.gov/PlansProviders www.azahcccs.gov/PlansProviders
SCHOOL BASED ATTENDANT CARE	93	N	L	N	N	CRP and First Aid Certification (on-line training is not valid for registration) Refer to the AHCCCS AMPM, Chapter 700, for details regarding certification standards.

⁴ ~~Spelled out acronym, not defined in policy~~

THIS IS A COMPLETE LIST OF AHCCCS **MEDICAID**-PROVIDER TYPES. THE LIST IDENTIFIES THE FOLLOWING REGISTRATION REQUIREMENTS: **NPI, RISK LEVEL, ENROLLMENT FEE, SITE VISIT AND REGULATORY AGENCY. FOR ADDITIONAL INFORMATION REGARDING PROVIDER TYPES CONTACT PROVIDER REGISTRATION AT (602) 417-7670 OPTION 5**

SCHOOL BASED NURSE (RN/LP)	94	Y	L	N	N	Arizona State Board of Nursing www.azbn.gov
NON-MEDICARE CERTIFIED HOME HEALTH AGENCY	95	Y	H	Y	Y	Arizona Department of Health Services www.azdhs.gov
AIR TRANSPORTATION	97	Y	L	Y	N	Arizona Department of Health Services/ Bureau of Emergency Medical Services and Trauma System www.azdhs.gov