

2017-20 Enrollment Checklist

This is used if you are an agency adding staff. Please use this as a checklist and submit with the required documentation regarding your agency enrolling in the Treasure Coast Early Steps System of Care. Please refer to the list of Frequently Asked Questions for more details.

Agency Name: _____

Provider's name: _____

Individual Staff Enrollment (for each staff member providing services through the agency):

____ Current Florida professional license (PT, OT, and ST) OR current ITDS Certificate

____ Resume

____ Current FL automobile insurance card if billing for travel for service provision in the natural environment (updated annually)

____ Copy of driver's license

____ Documentation of enrollment in CMS provider management system or denial letter.(not needed for ITDS providers)

____ Medicaid provider enrollment letter(s) - Medicaid EI #'s required for ITDS', Medicaid Therapy #'s **and** EI #'s required for PT, OT and ST.

____ NPI notification

____ OnBoard PSP Team training certificates of completion <http://www.easterseals.com/florida/our-programs/childrens-services/treasure-coast-early-steps/treasure-coast-provider.html> (click link and scroll to the bottom of the page to access the training)

If you have any questions regarding this request, please contact:

- Donna DeSanto at 772- 380-9974 or ddesanto@fl.easterseals.com

Please submit your completed packets electronically to:

tces@fl.easterseals.com