

2020-2023 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

___ ITDS must submit CEU'S (24) every three years from the date that their certificate was issued.

___ Professional Liability Insurance with Easter Seals Florida as an additional named insured along with Easter Seals address 2010 Crosby Way Winter Park Fl. 32792, if staff member is carrying individual policy. (Updated annually)

___ Resume

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

___ Clear Copy of driver's license

___ Clear Copy of social security card

___ Copy of Level 2 background screening

___ Medicaid provider enrollment letter(s) - Medicaid EI #'s required for ITDS', Medicaid Therapy #'s **and EI #'S for PT,OT, and ST who are also applying for clinic contract.**

___ 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