

Thank you for choosing Atrium Health! Below are some required documents that you may need to submit to complete the credentialing process for privileging and payer credentialing/enrollment. If at any time you need assistance, please contact the Medical Staff Services office at (704) 355-2147.

**Online applications must be submitted within 10 business days.**

### HOSPITAL PRIVILEGES

#### All Providers

- Professional photo taken within the last 6 months. Please scan and email to your assigned Intake Partner.
- DEA with North Carolina address – includes all schedules unless otherwise specified – prepare a hand signed and dated document with an explanation of any missing/omitted schedules. (This excludes CRNAs & Pathologists.)
- Copy of current license(s) to practice medicine – include all states in which you are licensed. (Nursing license for Advanced Practice Nurses)
- Copy of current curriculum vitae (C.V.). Month/Year format, include all hospital affiliations, work history and written explanation of all time gaps greater than 30 days
- Procedure case logs; documentation of current clinical competence within your primary and/or sub-specialty.
- Copy of current PPD (within last 12 months), annual Flu Vaccine (in season), Covid Vaccine Card and Immunization data
- Copy of current certificate of malpractice insurance (COI) showing coverage dates, limits and Atrium Health as the cert holder
- (NPs) National Certification certificate or letter
- National Commission on Certification of Physician Assistants (NCCPA)

#### Military providers

- Form DD214 Certificate of Release or other form of discharge certificates as applicable

### PAYER ENROLLMENT

#### Atrium Employed Providers

#### All Providers

- DEA with North Carolina address – includes all schedules unless otherwise specified – prepare a hand signed and dated document with an explanation of any missing/omitted schedules
- (If practicing in SC) South Carolina Controlled Substance Registration in addition to SC DEA
- Copy of Govt issued ID – Name must match NPES NPI account. Name on all licenses must be a verifiable match to ID. (Professional names will not be accepted.)
- Copy of current curriculum vitae (C.V.). Month/Year format, include all hospital affiliations, work history and time gaps. Explanation of gaps >180 days must be provided in writing in a separate signed and dated letter (cannot accept electronic signatures)

#### Physicians

- NC Medical License (Copy of wallet card from the NCMB is required)
- Copy of Medical Degree certificate or copy of transcript
- Copy of Medical Specialty Board Certification
- (Not certified in primary specialty) Copy of Residency Certificate and Board exam status letter
- (Not certified in subspecialty) Copy of Fellowship Certificate or Letter
- National Practitioner Data Bank (NPDB) Self-Query (Electronic Version) – website is included on the next page
- Loss Run Report/Claims History – Last five years of malpractice claims which can be requested from your current malpractice insurance carrier and/or Risk Management Department (whether there have been any claims filed or not)

#### Advanced Practice Providers

- Copy of Master's Degree Certificate
- Please submit the name and email address of your current supervising physician. If you are a new graduate provide the name of your Program Director or Clinical Preceptor, so we may obtain the necessary evaluation.
- (PhDs, PsyDs & LCSWs if applicable) Copy of Doctorate Diploma

**Medical Staff Services Website:**

<https://atriumhealth.org/for-employees/medical-staff-services>

**To track your progress through the Credentialing Process:**

<https://portalclient.echo-cloud.com/95033portal/credstatus/msldir.htm>

**North Carolina Medical Board:**

<http://www.ncmedboard.org>

**North Carolina Board of Nursing:**

<https://www.ncbon.com/>

**Drug Enforcement Administration:**

<https://www.deadiversion.usdoj.gov/>

**NPI Website:**

<https://nppes.cms.hhs.gov/NPPES/Welcome.do>

**National Provider Data Bank:**

<https://www.npdb.hrsa.gov/ext/selfquery/SQHome.jsp>