

Professional provider types must meet certain criteria to be eligible for network participation. Use the chart below to view our criteria requirements, based on provider type.

| Provider Type | Criteria |
|---|--|
| <p align="center">Acupuncturist</p> | Work History |
| | License – Louisiana State Board of Medical Examiners |
| | Certification – National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| <p align="center">Applied Behavioral Analysts (ABA)</p> | Work History |
| | License – Louisiana Behavior Analyst Board |
| | Professional Malpractice Insurance Certificate \$100,000/\$100,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| <p align="center">Audiologist (Speech - Language Pathologist & Audiologist) Medicare number is required for Medicare Advantage (MA) Network</p> | Work History |
| | License – Louisiana Board of Examiners for Speech-Language Pathology and Audiology |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| | Work History |

| Provider Type | Criteria |
|---|--|
| <p align="center">Certified Nurse Midwife (CNM)</p> | Work history |
| | License – Copy of Registered Nurse (RN) and Advanced Practice Registered Nurse (APRN) |
| | DEA License OR Prescriptive Authority Letter signed by physician* that works in same office that will write prescriptions on the CNM’s behalf. (*Physician must participate in same networks as CNMs) |
| | CDS License OR Prescriptive Authority Letter signed by physician* that works in same office that will write prescriptions on CNM’s behalf. (*Physician must participate in same networks as CNMs) |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF |
| | Malpractice History – <i>Judgment or settled claims only</i> |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| <p align="center">Certified Registered Nurse Anesthetist (CRNA) Medicare number is required for Medicare Advantage (MA) Network</p> | Work History |
| | License – Copy of Registered Nurse (RN) and Advanced Practice Registered Nurse (APRN) |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) is required OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF |
| | Malpractice History – <i>Judgment or settled claims only</i> |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| <p align="center">Certified Registered Nurse First Assistant (CRNFA) Medicare number is required for Medicare Advantage (MA) Network</p> | Work History |
| | License – Copy of Registered Nurse (RN) or Advanced Practice Registered Nurse (APRN) |
| | Copy of CRNFA Certificate |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF |
| | Malpractice History – <i>Judgment or settled claims only</i> |
| | Training & Education |
| | Medicare/Medicaid Sanctions |

| Provider Type | Criteria |
|--|---|
| <p>Clinical Nurse Specialist (CNS) Medicare number is required for Medicare Advantage (MA) Network</p> | Work history |
| | License – Copy of Registered Nurse (RN) and Advanced Practice Registered Nurse (APRN) |
| | DEA license |
| | CDS license |
| | Collaborating Agreement with Physician |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF |
| | Malpractice History – <i>Judgment or settled claims only</i> |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| | <p>Doctor of Chiropractic (DC) Medicare number is required for Medicare Advantage (MA) Network</p> |
| License – Louisiana State Board of Chiropractic Examiners | |
| Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF | |
| Malpractice History – <i>Judgment or settled claims only</i> | |
| Training & Education | |
| Medicare/Medicaid Sanctions | |
| <p>Doctor of Dental Surgery (DDS) Doctor of Medicine in Dentistry (DMD) Medicare number is required for Medicare Advantage (MA) Network Includes Dental Sub-Specialties: Endodontist, Periodontist, Prosthodontist, Pediatric Dentistry, Orthodontist</p> | |
| | License – Louisiana State Board of Dental Examiners |
| | Anesthesia Permit |
| | DEA License |
| | <i>not required for Orthodontist</i> |
| | CDS License |
| | <i>not required for Orthodontist</i> |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF |
| | Malpractice History – <i>Judgment or settled claims only</i> |
| | Training & Education |
| | Medicare/Medicaid Sanctions |

| Provider Type | Criteria |
|---|--|
| <p align="center">Doctor of Osteopathic (DO) Doctor of Medicine (MD) Medicare number is required for Medicare Advantage (MA) Network</p> | <p align="center">Hospital Privileges With the exception of Hospital-Based Anesthesiology, Hospital-Based Pathology, Hospital-Based Radiology, Podiatric Medicine, Dermatology, Allergy & Immunology, Psychiatry, Sleep Medicine, Physical Medicine & Rehabilitation (Physiatry), Medical Genetics and Radiology providers that “read films” only on patients that are directed to a diagnostic facility by another provider</p> |
| | <p align="center">Work history</p> |
| | <p align="center">Medical License</p> |
| | <p align="center">DEA License</p> |
| | <p align="center">CDS License</p> |
| | <p align="center">Board Certification (MD), if applicable</p> |
| | <p align="center">Board Certification (DO), if applicable</p> |
| | <p align="center">Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF</p> |
| | <p align="center">Malpractice History – <i>Judgment or settled claims only</i></p> |
| | <p align="center">Training & Education</p> |
| | <p align="center">Medicare/Medicaid Sanctions</p> |
| | <p align="center">Doctor of Podiatric Medicine (DPM) Podiatric Medicine or Podiatric Surgery Medicare number is required for Medicare Advantage (MA) Network</p> |
| <p align="center">Work history</p> | |
| <p align="center">Medical License – Louisiana State Board of Medical Examiners</p> | |
| <p align="center">DEA license (only required for podiatric surgery)</p> | |
| <p align="center">CDS license (only required for podiatric surgery)</p> | |
| <p align="center">Board Certification</p> | |
| <p align="center">Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF</p> | |
| <p align="center">Malpractice History – <i>Judgment or settled claims only</i></p> | |
| <p align="center">Training & Education</p> | |
| <p align="center">Medicare/Medicaid Sanctions</p> | |

| Provider Type | Criteria |
|--|--|
| <p align="center">Hearing Aid Dealer Medicare number is required for Medicare Advantage (MA) Network</p> | Work history |
| | License – Louisiana Board for Hearing Aid Dealers |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| <p align="center">Licensed Addiction Counselor (LAC)</p> | Work history |
| | License – Louisiana Addictive Disorder Regulatory Authority |
| | Professional Malpractice Insurance Certificate \$100,000/\$100,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| <p align="center">Licensed Clinical Social Worker (LCSW) Medicare number is required for Medicare Advantage (MA) Network</p> | Work history |
| | License – Louisiana State Board of Social Work Examiners |
| | Professional Malpractice Insurance Certificate \$100,000/\$100,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| <p align="center">Licensed Professional Counselor (LPC) Medicare number is required for Medicare Advantage (MA) Network only if with a Rural Health Clinic (RHC) and Federally Qualified Health Center (FQHC)</p> | Work history |
| | License – State of Louisiana Licensed Professional Counselor Board of Examiners |
| | Professional Malpractice Insurance Certificate \$100,000/\$100,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |

| Provider Type | Criteria |
|--|--|
| <p>Louisiana Registered Doulas</p> | Work history |
| | Training & Education |
| | Copy of CPR Certification |
| | Registry Approval Notification from the Louisiana Doula Registry |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| <p>Nurse Practitioner (NP) Medicare number is required for Medicare Advantage (MA) Network</p> | Work history |
| | License – Copy of Registered Nurse (RN) and Advanced Practice Registered Nurse (APRN) |
| | DEA License OR letter from Supervising/Collaborating physician that works at same office/will write prescriptions on NP's behalf |
| | CDS License OR letter from Supervising/Collaborating physician that works at same office/will write prescriptions on NP's behalf |
| | Copy of Collaborating Agreement with physician – collaborating physician must participate in the same networks as the NP |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF (can be through the collaborating physician) |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| | <p>Occupational Therapy (OT) Medicare number is required for Medicare Advantage (MA) Network</p> |
| License – Louisiana State Board of Medical Examiners | |
| Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) is not required | |
| Malpractice History – Judgment or settled claims only | |
| Training & Education | |
| Medicare/Medicaid Sanctions | |

| Provider Type | Criteria |
|--|--|
| <p>Optometry (OD) Medicare number is required for Medicare Advantage (MA) Network</p> | Work history |
| | License – Louisiana State Board of Optometry |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| | <p>Physician Assistant (PA) Medicare number is required for Medicare Advantage (MA) Network</p> |
| License – Louisiana State Board of Medical Examiners | |
| DEA License OR letter from Supervising/Collaborating physician that works at same office/will write subscriptions on PA's behalf | |
| CDS License OR letter from Supervising/Collaborating physician that works at same office/will write subscriptions on PA's behalf | |
| Copy of Intent to Practice Agreement with physician that participates in same networks as PA | |
| Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without (LPCF) OR Self Insurance through the LPCF (can be through Collaborating Physician) | |
| Malpractice History – Judgment or settled claims only | |
| Training & Education | |
| Medicare/Medicaid Sanctions | |
| <p>Psychologist (Ph.D. or M.P.) Medicare number is required for Medicare Advantage (MA) Network</p> | |
| | License – Louisiana State Board of Examiners of Psychologist |
| | License – Louisiana State Board of Medical Examiners (Only for M.P.) |
| | Professional Malpractice Insurance Certificate \$100,000/\$100,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |

| Provider Type | Criteria |
|---|--|
| <p align="center">Physical Therapy (PT) Medicare number is required for Medicare Advantage (MA) Network</p> | Work history |
| | License – Louisiana State Board of Physical Therapy |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) is not required |
| | Malpractice History – <i>Judgment or settled claims only</i> |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| | <p align="center">Registered Dietician & Nutrition (RD) Medicare number is required for Medicare Advantage (MA) Network</p> |
| License – Louisiana Board of Examiners in Dietetics and Nutrition | |
| Professional Malpractice Insurance Certificate \$100,000/\$300,000 with Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF | |
| Malpractice History – <i>Judgment or settled claims only</i> | |
| Training & Education | |
| Medicare/Medicaid Sanctions | |
| <p align="center">Registered Nurse First Assistant (RNFA) Medicare number is required for Medicare Advantage (MA) Network</p> | |
| | License – Copy of Registered Nurse (RN) or Advanced Practice Registered Nurse (APRN) |
| | Copy of RNFA Certificate |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient's Compensation Fund (LPCF) OR \$1,000,000/\$3,000,000 without LPCF OR Self Insurance through the LPCF |
| | Malpractice History – <i>Judgment or settled claims only</i> |
| | Training & Education |
| | Medicare/Medicaid Sanctions |
| <p align="center">Rural Health Clinic</p> | <p align="center">Providers who practice at Rural Health Clinics are credentialed according to the individual specialty listed in this document</p> |

| Provider Type | Criteria |
|---|--|
| Speech-Language Pathologist & Audiologist (SLP) Medicare number is required for Medicare Advantage (MA) Network | Work history |
| | License – Louisiana State Board of Speech, Language Pathologist and Audiologist |
| | Professional Malpractice Insurance Certificate \$100,000/\$300,000 Louisiana Patient’s Compensation Fund (LPCF) is not required |
| | Malpractice History – Judgment or settled claims only |
| | Training & Education |
| | Medicare/Medicaid Sanctions |

Telehealth

Our credentialing policy includes additional guidance for the provision of telehealth services to our members.

| Provider Type | Criteria |
|--|---|
| Telehealth In-network provider (Louisiana-based) | Must be in the process of completing or have completed standard credentialing and contracting according to provider type Must be employed or affiliated with a physical practice or group located in Louisiana that participates in same network |
| Telehealth Out-of-state provider (With a Louisiana-based practice affiliation) | The out-of-state telehealth provider must be employed or affiliated with a Louisiana-based group or entity The Louisiana group or entity must be in the process of completing or have completed standard credentialing and contracting Must have a Louisiana state license as required for specialty OR have a Louisiana telehealth permit by the Louisiana State Board of Medical Examiners, if not in possession of Louisiana state license |
| Telehealth Out-of-state provider (Without a Louisiana-based practice affiliation) | Must be credentialed and contracted by another Blue plan Can be individually credentialed/contracted or part of a group or entity that is credentialed/contracted with the out-of-state Blue plan |
| National telehealth solution/vendor | A national telehealth solution contracts directly with Louisiana Blue to offer members telehealth services accessible in the home plan region and outside of it to ensure access while members are out of their home plan area |