



InteCare has a defined application and credentialing process, which requires the submission of a formal application and supportive documentation. The Checklist below is provided to assist you with this process.

Once your materials have been received and where appropriate, verified, your file will be reviewed by the InteCare Network and Credentialing Subcommittee. If you have questions about the process, please contact our credentialing staff at 317-829-5759.

InteCare, Inc.  
Recredentialing Application Packet Checklist

Please be sure to do the following:

- Complete the Application (Review/make changes where necessary)
- Sign the Attestation on Application (pg. 7)
- Complete and Sign the Release of Information Form
- Complete and Sign the Consent for Criminal History

Please submit the following documentation:

- Completed, Signed Application
- Completed and Signed Release of Information
- Completed and Signed Consent for Limited Criminal History
- Copy of updated resume with month/year starting and ending dates. ex. (03/2008 to 9/2008) Please include current employment on your resume
- Copy of Current Liability Insurance Declaration Page (Malpractice insurance coverage) (Provider's name must appear on the binder or must include a letter on the insurer's letterhead listing the providers covered on the policy if a group practice)
- Proof of payment in Indiana Patient's Compensation Fund (Required for MD/DO and CNS/NP)
- Copy of DEA Certificate (If applicable)
- If not board certified, provide a copy of 75 Category 1 CME's completed in the previous 36 months (MDs only)
- Copy of a current photo id such as a driver's license, passport or other government issued ID
- Copy of Immigration VISA (If not a US Citizen)
- Copy of Collaborative Agreement (For CNS/NP only, needed if changed or expired since last credentialing)