

How to Apply

A step-by-step guide to completing a credentialing application in the CertifyOS SharedCred Program Provider Portal — what to have ready, what the application asks, and what happens after you submit.

For	Provider Portal	Updated
Practitioners and provider administrators	provider.certifyos.com	14 October 2026

One account. One application. Apply to one or more participating health plans through the SharedCred Program.

You may receive an invitation from a participating health plan. The invitation provides access to the Provider Portal and does not limit the health plans you may select. However you reach the Provider Portal, you complete the same credentialing application and choose there which participating health plans you want to apply to.

1 Before you start

The application draws on information from several sources. Having the following available before you begin will help you complete it in fewer sittings.

Your identifiers

National Provider Identifier (NPI), Social Security Number, date of birth, and Tax Identification Number (TIN).

Your CAQH Provider ID, if you have one

Some participating health plans require it. Make sure your CAQH profile is attested and up to date before you begin — the Provider Portal can retrieve information only from an attested profile.

Your professional details

Practitioner type, degree, primary specialty, and role.

Each practice location you want credentialed

Its address and phone number, plus the billing address for each if it is different.

The groups under which you practise

Group name and, depending on participating health plan requirements, the group NPI and associated TIN.

Your contacts

The name, email address, and phone number for your credentialing contact and, if different, your contracting contact.

A completed W-9

In PDF format.

REQUIREMENTS VARY BY PLAN

The Provider Portal displays only the questions and documentation required for the participating health plans selected in your application.

2 Getting access

1 Sign up

Open the sign-up link you received and enter your first name, last name, and email address. Use an email address you access regularly — application updates and notifications are sent there.

2 Open the email

You will receive a link to finish setting up your account. If it does not arrive within a few minutes, check your spam or junk folder.

3 Create your password

Use the link in the email to create a password. After setup, sign in with your email address and password at provider.certifyos.com.

PROVIDER ADMINISTRATORS

You can view the practitioners on your account and open or start an application on their behalf. A practitioner who signs in directly sees only their own application.

3 Starting an application

Open the Credentialing Intake Request Form, shown in the Provider Portal as the SharedCred Common Credentialing Application. It opens on an instruction page listing what you will need and explaining how the application is organised. When you are ready, select **Start Application**.

A progress bar appears at the top of the application and shows your completion status. Sections may be added or removed based on your responses, so the percentage can move in either direction as you work through the form.

4 Working through the form

The application may include up to sixteen sections, and no single application displays all of them. The sections shown depend on the participating health plans selected, the state in which you are applying, your specialty, whether you provide a CAQH Provider ID, and your responses as you go.

Eligibility

Select one state and one or more participating health plans. Phase one covers Alabama, Montana, North Dakota, South Dakota, and Wyoming. If you practise in more than one state, complete and submit a separate application for each state.

Eligibility requirements vary by participating health plan. Depending on those selected, the Provider Portal may ask additional questions about your care setting or other eligibility criteria.

SOME RESPONSES LEAD ELSEWHERE

Based on your answers to the eligibility questions, the Provider Portal may determine that your application cannot proceed through this program and direct you to another credentialing route instead.

Practitioner details

Provide your name, NPI, Social Security Number, date of birth, CAQH Provider ID if applicable, and TIN. Depending on the participating health plans selected, the Provider Portal may request additional information such as a start date, line of business, or Medicaid number.

Your name and NPI may already be populated from your practitioner record. The Provider Portal compares the name entered against the NPI Registry but does not overwrite what you enter.

Degree and specialty

Provide your practitioner type, degree, primary specialty, and the role you perform in that specialty.

Practice locations

A separate Primary Practice Location section may appear for each participating health plan selected. After the first location section, the Provider Portal may offer to reuse an address you have already entered, so applying to several plans from one address does not mean entering it more than once.

For each location, indicate whether the billing address is the same. If it is different, additional billing address fields appear. You may also add additional practice locations; these are optional.

Depending on the participating health plans selected, the Provider Portal may request further information for each location, including the languages offered there and, for each language, whether it is spoken or written by available staff. Adding a language is optional — but if you add one, complete every field displayed for it.

Group details

A Group Details section may appear for each participating health plan selected. The information required varies and may include the group name, the group National Provider Identifier (NPI), and the associated Tax Identification Number (TIN).

You may list up to ten groups for each participating health plan. Where displayed, the associated TIN may be populated from information entered earlier and can be changed.

Supervising physician

Some specialties require a supervising physician in certain states. When required, provide the supervising physician's full name, specialty, and NPI. This section appears only when applicable.

Credentialing and contracting contacts

Provide the name, email address, and phone number of the person to be contacted about credentialing. Indicate whether the contracting contact is the same person; if not, provide their information as well.

Documents

If you provide a CAQH Provider ID, a completed W-9 is the only document requested. If you do not provide one, additional documents may be requested, including a state credentialing form. Upload all requested documents in PDF format.

Attestation

Confirm that the information is accurate, enter your name, email address, and the date, and sign the application.

5 The CAQH step

If you provide a CAQH Provider ID, the Provider Portal retrieves information from your attested CAQH profile after you leave Practitioner Details, and uses it to populate specialty and practice location fields.

When the information is available immediately

In most cases retrieval completes in a moment, the fields populate, and you continue the application.

When retrieval takes longer

If your record must first be added to the roster, retrieval takes approximately fifteen to twenty minutes. Your progress is saved and you can close the application. You will receive an email when the information is available, and the application reopens where you left off.

Choose a practice address

The Provider Portal displays the practice addresses held in your CAQH profile. Select the one you want to use; it populates the applicable practice location sections for every participating health plan in your application, so you are asked only once. If the correct address is not listed, select **None of the Above**.

If the address you need is not listed

Add or correct it in your CAQH profile and then re-attest the profile — the Provider Portal can retrieve only information included in an attested profile. Then return to the application and select **Refresh CAQH Data**.

After an address is returned from CAQH, the address fields cannot be edited directly. To change the address, select a different CAQH address, choose **None of the Above**, or refresh the CAQH data after updating and re-attesting your profile.

VERIFY YOUR CAQH PROVIDER ID BEFORE YOU CONTINUE

You may use a CAQH Provider ID three times before a successful retrieval — the initial entry and two corrections. After a successful retrieval, or after the third attempt, the field locks. Contact support if it must be changed after that.

6 Saving and returning

Your responses are saved as you work. You can close the application and return to it later from the Provider Portal; it reopens where you left off.

If you return after an extended period and provided a CAQH Provider ID, the Provider Portal may retrieve your CAQH data again before you continue, so the application reflects your current attested information.

7 Submitting the application

You cannot submit the application until all required questions are answered. If information is missing, the Provider Portal displays the number of incomplete responses, identifies each one, and directs you to the first.

The Provider Portal also checks required fields as you move between sections, so most incomplete items can be corrected where they occur rather than at the end.

COMPLETE EVERY SELECTED PLAN

If your application includes more than one participating health plan, all required information for every one of them must be complete before any part of the application is submitted. To remove a participating health plan, return to the Eligibility section before submitting.

If you provided a CAQH Provider ID, the Provider Portal also compares applicable responses against your CAQH profile before submission. Where information does not match, the Provider Portal identifies the field so you can review it. Formatting differences alone, such as dashes in a phone number, are ignored.

REVIEW BEFORE SUBMITTING

Changes cannot be made after the application is submitted.

8 After you submit

You will receive a confirmation email, and the application status in the Provider Portal changes to Submitted. To protect personal information, the email directs you to sign in to the Provider Portal rather than linking to the application itself.

You can download the submitted application from the Provider Portal at any time. The download contains the information submitted for every participating health plan you selected, as it was submitted.

APPLICATION STATUSES

Status	What it means
Draft	Started but not submitted. You can continue to make changes.
Fetching data	CAQH information is being retrieved. Your progress is saved, and you will receive an email when the information is available.
Data fetched	CAQH information is available. Reopen the application to continue.
Submitted	Submitted to all selected participating health plans. Changes cannot be made.
Ineligible to complete	The application cannot proceed through the SharedCred Program pathway. Any additional information provided appears with the status.

PROVIDER ADMINISTRATORS

The Provider Portal lists the practitioners on your account with their application status, so you can identify applications that are in progress, waiting for CAQH information, or submitted.

9 Getting help

Select the ? icon in the Provider Portal header to view support options. Contact the appropriate team based on the type of assistance you need.

If you need help with

Contact

A Provider Portal feature that is not working as expected

gethelp@certifyos.com

A credentialing question

credentialing@certifyos.com

Your name, email address, and role appear under the settings icon, where you can also change your password.