

andros provider import rules

Required Fields for 'Direct' providers (Import Type = Direct)

Initials: Import Type, Application Type, NPI, First Name, Last Name, Provider Type, Cred Event, Contact Email

Recreds: Import Type, Application Type, NPI, First Name, Last Name, Provider Type, Cred Event, Cred Due Date, License Number, License State, Date of Birth, Gender, SSN, School, Graduation Year, Practice Name

Additional Required Fields by Application Type

CAQH' Application Type: CAQH ID

Field Name	Required for Which Application Types	Accepted Values	Example
NPI	Required for all	9 or 10 digit number, must be "Type 1 - Individual" NPI.	1234567891
First Name	Required for all	Must be alpha string with less than or equal to 30 characters	Hippocrates
Middle Name	optional	Must be alpha string with less than or equal to 30 characters	of
Last Name	Required for all	Must be alpha string with less than or equal to 30 characters	Kos
Provider Type	Required for all	Must be one of the following 2-4 character abbreviations. See Valid Provider Types for a list of current provider types that we credential.	MD
Specialty	optional	Must have a taxonomy code	Internal Medicine
Cred Event	Required for all excluding delegated monitoring	initial, recredential, recred	initial
Cred Due Date	recredentials	MM/DD/YYYY, YYYY-MM-DD	12/1/2020
CAQH ID	CAQH	8 or 10 digits	12345678
Contact Email	andros	Standard email format validation	firstnamelastname@domain.com
Contact Phone	preferred	10 or 11 digits; extension accepted in the following formats: 8013529500 ext 1811, 8013529500, ext 1811, 8013529500 ext1811, 8013529500 ext. 1811, 8013529500 ext.1811, 8013529500 EXT: 1811, 8013529500 x 1811, 8013529500 x1811	8013529500 ext 1811
Contact Fax	preferred	Ensure non-numeric (spaces, hyphens, parentheses and any other special characters) are removed; if there is a leading "1", making the value 11 digits, strip this out before validating; validate that the value is 10 digits	8013529500
Provider Email	andros	Standard email format validation	firstnamelastname@domain.com
Participating Network	optional	GP, Com	GP
Primary Practice State	optional	Standard state abbreviations. Only states and the District of Columbia are supported	TX
Practice States	optional	If the provider practices in more than the Primary Practice State on behalf of the organization, list additional states in this field. Comma separated list of two-character state abbreviation using same abbreviate as Primary Practice State above	DC, MN, FL, IA, NY

Field Name	Required for Which Application Types	Accepted Values	Example
License Number	no application, recredentials & delegated monitoring	Non-zero length string of alphanumeric characters; allow for special characters; max character length 20. Multiple licenses can be inserted using multiple rows	
License State	no application, recredentials & delegated	Must be one, two-characters. Standard state abbreviations. Only states and the District of Columbia are supported. Multiple licenses can be inserted using multiple rows	TX
Date of Birth	no application, recredentials & delegated	Must be later than 01/01/1930; preferred format MM/DD/YYYY; YYYY-MM-DD	12/1/1980
Gender	no application, recredentials & delegated	Female, Male, female, male, FEMALE, MALE, f, m, F, M	f
SSN	no application, recredentials & delegated	Must be 9 digits, optionally including hyphens	123456789
School	no application, recredentials & delegated	Non-zero length string of word characters; max character length 100; following special characters are permitted: () & . , ' -	
Graduation Year	no application, recredentials & delegated	Must be 4 digits; no earlier than 1950; no later than <= current year + 1	
Board Certified	no application	true, false, TRUE, FALSE, True, False, t, f, T, F, yes, no, YES, NO, Yes, No, y, n, Y, N, 1, 0, ON, OFF, on, off	
Board Name	no application	Non-zero length string of word characters; max character length 100	
DEA Number	no application	Two capital letters followed by 7 digits	AB1234567
Mailing Address 1	optional	Non-zero length string of alphanumeric characters with special characters; max character length 100 Multiple address can be inserted using multiple rows	
Mailing Address 2	optional	Non-zero length string of alphanumeric characters with special characters; max character length 100 Multiple address can be inserted using multiple rows	
Mailing City	optional	Non-zero length string of word characters; max character length 100 Multiple address can be inserted using multiple rows	
County	optional	Non-zero length string of alphanumeric characters with special characters; max character length 100 Multiple counties can be inserted using multiple rows	Dekalb
Mailing State	optional	State abbreviation found here; only states and the District of Columbia are supported Multiple address can be inserted using multiple rows	
Mailing Zip Code	optional	Five digits with optional hyphen-separated zip+4 digits, e.g. 12345 or 12345-1234 Multiple address can be inserted using multiple rows	
External ID	optional	Digits less than 30 characters	12345