CREDIBLE
Behavioral Health Software

Prescriber Identity Verification Request

Credible Behavioral Health, Inc.
ATTN: Partner Services Department
1 Choice Hotels Circle
11th Floor
Rockville, MD 20850

[PRESCRIBER'S NAME] is currently employed with [YOUR AGENCY NAME] in a capacity which includes the prescribing of medications.

- [PRESCRIBER'S FULL LEGAL NAME]
- [PRESCRIBER'S DATE OF BIRTH]
- [PRESCRIBER'S LEGAL HOME ADDRESS]

[PRESCRIBER'S FULL LEGAL NAME] has been employed by [AGENCY NAME] since [HIRE DATE].

Prescriber's Credible Information

- [PRESCRIBER'S EMPLOYEE ID]
- [PRESCRIBER'S FULL NAME IN CREDIBLE]
- [PRESCRIBER'S CREDIBLE USERNAME]

NPI #: [PRESCRIBER'S NPI NUMBER]
DEA #: [PRESCRIBER'S DEA NUMBER]
DEA # (secondary): [PRESCRIBER'S SECONDARY DEA NUMBER]
Additional identifiers, if applicable: [PRESCRIBER'S ADDITIONAL IDENTIFIERS]

Medical Licenses
Note: For Physician Prescriber Representatives, copies of the current license must be included.

- [PRESCRIBER'S CURRENT STATE MEDICAL LICENSE NUMBER, ISSUE DATE, AND EXPIRATION DATE]
- [PRESCRIBER'S CURRENT FEDERAL LICENSE NUMBER, ISSUE DATE, AND EXPIRATION DATE]

Clinics from which the Prescriber will be operating:

- [UNIQUE CLINIC NAME]
- [CLINIC ADDRESS]
- [CLINIC PHONE]
- [CLINIC FAX]

This prescriber [DOES / DOES NOT] need refill rights.
This prescriber [DOES / DOES NOT] need cancellation rights.

1 Choice Hotels Circle, 11th Floor, Rockville, MD 20850
o: 301-652-9500 f: 240-744-3068 e: info@credibleinc.com w: credibleinc.com

[PRESCRIBER NAME]'s identity was appropriately verified by our Physician Prescriber Representative, [PHYSICIAN PRESCRIBER REPRESENTATIVE NAME].

[PHYSICIAN PRESCRIBER REPRESENTATIVE AFFIRMATION]
[PHYSICIAN PRESCRIBER REPRESENTATIVE WET-INK SIGNATURE]

–OR—

[AGENCY NAME] authorizes Credible to verify [PRESCRIBER NAME]'s identity. We understand that we may be charged a fee for this service; an order form will be provided prior to Credible conducting verification or entering this prescriber into Surescripts.

[AUTHORIZATION FOR CREDIBLE TO CONDUCT IDENTITY VERIFICATION]
[PRESCRIBER'S WET-INK SIGNATURE]

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HR Director (Credentialing Director, CEO, COO, etc.)