PROVIDER APPLICATION REQUIREMENTS FOR DIAGNOSTIC/ X-RAY FACILITIES

## REQUIREMENTS

- Completed signed Application Form.
- Certified copy of qualification and registraton of Technician(s)/Radiologist
- Certified copy of applicants National Identification.
- Certified copy of applicants Tax Payer Registration Number (TRN).
- List of services offered and prices.
- If your practice will be operating under a business name we will need a certified copy of your Business Registration Certificate along with the Articles of Incorporation (issued by the Companies Office of Jamaica), indicating the name(s) of the Directors.
- Copied documents are to be certified by a JP/Notary Public as a true copy of the original.

Two letters of recommendation:

- a) For Business Applicants
  - i. Owners/Directors A written character reference from a JP/Notary Public.
  - ii. Employed professional A written recommendation from an existing Sagicor provider in the same specialty.
- b) For Individual Applicants
  - i. Two (2) letters of recommendation from existing Sagicor providers in your field.
- Facilities utilizing radiation should be certified to be operating within proper exposure guidelines.
- Have the Provider Access System (PAS) installed at the practice(s) in order to submit claims electronically to Sagicor. You may contact Advanced Integrated Systems at 929-6462 for further information on PAS.

## Applications must be addressed to:



The Manager Provider & Audit Services Department Sagicor Life Jamaica Ltd. 28-48 Barbados Avenue Kingston 5

## NOTES

- 1. The consideration of an application will be subject to a site inspection / assessment by a Sagicor representative.
- 2. The submission of all the required documents does not automatically guarantee acceptance.
- The granting of Provider Status is subject to review quarterly by Sagicor's Medical Relations Committee (MRC) or at such other frequency as may be determined.
- 4. The MRC reserves the right to accept or deny the request for inclusion in Sagicor's Panel of Participating Providers
- 5. The successful applicant will be required to:

a. Sign a Provider Agreement with Sagicor Life Jamaica Limitedb. Provide banking information in order for payments to be made to the Provider via direct deposit.





