

APPROVED PROVIDER APPLICATION FEES

APPROVED PROVIDER SUBMISSION FEES	
Single Agency Provider Application* 1 Facility Due with submission of Provider Unit Application	\$2000
System Provider Application** 2 to 6 Facilities Due with submission of Provider Unit Application	\$3000
Mega System Provider Application*** 7 or More Facilities Due with submission of Provider Unit Application	\$4800
Intent to Reapply fee inclusive of Educational Opportunity w/ NPR Due within 60 days of original notification of renewal letter	\$500
ADDITIONAL FEES	
Single Agency Provider Annual Review****	\$100
System Provider Annual Review****	\$150
Mega System Provider Annual Review****	\$240
Extension Fee Extensions up to 1 cycle may be granted at the discretion of the WMSD Accredited Approver Unit and must be requested in writing with explanation of cause. Extension dates will not change the original approval period. For example, the expiration cycle date is 3/1/2018, an extension is granted to the next cycle date of 7/1/2018. Application is submitted and approved and expiration date is 3/1/2021, a three-year period based on your original expiration date. Note time table for WMSD cycle periods.	\$200 Single Agency
	\$300 System Agency
	\$500 Mega System Agency
Provisional Status Fee Organization provisional status is granted to those who require resubmission of Self Study for substantive documentation deficiencies and/or process improvements.	\$500
Monitoring/Progress Report Submission Fees	\$250
Late Submission Fees Includes late submission of intent to reapply, self-study documents, provisional status reports, and/or monitoring/progress reports	\$250
Decision Appeal Fee Fees cover a second review and consensus call by different 2 Nurse Peer Reviewers	\$500

NOTE: All Fees are non- refundable

*SINGLE AGENCY PROVIDER:

A single agency or hospital Approved Provider Unit who may be part of a larger corporate system however awards contact hours for only one agency/hospital named in the application.

****SYSTEM PROVIDER:**

A multi-agency or multi-hospital health care system with two to six agencies/hospitals with a centralized Approved Provider Unit awarding contact hours system wide for continuing education activities.

*****MEGA SYSTEM PROVIDER:**

A multi-agency or multi-hospital health care system with seven or more agencies/hospitals and/or have facilities in **more than one state** with a centralized Approved Provider Unit awarding contact hours system wide for continuing education activities.

******ANNUAL PROVIDER REVIEW**

All approved providers are required to submit an annual report of awarded activities through the NARS System each calendar year, excluding organization re-applying in the same year. This data is monitored and reviewed by the WMSD Accredited Approver Unit for completeness and compliance with ANCC Standards. A sample audit of activities may be requested.

Submission Instructions

Step 1: Submit Payment Information through the [Online Payment Submission form](#).

Step 2: Send completed application, Self-Study, and payment order confirmation to:

- **Mail: 4 Hard Copies** – *collated, double-sided, hard copies -see Self Study Instructions*
Western Multistate Division
Attention: CNE
1850 E. Southern Avenue, Suite 1
Tempe, AZ 85282
- Only 1 submission must be professionally bound
- 3 sets may be assembled/bound with heavy duty file clips
- **Email** – At this time, no electronic file submissions are permitted however, PDF'd book marked submissions may be required in the near future. Direct questions to education@westernmsd.org.

WMSD Approved Provider Unit Renewal Cycles/Processes

	March Cycle	July Cycle	Nov Cycle
One Year prior to expiration date, Courtesy reminder letters Sent from WMSD	March	July	November
Provider Unit send Letter of intent and \$500 nonrefundable intent fee sent to WMSD	May 1	September 1	January 1
Group Educational Session for cycle applicants conducted with NPR	June	October	February
2 Hours of Consultative Services Provided by WMSD	July – October	November - February	March- June
Extra Consultative services as Requested by applicant @ \$75/hour	July – October	November - February	March- June
Second Reminder Letter sent For those not responding to first reminder, \$250 late fee charged along with intent to reapply fee	July	November	March
One Emergency extension, for cause, only, fees apply	Moved to July Cycle Time Period for this renewal cycle only	Moved to November Cycle Time Period for this renewal cycle only	Moved to March Cycle Time Period for this renewal cycle only
Self-Study and Payment Due	November 1	March 1	July 1
Late submission fee assessed	November 2	March 2	July 2
Self-Study Review by NPR	November – February	March – June	July - October
Decision Rendered	March 1	July 1	November 1
Provisional Status Report and Fees Due	June 1	October 1	February 1
Full approval w/ Progress reports and Fees Due	September 1	January 2	May 1
2 Hours of Consultative Services Provided by WMSD for provisional status or progress report submission	March – June or September	July – October or January	November – February or May
Extra Consultative Services for Provisional Progress reports for additional fee @ \$75/hour	March – June or September	July – October or January	November – February or May
Annual Activity reports due in NARS at the completion of each calendar year	February 1	February 1	February 1
Reminders sent for payment of Annual fee through ANA	February 1	February 1	February 1
Annual Fee to WMSD	April 1	April 1	April 1
***Updated Demographic information due within 30 days of change in Primary Nurse Planner (WMSD will assist PNP in development of a transition plan) ***Updated Demographic Information due when submitting annual report for changes in organizational ownership or structural and/or provider unit structural changes			