Real example: how I filled the Providence Health Plan practitioner questionnaire

Eric Richers, LPC, CADC III · [practice name], Eugene, Oregon · solo telehealth counseling practice

Recreated from my own filing, redacted. Bracketed values are placeholders. Get the current blank form from Providence Health Plan (sent with the practitioner application) at https://www.providencehealthplan.com/providers.

What to notice

Three pages that feed the plan's directory, dated 10/2/2025. Section 1 is required and shapes how members find you: access, ages served, special focus areas. Sections 2 and 3 are personal characteristics, race, faith, and identity, and the form says in its own words that they are optional and never used in credentialing. I have left them blank in this example.

The languages table wants read, write, and speak as three separate ticks plus a line on how the fluency can be verified. Answer it honestly; a member who books you for a language will expect that language.

Section 1. Clinical practice and acquired skills (required)

Name	Eric Richers
Practice website	[practice website]
Wheelchair / accessible site of service	Yes
Ages served	Adults only (as entered)
Specialized training in gender-affirming care?	Yes
Completed cultural sensitivity or competency courses?	Yes

Special focus areas (behavioral health)

- ☐ Abuse
- ☒ Anxiety
- ☐ ADHD
- ☐ Autism spectrum disorders
- ☒ Cognitive behavioral therapy (CBT)
- ☒ Counseling, adults
- ☒ Counseling, adolescents
- ☐ Counseling, children
- ☐ Counseling, geriatric
- ☒ Counseling, family
- ☒ Depression
- ☒ Eating disorder
- ☐ EMDR
- ☐ Forensic psychiatry
- ☐ Grief and bereavement
- ☐ LGBTQIA+
- ☐ Pain management
- ☐ Pre- and post-partum
- ☒ Substance use
- ☐ Gender affirming care
- ☐ Traumatic brain injury
- ☒ Trauma
- ☒ Dialectical behavior therapy (DBT)

Section 2. Personal characteristics and attributes (optional)

Race and ethnicity	(optional; left blank in this example)

Gender / pronouns	(optional; left blank in this example)
LGBTQIA+ community	(optional; left blank in this example)

Language	Read	Write	Speak	How fluency can be verified
[language]	yes	yes	yes	[how fluency can be verified]
[language]	yes	no	yes	[how fluency can be verified]

Section 3. Additional attributes (optional, internal only)

Cultural or religious affiliation	(optional; left blank in this example)
Signature	[signature]
Date	10/2/2025