CPAR Forms Checklist

CPAR Access Panel Administrator Panel Request Form (PA) Form **Administrator (AA) Form** each provider **Access Administrator** submitting panels Whose signature **Access Administrator** is required? NOTE: If CPAR AA is also the **Access Administrator** Panel Admin. an alternate being registered CPAR AA is required. How many 1 Form per 1 Form per forms are 1 Form per Panel **Access Administrator Panel Administrator** needed? **Practitioner IDs Practitioner IDs** Have panel numbers been added? Make sure comprised of 9 digits comprised of 9 digits to check Facility ID correct? **Facility ID correct? Facility ID correct?** (this is the Billing/Class ID, (this is the Billing/Class ID, (this is the Billing/Class ID, not 4-digit alphanumeric WDFA not 4-digit alphanumeric WDFA not 4-digit alphanumeric WDFA used for Alberta Netcare) used for Alberta Netcare) used for Alberta Netcare) Where do Fax completed and signed forms to eHealth Support Services at 1-844-630-0877 forms get sent?

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