

OneView - Document Type & Permissions Guide

Grouping	Document Type	Default Permissions
Admin	Correspondence	admin
	Correspondence Form	public
	Employment Contract	public
	Employment Contract Addendum	public
	Employment Termination Notice	public
	HR Document	public
	Modio Health	admin
	Non-Disclosure Agreement	public
	Offer Letter	public_facility
	Protocol	public
	Term Letter	public_facility
Test Form	public	
Grouping	Document Type	Default Permissions
Applications/Attestations	Admit Letter	public
	Application Receipt	coordinator_facility
	Application Status	coordinator_facility
	Application Withdrawal	public
	Approval Letter	coordinator_facility
	Attestation Explanation	coordinator
	Authorization Release	coordinator
	Board Approval Letter	coordinator
	CAQH Authorization	coordinator_facility
	CAQH Profile	coordinator_facility
	Clinical Competency Checklist	coordinator
	Clinical Standing Orders	coordinator
	Committee Signature Page	public_facility
	Credentialing and Privileging Checklist	public
	Credentialing Packet	public
	Delineation of Privileges (DOP)	public_facility
	Demographic Update Form	public
	Denial Letter	coordinator_facility
	EDI Enrollment	public
	EFT Enrollment	public
	ERA Enrollment	public
	Facility Applications	coordinator_facility
	Facility Attestations	coordinator_facility
	Facility Contract Addendum	coordinator
	Facility Contracts	coordinator_facility
	Facility Dues	coordinator
	FQHC Letter	coordinator
	HIPAA Attestation	public_facility
	Hospital Admitting Privileges	coordinator
	HRSA Grant Award Letter	coordinator
	Infection Control Attestation	public_facility
	Insurance Approval Letter	coordinator
	Insurance Attestation	public
	Internal Application	coordinator
	Leave of Absence	public
	Letter of Intent	coordinator
	License Application	public
	Link Letter	coordinator
	Medicaid Revalidation	coordinator
	Medicare Revalidation	coordinator
	Opioid Attestation	coordinator
Orientation Attestation	public_facility	
Payor Application	coordinator_facility	
Payor Contract Amendment	public	

	Payor Contracts	coordinator_facility
	Payor Correspondence	coordinator_facility
	Payor Directory	coordinator
	Payor Fee Schedules	public
	Payor Notification	coordinator
	Payor Roster	public
	Payor Summary List	public_facility
	Reappointment Application	coordinator_facility
	Recredentialing Letter	public
	Resignation Letter	public
	State Application	public_facility
	Telehealth Attestation	public
	Training Attestation	public
Grouping	Document Type	Default Permissions
CME/CEU	CME	Team(s): Public
	CME	Team(s): Public
Grouping	Document Type	Default Permissions
Education	ADEX	public
	ASWB Exam	public
	COMLEX-USA	public
	COMVEX	public
	Corporate Training	public
	Diploma	public
	ECFMG Certificate	public
	Exam Scores	public
	FLEX	public
	FPGEC	public
	FPGEE	public
	FSBPT	public
	GED Document	public
	LMCC	public
	MFT National Examination	public
	NBCOT	public
	NBDE	public
	NBDHE	public
	NBME	public
	NBOME	public
	NBPME	public
	NCE	public
	NCLEX	public
	NCMHCE	public
	NEBO	public
	Observational Rotation Form	public
PRAXIS	public	
Residency, Internship, Fellowship Certificates	public	
SPEX	public	
State Exam	public	
Transcripts	public	
USMLE	public	
Grouping	Document Type	Default Permissions
	Annual Health Assessment	public
	Bacillus Calmette-Guerin (BCG)	public
	Chest X-ray	public
	Color Blindness Test	public
	COVID-19 Antibody Test	public
	COVID-19 Test	public
	Covid-19 Vaccine	coordinator
	COVID-19 Vaccine Exemption	public
	Drug Test	public
	Fitness for Duty Form	public
	Health Status Statement	public

Health Info	Hepatitis A	public
	Hepatitis A Titer	public
	Hepatitis B	public
	Hepatitis B Declination Form	coordinator
	Hepatitis B Titer	public
	Hepatitis C Titer	public
	HPV	public
	Immunization Information	public
	Impaired Practitioner Program	public
	Influenza	public
	MMR (Measles, Mumps, and Rubella)	public
	MMR Titer	public
	Physical Exam	public
	Pneumococcal	public
	Polio	public
	PPD Test Results	public
	QuantiFERON-TB Gold (QFT)	public
	Respiratory Fit Test	public
	RSV Vaccine	public
	Shingles Vaccine	public
	T-SPOT.TB (T-Spot)	public
	TB Questionnaire	public
	TD Vaccine	public
	Tdap (Tetanus, Diphtheria, Pertussis)	public
TDAP Titer	public	
Vaccine Declination/Waiver	coordinator	
Varicella	public	
Varicella Titer	public	
Yellow Fever Vaccine	coordinator	
Grouping	Document Type	Default Permissions
Licensure/Certifications	Agreement	public
	Board Certification	public
	Board Letter	public
	Board Sanction	public
	Central Venous Catheter Skills Validation	public
	Certification Verification	public
	CLIA	public
	Collaborative Agreement	public
	Collaborative Relationship	public
	Compliance Learning	public
	DEA	public
	Direct Patient Care Exam	public
	Direct Patient Care Skills Validation	public
	Disciplinary Action	public
	Emergency Preparedness Learning	public
	Facility Accreditation Certificate	public
	Glucometer Skill Validation	public
	Hepatitis B Virus Learning	public
	IMLC Letter of Qualification	public
	Infection Control Certificate	public
	License Issue	public
	Mock Code/Oral Airways Skill Validation	public
	MQSA	public
	National Water Curriculum/Annual Water Certification	public
	Operational Complaint	public
	OSHA Learning	public
	Other Certs (ATLS, BLS, PALS etc)	public
	Patient Care Technician Certification	public
	Patient Complaint	public
	Professional Certification	public
	Registration Certificate	public
	Registration Verification	public
SAMHSA Opioid Treatment Program Certification	public	

	Scope of Practice	coordinator
	State Controlled Substance	public
	State License	public
	Supervision Training Certificate	public
	Temporary Letter to Practice	public
	Water Room Skill Validation	public
	Yellow Fever Certificate	public
Grouping	Document Type	Default Permissions
Malpractice	Administrative Issue	public
	BOP/General Liability Insurance Policy	public
	Certificate of Insurance (COI - Corporation)	public
	Certificate of Insurance (COI - Provider)	public
	Certificate of Insurance (COI)	public
	Claims History	public_facility
	Court Order	public
	Criminal Case	public
	Malpractice Authorization and Release	public
	Malpractice Case Response	public_facility
	Malpractice Court Documen	public
	Malpractice Insurance Application	public_facility
	Malpractice Insurance Cancellation	public
	Malpractice Reimbursement	public
	Malpractice Run Loss Report	coordinator
	NPDB Self-Query	coordinator
	Payor Grievances	public
WI Only 15-Year Run Loss Report	coordinator	
Workers Comp Insurance Policy	public	
Grouping	Document Type	Default Permissions
Miscellaneous	Annual Clinical Policy Acknowledgement	public
	Assignment Documents	public
	Audit	coordinator
	Bank Letter / Voided Check	coordinator_facility
	Board Members	public
	Business License	public
	Business License Application	public
	Case Logs	public_facility
	Certificate of Completion	public
	CIVIS Identity & Access Management System Connection Request (Surregency Invitation)	coordinator
	Conflict of Interest Disclosure	public
	Disclosure of Ownership	public
	Fax Confirmation Page	public
	Fictitious Name Permit	public
	Form I-9	coordinator
	Incorporation	coordinator_facility
	Insurance Inspection	coordinator
	Intake Form	public
	Internal Transfer	public
	IRS Form 147C	coordinator_facility
	IRS Form CP-575	coordinator_facility
	IRS Form W-4	coordinator
	IRS Form W-9	coordinator_facility
	IRS SS-4 Letter	coordinator
	Job Description	public
	Lease Agreement	public
	Letter of Critical Need	coordinator
	Medical Association Dues	public
	Medicare Opt Out Affidavit	coordinator
	Military Service Records	public
	New Hire Acknowledgement	public
	New Hire Learning	public
Other Misc	public	
Power of Attorney	public	

	Prescriptive Medication Guidelines	public
	Professional Disclosure Statement	public
	Professional Practice Committee (PPC) Packet	public
	Professional Reference Questionnaire	coordinator
	Protocols	coordinator
	Provider Publication	coordinator
	Provider Rights	public
	Reference Materials	coordinator
	Risk Disclosures	coordinator_facility
	Risk Documentation	coordinator_facility
	Risk Narrative	coordinator_facility
	Risk Review	coordinator_facility
	Staff Handbook	public
	Statement of Information	public
	Supervision Professional Disclosure Statement	public
	Suspension Letter	public
	Tax Documents	public_facility
	Tracking Screenshot	public
Grouping	Document Type	Default Permissions
Personal Info	Account Management Form	coordinator
	Auto Insurance	public
	Auto Registration	public
	Background Check	public
	Background Check Authorization	coordinator
	Biography	coordinator
	Birth Certificate	public
	Citizenship	public
	Clearance	coordinator
	Color Photo	public
	Contact Information	coordinator
	Curriculum Vitae (CV)	public
	DD214	public
	DD215	public
	Digital Signature	public
	Divorce Certificate	public
	Driver License Copy	public
	HR Profile	coordinator
	Level 2 Background Check	coordinator
	Level 2 Compliance Affidavit	coordinator
	Marriage License	coordinator
	Motor Vehicle Report	coordinator
	Name Change Certificate	public
	NPI Authorization	coordinator
	OSHA	coordinator
	Passport Copy	public
	Permanent Residency Card	public
	Previous Addresses	public
	Provider Profile	public
	Release of Information	coordinator
	Search Engine Result	coordinator
	Sex Offender Search	coordinator
Signature Authorization	coordinator	
Skills Checklist	coordinator	
Social Security Card	public	
Social Security Master Death File (SSMDF) Results	public	
Work Permit	public	
Work Visa	public	
Grouping	Document Type	Default Permissions
	Annual Clinical Skill Evaluation	public
	Employee Evaluation	coordinator
	Knowledge Assessment	public

Professional/Clinical Evaluations	Mentor Review	coordinator
	Onboarding Review	coordinator
	OPPE/FPPE	coordinator
	Peer Review	coordinator
	Professional Evaluation	coordinator
	Reference Letters	public_facility
Grouping	Document Type	Default Permissions
Profile Summaries	All License Types Summary	coordinator
	DEA Licenses Summary	
	Education Training Summary	
	Facility Affiliations Summary	
	Medical Malpractice Summary	
	Practice/Employer Summary	
	Provider Profile Summary	public
	State Controlled Substance Licenses Summary	
	State Licenses Summary	
	Work History Summary	
Grouping	Document Type	Default Permissions
Verifications	805 Report	coordinator
	AMA Profile	coordinator_facility
	AOIA Verification	coordinator_facility
	Board Certification Verification	public_facility
	CMS Preclusion List	coordinator
	Credentialing Verification	coordinator_facility
	DATA Waiver Approval Letter	public
	DEA Verification	public
	ECFMG Verification	public
	Education Verification	coordinator_facility
	Employment Verification	coordinator_facility
	Facility Affiliation Verification	coordinator_facility
	FCVS Profile	public
	FPGEC Verification	public
	FSMB Verification	coordinator_facility
	ID Verification	public_facility
	Medi-Cal Verification	coordinator
	Medicare Opt Out Verification	coordinator
	NPDB Verification	coordinator_facility
	NPI Verification	public_facility
	OIG Verification	public
	OMIG Verification	coordinator
	SAM Verification	public
	State Controlled Substance Verification	public
	State Exclusions	coordinator_facility
	State License Verification	public_facility
	State Medicaid Exclusion	coordinator
	Training Verification	coordinator_facility
	USPS Verification	public