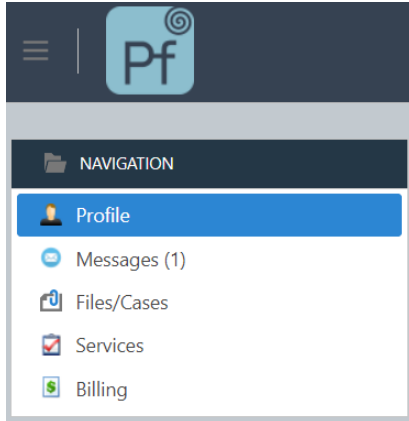


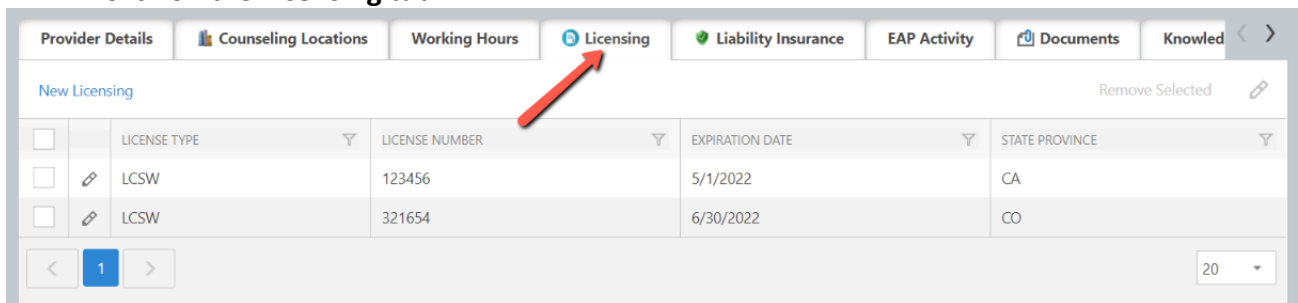
Provider Licensing and Liability Insurance



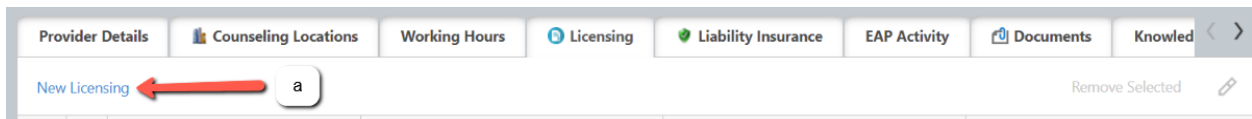
After signing in, click on **Profile** in the Navigation window. Here you will see your Details, Counseling Locations, Licensing, Liability Insurance, Documents, and Knowledge Base.

Licensing

1. Click on the **Licensing** tab.



2. To add a new license:
 - a. Click on **New Licensing**.



- b. Enter your **License Number**.
- c. Select your **License Type** from the drop-down list.
- d. Enter the **Expiration Date**. Click on the drop-down list to access the calendar option or type the date directly in the field. The format is mm/dd/yyyy.

Licensing f → **OK** Cancel

LICENSE NUMBER:* b

LICENSE TYPE: c

EXPIRATION DATE:* d

STATE PROVINCE: e

- e. Enter the state province where you are licensed. Click on the search option to bring up a listing of States/Provinces.
 - i. Type in the **State Province**.
 - ii. Click **Search**.
 - iii. Click on the State Province in the results to select.
 - iv. Click **OK** to confirm your selection and return to the previous page.

State Province i ii

AZ iii

iv → **OK** Cancel

- f. Click **OK** to save and return to the previous page.
- g. To edit an existing license entry, click the **EDIT** symbol.

Provider Details	Counseling Locations	Working Hours	Licensing	Liability Insurance	EAP Activity	Documents	Knowledge
New Licensing Remove Selected 							
<input type="checkbox"/>		LICENSE TYPE	LICENSE NUMBER	EXPIRATION DATE	STATE PROVINCE		
<input type="checkbox"/>		LCSW	123456	5/1/2022	CA		
<input type="checkbox"/>		LCSW	321654	6/30/2022	CO		
<input type="checkbox"/>		LCSW	987456	1/1/2023	AZ		

- h. Update the information below. Click **OK** to confirm your changes and return to the previous page.

LICENSE NUMBER:* <input type="text" value="123456"/>	EXPIRATION DATE:* <input type="text" value="5/1/2022"/>
LICENSE TYPE: <input type="text" value="LCSW"/>	STATE PROVINCE: <input type="text" value="CA"/>

Liability Insurance

1. Click on the **Liability Insurance** tab.

	INSURANCE CARRIER	POLICY NUMBER	ADDRESS	EFFECTIVE DATE	EXPIRATION DATE
<input type="checkbox"/>	Allstate Insurance Company	654321		4/1/2021	4/1/2023
<input type="checkbox"/>	Farmers Insurance Company	987654			5/31/2022

2. To add a new license:
 - a. Click on **New Liability Insurance**.

- b. Enter your **Policy Number**.
- c. Enter your **Single Occurrence** amount.
- d. Enter the **Effective Date**. Click on the drop-down list to access the calendar option or type the date directly in the field. The format is mm/dd/yyyy.
- e. Enter the **Expiration Date**. Click on the drop-down list to access the calendar option or type the date directly in the field. The format is mm/dd/yyyy.
- f. Select your **Insurance Carrier** from the drop-down. list
- g. Enter the **Address** of your insurance carrier.
- h. Click **OK** to save and return to th previous page.

Liability Insurance h

Liability Insurance

POLICY NUMBER: 369852 b

EFFECTIVE DATE: 7/1/2021 d

Insurance Carrier

INSURANCE CARRIER: AIG Insurance Company f

ADDRESS: 2 Main Street, Toronto, ON, Canada g

SINGLE OCCURRENCE: \$1,000,000.00 c

EXPIRATION DATE: 6/30/2022 e

i. To edit an existing liability insurance entry, click the **EDIT** symbol.

Provider Details Counseling Locations Working Hours Licensing Liability Insurance EAP Activity Documents Knowledge

New Liability Insurance Remove Selected

<input type="checkbox"/>	<input type="checkbox"/>	INSURANCE CARRIER	POLICY NUMBER	ADDRESS	EFFECTIVE DATE	EXPIRATION DATE
<input type="checkbox"/>	<input type="checkbox"/>	Allstate Insurance Company i	654321		4/1/2021	4/1/2023
<input type="checkbox"/>	<input type="checkbox"/>	Farmers Insurance Company	987654			5/31/2022
<input type="checkbox"/>	<input type="checkbox"/>	AIG Insurance Company	369852	2 Main Street, Toronto, ON, Canada	7/1/2021	6/30/2022

j. Update the information below. Click **OK** to confirm your changes and return to the previous page.

Liability Insurance j

Liability Insurance

POLICY NUMBER: 369852 b

EFFECTIVE DATE: 7/1/2021 d

Insurance Carrier

INSURANCE CARRIER: AIG Insurance Company f

ADDRESS: 2 Main Street, Toronto, ON, Canada g

SINGLE OCCURRENCE: \$1,000,000.00 c

EXPIRATION DATE: 6/30/2022 e

