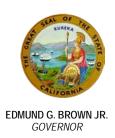


# State of California—Health and Human Services Agency Department of Health Care Services



DATE: February 10, 2017

MHSUDS INFORMATION NOTICE NO.: 17-001

TO: COUNTY BEHAVIORAL HEALTH DIRECTORS

**COUNTY DRUG & ALCOHOL ADMINISTRATORS** 

COUNTY BEHAVIORAL HEALTH DIRECTORS ASSOCIATION OF

**CALIFORNIA** 

CALIFORNIA COUNCIL OF COMMUNITY BEHAVIORAL HEALTH

**AGENCIES** 

CALIFORNIA ASSOCIATION OF ALCOHOL & DRUG PROGRAM

EXECUTIVES, INC.

SUBJECT: REVISED ENCLOSURE D FORMS: NON-DRUG MEDI-CAL NEW AND

EXISTING PROVIDER INFORMATION FOR INPUT INTO MASTER

PROVIDER FILE (MPF) DATABASE

## **PURPOSE**

The purpose of this Information Notice is to direct Substance Use County Administrators to use the newly re-designed "Enclosure D" forms. The new forms have been renamed the Non-Drug Medi-Cal New Provider Information Form and the Non-Drug Medi-Cal Existing Provider Information Update/Change Form.

## **BACKGROUND**

Effective August 1, 2016, the management of the MPF database, also known as the Provider Registry Information Management Enterprise (PRIMe) was moved to the Department of Health Care Services (DHCS) Statewide Planning Unit in the Program Support and Grants Management Branch. It was determined that in order to reduce processing times, and to provide clarity to the counties requesting additions and/or changes to provider records in the database, a redesign of the Enclosure D: Master Provider File Information Form was necessary.

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## **POLICY**

On February 13, 2017, DHCS will begin accepting the new forms. Effective March 1, 2017, DHCS will no longer accept the previous forms entitled "Enclosure D MPF Provider Information." The new forms are posted to the new MPF Management Team web page located at: https://www.dhcs.ca.gov/provgovpart/Pages/Master-Provider-File.aspx

## **NEW PROVIDER FORM**

The **Non-Drug Medi-Cal New Provider Information Form** is to be used to create a new provider record in the PRIMe database. A Provider Identification Number (also known as CalOMS data reporting number) will be issued to the new provider when the request is processed and sent back to the requestor. This number is for reporting data outcomes for beneficiaries receiving substance use disorder treatment and/or prevention services covered under the Substance Abuse Prevention & Treatment Block Grant. In addition, the **Non-Drug Medi-Cal New Provider Information Form** can be used to obtain a Provider ID number for out-of-county referrals (also known as Special Services Contract numbers).

## **EXISTING PROVIDER FORM**

The **Non-Drug Medi-Cal Existing Provider Information Form** can be used to amend an existing provider record already in the database. This includes changing a provider's contract status, adding and/or deleting treatment and prevention codes, and all identifying information.

## **TECHNICAL GUIDANCE**

The biggest change to the process will be transitioning to a user-friendly PDF format that guides the types of changes being requested and enhances the opportunity for entering complete and accurate information in the database. In order to get the most out of the interactive forms, stakeholders who do not have installed on their computers will need to download the *free* Adobe Acrobat Reader software, available for both Mac or PC computers. The Adobe software may be downloaded here: <a href="https://get.adobe.com/reader/">https://get.adobe.com/reader/</a>.

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Prior to submitting a form to the MPF Management Team, requestors are encouraged to read the detailed instructions provided. Forms not submitted in the proper format will be returned without being reviewed in order to expedite the processing time for all those making requests.

If you have any questions or concerns, you may contact the MPF Management Team at (916) 322-3686.

Sincerely,

Original signed by

Karen Baylor, Ph.D., LMFT, Deputy Director Mental Health & Substance Use Disorder Services