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Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

**Targeted Case Management (TCM) Local Governmental Agency (LGA)
National Provider Identifier (NPI) Number Submission Form**

Submit Forms To:

Department of Health Care Services
Local Governmental Financing Division
Targeted Case Management Unit
P.O Box 997436, MS 4603
Sacramento, CA 95899 - 7436
or e-mail at DHCS-TCM@dhcs.ca.gov

Once the form is complete, sign in **blue** ink, and submit it to the address provided above and submit an electronic copy to your designated TCM Analyst.

Note: The NPI is assigned to the organization claiming targeted case management to the Department of Health Care Services (DHCS), such as the LGA or LGA-delegated county agency.

LGA: **LGA NPI Number:**

LGA Coordinator Name:

Phone: **E-Mail:**

Address:

LGA Coordinator (Sign): _____

Phone: _____

LGA Coordinator (Print): _____

Date: _____