

Revised Drug Medi-Cal Application and Medi-Cal Supplemental Changes Form

In accordance with the authority granted to the Director of the Department of Health Care Services (DHCS) by *Welfare and Institutions Code* (W&I Code), Section 14043.75(b), the Director has established the revised application form requirements, set forth below, that must be followed by providers who apply to the Medi-Cal program to be reimbursed. These requirements implement and make specific W&I Code, Sections 14043.15 and 14043.26 and as such have the full force and effect of law.

Beginning **October 29, 2016**, the applicant or provider, when required pursuant to California Code of Regulations (CCR), Title 22, Sections 51000.30, 51000.31, 51000.32, and/or 51000.40, shall complete and submit, as applicable, the following revised forms:

- *Drug Medi-Cal Substance Use Disorder Clinic Application* (DHCS 6001) that has a printed revision date of 10/16, for applicants or providers who are substance use disorder clinics.
- *Medi-Cal Supplemental Changes* (DHCS 6209) form that has a printed revision date of 10/16, for providers, including small groups intending to add, delete or change previously submitted provider information included in CCR, Title 22, Section 51000.40(b).

The changes made to the *Drug Medi-Cal Substance Use Disorder Clinic Application* include:

- "School site" has been added as an example of a type of location.
- Heroin Detoxification Program has been added as a service modality.
- A copy of the driver's license or state-issued identification card is requested for all individuals listed in Section Four as a Substance Use Disorder Treatment Professional, Licensed Substance Use Disorder Treatment Professional or Substance Use Disorder Non-Physician Medical Practitioner.
- The requirement to submit counselor certification/registration during the initial submission of the application has been removed. DHCS reserves the right to request this documentation as necessary to verify and approve an application.
- Sections have been added to allow providers to clearly identify the Clinic Director and Executive Director, including legal name and telephone number.
- Non-substantial formatting errors were fixed throughout the application and minor edits were made to the instructions to provide clarity.

The changes made to the *Medi-Cal Supplemental Changes* form include:

- Instructions have been modified to clarify that Sections III and IV of the *Medi-Cal Disclosure Statement* (DHCS 6207) are required for all new owners, managing employees or control interests.
- Social Security Number and date of birth are required for owners, managing employees or those with control interest, pursuant to 42 Code of Federal Regulations, Section 455.104(b)(1)(ii).
- The Substance Use Disorder Medical Director question has been reformatted to identify the business address the change applies to and to allow the adding and deleting of Medical Directors.
- Substance Use Disorder Non-Physician Medical Practitioners can now be added or deleted using this form.
- Heroin Detoxification Program has been added as a service modality.

- Facility-based providers can now use this form to add or delete licensed health care facilities where they are, or were, providing services.
- Non-substantial formatting errors were fixed throughout the form and minor edits were made to the instructions to provide clarity.

The specific forms to be submitted are determined by provider type. The updated forms are available on the “Provider Enrollment Application Forms” area on the [Provider Enrollment Division](#) page of the DHCS website and on the “Application Forms by Form Name and Number” section of the [Provider Enrollment](#) page of the Medi-Cal website.

Failure to submit the updated *Drug Medi-Cal Substance Use Disorder Clinic Application* or *Medi-Cal Supplemental Changes* form may result in the denial of the application or the return of the supplemental form.