

Medi-Cal Requirement for the Drug Medi-Cal Provider Agreement

In accordance with 42 Code of Federal Regulations (CFR) Section 455.105(a), and Welfare and Institutions (W&I) Code Sections 14043.2 and 14043.26, in order to be enrolled as a provider or for enrollment as a provider to continue, an applicant or provider is required to sign a provider agreement and shall disclose all information as required in federal Medicaid regulations and any other information required by the department.

Based upon the authority granted to the Department of Health Care Services (DHCS) director in the W&I Code, Section 14043.75(b), the director has adopted the following form and established procedures and criteria governing their use. These requirements are set forth in W&I Code section 14043.2, and are regulations implementing W&I Code Section 14043.26(a), requiring any newly enrolling or certifying Drug Medi-Cal Clinic (DMC) applicant, enrollment at a new location or a change in location, or any DMC provider already certified for participation in Medi-Cal, and any revalidating DMC provider to submit a fully executed DMC Provider Agreement (DHCS 6009). This bulletin provides information on the requirements necessary to comply with W&I Code section 14043.2, and makes specific the requirements of W&I Code Section 14043.26(a), and has the full force and effect of law effective October 24, 2014.

Background and overview of the new requirement

Assembly Bill 106 (Chapter 32, Statutes of 2011) transferred California's DMC program from the Department of Alcohol and Drug Programs (ADP) to the DHCS effective July 1, 2012. In addition, Senate Bill 1014 (Chapter 36, Statutes of 2012) added Article 3.2 Drug Medi-Cal Treatment Program which charges DHCS to implement DMC services.

Federal Medicaid Regulations 42 CFR 455.105(a) provides that the State Medicaid agency must enter into an agreement with each provider under which the provider agrees to furnish to it, or to the Secretary on request, information related to business transactions in accordance with 42 CFR 455.405(b).

W&I Code section 14043.26 requires that an applicant or provider "shall submit a complete application package for enrollment, continuing enrollment, or enrollment at a new location or change in location." An "application or application package" includes a provider agreement. (W&I Code § 14043.1(c).)

W&I Code 14043.2(a) provides that in order to be enrolled as a provider, or for enrollment as a provider to continue, an applicant or provider may be required to sign a provider agreement and shall disclose all information as required in federal Medicaid regulations and any other information required by the department. The director may designate the form of a provider agreement by provider type.

Requirements for newly certifying or enrolling, enrollment at a new location or a change in location, and for revalidating DMC providers

Effective October 24, 2014, a DMC Provider Agreement (DHCS 6009) is required each time an application package is submitted to DHCS for new certification or enrollment, enrollment at a new location or a change of location and revalidation in the DMC program. A DMC provider agreement is required for each separate business location where an applicant or provider is certified to participate in Medi-Cal.

All applications for new DMC certification or enrollment or for revalidation will not be approved until a fully executed provider agreement is submitted to DHCS. Failure to submit the DMC provider agreement will result in denial of the application and may result in termination as a DMC provider.

Existing DMC Provider Requirement

In order to be in compliance with federal and state requirements, a provider agreement is required for any DMC provider that is currently certified to participate in the Medi-Cal program. This includes all DMC providers that submitted an application for continued certification or recertification. Currently certified providers will have (90) days from the date of DHCS's request to submit a fully executed DMC Provider Agreement to the department. Failure to submit the DMC provider agreement timely will result in temporary suspension, which will result in temporary deactivation as a DMC provider.

PROCEED TO FILL OUT THE REQUIRED DMC PROVIDER AGREEMENT (DHCS 6009).

[Drug Medi-Cal Provider Agreement \(DHCS 6009\)](#)