

Provider Enrollment Checklist for Provider Type 17

Special Clinics - Specialty 195, Community Health Clinic, State Health Division

The following is a list of required enrollment documents for this provider type. A copy of each document listed below must be included with your Provider Enrollment or Revalidation Packet.

If you have any questions, please contact the Provider Enrollment Unit at (877) 638-3472 from 8:00 a.m. to 5:00 p.m. Monday through Friday.

Documentation showing Taxpayer Identification Number (SS-4 or CP575 or W-9)

☐ Must be a county facility operated by the Division of Public and Behavioral Health

You do not need to submit this checklist with your enrollment or revalidation documents.