



## Provider Enrollment Checklist for Provider Type 47

### Indian Health Programs and Tribal Clinics

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.

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)

#### Tribal Federally Qualified Health Center (FQHC) Enrollment

For Tribal 638 clinics that want to change their status to Tribal FQHC, the following documents would need to be submitted:

- A letter to the Division of Health Care Financing and Policy (DHCFP) on Tribal or Tribal Clinic letterhead that states the Tribal 638 clinic's intent to enroll as a Tribal FQHC
- An application to amend the name of the clinic to include Tribal FQHC

To enroll as a provider type 47, the Indian Health Program / Tribal Clinic must operate under the Indian Self-Determination Act and have a 638 contract or compact with Indian Health Service (IHS).

*You do not need to submit this checklist with your enrollment/revalidation.*