SAN FRANCISCO HEALTH PLAN™

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MEMO

To	All Providers
From	SFHP Compliance and Regulatory Affairs
Regarding	**DHCS Provider Enrollment Emergency Waiver Bulletin**

BACKGROUND:
The California Department of Health Care Services (DHCS) is establishing Medi-Cal provider enrollment requirements and procedures for providers seeking enrollment in order to assist Medi-Cal beneficiaries with the national COVID-19 public health emergency. Effective March 23, 2020 with a retroactive date of March 1, 2020, providers may apply for enrollment in the fee-for-service Medi-Cal program using the streamlined enrollment procedures outlined below.

BULLETIN DESCRIPTION:
During the approved Section 1135 waiver period, DHCS will streamline enrollment of providers. Providers who enroll through this method – including those located in another state or licensed to only practice in another state – will not be subject to the following requirements:

- Submission of an application fee;
- Designation of screening levels; and
- Submission of a completed Medi-Cal Provider e-Form Application

Providers who successfully enroll using these streamlined procedures will be granted enrollment for 60 days, retroactive to March 1, 2020. The enrollment period may be extended in 60 day increments, in accordance with the Section 1135 waiver. Those who wish to enroll following the completion of the 60 day emergency enrollment period and conclusion of the Section 1135 waiver will be required to submit a complete application package for their provider type and meet all program requirements.

A provider that seeks to enroll to treat Medi-Cal beneficiaries under the Section 1135 is required to meet the following modified enrollment requirements and procedures:

- The provider treated a Medi-Cal beneficiary who has been affected by the current COVID-19 public health emergency;
- Enroll by submitting a Crossover Only application using the Provider Application and Validation for Enrollment (PAVE);
- Submit a signed attestation that they have provided services to a Medi-Cal beneficiary affected by the public health emergency; (if not, DHCS will treat the application as a request to register for crossover-only payments); and
- Obtain DHCS approval for temporary enrollment.

REFERENCE:
- DHCS Requirements and Procedures for Emergency Medi-Cal Provider Enrollment: https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-other/provappsenroll/PED_COVID-19_30339_12.pdf