Requirements for Provider Type 11 – Mental Health and Substance Abuse Services: <u>Social Worker Specialties</u>

Specialty Code

Please choose from the following for specialty and code:

- 116 Licensed Clinical Social Worker
- 117 Licensed Social Worker

Provider Eligibility Program (PEP)

Please choose the appropriate PEP(s) from the following:

- Fee-for-Service
- Enrollment Not Paid (ENP)
- Pennsylvania Department of Aging Waiver

Required Documents for an Individual Provider Type 11:

The following documents and supporting information are required by the Bureau of Fee-For-Service Programs to enroll as a provider (please ensure documents are legible):

- Completed application for the enrollment of an Individual Practitioner application must include:
 - Signed Provider Agreement with original signature of enrolling Provider; and
 - o Completed Ownership or Control Interest Disclosure form
- Copy of license issued by the Department of State
- Current copy of Board Certification, if applicable
- If Provider is not a United States citizen, submit copy of Permanent Resident Card or Form I-797 showing authorization to work in the United States
- If application is for an Out-of-State Provider, submit proof of current home state Medicaid participation

Required Documents for a Provider Type 11 Group:

- Completed application for the enrollment of a Group—application must include:
 - Signed Provider Agreement with original signature of an authorized representative; and
 - Completed Ownership or Control Interest Disclosure form
- Documentation generated by the IRS showing both the Provider's legal name and FEIN—documentation must come from the IRS; this Department does not accept W-9s
- If Group is tax-exempt, submit IRS 501 (c)(3) letter confirming this status
- If Group operates under a fictitious name, submit copy of D/B/A filing with Department of State Corporation Bureau
- Copy of Corporation papers issued by Department of State Corporation Bureau or business partnership agreement
- If application is for an Out-of-State Provider, submit proof of current home state Medicaid participation

Licensed Social Workers and Licensed Clinical Social Workers (11-116/117) are encouraged to apply online via our Electronic Provider Portal at https://provider.enrollment.dpw.state.pa.us . If circumstances do not allow online submission, send application and documents to:

DHS Provider Enrollment PO Box 8045 Harrisburg, PA 17105-8045 Fax: (717)265-8284

E-mail: RA-ProvApp@pa.gov