

## OVERVIEW AND INSTRUCTIONS FOR NEW CERTIFICATIONS

The approved Provider File Adjustment Request (PFAR) will initiate the process of Medi-Cal Certification of a new Provider and will require a Medi-Cal Certification onsite visit by the State (Directly Operated Provider) or LACDMH Certification Liaison (Contract Provider). Please note that Medi-Cal Certification cannot be coordinated prematurely without an approved PFAR. Once the Medi-Cal Certification Team receives the PFAR, the following items will be requested and reviewed:

- 1) Current Fire Clearance (dated within one year of the scheduled onsite review by the Certification Liaison)
  - Please note that Specialty Mental Health Services cannot be provided without a valid and current Fire Clearance; please refer to Bulletin 19-02 – Fire Clearance Requirement
- 2) Current Head of Service (HOS) professional/clinical license
- 3) Short-Doyle Application Form (*applicable to Directly Operated Providers only*)

Currently, we maintain electronic Provider Files for Medi-Cal Certification. Please obtain and review the most up to date **Medi-Cal Certification Checklist** and **Medi-Cal Certification Documents Submission Guideline** and ensure the Certification items are received per the checklist and submission guideline instructions.

The **Medi-Cal Certification Documents Submission Guideline** provides guidance on how to save and email Certification documents utilizing the standardized naming convention for the electronic Provider Files. It also includes a *Document Submission Checklist* on page 3 to help prepare and organize Certification documents for the Certification Liaison to review.

### Review of Agency Specific Policies and Procedures

- Please refer to the Medi-Cal Certification Checklist, page 3
  - For Category 4B – We do not need the printouts for every employee’s Sanction Reports. However, we do need to see that this Provider has a system in place to track all employees and to ensure that all employees are being screened monthly and all vendors on an annual basis. Please demonstrate proof of this by providing the most recent monthly and annual sanction screenings (*please refer to LACDMH Policy 106.04*).
- Staff Roster and Credentials
  - Please ensure to read each sub-category carefully for the required credentials for each staff category
- For Providers that are required to be Certified *before* providing services, the Provider is to demonstrate that they have the minimum staffing pattern required for the Mode of Services they are requesting to be Certified

### Onsite Physical Plant Inspection

- The Certification Liaison will conduct a walkthrough of the site where Specialty Mental Health Services are rendered
- Please ensure to post Beneficiary guidelines and informing materials in the lobby area (please refer to the Medi-Cal Certification Checklist page 6 for Contracted Providers and page 7 for Directly Operated Providers)
- At the time of the onsite visit, the Provider is to show evidence of readiness to provide Specialty Mental Health Services through compliance to the Medi-Cal Certification requirements, as determined by the Certification Liaison