



Overview and Instructions for New Medi-Cal Certifications

Once a **Provider File Adjustment Request (PFAR)** is approved, the Medi-Cal Certification process for a new provider may begin. This includes an onsite review, conducted either by the **State** (for **Directly Operated Providers**) or the **LACDMH Certification Liaison** (for **Contract Providers**).

Note: Certification activities **cannot** begin until PFAR approval is granted and received by the Certification Team.

Required Documentation (Upon PFAR Approval)

1. **Current Fire Clearance**
 - Must be dated **within one year** of the scheduled onsite review
 - Required **prior to delivering** Specialty Mental Health Services
 - See **Bulletin 19-02 – Fire Clearance Requirement** for details
2. **Head of Service (HOS) Professional/Clinical License**
3. **Short-Doyle Application Form**
(Required for Directly Operated Providers only)
4. **Program Description**
(Required for Directly Operated Providers only)

Electronic Submission Guidelines

All certification files must now be submitted **electronically**. Be sure to use the **most current versions** of all documents.

- **Medi-Cal Certification Checklist**, which includes:
 - File naming conventions
 - **Document Submission Checklist** (see **page 5**) to help organize your files

Policy & Staffing Requirements

Refer to **page 3** of the Certification Checklist for detailed policy documentation requirements.

For Category 4B Providers:

- Submit the provider's policy showing compliance with **DMH Policy 106.04**, specifically around the screening of individuals and entities
(See *Section VI – Attachments: Federal, State, and County Sanction Lists*)
- Provide documentation verifying a **system is in place** to support this process
- Include the **Table of Contents** from the Employee Manual
- Submit a **staff roster** listing names and credentials
- Ensure **minimum staffing levels** are met for the requested Mode of Service

Onsite Facility Inspection

The **Certification Liaison** will conduct a walkthrough of the facility to assess readiness and compliance.

Please ensure the following:

- **Beneficiary informing materials** are clearly posted in the lobby
(See *page 8 of the DO or LE Certification Checklist*)
- The facility is **fully prepared to deliver services** in line with Medi-Cal Certification standards