

Medi-Cal Promoting Interoperability Program-
 California Technical Assistance Program Practice Representative
 Technical Assistance Agreement Addendum

 Name of Practice Representative

 Name of Practice Group/Clinic

 NPI of Practice Group/Clinic

 Name of Technical Assistance Representative

 Name of Technical Assistance Organization

This is an addendum to the Practice Representative Technical Assistance Agreement (PRTAA) signed on _____. The eligible professionals (EPs) listed below or on the attached EP Roster (**) are being added to the practice for the purpose of receiving services from the California Technical Assistance Program. These EPs have been fully informed of technical assistance services that have or will be supplied to them. Each EP identified will complete and sign an Eligible Professional Technical Assistance Acknowledgement within one year of the signing of this PRTAA Addendum. Failure to submit a complete and signed Eligible Professional Technical Assistance Acknowledgement by this date will result in loss of any payments made to the technical assistance organization for services to this EP.

 Practice Representative Signature Date

 Technical Assistance Representative Signature Date

EP Name(s)	EP NPI	EP License #	EP Type (i.e. Physician, NP, PA, etc.)

_____ **Additional Pages Attached**

**Practices may create their own roster, ensuring the above four categories are included.

