

**SPECIALTY MENTAL HEALTH SERVICES (SMHS)
PROVIDER ENROLLMENT
FREQUENTLY ASKED QUESTIONS (FAQ)
February 4, 2021**

Licensed Individual Enrollment Questions

1. Who can enroll as a Fee-For- Service (FFS) Medi-Cal provider?

A comprehensive list of providers that can enroll in the FFS Medi-Cal program can be found on the [Provider Enrollment Division \(PED\) website](#). A list of SMHS licensed individuals and entities that are required to enroll can also be found at the end of this FAQ.

2. Are registered nurses, licensed vocational nurses, and certified nurse specialists required to enroll?

No, registered nurses, licensed vocational nurses and certified nurse specialists are not required or eligible to enroll.

3. Are psychiatrists and licensed professional clinical counselors required to enroll?

Yes, psychiatrists and licensed professional clinical counselors are required to enroll.

4. If an entity is enrolled as a Specialty Mental Health Managed Care Plan, will licensed individuals who provide services on behalf of that entity need to enroll as individual FFS providers in PAVE?

Yes, if the licensed individuals are on the comprehensive list of providers that can enroll in the FFS Medi-Cal program on the [PED website](#), then they need to enroll. Managed care plans do not enroll.

5. Will it be the provider's responsibility to re-enroll under their new legal entity?

No, when a provider is enrolled through PED, their enrollment can be confirmed through the [California Health and Human Services Open Data Portal](#). Providers who are licensed individuals will not be required to re-enroll if they move to another legal entity or mental health plan. The Provider File Update (PFU) form submitted by the county includes a section to report all licensed individuals providing services for each location.

6. If the entity providing services is enrolled in FFS Medi-Cal would the licensed individuals who work at the entity still have to enroll as individual providers?

All licensed individuals that have a FFS enrollment pathway are required to enroll. Enrolling as an Ordering, Referring and Prescribing (ORP) provider will fulfill the enrollment requirement. The ORP enrollment meets the minimum federal requirements for Medicaid enrollment. Additionally, ORP providers are not required to meet Medi-Cal's established place of business requirements. Therefore, enrolling as an ORP provider allows licensed individuals to meet the enrollment requirement without submitting a complete billing application.

7. For county employed providers, does the provider have to enroll or is the county able to enroll their own providers?

The county can assist with the application process through PED. The provider is responsible for their enrollment including signing their application and attesting that all information provided in the application is true and accurate.

8. Are individual providers that work for county operated facilities or for a county mental health plan required to enroll via PAVE?

Yes, if they are included in the comprehensive list of providers that can enroll in the FFS Medi-Cal program on the [PED website](#) and are providing services to SMHS beneficiaries, then they are required to enroll. There is also a list of individuals and entity providers that are **not** required to enroll at the end of this FAQ.

9. If PED approves a rendering provider's SUDTP/SUDMD application, is any further PAVE application/enrollment needed in order to meet the enrollment requirement?

No, an enrolled SUDTP/SUDMD provider is in compliance with the enrollment requirement.

10. Do all licensed LPHAs use the ORP application or only prescribers?

Most licensed individuals will enroll as ORP Providers. The ORP enrollment meets the minimum federal requirements for Medicaid enrollment. Additionally, ORP providers are not required to meet Medi-Cal's established place of business requirements. Therefore, enrolling as an ORP provider allows licensed individuals to meet the enrollment requirement without submitting a complete billing application. Please see the [Provider Types Enclosure](#).

11. Does the malpractice insurance need to list all rendering provider names or is it just the Provider/Clinic/Facility as a whole?

Any individual licensed or certified pursuant to Division 2 (commencing with Section 500) of the Business and Professions Code, the Osteopathic Initiative Act, or the Chiropractic Initiative Act, must provide proof of Professional Liability Insurance coverage. However, please note if a licensed provider is enrolling as an ORP provider they are not required to provide proof of professional liability insurance in the application.

12. Does a County need to enroll all staff members with an NPI number into the PAVE system? The county contracts with a community organization for their psychiatrist, which is the provider. Therefore, does the community organization complete the PAVE enrollment for the provider?

Staff members that are included in the comprehensive list of providers that can enroll in the FFS Medi-Cal program on the [PED website](#) and are providing services to SMHS beneficiaries are required to enroll. The ORP application meets the minimum enrollment requirements pursuant to state and federal law. As such, PED recommends using the ORP application in order to meet the enrollment requirement. The community organization can assist with the application process through PED. The provider is responsible for their enrollment including signing their application and attesting that all information provided in the application is true and accurate.

13. Can enrolled Drug Medi-Cal Clinic (DMC) providers enroll into SMHS under the provider's current NPI number? Does the provider need to create a new provider for Mental Health Services using the same NPI number?

DMC providers that are enrolled in FFS Medi-Cal meet the enrollment requirement. They do not need to submit a separate SMHS enrollment application. Medi-Cal enrollment is location specific so each location providing DMC services must be enrolled to meet the requirement.

The only entities that will enroll through PAVE are County Owned-and-Operated Exempt from Licensure Clinics, Exempt from Licensure Clinics intending to become Federally Qualified Health Centers and licensed professionals organized as provider groups. If incorporated, provider groups must be organized as professional corporations per [California Corporations Code Section 13401\(b\)](#). If you are one of these entity types, you would chose the correct entity. If you are not then you will not enroll through PAVE.

14. Are the contracted doctors/providers responsible to enroll themselves using their employer's information? These would be providers working for another company that are providing services at the MHP's under that company's contract.

Each individual is responsible for ensuring they are enrolled under their own name and using their own type 1 NPI. PED does not limit who can assist with the application process. However, the provider is responsible for their enrollment including signing their application and attesting that all information provided in the application is true and accurate.

15. If a psychiatrist provider is used through an administrative services organization, does the provider enroll that individual (plus all the other agencies that use the same psychiatrist to enroll) or does the administrative services organization need to enroll the provider as a contractor?

Individual licensed providers will only enroll in the Medi-Cal program once. When a provider enrolls as an ORP provider they can report the locations where they provide services on the PAVE application. Once a provider is enrolled no additional action is required.

16. Are telehealth doctors who are contracted through locum tenens but listed on the provider's NACT under county site providers required to enroll?

Locum tenens physicians substituting for actively-enrolled Medi-Cal physicians are not required to be enrolled as Medi-Cal providers when providing locum tenens services to Medi-Cal beneficiaries. For more information related to locum tenens see the [Miscellaneous FAQs](#).

Entity Provider Enrollment Questions

17. Are Short-Term Residential Therapeutic Programs (STRTP), Children's Crisis Residential Programs (CCRP) required to enroll?

No, STRTP's and CCRP's are not required or eligible to enroll. However, the licensed practitioners providing services for these entities may be required to enroll.

18. Are Psychiatric Health Facilities (PHF) required to enroll?

Psychiatric Health Facilities are not a provider type required or eligible to enroll. However, Psychiatric **Hospitals** are licensed and certified for Medi-Cal enrollment through California Department of Public Health ([CDPH](#)).

19. As an organization are we able to enroll our providers under our organization?

Yes, if the organization is a provider type eligible to enroll in FFS Medi-Cal. If it is a plan, then no. Mental Health plans are not eligible to enroll in FFS Medi-Cal.

20. For providers already enrolled at the county level with subcontractors, does the county need to enroll through PAVE? Are county owned and operated Mental Health Plans required to enroll?

Counties do not need to enroll legal entities that are not themselves providers and instead only contract with providers. These legal entities do not have a FFS enrollment pathway. Only the licensed practitioners or the entities included in the comprehensive list of providers that can enroll in the FFS Medi-Cal program on the [PED website](#) are required and eligible to enroll. Furthermore, the plans themselves are not required to enroll. However, the licensed individuals of the entities providing services are required to enroll.

21. Are county operated programs required to enroll?

If they are included on the list of provider types on the PED website and they provide services to SMHS beneficiaries, then they are required to enroll. Specifically, county-operated clinics that are [exempt from licensure](#) will be required to enroll in PAVE. If the county-operated clinic is not exempt from licensure then they will enroll through the [CDPH](#).

22. Are contracted agencies of the MHP required to enroll?

Contracted legal entities are not required to enroll as they are not directly providing services to SMHS beneficiaries.

23. Do county-operated outpatient clinics have to enroll in PAVE?

If the county-operated clinic is [exempt from licensure](#) then they will be required to enroll in PAVE. If the county-operated clinic is not exempt from licensure then they will enroll through the [CDPH](#).

Pursuant to Health and Safety Code, section 1200, a "Clinic" is defined as "an organized outpatient health facility that provides direct medical, surgical, dental optometric, or podiatric advice, services, or treatment to patients. A place, establishment or institution that solely provides advice, counseling, information or referrals on the maintenance of health or on the means and measures to prevent or

avoid sickness, disease, or injury, where that advice, counseling, information, or referral does not constitute the practice of medicine, surgery, dentistry, optometry, or podiatry, shall not be deemed a clinic for purposes of this chapter.”

24. Can a MHP clinic’s NPI number that has been used in PAVE for DMC-ODS certification of the same site be used to enroll the site in PAVE?

Providers that are enrolled as Drug Medi-Cal Clinics meet the SMHS enrollment requirement and are not required to separately re-apply as a “SMHS” provider.

25. Do county-owned and operated sites need to enroll if they are already Medi-Cal certified?

All providers are required to enroll in the FFS Medi-Cal program if they are included in the comprehensive list of providers that can enroll on the [PED website](#). Medi-Cal enrollment is separate from certification as a SMHS provider.

26. Do Community Mental Health Providers need to enroll in the SMHS program?

Community Mental Health Clinics as described in Health and Safety Code section 1206(o) are not required or eligible to enroll through PAVE. However, the clinics are eligible to provide services through the county as stated in [Welfare and Institutions \(W&I\) Code Section 5667](#). W&I Code Section 5667 states, “(b) For purposes of this section, “community mental health center” means any entity that is one of the following...(1) A city or county mental health program... (3) A nonprofit agency that has a contract with a county mental health program to provide both of the following...” Thus, the clinic will need to contract with the county in order to obtain Medi-Cal certification. For more information on the Medi-Cal certification process please see the [Medi-Cal Certifications and Re-Certifications \(General Overview\) PowerPoint](#).

General Enrollment Questions

27. What is the consequence for a provider type who’s eligible to enroll in the FFS Medi-Cal Program, but does not enroll?

If a provider who is required to enroll in the Medi-Cal FFS program does not enroll, they will not be approved as a SMHS provider.

28. Do providers need to enroll in all of their affiliated entities in order to participate in the Medi-Cal program?

Licensed individuals and provider entities only need to enroll once to meet the new requirement and can then provide services for any entity providing Specialty Mental Health Services. Please note, for provider entities the enrollment is location specific, therefore if the entity is operating more than one location all locations are required to enroll. The county will list all licensed individuals and provider entities on the PFU form. In addition, counties can provide a table or other attachment when reporting large numbers of providers on the PFU, rather than additional pages within the PFU form.

29. For provider types not addressed in this presentation, how can counties confirm whether or not they are enrolled?

Confirmation of enrollment for all provider types can be found by using the [California Health and Human Services Open Data Portal](#). A comprehensive list of providers that can enroll in FFS Medi-Cal can be found on the [PED website](#). Please note, only licensed providers are enrolled in FFS Medi-Cal. Interns, trainees, and associates are not eligible for enrollment. Furthermore, at the bottom of this FAQ you will find a list of SMHS providers that are required to enroll.

30. Are new and existing providers required to enroll in the FFS Medi-Cal Program? Can legal entities assist with the process of enrollment?

Any licensed individuals and provider entities included in the comprehensive list of providers that can enroll in the FFS Medi-Cal program on the [PED website](#) are required and eligible to enroll. This program change affects existing and new providers that provide Specialty Mental Health Services. Additionally, most licensed individuals are eligible to enroll as ORP providers. There are no limitations on who can assist with the Medi-Cal application but the application is required to be signed and attested to by the licensed individual or the owner of the entity.

31. Do all Medi-Cal FFS providers enroll through PAVE?

A list of providers that can enroll using PAVE can be found on the [PED website](#). In general, providers that enroll through the PED will enroll through PAVE and licensed health facilities and clinics are licensed and certified for Medi-Cal enrollment by the California Department of Public Health.

32. Does the enrollment process through PED include affiliation to mental health plans?

No, while each licensed individual with a FFS enrollment pathway is required to enroll, this enrollment will not affiliate the provider with a mental health plan. As such, affiliation is not required.

33. Will entities and licensed individuals be responsible for disaffiliating individual providers that are no longer employed at the entity?

No, licensed providers will not be required to “disaffiliate” if they leave an entity provider and they will continue to be enrolled in FFS Medi-Cal. If a provider no longer wants to participate in the program they can submit a deactivation request through PAVE if they are a provider type that enrolls through PED. This will deactivate the provider and they are required to submit a new application in order to enroll as a Medi-Cal provider again.

34. What is the enrollment deadline and when will the Information Notice mentioned during the presentation be released?

The compliance deadline is July 1, 2021. The [Behavioral Health Informational Notice: 20-071](#) was released on December 15, 2020.

35. For those providers who are newer to the SMHS program and the FFS Medi-Cal Program requirements, are there resources available for more information? The forms mentioned are not familiar to us.

Yes, DHCS PED has [Medi-Cal training](#) and [PAVE webinars](#) for licensed individual providers and entity providers. Additionally, the forms mentioned during the webinar are filled out by the county not the individual licensed provider or the entity provider. There are additional resources available in the [Provider Resources](#) section of the PED webpage.

36. What affect does enrollment have on claiming and billing?

As stated in the [Behavioral Health Informational Notice: 20-071](#), the claiming and billing process remains the same.

37. If providers are currently enrolled in Medicare, do they also need to be enrolled in PAVE?

Licensed individuals and provider entities who have a Medi-Cal FFS enrollment pathway and want to participate as a SMHS provider are required to enroll regardless of whether they are also enrolled as a Medicare provider. Medicare enrollment does not meet the Medi-Cal enrollment requirement.

38. How is provider categorical risk level determined?

The provider categorical risk level is designated by the Centers for Medicaid and Medicare Services (CMS). DHCS, at a minimum, utilizes the federal regulation in determining a provider's categorical risk level. Provider types not enrolled or designated by CMS may be designated a higher risk level by DHCS. For more information, view the [Medi-Cal Screening Level Requirements for Compliance with 42 Code of Federal Regulations Section 455.450 Provider Bulletin](#). Also, included is the [Updated Designation of Categorical Risk Levels for the Drug Medi-Cal \(DMC\) Program Provider Bulletin](#) for Drug Medi-Cal Clinics.

39. Does SMHS enrollment apply to providers who are currently Medi-Cal certified by us (counties)?

This program requirement affects all legal entities and providers that have an eligible enrollment pathway.

40. Do county organization provider sites who do not bill Medi-Cal directly need to enroll in PAVE?

The billing process remains the same. However, any entity or licensed individual that is required to enroll must enroll regardless of whether they are billing the Medi-Cal program directly. These licensed individuals and entities will be reported on the PFU form and prior to updating the Provider Information Management System (PIMS), PED will check to ensure that applicable licensed individuals and entities are enrolled.

41. Are programs that bill bundled services (e.g. PHF/CSU) and the providers rendering those services required to register in PAVE?

Any provider identified as a provider type that is required to enroll must enroll. The information will be provided on the updated PFU form and if the entity or licensed individual is not enrolled PED will be unable to complete the update in PIMS.

42. In the PAVE Application, there is a question which states: "Do you currently participate, or have you ever participated as a provider in the Medi-Cal program or in another States' Medicaid program?" Is this applicable to persons who also have a private practice?

If that private practice is currently enrolled or has ever been enrolled in the Medi-Cal program or another States Medicaid program then they would answer "yes."

43. Does each facility in the county require separate enrollment for each location that has a Type 2 NPI? What is the fee involved for enrolling all of the facilities separately?

If your facility is listed in the required enrollment list below, then each facility participating in SMHS will need to be enrolled. Entity providers are enrolled per location and providers required to pay a fee must pay the application fee per application submitted. Please note that licensed individuals are not required to pay the application fee.

44. Which exact CHHS Open Data Portal database is DHCS' PEDs source of truth? Is it the "Enrolled Medi Cal Fee-For-Service Provider File," the "Enrolled Medi-Cal FFS Providers (CSV)," or another file? Please provide the web address and name of the file. Does the file include all providers that are enrolled for a specific MHP or county?

Use the "[Enrolled Medi-Cal Fee-for-Service \(FFS\) Providers \(CSV\)](#)" which allows you to download the information.

Detailed instructions on how to navigate the Open Data Portal including information related to the various filters and download functions can be found on the [Open Data Portal website](#) in the document titled "How to Navigate the Open Data Portal's Enrolled Medi-Cal Fee-For-Service Providers List."

45. If a provider is on the CHHS Open Data Portal already, does the provider need to enroll through PAVE?

The Open Data Portal allows you to enter the name of any provider to check to see if they are enrolled and it will allow you to view their effective date of enrollment. You can access ODP through the PED website.

If the provider is enrolled no additional action is required. However, if the provider is not enrolled and is a provider type required to be enrolled they are required to submit an application in [PAVE](#) or through CDPH as appropriate.

46. Is a provider group organized as a non-profit corporation required to enroll?

No, provider groups delivering specialty mental health services that are organized as non-profit corporations are not eligible or required to enroll in the Medi-Cal program. A provider group is defined as two or more rendering providers doing business together under a group provider number at the same business address. However, licensed healthcare providers of a provider type that are eligible for enrollment that deliver services for provider groups organized as non-profit corporations are required to enroll using Provider Application and Validation for Enrollment ([PAVE](#)). These individuals can enroll as Ordering, Referring and Prescribing providers. All other

provider groups organized as professional corporations and the licensed healthcare providers that work for the group are required to enroll using PAVE.

PAVE Questions

47. What is the process to update a provider's contact information, e.g., home/ mailing address?

The provider may complete and submit a supplemental change form in [PAVE](#).

48. How do individual providers ensure their PAVE applications are linked to the correct business profile/county-owned and operated provider site?

Individual providers will report in the PAVE application each business location where they are providing services.

49. Is there a video resource that walks through the PAVE enrollment process for individual providers and for provider sites?

PED has multiple videos that provide a step-by-step guide for utilizing PAVE. Those videos can be found on the [Provider Training Videos and Transcripts webpage](#).

50. Do providers need to use the MHP's banking information or, do they enter their own banking information even though payments will not go directly to them?

SMHS providers are not required to enter any banking information for electronic billing into PAVE. As stated in the [Behavioral Health Informational Notice: 20-071](#) the claiming process has not changed.

51. If a Provider Group has a Designated Official and is in the NPPES system under the applicant's NPI number, it states that the designated official is not an Authorized Official under NPPES. Would a designated official be able to sign the Group Provider application?

PED does not rely on information reported to NPPES with regards to an authorized signer. The application must be signed by an individual who is the sole proprietor, partner, corporate officer, or by an official representative of a governmental entity or non-profit organization, who has the authority to legally bind the applicant; this authority cannot be delegated. This person would also be reported in the Disclosure Section of the application or for individual applications the individual is required to sign.

52. Does an entity/organization need to create a business profile for each provider to set up to get the applications completed and signed in PAVE? Do county providers need to submit individual applications to the clinics they provide services to? And is there a limitation on who can register a business profile and complete the application?

Yes, a business profile will need to be created for each provider, including ORPs, in order to sign the application. A business profile will need to be setup prior to starting a PAVE application. County providers will need to submit individual applications for those providing services at clinics. For more information about business profiles please see the [PowerPoint for Understanding PAVE User and Business Profiles, Application and Account Queues and User Roles](#).

PED does not limit who can assist in filling out the application. However, the individual that the application is for will have to sign and attest that all of the information provided is complete and accurate. For more information related to the Business Profile in PAVE please visit review [PAVE 101 Training Slides](#).

53. Can the delegated official enroll individual providers in PAVE or does each provider have to enroll themselves?

PED does not limit who can assist with the application process. However, each application will need to be signed under penalty of perjury by the applicant attesting that all the information provided in the application is complete and accurate.

54. What is the PAVE enrollment process for an MD and a LMFT working in a county MHP?

The enrollment process for the aforementioned providers above is available on the [DHCS Behavioral Health Provider Enrollment Webinar](#). After clicking the link, go to Page 23 for the application process in [PAVE](#).

Application Fee Questions

55. Is enrollment a onetime process or is there a re-enrollment requirement? If providers are required to re-enroll, is the fee required again?

Enrollment is location specific, therefore a provider with multiple locations will need to submit an application per location. A provider required to submit an application fee will be required to do so per location. Enrolled Medi-Cal providers are required to revalidate every 5 years. PED will notify providers to inform them they are required to [revalidate](#). Pursuant to Code of Federal Regulations, Title 42, Section 455.414 the state Medicaid agency must revalidate the enrollment of providers at least every five years.

If the provider type is required to pay an application fee, they will be required to pay an application fee when they are revalidated.

56. Are individual providers required to pay the fee upon enrollment or, does the fee only apply to organizations and how do you request a fee waiver?

For more information about who needs to pay the application fee and who is exempt from the fee please see the provider bulletin entitled [Medi-Cal Application Fee Requirements for Compliance with 42 Code of Federal Regulations Section 455.460](#). Applicants/providers that are required to pay the fee may request a waiver if paying the fee would cause a financial hardship. To request a waiver, an applicant/provider must include with submission of the application a letter that describes: 1) the hardship and 2) the justification for an exception. A fee waiver request that does not describe the two elements will not be accepted. DHCS will forward application fee waiver requests submitted by applicants/providers to CMS for approval. Pursuant to section 1866(j)(2)(C)(ii) of the Social Security Act, CMS is required to review all application fee waiver requests, and if appropriate, will approve any request for hardship exception.

57. Can County MHPs pay for the Provider application fee to enroll?

There are no restrictions on who is eligible to pay fees for enrollment.

Provider File Update (PFU) Form Questions

58. Who submits a PFU form?

PFU's are submitted to DHCS by the county mental health plan.

59. What individuals and entities need to be reported on the PFU?

Only licensed individuals and entity providers that are required to enroll need to be reported on the PFU form. The updated PFU form will provide a list of individuals and entities that are required to be reported on the form. In addition, counties can provide a table or other attachment when reporting large numbers of providers on the PFU, rather than additional pages within the PFU form.

60. When does the new PFU form become effective and when it is required for use? What fields are required to be filled out on the PFU?

The PFU form is now available and has been updated so that entities and individuals required to enroll will be reported on the PFU. The PFU is available on the [Specialty Mental Health Services Provider Information webpage](#). Effective July 1, 2021 all counties will be required to use the new PFU form and outdated forms without the provider information will not be accepted. Instructions to complete the PFU Form are located at the end of the form.

61. Is the Provider Certification form a separate form than the PFU form?

Yes, those are separate forms and both forms are filled out by the county.

62. When are providers required to report licensed individuals and provider entities on the PFU form?

The reporting processes for SMHS providers will remain the same. However, updates have been made to the PFU form to ensure SMHS providers are adhering to the enrollment requirement.

- There is a section to report entities that are required to enroll if you are providing Medi-Cal certified services.
- There is a section to report licensed individuals that are required to enroll if you are providing Medi-Cal certified services.
- There is a list of who should be reported, however, this list can change and be updated and is not exhaustive. Any licensed provider that can enroll in Medi-Cal must be enrolled.

Prior to PED updating the SMHS provider's profile in the PIMS, PED will confirm that all applicable providers are enrolled in FFS Medi-Cal.

63. Will the Provider Information management System (PIMS) still be used for Medi-Cal certified provider sites?

Yes, PIMS will still be used for Medi-Cal certified sites. The PFU form is now available and has been updated so that entities and individuals required to enroll will be reported on the PFU. The PFU is available on the [Specialty Mental Health Services Provider Information webpage](#).

64. Are individual provider initial applications and changes to be submitted via PFU and via PAVE?

Any change to enrollment or initial enrollments will be submitted in PAVE. All enrolled providers will be reported on the PFU. Updating the PFU form will not change your enrollment information. In order to make changes to an enrollment done through PAVE you must submit the updated information in PAVE.

Resources

65. Where is the most recent information about SMHS Stakeholder Engagement material?

The PowerPoint presentation from the August 25th, [2020 SMHS webinar](#) is available online. Stakeholder information related to PED can be found on the [Provider Resources webpage](#).

66. What is a good resource for County Mental Health plans?

Counties can send specific questions and concerns related to FFS Medi-Cal enrollment to dhcspedstakeholder@dhcs.ca.gov.

SMHS licensed individuals that are required to enroll.

Certified Pediatric/Family Nurse Practitioner
Licensed Clinical Social Worker
Licensed Educational Psychologist
Licensed Marriage and Family Therapist
Licensed Professional Clinical Counselor
Physician (MD and DO)
Physician Assistant
Psychologist
Registered Pharmacist/Pharmacist

SMHS entities that are required to enroll.

Psychiatric Hospital (CDPH)
General Hospital (CDPH)
Skilled Nursing Facility (SNF)/Special Treatment Programs (STP)(CDPH)
Licensed Clinic (CDPH)
Federally Qualified Health Centers (FQHC) (CDPH or PED)
Rural Health Clinic (CDPH or PED)
County Owned and Operated Exempt from Licensure clinics (PED)

SMHS licensed individuals that are NOT required to enroll.

Associate Marriage and Family Therapist (interns)
Associate Professional Clinical Counselor (interns)
Associate Clinical Social Worker (interns)
Associate Clinical Social Worker
Behavior Analyst
Certified Acupuncturist
Counselor Intern
Clinical Nurse Specialist
Clinical Specialist
Psychiatric Technician
Psychologist Associate (intern)
Residential Program Services
Registered Vocational Nurse
Speech Pathologist Assistant (intern)
Speech-Language Pathology Assistant
Vocational Nurse

SMHS entities that are NOT required to enroll.

Case Management Agency
Community Treatment Facility
Day Care Center
Family Day Home
Group Home
Home Finding Agency
Mixed Practice Specialty
Preschool Center
Psychiatric Health Facility
Sheltered Workshop
Small/Large Family Home
Special Service Center