

Additional Requirements for CHIP-Only Enrollment Provider Type 08 (Clinic)

Specialty Code

Please choose from the following for specialty and code:

- 080 – Federally Qualified Health Center
- 081 – Rural Health Clinic
- 083 – Family Planning Clinic
- 110 – Psychiatric Outpatient
- 184 – Outpatient Drug and Alcohol Clinic

The following documents and supporting information are required for enrollment: (Please ensure all documents are legible.)

- Completed application for the enrollment of a Facility/Agency—application must include:
 - Signed Provider Agreement with original signature of an authorized representative;
 - Completed Ownership or Control Interest Disclosure form; and
- Documentation generated by IRS showing both the Provider’s legal name and FEIN—documentation must come from IRS; this Department does not accept W-9s.
- If Provider is tax-exempt, submit IRS 501 (c)(3) letter confirming this status.
- Copy of Corporation papers issued by Department of State Corporation Bureau or business partnership agreement.
- If Provider operates under a fictitious name, submit copy of D/B/A filing with Department of State Corporation Bureau.
- Clinical Laboratory Improvement Amendments (CLIA) certificate and PA Department of Health clinical lab permit, if applicable – *note that the PA DOH clinical lab permit requirement applies to both In-State and Out-of-State providers.*
- **Psychiatric Outpatient Clinics (08-110)** must submit copy of Certificate of Compliance issued by Department of Human Services.
- **Drug and Alcohol Clinics (08-184)** must submit copy of license issued by the Department of Drug and Alcohol Programs.

Clinics (08) should submit applications online via our Electronic Provider Portal at <https://provider.enrollment.dpw.state.pa.us/>. If circumstances do not allow online submission and the Medicare Fee has already been paid, 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