

## DHS-DMH Provider Enrollment

The provider enrollment process for Medicaid Community Mental Health Centers in the Illinois Department of Human Services – Division of Mental Health (DHS-DMH) Community Services Program requires:

- Applicants for Rule 132 certification must obtain DHS-DMH Central Office approval, BALC or DCFS Certification and completion of required training and enrollment steps (see Prequalification Requirements - <http://www.dhs.state.il.us/page.aspx?item=66533>)
- Approved providers require DHS-DMH Regional Office approval to enroll or modify service site locations and services
- BALC or DCFS Certification as a Medicaid Mental Health provider with Rule 132 services and service site locations listed on Certificate
- Unique NPI number for Community Mental Health services for each DMH service site location
- Obtain a NPI # through the National Plan and Provider Enumeration System - <https://nppes.cms.hhs.gov/NPPES/Welcome.do> and associate with taxonomy code “Mental Health (Including Community Mental Health Center) - 261QM0801X” to link with the new NPI number
- HFS Medicaid enrollment as a provider in the HFS IMPACT (Illinois Medicaid Advanced Cloud Technology) Medicaid Management Information System- <http://www.illinois.gov/hfs/impact/Pages/default.aspx>
  - New enrollment with the Provider Type - FAO (Facility, Agency, Organization).
  - Select “DMH-MCO ID# 3000004” as an associated MCO, along with other MCO’s in your community.
  - The Licensure section must be completed by listing your BALC Medicaid Certificate information as a “DHS State License-Certificate” or your DCFS Medicaid Certificate as “DCFS State License-Certificate” and include the Certificate #, effective start and effective end date as outlined on the current certificate.
- The Specialty section needs to be “Community Mental Health Center” with “Outpatient Services” as the subspecialty and if applicable add subspecialty for “Residential Services”
- HFS Approved providers enroll in DHS-DMH database by submitting the following:
  - Collaborative Form 1 to add your agency to the ProviderConnect database – [http://www.illinoismentalhealthcollaborative.com/provider/forms/Request\\_for\\_Changes\\_Form1\\_Administration.pdf](http://www.illinoismentalhealthcollaborative.com/provider/forms/Request_for_Changes_Form1_Administration.pdf)
  - Collaborative Form 2 to update the ProviderConnect database - [http://www.illinoismentalhealthcollaborative.com/provider/forms/Request\\_for\\_Changes\\_Form2\\_Provider\\_Record.pdf](http://www.illinoismentalhealthcollaborative.com/provider/forms/Request_for_Changes_Form2_Provider_Record.pdf)
  - IRS Request for Taxpayer Identification Number and Certification (W-9) – <http://www.irs.gov/pub/irs-pdf/fw9.pdf>
  - National Provider Identification # (NPI) Approval Letter for each service site location- <https://nppes.cms.hhs.gov/NPPES/Welcome.do>
  - Copy of BALC or DCFS Medicaid Mental Health Certificate
- DHS-DMH will then complete enrollment in database and synchronization with HFS

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- Modifications with regard to provider enrollment including addition of new sites and/or closing of existing sites must be approved by DMH. Failure to do so may result in rejection of claims.

For assistance or questions contact:

Rich Jones, MA

Provider Access Specialist

Division of Mental Health - Office of Community Services

Email: [Richard.E.Jones@illinois.gov](mailto:Richard.E.Jones@illinois.gov)