



MARK B HORTON, MD, MSPH  
*Director*

State of California—Health and Human Services Agency  
California Department of Public Health



ARNOLD SCHWARZENEGGER  
*Governor*

July 22, 2010

AFL 10-11

**TO:** All Licensed Health Care Providers

**SUBJECT:** California Department of Health Care Services, Medi-Cal Provider Agreement (Institutional Provider), DHCS 9098 and Instruction Page

This notice is to announce that the California Department of Health Care Services (DHCS) is implementing a new Medi-Cal Provider Agreement (DHCS 9098) for all providers currently participating in the Medi-Cal Program. The updated Provider Agreement will be effective immediately.

The agreement is mandatory for continued participation as a provider in the Medi-Cal Program pursuant to Title 42, United States Code, Section 1396a(a)(27), Title 42, Code of Federal Regulations, Section 431.107, Welfare and Institutions Code, Section 14043.2 and Title 22, California Code of Regulations, Section 51000.30(a)(2).

The California Department of Public Health, Licensing & Certification Program, Provider Certification Unit will send the DHCS 9098 Provider Agreement and instructions to each Licensed Health Care Provider, in stages, over the next several months. When you receive your DHCS 9098 packet please complete the DHCS 9098 agreement and then sign, date, notarize, and return all pages of the **original** agreement in the envelope provided within **fifteen (15) days** of the date of the letter. Retain a copy for your records.

Those providers who have submitted a DHCS 9098 within the last year, will not be required to resubmit a new DHCS 9098 and thus will not be receiving the new DHCS Provider Agreement letter.

If you prefer to return your signed Provider Agreement via overnight mail, please address it to:

California Department of Public Health  
Licensing and Certification Program  
Provider Certification Unit  
MS 3100  
1615 Capitol Avenue, Suite 73.481  
Sacramento, CA 95814-5015

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The Medi-Cal Provider Agreement form DHCS 9098 and Instruction Page can also be accessed through the DHCS, Medi-Cal Provider Enrollment internet website at:

[http://files.medi-cal.ca.gov/pubsdoco/provappsenroll/21enrollment\\_DHCS9098.pdf](http://files.medi-cal.ca.gov/pubsdoco/provappsenroll/21enrollment_DHCS9098.pdf)

If you have any questions you may direct them to the Provider Certification Unit at 916-552-8619.

Sincerely,

**Original Signed by Kathleen Billingsley, R.N.**

Kathleen Billingsley, R.N.  
Deputy Director  
Center for Health Care Quality