

MIHMS Mental Health Clinic Medical Director Confirmation Form

This form applies to providers who are enrolled in MIHMS as a Mental Health Clinic (MHC) Provider Type with a Behavioral Health Services (BHS) Specialty. Please fill out the following to confirm the status of your Medical Director.

You must complete this form for each Pay-To NPI enrolled as a MHC/BHS:

Pay to NPI # _____

Pay to Name _____

Please check one of the options below:

We currently have a Medical Director on staff or will have one as of July 1, 2012.

If you check this box, you must fill out the additional information in the box below.

Medical Director Name _____

Medical Director NPI _____

Medical Director License # _____

Is the Medical Director enrolled as a Physician in MIHMS and affiliated to all Service Locations that are enrolled as a Mental Health Clinic/Behavioral Health Services? Yes No

*If no, you MUST **immediately** submit a maintenance case to ensure that your Medical Director is enrolled as a Physician and affiliated to all Service Locations enrolled as a MHC/BHS.*

We currently do not have a Medical Director on staff and will not have one as of July 1, 2012.

*If you check this option you MUST **immediately** complete a maintenance case to change your Provider Type to either a Behavioral Health Clinician or a Behavioral Health Clinician Group effective July 1, 2012 to avoid interruption in payments for these services.*

Please e-mail or fax this form to mainecareenroll@molinahealthcare.com, fax #: (877) 314-8776.