PROVIDER INFORMATION UPDATE FORM

This form will notify BHSD & VHP of any changes to your agency/clinic provider information.

DO NOT use this form If submitting a request for multiple providers.
For multiple providers, use the bulk request form. *Click here to download bulk form*
For a single provider update, use this form.

*Required fields (If not completed, this form will be returned for additional required details.)

*Today's Date: Mental Health SUTS Both
*Agency Name: Submitter Phone #:
*Submitter Name: County CCP FFS
*Submitter Email Address:

Provider Information

*First Name: *Last Name:
*NPI#: Avatar Profile ID # (If known):

Please Select from the List of Requests Below:

Clinic Location Update Request

Current Address: Current Location NPI#:
New Location Address: New Location NPI#:
Effective Date of New Location:

Credential Update Request

Current Credential: Current Taxonomy:
Updated Credential: Updated Taxonomy:
Effective Date of Updated Credential:

- *Provide supporting documentation for updated credential.*
  Reference this list to confirm credential type. *CLICK HERE TO DOWNLOAD LIST OF CPT CODES*

License/Registration/Certification Renewal Request

Current Credential: License/Registration/Certification Number:
New Expiration Date:

- *Provide supporting documentation for renewal.*

Provider Profile Update Request

- *If more than one requested change, itemize up to three (3) changes below.*

Request #1: Effective Date:
Changing From: Changing To:
Comments:

Request #2: Effective Date:
Changing From: Changing To:
Comments:

Request #3: Effective Date:
Changing From: Changing To:
Comments:

Trainee Supervisor Change

Supervisor Name: Supervisor NPI:
Supervisor Credential: Effective Date:

Termination/Disassociation/LOA

Term Reason:
Effective Date of when Provider Leaves/Left Agency:
If Leave of Absence, Anticipated Return Date:
Comments:

Other: Report Issues Not Listed Above

Provide Explanation:

Send Completed Form to BHProviderUpdates@hhs.sccgov.org

(Do not encrypt emails. When encrypted emails are received, they cannot be viewed)

Include the request in the subject of the email.

(e.g. Subject: Credential Update Request)