



Long-Term Services & Supports Training Attestation

Provider Services

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Section I: Instructions			
<ul style="list-style-type: none"> The Department of Health Care Services (DHCS) mandates ALL Medi-Cal Managed Care primary care providers (PCP) receive training on the implementation of long-term services & supports (LTSS). Upon finishing training, complete and fax this attestation form to SCFHP Provider Services. 			
Section II: Provider Information			
Provider name:		Medical group/facility name (if applicable):	
Street address:		City:	State: ZIP code:
Telephone number:	Fax number:	Email address:	
Section III: Attestation			
<input type="checkbox"/> I acknowledge that this office has received LTSS training via the Santa Clara Family Health Plan website.			
Printed name:		Title:	
Signature of physician/designee:		Date:	
Section IV: Long-Term Services & Supports Training Agenda			
<ul style="list-style-type: none"> LTSS benefits Identifying eligible members LTSS services How are LTSS services obtained in Santa Clara County? In-home supportive services (IHSS) Community-based adult services (CBAS) Multipurpose senior services program (MSSP) Skilled nursing facilities (SNF) 			
Section V: Additional PCPs and Office Staff Attestation			
All PCPs and office staff sign in sheet (please attach additional pages if necessary)			
Printed name and title:		Signature:	Date: