

# Denti-Cal Bulletin



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## ***Verify Your Tax Identification Number (TIN)***

The California Medi-Cal Dental Program (Denti-Cal) reports annually to the Internal Revenue Service (IRS) the amount paid to each enrolled billing provider. The Business Name and TIN must match exactly with the name and TIN on file with the IRS. If the Business Name and TIN do not match, the IRS requires Denti-Cal to withhold 28% of future payments.

### ***Tax Identification Number***

The TIN may either be a Social Security Number (SSN) or an employer identification number (EIN). Denti-Cal uses the TIN to report earnings to the IRS, which are printed on the front of the check and on the Explanation of Benefits (EOB) you receive from Denti-Cal. Please verify that the Business Name and TIN on the next check/EOB you receive from Denti-Cal are correct. If the Business Name and TIN appearing on your Denti-Cal check/EOB are correct, you do not need to notify Denti-Cal.

### ***Updating Your Tax Identification Number***

If the Business Name and/or TIN are incorrect, a Medi-Cal Supplemental Changes - DHS 6209 (Rev. 7/07) form is required to make necessary changes. Please attach a valid, legible copy of an official document from the IRS (Form 147-C, SS-4 Confirmation Notification, 2363 or 8109C).

- ◆ If your business type has changed (for example: sole proprietorship, corporation or partnership) you will be required to complete a new Medi-Cal Provider Group Application - DHS 6203 (Rev. 7/06) or a Medi-Cal Provider Application - DHS 6204 (Rev. 7/06), Medi-Cal Disclosure Statement - DHS 6207 (Rev. 7/06), and Medi-Cal Provider Agreement - DHS 6208 (Rev 7/06).
- ◆ If you are incorporated, attach a valid, legible copy of the Articles of Incorporation showing the name of your corporation and a legible copy of an official document from the IRS (Form 147-C, SS-4 Confirmation Notification, 2363 or 8109-C).

If your corporation is doing business under a fictitious name, attach a valid, legible copy of the fictitious name permit issued by the Dental Board of California.

To obtain a current application form, please contact the Denti-Cal Telephone Service Center at (800) 423-0507 or visit the Denti-Cal Web site: [www.denti-cal.ca.gov](http://www.denti-cal.ca.gov). Failure to submit the appropriate form and supporting documents will delay the processing of your application and will be returned as incomplete.

For additional information or questions regarding the verification of TINs, please call the Denti-Cal Telephone Service Center at (800) 423-0507.

## TAX IDENTIFICATION CHANGE INFORMATION

Provider ID Number \_\_\_\_\_ Service Office Number \_\_\_\_\_

Doing Business As Name \_\_\_\_\_

Tax Identification Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ *or* \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(SSN) (EIN)

Billing Provider Name \_\_\_\_\_  
(Please Print)

Billing Provider's Signature \_\_\_\_\_ Date \_\_\_\_\_