



# CHECKLIST

## IHSS PROVIDER ENROLLMENT AND REGISTRATION

### EXISTING PROVIDER

\*\*Paid by IHSS Prior to 11/09\*\*

#### Step 1: Complete Forms

- PCSP Provider Enrollment Agreement (Form SOC 426)
- Provider Orientation Guide (Read)
- IHSS Provider Enrollment Agreement (Form SOC 846)

#### Step 2: Visit Enrollment Office

Located at 3700 Branch Center Road

- Bring Forms
  - Walk-in Mon.-Fri. 8:00 am-5:00 pm
- Bring ID
  - Government Photo ID- Unexpired
  - Social Security Card - Original
- Obtain DOJ Live Scan Form and Locations

#### Step 3: DOJ Background Check

- Complete fingerprinting by taking Live Scan Form to a location near you

### NEW PROVIDER

\*\*Not paid prior to 11/09\*\*

#### Step 1: Complete Forms

- PCSP Provider Enrollment Agreement (Form SOC 426)
- IHSS Recipient Designation Form (Form 426A)
- Adding/Deleting Service Provider Form (SAS 1207)

#### Step 2: Visit Enrollment Office

Located at 3700 Branch Center Road

- Attend State Mandated Orientation
  - Walk-in Tues-Thurs. 8:30 am
- Bring Forms
- Bring ID
  - Government Photo ID- Unexpired
  - Social Security Card - Original
- IHSS Provider Enrollment Agreement (Form SOC 846)
- Obtain DOJ Live Scan Form and Locations

#### Step 3: DOJ Background Check

- Complete fingerprinting by taking Live Scan Form to a location near you

## NEED FORMS?

- ⇒ Download all needed forms and orientation material from the web @ [www.sacihsspa.net](http://www.sacihsspa.net)
- ⇒ Visit our office at 3700 Branch Center Road, Sacramento (RT Route 72)
- ⇒ Call our message line at (916) 875-5788, request an enrollment packet be mailed:
  - Leave your name, address and phone number
  - Speak slowly and clearly

In Home Support Services Public Authority  
3700 Branch Center Road, Suite A  
Sacramento, CA 95827-3808  
Message line (916) 875-5788  
Visit our website at [www.sacihsspa.net](http://www.sacihsspa.net)