

CITY OF LONG BEACH
Child Health & Disability Prevention Program

2525 Grand Ave. • Long Beach • California • 90815 • (562) 570-7980 • FAX (562) 570-4099

CHDP FORMS REQUEST Today's Date: _____

MAIL/LARGE ORDERS: The following supplies may be ordered by mail or FAX from the Long Beach CHDP Administration, and will be shipped directly to your office from the State warehouse. Please order for a 3-month period only and allow 4-6 weeks for delivery.

Quantity	Form Number	Form Title
	PM 160 (No Imprint)	Confidential Screening/Billing Report (Green and white forms)
	PM 160 - Information Only (No Imprint)	Confidential Screening/Billing Report- Medi-Cal Managed Care. (Brown and white forms) * For imprinted Medi-Cal Managed Care PM160s, contact your Medi-Cal Managed Care Plans
	DHCS 4073-English/Spanish/ Cambodian	CHDP Eligibility Information (Patient Eligibility Form-Eng/Spa/ Cambodian)
	CHDP Envelopes	Envelopes (To be used for billing purposes only)
	CHDP Gateway Pre-visit flyer	In office use only-not for take home.
	CHDP Gateway Post-enrollment take home flyer	Use ONLY when the child has been pre-enrolled into Medi-Cal.
	PUB 186 –English/Spanish	CHDP Parent Flyer for Infant (Newborn) Enrollment

Provider Information: (Please fill in provider information below. Be sure to include correct provider number.)

Name of Doctor, School, or Clinic:									
Street Address, Suite or Room #:									
City, State and Zip Code:									
Telephone #:									
NPI # (10 digits):									
Attention:									

Forms, Brochures, Publications and Provider Information Notices may be downloaded online at:

<http://www.dhcs.ca.gov/services/chdp/Pages/default.aspx> (State CHDP website)
<http://www.longbeach.gov/health/mcah/chdp/asp> (City of Long Beach CHDP website)

The California Immunization Card (yellow) is available through the Immunization Project.
 Phone: (562) 570-4212/4226