



Subject: Authorization of New CSS Program Vendor/Supplier

You are receiving this packet because you have either requested or have been referred to become a new vendor for the Children's Special Services (CSS) Program of the State of Tennessee.

The Tennessee Department of Finance and Administration vendor selection procedures and payment guidelines require that referral providers complete a vendor packet. This packet includes a Vendor Authorization form (VA), Program Letter of Agreement (LOA) form, the State of TN Department of Finance & Administration Supplier Direct Deposit Authorization form, and a W-9 Request for Taxpayer Identification Number and Certification form.

These forms are required for vendor consideration and payments, and must be completed, signed and returned for program approval. **Vendor agreements must be renewed on a three-year cycle.** Upon receipt and approval of your packet, written notification will be sent that includes your expiration date and Edison Supplier/Vendor number.

Please complete all of the attached forms and follow all instructions exactly to avoid delays in processing:

- TN Department of Health Vendor Authorization Form
 - Letter of Agreement
 - W-9
 - Copies of your current professional or facility licenses (*ex: Pharmacy/Doctor/Therapy License*)
 - State of TN Department of Finance & Administration Supplier Direct Deposit Authorization
- *PLEASE SEE FORM FOR EXACT MAILING INSTRUCTIONS.** If this form is not mailed directly from your financial institution representative to Finance and Administration, your agreement will not process.

If regular mail is preferred, the completed forms (*with the exception of the Direct Deposit Authorization form*) and copies of your current licenses should be mailed to:

ATTN: Denise M Black
Tennessee Department of Health
Division of Family, Health and Wellness-CSS
710 James Robertson Parkway
Andrew Johnson Tower 7th Floor
Nashville, TN 37243

You may also send them via email: Denise.M.Black@tn.gov or fax: **(615) 741-1063**. If you have any questions regarding the completion of these forms, you can reach me directly at: **(615) 741-2985**.

Thank you for your support and assistance to children with special health care needs in the State of Tennessee, and for becoming a part of the CSS Provider network.

Sincerely,

Denise M Black

Denise M Black
Administrative Services
Children's Special Services (CSS) Program