

**Residential Crisis Stabilization Unit (RCSU)**  
**Provider Type 26**  
**[907 KAR 15:070](#)**

**Information about the program:**

- Provider must contact [Office of Inspector General \(OIG\)](#) for a survey
- Provider can only be an entity - NO INDIVIDUALS
- Provider must have a permanent physical address/location

**Application Information and Supporting Documentation required for processing:**

- [Map-811 \(Enrollment\) application](#)
- [Map-811 Addendum E](#) and verification of bank account/routing number such as voided check or bank letter if provider chooses to enroll in direct deposit
- Residential Crisis Stabilization Unit License (current and reflecting requested enrollment date)
- IRS letter of verification of FEIN or Official IRS documentation stating FEIN. FEIN must be pre-printed by IRS on documentation. W-9 forms will not be accepted
- [NPI and Taxonomy Code Verification](#)

**Submit the completed MAP-811 (Enrollment) application and supporting documentation to:**

KY Medicaid  
Provider Enrollment  
P.O. Box 2110  
Frankfort, KY 40602

**Important address:**

For Licensure, contact:  
Office of Inspector General  
275 East Main Street  
Frankfort, KY 40621  
Phone: 502-564-7963