



State of California
Department of Health Care Services
Certification

In accordance with applicable provisions of the Health and Safety Code of California and its rules, regulations, and standards, the Department of Health Care Services hereby certifies:

SIYAN CARE CORPORATION

to operate and maintain an alcohol and/or other drug program using the following name and location:

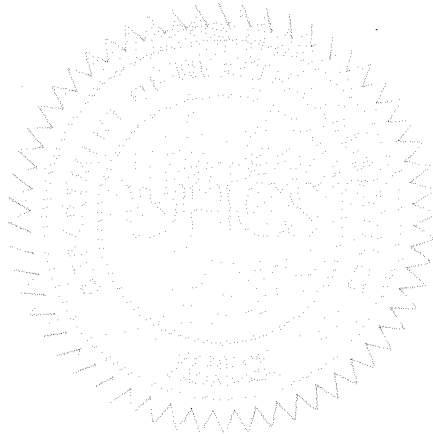
SIYAN CARE INTENSIVE OUTPATIENT SERVICES
480 TESCONI CIRCLE, SUITE A
SANTA ROSA, CALIFORNIA 95401

This certification extends to the following level of alcohol and/or other drug program services:

OUTPATIENT AND INTENSIVE OUTPATIENT SERVICES

Certification Number:
490045BP

Effective Date: 12/15/2024
Expiration Date: 12/31/2026




JANELLE ITO-ORILLE, Division Chief

Complaints regarding services provided in this facility should be directed to:
Licensing and Certification Division
Complaints Coordinator, Complaints Section, MS 2601
Post Office Box 997413, Sacramento, California 95899-7413
PHONE: (877) 685-8333 / (916) 322-2911 – FAX: (916) 440-5094 – E-mail: SUDComplaints@dhcs.ca.gov

Post in a prominent location. This Certification is not transferable.



December 20, 2024

Certified Mail: 9589 0710 5270 2305 1525 04

THIS LETTER SENT VIA BOTH MAIL AND EMAIL

Anish Shah
CEO
Siyan Care Corporation
480 Tesconi Circle, Suite A
Santa Rosa, California 95401

TRANSMITTAL OF INITIAL CERTIFICATION – 490045BP

Dear Dr. Shah:

This letter transmits the initial certification of compliance with the Alcohol and/or Other Drug Program Certification Standards for which you applied.

We are pleased to inform you that Siyan Care Intensive Outpatient Services located at 480 Tesconi Circle, Suite A, Santa Rosa, California 95401, is certified for the period from 12/15/2024 through 12/31/2026 for Outpatient and Intensive Outpatient Services.

The enclosed certification shall remain in effect for the period indicated so long as the program complies with the following:

1. Continues to hold relevant license (residential only).
2. Has no change of ownership.
3. Remains at the same DHCS certified location with no substantial modifications in the physical facility.
4. Continues substantially the same program structure and modality of service(s).
5. Retains the same program administrator or director.
6. Pays all applicable licensing fees and/or civil penalties.

IT IS THE RESPONSIBILITY OF THE PROGRAM TO NOTIFY THE DEPARTMENT OF HEALTH CARE SERVICES IF ANY CHANGE OCCURS IN ITEMS 1 THROUGH 5.

DHCS may revoke, suspend or terminate the certification if the program fails to comply with the provisions of certification. The program certification shall automatically terminate if any changes occur in Items 1 or 2. If the program anticipates a change in Items 3 or 4, the program shall complete and submit a Supplemental Application (DHCS 5255) along with the supporting documentation and required fee(s) to the Department to

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Anish Shah
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request approval to make the designated change(s). If a change occurs in Item 5, the program shall notify the Department by submitting the Administrator/Director Information (DHCS 5082) form.

In accordance with the Alcohol and/or other Drug Program Certification Standards, Section 3000 (b), the program shall submit the Request for License and/or Certification Extension DHCS Form 5999 (12/18) with all supporting documentation and renewal fees to the department **120 days** prior to the expiration date of the certificate. Failure to provide all necessary documentation shall result in the termination of the certificate in accordance with Section 3000 (d).

We would like to thank you and your staff for the cooperation extended to us during the review of your initial application and compliance review. If you have any questions or concerns, please contact Analece Griffin, Licensing and Certification Analyst, at (916) 345-7509, or by email at Analece.Griffin@dhcs.ca.gov.

Additionally, if you would like to become a Medi-Cal provider, you can now submit your application through the PAVE provider portal. For more information on Medi-Cal enrollment, please visit: <https://www.dhcs.ca.gov/provgovpart/Pages/PED.aspx>.

Sincerely,

Mario Lobato

Mario Lobato
Supervisor
Substance Use Disorder Licensing and Certification Section