

Ordering, Referring, and Prescribing (ORP) Medi-Cal Provider Enrollment

Department of Health Care Services
July 30, 2026

Agenda

- » Overview of Federal Regulations and ORP
- » Potential Impacts & Mitigation Efforts
- » Call to Action: How Key Partners Can Help
- » ORP Provider Enrollment Information
- » What ORP Providers Must Do
- » Next Steps
- » Q&A

Overview of Federal Regulations and ORP: Background

- » DHCS is beginning a **multi-year, enterprise-wide effort** to fully implement and enforce federal provider requirements.
- » Enforcement will apply across all delivery systems.
 - Pharmacy (Medi-Cal Rx)
 - Medical (CA-MMIS for Fee-for-Service (FFS) claims and Medi-Cal MCP encounters)
- » Federal Medicaid rules ([42 CFR 455.410](#) and [455.440](#)) require all ORP providers to be enrolled in Medicaid with a Type 1 (individual) National Provider Indicator (NPI).

Overview of Federal Regulations and ORP: Definitions

- » **Type 1 NPI (Individual):** For individual health care providers, such as physicians, nurse practitioners, pharmacists, and sole proprietors. Individuals are only eligible for one NPI.
- » **Type 2 NPI (Entity):** For health care organizations, such as hospitals, nursing homes, and physician groups not organized as a sole proprietor group. Organizations can have multiple NPIs.

Overview of Federal Regulations and ORP: Definitions (Continued)

» **Ordering Provider**

A licensed provider who directs specific services or supplies to be furnished to a Medi-Cal member. Some typically ordered services include, but are not limited to, laboratory tests, durable medical equipment (DME), and home health services (for example, a physician orders a lab test or DME item).

» **Referring Provider**

A licensed provider who sends a Medi-Cal member to another provider for services, typically evaluation or treatment that the referring provider cannot perform (for example, a primary care practitioner refers a Medi-Cal member to a gastroenterologist).

» **Prescribing Provider**

A licensed provider (e.g., a physician, nurse practitioner or pharmacist) who writes a prescription for a medication or other pharmacy-dispensed item within their scope of practice.

Overview of ORP Regulations: Why Compliance Matters

- » Federal law requires providers who order, refer, or prescribe services to be enrolled with Medi-Cal and identified on claims.
- » Consistent with federal requirements, when ORP provider information is not included on a claim, it is inaccurate, or the ORP provider is not enrolled, the claim submitted by the billing provider should not be paid by Medi-Cal.
- » However, these rules were not uniformly enforced across systems due to technical and operational challenges.
- » Further, DHCS' 2023 Payment Error Rate Measurement (PERM) audit, administered by the federal Centers for Medicare & Medicaid Services (CMS) and which measures improper payments in Medicaid and CHIP, identified errors related to missing required NPI information and claims submitted by unenrolled ORP providers.
- » DHCS must correct these issues to maintain compliance with federal regulations.

Overview of ORP Regulations: Why Enforcement Matters

- » Helps ensure program integrity and improves fraud prevention.
- » Supports enhanced utilization management controls, audits, and overpayment recovery, and identifies improper billing practices.
- » Protects **state** funding by preventing improper payments and mitigates False Claim Act violations and recoveries, as ORP enrollment helps validate that services are being authorized by qualified providers within their scope of practice, and services are medically necessary.
- » Protects **federal** funding and ensures federal compliance, which helps ensure federal financial participation remains available and reduces the risk of future federal deferrals or disallowances.
- » Supports greater accountability and oversight by improving data quality, increasing transparency, and uniformly applying the ORP requirement.

Potential Impacts and Mitigation Efforts

» Potential Impacts

- » Medi-Cal members may face delays accessing medical and pharmacy benefits if their provider is not enrolled.
- » Some Medi-Cal members may need to select a new provider who is enrolled with Medi-Cal with their Type 1 NPI.
- » Billing providers, including pharmacies, may experience claim denials if ORP information on the claim is not present/valid.
- » Some providers may choose not to enroll due to the perceived administrative burden.

» Mitigation Efforts

- » DHCS is performing early and targeted outreach to non-enrolled providers, promoting early enrollment, and will gradually implement and enforce system edits.
- » DHCS is coordinating support with MCPs and the DHCS Helpline to aid members needing to find another provider.
- » DHCS will provide clear billing guidance to reduce administrative burden and help prevent downstream claim denials.
- » DHCS is providing education and support to assist providers with the enrollment process.

Call to Action: How Key Partners Can Help

- » DHCS recognizes that this change is significant.
- » As with many large-scale policy changes, successful implementation depends on proactive and ongoing collaboration with key partners, such as Medi-Cal MCPs, health care facilities, providers, and advocates.
- » To this end, DHCS is issuing a “call to action” to all key partners to help spread awareness, reduce downstream impacts, and ensure compliance.

Call to Action: MCPs

- » Use the **MCP Monthly Report** available on the Medi-Cal Rx SharePoint to identify and conduct targeted outreach to providers who are not currently enrolled as ORPs.
- » **Socialize to network providers** what must be done to enroll in Medi-Cal as ORPs.
- » Establish **regular and proactive outreach** to network providers to share information through normal channels and provide technical assistance in navigating these changes.
- » **Use DHCS-provided information** to develop call center scripts, provider articles, member flyers, and other resources to assist network providers and members.
- » **Work with members** if/as needed to provide care coordination and assist with finding network providers who are enrolled in Medi-Cal as ORPs.

Call to Action: Health Care Facilities

- » **Socialize to providers** working in your health care facility (e.g., hospital or clinic) what must be done to enroll in Medi-Cal as ORP providers.
- » Establish **regular and proactive outreach** to providers to share information through normal channels and provide technical assistance in navigating these changes.
- » **Use DHCS-provided information** to develop call center scripts, provider articles, member flyers, and other resources to assist providers and members.
- » **Work with members** if/as needed to provide care coordination and assist with finding providers who are enrolled in Medi-Cal as ORP providers.

Call to Action: Billing Providers

- » For **billing providers**, ensure any claims submitted to DHCS or MCPs include appropriate ORP provider information.
- » When ORP providers are identified as not enrolled, raise it for their awareness, provide information, and encourage them to enroll.
- » Both pharmacy and medical claims that do not include a valid ORP NPI will trigger a response back:
 - Specific to pharmacy benefits, alert prescribing providers when Medi-Cal Rx claims are returned with the following supplemental message:

“ACTION REQUIRED! The Prescriber NPI associated with this claim is not enrolled as a Medi-Cal provider. Notify the Prescriber that they are not enrolled with Medi-Cal and need to apply immediately.”
 - Specific to medical benefits, the billing provider will be alerted when the claim is paid that the provider is not enrolled and needs to apply.

Call to Action: Advocates and Member Support Services

- » Subscribe to DHCS list serves to stay informed on policy updates and upcoming implementation dates.
- » Socialize with members information and key messaging on the DHCS and Medi-Cal Rx websites.
- » Prepare for member calls for assistance with consistent messaging that aligns with DHCS' messaging for members.
- » Reach out to DHCS for questions.

ORP Provider Enrollment Information

- » There are three basic requirements for enrolling as an ORP provider for Medi-Cal members, as follows:
 - Must be of the specialty type eligible to order, refer and prescribe in accordance with State law and applicable scope of practice.
 - Must be a provider type that can enroll in the Medi-Cal program.
 - Must enroll with an Individual (Type 1) NPI.

Note: An Organizational (Type 2) NPI is not acceptable.

What ORP Providers Must Do

- » **Step 1:** For billing providers (pharmacy or medical), ensure all prescriptions, orders, or referrals for Medi-Cal members are from an enrolled Medi-Cal provider with a valid/active Type 1 NPI.
- » **Step 2:** For ORP providers, verify [enrollment status](#) using Medi-Cal provider enrollment data.
- » **Step 3:** If already a Medi-Cal enrolled provider with a Type 1 NPI, no further action is required. However, if not enrolled, submit an online applications via PAVE ([Provider Application and Validation for Enrollment](#)).
- » **Step 4:** ORP providers should work directly with billing (pharmacy or medical) providers to prevent claim/encounter and PA denials, helping to mitigate downstream impacts, including to Medi-Cal members. Such as:
 - Including all relevant clinical information on the prescription, referral, or order.
 - Providing a valid/active enrolled Type 1 NPI on the prescription, referral, or order.
 - Being responsive to and expeditious in resolving any claim denial issues.

What ORP Providers Must Do (Continued)

» Important Takeaways

- Claims will deny if any of the following are true:
 - The ORP provider is not Medi-Cal enrolled with their Type 1 NPI.
 - The ORP provider Type 1 NPI is missing, incorrectly identified, or invalid/inactive on the claim form.
- Enrollment processing takes 90 to 180 days to review.
 - Incomplete applications will be returned.
 - Providers should apply as an ORP provider as soon as possible to avoid disruption in member services.

Targeted Communication Plan

» **Targeted Provider Communications**

- Billing system alert messages
- Provider alerts and bulletin announcements
- Stakeholder email updates and other resource documents (e.g., FAQs, flyers)

» **Targeted Member Communications**

- Website and Medi-Cal Rx portal updates
- Stakeholder email updates and other resource documents (e.g., FAQs, flyers)

Upcoming Stakeholder Engagements

» **Targeted Stakeholder/Association Forums**

- DHCS will hold focused sessions with stakeholders during the month of August, to share more detailed timelines for implementation and solicit feedback.

» **ORP Provider Town Hall 2**

- After targeted stakeholder meetings are completed in August and feedback is reviewed and integrated into the implementation plan, DHCS will hold a second Townhall, targeted for late-September, to provide timelines for implementation.

Q&A

Additional Questions?
Please contact ORP@dhcs.ca.gov.

Additional Support and Resources

- » For enrollment policy questions, review the [ORP Enrollment](#) slide deck, or utilize the [Provider Inquiry Form](#).
- » Medi-Cal Provider Enrollment Help Desk
 - Phone (866) 252-1949
 - For more information, visit [Ordering/Referring/Prescribing Only Enrollment Information | DHCS](#)
- » For medical (CA-MMIS) questions, call the Telephone Service Center at (800) 541-5555 (outside of California, please call (916) 636-1980).
- » For additional questions, please contact ORP@dhcs.ca.gov