

Fee-For-Service Enrollment for Non-Medical Transportation (NMT) & Non-Emergency Medical Transportation (NEMT) Providers

Provider Enrollment Division

Updated June 2023

Topics Covered

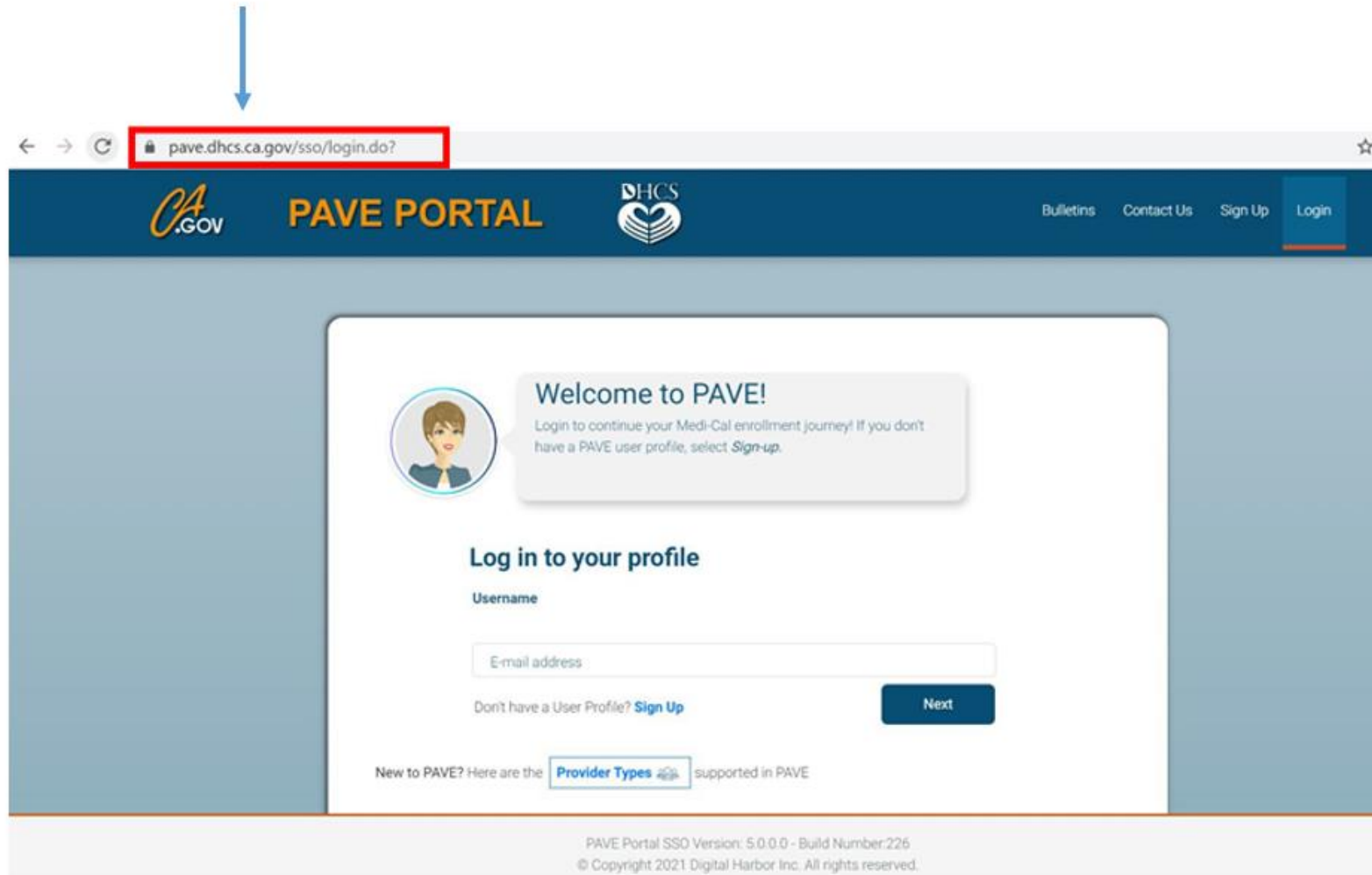
1. Getting Set Up in the PAVE Enrollment System
 - PAVE User
 - PAVE Profile
2. PAVE Questionnaire to Start a NMT and/or NEMT Application
3. Some Medi-Cal Enrollment Requirements
 - Application Fee
 - Modes of Transportation
 - List of Required Documents to Attach
 - Medi-Cal Established Place of Business
 - Who is Authorized to Sign Medi-Cal Applications
4. DHCS Application Review
5. Additional Resources

Getting Set Up in PAVE for First Time Users

» PAVE101 Training Slides

<https://www.dhcs.ca.gov/provgovpart/Pages/PAVE-101-Training-Slides.aspx>

Access PAVE



The screenshot shows a web browser window with the URL `pave.dhcs.ca.gov/sso/login.do?` highlighted in the address bar. A blue arrow points from the top of the page to this URL. The page header includes the **CA.GOV** logo, **PAVE PORTAL** text, the **DHCS** logo, and navigation links for [Bulletins](#), [Contact Us](#), [Sign Up](#), and [Login](#). The main content area features a welcome message, a login form, and a sign-up link.

Welcome to PAVE!

Login to continue your Medi-Cal enrollment journey! If you don't have a PAVE user profile, select [Sign-up](#).

Log in to your profile

Username

E-mail address

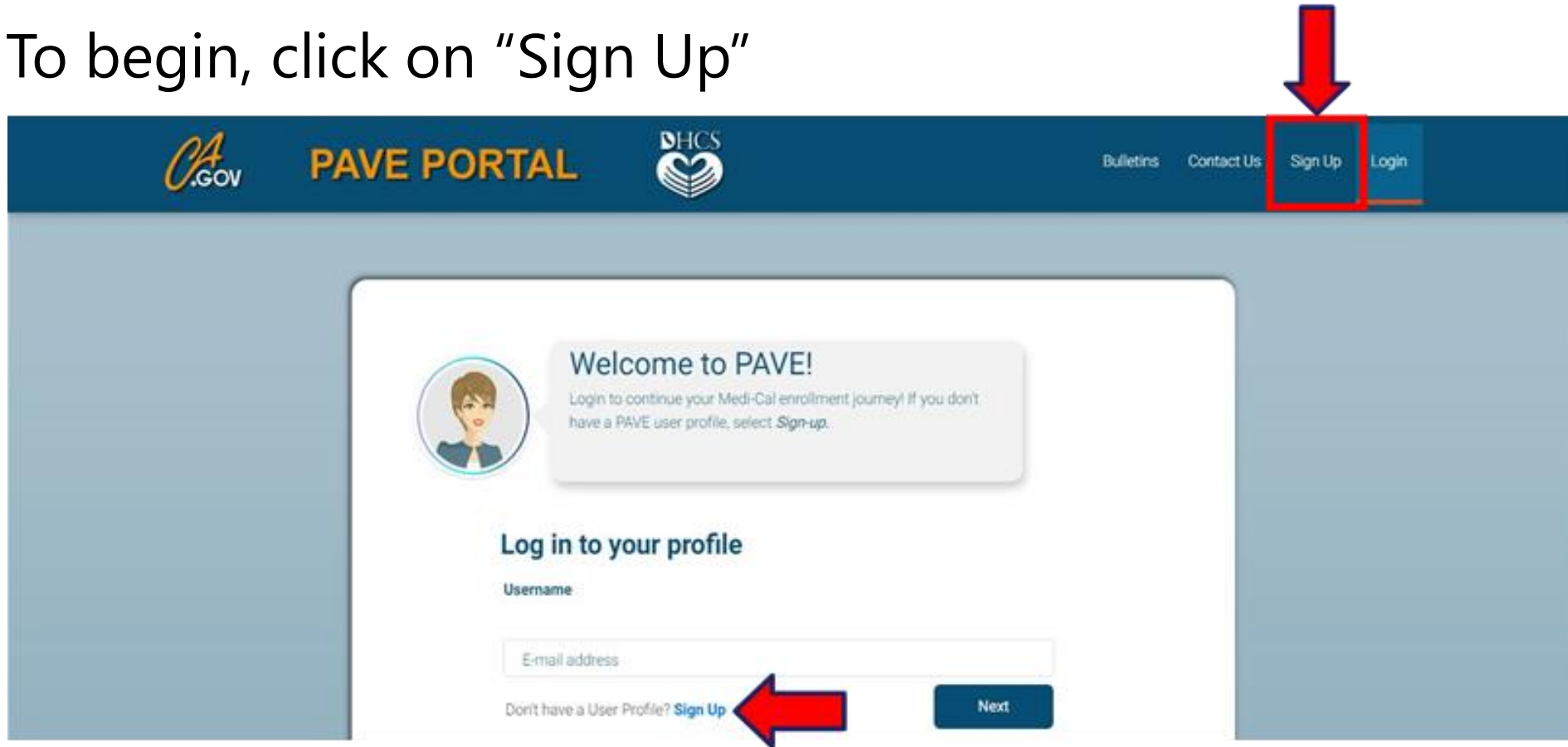
Don't have a User Profile? [Sign Up](#) [Next](#)

New to PAVE? Here are the [Provider Types](#) supported in PAVE

PAVE Portal SSO Version: 5.0.0.0 - Build Number:226
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PAVE User Sign-Up Process

» To begin, click on "Sign Up"



The screenshot displays the PAVE Portal website. The top navigation bar is dark blue and contains the following elements from left to right: the CA.GOV logo, the text "PAVE PORTAL", the DHCS logo, and a series of links: "Bulletins", "Contact Us", "Sign Up", and "Login". The "Sign Up" link is highlighted with a red square, and a large red arrow points down to it from above the page. Below the navigation bar, the main content area has a light blue background. In the center, there is a white rectangular box. Inside this box, on the left, is a circular profile picture of a woman. To the right of the picture is a grey rounded rectangle containing the text "Welcome to PAVE!" followed by "Login to continue your Medi-Cal enrollment journey! If you don't have a PAVE user profile, select [Sign-up](#)." Below this, the text "Log in to your profile" is displayed. Underneath, there are two input fields: "Username" and "E-mail address". At the bottom of the white box, there is a link "Don't have a User Profile? [Sign Up](#)" and a dark blue button labeled "Next". A large red arrow points left towards the "Sign Up" link.

PAVE User Sign-Up Process

» Complete the required information and click "NEXT"

The screenshot shows a web browser window with the URL `pave.dhcs.ca.gov/sso/register.do`. The page is titled "Sign Up" and contains the following fields and elements:

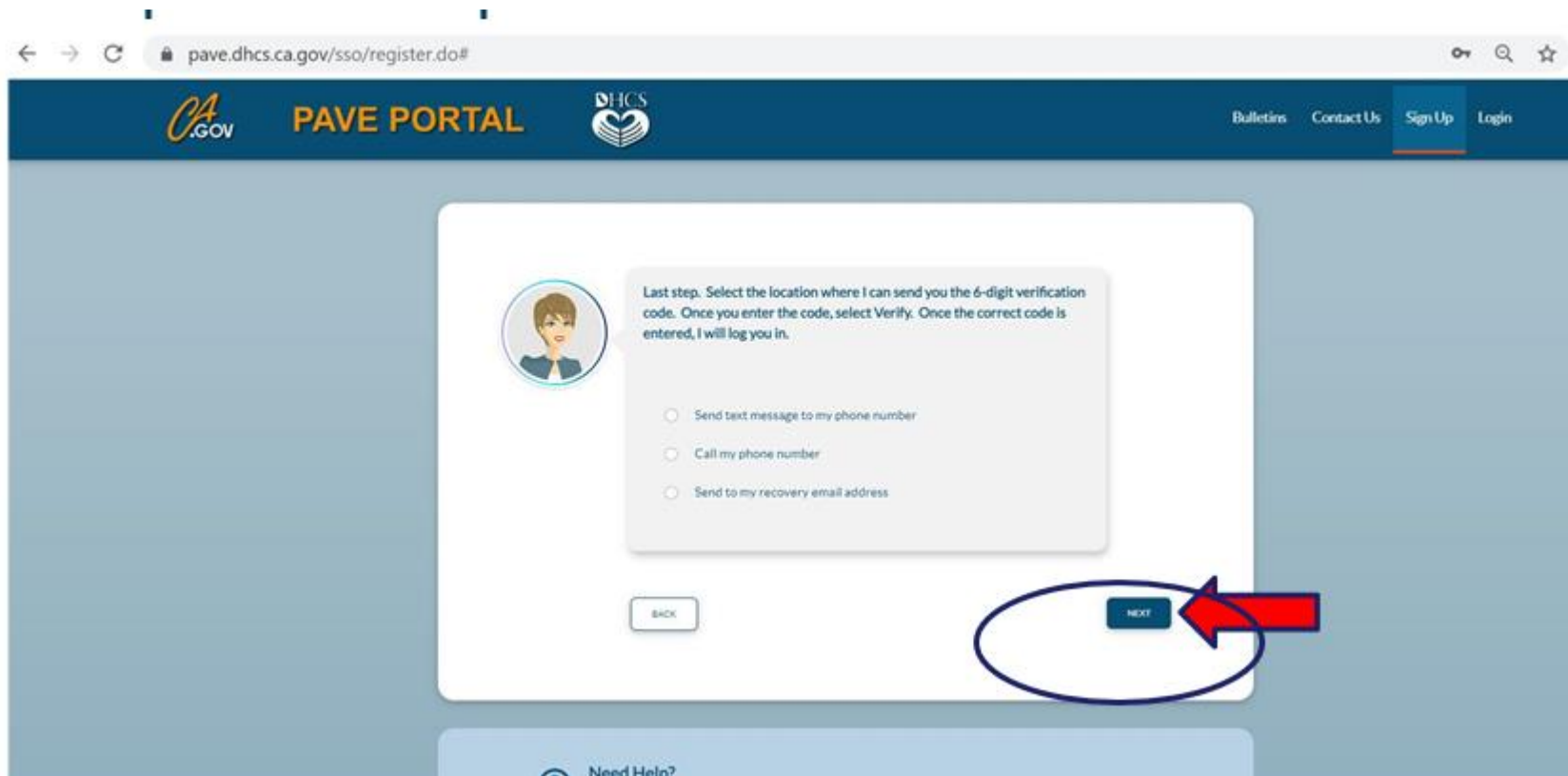
- First name:** Sandy
- Last name:** Lee
- Username:** sandy.1.lee@protonmail.com
- Password:** (masked with dots)
- Confirm:** (masked with dots)
- Phone number:** (555) 555-5555 (with a note: "Enter your phone number. I prefer that you use your personal cell number so I can send you a text message just in case you forget your password. Don't worry, I will safeguard this number and will not give it out to anyone. Example: include area code, (999) 888-7777")
- Recovery email address:** sandy.1.lee@protonmail.com
- Verification:** "I'm not a robot" (checked) and reCAPTCHA logo.
- Footer:** "By selecting Next, you agree to the [Terms & Conditions](#) for PAVE Portal."

A red arrow points to the "NEXT" button, which is highlighted with a purple oval.

PAVE Portal SSO Version: 5.0.0.0 - Build Number: 226
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PAVE User Sign Up Process

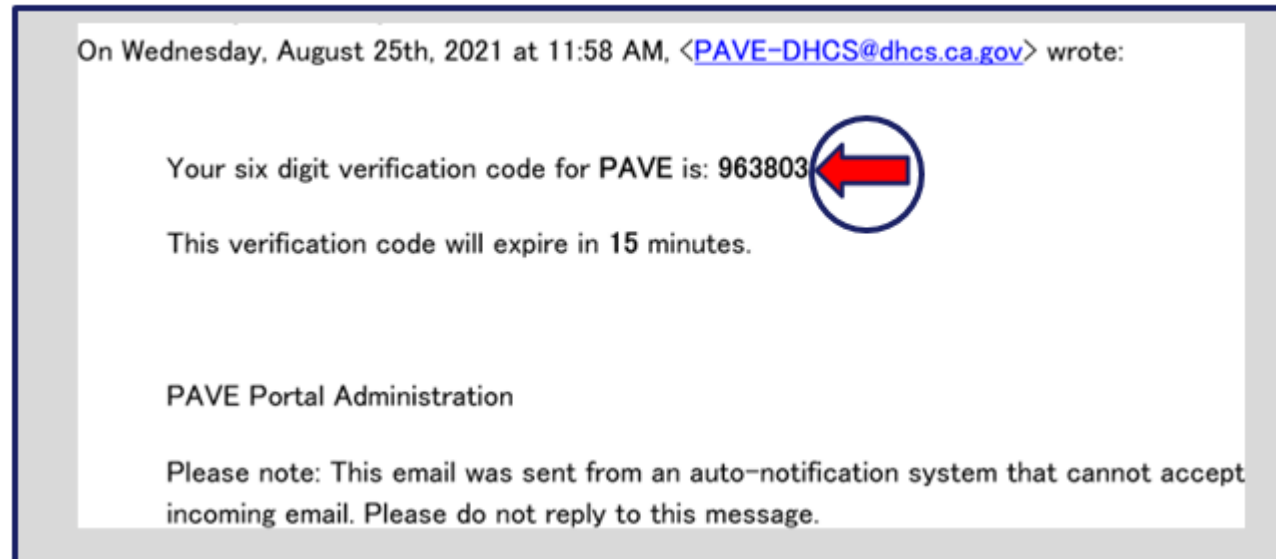
- » You will be prompted to select how you wish to receive the six-digit verification code, after selecting the preferred option click "NEXT"



The screenshot shows a web browser window with the URL `pave.dhcs.ca.gov/sso/register.do#`. The page header includes the **CA.GOV** logo, **PAVE PORTAL**, and the **DHCS** logo. Navigation links for **Bulletins**, **Contact Us**, **Sign Up** (highlighted), and **Login** are present. The main content area features a white card with a female user avatar and the following text: "Last step. Select the location where I can send you the 6-digit verification code. Once you enter the code, select Verify. Once the correct code is entered, I will log you in." Below this text are three radio button options: "Send text message to my phone number", "Call my phone number", and "Send to my recovery email address". At the bottom of the card are two buttons: "BACK" and "NEXT". The "NEXT" button is circled in blue, and a large red arrow points to it from the right. A "Need Help?" link is visible at the bottom of the page.

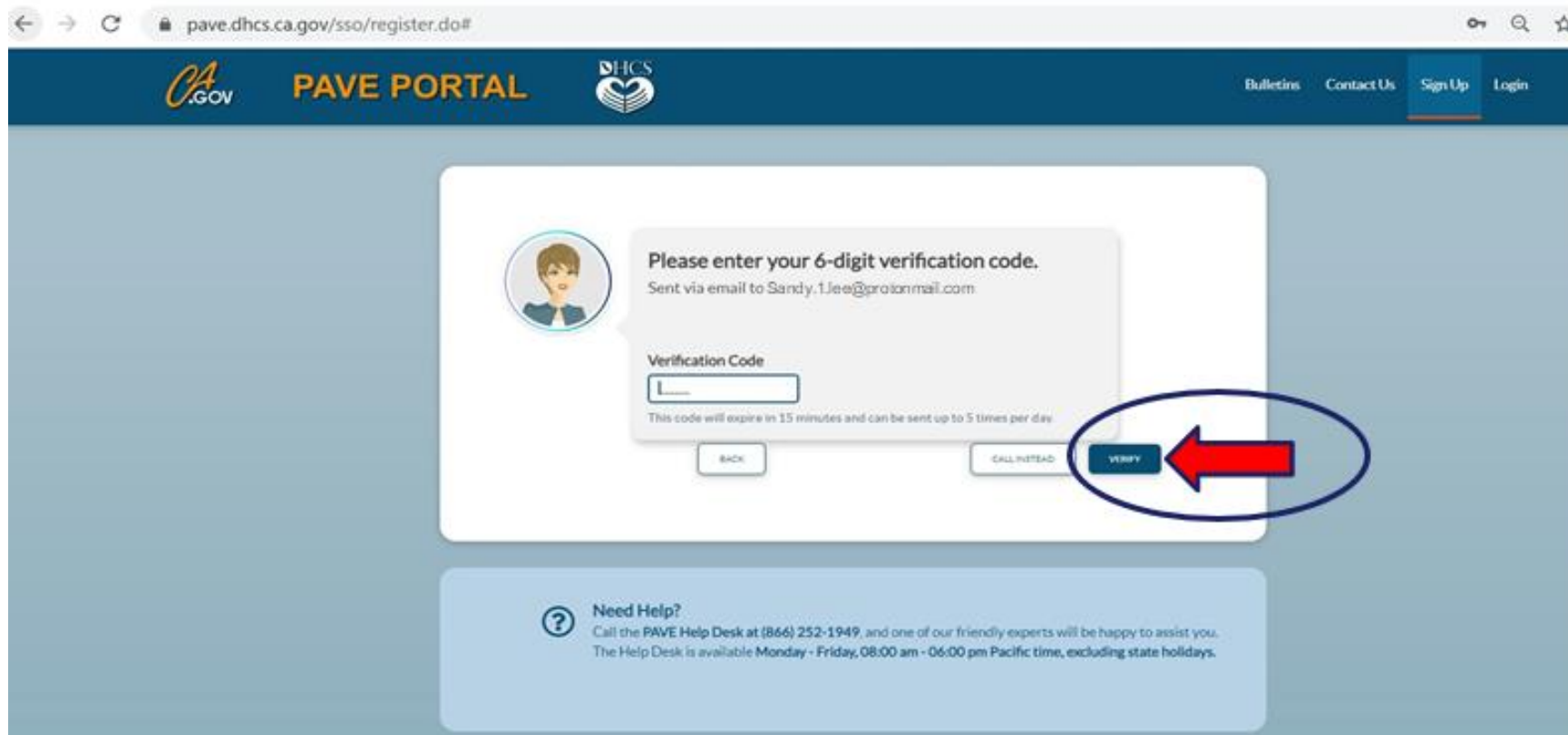
PAVE User Sign Up Process

- » Each of the three options provides a verification code valid for only 15 minutes.



PAVE User Sign Up Process

» Enter the six-digit verification code and click "VERIFY"



The screenshot shows a web browser at the URL `pave.dhcs.ca.gov/sso/register.do#`. The page header includes the **CA.GOV** logo, **PAVE PORTAL**, and the **DHCS** logo. Navigation links for **Bulletins**, **Contact Us**, **Sign Up** (highlighted), and **Login** are present. The main content area features a user profile icon and a message: "Please enter your 6-digit verification code. Sent via email to Sandy.t.jee@protonmail.com". Below this is a "Verification Code" input field. A note states: "This code will expire in 15 minutes and can be sent up to 5 times per day." At the bottom of the form are three buttons: **BACK**, **CALL INSTEAD**, and **VERIFY**. A red arrow points to the **VERIFY** button, which is also circled in blue. A footer section titled "Need Help?" provides contact information for the PAVE Help Desk.

CA.GOV **PAVE PORTAL** **DHCS** [Bulletins](#) [Contact Us](#) [Sign Up](#) [Login](#)

Please enter your 6-digit verification code.
Sent via email to Sandy.t.jee@protonmail.com

Verification Code

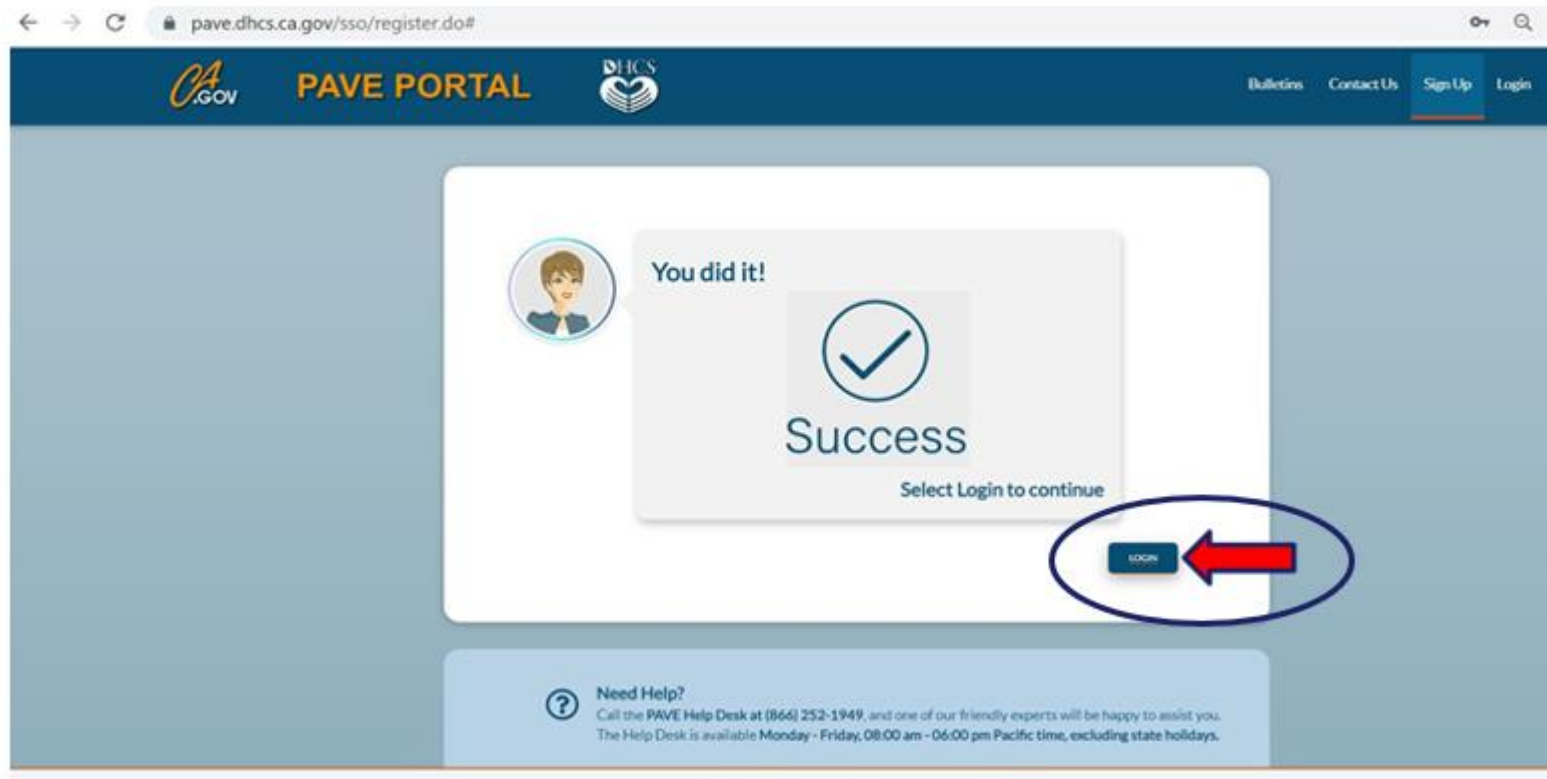
This code will expire in 15 minutes and can be sent up to 5 times per day.

[BACK](#) [CALL INSTEAD](#) [VERIFY](#)

Need Help?
Call the PAVE Help Desk at (866) 252-1949, and one of our friendly experts will be happy to assist you.
The Help Desk is available Monday - Friday, 08:00 am - 06:00 pm Pacific time, excluding state holidays.

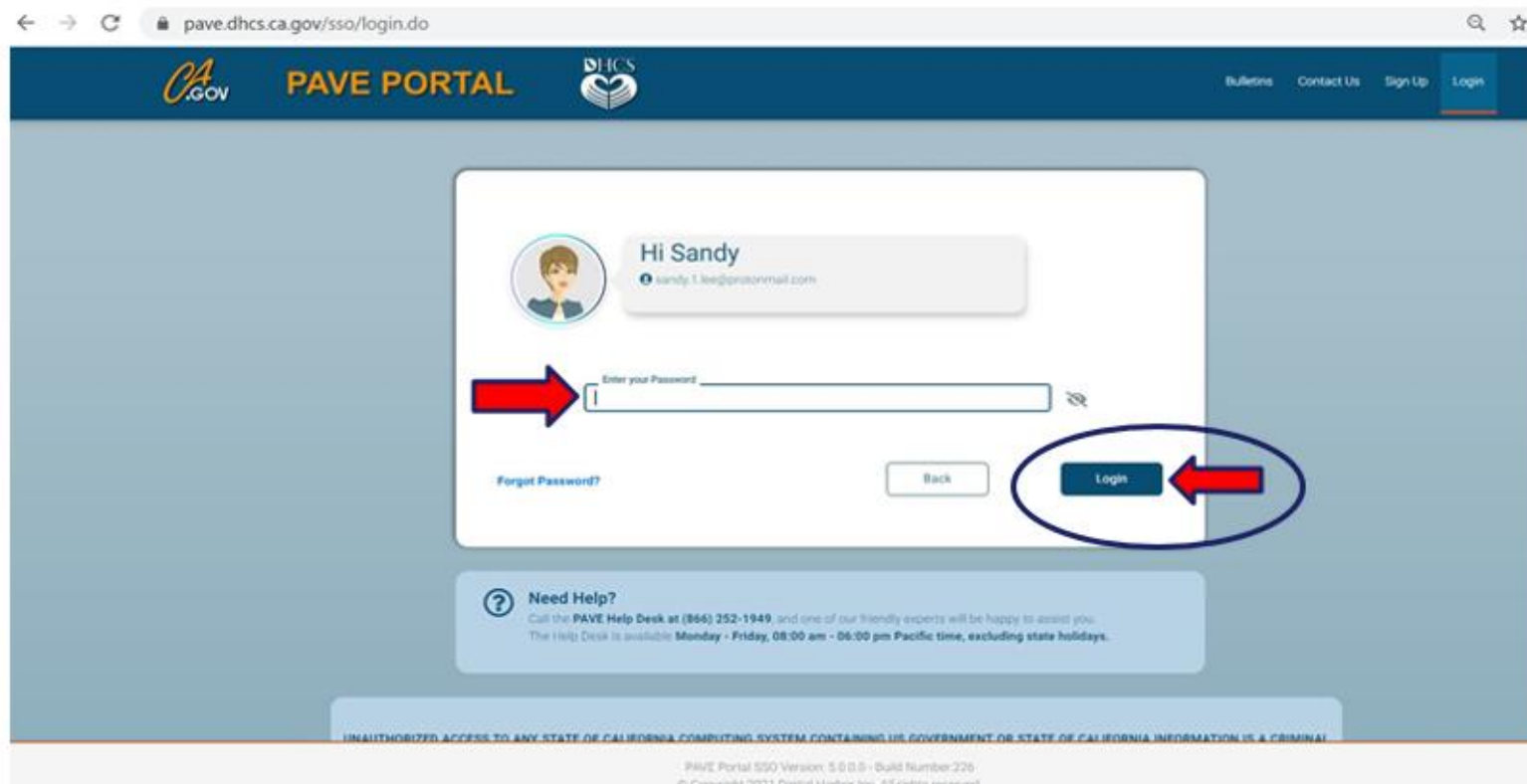
PAVE User Sign Up Process

» Once PAVE confirms successful verification, click "LOGIN".



PAVE User Sign Up Process

» Now enter your email and your password and click “LOGIN”



The screenshot shows the PAVE Portal login page. The browser address bar displays `pave.dhcs.ca.gov/sso/login.do`. The page header includes the **CA.GOV** logo, **PAVE PORTAL** title, the DHCS logo, and navigation links for [Bulletins](#), [Contact Us](#), [Sign Up](#), and [Login](#). The main content area features a user profile card for "Hi Sandy" with the email `sandy.1.lee@protonmail.com`. Below the card is a password input field labeled "Enter your Password" with a red arrow pointing to it. To the left of the field is a [Forgot Password?](#) link. To the right are [Back](#) and [Login](#) buttons, with the [Login](#) button circled in blue and a red arrow pointing to it. A help section at the bottom provides contact information for the PAVE Help Desk. A footer disclaimer states: "UNAUTHORIZED ACCESS TO ANY STATE OF CALIFORNIA COMPUTING SYSTEM CONTAINING US GOVERNMENT OR STATE OF CALIFORNIA INFORMATION IS A CRIMINAL OFFENSE." The footer also includes version information: "PAVE Portal SSO Version: 5.0.0.0 - Build Number: 226" and copyright notice: "© Copyright 2021 Digital Harbor Inc. All rights reserved."

PAVE Sign Up

- » Now that you are set up as a PAVE user, you will need to create your PAVE profile which is a workspace where groups or individual providers create applications and manage accounts.

PAVE Profile Set Up

- » Make sure you are logged in with your user email and password.
- » Enter the NPI of your company, and click "Verify"
- » Once the NPI is verified, you will enter the PAVE Profile name that represents your company or companies and click "Create my PAVE Profile"

PAVE Profile



Starting a NMT and/or NEMT Application

- » In your PAVE profile, click on Applications, then "+ New Application".
- » You will complete a questionnaire to start the correct application.
- » The following slides are a guide for how to move through the questionnaire to start a Medical Ground Transportation application.

First Questionnaire Page

Start Application


Business Structure

NPI


Provider Type

Language


Last step




The following questionnaire will help determine the correct type of application for you. Hovering over the options will provide additional help!



☐ I'm enrolled in Medi-Cal or Medi-Cal Dental, and I want to create an application




☐ I'm enrolled in Medi-Cal or Medi-Cal Dental, and I want to affiliate with another provider





☒ I'm new to Medi-Cal or Medi-Cal Dental, and I want to create a new application

What type of provider are you?





☐ I'm an individual provider







☐ I'm a group of individual providers






☒ I'm a healthcare business





☐ I need to report Supplemental changes

If you want help with any of these options, select the in-context tutorial video icons for assistance.



Once you have made your choice, select Continue

← Previous

Continue →

Second Questionnaire Page

Your Business Structure

Start Application Business Structure NPI Provider Type Language Last step

Welcome! Let's create your application. I'll be here to help guide you throughout the process. To start, you can hover over each option below to get additional information about the application type.

What is your health care business structure?

☐ Sole Proprietorship

☒ Other entity

☐ I'm enrolling

Once you have made your choice, select Continue

Other entity - Other Healthcare Business

- I'll be using my Type 2 NPI.
- The provider type of this application is not Physician/Surgeon or Allied.

Select "Other Entity" if your business is a Corporation, LLC or Partnership, even if you are the only owner

Previous Continue

Correct NPI Type depends on your Business Structure

1. Type 2 NPI

- **Business entities** such as a corporations, LLCs, and Partnerships must use a Type 2 NPI, **even if** you are the only owner of the business.

2. Type 1 NPI

- **Sole Proprietors** must use a Type 1 NPI. A sole proprietorship is a business owned and operated by one person and the business and the person are one and the same for income tax reporting.

Third Questionnaire Page

Enter Your NPI and click Verify

Start Application

Business Structure

NPI

Provider Type

Language

Last step



Okay, now that I know you want to create a new application, what is the NPI for this new application? Remember, if you selected sole proprietor you must enter a Type 1 NPI. Any other business entity type requires a Type 2 NPI.

☐ I don't have an NPI, and I'd like to continue with the application process.

National Provider Identifier (NPI)

1123456789

Verify →

Fourth Questionnaire Page

PAVE Verifies NPI with NPPES

Progress bar: Start Application, Business Structure, **NPI**, Provider Type, Language, Last step

Okay, now that I know you want to create a new application, what is the NPI for this new application? Remember, if you selected sole proprietor you must enter a Type 1 NPI. Any other business entity type requires a Type 2 NPI.

☐ I don't have an NPI, and I'd like to continue with the application process.

National Provider Identifier (NPI) **1123456789** **Verify →**

National Provider Identifier (NPI) **1123456789**

Type **2-Organization**

Business name **[Redacted]**

Taxonomy code(s) **343900000X**

NPPES address (registered) **[Redacted]**

Is this the correct information?

☒ Yes ☐ No

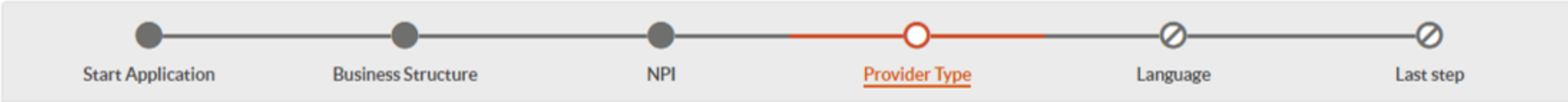
Once you have made your choice, select **Continue**

← Previous **Continue →**


Check that this information belongs to your business before continuing. If you make an error keying in your NPI, you can click "Previous" and re-enter it on the page before.

Fifth Questionnaire Page

Select Provider Type – Medical Transportation




Start Application Business Structure NPI Provider Type Language Last step



Now, select your **provider type** from the drop-down below, then select **Continue** to move on.

Medical Transportation ▼



i If you can not find the provider type in this list, please review the business structure page to make sure you have selected the correct option. It could also be that the provider type you are looking for is not supported by PAVE Portal. To see a complete list of provider types by business structure, click [here](#)


Once you have made your choice, select **Continue**

← Previous

Continue →

Sixth Questionnaire Page

Languages Offered



Do you offer services in other languages besides English?

Once you have made your choice, select **Continue**

Select Languages

- ☐ All displayed Languages
- ☐ Spanish
- ☐ Portuguese
- ☐ Italian
- ☐ French
- ☐ Japanese
- ☐ Cantonese
- ☐ Mandarin
- ☐ Other Chinese
- ☐ Korean
- ☐ German
- ☐ Arabic
- ☐ Armenian
- ☐ Cambodian
- ☐ Farsi
- ☐ Hmong
- ☐ Vietnamese
- ☐ Russian
- ☐ Tagalog
- ☐ Hindi
- ☐ Other

[< Previous](#)[Continue >](#)

Seventh Questionnaire Page

Summary Page – Double Check!

Start Application


Business Structure

NPI

Provider Type

Language

Last step



Before you can continue, please review the summary below. It contains all your previous selections to create this application. You can select the Previous button to go to the previous sections and make any changes you need.

Please review the summary of information that you've entered so far. If everything looks correct, select *continue* to proceed forward creating this application or select *previous* to make any necessary changes.

Start Application

I'm new to Medi-Cal or Medi-Cal Dental, and I want to create a new application

I'm a healthcare business

Business Structure

Other entity

NPI of the application

1123456789 [View Details](#)

Provider Type

Medical Transportation

Language

← Previous

Continue →

Medi-Cal Requirements

- » The Medi-Cal Program requirements are woven into the application process.
- » The next few slides show:
 - Application Fee
 - Modes of Transportation
 - List of Required Documents to Attach
 - Medi-Cal Established Place of Business
 - Who is Authorized to Sign Medi-Cal applications

Application Fee

- Each year the Center for Medicare and Medicaid Services determines the new application fee amount.
- Application fee for 2023 calendar year is \$688.00. Current fee information can be found here, <https://www.dhcs.ca.gov/provgovpart/Pages/Application-Fees.aspx>
- Payment is done electronically and is part of the PAVE Transportation application.
- Application fees are used to offset the cost of conducting the required screenings.
- The Department will deny applications where the applicant fails the application fee requirement.

Application Fee Exemptions

Transportation providers may be exempt from paying the application fee if they meet one of the exemptions below:

- » Already **enrolled** in and/or **paid** the applicable fee to Medicare or another state's Medicaid or Children's Health Insurance Program (CHIP) at the service location. **Verification is required.**
- » Exempt by waiver pursuant to federal law. **Verification is required.**

Application Fee Waiver Requests

- » To request a waiver, an applicant/provider must include with submission of the application a letter that describes:
 - 1) the hardship,
 - 2) the justification for an exception, and
 - 3) supporting documentation.
- » Acceptable justification documents may include:
 - Historical Costs Reports
 - Recent financial reports such as balance sheet and income statements
 - Cash flow statements
 - Most recent tax returns
 - Other profit and loss statements for the location the provider claims the hardship

Application Fee Waiver Requests

- » Waivers are not approved by PED. PED forwards the requests to the federal agency, Centers for Medicare and Medicaid Services (CMS), for approval
- » The applicant may submit both an application fee and a fee waiver request in order to allow their application to be processed without waiting for the CMS approval. If the waiver is granted, a refund will be issued.

Modes of Transportation - NMT

Non-Medical Transportation (NMT)

- » Non-Medical Transportation” can be provided by vehicles such as a passenger car, mini-van, taxicab, or any other form of public or private conveyance. For NMT, the eligible Medi-Cal member would not have a medical or physical condition that would require the specialized equipment and personnel of an emergency ambulance, a litter van or an NEMT qualified wheelchair van.
- » Wheelchair vans can qualify for NMT.

The screenshot shows a web form titled "Modes of Transportation - NMT". At the top, there is a progress bar with three steps: "Hours of Operation", "Mode of Transportation" (which is the current step and highlighted with a red circle), and "Summary". Below the progress bar, there is a question in a rounded rectangle: "Which type of Transportation does your business provide? Select Medical Transportation (Emergency and Nonemergency) and/or Non-Medical transportation (select all that apply). Remember, Non-Medical transportation services can also be provided by Medical Transportation providers and Medical Transportation types of vehicles. Passenger vehicles and vans that can accommodate only one person in a wheelchair can qualify for non-medical services only". To the left of the question is a small cartoon character of a woman. Below the question, there is a section titled "Type of Transportation". Under this section, there is a sub-section titled "Medical Transportation" which contains two checkboxes: "Emergency" and "Nonemergency", both of which are currently unchecked. To the right of the "Medical Transportation" section, there is a checkbox for "Non-Medical Transportation" which is checked. A large red arrow points to this checked checkbox. At the bottom of the form, there are two buttons: "Previous" on the left and "Continue" on the right.

Hours of Operation Mode of Transportation Summary

Which type of Transportation does your business provide? Select Medical Transportation (Emergency and Nonemergency) and/or Non-Medical transportation (select all that apply). Remember, Non-Medical transportation services can also be provided by Medical Transportation providers and Medical Transportation types of vehicles. Passenger vehicles and vans that can accommodate only one person in a wheelchair can qualify for non-medical services only

Type of Transportation

Medical Transportation

☒ Non-Medical Transportation

☐ Emergency

☐ Nonemergency

Previous Continue

Non-Medical Transportation (NMT) Vehicle & Driver Document Requirements

Vehicle Document Requirements

- » DMV Commercial Registration
- » Proof of Commercial Vehicle Insurance

Driver Document Requirements

- » State-Issued Driver's License
- » CA DMV Issued Driving History Printout
- » Medical Examination Report Form (MCSA 5875)
- » Medical Examiner's Certificate (MCSA 5876)

Modes of Transportation - NEMT

Non-Emergency Medical Transportation (NEMT)

The screenshot shows a web form for selecting transportation modes. At the top, a progress bar has three steps: 'Hours of Operation', 'Mode of Transportation' (which is highlighted with a red circle), and 'Summary'. Below the progress bar, a blue-bordered box contains instructions: 'Which type of Transportation does your business provide? Select Medical Transportation (Emergency and Nonemergency) and/or Non-Medical transportation (select all that apply). Remember, Non-Medical transportation services can also be provided by Medical Transportation providers and Medical Transportation types of vehicles. Passenger vehicles and vans that can accommodate only one person in a wheelchair can qualify for non-medical services only'. To the left of this box is a small cartoon character. Below the instructions, there are two main sections. The first section, 'Type of Transportation', has a 'Medical Transportation' label and two checkboxes: 'Emergency' (unchecked) and 'Nonemergency' (checked). A red circle is drawn around the 'Nonemergency' checkbox, and a red arrow points to it from the right. The second section, 'Please select the specific mode of Medical Transportation that your business provides. Select all that applies (At least one is required)', contains two sub-sections. The 'Aircraft' section has two checkboxes: 'Helicopter' (unchecked) and 'Fixed-wing' (unchecked). The 'Ground Transportation' section has three checkboxes: 'Wheelchair Van' (checked), 'Litter Van' (checked), and 'Ambulance' (unchecked). Both the 'Wheelchair Van' and 'Litter Van' checkboxes are circled in red, and two red arrows point to them from the right.

Hours of Operation Mode of Transportation Summary

Which type of Transportation does your business provide? Select Medical Transportation (Emergency and Nonemergency) and/or Non-Medical transportation (select all that apply). Remember, Non-Medical transportation services can also be provided by Medical Transportation providers and Medical Transportation types of vehicles. Passenger vehicles and vans that can accommodate only one person in a wheelchair can qualify for non-medical services only

Type of Transportation

Medical Transportation ☐ Non-Medical Transportation

☐ Emergency

☒ Nonemergency

Please select the specific mode of Medical Transportation that your business provides. Select all that applies (At least one is required)

Aircraft

☐ Helicopter

☐ Fixed-wing

Ground Transportation

☒ Wheelchair Van

☒ Litter Van

☐ Ambulance

» **Only** Select "Nonemergency" (NEMT) + Wheelchair Van **and/or** Litter Van if it applies:

- » 1. **Wheelchair vans** – these vehicles must meet specific regulatory requirements including the seating capacity for two persons seated in standard-sized wheelchairs inside the vehicle, an additional emergency exit other than the loading entrance which can accommodate a standard-sized wheelchair, and a lift or ramp with a load capacity of at least 450 pounds which can be secured to the vehicle.
- » 2. **Litter vans** – these vehicles must meet specific regulatory requirements including the capacity to load and transport a patient comfortably lying on a standard-sized gurney. Litter vans require two loading entrances as well as a certified driver and attendant.

NEMT Vehicle/Operator Document Requirements

Vehicle Documents Required

- » DMV Commercial Registration
- » Proof of Commercial Vehicle Insurance
- » Brake and Lamp Certificate (required if the DMV Commercial Registration lists a salvaged title, otherwise this is optional)

Operator Documents Required

- » State-Issued Driver's License
- » CA DMV Issued Driving History Printout
- » First Aid and CPR Certificate
- » Alcohol Lab Test Results
- » Medical Examination Report Form (MCSA 5875)
- » Medical Examiner's Certificate (MCSA 5876)
- » Standard Pre-employment Drug Test

NEMT Specific Wheelchair Van Requirements

» **The disclosed wheelchair van(s) must have all of the following to qualify as an NEMT Vehicle:**

- Additional Emergency exit, other than loading entrance, that can accommodate a standard-sized wheelchair.
- Seating capacity to accommodate at least two patients seated in standard-sized wheelchairs.
- Fasteners to secure the wheelchair to the vehicle which must be of sufficient strength to prevent the chairs from rotating, to prevent the chair wheels from leaving the floor in case of sudden movement and to support the chairs and patients in the event the vehicle is overturned.
- Lift or ramp with a load capacity of at least 450 pounds which can be secured to the vehicle. (cont'd)

NEMT Specific Wheelchair Van Requirements

» **The disclosed wheelchair van(s) must have all of the following to qualify as an NEMT Vehicle:**

- Seats covered with washable vinyl, or similar impermeable material which shall be in sanitary and functional condition.
- Identification display of the name under which the wheelchair van is doing business or providing service, on both sides and rear of each wheelchair van in letters that contrast sharply with the background. Lettering for upper case letters shall be not less than four inches in height, or proportionate width, and of color readily visible during daylight. Lower case letters shall be no less than three-fourths of the upper case height. All wheelchair vans operated under a single license shall display the same identification.

NEMT Specific Litter Van Requirements

» The disclosed litter van(s) must have all of the following to qualify as an NEMT Vehicle:

- Loading entrance large enough to accommodate a patient comfortably lying on a standard-sized gurney.
- Additional Emergency exit, other than loading entrance, that can accommodate a standard-sized gurney.
- Fasteners to secure the gurney to the vehicle which must be of sufficient strength to prevent the gurney from rolling or sliding, to prevent the gurney from leaving the floor in case of sudden movement and to support the gurney and patient in the event the vehicle is overturned.
- Seats covered with washable vinyl or similar impermeable material which shall be in sanitary and functional condition. (cont'd)

NEMT Specific Litter Van Requirements

» The disclosed litter van(s) must have all of the following to qualify as an NEMT Vehicle:

- Identification display of the name under which the litter van is doing business or providing service, on both sides and the rear of each litter van in letters that contrast sharply with the background. Lettering for upper case letters shall be not less than four inches in height, or proportionate width, and of a color readily visible during daylight. Lower case letters shall be no less than three-fourths of the upper case height. All litter vans operated under a single license shall display the same identification. A litter van shall not display identification as an ambulance.
- One two-person gurney with mattress and upper and lower restraining straps.
- Cot fastener, floor or wall type.
- Litter vans shall be operated by a certified driver and an attendant and there shall be an Attendant seat in the patient compartment.

Other Required Documents For All Provider Types

- » Articles of Incorporation (only for corporations)
- » State-Issued Identification or Driver's License
- » Verification of TIN/EIN with one of the accepted documents: IRS Form 8109-C, Form 941, Letter 147-C, or Form SS-4 (Confirmation Notification)
- » Business License/Tax Certificate (if required by local government)
- » Fictitious Business Name Statement (if business uses a fictitious name)
- » Lease Agreement (if leasing service location)
- » Workers' Compensation Insurance

Established Place of Business Requirements – NEMT and NMT

- » Is Open and Conducting Business at time of application submission
- » Is in a building either owned or leased by the applicant
- » Has all State and local business permits and licenses to conduct business
- » Obtains and maintains Worker's Compensation Insurance as required by state law

Who Can Sign Applications

- » CCR, Title 22, Section 51000.30(a)(2)(B)
 - Applications shall... “Be signed under penalty of perjury by an individual who is the **sole proprietor, partner, corporate officer**, or by **an official representative of a governmental entity or non-profit organization**, who has the authority to legally bind the applicant seeking enrollment, or the provider seeking continued enrollment, or the provider seeking enrollment at a new, additional, or change in location, as a Medi-Cal provider.”
 - Signatures cannot be delegated to any other person.

More Online Resources

- » Medi-Cal Enrollment requirements specific for Non-Medical Transportation Providers are also published on the DHCS website:

https://www.dhcs.ca.gov/provgovpart/Pages/Non-Medical_Transportation_Providers.aspx

The Enrollment Process

Initial Review

- » Complete your application in the PAVE portal.
- » Submit your application.
- » DHCS reviews applications in the order received.
- » The legal allowance for the initial review period is 180 days, but DHCS strives to complete initial reviews much sooner.

The Enrollment Process

Correcting Deficiencies

- » If your application is incomplete, PED will return it to you for corrections.
- » You will be notified via email to log into the PAVE system to fix the noted deficiencies in your application.
- » You need to go into the application and make the corrections and then resubmit your application to PED within 60 days.

Common Denial Causes

» **Wrong NPI Type for the Business Entity**

- The owner has formed a corporation or an LLC, but submits the application using a Type 1 NPI. Corporations, Partnerships, and LLCs must use a Type 2 NPI.

» **Failure to Fix All Deficiencies**

- Expired documents
- Address on documents do not match the service address in the application
- Providing Automobile Registration rather than Commercial Registration
- Requesting NEMT as a mode of transportation when the disclosed vehicles do not qualify.

The Enrollment Process

Onsite Inspections

- » Your application may be referred for an onsite inspection.
- » You will be notified of this action through PAVE.
- » Onsite inspections include the following:
 - NEMT Applications (verifying ownership, application information and ensuring provider has an established place of business and Vehicle(s)/Operator(s) meet requirements)
 - NMT Applications (verifying ownership, application information is accurate and complete and ensuring provider has an established place of business)

The Enrollment Process Post-Onsite

- » Depending on the findings of the onsite, PED will either:
 - a) Approve your application
 - b) Deny your application
 - c) Return your application to you for additional information or corrections that must be made within 60 days and then you resubmit it to PED.

The Enrollment Process

Approval and Denial

- » If your application is approved, you will be notified via email to log into the PAVE system to receive your Approval Letter.
- » If your application is denied, you will be notified via email to log into the PAVE system to receive your Denial Letter with Appeal Rights.

Additional Resources

- » For technical assistance with the PAVE system, please direct questions to the PAVE Help Desk at (866) 252-1949.
- » For Medi-Cal enrollment questions, you can send an email inquiry by following this link [Provider Enrollment Division \(PED\) \(ca.gov\)](https://www.dhcs.ca.gov/providerenrollment/Pages/Provider%20Enrollment%20Division%20(PED)%20(ca.gov)) and then click on "PED, then "Inquiry Form", or call (916) 323-1945.
- » For additional help in PAVE, click on the link below to take you to the PAVE homepage where you can access Provider Training videos and other tutorials.

<https://www.dhcs.ca.gov/provgovpart/Pages/PAVE.aspx>