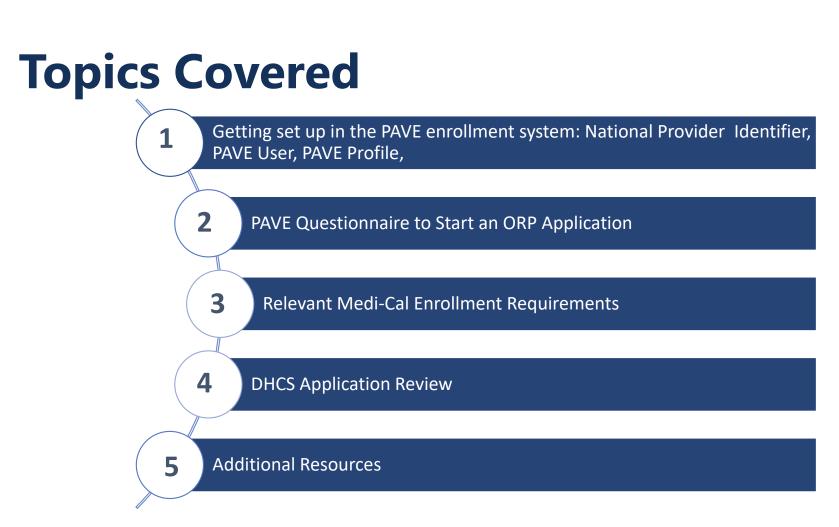
Ordering, Referring, Prescribing (ORP) Enrollment for Doula Providers

Provider Enrollment Division December 2022

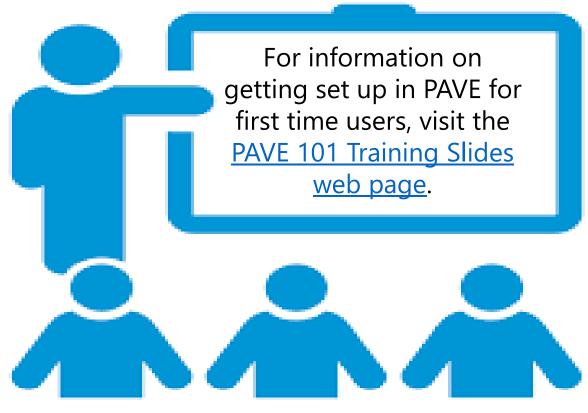




National Provider Identifier (NPI)

- » Before getting started in PAVE ORP providers must obtain a Type-1 NPI
- » If you do not have an NPI, you can obtain one online by visiting the <u>NPPES website</u>.

Getting Set Up in PAVE for First Time Users



Access PAVE

$\leftarrow \ \ \rightarrow \ \ \mathbf{G}$	a pave.dhcs.ca.gov	v/sso/login.do?							\Rightarrow
	0.Gov	PAVE PO	RTAL	NHCS	Bulletins	Contact Us	Sign Up	Login	
		New to PAVE	Login to your service a Point of the service a Point of the service a User of the servic	Profile? Sign Up Nex	1				
				PAVE Portal SSO Version: 5.0.0.0 - Build Number:226 © Copyright 2021 Digital Harbor Inc. All rights reserved.					

PAVE User Sign-Up Process

➤To begin, click on "Sign Up."

i enercioni a	eight ep.	
Caov PA		Bulletins Contact Us Sign Up Login
	Welcome to PAVE! Login to continue your Medi-Cal enrollment journey! If you d have a PAVE user profile, select Sign-up. Log in to your profile Username E-mail address	dont

PAVE User Sign-Up Process

Complete the required information and click

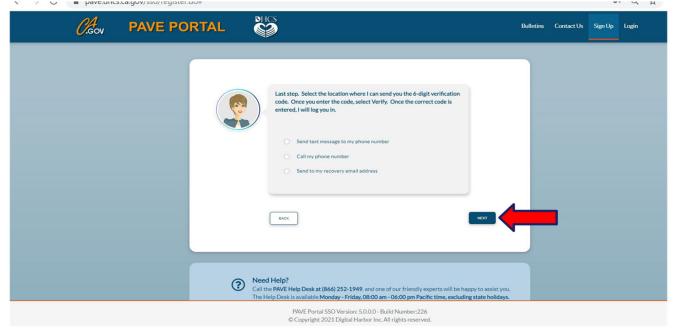
"NEXT."

← → C	/register.do	QŢ
	Sign Up Protrame Sandy Lastrame Lastram	
	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) 888-77777 Prove number (\$55) 555 5555 Record y email 832455	
	sandy 1 see gprotonmail.com	
	PWVE Portal SSO Version: 5.0.0.0 - Build Number:226 © Copyright 2021 Digital Harbor Inc. All rights reserved.	

PAVE User Sign-Up Process > You will be prompted to select how you wish to

receive the 6-digit verification code. After

selecting the preferred option, select "Next."



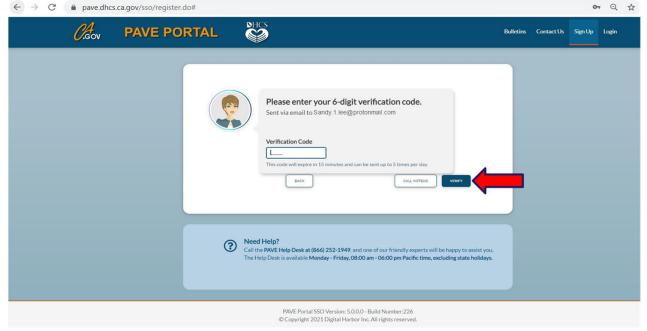
PAVE User Sign Up Process

\geq Each of the three options provides a verification code valid for

15 minutes. On Wednesday, August 25th, 2021 at 11:58 AM, <<u>PAVE-DHCS@dhcs.ca.gov</u> wrote: Your six digit verification code for PAVE is: 963803 This verification code will expire in 15 minutes. PAVE Portal Administration Please note: This email was sent from an auto-notification system that cannot accept incoming email. Please do not reply to this message.

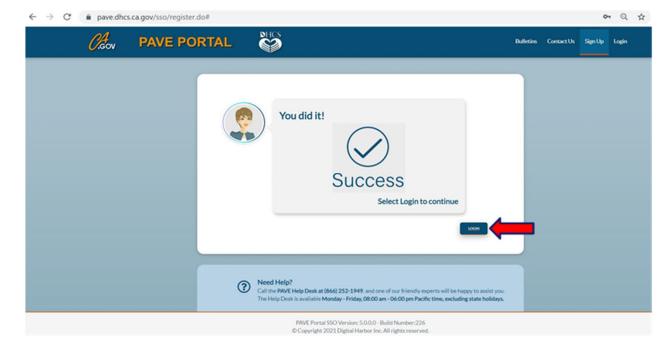
PAVE User Sign-Up Process

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



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."

← → C	ics.ca.gov/sso/login.do	Q	Ŷ
<i>Ol</i> sov	PAVE PORTAL	Login	
	Hi Sandy Bardy 1 Sergiprotormal.com ther your Passent Prepor Passent? Bock Logit		
	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 - Fridag, 08:00 am - 06:00 pm Pacific time, excluding state holidays.		
	INAUTHORIZED ACCESS TO ANY STATE OF CALIFORNIA COMPUTING SYSTEM CONTAINING US COVERNMENT OR STATE OF CALIFORNIA INFORMATION IS A CRIMINAL PAVE Portal SSO Version 5 0.0 0 - Build Number 226		
	Portal SSD Version: 5:0:0 - Suid Nember 226 Copyright 2021 Digital Harbor Inc. All rights reserved.		
02/24/2022			

PAVE Sign Up

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

A different profile should only be created if there is a different social security number or tax identification number from an existing account.

PAVE Profile Set Up

Ensure you're logged in with your email and password

Enter your NPI and click "Verify" Once NPI is verified, enter a PAVE Profile name for your legal name and click "Create my PAVE Profile"

PAVE Profile



Starting an ORP Application

In your PAVE profile, click on "Applications", then "+ New Application."

Complete the questionnaire to start the correct application. The following slides will guide you through the questionnaire to start an ORP application.

First Questionnaire Page

02/24/2022

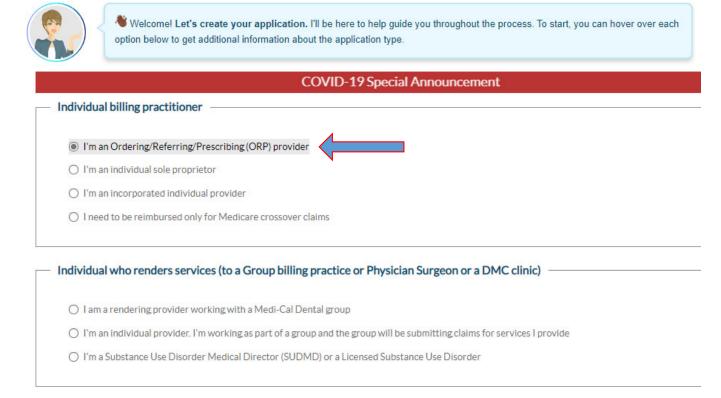
Select the radio button: "I'm new to Medi-Cal or Medi-Cal Dental, and I want to create a new application." From the sub-menu select: "I'm an individual provider."

'm enrolled in Medi-Cal or Medi-Cal Dental, and I want t	create an application	
	create an application	
I'm enrolled in Medi-Cal or Medi-Cal Dental, and I want	affiliate with another provider	
'm new to Medi-Cal or Medi-Cal Dental, and I want to cr	ate a new application	
at type of provider are you?		
💿 l'm an individual provider 🔡		
🖡 🔿 I'm a group of individual providers 🛛 目		
🔿 l'm a healthcare business 🛛 📙		
I need to report Supplemental changes		
	I'm new to Medi-Cal or Medi-Cal Dental, and I want to creat at type of provider are you? I'm an individual provider I'm a group of individual providers I'm a healthcare business	 I'm an individual provider I'm a group of individual providers I'm a healthcare business

Second Questionnaire Page Your Business Structure – Read Lucy!

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Select the radio button: "I'm an Ordering/Referring/Prescribing (ORP) provider".



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Third Questionnaire Page NPI

> Enter your type 1 NPI and click the "verify" button.

•	• •	O			(
Start Application	Business Structure	NPI	Provider Type	Language	Last step
Okay now th	nat I know you want to create a new app	lication what is the NPI for this	s new application? Remember, if you se	elected sole	
	ou must enter a Type 1 NPI. Any other b				
National Provider	r Identifier (NPI)		Marife		
		Required value	Verify 🗲		
		Required value			
Previous					
Previous					Cor

Third Questionnaire Page PAVE Verifies NPI with NPPES

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Check that the information displayed belongs to you before continuing. If you make an error keying in your NPI, you can re-enter the NPI and click "verify." Once confirmed, click "yes" and then "continue."

•	•	O			(
Start Application	Business Structure	<u>NPI</u>	Provider Type	Language	Last step
	at I know you want to create a new app u must enter a Type 1 NPI. Any other bu		is new application? Remember, if you se Type 2 NPI.	lected sole	
National Provider	Identifier (NPI)		Verify 🗲		
tional Provider Identifier (NPI)					
pe	1-Individual				
siness name					
konomy code(s)					
PES address (registered)			-		
his the correct information?					
Yes O No					
ice you have made your choice, sel	ect Continue				
					Transmission of
← Previous					Continue

Fourth Questionnaire Page Select Provider Type

Select "Doula Individual" from the drop-down list.

•	•		0		(
Start Application	Business Structure	NPI	Provider Type	Language	Last step
Now, select	your provider type from the drop-down be	low, then select Continue	to move on.		
[Select a Provider Type] Audiologist Certified Acupuncturist Certified Nurse Anesthetist Certified Nurse Midwife Certified Nurse Practitioner Chiropractor Dentist - General or Specialist Doula Individual Hearing Aid Dispenser Licensed Clinical Social Workers (LC	ure, click	-	bu have selected the correct option. It could	d also be that the provider type you	are looking for is not supported by Continue ->
Licensed Marriage Family Therapist Licensed Midwife Licensed Professional Clinical Coun Occupational Therapist Ocularist and Dispensing optician Optometrist Orthotist	(LMFT)				
Physical Therapist Physician/Surgeon	•	PAVE	Provider Portal		

Fifth Questionnaire Page Languages Offered

Select any additional languages offered at your service location besides English and click



Once you have made your choice, select Cor	ntinue
elect Languages	
	All displayed Languages
	Spanish
	Portuguese
	🗆 Italian
	French
	Japanese
	Cantonese
	Mandarin
	Other Chinese
	C Korean
	German
	Arabic
	Armenian
	Cambodian
	Farsi
	Hmong
	Vietnamese
	Russian
	Tagalog
	Hindi
	Taiwanese
	Mongolian
	Laotian
	Punjabi
	Other

02/24/2022



Continue 🔶

Sixth Questionnaire Page Summary Page

Review the summary page to ensure that all items selected in the questionnaire are correct. If any updates are needed click "previous." If the summary page is correct select "continue" to generate the application.

Start Application	Business Structure	NPI	Provider Type	Language	Last step
	an continue, please review the summary evious button to go to the previous section		revious selections to create this application of the second s	on. You can	
ase review the summary of inforn	nation that you've entered so far. If everyt	hing looks correct, select <i>cor</i>	ntinue to proceed forward creating this ap	plication or select previous to make	any necessary changes.
irt Application I'm <mark>new to Medi-Cal or Medi-</mark> I'm an individual provi	Cal Dental, and I want to create a new app	olication			
siness Structure Individual billing practitioner					
I'm an Ordering/Refer	ring/Prescribing (ORP) provider				
I of the application					
ovider Type ula Individual					
nguage					
Spanish					
Previous					Contir

Medi-Cal Requirements

The Medi-Cal Program requirements are woven into the application process.

The next two slides show:

>Who is authorized to sign Medi-Cal applications

≻List of required documents to attach

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 and must be signed by the provider who is applying as an ORP.

Some Required Documents

This slide lists documents that you may need to attach to the ORP application. There may be additional required documents.

□ Valid state-issued identification

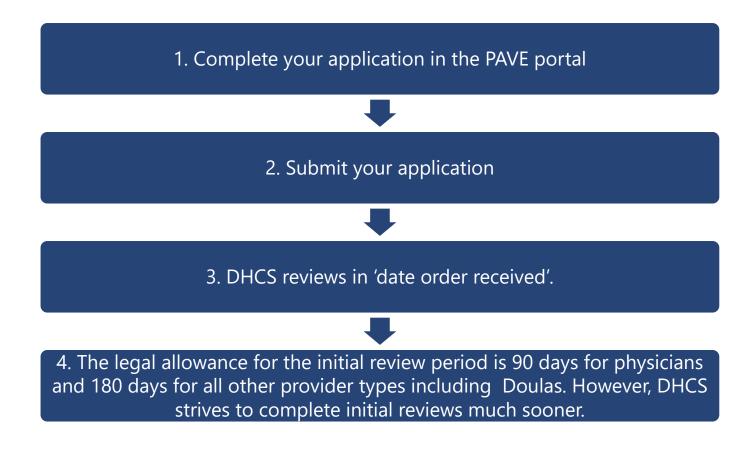
□ Proof of meeting the experience or training pathway for Doula providers

□ If designated as high risk, Livescan receipt

Online Resources



Enrollment Process Initial Review



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 ORP Application Deficiencies

- » Documents not being legible or complete.
- » Driver's license or state issued identification being expired.

The Enrollment Process Approval, Referral or Denial

- » If approved, referred, or denied you will be notified via email to log into the PAVE system. Click on the "my messages" tab to view any letters and/or messages.
- » If your application is approved your message in PAVE will include an attached approval letter. Additionally, your enrollment record can be found in PAVE by clicking on the "accounts" tab.
- » If your application is referred for comprehensive review, your message in PAVE will include an attached letter.
- » If your application is denied your message in PAVE will include an attached letter with the denial reason(s) and your appeal rights.

Additional Resources

- » For technical assistance with the PAVE system, please direct questions to the PAVE Help Desk at 1.866.252.1949.
- » For Medi-Cal enrollment questions, please email Intranet - AutoForms (ca.gov) or call 1.916.323.1945.
- » For additional help in PAVE, visit the <u>PAVE</u> <u>homepage</u> where you can access Provider Training videos and other tutorials.

Thank You

