Fee-For-Service Enrollment for Providers of Durable Medical Equipment using the PAVE System

Provider Enrollment Division

February 2022

DHCS

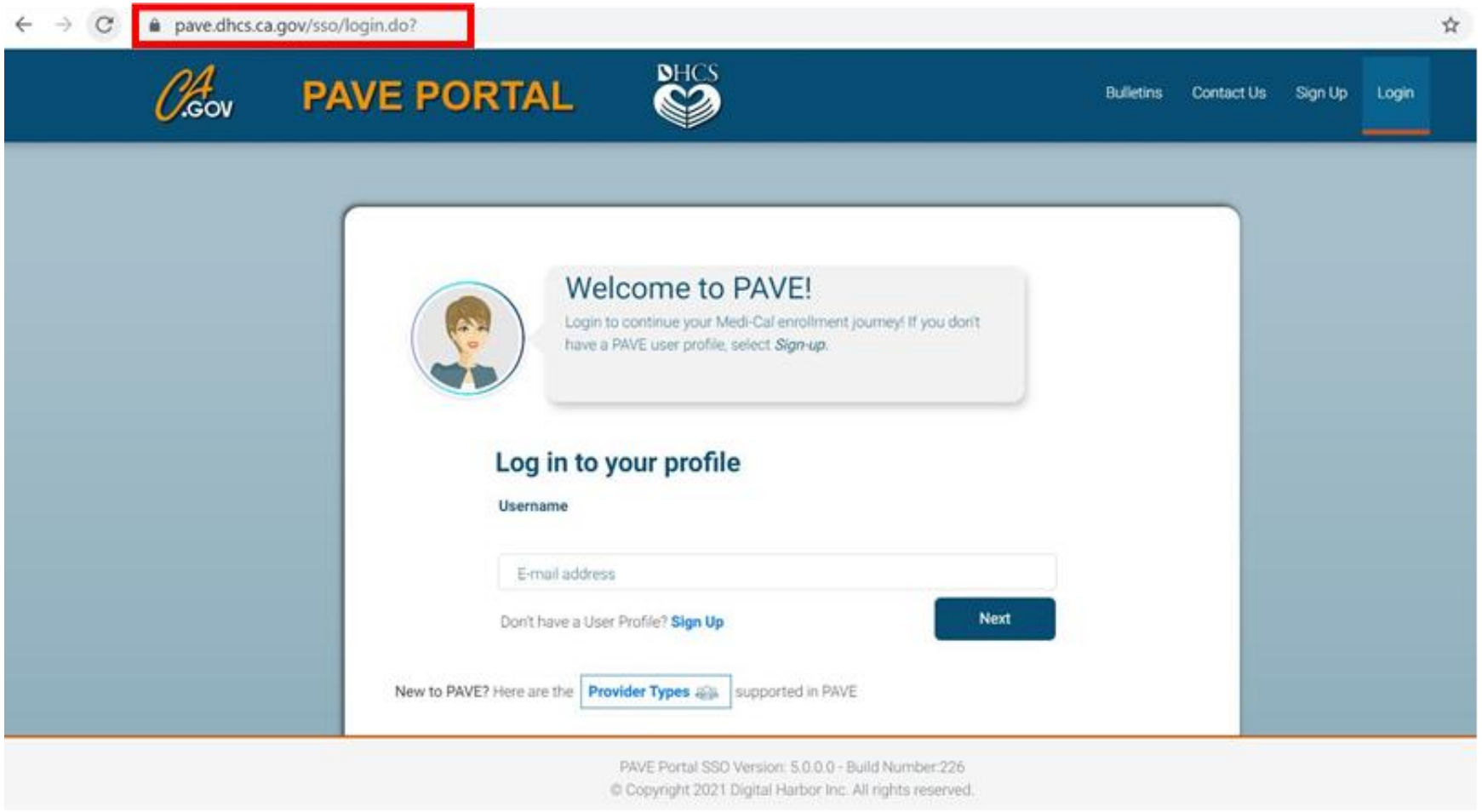
Topics Covered

1. Getting Set Up in the PAVE Enrollment System
2. PAVE Questionnaire to Start a DME Application
3. Relevant Medi-Cal Enrollment Requirements
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


pave.dhcs.ca.gov/sso/login.do?
PAVE PORTAL
DHCS
Bulletins
Contact Us
Sign Up
Login
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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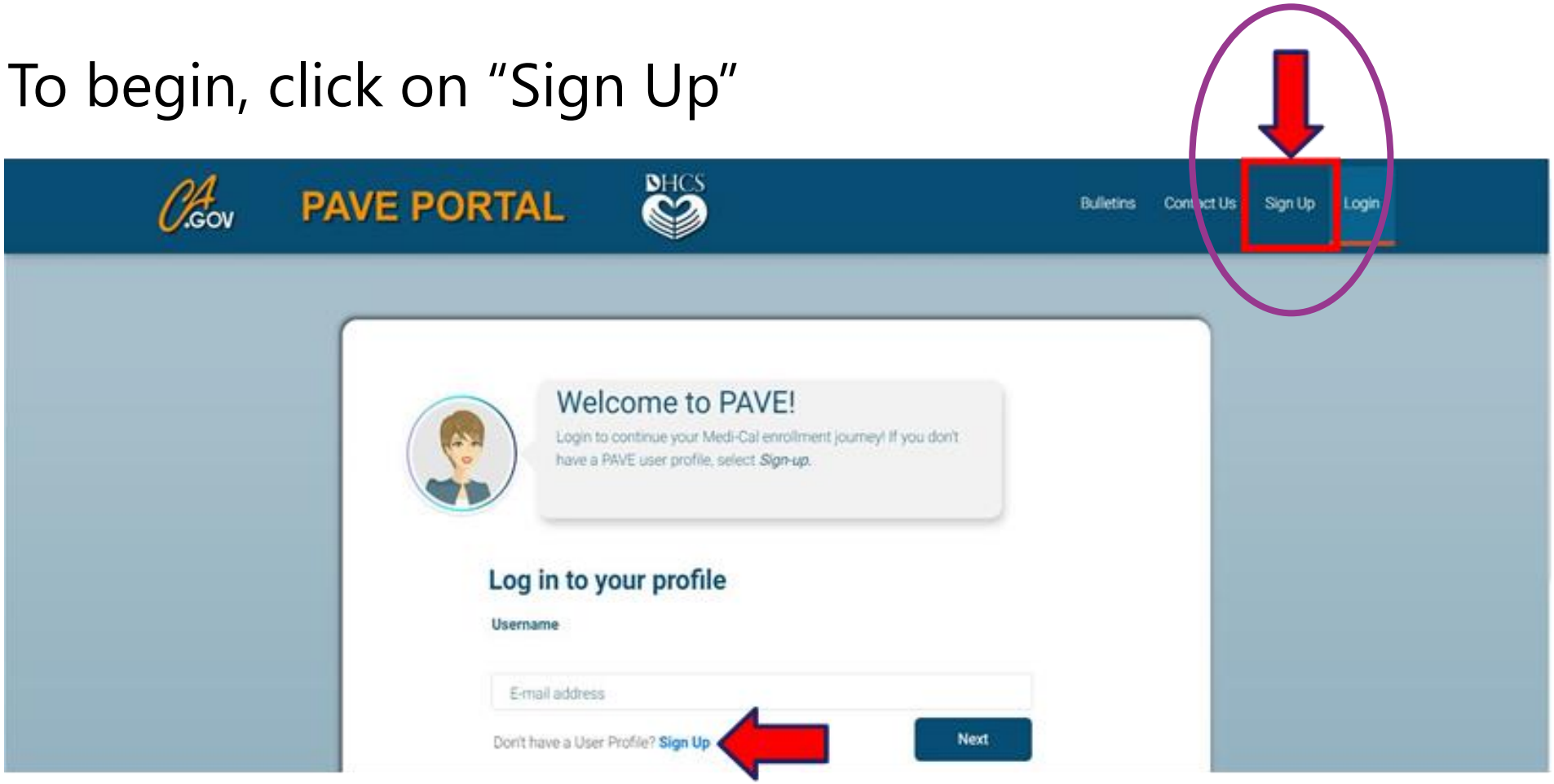
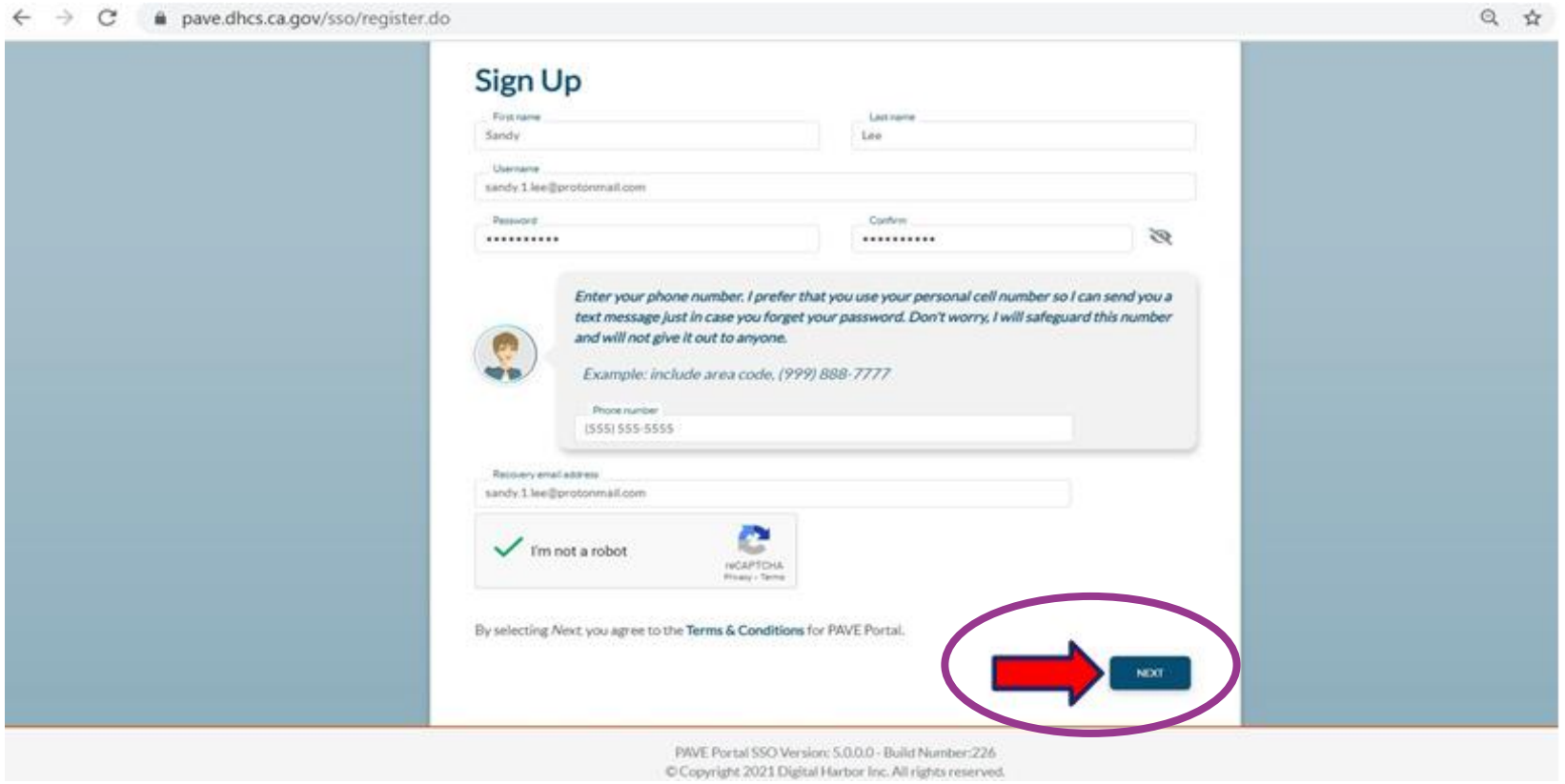
PAVE User Sign-Up Process

» To begin, click on “Sign Up”



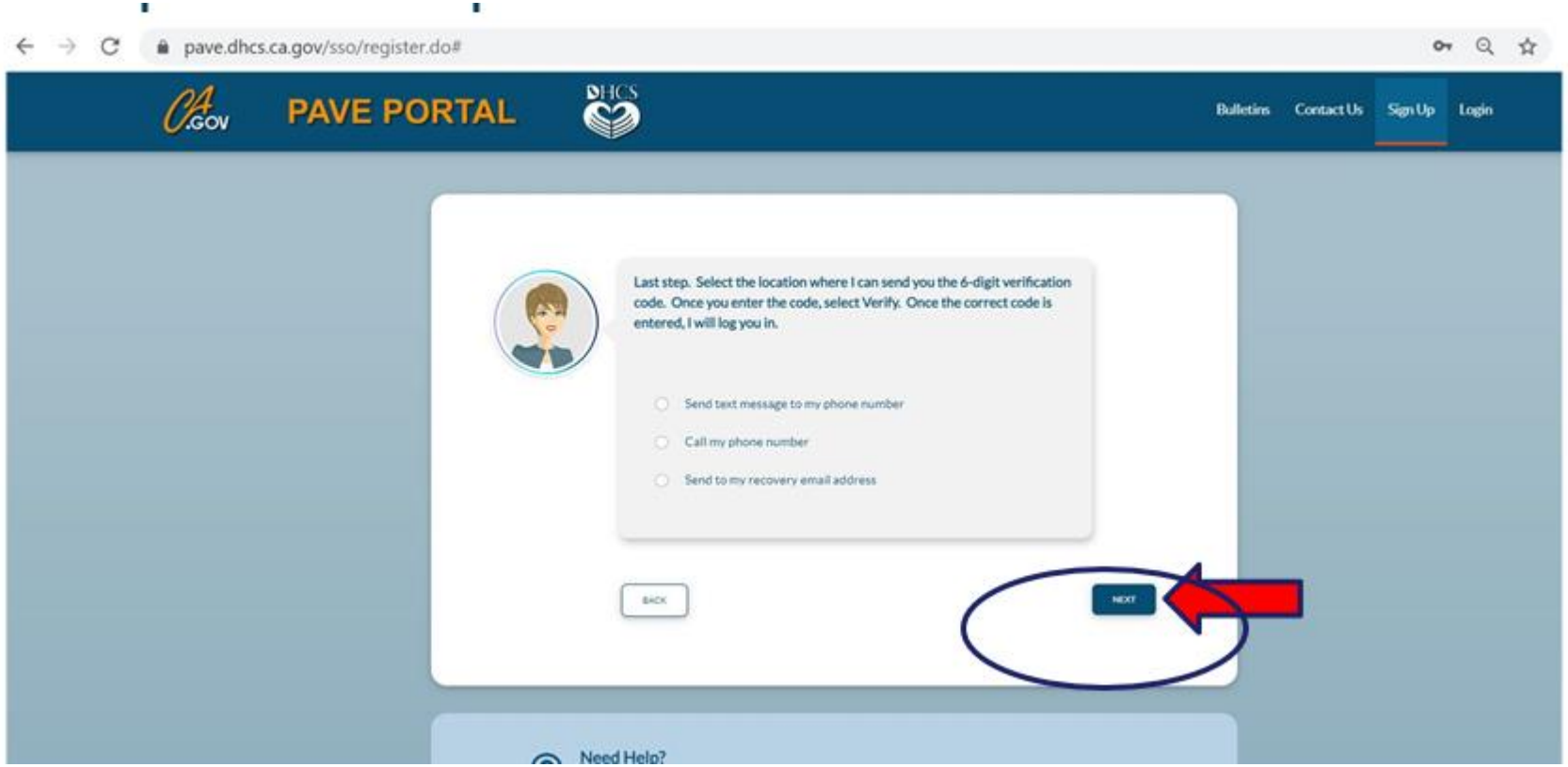
PAVE User Sign-Up Process

» Complete the required information and click “NEXT”



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”

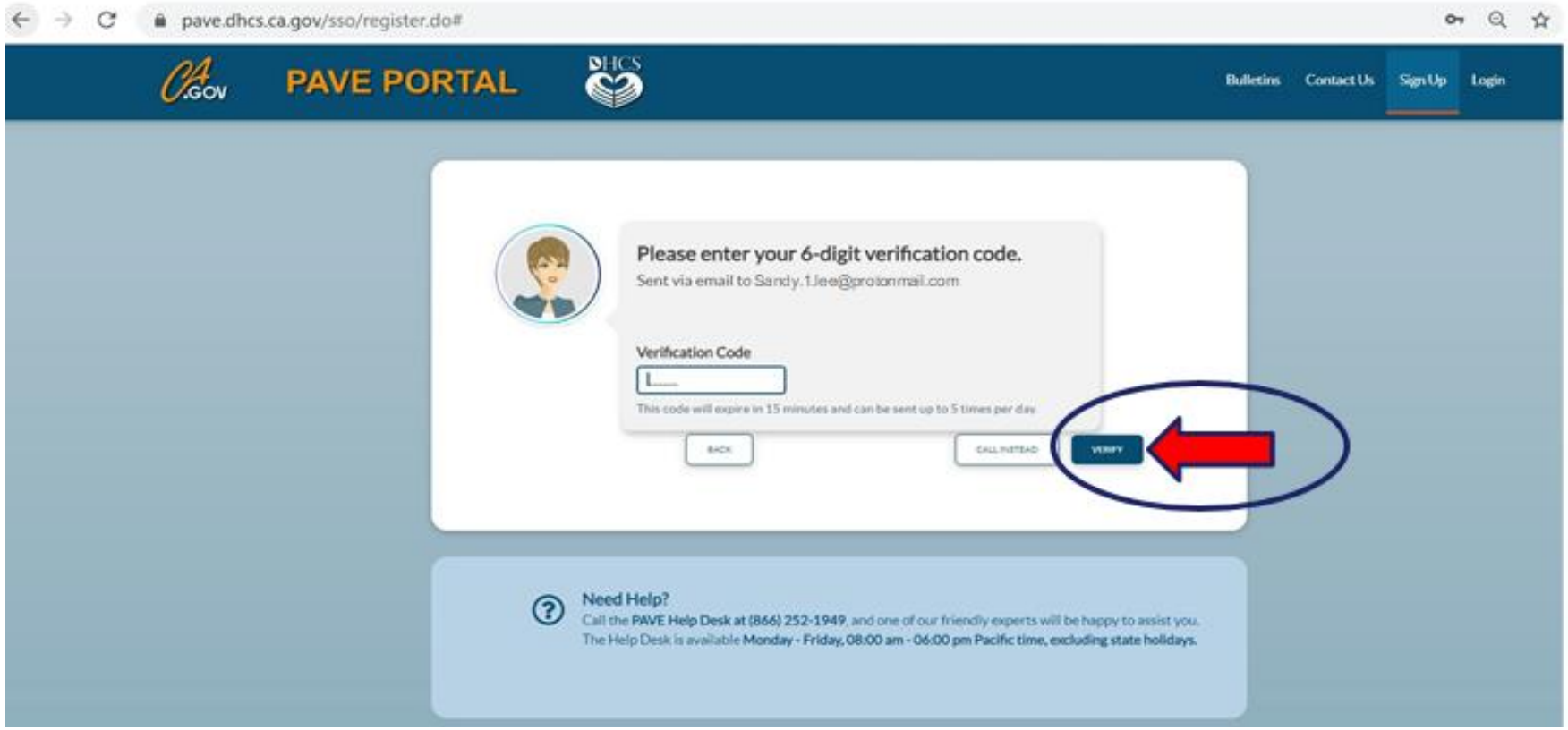


PAVE User Sign Up Process

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

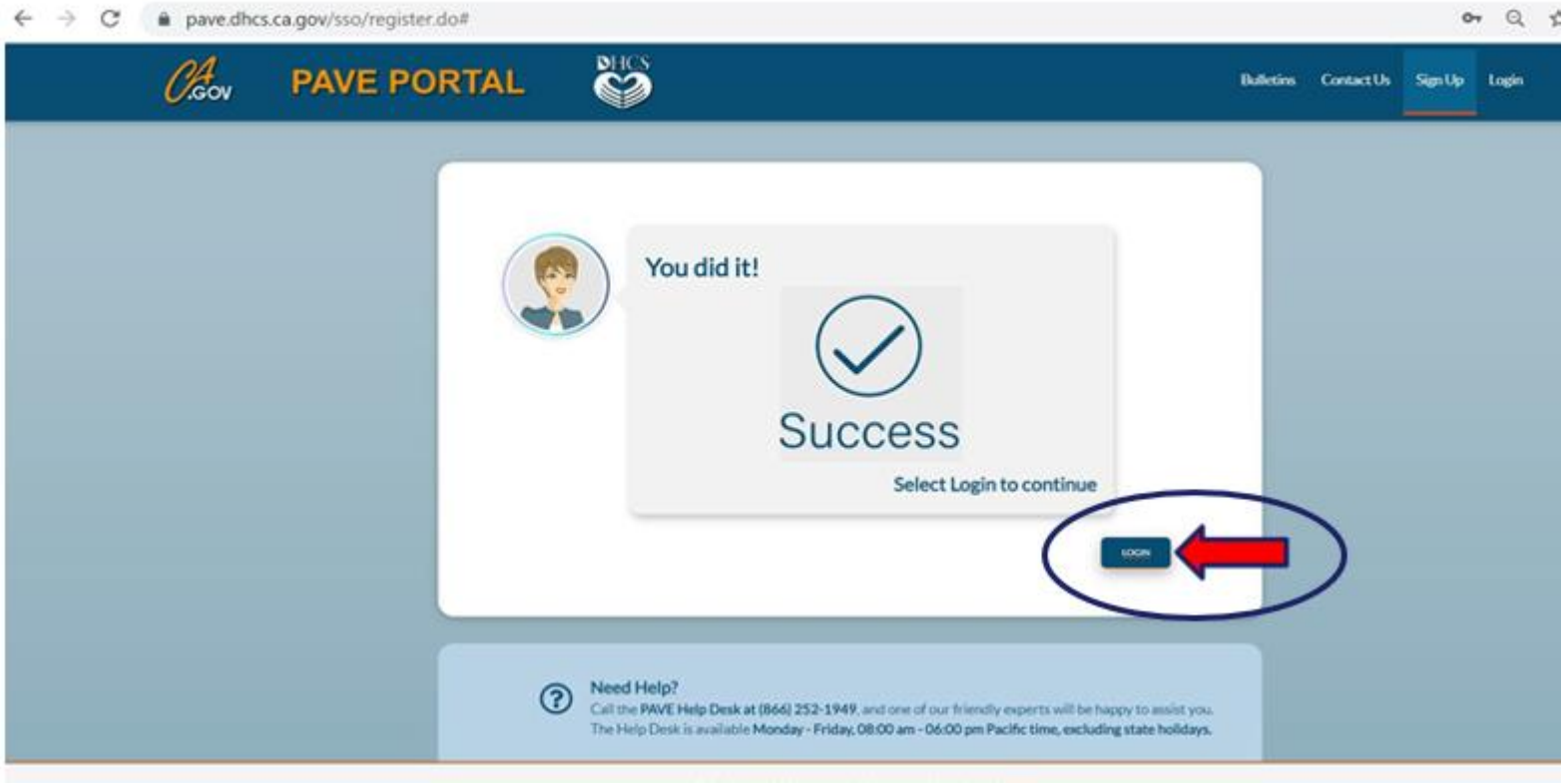
PAVE User Sign-Up Process

» Enter the six-digit verification code and click “VERIFY”



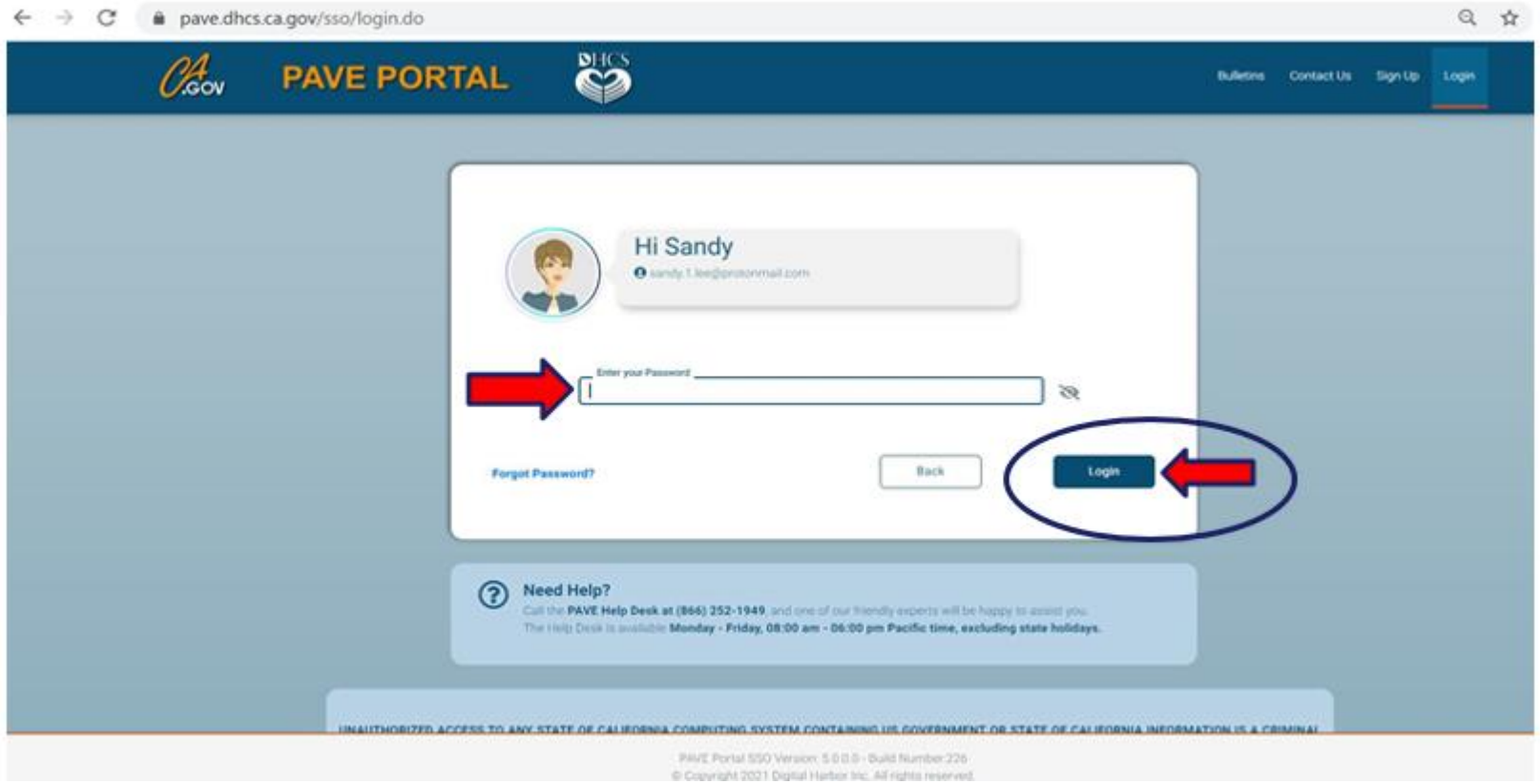
PAVE User Sign Up Process

» Once PAVE confirms successful verification, click “LOGIN”.



PAVE User Sign Up Process

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



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

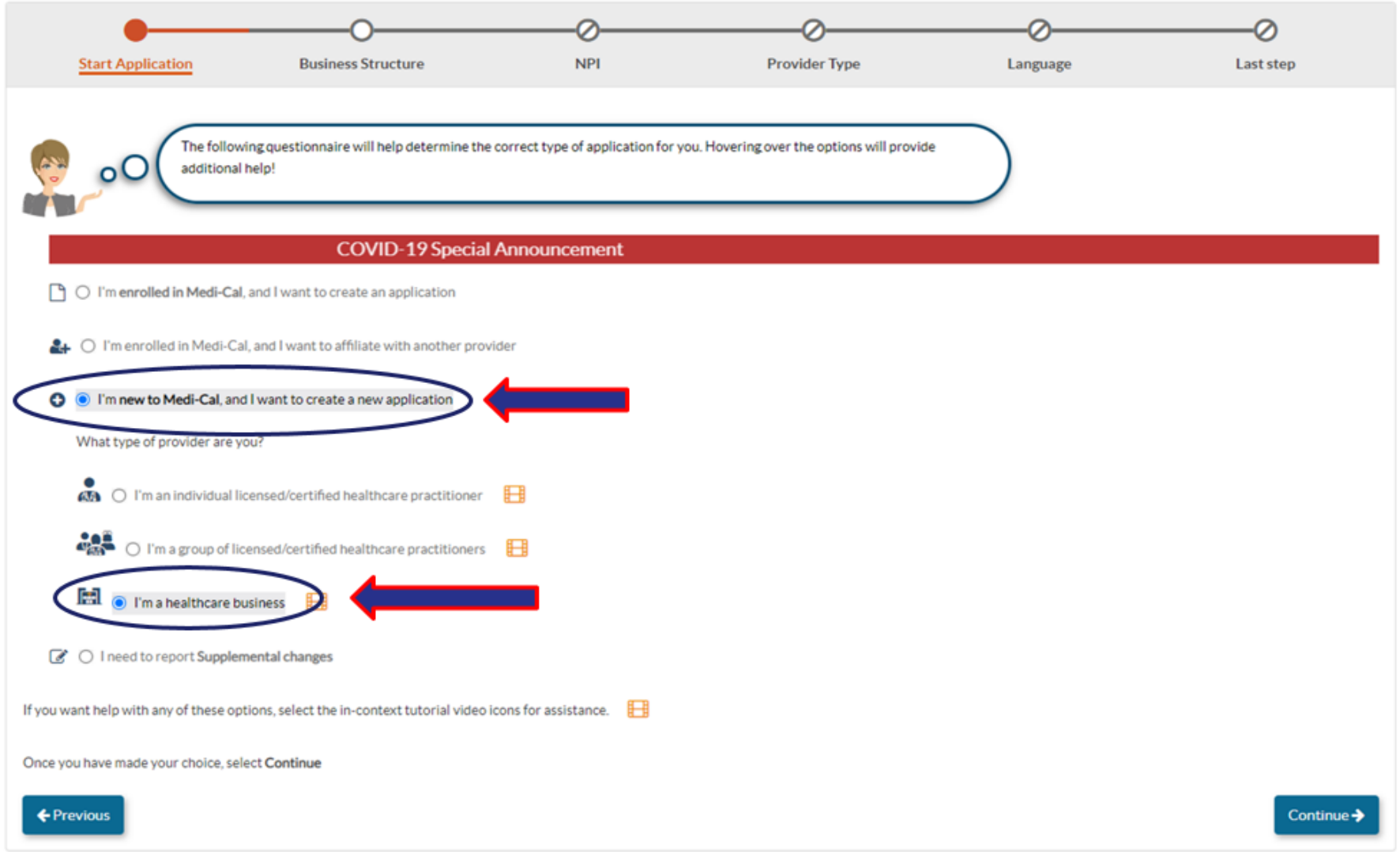
- Make sure that you are logged in with your user email and password.
- Enter your NPI, and click “Verify”
- Once the NPI is verified, you will enter the PAVE Profile name that represents your organization and click “Create my PAVE Profile”

PAVE Profile

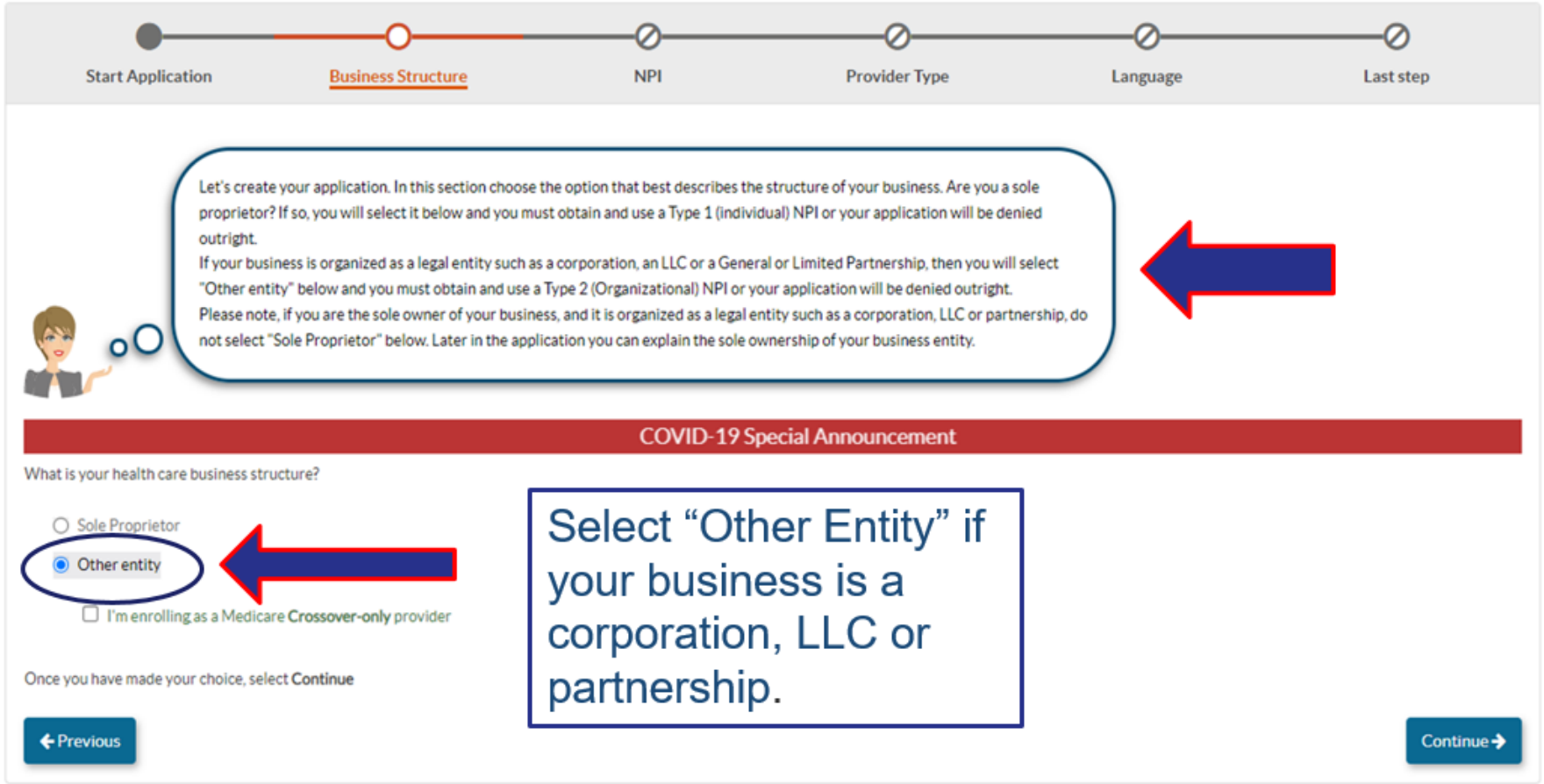
Starting a DME Application

- 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 DME application if your DME business is not already enrolled.

First Questionnaire Page



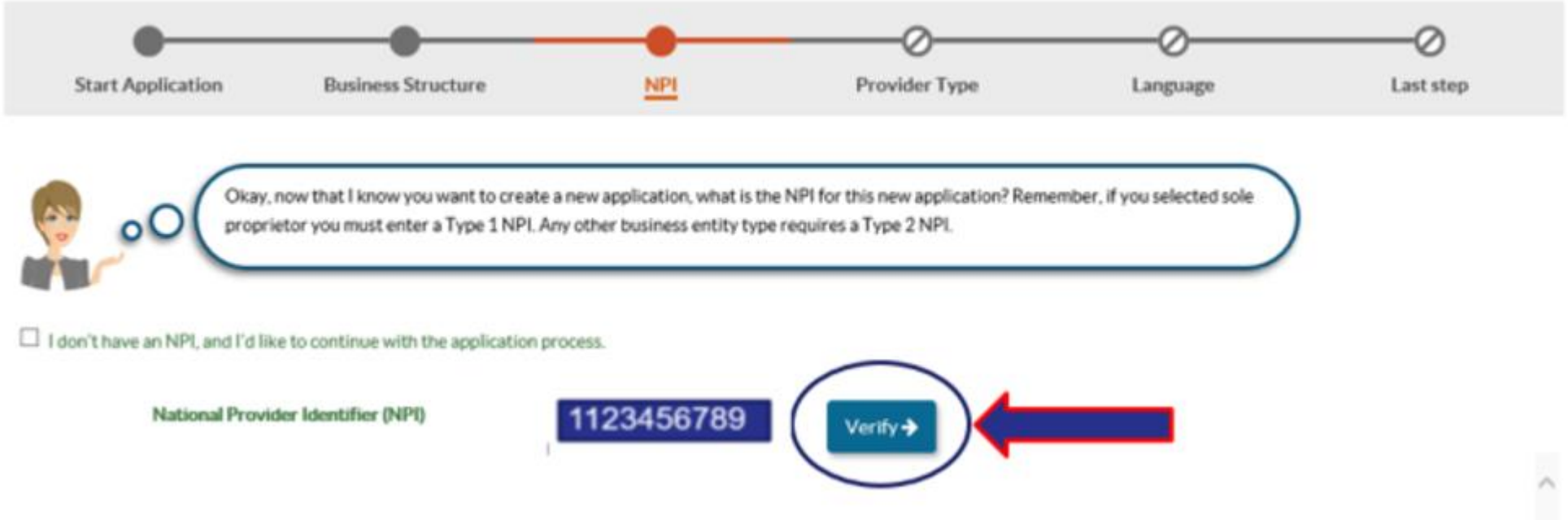
Second Questionnaire Page
Your Business Structure – Read Lucy!



Correct NPI Type depends on your Business Structure

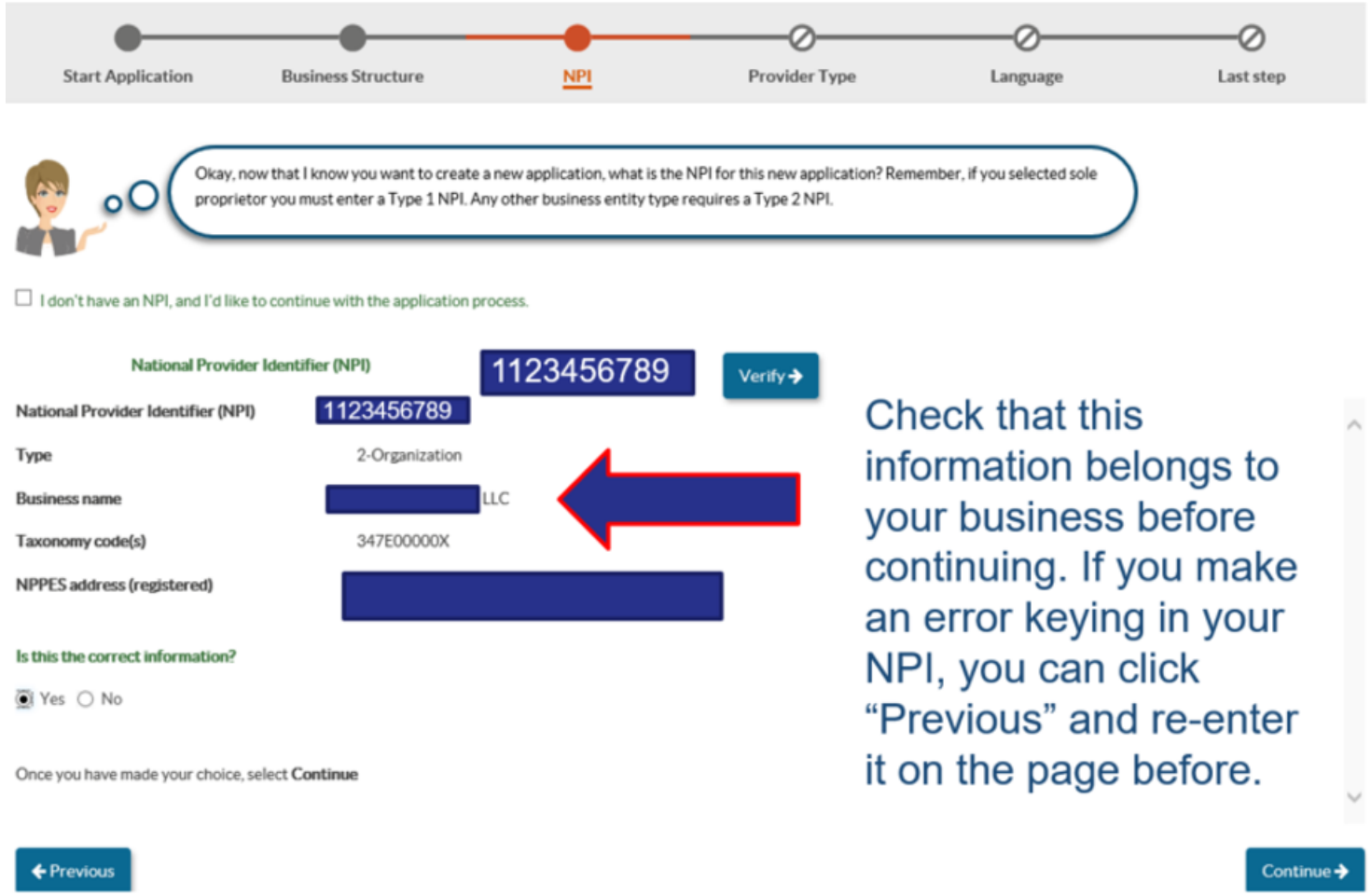
1. Type 2 NPI
   - **Business entities** such as a corporations, LLCs, and Partnerships must use a Type 2 NPI, even if you are the only owner of the entity.
2. Type 1 NPI
   - **Sole Proprietors** must use a Type 1 NPI. A sole proprietorship is a business owned and operated by one person and the business and the person are one and the same for income tax reporting.

Third Questionnaire Page
Enter Your NPI and click Verify

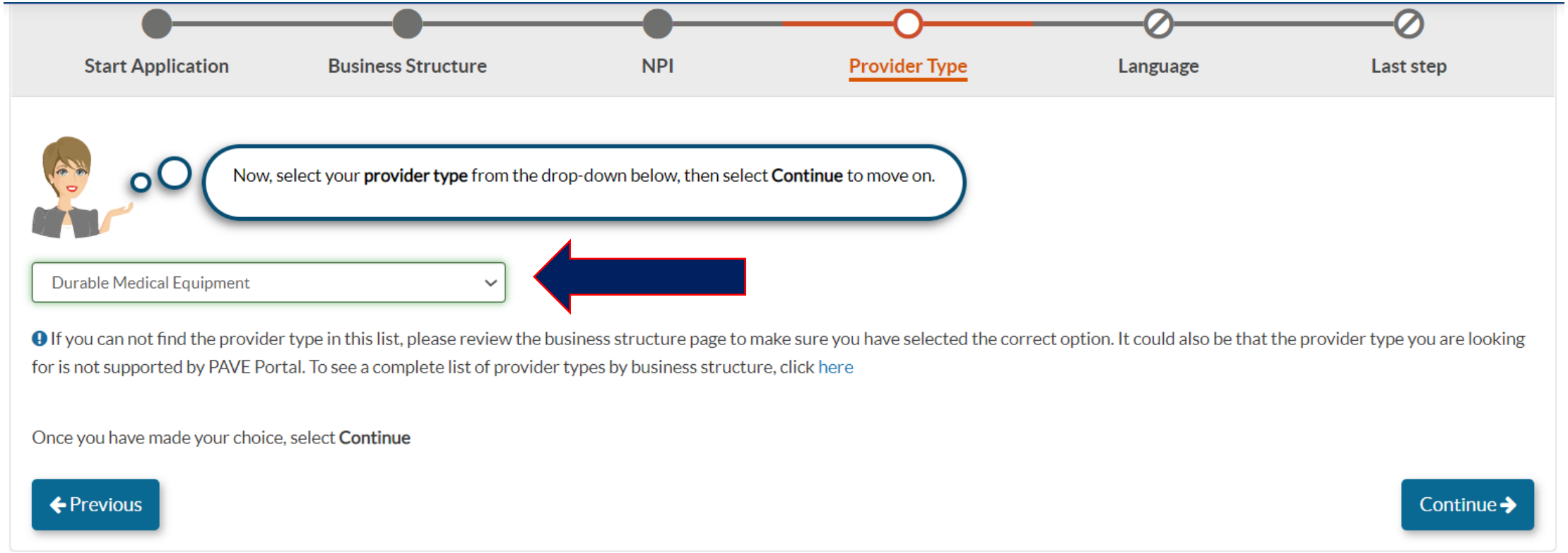


Fourth Questionnaire Page

PAVE Verifies NPI with NPPES

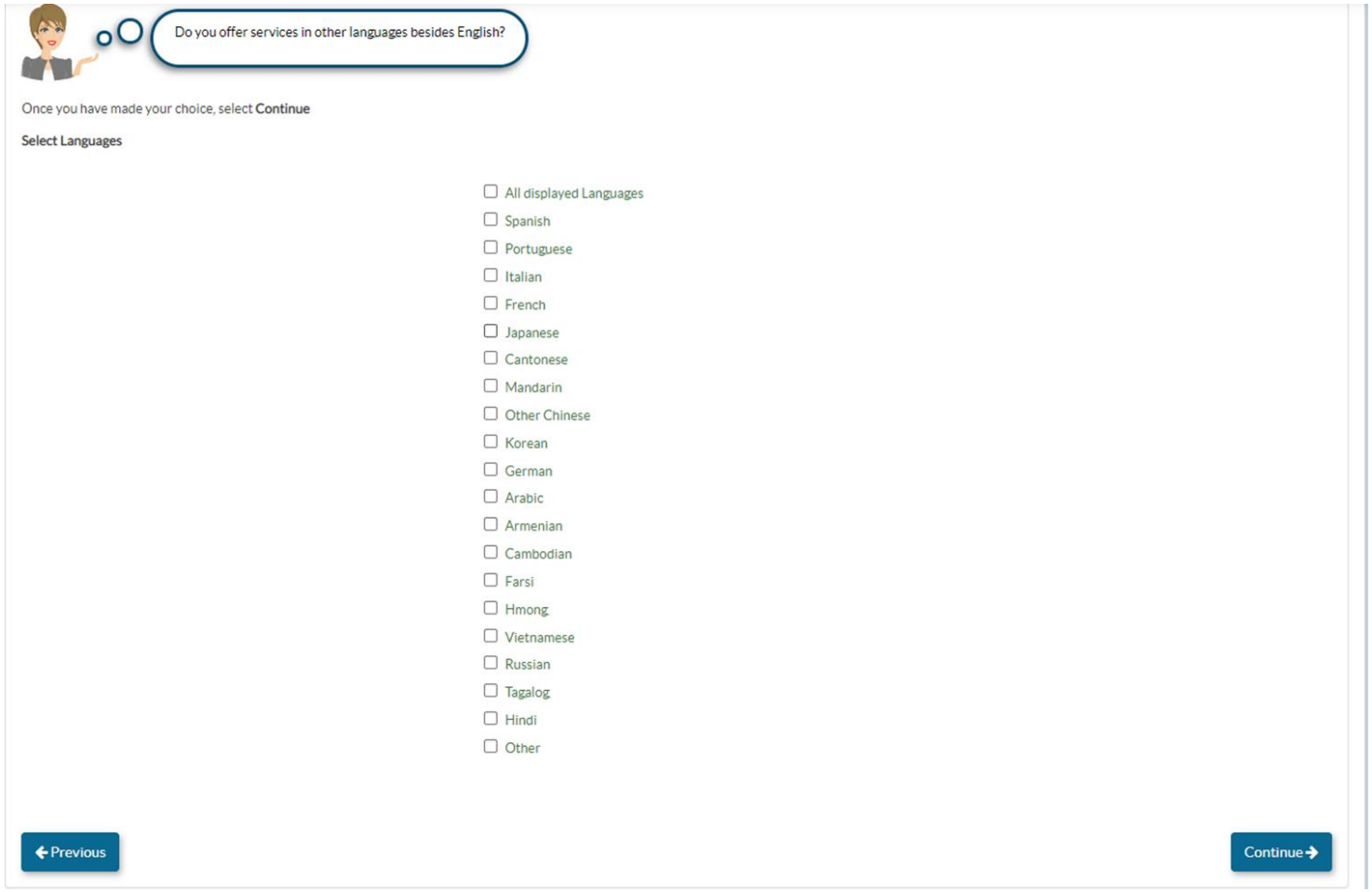


Fifth Questionnaire Page
Select Provider Type – Durable Medical Equipment

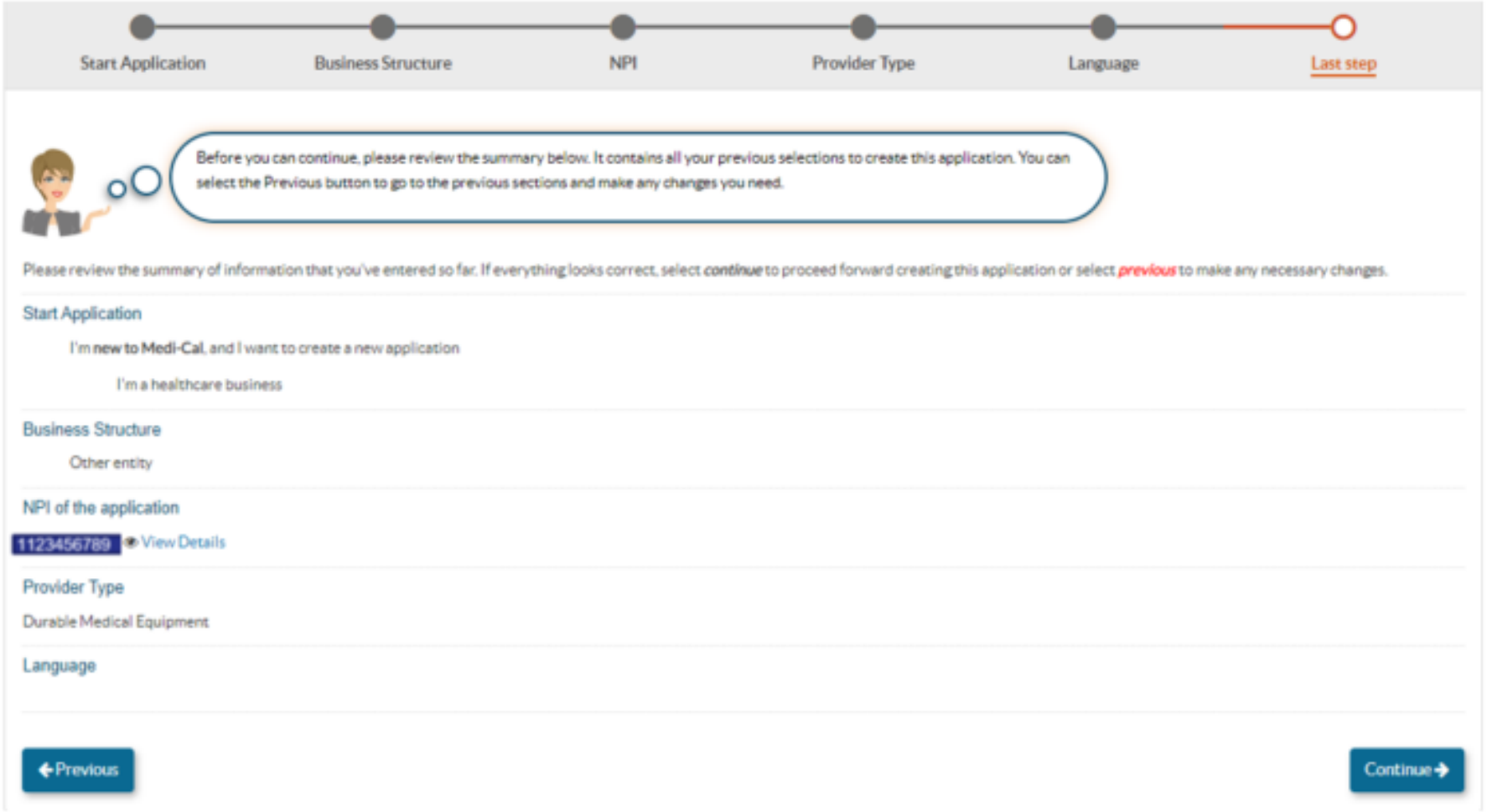


Sixth Questionnaire Page

Languages Offered



Seventh Questionnaire Page
Summary Page – Double Check!



Medi-Cal Requirements

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

- The next few slides show:
  - Fingerprint Requirement
  - Application Fee
  - Who is Authorized to Sign Medi-Cal applications
  - List of Required Documents to Attach
  - Medi-Cal Established Place of Business

Fingerprint Requirement

WHAT: **Newly Enrolling DME** applicants are designated as a high categorical risk by the federal Center for Medicare and Medicaid Services and as such, are required to submit fingerprints.

WHO: **Any person with a five-percent or greater direct or indirect ownership interest must submit** fingerprints for State and Federal criminal background checks.

HOW: To obtain the required fingerprints, present a prefilled Department of Justice Request for Live Scan Service (BCIA 8016) form to a Live Scan operator and pay all applicable fees.

Fingerprint Requirement

When submitting the DME application, include a legible copy of the date stamped BCIA 8016 form along with verification that all fees have been paid. Verification of payment can be either a “PAID” stamp on the form from the Live Scan operator or a receipt of payment.

FOR MORE INFORMATION for Individuals who are located **out of state**, please copy and paste the following URL into your computer browser window for the PED Fingerprinting and Criminal Background Check CJIS9004: **https://dhcscagovauthoring/provgovpart/Documents/PAVE_Project_for_Provider_Enrollment_Division/FFS-Enrollment-for-Providers-of-DME-using-PAVE.pdf**

Application Fee is Required

- Each year the Center for Medicare and Medicaid Services determines the new application fee amount.
- Application fee for 2022 calendar year is $631.00. 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 DME application.
- Application fees are used to offset the cost of conducting the required screenings.
- The Department will deny DME applications where the applicant fails the application fee requirement.

Application Fee Exemptions

DME 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 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.

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.

Some Required Documents

- Articles of Incorporation (only for corporations)
- State-Issued Identification
- 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 using a fictitious name)
- Lease Agreement (if leasing service location)
- Workers' Compensation Insurance
- Proof of Comprehensive (General) Liability Insurance
- Home Medical Device Retailer (HMDR) License
- Home Medical Device Retailer Exemptee License (if applicable to your business)
- Bureau of Home Goods and Services (BHGS) Certificate
  - If DME providers have the HMDR license, that document may be submitted in place of the BHGS certificate.
- Seller's Permit
- Live Scan Forms; or Fingerprint Cards for Out-of-State Owner(s)

Medi-Cal "Established Place of Business" Requirements

- Is Open and Conducting Business at time of application submission
- Is in a building either owned or leased by the applicant
- Has permanently posted business hours
- Has permanently attached signage with the business' name
- Has all State and local business permits and licenses to conduct business
- Obtains and maintains General Liability Insurance coverage and has Worker's Compensation Insurance as required by state law
- Has administrative and fiscal foundation to survive with adequate inventory and staff for the volume of business

More Online Resources

- Medi-Cal Enrollment requirements specific for Durable Medical Equipment (DME) Providers are also published on the DHCS website:

  Durable Medical Equipment Application Information

The Enrollment Process
Initial Review

- Complete your application in the PAVE portal.
- Submit your application.
- DHCS reviews in ‘date 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 Deficiencies

- **No Business License or It's Expired**
- **No Home Medical Device Retailer (HMDR) License**
- **No Live Scan Forms**
- **Failure to include all owners and control interests for large multi-entity DME companies**

The Enrollment Process
Onsite Inspections

- Your application will be referred for an onsite inspection due to the screening risk level established for DME providers in the Federal Medicaid regulations.
- You will be notified through PAVE.
- You will be contacted by the onsite staff who may ask for additional documents to verify information in the application.

The Enrollment Process
Post-Onsite

- The onsite staff send a report to PED.

- 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) 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