



How to Start a New PAVE Application if You Are New to Medi-Cal Fee-for-Service



Accessing Applications

The screenshot shows the PAVE Portal interface. At the top, there is a dark blue header with the CA.GOV logo, the text "PAVE PORTAL", the DHCS logo, and user information including "My Business ABC" and a profile icon for "Sandy". Below the header is a navigation bar with "My Home", "Applications" (highlighted with a red box), "Accounts", "My Tools", and "Help". The main content area features a light blue background with a cartoon illustration of a woman's face in a thought bubble. A speech bubble contains the text: "Hello and Welcome! I will be guiding you throughout your journey on the PAVE Portal. Click on top of any of the buildings below and you will be transported to your destination. Need technical support? 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, 8:00 am - 6:00 pm Pacific time, excluding state holidays." Below the speech bubble is an isometric illustration of a city with five buildings: "LEARNING CENTER", "MY TOOLS", "MY APPLICATIONS" (highlighted with a red box), "MESSAGE CENTER", and "MY ACCOUNTS".



Application Queue

CA.GOV **PAVE PORTAL** DHCS ABC Medical Inc Sandy

My Home **Applications** Accounts My Tools ▾ Help

My Applications



Once you have completed the enrollment process, you will be able to modify your Medi-Cal Account. Listed below are the provider applications you have or are currently enrolling in Medi-Cal.

[+ New Application](#)

- Filter by - - Please select a filter - Search

Application ID	Status	Name	Type	NPI	Application	Complete	Last Update	Owner	Actions
No applications are listed									



Starting a New Application

CA .GOV **PAVE PORTAL** DHCS

ABC Medical Inc Sandy

Start Application Business Structure NPI Provider Type Language Last step

Nice to see you again, Sandy Lee!
Please answer this simple questionnaire to help me to determine the correct type of application for you.
If you need help with any of these options, you can watch the Questionnaire in-context tutorial.
Let's get started!

- I'm enrolled in Medi-Cal, and I want to create an application
- I'm enrolled in Medi-Cal, and I want to affiliate with another provider
- I'm new to Medi-Cal, and I want to create a new application
- I need to report Supplemental changes

If you want help with any of these options, select The Questionnaire's in-context tutorial provides an overview on how to create a new application.

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

← Previous Continue →



Starting a New Individual Application



Please answer this simple questionnaire to help me to determine the correct type of application for you. If you need help with any of these options, you can watch the Questionnaire in-context tutorial. Let's get started!

- I'm enrolled in Medi-Cal, and I want to create an application
 - I'm enrolled in Medi-Cal, and I want to affiliate with another provider
 - I'm new to Medi-Cal, and I want to create a new application
- What type of provider are you?
- I'm an individual licensed/certified healthcare practitioner
 - I'm a group of licensed/certified healthcare practitioner
 - I'm a healthcare business
 - I need to report Supplemental changes

If you want help with any of these options, select The Questionnaire's in-context tutorial provides an overview on how to create a new application.

Once you have made your choice, select Continue

← Previous

Continue →



Starting a New Individual Application

CA .GOV **PAVE PORTAL** DHCS - ABC Medical Inc + Sandy

Start Application **Business Structure** NPI Provider Type Language Last step

Let's create your application. In this section choose the option that best describes the structure of your Business. Are you a Sole proprietor using a Type 1 NPI? or is your business an entity that uses a Type 2 NPI? Once you select an option, select continue to go to the next page.

Individual billing practitioner

- I'm an Individual Sole Proprietor
- I'm an Incorporated Individual

Individual who renders services (to a Group billing practice or Physician Surgeon or a DMC clinic)

- I'm an Allied Rendering provider, a Physician/Surgeon Rendering provider, or NMP
- I'm a Substance Use Disorder Medical Director (SUDMD) or a Licensed Substance Use Disorder

Other type of provider

- I'm an Ordering/Referring/Prescribing (ORP) provider
- I'm a Medicare Crossover-Only Individual

Once you have made your choice, select Continue

[← Previous](#) [Continue →](#)



Starting a New Group Application



PAVE PORTAL



ABC Medical Inc



Sandy



Please answer this simple questionnaire to help me to determine the correct type of application for you. If you need help with any of these options, you can watch the Questionnaire in-context tutorial. Let's get started!

- I'm enrolled in Medi-Cal, and I want to create an application
 - I'm enrolled in Medi-Cal, and I want to affiliate with another provider
 - I'm new to Medi-Cal, and I want to create a new application
- What type of provider are you?
- I'm an individual licensed/certified healthcare practitioner
 - I'm a group of licensed/certified healthcare practitioner
 - I'm a healthcare business
 - I need to report Supplemental changes

If you want help with any of these options, select The Questionnaire's in-context tutorial provides an overview on how to create a new application.

Once you have made your choice, select Continue

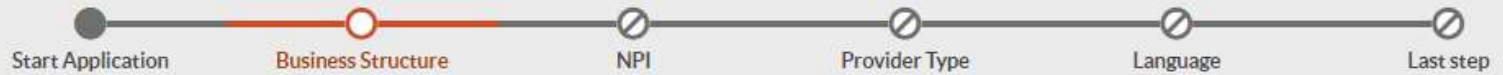
← Previous

Continue →



Starting a New Group Application

CA.GOV PAVE PORTAL DHCS ABC Medical Inc Sandy



Let's create your application, in this section choose the option that best describes the structure of your Business. Are you a Sole proprietor using a Type 1 NPI? or is your business an entity that uses a Type 2 NPI?. Once you select an option, select continue to go to the next page.

Group billing provider

- Physicians Group Practice
- Self Employed Sole Proprietor
- Allied Group Practice

Other type

- Medicare Crossover-Only Group practice

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



Starting a New Healthcare Business Application

CA.GOV PAVE PORTAL DHCS ABC Medical Inc Sandy



Please answer this simple questionnaire to help me to determine the correct type of application for you. If you need help with any of these options, you can watch the Questionnaire in-context tutorial. Let's get started!

- I'm enrolled in Medi-Cal, and I want to create an application
 - I'm enrolled in Medi-Cal, and I want to affiliate with another provider
 - I'm new to Medi-Cal, and I want to create a new application
- What type of provider are you?
- I'm an individual licensed/certified healthcare practitioner
 - I'm a group of licensed/certified healthcare practitioner
 - I'm a healthcare business
 - I need to report Supplemental changes

If you want help with any of these options, select The Questionnaire's in-context tutorial provides an overview on how to create a new application.

Once you have made your choice, select Continue

← Previous

Continue →



Starting a New Healthcare Business Application

CA.GOV PAVE PORTAL DHCS

My Home Applications Accounts My Tools - Help

Start Application Business Structure NPI Provider Type Language Last step

Let's create your application, in this section choose the option that best describes the structure of your Business. Are you a Sole proprietor using a Type 1 NPI? or is your business an entity that uses a Type 2 NPI?. Once you select an option, select continue to go to the next page.

What is your health care business structure?

- Sole Proprietor
- Other entity

Once you have made your choice, select Continue

← Previous Continue →



Starting a New Application

CA.GOV PAVE PORTAL DHCS

My Home Applications Accounts My Tools Help

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.

National Provider Identifier (NPI)



Starting a New Application

CA .GOV **PAVE PORTAL** DHCS - ABC Medical Inc - Sandy

My Home **Applications** Accounts My Tools - Help

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.

[Select a Provider Type]
 value is required

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**



Starting a New Application

CA.GOV PAVE PORTAL DHCS ABC Medical Inc. Sandy

Start Application Business Structure NPI Provider Type **Language** Last step

Do you offer your services in a language besides English? If so, select each language you offer.
If not, just select **Continue**.
After this last question, a new application will be ready for you to complete.
Keep it up! Remember, I will be with you every step of the way. If you get stuck, you can always watch one of our online tutorials or send a message to one of our friendly Medi-Cal experts.

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

Select Languages

- All displayed Languages
- Spanish
- Portuguese
- Italian
- French
- Japanese
- Cantonese
- Mandarin
- Other Chinese
- ...



Starting a New Application

CA .GOV PAVE PORTAL DHCS

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.

The summary below contains all the information PAVE Portal requires to create your application. Please review and select Continue to create your application or select Previous to make any necessary changes.

Start Application
I'm new to Medi-Cal, and I want to create a new application
I'm an individual licensed/certified healthcare practitioner

Business Structure
Individual billing practitioner
I'm an Incorporated Individual

NPI of the application
1999999999 View Details

Provider Type
Physician/Surgeon

Language
Spanish

← Previous Continue →



The Application

CA.GOV **PAVE PORTAL** DHCS - ABC Medical Inc Sandy

My Home **Applications** Accounts My Tools - Help

Provider Name 0% Complete 0% Documents

Provider Type Physician/Surgeon [New Message](#) [Submit Section](#)

Application ID 1916QJ9J

Creation Date 01/14/2019

Package Type Individual Billing

- Content Expand All
- Getting Started
 - Getting Started
 - Business Information
 - Practice Information
 - Disclosure Information
 - Rendering Provider Affiliations

Getting Started



Hello again Sandy Lee! You have chosen to apply as a **DHCS Medi-Cal Individual - Physician/Surgeon** provider. If you are not a Physician/Surgeon and you have Rendering providers, please choose the Group Practice option.

This individual application uses Social Forms technology to help you to become a Medi-Cal provider quickly and easily. You can complete your application while collaborating with your co-workers through useful tools like [social chat](#), [explanation](#), [share](#) or [messages](#). To better understand these collaborative tools, other useful applications and their features, please take a few minutes to





The Application

CA.GOV **PAVE PORTAL** DHCS

ABC Medical Inc Sandy

My Home **Applications** Accounts My Tools Help

Provider Name: ABC Medical Inc
Provider Type: Physician/Surgeon
Application ID: 192CTLG6
Creation Date: 02/04/2019
Package Type: Individual Billing

2% Complete 0% Documents

[New Message](#) [Submit Section](#)

Content Expand All

- Getting Started
- Business Information
- Business Profile**
- Contact Person
- Addresses
- Place of Business
- Insurance
- Practice Information
- Disclosure Information

Business Profile **TIN/EIN & Business License** Business Permits Summary

I need some additional information about your business. Please attach clear copies of your documentation.

Provider Federal Tax Identification Number (TIN) or Employer Identification Number (EIN) value is required Document Required: EIN/FEIN document is required

Business license number N/A value is required Document



The Application: Explanations

The screenshot displays the PAVE PORTAL interface. The top navigation bar includes the CA.GOV logo, the text "PAVE PORTAL", the DHCS logo, and user information for "ABC Medical Inc" and "Sandy". Below the navigation bar, the page title is "Contact Person Information" and the package type is "Individual Billing".

The main content area is divided into two tabs: "Contact Person Information" (active) and "Summary". A progress indicator shows the current step. A callout box asks: "Who should I contact if I have questions about your application? Please choose a contact person who will be available during regular business hours." Below this, a note states: "Please include a contact person who will be available during regular business hours".

The form fields are as follows:

- First name: Sandy
- Last name: Johnson (with a "value is required" error message)
- Title/Position: (empty)
- Telephone number: (empty)

A red box highlights the "Last name" field and its associated explanation tooltip. The tooltip has a title "Last name" and the text "Contact person's last name". A small "Explanations" label is visible at the bottom right of the tooltip.

The left sidebar contains a "Content" menu with the following items:

- Getting Started
- Business Information (selected)
- Business Profile
- Contact Person (highlighted with an orange circle)
- Addresses
- Place of Business
- Insurance
- Practice Information



The Application: Explanations

CA .GOV

DHCS

Sandy

Explanations

Adding an explanation

21 Characters | 1579 Characters Left | 3 Words

+ Add Cancel



Who should I contact if I have questions about your application?
Please choose a contact person who will be available during regular business hours.

Please include a contact person who will be available during regular business hours

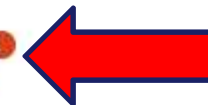
First name

Sandy



Last name

Johnson





The Application Checklist



PAVE PORTAL



ABC Medical Inc



Sandy

Content	Expand All
Getting Started	●
Business Information	●
Practice Information	○
Disclosure Information	○
Rendering Provider Affiliations	○
Claim Payment	○
Signature	○
Submit Application	●
Checklist	●
Submit	○

Document Attachments Application

Excellent Sandy Lee! This is your final review. All documents listed below must be attached so this application can be submitted. To manage your documents, see the action column and remember, all uploaded documents **should be clear and legible** or your application may be sent back.

Document	Form/SubForm/Section	Mandatory	Attached	Actions
EIN/FEIN	Business Information/Business Profile/TIN/EIN & Business License	Yes	✔	
Business license	Business Information/Business Profile/TIN/EIN & Business License	Yes	✘	
General Liability Insurance Policy	Business Information/Insurance/General Liability Insurance	Yes	✘	
Policy of Malpractice Insurance	Business Information/Insurance/Malpractice Insurance	Yes	✘	

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



The Application Checklist

PAVE PORTAL

 ABC Medical Inc Sandy

- Business Information i
- Practice Information ○
- Disclosure Information ○
- Rendering Provider Affiliations ○
- Claim Payment ○
- Signature ○
- Submit Application i
- Checklist ●
- Submit ○

Here's a summary of the information you gave me. Please review it to make sure everything's correct before moving on to submit your application. If you need to make changes to a section, select the Edit button.

Your application is complete to 23%

Form/SubForm/Section	Documents	Social Chat	Explanations	Messages	Shared	Complete	% Completed	Actions
Getting Started						✓	100	
Getting Started						✓	100	
Business Information						✗	0	
Business Profile						✗	25	
Business Profile						✓		
TIN/EIN & Business License						✗		
Business Permits						✗		
Contact Person						✗	0	
Contact Person Information						✗		



Application Queue

My Home Applications Accounts My Tools - Help

My Applications



Once you have completed the enrollment process, you will be able to modify your Medi-Cal Account. Listed below are the provider applications you have or are currently enrolling in Medi-Cal.

New Application

- Filter by - - Please select a filter - Search

Application ID	Status	Name	Type	NPI	Application	Complete	Last Update	Owner	Actions
1916QJ9J	In Progress	ABC Medical Inc	Physician/Surgeon	1855448785	Individual Billing	81%	01/14/2019	Sandy Lee	

Printing Page



Application Queue

CA.GOV **PAVE PORTAL** DHCS MCLEOD, DENNIS... Suzanne

My Home **Applications** Accounts My Tools Help

My Applications



Once you have completed the enrollment process, you will be able to modify your Medi-Cal Account. Listed below are the provider applications you have or are currently enrolling in Medi-Cal.

[+ New Application](#)

- Filter by -

- Please select a filter -

Search

Application ID	Status	Name	Type	NPI	Application	Complete	Last Update	Owner	Actions
191P5VE3	Approved	MCLEOD, DENNIS M MD	Physician/Surgeon	1999999998	Rendering-S	100%	01/24/2019	Suzanne Klaus	
1810M72C	Submitted	MCLEOD, DENNIS M MD	Physician/Surgeon	1999999997	Rendering-S	100%	10/18/2018	Suzanne Klaus	
1810HHG6	Denied	DENNIS M. MCLEOD, M.D., INC	Physician/Surgeon	1999999995	Individual Billing	100%	10/18/2018	Suzanne Klaus	
1921MKUU	Resubmitted	Suzanne Klaus	Physician/Surgeon	1999999993	Individual Billing	100%	02/04/2019	Suzanne Klaus	



PAVE ON!