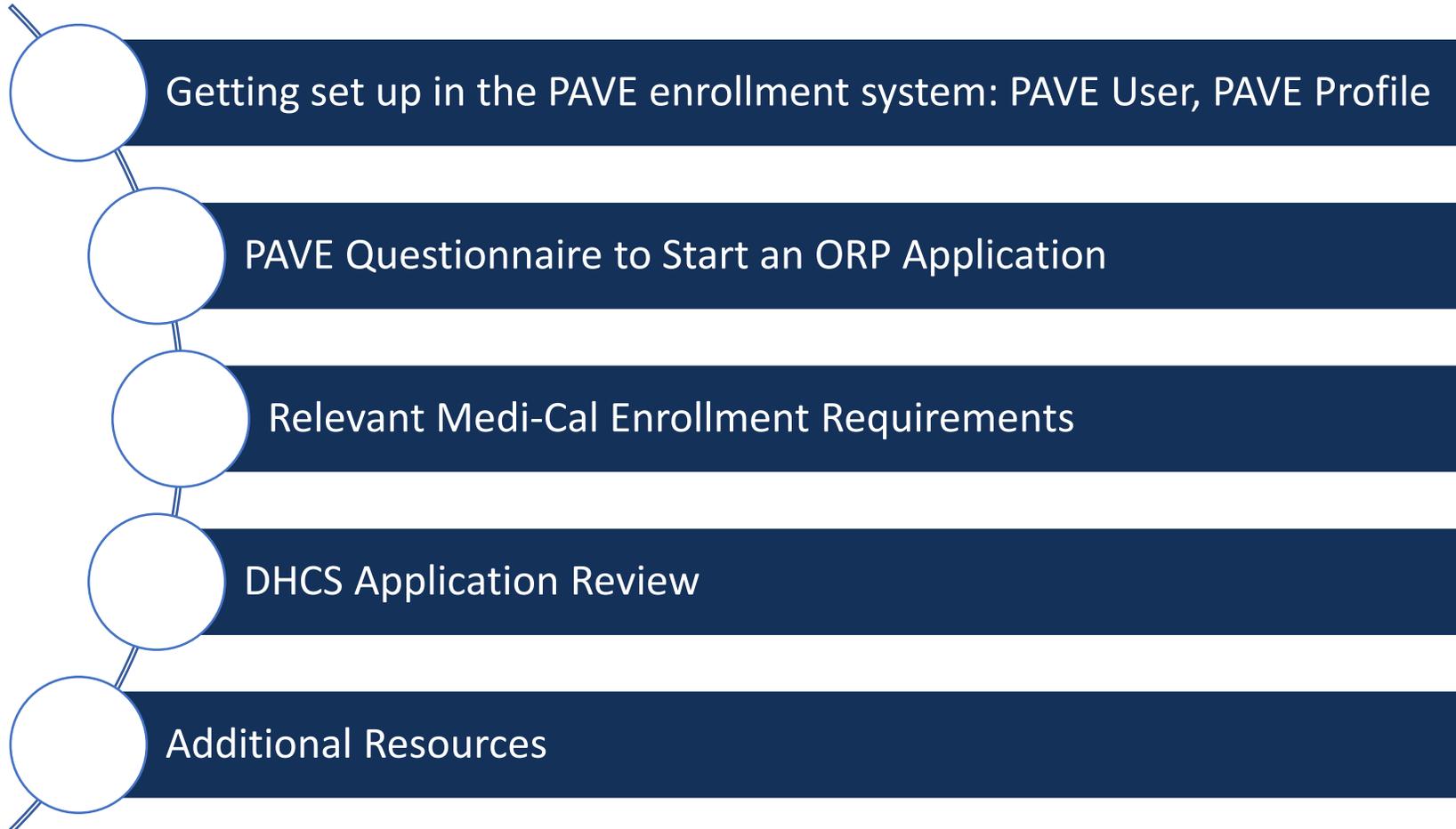


Ordering, Referring, Prescribing (ORP) Enrollment

Provider Enrollment Division

December 2023

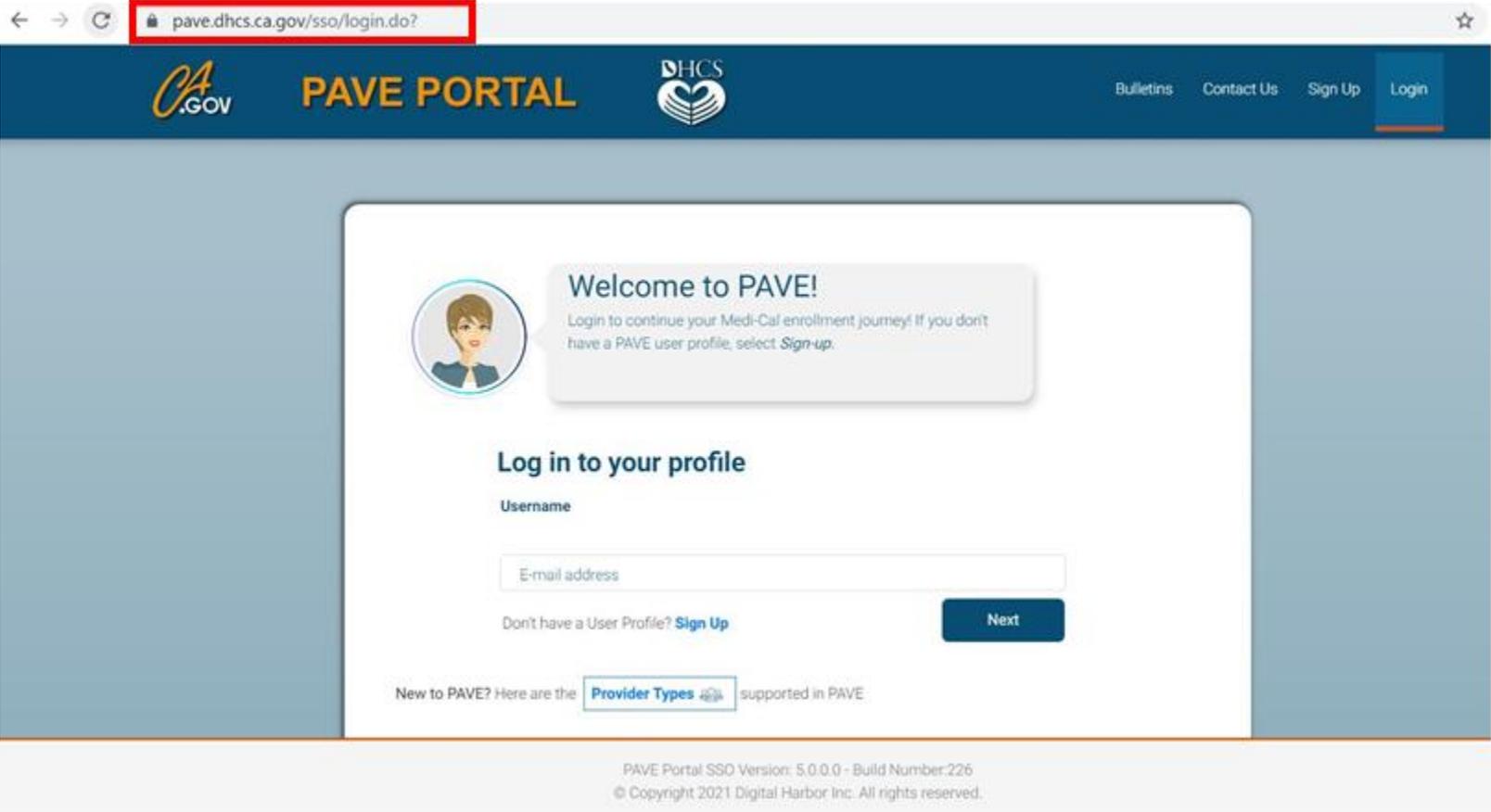
Topics Covered



Getting Set Up in PAVE for First Time Users

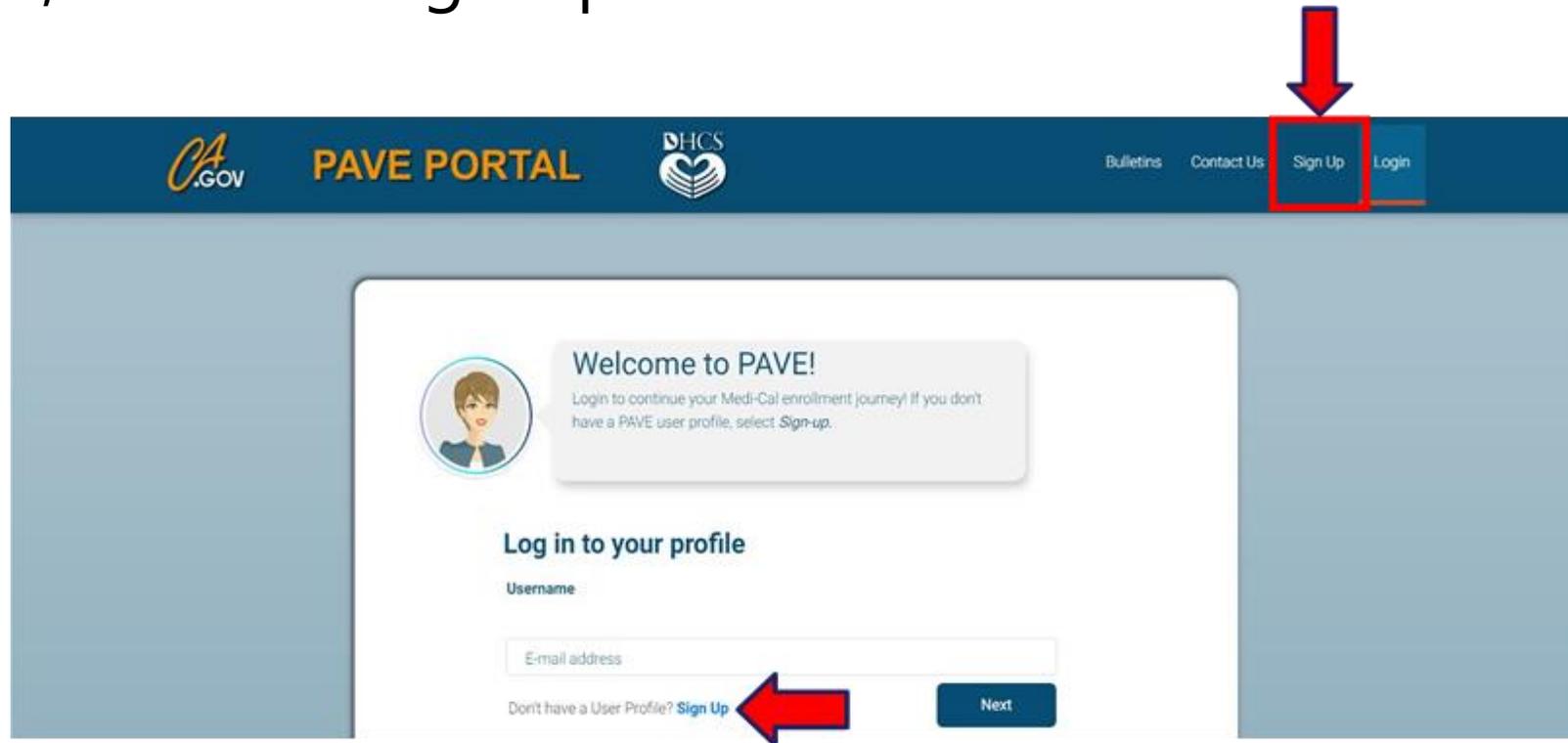


Access PAVE



PAVE User Sign-Up Process

» To begin, click on "Sign Up."



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 title is "Sign Up". The form contains the following fields:

- First name:
- Last name:
- Username:
- Password:
- Confirm:
- Phone number:
- Recovery email address:

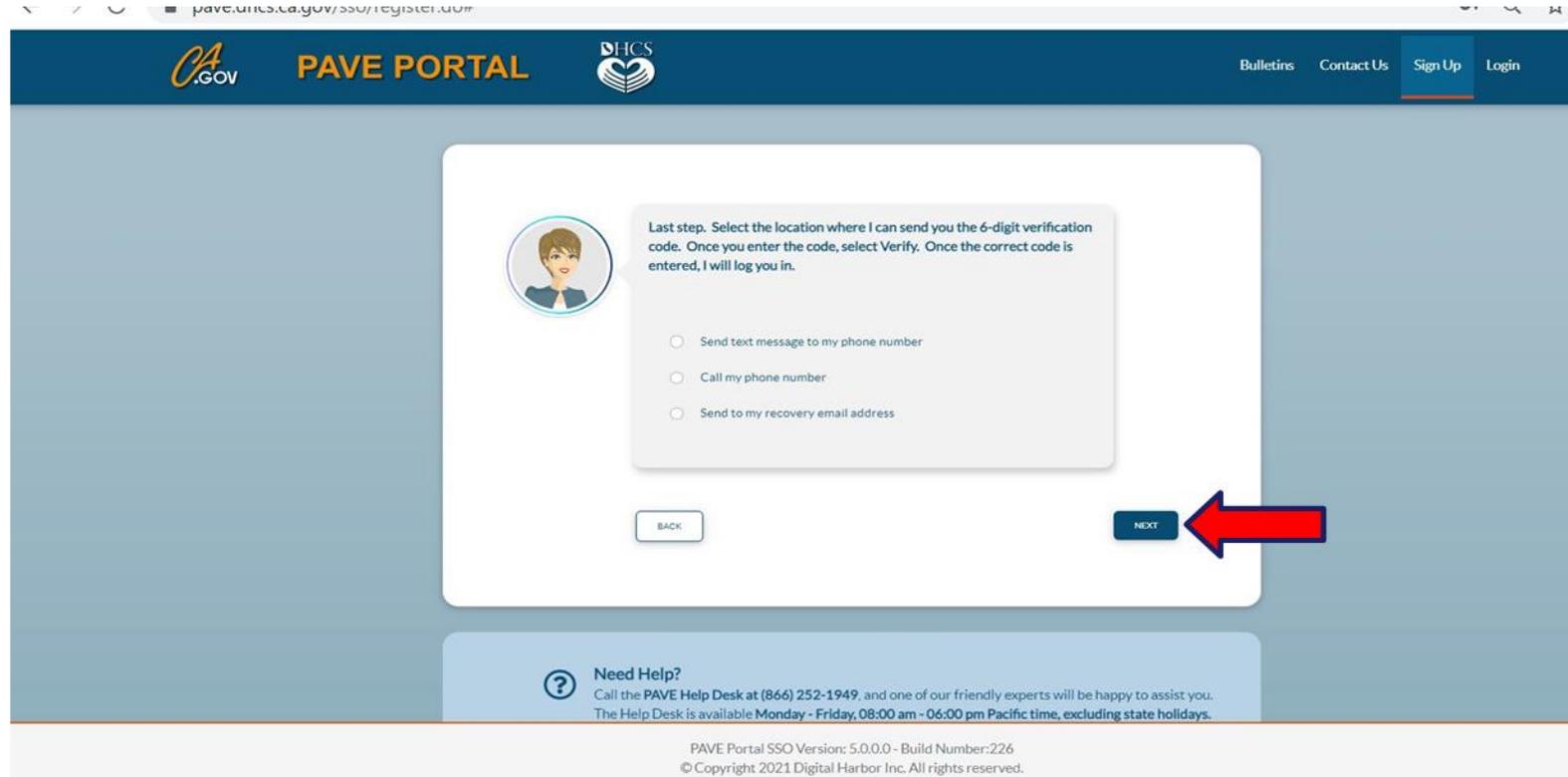
Below the phone number field, there is a message: "Enter your phone number. I prefer that you use your personal cell number so I can send you a text message just in case you forget your password. Don't worry, I will safeguard this number and will not give it out to anyone. Example: include area code, (999) 888-7777".

At the bottom of the form, there is a checkbox labeled "I'm not a robot" with a green checkmark, and a CAPTCHA logo. Below this, it says "By selecting Next you agree to the Terms & Conditions for PAVE Portal." A red arrow points to a blue button labeled "NEXT".

At the bottom of the page, the footer text reads: "PAVE 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."



The screenshot shows the PAVE Portal registration page. The header includes the CA.GOV logo, PAVE PORTAL, and the DHCS logo. Navigation links for Bulletins, Contact Us, Sign Up, and Login are visible. The main content area features a white card with a female avatar icon and a message: "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 the message 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 "BACK" and "NEXT" buttons. A red arrow points to the "NEXT" button. A "Need Help?" section at the bottom provides contact information for the PAVE Help Desk. The footer contains version and copyright information.

PAVE User Sign-Up Process

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

On Wednesday, August 25th, 2021 at 11:58 AM, <PAVE-DHCS@dhcs.ca.gov> wrote:

Your six digit verification code for PAVE is: 963803



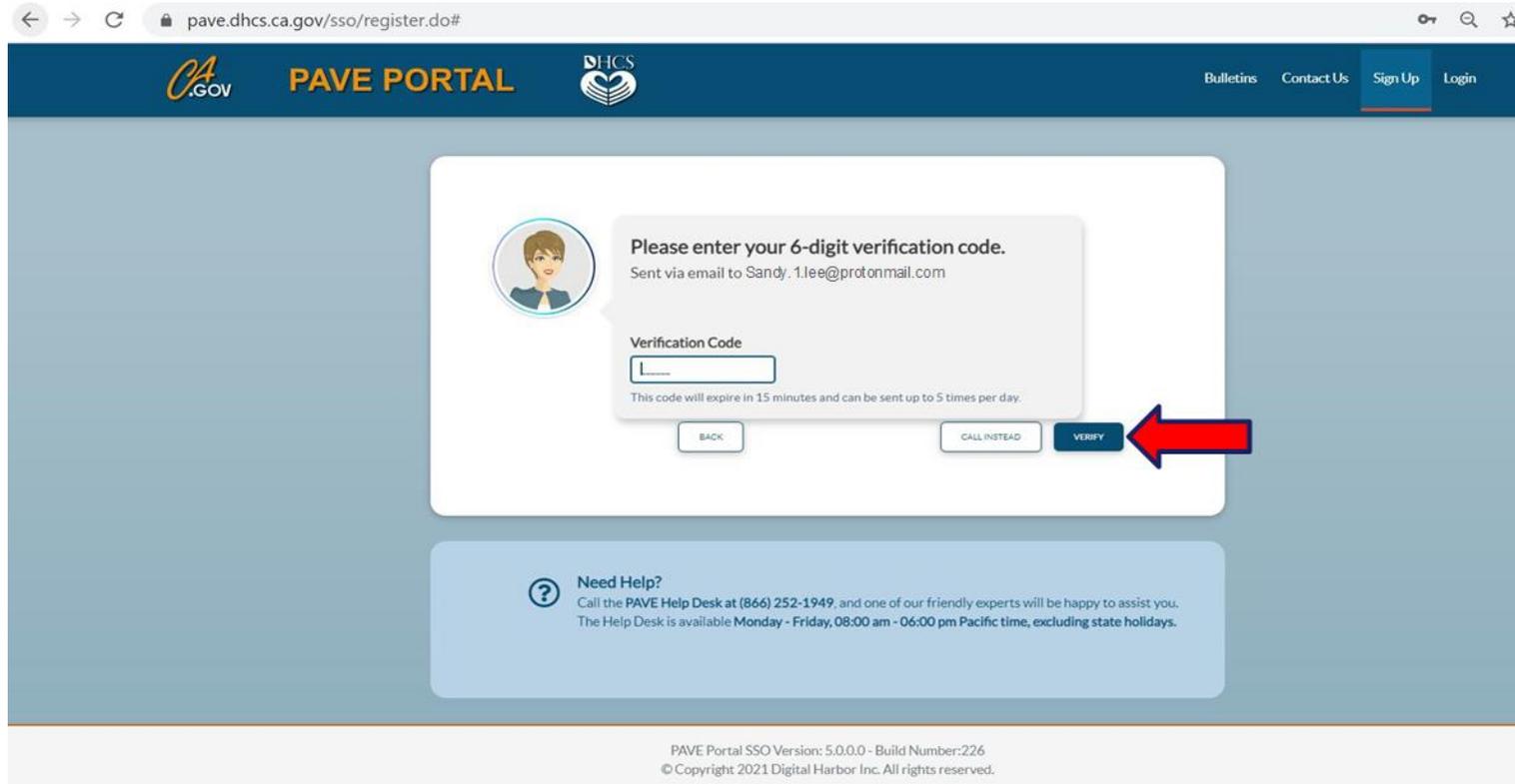
This verification code will expire in 15 minutes.

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

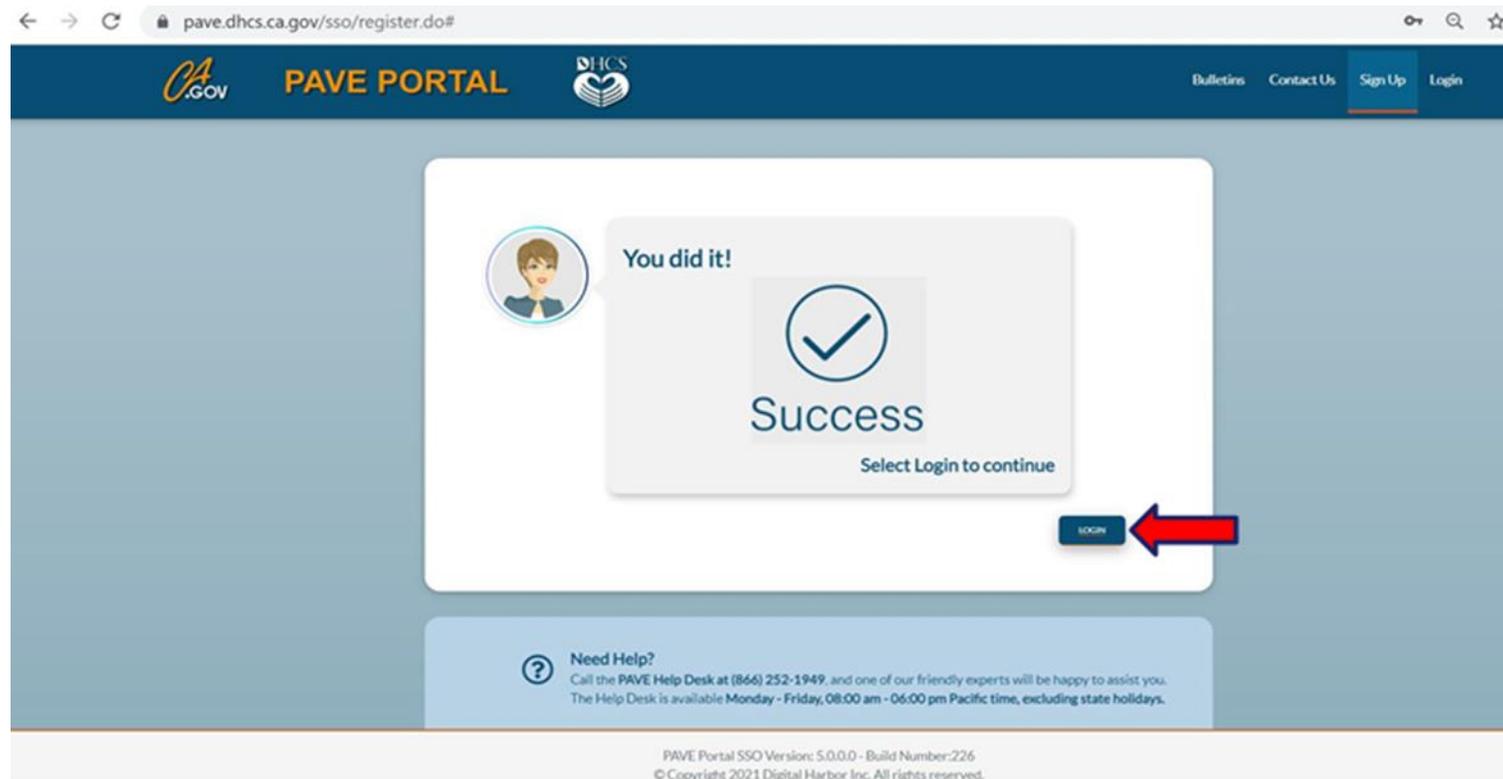
» Enter the six-digit verification code and click “VERIFY.”



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, the text "PAVE PORTAL", the DHCS logo, and navigation links for "Bulletins", "Contact Us", "Sign Up", and "Login". The main content area features a white card with a user profile icon on the left. The card contains the following text: "Please enter your 6-digit verification code." followed by "Sent via email to Sandy. 1.lee@protonmail.com". Below this is a "Verification Code" label and a text 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 card are three buttons: "BACK", "CALL INSTEAD", and "VERIFY". A red arrow points to the "VERIFY" button. Below the card is a "Need Help?" section with a question mark icon and contact information for the PAVE Help Desk. The footer contains the text: "PAVE Portal SSO Version: 5.0.0.0 - Build Number:226" and "© Copyright 2021 Digital Harbor Inc. All rights reserved."

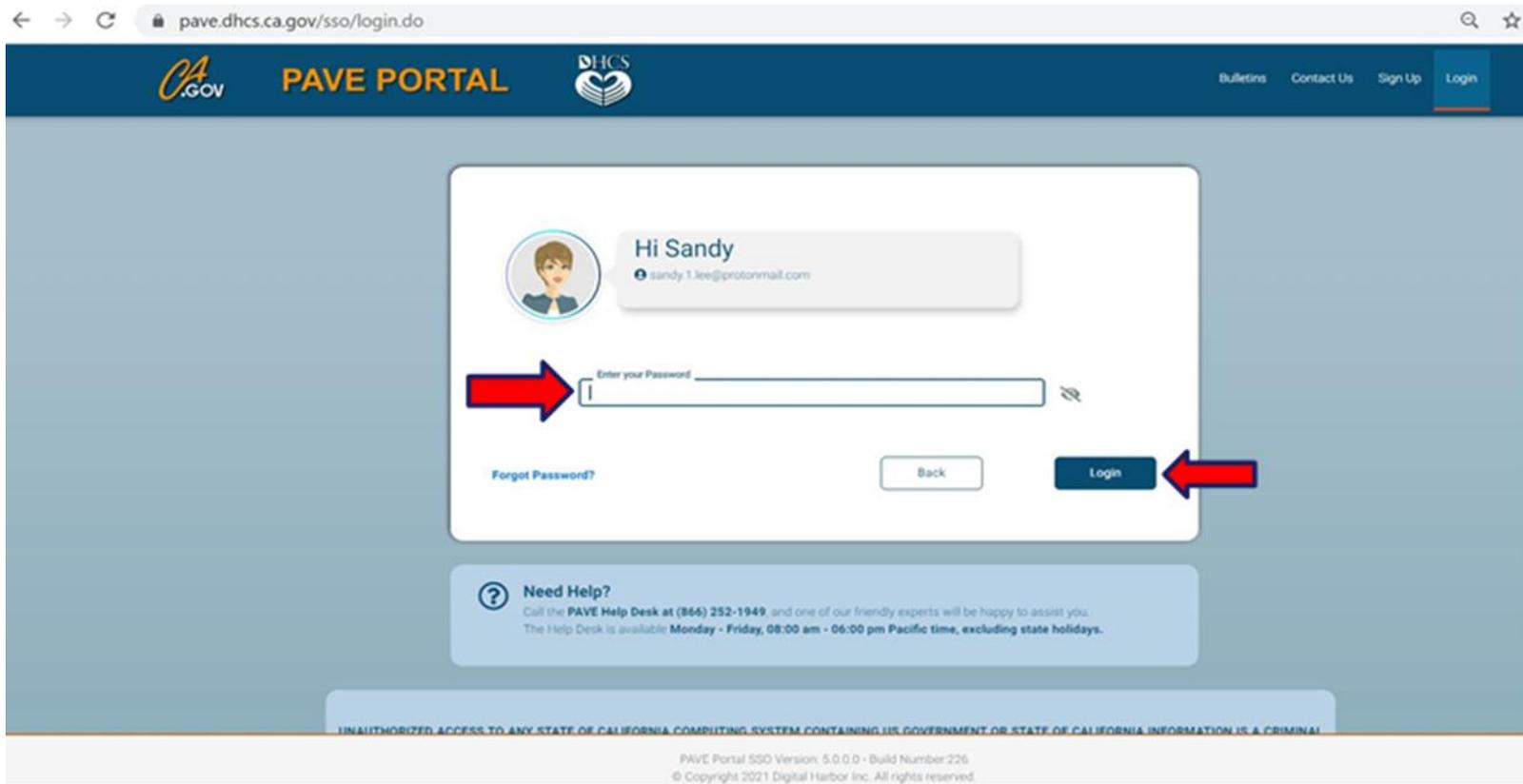
PAVE User Sign-Up Process

» 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", and the DHCS logo. Navigation links for "Bulletins", "Contact Us", "Sign Up", and "Login" are visible. The main content area features a user profile card for "Hi Sandy" with the email "sandy.1.lee@protonmail.com". Below the profile is a password input field labeled "Enter your Password" with a red arrow pointing to it. To the right of the password field is a "Login" button, also indicated by a red arrow. Other buttons include "Forgot Password?", "Back", and "Login". A "Need Help?" section provides contact information for the PAVE Help Desk. At the bottom, there is a footer with the text "UNAUTHORIZED ACCESS TO ANY STATE OF CALIFORNIA COMPUTING SYSTEM CONTAINING US GOVERNMENT OR STATE OF CALIFORNIA INFORMATION IS A CRIME!" and "PAVE Portal SSO Version: 5.0.0.0 - Build Number:226 © Copyright 2021 Digital Harbor Inc. All rights reserved."

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

- » Select the radio button, “I’m new to Medi-Cal and I want to create a new application.” From the sub-menu select, “I’m an individual provider.”

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

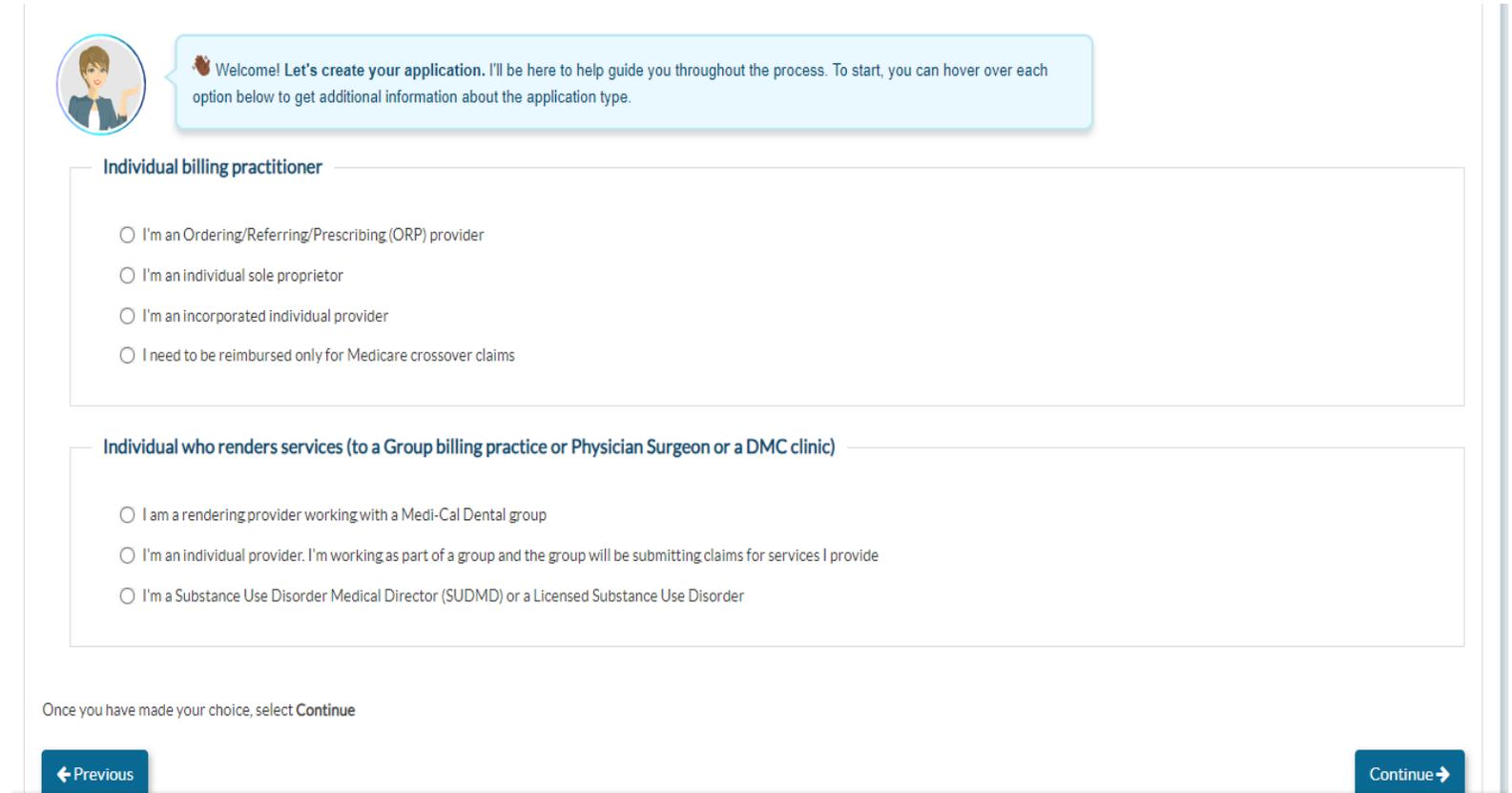
If you want help with any of these options, select the in-context tutorial video icons for assistance.

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

[← Previous](#) [Continue →](#)

Second Questionnaire Page

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



 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.

Individual billing practitioner

- I'm an Ordering/Referring/Prescribing (ORP) provider
- I'm an individual sole proprietor
- I'm an incorporated individual provider
- I need to be reimbursed only for Medicare crossover claims

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

- I am a rendering provider working with a Medi-Cal Dental group
- I'm an individual provider. I'm working as part of a group and the group will be submitting claims for services I provide
- I'm a Substance Use Disorder Medical Director (SUDMD) or a Licensed Substance Use Disorder

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

[← Previous](#) [Continue →](#)

Third Questionnaire Page

NPI

- » Enter your type 1 NPI and click the “verify” button.

The screenshot displays a multi-step questionnaire interface. At the top, a progress bar shows six steps: Start Application, Business Structure, NPI (highlighted in red), Provider Type, Language, and Last step. Below the progress bar, a message box with a female avatar icon contains the text: "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." Below the message box, the label "National Provider Identifier (NPI)" is followed by an empty text input field. A small blue box below the input field says "Required value". To the right of the input field is a blue button labeled "Verify" with a right-pointing arrow. At the bottom left of the form is a blue button labeled "Previous" with a left-pointing arrow. At the bottom right is a blue button labeled "Continue" with a right-pointing arrow.

Third Questionnaire Page

PAVE Verifies NPI with NPPES

- » 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."

The screenshot shows a multi-step questionnaire interface. At the top, a progress bar indicates the current step is 'NPI', with other steps being 'Start Application', 'Business Structure', 'Provider Type', 'Language', and 'Last step'. A callout box with a woman icon says: '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.'

The main form area is titled 'National Provider Identifier (NPI)'. It contains the following fields:

- National Provider Identifier (NPI): [Redacted]
- Type: 1-Individual
- Business name: [Redacted]
- Taxonomy code(s): [Redacted]
- NPPES address (registered): [Redacted]

Below the fields, there is a question: 'Is this the correct information?' with radio buttons for 'Yes' (selected) and 'No'. At the bottom, there is a 'Verify' button to the right of the NPI field, and 'Previous' and 'Continue' buttons at the bottom of the page.

Fourth Questionnaire Page

Select Provider Type

- » Select your provider type from the drop-down list. If your provider type is listed, you must select that provider type. If your provider type is not listed, ensure that you are eligible to enroll as an ORP and then select other and type in your provider type.

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]

- [Select a Provider Type]
- Audiologist
- Certified Acupuncturist
- Certified Nurse Anesthetist
- Certified Nurse Midwife
- Certified Nurse Practitioner
- Chiropractor
- Hearing Aid Dispenser
- Licensed Clinical Social Workers (LCSW)-Individual
- Licensed Marriage Family Therapist (LMFT)
- Licensed Midwife
- Licensed Professional Clinical Counselor Individual
- Occupational Therapist
- Ocularist and Dispensing optician
- Optometrist
- Orthotist
- Physical Therapist
- Physician/Surgeon
- Podiatrist
- Prosthetists/Mastectomy Fitters/O&P Combined

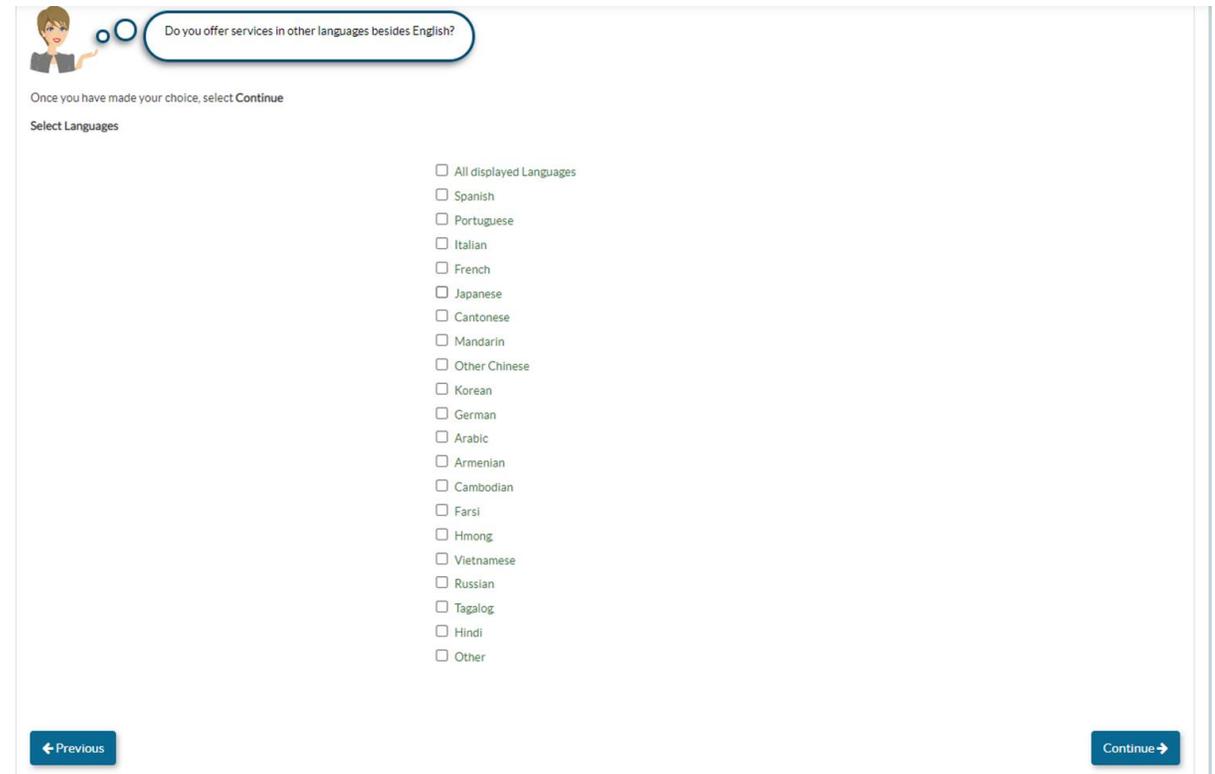
If you are unsure of your business structure page to make sure you have selected the correct option. It could also be that the provider type you are looking for is not supported. If you are unsure of your business structure, click [here](#)

Continue →

Fifth Questionnaire Page

Languages Offered

- » Select any additional languages offered at your service location besides English and click "continue."



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 →

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

 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, and I want to create a new application
I'm an individual licensed/certified healthcare practitioner

Business Structure
Individual billing practitioner
I'm an Ordering/Referring/Prescribing (ORP) provider, OR, I'm enrolling for the sole purpose of participating in a Managed Care Plan or as a Specialty Mental Health Services Provider and will be submitting claims for services I provide to counties and/or to managed care plans only

NPI of the application
[Redacted] [View Details](#)

Provider Type
Physician/Surgeon

Language
Spanish

[← Previous](#) [Continue →](#)

Medi-Cal Requirements

- » The Medi-Cal Program requirements are woven into the application process.
- » **The next two slides show:**
 - Who is authorized to sign the Medi-Cal application
 - List of required documents to attach

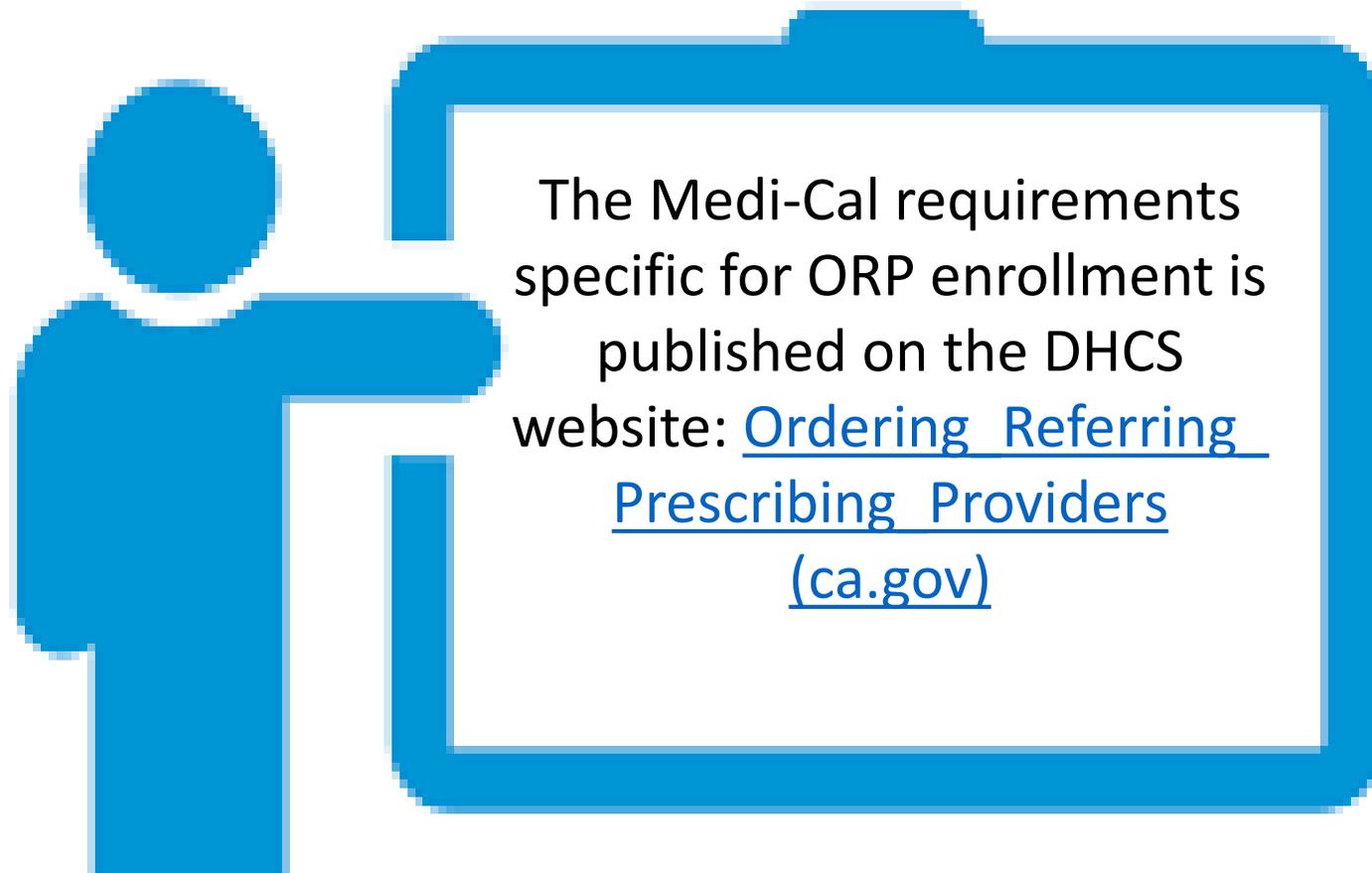
Who Can Sign Applications

- » CCR, Title 22, Section 51000.30(a)(2)(B)
 - Other persons may assist with preparing the application, but the provider themselves must access PAVE with their own unique username and password to complete the electronic signature. Providers cannot authorize another person to sign on their behalf.
 - 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.”

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
 - Copy of pocket license or wall certificate for professional license
 - If designated as high risk, Livescan receipt

Online Resources



The Medi-Cal requirements specific for ORP enrollment is published on the DHCS website: [Ordering Referring Prescribing Providers \(ca.gov\)](https://www.dhcs.ca.gov/Ordering-Referring-Prescribing-Providers)

Enrollment Process Initial Review

1. Complete your application in the PAVE portal



2. Submit your application



3. DHCS reviews in 'date order received'.



4. The legal allowance for the initial review period is 90 days for physicians and 180 days for all other provider types. However, 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

- » Attaching unreadable or incorrect documents
- » Expired documents

The Enrollment Process

Approval, Referral or Denial

- » When the review is completed, 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 denied your message in PAVE will include an attached letter with the denial reason(s) and your appeal rights.
- » If your application needs additional information or corrections, you will receive details on what is missing or incorrect.

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 submit a message from PAVE or email PAVE@dhcs.ca.gov.
- » 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>