

# Monterey County Behavioral Health Quality Improvement

May 12<sup>th</sup>, 2021

## Topic

This memo announces two new enrollment requirements from the Department of Health Care Services (DHCS) that must be met by all prescribers and most licensed practitioners working within Monterey County Behavioral Health and contracted providers. All Specialty Mental Health Services (SMHS) practitioners within specific licensed disciplines must enroll in the DHCS Provider Application and Validation for Enrollment (PAVE) portal. In addition, once enrolled in PAVE, prescribers must register in the Medi-Cal Rx Provider Web Portal.

### **Provider Application and Validation for Enrollment (PAVE)**

The Federal Cures Act (42 CFR 438.602(b)) requires states to screen, enroll and periodically re-validate all network providers of managed care organizations, including County Mental Health Plans. To meet this requirement, DHCS is requiring all County Mental Health Plans to utilize PAVE, a web-based application designed to simplify and accelerate enrollment processes, to enroll practitioners. Practitioners should utilize the portal to complete and submit applications, report changes to existing enrollments, and respond to DHCS initiated requests for continued enrollment or revalidation.

### **The following eligible practitioners must enroll into the PAVE System prior to July 1, 2021.:**

- Licensed Clinical Social Workers
- Licensed Marriage and Family Therapists
- Licensed Professional Clinical Counselors
- Licensed Psychologists
- Nurse Practitioners
- Occupational Therapists
- Medical Doctors and Osteopaths (DO)
- Physician Assistants
- Registered pharmacists, pharmacists
- Speech Therapists

*Note: Any discipline not listed above does not need to enroll in PAVE. This includes but is not limited to Psychiatric Technicians, Clinical Nurse Specialists, and Registered Nurses. Students and trainees do not need to enroll in the PAVE System.*

### **PAVE Enrollment Process**

Each eligible practitioner must enroll themselves through the DHCS PAVE Portal

<https://pave.dhcs.ca.gov/sso/login.do>.

Prior to enrollment, gather the following:

- a copy of their current driver's license or state-issued identification card
- a copy of their current professional license: **An attachment from the applicant's licensing board website, or California Breeze, is not an acceptable form of verification.**
- Your license/certification number (including issuance and expiration dates)
- Your Type- 1 (Individual) NPI Number
  - Not sure what your NPI number is? Your Type 1 (Individual) NPI is a 10-digit numeric

identifier assigned to each provider which is used for claiming in the Short-Doyle/Medi-Cal System. You can look up your individual Type 1 NPI information at:

<https://nppes.cms.hhs.gov/#/>

- Staff should make sure their NPES information is up to date and that their practice locations match where they are currently providing services. This is particularly important for prescribing practitioners. Staff are able to update their own NPI information in NPES (<https://nppes.cms.hhs.gov/#/>).
- Your provider location's 9-digit zip code (you can use the United States Postal Service Zip+4 Code Lookup: <https://tools.usps.com/go/ZipLookup>)

Both documents must be uploaded and attached to the application. Directions for enrollment in PAVE can be found on **Attachment A**.

### **Medi-Cal Rx Provider Web Portal**

On a separate but related requirement, Governor Newsom issued [Executive Order N-01-2019](#) which states the Medi-Cal pharmacy benefits will now be administered through the fee-for-service delivery system for all Medi-Cal beneficiaries (generally referred to as "Medi-Cal Rx"). DHCS has partnered with Magellan Medicaid Administration, Inc. (Magellan) to provide a wide-variety of administrative services and supports for Medi-Cal Rx. and will utilize the Medi-Cal Rx Provider Web Portal. All prescribers must be enrolled in the Medi-Cal Rx Provider Web Portal to submit prior authorization treatment requests and view prescription history.

The secure Medi-Cal Rx Provider Web Portal includes key functions for providers and prescribers such as:

- Prior Authorization Information and Submittal Instructions
- Beneficiary Eligibility Look Up
- Prescription History
- Web Claims Submission, Activities, and Inquiries

**All prescribers must register in the Portal before July 1, 2021.**

### **Medi-Cal Rx Provider Web Portal Registration Process**

In order to obtain access to the portal, prescribers must first enroll in PAVE. Please note that it will take some time for PAVE to process and approve enrollment so enrollment should be completed as soon as possible. Once a prescriber is enrolled in PAVE, they may proceed with registering for the Medi-Cal Rx Provider Web Portal. Step by step instructions for registering can be found on **Attachment B**.

Additional information will be communicated via a QI Memo if additional guidance is published.

Thank you,

Lindsey O' Leary  
Program Manager II, Quality Improvement

## Provider Application and Validation for Enrollment (PAVE) Registration Process

*Required for Certified Nurse Practitioners, Licensed Clinical Social Workers, Licensed Marriage and Family Therapists, Licensed Professional Clinical Counselors, Physicians (MD and DO), Psychologists and Registered Pharmacists*

The PAVE portal is the Department of Health Care Services (DHCS) web-based application designed to simplify and accelerate enrollment processes. Providers can utilize the portal to:

- Complete and submit applications
- Report changes to existing enrollments
- Respond to Provider Enrollment Division (PED) initiated requests for continued enrollment or revalidation
- For additional detailed registration instructions, view the PAVE 101 Training Slides at <https://www.dhcs.ca.gov/provgovpart/Pages/PAVE-101-Training-Slides.aspx> or access the PAVE Training Videos and other tutorials at <https://www.dhcs.ca.gov/provgovpart/Pages/PAVE.aspx>

### Instructions:

Step 1. Go to the PAVE Portal online enrollment system: <https://pave.dhcs.ca.gov/sso/login.do> and create a User ID and profile.

A User Profile is created by a single user during the initial sign up process. When a User Profile is created, there is only one unique username and password used to access PAVE.

**NOTE: Need Help Creating an ID? Call the PAVE Help Desk at (866) 252-1949. The Help Desk is available Monday - Friday, 08:00 am - 06:00 pm Pacific time, excluding state holidays.**



#### Welcome to PAVE!

My name is Lucy, I'm here to help you create your PAVE User Profile. This profile allows you to securely login to the PAVE Portal at any time (24/7) from an up-to-date web browser: Chrome, Firefox, Safari, IE Explorer.

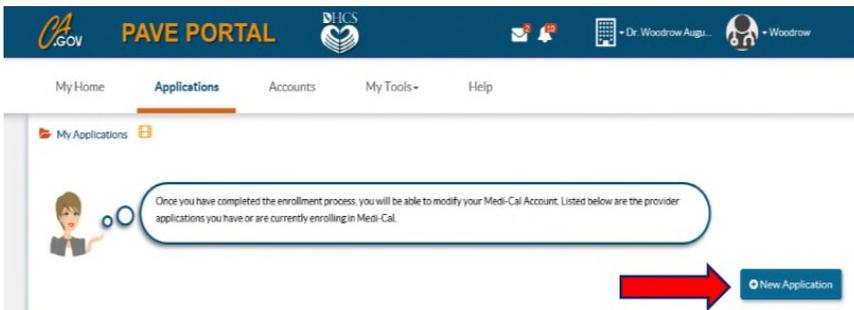
Let's get started!

<input type="text" value="First name"/>	<input type="text" value="Last name"/>
<input type="text" value="Username"/>	
<input type="password" value="Password"/>	<input type="password" value="Confirm"/> 
<input type="text" value="Phone number"/>	

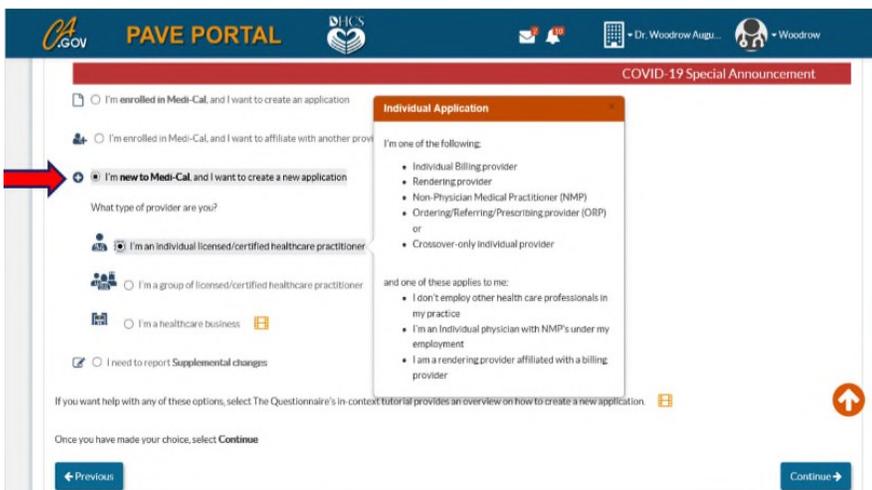


Step 2. Once your User Profile has been created, your PAVE Portal will look like the image below. Click on “Applications.”

Step 3. Within the PAVE Application Accounts Page, select “New Application.”



Step 4. Within the application, select the option “I’m new to Medi-Cal and I want to create a new application.”



Step 5. Next, select “I’m an individual licensed/certified healthcare practitioner” from the drop down and the click on “Continue”

CA.GOV PAVE PORTAL COVID-19 Special Announcement

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 practitioners

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

Individual Application

I'm one of the following:

- Individual Billing provider
- Rendering provider
- Non-Physician Medical Practitioner (NMP)
- Ordering/Referring/Prescribing provider (ORP) or Crossover only individual provider

and one of these applies to me:

- I don't employ other health care professionals in my practice
- I'm an individual physician with NMP's under my employment
- I am a rendering provider affiliated with a billing provider

← Previous Continue →

Step 6a. Under “Other type of provider,” select “I’m an Ordering/Referring/Prescribing (ORP) provider” and then click on “Continue.”

CA.GOV PAVE PORTAL

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

Ordering, Referring and Prescribing ORP

- I'll be using my Type 1 NPI (individual).
- My sole purpose is to order, refer, or prescribe items or services for Medi-Cal beneficiaries.
- I'm not currently enrolled as a Medi-Cal provider.

Once you have made your choice, select Continue

← Previous Continue →

Step 6b. You will be asked to verify information on your NPI. Once verified, click on “Continue.”

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)  Verify →

National Provider Identifier (NPI)

Type 1-Individual

Business name

Taxonomy code(s) 101YM0800X

NPPES address (registered)

Is this the correct information? ✓

Yes  No

Once you have made your choice, select Continue

← Previous Continue →

Step 7. Select your provider type from the drop-down and click on “Continue.”

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.

Licensed Clinical Social Workers (LCSW)-Individual ✓

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 →](#)

Step 8. Select any languages you use as a provider. Then click on “Continue.”

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
- Korean
- German
- Arabic
- Armenian
- Cambodian
- Farsi
- Hmong
- Vietnamese
- Russian
- Tagalog
- Hindi
- Other

Step 9. A summary of your application will be displayed for you to preview. If any changes need to be made, click on “Previous.” If no changes are needed, click on “Continue.”

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**  
Other type of provider  
I'm an Ordering/Referring/Prescribing (ORP) provider

**NPI of the application**  
1700040813 [View Details](#)

**Provider Type**  
Licensed Clinical Social Workers (LCSW)-Individual

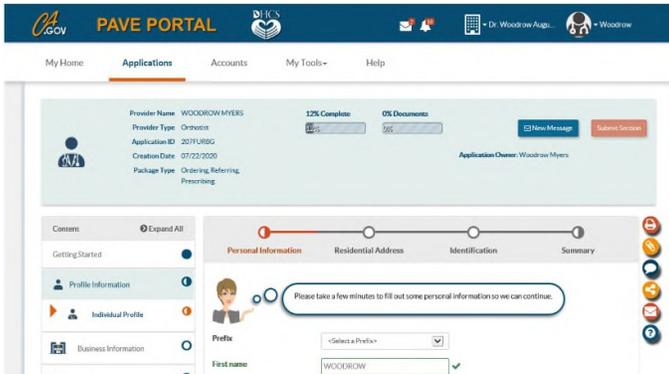
**Language**

[← Previous](#) [Continue →](#)

Step 10. Within the Ordering Referring, Prescribing Application (ORP) Application, enter the following required information in the Profile Information Section:

- Your legal name
- Your professional title
- Your date of birth and gender
- Your residential address (This cannot be a P.O. Box. You will be required to enter a 9-digit

- zip/postal code)
- Your social security number
- Your driver's license number or state-issued identification card number (*a copy must be attached to the application*)



- Step 11. Within the ORP Application, enter the following information in the Business Information Section:
- Addresses of all practices and/or clinics where you provide services to Medi-Cal beneficiaries (including the Provider site name and 9-digit zip/postal code)
  - Mailing address where you wish to receive correspondence
  - Your Professional License/Certificate Number (*a copy of the document must be attached to the application*)

**Add Entity** ✕

Entity's Legal Name  ✓

Street  ✓

Ste. / Apt. #

City  ✓

State/Province  ✓

County  ✓

ZIP Code/Postal Code  ✓

Step 12. Within the ORP Application Disclosure Information Section, complete information regarding ownership in other healthcare entities, past/current program participation, adverse actions, license history, and fines/debts.

*\*Failure to disclose this information is a cause for denial of the application*

Step 13. Sign the application by attesting to the accuracy of the information in the application and e-sign the application using your email address. Make sure the following documents are uploaded and attached:

- A copy of the provider's driver's license or state-issued identification card
- A copy of the provider's professional license

Document	Form/SubForm/Section	Mandatory	Attached	Actions
Driver's License	Profile Information/Individual Profile/Identification	Yes	✕	⊕ ⊕
Professional License or Certificate	Practice Information/Prof. Licenses/ Certificates & Lab Services	Yes	✕	⊕ ⊕

Step 14a: If your application is incomplete, the PED will return your application for corrections. Providers will be notified via email to log into PAVE to fix any deficiencies in the application. Resubmission of the application must be done within 60 days. If the application is not submitted within 60 days, the application will be denied automatically and you will need to start a new application.

Step 14b: If your application is approved, you will be notified via email to log into PAVE to receive your Approval Letter.

**Please download a copy of your Approval Letter and submit a copy to [415-QA@co.monterey.ca.us](mailto:415-QA@co.monterey.ca.us).**

Step 14c: If your application is denied, you will be notified via email to log into PAVE to receive your Denial Letter with Appeal Rights.

For more guidance on the registration process, please contact the PAVE Technical Support Help Desk at 1-866- 252-1949.

## Medi-Cal Rx Provider Web Portal Registration Process

### **Required for Prescribers Only**

Medi-Cal will transition pharmacy benefits services from Medi-Cal managed care to fee-for-service which will be administered by Magellan Medicaid Administration, Inc. (MMA) as the Medi-Cal Rx vendor. Among other things, the following will be an enhancement for prescribers and patients with this transition:

- Standardize the Medi-Cal pharmacy benefit statewide, under one delivery system
- Improve access to pharmacy services with a pharmacy network that includes the vast majority of the state's pharmacies and is generally more expansive than individual Medi-Cal managed care plan pharmacy networks.
- Apply statewide utilization management protocols to all outpatient drugs, as appropriate.
- Strengthen California's ability to negotiate state supplemental drug rebates with drug manufacturers as the largest Medicaid program in the country with over 13 million beneficiaries.

The secure Medi-Cal Rx Provider Web Portal includes key functions for providers and prescribers such as:

- Prior Authorization Information and Submittal Instructions
- Beneficiary Eligibility Look Up
- Web Claims Submission, Activities, and Inquiries

Registration is the first step in the process toward full utilization of the secure Medi-Cal Rx Provider Web Portal and the included tools for delivery and management of client services.

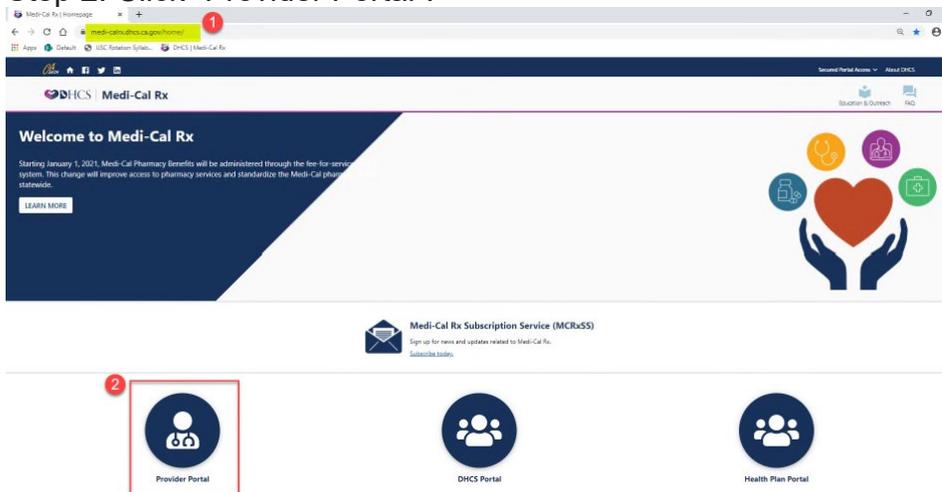
Instructions:

*The following steps should only be taken once a prescriber has enrolled in PAVE.*

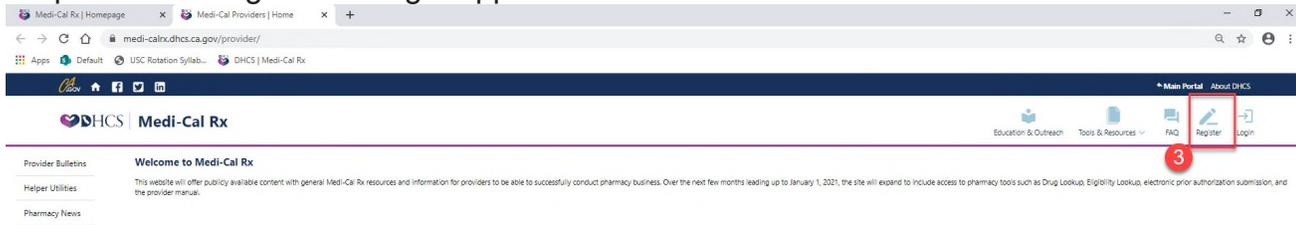
*Note: If you have not yet enrolled in PAVE or are waiting for approval, you may still want to proceed with the steps below if you have registered with a Managed Care Plan. This may allow you to continue while waiting for your PAVE approval.*

Step 1. Go to the Medi-Cal Rx Portal Website ([www.medi-calrx.dhcs.ca.gov](http://www.medi-calrx.dhcs.ca.gov)) using GOOGLE CHROME browser.

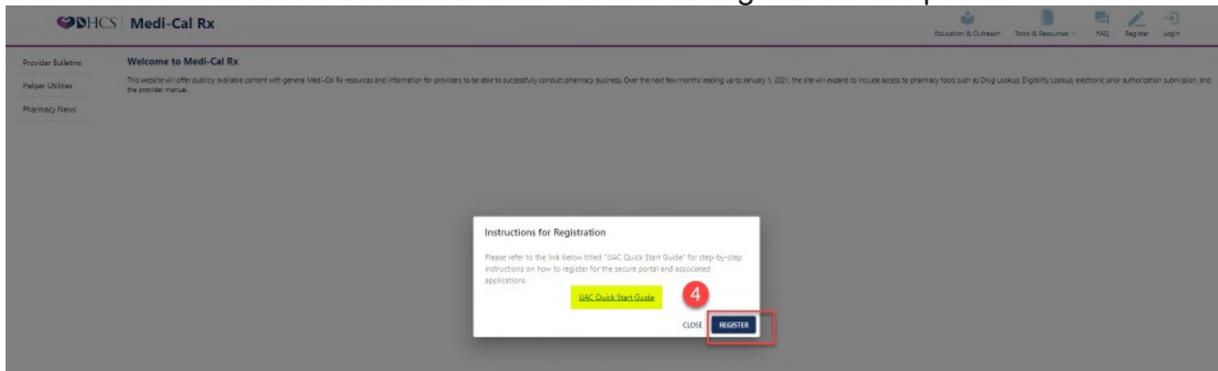
Step 2. Click "Provider Portal".



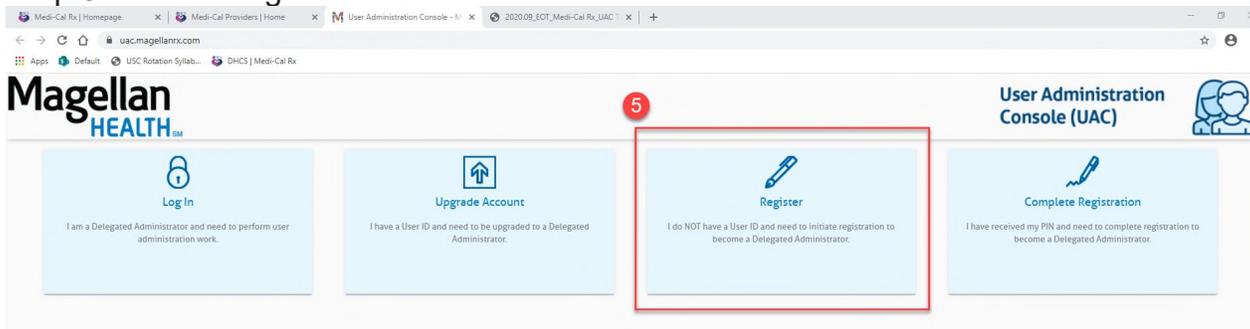
Step 3. Click “Register” on right upper corner.



Step 4. When the box as shown below pops up, click “Register”. You can also click on the “UAC Quick Start Guide” and follow the instructions on how to register for the portal.



Step 5. Select “Register” as shown below.



Step 6. Enter the following information:

- First Name: Enter your first name as registered in PAVE
- Last Name: Enter your last name as registered in PAVE
- Work Phone: Enter your work phone number
- Organization Type: Select “Provider”
- State: Select “Medi-Cal”
- Org ID Type: Select “Medi-Cal”
- Org ID: Enter your NPI number



Please fill out the fields below to register  
Indicates required field \*

New User Information

First Name\* **a** Last Name\* **b** Work Phone\* **c**

Organization Validation

Organization Type\* **d** State\* **e** Org ID Type\* **f**

Org ID\* **g**

Step 7. After entering all information in Step 6, click “  ”. At this point, it is important to check if the displayed address is your current mailing address where you are able to receive mail.

Step 8a. If you are already a registered Medi-Cal Provider in PAVE or a registered provider with one of the managed care organizations, the screen will display the address where your PIN number will be mailed. You will need this PIN number to complete the second portion of registration. If the address is NOT CURRENT, please check the “[Alt address info](#)” box. By checking this box, Medi-Cal Portal will suppress the automated mailing of your PIN to the address displayed and will wait for you to submit a signed letter which notifies Medi-Cal Rx Portal administrator of an alternative address that you need the PIN to be mailed to. This feature allows you to receive the PIN even if your address on PAVE or with managed care organization is not current.

New User Information

First Name\* [Redacted] Last Name\* [Redacted] Work Phone\* [Redacted]

Organization Validation

Organization Type\* Provider State\* Medi-Cal Org ID Type\* NPI

Org ID\*

Org Id ↑	Context(s)	Org Name	Address	City	State	Zip	Phone	Alt. Address	Discard
NPI: [Redacted]	California Prescriber Context	[Redacted]	[Redacted]	LOS ANGELES	CA	900257082		<input type="checkbox"/> Alt address info	

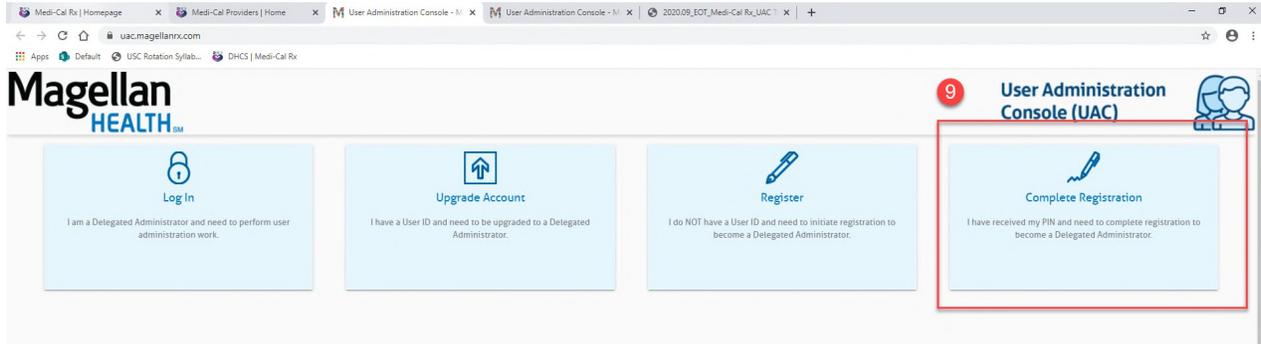
Rows per page: 5 1-1 of 1

After you have completed entering your Organization information, you will need to select the VALIDATE ORG button to retrieve the information for the application, If you have multiple Organizations, you should enter each separately and ensure to validate each before submitting in order to avoid having to complete multiple registrations. PIN letters will be mailed to the address of record on the NCPDP registration. If the address is not correct, click the "Alt Address Info" link for further instructions. If you do not wish to request a PIN for an Organization in your list of retrieved data, use the trash can icon to discard that line. Once you have completed the application with all of the Organizations listed, select the SUBMIT button. If you wish to discard the application, select CANCEL.



Note: The following steps can only be completed after you receive the PIN number by mail.

Step 9. Return to the below screen by following Step 1 to 4 of this document. Select “Complete Registration”



Step 10. Enter the following information as it is registered in or used for PAVE:

- First Name
- Last Name
- User UD (Email): Enter email address used for PAVE registration
- Password
- Re-enter Password
- Address Line 1
- Address Line 2
- City
- State
- Zip/Postal Code
- Phone number
- Organization Type: Select “Provider”
- State: Select “Medi-Cal”
- Org ID Type: Select “NPI”
- Org ID: Enter your NPI number
- Pin: Enter PIN provided to you by mail
- Click “**VALIDATE ORG**”

**Magellan HEALTH** User Administration Console (UAC)

Please fill out the fields below to complete registration  
Indicates required field \*

**New User Information**

First Name \* **a** Last Name \* **b**

User ID (Email) \* **c** Password \* **d** Re-enter Password \* **e**

Address Line 1 \* **f** Address Line 2 \* **g** City \* **h**

State \* **i** Zip / Postal Code \* **j** Phone \* **k**

Fax

**Organization Validation**

Organization Type \* **l** State \* **m** Org ID Type \* **n**

Org ID \* **o** Pin \* **p** **VALIDATE ORG** **q**

Step 11. A successful validation will populate your registration information as shown below. Click **SUBMIT**

**Organization Validation**

Organization Type\*  State\*  Org ID Type\*

Org ID\*  Pin\*  **VALIDATE ORG**

Org Id	Context(s)	Org Name	Address	City	State	Zip	Phone	Alt Address	Discard
NPI: [REDACTED]	California Prescriber Context	[REDACTED]	[REDACTED]	[REDACTED]	CA	[REDACTED]			

Rows per page: 5 1-1 of 1

If you do not wish to register with an organization listed above, use the trash can to discard that organization. Enter another Organization ID and PIN to validate or click Submit to complete PIN Registration for the Organization(s) listed above. Click Cancel to discontinue the PIN Registration process.  
Password must be at least 8 characters long, contain a lowercase letter, an uppercase letter, a number, no parts of your username, and can not include your first name or last name.

**SUBMIT** **11** **CANCEL**

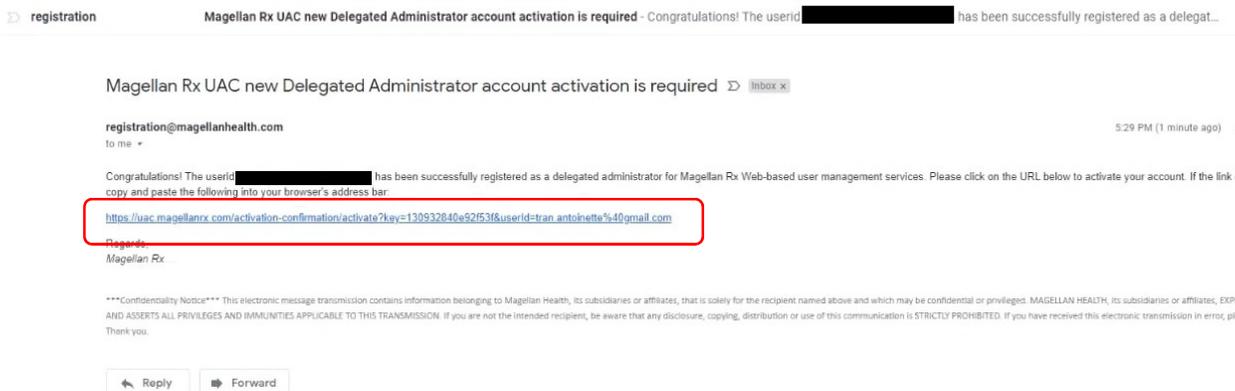
Step 12. A “PIN Registration Confirmation” will appear. An activation link will also be sent to the email account registered with PAVE.

**PIN Registration Confirmation**

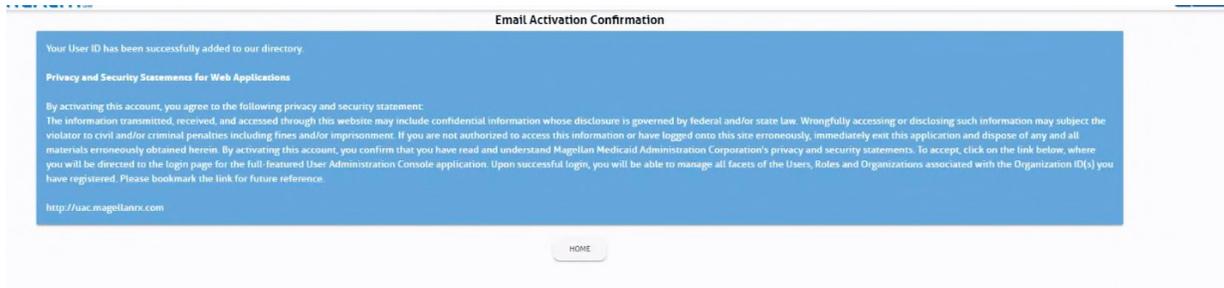
An email containing an activation link will be sent to [REDACTED]. After you click on the activation link, a confirmation screen will appear in your browser window letting you know that you have been successfully added to our directory. The confirmation screen will also contain a link which will direct you to the full featured application, requiring you to enter your User ID and password. After successfully logging in, you will be able to manage all facets of the Users, Roles and Organizations associated with the Organization ID(s) you registered.

**HOME**

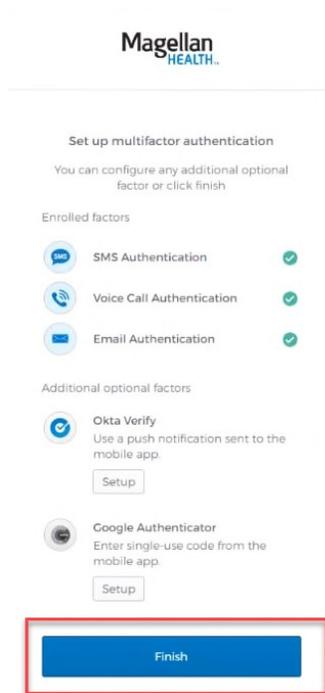
Step 13. In the email from Magellan Rx, click on the activation link as shown below:



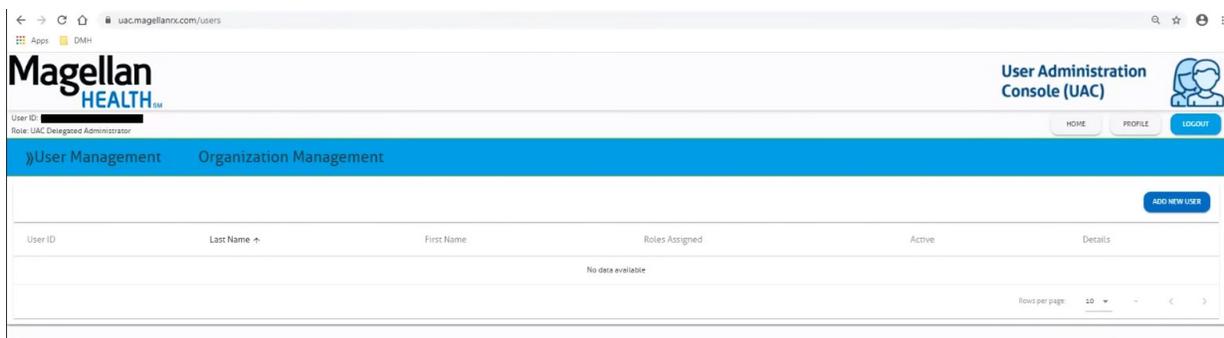
After your account is activated, an “Email Activation Confirmation” will display in the Medi-Cal Rx Provider Portal site as shown below:



Step 14. Follow the prompts to complete multifactor authentication. You can set-up either Okta Verity, Google Authenticator, SMS Authentication, Voice Call Authentication, or Email Authentication. Please set-up SMS, Voice Call, and Email for the minimum requirements. Okta Verity is the third-party vendor that Medi-Cal Rx contracts with to provide training for Medi-Cal Provider on how to navigate the Medi-Cal Rx Portal. Once you have completed multifactor authentication, please click “Finish.”



You are now successfully registered with Medi-Cal Rx Portal.



For more guidance on registration process and training session registration, please refer to this [Medi-Cal Rx Web Portal and Training Registration document](#)