Medi-Cal Enrollment FAQs

1. **What is the source of this new requirement?**

   *Answer:* This new requirement is the result of the California Department of Health Care Services (DHCS) coming into compliance with federal regulations designed to reduce the incidence of fraud and abuse by ensuring that providers are individually identified and screened for licensure and certification. CMS-6028-FC enhanced the enrollment and screening processes for Medicaid Fee-For-Service providers pursuant to the Affordable Care Act.

2. **But I’ve been contracted with CenCal Health for many years and was never required to enroll with DHCS before.**

   *Answer:* That’s true; in the past DHCS waived the enrollment process for providers who only provided services to Managed Care Plan (MCP) Medi-Cal members, such as CenCal Health’s SBHI and SLOHI members, so long as the MCP credentialed their contracted providers according to DHSC requirements. In May of 2016, CMS issued rulemaking CMS-2390-F, which extended the screening and enrollment requirements referenced above to MCP contracted providers.

3. **I’ve been credentialed by CenCal Health- how is this different?**

   *Answer:* In November of 2017, DHCS published new requirements for MCPs in line with the CMS requirements above. These new requirements (CMS & DHCS) make it clear that credentialing and screening/enrollment are two completely separate processes, and both are required. We are hearing many different terms being used interchangeably and understand that terminology is one of the most challenging aspects of this change. Consider these definitions:

   **Credentialing:** is the process of verifying that providers have the education, training and licensure/certification to deem them qualified to provide covered medical services to our members. It also includes monitoring for various occurrences that may indicate a potential risk of harm to our members, such as: disciplinary actions against a license or serious/excessive malpractice suits. The credentialing process CenCal Health has followed for many years already meets DHCS requirements and is not changed by the new requirements.

   **Enrollment:** is the process to identify providers who are providing covered medical services to our members and ensure they understand the requirements of being a Medi-Cal provider. It also includes the processes designed to limit the potential for fraud and abuse, such as risk-based screening requirements and disclosure of ownership and control of practices and entities who submit claims for medical services rendered to Medi-Cal members.

4. **What is the screening process?**

   *Answer:* The screening process is also designed to limit the potential for fraud and abuse in the Medi-Cal system. Providers are deemed limited, moderate, or high risk based on provider type. Most providers are in the limited risk category, and that screening process is already accomplished through routine credentialing (such as verifying a medical license and that a provider has not been excluded from any State or Federal programs). Screening for moderate and high risk providers may include site visits,
fingerprinting, and background checks. DHCS is retaining responsibility for screening of moderate and high risk providers. The screening requirements have been in place for a while and are not changed by these new requirements.

5. **Which providers must enroll and what is the deadline to complete the enrollment process?**

*Answer: Effective January 1, 2018,* all providers who render medical services to Medi-Cal members are required to enroll, even those for whom there is currently no enrollment pathway through DHCS (there are some exceptions, such as mail order pharmacies, etc.). CenCal Health is responsible for ensuring that any newly contracting providers are enrolled and is implementing that as part of the onboarding process. All currently contracted CenCal Health providers are required to enroll by **December 31, 2018**, or risk being unable to receive payment from CenCal Health.

6. **I'm not sure whether I'm enrolled - how can I find out?**

*Answer: DHCS has made an “Open Portal” available that can be searched using NPI (preferred) or other identifiers, such as name. These lists are refreshed monthly despite the date in the links. But don’t try to download them, they are very large files! Most provider types can search the list at the link below (click “preview”, then enter the NPI in the search field):*

https://data.chhs.ca.gov/dataset/profile-of-enrolled Medi-Cal fee-for-service ffs providers as-of-june-1-2017/resource/d7cd2c98-3454-46c5-810b-b5436b54de3a

Some non-physician medical providers, such as NPs and PAs, may be found on this list:

https://data.chhs.ca.gov/dataset/profile-of-enrolled Medi-Cal fee-for-service ffs providers as-of-june-1-2017/resource/f11104a4-35e2-4d6a-b4d0-8fba12f10a48

7. **What does the enrollment process consist of?**

*Answer: There are basically three pieces: an application, an agreement and a disclosure statement:*

- The Application collects basic information about the provider, such as address, specialty, license number, etc.
- The Agreement is an affirmation that the provider wishes to be a Medi-Cal provider; this is different from your agreement to be a contracted CenCal Health provider
- The Disclosure Statement collects the ownership and control information about the practice or entity that will be providing medical services. For solo practitioners, most of this piece is N/A.

8. **How do I begin the enrollment process?**

*Answer: DHCS’ Provider Enrollment Division (PED) has worked to expand the online enrollment process to most provider types. We recommend this method which can be accessed at the following link:*

http://www.dhcs.ca.gov/provgovpart/Pages/PAVE.aspx
9. **Can CenCal Health help me enroll with DHCS?**

*Answer:* Unfortunately we have no control over the DHCS enrollment process and are only able to offer information and links to DHCS’ online resources.

10. **But I only see CenCal Health Medi-Cal members and/or I tried to enroll with DHCS in the past, and found it too difficult or was unable to complete the process.**

*Answer:* Good news! DHCS has allowed MCPs to develop and implement a Plan enrollment process for contracted providers who ONLY see their Medi-Cal MCP members, so long as that enrollment process meets DHCS requirements. Just a few MCPs are opting to do this, including CenCal Health! For now, we’re using DHCS enrollment packets but we are collaborating with other MCPs across the state in an effort to streamline the process if possible. Please look for enrollment information on our website at [www.cencalhealth.org](http://www.cencalhealth.org). If eligible to enroll through CenCal Health, contact your Provider Services Representative at (805) 562-1677 or [providerservices@cencalhealth.org](mailto:providerservices@cencalhealth.org) for direction. Unlike DHCS, we are currently not charging an application fee or requiring forms to be notarized. Also, the instructions say to send the forms to DHCS; instead you will e-mail, fax or mail them straight to CenCal Health.

Send enrollment packets to:

E-mail: [thannon@cencalhealth.org](mailto:thannon@cencalhealth.org)
Fax: (805) 681-8265 ATTN: Tanner Hannon
Mail: CenCal Health, 4050 Calle Real, Santa Barbara, CA, 93110 ATTN: Tanner Hannon

11. **If I enroll through CenCal Health, what happens to my enrollment information? Is it forwarded to DHCS? Will I be required to see FFS Medi-Cal members? How long does the process take?**

*Answer:* When we receive your enrollment packet, we’ll review it to make sure it is complete and that it includes all the attachments listed in the instructions. If clarification or additional information is needed, we’ll contact you. If it is complete, you should receive an approval letter in approximately 2 weeks. We maintain all of your documents here and do not forward them to DHCS, however they are subject to DHCS audit processes, just like any other provider information. You will continue to be included in our network reports and directory, but there is no DHCS roster of MCP-enrolled providers, nor will you be required to accept any FFS Medi-Cal members. **Please remember that if you intend to see any Fee For Service (FFS) Medi-Cal members, you MUST enroll through DHCS in order to submit claims.** Should you expand or relocate your practice to another Medi-Cal Managed Care county, you may use our approval letter to demonstrate that you have enrolled, and we will happily provide confirmation if needed.

12. **What if I still have questions, or need guidance for more complicated or unique situations?**

*Answer:* CenCal Health is here to help! Some of our core values include commitment to the community and collaboration with our provider partners, and we take that very seriously. We appreciate our providers and our goal is to assist you in this process. Please reach out to our Provider Relations team at (805) 562-1676 or [providerservices@cencalhealth.org](mailto:providerservices@cencalhealth.org) with any questions.