PT 06 SUD Guide

This Job Aid provides important information and demonstrates input screens to assist SUD providers in completing a New Enrollment in Partner Portal.

Provider Type Summary

For detailed information and documentation requirements, click the following link to access the PT 06 Chemical Dependency Treatment Center (CDTC) Provider Type Summary

Prior to Starting a New Enrollment

Providers must possess, or be in the process of obtaining the following:

- **Accreditation Certification from a Nationally Recognized Organization**
- **ASAM LOC Certification** - Users who do not currently have an ASAM LOC Certification must obtain a Provisional Certification from DMS prior to applying for a Medicaid ID.

Accreditation Certification

Providers are required to obtain an Accreditation Certification from one of the following programs: The Joint Commission, Commission on Accreditation of Rehabilitation Facilities (CARF), Council on Accreditation (COA) or a nationally recognized accreditation organization. In order to complete a New Enrollment in Partner Portal, users are required to have initiated the Accreditation process.

Provisional Certification & ASAM LOC Certification

Providers offering residential/inpatient services are required to obtain an ASAM LOC certification. Users who have not yet obtained an ASAM LOC certification may be granted a Provisional Certification by DMS after submitting a self-attestation form and supporting documents prior to completing a New Enrollment.

This will allow providers to begin offering and billing for services while in the process of obtaining the ASAM LOC certification. Provisional certifications are awarded for at least one year and have a 6/30 end date. Users who do not acquire the ASAM LOC certification within the allocated timeframe will have their Medicaid ID end dated.

After receiving the ASAM LOC certification, a Maintenance action must be performed in Partner Portal to add the certification details and upload the documentation. For more information on how to perform Maintenance and Upload Documents in Partner Portal, refer to the How to Update Information on a Medicaid File (Maintenance) and the Uploading Documents Job Aids.

> **For additional information on the ASAM LOC certification and obtaining a Provisional Certification from DMS, click here.**

Navigating Partner Portal Screens

The information below includes screens relevant to SUD Providers and does not represent a complete New Enrollment Application. For more information on completing a New Enrollment, refer to the How to Apply for a Medicaid ID - New Enrollment Job Aid.

1.1 Basic Information Screen

Users should indicate if they are currently accredited. If not, and the process has been initiated, enter accredited organization name and date that accreditation was initiated.

*Are you currently accredited by a Nationally Recognized Accreditation Organization?

○ Yes ● No

Select if you are currently Accredited. If "No", enter Accredited Organization Name and Date Accreditation was initiated.

* Accredited Organization Name

* Initiated Date

MM/DD/YYYY

* Requested Effective Date

08/23/2023

* Application Received Date

08/23/2023

The Requested Effective Date applies to the Medicaid ID and when it will become Active. It does not apply to Accreditation.

Users who have initiated the accreditation process will receive reminder notifications 90 days, 60 days, and 30 days prior to the accreditation submission due date. After a Medicaid ID is issued, users can request an additional one year extension by completing a Maintenance on the 1.1 Basic Information Screen prior to the due date.

1.5 Add Group Members

At least one group member with an active Medicaid ID must be added.

Provider Medicaid ID	NPI	Provider Name	
		No records fou	

* Provider Medicaid ID

*Provider Linkage Effective Date

MM/DD/YYYY

Enter Provider's Medicaid ID and intended Effective Date. Select "Verify Provider Medicaid ID"

Verify Provider Medicaid ID

After information has been entered, Click "Add to Grid"

Add To Grid

1.10 Enter Bed Data

Bed data must be entered to indicate the number of Adult and Adolescent Beds located at the selected address.

Select Address pre-populated from the 1.7 Address Information Screen

Select Bed Type

*Physical Address
Select One

*Bed Type
Select One

*Bed Effective Date
08/23/2023

Bed End Date
MM/DD/YYYY

*Adult Beds

*Adolescent Beds

When complete, click "Add to Grid"

Add To Grid

Indicate number of Adult & Adolescent Beds at Facility

2.2 Licence Information

At least one CDTC License is required.

*Physical Address
Select One

* License Type
Select One

* Issue State
Select One

* License Number

Provider Name
Chemical Dependency

* License Designation
Select One

* License Effective Date
MM/DD/YYYY

* License Expiration Date
MM/DD/YYYY

License Effective & Expiration date must match the information on License

Add To Grid

After information has been entered, Click "Add to Grid"

2.3 Certification Information

The following certification information must be inputted:

- **Provisional Certification OR ASAM LOC Certification:** Users must indicate the current LOC (3.5 or 3.7)
- **Accreditation Certification:** Users in the process of obtaining accreditation are not required to enter Certification Information unless they posses an Other Certification.

8.0 Certification Document Upload

Documents indicated with a "Y" are required to be uploaded. Additionally, a Certification of Accreditation is required if users are currently accredited from a national organization. For more information on uploading documents, refer to the Uploading Documents Job Aid.

For further assistance with navigation, invitations, or account creation please contact the Partner Portal Technical Support Center at 877-838-5085. Select option 1 and option 1, again, to speak with a customer service representative.

5