# PT 26 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 <u>PT 26 Behavioral Health Multi-Specialty Group</u> <u>Provider Type Summary</u>. Visit the <u>Residential Crisis Stabilization Unit</u> <u>(RCSU) webpage for more information on PT 26.</u>

## **Prior to Starting a New Enrollment**

• ASAM LOC Certification - Users who do not currently have an ASAM LOC 3.7 Certification must obtain a Provisional Certification from DMS prior to applying for a Medicaid ID.

#### **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 selfattestation 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, see the <u>How to Update Information on a Medicaid File (Maintenance)</u> and the <u>Uploading Documents</u> Job Aids.



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## **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 <u>How to Apply for a Medicaid ID - New</u> <u>Enrollment Job Aid</u>.

#### **1.1 Basic Information Screen**

Select 'Yes' to indicate user is providing SUD Residential services. Enter the effective date for the Medicaid ID. The Application Received Date will be pre-populated.

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1.3 NPI Information	0	<ul> <li>The email a access you</li> </ul>			st be the same	as the one	used in the	e Kentucky (	Online Gate	eway (P	(OG) to
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1.6 Additional Identifiers	•				2 Non-NTP an				h Tier 2 NT	P. Tier	2 NTP
1.7 Address Information	•	<ul> <li>For PT06."</li> </ul>			on Name": If yo	u are curre	ntly not ac	credited en	fer the nam	e of the	a agency i
1.8 Contact Information	•	which you a									
1.9 Language Information	۰.	Business Name									
1.10 Bed Data	0	Residential Crisis	Stabilization	Unit (RCSU	)						
1.11 Locum Tenens	0 D	oing Business A	a								
1.12 Teaching Facility	0	Residential Crisis	Stabilization	Unit (RCSU	)						
1.13 Telehealth Information	A	egally Authoriz ddress (Owner,			Confirm Leg		zed Agent				
1.14 NTP Address Information	Ø M	ember)			amanda.ridge	way@ky.gov					
1.15 CLIA Information	•	amanda.ridgeway	@ky.gov								
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1.0 Provider Group Linkage	0 .,	Are you providin	g substand	e use disor	der Residentia	I Services?					
1.0 Account Information	• •	Yes O No									
.0 Fee Payment	•	Requested Effe	ctive Date		<ul> <li>Application</li> </ul>	Received D	ate				
.0 Document Upload	•	05/29/2023		•	06/29/2023						
1.0 Provider Review	•										
10.0 Submit	•	Ext							Sa	we & 1	Next.



#### 1.10 Bed Data

Click 'Add' to add Bed Data. Enter all required information. If the organization has multiple residential licensed programs at the same location, enter a record for each program.

1.1 Basic Information	•	Bed Information			0 • Required
	8				
1.2 Tax Information	8	<ul> <li>Click "Add" If you wish to add Be record</li> </ul>	d Data records, "Edit" to char	nge existing record, "Re	move" to delete existing
1.3 NPI Information	ß	<ul> <li>After pressing "Add", enter data a</li> </ul>	and then press "Add to Grid"	to add record to the grid	, "Discard" to not save
1.4 Taxonomy Information	ß	<ul> <li>For Provider Types 03, 06, 26, 30</li> </ul>	): If your organization is provi	ding residential services	and have multiple
1.5 Add Group Members	0	residential licensed programs at program with Bed Effective date	the same location, please ent	ter a Bed record for each	h residential licensed
1.6 Additional Identifiers	8	program with bed Ellective date.	and End-date same as Licen	se Enecuve date and Er	o-date.
1.7 Address Information	C				Discard
1.8 Contact Information	C				
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1.10 Bed Data	1		No records found		
1.11 Locum Tenens	0				
1.12 Teaching Facility	0	* Physical Address	*Bed Type		
1.13 Telehealth Information	0	ADR01 - Residential Crisis Stabil 👻	Residential	~	
1.14 NTP Address Information	0	*Bed Effective Date	Bed End Date	1.00	
1.15 CLIA Information	C	08/29/2023	08/29/2024	<b></b>	
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3.0 Disclosure of Ownership and Con Interest					

## 2.2 License Information

Select 'Add' to enter the RCSU license information.

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Exit Back Save & Nort			Exit Back Save & Next



## PT 26 SUD Guide

#### 2.3 Certification Information

The following certification information must be inputted:

• **Provisional Certification OR ASAM LOC Certification:** Users must indicate the current LOC (3.7)

2.1 Specialties Information	e .	CIICK MUU III y record	you wish to add Ce	URAINIS, CUR	to change existing	recuru, rea	nove no delete e	лыну
2.2 License Information	∝ .		"Add", enter data a	and then press "	Add to Grid" to add	a record to th	te grid, "Discard"	to not sa
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.0 Attestations	0			No r	ecords found			
.0 Provider Group Linkage	0							
0 Account Information	•	Certification T	ype					
0 Fee Payment	0	AS - ASAM				~		
.0 Document Upload	•	ASAM Level						
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#### 8.0 Document Upload

Documents indicated with a "Y" are required to be uploaded. For more information on uploading documents, refer to the <u>Uploading Documents Job Aid</u>.

1.0 Administrative Information	Document Upload				0 0	* = Require
2.5 Provider Qualifications   3.6 Disclosure of Ownership and Contrel Interest  4.8 Disclosure of Ownership and Contrel Interest  4.9 Alterations  4.0 Account Internation  5.1 Pie Payment  4.8 Decemment Uplead	Required documents are I     User may select "Add" to i     Click "Add" to upload a dc     After clicking "Add", click "     press "Insert"     Fill out the required fields     Please Note: JPG, JPEG,	ust be uploaded to submit applicat isted in grid with 'Required = Y', se upload any additional documents to cument, 'Dieleth' to remove uploa Browset' and use 'Insert Filer' pop and then Click 'Add to Grid' when 'TXT, RTF, CSV, DOC, DOCK, XLS ocuments uploads and the file size	lect 'Edit' or o grid ded docume up to locate ou are read 3, XLSX, TIF	nt each file you ly to upload ( F, TIFF and I	u wish to upl	oad and then
0.0 Provider Review						Add
10.0 Submit	Document Type	Name	Required	Uploaded By	Uploaded Date	Action
	IRS Letter of Verification of FEIN or Official IRS documentation stating FEIN	FEIN Verification	Y			
	Residential Crisis Stabilization Unit License	Residential Crisis Stabilization Unit License - 800163	Y			
	AS-ASAM Certification	AS - ASAM - 3.7 - ADR01 - Residential Crisis Stabilization Unit (RCSU) - 840 Hillwood Ave, Frankfort, 40601 - 1234	Y			68
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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.