

This review was conducted according to the authority set forth in 42 CFR §455.12 through §455.17, 42 CFR §456.21 through §456.23, 42 CFR § 1003.133 and the Code of Virginia §32.1-310, §32.1-312, and §32.1-313.

The Medicaid *Community Mental Health Rehabilitative Services (CMHRS) Manual*, Chapter II, page 17, states: “Pursuant to §32.1-325.1 of the Code of Virginia, DMAS is required to collect identified overpayments.”

As a signatory to the Medicaid Provider Agreement, you are responsible for adhering to the policies and regulations outlined in the Medicaid *CMHRS Manual*, Chapter I, page 20, which states:

“The provider is responsible for reading and adhering to the policies and regulations explained in this manual and for ensuring that all employees do likewise. The provider also certifies by his or her personal signature or the signature of an authorized agent on each invoice that all information provided to the Department of Medical Assistance Services is true, accurate, and complete. Satisfaction and payment of any claim will be from federal and State funds...”