NEW CONTRACT CHANGES - RESOURCES

- **Provider Manual 3.0** – Will be released end of February 2018
  Available At: SAPC Website, Network Providers Page, Provider Manual and Forms Tab

- **Rates and Standards Matrix** – February 7, 2018
  Available At: SAPC Website, Network Providers Page, Provider Manual and Forms Tab; Financial Forms and Documents

- **Revised Information Notice on Transitional Billing** – Sent January 26, 2018
  - Due to acclimation with the Sage system, providers have until February 28, 2018 to submit all completed necessary clinical documentation for services
  - SAPC will issue a one-time monetary amount for services provided but not yet billed
  - Providers are required to prove medical necessity and income verification for clients in order to receive payment for services

Questions – please contact the Sage Help Desk: Sage@ph.lacounty.gov

NEW CONTRACT BULLETINS – MORE TO COME!

Be on the lookout for SAPC Bulletins: 1) Residential Treatment Programs, 2) Out-of-County Services, 3) CENS, 4) Recovery Bridge Housing, and 5) Opioid Treatment Programs (OTPs)!
CIBHS TECHNICAL ASSISTANCE AND SAGE TRAININGS

• Youth Trainings: Recovery Support Models and Practices for Youth System of Care
  • Thursday, 2/8/2018 – 9:00 AM to 12:15 PM
    Register At: Network Providers; Capacity Building and Training Resources; Training Calendar
  • Thursday, 2/22/2018 – 1:00 PM to 4:15 PM
    Register At: Network Providers; Capacity Building and Training Resources; Training Calendar
  For More Information Contact Amy McIlvaine at amcilvaine@cibhs.org or (916) 379-5330

• Webinar Trainings for Sage:
  • Sage for CENS: Thursday, 2/8/2018 – 10 AM to 12 PM; 1:00 PM to 3:00 PM
  • Sage ProviderConnect for Administrative and Financial Users: Monday, 2/26/2018 – 8:00 AM to 11AM; 1:00 PM to 4:00 PM
  • Sage ProviderConnect for Clinical Users: Tuesday, 2/27/2018 – 8:00 AM to 1:00 PM
  • Sage ProviderConnect for Crosstraining and SuperUsers: Wednesday, 2/28/2018 – 8:00 AM to 1:00 PM
  For More Information visit: http://publichealth.lacounty.gov/sapc/Sage/Sageinfo.htm; Sage course schedule for Jan/Feb 2018 by Date

SUD TRANSFORMATION BI-WEEKLY CALLS

Beginning on February 21, 2018, the QI & UM provider call will be repurposed to a broader START-ODS call and expanded to include representatives from QI & UM, Systems of Care, Contracts, Finance, IT and Planning. Submit questions in advance to SUDtransformation@ph.lacounty.gov with “Provider Call” in Subject. Call details are coming soon.

SBAT UPDATES AND OTHER CONTRACT ISSUES

To allow patients, providers, CENS and SASH access the most current network capacity information, remember to update the SBAT daily! For questions about the online directory, or report any contract related issues, please email SAPCMonitoring@ph.lacounty.gov

SAGE INFORMATION

Please remember to check the “ProviderConnect News” screen of Sage to receive important information related to system updates and instructions on how to use the system more effectively.

Available At: Log-in to ProviderConnect, located on the second screen after the log-in landing page
HEPATITIS A VACCINATIONS:
*Protect Staff and the Patients You Serve!*

In September, the Los Angeles County Department of Public Health declared a local Hepatitis A among persons experiencing homelessness and persons using illicit drugs.
- Los Angeles County emphasizes the need to provide the Hepatitis A vaccination for individuals receiving substance use disorder treatment services.
- Vaccinate both patients and staff to reduce risk of a potential outbreak.

To receive assistance to schedule a hepatitis A vaccination clinic at your site, please call: 877-777-5799

**Did you know that...** Vaccination of all children between 12 and 24 months of age began only in 1999? Thus, clients over the age of 18 remain vulnerable to infection!

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**ESTABLISHING BENEFITS AND PROVIDING SERVICES:**
*Providers now have 60 vs. 45 days to establish benefits!*

SAPC now pays for up to 60 days of Medically Necessary SUD Treatment in order for providers to assist patients with benefits acquisition. **Eligible individuals may NOT be denied services pending establishment of Medi-Cal or My Health LA participation.**

Network providers will be reimbursed for delivered treatment services when they:
- Assist likely eligible individuals complete the Medi-Cal application and obtain a CIN number, but for some reason enrollment is delayed or denied.
- Assist Medi-Cal beneficiaries who moved to L.A. County transfer benefits, but for some reason enrollment is delayed or denied.

**SAPC recommends submitting Medi-Cal application for patients within 7 days with LACPRS data.**

**EXTENDED STAYS REMINDER!**

Providers should not turn away patients who clinically require more than 2 residential stays. To ensure access to medically necessary services, SAPC will reimburse for more than 2 residential admissions for adults 21+ using other, non-DMC funds.  
**Note:** Providers must document the appropriate justification upon authorization submission!
SERVICE DELIVERY STANDARDS:  
Provide Timely Access to Services for Patients

Plans and provider network must comply with the network adequacy standards outlined by DHCS.

For all LOCs:

- Assessment appointment immediately scheduled but no longer than 3 calendar days of screening/referral
  - CENS and SASH may move to the next provider if no immediate response or available appointment
- Assessment appointment conducted within 10 business days of screening/referral; within 5 business days starting July 1, 2018
- Up to 15 miles or 30 minutes from the beneficiary’s place of residence

Available At: SAPC homepage; Provider Manual and Forms; Provider Manual for Substance Use Disorder Treatment Services Version 2.0

PATIENT- VS. PROGRAM-CENTERED CARE:  
Make Care Accessible to All in Los Angeles County

Accessing care for SUD patients can be difficult. Be mindful of placing unnecessary filters on services!

For example, a client seeking MAT should not have to meet program-specific requirements such as: involvement with the criminal justice system, historical experience with other withdrawal management program, continuous use of medication, or possess a prescription in order to receive treatment.

SAPC has established a single benefits package for all beneficiaries!

Serving At-Risk Patients: Sliding scale fees or flat fees are NOT allowable for Medi-Cal or MHLA beneficiaries or participants! It is important for providers to serve all eligible patients.
SASH AND CENS use the approved screening tools to identify the right level of care, and consult the SBAT online directory for any population specific programs. Therefore:

- Agencies are no longer able to conduct “pre-intakes” and ask additional questions (e.g., agency specific screening tool) to determine appropriateness of the referral.
- Inform your staff if new procedures are needed at your site. SASH and CENS have initiated this change since December 2017.

See FAQ: Can agencies develop additional screening tools for SASH and CENS referrals?

The average call time for a SASH screening is 10-15 minutes. Help make this process easier for patients who are seeking SUD treatment by eliminating unnecessary questions!

RECOVERY BRIDGE HOUSING (RBH) AND CENS:
New Rates – Already Effective

**RBH**
- Effective July 1, 2018, the daily rate per bed for young adults and adults is $38.50, and $41.80 for the perinatal population.
  
  Additional questions, please contact Kristine Glaze, 626-299-3545; kglaze@ph.lacounty.gov

**CENS**
- Effective July 1, 2017, the rate for CENS rate is $67 per staff hour.
  - Staff hour = 1 FTE SUD counselor + associated costs
  
  Additional questions, please contact Glenda Pinney, 626-299-3571; gpinney@ph.lacounty.gov

**Measure H Funding** is allowable for any homeless client exiting and institution with complex health needs (mental health and SUD), not just those served in DHS!

To learn more, visit: [http://homeless.lacounty.gov/measure-h/#section-5](http://homeless.lacounty.gov/measure-h/#section-5)
OPIOID TREATMENT PROGRAMS:
March 31, 2018 Last Day to Enroll Non-LAC Residents

OTP Transition Plan
- OTPs can accept new Non-LAC residents through March 31, 2018.
- OTP services provided to Non-LAC residents will not be reimbursed by SAPC after June 30, 2018.
- ASAM assessments are required for current patients by March 15, 2018.

See FAQ: Will we be reimbursed for serving non-LAC residents?

Preparing Patients: Ensure your agency has a transition plan for non-LAC residents to avoid disruption in care. You can either (1) facilitate the transition to a provider in the County of residence or (2) become a contractor for County(ies) in which your patients reside.

NOTIFICATION OF ADVERSE EVENTS AND REPORTABLE INCIDENTS
Keep SAPC in the Loop!

Adverse events are defined as incidents that have a direct or indirect impact on the community, patients, staff, and/or the SUD treatment provider agency as a whole and are required to be investigated and evaluated at the provider agency level.

A reportable event is any unanticipated even resulting in death or serious physical or psychological injury to a patient or patients.

Empower Patients: Patients may report Grievances & Appeals directly to SAPC by filling out a complaint/grievance form. A grievance communicates dissatisfaction made by patient, representative, or provider re: an experience with SAPC and/or its contracted provider!
### WHEN CO-SIGNATURES ARE REQUIRED:

**DHCS Confirmed Requirement for Non-Licensed LPHAs**

Student/interns/trainees must be registered with a SUD counselor certifying body in order to provide billable services.

**For all services delivered on or after November 1, 2017:**

- Unregistered students/interns/trainees must have licensed LPHA’s co-sign their work in order to provide billable services; **AND**
- Unregistered students/interns/trainees must become registered counselors in order to provide billable services.

**The Medical Director does NOT have to sign-off on medical necessity related documents – another LPHA can!**

See FAQ: Who is considered LPHA interns, and are services conducted by these staff reimbursable?  
Does the Medical Director need to sign the Service Request Form?

### FIELD-BASED SERVICES (FBS):

**Learn How to Participate**

Field-based services are a method of mobile service delivery for OP (1.0) and IOP (2.1) services, case management, and RSS for patients with established medical necessity.

**Site Approval Process:** To obtain approval to provide FBS, providers must submit a work plan proposal to SAPC with justification for community-based service co-location.

FBS can only be delivered at SAPC approved sites and the provider delivering FBS must be linked to the contracted DMC-certified agency that is billing for the services.

*See Provider Manual for additional guidance.*

**No need to hold claims!** Proceed to submit claims via primary site.

For additional clarification, contact Systems of Care at:  
SAPC_ASOC@ph.lacounty.gov
PATIENT CONSENT TO RELEASE INFORMATION:
Steps to Consent a Patient to Share Information

There are two parts to the consent process within Sage in order to allow SUD providers to share information with another SUD provider:

1) **Part I:** SAPC Release of Information Form (paper form)
   - Providers discuss consent options with patients and have them sign Release of Information (ROI) form(s)*
   - Patients have the option to share information with entire SUD provider network or specific providers. Both options are compliant with 42 CFR part 2 regulations.

2) **Part II:** Entering Selected Consent Option into Electronic Consent in Sage
   - Select provider agencies patient consents to share information with into the electronic consent form within Sage, and upload ROI form signed by the patient into Sage.

**NOTE:** All documentation must be uploaded into Sage!

Available At: Program home; Sage webpage; Sage FAQs

CLARIFICATION FOR 3.7 AND 4.0 LOC:
Make the Best Clinical Decision for Your Patient

At this moment, the SAPC Provider Network does not provide Level 3.7 and 4.0 Intensive Inpatient services.

If the patient screens for level 3.7 or 4.0, the provider may consider:

- Referring to level 3.7 – WM and 4.0 – WM, as medically necessary;
- Referring to a general acute hospital for medical treatment or an inpatient psychiatric hospital if the patient requires psychiatric treatment;
- Referral to a residential setting, as clinically appropriate.

**The patient’s needs and best interests must come first!**
Utilize the Case Management benefit to provide necessary patient services. $33.83 per 15-minutes up to the monthly allowable cap.
DIRECT YOUR QUESTIONS TO THE RIGHT PLACE:

**SAPC is Here to Support You!**

For the latest information, please visit the SAPC Webpage at:


Refer general questions to:

SUDTransformation@ph.lacounty.gov

Questions about contracts and compliance:

SAPCMonitoring@ph.lacounty.gov

QI/UM related questions: SAPC.QI.UM@ph.lacounty.gov

Call the Sage Help Desk at (855) 346-2392 to open a ticket