

March 1, 2022 PROVIDER MEETING

FAQ

All slides and the recorded presentation are posted on the SAPC Network Provider sites:

<http://publichealth.lacounty.gov/sapc/NetworkProviders/Regulations.htm>

	QUESTIONS	ANSWERS (AND UNIT RESPONSIBLE)
COVID 19		
1.	Covid-19 updates?	<p>There has not been any major updates since our last meeting in January 2022, please reference current guidance via: http://publichealth.lacounty.gov/media/Coronavirus/guidances.htm</p> <p>You can also reference the pages below: https://www.dhcs.ca.gov/Pages/DHCS-COVID-19-Response.aspx http://publichealth.lacounty.gov/sapc/providers/covid19/ http://publichealth.lacounty.gov/media/Coronavirus/</p>
2.	When will Personal Protective Equipment (PPE) stock be available for Providers?	SAPC has received information that the state issued PPE should arrive in mid-to-late March. More information will be forthcoming.
Special Programs and Initiatives		
3.	Are there any updates on the Behavioral Health Continuum Infrastructure Program (BHCIP)?	<p>BHCIP Supplemental Survey is due by March 2, 2022 by 5pm: https://www.surveymonkey.com/r/93J768X</p> <p>Please ensure both surveys are completed. SAPC will provide additional information regarding the letter of support process.</p>
4.	What information can be provided regarding the Contingency Management Pilot Program?	<p>The Contingency Management pilot will run from July 1, 2022 through March 31, 2024. Counties and providers should begin preparations prior to benefits becoming available July 1, 2022. The Department of Health Care Services' (DHCS) primary goal for the pilot is to determine how to scale a proven treatment for stimulant use disorder (StimUD) in Medi-Cal in a large, complex state, supporting DHCS' broader policy goals.</p> <p>https://www.dhcs.ca.gov/Documents/DHCS-Contingency-Management-Policy-Paper.pdf</p>
Eligibility and Authorization		

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5.	What is the email address for SUD transformation?	SUDTransformation@ph.lacounty.gov
6.	<p>a. What is the new process regarding Inter County Transfers?</p> <p>b. Where can we report experiences (positive or negative) with the new system.</p>	<p>a. Beginning March 1, 2022 if a patient's If a patient's Medi-Cal is assigned to another County the provider must contact the Department of Public Social Services (DPSS) on the day of first DMC Service to initiate or confirm that a change of address has been processed so that benefits can be transferred from the other county to Los Angeles.</p> <p>The DPSS Customer Service can be reached Monday through Friday (excluding holidays) from 7:30 a.m. — 7:30 p.m. Saturday from 8:00 a.m. — 4:30 p.m. by calling toll-free: (866) 613-3777 or utilizing one of the local numbers: Local #s: (310) 258-7400; (626) 569-1399; (818) 701-8200 https://dpss.lacounty.gov/en/resources/contact.html</p> <p>County of residence vs. county of responsibility and Inter County Transfer information can be found here: https://www.dhcs.ca.gov/Documents/BHIN-21-032.pdf</p> <p>b. SAPC would love to hear how the ICT process is working. Please reach out with your experiences (positive/negative) to SUDTransformation@ph.lacounty.gov.</p>
7.	How do patients file an appeal when they receive a Notice of Adverse Benefit Determination (NOABD)?	<p>Patients may file an appeal within 60 calendar days from the date of the decision. The appeal form outlines the various methods an appeal can be requested including:</p> <ul style="list-style-type: none"> • Email: SAPCmonitoring@ph.lacounty.gov • Phone: (626) 299-4532 • Fax: (626) 458-6692 • Mail SAPC in Alhambra <p>If the form is needed in an alternate format (another language, large print or braille), call 1-888-742-7900</p> <p>Providers or patients who have questions or concerns after receiving a Grievance and Appeals (G&A) Resolution Letter may contact (626) 293-2846.</p>
8.	Are denial letters mailed out or sent electronically?	<p>NOABD letters reflecting a denial of authorization for non-withdrawal management LOCs are mailed, in hard copy, to the patient's address and a 2nd letter is copied to the provider. The NOABD table on pages 193-194 of the Provider Manual (viewable through http://publichealth.lacounty.gov/sapc/NetworkProviders/Forms.htm) describes who is responsible for mailing NOABDs as it relates to authorizations.</p>

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9.	How can a provider resolve the issue of obtaining a signature if an authorization is denied when the patient is no longer be in treatment?	Providers can document “unable to obtain signature due to patient [left/completed treatment]” on the appeal form. This is an example of an acceptable reason for not obtaining the signature on the Appeal form.
10.	If a patient wrongfully indicated that they have applied for Medi-Cal, will monies be recouped?	<p>SAPC’s expectation is that providers are helping eligible patients apply to Medi-Cal, using the available care coordination benefit to submit claims associated with time spent providing this assistance. If these efforts working with Medi-Cal eligible but not-yet-enrolled patients to apply to Medi-Cal are documented, then “Applying to Medi-Cal” for providers can be approved by Utilization Management (UM).</p> <p>Since applying to Medi-Cal is not a DMC-ODS benefit, these claims are not subject to state recoupment and we have no current plan to recoup claims submitted under 'Applying to Medi-Cal' approved by UM unless it becomes clear through an audit that the provider's documented efforts supporting their patients applying to Medi-Cal was inaccurate.</p>
11.	Where can providers access SAPC’s presentations regarding Other Health Coverage (OHC)?	<p>SAPC has several Other Health Coverage (OHC) presentations available which can be found here:</p> <p>http://publichealth.lacounty.gov/sapc/NetworkProviders/pm/082719/MediCalManagedCarePlans.pdf</p> <p>http://publichealth.lacounty.gov/sapc/NetworkProviders/pm/060821/ManagingManagedCareLACare.pdf</p> <p>http://publichealth.lacounty.gov/sapc/NetworkProviders/pm/020921/HealthNetCoordinationCareSAPCProviders.pdf</p>
Finance and Sage		
12.	Can a cost report be done for the organization as a whole instead (i.e., group costs together) of by location?	The processes related to cost reporting is required by location as mandated by the Department of Health Care Services (DHCS).
13.	How do we submit tickets for Netsmart?	<p>Tickets may be submitted by phone or through the portal. However, we suggest they are submitted by portal for tracking purposes.</p> <p>Netsmart Helpdesk Portal: https://netsmart.service-now.com/plexussupport Netsmart Helpdesk Phone: 855-346-2392</p>
14.	When will rate modification with inflation and market	Rates are established and released at the start of every fiscal year. SAPC and DHCS are actively working on the FY 22-23 rates. Providers can support this

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	<p>rates for programs like residential services be released?</p>	<p>effort by submitting the Cost Survey as requested by SAPC. This will ensure that rates are inclusive of provider costs.</p> <p>Bookmark this page and check it weekly: http://publichealth.lacounty.gov/sapc/providers/sage/provider-communications.htm</p> <p>Use this link to be added or have your staff added to this ListServ to get automatic messaging weekly: http://publichealth.lacounty.gov/sapc/bulletins/START-ODS/21-04/Bulletin21-04EffectiveCommunication.pdf</p> <p>Visit the SAPC Training Page to register: http://publichealth.lacounty.gov/sapc/providers/trainings-and-events.htm</p>
15.	<p>Will there ever be a place in SAGE system that will support how much dollars are left on contracts?</p>	<p>We continue to look at Sage, but you should have your own record keeping/accounting. You can also send an email to SAPC Finance to request this information. SAPC will be forwarding this information as well.</p>
16.	<p>Do the units from the State represent a large number?</p>	<p>a. The units represent the information the State has, but it is not as accurate as it doesn't include claims not submitted or resolved, which is why we are resolving claims and resubmitting. Please Contact your Cost Reporting Analyst to discuss. If you are unsure of Analyst name, please contact Daniel Deniz at Ddeniz@ph.lacounty.gov.</p>
17.	<p>If the state denial is in a different fiscal year, how does SAPC decide the recoupment date and amount?</p>	<p>When a state denial is received, the amount is recouped from the next reimbursement received (regardless of FY).</p>
18.	<p>Is SAPC still holding local level claims that they were troubleshooting for FY 18/19? If so, how will these be included in Common Reporting Standard (CRS) information from State?</p>	<p>No, SAPC is not holding any local level claims for FY 18/19. Providers are currently receiving all denials.</p>
<p>Contracts</p>		
19.	<p>When is the deadline for Contract amendments?</p>	<p>The deadline for Fiscal Year 21-22 Contract Amendments is March 18, 2022. Refer to SAPC Information Notice 22-03 and Contract Amendment Form for more information.</p>

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20.	How do we request an overall contract amount increase beyond just the current FY?	The overall contract amount increase request information can be included in the justification section of the Contract Amendment Form .
21.	If the response for an amendment request is 3-4 months, it will be challenging to manage the remaining 30% of the contract. Can these contract amendments be reviewed sooner?	SAPC has looked at this due to delays in processing the Contract. We are seeing some amendments get processed in line with original timeframe. SAPC will review and consider amendments before they reach the 30% remaining threshold.

Links provided:

DPH COVID-19 Website:

<http://publichealth.lacounty.gov/media/Coronavirus/>

SAPC COVID-19 Webpage:

<http://publichealth.lacounty.gov/sapc/providers/covid19/>

DHCS COVID-19 Webpage:

<https://www.dhcs.ca.gov/Pages/DHCS-COVID-19-Response.aspx>

SAPC Informational Notice 22-01:

<http://publichealth.lacounty.gov/sapc/bulletins/START-ODS/22-01/SAPCIN22-01COVID-19.pdf>