

November 7, 2023 PROVIDER MEETING

FAQ

All slides and the recorded presentation are posted on the SAPC Network Provider site:
<http://publichealth.lacounty.gov/sapc/NetworkProviders/Regulations.htm>

	QUESTIONS	ANSWERS (AND UNIT RESPONSIBLE)
1.	Where can providers access the resources shared during this meeting?	<ul style="list-style-type: none"> • SAPC Training Calendar • Vaccination Masking Update Information Notice • Vaccination Attestation Compliance Information Notice • Justice Connect Services • RecoverLA • LA County Fentanyl Frontline Campaign <ul style="list-style-type: none"> ○ LA County Fentanyl Frontline Campaign Slides ○ Videos <ul style="list-style-type: none"> ▪ “Maddy” ▪ “Ella” ▪ “Tom” ▪ “Press Event”
2.	Where can providers obtain more information about the Provider Advisor Committee (PAC)?	More information about the Provider Advisory Committee can be found here . Please contact Kathy wattvrh@aol.com and Armen Ter-Barsegyan ATer-Barsegyan2@ph.lacounty.gov to participate in the PAC meetings.
Special Programs and Initiatives		
3.	Who should providers contact for questions about the Network Advocacy (NACT) monthly reporting process?	Please reach out to sapc_nact@ph.lacounty.gov with any questions regarding the NACT monthly practitioner reporting.
4.	Providers are unable to change data in the California Outcomes Measurement System (CalOMS Tx) once it is officially submitted (e.g admission date). This is causing issues when patients need to be moved between different levels of care and requires sending an email to the Health Outcomes and Data Analytics (HODA) division to request the change. Can CalOMS be modified to allow providers to make this change?	<p>The majority of the California Outcomes Measurement System (CalOMS Tx) data fields are editable. However, please note that the 'date of admission' and 'location of admission' fields are not editable in Sage. Even if providers contact the HODA division or create a Netsmart ticket, the 'date of admission' cannot be changed. Therefore, the HODA team emphasizes the importance of providers exercising extra caution when entering data into these two fields.</p> <p>When patients transfer to another level of care (LOC), providers are required to discharge them from the previous LOC and open a new CalOMS for the LOC to which the client was transferred (except transfers for residential LOCs within the same facility). It's essential to ensure that the initial admission date precedes the transfer date to the new LOC. In the event that providers made an error by entering the initial admission date later than the transfer date, please reach out HODA CalOMS team at hoda_caloms@ph.lacounty.gov who will provide guidance on how to open the new CalOMS record for the transfer as solutions can differ case by case.</p>

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Sage		
5.	Secondary providers are able to submit progress notes and finalize them in order to trigger a claim. In PCNX, the billing process takes a long time; How is SAPC planning to resolve this issue?	<p>SAPC will be working collaboratively with providers and the PAC through its Business Technology Workgroup to create a ProviderConnect NX (PCNX) roadmap that outlines system enhancements that meet the providers needs.</p> <p>To learn more about the Business Technology Workgroup and upcoming meetings, please send an email to Armen Ter-Barsegyan ATer-Barsegyan2@ph.lacounty.gov.</p>
6.	Will Sage include an evidence-based Medications for Addiction Treatment (MAT) assessment so that compliance can be monitored?	<p>SAPC's expectation is that each patient with opioid use disorder (OUD), alcohol use disorder (AUD), and/or tobacco use disorder (TUD) will be offered medications which treat these substance use disorders (through providing a medical evaluation for MAT) which can be arranged through a provider agency's own medical clinicians or through referral to MAT-capable services in the community. We monitor this through the use of the MAT claim and care coordination codes posted on the current version of the rates and standards matrix and through reviewing the associated clinical documentation (including SAGE progress notes) for documentation that MAT services were offered and provided. A dedicated and standalone medication-specific assessment tool is not required. The linkage of all patients with OUD, AUD, and/or TUD to MAT services meets the DHCS requirements for an evidence-based assessment, as SAPC recognizes that this would ensure uniform MAT access to all patients who are interested in a ready to accept MAT treatment.</p>
7.	When service claims are denied and resubmitted, are the unit counts added into the Department of Health Care Services (DHCS) reconciliation report? If so, this would artificially increase the number of units and decrease costs in the cost report.	<p>SAPC is aware of this issue and reached out to DHCS to obtain clarity to ensure that units are not artificially increased during this process. SAPC will share information as it becomes available.</p>
8.	When will prior attachments be available in PCNX?	<p>As a result of the PCNX update, the attachment function is no longer available. SAPC is working on fixing this issue and there is no specific timeline for completion. SAPC will provide updates to the network as they become available. As an interim solution, providers are asked to submit a Sage Helpdesk ticket to request the documents previously submitted per the 09.29.2023 SAPC communication</p>
9.	Before implementation of PCNX, providers were required to document a diagnosis during the initial 30-to-60 day engagement authorization, otherwise, Utilization Management (UM) was not able	<p>During the initial assessment period for non-residential services (between 30- to 60-days depending on the population), provisional diagnoses are used prior to the determination of a diagnosis or in cases where suspected SUD has not yet been diagnosed. A Licensed Practitioner of the Healing Arts (LPHA) may document and categorize a suspected SUD under "Other Specified" and "Unspecified" disorder or "factors influencing health status and contact with health services" using a Z-code as required by the State to process the claim.</p>

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	to approve it. Is the diagnosis no longer required?	Diagnoses shall be updated by an LPHA as clinically appropriate when member's condition changes to accurately reflect the member's need(s). Refer to page 47 of the current version of Provider Manual .
Eligibility and Authorization		
10.	Has SAPC considered implementing a 72-hour initial engagement period in residential levels of care (LOCs) given that patients often leave before providers can finalize the full ASAM assessment?	In cases where a patient left residential treatment before completing the full ASAM assessment, the LPHA should compile all assessment information collected during the time of admission and submit the documentation to UM for review. Doing so will make the case that the provider took necessary steps to attempt to establish medical necessity.
11.	Will SAPC provide leniency in the appeals process for denials issued after the extended blackout?	Denials were issued due to missing documents needed to confirm medical necessity. When submitting an appeal, providers must ensure they attach documentation confirming medical necessity to the appeal. SAPC recognizes that implementing the blackout for making the necessary system configuration may have potentially increased the number of appeals, and our Clinical Services Division is expeditiously reviewing these appeals as they are received.
12.	Can providers request an ongoing residential authorization up to the date of admission to Residential Bridge Housing (RBH)?	Yes, Providers can submit an ongoing residential reauthorization to extend the residential episode up to the date of admission to RBH. The residential reauthorization service timeframes are posted in Table 15, page 165 of the Provider Manual . There is not a fixed limit on residential length of stays, and this depends upon the patient continuing to meet medical necessity for residential treatment. Providers should submit a Sage reauthorization request at least seven (7) calendar days in advance of end date of current authorization.
13.	The financial eligibility is displayed as expired for a patient pending authorization. However, the Automated Eligibility Verification System (AEVS) shows active Medi-Cal enrollment. Is there an issue with eligibility on the UM side?	UM confirms financial eligibility through the Medi-Cal Eligibility Data Set (MEDS) which contains eligibility on file at DHCS. However, this verification is completed on a monthly basis. Providers should submit the 270/271 and UM will re-review to confirm that the financial eligibility has been updated. Providers should document the steps taken to verify eligibility using a progress note which UM will review. To request a status update on a pending authorization, submit an email to SAPC.QI.UM@ph.lacounty.gov .
14.	Patients who are not able to submit documentation that confirms their identify do not qualify for Medi-Cal benefits. MyHealthLA (MHLA) allowed undocumented patients to submit an attestation confirming their identify. Is DHCS considering a similar flexibility for undocumented people applying for Medi-Cal?	The Department of Public and Social Services (DPSS) requires proof of identity as part of the Medi-Cal eligibility process. Medi-Cal eligibility can be backdated through the DPSS office if the proper documents are provided after submitting the application. SAPC is investigating how this issue can be resolved for individuals who are unable to acquire identity documents to submit as part of the Medi-Cal eligibility process.

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15.	When billing, the HCPC code generated for groups is not associated with the authorization. What should providers do when this happens?	Please reach out to Sage Helpdesk and submit a ticket. SAPC is working on resolving these types of issues and will provide updates as they are available.
Contracts		
16.	Are there any updates regarding the SAPC initiated amendments for FY 23-24?	Several amendments are in progress and should be fully executed in November 2023. Specific agencies can reach out to Marika Medrano at mmedrano2@ph.lacounty.gov to request an update. .

Links provided:

DPH COVID-19 Website: <http://publichealth.lacounty.gov/media/Coronavirus/>