



Communication Release

12/31/2025

FY 24-25 FINAL Billing Deadlines Reminder

Fiscal Year 2024-2025 final billing deadlines are approaching. It is critical that agencies submit original and replacement claims by the deadlines noted below. Please note, these are *final deadlines*, if services are submitted near the deadline and are denied, the replacement service must be submitted prior to the deadline to correct the information. To prepare for these deadlines:

- Do not wait until the final week or days to submit claims. Aim to complete all billing at least one month prior to the deadline to allow for sufficient time to fix and replace any Local and State denials.
- Review denied services to ensure they have been corrected and replaced, as applicable.
- Review available contract amounts and request augmentations if necessary.
- Open a [Request Billing Assistance](#) ticket for any support needed to resolve outstanding questions and receive support.

Dates of Service	Billing Deadline
7/1/2024 – 12/31/2024	Friday 1/30/2026
1/1/2025 – 6/30/2025	Thursday 4/30/2026

Mandatory Training: Primer on Part 2 & Final Rule Updates

A two-hour Primer on Part 2 & Final Rule Updates training is **mandatory for all SAPC network providers**. This free training provides an overview of federal and California state privacy laws governing the handling, use, and disclosure of Substance Use Disorder (SUD) records, including the recent changes to 42 CFR Part 2 under the Final Rule, which requires compliance in February of 2026. The session will focus on identifying SUD records covered by Part 2, understanding the stringent requirements for patient consent, exploring the key exceptions to consent, reviewing compliance obligations for uses and disclosures, and extensive discussions surrounding practical applications and use cases. Special attention will be given to recent updates that align certain Part 2 processes with HIPAA and the implications for day-to-day operations. The session will equip attendees with the practical knowledge necessary to assess compliance risks and manage SUD-related information.

This training meets qualification for two (2.0) hours of continuing education. Please see the training flyer for eligible credentials.

Please make sure to register for one of the training sessions below if you were not able to attend either December session.

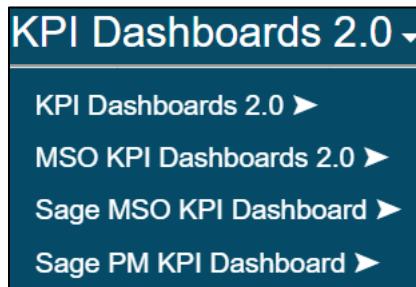
Trainers: Sara Shanti, J.D., Alexandria Foster, J.D. & Michael Sutton, J.D. of Sheppard Mullin law firm

Training Date	Training Time	Platform	Registration is Required	Training Flyer
Thursday, January 15, 2026	1:00 – 3:00 pm	Zoom	Click for Registration Link	Click for Flyer
Tuesday, January 20, 2026	1:00 – 3:00 pm	Zoom	Click for Registration Link	Click for Flyer

If you have any questions regarding this training, please email Belinda Ashong at BAshong@sheppardmullin.com.

KPI Dashboard Updates

Users with KPI accounts will notice a change in dashboard selection options. KPI is in the process of transitioning to the Cloud and our current “Legacy” dashboards will be phased out mid-January and replaced with new dashboards. All existing sheets and bookmarks will be carried over into the Cloud dashboards; however, any new bookmarks should be created in the Cloud dashboards. To preview these dashboards, users will see four (4) options. The new cloud-based dashboards are named Sage MSO KPI Dashboard and Sage PM KPI Dashboards. Providers should continue to utilize the “Legacy” dashboards until further configurations are completed and updated documentation is published to the network.



SAPC is in the process of updating documentation to reflect new layouts, navigation, and functionality, which will be posted to the SAPC Sage website. If you have questions or feedback on the dashboards, please email Sage@ph.lacounty.gov. Do not send PHI.

New KPI Link/URL

Effective Wednesday 12/31/2025, the KPI URL changed to:

<https://carepathways.netsmartcloud.com/account/login/5CCB3C86>

The login process and usernames are the same. This new link is compatible with Chrome, Edge, and Firefox browsers. Only users with KPI accounts may access KPI via this URL. Additionally, KPI users may continue to access the dashboards within Sage via the KPI Dashboards view. KPI access must be requested and approved by your agency's Sage liaison using the SAPC Sage User Creation Form request protocol in the Sage Help Desk ServiceNow Portal.

If you encounter issues while logging in with this new URL, please open a Sage Help Desk ticket.

- Sage Help Desk Phone Number: (855) 346-2392
- Sage Help Desk ServiceNow Portal: <https://netsmart.service-now.com/plexussupport>

Authorization Grievance and Appeals

Earlier this year SAPC created a designated email for Grievances and Appeals (G&A) specifically for receiving and addressing authorization denials. Providers should submit these types of G&As via encrypted email to SAPC_Appeal@ph.lacounty.gov for the most expeditious response for resolution.

Primary to Secondary Provider Conversion

SAPC provides an annual enrollment opportunity for all Provider Agencies to convert from a Primary User to Secondary User of the Sage Electronic Health Record (EHR) System. If your agency would like to convert from Primary to Secondary Sage User status, please send an official, signed request addressed to the SAPC-IT at SAPCProvConvReq@ph.lacounty.gov no later than **January 31, 2026**.

Provider agencies that meet this deadline will receive an acknowledgement letter and will be required to begin the necessary testing of their EHR system by March 31, 2026. Testing processes need to be completed no later than June 30th. During this testing process period, the provider is required to:

1. Identify a minimum of two contact persons at your agency who will be responsible for creating and submitting all 837 test files. These two individuals will also be responsible for responding to and addressing all SAPC requests related to this conversion.
2. If needed, submit Sage User Creation forms for any new or modified user accounts per standard procedure.
3. Engage the EHR vendor or Information Technology staff to complete all necessary configuration of the agency's EHR by the identified timeline and in accordance with SAPC specifications.
4. Create and submit test 837 files and resolve identified issues.
5. Once testing is done in the TRAIN environment, create and submit a small number of claims in the Live Environment until the agency has achieved at least an 80% adjudication approval rate.

Once the conversion is successfully completed, a Sage Secondary Provider Certificate will be issued by SAPC. After the certification, the provider will officially be a secondary provider and will be given instructions on how to submit their claims via the 837 process going forward.

Providers **MUST** submit their official request by January 31, 2026. Requests received after this date will not be accepted and those providers will not be able to convert to a Secondary Provider until the next year's enrollment period.

Highlights from Previous Communications

Patient Education vs Group Counseling: SAPC has recently received inquiries regarding differences between documenting and billing for Patient Education vs Group Counseling. The [Department of Health Care Services' \(DHCS\) DMC-ODS Billing Manual](#) highlights that Group Counseling focuses on the "needs of the participants." Patient Education on the other hand is to provide "education for the member on addiction, treatment, recovery, and associated health risks." In general, Patient Education groups are informational and take more of a teaching approach by the facilitator(s) about a substance use related topic. Counseling groups may cover similar topics; however, the focus is on a dynamic discussion with the participants on how it relates, impacts, and/or can be applied toward their identified problems and treatment goals. Patient education groups are limited to 2-12 participants except in residential levels of care where there may be up to 30 participants. These are billed under the base code H2014 with the HQ modifier. Counseling groups are limited to 2-12 participants at all levels of care and are billed under the base code H0005.

Sage-PCNX Guide to Reports Update: The Sage-PCNX Guide to Reports has been updated to include documentation for new and updated reports. New reports include: CENS Provider Activity Report, Billing by License Type and LOC Report, EOB Summary by Date Export, and Network Practitioner Report. Updated reports include: Check/EFT Number Report, Services Denied in MSO, and County and Aid Code Report. The guide is available on the [SAPC Sage website](#) and may be accessed through Sage directly on the myDay view in the SAGE-PCNX RESOURCES widget.

Client Address Reminder: The Admission (Outpatient) and Update Client Data forms have been updated to include a reminder regarding entering a client's address. It is critical that the address entered is a valid USPS address; phrasing such as "homeless" should not be included anywhere on the address. Not adhering to the proper format of having a street number and street address creates an error in the Sage system that prevents claims from being created to bill the State, which may lead to retro adjudications from Finance. Users may enter their agency address or local DPSS office address if the client is experiencing homelessness. Additionally, homelessness should be documented in CalOMS, the Problem List, and progress notes as appropriate such as when establishing medical necessity.

SAPC Community Engagement Team: Effective Tuesday 12/23/2025, SAPC's Connecting to Opportunities for Recovery and Engagement (CORE) program will now be known as "Community Engagement." Providers will notice the addition of this team as an option on the Youth and Young Adult Screener and Service Connections Log forms. Only SAPC Community Engagement Team staff should select "Community Engagement" as the point of contact on these two forms.

Updates to the Sage Help Desk User Creation Form: SAPC is updating the Sage Help Desk User Creation form to better track and manage users with KPI access. We are adding KPI specific required fields that will ensure appropriate Sage configurations for creations, modifications and terminations. The following changes will be effective Friday 12/19/2025. For each request type, different options will become enabled and/or required.

- A. **Creation:** When Creation is selected, the "Add KPI Access" becomes available. If the user needs KPI access, select yes and then select the agency in "Add KPI Access to Agency."
- B. **Modification:** When Modification is selected, both "Add KPI Access" and "Remove KPI Access" become available.
 - a. **Add KPI Access:** If the user needs KPI access, select yes and then select the agency in "Add KPI Access to Agency."
 - b. **Remove KPI Access:** If the user no longer needs KPI access, select yes and then select the agency in "Remove KPI Access to Agency."
- C. **Termination:** When Termination is selected, the "Remove KPI Access" becomes available.
 - a. Select "Unsure" if the submitter is unsure if the user has KPI access.
 - i. If unsure is selected, SAPC will investigate and confirm if the user has KPI access which should be removed prior to processing the termination.
 - b. Select "Yes" to remove KPI access and select the agency that should be removed.

Upcoming Changes to the Service Authorization Request Form: Effective Monday 1/5/2026, the Service Authorization Request Form will have a new field, External Comments on Authorization, in the Doc Request Date section of the form. Currently, Utilization Management (UM) Care Managers enter comments in the Comments section of the form; however, there have been instances when edits and deletions were inadvertently made by providers overriding the history of the comments. The External Comments on Authorization field will allow both Care Managers and providers to enter comments. Once the authorization is submitted, the comments will be saved in a non-editable format in the Comments section of the form with the name and date/timestamp of when the entry was made. The [PCNX Service Authorization Training Guide](#) has been updated and provides more details on this new functionality.

State Denial Rebilling Lists: The following are a list of commonly encountered State claim denials, a summary of the issue and brief guidance on how to pursue resolution of these issues.

- *CO 97 M86:* A system issue led to the erroneous recoupment of services with a CO 97 M86 state denial code, which is typically used for duplicate services. Impacted provider agencies received a spreadsheet via the SFTP this week with the list of services that are eligible for rebilling immediately.
- *CO 96 M80:* Following updated guidance for the billing of screening services, service code H0049 has been recouped if the patient was not admitted to an outpatient level of care on the same day. This is for both FY24-25 and FY25-26 services. Impacted providers should have received a list of services eligible for replacement via the SFTP. The replacement services could be billed starting on Monday December 22nd. Please review the [Billing for Screening Job Aid](#), [Sage Quick Billing Guide: CENS DMC](#), and the [Sage Quick Billing Guide: PAuths](#) for guidance on billing screening services.
- *CO 96 N30:* The State was incorrectly denying services for patients who had a Justice Involved Aid Code listed as a specialty aid code, even if their primary aid code was allowable for DMC Services. The state corrected the issue on December 10th and the impacted provider agencies received a spreadsheet, with the list of services, via the SFTP on Friday December 5th. These services can be rebilled immediately.

If any of the above spreadsheets need to be uploaded again, or if further clarification is needed, please email SAPC-Finance@ph.lacounty.gov.

KPI Data Truncation: KPI data is truncated every six (6) months at the beginning of the calendar and fiscal year. KPI maintains a rolling history of two (2) full fiscal years (FY), two (2) full calendar years (CY), and the current FY and CY. As such, KPI data was truncated on 1/1/2026, limiting available data to include only 7/1/2023 - present.