

SAPC Finance Services Division Provider Updates

Daniel Deniz, SAPC Finance Services Division Chief

FY24-25 Billing Deadline



End of FISCAL YEAR = BILLING DEADLINE

Drug Medi-Cal Treatment Services

Claim Submission Deadline	Expected Date of Reimbursement
July 1, 2024 – July 5, 2024	End of July 2024
July 6, 2024 – July 31, 2024	After the Sage blackout period has been lifted

Recovery Bridge Housing Services

Claim Submission Deadline	Expected Date of Reimbursement
July 1, 2024 – July 5, 2024	End of July 2024
July 6, 2024 – July 15, 2024	End of August 2024

Prevention, Client Engagement and Navigation Services, and all Other Contracts

Invoice Submission Deadline	Expected Date of Reimbursement
July 1, 2024 – July 5, 2024	End of July 2024
July 6, 2024 – July 15, 2024	End of August 2024



End of FISCAL YEAR = BILLING DEADLINE

Take Action NOW!

- Conduct internal studies to identify any services/costs that have NOT been submitted for reimbursement.
 - -Sage Billing: Run Progress Note Status Report to identify claims for submission.
- Review contract allocation and identify amount of unused funds.
- Review Statement/Scope of Work to confirm allowable program activities.
- Work with staff to identify needed equipment and other resources to support the program.
- Work with vendors to secure needed invoices to request for reimbursement.



SAPC 23-10: Implementation of Fiscal Reporting Process

- Release October 10, 2023, effective July 1, 2023.
- Applies to <u>ALL</u> SAPC contracts and agreemnts.
- Streamlined process, 5% of the content of the State's prior tool.
- Collects cost information at AGENCY level by ASAM/SERVICE.

Actions to Take Now

- Collect all associated costs and service units per contract.
- Enter costs according to ASAM/SERVICE Cost Centers.
- Leverage Revenue/Expenditure tracking report (Capacity Building).
- Review Fiscal Reporting Tool(s) on SAPC website and identify any questions.



SAPC-IN 23-10: Implementation of Fiscal Reporting Process

• Three (3) Tools

DMC-ODS	Prevention, Harm Reduction & Other Services	Driving Under the Influence
ASAM 1.0 (Outpatient) 1.0 ASAM 2.1 (Intensive Outpatient) 2.1 ASAM 1-WM ASAM 2-WM ASAM 3.2-WM ASAM 3.2-WM ASAM 3.7-WM ASAM 4.0-WM ASAM 3.1 ASAM 3.3 ASAM 3.5 Narcotic/Opioid Treatment Program Recovery Bridge Housing Recovery Housing Services	Comprehensive Prevention Services (CPS) Environmental Prevention Services (EPS) Adolescence Prevention Services (APS) Friday Night Live (FNL) Capacity Building (CB) – SHSMA Client Engagement and Navigation Service (CENS) Housing Navigation Increased Access Service Training & Technical Assistance Outreach & Engagement Sobering Center Media Services Harm Reduction Other Services (please specify in the comment note)	By DUI License



FY24-25 Program Budget

- Excel-based & pre-formulated (*does the math for you!*)
- Increased clarity & instruction

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FY23-24 Program Budget



FY24-25 Program Budget – New Categories

- Program Investment Funds
- Sixty (60) Calendar Day Operating Reserve

Category	Description
Program Investment Funds	Providers must continue to evaluate their programs and organizations as part of continuous process improvement and identify investments that improve service outcomes and support the overall look and feel of the program. Investments can range from equipment to training based on the program and should be included in other areas of the budget. This section is designed to capture allocated amounts that are for other programmatic investments. Note, providers may not hold unreasonable reserves that negatively impact or impede the ability to deliver services. Enter program investment that can be collected for similar services provided by this contract.
Sixty (60) Calendar Day Operating Reserve	Government contract may be impacted by budgeting or contracting cycle that occurs with the end and start of every fiscal year. Though SAPC is committed to efficient and timely processes, there may be instances where providers may see interruptions in the timing of payments and reimbursement. To avoid cash flow issues, providers must maintain a 60-calendar day operating reserve to avoid interruptions of services to the patients, participants or communities. Additionally, a 60-calendar day reserve will allow the provider to better meet organizational requirements, such as salaries and facility costs. Providers may include in this section a portion of the funds needed to establish a 60- calendar day reserve.



Finance Services Division Update – Contact

Questions and/or More Information

SAPC-Finance@ph.lacounty.gov

(626) 293-2630