

Los Angeles County Participant Reporting System (LACPRS) and Billing within Sage



Outline

- Why Data is Important
- Relation between LACPRS and Billing
- Billing within Sage
- LACPRS
 - -Important Metrics
 - Data Integrity
 - Data Submission





Why Data is Important?

- Data is a critical resource of valuebased managed care program:
 - Track and forecast utilization, revenue, and cost
 - Demonstrate
 effectiveness/outcomes
 - Inform and enhance business, policy, and operational decisions in managing costs, quality of care, and revenue.
- "What gets measured, gets managed"
 Peter Drucker





LACPRS Links to Billing

- To facilitate the billing process within the structure of "one DMC contract," LACPRS collects:
 - Medi-Cal eligibility and related identifiers
 - Yes \rightarrow CIN
 - Pending → Application date, CIN
 - No
 - Other funding program eligibility
 - Related identifiers
- Participants' funding program eligibility and identifiers will be connected to Sage billing





Billing within Sage

- Unlike in previous years, there is no need to bill individual Statement of Works with different allocation amounts.
- Most services are now covered under one contract structure (DMC). However, among these services, some may not be billable to the State DHCS (non-DMC services).
 - SAPC will repurpose these services based on the LACPRS identified funding programs on the "back-end."
- For "Specialty" contracts (e.g., General Program Services, Methamphetamine Services), services will be covered as defined in the contracts.



Importance of Continuing to Identify Non-DMC Funding Programs

- To enable SAPC to properly and strategically pay for non-DMC billable services, it is <u>critical</u> for providers to properly identify participants eligible for other funding programs (e.g., AB 109, CalWorks, GR, etc) within LACPRS.
 - There are many critical services that are NOT payable via DMC, such as Recovery Bridge Housing, residential room and board, extended residential stays, etc.
 - In these instances, SAPC must use other funding programs such as AB 109, CalWorks, GR, etc, to pay for these services that are not payable via DMC to maximize resources available to our patient population.
 - If providers do not correctly identify which program a patient is associated with, SAPC may not have sufficient funds to pay for supplemental services (e.g., Recovery Bridge Housing) or non-DMC funded extended lengths of stay (e.g., criminal justice, additional perinatal IOP hours).





LACPRS Metrics for START-ODS

- ASAM Level of Care
- Case Management
- Field-Based Services
- Recovery Bridge Housing & Housing Assistance
- Referrals
- Outcome measures
 - Collect data at admission and at discharge to measure changes due to treatment
 - E.g., Treatment Effectiveness Assessment





Data Integrity



- Logic enforced skip patterns
 - Only relevant required fields will be enabled
- Validation rules and allowable values
 - Pop-up error messages
- Alerts



"NOT EVERYTHING THAT CAN BE COUNTED COUNTS, AND NOT EVERYTHING THAT COUNTS CAN BE COUNTED."

ALBERT EINSTEIN



LACPRS Data Submission

- LACPRS is required for:
 - New admission, including Recovery Support Services
 - Any changes in services/level of care
 - Any changes in location
- LACPRS is not required for:
 - The movement within the same residential facility/location from 3.1 to 3.3. to 3.5 or reverse order
- Submission Deadline
 - Minimum Admission Data set: 7 days
 - Full admission data set: 30 days
 - Discharge data at the time of discharge





Change brings opportunity.

Nido R. Qubein 🚟

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