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)	
	COVID-19		
1.	Where can we find the most recent COVID-19 updates?	The most recent Covid-19 Information Notice was published on April 29, 2022: <u>http://publichealth.lacounty.gov/sapc/bulletins/START-ODS/22-08/SAPCIN22-</u> <u>08COVID-19Vaccination.pdf</u> COVID-19 related bulletins are posted at: <u>http://www.publichealth.lacounty.gov/sapc/NetworkProviders/Regulations.htm</u>	
Special Programs and Initiatives			
2.	Has DHCS extended the end date of December 31, 2022 for telehealth groups through 2023?	From what we know at this time, there will be no changes to telehealth regulations after the end of the public health emergency. The State released <u>BHIN 21-075</u> and <u>22-019</u> that permit telehealth for most services. SAPC has implemented the telehealth guidelines for outpatient services. These notices are irrespective of the public health emergency and will not be subject to COVID related changes. Treatment providers are highly encouraged to review DHCS's most recent <u>BHIN</u> releases for any updates that may impact telehealth service delivery.	
3.	Where can we find information on SAPC's Certified Peer Support Specialist Program?	You can visit SAPC's Certified Peer Support Specialist Program Webpage at: http://ph.lacounty.gov/sapc/providers/certified-support-specialist.htm If you are interested in recommending yourself or someone else for a scholarship, please complete the <u>Scholarship Recommendation Form</u> . The deadline to submit the Scholarship Recommendation Form is noon on 11/30/22 . Additional information and resources can be found here: <u>DHCS Peer Certification Webpage</u> <u>CalMHSA Website</u> <u>CalMHSA's Peer Certification Webpage</u> <u>Test Preparation Guide</u> <u>Peer Certification FAQs</u> For additional support, please contact the following: <u>Contact CalMHSA at Peercertification@calmhsa.org</u> <u>Contact SAPC at SAPC_ASOC@ph.lacounty.gov</u>	

FAQ

4.	What are some examples of provider incentives?	Fundamental services, such as Naloxone, are not widely used and is one example. SAPC will plan future incentives and will be engaging the provider network in future discussions to help shape the program.
5.	Who may receive opioid overdose prevention bags?	Anyone receiving treatment services can obtain an opioid prevention bag. You can also distribute them to individuals who are in contact with CENS even if they are not currently enrolled in treatment. The bags are not to be distributed to program staff.
		Eligibility and Authorization
6.	 a. Are all providers required to serve the youth population? b. Where can we locate more information about the American Society of Addiction Medicine (ASAM) screener for Youth and Young Adults and related training? 	 a. The ASAM 0.5 Early Intervention Services level of care replaced the ASAM 1.0 At-Risk (AR) level of care, for individuals aged 18-20 years old. Contracted youth and young adult providers are required to use the ASAM Screener for Youth and Young Adults effective upon the release of <u>SAPC IN 22-17</u>. All SUD Providers who serve youth 12-17 and young adults (ages 18-20) must complete the one day, six-hour Healthy Youth Early Intervention Curriculum training delivered by Azusa Pacific University (APU) by June 30, 2023. Once training is completed, providers are required to sign the attestation form and submit it to <u>SAPCMonitoring@ph.lacounty.gov</u>. b. Guidance for completing the ASAM screener is available at: <u>http://publichealth.lacounty.gov/sapc/bulletins/START-ODS/22-17/AttachmentIlGuidancForCompletingTheASAMScreenerForYouthAndYoungAdults.pdf</u>. SAPC will be hosting periodic trainings on <i>Understanding the ASAM Screener for Youth and Young Adults</i>. Please contact <u>sapc.cst@ph.lacounty.gov</u> to request additional training offerings/dates.
Finance and Sage		
7.	How can providers obtain a full picture of where they stand financially, especially during periods where claims cannot be submitted for payment?	Providers may reference Sage but are strongly encouraged to implement their own expenditure and utilization monitoring processes to prevent cash flow issues. SAPC plans to offer more guidance on this topic in the future. The DHCS website also includes some helpful resources on <u>SUD Cost Reporting</u> . SAPC recently published additional KPI sheets that can provide general financial standing for providers. Please check the <u>Sage KPI training page</u> for job aids to help navigate the newly published sheets.

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8.	What are the elements of behavioral health payment reform that will be implemented starting July 2023?	The fee-for-service model will be implemented under payment reform. SAPC will be working towards implementing value-based reimbursement in the long-term.
9.	Who is currently covering the Administration and Quality Assurance Costs?	These costs are covered by your indirect rate and are an allowable cost under your DMC contract. SAPC administration and quality assurance costs are essentially paid separate from the DMC rate at this time and DHCS is exploring bundling this within the State-County DMC rate under payment reform.
10.	Will SAPC be providing a training about the new billing codes?	SAPC is currently developing a training plan about the new billing procedures that will be rolled out next year.
11.	Will reimbursement schedules keep up with the higher costs associated with the inflation such as wage cost increases, food (for residential), and basic supplies?	DHCS is now responsible for developing and releasing treatment rates under CalAIM. SAPC has advocated for increases to account not just for increases in costs of providing services, but also to support investments. We anticipate the rates to be released by DHCS prior to the end of the year.
12.	Where can we obtain more information about Sage updates and denials?	 The following Sage resources are available on the SAPC website: Sage Provider Communications Sage Updates PowerPoint Denials Quick Guide Denials Crosswalk Instructions 3.0 Critical error guide for 837 files
13.	 a. What are the problem list documentation requirements? b. When adding a diagnosis, should providers use the date the patient was diagnosed, or the date placed on the problem list? c. Should the problem list be billed separately or as part of the treatment plan? d. Does the State require patients to sign the problem list as previously done with the treatment plan?" 	 a. Problem list requirements are outlined in Page 183 of the Provider Manual 7.0 (refer to Table 17). b. For the problem list, you would enter the date the problem was added. The diagnosis date is included in the diagnosis form itself. c. Creating a problem list is part of the treatment planning process and would be billed accordingly. d. The patient is not required to sign the problem list, but if you are completing a treatment plan, the patient's signature is still required in the treatment plan. e. CalAIM Documentation Resources: <u>CalAIM Documentation Reform FAQs</u> <u>CalAIM Documentation Trainings</u> (See <i>Clinical Services</i> section, currently being offered twice a month) <u>CalAIM Training Recordings and PowerPoints</u> <u>SAPC Trainings and Events</u>

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	e. Where can we find CalAIM documentation resources?	
14.	Where can we locate progress note standards?	Progress notes standards are included in <u>BHIN 22-019</u> . You can also reference <u>Provider Manual 7.0</u> , pages 186-187.
15.	What is the process for updating the Service and Bed Availability Tool (SBAT)?	Refer to the <u>SBAT User Guide</u> for guidance on updating the SBAT. Residential Providers receive calls and email reminders for updates to SBAT. Providers should ensure that SBAT users are updating the SBAT and have a backup plan for staff vacations and holidays. If you need to update your agency's designated SBAT User, please complete the <u>SBAT User Registration form</u> . Additional <u>SBAT resources</u> are available on the SAPC website (scroll to
		Information Technology (IT) Related and Documents section).
16.	What is a taxonomy code?	Taxonomy codes are national codes that differentiate sub-specialties within a given discipline. These will be linked to a type of service for DHCS to validate the rendering provider is able to provide the service being billed.
17.	How can providers request changes to KPI access?	Please submit a user modification request to <u>sageforms@ph.lacounty.gov</u> You can find information on the four unique processes required to get access to Sage here: <u>http://publichealth.lacounty.gov/sapc/providers/sage/enrollment.htm</u>
18.	For gender related denials, do we update SAGE to match what the State has on file and resubmit billing for the client?	Please correct the financial eligibility to match the gender the State has on file and resubmit the claim. Currently, the State only accepts male or female genders. Please contact the <u>Sage Help Desk Service Now Portal</u> to identify the gender listed by the State. The Sage Help Desk Phone Number is (855) 346-2392.
19.	Are there any updates for the billing status of telehealth codes?	SAPC sent a <u>Sage Provider Communication on 11/28/2022</u> , with information about the group denials related to telehealth. There are no other known issues with billing of telehealth codes. If you are experiencing denials related to telehealth not covered in the communication, please contact the helpdesk. Please contact the <u>Sage Help Desk Service Now Portal</u> The Sage Help Desk Phone Number is (855) 346-2392.
20.	Do the problem lists for residential level of care (LOC) have to be updated every 15 or 30 days?	The problem list in the residential LOC needs to be updated and signed by an LPHA no later than 30 calendar days after the signing of the initial treatment plan, and no later than 30 calendar days thereafter, or when there is significant event, whichever occurs first (refer to table 17 in page 184 of the <u>Provider</u> <u>Manual 7.0</u>). The problem list reviews in the residential LOC must be completed every 15 days at minimum. If the review of the problem list results in a determination that changes to the problem list are not necessary, a miscellaneous note or progress note stating that a problem list review was completed must be

FAQ

		included in the patient's record. When problem lists require modification, an updated problem list should be documented. Refer to the <i>Problem List Frequency</i> table included in slide 19 of the <u>CalAIM</u> <u>Documentation Updates</u> PowerPoint for problem list submission timelines in each LOC.
		Contracts
21.	Will the new maximum contract amounts be staying the same?	SAPC will review the rates once they are released by DHCS to make the appropriate contractual actions. Additionally, providers can always request an augmentation based on utilization, once they are at 60%. Providers should monitor expenditures and utilization to avoid cash flow issues. SAPC Finance, Contracts and Systems of Care (SOC) are also actively monitoring contract utilization and will reach out to providers. Augmentations do not carry over automatically to the following contract year. Contract allocations revert back to the amount stated in the contract for each new fiscal year.
22.	What is the general timeline for augmentation requests?	Augmentations are reviewed on a case-by-case basis; however, requests generally take 3-4 months to complete. SAPC asks that providers promptly respond to all SAPC inquiries/documentation requests.
		Additional Information
23.	Where can we find information about the Provider Advisory Committee (PAC)?	You can find more information about the PAC at <u>http://www.publichealth.lacounty.gov/sapc/providers/provider-</u> <u>advisorycommittee.htm</u> . Please contact Kathy Watt (<u>wattvnrh@aol.com</u>) or Anulkah Thomas (<u>athomas2@ph.lacounty.gov</u>) if you would like more information or are interested in joining one of the workgroups. PAC meeting agenda and slides are posted online at: <u>http://www.publichealth.lacounty.gov/sapc/providers/provider-advisory-</u> <u>committee.htm</u>
24.	Are there any additional trainings available to SAPC providers?	SAPC providers can access additional trainings offered by the California Institute for Behavioral Health Solutions (CIBHS) in a variety of topics such as business development and operations, finance, performance indicators among others. Visit the <u>SAPC training and events page</u> (Select <i>Click Here</i> under trainings) and scroll to the Business Development/Operations and Cultural Competency Trainings sections to view all upcoming trainings.

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