Communication Release

5/21/2021

FY17-18 Claiming Blackout

Cost reporting for the 2017-18 fiscal year has closed. As such, SAPC has instituted a claiming blackout for fiscal year 2017-18 in the Sage and EBS systems. If providers submit claims to SAPC for this time period, they will be denied for the following denial reason: "Cost Reporting for the Fiscal Year Was Closed." The Sage blackout was effective as of Thursday, March 20, 2021.

Provider Activity Report Reminder

When running the Provider Activity Report in ProviderConnect, providers are reminded to only run the report for no more than one month at a time and for only one program site at a time. Selecting the agency name rather than a specific site is not a 'select all' option. The report pulls all finalized documents that include the specific address on the form itself depending on the address selected in the search parameters. Running the report outside of these specified parameter ranges will result in errors running the report. If providers run the report using these specified ranges and encounter issues, please report them to the Sage Help Desk at (855) 346-2392) immediately.

Updated 837P Companion Guide

The 837P Companion Guide has been updated to align with recent State guidance for services requiring multiple NDC codes. The Companion Guide was updated to add the loop and segment information for LX Segment Counter(s) to bill multiple NDC codes. The updated Companion Guide can be found on the Sage website at: http://publichealth.lacounty.gov/sapc/providers/sage/system-guides.htm and is also attached to this communication for ease of reference.

Redesigned Sage Webpages

As introduced during the September 2020 All Provider Meeting, the SAPC website is currently undergoing a redesign to improve usability. The Sage webpages are part of the first phase of this redesign and SAPC is excited to announce that newly redesigned Sage webpages have been published on the website as of Thursday, May 20, 2021. The Sage webpages were updated to make it easier for providers to find documents, resources, and training materials. The Sage Team took care to review all documents on the Sage pages and removed documents with outdated information and included the addition of documents to support providers that may not have been included on the original Sage webpages.

Some Sage related documents that were previously on the general SAPC pages only under the Network Providers pages have been moved to the redesigned Sage pages to make it easier for providers to locate and reference these documents. This includes documents such as the Denial Crosswalk and guide, the form to request re-upload of 835s and EOBs, and the recent video on interpreting the Real Time 271 report. Currently, these noted documents are still available under the Network Provider pages, but upon further redesign of the SAPC website overall, these documents will soon only be located on the Sage pages.

A quick guide has been attached to this communication to support providers in understanding where the documents previously on the Sage pages are now located. A brief walkthrough of the updated pages will be conducted during the June 8th Provider Meeting.

ASAM Continuum Update

On May 25, 2021, the American Society of Addiction Medicine will release version 3.4 of the ASAM CONTINUUM. Details about the updates made in this version of the software can be found below and on the **ASAM CONTINUUM website**.

Question and Response Updates:

- In CONTINUUM RISE, guidance has been added to question ASm06s - "Would the patient's current substance use, or resumption of substance use, be likely to cause a severely dangerous exacerbation of a medical condition?" - which reads: "(Important: This question asks whether a specific, severely dangerous exacerbation is likely to occur TODAY if the patient continues to use. Do not consider theoretical, generic, future risks. Responding "Yes" or "Not sure/possibly" will escalate the Final Level of Care intensity and/or require Biomedical Enhanced Services (BIO). If unsure, consult a nurse or physician.)"
- To promote destigmatizing language, the response option "Any other drug of abuse..." in the Used Substances list (Drug and Alcohol section) has been rephrased as, "Any other substances (e.g., high-dose caffeine, steroids, etc.)"
- We have corrected a bug that was causing responses of "No" or "None" to pre-populate for some items in the Medical History section and Psychological History subsection.
- The "Legal Information" and "Family and Social History" sections now correctly show "100%" under "% Complete" once all required questions have been answered.

Summary Report Updates:

- The Critical Items Section of the Summary Report previously included statements affirming that the patient reported certain medical problems (e.g., liver problems) if the clinician responded either "Yes" or "Not sure or possibly" to questions asking whether those medical problems were present. The Summary Report logic has been corrected so that these statements only populate if the response is "Yes."
- If your patient identifies as male and the interviewer accidentally selects "Not sure or possibly" or "Yes" as the response to question ASm03, which asks, "Are you pregnant? (If male, enter No)" this item and response will no longer display in the Critical Items Section of the Summary Report.

These enhancements were made to **increase the accuracy** of responses.