

Communication Release

7/28/2023

REMINDER: Providers Need to Finalize Notes left in Draft Status Prior to Conversion to PCNX in LIVE

During the PCNX trainings, the new unified Progress Note form was introduced to the network. This Progress Note Form has been redesigned to enable providers to indicate the use of add-on services for billing that is part of CalAIM Payment reform. When providers transition to Sage-PCNX LIVE, the Progress Note form will be enabled and all other Note forms will become Read-Only. Providers are encouraged to finalize all outstanding Progress Note (BIRP/GIRP/SIRP/SOAP) and Miscellaneous Note Options as soon as possible and before the transition to PCNX. Notes left in draft status in Sage-ProviderConnect (PCON) classic will no longer be editable when the network transitions to PCNX LIVE. For notes left in draft, providers will need to recreate the note in the new Progress Note form.

PCON Forms that will be Read-Only in PCNX

- Progress Note (BIRP)
- Progress Note (GIRP)
- Progress Note (SIRP)
- Progress Note (SOAP)
- Miscellaneous Note Options

Within PCON Classic, most providers can use the Documents in Draft or Licensed-Eligible LPHA reports, which will populate the notes that remain in draft status. However, for a handful of providers, these reports are not working properly. To help address this issue, SAPC has created two special reports for Progress Notes in Draft and Miscellaneous Notes in Draft that was uploaded to the provider SFTP (in the Notes In Draft folder) on Friday 7/14/2023. Either of these options will give providers a list of all notes currently in draft. Providers should finalize all notes as needed as soon as possible to avoid issues when PCNX is implemented.

If the Notes in Draft reports were not downloaded and no longer on the SFTP, please email SAPC IT at SapcProviderReq@ph.lacounty.gov to request the Notes in Draft report.

Submit Claims Entered in PCON prior to PCNX Go-Live

SAPC reminds providers to submit claims entered in PCON Classic prior to PCNX release to LIVE. Claims entered in PCON classic but not submitted prior to PCNX release in LIVE must be re-entered in PCNX for processing. Providers that have submitted claims while waiting for their contract amendments to be approved are reminded to submit claims entered in PCON Classic upon SAPC approval. All affected

agencies have already been notified by SAPC regarding their ability to submit these claims in PCON Classic, as your contracts in Sage have been updated.

Providers who are pending augmentations are advised to contact their assigned Contract Program Auditor.

FY 22-23 Authorization Request Reminder

Use of Benefit Plans within FY22-23

The additional options in the Benefit Plan field were added in preparation for FY 23-24 authorizations. However, inaccurate completion of this field can cause issues for authorization requests from FY22-23. As a reminder, for Authorization requests where the Authorization Requested Start Date is prior to 7/1/2023, the Benefit Plan field should be limited to DMC SUD Services, Non-DMC Services, or RI Program-Contingency Management. Incorrectly submitting authorizations will result in review delays by UM, potential denials, and a need for providers to resubmit.

Additionally, providers seeking OTP authorizations should only be using the OTP level of care options and not MAT Svcs, as MAT services are included in OTP services. The MAT Svcs level of care is only for Non-OTP providers who are prescribing medications for addiction treatment in addition to the standard services.

New Required field for "Initial Engagement" Authorizations on the PCNX Service Authorization Request

Effective when PCNX goes LIVE, SAPC QI and UM are implementing a new field, "Initial Engagement*" on the Service Authorization Request for providers to indicate if an authorization is being submitted for the initial engagement period or as a full authorization. Providers should answer "Yes" if the authorization is being used as the initial engagement for either 30 days for adults 18+ or 60 days for youth or patients experiencing homelessness where providers need additional time to establish medical necessity. Selecting "No" will indicate medical necessity has been met and the authorization is submitted for the full treatment period for that level of care.

The new field can be accessed by selecting the "Doc Request Date" section from the Service Authorization Request form. This field will be required to submit the authorization. If unselected, an error popup message will direct staff to complete the field.

SERVICE AUTHORIZATION REQUEST					Submit	Discard A	Add to Favorites
Member Service Authorization Member Service Authorization 21-40 Care Manager Diagnosis Comments Provider Search	✓ Initial Engagement *	_ No					
Doc Request Date Online Documentation							

Providers will get an opportunity to test this functionality in PCNX TRAIN when the environment becomes available.

Attestation Requirement for PCNX Training

On Monday, July 24th the Sage Access and Management Unit (SAMU) sent an email to the agency's Sage Liaison requesting to complete the Attestation Form for PCNX Training and return to the form to <u>SageForms@ph.lacounty.gov</u> by Friday, July 28th. The return email should include the attestation form along with a list of Sage users who have attended one of the PCNX trainings. If Sage Users do not complete one of the trainings it may result in having their Sage access temporarily disabled. If there are any questions the agency's Sage Liaison should send an email to <u>SageForms@ph.lacounty.gov</u>.

How to Access PCNX Training Videos

SAPC has created resources for providers to aid in the transition to Sage-PCNX. Links to PCNX recordings and guides have been posted to the <u>SAPC Sage website</u>. As these resources contain proprietary information, users will be routed to Microsoft Stream where authentication is required. Users may authenticate with their Sage c#.

User should only use the link directly from the SAPC Sage website. Sharing the resource from Microsoft Stream will cause issues.

Updated Rates and Standards Matrix

SAPC published an updated <u>Rates and Standards Matrix</u> on Tuesday 7/24/2023. The following changes were reflected in this most recent update:

- **CENS Tab**: removed extra H2017-CN code for Tier 1 and removed H0049-CN-N as providers will use H0049-N for Non Admits to Treatment.
- Recovery Services, Outpatient, Withdrawal Management, and OTP Tab: 90849, H0025, H0005, G2212, H0034, H2014, and H2017 have all been updated to reflect the correct group rate which is divided by 4.5
- Care Coordination Tab Tier 3: 99367 Rate was lower than Tier 1 and Tier 2, it is now corrected
- Outpatient Tab: Tier 1 T1013 rate was standardized to \$30
- MAT Tab: Service descriptions updated to match all cited HCPS/CPTs
- MAT tab: G2212 HQ services have been updated to include service

UPDATED: SAPC Plan for Cut-Over to ProviderConnect NX (PCNX)

SAPC and Netsmart continue to diligently work to prepare for the launch of ProviderConnect NX (PCNX). Unfortunately, these technical preparations have taken longer than expected. SAPC will update providers with an anticipated target date for PCNX-LIVE release when more information is available.

Reminder Key dates:

The Service Authorization Request Blackout Period is anticipated to take place from Saturday 7/1/2023 until PCNX-LIVE is released.

- During this time, providers must hold submissions of all service auth requests with start dates from 7/1/2023.
 - Otherwise, starting 7/1/2023 new service auth requests with start date 7/1/2023 and submitted during blackout will be automatically denied by UM.
- Providers can continue to submit authorizations for dates of service prior to 7/1/2023 during the blackout
- During the blackout, providers are expected to continue documenting treatment, medical necessity (including ASAM assessment, Misc note for level of care justification) in Sage.
 Exemptions will not be granted for untimely medical necessity documentation.
- Once the Service Authorization Request Blackout is lifted, providers may submit service auth requests with start date 7/1/2023 and on. QI/UM will begin processing these requests.
 - Service auth requests with DOS prior to 7/1/2023 must be submitted using the current process (Auth Grouping) information.
 - Service auth requests with start dates of 7/1/2023 and after must use the *new* Benefit Plan authorization submission process.
 - More information about how to submit these Benefit Plan authorizations will be provided in the Sage PCNX trainings and in future Sage Communications.
- SAPC will notify providers once the Service Authorization Request Blackout Period has been lifted.

QI/UM will continue to review all authorizations submitted prior to 7/1/2023 during the Service Authorization Request blackout period.

Planned Sage Downtime during PCNX Cut-Over:

SAPC and NetSmart continue to configure the PCNX LIVE environment for provider use and will provide additional details regarding cut over to PCNX LIVE as they become available. SAPCs will provide additional information in a future Sage Communication. However, when PCNX-LIVE is released, SAPC anticipates there being a scheduled Sage downtime required.

Process for updating Taxonomy Codes Required for Claiming under CalAIM

As part of Payment Reform and CalAIM, effective for dates of service 7/1/2023 and later, all claims sent to SAPC and sent to the State will require a rendering provider taxonomy code in addition to NPI numbers that SAPC has already been historically using.

For SUD counselors, SAPC strongly recommends that all registered and certified SUD counselors utilize 101YA0400X as their taxonomy code in Sage for billing.

While most SUD counselors in our network already utilize this code as their taxonomy code, many are using non-approved codes or do not have a taxonomy code associated with their Sage account. SAPC did not capture taxonomy code information in the initial onboarding for Sage but started collecting those codes in approximately 2020.

In preparation for CalAIM, providers should update any staff information that may be out of compliance in accordance with the <u>DMC-ODS Billing Manual effective 7/1/2023</u>. This includes all service providers, such as LMFT, LPCC, Psychologists, MD, NP etc., in addition to SUD counselors. Medi-Cal will validate the staff is allowed to perform the service based on the taxonomy code and if the NPI is currently active in the <u>National Plan & Provider Enumeration System (NPPES)</u>. Providers should ensure all their performing provider staff have an active NPI in NPPES and the taxonomy code in NPPES is updated to an approved code. For SUD counselors, SAPC recommends using 101YA0400X.

To request addition of taxonomy codes to provider, please send a complete list of taxonomy code changes to <u>sageforms@ph.lacounty.gov</u>. SAPC will update the codes in Sage once we receive the requested changes.