Communication Release

12/29/2022

Updated Definition of a "Business Day"

SAPC released Information Notice 22-19 describing CalAIM Documentation Standards and Requirements which clarifies a uniform definition for business days and the timeframes for requiring clinical documentation. Last week, the Department of Health Care Services (DHCS) clarified that, when counting days for the timeliness of clinical documentation, the date of service counts as day one (1). SAPC IN 22-19 further clarifies that, for the purposes of clinical progress notes, a business day is a non-weekend and non-holiday regardless of whether the SAPC provider is contracted to operate during weekends and holidays. Holidays that apply to the SAPC treatment network are the days formally designated as holidays by the County of Los Angeles. For non-crisis notes, which must be finalized within three (3) business days, this means that if a service is provided on Friday 12/23/2022 the note would need to be finalized by Wednesday 12/28/2022 as Monday 12/26/2022 was an observed holiday for the County of Los Angeles.

Example of how to calculate the timeframe for finalizing clinical documentation with the latest guidance:
- Friday 12/23/2022 (Business Day 1)
- Saturday 12/24/2022 (Non-business day)
- Sunday 12/25/2022 (Non-business day)
- Monday 12/26/2022 (County Holiday)
- Tuesday 12/27/2022 (Business Day 2)
- Wednesday 12/28/2022 (Business Day 3)

In contrast, the timeframe to complete ASAM assessments, level of care justification notes, Treatment Plans, and Problem Lists are based on calendar days. Refer to the current version of the SAPC Provider Manual posted on the SAPC website for the specific timeframes for completion of ASAM assessments, level of care justification notes, Treatment Plans, and Problem Lists required of SAPC contracted providers.

Problem List Grace Period Ended on 12/15/2022

On 7/1/2022, CalAIM's Problem List requirement for non-OTP providers went into effect. SAPC's Utilization Management Unit allowed flexibility with a grace period for providers as training was provided on new the Problem List requirements. This grace period ended as of 12/15/2022 and all reauthorizations received after this date must meet Problem List requirements or risk being partially or fully denied.

SAPC would like to remind providers that all new admissions as of 7/1/2022 require a Problem List. This excludes OTP providers, as they will continue to utilize Treatment Plans.

The Problem List requirements are below:
a) Problem (minimum one SUD related): may be listed as a diagnosis, illness, social determinant of health, z-code, and/or description of an issue
b) Problem Added By- and credential
c) Practitioner Title
d) Date Added: date the problem was added to the Problem List
e) Date Removed: date the problem was identified for removal
f) Removed By - and credential and title

A Problem List must be finalized/signed by an LPHA and dated within the last 30 days of the reauthorization start date for residential reauthorizations or last 90 days for non-residential reauthorizations – in adherence with Provider Manual 7.0 standards. Non-compliance with Problem List requirements may result in partial approvals or denials.

KPI Data Truncated

KPI's data functions on a rolling history which means that every six months at the beginning of the fiscal year and calendar year the oldest six (6) months of data is truncated. On January 1, 2023 the new range of date availability will be from July 1, 2019 to present. Fiscal year 18-19 will no longer be available in KPI as of the new calendar year. As has been the recommendation during previous drop off periods, providers may choose to export data from the second half of FY 18-19 for record keeping.

H0049-N Configuration Changes

Providers have been instructed to claim the screening time for patients who are non-admitted to treatment through the Sage system using the HCPCS code H0049-N. In order to maximize allowable DMC billing, the Sage system is being configured and will go live on January 15, 2023 with new configuration that will allow for DMC billable non-admission screening. If a person is screened and not admitted to treatment but has DMC benefits, the Financial Eligibility can be set to DMC so the service can be billed to DHCS.

The guidance below has been updated to instruct providers to enter the lowest level of care U-code in which the provider site is DMC certified and for patients who are DMC eligible, their financial eligibility set to DMC. SAPC is also in process of updating the job aid, "Claiming for SUD Screening Instructions," with this new information and will provide notice in a following Sage Provider Communication when the updated job aid has been published.

Documenting and Billing for Non-admitted Screening
As a reminder, all network treatment providers are required to:
1. Complete either an ASAM Co-Triage or Youth Engagement Screener for each person who comes to the facility requesting treatment services if not referred by SASH, CENS, or CORE.
2. Complete the Referral Connection Form in Sage for both admitted patients and patients who were referred out.
3. Enter diagnosis code:
    a. Enter diagnosis code Z03.89 in Sage and in provider's EHR, if applicable, for non-admitted screenings.
        i. Enter the lowest level of care U-code in which the provider site is DMC certified.
        ii. For DMC eligible patients, ensure their financial eligibility is set to DMC as the primary guarantor.
4. Submit a claim:
    a. Utilize the Provider Authorization (PAuth) for patients not admitted to treatment.

Sage Help Desk Survey

The bi-annual Sage Help Desk Feedback Survey will be open from 1/9/2023 to 1/23/2023. Users who submitted a Sage Help Desk ticket within the last six months will receive an email requesting completion of the survey. The survey helps SAPC and the Sage Help Desk to determine if users are receiving the support they need from the Help Desk and identify any areas of improvement. The survey responses and feedback are an important part of our ongoing process improvement. We encourage all users that receive the survey to please complete it within the designated two-week period. Please check your emails beginning on Monday January 9, 2023 for emails from Clientexperience.ntst.com.

Closing FY 19-20: Billing Deadline

SAPC would like to remind providers that **billing for FY 19-20 will be closing on Saturday, December 31, 2022**. Providers should ensure all resubmissions of State denials are completed by this date. SAPC will accept and adjudicate services received through the end of 12/31/2022. Any services for FY 19-20 submitted on or after January 1, 2023 will be automatically denied by Sage with the reason, "Cost Reporting for Fiscal Year is Closed."

Providers are reminded that the 31st is the final date for billing and after the 31st no corrections or resubmissions of claims will be approved. In order to ensure that rejected claims or denied claims are able to be worked and resubmitted for processing, SAPC recommends that billing be submitted prior to the deadline not on the deadline to allow for fixing of any claim rejections or denials.

It is strongly recommended that Primary Providers check the Audit Log Report in ProviderConnect to ensure that bills submitted in Sage were sent successfully to SAPC and not held by a system process so the bill can be resent prior to or on 12/31/2022. Please use the audit log after submitting the bill to validate it was successfully sent to SAPC. If you need assistance using the Audit Log Report, please contact the Sage Help Desk by phone at (855) 346-2392 or via the Sage Help Desk ServiceNow Portal at https://netsmart.service-now.com/plexussupport.

Closing FY 20-21: Billing Deadline Extended

The **billing deadline for FY 20-21 has been extended to Tuesday, February 28, 2023**. Providers should ensure all resubmissions of State denials are completed by this date. SAPC will accept and adjudicate services received through the end of 2/28/2023. Any services for FY 20-21 submitted on or after March 1, 2023 will be automatically denied by Sage with the reason, "Cost Reporting for Fiscal Year is Closed."