

## Sage: eLearning



## Web-Based Training for Sage (aka eLearning)

- Courses are organized into several modules
- Each module can be completed in 30 minutes or less
- Modules can be stopped and restarted where users leave off
- Modules contain instructional details and simulation exercises to test users' ability to apply what has been taught
- After completing the modules, a final exam must be passed with a score of ≥ 70%
- Final exam questions and some responses are shuffled to create a unique assessment for each user





### eLearning: Course Registration and Completion

• **Step 1:** User completes the User Creation Form with their name, email address, C-number, location and role



- Step 2: The Sage Help Desk receives the request for account creation and sends the user an email with instructions for purchasing the course required for their role
- **Step 3:** User visits the myLearningPointe store, creates an account and purchases/completes the required training
  - Note: Courses can only be purchased with a credit card by individual users.
- **Step 4:** The myLearningPointe team sends an email to the Sage Help Desk each morning notifying them of users who passed courses the previous day
- Step 5: The Sage Help Desk creates the user accounts and sends login credentials

SIGN-IN	
User name:	
Password:	
	Sign-in
Forgot your	password?
CREATE ACCO	UNT
If this is your fir Netsmart Univer create a new acc	sity you must
Netsmart Univer	rsity you must count.



## **eLearning Course Details**

- **Cost:** \$10/user
- Access: 24 hours per day, 7 days per week
  - Course access does not expire
  - Courses can be retaken as often as needed no limits
- Currently Available Courses:
  - 1. Clinical User

#### • Planned course modules:

- 1. Billing (September 2018)
- 2. Super User Training (early-October 2018)
- 3. Sage for Secondary EHR Users (early-October 2018)
- 4. SASH/CENS (Pending)



# Member Authorizations



## **New Authorization Grouping**

#### Pregnant and Parenting Women (PPW) Services Providers

- See updated Rates & Standards Matrix for PPW HCPC Codes for:
  - Room & Board or RBH for Children
  - Case Management for Children
  - Child Care Services for Children
- Only providers who are DMC Certified for Perinatal Services are eligible to utilize these extra codes.
- To receive an authorization to use these codes, you should request an authorization grouping that ends in "-PPW"
- Only Providers in the "Pregnant & Parenting Women (PPW) Service Provider" network should be requesting authorization groupings that end in "-PPW".



## **New Authorization Grouping**

#### Pregnant and Parenting Women (PPW) Services Providers, (con't)

- All providers can still treat pregnant and parenting women, however, should not select the "PPW" groupings unless they are a PPW Services Provider.
  - If provider is not part of the Pregnant and Parenting Women Provider Network, then provider should select an authorization grouping that DOES NOT end in "PPW" for the requested LOC.
- Documentation: Need to provide documentation for each child (Name/Age/DOB) as well as documentation for each service provided on Miscellaneous Note.
- For more information about the PPW network or to verify if you are a participating provider, please contact Natalie Manns 626.299.4189



## **New Authorization Grouping**

### Perinatal & Parenting PPW Grouping

- Available for most Levels of Care and age groups
- Not available for:
  - Withdrawal management at any age group
  - Not available for RSS at any age group
  - Not available for ASAM 1.0-AR at any age group

#### Perinatal vs. Perinatal PPW

- WM, RSS and ASAM 1.0-AR have Perinatal Auth groupings w/o the "-PPW" ending for reporting purposes.
- If you are serving a Perinatal woman at WM, RSS or ASAM 1.0-AR, you SHOULD use the "..../perinatal" authorization group.
  - This only designates that the patient is perinatal and includes the same rates and HCPC codes as non-perinatal patients.



## **Authorization Updates**

#### System configuration for Fiscal Year 2018-2019

- <u>Authorization Groupings</u>: Netsmart is finalizing the conversion of authorizations from the FY 2017/18 grouping to the FY2018/19 groupings. *No action is needed on your part.*
- <u>Authorization Status</u>: Netsmart has converted authorizations from "pending, no active contract" to "approved" status.





## Rates And Standards Matrix



## **New Billing Codes**

#### New Codes to Differentiate Type of Medication Service

- H2010 Medication Services (Non-MAT) to be used for all standard, non-MAT medication services.
- "MAT-SVC" added to allow providers to show when MAT medication services were utilized.
  - MAT-SVC is available at all Levels of Care where Medication for Addiction Treatment can be offered.

#### **Changes to OTP Level of care**

- Increase in Non-PPW rates for most services
- Added Buprenorphine (Mono)- Generic
- Added Buprenorphine- (Naloxone Combination) Generic
- See updated rates for Disulfiram, Naloxone, Methadone
- H2010 Medication Services (Non-MAT)
- Added New HCPC Code: "MAT-SVC" for Medication Services (MAT)





## **New Billing Codes**

#### <u>Changes to Pregnant and Parenting Women Services Providers</u> (Formally Perinatal Services Network)

- PPW services provider housing a Parenting woman and child can now bill the room and board or RBH bed for the parent and child.
- Same rate as patient. Submit separate treatments/claims for patient and each child, if applicable.

S9976-C	Residential (RS) ASAM 3.1, 3.3 or 3.5 - Room and Board	\$51.66	Day Rate	Child (age 0-16) accompanying parent to RS. Contingent on RS participation by perinatal or parenting women.
H2034-C	Recovery Bridge Housing (RBH) – Bed Day	\$38.50	Day Rate	Child (age 0-16) accompanying parent to RBH. Contingent on RBH participation by perinatal or parenting women.



# **Discharge Procedures**



### **Discharge Services**

- Discharge Services HCPC is available for ALL LOC's except 1.0AR, RSS and RBH
- You need to discharge patients from every LOC that you admit them to.
- Discharge Services include:
  - Services related to preparing the patient for referral into another level of care, post-treatment return or reentry into the community, a
  - Linkage to essential community treatment, housing and human services.
  - Completion of CalOMS discharge.



## **Discharge Process: What is Required?**

- Situation: Discharge from any treatment LOC
  - Discharge and Transform Form
    - Date is the date patient completed treatment.

Discharge and Transfer				
Date				
Today	/esterday			
Specify Number of Days				

Cal-OMS Discharge or Cal-OMS Administrative Discharge



- Enter actual date of discharge
- Situation: Discharge from RBH
  - RBH Discharge Form

Recovery Bridge Housing Discharge				
RBH Discharge Date				
	Today	Yesterday		

- NOTE: Updated label to more accurately reflect information requested.



### **Discharge Dates**

- Thought of the Day: The date of discharge is the date the patient was discharged.
  - Providers need to complete the discharge paperwork on the day the patient was discharged. This includes:
    - Cal-OMS Discharge
    - Discharge/Transfer Form
    - RBH Discharge Form
  - This has an impact on:
    - Patient's ability to be admitted to other programs
    - Your agency's eligibility for incentive payments
    - Number of RBH days available
  - SAPC has noted providers have been entering a variety of dates in the discharge date fields.



# **Billing Tips & Tricks**



## **Billing Tips and Tricks**

- Ensure you are using the correct member authorization for the services and dates you are billing
  - Please note you may have different authorization numbers during the billing period.
- Make sure that you are billing on an approved authorizations
  - This is especially important for providers who are submitting the 837 file.
- Ensure that eligibility requirements are met prior to submission, including:
  - Financial Eligibility: CIN, DMC and Non-DMC guarantors, if applicable
  - Provider Diagnosis (ICD-10) Form completed
- Ensure that the rate is correct and consistent with the fiscal year you are billing for.
  - If there is a discrepancy between Sage and New Rates, Call the Helpdesk for assistance.