



BARBARA FERRER, Ph.D., M.P.H., M.Ed.
Director

JEFFREY D. GUNZENHAUSER, M.D., M.P.H.
Interim Health Officer

CYNTHIA A. HARDING, M.P.H.
Chief Deputy Director

WESLEY L. FORD, M.A., M.P.H.
Division Director, Substance Abuse Prevention and Control
1000 South Fremont Avenue, Building A-9 East, 3rd Floor
Alhambra, CA 91803
TEL (626) 299-4101 • FAX (626) 458-7637

www.publichealth.lacounty.gov

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SAPC BULLETIN NO. 17-14-START

Superseded by IN 22-06

February 26, 2018

TO: Los Angeles County Substance Use Disorder
Contracted Treatment Providers

FROM: Wesley L. Ford, M.A., M.P.H., Division Director
Substance Abuse Prevention and Control

SUBJECT: COUNTY OF RESIDENCE MODEL

The Department of Public Health, Substance Abuse Prevention and Control's (SAPC) substance use disorder (SUD) treatment benefit package is available at no-cost to Medi-Cal, My Health LA, and other County-funded program (e.g., AB 109) participants who reside in Los Angeles County. This benefit was effective July 1, 2017 (Bulletin 17-01) for all levels of care except Opioid Treatment Programs (OTP) who may enroll non-County residents through March 31, 2018 provided individuals are transferred to their County of residence on or before June 30, 2018 for continued services.

COUNTY OF RESIDENCE / RESPONSIBILITY

The Los Angeles County specialty SUD benefit package follows a County of residence model of service delivery which means only individuals with established residency, and who meet eligibility requirements, can receive these publicly funded services. SAPC network providers that render SUD services to individuals who reside outside of Los Angeles County will not be reimbursed for services delivered on or after July 1, 2017, except for: (1) OTP services/patients; and (2) Medi-Cal transfers as described herein. Network providers who intend to deliver services to non-County residents need to contract with the County where those beneficiaries reside to be reimbursed.

PROVIDER RESPONSIBILITIES

If Network Providers receive referrals from individuals who reside out-of-County that do not intend to move, and the Network Provider does not have a contract with the County of residence, provide the County phone number available at: <http://www.dhcs.ca.gov/individuals/Pages/DMC-CountyNumbersDirectory.aspx>. OTP providers must follow this process beginning April 1, 2018.

In situations where the individual resides in Los Angeles County but Medi-Cal benefits are assigned to another County, Network Providers conduct the screening/assessment and admit the patient for medically necessary services while Medi-Cal benefits are being transferred. Admission cannot be delayed or denied for eligible (i.e., Medi-Cal, My Health LA, AB 109) Los Angeles County residents due to an incomplete or pending application and/or if Medi-Cal benefits are assigned to another County.

It is the Network Provider's responsibility to facilitate the process of transferring, initiating, completing, and renewing Medi-Cal and My Health LA applications with potential and current patients using the case management benefit (at time of publication \$33.83 per 15 minutes, up to 7 hours per month). SAPC also guarantees payment for services for up to 60 days during the Medi-Cal application and transfer process for individuals who meet income and other eligibility criteria and with proof of continuous effort by the Network Provider (e.g., proof of application, Medi-Cal Client Index Number (CIN), progress notes) to complete the process in a timely manner.

The *Provider Manual for Substance Use Disorder Treatment Services* includes additional guidance on claims reimbursement while a Medi-Cal, My Health LA application, or transfer is pending.

OTP COURTESY DOSING

OTP patients who are Medi-Cal beneficiaries and have traveled to Los Angeles County for business or leisure, and who do not qualify for, or are unable to bring enough take-home doses for the trip duration, are eligible for SAPC reimbursed courtesy dosing of methadone and buprenorphine for up to 30 days. The Los Angeles County clinic must receive a courtesy dosing order from the home clinic which is signed by the medical director or program physician, and at minimum outlines the dose, duration, and any other special instructions, such as take-home doses. Compliance with relevant Title 9 regulations is required.

For claims to be approved, the invoice must include all information contained within the *Courtesy Dosing Reimbursement Form*, including the name and date of birth of the patient, Social Security Number, Medi-Cal CIN, County/State of residence, home clinic, dates of service, medication type, health care procedure coding system, amount billed, and courtesy dosing reason. Individuals receiving courtesy doses are not entered as new admissions into Sage and data collection is not required. Claims must be submitted after the last dose is administered or distributed to the patient, by completing the attached *Courtesy Dosing Reimbursement Form* and sending securely to cruiz@ph.lacounty.gov or via fax at (626) 299-7225 (Attention: DMC Unit).

EFFECTIVE PERIOD

Reimbursement claims will be denied for non-County residents receiving treatment at American Society of Addiction Medicine (ASAM) level of care as follows (excluding patients served under the 60-day Medi-Cal application/transfer policy):

- July 1, 2017: Non-County residents receiving ASAM 1.0, 2.1, 3.1, 3.3, 3.5, 1-WM (withdrawal management), 3.2-WM, 3.7-WM, and 4.0-WM services on or after this date.
- April 1, 2018: New non-County resident admissions to ASAM 1-OTP on or after this date.
- July 1, 2018: OTP patients who received services on or after this date, and who were not transferred to the County of residence for continued services.

For additional information related this bulletin, please contact Yanira Lima, Systems of Care Branch, at ylima@ph.lacounty.gov or (626) 299-3202.

Attachment

WLF:mg

