

# SAPC Finance Services Division Provider Updates

**Daniel Deniz, SAPC Finance Services Division Chief** 



# FY23-24 Billing Deadline



### **End of FISCAL YEAR = BILLING DEADLINE**

#### **Drug Medi-Cal Treatment Services**

Claim Submission Deadline	Expected Date of Reimbursement
July 1, 2024 – July 5, 2024	End of July 2024
July 6, 2024 – July 31, 2024	End of August

#### **Recovery Bridge Housing Services**

Claim Submission Deadline	Expected Date of Reimbursement
July 1, 2024 – July 5, 2024	End of July 2024
July 6, 2024 – July 15, 2024	End of August 2024

#### Prevention, Client Engagement and Navigation Services, and all Other Contracts

Invoice Submission Deadline	Expected Date of Reimbursement
July 1, 2024 – July 5, 2024	End of July 2024
July 6, 2024 – July 15, 2024	End of August 2024

# FY23-24 Billing Deadline



#### **End of FISCAL YEAR = BILLING DEADLINE**

# **Take Action NOW!**

- Conduct internal studies to identify any services/costs that have NOT been submitted for reimbursement.
  - Sage Billing: Run Progress Note Status Report to identify claims for submission.
- Review contract allocation and identify amount of unused funds.
- Review Statement/Scope of Work to confirm allowable program activities.
- Work with staff to identify needed equipment and other resources to support the program.
- Work with vendors to secure needed invoices to request for reimbursement.

# **FY23-24 Fiscal Reporting**



# **SAPC 23-10: Implementation of Fiscal Reporting Process**

- Release October 10, 2023, effective July 1, 2023.
- Applies to <u>ALL</u> SAPC contracts and agreements.
- Streamlined process, 5% of the content of the State's prior tool.
- Collects cost information at AGENCY level by ASAM/SERVICE.

# **Actions to Take Now**

- Collect all associated costs and service units per contract.
- Enter costs according to ASAM/SERVICE Cost Centers.
- Leverage Revenue/Expenditure tracking report (Capacity Building).
- Review Fiscal Reporting Tool(s) on SAPC website and identify any questions.

# **NEW Contract Budget & Invoicing System**





# **New Budget Automated System**

- Implemented during Contract Actions
  - –Add/Remove Sites
  - –Add/Remove Services/Level of Care
  - —Funding Changes

# **Provider Invoice Automated System**

- Wider application
  - -Prevention Services
  - -Harm Reduction
  - -Client Engagement & Navigation Services
  - -Juvenile Justice Programs
- First Invoice due: AUGUST 10th!

### **Action To Take**

- Identify staff who create submit budgets.
- Identify staff who submit invoices.
- Ensure they have a C-number and are registered to have VPN access.

# FY24-25 Budget Updates



# **FY24-25 Budget Updates**

- Indirect Cost Rate
  - –Federally Approved Rate
  - -De Minimis: 15%
    - Increase from previous 10%!
    - Effective July 1, 2024

- DMC Programs: Capacity Building & Incentive Allocations
  - Estimate amount of funding based on activities
  - Include this in under Services & Supplies

# FY24-25 Rates Matrix



## **Matrix Updates**

- Fiscal Year 24-25 Service Codes & Rates Matrix Updates
  - Handout with updates and guidance
- P-Auths: Recovery Services, CENS, Screening Non-Admitted
- Tier Tabs
  - Includes all levels of care by Tiers
  - Providers can filter based on contracted LOC.
- Billing Rules Tab
  - Revisions are highlighted in YELLOW

#### Fiscal Year 24-25 Service Codes and Rates Matrix Updates

Updated: 6/13/2024

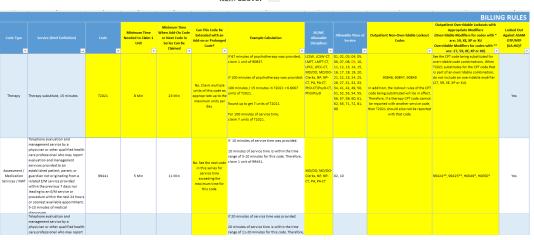
The information below outlines changes for Fiscal Year (FY) 2024-2025. This information should be used in conjunction with the Rates and Standards Matrix as well as the <u>DHCS DMC-ODS Billing Manual</u> to inform billing for the fiscal year. Providers should note that these changes are for FY 24-25 only and are not applicable for FY 23-24. Refer to the <u>FY 23-24 Rates and Standards Matrix and Information Notice</u> for information applicable to that FY.

#### Rates and Standards Matrix Tab Formatting Changes

The following changes have been made to the Rates and Standards Matrix tabs to align the
columns and add additional information present on the <u>DHCS DMC-ODS Service Table</u>. For
descriptions on what information is within each column, providers should refer to the <u>DHCS DMC-ODS Billing Manual</u>.

#### NEW Tier 1/Tier 2/Tier 3 Tabs

- The tabs for the rates by service code and level of care have been consolidated into one tab per tier which will include all service codes and levels of care.
- This change was made to allow for a comprehensive view of all services in one tab
  vs. having to navigate into multiple tabs for information on service codes and
  rates.
- The Rates and Standards Matrix remains filterable to allow for ease of filtering by level of care, code type, and/or specific code.
- NEW column added Code+ LOC U Code which identifies the service code and level of care U code combination as the base code prior to adding any additional needed modifiers.
- REMOVED Outpatient/Residential/Withdrawal Management/OTP/ASAM 3.7WM & 4.0WM/Non-DMC Services/Perinatal/CENS Tabs
  - These tabs were consolidated into the new Tier 1/Tier 2/Tier 3 tabs as noted in the item above.



# FY24-25 Configuration



# **FY24-25 Configuration Timeline**

### No Authorization Blackout

- Primary Sage Users may continue to submit authorization request for FY24-25

## • FY24-25 Billing Blackout In Effect

- -Expected to be lifted by July 31, 2024
- Not impacting FY23-24 Billing

## Secondary Providers

- Matrix and Companion Guide can be used for configuration
- Refer to SAPC IN 19-08 Transitional Payments if needed

# **FY24-25 Finance Update**



# **New Fiscal Year Billing Office Hours**

**Every Thursday** 

July 25th, 2024 through October 24th, 2024.

Time: 1:00 PM – 2:00 PM

# **Billing Office Hours**

ID: 272 057 978 167 Passcode: RSqBKx

+1 323-776-6996,,586591664#

Phone conference ID: 586 591 664#



# Finance Services Division Update – Contact

# **Questions and/or More Information**

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