

Utilization Management-Provider Meeting

Los Angeles County Department of Public Health
December 21st, 2022
Substance Abuse Prevention & Control



Agenda

- **Authorizations Backlog Update**
- **CalAIM Documentation Redesign (Problem List and Progress Note) Standards**
 - **SAPC-IN 22-19: Documentation Standards and Requirements**
 - **End of Grace Period for Late Problem Lists**
- **Auths for Providers with Multiple Locations**
- **Authorization Requests for 0.5 Early Intervention Services**
- **Open Discussion**
- **Adjourn**

Backlogged Authorizations

- **Approximately 2 weeks behind on authorization reviews**
 - Please contact UM if you have authorizations that were submitted more than 2 weeks ago that are pending response.
 - UM contacts: phone 626-299-3531 and email SAPC.QI.UM@ph.lacounty.gov

Problem List Grace Period has Ended

- **SAPC Requirement for 2023**
 - Clinical Standard Documentation timeliness requirements remain in place
 - Timeliness of submitting authorizations
 - Timeliness of the problem list
 - SAPC problem list paper form is available at [this link](#).
 - Problem list addendum
- [*http://publichealth.lacounty.gov/sapc/NetworkProviders/ClinicalForms/TS/ProblemListMain.pdf](http://publichealth.lacounty.gov/sapc/NetworkProviders/ClinicalForms/TS/ProblemListMain.pdf)
- [*http://publichealth.lacounty.gov/sapc/NetworkProviders/ClinicalForms/TS/ProblemListAddendum.pdf](http://publichealth.lacounty.gov/sapc/NetworkProviders/ClinicalForms/TS/ProblemListAddendum.pdf)

Problem List Reminders

- 25 problem lists templates are now approved. SAPC problem list could be used alternatively.
- LPHA finalization is required for problem lists when submitting authorization
- Patient signature is optional on problem list
- Treatment plan is still required for OTP providers
- SUD counselors can write down diagnoses that are made or modified by an LPHA or an LE-LPHA on the Problem List
- Diagnoses on Problem Lists must include
 1. Name, title, and credential of the diagnosing LPHA, and dx must be within scope
 2. Date identified, added, or removed next to the diagnosis on the Problem List
- **Contact the care manager assigned to the authorization with any questions**

Provider Feedback: SAPC IN 22-19 Documentation Standards

- *Feedback from providers*
- How can an LPHAs make diagnosis of diabetes mellitus?
- *These diagnoses are typically made by physicians or advanced practice nurses operating within their scope of practice, but would not be within the scope of diagnosis for licensed behavioral health clinicians, such as LMFTs or LCSWs.*
- *We OBTAIN medical histories from patients routinely, and should be putting these on problem lists, so including 'patient reported diabetes' avoid any potential issue where a counselor might be seen to try to documenting a medical diagnosis (such as diabetes mellitus (ICD-10 code E11.9)) which is outside of their scope of practice.*

Provider Feedback: SAPC IN 22-19 Documentation Standards

It was my understanding that notes are due, **including** the day of service (**not following**) within 3-business days. So, for example, if a non-crisis service was done on Monday, January 9th, the progress note documenting service must be completed and finalized by Wednesday, January 11th.

- *Three business days for non-crisis services should be interpreted to follow, not necessarily include, the date of service. So, for example, if a non-crisis service was conducted on Monday, January 9th, the progress note documenting service must be completed and finalized on or before Thursday, January 12th, which is three business days after the date of service, not including the date of service. **This is new guidance.***

Provider Feedback: SAPC IN 22-19 Documentation Standards

- Can you please confirm if the LOC justification note can be completed within a full 7 calendar days from the first date of service, or if the LOC justification note must be completed within 3 business days of the ASAM assessment
- *There has been **no change** with this SAPC-IN 22-19 to the timeframe for the LOC justification note (the standards of which are in calendar days and described in the [provider manual](#) Table 4 (page 39) and pages 46-47)*
- *SAPC-IN 22-19 addresses the timeliness of progress notes documenting clinical services*
- *Pls see [Provider Manual](#) Table 4 (page 39) and pages 46-47 describing Timeliness of Medical Necessity Determination including Miscellaneous Note which must be signed and dated by the LPHA*
- *For adults entering residential care, both the ASAM and the LOC justification note need to be finalized within 7 calendar days of the first date of residential services*

Authorization Requests for Providers With Multiple Locations

- Provider ID#
- Scenario#1: Same provider ID #s in the 2 locations; When beneficiary transfers from one location to another location (same LOC or lower)
- Scenario#2: Same provider ID #s in the 2 locations; When beneficiary transfers from one location to another location (Higher LOC)
- Scenario#3: Different provider ID numbers in the 2 locations of the same provider

ASAM 0.5 Level of Care: Early Intervention Services

Early Intervention Services are a benefit for youth aged 12-20

1. When should providers submit an authorization request for 0.5 Early Intervention LOC to UM?
2. What types of documentation should be completed in Sage?
3. Timeliness of documentation
4. How long are these Authorizations?
5. How many 0.5 authorizations has UM reviewed?
6. Any issues based on current reviews?

When Should Providers Submit Authorization Requests for 0.5 Early Intervention Level of Care to UM?

- For any enrollment that took place on or after **11/1/2022**
- For any existing clients who are still participating in early intervention (formerly known as at-risk) services on **11/1/2022**

What documentation for 0.5 Early Intervention Services Should be Completed in Sage?

- Financial Eligibility Form - DMC and Non-DMC, Medi-Cal number and LA County residency
- Diagnosis Form
- Miscellaneous Note
- Clinical Contact Form
- An upload ***ASAM Screener for Youth and Young Adults*** (for initial and reauthorizations)

Timeliness of Documentation for 0.5 Early Intervention

- Screener must be completed within 60 days from the first date of service

Authorization Duration?

- If there is existing eligibility, the authorization end date will align with it, just like how UM handles authorizations for other level of care in the same situation.
- If there is no existing eligibility, the authorization will be 6 months in length.

How Many 0.5 Early Intervention Authorizations Have UM Reviewed?

- UM has reviewed > 30 authorization requests for ASAM 0.5 Early Intervention level of care.

Common Issues?

- If client has a DSM-5 diagnosis, client should be in 1.0 or higher level of care or there needs to be a documented justification for 0.5 Early Intervention LOC placement
- Authorizations with start date of service prior to 11/1/22
- No ASAM Screener for Youth and Young Adults attached in Sage within 60 days of the first date of service

Essential Contact Info

- For a specific authorization question, contact the care manager named in SAGE
- UM General number: **(626) 299-3531** and email: SAPC.QI.UM@ph.lacounty.gov
- Netsmart Helpdesk for SAGE technical problems/questions: **(855) 346-2392**
- Phone Number to file an appeal: **(626) 299-4532**
- Providers or patients who have questions or concerns after receiving a Grievance and Appeals (G&A) Resolution Letter should contact the **G&A number** at **(626) 293-2846**

Clarification

- Phone Number to follow-up with an appeal after receiving a resolution letter: **(626) 293-2846**

DPSS Customer Service Center

- DPSS [Customer Service Center](#) is the most appropriate resource to identify issues related to eligibility, can be reached at the following phone numbers:
 - Toll Free: (866) 613-3777
 - Local Numbers:
 - (310) 258-7400
 - (626) 569-1399
 - (818) 701-8200

Q&A / Discussion

The secret of change is to focus all of your energy, not on fighting the old, but on building the new.

Socrates