



Communication Release

10/09/2026

Planned PLB Segment Removal from 835 Files

Due to recently identified issues in Sage, SAPC Finance plans to remove the PLB - Provider Adjustment segment from all 835 files. Before making this change, we are requesting feedback from Secondary Sage Users to confirm if this segment is used, and if so, how you are using it. **Please submit feedback to SAPC-Finance@ph.lacounty.gov by Friday October 16, 2026.**

The PLB segment generally contains the Forward Balance (FB), reflecting future takebacks applied to subsequent 835 payments. Although SAPC issues takebacks, we do not use the PLB process to apply or deduct these amounts from future 835s, and therefore this segment does not provide a functional purpose within the 835. Removal of this file segment will prevent Secondary Sage User EHRs from ingesting this segment and adding inaccurate accounting information.

Removal of Critical Error Segments from 835 Files

SAPC Finance has recently identified instances where critical error segments were appearing in the 835 remittance files. These critical errors were not intended to display within the 835 transactions.

Critical errors occur during an 837 claim submission when required data elements such as date of birth or PATID are missing or structurally invalid. These issues result in functional errors that prevent a claim from being accepted.

Critical error details are appropriately reported through the 277CA response and the 837 error report. These are the official locations where Secondary Sage Users should review and resolve such errors.

SAPC Finance will remove the unintended critical error segments from the 835 files. Beginning October 13, 2026, these segments will no longer appear on the 835. If you need assistance locating critical errors in the 277CA or 837 reports, please submit a help desk ticket using the 'Request Billing Assistance' form in the Service Now portal.

New Provider Authorizations for Non-DMC Recovery Services

As of October 8, 2026, provider agencies now have Provider Authorizations (PAuths) available for FY 26-27 for Non-DMC clients receiving Recovery Services. For agencies that operate PPW sites, there will be an additional Non-DMC PAuth for perinatal clients. These PAuths can be used for: 1) CIFP clients or 2) Clients with a Non-DMC funding source. The following services are available on the authorizations:

Code	Code Type	Service Description
H0025	Peer Support	Behavior health prevention education service (delivery of services with target population to affect knowledge, attitude and/or behavior) [Peer Support group session], 15 minutes
H0038	Peer Support	Self-help/peer services (individual), 15 minutes

H2010M	MAT Services	MAT Education
H2015	Recovery Services	Comprehensive community support services, per 15 minutes (Example services: recovery monitoring, relapse prevention, care coordination)
H2017	Recovery Services	Psychosocial rehabilitation services, 15 Minutes (Example services: assessment, screening, individual and group counseling, family therapy)
T1013	Supplemental Services	Sign Language or Oral Interpretive Services, 15 Minutes

Visibility on Funding Source for PAuths

Visibility on authorization funding sources is needed for Primary Sage Users to avoid denials for incorrect funding source when entering claims. SAPC has updated the Provider Auths widget available on Finance views in Sage-PCNX to include the Funding Source on the PAuths. When billing in Sage-PCNX, the Funding Source selected on Fast Service Entry Submission must match the funding source on the authorization. Providers can now more easily verify the correct funding source, level of care and authorization number.

PROVIDER AUTH (PAUTHS)						
Search:						
Provider	Auth#	Auth Begin Date	Auth End Date	Funding Source	Level of Care	
Provider	Auth#	Auth Br	Auth E	Funding S	Level of Car	
Recovery, Inc.	P10097	2025-07-01	2026-06-30	Drug Medi-Cal	Recovery Services	
Recovery, Inc.	P10147	2025-07-01	2026-06-30	Drug Medi-Cal	Recovery Services Perinatal	
Recovery, Inc.	P10148	2025-07-01	2026-06-30	Drug Medi-Cal	CENS	
Recovery, Inc.	P10149	2025-07-01	2026-06-30	Non-Drug Medi-Cal	FBS-Transportation	

Discharge and Transfer Audit Report in TRAIN

The Discharge and Transfer Audit Report was developed to allow providers and SAPC quick visibility on Discharge and Transfers that have or have not been submitted. The report links the Provider Site Admission form to the Discharge and Transfer Form, both of which are required to be completed within Sage-PCNX by Primary and Secondary Sage Providers.

Providers and SAPC can use the Discharge and Transfer Audit Report to better track compliance and ensure the Discharge and Transfer form is submitted. The report provides specific data points that are needed to track and update Sage-PCNX correctly, such as Admission Date, Discharge Date, Last Approved Date of Service for Level of Care, next Admission Date for Provider and Discharge/Transfer information. If a client has multiple Provider Site Admissions within an agency with no respective discharge the "Next Admission Date at Provider" will be noted in red.

The report was added to TRAIN to allow provider **feedback by Friday October 16, 2026**. If you have comments or questions on this report please email Sage@ph.lacounty.gov.

Discharge and Transfer Audit Report											
Parameters Selected:											
Provider(s): Recovery Inc											
Date Range: 1/1/2025 to 9/13/2026											
Level of Care:											
Provider	Program	Client Name (PATID)	Level of Care	Admission Date	Discharge/ Transfer Date	Discharged or Transferred	D/T Reason	Transferred To	Transferred To Program	Next Admission Date at Provider	Last Approved Date Service for Level o
Recovery Inc	Recovery Facility	SAGEMD,YOLA NDA(289233)	ASAM, 5 - PARENTING -PPW	8/4/2026	No Discharge on File	No Discharge on File	N/A	N/A	N/A		
Recovery Inc	Recovery Facility	SAGEMD,ESTHER MIDDLE (289299)	ASAM 1.0	2/19/2026	06/17/2026	DISCHARGED	Goals/Plan Complete at Level of Care	N/A	N/A		
Recovery Inc	Recovery Facility	BELL,TINKER III (289219)	ASAM 1.0	4/11/2025	10/20/2025	TRANSFERRED	Goals/Plan Complete at LOC + Transferred	A higher level of SUD care	ALCOHOLISM CENTER FOR WOMEN, INC.		5/17/2025
Recovery Inc	Recovery Facility 2	DAVIDSON,HARLEY MARIE (289317)	ASAM 1.0	7/5/2025	No Discharge on File	No Discharge on File	N/A	N/A	N/A		
Recovery Inc	Recovery Facility	FLAMINGO,PINK (289627)	ASAM 1.0	2/15/2026	No Discharge on File	No Discharge on File	N/A	N/A	N/A		2/16/2026
Recovery Inc	ROOT 3939 Atlantic Ave, Ste 102	HIM,DUMMYON E (289618)	ASAM 2.1	2/9/2026	No Discharge on File	No Discharge on File	N/A	N/A	N/A		
Recovery Inc	Recovery Facility	SAGEMD,YOLA NDA(289233)	ASAM 2.1	4/21/2025	No Discharge on File	No Discharge on File	N/A	N/A	N/A	6/15/2026	

Progress Note JI Codes

The Progress Note procedure codes have been updated in TRAIN, and LIVE to reflect FY 26-27 Justice Involved Youth Fee For Service Matrix for Juvenile Justice Involved services. Codes are divided into treatment-based codes, indirect service codes, and supplemental service codes. These codes are designated *only* for JI Youth treatment service billing during incarceration.

The new codes are visible under the Procedure Code drop down menu. These codes are indicated by J followed by the procedure code, i.e., J90791 Assessment. To access the code, users may enter 'J' in the search bar. Codes are listed without parenthesis which differentiates them from the other procedure codes.

J

- J90791 Psychiatric Diagnostic Evaluation, 60 Minutes
- J90847 Family Psychotherapy (Conjoint psychotherapy with Patient Present),50 minutes
- J90849 Multiple-Family Group Psychotherapy, 84 Minutes
- J90885 Psychiatric Evaluation of Hospital Records, 60 mins
- J90889 Prep of report of patient's psych status, hx, txt, progress, 15 mins
- J96160 Administration of patient-focused health risk assessment

Supplemental codes are listed in the Supplemental Service Section of the progress note. This drop-down menu is enabled after users enter 'Yes' in the 'Was a supplemental service provided in addition to the primary service' field and enter the Duration of Supplemental Service time.

Supplemental Service (select all that apply) *

- ☐ (J90785) Interactive Complexity, per encounter
- ☐ (JT1013) Sign Lang./Oral Interpreter, 15 mins
- ☐ (J90887) Interpret Expln of Results, 60 mins
- ☐ Sign Lang./ Oral Interpreter (T1013)
- ☐ Interactive Complexity (90785)
- ☐ Interpret Expln of Results (90887)

Ensure all selected services are documented in the note.

For more information on codes rates, allowable license types, place of service, modifiers, and revision history, the FY 26-27 JI FFS [Rates Matrix v1.1](#) is available for review.

Service Authorization Request Form: Original Authorization and Split Authorization Numbers

Two new fields are now visible on the Doc Request Date section of the Service Authorization Request form, “Original Authorization Number” and “Split Authorization Number”. This addition was to give providers direct visibility on the form of the respective original/split authorization numbers. Split authorizations are generated when Utilization Management (UM) approves an authorization with the effective period crossing the fiscal year.

When viewing the Original Authorization, the “Split Authorization Number” field is populated. When viewing the Split Authorization, the “Original Authorization Number” field is populated. If the authorization does not cross a fiscal year, both fields will remain blank. For additional information please refer to the [Sage-PCNX Service Authorization Request Guide](#).

SAPC provider contracts will be updated for FY 26-27 and are currently not available in Sage. Given this lack of contract for FY27-28, all authorizations must end on 6/30/2027. Split authorizations will be created when the new contracts are effective and configured in Sage. Once that process is completed, new authorizations submitted that cross the fiscal year boundary will split and the authorization numbers will be visible.

The screenshot displays the 'SERVICE AUTHORIZATION REQUEST' form. On the left is a sidebar with navigation links: 'Member Service Authorization', 'Member Service Authorization 21-40', 'Care Manager', 'Diagnosis', 'Comments', 'Provider Search', 'Doc Request Date' (which is highlighted), and 'Online Documentation'. The main form area has a top bar with 'Submit', 'Notes', 'Discard', and 'Add to Favorites' buttons. Below this, the 'Doc Request Date' section is expanded, showing fields for 'Initial Engagement' (radio buttons for Yes/No, with 'No' selected), 'Clinical Contact Name' (text field with 'test'), 'Phone Number' (text field with '555-555-5555'), 'Additional Contact Information' (text field), and 'External Comments on Authorization' (text area). A red rectangular box highlights two new fields on the right side of the form: 'Original Authorization Number' (currently blank) and 'Split Authorization Number' (populated with the value '638443').

Accounting of Disclosures Log in LIVE

The Accounting of Disclosures Log is now available in LIVE and a Job Aid with instructions on how to complete the form can be found on SAPC’s [Sage-PCNX training page](#).

Sage-PCNX

[SAPC Home](#) / [Providers](#) / [Sage Home](#) / [Sage Trainings](#) / [Sage-PCNX](#)

ProviderConnect NX (PCNX) is SAPC's electronic health record. Below are PCNX documents to aid in the understanding of system forms, reports, and functioning. Sage-PCNX recorded trainings are available at SAPC's [Learning & Network Connection \(LNC\) Platform](#).

Sage-PCNX

Subject	Description	Date
Accounting of Disclosures Log Job Aid (New - October 2026)		 10/05/26

The Accounting of Disclosures Log provides a template for tracking PHI disclosures in accordance with applicable regulations including HIPAA and [42 CFR Part 2.25](#). Under the Final Rule, it is required to keep an account of disclosures and make them available to clients when requested. SAPC is developing a report for providers to run that will populate with the list of recorded disclosures.

Notice to Accompany Disclosure Document

Pursuant to [42 CFR 2.32](#), each disclosure, including all future redisclosures, made with the patient's written consent must be accompanied by the Notice to Accompany Disclosure statement and a copy of the consent or a clear explanation of the scope of the consent provided.

SAPC has created a standalone Notice to Accompany Disclosure document that is available on SAPC website under the Clinical tab on the [Manuals, Bulletins, and Forms page](#). Providers can include the document when responding to any Release of Information (ROI) request if the written consent does not already contain the required Part 2 statement, such as the Authorization to Share Confidential Member Information (ASCM) Form, to stay compliant with 42 CFR Part 2.

Uploading Release of Information (ROI) Paper Forms to Provider File Attach

All providers, Primary and Secondary Sage Users, are required to upload all paper SAPC Release of Information (ROI) forms to Sage via Provider File Attach by following instructions below:

- **File Type:** "Release of Information"
- **Documentation Type:** Specify the type of ROI.

ROI- Legal Proceedings
ROI- Payment and Operations
ROI- Revoke Legal Proceedings
ROI- Revoke Payment and Operations
ROI- Revoke Treatment and Care Coord
ROI- Treatment and Care Coordination

- **File Naming Convention:** [Type of Document]- [Date (MM-DD-YY)]-[Client's First & Last Initial]- [Client ID]

Each paper SAPC ROI must be uploaded as a single file containing every page of the form. ROIs with only the signature page uploaded, or with the signature page uploaded separately from the remaining pages, will be considered invalid. Include the revocation section but leave it blank when ROI authorizes disclosures.

ROIs uploaded to the correct client's record under an incorrect File Type or Documentation Type cannot be validated, and these entries cannot be edited or removed. Users are strongly encouraged to review the selections made on the Provider File Attach form are accurate prior to submission.

If an ROI is uploaded under an incorrect client profile, please submit a Helpdesk ticket requesting "Remove Attachment".

For additional information, please refer to [SAPC ROI FAQ](#) and [Sage Release of Information \(ROI\) Guide](#). For any further questions related to ROIs, please contact us at SAPC-HIM@ph.lacounty.gov.

SAPC's Release of Information (ROI) Forms Update

As of Wednesday, October 7th, updated paper versions of SAPC's ROI forms are available on the SAPC website under the Clinical tab on the [Manuals, Bulletins, and Forms page](#). These new updated forms will replace the previous May 2026 version of the SAPC ROI forms. The updated SAPC ROI forms in electronic version in Sage-PCNX LIVE and in threshold languages will be available in early November.

Update ROI Forms:

- **SAPC Payment and Operations ROI:** This form is required for all clients and is necessary for submitting claims to SAPC and third-party payors, including DHCS and managed care plans (MCP). MCP Data Requirements language is added to the definition section.
- **SAPC Treatment and Care Coordination ROI:** This updated form will now expire one year from the date the form is signed unless a different expiration date is specified by the client, or unless revoked.
- **SAPC Legal Proceeding ROI:** This updated form will now expire one year from the date the form is signed unless a different expiration date is specified by the client, or unless revoked. The "s" from "select the type of legal proceeding(s)..." is removed to clarify that only one proceeding type can be selected per Legal Proceeding ROI.
- All three ROI forms include guidance on minor consent in the instruction section.

If the client already has the May 2026 version ROI form signed, they do not need to sign the updated version of the ROI forms. If the client does not have the May 2026 version ROI form signed, they need to sign the updated version.

For questions related to the SAPC ROI forms, please contact SAPC-HIM@ph.lacounty.gov.

Secondary Provider ROI Form Recreation Review Process Update

SAPC is resuming the review of Secondary Provider ROI form recreation as the updated paper versions of SAPC's ROI forms have been released. SAPC has also updated the Secondary Provider Recreated SAPC ROI Form Review Checklist based on provider feedback.

Secondary Providers must receive written approval from SAPC's Health Information Management (HIM) Section before using their recreated SAPC ROI forms and recreated SAPC Supplemental Authorized Individuals/Entities for ROI form. To submit recreated forms for review, Secondary Providers must complete and submit the Secondary Provider Recreation of SAPC ROI Forms Submission Questionnaire, with the recreated SAPC ROI forms attached, to SAPC-HIM@ph.lacounty.gov. The questionnaire is also available on the SAPC website under the Clinical tab on the [Manuals, Bulletins, and Forms page](#).

Recreated SAPC ROI forms must be functionally and textually identical to the updated paper versions of SAPC's ROI forms. This includes, but is not limited to:

- Instruction pages and "How to Fill Out" pages
- All form language, notices, statements, section titles, field names, and checkbox wording
- Once a recreated ROI form is completed, electronically signed, and finalized in the provider's EHR system, the completed form content and electronic signature(s) cannot be altered, replaced, deleted, or otherwise modified.

Secondary Providers must submit three completed samples for each recreated SAPC ROI form submitted for review:

- Authorization Sample: A completed sample of the recreated SAPC ROI form demonstrating the standard authorization or consent workflow. The Revocation of Consent section must remain blank.
- Revocation Sample: A completed sample of the recreated SAPC ROI form demonstrating the revocation workflow. The sample must demonstrate that the complete Revocation of Consent section is added to the finalized consent without altering, replacing, deleting, or otherwise modifying any information, selections, dates, or signatures contained in the original consent portion.
- Signature by Mark Sample: A completed sample of the recreated SAPC ROI form demonstrating the signature-by-mark workflow. The sample must demonstrate that the client's mark and both required witness signatures are clearly displayed and associated with the appropriate signature fields.

Until SAPC-HIM issues written approval, Secondary Providers must use the official SAPC ROI paper forms available on [SAPC Website](#) or the electronic forms available in Sage-PCNX LIVE. Secondary Providers that were previously approved for their recreated ROI forms need to revise the ROI forms accordingly and submit for SAPC-HIM review before continuing to use the recreated ROI forms.

For questions related to the recreated ROI form review process, please contact SAPC-HIM@ph.lacounty.gov.

10/22 JI Youth Billing & Programmatic Office Hours

The next JI Youth Billing & Programmatic Office Hours is scheduled for Thursday, October 22nd from 10-11am. This is a forum for all Juvenile Justice SUD treatment providers to receive updates and ask billing and program-related questions. SAPC will be publishing an FAQ document soon which compiles questions and answers from prior JI Office Hours sessions.

Meeting Name: JI Youth Billing & Programmatic Office Hours

Upcoming Date: Thursday, October 22, 2026

Time: 10:00-11:00 AM

Meeting Link (via Microsoft Teams): [JI Youth Office Hours Link](#)

Highlights from Previous Communication

Progress Note Update – LPHACOD value in Check Mark Under Applicable Services: A new value, LPHACOD, is available on the Progress Note form under “Check all applicable services delivered as part of treatment” field. This value was added to aid residential primary providers participating in the Workforce Development (2-B) Value Based Initiative who use procedure code LPHACOD to bill when a client with a co-occurring mental health condition received a service by a qualified LPHA. Although LPHACOD is also available on the Procedure Codes (CPT/HCPCS) field, there are some instances where the service rendered by the LPHA is billable on top of the daily rate. In these cases, the Procedure Codes (CPT/HCPCS) should reflect the billable service and the LPHACOD can be checked off in the “Check all applicable services delivered as part of treatment” field.

Justice-Involved Youth Pre-Release Billing Updates: The JI FFS Rates Matrix for the Justice-Involved (JI) Youth Pre-release Program was updated as of 9/16/2026 on the [SAPC Bulletins website](#) and includes seven additional service codes (JH1000, JT1013, JT1017, J90885, J90887, J96160, and J99368) and rate updates for two service codes. Further details about the updates can be found on the Revision History tab of the JI FFS Rates Matrix. For Secondary Sage Users, a Z-code (such as Z03.89) can be entered as the diagnosis when submitting billing using the JI indirect services stand-in client. Please make sure all billing using the indirect services stand-in client indicates Male as the Gender and 01/01/2013 as the date of birth.
