



Communication Release

8/15/2022

FY22-23 Claim Blackout Lifted & New Fiscal Year Reminders

SAPC is excited to announce that the claiming and member authorization blackout for fiscal year 2022-2023 was lifted on Monday, August 15, 2022. Providers can now begin submitting authorizations and billing for FY 2022-2023 services as well as to continue to submit claims for the prior fiscal year. Important information regarding changes for the new fiscal year configuration are noted below. Please be sure to read the information carefully.

To accommodate for the Sage blackout, UM will implement a temporary grace period for late submission of service authorizations with start dates 7/1/2022-8/15/2022. Providers will have until 10/15/2022 to submit these authorizations and will not be subject to late authorization submission deadlines. However, authorizations with start dates 8/16/2022 and on will be subject to our 30-day submission policies. As a reminder, medical necessity documentation was to be completed timely, and will be subject to date modifications if outside of the expected timeframes.

Split Authorization Numbers

Please note that authorizations spanning the current fiscal year and the new fiscal year are referred to as "split authorizations." This means that the authorization for the patient will have two different authorizations and different authorization numbers for the different fiscal years. **Secondary Providers:** When preparing billing for the new fiscal year, please ensure your EHR is updated with the new authorization numbers for the 2022-23 fiscal year for these split authorizations. New auth numbers for split authorizations are already available for providers to access via ProviderConnect. If the prior fiscal year's authorization number is submitted for the patient for the new fiscal year, providers will receive local denials with the coverage denial reason, "Invalid authorization number," and denial code CO284 M62. The resolution for these denials is to update the authorization number for the current fiscal year and resubmit these claims.

New NDC CPT Codes for MAT Drugs & Expiration Dates

This series of MAT drug codes was added by DHCS. The series of new S5001 codes have been added to the approved authorization groupings and ASAM OTP for all age levels and disciplines. Please be sure to use the correct NDC code for the specific MAT drug being prescribed. The S5001 codes indicate drugs that are brand name drugs, while the S5000 codes indicate drugs that are generic drugs.

DHCS recently published an updated NDC List which was used to update the FY 22-23 rates matrix ([22-13 Fiscal Year 2022-2023 Rates and Payment Policy Updates](#)). Please be careful to note the expiration dates for certain MAT drugs/NDC Codes. These dates are important to note, for if providers are using these expired codes after the expiration date, the State will deny the claim.

New Peer Support Specialist Services

A new discipline for Peer Support Specialist and Behavioral Health Prevention Education Services has been added to Sage ("Support, Peer") for all levels of care, with the exception of RBH. There are also specific HCPC codes that can only be used by this workforce segment once they have been certified by CalMHSA. These codes include H0025 "Behavioral Health Prevention Education Services" and H0038 "Self Help/Peer Services," with more information on the published on the [Standard Rates Matrix Fiscal Year 2022-2023](#). Given that CalMHSA (the state contractor responsible for managing the Peer Certification process) has not yet begun issuing certifications for peers, these HCPC codes they should not be used at this time. However, these HCPC codes have been configured in Sage to enable for MCAL billing for services provided by Peer Support Specialists once this new workforce segment is available.

New Parenting (PG) Authorization Groups

Effective FY 22-23, SAPC has introduced a new authorization group for parenting patients and can be identified by the “(PG)” at the end of the authorization group name. These new authorization groups replace the prior year Parenting-PPW groups but only for FY 22-23 and forward. These new authorization groups do not apply to OTP, RSS, 3.7-WM, or 4.0-WM. For fiscal years prior to FY 22-23, the prior Parenting-PPW groups should be utilized when requesting an authorization for a prior fiscal year. As an example, for FY 21-22, one Parenting-PPW auth group was labeled as “ASAM 3.5 – 18-20/Parenting-PPW” and for FY 22-23 the correct authorization group to choose would be labeled as “ASAM 3.5 – 18-20/Parenting-PPW(PG).”

ASAM 0.5 Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)

In alignment with [BHIN 21-051](#), [BHIN 21-075](#), [BHIN 22-003](#), SAPC has added a new ASAM level of Care ASAM 0.5 that will be used to deliver EPSDT services to individuals 12-20 years of age. SAPC has sunset the use of ASAM 1.0-AR and will now be using ASAM 0.5 exclusively for the claiming of EPSDT services. As a reminder, a youth engagement screener needs to be completed prior to claiming.

Contingency Management Authorization Grouping

Sage was not configured for the Contingency Management (CM) pilot during the fiscal year cut-over. SAPC will be configured Sage for the Contingency Management pilot once SAPC receives additional guidance from DHCS. Providers should continue to use standard admission processes for patients that they believe may ultimately qualify for participation in the CM pilot.

New Authorization Group Name for ASAM 1.0 WM 12-17 MAT Service for Youth/Perinatal

Providers will notice the authorization group name “ASAM 1.0 WM 12-17 MAT Service for Yth/Peri”. This authorization group should be used when appropriate providers are providing outpatient withdrawal management Services to youth ages 12-17.

Sage Help Desk

Should you experience any difficulty submitting claims or have questions regarding billing, please contact the Sage Help Desk at (855) 346-2392. Your notification will help us better monitor Sage and provide timely resolution.

Telehealth Adjudication Report Paused

Effective Monday, August 15, 2022, SAPC will be pausing sending the Telehealth Adjudication Report to providers. An error was found in some of the data provided and is being investigated by SAPC. Once the report has been corrected, SAPC will resume sending the report on the 15th of each month and will provide an update via a Sage Provider Communication.

CalAIM Documentation Reform FAQ & Training

The Department of Health Services (DHCS) released Behavioral Information Notice (BHIN) 22-019 outlining new documentation requirements for CalAIM. SAPC has developed a frequently asked questions (FAQ) document to address how SAPC is operationalizing and integrating the new requirements. As questions and developments come up, the FAQ will be updated.

The FAQ can be found on the Sage website under Sage Trainings>Other Training Resources.

<http://publichealth.lacounty.gov/sapc/Sage/Training/CalAIMDocumentationReformFAQ072522.pdf>

SAPC is also hosting a series of trainings on CalAIM documentation. The next trainings are set for August 22nd and September 9th. Registration Links can be found on the training calendar.

http://publichealth.lacounty.gov/phcommon/public/cal/index.cfm?unit=sapc&prog=pho&ou=ph&cal_id=24

Job Aid for Defaulted Fields for Treatment Plan

On Monday July 18, 2022, Netsmart activated the “default” feature to the Treatment Plan form in Sage. Defaulting allows a new treatment plan form to pre-populate with a majority the information from the latest treatment plan entry. A job aid was developed detailing which fields will default and how fields should be filled in. The job aid is available on the Sage website under Sage Trainings>Other Training Resources.

<http://publichealth.lacounty.gov/sapc/Sage/Training/SageTreatmentPlanFormDefaultFunction%20.pdf>
