



## Communication Release

9/9/2022

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### State Denial CO 26 N650 MAT Drug Update

With the configuration of the 2022-2023 fiscal year, the new Rates and Standards Matrix was updated with the corrected codes from DHCS for MAT drugs that were discovered to have expired National Drug Codes (NDCs). These updated NDCs were added to Sage and were made available to providers on the new matrix. Providers who received State denials for CO 26 N650 where it was determined that an invalid or expired NDC was used can resubmit those services to SAPC using the updated NDCs for any prior codes used that were expired.

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### Room and Board Local Denial Resolution

Recently, SAPC became aware of Room and Board services that were being incorrectly denied for "Eligibility Not Found/Verified in CalPM". Upon investigation, it was determined that the Room and Board code configuration was leading to these services being denied for eligibility, however, these are non-DMC services, which are not subject to the same eligibility standards as DMC services. The setting was corrected in the configuration of the codes and providers should no longer see that denial reason for Room and Board services. If agencies have received that local adjudication denial, the services can be resubmitted.

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### State Denial CO 96 N362 Telehealth Group Service Update

SAPC is continuing to work with Netsmart on the resolution to the system error that is leading to some telehealth group services to be denied by DHCS for CO 96 N362. This issue is related to how Sage sends the unit information on the claim to DHCS. Unfortunately, the system update that was applied to Sage was unsuccessful in resolving the issue. SAPC is discussing options with Netsmart that will enable the system to hold the services from being sent to DHCS, until a fix is found. This would allow providers to continue to bill SAPC for these services without the claims being sent to the State and subsequently denied. This temporary solution is currently being tested and upon validation of the process, providers will be notified that it has been put in place. In the meantime, *SAPC recommends that providers hold submission of telehealth group services until further notice.*

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### Billing on Pending or Denied Authorizations

SAPC's Utilization Management unit is working through a backlog of authorizations to process as a result of the authorization freeze that occurred during the fiscal year configuration period. SAPC has noticed that some Secondary Sage Users are inputting the authorization number on claims and not verifying if the authorization has been approved before submitting the 837. If the authorization has been denied, the claim will deny, and providers must resubmit. However, if the authorization remains in the pending status, the claims will also be pended. Pended claims due to the authorization being in pending status creates various workflow issues that will cause significant delays in processing the claims and authorizations. Additionally, those claims will need to be denied manually before the authorization can be approved.

Please verify authorization status prior to submitting claims via the 837 file to avoid delays in processing the authorization and payments. The Authorization Request Status report in Sage can quickly and easily display authorization status for a given date range. Both Primary and Secondary Sage Users can access that report in Sage depending on the user role. When compiling claims for

submission, we ask that the provider remove any claims where the authorization is pending or denied from the 837 file to be billed at a later time once the authorization has been approved.

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## **Parenting-PPW (PG) Authorization Group**

Effective 7/1/2022, the Authorization Group for all Parenting-PPW levels of care within each age category has been updated to include a PG modifier on the approved CPT codes within the authorization. This PG modifier allows PPW providers to receive the enhanced rate for services provided to parenting patients in treatment. The previous authorization groups will remain in the system for any services provided prior to 7/1/2022 and for retroactive authorization requests. However, if providers select the Authorization Group that does not have “(PG)” in the label for start dates within FY 22-23, those authorizations will be denied, and the provider must submit the correct authorization.

Within the Authorization Group drop-down menu on the Authorization Request form, providers will need to scroll to the bottom of the list to find the PG authorizations. The list in Sage is sorted by date the group was created in Sage and not alphabetical order. There is a numerical value associated to the new authorization groupings that providers can use to easily select the PG groups as well. Clicking in the drop-down and entering the number next to the group below will select the associated group. The new Parenting-PPW (PG) groups are listed as follows at the bottom of the drop-down list:

- 472 - ASAM .5 - 12-17/Parenting-PPW(PG)
- 473 - ASAM .5 - 18-20/Parenting-PPW(PG)
- 474 - ASAM 1.0 -12-17/Parenting-PPW(PG)
- 475 - ASAM 1.0 - 18-20/Parenting-PPW(PG)
- 476 - ASAM 1.0 – 21 and Over/Parenting-PPW(PG)
- 480 - ASAM 3.1 -12-17/Parenting-PPW(PG)
- 481 - ASAM 3.1 -18-20/Parenting-PPW(PG)
- 482 - ASAM 3.1 -21 and Over/Parenting-PPW(PG)
- 485 - ASAM 3.5 -12-17/Parenting-PPW(PG)
- 486 - ASAM 3.5 -18-20/Parenting-PPW(PG)
- 487 - ASAM 3.5 -21 and Over/Parenting-PPW(PG)

Please verify the correct Authorization Group was selected prior to submitting the authorization to avoid delays in processing.

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