Provider Advisory Committee Meeting

October 13, 2026

2PM – 4PM

SAPC | Substance Abuse Prevention and Control

County of Los Angeles Public Health

Please type your name, pronouns, and organization in the chat for attendance purposes.

Agenda

2:00 – 2:05	Welcome
2:05 – 2:10	• Approval of Meeting Minutes – August 11, 2026 • Approval of 2027 PAC Schedule
2:10 – 2:20	Workgroup Updates • Building Communities of Belonging • SUD Workforce Development • Medi-Cal Eligibility
2:20 – 3:50	Discussion Items
3:50 – 3:55	Public Comments
3:55 - 4:00	Meeting Wrap Up

WELCOME

Dr. Brian Hurley, Interim Bureau Director and Medical Director, SAPC

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Approval of Meeting Minutes

Janet Kim, SAPC

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APPROVAL OF 2027 MEETING SCHEDULE

Bernie Lau, SAPC

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2027 PAC Meeting Schedule Vote



Date	Time
February 9, 2027	2 PM – 4 PM
April 13, 2027	2 PM – 4 PM
June 8, 2027	2 PM – 4 PM
August 10, 2027	2 PM – 4 PM
October 19, 2027*	2 PM – 4 PM
December 14, 2027	2 PM – 4 PM

**All meeting dates correspond to the second Tuesday of the month, with the exception of October 19*

Workgroup Updates

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Building Communities of Belonging Workgroup

Hiroko Makiyama, KYCC
Antonne Moore, SAPC

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Building Communities of Belonging Workgroup

- "Laying the Foundation: SAPC Expectations for Culturally Responsive SUD Services" Training
- Women-Centered Care Subworkgroup Update



Next Women-Centered Care Subworkgroup Meeting: Thursday, October 22 | 11 AM – 12 PM
Next BCB Workgroup Meeting: Tuesday, November 10, 2026 | 3 PM – 4 PM

E-mail SAPC-SOC@ph.lacounty.gov to join workgroup

Our Goals & Intent

What WCCW is working to accomplish

1

Understand the Barriers

Understanding the barriers to women's access, engagement, and completion of SUD treatment.

2

Define What Works

Develop measurable and actionable criteria that define Women-Centered SUD Care.

3

Expand the Network

Expanding Women-Centered Care services across the SAPC provider network.

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Women-Centered Care Workgroup (WCCW)

PAC Summary: Purpose, priorities and progress



WHY WCCW EXISTS

- Providers requested a focused workgroup to address barriers women face in accessing, engaging in, and completing SUD treatment.

Treatment completion: 40.5% pregnant and parenting women

- Below the countywide rate of 43.1%

WORKGROUP PRIORITIES

Identify barriers to women's access, engagement, and completion.
Expand women-centered practices across the network.

PROGRESS TO DATE

- Identified entry barriers: custody fears, childcare needs, housing instability, trust/access gaps, immigration concerns, accommodations, and language needs.
- Mapped provider capacity by populations, levels of care, and languages to begin a women-centered directory.
- Conducted scenario walkthroughs to identify network gaps.
- Highlighted engagement practices through provider presentations.

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Women-Centered Care Workgroup (WCCW)

PAC Summary: Key learning and upcoming work



KEY LEARNING

- SUD treatment is historically built on a male-default model. Women-centered care requires intentional practice.
- Women-centered care can occur in both women-only and mixed-gender programs.
- No certification currently designates women-centered programs. The group is exploring whether a standard would add value.
- SBAT shows eligibility, not whether programs are intentionally women-centered
- · We are still exploring why women leave treatment.

UPCOMING WORK

- October 22: How women identify women-centered programs before choosing them. Draft checklist review.
- November 19 (proposed, one week earlier due to the holiday): Women veterans and gaps in SUD access outside the VA.
- **December: TBD**

SUD Workforce Development Workgroup

José Salazar, Tarzana Treatment Centers
Seth Blackburn, Roots Through Recovery

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SUD Workforce Development Workgroup

- Workgroup Update
- Integrating Community Health Workers (CHWs) into SUD Services



Next Meeting: Tuesday, October 20, 2026 | 9 AM – 10 AM

E-mail SAPC-SOC@ph.lacounty.gov to join workgroup

MEDI-CAL ELIGIBILITY WORKGROUP

Vanessa Lâm, SAPC
Dan George, HealthRIGHT 360

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Medi-Cal Eligibility Workgroup

Purpose: To protect access to health care throughout Los Angeles County in the face of H.R. 1

Scope: Support SAPC providers with enrollment, reassignments, and renewals for Medi-Cal eligible Angelenos to maintain access to SUD treatment

Membership:

- SAPC provider network (PAC and beyond)
- Limit 1-2 per agency
- Members expected to be active in discussions with direct knowledge around existing Medi-Cal challenges

Have a nomination?
Interested in joining?
Have resources to share?

Email VLam@PH.LACounty.gov

Discussion Items

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PAC Meeting Participation

Nely Meza-Andrade, Casa Treatment Center for Women

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SND and Sage Management Updates

Antonne Moore, SAPC
Dr. David Hindman, SAPC

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Presentation Topics

1. Required provider engagement with Managed Care Plans (MCP)
2. Sage Anticipated MCP Workflow
3. Updates to ROI Forms
4. Individual Service Level (ISL) Reporting

SAPC/MCP MOU Status and Updates

Kaiser

MOU signed and executed as of **September 2, 2026.**

Health Net/Molina

MOU signed and executed as of **September 8, 2026.**

Initial Training (2 hours): MOU requirement that training occur within 60 business days of MOU execution.

Follow-up Training: Additional training will be scheduled in early 2027.

SAPC Information Notice: SAPC will be releasing a SAPC IN that outlines provider responsibilities related to MCP care coordination and client data sharing.

SAPC MCP website: For information about LA County MCPs, see: http://ph.lacounty.gov/sapc/public/managed-care-plan-portal.htm

BHIN-23-057 states DMC-ODS counties shall provide training **before** any person or entity performs any MOU obligations and at least annually thereafter.

MCP Training Development Timeline



Nov 17 or 18

Training Delivery and Recording

Conduct 1st Webex session and record for SAPC-LNC publishing.

Nov 19 - Dec 8

Presentation Updates

Update 1st training based on lessons learned. Update other trainings (Care Coordination, Clinical Doc, Plan of Care).

Nov 30

Preparation for Next Training

Schedule 2nd Webex training sessions and post advertising flyers

Jan 2027

Deliver Second Training

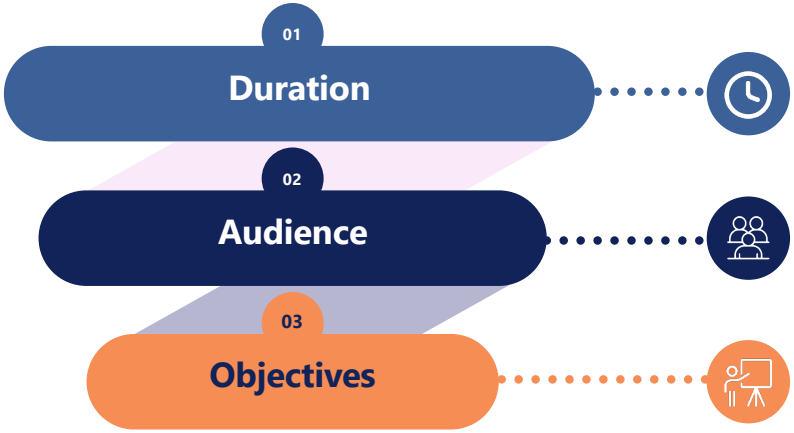
Dates for January training are TBD.

Early 2027

MCP Form Implementation

Implement the Sage MCP form (covered in the trainings) in early 2027

Training Overview

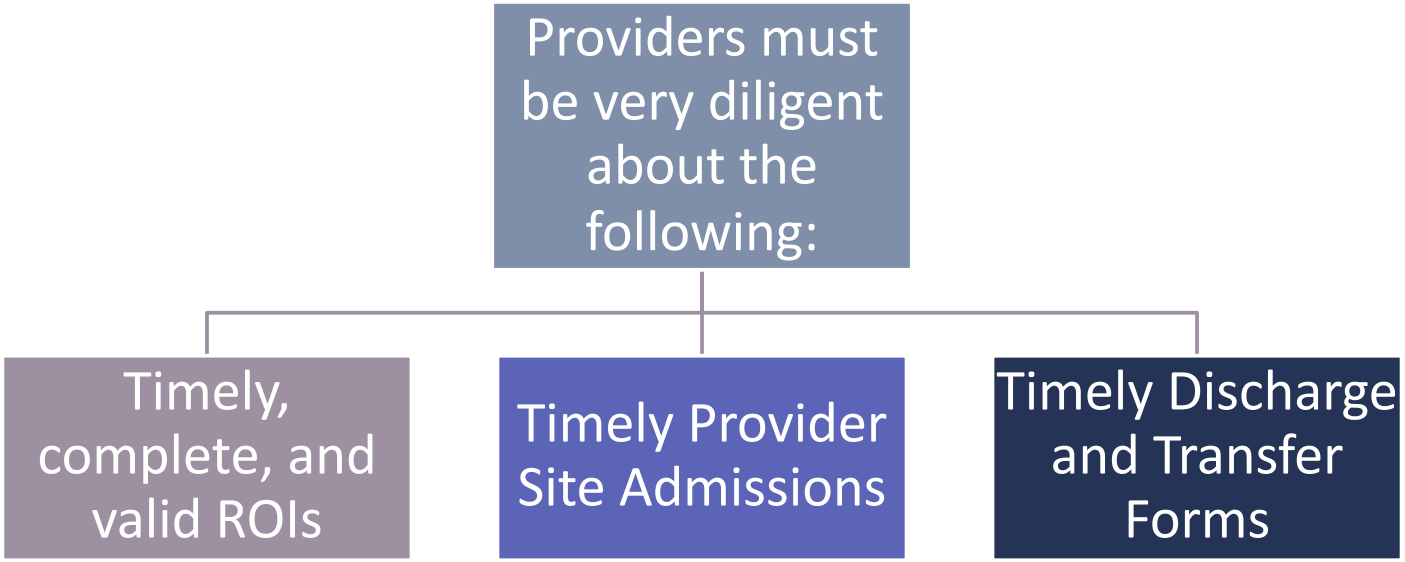


Estimated 2 hours with Q&A

Required staff: Direct service, intake, front office for eligibility, and operations

1. Understand Provider requirements related to MCP engagement.
2. Identify when clients may need MCP support and how to refer to MCPs.
3. Hear from MCP representatives on their Covered Services
4. Review the updated SAPC Tools in Sage-PCNX to engage MCPs.

Preparing for MCP-SAPC Requirement Changes



By providers ensuring these items are completed, accurately and timely, it will allow SAPC to automate the Admission/Discharge/Transfer (ADT) requirements that would otherwise fall on each provider to manage.

Anticipated Workflow and Sage Development

SAPC is working to minimize the impact of these new MCP requirements on providers.

New Sage MCP form being developed will be a requirement for all clients associated to an MCP (appx. 97% of Medi-Cal clients).

Care Coordination with MCPs for Complex Care Management, Enhanced Care Management, Community Supports, and other Supportive Services.

Discharge Summaries will need to be sent to MCPs upon discharge from levels of care 3.7 and 4.0. (Details to be discussed in the training).

Admissions, Discharges and Transfers (ADT) reporting will be required for all LOCs, to be automated by SAPC, based on updates to the Discharge and Transfer form.

Provider MCP Workflows in Sage PCNX

Intake/Referrals

- Provider Site Admission
- SAPC ROI for Payment and Operations
- SAPC Treatment and Care Coordination ROI
- **MCP Form**
- **Referrals to ECM**
- **Referrals to CS**
- **County and Aid Code Report**

Service / Treatment Documentation

- **MCP Form – add collateral contacts or additional referrals**
- **Referrals to Covered Services (e.g., transportation)**
- **Referral to Complex Case Management**

Discharge / Transfer

- Discharge and Transfer form (new fields for MCP coordination)
- **MCP Printout for Care Coordination**

Updates to the SAPC ROI Forms

Updated SAPC ROI Forms

- SAPC updated the SAPC Release of Information (ROI) forms to reflect feedback from the Network, including
  - Guidance on minor consent
  - Clear date of expiration updated
  - Space to list additional authorized individuals and entities
- These updated forms are available in English now on the website. Non-English copies
- Providers will be required to use the new forms once electronic copies are available (Anticipated by Early November 2)
- Clients with an active ROI on file do not need to sign an updated ROI form.

The English version of the updated SAPC ROI forms are available on the SAPC webpage, Manuals, Bulletins, and Forms.

The update SAPC ROI forms will be available in all threshold languages by the end of October 2026.

Overview SAPC ROI Form Updates

Payment and Operations ROI

- Added guidance on minor consent

Treatment and Care Coordination ROI

- Added guidance on minor consent
- Updated expiration of the ROI form to be 1 year after the date the form was signed
- Embedded link to the Supplemental Authorized Individuals and Entities for ROI form

Legal Proceeding ROI

- Added guidance on minor consent
- Updated expiration of the ROI form to be 1 year after the date the form was signed
- Embedded link to the Supplemental Authorized Individuals and Entities for ROI form
- Revised language to clearly indicate that a Legal Proceeding ROI is required for each type of legal proceeding

Supplemental Authorized Individuals and Entities for SUD Information ROI Form

The **Supplemental Authorized Individuals and Entities for ROI form** is to be used when the client would like to authorize more than 3 individuals or entities on the Treatment and Care Coordination ROI form or the Legal Proceeding ROI form when using the paper version of the form.

The English version of the form is available on the SAPC webpage, Manuals, Bulletins, and Forms.

The form will be available in all threshold languages by the end of October 2026.

Secondary Provider ROI Form Recreation Review Process Update

- SAPC is resuming the review of Secondary Provider ROI form recreation.
- 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 and the review criteria checklist are available on the SAPC website under the Clinical tab on the Manuals, Bulletins, and Forms page.
- The review checklist was updated based on providers' feedback.

Notice to Accompany Disclosures

SAPC has created a **Notice to Accompany Disclosures** document that providers can include when responding to any ROI request if the written consent does not already contain the required Part 2 statement, such as the Authorization to Share Confidential Member Information (ASCMI) Form, to stay compliant with 42 CFR Part 2.

The English version of the document is available on the SAPC webpage, Manuals, Bulletins, and Forms.

The document will be available in all threshold languages by the end of October 2026.

DHCS Authorization to Share Confidential Member Information (ASCMI)

AB133 Version

- Assembly Bill regarding data exchange
- CFR and HIPAA Compliant to release information between counties and DHCS, CA county to CA county and within various internal county departments, such as between SAPC and Housing or SAPC and DMH.
- AB133 version can only be used for Medi-Cal beneficiaries, not for all clients.
- Limited options for opting in or out of what can be disclosed. (Only includes MH and SUD options for disclosure)

NonAB133 Version

- Same CFR and HIPAA Compliance for the various entities.
- Used for non Medi-Cal beneficiaries, but can also be used for Medi-Cal beneficiaries should counties chose to do so.
- SAPC has elected to utilize the NonAb133 version for all clients.
- Allows for additional opting in and out of what information can be disclosed (MH, SUD, Genetic, ID/DD, HIV and Housing)

Generalizability of the ASCMI

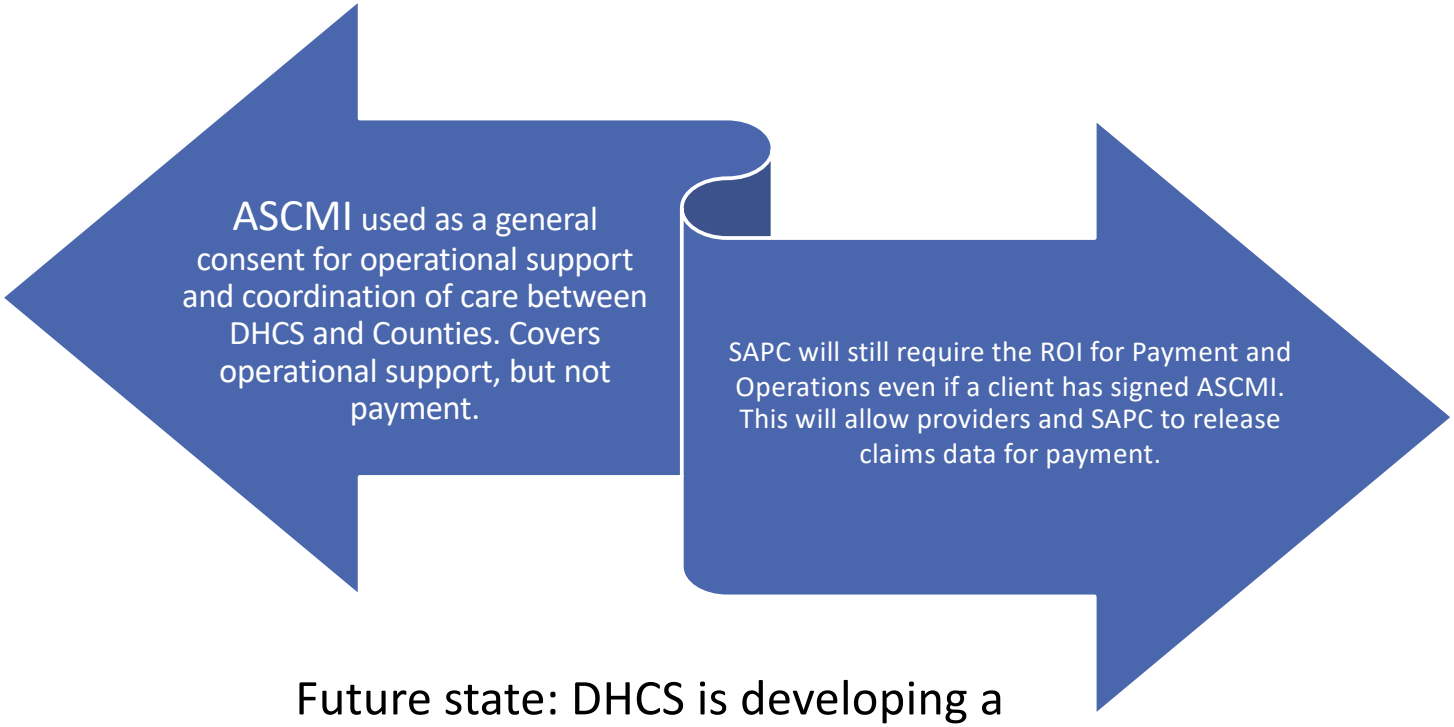
1.2 Who Can Share and Receive Your Information

Care Partners may share your information. Care Partners are providers and organizations you have seen before, are seeing now, or may see in the future. These Care Partners may include:

- Health care providers, including primary care providers and mental health providers.
- Substance use disorder providers, such as opioid treatment programs and residential treatment programs.
- Community-based organizations and homeless service providers.
- Health insurance plans, including Medi-Cal managed care plans and behavioral health plans.
- County health and human services agencies.
- Qualified health information organizations.
- State health and human services agencies.

Excerpt form DHCS ASCMI Form

ASCMI and SAPC ROI Considerations



Future state: DHCS is developing a Consent Management Platform (CMP) that will interact with Sage in real time to verify current consents.

ASCMI Links and Resources

- https://www.dhcs.ca.gov/calaim-transforming-medi-cal/authorization-to-share-confidential-member-information/
- ASCMI Form: AB 133
  - English
  - Language translations
- ASCMI Form: Non-AB 133
  - English
  - Language translations
- ASCMI Revocation Form
  - English
  - Language translations

Introduction to Individual Service Level Reporting

New DHCS Reporting Requirement

County Behavioral Health Plans (BHPs) are required to report Individual Service Level (ISL) codes to support standardized reporting of behavioral health services by **1/1/2027**.

What is ISL reporting?

ISL reporting is individual-level behavioral health services and expenditures not submitted to Medi-Cal for reimbursement.

Who does this apply to?

Primary and Secondary providers are required to document and submit ISL codes.

Key Dates

ISL reporting effective 1/1/2027

SAPC is required to submit an Annual report due September 2027 for ISL services rendered from 1/1/2027 – 6/30/2027

Individual Service Level Reporting

Upcoming PCNX Enhancements

SAPC is working with the ProviderConnect NX (PCNX) vendor to develop an electronic form in PCNX to allow providers to document ISL codes when submitting claims.

SAPC targets to have the form(s) available in PCNX and for provider implementation by December 2027.

Stay Tuned

SAPC will share more information on ISL reporting requirements and provider training opportunities through the Sage Communication when DHCS makes more details available.

Resources

More information can be found on the following DHCS resources:

- DHCS Individual Service Level Encounter Reporting
- DHCS Individual Service Level Encounter FAQ

Thank you!

FINANCE & CONTRACTS UPDATE

Daniel Deniz, SAPC

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Agenda

- DMC Claims Deadline
- DMC & Special Programs Budget
- Upcoming Contract Actions for FY27-28

DMC SUD Treatment Claims Submission Deadline

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DMC Claims Submission & Void Report

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CLAIM SUBMISSION TIMELINES

- DHCS revised claiming deadlines to align with Specialty Mental Health Systems.
- Behavioral Health Information Notice No: 24-010 - Drug Medi-Cal Claiming Timelines for Short Doyle Medi-Cal (SD/MC)
- Poses financial liability to the County and SUD Network.
- Effective January 1, 2027, provider agencies are required to adhere to the following submission deadlines:

Claim Type	Deadline
Initial (Original)	Nine (9) months/270 days from date of service
Replacement	Twelve (12) months/365 days from date of service

Additional Guidance:

- DMC-ODS Billing Manual FY 2026-27
- LA County Department of Public Health - Substance Abuse Prevention and Control - Sage

DMC & Special Programs Budget

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DMC & Special Programs Budget

County of Los Angeles Public Health

Special Programs Budget

- Part of SAPC's Commitment to invest and strengthen community partners
- Goal: Build capacity, strengthen organization and improve outcomes
- Special Programs Include
  - Value Based Incentives
  - ASAM IV Pilot Project
  - Bilingual Bonus
  - Bridge
  - Field Based Services Enhanced Benefit
  - R95 – Reaching the 95%
  - Ryse-Up
- NOTE: All these payments are paid via your DMC contract and allocation

EXAMPLE										
Contract Amt.	VBI	RYSE-UP	BRIDGE	Bilingual Bonus	ASAMIV	FBS Enhanced	R95	Total Special Programs	# Spec Prog	Remaining Amount
$2,500,000	$150,000	$75,000	$100,000	$2,500	$200,000	$4,000	$40,000	$571,500	23%	$1,928,500

DMC & Special Programs Budget

Special Programs Budget – Provider Actions

- Confirm eligibility and planned participation in Special Programs
- Conduct study to determined estimated participation reimbursement amount
- Establish cost centers for each activity
- Monitor SAPC Payments via Payment Codes to confirm reimbursement

Project Description	Project Code
ASAM 4.0 Residential Capacity Building	ASAM4LPHA
Bilingual Bonus Incentive	BBS
Child Friendly	CHLDFRNDLY
CM - Contingency Management	CM
Field-Based Services Enhanced Benefit	FBS
R95-Enhancement Activity	R95-EA
Ryse Initiative	RYSE
VBI-Finance and Business Operations	VBIFinance
VBI-Workforce Development	VBIWrkfrce
VBI-Access to Care	VBIAcsCare

- Monitor overall contract utilization and, if needed, submit augmentation request for consideration.

Upcoming Contract Actions

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Upcoming Contract Actions

County of Los Angeles Public Health

The Action

- Renew DMC Contracts
- Resolicit Programs
- Leverage SUSSMA

Program to Relaunch July 1, 2027	
Program	**Contract Action**
Drug Medi-Cal	Renewal
Client Engagement & Navigation Services	Work Order Solicitation
Recovery Bridge Housing/ Recovery Housing	
Value Based Incentives/ Special Programs	

Action To Take Now

- Verify organizational documents (licenses, certifications, accreditations, etc.)
- Confirm active SUSSMA & categories
- Establish Development Team to respond to needed actions

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Upcoming Contract Actions

County of Los Angeles Public Health

Substance Use Supportive Services Master Agreement (SUSSMA)

Effective July 1, 2027, the following programs will be contracted via the SUSSMA	
Program	**SUSSMA Category**
Client Engagement & Navigation Services	Category 6: Outreach and Engagement Services
Recovery Bridge Housing/Recovery Housing	Category 4: Housing and Support Services
Value Based Incentive/Special Programs	Category 1: Capacity Building, Training and Technical Support Services

- **8 Service Categories**
  - **Category 1:** Capacity Building, Training and Technical Support Services
  - **Category 2:** Evaluation Services
  - **Category 3:** Harm Reduction Services
  - **Category 4:** Housing and Support Services
  - **Category 5:** Integrated Care and Network Adequacy Services
  - **Category 6:** Outreach and Engagement Services
  - **Category 7:** Prevention Program Services
  - **Category 8:** SUD Workforce Education and Training Services

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Upcoming Contract Actions

County of Los Angeles Public Health

Substance Use Supportive Services Master Agreement (SUSSMA)

- **Department of Public Health – Contracts & Grants**
  - Department of Public Health Open Solicitations
  - Substance Use Supportive Services #2025 - 002

Solicitation Number	Title	Type	Department	Date
+ 2017-008	Request for Statement of Qualifications (RFSQ) 2017-008 for Media Services	Service	Department of Public Health	Continuous
+ 2018-013	Request for Statement of Qualifications (RFSQ) for Evaluation Services	Service	Department of Public Health	Continuous
+ 2025-001	Request for Statement of Qualifications (RFSQ) for As-Needed Substance Use [illegible]	Service	Department of Public Health	Continuous
+ 2025-002	Request for Statement of Qualifications (RFSQ) for Substance Use Supportive Services	Service	Department of Public Health	Continuous
+ 2019-004	Request for Statement of Qualifications (RFSQ) for Community Engagement and Related Services	Service	Department of Public Health	Continuous
+ 2024-012	Request for Statement of Qualifications (RFSQ) for As-Needed Language Assistance Services	Service	Department of Public Health	Continuous

– 2025-002	Request for Statement of Qualifications (RFSQ) for Substance Use Supportive Services	Service	Department of Public Health	Continuous

Solicitation Number
2025-002

Solicitation Title
Request for Statement of Qualifications (RFSQ) for Substance Use Supportive Services

Solicitation Type
Service

Open Date
3/21/2025

Contact Name
Stephanie Ruiz-Perez

Department
Department of Public Health

Closing Date
Continuous

Contact Phone
(000) 000-0000

Commodity
ALCOHOL AND DRUG PREVENTION SVCS

Solicitation Amount
Not Available

Contact Email
dph-solicitiations@ph.lacounty.gov

Last Changed On
9/8/2025

Solicitation Description
County of Los Angeles, Department of Public Health is issuing an RFSQ to solicit SOQ's for master agreements with qualified providers for the provision ...

Show more +

ATTACHMENTS 5

RFSQ #2025-002	[pdf]
Addendum 1	[pdf]
Addendum 2	[pdf]
Addendum 2 - Revised required forms	[pdf]
Addendum 2 - Revised Appendix B Exhibit 5	[pdf]

Close

Thank You

For questions, please contact:

SAPCFinance@ph.lacounty.gov
DPH-SAPC-VBI@ph.lacounty.gov

Provider Manual 11.0 Feedback Survey Results

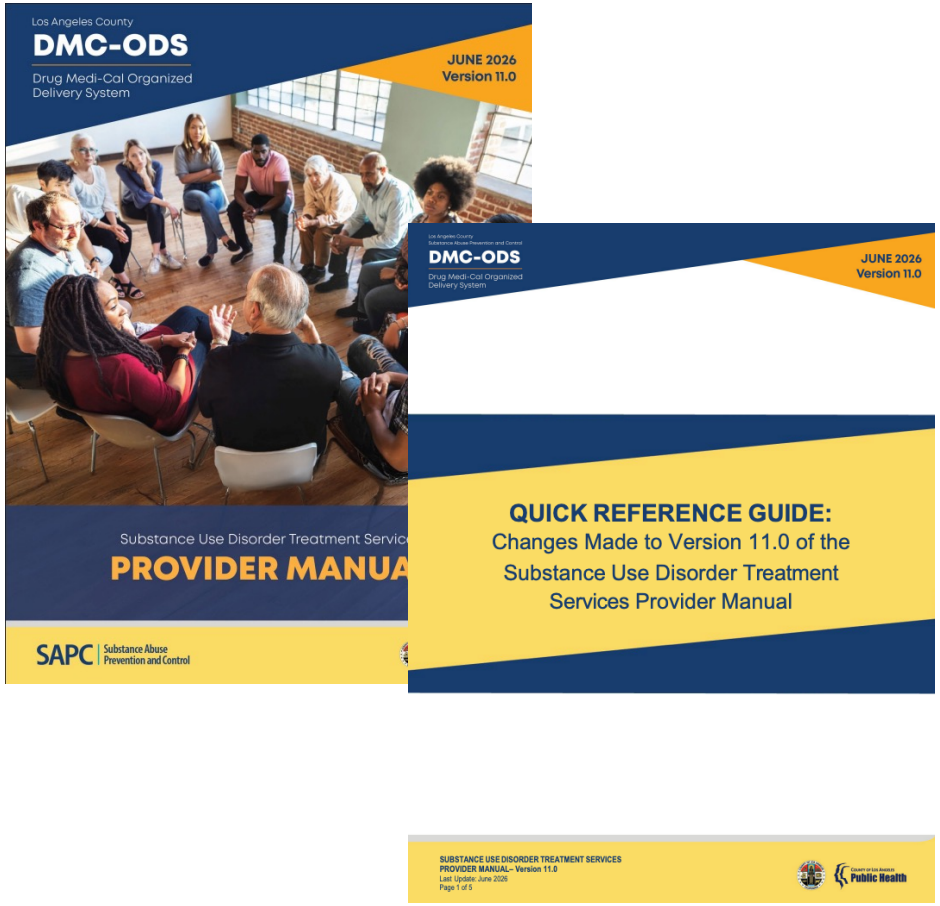
Ilish Pérez, SAPC

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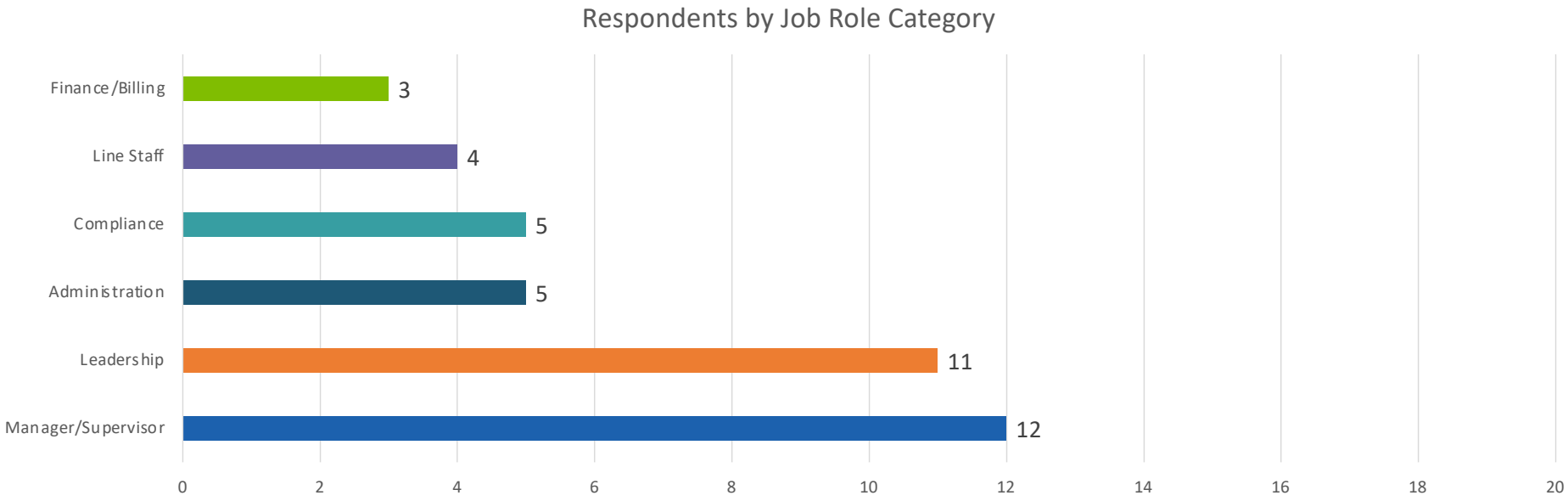
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Provider Manual 11.0

- **Released: June 18, 2026**
  - SAPC IN 26-10
- **Provider Meeting: August 6, 2026**
  - Registered: 355
  - Attendees: 328
- **MS Forms Evaluation Survey:** 42 responses (13%)



42 Responses



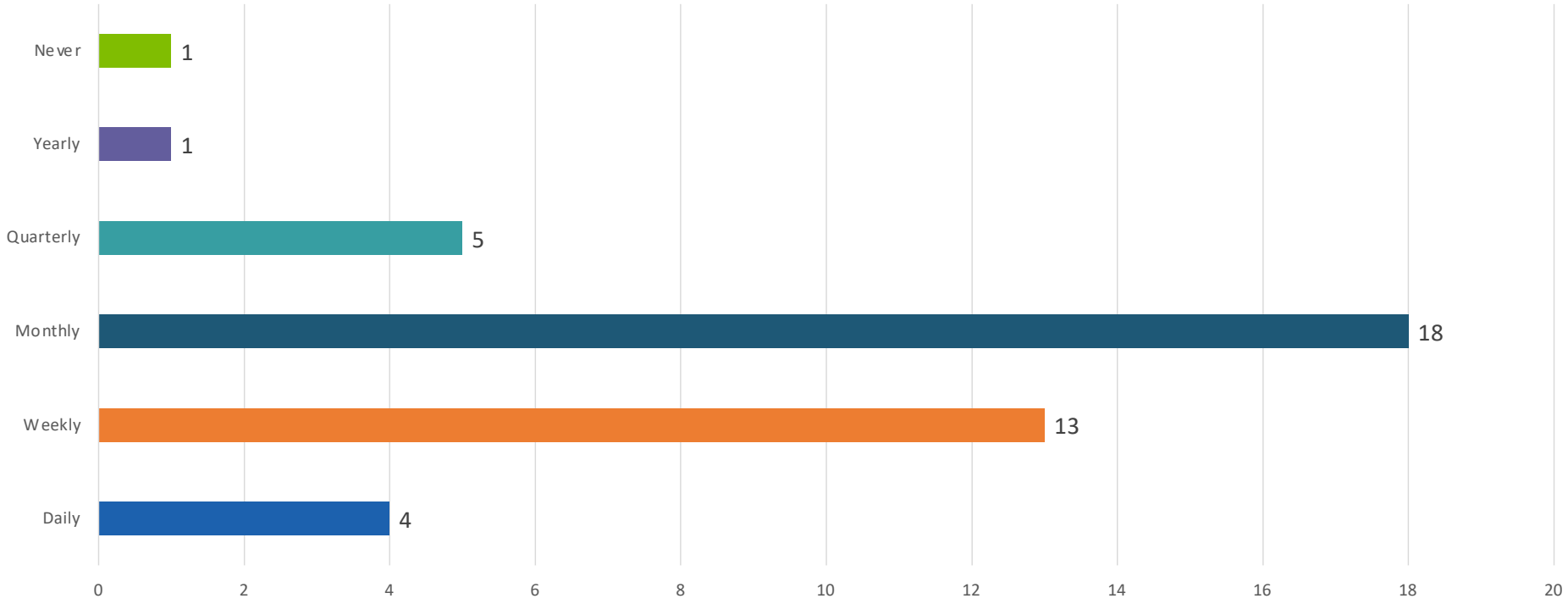
12
1–5 years of experience

10
6–10 years of experience

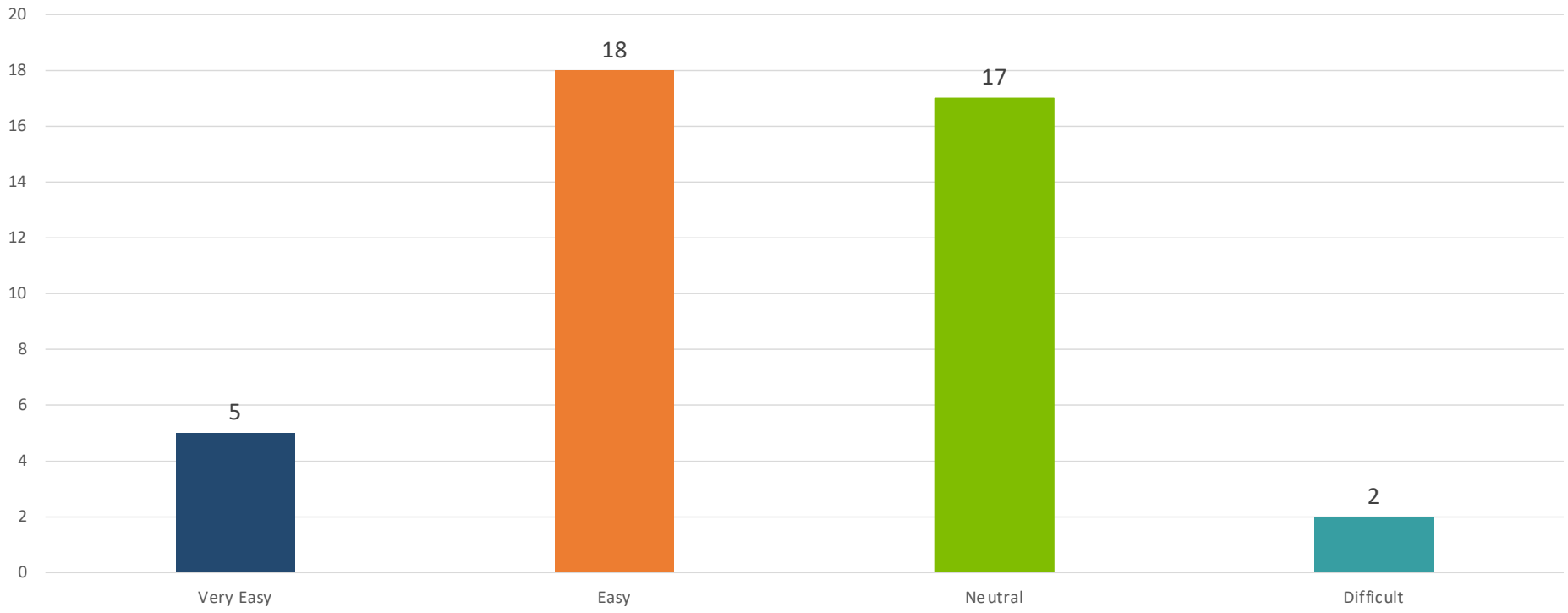
11
11–20 years of experience

9
20+ years of experience

How often providers use the PM



How easy is the PM to apply?



When providers use the PM

25 Clarification & Verification

8 Billing & Financial Guidance

11 Documentation & Compliance

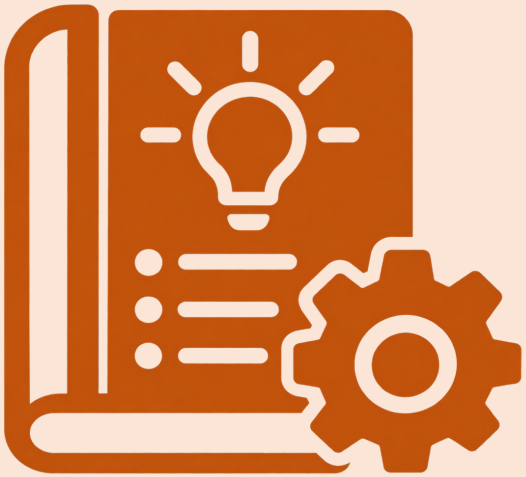
10 Training & program operations

Where providers want more clarity

- **Billing scenarios:** Medicare/Medi-Cal, OHC, denials, Co-op billing, and overlapping services
- **Documentation:** note types, treatment plans, 3.2-WM documentation, corrections/appendices, and common errors
- **Program/service requirements:** Recovery Services, FBS, medication services, OTP impacts, Client Record Access
- **Operational requirements:** training requirements, required policies, live scans, county transfers, and audit preparation

"We just need simple direct instructions."

What providers want added



More practical guidance

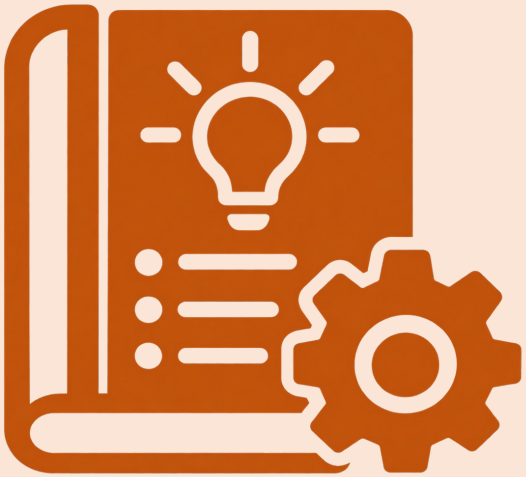


More topic-specific detail



More usable resources

What providers want added



More practical guidance

- How to prepare for SAPC or DHCS audits/reviews
- What should be included in progress notes and treatment plans
- Common documentation errors and how to correct them
- When services or notes can overlap
- How to address documentation when the original clinician is no longer with the agency
- Clearer guidance for staff who are new to the PM or management

More topic-specific detail

More usable resources

What providers want added

More practical guidance



More topic-specific detail

- Billing and denial resolutions
- Medication services (specifically additional definitions of codes related to MAT, Education Services, Oral/Observed Medication)
- Recovery Services enrollment and documentation
- Field-Based Services
- Community Health Worker opportunities
- OTP-specific impacts of changes
- Co-occuring service guidance
- More information on KPI
- Client Record Access
- ASAM 4

More usable resources

What providers want added

More practical guidance

More topic-specific detail



More usable resources

- How to prepare for SAPC or DHCS audits/reviews
- What should be included in progress notes and treatment plans
- Common documentation errors and how to correct them
- When services or notes can overlap
- How to address documentation when the original clinician is no longer with the agency
- Clearer guidance for staff who are new to the PM or management

Clear guidance on the *what*, with flexibility for providers to determine the *how* within requirements.

Thank You!

SAPC Division Contact Information

Clinical Services: SAPC.QI.UM@ph.lacounty.gov

Contracts: SAPCMonitoring@ph.lacounty.gov

Finance: SAPC-Finance@ph.lacounty.gov

Sage Management: sage@ph.lacounty.gov

Health Outcomes and Data Analytics: sapchoda@ph.lacounty.gov

IT: SAPC_app_support@ph.lacounty.gov

Strategic and Network Development: MemberServices@ph.lacounty.gov

Systems of Care: SAPC-SOC@ph.lacounty.gov

New England Journal of Medicine Catalyst Article

"Redesigning value-based payment models to support substance use treatment systems"

Dr. Brian Hurley, SAPC

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County of Los Angeles Public Health

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SAPC Payment Reform Article

County of Los Angeles Public Health

Article: Redesigning Value-Based Payment Models to Support Substance Use Treatment Systems

- Published in the *New England Journal of Medicine (NEJM): Catalyst Innovations in Care Delivery*, a prestigious, peer-reviewed, globally recognized journal.
- Showcasing SAPC's innovative approach to payment reform.

Innovative Payment Reform

- First and only SUD or SMH system to leverage new Medi-Cal payment reform opportunities by designing a VBI package to motivate advancements in care delivery.
- Invested over $90 million in our provider agency network since July 2024 through strategic financing and resource planning.
- Recognized nationally with two awards for this payment reform approach: National Association of Counties (NACo) Achievement Award and National Association of County and City Health Officials (NACCHO) Promising Practice Award

PUBLIC COMMENTS

Dr. Brian Hurley, Interim Bureau Director and Medical Director, SAPC

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ADJOURNMENT

Next PAC Meeting:
December 8, 2026, 2 PM – 4 PM

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