



Billing Office Hours

Substance Abuse Prevention and Control
County of Los Angeles Department of Public Health





Announcements

- Billing Office Hours Every Thursday from 1-2pm, July 25,2024 through October 24,2024.
 - Link can be found on [SAPC's Training Calendar](#)
 - We encourage all staff who engage with billing to attend, please share the link with others in your agency as appropriate
- Providers are encouraged to review [Sage Communications Page](#) for the most recent updates regarding system changes and known issues.



Billing Office Hours Overview

Billing Office Hours focus on questions regarding claiming and billing of CPT/HCPCS, how to claim in PCNX, and general denial questions. Each office hours will contain two parts:

1. At the beginning of each office hours, starting next week, we will share common billing denials and how to generally resolve them; in addition, share answers to common questions being received.
2. The remaining time is open to provider questions.

An FAQ will be produced and maintained that compiles the questions asked during the office hours and SAPC responses. It will be published on the Sage website and the link will be provided in a Sage Provider Communication.



Billing Office Hours Overview (cont.)

These office hours cannot cover questions to **specific** claims and/or denials (cannot share PHI), issues with claiming CPT/HCPCS in the system (system bugs), or issues with PCNX functionality. For questions or issues regarding the above, please submit a Sage Help Desk Ticket.



Open Discussion Expectations

- Please submit questions to sapc-finance@ph.lacounty.gov prior to the meeting – indicate it's for discussion in the next billing office hours
- Submit questions in the chat during the meeting and we will address them as time permits
- Keep your microphone on mute unless speaking
- Use the raise hand feature to request to speak
- Do not share PHI in the chat or on your screen



Agenda

- Review FAQs and responses from previous office hours
- FY 24-25 HA Modifier Announcement
- H2010M/N/S Clarifications
- FY 24-25 Billing Highlights & Denial Troubleshooting
- 277CA Reminders
- Open Discussion



FY 24-25 HA Modifier Announcement

- Effective for services on or after 7/1/2024, DHCS has removed the HA modifier as an allowable code for 24-hour/day services. It is still applicable for services prior to 7/1/2024.
- The codes with HA modifiers for 24-hour services have been inactivated in Sage for FY 24-25. Services for youth in 24-hour/day LOCs should be billed without the HA modifier and under the standard coding.
 - Example:
 - FY 23-24 - H0019:U1:HA
 - FY 24-25 - H0019:U1



H2010M/N/S Clarifications

- Submit \$0 claims w/applicable units for H2010M/N for incentive tracking.
- Patients may receive Naloxone (H2010N) or MAT Education (H2010M) while in Recovery Services without having to enroll in a separate level of care.
- Patients may receive Naloxone (H2010N) or MAT Education (H2010M) from a Peer Support Specialist.
- **Outpatient/IOP/OTP LOCs**
 - For payment for the service, submit the units provided for H2010 services under T1007; roll-up services billed under this code as applicable.
- **Residential and Withdraw Management LOCs**
 - Continue to submit \$0 claims for H2010S for Medication Handling/Safeguarding, if a rate is added for this FY, the services can be replaced and will be paid.



FY 24-25 Billing Highlights

- As of 8/7/2024, for FY 24-25, providers have:
 - Submitted over 99,000 services for \$10.8M
 - Overall network approval rate of 96.7%
- Top 3 Local Denial Reasons
 - Performing provider is blank (Secondary Sage Users)
 - Eligibility not found/verified in CalPM (Primary and Secondary Sage Users)
 - Funding source not eligible on date of service for member (Primary and Secondary Sage Users)



Denial Troubleshooting

Performing provider is blank (Secondary Sage Users)

- 1) Cause: The 837 did not include the rendering provider information or the incorrect NPI was used.
 - a) Resolution:
 - a) Correct the information in your EHR and resubmit the claim.
 - b) If the NPI is accurate for the practitioner, request the Sage Help Desk validates the practitioner's NPI in Sage.
- 2) Cause: The rendering provider submitted on the 837 is not registered in Sage.
 - a) Resolution: Request your Sage liaison submits a user creation request via the Sage Help Desk portal. See the [7/19/2024 Sage Provider Communication](#) on the updated procedure.



Denial Troubleshooting

Eligibility not found/verified in CalPM

- Verify that Patient's Financial Eligibility form is complete, saved and submitted.
- For DMC Guarantor, ensure that form includes:
 - Subscriber Client Index #
 - Subscriber Date of Birth
 - Subscriber address Line 1, State, City, Zip Code
 - Eligibility Verified, coordination of benefits, Subscriber Assignment of Benefits all must be set to "Yes"
 - Valid and Approved Authorization
 - Coverage Effective date must be on or before episode admission
 - Verify the client was Medi-Cal eligible for service date billed using the Real-Time 270 Request (This will update the internal MEDS file if outdated)
 - The Provider Diagnosis (ICD-10) must have a valid, DMC approved SUD diagnosis and an admission diagnosis
 - Date of admission diagnosis must be the episode admission or prior to the service claimed date if readmission
- Diagnosis ranking and billing order must match.



Denial Troubleshooting

Funding source not eligible on date of service for member.

1) Potential causes:

- a) The date of service is outside of the start and end dates of the authorization billed against.
- b) The date of service is prior to the episode start date for the provider.

2) Resolutions:

- a) Validate the start and end dates of the authorization. If the incorrect, authorization was selected, resubmit the service under the appropriate authorization. If a new authorization is needed, submit a new Service Authorization request.
- b) Validate the correct date of service was billed. If incorrect, resubmit the service with the accurate date of service.
- c) Validate if the episode start date is accurate. If incorrect, submit a Sage Help Desk ticket to request the date is corrected. Once corrected, resubmit the service.



277CA Reminders

- SAPC Finance has seen some tickets come in from providers regarding services flagged on a 277CA. (Secondary Sage Users only)
- The 277CA does not provide denial or approval information but instead provides claim acceptance or rejection.
- A service on the 277CA that shows as rejected was not adjudicated in Sage and will not be found on billing reports or in KPI as the system could not process the service due to invalid/missing/incorrect formatting or information.
- The rejected services should be corrected and then resubmitted to SAPC on a new 837 file.





UNIT/BRANCH Contact	E-mail	Description of when to contact
Sage Helpdesk	Phone Number: (855) 346-2392 ServiceNow Portal: https://netsmart.servicenow.com/plexussupport	All Sage related questions, including billing, modifications, system errors, and technical issues.
Sage Management Branch (SMB)	sage@ph.lacounty.gov	Sage process, workflow, and general questions.
QI and UM	sapc.qi.um@ph.lacounty.gov	All authorization related questions, questions to the Medical Director, medical necessity
Systems of Care	sapc_asoc@ph.lacounty.gov	Questions about policy, the provider manual (youth, PPW, criminal justice, homelessness)
Health Outcomes and Data Analytics (HODA)	hoda_caloms@ph.lacounty.gov	All questions regarding Sage CalOMS including forms, submission, and requests for trainings.
Contracts	sapcmonitoring@ph.lacounty.gov	Questions about general contract, appeals, adverse events. Agency specific contract or agency CPA if known.
Strategic and Network Development	sudtransformation@ph.lacounty.gov	DHCS policy, DMC-ODS general questions
Clinical Standards and Training (CST)	dsapc.cst@ph.lacounty.gov	Clinical training question, documentation.
Finance	sapc-finance@ph.lacounty.gov	Question related to billing, denials, and tiers.