Utilization Management-Provider Meeting

Los Angeles County Department of Public Health
August 17, 2022
Substance Abuse Prevention & Control

Agenda

- **End of Year Configuration (Auth Blackout) is LIFTED**
- **CalAIM Documentation Redesign (Problem List)**
- **Financial Eligibility Challenges**
  - **Inter County Transfer of Medi-Cal Benefits (ICT)**
  - **Medi-Cal Verification Systems**
- **Open Discussion**

End of Year Configuration (Blackout) is LIFTED

![Sage - Substance Use Disorder Information System]

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 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.

CalAIM Documentation Redesign

Problem List

- The problem list is a list of symptoms, conditions, diagnoses, and/or risk factors identified through assessment, psychiatric diagnostic evaluation, crisis encounters, or other types of service encounters.

Problem List

» Will include, but is not limited to:

» Diagnoses identified by a provider acting within their scope of practice, if any.

» Problems identified by a provider acting within their scope of practice, if any.

» Problems identified by other providers acting within their respective scopes of practice, if any.

» Problems identified by the beneficiary and/or significant support person, if any.

» The name and title of the provider that added or removed the problem, and the date the problem was added or removed.

» The problem list will be updated on an ongoing basis.

SAPC Standard Problem List

- Provider Documentation Requirement Task Force
- http://publichealth.lacounty.gov/sapc/NetworkProviders/ClinicalForms/TS/ProblemListMain.pdf
- http://publichealth.lacounty.gov/sapc/NetworkProviders/ClinicalForms/TS/ProblemListAddendum.pdf
- Note: All new admissions as of 7/1/2022 require a Problem List. Existing patients with active Treatment Plans finalized prior to 7/1/2022 can continue to use Treatment Plan until next Treatment Plan is due (30 days for residential re- authorizations and 90 days for outpatient re-authorizations). Existing patients with an expired Treatment Plan will require a Problem List effective 7/1/2022.

COUNTY OF LOS ANGELES
Public Health

SUBSTANCE ABUSE PREVENTION AND CONTROL
PROBLEM LIST

PATIENT INFORMATION		
1. Name (Last, First, and Middle):	2. Date of Birth (mm/dd/yyyy):	3. Medi-Cal or MHLA Number:
4. Address:		
5. Sage Client Number:	6. Gender:	7. Preferred Language:	8. Race/Ethnicity:

9. Phone Number:	Okay to Leave a Message? ☐ Yes ☐ No

10. DSM-5 Diagnosis(es)
    Primary Diagnosis:
    Secondary Diagnosis:
    Tertiary Diagnosis:

11. Was a Physical Exam Completed?
    ☐ Yes, provide the date the physical exam was completed:
    ☐ No, provide the date of scheduled physical exam appointment:

12. Initial Problem List Date:	13. Updated Problem List Date:

PROVIDER AGENCY		
14. Name:	15. Address:	16. Email:
17. Contact Person:	18. Phone Number:	19. Fax Number:

ASAM Dimensions: 1. Acute intoxication and/or Withdrawal Potential; 2.Biomedical Conditions and Complications; 3.Emotional, Behavioral or Cognitive Conditions/Complications; 4. Readiness to change; 5. Relapse Continued Use, or Continued Problem Potential; 6. Recovery Environment

PROBLEM # 1		
20. Problem:		
21. Added By:	22. Practitioner's Title:	23. Date Added:
24. Dimension(s):		
25. Removed By:	26. Practitioner's Title:	27. Date Removed:

Problem List Formats:

Treatment Plan Problem(s)

S

Problem Statement:

Alcohol use
Problem Added By: Esther Orellana, Ph.D.
Practitioner Title: Licensed Psychologist
Date Added: 7/2/2022

SAPC Problem List Paper Version (for Secondary Sage users and for Primary users during downtime)
http://publichealth.lacounty.gov/sapc/NetworkProviders/ClinicalForms/TS/ProblemListMain.pdf

Problem List

- Problem List Requirements
1. Problem (minimum one SUD related): may be listed as a diagnosis, illness, social determinant of health, z-code, and/or description of an issue
2. Problem Added By- and credential
3. Practitioner Title
4. Date Added: date the problem was added to the Problem List
5. Date Removed: date the problem was identified for removal
6. Removed By - and credential and title

6. Problem List must be Finalized/Signed by LPHA and dated within the last 30 days of start date for residential reauthorizations or last 90 days for non-residential reauthorizations – in adherence with Provider Manual 6.0 standards.

7. **This excludes OTPs who will continue to utilize Treatment Plans QI/UM Review Process.**

Flexibility Period for Problem List Timeliness

- Any authorizations submitted by the provider between <u>8/15/2022 to 10/15/2022</u>

- Timeliness of completing Problem List will be waived during this grace period

- If a Problem List requirement is missing that is tied to SUD problem, contact provider and document in external comments. Will provide 7 calendar days for provider to submit additional information via Updated Problem List.

Correcting Problem Lists Documented on Incorrect Form

- If Problem List was submitted on incorrect form SAPC UM will contact provider to resubmit on corrected / appropriate form. Examples:
  - Primary user used Problem List Paper version outside of Sage downtime
  - SAPC Treatment Plan Paper version
  - Unapproved Problem List form
- SAPC Providers have 7 calendar days for provider to resubmit Problem List on the appropriate form

Correcting Problem List Errors

- If Problem List is in draft, will provide 7 calendar days for provider to finalize

- If Problem List is finalized late, will accept without applying date modification

- If updates were not received after 7 calendar days:
    Denial-medical necessity criteria not met (if not finalized, missing SUD problem)
    Denial- insufficient documentation (if missing other required element tied to SUD problem)

Q&A On Documentation Required for Authorization

— Is the miscellaneous note for level or care justification still required?

    Yes

— Is client's signature required for Problem List?

    No

— Does one of the problems have to be related to SUD?

    Yes, not less than one problem must be related to an SUD

— After the Problem List period ends on 10/15/2022, what if the problem list was not finalized within 7 days?

    UM will issue denial or partial approval if finalized late

Q&A On Documentation Required for Authorization

— Where do I ask questions about a Problem List error on an authorization request I submitted?

Contact the care manager assigned to the authorization

— I'm a secondary provider. How do I get my Problem List Format approved by SAPC?

Email your Problem List form to SAPC.QI.UM@ph.lacounty.gov

Q&A On Problem List Timeframes

— How long can treatment plans completed prior to 7/1/2022 be used for re-authorization requests submitted after 7/1/2022?

Treatment plans remain effective for 90 days for non-residential LOCs and 30 days for residential LOCs

— Do providers need a Problem List for initial request for authorization or just for re-authorization?

Effective 7/1/2022, a Problem List is required documentation for initial authorization and for re-authorizations.

Essential Contact Info

- For a specific authorization question, contact the care manager named in SAGE
- UM General number: **(626) 299-3531** and email: SAPC.QI.UM@ph.lacounty.gov
- Netsmart Helpdesk for SAGE technical problems/questions: **(855) 346-2392**
- Phone Number to <u>file</u> an appeal: **(626) 299-4532**
- Providers or patients who have questions or concerns <u>after</u> receiving a Grievance and Appeals (G&A) Resolution Letter should contact the **G&A number** at **(626) 293-2846**

<u>Clarification</u>
- Phone Number to <u>follow-up</u> with an appeal after receiving a resolution letter: **(626) 293-2846**

SAPC UM-Provider Meeting 8/17/2022

Financial Eligibility Challenges
- **Inter County Transfer of Medi-Cal Benefits (ICT)**
- **Medi-Cal Verification Systems**

- Create a BenefitCAL account

- Link out of County case to the account, and

- Report the change, and

- Click on the information link and update the address

Verification for UM: Change Summary Report for Intercounty Transfer
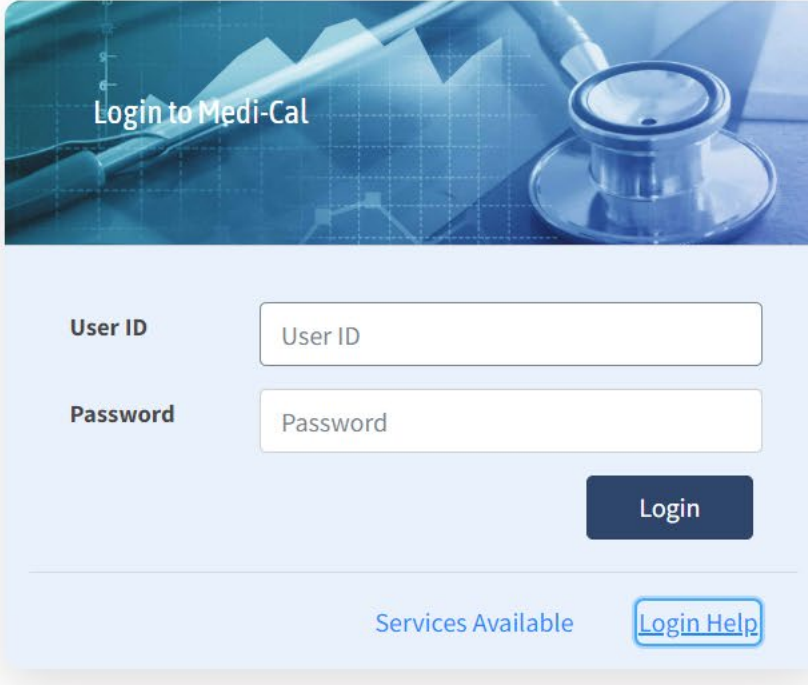
Medi-Cal Verification Systems

VERIFICATION ACTIONS YOU CAN COMPLETE ONLINE	HOW TO ACCESS MCAL VERFICATION SYSTEMS
• **Eligibility** • **Batch Eligibility** • **Automated Provider Services** • **Medi-service reservations (limited MCAL services)** • **Medicare Drug Pricing** • **PDF RAD/Medi-Cal Financial Summary** • **Share of Cost**	Must have a Medi-Cal provider number and PIN, and have either an electronic or paper Medi-Cal Point of Service (POS) Network/Internet Agreement form on file: **Required forms to gain access to activate automated systems** Electronic POS/Internet form- Electronic Docusign Version Paper POS/Internet form- Printable version **For information about Provider Enrollment:** Visit the Provider Enrollment page. • Please call the Telephone Service Center (TSC) at 1-800-541-5555 for more information **Automated Eligibility Verification System (AEVS)**: 1-800-456-AEVS(2387) • DO NOT need enrollment; DO need a PIN to access.

How can I receive or reset my PIN #?

• Providers received their initial Provider Identification Number (PIN) as part of their program enrollment.
• Methods for PIN Confirmation or Replacement: Medi-Cal fee-for-service providers with seven-character Provider Identification Numbers (PINs) may request a Telephone Service Center (TSC) agent at 1-800-541-5555 to confirm or reset their PIN.

- **Online Medi-Cal Provider Manual**

  – https://files.medi-cal.ca.gov/pubsdoco/manual/man_query.aspx?wSearch=*_*z00*+OR+*_*z01*&wFLogo=Part1+%23+Medi-Cal+Program+and+Eligibility&wPath=N

- **AEVS transaction log- Useful to keep a record of eligibility inquires (can be uploaded to Sage)**

  – https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part1/aevtrn1form.pdf –

- **Where to find answers**

  – https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part1/0Cgetstart.pdf

- **Eligibility Benefits Instructions:**

  – https://filesaccepttest.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part1/eligrec.pdf

- **Printable versions of the POS and Eligibility Enrollment forms**

  – Form: Medi-Cal Point of Service (POS) Network/Internet Agreement (point frm1 net) (Revision Date Oct 16, 2020) | (167KB)

  – Form: Medi-Cal Eligibility Verification Enrollment Form (point frms) (Revision Date Oct 16, 2020) | (120KB)

ASAM | American Society of Addiction Medicine

Guidelines   The ASAM Criteria   Policy Statements   Donate   **JOIN TODAY**   **LOGIN**

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http://www.asam.org/asam-criteria/criteria-intake-assessment-form

ASAM CRITERIA

Free Paper-Based ASAM Criteria Assessment Interview Guide

Developed by ASAM and the UCLA Integrated Substance Abuse Programs with funding from the California Department of Health Care Services, this addiction treatment resource supports increased quality and consistency of patient assessments and individualized, patient-centered care.

DOWNLOAD →   READ ANNOUNCEMENT →

The ASAM Criteria® Assessment Interview Guide is the first publicly available standardized version of the *ASAM Criteria* assessment. With this release, ASAM and UCLA hope to increase the quality and consistency of patient assessments and treatment recommendations. This resource can also help assist states looking to facilitate continuity and consistency in substance use disorder (SUD) treatment delivery and coverage.

Because it is paper-based, offered **free to all clinicians**, and can be used in many different clinical contexts, the Guide enhances the public utility of *The ASAM Criteria's* multidimensional assessment approach for the addiction treatment community.

26

Q&A / Discussion

The secret of change is to focus all of your energy, not on fighting the old, but on building the new.

Socrates