sage

Substance Use Disorder Information System

Communication Release

09/26/2025

Services Denied in MSO Updated Report

The Services Denied in MSO report has been updated to add two (2) additional service data points: Batch ID and EOB ID. These two columns will help contracted provider agencies identify the specific batch and EOB that included the denied services. Additionally, the report was updated for improved formatting when exporting to Excel by removing extra columns that would previously appear and make it difficult to sort and filter service information. The image below shows the updated report output with the Batch ID and EOB ID fields after the Service Date column.

Agency	Member ID	Service Date	Batch ID	EOB ID	Reason for Denial	Service	Amount
Recovery, Inc.	289266	9/3/2024	333865	162335	The service was denied for the following reason: Performing Provider does not have any License Types that match the CPT Code's allowed License Types.	Psychiatric diagnostic evaluation with medical services, 60 mins (90792:U7)	$ 410.99
Recovery, Inc.	289266	10/3/2024	333865	162335	The service was denied for the following reason: Performing Provider does not have any License Types that match the CPT Code's allowed License Types.	Psychiatric diagnostic evaluation with medical services, 60 mins (90792:U7)	$ 410.99

Sage Help Desk Feedback Survey

It is time for the Bi-Annual Sage Help Desk Feedback Survey. Users who submitted a Sage Help Desk ticket within the last six month will receive an email with the subject line: "**Sage Help Desk Needs Your Feedback**" from Client Experience at clientexperience@ntst.com. The survey will be open from 9/29/2025 to 10/27/2025. This important survey helps SAPC and the Sage Help Desk determine if providers are receiving the support they need from the Help Desk and identify any areas for improvement.

The survey responses and feedback are an important part of our ongoing process improvement efforts to serve you better. We encourage all Sage users that receive the survey to please complete it within the designated two-week period. As a reminder, please check spam and junk folders if you do not receive an email and have submitted a Help Desk ticket in the last six months.

Provider Manual 10.0 Meeting: Wednesday, September 30th

SAPC will host its first annual Provider Manual meeting virtually to share important updates from the newly released Provider Manual 10.0 (August 2025). This meeting will highlight key changes and provide an opportunity for you to ask questions.

Date: Tuesday, September 30, 2025
Time: 10:00 – 11:30 AM
Audience: SUD Treatment Staff

Click Here to Register!

For questions, please contact SAPC's Systems of Care Division at SAPC_ASOC@ph.lacounty.gov.

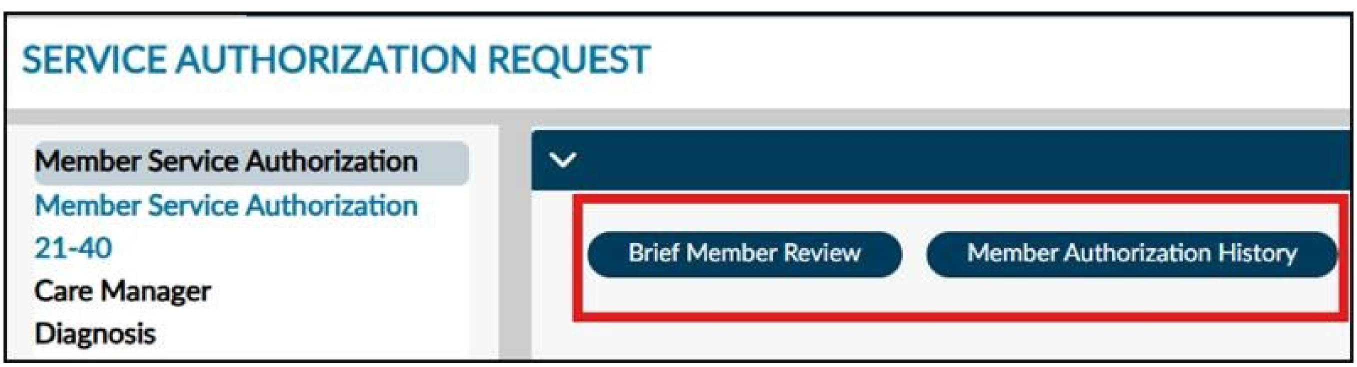
New Required Demographic Fields

Effective Monday 9/29/2025, the field in which a patient's language is entered on both the Admission (Outpatient) and Update Client Data forms in Sage-PCNX will be renamed to "Primary or Preferred Language." This is being done for consistency across the two forms. As a reminder, per SAPC Information Notice 24-02, providers are required to ensure that culturally and linguistically appropriate services are offered and delivered.

In addition, effective Monday 9/29/2025, the following fields will be required on both the Admission (Outpatient) and Update Client Data forms in Sage-PCNX: Date of Birth, Primary or Preferred Language, Ethnic Origin, Client Race, Gender Identity, and Sexual Orientation. These fields are crucial for various reporting metrics for both SAPC and providers. For each new episode admission, and when providers access the Update Client Data form, if blank or needs updating, they will be required to enter information for those fields.

Service Authorization Request

Effective Monday, 9/29/2025, the Brief Member Review and Member Authorization History buttons will be removed from the Service Authorization Request form. The Brief Member Review information may be found on the All Doc/Chart widget, under the Patient Information section and on the Diagnosis form. The information found on the Member Authorization History is available on the Client Dashboard and Authorization Request Status Report.



10/2 SAPC Finance Billing & Denial Resolution Tutoring Lab

The October Billing & Denial Resolution Tutoring Lab is scheduled for *Thursday, October 2nd, from 1:00-2:30pm* and will continue to meet on the first Thursday of every month. These sessions will include announcements and reminders related to billing, demonstration of billing processes, review of policies, troubleshooting, and open Q&A. SAPC Finance encourages all agency billing staff to attend as well as any additional agency staff interested in hearing billing and denial resolution information. If providers have requests for procedures or policies to review during the lab, please email SAPC-Finance@ph.lacounty.gov. The link to the meeting is below and will also be added to the SAPC Training Calendar. Please be sure to add it to your calendars!

Meeting Name: Billing & Denial Resolution Tutoring Lab
Date and Time: First Thursday of every month from 1:00-2:30 pm
Meeting Link and Call-in Information (via Microsoft Teams):
Billing & Denial Resolution Tutoring Lab Meeting Link
Meeting ID: 278 929 667 194
Passcode: shijHi

Dial in by phone
+1 323-776-6996,743250887# United States, Los Angeles
Phone conference ID: 743 250 887#

******The recorded presentation, slides, and FAQ for the prior Finance Billing & Denial Tutoring Lab are available at Sage Finance under Billing and Denial Resolution Tutoring Lab.***

Highlights from Previous Communications

Real Time (270) Inquiry Request Form Update: SAPC would like to clarify how to properly run and read the results of the 270/271. The Real Time Inquiry (270) Request form provides valuable eligibility information for patients with Drug Medi-Cal coverage. Providers should run the 270 Request at admission and then monthly to verify the patient's most up-to-date eligibility information, including Aid Code, County of Responsibility Code, Other HealthCare Coverage, and Share of Cost information. Providers must enter the patient's name and the Drug Medi-Cal guarantor for the 270 to work properly.

Additionally, the language for the "From Date" and "Through Date" has been updated to clarify what the dates mean and their intended use. The "From Date (First day of eligibility month)" is the first day of the month that eligibility information is being requested. The "Through Date (Last day of eligibility month)" is the last day of the same month for the eligibility information. When completing these fields, please keep the following in mind:

- The date range must be within the same month. If multiple months are run the system will display only the current month's eligibility, regardless of the date range entered.
- Only eligibility information from one (1) year prior to the current date is available on the 270 from DHCS. If entering dates beyond one (1) year prior, the eligibility will always show as ineligible because the request is invalid.
- Both date fields must be completed for the results to populate accurately. If the "Through Date" is blank, the results will only be for the current month and not for the month being requested, if different. The results from DHCS appear to default to the current date when there is a missing date field or multiple months date range; as such, SAPC has made the "Through Date" a required field.

For example:

- If the "From Date" is 07/01/2025 and the "Through Date" is 09/10/2025, the results will be for the current month of September 2025 regardless of the "From Date".
- To pull information for July 2025, the "From Date" and "Through Date" must both be within the month of July 2025, e.g. 7/1/2025 through 7/31/2025.

Appointment and Referral Disposition Workflow: As a reminder, per the requirements outlined in SAPC-IN 25-11 Requirements for Appointment and Referral Dispositions, the Referral Connections form was updated and changes were implemented on 9/1/2025. Additionally, the Appointment and Referral Disposition form was developed and implemented on 9/1/2025. This process is required and implemented to better track appointments made for our patients to ensure they are receiving timely access to care. To meet the requirements of the IN, and for the forms to function properly, providers must follow these steps for direct-to-provider referrals or referrals from SASH, CENS or CORE:

1. **ASAM CO-Triage or Youth and Young Adult Screening**: Must be completed first.
2. **Referral Connections form:** Must be completed after the screening is submitted.
    a. Providers who are accepting a patient from SASH, CENS or CORE, or another treatment provider, do not need to complete the Referral Connections form or a screening tool.
3. **Appointment and Referral Disposition:** Must be completed when a patient was given an appointment to any provider, including the provider who screened the patient.
    a. If an appointment is made or the intake was completed by the screening provider, that provider must still complete the form.
    b. Additionally, if the patient was referred to a different provider, the provider who is receiving the patient must complete the Appointment and Referral Disposition. The provider who referred out, does not need to complete the form.

The recording of the training and workflow was made available in Sage, rather than in SAPC Learning Network Connection (SAPC-LNC). SAPC temporarily restored the PCNX Training Videos View directly in Sage to users who will be utilizing this workflow. Providers will be notified when the training is available in SAPC-LNC in future Sage Communications. If you are unable to access the PCNX Training Video View or cannot complete one of the forms, please contact the Sage Helpdesk for assistance. If you have questions about the workflow, please email Sage@ph.lacounty.gov for assistance.

CENS PAuth Naming Update: To support provider agencies in providing CENS services and reduce confusion, the CENS PAuth label as shown in Sage will now be “CENS” instead of “CENS FBS-C”. This change is effective as of Friday, September 12, 2025. This change will be seen when viewing PAuths in the “Provider Auth (PAuths)” widget and on the Fast Service Entry Submission form when selecting an authorization.
