

NACA Change Request Enhancements

**SAPC Strategic Network Development Branch
Equitable Access Section
October 13, 2026**





- **Drivers to Change & Benefits**



- **NACA Enhancements**



- **Common Mistakes**



- **Review Process**



- **NACA Fields to Reflect in SBAT**



- **Key Takeaways**

Drivers for Change & Benefits

Executive Decision

Request to replace the manual SBAT survey with an electronic reporting form

Eliminates Manual Entry

Leverage existing NACA updates to eliminate SBAT survey.

Streamlines Reporting Process

Centralizes electronic submissions of the monthly state report and site location updates.

Improves Turnaround Times

Electronic submissions and automated workflows reduce processing delays.

SBAT Survey (To Be Discontinued)

START-ODS
SYSTEM TRANSFORMATION TO ADVANCE RECOVERY AND TREATMENT

Los Angeles County's Substance Use Disorder Organized Delivery System

Welcome to the Substance Use Disorder (SUD) system transformation which launched on July 1, 2017. Substance Abuse Prevention and Control (SAPC) has developed a START-ODS Provider Directory used by Substance Abuse Service Hotline (SASH) and Client Engagement and Navigation Services (CENS) system navigators to direct Los Angeles County residents to services that best match their needs and preferences. The START-ODS Provider Directory is posted on our website and included in the web-based Service & Bed Availability Tool (SBAT), which can be publicly viewed at: <http://sapccs.ph.lacounty.gov/sbat/>.

To be listed in the START-ODS Provider Directory, you must complete one survey per directly operated location (each site address), excluding field-based sites that are not owned/leased by the agency. Information used to inform referrals will be based on the responses you provide, so accuracy and completeness of your response is important to ensure patients are directed to programs that meet their needs and preferences. Responses should be based on current services offered, not future plans. You may update this information when there are changes.

Tell us what you'd like to do! Check selection and complete survey (Full/Partial) as indicated:

Agency / Update(s)	Full Survey	Partial Survey	Sections to be completed
Select ☐ New Agency	X		
Select ☐ Location	X		
Select ☐ Level of Care (LOC)	X		
Select ☐ Recovery Bridge Housing		X	Sections 1, 2, 5, 4
Select ☐ Recovery Support Services		X	Sections 1, 2 & 5
Select ☐ Population Specific Specialized Services		X	Section 1 & 2
Select ☐ Address or Phone		X	Section 1 & 3
Select ☐ Hours of Operation		X	

To remove information from the SBAT, please email SAPC_Compliance@ph.lacounty.gov and your assigned Contract Program Auditor (CPA). Please include Agency Name/Address and reason.

Contact information of person completing this form (Name/E-mail/Phone):

Please initial: _____

I have verified Service & Bed Availability Tool (SBAT) for this site and all information is accurate.

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ASAM 1-OTF	☒	Opoid (Narcotic) Treatment Program	Self	
RES	☒	Recovery Support Services	Self	
Please indicate if you offer these services:				
MAAT	☒	Medication Assisted Treatment in Non-OTF Setting	Self	
RBH	☒	Recovery Bridge Housing	Self	
DUI	☒	Driving Under Influence	Self	

Maintenance capacity = licensed capacity minus daily census

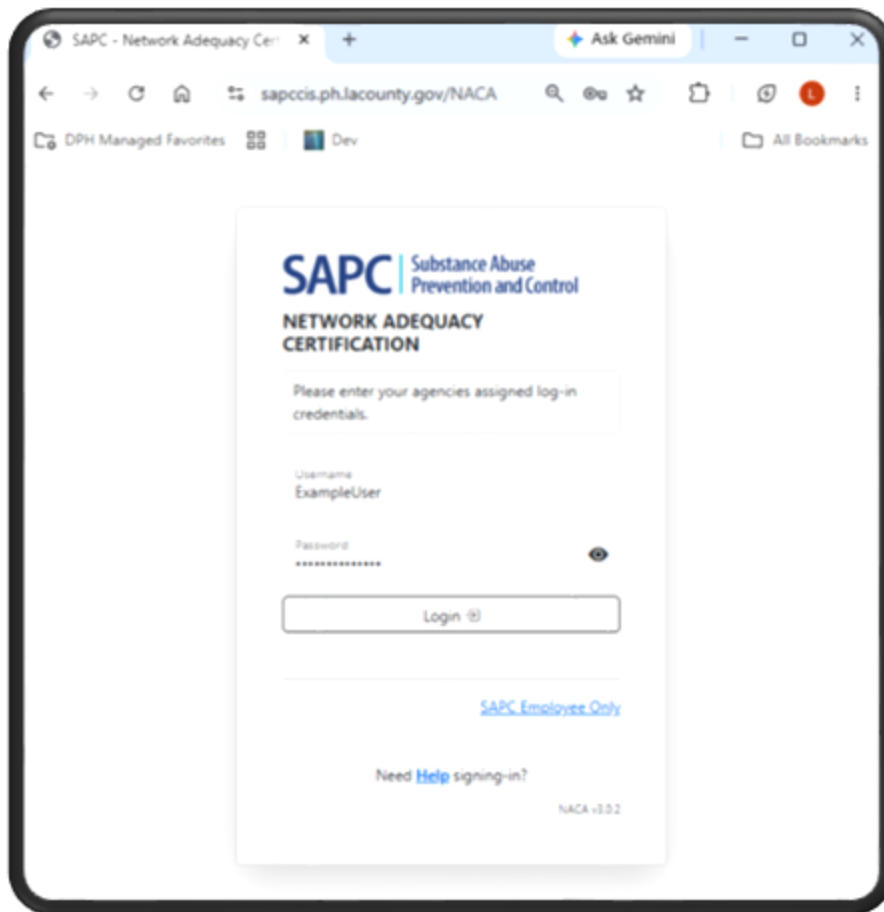
(Street address will not appear on public SBAT)

Low accessibility updates not required

- ✓ New Authentication Process to Access NACA
- ✓ Individual NACA Credentials

NACA

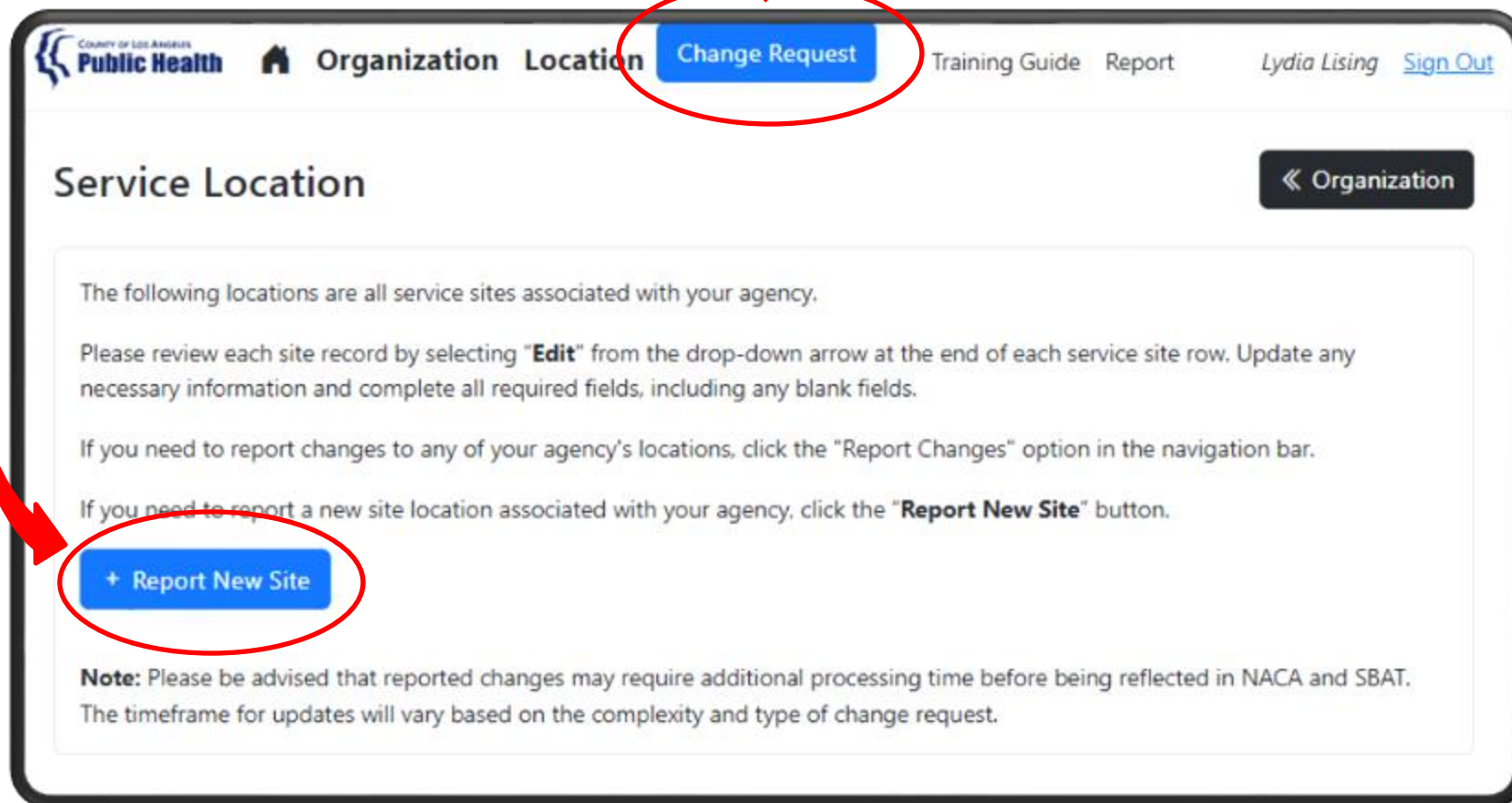
- ✓ Report Changes
- ✓ Request to add/remove site locations
- ✓ Upload Supported Documentation
- ✓ Confirm Monthly Submissions
- ✓ Automated email sent to CCD to process request



- ✓ **Review current NACA user access to ensure appropriate staff can submit updates**
- ✓ **Agencies may contact the SAPC NACT Team (SAPC_NACT@ph.lacounty.gov) to add new users to the NACA portal**

NACA: <https://sapccis.ph.lacounty.gov/NACA>

Change Request features can be located...



The screenshot displays the 'Service Location' page within the County of Los Angeles Public Health system. The navigation bar at the top includes links for 'Organization', 'Location', 'Change Request', 'Training Guide', and 'Report'. The 'Change Request' button is highlighted with a red circle and a red arrow pointing to it from the title above. The main content area is titled 'Service Location' and contains instructions for managing service sites. A blue button labeled '+ Report New Site' is highlighted with a red circle and a red arrow pointing to it from the title above. The page also includes a 'Sign Out' link for the user Lydia Lising and a 'Note' about processing times for changes.

Service Location

« Organization

The following locations are all service sites associated with your agency.

Please review each site record by selecting **Edit** from the drop-down arrow at the end of each service site row. Update any necessary information and complete all required fields, including any blank fields.

If you need to report changes to any of your agency's locations, click the "Report Changes" option in the navigation bar.

If you need to report a new site location associated with your agency, click the **Report New Site** button.

+ Report New Site

Note: Please be advised that reported changes may require additional processing time before being reflected in NACA and SBAT. The timeframe for updates will vary based on the complexity and type of change request.

Report a New Site Location

New Site Information

Please provide the following information for the new site location:

Site Name (if Different Than Agency Name):

Street Number * Street Number is required

Direction * Direction is required

Street Name * Street Name is required

Street Type * Street Type is required

Suite/Apt/Unit/Room:

City * City is required

State * State is required

Zip Code * Zip is required

Phone Number * Phone Number is required

Facility NPI:

Website:

Select Modality/Service Type: *

Please indicate if you offer these services:

Medication Assisted Treatment in Non-OTP Setting * ☐ Yes ☐ No Medication Assisted Treatment in Non-OTP Setting is required

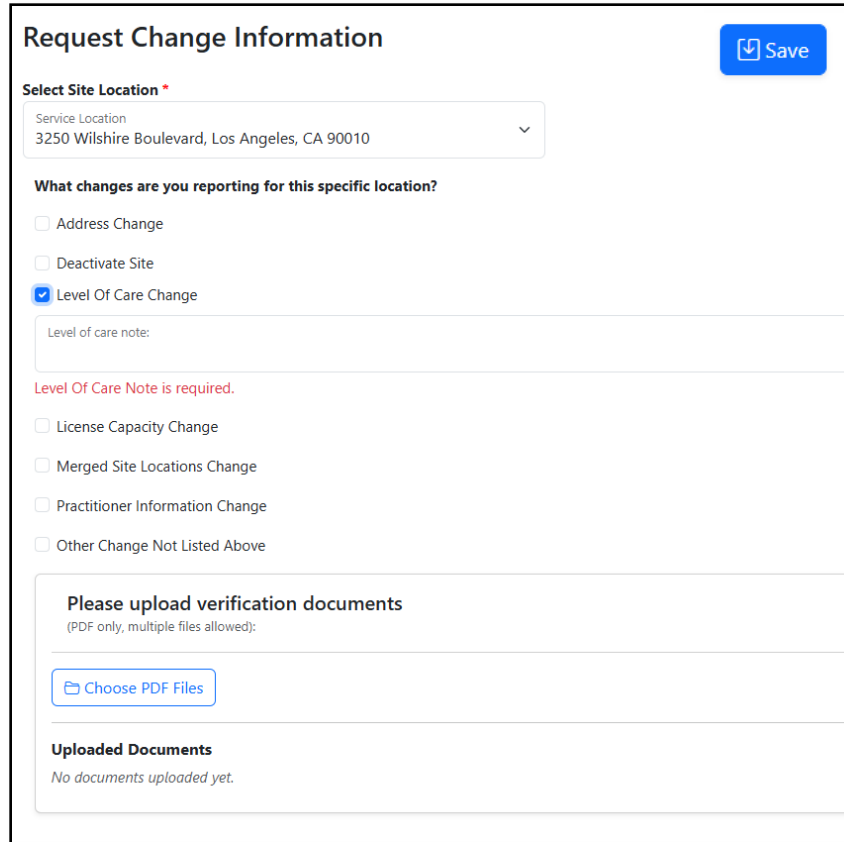
Please upload verification documents (PDF only, multiple files allowed):

Uploaded Documents

No documents uploaded yet

- ✓ **Report site location information**
- ✓ **Upload supporting documentation (optional)**
- ✓ **Automated notification**

Request Change Information Page



The screenshot shows a web form titled "Request Change Information". In the top right corner is a blue "Save" button with a checkmark icon. Below the title is a "Select Site Location *" dropdown menu showing "Service Location" and "3250 Wilshire Boulevard, Los Angeles, CA 90010". A question follows: "What changes are you reporting for this specific location?". There are five radio button options: "Address Change", "Deactivate Site", "Level Of Care Change" (which is selected), "License Capacity Change", "Merged Site Locations Change", "Practitioner Information Change", and "Other Change Not Listed Above". Below these is a text input field for "Level of care note:". A red error message "Level Of Care Note is required." is displayed below the input field. Further down is a section titled "Please upload verification documents" with the subtext "(PDF only, multiple files allowed):". It contains a "Choose PDF Files" button with a folder icon. At the bottom is a section titled "Uploaded Documents" with the text "No documents uploaded yet."

- ✓ Report Changes to existing site locations.
- ✓ Upload supporting documentation (optional)
- ✓ Automated notification

Step-by-Step Instructions

Change Request Example

Organization

Location

Change Request

Service Location

The following locations are all service sites associated with your agency.

Please review each site record by selecting "Edit" from the drop-down arrow at the end of each service site row. Update any including any blank fields.

Request Change Information

Select Site Location *

Service Location

3250 Wilshire Boulevard, Los Angeles, CA 90010

What changes are you reporting for this specific location?

☐ Address Change

☐ Deactivate Site

☒ Level Of Care Change

☐ License Capacity Change

☐ Merged Site Locations Change

☐ Practitioner Information Change

☐ Other Change Not Listed Above

Please upload verification documents

(PDF only, multiple files allowed):

Choose PDF Files

Uploaded Documents

No documents uploaded yet.

STEP 1

Request Change Information

STEP 2

STEP 3

1. Navigate to the "Change Request" section

2. Select the site location

3. Enter required fields

4. Upload documents (if applicable)

5. Submit change request

Hours of Operation

- ✓ **Hours of Operation for all site locations must be updated**
- ✓ **Automated email functionality will be disabled for the first entry**
- ✓ **After information is saved, any changes to the hours of operation will be considered a changed request.**

The screenshot displays a web form titled "Location General Information" with a "Save" button in the top right corner. The form is divided into sections: "Contact Information" and "Hours of Operation".

Contact Information

Primary Contact Name *	Primary Email *
test	test@test.com
Telephone *	DLA Number
(213) 555-8175	0000000000000000

Teaching Facility * ☐ Yes ☒ No

Hours of Operation
Select opening and closing times for each day. Choose "Closed" to mark a day as closed.

	Opens At		Closes At	
Sunday	-- Closed --	▼	-- Closed --	▼ Closed
Monday	-- Closed --	▼	-- Closed --	▼ Closed
Tuesday	-- Closed --	▼	-- Closed --	▼ Closed
Wednesday	-- Closed --	▼	-- Closed --	▼ Closed
Thursday	-- Closed --	▼	-- Closed --	▼ Closed
Friday	-- Closed --	▼	-- Closed --	▼ Closed
Saturday	-- Closed --	▼	-- Closed --	▼ Closed

Change Request Cancellation

The screenshot shows a web form titled "New Site Information" with a close button (X) in the top right corner. The form contains several sections: "Please provide the following information for the new site location:" with fields for Site Name, Street Number, Direction, Street Name, Street Type, Suite/Apt/Unit/Room, City, State (pre-filled with CA), Zip Code, Phone Number, Facility NPI, and Website. Below this is a "Select Modality/Service Type:" dropdown menu. The next section is "Please indicate if you offer these services:" with a checkbox for "Medication Assisted Treatment in Non-OTP Setting" and "Yes/No" options. The final section is "Please upload verification documents (PDF only, multiple files allowed):" with a "Choose PDF Files" button and an "Uploaded Documents" area showing "No documents uploaded yet." A yellow button at the bottom right says "Confirm Report New Site".

EXAMPLES:

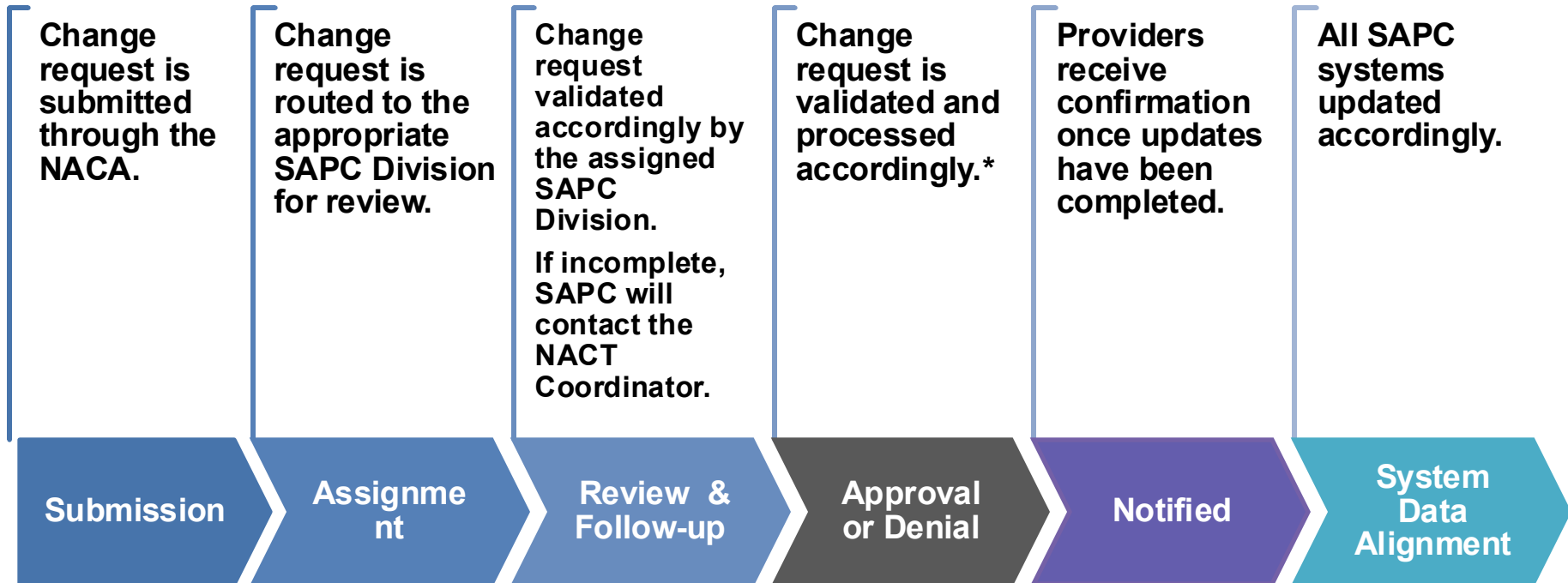
- ✓ Submitting duplicate requests
- ✓ Submitting the wrong change type



Let SAPC know if wrong request was submitted.

What Happens After Submission

Review Process/Timeline



*Change requests that require contract action will be processed according to SAPC's contract amendment protocol/Provider Manual. SAPC's Contract and Compliance Division (CCD) will follow up with treatment provider agency and keep them updated on the status of contract execution.

NACA FIELDS TO REFLECT IN SBAT

- ADA/Wheelchair access
- Accepting New Beneficiaries
- Field-Based Services (FBS) – Phase 2
- Hours of Operation
- Language Capabilities
- Practitioner detail
- Smoking/Vaping
- Specialized Populations – Phase 2
- Telehealth Station/Equipment Available

Treatment/Service Type:

- ☐ Outpatient, Level 1 (OP)
- ☐ Intensive Outpatient, Level 2.1 (IOP)
- ☒ Residential Treatment, Levels 3.1 (RS)
- ☐ RS (Levels 3.1) - Male
- ☐ RS (Levels 3.1) - Female
- ☒ Residential Population-Specific Treatment, Level 3.3 (RS)
- ☐ PSRS (Levels 3.3) - Male
- ☐ PSRS (Levels 3.3) - Female
- ☒ Residential Treatment, Levels 3.5 (RS)
- ☐ RS (Levels 3.5) - Male
- ☐ RS (Levels 3.5) - Female
- ☐ Ambulatory - Withdrawal Management, Levels 1-WM & 2-WM (A-WM)
- ☒ Residential - Withdrawal Management, Levels 3.2-WM (R-WM)
- ☐ R-WM - Male
- ☐ R-WM - Female
- ☐ Inpatient - Withdrawal Management, Levels 3.7-WM & 4-WM (I-WM)
- ☐ I-WM - Male
- ☐ I-WM - Female
- ☐ Opioid Treatment Program (OTP)
- ☒ Recovery Bridge Housing (RBH)
- ☐ RBH - Male
- ☐ RBH - Female
- ☐ Driving Under the Influence (DUI)

Languages Spoken:

- ☐ American Sign Language
- ☐ Arabic
- ☐ Armenian
- ☐ Cambodian
- ☐ Cantonese
- ☐ Farsi
- ☐ Korean
- ☐ Mandarin
- ☐ Other Chinese
- ☐ Russian
- ☐ Spanish
- ☐ Tagalog
- ☐ Vietnamese

Client Served:

- ☐ Adult
- ☐ Youth
- ☐ Women
- ☐ Medications for Addiction Treatment (MAT)

SERVICE & BED AVAILABILITY TOOL (SBAT)

Find Available Substance Use Services Near You

If you want to speak to someone directly to access services, call the Substance Abuse Service Helpline (SASH) at 1-800-854-7771 (TTY: 711)

Search by agency name



Table View Card View

Agency

0.46 miles

LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE

426 San Pedro Street,
Los Angeles, CA 90013

Business Hours:

Sunday: Closed - Closed

Monday: 8:00AM - 9:00PM

Tuesday: 8:00AM - 7:30PM

Wednesday: 8:00AM - 7:30PM

Thursday: 8:00AM - 9:00PM

Friday: 7:30AM - 4:00PM

Saturday: 7:30AM - 4:00PM

Phone Number: (213) 626-6411

[Website](#)

Secondary Agency Name: Downtown Los Angeles Outpatient - San Pedro

[Licensed Practitioners](#)

Wheelchair Access: Yes

Telehealth: Yes

FBS: Yes - Maximum Travel Distance: 60 miles

0.46 miles

LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE

305 South Central Avenue,
Los Angeles, CA 90013

Business Hours:

Sunday: Closed - Closed

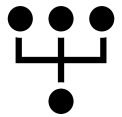
Monday: 8:00AM - 7:00PM

Tuesday: 8:00AM - 9:00PM

KEY TAKEAWAYS



Sunset of SBAT Survey & requesting site-related changes via SAPCmonitoring@ph.lacounty.gov.



Change Request protocol consolidates SBAT survey, contract amendments request and network adequacy updates into one portal of entry.



CCD's contract amendment process remains (e.g. Amendment Request Form still required for applicable Change Requests).



Ensure changes are reported and updates made to the SBAT promptly.



Providers may use SAPC_NACT@ph.lacounty.gov inbox to contact for questions.

WE WANT YOUR FEEDBACK

