Communication Release
02/03/2026

New Medi-Cal Eligibility Information Visibility in Sage

SAPC is excited to announce the addition of two (2) powerful options in Sage to provide visibility on critical eligibility information enabling providers to better help their clients maintain MCAL eligibility.

The new **Medi-Cal Eligibility Change Report** is now available to all financial and support staff user roles as of Friday 1/30/2026. This report shows any changes in key eligibility fields over any 2-month period selected in the report parameters. The report contains data on the Aid Code, Eligibility Status Code, County Code and Resident County Code. If any of those items change, that client will populate the report for both months for providers to further investigate. The report is coded to only pull information on current clients with an approved authorization within 6 months of the date parameters.

The primary use cases for this report are for changes to the Eligibility Status Code and the Resident County Code. If the Eligibility Status Code is 999 for a given month, that typically indicates the client's Medi-Cal has been temporarily suspended, usually due to missing redetermination paperwork. It is very important to act quickly and work with your clients to contact DPSS to submit necessary documentation to reinstate Medi-Cal immediately. Additionally, if the Eligibility Status Code is 600 or higher, that will also indicate potential issues with eligibility for that month that need to be investigated.

The second use case is to track Inter-County Transfers (ICT) from month to month. LA County is code 19 and should be listed in either the County Code or the Resident County Code for whichever month services are rendered. Running this report will help to show any clients where their County of Responsibility or County of Residence changes from one month to the next.

SAPC recommends running this report at the beginning of every month and entering the current month into the search parameters. The parameters are for the Month and Year of any month you are searching, and the report will automatically pull that month and the immediately preceding month to compare. For example, entering month: 01 and year: 2026 will pull Medi-Cal eligibility information for December 2025 and January 2026.

SUBSTANCE ABUSE PREVENTION AND CONTROL
Medi-Cal Eligibility Change Report

Print Date: 1/30/2026

Parameters Selected:

Recovery Inc

12/1/2025 - 1/1/2026

Provider	Client Name (PATID)	Eligibility Month	Aid Code	Eligibility Status Code	County Code	Resident County Code

SAPC is also publishing a new **MEDI-CAL ELIGIBILITY INFORMATION- LAST 3 MONTHS** widget which was added to the Client Dashboard in Sage. This new widget will pull data from the Medi-Cal eligibility file (MEDS) sent to SAPC from Medi-Cal each month. SAPC is now able to make the Resident County Code visible to providers as is on file with Medi-Cal on the first day of the month. This is a critical piece of information for Inter-County Transfer clients, that has previously been unavailable to providers. Since this information is sent monthly, any changes to the Resident County during the month will show on the following month's record. For updated information prior to the next month, providers should continue to contact SAPC-EST@ph.lacounty.gov for up-to-date information.

This widget will also include the standard demographic and eligibility information on file with DHCS, such as Name, Date of Birth, Aid Code, Eligibility Status Code, OHC coverage code, the primary Managed Care Plan and the County of Responsibility Code that are needed for determining scope of Medi-Cal coverage.

The widget will contain the last three months of eligibility information if available. If the client does not have three months of eligibility, then only the month with eligibility will display. For example, if the client received eligibility for the first time in February, then only the February data will display (or if the client received eligibility in January, then January and February will display). Additionally, the widget will only populate clients where the CIN entered on the Financial Eligibility for your agency matches the CIN on the MEDS file. This will ensure the correct client is displayed.

This information can be useful for determining current month's eligibility and for comparing changes to eligibility within the last three months for that specific client.

MEDI-CAL ELIGIBILITY INFORMATION- LAST 3 MONTHS									
Search:									
Eligibility Month	Client Name/PATID	Client Index Number	Date of Birth	County of Responsibility	County of Residence	Eligibility Status Code	OHC code	Managed Care Plan (MCP)	Initial Share of Cost Amount
Eligibility Mon	Client Name/PATID	Client Index N	Date of Bir	County of Respon:	County of Resi	Eligibility Statu	OHC code	Managed Care	Initial Share of

Practitioner License Expiration Workflow and Widget

SAPC released the new Practitioner License Status widget on Monday 2/02/2026 for providers to track upcoming license expirations for active practitioners in Sage. As discussed in the previous provider meetings, this information is pulling from the results of the bi-annual license verification process from December 2025. Providers that completed and returned the spreadsheet to SAPC are represented on the widget. However, if the widget is blank, or missing information, this is due to SAPC not being able to verify the information or because SAPC did not receive verification information from providers.

The widget will display practitioners whose license is set to expire within the next three months so that providers and SAPC are able to better track license renewals. For licenses that expire without being updated, SAPC will end date the license for billing, which will cause claims to be denied after the expiration date. Once SAPC receives updated credentials, the end date will be removed and will allow for billing to be entered. If providers need to update the license expiration date only, and no other changes to the practitioner are needed, those can be directed to sageforms@ph.lacounty.gov directly. However, if any other changes are needed to a user or practitioner, provider Sage Liaisons must enter a help desk ticket for a user modification using the Request Something, Sage User Creation Form.

- Sage Help Desk Phone Number: (855) 346-2392
- Sage Help Desk ServiceNow Portal: https://netsmart.service-now.com/plexussupport

name	Staff_ID	PROVID	Taxonomy	NPI	License/Cert/Reg Type	Board	Date Issued	Expiration Date	Status	Is Active in Sage	Actions Needed for Status	Date Inactive	Sage Registration Date
name	Staff_ID	PROVID	Taxonomy	NPI	License/Cert/Reg Ty	Board	Date Issu	Expiration Date	Status	Is Active i	Actions Needed	Date Inacti	Sage Registrati

Sage Billing Configuration Updates

The below configurations will be updated in Sage through the week of February 2nd. With the exception of the Community Health Worker codes which are effective for dates of service 7/1/2025, the updates are applicable for FY 24-25 and 25-26.

- Added new Community Health Worker codes 98960, 98961, and 98962 – FY 25-26 only
- Removed code 99418 as it is not an applicable add-on code for the current code set
- Removed the 95 modifier from codes 98966, 98967, and 98968 as these services are restricted to phone telehealth and not tele-video
- Removed H0034 from OTP LOC as medication services is included in the bundled medication rate

Sage System Updates

On Wednesday 1/28/2026, Netsmart installed updates in Sage which impact the following:

- Replacement Claim Assignment (CMS-1500) form: fixed the inability to add in Third Party adjudication data (OHC denial/payment information) and to click the "Display Valid Authorizations" button. These two issues are now resolved. If a user continues to experience challenges with these items, please submit a Sage Help Desk ticket.
- A new adjudication rule was added that may cause services to approve with an approval notice of: "This service is approved with the following notice: Add-on/Interactive Complexity Service in the Same Claim is denied."
  - o The services with that notice will be approved and paid on an EOB. Please disregard the message indicating the service is denied as the message is in error.
  - o There is an issue with the update for the new rule that does not apply the message appropriately.
  - o There is a fix that is undergoing testing and validation to resolve this message to only apply in the appropriate scenarios.

Women's Health History Form and Widget Updates

The Women's Health History (WHH) is required to be completed by all providers for clients who are pregnant or in the 1-year postpartum period. This form generates a required Pregnancy Indicator element in the claim sent to the State. Failure to complete this form may result in denials.

Effective Monday, 2/2/2026, the WHH form has new functionality to prevent the editing of a record created and/or updated by a different agency. Therefore, each agency who is providing services must have a unique WHH record per pregnancy. For current clients, SAPC recommends reviewing the WHH records to verify there is an existing record for your specific agency. If one is not found, add a new record. To assist users in navigating these changes, SAPC added a quick training video to the PCNX Training Videos view within Sage. It reviews changes to the form as well as introduces two (2) widgets that will aid in identifying your agency's record(s).

Widgets:

CLIENT WOMEN'S HEALTH HISTORY RECORDS: Shows all WHH records by PATID for your agency. Will be added to the Clinical Only view.

PPW WOMEN'S HEALTH HISTORY-LAST 6 MONTHS: Shows all WHH records for PATIDs with an approved PPW Perinatal or PPW Parenting Authorization within the six (6) months. Will be added to the Financial Only and Financial + Clinical views.

Patient Medications Form Update

The Patient Medications form was updated in TRAIN to include a diagnosis widget that populates to the right of the form. The PCNX Client Diagnosis History lists your agency's diagnosis for the selected client. It is in chronological order with the most recent diagnosis date listed at the top. It will list all diagnoses entered in the Sage-PCNX Diagnosis form, including if multiple diagnoses are listed on a single record.

SAPC's Clinical Informatics team is seeking provider feedback regarding the utility or lack of thereof, with having the widget associated with the form. Feedback may be submitted via email to Sage@ph.lacounty.gov through Thursday 2/12/2026. Based on feedback, the updates will be made to the LIVE environment.

2/5 SAPC Finance Billing & Denial Resolution Tutoring Lab

The monthly Billing & Denial Resolution Tutoring Lab is scheduled for *Thursday, February 5th, from 1:00-2:30pm.*

If providers have requests for procedures or policies to review during the lab, please email SAPC-Finance@ph.lacounty.gov.

Agenda focus:
- Discipline/License Type Issues
- Women's Health History guidance for billing

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

Downtime Drug Testing Form: The "paper" [Drug Testing](#) form used for downtime procedures was updated to reflect the recent form update in Sage. This and other downtime procedure forms can be found on the Clinical tab of the Manual, Bulletins, and Forms of the SAPC website. The correct version of the form will note "Revised 01/15/2025" in the footer.

Service Connections Log Update: SAPC updated the Service Connections Log, utilized by our CENS providers, to document referral information. We made targeted updates to the fields and conditional logic on the SUD Referrals Provided tab to allow for more accurate data entry and to minimize errors. Each new item added to the referral table can now only be for a "Referral Treatment Provider" or an "Other Referral Provider." "Other Referral Providers" refer to referrals made to programs that are not already listed in the "Referral Treatment Provider" field. Additionally, when adding a "Referral Treatment Provider," users will still be required to select the Appointment Status of either "Scheduled" or "Not Scheduled." When "Scheduled" is selected, a new field "Scheduled appointment disposition" will be enabled and users will only be able to select from: 1. Intake Scheduled (0-9 minutes), or 2. Intake Scheduled (10 Minutes or More). When "Not Scheduled" is selected, a new field "Not Scheduled appointment disposition" will be enabled and will only contain the dispositions to reflect why an appointment was not scheduled.

TRAIN PCNX Environment: As reported at the All-Treatment Provider Meeting on 1/14/2026, the Sage-PCNX TRAIN environment was refreshed. SAPC is finalizing configurations and is expected to be completed by the end of the month. The most significant change within the environment is that Primary Sage users will now have access to their own agency and program information rather than the previously assigned fake agencies (Primary Services or SUPR). However, all providers will have available, fake client data which has been scrambled and does not contain protected health information (PHI). The TRAIN environment is intended for new users to practice learning the Sage system prior to using the LIVE environment. It also serves as a forum for providers to test new features, such as form updates, new reports, or new workflows and provide feedback to SAPC prior to them being implemented in the LIVE environment. **As a reminder NO PHI or real client data should ever be entered in TRAIN.** If you are unable to login to TRAIN or no longer have the available URL, please contact the Sage Help Desk as your account may have been disabled due to inactivity. Users will login to TRAIN with the same credentials as the LIVE environment. You can reach the Sage Help Desk by phone at (855) 346-2392, or through the [ServiceNow Portal](#).

Updated Sage Billing Configurations: Effective the week of January 12, 2026, the below Sage billing configurations have been completed.

- **FY 24-25**
    - Updated maximum units billable per service for codes: 96131, 96171, 98960, 98961, 98962, 99416, 99417, H0001, H0004, H0005, H0007, H0014, H0025, H0033, H0034, H0034R, H0038, H0048, H0049, H0050, H1000, H2010M, H2010N, H2014, H2015, H2015-CN, H2017, H2017-CN, H2027, T1006, T1007, T1013, T1017, T2021, T2024
    - Removal of fees to meet State policy
        - 99415 for Residential (U1, U2, U3)
        - 99202-99205, 99212-99215 from WM (U4:U7, U4:U8)
        - 90849 from WM (U4:U7, U4:U8)
        - Occupational Therapist (OT) and OT Clinical Trainee for code 99368
        - Registered Nurse (RN) and RN Clinical Trainee for code H2017
    - Removal of the GC and/or HL modifiers from the codes: 90885, 90887, 90889, 96170, 96171, 99367, 99368, 99417, 99418, H0001, H0007, H0012, H0014, H0019, H0033, H0034, H0048, H0049, H0049, H1000, H2010, H2014, H2015, H2017, H2027, H2034, S9976, T1006, T1007, T1009, T1013, T1017, T2027

- - - These codes do not require the GC and/or HL modifiers as they are not billable to Medicare and do not require the Medicare COB override modifiers
  - Removal of codes with the 27 modifier as this is not an applicable modifier for the SAPC network
  - Removed 02 and 10 places of service from the H2010M and H2010N codes
    - As this is an incentive service, the place of service is not required to be a specific value and can be submitted with:
      - (55) Residential Substance Abuse Treatment Facility, (57) Non-residential Substance Abuse Treatment Facility, (58) Non-residential Opioid Treatment Fac, (15) Mobile Unit (approved for mobile OTPs only)
  - Removal of modifiers 93 and 95 from T2021 and T2024 and replaced with SC
  - Removal of 95 modifiers from 98966, 98967, and 98968
- **FY 25-26**
  - Updated maximum units billable per service for codes: 96131, 96171, 98960, 98961, 98962, 99416, 99417, H0001, H0004, H0005, H0007, H0014, H0025, H0033, H0034, H0038, H0048, H0049, H0050, H1000, H2014, H2015, H2017, H2027, T1006, T1007, T1013, T1017, T2021, T2024