Substance Use Disorder Information System

Communication Release

10/26/2026

Primary to Secondary Provider Conversion

SAPC provides an annual enrollment opportunity for all Provider Agencies to convert from a Primary User to Secondary User of the Sage Electronic Health Record (EHR) System. If your agency would like to convert from Primary to Secondary Sage User status, please send an official, signed request addressed to the SAPC Director via email to SAPCProvConvReq@ph.lacounty.gov no later than **January 31, 2027**.

Provider agencies that meet this deadline will receive an acknowledgement letter and will be required to begin the necessary testing by March 31, 2027. Testing processes need to be completed no later than June 30th. During this testing process period, the provider is required to:

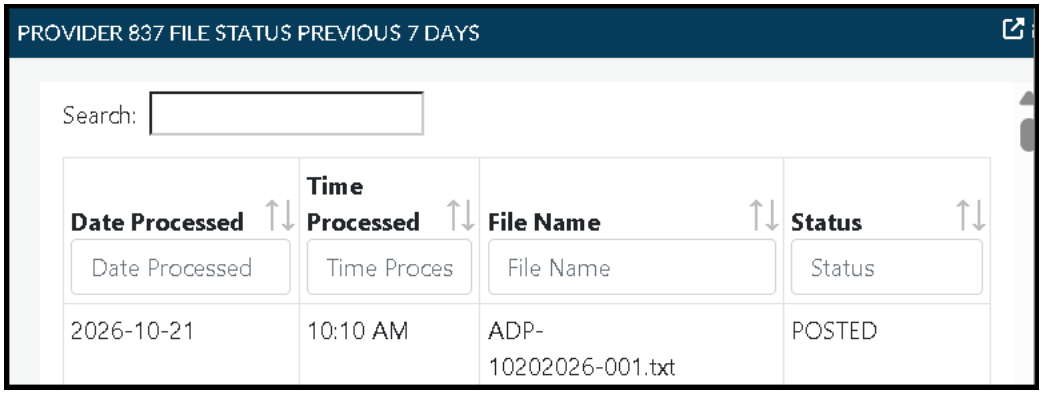
1. Identify a minimum of two contact persons at your agency who will be responsible for creating and submitting all 837 test files. These two individuals will also be responsible for responding and addressing all SAPC requests related to this conversion.
2. If needed, create SAPC Sage User Creation Form Help Desk tickets for any new or modified user accounts per standard procedure to access the Sage TRAIN environment.
3. Engage the EHR vendor or Information Technology staff to complete all necessary configuration of the agency's EHR by the identified timeline and in accordance with SAPC specifications.
4. Create and submit test 837 files and resolve identified issues.
5. Once testing is done in the TRAIN environment, create and submit a small number of claims in the Live Environment until the agency has achieved at least a 90% adjudication approval rate.

Once the conversion is successfully completed, a Sage Secondary Provider Certificate will be issued by SAPC. After the certification, the provider will officially be a secondary provider and will be given instructions on how to submit their claims via the 837 process going forward.

NEW Widget: Provider 837 File Status Previous 7 Days

A new widget has been added to the Financial views in Sage-PCNX to assist Secondary Sage Users with tracking their 837 files submitted for processing. The "Provider 837 File Status Previous 7 Days" widget contains the date the file was processed, the file name, and the status of the file. The status can either be in the Posted or Compiled state. This information can be helpful in tracking which files have been processed by SAPC. Providers should check this widget first if they have questions about the status of a recently submitted file before contacting SAPC. If the file is missing from the list or remains in the compiled state for more than a day, that may indicate an error and providers should then open a "Request Billing Assistance" Help Desk ticket for SAPC Finance to investigate.

This widget is specifically for our Secondary Sage Users. Primary Sage Users should disregard this widget as it will always be blank for Primary Sage Users.



Notice to Accompany Disclosures Available in Threshold Languages

The Notice to Accompany Disclosures is now available in English and 11 other threshold languages on the SAPC website under the Clinical tab on the Manuals, Bulletins, and Forms page.

Other Languages include:
- Spanish
- Arabic
- Armenian
- Cambodian (Khmer)
- Chinese Simplified
- Chinese Traditional
- Farsi
- Korean
- Russian
- Tagalog
- Vietnamese

Providers should use the Notice to Accompany Disclosures in the client and the record recipient's preferred language whenever available to help ensure they understand the information and make informed decisions. Thank you for your continued commitment to providing client-centered services.

Eligibility for Clients with Only LA County of Residence

SAPC has received an uptick in questions related to County of Residence versus County of Responsibility in terms of eligibility, authorizations, and claims submission. As a reminder, per DHCS IN 24-008, clients are eligible for DMC-ODS services when either the County of Responsibility or the County of Residence matches the county where services are delivered and claimed. For SAPC clients, if the County of Responsibility or County of Residence is Los Angeles (19) on any of the eligibility portals, the client is eligible for services by a SAPC provider in LA County.

Clients who are not officially assigned to LA County as the County of Responsibility will not populate our MEDS file as that is only for clients with Medi-Cal assigned to LA County as the County of Responsibility. Providers need to run and post the Real Time 270 for visibility on County of Residence and/or Responsibility. Once the Real Time 270 has been run and posted providers can check the 270 Inquiry widget and/or the County and Aid Code report to verify the county codes. The Medi-Cal Eligibility widget will only populate the aid code information from the 270 based on the updated eligibility information created from the 270 process. To assist in the authorization process, providers should comment on the authorization indicating the client has County of Residence in LA County only. For these clients, providers should not enter any information in the Subscriber's MEDS ID# field on the Financial Eligibility. This will only populate for clients who have a MEDS record, where these clients would not have an official MEDS record until officially transferred to LA County responsibility.

If you have questions about eligibility, please contact SAPC-EST@ph.lacounty.gov for additional assistance.

New Sage Reports

SAPC has released three (3) new reports in LIVE. The Sage-PCNX Guide to Reports has been updated with details on each of these reports.

Report Name	Description
Discharge and Transfer Audit Report	The Discharge and Transfer Audit Report was developed to allow providers and SAPC quick visibility on Discharge and Transfers that have or have not been submitted. The report itself provides specific data points that are needed to track and update Sage-PCNX correctly, such as Admission Date, Discharge Date, Last Approved Date of Service for Level of Care, next Admission Date for Provider and Discharge/Transfer information.
LPHA Follow Up Assessment Worklist Report	The LPHA Follow Up Assessment Worklist Report was created to aid providers participating in the FY 26-27 Value Based Incentive for Workforce Development: Percent of Clients with Co-Occurring Mental Health Conditions Seen by LPHA (2-B) by identifying clients who need a follow-up with a diagnosing LPHA. This report looks at finalized ASAM CONTINUUMs completed in Sage as well as the Diagnosis form to create a "flag" on a report indicating the client should be seen by a diagnosing LPHA.
ROI for Payment and Operations Export	The ROI for Payment and Operations Export provides an aggregate list of all Payment and Operations (PO) records that were submitted electronically directly (not uploaded) in Sage.

Split Authorizations for FY 27-28

As new contracts for FY 27-28 are still pending, authorizations crossing into the next fiscal year could not be generated by Sage. An update was installed 10/20/2026, which now allows the submission of authorizations that go into FY 27-28. Currently, this only applies to OTPs but will begin affecting outpatient authorizations in January 2027.

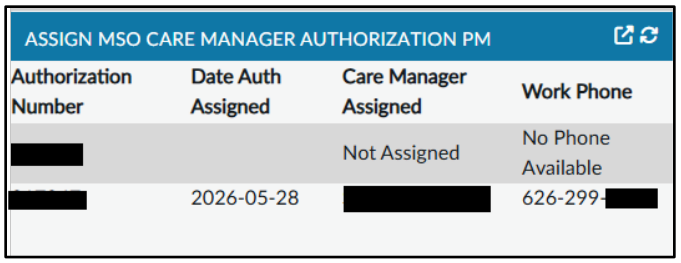
Split authorizations going into FY 27-28 will be created with a Pending – No Active Contract status. Once the contracts are fully executed and updated in Sage, SAPC will update all of the Pending - No Active Contract status split auths to **Approved** with the correct contract number.

OTP providers may now submit authorizations for the full authorization period. For authorizations previously end dated on 6/30/2027, OTPs will need to track the remaining authorization periods and hold manually submitting for the remaining auth period until the contracts have been updated in Sage. Manual authorizations cannot be automated for providers.

SAPC will notify providers when the contracts are updated and those remaining authorizations can be submitted. **DO NOT SUBMIT authorizations with a start date of 7/1/2027 until instructed to do so as these will result in denials.**

Assigned Care Managers for Authorizations

As a reminder, the "Assign MSO Care Manager Authorization PM" widget is available for all providers. This widget is located on the right side of an open Service Authorization Request form. This widget includes the care manager assigned to a particular authorization along with their phone number. Providers can use this information to directly connect to the care manager for questions or follow ups.



ASSIGN MSO CARE MANAGER AUTHORIZATION PM

Authorization Number	Date Auth Assigned	Care Manager Assigned	Work Phone
[redacted]		Not Assigned	No Phone Available
[redacted]	2026-05-28	[redacted]	626-299-[redacted]

11/12 SAPC Finance Billing & Denial Resolution Tutoring Lab

The November Billing & Denial Resolution Tutoring Lab is scheduled for *November 12th, 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.

Please note the updated date for the November Tutoring Lab.

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 Communication

Removal of Critical Error Segments from 835 Files: SAPC Finance has recently identified instances where critical error segments were appearing in the 835 remittance files. These critical errors were not intended to display within the 835 transactions. Critical errors occur during an 837 claim submission when required data elements such as date of birth or PATID are missing or structurally invalid. These issues result in functional errors that prevent a claim from being accepted. Critical error details are appropriately reported through the 277CA response and the 837 error report. These are the official locations where Secondary Sage Users should review and resolve such errors. SAPC Finance will remove the unintended critical error segments from the 835 files. As of October 13, 2026, these segments no longer appear on the 835. If you need assistance locating critical errors in the 277CA or 837 reports, please submit a help desk ticket using the 'Request Billing Assistance' form in the Service Now portal.

New Provider Authorizations for Non-DMC Recovery Services: As of October 8, 2026, provider agencies now have Provider Authorizations (PAuths) available for FY 26-27 for Non-DMC clients receiving Recovery Services. For agencies that operate PPW sites, there will be an additional Non-DMC PAuth for perinatal clients. These PAuths can be used for: 1) CIFP clients or 2) Clients with a Non-DMC funding source. The following services are available on the authorizations:

Code	Code Type	Service Description
H0025	Peer Support	Behavior health prevention education service (delivery of services with target population to affect knowledge, attitude and/or behavior) [Peer Support group session], 15 minutes
H0038	Peer Support	Self-help/peer services (individual), 15 minutes
H2010M	MAT Services	MAT Education

H2015	Recovery Services	Comprehensive community support services, per 15 minutes (Example services: recovery monitoring, relapse prevention, care coordination)
H2017	Recovery Services	Psychosocial rehabilitation services, 15 Minutes (Example services: assessment, screening, individual and group counseling, family therapy)
T1013	Supplemental Services	Sign Language or Oral Interpretive Services, 15 Minutes

Visibility on Funding Source for PAuths: SAPC has updated the Provider Auths widget available on Finance views in Sage-PCNX to include the Funding Source on the PAuths to help Primary Sage Users avoid denials for incorrect funding source when entering claims. When billing in Sage-PCNX, the Funding Source selected on Fast Service Entry Submission must match the funding source on the authorization. Providers can now more easily verify the correct funding source, level of care and authorization number.

Progress Note JI Codes: The Progress Note procedure codes have been updated in TRAIN and LIVE to reflect FY 26-27 Justice Involved Youth Fee For Service Matrix for Juvenile Justice Involved services. Codes are divided into treatment-based codes, indirect service codes, and supplemental service codes. These codes are designated *only* for JI Youth treatment service billing during incarceration. The new codes are visible under the Procedure Code drop down menu. These codes are indicated by J followed by the procedure code, i.e., J90791 Assessment. To access the code, users may enter 'J' in the search bar. Codes are listed without parenthesis which differentiates them from the other procedure codes. Supplemental codes are listed in the Supplemental Service Section of the progress note. This drop-down menu is enabled after users enter 'Yes' in the 'Was a supplemental service provided in addition to the primary service' field and enter the Duration of Supplemental Service time. For more information on codes rates, allowable license types, place of service, modifiers, and revision history, the FY 26-27 JI FFS Rates Matrix v1.1 is available for review.

Service Authorization Request Form: Original Authorization and Split Authorization Numbers: Two new fields are now visible on the Doc Request Date section of the Service Authorization Request form, "Original Authorization Number" and "Split Authorization Number". This addition was to give providers direct visibility on the form of the respective original/split authorization numbers. Split authorizations are generated when Utilization Management (UM) approves an authorization with the effective period crossing the fiscal year. When viewing the Original Authorization, the "Split Authorization Number" field is populated. When viewing the Split Authorization, the "Original Authorization Number" field is populated. If the authorization does not cross a fiscal year, both fields will remain blank. For additional information please refer to the Sage-PCNX Service Authorization Request Guide.

Accounting of Disclosures Log in LIVE: The Accounting of Disclosures Log is now available in LIVE and a Job Aid with instructions on how to complete the form can be found on SAPC's Sage-PCNX training page. The Accounting of Disclosures Log provides a template for tracking PHI disclosures in accordance with applicable regulations including HIPAA and 42 CFR Part 2.25. Under the Final Rule, it is required to keep an account of disclosures and make them available to clients when requested. SAPC is developing a report for providers to run that will populate with the list of recorded disclosures.

Notice to Accompany Disclosure Document: Pursuant to 42 CFR 2.32, each disclosure, including all future redisclosures, made with the patient's written consent must be accompanied by the Notice to Accompany Disclosure statement **and** a copy of the consent or a clear explanation of the scope of the consent provided. SAPC has created a standalone Notice to Accompany Disclosure document that is available on SAPC website under the Clinical tab on the Manuals, Bulletins, and Forms page. Providers can include the document when responding to any Release of Information (ROI) request if the written consent does not already contain the required Part 2 statement, such as the Authorization to Share Confidential Member Information (ASCMI) Form, to stay compliant with 42 CFR Part 2.

Uploading Release of Information (ROI) Paper Forms to Provider File Attach: All providers, Primary and Secondary Sage Users, are required to upload all paper SAPC Release of Information (ROI) forms to Sage via Provider File Attach by following instructions below:

- **File Type**: "Release of Information"
- **Documentation Type**: Specify the type of ROI.

- **File Naming Convention**: [Type of Document]- [Date (MM-DD-YY)]-[Client's First & Last Initial]- [Client ID]

Each paper SAPC ROI must be uploaded as a single file containing every page of the form. ROIs with only the signature page uploaded, or with the signature page uploaded separately from the remaining pages, will be considered invalid. Include the revocation section but leave it blank when ROI authorizes disclosures. ROIs uploaded to the correct client's record under an incorrect File Type or Documentation Type cannot be validated, and these entries cannot be edited or removed. Users are strongly encouraged to review the selections made on the Provider File Attach form are accurate prior to submission. If an ROI is uploaded under an incorrect client profile, please submit a Helpdesk ticket requesting "Remove Attachment". For additional information, please refer to SAPC ROI FAQ and Sage Release of Information (ROI) Guide. For any further questions related to ROIs, please contact us at SAPC-HIM@ph.lacounty.gov.

SAPC's Release of Information (ROI) Forms Update: As of Wednesday, October 7th, updated paper versions of SAPC's ROI forms are available on the SAPC website under the Clinical tab on the Manuals, Bulletins, and Forms page. These new updated forms will replace the previous May 2026 version of the SAPC ROI forms. The updated SAPC ROI forms in electronic version in Sage-PCNX LIVE and in threshold languages will be available in early November. If the client already has the May 2026 version ROI form signed, they do not need to sign the updated version of the ROI forms. If the client does not have the May 2026 version ROI form signed, they need to sign the updated version. For questions related to the SAPC ROI forms, please contact SAPC-HIM@ph.lacounty.gov.

Secondary Provider ROI Form Recreation Review Process Update: SAPC is resuming the review of Secondary Provider ROI form recreation as the updated paper versions of SAPC's ROI forms have been released. SAPC has also updated the Secondary Provider Recreated SAPC ROI Form Review Checklist based on provider feedback. Secondary Providers must receive written approval from SAPC's Health Information Management (HIM) Section before using their recreated SAPC ROI forms and recreated SAPC Supplemental Authorized Individuals/Entities for ROI form. To submit recreated forms for review, Secondary Providers must complete and submit the Secondary Provider Recreation of SAPC ROI Forms Submission Questionnaire, with the recreated SAPC ROI forms attached, to SAPC-HIM@ph.lacounty.gov. The questionnaire is also available on the SAPC website under the Clinical tab on the Manuals, Bulletins, and Forms page. Until SAPC-HIM issues written approval, Secondary Providers must use the official SAPC ROI paper forms available on SAPC Website or the electronic forms available in Sage-PCNX LIVE. Secondary Providers that were previously approved for their recreated ROI forms need to revise the ROI forms accordingly and submit for SAPC-HIM review before continuing to use the recreated ROI forms. For questions related to the recreated ROI form review process, please contact SAPC-HIM@ph.lacounty.gov.
