November 4, 2026

PROVIDER MEETING FAQ

All slides and the recorded presentation are posted on the SAPC Network Provider site:
http://publichealth.lacounty.gov/sapc/NetworkProviders/Regulations.htm

	QUESTIONS	*ANSWERS (AND UNIT RESPONSIBLE)*

1.	*Where can providers access the resources shared during the meeting?*	• *DHCS – Authorization to Share Confidential Member Information*
		  ○ *ASCMI Form: AB 133 (English)*
		  ▪ *Language translations*
		  ○ *ASCMI Form: Non-AB 133 (English)*
		  ▪ *Language translations*
		  ○ *ASCMI Revocation Form (English)*
		  ▪ *Language translations*
		• *DHCS – BHIN 26-029: Integrated Behavioral Health Member Handbook Requirements and Templates*
		• *DHCS – Community Reinvestments*
		• *DHCS – Individual Service Level Encounter Reporting*
		  ○ *FAQ*
		• *DPH Infectious Disease Suspected Outbreak Reporting for Community Settings One-Pager*
		• *DPH Respiratory Disease – Outbreaks in Community Settings and Psychiatric Hospitals*
		• *SAPC Client Feedback & Complaint Poster*
		• *SAPC IN 24-03: Withdrawal Management Standards in the SAPC Treatment Network*
		• *SAPC IN 24-09: COVID-19 and Influenza Vaccination Requirements, Masking Guidance, and Reporting Responsibilities*
		• *SAPC IN 25-11: Requirements for Appointment and Referral Dispositions*
		• *SAPC IN 26-02: Coverage for Clients Who Are Ineligible for Federally Funded Substance Use Disorder Treatment Services*
		• *SAPC's Medi-Cal Managed Care Plan Partners*
		• *SAPC Payment Reform – Value-Based Incentives*
		• *SAPC Release of Information (ROI) Forms & Supporting Documents*
		• *SAPC Secondary Provider of SAPC ROI Forms*
		• *SAPC Trainings*
		• *BHSA Community Partnership Team Meetings and Forums*
		• *Changes in Financial Eligibility Requiring a New Authorization Job Aid*

Special Programs and Initiatives		
2.	*Are certified peer support specialists eligible for the Bilingual Bonus Program?*	*Yes, peer support specialists are eligible to participate in the bilingual bonus program. Resources including an FAQ can be found on SAPC's Cultural Responsiveness and Language Assistance (CRLA) page.*

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3.	*What is the process of informing clients of the new Integrated Behavioral Health Member Handbook?*	*SAPC will provide the Integrated Behavioral Health Member Handbook and the Notice of Significant Change to providers by the end of November. Providers must then provide the Notice of Significant Change to all existing clients by December 1st. By January 1, 2027, SAPC will post the handbook on the SAPC Member Webpage and providers must provide the handbook to all new clients by that date.* *Requirements for informing clients about both documents can be found in the Intake and Enrollment - Required Forms section of the Provider Manual Version 11.0.*
Sage		
4.	a. *Why was an expiration date added to the Release of Information (ROI) forms?* b. *How does the expiration date change how the form is carried out?* c. *Will providers need to recreate existing ROIs to reflect the expiration date?*	a. *The expiration date was added to align with guidance and feedback from providers; this only applies to the Treatment and Care Coordination ROI and the Legal Proceedings ROI.* b. *Per the instructions on the ROI forms, the consent form will expire one year from the date the form was signed unless a different expiration date is entered in the designated space or unless consent is revoked. Clients may indicate a date that is less than a year, or more than a year, from the date the form was signed. If an expiration date is not specified, the provider will enter a date one year from the date the consent is signed.* c. *No, existing ROIs are still valid and will not need to be recreated. The existing ROIs that do not have an expiration date will be valid for the terms of that ROI, which is that the ROI shall remain valid until revoked or end of treatment. In Sage, the expiration date is disabled for any existing ROIs and will only be required for the new ROIs.*
5.	*Have there been any updates to resolving the performance issues with the Fast Services Entry Submission form?*	*We are aware of the performance issues with the Fast Service Entry Submission form and are working on a permanent solution for the latency and lag. In the interim, we encourage providers not to use the multiple date entry if that is causing too much disruption to your process. When adding a new row for the same client, using the Copy Data on Add function will assist with the data entry.* *If an extension on the billing deadline is needed due to system issues, please email the SAPC Finance staff member listed on your Remittance Advice.*
Eligibility and Authorization		
6.	*At what point should authorizations be resubmitted when there is a*	*SAPC published Changes in Financial Eligibility Requiring a New Authorization Job Aid that reviews the scenarios that would warrant a new authorization. If a*

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	change in a patient's funding source? Should they be resubmitted immediately upon the funding change, or only when the current authorization reaches its approved end date?	*new authorization is required per the Job Aid, do not continue billing on the existing authorization as that will lead to denials.* *The job aid has three (3) visualizations of the workflow based on whether the client had Drug Medi-Cal benefits, did not have DMC, or whether they were applying for benefits.*
7.	*Can SAPC provide guidance on medical necessity for individuals with stimulant use disorder entering Withdrawal Management (WM)?*	*Per SAPC IN 24-03: Withdrawal Management Standards in the SAPC Treatment Network, clients with stimulant intoxication or withdrawal syndrome admitted to withdrawal management levels of care shall be treated in alignment with the latest version of the ASAM and American Academy of Addiction Psychiatry (AAAP) Clinical Practice Guideline on the Management of Stimulant Use Disorder. For patients with stimulant intoxication, the clinical rationale for the medication(s) offered to the patient for stimulant intoxication syndrome shall be documented in the clinical record.* *Patients with stimulant withdrawal syndrome may require clinical observation and support. However, given the absence of the necessity for medications in the treatment of stimulant withdrawal, these patients would not warrant admission to a withdrawal management level of care unless medical observation with medication management to treat their clinical symptoms was necessary.* *When plans of care including medication treatment(s) depart from the standards outlined within the clinical guidance documents referenced above, the clinical decision making supporting why alternative medication treatments were provided shall be documented in the clinical record. Medication services are a required component of all admissions to a withdrawal management level of care.*
Finance		
8.	*What date range does the DMC Contract Summary Report cover?*	*The Contract Summary Report dates to the beginning of current fiscal year.*