

Clinical Services Branch: Utilization Management & Quality Improvement Updates

Los Angeles County Department of Public Health
All Provider Meeting November 7, 2023
Substance Abuse Prevention & Control



Agenda

- **UM Auth Backlog Update**
- **Clinical Documentation Standards Reminder**
- **30d / 60d Initial Engagement Authorizations**
- **Residential Re-Authorizations for Patients Experiencing Homelessness**
- **Bidirectional Referrals with Harm Reduction Agencies**

UM Auth Backlog Update and Clinical Documentation Standards Reminder



Pending authorizations to be assigned

AUTH BLACKOUT LIFTED: 9/12/23

Date	Pending assignment for WM, Residential, RBH	Pending assignment for outpatient, IOP and OTP
9/18/2023	1721	1989
10/16/2023	1868	1249
11/3/2023	802	332

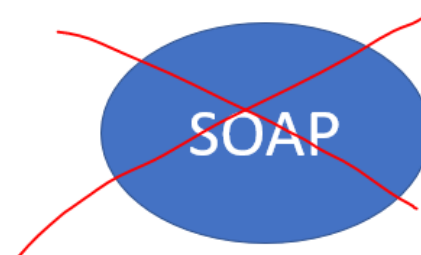
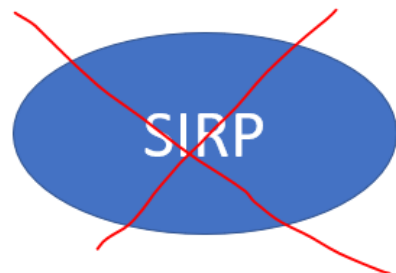
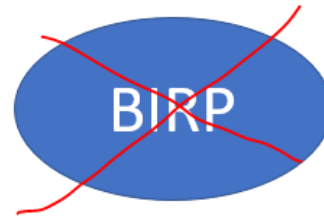
Clinical Documentation Reminder



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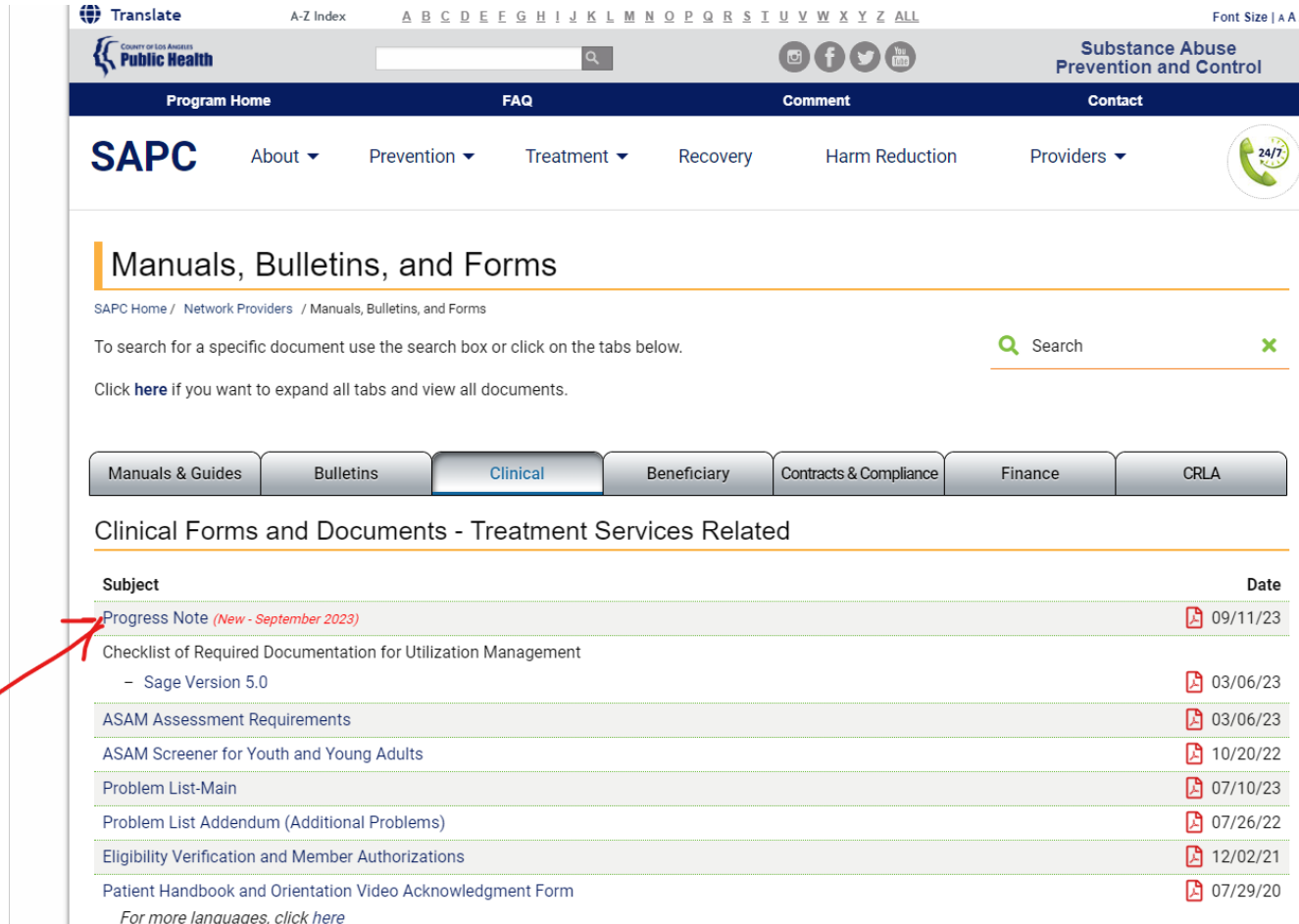
Progress Note

- For Primary Sage User, these providers will document in one single Progress Note.
- Secondary Sage User can continue to use their SAPC approved documentation.
- Secondary Sage Users onboarding period for Progress Note
- Tips for documenting in new Progress Note form
- Only “One” Form of Progress Note



Progress Note (BIRP)
Progress Note (GIRP)
Progress Note (SIRP)
Progress Note (SOAP)

Please refer to the new form available on SAPC's website



The screenshot shows the SAPC website interface. At the top, there is a navigation bar with 'Program Home', 'FAQ', 'Comment', and 'Contact'. Below this is a main menu with 'SAPC' and various categories like 'About', 'Prevention', 'Treatment', 'Recovery', 'Harm Reduction', and 'Providers'. A search bar is located on the right side of the main menu.

The main content area is titled 'Manuals, Bulletins, and Forms'. Below this title, there is a search box and a list of document categories: 'Manuals & Guides', 'Bulletins', 'Clinical', 'Beneficiary', 'Contracts & Compliance', 'Finance', and 'CRLA'. The 'Clinical' category is currently selected.

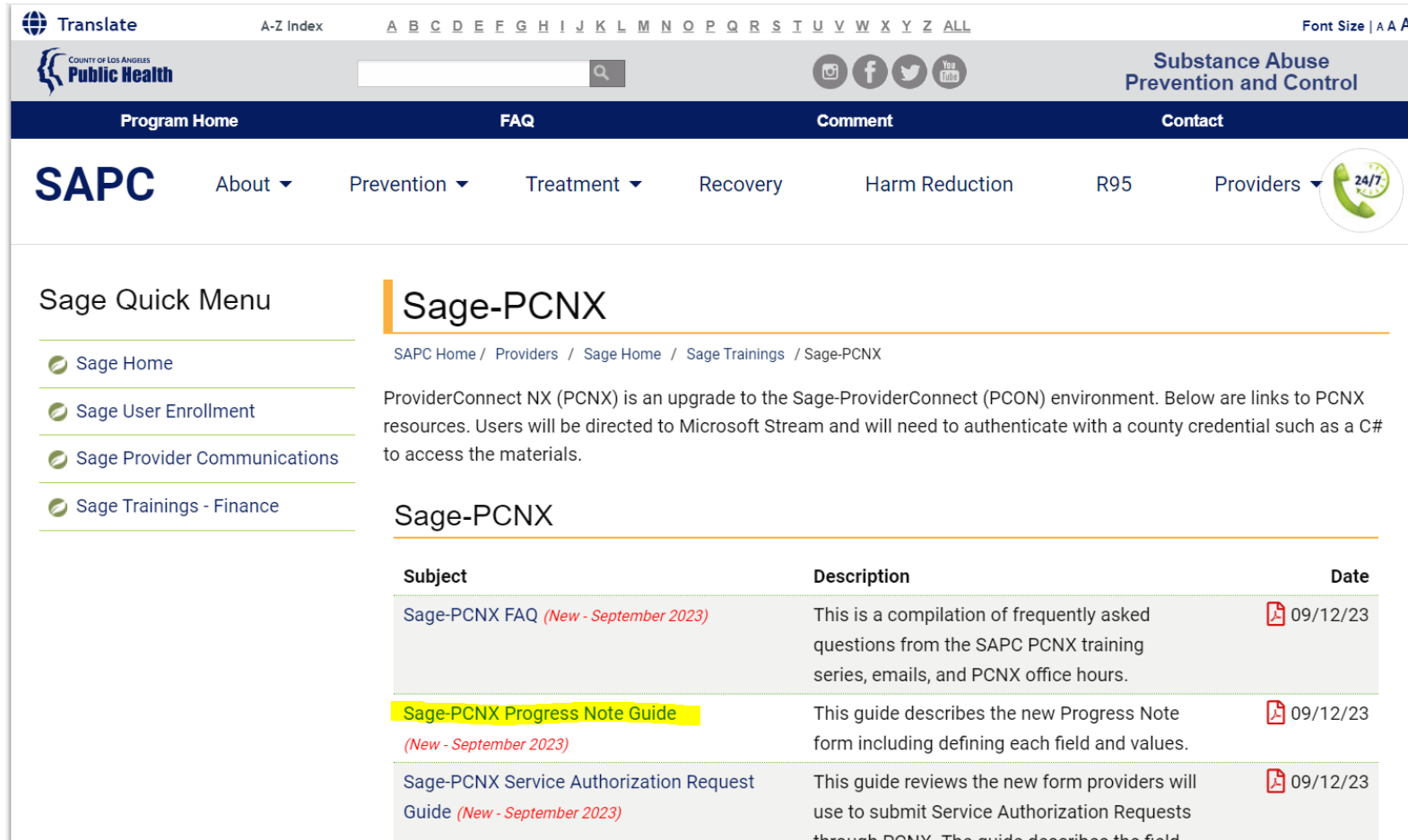
Under the 'Clinical' category, there is a section titled 'Clinical Forms and Documents - Treatment Services Related'. This section contains a table with the following data:

Subject	Date
Progress Note (New - September 2023)	09/11/23
Checklist of Required Documentation for Utilization Management - Sage Version 5.0	03/06/23
ASAM Assessment Requirements	03/06/23
ASAM Screener for Youth and Young Adults	10/20/22
Problem List-Main	07/10/23
Problem List Addendum (Additional Problems)	07/26/22
Eligibility Verification and Member Authorizations	12/02/21
Patient Handbook and Orientation Video Acknowledgment Form	07/29/20

At the bottom of the table, there is a link: [For more languages, click here](#).

For detailed instructions on completing the new Progress Note form please see the Sage-PCNX Progress Note Guide

<http://publichealth.lacounty.gov/sapc/providers/sage/sage-pcnx.htm>



The screenshot shows the Sage-PCNX website interface. At the top, there is a navigation bar with 'Program Home', 'FAQ', 'Comment', and 'Contact'. Below this is a secondary navigation bar with 'SAPC', 'About', 'Prevention', 'Treatment', 'Recovery', 'Harm Reduction', 'R95', and 'Providers'. A 'Sage Quick Menu' is on the left, listing 'Sage Home', 'Sage User Enrollment', 'Sage Provider Communications', and 'Sage Trainings - Finance'. The main content area is titled 'Sage-PCNX' and includes a breadcrumb trail: 'SAPC Home / Providers / Sage Home / Sage Trainings / Sage-PCNX'. A paragraph explains that ProviderConnect NX (PCNX) is an upgrade to the Sage-ProviderConnect (PCON) environment. Below this is a table of Sage-PCNX resources.

Subject	Description	Date
Sage-PCNX FAQ <i>(New - September 2023)</i>	This is a compilation of frequently asked questions from the SAPC PCNX training series, emails, and PCNX office hours.	09/12/23
Sage-PCNX Progress Note Guide <i>(New - September 2023)</i>	This guide describes the new Progress Note form including defining each field and values.	09/12/23
Sage-PCNX Service Authorization Request Guide <i>(New - September 2023)</i>	This guide reviews the new form providers will use to submit Service Authorization Requests through PCNX. The guide describes the field	09/12/23

Secondary Sage Users onboarding period for Progress Note

- Secondary Sage Users will need to work with SAPC to submit and have reviewed for approval a single Progress Note form.
- There will be a 60-day grace period starting from the lift of the blackout (9/12/23) during which SAPC will continue to accept documentation on a previously approved Misc. Note Template.
- Progress Note form submissions may be emailed to sapc.qi.um@ph.lacounty.gov for review.

Tips for documenting in new Progress Note form

*The following Service Types are options listed under the new Progress Note:

- Assessment
- **Care Coordination**
- Case Conference/Review
- Collateral Contact
- Consultation
- Contingency Mgmt- UDT Stimulant Positive
- Contingency Mgmt- UDT Stimulant Negative
- Counseling
- **Discharge Planning/Summary**
- Drug Testing
- Education
- **Medical Necessity Justification**
- Medication Handling/Safeguarding
- Med Services - Admin and Observation
- Med Services- Training and Support
- **Medication Services (MAT)**
- **Naloxone Handling/Distribution**
- No Show
- Other
- Peer Services- BH Prevention Education
- Peer Services- Self- Help
- Peer Support Services-Plan of Care
- Prenatal Care, at risk assessment
- **Problem List-Treatment Plan Development/Review**
- Recovery Services- Community support
- Recovery Services- Psychosocial Rehab
- Residential-Mental Health Services
- Residential-Physical Health Services
- Residential- Support Services
- Residential- Therapeutic Services
- Therapy
- Screening

Residential Re-Authorizations for Patients Experiencing Homelessness



Residential Re-Authorizations for Patients Experiencing Homelessness

- Patients experiencing homelessness at the time of admission to residential treatment are at increased risk of returning to problem substance use if they do not have a place to stay following discharge
- Providers should establish a housing plan for patients experiencing homelessness during their residential admission during the so that patients are discharged with a place to stay after discharge.
- SAPC recognizes that successful housing plans are more feasible for patients who are completing residential treatment as compared with patients who leave against treatment advice.

Residential Re-Authorizations for Patients Experiencing Homelessness

- SAPC Utilization Management criteria for approval of requests for continued residential admissions for patients experiencing homelessness who do not have a place to stay includes the following:
 - The patient’s homelessness status is appropriately documented in CalOMS, on a current problem list finalized/signed by an LPHA (required every 30 days), and/or documented within the Patient’s EMR
 - The patient agrees to ongoing residential admission and treatment
 - The provider has documented their efforts to establish a post-discharge housing plan for the patient
 - The above is documented within a (Medical Necessity Justification) Progress Note that is submitted alongside the request for residential level of care reauthorization

Discharge Planning for PEH

Within three (3) calendar days of admission, providers must initiate the following:

1. Develop a housing plan

2. Engage in Problem-Solving

- Identify options of maintaining current housing
- Identify immediate and safe housing alternative within patient's family.

3. Coordinated Entry System (CES)

- Conduct CES Triage Tools if patients have not completed one or existing information needs update
- CES Triage Tools are based on the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT)

4. Point of Contact in the Homeless Management Information System (HMIS)

5. Assist in Document Readiness

Reminder: Initial Engagement Authorizations for Non-Residential Levels of Care



Initial Engagement Authorizations for Non-Residential Levels of Care

- **Submit a Full (Standard) Authorization When Medical Necessity Has Been Established**
 - No need to wait 30/60d before submitting a full authorization request, but provides flexibility for patients
- **For initial engagement authorizations prior to establishing medical necessity**
 - Make explicit via designated PCNX radio button
 - Conduct an ASAM assessment when the patient is ready to participate, prior to submitting the auth request for the balance of the authorization duration



See DHCS Behavioral Health Information Notice (BHIN) 23-001:

<http://www.dhcs.ca.gov/Documents/BHIN-23-001-DMC-ODS-Requirements-for-the-Period-of-2022-2026.pdf>

Authorization Periods – Patients Aged 20 and Under or PEH



For **NON-RESIDENTIAL SERVICES**, initial authorizations for patients **aged 20 and under** and **People Experiencing Homelessness (PEH)** will be set at 60 days while they are being engaged and medical necessity is being established.

1

Initial 60-Day Engagement Authorization Period

- Patient must be LA County Resident
- Must meet SAPC Financial Eligibility requirements
- **Must meet age requirement of being 20 or under**
- **Documentation of homelessness status is required (if applicable)**
- Does NOT need to meet medical necessity

2

New Authorization Request submitted following initial 60-day authorization. In this example, the second authorization would begin Dec 22, 2023 and provider will have 7- or 14-days (depending on age of patient) to finalize the ASAM assessments and 30 days to submit all necessary documentation to establish medical necessity, as per current requirements.

Providers:

- Should engage patient to try to complete ASAM assessment and establish medical necessity throughout the initial 60-day authorization, but if this is not possible, the timelines for ASAM assessments and establishing medical necessity are the same as previously:
 - 7- or 14-days to complete ASAM assessment upon the end of the initial 60-day authorization period depending on clients who are 21 and over (7-days) or aged 20 and under (14-days); and
 - 30 days to submit all documentation to establish medical necessity and submit complete member authorization.

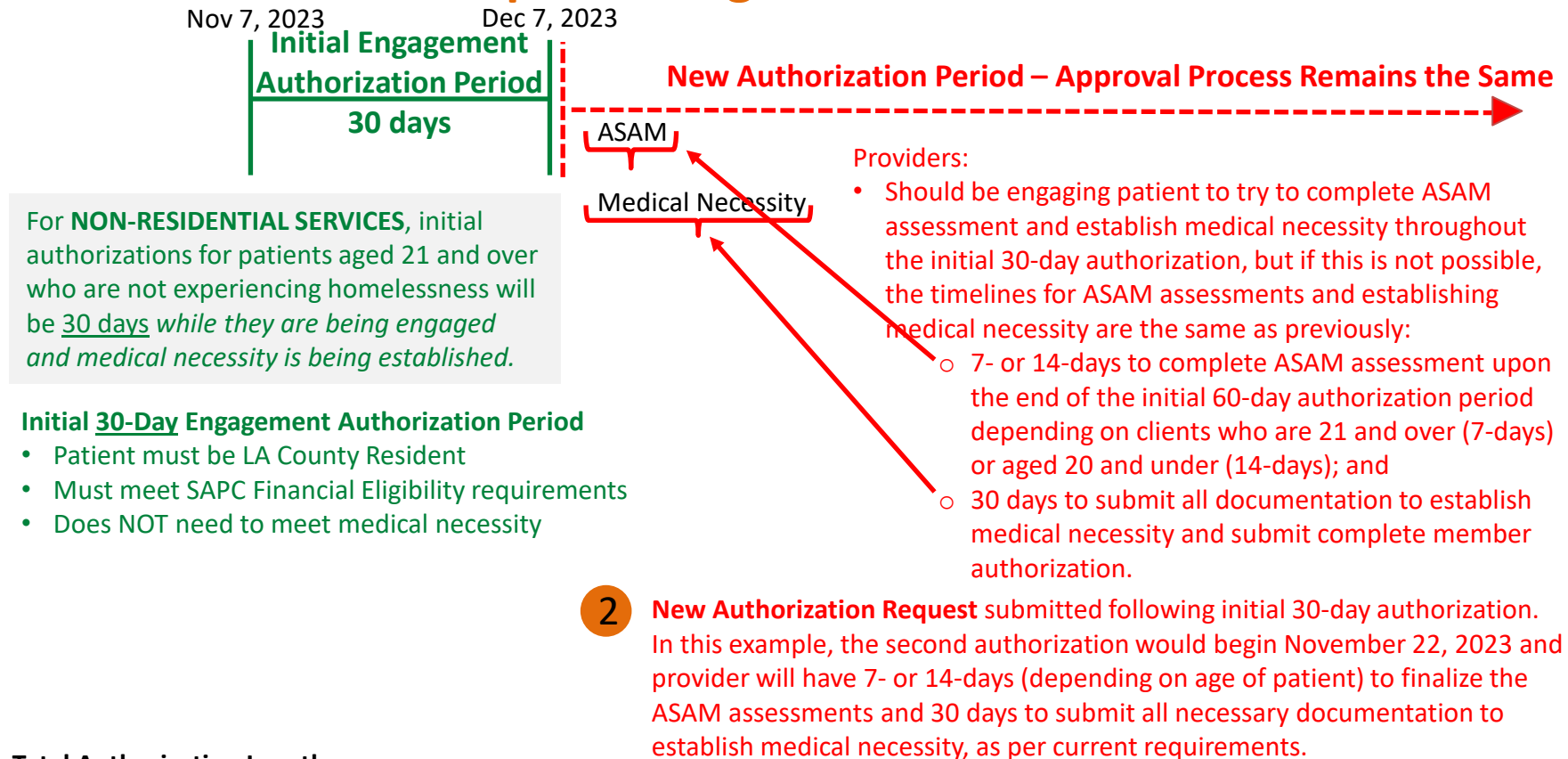
Total Authorization Length

- **Outpatient Services*** → 2 months for the initial authorization period for those aged 20 and under and PEH, and then 4 months for the new authorization once medical necessity is established (in this example, it would end on April 22, 2024)
- **OTP Services**** → 2 months for the initial authorization period for those aged 20 and under and PEH, and then 10 months for the new authorization once medical necessity is established (in this example, it would end on Oct 22, 2024)

*Total time will equal 6 months for outpatient services

**Total time will equal 12 months for OTP services

Authorization Periods – All Other Patients Aged 21 and Over Who Are Not Experiencing Homelessness



For **NON-RESIDENTIAL SERVICES**, initial authorizations for patients aged 21 and over who are not experiencing homelessness will be 30 days while they are being engaged and medical necessity is being established.

Total Authorization Length

- **Outpatient Services*** → 30 days for the initial authorization period for those aged 21 and over who are not homeless, and then 5 months for the new authorization once medical necessity is established (in this example, it would end on April 22, 2024)
- **OTP Services**** → 30 days for the initial authorization period for those aged 21 and over who are not homeless, and then 11 months for the new authorization once medical necessity is established (in this example, it would end on Oct 22, 2024)

*Total time will equal 6 months for outpatient services

**Total time will equal 12 months for OTP services

PCNX Authorization Requests

SERVICE AUTHORIZATION REQUEST
Submit Discard Add to Favorites

Member Service Authorization

FY 23/24+ Authorizations

Member Service Authorization 21-40

Care Manager

Diagnosis

Comments

Provider Search

Doc Request Date

Online Documentation

▼
Brief Member Review
Member Authorization History

Authorization Number

Initial or Continuing Authorization ?

Initial
 Continuing

Funding Source Authorization Is For *

Select

Begin Date Of Authorization *

T

Y

Provider To Be Authorized

End Date Of Authorization *

T

Y

Contracting Provider Program *

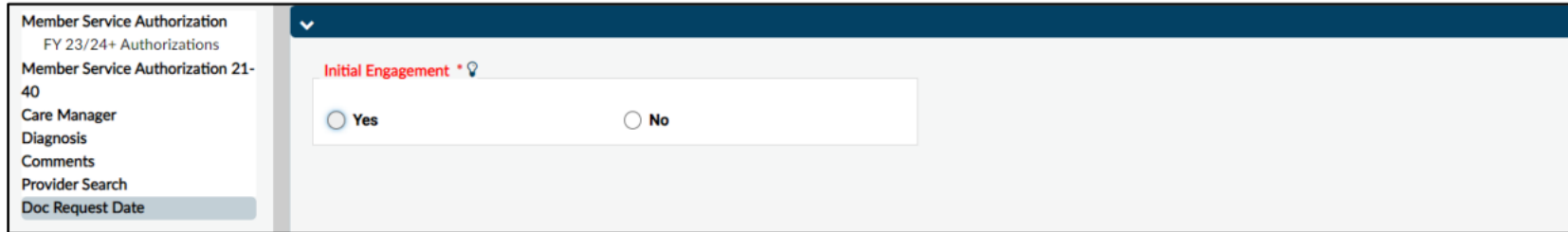
Select

Current Authorization Status *

Approved
 Denied
 Pending

<http://publichealth.lacounty.gov/sapc/providers/sage/sage-pcnx.htm>
[Sage-PCNX Service Authorization Request Guide](#)

PCNX Authorization Requests



Doc Request Date	
Initial Engagement	<p>Required.</p> <ul style="list-style-type: none"> Select Yes if the authorization is a Non-Residential initial authorization where the patient is in the initial assessment period and medical necessity has not yet been established.
	<ul style="list-style-type: none"> Select No if <ol style="list-style-type: none"> This is a Residential Authorization This is a Withdrawal Management Authorization or Medical necessity has been established

<http://publichealth.lacounty.gov/sapc/providers/sage/sage-pcnx.htm>
[Sage-PCNX Service Authorization Request Guide](#)

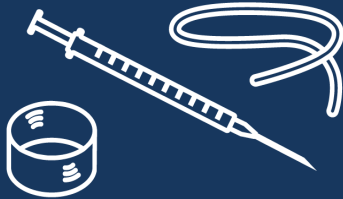
Lowering Barriers to Care
***Bidirectional Referrals Between Harm
Reduction & Treatment Programs***
R95 Capacity Incentives 2F-1 & 2F-2



Better Blending Treatment & Harm Reduction

- **We know recovery is a continuum, but the separation and programmatic divide between treatment and harm reduction services is often wide and needs to be addressed to better match the continuum of SUD services with client experience.**
- **Better integrating treatment and harm reduction services within agencies is both a cultural and operational issue, with the cultural issue being the more challenging to address.**
 - Achieving this goal will require addressing this from both angles and will require agency-level interventions on top of what SAPC focuses on given that agencies have different cultures and agency leadership know their culture best.
- **Ingredients for culture change at the agency-level**
 1. Knowing what we're dealing with – Opening the door for discussions to explore staff thoughts/feelings around this topic (e.g., individual/supervision/staff meetings, office hours, etc.) --> **ESSENTIAL FOCUS!**
 2. Leadership making the end goal clear – Aligning the agency and staff
 3. Evaluating progress – How do we know when treatment and harm reduction service are more integrated?
 4. Adjusting approaches as needed – Our evaluations will allow us to modify our interventions to more effectively achieve this integration

Harm Reduction Services



**Harm Reduction
Supplies Access**



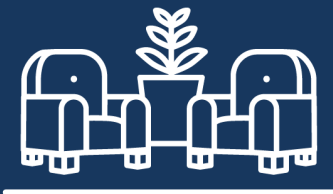
**Syringe Exchange &
Disposal**



**Naloxone and
Test Strips**



**Medications for
Addiction Treatment**



Drop-In Centers



**Linkage to Housing
Services**



Pharmacy Access



**Referrals for Needed
Services**

- **GOAL** → Meeting people where they are, both figuratively and literally
 - While brick and mortar locations are needed, mobile services that go out to people who are unlikely to go to brick and mortar locations are also needed

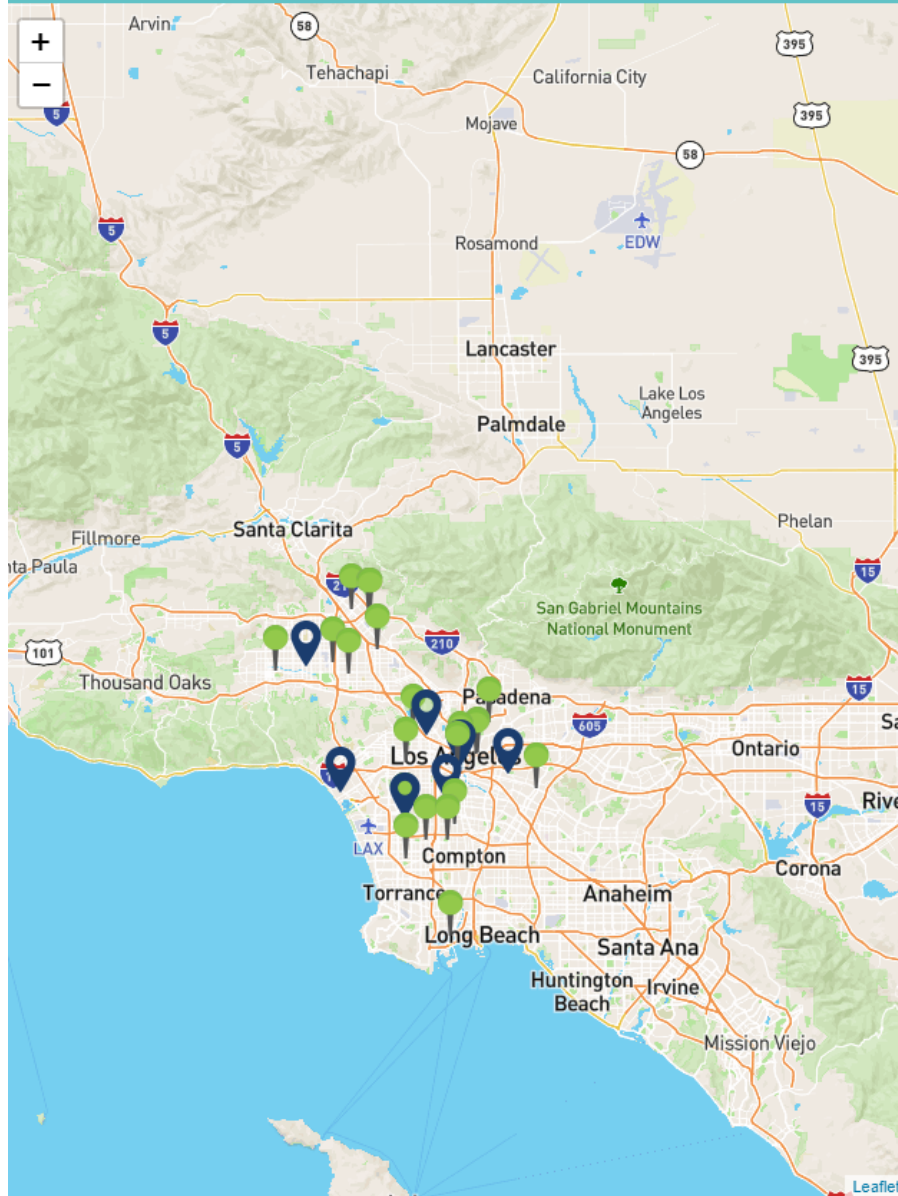
HARM REDUCTION SYRINGE SERVICE PROGRAMS

Harm Reduction Syringe Services Programs

Harm reduction syringe services programs provide access to naloxone, safer injection and smoking supplies, and education which:

- Reduces the risk of fatal overdose
- Reduces the risk and spread of HIV infection
- Reduces the risk and spread of Hepatitis C
- Connects people to treatment and provides a gateway to recovery

Call to find out hours and days of operation.



Finding Harm Reduction Services

Engagement and Overdose Prevention (EOP) Hubs

The Engagement and Overdose Prevention (EOP) Hubs are LA County contracted syringe service providers who provide harm reduction services, peer-led education, and peer-led support services. Harm reduction services include conducting syringe exchanges, providing safer use supplies including safer smoking equipment, distributing naloxone overdose reversal kits, and connecting participants to other important services and programs such as:

- Education about overdose prevention and harm reduction practices.
- Naloxone distribution and education.
- Screening, care, treatment for viral hepatitis and HIV.
- Referrals to medications for addiction treatment, and other medical, mental health, and substance use disorder (SUD) treatment services.
- Fentanyl test strips distribution and education.





LA County EOP Hubs

[Click here to view EOP Hub Program Schedule \(PDF\).](#)

<http://publichealth.lacounty.gov/sapc/public/overdose-prevention.htm>







Los Angeles County Engagement and Overdose Prevention (EOP) Hubs Schedule

Harm Reduction Syringe Service Programs

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
 LA Community Health Project (CHPLA) 1151 N Western Blvd. Los Angeles, CA 90029 Website: http://chpla.org/ Email/Contact Info: info@chpla.org Phone: 323.380.5469 M-F 9am-5pm	Hollywood 1625 N. Schrader Blvd. Los Angeles, CA 90028 7pm - 10pm	Skid Row Downtown Los Angeles South Side of 6th St. between Wall and San Julian 9am - 11am Watts 94th & Zamora St. 9401 Zamora Ave. Los Angeles, CA 90059 3pm-5pm		South Los Angeles Spectrum Community Clinic at Drew University 1731 W. 120th St., Building M, LA, CA 90059	Hollywood 1625 N. Schrader Blvd. Los Angeles, CA 90028 (Parking lot behind LA LGBT Center) 7pm - 10pm	Skid Row Downtown Los Angeles South Side of 6th St. between Wall and San Julian 9am - 11am Boyle Heights BAART Clinic Boyle Heights 1701 Zonal Ave. Los Angeles, CA 90033 12pm-2pm	
 Asian American Drug Abuse Program (AADAP) Health Intervention Program 652 E. Manchester Blvd., Inglewood, CA 90305 Website: https://aadapinc.org/healthinterventionprogram/ Email/Contact Info: tremolds@aadapinc.org Phone: 424.331.5799 M-F 9am-5pm		660 E. Manchester Blvd. Inglewood, CA 90301 10am-5pm	BAART Medmark Clinic 11682 S. Atlantic Ave. Lynwood, CA 90262 8am-11am	West County Medical Corporation 2272 Pacific Ave. Long Beach, CA 90805 Every 1st & 3rd Wednesday 8am-10am West County Medical Clinic 100 W. Market St. Long Beach, CA 90805 Every 2nd and 4th Wednesday 10am-12pm Medmark Clinic (white van in parking lot) 11900 S. Avalon Ave. Los Angeles, CA 90059 7:30am-10am	Lawndale Medical & Mental Health Services 4023 Marine Ave. Lawndale, CA 90260 7am-10am	Hollywood Medical Clinic 5015 W. Pico Blvd Los Angeles, CA 90019 8am-11am	
 Tarzana Treatment Center (TTC) 7101 Baird Avenue, Reseda CA 91335 Website: https://www.tarzanatc.org/ Email: epacheco@tarzanatc.org Phone: 818.342.5897 M-F 9am-5pm		11770 Block of Borden Ave. Pacoima, CA 91331 (Under 118 Freeway overpass) 1:30pm-4:00pm 7500 Block of Valjean Ave. Van Nuys, CA 91406 (Between Sherman Way & Saticoy) 4:30pm-6:00pm	6800 Block of Eton Ave. Canoga Park, CA 91303 (End of block) 9:30am-11:30am 12178 San Fernando Rd. Sylmar, CA 91342 (Parking Lot of the Loyal Order of Moose) 1:00pm-3:00pm	8741 Laurel Canyon Blvd. San Valley, CA 91352 9:30am-11:00am 14500 Block of Hamlin St., Van Nuys, CA 91411 (Off of Van Nuys Blvd & Victory Blvd) 12:30pm-3:00pm			
 Bienestar Human Services East Los Angeles Storefront 5314 East Beverly Blvd. Los Angeles CA 90022 Website: https://www.bienestar.org/syringe-exchange/ Email: ejalayyer@bienestar.org Phone: 866.590.6411 M-F 10am-2pm & 4pm-7pm		Coastal Recovery Center 117 E. Harry Bridges Blvd. Wilmington, CA 90744 10am-12pm Highland Park 5982 Arroyo Dr. Los Angeles, CA 90042 3:30pm-5pm		DTLA Olvera St. 527 N Spring St. Los Angeles, CA 90012 4:00pm-6:00pm	Tavarua 8207 Whittier Blvd. Pico Rivera, CA 90660 10:30am-12:00pm Lincoln Heights Corner of Alhambra Ave & Johnston St. Los Angeles CA 90031 3:30pm-5:00pm		

Los Angeles County Engagement and Overdose Prevention (EOP) Hubs Schedule

Harm Reduction Syringe Service Programs

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
 Homeless Health Care Los Angeles (HHCLA) Center for Harm Reduction 512 East 4th St. Los Angeles, CA 90013 Website: https://www.hhcla.org/ Email/Contact Info: trainingandeducation@hhcla.org Phone: 213.617.8408 Sun-M 8:30am-3:30pm	 Center for Harm Reduction 512 East 4th St. Los Angeles, CA 90013 Sun-M 8:30am-3:30pm						
 Venice Family Clinic Common Ground at Judy and Bernard Briskin Center 622 Rose Ave., Venice, CA 90291 Website: https://venicefamilyclinic.org/ Email/Contact Info: VFCInfo@mednet.ucla.edu Phone: 310.314.5480 M-F 9am-5pm		 Common Ground at Judy and Bernard Briskin Center 622 Rose Ave., Venice, CA 90291 M-F 9am-5pm					
 Homeless Outreach Program Integrated Care System (HOPICS) 5849 Crocker St. Los Angeles, CA 90003 Website: https://www.hopics.org/ Email/Contact Info: harmreduction@hopics.org Phone: 323.432.4399 M-F 9am-5pm		 HOPICS 5849 Crocker St. Los Angeles, CA 90003 M-F 9am-5pm					

*Scheduled hours are subject to change without notice. Please contact the participating agency to confirm service hours and locations.

This program is supported in part by the County of Los Angeles, Department of Public Health. Please contact Substance Abuse Prevention and Control (SAPC) at harmreduction@ph.lacounty.gov

MOU: Required Components for Bidirectional Referrals Between Harm Reduction & Treatment Programs

1. Establish Clear Communication Protocols

- Designated key points of contact with scheduled meetings

2. Defined Referral Pathway

- Agreed-upon process for low-threshold initiation of services

3. Cross-Agency Training

- Enhance mutual understanding of services

4. Information Security

- Compliance with all applicable privacy regulations

5. Care Coordination

- Ensure coordination of care for individuals served by each agency.

6. Service Recipient Feedback

- Feedback regarding participant experiences (evoking successes and information about barriers) is obtained and applied to quality improvement

Essential Contact Info

- For a specific authorization question, contact the care manager named in SAGE
- UM General number: **(626) 299-3531** and email: SAPC.QI.UM@ph.lacounty.gov
- Netsmart Helpdesk for SAGE technical problems/questions: **(855) 346-2392**
- Phone Number to file an appeal: **(626) 299-4532**
- Providers or patients who have questions or concerns after receiving a Grievance and Appeals (G&A) Resolution Letter should contact the **G&A number** at **(626) 293-2846**

Clarification

- Phone Number to follow-up with an appeal after receiving a resolution letter: **(626) 293-2846**

Thank You!



“The opposite of addiction is not sobriety; the opposite of addiction is **connection.”**

- Johann Hari