

## Sage Provider and Stakeholder Inquiries

Prov	ProviderConnect - General		
1.	What do I do if I have a general issue to resolve? (Added 12/8/17)	The first step in any inquiry about Sage, after asking colleagues and super users, is to call the Sage Help Desk at 855-346-2392 and get a case #. You may also use the online portal to enter a ticket. The Sage Help Desk online case submission link is: <a href="https://netsmart.service-now.com/plexussupport">https://netsmart.service-now.com/plexussupport</a>	
2.	Who do we talk to regarding technology and legal issues related to Sage?	Please send your questions to <a href="mailto:sage@ph.lacounty.gov">sage@ph.lacounty.gov</a> . Your question will be reviewed and the appropriate staff will provide a response.	
3.	Getting an error message saying "too many people are logged in" or the app cannot be accessed. (Updated 1/19/18)	This issue is related to the fact that there is a maximum number of users that can be on the system at any one time. If you receive this message, please first try logging in again after a few minutes. If the problem persists, the Netsmart Sage Help Desk can help triage these issues and resolve them. See FAQ #1 above on how to contact the Sage Help Desk.	
4.	Will the digital signature in our EHR suffice or do we need to submit a wet signature scan to Sage?	Digital signatures are allowed as long as they meet the security requirements. For more information, please visit the SAPC Sage website for a information on "Digital vs. Wet Signatures in Sage":  http://publichealth.lacounty.gov/sapc/Sage/Documentation/DigitalWetSignatures.pdf	
5.	The Sage system's time out function closes too soon and I have lost all the data I inputted. Can the timeout function limit be adjusted on Sage?	The timeout function is set to 15 minutes based on County security guidelines and cannot be changed. It is recommended that you periodically save your documentation in a draft state if you are unable to complete your documentation.	
6.	What do we do when financial eligibility information is missing or incorrect? (Updated 1/19/2018)	<ul> <li>NOTE: The Sage Financial Eligibility form MUST be completed for each admission.</li> <li>Go to the Financial Eligibility section and complete eligibility form.</li> <li>If Financial Eligibility is outdated or from a previous episode and is no longer valid, simply update the information to reflect the current information.</li> <li>If Financial Eligibility has incorrect or missing information, and cannot be resolved via the steps above, submit a Netsmart Sage Help Desk ticket via the portal and include the following information.</li> <li>a. SUBJECT – Request to Update Financial Eligibility Information</li> <li>b. Requestors Name:</li> <li>c. Facility:</li> <li>d. Patient ID:</li> <li>e. Patient Name:</li> <li>f. Incorrect / Missing Information:</li> <li>g. Correct Information:</li> </ul>	
7.	In regards to billing, Sage shows multiple billing codes for the same service in the drop down menu. Which codes should we use? (Updated 1/19/18)	Codes should be selected based on the client's level of care and demographics. See the SAPC Rates Matrix for the specific CPT codes for each level of care at:  http://publichealth.lacounty.gov/sapc/NetworkProviders/FinanceForms/RatesAndStandards  MatrixFY1718.pdf	

## Sage Provider and Stakeholder Inquiries Last Updated 12/07/17

# Question Answer

ProviderConnect - Authorization			
8.	Our ASAMs and service requests sent via fax before December 1st are pending approval. Do we need to input/upload them to Sage? (Updated 1/19/18)	No, generally only authorizations after December 1, 2017 need to be entered into Sage. Authorizations submitted prior should have been electronically imported during the data conversion.  If you do not see your authorization in the Sage system for a patient that you need to document on or bill for, you should verify that you have the correct patient record. If you verify that you have the correct patient but are still unable to see the authorization, then you will have to submit the authorization in Sage. However, billing for services delivered prior to 12/1/2017 should be done in the old legacy billing system (e.g., EBS).	
9.	When do I use the Sage Service Authorization Form? (Updated 1/18/18)	Providers should complete the Sage Service Authorization Form when submitting a request for authorized or pre-authorized services only. The form is NOT needed to be completed for non-authorized services, such as Outpatient, Intensive Outpatient, Opioid Treatment Program services for adults, and Withdrawal Management for adults.  If you submit an authorization form for a non-authorized service, you will receive a notification that this authorization is Denied with the reason given as "Service Requested does not require a member specific authorization. Please utilize process for non-authorized services."	
10.	When do I use the Sage Provider Diagnosis form? (Added 1/18/17)	A patient's diagnosis MUST BE entered in the Provider Diagnosis ICD-10 Tab ONLY for ALL admissions (OP, IOP, Residential, etc.). Sage connects this diagnosis to your billing, which is a Medi-Cal requirement.  Do NOT enter a diagnosis in the diagnosis field on the ProviderConnect Authorization Form, as this will cause billing errors. The diagnosis field on the ProviderConnect Authorization Form must be left blank.	
11.	I am a Primary Sage user. What do I have to submit for approval of a non-authorized service? Is a Service Request Form needed to be submitted? (Updated 1/18/18)	There is no longer a need to use the Service Request Form, as was the case prior to Sage. Non-authorized services DO NOT require completion of a Service Authorization Form. Non-authorized services include Outpatient, Intensive Outpatient, Opioid Treatment Program services for adults, and Withdrawal Management Programs for adults.  Simply complete the required documentation (e.g. ASAM CONTINUUM assessment, Treatment Plan, Clinical Notes, etc.), begin treatment, and submit your claim to SAPC.	
12.	How can I know whether my patient has had their medical eligibility verified? (Added 1/19/18)	If your Sage user role allows you to run reports, you can run the "Client Eligibility Verification Report" for your patient. If your patient has active eligibility, you do not need to request to have it re-verified.	
13.	I have a patient that was authorized for services prior to Sage. However, I am unsure how to find the authorization in Sage. What should I do? (Added 12/7/17)	Open the client's chart. Select the Authorization tab. You will see a list of authorizations for that client from your organization. You can click on the authorization number for details.  To see all authorizations for your organization, go to the Main Menu, click on Reports, select Authorization Request Status, and click on Search by Criteria.	

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14.	What do I do if I submitted an authorization, but it is missing in Sage or has incorrect information? (Updated 1/19/18)	<ol> <li>Go to the Authorization section and verify the authorization is present and active</li> <li>If your authorization is missing:</li> <li>Complete the Financial Eligibility form</li> <li>Complete the Provider Diagnosis (ICD-10) form</li> <li>Submit an Authorization request for the remaining dates of the authorization period and upload the original, approval document you received from SAPC via the Attachments section for the client and authorization that is being requested.</li> <li>If the authorization is missing information, please enter missing information.</li> <li>If the authorization has incorrect or missing information and you are not able to edit or enter this information, submit a Netsmart Sage Help Desk ticket via the portal and include the following information.</li> <li>SUBJECT – Request to Update Authorization Information</li> <li>Requestors Name:         <ul> <li>Facility:</li> <li>Patient ID:</li> <li>Patient Name:</li> <li>Incorrect / Missing Information:</li> <li>Correct Information:</li> </ul> </li> <li>Note: The process described above is for new authorizations submitted after December 1, 2017.</li> </ol>			
Provi	iderConnect – Client Consent				
15.	I was trying to open a form in the system, and Sage is displaying a message that I do not have consent. What should I do? (Added 12/7/17)	If the client has granted consent to view their clinical record, go to the Client Consent form and verify the Provider agency(ies) selected is accurate. While patients may elect to limit the sharing of their information with one or more specific treatment Provider agencies, this may limit your ability to coordinate their care across the SAPC network. For this reason, SAPC recommends that you encourage your client to consider consenting to sharing their clinical information across the SAPC network (e.g. "All Users" option).			
16.	Do we need a release of information for everything? (Added 1/19/18)	You need to have patient's consent to speak and exchange information with other providers in the SAPC network about their previous care, to view previous records, and when attempting to coordinate services with other providers. Since SAPC is the administrative entity, you DO NOT need a release of information to speak with or share information with SAPC. Providers CANNOT withhold information from SAPC for patients within SAPC's jurisdiction.			
17.	Is there a mechanism to revoke a client consent on Sage? (Added 1/19/19)	Yes, if a patient revokes consent, you should change the consent settings in Sage under the <b>Consents</b> tab.			

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18.	Do we physically have to upload consent and release forms? (Added 1/19/18)		Yes, since these forms need to contain the patient's signature, they need to be uploaded into Sage.
19.	What documents do I need to "upload" in Sage when submitting an authorization request or in order to have my patient's edibility verified? (Added 1/18/18)		You need to upload the consent forms, treatment plan with patient's signature (if available), Youth ASAM (if applicable), Youth At-Risk Determination Tool (if applicable). Other forms, including Financial Eligibility Form, Provider Diagnosis (ICD-10) form, ASAM CONTINUUM and Authorization should all be completed within Sage.
Prov	ProviderConnect – Client Search		
20.	If a client is missing (e.g., you cannot see them in the system), please follow the steps below:  1. Search for the client by Lookup Client and Add New Client/Client Search.  - "Add New Client/Client Search" searches the entire SAPC Providers Network  - "Lookup Client" searches within your organization  TIP: If client is not found with very specific search criteria, limit the amount of information entered to expand your search and confirm the client is not found.  2. If you cannot find your client after taking these steps, manually admit them.  3. If you are certain that client should be in Sage or you experience this issue multiple times, you may also enter a Netsmart Sage Help Desk ticket. When submitting the request, provide a minimum amount of protected health information to enable us to investigate the problem.		

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21.	Client or Client data is missing or incorrect. (Updated 1/19/18)	If you can see the Client, but the Client has incorrect demographic or other information:  1. Make sure to search for the client by Lookup Client and Add New Client/Client Search.  2. Review the Demographics tab and correct information if you have the access to do so.  • Some critical demographic fields, such as Name, Date of Birth and Social Security Number must be corrected by a Sage System Administrator. Other information, you are able to enter or edit yourself.  • If you are able, edit the information yourself.  • If you have an incorrect information in one of the fields that you are unable to edit yourself, please Contact the Netsmart Sage Help Desk via the portal and submit the following information.  a. SUBJECT – Request to Update Demographic Information b. Requestors (Contact) Name: c. Facility: d. Client ID: e. Client Name: f. For each field of incorrect or missing data include the following  — The specific incorrect / missing Information:  — The correct Information you want added/edited:		
22.	What do I do if a client is found on Sage, but I cannot see any of the client information? (Updated 1/18/19)	<ol> <li>Double check to make sure that you and your agency have consent for the client in Client Consents Sage tab. If you do not have consent, then you will need to obtain the appropriate consent for your agency to see the client information and this will need to be indicated in Sage under the Consents tab.</li> <li>Note: Client Consent was not a part of the automatic conversion process as data was not available. Consent for pre-populated clients must be performed manually.</li> <li>If the step above does not resolve the issue, contact the Sage Help Desk via the portal and submit the following information.         <ol> <li>SUBJECT – Request to View Client Information</li> <li>Requestors Name:</li> <li>Facility:</li> <li>Patient ID:</li> <li>Patient Name:</li> <li>I can see Consent identified for my organization: Yes or No</li> <li>Types of information I am expecting to see information but do not:</li> </ol> </li> </ol>		

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		If you see that there is more than one record in Sage for a single client, you can request a records merge by doing the following:  1. Search for the client by Lookup Client and Add New Client/Client Search.			
23.	What should I do if a client has a duplicate record? Some have small errors (i.e. transposed birthdate, etc.) Which record should we use? If data is in both records, can these records be merged?	<ol> <li>Identify which two (or more) records need to be merged.</li> <li>Submit a Sage Netsmart Help Desk via the portal (<a href="https://netsmart.service-now.com/plexussupport">https://netsmart.service-now.com/plexussupport</a>) and submit the following information:         <ol> <li>SUBJECT – Request to have records merged.</li> <li>Requestors (Contact) Name:</li> <li>Facility:</li> <li>Client IDs of records requesting to be merged:</li> <li>Client Name(s) of records requesting to be merged:</li> <li>Client Date(s) of Birth for records requesting to be merged:</li> <li>Identify which of the records you believe to be the most accurate, if applicable:</li> </ol> </li> <li>This will be sent to SAPC for review and merging of records, as appropriate.</li> </ol>			
24.	If a patient is transferred or moved to another agency, can the patient's file be connected or merged?	Yes, the client can be found via the "Client Search" function. Each patient should only have 1 record in Sage, regardless of where they have received services or how many admissions they have had. If both treatment episodes have consent to share the records in Sage, both agencies should be able to see the records from both episodes/admission.			
Provi	iderConnect – Cutover				
25.	What Clinical Documents from the cutover period do providers need to be entered into Sage instead of uploading? (Added 12/7/17)	ASAM assessments from the cutover period can be uploaded onto Sage. All other clinical documents (e.g., Progress Notes, Treatment Plans, etc.) need to be entered into Sage			
26.	During the cutover period, what should we do with withdrawal management patients who are now in the residential treatment program? Do we submit the withdrawal management data first?  (Updated 1/19/18)	Yes. While, withdrawal management (WM) for adults is a non-authorized service, the ASAM from the WM admission will be needed to establish medical necessity for the subsequent residential admission which is an authorized service.			
27.	Why do I have to enter consents and other materials into Sage? (Updated 1/19/18)	Because not all information (Consents, etc.) existed in previous programs (Encounter Billing System, LACPRS, etc.), that information must be re-entered into Sage.			

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28.	In regards to clients who are in LACPRS but not in Sage, do we submit discharge forms to SAPC via efax?	No, all LACPRS data should be entered into Sage.		
29.	During the cut-over period, do we have to enter our data for LACPRS?	Yes, all treatment conducted during the cutover should be entered into Sage.		
30.	After the cutover, can the paper- based treatment plan be uploaded if the client is not yet in Sage?	No, all clients should be entered into Sage. You are unable to upload anything into Sage without the client being in Sage.		
31.	I am not able to find a client in the Sage system. Should we wait or go ahead and input them now? (Added 1/19/18)	It is important to search prior to creating a new record in order to avoid duplicate records for the same patient. However, if you are unable to find a patient despite searching appropriately, you should input that patient into Sage.  If you are unable to find a large number of patients, this may indicate bigger issues and in these cases, please contact the Help Desk for assistance.		
Provi	derConnect – Drug Testing	and do		
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32.	Would it be possible to update ICD-10 codes to include one for using the drug "Spice"? (Added 12/7/17)	No. The ICD-10 codes are part of a defined library of diagnoses that cannot be modified by SAPC or Netsmart.		
33.	Do we upload urine analysis results into Sage?	Sage allows for this function through scanning and attaching in Sage. However, provider should also enter the data from the testing in the Sage <b>Drug Testing</b> form.		
Provi	derConnect – Login			
34.	Sage users are not able to log in, need password resets, etc. (Added 12/8/17)	Contact the Sage Help Desk. Nearly all log-in issues have been resolved by calling this Help Desk. The Help Desk can also assist with passwords reset.		
35.	Some users were issued two C numbers. Which one should I use? (Added 12/8/17)	Please contact the Sage Help Desk.		
ProviderConnect – Sage Users/Staff				
36.	I need to be in a different Sage User Role. How do I request a change to my role permissions? (Added 12/7/17)			

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37.	One of the clinicians at my organization is not listed in Sage. What do I do? (Added 12/7/17)	Please review the onboarding/offboarding procedure available on the SAPC Sage site at http://publichealth.lacounty.gov/sapc/Sage/Sageinfo.htm . Additionally, you may contact the Help Desk to request assistance with these concerns.		
38.	How do I become a Super User?			
39.	How do we register a new employee for access to Sage?			
Prov	iderConnect – Clinical Forms (e.g. Pr	ogress Notes, Treatment Plan, Discharge, etc.)		
40.	What is the difference between a case review and case conference note types? (Added 12/7/17)	Case Review is generally an individual review. Case Conference is a review with multiple staff.		
41.	Is an LPHA signature required? (Updated 1/19/18)	An LPHA signature is required on the treatment plan and the ASAM assessment. If you write a <b>Miscellaneous Progress Note</b> to override a level of care determination on the ASAM, an LPHA signature is required on that note as well.		
42.	What signatures do I need on a Treatment Plan? (Added 12/7/17)	Treatment Plans require a patient signature and an LPHA signature. If an SUD counselor completes the initial draft of the Treatment Plan, it must be finalized by an LPHA. Whereas the SUD counselor and LPHA can electronically sign the Treatment Plan by submitting a draft of Treatment Plan (for SUD counselors) and finalizing the Treatment Plan (for LPHA's), the patient signature must be a "wet" signature that requires a physical signature by the patient that must then be uploaded into Sage, once the patient signature is obtained.		
43.	Clarify what progress notes and treatment plans do we need to input into Sage? We are unsure of what time period during the cut over have been uploaded by SAPC.	All treatment conducted on and after December 1, 2018, must be entered into Sage. Also,		
44.	What documents need to uploaded to Sage? Treatment plans? Progress notes?	see FAQ #22 above.		
45.	Can the update on the Treatment Plan be edited once it is finalized?	No. Once finalized, no documented can be edited.		

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46.	If there are no changes during the treatment plan review, do I need to write a progress note about the review? For treatment plan updates, do I create a whole new treatment plan? (Added 1/19/18)	Yes. You must write a progress note documenting a treatment plan review – otherwise there is no evidence that a treatment plan review was ever performed. The <b>Miscellaneous Progress Note</b> form should be used for this purpose. Under "type" section, select "Treatment Plan Review/Development".  When conducting a treatment plan update, a new treatment plan form must be created even if you intend to continue with the same treatment goals.			
47.	When the staff submit progress notes for me to review and I hit "final", there are no other edits that can be made. Who is responsible for that progress note submission, the LPHA or the counselor? (Updated 1/19/18)	Counselors and LPHAs are able to both save in draft state and finalize their own progress notes.  If an LPHA wants to be review/edit a counselor's note, they should request the counselor to save the note in draft state and then finalize it upon review. This is the recommended workflow for progress notes documenting treatment plan reviews.  Based on recent guidance given by the state, Licensed-Eligible LPHA's will also soon be able to finalize their own progress notes.			
48.	When entering progress notes into Sage using GIRP/BIRP/SIRP/SOAP formats for any service other than groups, the note would not let me enter start or end time of the session. What do I do? Won't this affect billing? (Added 1/19/18)	Yes, start and end times are needed on your documentation. This has been identified as a needed change to these note types and SAPC is discussing this change with Netsmart. In the interim, please enter this information in the text box portions of the note.			
49.	How can we change information and /or update the Treatment Plan in Sage? (Added 1/19/18)	Once a note is finalized, it cannot be edited by users. To update the treatment plan, you should re-submit a new <b>Treatment Plan</b> form with the correct or updated information.			
50.	For secondary Sage users, does the treatment plan need to be on Sage and our own EHR? (Added 1/19/18)	Secondary Sage users enter treatment documentation in their own EHR. However, your agency's Treatment Plan template needs to first be approved by SAPC. Treatment Plan templates should be emailed to Dr. Gary Tsai ( <a href="mailto:gtsai@ph.lacounty.gov">gtsai@ph.lacounty.gov</a> ). If your treatment plan is not yet approved by SAPC, you will need to enter the treatment plan in Sage.  Additionally, you will need to upload your treatment plan when submitting reauthorization requests or requests for re-determination of eligibility.			
51.	What information is expected in the discharge summary on Sage?	Please refer to the Provider Manual for required information on the discharge summary: http://publichealth.lacounty.gov/sapc/NetworkProviders.htm			

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52.	On the discharge template is the final discharge date date the template is comp. The last face to face enco	? The leted?	The last face to face encounter is considered the final discharge date.	
	On the treatment plan there is no place to enter goal target dates (Added 1/19/18)		The Sage Treatment Plan form has a number of areas where you enter dates for each goal.	
			The "Treatment Start Date" is the date that you implemented that particular goal.	
53.			The "Target Date" field is where you enter the goal target dates in Sage.	
$ldsymbol{ld}}}}}}$			The "Complete Date" is when that particular goal was completed.	
54.	Why do I have to complete the Clinical Contact Form? (Updated 1/19/18)		The Clinical Contact Form allows SAPC to know who to contact at the Provider site if they have questions or information about the services being requested. Without this, SAPC staff may not be able to process your authorization request in a timely manner if follow-up with the provider is necessary and your service approval could be delayed or denied.	
55.	When printing a treatment client signature and uploat back into Provider Connecthere a specific signature the printed form where the should sign?  (Added 12/7/17)	ding it ct, is line on	Currently, there is not a specific line. SAPC will consider adding a line in the future. However, in the interim, please have the Counselor and LPHA sign electronically, then print the form to have the patient sign it at the bottom, then scan as an electronic document and upload in Sage.	
	The ASAM CONTINUUM	is	The ASAM CONTINUUM uses these biometric values as part of its placement algorithm. If you do take vitals and use the GAF, you can enter these values into the ASAM CONTINUUM.	

If your agency does not take vitals nor use the GAF, please use the following values as

asking me to enter VITALS and GAF. However, my agency

doesn't take vitals nor do we use

required, what should I enter?

the GAF. Since these are

(Added 1/19/18)

56.

your default entries:

Blood pressure:

Systolic (the "high number") = 110

O Diastolic (the "low number") = 70

Global Assesment of Functioning (GAF) = 80

Heart Rate = 60 beats per minute