



**Department of Health Services**  
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Director

**Divisions**  
Administration  
Behavioral Health  
Primary Health  
Public Health

## County of Sacramento

### INFORMATION LETTER

**Date:** February 25, 2026

**To:** All Contracted SUPT Residential Treatment Providers

**From:** Alexandra Rechs, LMFT  
Quality Management Program Manager, Behavioral Health Services

### **Subject: Residential Treatment Diagnosis Requirements**

Effective immediately the following changes will be made to SUPT Residential Treatment Diagnosis Requirements:

1. Residential Treatment Providers (including Withdrawal Management) are not permitted to use Z03.89 or any of the Z55–Z65 codes when claiming the daily rate.
2. To correct these denials, a diagnosis update must be completed using an approved F-code from the list in the [DMC-ODS Billing Manual](#), beginning on page 111. When selecting the replacement for Z03.89 or any of the Z55–Z65 codes, please review the assessment information documented in the ASAM and BQUIP for each member. Your LPHA should determine the most appropriate diagnosis from the approved list based on the information gathered—and only if clinically appropriate to the service provided.
3. To avoid future recoupments, timely review of denials is essential. Please remember that corrections must be completed within 15 months, and the EHR team requires approximately 4 weeks to process replacements. Please run and work on the *Program Denials Report* in order to work these denials. We encourage you to take prompt action to ensure compliance.

**If you need assistance:**

- **For denial corrections, please contact [BHS-EHRBilling@saccounty.gov](mailto:BHS-EHRBilling@saccounty.gov)**
- **For documentation-related questions, please contact [QMInformation@saccounty.gov](mailto:QMInformation@saccounty.gov)**