



# Payment Reform Value Based Incentive FY 25-26

## Bilingual Bonus for Certified Proficient Direct Service Staff

July 16, 2025

Christina Villegas, Manager  
Equitable Access Section  
Strategic and Network Development  
Substance Abuse Prevention and Control (SAPC)



# Agenda

## Welcome & Introduction:

- Christina Villegas, Section Manager, Equitable Access Section
- Samuel Kamyszew, TransPerfect

## Description of Bilingual Bonus

- FY25-26: Changes/Updates
- Invoice Submission

## TransPerfect Language Assessment Portal

## Questions and Close Out

## Eligible Staff:

- **LPHA Direct Service Bilingual Staff** –licensed and licensed eligible psychologists, clinical social workers, marriage and family therapists, and clinical counseling practitioners.
- **SUD Counselor/Peer Direct Service Bilingual** – registered/certified SUD counselors and certified peer support specialists.
- All staff must be onboarded onto Sage.



## Bilingual Bonus for Certified Proficient Direct Service Staff DELIVERABLES

Used solely for Los Angeles County Threshold Languages: Arabic, Armenian, Cambodian, Chinese (Simplified), Chinese (Traditional), Farsi, Japanese, Korean, Russian, Spanish, Tagalog, and Vietnamese.

**Prioritized Languages: American Sign Language, Spanish, and Chinese Languages.**

Language Access Deliverables	Description
Quarterly Bilingual Invoice and Submission Form	SAPC developed template outlining provider use of bilingual bonus. Quarterly Value-Based invoice
Verification of Staff Bilingual Bonus Payment	Documentation that bilingual bonus was paid to staff must be submitted with submission form: <ul style="list-style-type: none"><li>• General ledger</li><li>• Pay stub with bonus/differential highlighted</li></ul>
Proof of Language Proficiency	Certificate or other SAPC-approved documentation, only submitted once per staff.

## Invoice Submission:

- For FY 25-26, SAPC will **only** be able to reimburse bilingual bonus invoices for Q1 through Q3.
  - SAPC will continue to cover the cost of language proficiency until end of FY
- Providers will need to cover the reimbursement bonus for their bilingual staff for Quarter 4 (April-June) for FY 25-26.
- While Quarter 1-Quarter 2 reimbursement deadlines remain the 10<sup>th</sup> of the subsequent month, for FY 25-26, the Quarter 3 invoice submission deadline will be March 31<sup>st</sup>.
- SAPC will not accept any late submissions. Agencies may only submit for the current reporting quarter. Invoices from past quarters will NOT be accepted.

Quarterly Submission Deadline	Payment Released	Quarter Covered
October 10 <sup>th</sup>	November 26 <sup>th</sup>	July-September 2025
January 10 <sup>th</sup>	February 26 <sup>th</sup>	October – December 2025
March 31 <sup>st</sup>	May 26 <sup>th</sup>	January – March 2025
N/A	N/A	Not reimbursed by SAPC

# FY 25-26 Changes and Updates




- **Finance Document Update:**

- New VBI Year 3 Invoice Form
- Submit with your supporting documentation

- **Electronic Submission**

- Quarterly Invoice & Submission form (excel) must be signed and submitted in its original format (excel)
- Supporting Documentation should be submitted for all staff receiving bilingual bonus in one PDF with Names Highlighted.
- Use the following naming convention for each submission: **Agency Name-Name of Document-Quarter Name**
- Sample: **Recovery Inc-Bilingual Invoice-October-December Q2**



Fiscal Year 2025-2026  
**VBI Year 3 Invoice Form**

Substance Abuse Prevention and Control  
Value-Based Incentives (VBI) Invoice Form  
Fiscal Year 2025-2026

Activity Name	Choose an option
Total Funding Requested	

Provider Agency Signature and Attestation


I attest that the information submitted in this invoice and supporting documentation is true and factual, that our organization will use the funds as described in the Value-Based Incentives Package, and that our organization will submit the required deliverables on time to avoid recoupment. I acknowledge that we must adhere to and are subject to all the reporting, auditing, tracking, and recoupment requirements described in the Value-Based Incentives Package and the Drug Medi-Cal Organized Delivery System (DMC-ODS) Contract, as well as all applicable federal, state, and local rules and regulations, and verify that I have authorized decision-making authority to commit to the requested funds.

Agency Name		Contract Number	
Name		Signature	
Title		Date	

SAPC INTERNAL USE – Do Not Enter Information

	Reviewer Name	Signature	Date
Program Reviewer			
Finance Reviewer 1			
Finance Reviewer 2			

**SAPC** | Substance Abuse Prevention and Control



## What to expect:



Electronic Submission

Assigned SAPC Staff Member for technical assistance (TA)

Email Address has changed: [DPH-SAPC-VBI@ph.lacounty.gov](mailto:DPH-SAPC-VBI@ph.lacounty.gov)

New VBI Year 3 Invoice Form

No late or prior quarter submissions

SAPC will reimburse only Q1-Q3

# Bilingual Bonus for Certified Proficient Direct Service Staff Invoicing



## Payment Reform - Value-Based Incentives: Quarterly Bilingual Bonus Submission Form

Provider Agency Name:

Quarter Reporting:

SAPC USE ONLY DO NOT INPUT

TOTAL LPHAs (column E)  
TOTAL SUD COUNSELORS (column E)

0  
0

TOTAL FUNDING REQUESTED (column N)

\$ -

SAPC USE ONLY

Bilingual Bonus Reviewer	
Approved/Denied	
Date	

															SAPC USE ONLY	
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
BILINGUAL BONUS STAFF NAME (FIRST, LAST)	POSITION TITLE	START DATE (MM/YYYY)	SITE ADDRESS (street #, name and city)	TYPE OF BILINGUAL BONUS	THRESHOLD LANGUAGE	PROFICIENCY EXAM/ASSESSMENT COMPLETED	DATE OF EXAM/ASSESSMENT	LEVEL OF PROFICIENCY	BACKUP DOCUMENTATION SUBMITTED	WHAT TYPE OF DIRECT SERVICE WAS PROVIDED?	NUMBER OF MONTHS	BILINGUAL BONUS AMOUNT	QUARTER TOTAL	Column G Validated (Y/N)	Column P Validated (Y/N)	Column Q Validated (Y/N)
John Doe	counselor	10/2024	1234 Sherman Way	counselor	Farsi	YES	7/23/2024	ADVANCED	YES	GROUP COUNSELING	2	\$100	\$ 200.00			
												FALSE	\$ -			
												FALSE	\$ -			
												FALSE	\$ -			
												FALSE	\$ -			
												FALSE	\$ -			



For partial reimbursement months, please contact your SAPC assigned staff member for TA to unlock invoice spreadsheet.



## Usual areas of revisions

1. Pay stubs do not match invoice amount
2. When applicable, differential pay document is not included in submission
3. Pay stub or ledger does not clearly identify the bonus payment
4. Staff that receive partial bonus in any given month are billing for entire month
5. Pay period dates are not for the submission month/quarter



# TransPerfect Language Assessment Portal Demonstration

## FY25-26

## SAPC-provided Language Proficiency Examinations:

- TransPerfect will offer **ONLY** one (1) standardized oral proficiency examination per eligible staff.
- Each participating provider MUST identify one (1) Proficiency Exam User to:
  - Instruct bilingual staff on how to use portal to take exam.
  - Track staff and results for those who take exam.
  - Submit the full name and e-mail of the user to [DPH-SAPC-VBI@ph.lacounty.gov](mailto:DPH-SAPC-VBI@ph.lacounty.gov) by or before 7/30/2025.
  - The demo is recorded, and a guidebook will be provided.

### Appointment Cancellation Policy:

- Notify TransPerfect at least 24 hrs. In advance if you are unable to attend your appointment.
- "No Shows" will disqualify staff member from participating in the exam.
- TransPerfect language assessment portal will be available to begin scheduling appointments on **7/30/2025**

# Questions

