Florida Department of Children and Families

Substance Abuse and Mental Health

Financial and Services Accountability Management System (FASAMS)

Pamphlet 155-2 Chapter 1 Introduction

Last Revision Date: 5/11/2021

Version 13.0

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1 Introduction

1.1 Terms and Acronyms

The following table provides a list of business and technical acronyms/terms used in this document.

Acronym/Term	Definition
BCI	Basic Client Information
DCF	Department of Children and Families
FASAMS	Financial and Services Accountability Management System
FEIN	Federal Tax Identification Number
GAA	General Appropriation Act
GAO	The United States General Accounting Office
HHS	U.S. Department of Health & Human Services
HIPAA	of 1996 (HIPAA) is United States legislation that provides data privacy and security provisions for safeguarding medical information.
NOM	National Outcome Measures
MCI	Master Client Index
ME	Managing Entity
MH	Mental Health
NPI	National Provider Identifier
PHI	Protected Health Information
POE	Priority Of Efforts
SA	Substance Abuse
SFTP	SFTP (SSH File Transfer Protocol) is a secure file transfer protocol. It runs over the SSH protocol. It supports the full security and authentication functionality of SSH.
SMHTF	State Mental Health Treatment Facility
TEDS	Treatment Episode Data Sets
URL	A Uniform Resource Locator (URL), colloquially termed a web address, [1] is a reference to a web resource that specifies its location on a computer network and a mechanism for retrieving it. A URL is a specific type of Uniform Resource Identifier (URI), [2] although many people use the two terms interchangeably.
URS	Uniform Reporting System
VPN	A virtual private network (VPN) extends a private network across a public network and enables users to send and receive data across shared or public networks as if their computing devices were directly connected to the private network. Applications running across the VPN may therefore

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Acronym/Term	Definition
	benefit from the functionality, security, and management of the private network.
XML	In computing, Extensible Markup Language (XML) is a markup language that defines a set of rules for encoding documents in a format that is both human-readable and machine-readable.

1.2 Purpose

This pamphlet specifies the data files and file layout requirements for collecting and reporting data on persons served not only in state-contracted community substance abuse and mental health Provider agencies, but also in state-contracted or state-operated mental health treatment facilities. Persons receiving state-contracted services include individuals who meet the priority population criteria for mental health or substance abuse. This data is needed, at the federal, state and local levels, to answer the management question "who received what services from whom at what cost to achieve what outcome". At the federal level, these data are collected as part of the Block Grant requirements for Treatment Episode Data Sets (TEDS), which includes the National Outcome Measures (NOM) data, the Uniform Reporting System (URS) data, and the Basic Client Information (BCI) data. At the state and local levels, these data are used for reporting various metrics, including performance outcome and output measures required by the Legislature as part of the General Appropriation Act (GAA), as well as quality assurance and quality improvement measures required by DCF for program planning and budgeting, contract monitoring, and various other priority of effort (POE) initiatives.

1.3 Scope

This pamphlet provides technical guidance for a submitting entity to understand how to create file submissions to FASAMS, how to send those files, and to see the allowed values and business rule validations that DCF will be performing before accepting the data.

Managing Entities must require each Provider which has a contract with the ME to submit data directly to the Managing Entity. Managing Entities will validate and submit the data from each subcontracted Provider to DCF.

Providers that have a direct contract with DCF and State Mental Health Treatment Facilities (SMHTFs) are required to submit data directly to DCF.

Version 13 is being discontinued after 6/30/2021. Updates to historical records submitted using this format will be accepted only through 8/31/2021. All new data for FY 21-22 must be submitted in Version 14 format.

1.4 References
The following table provides a list of useful references.

| Description	Link/Location
XML Tutorial	https://www.w3schools.com/xml/default.asp
DCF Pamphlet I55-2	http://www.myflfamilies.com/service-programs/substance-abuse/pamphlet-155-2-v12

2   Required Data Sets

The table below provides a brief description and data collection frequency for each required data set in FASAMS.

Data Set Name	Brief Description	Data Collection Frequencies at Local Levels
Provider	Provider data include organization-level data related to contact persons, as well as identification numbers, names, addresses, and sites of the Provider agencies that are state-contracted or state-operated. **See details in Chapter 3**.	(1) Initially, when there is a new Provider site that needs to submit the required data, or (2) Subsequently when existing data need to be updated.
Client	Client data includes Protected Health Information (PHI) (e.g., names, Social Security Number, date of birth, race, gender, and ethnicity) and other demographic information on each person whose services are funded in part or in whole by DCF. **See details in Chapter 4.**	(1) Initially, at the time of the individual's first service in the Provider, or (2) Subsequently when existing data needs to be updated.
Treatment Episode	Treatment Episode data include individual-level data of each person who meets criteria for enrollment in any mental health or substance abuse priority population group whose services are funded in whole or in part by DCF. It includes various outcomes, evaluations and diagnosis information. **See details in Chapter 5.**	(1) At time of new admission into a MH or SA Provider, and (2) After the initial admission when there is a transfer from one treatment setting to another within the Provider, and (3) At a minimum, every 3 months thereafter, and (4) At the time of final discharge from a MH or SA Provider after the last reportable client-specific service event is provided to terminate episode of care within Provider.
Service Event	Service Event data includes individual-level encounter data on types, amounts, locations, and dates of covered service events provided to each person served in SA or MH programs funded in whole or in part by DCF. It also includes encounter data on types, amounts, locations, and dates of covered services provided that do not require service recipients to be uniquely identified, e.g. drop-in/self-help, information and referral, and outreach. **See details in Chapter 6.**	For each covered service event and intervention that is funded in whole or in part by DCF.

Data Set Name	Brief Description	Data Collection Frequencies at Local Levels
Waiting List	Waiting List data includes information needed to identify and track individuals placed on various waiting lists for covered services. The covered services are available in community substance abuse and mental health programs or in state mental health treatment facilities. **See details in Chapter 7.**	Every time a person is put on waiting list or is removed from the waiting list.
Acute Care	Acute Care Services Utilization data includes daily census of the total number of operational licensed beds, the number of these beds purchased by DCF as well as beds occupied by DCF and other payor classes. This data set also includes the distinct count of indigent individuals served daily, including the beginning census, new admissions and discharges. **See details in Chapter 8.**	Submitted daily from the Provider to the Managing Entity. Submitted monthly from the Managing Entity to FASAMS. Submitted daily from SMHTFs and Direct Providers to FASAMS.
Subcontract	Subcontract data include specific information related to the contract between DCF's contracted entity (i.e. a Managing Entity) and the agency that provides services (i.e. a Provider). **See details in Chapter 9.**	Submitted by the Managing Entity each time a new contract is signed with a Provider or the terms of an existing contract are changed.
Contract	Contract data include target information related to the contract between DCF and the Managing Entities. **See details in Chapter 10.**	Submitted by the Managing Entity each time Contract targets change between DCF and the Managing Entities.

3   Referential Integrity and Erroneous Records

The figures below are process flow diagrams showing the dependencies between the required data sets in the FASAMS data system. The Provider data, which is the parent of all the other data sets, must be processed and accepted by the system before any of the other data sets can be processed or accepted. Furthermore, the Client data set, which is the parent of most other data sets, must be processed and accepted by the system before any of its children data sets can be processed. If a record in a child data set is submitted and processed before the corresponding record in the parent data set, then the system will reject that child record as orphan.
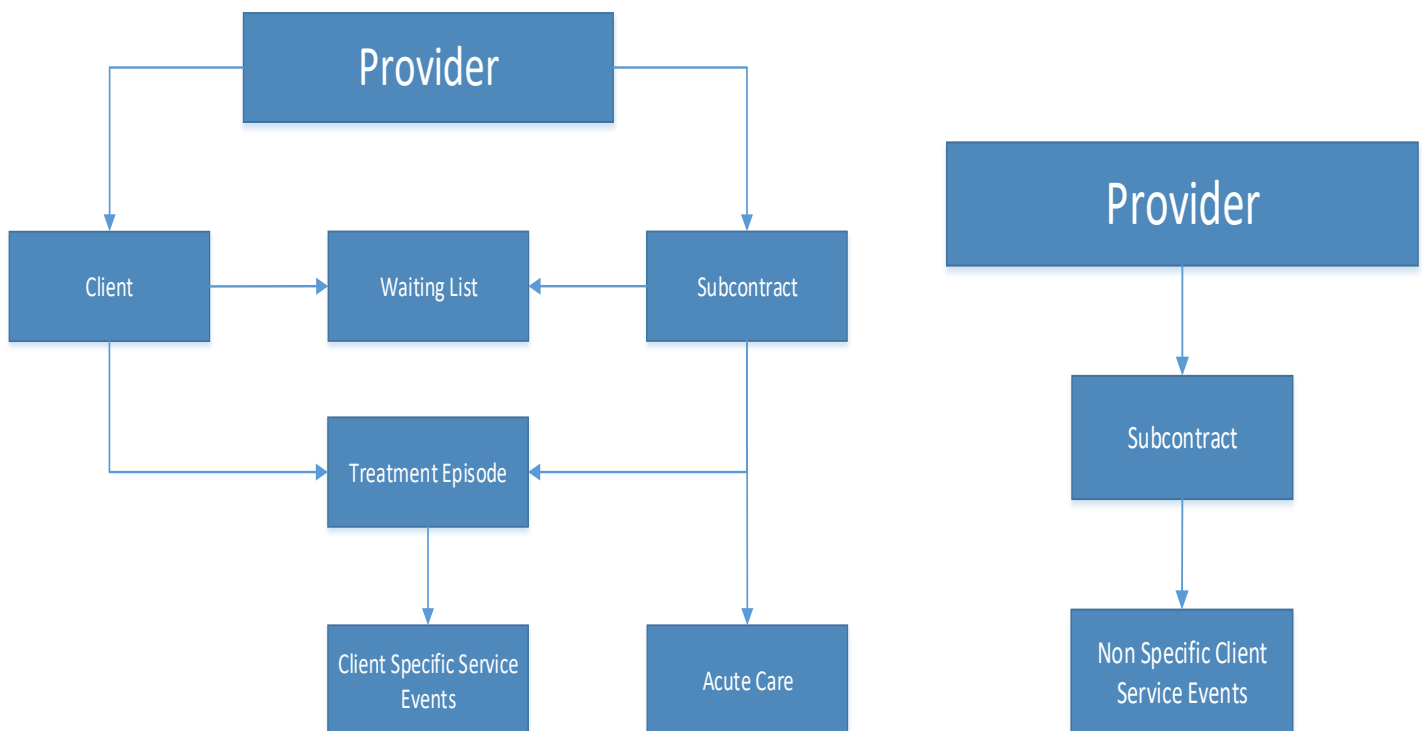
The FASAMS data system is designed to validate information. There are two types of errors that can occur when data is submitted and processed:

- The entire data file will be rejected if the XML schema is found to be incorrect.
- An entire record will be rejected if required elements are not included or are invalid.

The submitting entity will be responsible for accessing the system to review the error, correcting the data in the submitting entity system, and resubmitting the data within deadlines per the contractual requirements as specified in Exhibit C – Task List.

4   Recordkeeping and Documentation

Submitting entities are required to maintain documentation of the data source(s) that can be audited for integrity and validity of information reported in each data set. Completed paper forms, including the signature of the appropriate Provider staff, must be kept in the client record for future monitoring and auditing. If an electronic medium is used for data collection and information storage, the electronic signature of the staff must be included. If the electronic signature is not possible, the staff name and identification number must be part of the electronic record.

Health Insurance Portability and Accountability Act (HIPAA) requires data to be retained for a minimum of six years unless a more stringent requirement is in place. All state-contracted or SMHTFs must comply with this requirement. (Reminder: Medicaid requires records (data files) to be retained for seven years.)

The person collecting the data is responsible for using all available evidence to provide a factual basis for reporting the information required by the data collection instruments. The United States General Accounting Office (GAO) "Yellow Book" standards describe the following types of evidence to support the collection of valid and reliable data:

A. Physical evidence obtained through direct observation;

B. Testimonial evidence obtained through interviews;

C. Documentary evidence which consists of assessments, service/treatment plans, schedules, records, physician's orders, etc. (or derived from authoritative sources such as professional journals or research reports); and

D. Evidence which is considered reliable and which supports summative conclusions must be:

   1. Enough, meaning there is enough factual, adequate, and convincing evidence to lead a prudent person to the same conclusion as the rater. Determining sufficiency requires good judgment. While elaborate documentation to support non-controversial matters is not necessary, the rater must assure themselves that there is enough evidence to support his/her ratings or findings in a particular area.

   2. Competent, meaning it is reliable and the best information attainable through use of reasonable review methods. In evaluating the competence of evidence, the rater must consider whether there is any reason to doubt its validity or completeness. The following presumptions are useful in judging the competence of evidence, but should not be considered enough within themselves to reach a conclusion:

      a. Evidence corroborated from several sources provides greater assurance of accuracy than that secured from a single source.

      b. Evidence developed under a good system of organization or control is more likely to be accurate than that obtained where such control is weak or unsatisfactory.

      c. Evidence obtained through direct physical observation, examination, inspection, and computation is more reliable than evidence obtained indirectly.

      d. Relevant, referring to the relationship of evidence to its use. Facts or opinions used to prove or disprove an issue must have a logical, sensible relationship to that issue.

      e. Ultimately the data collector/rater is responsible for gathering enough information to render an opinion that is based on enough, competent, relevant information or evidence which would lead another professional to a very similar or the same conclusion.

5   Method and Frequency of Data Submission

Submitting entities must submit the required data sets electronically via one of these methods:

- Secure FTP transmission - FASAMS supports submitting files using secure file transfer. Submitting entities will login to DCF's network using their VPN credentials, and then upload their files to a secure FTP site. Each submitting entity will receive a set of secure credentials to use when accessing the secure FTP site. The FTP username gives access to a folder dedicated to the submitting entity. A submitting entity can only access their folder, not any other submitting entity's folder.

- Web Services - FASAMS will allow submitting entities to submit files using Web Services. This requirement will allow submitting entities to programmatically interact with the FASAMS web server, using provided credentials

to upload files for the various datasets that FASAMS supports. This would allow submitters to automate the submission process.

- Manual Upload - Submitting entities are also allowed to login to the FASAMS web-based portal and upload their files using standard user-interface upload controls.

Data submitted are generally processed within minutes after submission depending on file size, the number of other transactions being performed by the system, as well as the day and time of these transactions. Authorized FASAMS users can view records rejected by the system by logging into the FASAMS application.

Submitting entities are required to submit their monthly data by the 18th following the end of the reporting month or as specified in their contract, except for the Client record as specified below. For example, data for April are due May 18th and data for May are due June 18th, and so on. However, in order to avoid the transaction bottleneck that normally occurs around the 18th of each month, submitting entities are highly encouraged to submit their data daily or weekly rather than once every month.

6   Use of Social Security Number

The following are guidelines for using the Social Security Number (SSN) when reporting and submitting the required data sets into the FASAMS data system. A person's refusal to divulge his/her SSN must never be used as a reason to deny services to that person. The serving agency, however, must make every reasonable effort to obtain the correct SSN, which is needed by DCF to create a unique client identifier in the Master Client Index.

For all agencies, **the use of the SSN is mandatory** based on statutory authority found in s.394.78, F.S. and s.397.321, F.S. If it is not possible to obtain the person's actual SSN, the Provider must use the following methodology for creating a 9-digit pseudo-SSN.

Digit 1:   First letter of the First Name

Digit 2:   First letter of the Middle Name. If the individual does not have a middle name, use the letter "X" as the second digit.

Digit 3:   First letter of the Last Name

Digits 4-5: Enter month of Birth (use leading zeros for Months, e.g., 01 through 09)

Digits 6-7: Enter day of Birth (use leading zeros for days, e.g., 01 through 09)

Digits 8-9: Enter year of Birth (use leading zeros where necessary, e.g., 01 through 09)

Note: It is recommended that the initials of the name, month of birth, day of birth, and year of birth that are used to build the pseudo-SSN must match the corresponding information reported on the person's Client data.

In those cases, where the exact birthday cannot be obtained, determine the person's approximate age (ask, "How old are you?" or give your best guess), then code the birthday as January 1 of the appropriate year. For example, if the

person says that he or she is 35 years old, but does not remember his or her birthday, and the current year is 1999, then use January 1, 1964 as the birthday.

If two individuals have the same pseudo-SSN, then use a temporary numeric number to be assigned internally by the Provider to uniquely identify the second individual, making sure that this number is 9 digits long and does not start with 9. This number must always be used for that individual until the true or correct social security number is known.

If a pseudo-SSN is used for a person or a wrong SSN is mistakenly reported, and the true or correct SSN becomes known later, the Provider must re-submit the Client information to replace existing information in the FASAMS data system. The person's true SSN must be used by the Provider from that time forward.

7   XML File Naming and File Size

Although submitters have some flexibility in how files are to be named, all filenames submitted to FASAMS must adhere to the below 3 requirements:

1.   The name of the data set must be the first word in the file, followed by an underscore.
2.   The filename must be unique in the submitters set of currently uploaded and unprocessed files.
3.   The file must end with ".xml".

The required file name for each data set can be found in the respective Chapter for that data set.

In order to easily satisfy requirement #2 above, it is suggested to append the date and time to each file after the underscore, using the YYYYMMDDHHMMSS format.

Some example acceptable filenames would be:

- ProviderDataSet_20180215083045.xml
- ClientDataSet_20180215083045.xml
- ClientDataSet_20180222091530.xml

Any filename that does not meet this requirement will not be processed into FASAMS.

FASAMS will accept any data file that is 50 megabytes (mb) or less in size.

8   XML Schema Validation

When submitting files to FASAMS, submitters are encouraged to first validate their XML file(s) against the published XML schema definition file (i.e. XSD) for each given data set. Submitting validated XML files will eliminate the chance of files being rejected when processed by FASAMS.

Please note that passing schema validation does not guarantee acceptance of each record into FASAMS; it only guarantees that the file will be processed and each record evaluated individually.

9   Tracking Changes & Submission Actions

9.1   Tracking Changes

Submitting entities can track changes in their system, can submit only changed records when data needs to be updated. Nevertheless, FASAMS can automatically determine whether each portion of a data set needs to be added or updated. By using unique source record identifiers and key fields, an entire record can be submitted and FASAMS will determine how to handle the record. If the key fields are not found in the database, then a new record is created. If the key fields are found in the database, then the information on those records will be updated with the newly submitted information. Only the information that has changed will be updated.

In each data set chapter, you will find the key fields listed which determine uniqueness and are used to determine whether a record must be created or updated.

9.2   Deleting Data

Data can be deleted from FASAMS. However, there are two important facts regarding when and how data is deleted.

- FASAMS uses logical instead of physical deletions.   This means that the data are not physically deleted from the database, but only marked as deleted. Data that have been marked as deleted become unusable and are automatically excluded from any reports or processes. This also allows for the data to be re-instated using the XML action attribute of "undo-delete".
- Data will only be marked for deletion when the XML file contains the XML action attribute of "delete". As an example, if a portion of a Provider record is submitted because that portion needs to be updated, the portions not included in the XML file will remain in the database. Lack of sending the information does not lead to those data being deleted.

9.3   Submission Actions

In XML, an action is specified by setting an attribute on the XML element. An example is shown below.

```
<Entity action="delete">
    <KeyField>12345</KeyField>
    <OtherKeyField>XYZ</OtherKeyField>
</Entity>
```

There are only two action attributes (described below) that can be used with FASAMS. If the action attribute is not specified, then FASAMS assumes the user is either adding or updating data.

9.3.1   Delete

As explained above, FASAMS does not delete any data unless the submitting entity explicitly tells it to by setting the XML action attribute to "delete" at the appropriate entity level. When deleting data, the key fields are used to identify which specific records to delete.

With hierarchical XML, deleting can be specified at multiple levels for elements. An entire entity could be deleted, or, one or more sub-entities could be deleted without deleting the main parent entity. Here are some examples of how the delete attribute can be used:

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- A Provider entity and all provider sub-entities can be deleted by using the delete attribute at the Provider level.
- Phone numbers can be deleted for a Provider without deleting the Provider by using the delete attribute at the Provider phone number level.

If the delete attribute is used to delete an entire parent entity, then all child elements in FASAMS will automatically be set to delete as well. Only the parent entity must be submitted with the delete attribute; the child elements do not need to be submitted. Note that this refers only to the child elements in that domain. For example, deleting a parent Provider record does not delete all FASAMS records for that Provider. It only deletes the associated records in the Provider domain (i.e. Provider sites, addresses, phone numbers, etc.).

In the example below both Entity 12345 and Child Entity 3456 will be marked as deleted. Note that even if Child Entity was not included in the XML, since it is a child entity in FASAMS, it will still get marked as deleted in the FASAMS database.

```xml
<Entity action="delete">
    <KeyField>12345</KeyField>
    <OtherKeyField>XYZ</OtherKeyField>
    <ChildEntity>
        <KeyField>3456</KeyField>
    </ChildEntity>
</Entity>
```

If you are only deleting a child entity but you include additional information about the parent entity, then that information will be treated as an update to the parent. In the example below, the Child Entity 3456 will be deleted but the "Value" property of the parent "Entity" will get updated to 12.

```xml
<Entity>
    <KeyField>12345</KeyField>
    <OtherKeyField>XYZ</OtherKeyField>
    <Value>12</Value>
    <ChildEntity action="delete">
        <KeyField>3456</KeyField>
    </ChildEntity>
</Entity>
```

9.3.2   UnDo-Delete

If data is mistakenly deleted, it can be re-instated by using the action attribute of "undo-delete". This action will remove the "delete" status from the data, and will cause the data to become usable again.

If a parent record is specified to be re-instated, all child records for that parent will be re-instated as well. Conversely, a child record cannot be re-instated if the parent record is marked as deleted.

A generic example of an undo-delete action is shown below.

```xml
<Entity action="undo-delete">
    <KeyField>12345</KeyField>
    <OtherKeyField>XYZ</OtherKeyField>
</Entity>
```

9.3.3 Required, Conditionally Required, and Optional Entities

In each chapter, each of the parent and child entities have a descriptor beside the name of either Required, Conditionally Required, or Optional to identify when an entity must be included in an XML dataset

- Required – The entity must be included in the XML dataset.
- Conditionally Required – The entity is tied to another entity in the XML dataset and is required in certain instances.
  - Ex: A Final Discharge Record is only included in the Treatment Episode Dataset when an individual is finally discharged from a particular Provider to start treatment or service with another Provider or when the individual no longer needs treatment or service in any site within the Provider.
- Optional – The (sub)entity is not required to be included in the XML dataset. If an optional (sub)entity is used in XML dataset, then the required fields of the (sub)entity must be included in the XML dataset.
  - Ex: The ProviderClientEmailAddress is an **Optional** subentity of the ProviderClient.

10 Special Processing

10.1 Guidelines for Reporting FASAMS Data when Services are Sub-Subcontracted

Scenario: A Managing Entity has a subcontract with a county agency. The county agency does not provide services but subcontracts the services to a Provider. That Provider also has its own subcontract with the Managing Entity. The Provider submits data to the Managing Entity for their own subcontract, and for the services they provide on behalf of the county agency.

FASAMS Setup: The Managing Entity would submit a Provider record for the Provider and for the County Agency. In the example below, Provider ABC would be set up as a Provider with their appropriate Site IDs. The County Agency would also be set up as a Provider with an administrative Site ID. A Subcontract record would also need to be submitted for the Provider and for the County Agency.
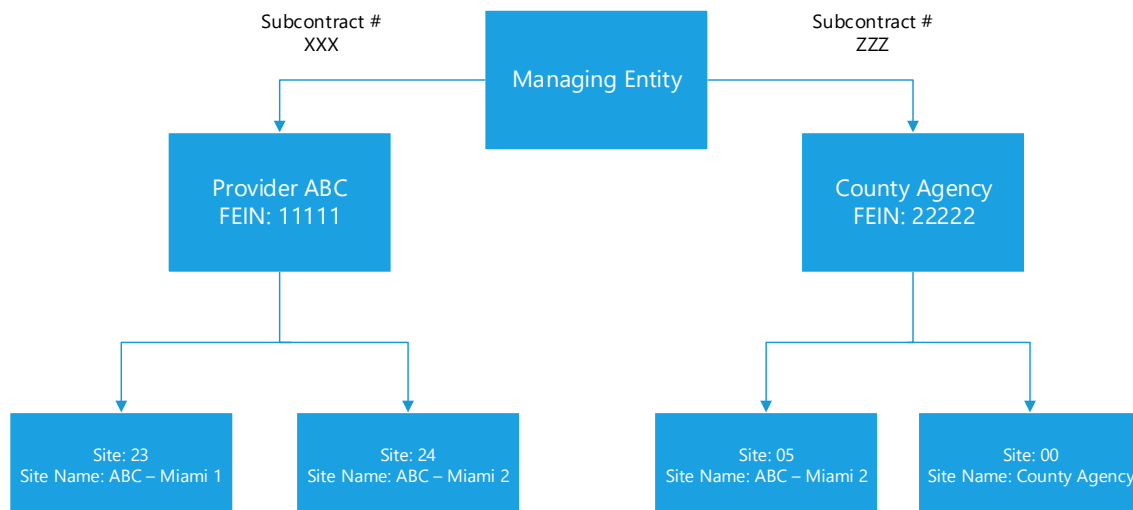
Processing Data: During the course of providing services, Provider ABC services clients under their subcontract with the Managing Entity. Provider ABC would submit Client, Treatment Episode and Service Event data using their own FEIN and Subcontract # as shown below.

```
┌─────────────────────┐     ┌─────────────────────┐
│     Client: 01      │     │     Client: 02      │
│     FEIN: 11111     │     │     FEIN: 11111     │
└─────────────────────┘     └─────────────────────┘
           │                           │
           ▼                           ▼
┌─────────────────────┐     ┌─────────────────────┐
│  Treatment Episode  │     │  Treatment Episode  │
│     FEIN: 11111     │     │     FEIN: 11111     │
└─────────────────────┘     └─────────────────────┘
           │                           │
           ▼                           ▼
┌─────────────────────┐     ┌─────────────────────┐
│      Admission      │     │      Admission      │
│      Site: 23       │     │      Site: 23       │
│   Subcontract: XXX  │     │   Subcontract: XXX  │
└─────────────────────┘     └─────────────────────┘
           │                           │
           ▼                           ▼
┌─────────────────────┐     ┌─────────────────────┐
│    Service Event    │     │    Service Event    │
│     FEIN: 11111     │     │     FEIN: 11111     │
│ Type: Client-Specidic│    │Type: Non Client-Specific│
│      Site: 23       │     │      Site: 23       │
└─────────────────────┘     └─────────────────────┘
```
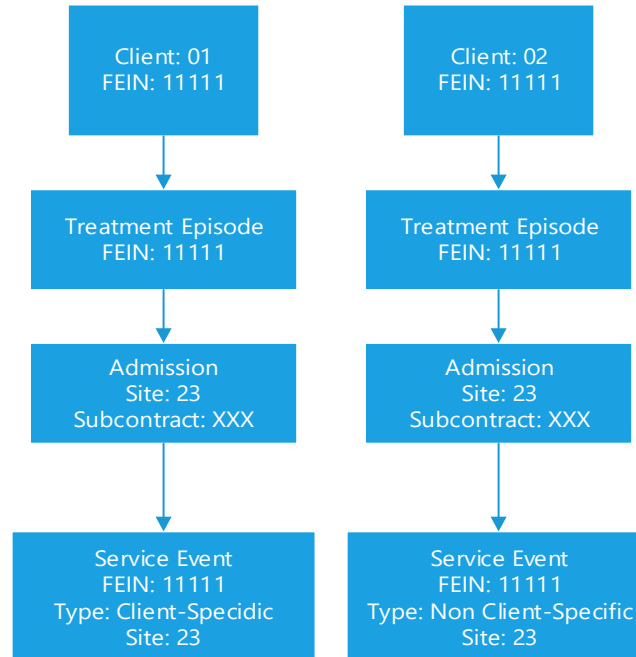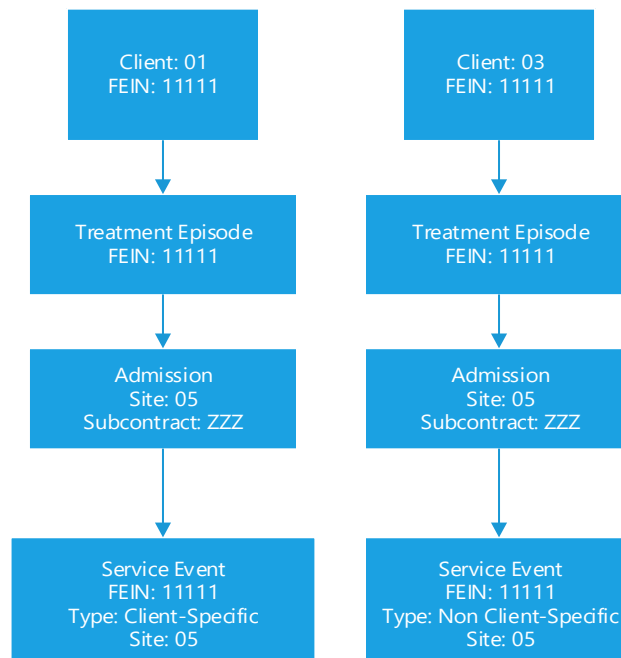
In addition, Provider ABC services clients for the County Agency. These may be the same clients or different clients as already being serviced by Provider ABC under their own subcontract. Provider ABC must submit Client, Treatment Episode and Service Event data using their own FEIN and the County Agency Subcontract # as shown below.

```
┌─────────────────────┐     ┌─────────────────────┐
│     Client: 01      │     │     Client: 03      │
│     FEIN: 11111     │     │     FEIN: 11111     │
└─────────────────────┘     └─────────────────────┘
           │                           │
           ▼                           ▼
┌─────────────────────┐     ┌─────────────────────┐
│  Treatment Episode  │     │  Treatment Episode  │
│     FEIN: 11111     │     │     FEIN: 11111     │
└─────────────────────┘     └─────────────────────┘
           │                           │
           ▼                           ▼
┌─────────────────────┐     ┌─────────────────────┐
│      Admission      │     │      Admission      │
│      Site: 05       │     │      Site: 05       │
│   Subcontract: ZZZ  │     │   Subcontract: ZZZ  │
└─────────────────────┘     └─────────────────────┘
           │                           │
           ▼                           ▼
┌─────────────────────┐     ┌─────────────────────┐
│    Service Event    │     │    Service Event    │
│     FEIN: 11111     │     │     FEIN: 11111     │
│ Type: Client-Specific│    │Type: Non Client-Specific│
│      Site: 05       │     │      Site: 05       │
└─────────────────────┘     └─────────────────────┘
```

Submitting data in this way would allow FASAMS to correctly report services provided under the County Agency subcontract and would correctly report that the services were rendered by the Provider at their site.

11 Who to Contact for Help

Technical assistance is available statewide to FASAMS users as follows:

If you are:	For this type of help:	Contact:
A Provider with a subcontract with a Managing Entity.	All issues.	The ME Data Liaison for your organization
A direct contract Provider or a SMHTF.	All issues to include: • Data and submission issues. • Reports Password and login issues	DCF Help Desk: 850-487-9400 or 855-283-5137 (Toll-free) or email DCF.Helpdesk@Myflfamilies.com
Managing Entity	All issues to include: • Data and submission issues • Reports Password and login issues	DCF Help Desk: 850-487-9400 or 855-283-5137 (Toll-free) or email DCF.Helpdesk@Myflfamilies.com
DCF Staff	All Issues.	DCF Help Desk: 850-487-9400 or 855-283-5137 (Toll-free) or email DCF.Helpdesk@Myflfamilies.com