



Florida Department of Children and Families

Substance Abuse and Mental Health

Financial and Services Accountability Management System (FASAMS)

Pamphlet 155-2 Appendix 9 Revision History

Last Revision Date: 10/14/2024

Effective Date: 7/01/2021

Version 14.0

Table of Contents

| | | |
|--------|---|----|
| 1 | General Information | 3 |
| 1.1 | Purpose | 3 |
| 1.2 | Revision History..... | 3 |
| 1.2.1 | Chapter 01 Introduction..... | 3 |
| 1.2.2 | Chapter 02 Access Management (Security) | 3 |
| 1.2.3 | Chapter 03 Provider | 4 |
| 1.2.4 | Chapter 04 Client | 5 |
| 1.2.5 | Chapter 05 Treatment Episode | 6 |
| 1.2.6 | Chapter 06 Service Event | 18 |
| 1.2.7 | Chapter 07 Waiting List..... | 22 |
| 1.2.8 | Chapter 08 Acute Care | 23 |
| 1.2.9 | Chapter 09 Subcontract | 24 |
| 1.2.10 | Chapter 10 Contract..... | 27 |
| 1.2.11 | Appendix 1 Data Code Values | 27 |
| 1.2.12 | Appendix 2 Common Data Types | 59 |
| 1.2.13 | Appendix 3 FASAMS Web Services | 60 |
| 1.2.14 | Appendix 4 Community Persons Served Satisfaction Survey (CPSSS) | 60 |
| 1.2.15 | Appendix 10 Pamphlet Companion Guide..... | 60 |

1 General Information

1.1 Purpose

This document specifies the dates and brief descriptions of the changes to all chapters, appendices and forms contained in Pamphlet 155-2.

1.2 Revision History

1.2.1 Chapter 01 Introduction

| Date | Document | Brief Description of Change |
|------------|--------------|---|
| 7/28/2021 | Introduction | <ul style="list-style-type: none"> Removed undo delete section |
| 5/11/2021 | Introduction | <ul style="list-style-type: none"> Scope <ul style="list-style-type: none"> Add language about discontinuation of v13 and dates for entering data in v14. |
| 5/5/2021 | Introduction | <ul style="list-style-type: none"> Changed the effective date to 7/01/2021 Scope <ul style="list-style-type: none"> Added “in version 14 format beginning 7/1/2021” to the end of the first sentence in the second paragraph. |
| 5/21/2020 | Introduction | <ul style="list-style-type: none"> Changed the effective date to 11/01/2020 |
| 4/28/2020 | Introduction | <ul style="list-style-type: none"> An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Introduction | <ul style="list-style-type: none"> Changed the effective date to 10/01/2020 |
| 3/25/2020 | Introduction | <ul style="list-style-type: none"> Removed the language requiring the ME to collect demographic data from Providers and submit within five (5) business days after the Network Service Provider confirmation of client eligibility for SAMH funds. |
| 10/31/2019 | Introduction | <ul style="list-style-type: none"> Added Contract Data Set Information |
| 3/28/2019 | Introduction | <ul style="list-style-type: none"> Updated Who to Contact Added Version number to Chapter |
| 8/31/2018 | Introduction | <ul style="list-style-type: none"> Initial document published. |

1.2.2 Chapter 02 Access Management (Security)

| Date | Document | Brief Description of Change |
|-----------|-------------------|---|
| 3/1/2022 | Access Management | <ul style="list-style-type: none"> Added Role SMHTF HIS Staff and updated a number of other Roles |
| 5/5/2021 | Access Management | <ul style="list-style-type: none"> Changed the effective date to 7/01/2021 |
| 5/21/2020 | Access Management | <ul style="list-style-type: none"> Changed the effective date to 11/01/2020 |
| 4/3/2020 | Access Management | <ul style="list-style-type: none"> Changed the effective date to 10/01/2020 |
| 5/1/2019 | Access Management | <ul style="list-style-type: none"> FASAMS Global User Lock Out (0033) Enhancement <ul style="list-style-type: none"> Added Global Account Lock/Unlock to the SAMH Access Roles |

| Date | Document | Brief Description of Change |
|-----------|-------------------|---|
| | | <ul style="list-style-type: none"> • Separate Lock and Unlock Permissions (0031) Enhancement <ul style="list-style-type: none"> ○ Separated 'Lock/Unlock User Accounts' role into 'Lock/Unlock User Accounts' and 'Unlock User Accounts' roles • Update FASAMS Message Control and Management (0008) Enhancement <ul style="list-style-type: none"> ○ Added the following SAMH Access Roles: <ul style="list-style-type: none"> ▪ View Message Configuration ▪ Edit Message Configuration • Added View Exception Reports to the SAMH Access Roles |
| 3/28/2019 | Access Management | <ul style="list-style-type: none"> • Added Terms and Acronyms • Updated Responsibilities Section and renamed Key Roles and Responsibilities • Removed Password and Account Help • Added Troubleshooting Section • Updated Contact Information Section • Updated Appendix A – Process to Request Access to FASAMS workflow • Added Appendix B – Process to Remove SAMH Systems Access • Updated Appendix C –SAMH Access Roles • Added Version number to Chapter |
| 8/31/2018 | Security | <ul style="list-style-type: none"> • Initial document published. |

1.2.3 Chapter 03 Provider

| Date | Document | Brief Description of Change |
|------------|----------|--|
| 10/11/2024 | Provider | <ul style="list-style-type: none"> • Changed 3.24.3 Fields OpenDate description from Optional to Required |
| 10/28/2021 | Provider | <ul style="list-style-type: none"> • Updated example XML • Added new section 2.4.1: Example of removing data element from FASAMS database |
| 7/28/2021 | Provider | <ul style="list-style-type: none"> • Removed undo delete section |
| 5/24/2021 | Provider | <ul style="list-style-type: none"> • Added “,within the data set.” Under the Deleting Provider Data section |
| 5/5/2021 | Provider | <ul style="list-style-type: none"> • Changed the effective date to 7/01/2021 |
| 5/21/2020 | Provider | <ul style="list-style-type: none"> • Changed the effective date to 11/01/2020 |
| 4/28/2020 | Provider | <ul style="list-style-type: none"> • An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Provider | <ul style="list-style-type: none"> • Changed the effective date to 10/01/2020 |
| 1/7/2020 | Provider | <ul style="list-style-type: none"> • Removed language stating that undo-deletes cascade to child records |
| 1/17/2019 | Provider | <ul style="list-style-type: none"> • Updated Terms and Acronyms • Capitalized Provider and Managing Entity in several sections. • Hyphenated Undo-delete • Modified wording in several sections for clarity. |

| Date | Document | Brief Description of Change |
|------------|--------------|--|
| 10/31/2018 | Provider | <ul style="list-style-type: none"> Deleted comment from August 31 revision of documents |
| 8/31/2018 | Provider XML | <ul style="list-style-type: none"> Updated XML Schema |
| 8/31/2018 | Provider | <ul style="list-style-type: none"> Removed the requirements that Site Identifier is limited to 2 digits and must be between 0 and 99. Added a requirement that it must be 20 characters or less. Removed Code 09 Crisis Stabilization Unit as a valid SettingCode. This code was removed in a previous release but mistakenly not removed here. Added new rule to Close Date that it must be greater than or equal to the Open Date. Removed the restriction that only one PLADS site identifier can be provided. Removed the restriction that only one AHCA site identifier can be provided. |
| 5/21/2018 | Provider | <ul style="list-style-type: none"> Changed the meaning of the code values for ContractualRelationshipCode and added a new code value. |
| 4/4/2018 | Provider | <ul style="list-style-type: none"> Formatting changes to include: noted whether each entity is required or optional, noted the name of each entity that a subentity is associated with. ContractualRelationshipCode added to the Provider entity. XML schema updated accordingly. In TreatmentSetting entity, code 09 Crisis Stabilization Unit added. |
| 3/7/2018 | Provider XML | Initial XSD published. |
| 3/6/2018 | Provider | Initial document published. |

1.2.4 Chapter 04 Client

| Date | Document | Brief Description of Change |
|------------|----------|--|
| 10/28/2021 | Client | <ul style="list-style-type: none"> Updated example XML Added new section 2.4.1: Example of removing data element from FASAMS database |
| 7/28/2021 | Client | <ul style="list-style-type: none"> Removed undo delete section |
| 7/6/2021 | Client | <ul style="list-style-type: none"> Added Unique Constraint Rule to the ProviderClient entity |
| 5/24/2021 | Client | <ul style="list-style-type: none"> Added “, within the data set.” Under the Deleting Client Data section |
| 5/5/2021 | Client | <ul style="list-style-type: none"> Changed the effective date to 7/01/2021 |
| 5/21/2020 | Client | <ul style="list-style-type: none"> Changed the effective date to 11/01/2020 |
| 4/28/2020 | Client | <ul style="list-style-type: none"> An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Client | <ul style="list-style-type: none"> Changed the effective date to 10/01/2020 |
| 1/7/2020 | Client | <ul style="list-style-type: none"> Removed language stating that undo-deletes cascade to child records Update 3.1 to be “ProviderClient” |
| 1/17/2019 | Client | <ul style="list-style-type: none"> Updated Terms and Acronyms |

| Date | Document | Brief Description of Change |
|-----------|------------|---|
| | | <ul style="list-style-type: none"> Modified wording in several sections for clarity. Hyphenated UnDo-Delete |
| 5/21/2018 | Client | <ul style="list-style-type: none"> Modified wording in several sections for clarity. Added examples of how to construct SourceRecordIdentifiers. |
| 4/4/2018 | Client | <ul style="list-style-type: none"> Formatting changes to include: noted whether each entity is required or optional, noted the name of each entity that a subentity is associated with. Clarification on contact information for child/legal guardian. Race codes changed from TEDS values back to original SAMHIS values. Ethnicity codes changed from TEDS values back to original SAMHIS values. |
| 3/7/2018 | Client XML | <ul style="list-style-type: none"> Initial XSD published. |
| 3/6/2018 | Client | <ul style="list-style-type: none"> Initial document published. |

1.2.5 Chapter 05 Treatment Episode

| Date | Document | Brief Description of Change |
|------------|-------------------|--|
| 04/19/2023 | Treatment Episode | <ul style="list-style-type: none"> In Section 3.4.5.7.2, changed field description for RouteofAdministraton, FrequencyofUse, and FirstUseAge fields from “Must not be provided” to “Optional” prior to “if Disorder Code is 98 or 99.” |
| 11/01/2022 | Treatment Episode | <ul style="list-style-type: none"> Added “ Optional if Toolcode = 0” to EvaluationDate, StaffIdentifier, and StaffEducationLevelCode under the Evaluation entity |
| 08/24/2022 | Treatment Episode | <ul style="list-style-type: none"> Added No/Other LOC Assessment to the instructions in section 3.6.2 Level of Care Added 0 No/Other LOC Assessment to the ToolCode field in section 3.6.7 |
| 07/14/2022 | Treatment Episode | <ul style="list-style-type: none"> Edited typing errors in section 3.6.6: <ul style="list-style-type: none"> Pluralized “evaluations” in sentence 2 Added space after “evaluations” Changed “is to be” to “should be” Updated language in section 3.6.7 for ActualLevelCode and RecommendedLevelCode: <ul style="list-style-type: none"> Required when the given Evaluation Type is 1 (Level of Care) and Evaluation Tool has Level Code values defined and must not be provided otherwise. Refer to Evaluation Level in Appendix 1 Data Code Values of Pamphlet 155-2. Optional when the given Evaluation Type is 2 (Level of Functioning) and Evaluation Tool has Level Code values defined and must not be provided otherwise. Refer to Evaluation Level in Appendix 1 Data Code Values of Pamphlet 155-2. |
| 04/21/2022 | Treatment Episode | <ul style="list-style-type: none"> Changed ScoreNumber field description in section 3.6.7 to remove references to “Score Range” Added caveat to text in 1.2.4: <ul style="list-style-type: none"> “A new POM is to be submitted at Admission and every 90 days |

| Date | Document | Brief Description of Change |
|-----------|-------------------|---|
| | | <p>thereafter until Discharge with the submission of the final POM (<i>unless the DischargeReasonCode is 3 or 6</i>.)”</p> <ul style="list-style-type: none"> • Added caveat to second rule listed in section 3.4.1: <ul style="list-style-type: none"> ○ “A new Performance Outcome Measure record is required at the following time points: Admission, every 90 days thereafter, and Discharge (<i>unless the DischargeReasonCode is 3 or 6</i>.)” • Added caveat to second rule listed in section 3.4.4: <ul style="list-style-type: none"> ○ “A new POM is required when a client is being discharged (<i>unless the DischargeReasonCode is 3 or 6</i>.)...” • Added caveat to second rule listed in section 3.5.4: <ul style="list-style-type: none"> ○ “A discharge must have a single performance outcome measure associated to it (<i>unless the DischargeReasonCode is 3 or 6</i>). • Added exception clause to ScoreNumber field description in section 3.6.7 • Added new guidance to 3.4.4 (creating 3.4.4.3): <ul style="list-style-type: none"> ○ “Only new (not previously submitted) POM records will be processed by the business validation rules. All resubmitted POM records will not be revalidated against business rules.” • Removed the following language from StartDate and EndDate rows in the Key Fields table in 3.7.5 <ul style="list-style-type: none"> ○ “Is to be greater than or equal to the AdmissionDate” |
| 3/01/2022 | Treatment Episode | <ul style="list-style-type: none"> • Removed reference to Subcontract requirement in 1.2 • Removed reference to Subcontract requirement in 2.2 • Deleted in section 3.2.5 the following three validation rules from SubcontractNumber: <ul style="list-style-type: none"> ○ “Required when the Provider.ContractualRelationshipCode is 2 (Managing Entity Subcontract), or 5 (Both Direct DCF Contract and Managing Entity Subcontract) and the current admission is subcontracted.” ○ “Must not be provided if Provider.ContractualRelationshipCode is not 2 (Managing Entity Subcontract), or 5 (Both Direct DCF Contract and Managing Entity Subcontract) and the current admission is not subcontracted.” ○ “Must match a single subcontract number already set up in FASAMS for the ContractNumber and SubcontractNumber combination.” • Updated wording in section 3.3.3 to read: <ul style="list-style-type: none"> ○ “If ModifierCode is used, use the ModifierCode that was utilized for billing purposes.” |
| 11/9/2021 | Treatment Episode | <ul style="list-style-type: none"> • Added guidance on frequency and timing of evaluations to be reported • Removed the word “Required” from 3.1 Title • Removed the words “Conditionally Required” from 3.2 Title, 3.3 Title, and 3.4 Title • Added guidance language to section 3.4.1 regarding Performance Outcome Measure |

| Date | Document | Brief Description of Change |
|------------|-------------------|--|
| | | <ul style="list-style-type: none"> • Added guidance language to section 3.4.2, 3.5.4, 3.6.4, and 3.7.4 • Added policy and data reporting guidance for TypeCode1 & 2 evaluations • Removed the words “Conditionally Required” from 3.7 Title • Added new table under 1.3 Treatment Episode Domain section • Removed Tool Code General Functioning Improvement (10), added 11 for CANS, 12 for DLA-20, 13 for GAIN, 14 for SAMHSA NOMS, and 15 for Other LOF Assessment in section 3.6.7 |
| 10/28/2021 | Treatment Episode | <ul style="list-style-type: none"> • Updated example XML • Added new section 2.4.1: Example of removing data element from FASAMS database |
| 7/28/2021 | Treatment Episode | <ul style="list-style-type: none"> • Removed undo delete section • Added new CGAS rule under Evaluation ToolCode. • Update guidance under Evaluation entity |
| 7/6/2021 | Treatment Episode | <ul style="list-style-type: none"> • Added Unique Constraint Rules to Treatment Episode, Admission, Placement Record, Performance Outcome Measure, Discharge, Evaluation, Diagnosis, and Immediate Discharge entities |
| 6/30/2021 | Treatment Episode | <ul style="list-style-type: none"> • Added “12 for DCF” as a new Primary Payment Source Code in Section 3.4.4.2.1 |
| 6/3/2021 | Treatment Episode | <ul style="list-style-type: none"> • Replaced “FrequencyOfUseCode” with “FrequencyofUseCode” throughout entire document |
| 5/24/2021 | Treatment Episode | <ul style="list-style-type: none"> • Added “,within the data set.” Under the Deleting Treatment Episode Data section |
| 5/13/2021 | Treatment Episode | <ul style="list-style-type: none"> • Evaluation ToolCode <ul style="list-style-type: none"> ○ Removed the 7/1/2021 expiration date from FARS, CFARS and NCFAS/CAT |
| 5/5/2021 | Treatment Episode | <ul style="list-style-type: none"> • Changed the effective date to 7/01/2021 • Disorder Code Field <ul style="list-style-type: none"> ○ Changed the reference to the Substance Use Disorder Table to Substances Used Table |
| 4/29/2021 | Treatment Episode | <ul style="list-style-type: none"> • Added ‘Code’ to the following fields in the chapter: <ul style="list-style-type: none"> ○ BakerActCrisisInterventionTrainedCode ○ BakerActSchoolSettingCode ○ BakerActMobileUnitCode • Changed UnabletoPerformDailyLivingActivitesCode description to the following: <p>The code indicating if the individual is unable to perform activities of daily living functioning independently.</p> <ul style="list-style-type: none"> • Optional • The following values may be used: <ul style="list-style-type: none"> ○ 0 for No ○ 1 for Yes |

| Date | Document | Brief Description of Change |
|-----------|-------------------|---|
| | | <ul style="list-style-type: none"> ○ 3 for Unknown ● Revised second bullet in the description for AnnualFamilyIncomeAmountField to read: <ul style="list-style-type: none"> ○ Must be a valid decimal number greater than or equal to zero if annual personal income is known. |
| 2/11/2021 | Treatment Episode | <ul style="list-style-type: none"> ● PlacementOutcomeCode <ul style="list-style-type: none"> ○ Removed Successful from Code 1 ○ Removed Unsuccessful from Code 2 ○ Removed * after Discharge from Code 3 |
| 2/1/2021 | Treatment Episode | <ul style="list-style-type: none"> ● Changed the expiration date on ToolCodes 5 FARS, 6 CFARS, and 8 NCFAS/CAT from 2/1/2021 to 7/1/2021. |
| 1/15/2021 | Treatment Episode | <ul style="list-style-type: none"> ● Updated the ToolCode field as follows to add 10 General Functional Improvement and provide expiration dates for 5 FARS, 6 CFARS, and 8 NCFAS/CAT: The code indicating the type of clinical instrument for assessing the individual's level of care, level of functioning, or other aspect. <ul style="list-style-type: none"> ● Required ● Must be one of the following values: <ul style="list-style-type: none"> ○ 1 for LOCUS ○ 2 for CALOCUS ○ 3 for BIO Psychosocial ○ 4 for ASAM ○ 5 for FARS – expire 2/1/2021 ○ 6 for CFARS– expire 2/1/2021 ○ 7 for Competency to Proceed to Trial ○ 8 for NCFAS/CAT– expire 2/1/2021 ○ 9 for CGAS ○ 10 for General Functional Improvement ● Code must be appropriate for the TypeCode used. Refer to Evaluation Level in Appendix 1 Data Code Values of Pamphlet 155-2. ● If the evaluation is based on a professional/medical evaluation rather than on the use of an evaluation tool, Tool Code 3 BIO Psychosocial should be used. |

| Date | Document | Brief Description of Change |
|------------|-------------------|--|
| 1/7/2021 | Treatment Episode | <ul style="list-style-type: none"> • Updated the DischargeReasonCodes as follows: <p>The code indicating the outcome of the treatment episode or discontinuance of treatment.</p> <ul style="list-style-type: none"> • Required • Must be one of the following values: <ul style="list-style-type: none"> ○ 1 for Successfully Completed Treatment/Services ○ 2 for Did not Complete Treatment-Voluntary (Examples: (lost contact, left against medical advice, eloped, failed to return from leave, and individual choice) ○ 3 for Did Not Complete Treatment-Involuntary (Examples: Administrative discharge (no longer eligible for services, funding source change, assessment only, agency closure) ○ 4 for Successfully Completed--Transferred to Another Provider ○ 5 for Incarcerated ○ 6 for Death ○ 8 for Transferred to State Mental Health Treatment Facility ○ 9 for Client Moved Out of Service Area ○ 10 for Client Only Received Non-Treatment Services (e.g. assessment, detox, intervention, prevention, etc.) ○ 14 for Did Not Complete Treatment-Transferred to Another Provider (i.e. Long Term Medical Care) • This field is part of TEDS minimum data set for reporting DIS 10 – Reason for Discharge, Transfer or Discontinuance of Treatment Discharge. <p>Note: Vocabulary Codes under review and may be updated by DCF policy makers.</p> |
| 11/12/2020 | Treatment Episode | <ul style="list-style-type: none"> • Added the following Competency Status Codes: <ul style="list-style-type: none"> ○ 6 for Rubio ○ 7 for Mosher |
| 5/28/2020 | Treatment Episode | <ul style="list-style-type: none"> • Changed the Unknown vocabulary code from 2 to 3 for DependentChildrenCode and ChildWelfareInvolvedCode to be consistent with all other ‘Common’ vocabulary codes. |
| 5/21/2020 | Treatment Episode | <ul style="list-style-type: none"> • Changed the effective date to 11/01/2020 |
| 4/28/2020 | Treatment Episode | <ul style="list-style-type: none"> • An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Treatment Episode | <ul style="list-style-type: none"> • Changed the effective date 10 10/01/2020 |
| 4/2/2020 | Treatment Episode | <ul style="list-style-type: none"> • Update rules for the following fields: <ul style="list-style-type: none"> ○ SchoolDaysAvailableInLast90DaysNumber ○ SchoolDaysAttendedInLast90DaysNumber ○ DaysWorkedInLast30DaysNumber ○ DaysSpentInCommunityInLast30DaysNumber |

| Date | Document | Brief Description of Change |
|-----------|---|---|
| 1/7/2020 | Treatment Episode | <ul style="list-style-type: none"> • Removed language stating that undo-deletes cascade to child records • Changed Transfer Admission to “Treatment Setting” admission throughout document • Updated rules throughout document to reflect change and to make POMs for treatment setting admission to be optional |
| 7/14/2019 | Treatment Episode - ExpectedDeliveryDate | <p>The code indicating the expected date of delivery.</p> <ul style="list-style-type: none"> • Must not be provided if PregnantCode is 0 or 6 • Must be provided and is required if PregnantCode is 1 • Must be a valid date |
| 7/14/2019 | Treatment Episode - FirstUseAge | <ul style="list-style-type: none"> • Added -- <ul style="list-style-type: none"> ○ Must be a valid integer less than or equal to the individual’s current age. • Removed – <ul style="list-style-type: none"> ○ Must be a valid integer between 0 and 150 |
| 7/14/2019 | Treatment Episode - BakerActRoleCode | <p>The code indicating the role on the person who determined the individual met the criteria for admission to a Baker Act receiving facility.</p> <ul style="list-style-type: none"> • Required if BakerActRouteCode is provided • Required if MeetsCriteriaForBakerActCode = 1 (Yes) • Must NOT be provided if MeetsCriteriaForBakerActCode is NOT 1 • Must NOT be provided if BakerActRouteCode is not submitted • Must be one of the following values: <ul style="list-style-type: none"> ○ 01 for Judge <ul style="list-style-type: none"> ▪ Must be 01 if BakerActRouteCode is 1 (Involuntary Examinations thru Court) ○ 02 for Police Officer <ul style="list-style-type: none"> ▪ Must be 02 or 03 if BakerActRouteCode is 2 (Involuntary Examinations thru Law Enforcement) ○ 03 for School Resource Officer <ul style="list-style-type: none"> ▪ Must be 02 or 03 if BakerActRouteCode is 2 (Involuntary Examinations thru Law Enforcement) ○ 05 for Licensed Practitioner of the Healing Arts <ul style="list-style-type: none"> ▪ Must be 05, 06 or 07 if BakerActRouteCode is 3 (Involuntary Examinations thru MH Professionals) ○ 06 for PhD/PsyD/Ed.D <ul style="list-style-type: none"> ▪ Must be 05, 06 or 07 if BakerActRouteCode is 3 (Involuntary Examinations thru MH Professionals) ○ 07 for MD/DO <ul style="list-style-type: none"> ▪ Must be 05, 06 or 07 if BakerActRouteCode is 3 (Involuntary Examinations thru MH Professionals) ○ 08 for Self <ul style="list-style-type: none"> ▪ Must be 08 if BakerActRouteCode is 4 (Voluntary Examination) ○ 09 for Unknown <ul style="list-style-type: none"> ▪ Must be 09 if BakerActRouteCode is 7 (Unknown) |
| 7/14/2019 | Treatment Episode - BakerActCrisisInterventionTrained | <ul style="list-style-type: none"> • Required if BakerActRoleCode is one of the following <ul style="list-style-type: none"> ○ 02 for Police Officer ○ 03 for School Resource Officer • Must NOT be provided if BakerActRoleCode is NOT 02 or 03 • Must be one of the following values: |

| Date | Document | Brief Description of Change |
|-----------|---|---|
| | | <ul style="list-style-type: none"> ○ 0 for No ○ 1 for Yes ○ 3 for Unknown |
| 7/14/2019 | Treatment Episode - BakerActSchoolSetting | <ul style="list-style-type: none"> • Required if BakerActRoleCode is one of the following <ul style="list-style-type: none"> ○ 02 for Police Officer ○ 05 for Licensed Practitioner of the Healing Arts ○ 06 for PhD/PsyD/Ed.D • Must NOT be provided if BakerActRoleCode is NOT 02, 05 or 06. • Must be one of the following values: <ul style="list-style-type: none"> ○ 0 for No ○ 1 for Yes |
| 7/14/2019 | Treatment Episode - BakerActMobileUnit | <ul style="list-style-type: none"> • Required if BakerActRoleCode is one of the following <ul style="list-style-type: none"> ○ 05 for Licensed Practitioner of the Healing Arts ○ 06 for PhD/PsyD/Ed.D ○ 07 for MD/DO • Must NOT be provided if BakerActRoleCode is NOT 05, 06 or 07. • Must be one of the following values: <ul style="list-style-type: none"> ○ 0 for No ○ 1 for Yes |
| 5/1/2019 | Treatment Episode | <ul style="list-style-type: none"> • Allow Service Events for Immediate Discharge (0014) Enhancement <ul style="list-style-type: none"> ○ Added the following tags to the XML examples: <ul style="list-style-type: none"> ▪ SitIdentifier ▪ ProgramAreaCode ▪ ContractNumber • Changes to Immediate Discharge Entity <ul style="list-style-type: none"> ○ New SitIdentifier field ○ New ProgramAreaCode field ○ New ContractNumber field |
| 5/1/2019 | Treatment Episode XML | <ul style="list-style-type: none"> • Added the following new fields to Immediate Discharge Entity <ul style="list-style-type: none"> ○ SitIdentifier ○ ProgramAreaCode ○ ContractNumber |
| 1/17/2019 | Treatment Episode | <ul style="list-style-type: none"> • Updated Terms and Acronyms • Capitalized Provider and Managing Entity in several sections. • Modified wording in several sections for clarity. • Hyphenated UnDo-Delete • Removed a business rule requiring the Admission Date to be between the beginning and ending dates of Subcontract and Contract numbers provided for the Treatment Episode. • Provided Clarification on Transfer Admissions in the Initial Admissions and Transfers section. • Matched the spelling of FrequencyOfUseCode in the sample XML code to the actual field description. • Added language about 90-day updates to the PerformanceOutcomeMeasure |

| Date | Document | Brief Description of Change |
|------------|-----------------------|--|
| | | <p>description.</p> <ul style="list-style-type: none"> • Provided Clarification on Transfer Discharges in Discharge Section |
| 10/31/2018 | Treatment Episode | <ul style="list-style-type: none"> • Deleted comments from August 31 revision of documents • Removed requirement from DependentsCount, “Required if the related admission has a Substance Abuse program” • Changes to DischargeReasonCode <ul style="list-style-type: none"> ○ Correct wording on item 1- from “Successfully Treatment Completed” to “Successfully Completed Treatment” ○ Change wording on item 4- from “Transferred to another treatment program or facility to “Successfully completed transfer to another treatment or facility ○ Change wording on item 14-to add “or facility” and “or transfer not successfully completed” ○ Add wording on item 24- “Successfully completed” transfer • For ToolCode – added item “9-for CGAS” • Deleted requirement in 3.6.3 Additional Business Rules and Guidance, “3. Within an admission, a DiagnosisCode should appear only once”. |
| 8/31/2018 | Treatment Episode XML | <ul style="list-style-type: none"> • Added a missing data element, DaysWorkedInLast30DaysNumber, in the sample XML code. |
| 8/31/2018 | Treatment Episode | <ul style="list-style-type: none"> • Corrected Crosswalk table for LivingArrangementCode. This is not a new data element as it maps to RESIDSTAT. • Admission <ul style="list-style-type: none"> ○ The PriorityPopulationCode field is no longer in use. FASAMS will calculate this value. • Legal <ul style="list-style-type: none"> ○ Added clarifying language to OrderingCountyAreaCode. Changed the requirement rule so that it is required for community MH and for both DCF Operated and DCF Contracted state mental health treatment facilities. ○ Added guidance for how Civil and Forensic State Hospitals should use the MeetsCriteriaForBakerActCode and BakerActRouteCode. • Evaluation <ul style="list-style-type: none"> ○ Added clarification to Tool Code that if the evaluation is based on a professional/medical evaluation rather than on the use of an evaluation tool, Tool Code 3 BIO Psychosocial should be used. ○ Added a new Tool Code for NCFAS/CAT. • Diagnosis <ul style="list-style-type: none"> ○ Removed a business rule requiring that a DiagnosisCode should appear only once during an admission. • Financial and Household <ul style="list-style-type: none"> ○ Added clarifying definition of family for FamilySizeNumber field. ○ Added two new Primary Payment Source codes: <ul style="list-style-type: none"> ▪ Tricare/Veterans ▪ Kidcare/Children’s Hospital Insurance Program (CHIP) |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Added two new Health Insurance codes: <ul style="list-style-type: none"> ▪ Tricare/Veterans ▪ Kidcare/Children’s Hospital Insurance Program (CHIP) ● Discharge <ul style="list-style-type: none"> ○ Two fields are no longer in use: <ul style="list-style-type: none"> ▪ Future Drug Use Intended Code ▪ Friends Use Drugs Code ○ Changed the requirement rule for Discharge Destination Code so that it is required for community MH and for both DCF Operated and DCF Contracted state mental health treatment facilities. ● Stability of Housing <ul style="list-style-type: none"> ○ Removed the list of valid Living Arrangement codes and added wording to refer to Appendix 5. Code values have changed. ● Client Demographic <ul style="list-style-type: none"> ○ 99999-9999 can be used for ResidencePostalCode if unknown. |
| 5/21/2018 | Treatment Episode | <ul style="list-style-type: none"> ● Modified wording in several sections for clarity. ● Added examples of how to construct SourceRecordIdentifiers in each section. ● Standardized code usage in all sections, i.e. 0 = No and 1 = Yes. ● True/False fields have been changed to Yes/No fields. ● The Treatment Episode is now contained at the Provider level instead of the Provider Site level. Language has been changed to reflect this as well as: <ul style="list-style-type: none"> ○ ProviderSiteTreatmentEpisode is now ProviderTreatmentEpisode. ○ SiteIdentifier has been removed from ProviderTreatmentEpisode and added to Admission. ○ Business rules and guidelines have been adjusted accordingly. ● Admission: <ul style="list-style-type: none"> ○ IsCodependent is now required if the Admission/Discharge is for Substance Abuse. ○ The following are now required for both Initial and Transfer Admissions: <ul style="list-style-type: none"> ▪ SourceRecordIdentifier ▪ SubContractNumber ▪ ContractNumber ▪ ProgramAreaCode ▪ AdmissionDate ▪ TreatmentSettingCode ▪ TypeCode ▪ IsCodependent ▪ ReferralSourceCode ▪ PriorityPopulationCode ○ The following are now required for Initial Admissions and optional for Transfer Admissions: |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ StaffEducationLevelCode ▪ StaffIdentifier ▪ DaysWaitingToEnterTreatmentKnown ▪ DaysWaitingToEnterTreatmentNumber • Performance Outcome Measure: <ul style="list-style-type: none"> ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ SourceRecordIdentifier ▪ PerformanceOutcomeMeasureDate ○ The following are now required for Initial Admission and Final Discharge, and optional for Transfer Admission and Transfer Discharge: <ul style="list-style-type: none"> ▪ StaffEducationLevelCode ▪ StaffIdentifier • Client Demographics: <ul style="list-style-type: none"> ○ AnnualPersonalIncomeAmount must be greater than or equal to zero. ○ The following are now required for Initial Admission and Final Discharge, and optional for Transfer Admission and Transfer Discharge: <ul style="list-style-type: none"> ▪ VeteranStatusCode ▪ MaritalStatusCode ▪ ResidenceCountyAreaCode ▪ ResidencePostalCode • Financial and Household: <ul style="list-style-type: none"> ○ The following are now required for Initial Admission and Final Discharge, and optional for Transfer Admission and Transfer Discharge: <ul style="list-style-type: none"> ▪ PrimaryIncomeSourceCode ▪ AnnualPersonalIncomeKnown ▪ AnnualPersonalIncomeAmount ▪ AnnualFamilyIncomeKnown ▪ AnnualFamilyIncomeAmount ▪ PrimaryPaymentSourceCode ▪ HealthInsuranceCode ▪ TemporaryAssistanceForNeedyFamiliesStatusCode ▪ FamilySizeNumberKnown ▪ FamilySizeNumber ▪ DependentsKnown ▪ DependentsCount ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ DisabilityIncomeStatusCode • Health: <ul style="list-style-type: none"> ○ The following are now required for Initial Admission and Final Discharge, and optional for Transfer Admission and Transfer Discharge: <ul style="list-style-type: none"> ▪ AmericansWithDisabilitiesActDisabledStatusCode ▪ PregnantCode |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ PregnancyTrimesterCode ▪ RecentlyBecomePostpartumCode ▪ IntravenousSubstanceHistoryCode ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ UnableToPerformDailyLivingActivitiesCode ○ The following data elements have been removed: <ul style="list-style-type: none"> ▪ HealthStatusCode ▪ IsChildInvolvedInPreventionProgram ▪ PerceiveDrugsAsHarmfulCode ▪ PerceiveAlcoholAsHarmfulCode ▪ PerceiveTobaccoAsHarmfulCode ▪ UsesTobaccoProductsCode ● Education and Employment <ul style="list-style-type: none"> ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ EducationGradeLevelCode ▪ SchoolAttendanceStatusCode ▪ SchoolDaysAvailableInLast90DaysKnown ▪ SchoolDaysAvailableInLast90DaysNumber ▪ SchoolDaysAttendedInLast90DaysKnown ▪ SchoolDaysAttendedInLast90DaysNumber ▪ EmploymentStatusCode ▪ DaysWorkedInLast30DaysKnown ▪ DaysWorkedInLast30DaysNumber ○ The following are now required for Initial Admission and Final Discharge, and optional for Transfer Admission and Transfer Discharge: <ul style="list-style-type: none"> ▪ SchoolSuspensionOrExpulsionStatusCode ● Stability Of Housing <ul style="list-style-type: none"> ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ DaysSpentInCommunityInLast30DaysKnown ▪ DaysSpentInCommunityInLast30DaysNumber ▪ LivingArrangementCode ○ DaysSpentInCommunityInLast30DaysKnown is now required if the Admission/Discharge is for Mental Health. ● Recovery <ul style="list-style-type: none"> ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ SelfHelpGroupAttendanceFrequencyCode ● Substance Use Disorders <ul style="list-style-type: none"> ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ DisorderRankCode ▪ DisorderRank ▪ RouteOfAdministrationCode |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ FrequencyOfUseCode ▪ FirstUseAge ○ The following are now required if the Admission/Discharge is for Substance Abuse: <ul style="list-style-type: none"> ▪ DisorderRankCode ▪ DisorderCode ▪ RouteOfAdministrationCode ▪ FrequencyOfUseCode ▪ FirstUseAge • Mental Health: <ul style="list-style-type: none"> ○ SeriousMentalIllnessOrEmotionalDisturbanceCode has been removed. ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ MentalHealthRiskCode ▪ HasRiskFactorsForEmotionalDisturbance ▪ PrognosisStatusCode • Medication: <ul style="list-style-type: none"> ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ MedicationAssistedOpioidTherapyCode ○ The following are now required for Initial Admission and Final Discharge, and optional for Transfer Admission and Transfer Discharge: <ul style="list-style-type: none"> ▪ ReceivedPrescriptionsThroughIndigentDrugProgramCode ▪ ReceivedPrescriptionsThroughPatientAssistanceProgramCode ▪ TakingAntipsychoticMedicationCode • Legal: <ul style="list-style-type: none"> ○ ChildrenDependencyOrDelinquencyStatusCode is now required if the Admission is for Child Mental Health or Child Substance Abuse. ○ CompetencyStatusCode is now required if the Admission is for Adult Mental Health. ○ The following are now required for all admissions and discharges: <ul style="list-style-type: none"> ▪ ArrestsInLast30DaysKnown ▪ ArrestsInLast30DaysNumber ▪ CompetencyStatusCode ▪ MeetsCriteriaForBakerAct ▪ BakerActRouteCode ○ The following are now required for Initial Admission and Final Discharge, and optional for Transfer Admission and Transfer Discharge: <ul style="list-style-type: none"> ▪ IsVoluntarilyInTreatment ▪ IsLegallyIncompetent ▪ LegalStatusCode ▪ LegalGuardianRelationshipCode ▪ ChildrenDependencyOrDelinquencyStatusCode ▪ HasBeenCommittedToJuvenileJustice |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ MeetsCriteriaForMarchmanAct ▪ MarchmanActTypeCode ▪ DrugCourtOrderedCode ▪ OrderingCountyAreaCode • Discharge: <ul style="list-style-type: none"> ○ The following are now required for both Final and Transfer Discharges: <ul style="list-style-type: none"> ▪ SourceRecordIdentifier ▪ TypeCode ▪ DischargeDate ▪ LastContactDate ▪ DischargeReasonCode ○ The following are now required for Final Discharge and optional for Transfer Discharge: <ul style="list-style-type: none"> ▪ StaffEducationLevelCode ▪ StaffIdentifier ▪ DischargeDestinationCode ▪ BirthOutcomeCode ▪ DrugFreeAtDeliveryCode ▪ FutureDrugUseIntendedCode ▪ FriendsUseDrugsCode • Evaluation: <ul style="list-style-type: none"> ○ ToolCode values have changed and new codes have been added. |
| 04/4/2018 | Treatment Episode | Initial document published. |

1.2.6 Chapter 06 Service Event

| Date | Document | Brief Description of Change |
|-----------|---------------|---|
| 2/15/23 | Service Event | <ul style="list-style-type: none"> • Added new Fund Code “1 for Medicaid (This code should be submitted by the provider to indicate FACT services funded under contract with Medicaid. These service events will not be submitted in FASAMS, but will provide guidance for Managing Entities to reconcile and monitor FACT clients.)” to section 3.1.5 Fields, Fund Code Description/Validation Rules column. |
| 3/01/2022 | Service Event | <ul style="list-style-type: none"> • Removed two references to Subcontract requirement in section 2.2 • Updated composite field for non-client specific records in section 3.1.3.2 • Updated the following in section 3.1.5 <ul style="list-style-type: none"> ○ Removed reference to Subcontract in description for ServiceDate ○ Changed description wording for StartTime from “Required” to “Should be provided” ○ Changed description wording for ServiceUnitCount from “Must” to “Should” ○ Deleted the following three validation rules from SubcontractNumber: <ul style="list-style-type: none"> ▪ “Required when the Provider.ContractualRelationshipCode |

| Date | Document | Brief Description of Change |
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| | | <p>is 2 (Managing Entity Subcontract), or 5 (Both Direct DCF Contract and Managing Entity Subcontract) and the current admission is subcontracted.”</p> <ul style="list-style-type: none"> ▪ “Must not be provided if Provider.ContractualRelationshipCode is not 2 (Managing Entity Subcontract), or 5 (Both Direct DCF Contract and Managing Entity Subcontract) and the current admission is not subcontracted.” ▪ “Must match a single subcontract number already set up in FASAMS for the ContractNumber and SubcontractNumber combination.” <ul style="list-style-type: none"> • Changed description wording from “Must” to “May” in section 3.3.3 |
| 10/28/2021 | Service Event | <ul style="list-style-type: none"> • Updated example XML • Added new section 2.4.1: Example of removing data element from FASAMS database |
| 7/28/2021 | Service Event | <ul style="list-style-type: none"> • Removed undo delete section • Removed “Required” from ModifierCodes • Update ServiceDate rule (replaced EndDate with StartDate) • Update HCPCSProcedureCode rule to “Must be the HCPCS code used for billing purposes • Removed ProgramAreaCodes 5 and 6 |
| 7/06/2021 | Service Event | <ul style="list-style-type: none"> • Added Unique Constraint Rule to Service Event entity |
| 5/24/2021 | Service Event | <ul style="list-style-type: none"> • Added “,within the data set.” Under the Deleting Service Event Data section • Removed rules 2 and 3 from section 3.1.3 <ul style="list-style-type: none"> ○ (2) A client-specific service event for a covered service with a unit of measure of “Day” must be the only client-specific service event for that service date for that individual at that entire provider, regardless of admission. ○ (3) A client-specific service event for a covered service with a unit of measure of “Hours” must be the only client-specific service event for that service date and start time for that individual at that entire provider, regardless of admission. |
| 5/5/2021 | Service Event | <ul style="list-style-type: none"> • Changed the effective date to 7/01/2021 |
| 3/11/2021 | Service Event | <ul style="list-style-type: none"> • TreatmentLocaleCodes were updated as follows <ul style="list-style-type: none"> ○ 01 for Assisted Living Facility ○ 02 for Recipient’s Home or Apartment ○ 03 for County Health Department ○ 04 for Court ○ 05 for Delinquency Commitment Facility ○ 06 for Foster Home ○ 07 for DCF Office ○ 08 for Jail/Prison ○ 09 for Juvenile Detention Center |

| Date | Document | Brief Description of Change |
|-----------|-------------------|---|
| | | <ul style="list-style-type: none"> ○ 10 for Nursing Home ○ 11 for Provider Premises ○ 12 for School ○ 13 for Shelter Facility ○ 14 for State Mental Health Treatment Facility ○ 16 for Community Setting ○ 21 for Acute Care Setting (i.e. CSU, Detox, ARF, Inpatient Unit) ○ 28 for Residential Treatment Center ○ 29 for Statewide Inpatient Psychiatric Program Facility ○ 31 for Group Home for Adults ○ 32 for Group Home for Children ○ 33 for Adult Family Care Home ○ 34 for Medical Hospital |
| 5/21/2020 | Service Event | <ul style="list-style-type: none"> ● Changed the effective date to 11/01/2020 |
| 4/28/2020 | Service Event | <ul style="list-style-type: none"> ● An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Service Event | <ul style="list-style-type: none"> ● Changed the effective date to 10/01/2020 |
| 1/7/2020 | Service Event | <ul style="list-style-type: none"> ● Removed language stating that undo-deletes cascade to child records |
| 5/1/2019 | Service Event XML | <ul style="list-style-type: none"> ● Added a new field to ServiceEvent Entity: <ul style="list-style-type: none"> ○ ImmediateDischargeSourceRecordIdentifier |
| 5/1/2019 | Service Event | <ul style="list-style-type: none"> ● Allow Service Events for Immediate Discharge (0014) Enhancement <ul style="list-style-type: none"> ○ Added the ImmediateDischargeSourceRecordIdentifier tags to the XML examples ● Changes to ServiceEvent: <ul style="list-style-type: none"> ○ Updated rule for FederalTaxIdentifier to say: <ul style="list-style-type: none"> ▪ Must match the Provider's FederalTaxIdentifier of the related Admission or ImmediateDischarge if TypeCode is 1 (Client-Specific). ○ Updated rule for SiteIdentifier to say: <ul style="list-style-type: none"> ▪ Must match the Provider's SiteIdentifier of the related Admission or ImmediateDischarge if TypeCode is 1 (Client-Specific). ○ Updated rule for ContractNumber to say: <ul style="list-style-type: none"> ▪ Must match the related Admission or ImmediateDischarge's ContractNumber if TypeCode is 1 (Client-Specific). ○ Added a new field ImmediateDischargeSourceRecordIdentifier ○ Updated rule for ProgramAreaCode to say: <ul style="list-style-type: none"> ▪ Must match the related Admission or ImmediateDischarge's ProgramAreaCode if TypeCode is 1 (Client-Specific). ○ Added new rule for TreatmentSettingCode: <ul style="list-style-type: none"> ▪ TreatmentSettingCode must be 06, 07, or 97 when a ServiceEvent is related to an ImmediateDischarge. |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Added new rule for CoveredServiceCode: <ul style="list-style-type: none"> ▪ If CoveredServiceCode is associated with an ImmediateDischarge ServiceEvent then the CoveredServiceCode must be one of the following values: <ul style="list-style-type: none"> • 01 – Assessment • 04 – Crisis Support • 11 – Intervention • 27 – TASC • 48 – Indicated Prevention ○ Updated rule for ServiceDate: <ul style="list-style-type: none"> ▪ Must match the EvaluationDate of the related ImmediateDischarge when there is one. |
| 1/17/2019 | Service Event | <ul style="list-style-type: none"> • Updated Terms and Acronyms • Capitalized Provider and Managing Entity in several sections. • Hyphenated UnDo-Delete • Removed the business rule that the HCPCS Procedure value must be valid for a given Covered Service • Removed the business rule that the Subcontract Number must match the Admission’s Subcontract if the Type Code is (1). |
| 10/31/2018 | Service Event | Deleted comments from August 31 revision of document |
| 8/31/2018 | Service Event XML | <ul style="list-style-type: none"> • Added new fields for Staff Identifier and Staff Education Level Code. |
| 8/31/2018 | Service Event | <ul style="list-style-type: none"> • Corrected a table header name. • Modified the second bullet in Section 3.2.3 under Service Event Covered Service Modifiers. Modifiers for covered services must be a valid modifier. • Modified the business rule on the ModifierCode for Service Event Covered Service Modifier. Must be a valid modifier code. • Modified the business rule on the ModifierCode for Service Event HCPCS Modifiers. Modifiers for HCPCSs must be valid for the given HCPCS and the given covered service. • Modified the business rule on the ModifierCode for Service Event Expenditure Modifiers. Modifiers for expenditure codes must be a valid modifier. • Added new fields for Staff Identifier and Staff Education Level Code. • Clarified that the following fields are optional: InvoiceDate, InvoiceNumber, PaidDate, PaymentReferenceNumber. • Removed a business rule on ServiceUnitCount that validated the maximum allowed units. Also modified a rule to work in conjunction with the new UnitOfMeasure field in Subcontract. • Add a new field for ProjectCode. • Modified the business rule for StartTime to work in conjunction with the new UnitOfMeasure field in Subcontract. |
| 6/13/2018 | Service Event | <ul style="list-style-type: none"> • Initial document published. |

1.2.7 Chapter 07 Waiting List

| Date | Document | Brief Description of Change |
|------------|--------------|--|
| 11/01/2022 | Waiting List | <ul style="list-style-type: none"> • Added SiteIdentifier as a Key Field • Update 2.3.1.1, 2.4.1.1, and 2.4.2 by adding “<SiteIdentifier>02</SiteIdentifier>” to XML examples |
| 3/01/2022 | Waiting List | <ul style="list-style-type: none"> • Removed reference to Subcontract requirement in 2.2 • Deleted in section 3.1.4 the following three validation rules from SubcontractNumber: <ul style="list-style-type: none"> ○ “Required when the Provider.ContractualRelationshipCode is 2 (Managing Entity Subcontract), or 5 (Both Direct DCF Contract and Managing Entity Subcontract).” ○ “Must not be provided if Provider.ContractualRelationshipCode is not 2 (Managing Entity Subcontract), or 5 (Both Direct DCF Contract and Managing Entity Subcontract).” ○ “Must match a single subcontract number already set up in FASAMS for the ContractNumber and SubcontractNumber combination” • Changed in section 3.1.4 the description wording from “Must” to “Should” for PlacementDate |
| 10/28/2021 | Waiting List | <ul style="list-style-type: none"> • Added new section 2.4.1: Example of removing data element from FASAMS database |
| 7/28/2021 | Waiting List | <ul style="list-style-type: none"> • Removed undo delete section |
| 7/6/2021 | Waiting List | <ul style="list-style-type: none"> • Added Unique Constraint Rule to Waiting List entity |
| 5/5/2021 | Waiting List | <ul style="list-style-type: none"> • Changed the effective date to 07/01/2021 |
| 5/21/2020 | Waiting List | <ul style="list-style-type: none"> • Changed the effective date to 11/01/2020 |
| 5/15/2020 | Waiting List | <ul style="list-style-type: none"> • Removed Rule: <ul style="list-style-type: none"> ○ Must be a valid ProjectCode for the given ProgramAreaCode, where the TypeCode (Event Type) equals ‘Client-Specific’. Valid values are listed in the Covered Service section of Appendix 1 Data Code Values of Pamphlet 155-2. |
| 4/28/2020 | Waiting List | <ul style="list-style-type: none"> • An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Waiting List | <ul style="list-style-type: none"> • Changed the effective date to 10/01/2020 |
| 1/17/2019 | Waiting List | <ul style="list-style-type: none"> • Updated Terms and Acronyms • Capitalized Provider and Waiting List in several sections. • Hyphenated UnDo-Delete |
| 8/31/2018 | Waiting List | <ul style="list-style-type: none"> • Updated to correct errors in XSD |
| 8/31/2018 | Waiting List | <ul style="list-style-type: none"> • Corrected formatting errors. • Corrected a rule for Program Area Code regarding which codes should be used by |

| Date | Document | Brief Description of Change |
|------------|--------------|--|
| 11/01/2022 | Waiting List | <ul style="list-style-type: none"> Added SiteIdentifier as a Key Field Update 2.3.1.1, 2.4.1.1, and 2.4.2 by adding "<SiteIdentifier>02</SiteIdentifier>" to XML examples |
| | | <p>state mental health treatment facilities.</p> <ul style="list-style-type: none"> Added clarification to Level Of Care Evaluation Tool Code that if the evaluation is based on a professional/medical evaluation rather than on the use of an evaluation tool, Tool Code 3 BIO Psychosocial should be used. Added new rule to Outcome Date that it must be greater than or equal to the Placement Date. |
| 8/31/2018 | Waiting List | <ul style="list-style-type: none"> Corrected formatting errors. Corrected a rule for Program Area Code regarding which codes should be used by state mental health treatment facilities. Added clarification to Level Of Care Evaluation Tool Code that if the evaluation is based on a professional/medical evaluation rather than on the use of an evaluation tool, Tool Code 3 BIO Psychosocial should be used. Added new rule to Outcome Date that it must be greater than or equal to the Placement Date. |
| 5/30/2018 | Waiting List | <ul style="list-style-type: none"> Initial document published. |

1.2.8 Chapter 08 Acute Care

| Date | Document | Brief Description of Change |
|------------|------------|---|
| 3/01/2022 | Acute Care | <ul style="list-style-type: none"> Removed reference to Subcontract requirement in 2.2 Deleted in section 3.1.5 the following three validation rules from SubcontractNumber: <ul style="list-style-type: none"> "Required when the Provider.ContractualRelationshipCode is 2 (Managing Entity Subcontract), or 5 (Both Direct DCF Contract and Managing Entity Subcontract)." "Must not be provided if Provider.ContractualRelationshipCode is not 2 (Managing Entity Subcontract), or 5 (Both Direct DCF Contract and Managing Entity Subcontract)." "Must match a single subcontract number already set up in FASAMS for the ContractNumber and SubcontractNumber combination." |
| 10/28/2021 | Acute Care | <ul style="list-style-type: none"> Added new section 2.4.1: Example of removing data element from FASAMS database |
| 7/28/2021 | Acute Care | <ul style="list-style-type: none"> Removed undo delete section |
| 7/6/2021 | Acute Care | <ul style="list-style-type: none"> Added Unique Constraint Rule to Bed Capacity entity |
| 5/24/2021 | Acute Care | <ul style="list-style-type: none"> Added ", within the data set." Under the Deleting Acute Care Data section |
| 5/5/2021 | Acute Care | <ul style="list-style-type: none"> Changed the effective date to 7/01/2021 |
| 5/21/2020 | Acute Care | <ul style="list-style-type: none"> Changed the effective date to 11/01/2020 |

| Date | Document | Brief Description of Change |
|-----------|----------------|--|
| 4/28/2020 | Acute Care | <ul style="list-style-type: none"> An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Acute Care | <ul style="list-style-type: none"> Changed the effective date to 10/01/2020 |
| 1/7/2020 | Acute Care | <ul style="list-style-type: none"> Removed language stating that undo-deletes cascade to child records |
| 5/1/2019 | Acute Care | <ul style="list-style-type: none"> Reports for Operational Bed Counts for SMHTF (0028) Enhancement: Updated Submitting Acute Care Data section Changes to BedCapacityBedType TypeCodes <ul style="list-style-type: none"> Added the following: <ul style="list-style-type: none"> 5 for Female Baker Act Beds 6 for Male Baker Act Beds 7 for Female Step Down Forensic Beds 8 for Male Step Down Forensic Beds The following codes will become invalid (expire) by 8/1/2019 <ul style="list-style-type: none"> 1 for Baker Act Beds 4 for Step Down Forensic Beds |
| 1/17/2019 | Acute Care | <ul style="list-style-type: none"> Updated Terms and Acronyms Modified wording in several sections for clarity. Capitalized Provider and Managing Entity in several sections. Hyphenated Undo-delete |
| 6/3/2018 | Acute Care XML | <ul style="list-style-type: none"> Initial XSD published |
| 6/13/2018 | Acute Care | <ul style="list-style-type: none"> Initial document published. |

1.2.9 Chapter 09 Subcontract

| Date | Document | Brief Description of Change |
|-----------|-------------|---|
| 9/1/2022 | Subcontract | <ul style="list-style-type: none"> Added EffectiveDate and ExpirationDate to sections 1.4 and 2.2.1. |
| 3/01/2022 | Subcontract | <ul style="list-style-type: none"> Changed section 1.2 wording from “must” to “may” Changed section 2.2 wording: <ul style="list-style-type: none"> Changed “must” to “should” in opening sentence Changed “must” to “may” in second paragraph Removed “required” in reference to data fields in second paragraph Changed section 2.3 wording from “must” to “can” in opening sentence Changed section 3.1 heading suffix to “(Optional)” Updated section 3.1.1 reference to unique identifier to indicate Source Record Identifier Changed section 3.1.1 wording in last sentence: <ul style="list-style-type: none"> Deleted “Therefore” Changed “can” to “should” Added “same” between “sent with the” and “contract number” |

| Date | Document | Brief Description of Change |
|------------|-------------|--|
| | | <ul style="list-style-type: none"> • Added to section 3.1.3 heading “(Rule Disabled)” • Changed section 3.1.4 wording from “must” to “may” • Changed section 3.1.5 wording: <ul style="list-style-type: none"> ○ Changed “Required” to “Optional” ○ Changed “Must” to “Should” for wording on business rule validation • Changed section 3.2 heading suffix to “(Optional)” • Changed section 3.2.1 description: <ul style="list-style-type: none"> ○ Split opening sentence into two and removed “Therefore” transition ○ Changed “can” to “should” in second sentence • Added to section 3.2.2 heading “(Rule Disabled)” • Changed section 3.2.3 wording: <ul style="list-style-type: none"> ○ Changed “must” to “should” ○ Changed “with a ME” to “within an ME” • Changed section 3.2.4 wording: <ul style="list-style-type: none"> ○ Changed “Required” to “Optional” ○ Changed “Must” to “Should” for wording on business rule validation • Changed section 3.3 heading suffix to “(Optional)” <ul style="list-style-type: none"> ○ Split last sentence into two and removed “Therefore” transition ○ Changed “can” to “should” in last sentence • Added to section 3.3.3 heading “(Rule Disabled)” • Changed section 3.3.3 wording: <ul style="list-style-type: none"> ○ Changed “must” to “may” in opening sentence ○ Changed “must” to “should” for labeled paragraphs 1 and 2 • Changed section 3.3.5 wording: <ul style="list-style-type: none"> ○ Changed “Required” to “Optional” ○ Changed “Must” to “Should” for wording on business rule validation ○ Reformatted list in PaymentTypeCode for consistency • Changed section 3.4 heading suffix to “(Optional)” • Changed section 3.4.3 wording from “must” to “should” • Changed section 3.4.4 wording: <ul style="list-style-type: none"> ○ Changed “Required” to “Optional” ○ Changed “Must” to “Should” for wording on business rule validation • Changed section 3.5 heading suffix to “(Optional)” • Changed section 3.5.1 wording from “can” to “should” in last sentence • Changed section 3.5.3 wording from “must” to “should” • Changed section 3.5.5 wording: <ul style="list-style-type: none"> ○ Changed “Required” to “Optional” ○ Changed “Must” to “Should” for wording on business rule validation |
| 10/28/2021 | Subcontract | <ul style="list-style-type: none"> • Added new section 2.4.1: Example of removing data element from FASAMS database |

| Date | Document | Brief Description of Change |
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| 7/28/2021 | Subcontract | <ul style="list-style-type: none"> • Added EffectiveDate and ExpirationDate to SubcontractOCA entity • Removed undo delete section |
| 7/6/2021 | Subcontract | <ul style="list-style-type: none"> • Added Unique Constraint Rule to Subcontract, SubcontractOCA, and SubcontractService entities |
| 5/24/2021 | Subcontract | <ul style="list-style-type: none"> • Added “,within the data set.” Under the Deleting Subcontract Data section |
| 5/5/2021 | Subcontract | <ul style="list-style-type: none"> • Changed the effective date to 7/01/2021 |
| 5/21/2020 | Subcontract | <ul style="list-style-type: none"> • Changed the effective date to 11/01/2020 |
| 4/28/2020 | Subcontract | <ul style="list-style-type: none"> • An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Subcontract | <ul style="list-style-type: none"> • Changed the effective date to 10/01/2020 |
| 4/2/2020 | Subcontract | <ul style="list-style-type: none"> • Update field name PaymentType to PaymentTypeCode |
| 1/7/2020 | Subcontract | <ul style="list-style-type: none"> • Removed language stating that undo-deletes cascade to child records |
| 5/1/2019 | Subcontract | <ul style="list-style-type: none"> • Changes to UnitOfMeasureCode field <ul style="list-style-type: none"> ○ Added the following new codes: <ul style="list-style-type: none"> ▪ 9 for Quarterly Service ▪ 10 for Weekly Service ○ Changed description of code 7 from ‘Number of Enrolled Months’ to ‘Monthly Service’ |
| 1/17/2019 | Subcontract | <ul style="list-style-type: none"> • Updated Terms and Acronyms • Capitalized Provider and Subcontract in several sections. • Hyphenated Undo-delete • Modified wording in several sections for clarity. • Removed the business rule requiring Expiration Date to be between the beginning and ending dates of the Contract. |
| 10/31/2018 | Subcontract | <ul style="list-style-type: none"> • Deleted comments from August 31 revision of document |
| 8/31/2018 | Subcontract XML | <ul style="list-style-type: none"> • Updated to remove BundledRateCode and correct other errors |
| 8/31/2018 | Subcontract | <ul style="list-style-type: none"> • Removed BundledRateCode from the crosswalk table and the sample XML code. It was previously removed from the data elements but never removed here. • Added a field for UnitofMeasure. • Added a field for ProjectCode. • Modified the business rules for CoveredServiceCode: <ul style="list-style-type: none"> ○ To work in conjunction with ProjectCode. ○ To remove the rules for codes 34 FACT, 60 FIT and 61 CAT since those are now handled via the ProjectCode. • SubcontractService <ul style="list-style-type: none"> ○ Remove guidance from the PaymentRatePerUnitAmount field that described how to calculate bundled rates for teams and the individuals served by the team. |
| 6/13/2018 | Subcontract | <ul style="list-style-type: none"> • Initial XSD published |

| Date | Document | Brief Description of Change |
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| 6/13/2018 | Subcontract | <ul style="list-style-type: none"> Initial document published. |

1.2.10 Chapter 10 Contract

| Date | Document | Brief Description of Change |
|------------|----------|---|
| 7/28/2021 | Contract | <ul style="list-style-type: none"> Removed undo delete section |
| 5/24/2021 | Contract | <ul style="list-style-type: none"> Added “,within the data set.” Under the Deleting Contract Data section |
| 5/5/2021 | Contract | <ul style="list-style-type: none"> Changed the effective date to 7/01/2021 |
| 5/21/2020 | Contract | <ul style="list-style-type: none"> Changed the effective date to 11/01/2020 |
| 4/28/2020 | Contract | <ul style="list-style-type: none"> An update to the Naming Convention was made to account for the new Version 14 format. |
| 4/3/2020 | Contract | <ul style="list-style-type: none"> Changed the effective date to 10/01/2020 |
| 1/7/2020 | Contract | <ul style="list-style-type: none"> Removed language stating that undo-deletes cascade to child records |
| 10/31/2019 | Contract | <ul style="list-style-type: none"> Initial XSD published |
| 10/15/2018 | Contract | <ul style="list-style-type: none"> Initial document published. |

1.2.11 Appendix 1 Data Code Values

| Date | Document | Brief Description of Change |
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| 10/14/24 | Data Code Values | <ul style="list-style-type: none"> Re-added OCA MHFHR to the FY 2024-25 Carry Forward OCA List |
| 10/11/24 | Data Code Values | <ul style="list-style-type: none"> Project Codes Table <ul style="list-style-type: none"> Changed Project Code names: <ul style="list-style-type: none"> B9-LATTERS to Intermediate Level FACT (FACT-I) Teams C3-Multidisciplinary Child Welfare Teams to Family Well-being Treatment Teams Added Project Code C4-Involuntary Services Project Codes, Payment Method and Unit of Measure Table <ul style="list-style-type: none"> Added Project Codes for the following Methods of Payment <ul style="list-style-type: none"> Fee for Service/Day: C4 Fee for Service/Direct Staff Hour: C3, C4 Fee for Service/Dollar: B9, C4 Fee for Service/Quarterly Service: B8, C2, C3, C4 Fee for Service/Monthly Service: C4 Fee for Service/Weekly Service: B8, B9, C2, C3, C4 Fee for Service/Other: B9, C3, C4 Capitation Rate: B9, C3 Cost Reimbursement: B8, B9, C2, C3, C4 Active OCA Table |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Added OCA’s MHOCB-ME MH Crisis Beds and MSOCB-ME Substance Abuse Crisis Beds ○ Added Project Code C4-Involuntary Services to OCA’s MHMDT, MHOCN, MSOCN ○ Added Project Code B6-Provider Proviso Projects to OCA MH063 ○ Removed all Covered Services and added Project Code C0-Other Bundled Projects to OCA’s MHSCS and MSSCL ○ Added “Expenditure Code Only” to OCA MH018 under code name ○ Added “Data Submitted in ODMS” to OCA’s: MS107, MS108, MS110, MS113 “OSTF-Related Data Submitted in ODMS”, MS120, MS917 “effective 7/1/24”, MS918 “effective 7/1/24”, MS921 “OSTF-Related Data Submitted in ODMS Effective 7/1/24”, MSLAB “effective 7/1/23” ○ OCA’s moved from Active to Carry Forward OCA List: MH011, MH034, MH035, MH037, MH069, MH100, MH101, MH103, MH107, MH109, MH819, MHBRV, MHLFT, MHS50, MS100, MS916, MS920, MS925 ○ OCA’s moved from Active to Historical OCA List: MH048, MH060, MH068, MH070, MH105, MH108, MH109, MH115, MH118, MH988, MHASP, MHBID, MHCFY, MHFRS, MHFSS, MHJCL, MHJFS, MS101, MS105, MSCEI ● Carry Forward OCA Table <ul style="list-style-type: none"> ○ OCA’s moved from Carry Forward to Historical OCA List: MH036, MH046, MH073, MH075, MH077, MH078, MH952, MHBRK, MHCA2, MHCA8, MHCAF, MHCAJ, MHCAM, MHCAR, MHCAS, MHHVS, MHS52, MHSCV, MHSUR, MHSZB, MHVHG, MS924, MSCAF, MSCAS, MSH0H ● Historical OCA Table <ul style="list-style-type: none"> ○ Added “Data Submitted in ODMS Effective 7/1/23” under OCA Code MSCEI |

| Date | Document | Brief Description of Change |
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| 8/28/24 | Data Code Values | <ul style="list-style-type: none"> • Covered Service Table <ul style="list-style-type: none"> ○ Added Program Area Children MH to Covered Service 39-Short-term Residential Treatment • Active OCA Table • Added new OCA's: MH133, MH135, MH136, MH138, MH139, MHSC4, MHSL, MSSCL • Added new Opioid Settlement OCA's: MS107, MS108, MS110, MS113, MS120 and insert (Data Submitted in ODMS) under OCA code • Updated Expiration Date to 6/30/25 for OCA's: MH016, MH021, MH027, MH031, MH032, MH051, MH063, MH066, MH089, MH102, MH104, MH106, MH111, MH114, MH116, MH117, MH119, MH120, MH121, MH122, MH124, MH128, MHAJF, MHEHW, MHFSL, MHHTO, MHLFH, MHRM5, MHSWL, MHTRM, MS912, MS917, MS918, MS921, MS922, MSCS0, MSLAB • Inserted (Data Submitted in ODMS) following OCA code names: MS100, MS101, MS917, MS918, MSCEI, MSOTR, MSOCR, MSOHB, MSONQ, MSOPR • Added Project Code A4-Care Coordination to OCA MHFHR-Flagler Health-Central Receiving Center • Moved from Active OCA List to Historical OCA List: MH98G, MHSC2, MSRC4, MSRC5, MSSM4, MSSM5, MSSP4, MSSP5 |
| 5/6/24 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Services to OCA's <ul style="list-style-type: none"> ▪ MSOPR-Covered Service 12, 13, 30 ▪ MSRC6-Covered Service 22, 54 ▪ MHLFT-Covered Service 28 ○ Deleted Covered Services to OCA <ul style="list-style-type: none"> ▪ MSOPR-36, 37, 38 |
| 2/23/24 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Services to OCA's <ul style="list-style-type: none"> ▪ MHOPR-Covered Services 07, 28 ▪ MH069-Covered Service 22 ▪ MSOTB-Covered Service 27 • Carry Forward OCA Table <ul style="list-style-type: none"> ○ Corrected OCA MH069 expiration date to 6/30/24, and moved it from the FY 2023-24 Carry Forward OCA table to the FY 2023-24 Active OCA table |
| 11/17/23 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Add new OCA-MH981 ME MH 988 State and Territory Improvement Grant, Effective Date: 9/30/23 ○ Change Expiration Date for OCA MH988 from 9/30/24 to 6/30/24 ○ Change Effective Date for OCA MHCBS to 7/1/23 and Expiration Date to 9/20/24 |
| 11/14/23 | Data Code Values | <ul style="list-style-type: none"> • Project Code Table <ul style="list-style-type: none"> ○ Added new Project Codes <ul style="list-style-type: none"> ▪ B8-FFPSA Teaming Projects ▪ B9-LATTERS Projects |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ C2-Community Action Treatment (CAT) Teams for Ages 0-10 ▪ C3-Multidisciplinary Child Welfare Teams • Active OCA Table <ul style="list-style-type: none"> ○ Added new OCA's <ul style="list-style-type: none"> ▪ MSRC6-ME State Opioid Response Disc-Rec Comm Org-Yr 6 ▪ MSSM6-ME State Opioid Response Svcs-MAT-Yr 6 ▪ MSPP6-ME State Opioid Response DISC Grant Prev-Yr 6 ○ Added new Covered Services and Project Codes to OCA's <ul style="list-style-type: none"> ▪ MH000-Project Code C2 ▪ MH048-Covered Service 15 ▪ MH100-Covered Service 01; Project Code B6 ▪ MH111-Covered Services 06, 11, 15, 25, 42; Project Code B3 ▪ MH116-Covered Service 28 ▪ MH117-Covered Services 02, 11, 28, 29, 42; Project codes B1, B3, C0 ▪ MH120-Project Codes B1, B3, C0 ▪ MHEBP-Project Code B8 ▪ MHMDT-Project Codes B9, C3 ▪ MHPV2-Covered Services 15, 30, 48, 49, 50; Project Code B3 ▪ MS100-Covered Services 01, 02, 06, 08, 11, 13, 14, 15, 32, 35, 42, 46, 47; Project Codes B1, B3, C0 ▪ MS105-Covered Service 28 ▪ MSOCR-Covered Services 02, 06, 08, 10, 12, 15, 22, 28, 30, 35, 42, 52, 53; Project Code B3 ▪ MSOHB-Project Code B3 ▪ MSONQ-Covered Services 48, 49, 50, 51 ▪ MSOPR-Covered Services 22, 36, 37, 38, 54; Project Code B3 ○ Deleted Covered Services <ul style="list-style-type: none"> ▪ MSOCR-Covered Services 03, 24, 32 • Historical OCA Table <ul style="list-style-type: none"> ○ Added Project Code B3 to OCA MHSPV |
| 8/21/23 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Service 22 to OCA MH071 ○ Added Covered Service 15 to OCA MHTRM ○ Removed Covered Service 52 from OCA MSCBS ○ Added new OCA's: MH100, MH101, MH102, MH103, MH104, MH105, MH106, MH107, MH108, MH109, MH111, MH114, MH115, MH116, MH117, MH118, MH119, MH120, MH121, MH122, MH124, MH128, MH26B, MHCBS, MHSC3, MS100, MS101, MS105, MSOCR, MSOHB, MSONQ, MSOPR, MSOTR. ○ Updated titles for OCA's: MSCEI-ME SA Project Opioid-FL Opioid Crisis Pilot, and MS095-ME SA Cove Behavioral Health ○ Updated expiration dates to 6/30/24 for the following OCA's: MH011, MH016, MH021, MH027, MH031, MH032, MH034, MH035, MH037, MH048, MH051, MH060, MH063, MH066, MH068, MH069, MH070, MH089, MH819, MHAJF, MHASP, MHBID, MHBRV, MHCYF, MHEHW, |

| Date | Document | Brief Description of Change |
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| | | <p>MHFRS, MHFSL, MHFSS, MHHTO, MHJCL, MHJFS, MHLFH, MHLFT, MHRM5, MHS50, MHSWL, MHTRM, MS916, MS917, MS918, MS921, MSCS0.</p> <ul style="list-style-type: none"> ○ Updated expiration date to 8/30/23 for OCA MHSC2 ○ Updated expiration date to 9/29/25 for OCA's MHRE2, MHPV2 ○ Moved the following OCA's from the Active OCA List to the Carry Forward OCA List: MH036, MH075, MH078, MHBRK, MHCCR, MHFHR, MHHVS, MHS52, MHSUR, MHSZB, MHVHG, MSH0H, MSPHR. ○ Moved the following OCA's from the Active OCA List to the Historical OCA List: *CBHTS, *MHCJ2, MHCOS, *MHCR2, MHHMD, MHSC1, *MHTTI *MSCS2, MSRC3, MSSG3, MSSG4, MSSM#, MSSP3. (*denotes added/updated expiration date to 6/30/23) ● Carry Forward OCA Table <ul style="list-style-type: none"> ○ Moved OCA MH065 from the Carry Forward OCA List to the Historical OCA List ● Historical OCA Table <ul style="list-style-type: none"> ○ Moved the following OCA's from the Historical OCA List to the Active OCA List: MS 912, MS922, MSCEI and MSLAB. Updated effective dates to 7/1/23, and expiration dates to 6/30/24. |
| 6/20/23 | Data Code Values | <ul style="list-style-type: none"> ● Covered Service Table <ul style="list-style-type: none"> ○ Added new covered service 52-Care Coordination ● Active OCA Table <ul style="list-style-type: none"> ○ Added new OCA MHSC2-ME FL SOC Expansion & Sustainability Proj-Yr 2 ○ Added covered services 20, 21, 38 and 54 to OCA MSSM5 ○ Added covered service 52-Care Coordination to OCA's: CBHTS, MH000, MH001, MH009, MH011, MH018, MH021, MH026, MH071, MH072, MH0BN, MH0CN, MH0FH, MH0FT, MH0TB, MHCAT, MHCR2, MHDRF, MHEBP, MHFMH, MHMCT, MHMDT, MHS55, MHSCR, MHSFP, MHSUN, MHTLH, MHTMH, MHTRV, MS000, MS003, MS011, MS021, MS023, MS027, MS081, MS091, MS095, MSOCN, MS0TB, MS907, MS925, MSCBS, MSCS2, MSCS3, MSSFP, MSSM5, MSTRV, MSTV2 ○ Added covered service 54-Room & Board w/Supervision Level IV to: MH000, MH001, MH032, MH035, MH071, MH072, MH0FH, MH0TB, MHARP, MHCCR, MHCJ2, MHCJ4, MHCOS, MHFHR, MHFMH, MHLFH, MHSCR, MHSFP, MHTMH, MS000, MS003, MS027, MS081, MS091, MS0TB, MS925, MSARP, MSCBS, MSCS0, MSSM3, MSSM4 ○ Removed covered services 15, 30, 48, 49, and 50 from OCA MHPV2 ○ Corrected OCA name on Page 26 (MSTV2) to MSARP ○ Added project code B4-CAT Team to OCA MHEMP ○ Added project codes A2-FIT Team and B4-CAT Team to OCA MHMDT ● Carry Forward OCA Table <ul style="list-style-type: none"> ○ Added covered service 54-Room and Board w/Supervision Level IV to OCA's MS920 and MSCAF ● Historical OCA Table <ul style="list-style-type: none"> ○ Added covered service 52-Care Coordination to OCA's: MH061, MH096, MHS51, MSTVS ○ Added covered service 54-Room & Board w/Supervision Level IV to OCA's: MH01S, MHCJ3, MHCOM, MS03S and MSCOM ● FASAMS Modifiers Table |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Inserted “or Brixadi” after “Sublocade” in the title and description of FASAMS modifier S6-Buprenorphine Extended-Release Injection (Sublocade) ● FACT/FIT/CAT OCA/Project Code Table added |
| 4/19/23 | Data Code Values | <ul style="list-style-type: none"> ● Covered Service Table <ul style="list-style-type: none"> ○ Added Program Area 2-ASA to Covered Service 07-Drop-In/Self Help ○ Added Program Areas 2-ASA and 4-CSA to covered Service 10-Intensive Case Management ○ Added new Covered Services 53-HIV Early Intervention Services and 54-Room and Board with Supervision Level IV ● Active OCA Table <ul style="list-style-type: none"> ○ Changed expiration date to 3/15/23 for SOR SUP 1 OCA’s: MH26S, MHCCS, MHCJ3, MHCM2, MHRES, MHSPV, MS25S, MSPPS, MSSPV, and MSTVS, and moved the OCA’s to the Historical OCA list ○ Moved SOR SUP1 OCA’s MH01S, MH09S, MH18S, MH25S, MHCOM, MS03S, MS11S, MS21S, and MSCOM to the Historical OCA list ○ Added Covered Services 10-Intensive Case Management and 53-HIV Early Intervention Services to OCA MSSM5 ○ Added Covered Service 07-Drop-In/Self-Help Center to OCA MSRC5 ○ Added Covered Service 53-HIV Early Intervention Services to OCA MS023 ● FASAMS Modifier Table <ul style="list-style-type: none"> ○ Added SOR MAT Covered Service Modifiers S7 – S12 to FASAMS Modifiers |
| 3/10/2023 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Service 03 to OCA MH021 |
| 2/15/2023 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Services 11 and 42 and Program Areas 1 and 2 to OCA MH078 ○ Added Covered Service 43 to OCA MH0TB ○ Added new OCAs MSRC5-ME State Opioid Response Disc-Rec Comm Org-Yr 5 and MSSM5-ME State Opioid Response Svcs-MAT-Yr 5 ○ Updated Effective Dates for OCAs MSRC2, MSSM2, MS922, MSCEI, and MSLAB ○ Updated Expiration Dates for OCAs MS922, MSCEI, and MSLAB, and added Expiration Date for MSRC2 ○ Moved OCAs MSRC2, MSSM2, MS922, and MSLAB to Historical OCA Codes table ● HCPCS Procedure Code Table <ul style="list-style-type: none"> ○ Added HCPCS Procedure Code IER00-Incidental Expenses – GPRA Non-Cash Incentive |
| 1/05/2023 | Data Code Values | <ul style="list-style-type: none"> ● Added Covered Service 14 to OCA Code MHLFT ME MH Life Mgmt Ctr Funct Family Therapy Team |
| 12/21/2022 | Data Code Values | <ul style="list-style-type: none"> ● Added Project Code A5 to OCA Codes MH000 and MH009 ● Added Federal <i>Budget Period 3/14/2021 through 3/15/2022</i> to the end of the OCA title. |
| 12/02/2022 | Data Code Values | <ul style="list-style-type: none"> ● Covered Service Table |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Added Recommended to the header for FASAMS Placement Code(s) and FASAMS Placement Name(s) ● Active OCA Table <ul style="list-style-type: none"> ○ Added the following new OCA Codes: <ul style="list-style-type: none"> ▪ MHCJ2 ME MH Forensic Services Expansion – MHBG ▪ MSSP5 ME State Opioid Reponse Disc Grant-Prev-Yr 5 |
| 11/01/2022 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Added the following Covered Services to OCA MHFSS ME MH Sarasota First Step CSU & Detox Center <ul style="list-style-type: none"> ▪ 01-Assessment ▪ 02-Case Management ▪ 11-Intervention ▪ 12-Medical Services ▪ 30-Information & Referral ▪ 46-Recovery Support |
| 10/10/2022 | Data Code Values | <ul style="list-style-type: none"> ● Project Code Table <ul style="list-style-type: none"> ○ Changed the name and description of Project Code C1 to the following: <ul style="list-style-type: none"> ▪ C1 Sustainability Payment for Emergency Response: Lump sum payments to support provider sustainability during declared public emergencies. This code may only be used once per OCA per Provider each month to report the difference between the Total YTD ME General Ledger payments to the provider and the Total YTD Actual Payable reported for all other Covered Service and Project Codes for that OCA. |
| 10/07/2022 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Service 30 to OCA MHLFH ○ Added Covered Service 40 OCA MHEHW |
| 10/04/2022 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Moved MH034 from the Carry Forward OCA Table to the Active OCA Table ○ Added Covered Service 19 to OCA MHHVS ○ Changed the expiration date to 09/29/23 for the following OCA Codes: <ul style="list-style-type: none"> ▪ MSRC4 ▪ MSSM4 ▪ MSSP4 |
| 8/26/2022 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Changed the effective date from 03/01/2023 to 09/01/2021 on OCA codes MHARP and MSARP |
| 8/24/2022 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Added the following new OCA Codes: <ul style="list-style-type: none"> ▪ MHCJ4 ME MH Forensic Community Diversion MHBG Supplemental 2 Federal Budget Period: 9/1/2021 - 9/30/2025 |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ MH988 ME MH 988 Implementation Federal Budget Period: 9/1/2021 - 9/30/2025 |
| 8/19/2022 | Data Code Values | <ul style="list-style-type: none"> • Evaluation Level Table <ul style="list-style-type: none"> ○ Added new Evaluation Tool (Code) – No/Other LOC Assessment (0) |
| 8/19/2022 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added the following new OCA Codes: <ul style="list-style-type: none"> ▪ MHARP ME MH Services MHBG SUP2 ▪ MSARP ME SA Services SAPT SUP2 ▪ MH98G ME MH 988 Implementation Fed Discretionary Grant ▪ MH070 ME MH Faulk Center Behind the Mask MH Services ▪ MHTRM ME MH Centerstone Trauma Recovery Center ▪ MH262 ME MH Early Intervention Services MHBG SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ▪ MHCCR ME Core Crisis Set Aside MHBG SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ▪ MHEBP ME MH Evidence Based Practice Team ▪ MHMDT ME ME Other Multidisciplinary Team ▪ MHRE2 ME MH Residential Stability Coordination MHBG SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ▪ MHPV2 ME Suicide Prevention MHBG SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ▪ MS252 ME Primary Prevention SAPT SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ▪ MSCS3 ME NES/SEN Care Coordination SAPT SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ▪ MSPP2 ME SA Prevention Partnership Program SAPT SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ▪ MSPV2 ME Suicide Prevention SAPT SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ▪ MSTV2 ME Transitional Vouchers SAPT SUP2 Federal Budget Period: 9/1/2021 - 9/30/2025 ○ Moved MH060 ME Veterans Alternative Retreat Program from the Historical OCA Table to the Active OCA Table and changed the effective date to 07/01/22, added an expiration date of 06/30/23 and removed Project Codes B3 and B7. ○ Added Project Code B1 Network Evaluation and Development to OCA Code MHSC1 ME – FL SOC Expansion & Sustainability Proj – Yr 1 • Carry Forward OCA Table <ul style="list-style-type: none"> ○ Updated all of the expiration dates to 06/30/23 |
| 8/01/2022 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added or updated expiration dates on the following OCA's: <ul style="list-style-type: none"> ▪ MH01S MH 24-Hr Residential Svcs (Non-Hospitalization) SUP1 ▪ MH09S Ambulatory/Community Non-24 Hour Care SUP1 ▪ MH18S CSU, Baker Act, Inpatient Crisis Svcs SUP1 ▪ MH25S Prevention Services SUP1 |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ MH011 ME Stewart-Marchman Behavioral Healthcare ▪ MH016 ME MH Personal Enrichment MH Crisis Stab Unit ▪ MH027 Directions for Living ▪ MH031 ME David Lawrence Center Behavioral Health Services ▪ MH032 ME Baycare Beh. Health Veterans And Families Pilot Program ▪ MH035 ME LifeStream Central Receiving System- Citrus County ▪ MH036 ME FL Recovery Schools - Youth BH Wraparound Services ▪ MH037 Fort Myers Salvation Army Behavioral Health Services ▪ MH051 ME Okaloosa/Walton MH & SA Pretrial Diversion Project ▪ MH063 Starting Point Behavioral Healthcare-Talkable Talks ▪ MH066 Peace River Center Sheriff's Outreach Program ▪ MH068 Mental Health Association Walk-In and Counseling Ctr ▪ MH078 Community Rehabilitation Center-Project Alive ▪ MH089 ME Clay Behavioral Hlth-Crisis Prevention ▪ MH26S ME Early Intervention Services MHBG SUP1 ▪ MH819 ME Gracepoint Center ▪ MHAJF Jewish Family Services-Mental Health First Aid Coalition ▪ MHASP Aspire Health Veterans and National Guard MH Svcs. ▪ MHCCS ME Core Crisis Set Aside MHBG SUP1 ▪ MHCJ3 ME MH Forensic Community Diversion MHBG SUP1 ▪ MHCM2 ME Care Coordination MHBG SUP1 ▪ MHCOM ME MH Services MHBG SUP1 ▪ MHCOS ME Emergency COVID-19 Sup Grant ▪ MHFHR Flagler Health-Central Receiving Center ▪ MHRES ME Residential Stability Coord. MHBG SUP1 ▪ MHRM5 ME Renaissance Manor ▪ MHS50 ME Lifestream Center ▪ MHS52 ME Circles of Care - Crisis Stabilization ▪ MHSPV ME Suicide Prevention MHBG SUP1 ▪ MS003 SA 24- Hour Residential Services (Non-Hospitalization) ▪ MS011 Ambulatory/Community Non-24hr Care ▪ MS021 SA Detoxification Services ▪ MS027 Federal Pregnant Women and Women with Dependent Children ▪ MS916 ME Gateway-Project Save Lives ▪ MS917 ME SA STEPS-Women's Residential Treatment ▪ MS918 ME SA St Johns EPIC Recovery Ctr-Women's Res Bed |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ MS921 Here's Help - Juvenile Residential Treatment Expansion ▪ MS922 Broward Health-Integrated Medication Assisted Treatment (MAT) Response (Also added CS 12, 15 and 28) ▪ MSCOM ME SA Services SAPT SUP1 ▪ MSCS0 ME SA Seminole Co Sheriff Opioid ARC Partnership ▪ MSCS2 ME SA NES/SEN Care Coord SAPT SUP 1 ▪ MSSPV ME SA Suicide Prevention SAPT SUP1 ▪ MS03S SA 24- Hour Residential Svcs (Non-Hospitalization) SUP1 ▪ MS11S Ambulatory/Community Non-24 Hour Care SUP1 ▪ MS21S SA Detoxification Services SUP1 • Added the following new OCA Codes <ul style="list-style-type: none"> ○ MHCFY ME MH CONNECT FAMILIAS MH YOUTH SCREEN ○ MHBRK ME MH BROOKS REHABILITATION MH SVCS ○ MHBRV ME MH FLAGLER BRAVE PROGRAM ○ MHFSL ME MH ALPERT JEWISH FAMILY SUPPORT LINE ○ MHFRS ME MH FL RECOVERY SCHOOLS TAMPA BAY ○ MHFSS ME MH FIRST STEP SARASOTA CSU & DETOX CENTER ○ MHHVS ME MH TRANSITION HOUSE HOMELESS VETERANS SVCS ○ MHLFH ME MH LMC FORENSIC MULTIDISCIPLINARY TEAM ○ MHLFT ME MH LIFE MGMT CTR FUNCT FAMILY THERAPY TEAM ○ MHSWL ME MH SENIOR MH WELLNESS & CRISIS RESPONSE LINE ○ MHCCR ME MH COLLIER CENTRAL RECEIVING CENTER ○ MHHTO ME MH HERE TOMORROW OUTPATIENT MH SVCS ○ MHJCL ME MH JCS MIAMI DADE MONROE CRISIS LINE ○ MHJFS ME MH JEWISH FAMILY SERVICES COLLABORATION ○ MHBBD ME MH BROWARD STEPPING UP JAIL DIVERSION ○ MHEHW ME MH EAGLES HAVEN WELLNESS CTR ○ MHSZB ME MH SULZBACHER DUVAL MH OFFENDERS PROG ○ MHSUR ME MH JEWISH COMMUNITY SVCS SURFSIDE ○ MHVHG ME MH VALERIE'S HOUSE CHILD GRIEF SERVICES ○ MSHOH ME SA HOUSE OF HOPE HEALING & RECOVERY CTR ○ MSPHR ME SA PHOENIX HOUSE WOMENS RECOVERY SERVICES |
| 8/01/2022 | Data Code Values | <ul style="list-style-type: none"> • Carry Forward OCA Table <ul style="list-style-type: none"> ○ Moved the following OCA's to the Carry Forward OCA Table: <ul style="list-style-type: none"> ▪ MH034 ME UF Health Center for Psychiatry ▪ MH046 ME Centerstone Florida ▪ MH048 ME NW Behavioral Health Services - Training Trauma Now ▪ MH064 Flagler County Mental Health Drop-In Center ▪ MH065 City of West Park - Mental Health Initiative ▪ MH069 Marion County Law Enforcement Co-Responder Program ▪ MH075 Academy of Glengary-Employment Svcs for Persons w/MH Illnesses ▪ MH077 Leon County Sheriff's Office - Mobile Response Program ▪ MS924 ME LSFA Opioid Epidemic-ME Comm Engagement ▪ MSLAB Broward Co Long Acting Injectable Buprenorphine Pilot Prog |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Moved MH021 ME SFBN-INVOLUNTARY OUTPATIENT SVCS PILOT PROJ to the Active OCA Table and updated the expiration date to 06/30/23 |
| 8/01/2022 | Data Code Values | <ul style="list-style-type: none"> ● Historical OCA Table <ul style="list-style-type: none"> ○ Moved OCA MHMMR - ME MH Hurricane Michael Mental Health Response from the Active OCA Table to the Historical OCA Table and added an effective date of 10/11/2018. ○ Moved OCA MSCEI - Project Opioid - Florida Opioid Pilot Program from the Active OCA Table to the Historical OCA Table. |
| 8/01/2022 | Data Code Values | <ul style="list-style-type: none"> ● Evaluation Level Table <ul style="list-style-type: none"> ○ Added 0 No Treatment to the ASAM Codes |
| 4/21/2022 | Data Code Values | <ul style="list-style-type: none"> ● Updated "Score Range" to "Score Number" in Section 16 Evaluation Level table header ● Updated text in descriptions for ToolCodes 5, 6, and 8 in Section 16 Evaluation Level table |
| 4/14/2022 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Service 15 to OCA MH0TB and MS0TB |
| 3/01/2022 | Data Code Values | <ul style="list-style-type: none"> ● Added "Example" to front of Table 10 heading ● Added Covered Service 02 to OCA Code MHMCT ● Added Covered Service 04 to OCA Code MHEDT ● Added FASAMS Modifiers 97 and 98 |
| 2/11/2022 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Changed the Expiration Date to 6/30/2022 and added Covered Services 14, 19 and 35 to OCA Code MSCS0. ○ Added new OCA Code MHSC1 - ME FL SOC Expansion & Sustainability Proj – Yr 1 |
| 1/28/2022 | Data Code Values | <ul style="list-style-type: none"> ● Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Service 02-Case Management to OCA <u>MH069</u>-Marion County Law Enforcement Co-Responder Program ○ Added Covered Service 15-Outreach to OCA <u>MH078</u>-Community Rehabilitation Center-Project Alive ○ Added Covered Services 03-Crisis Stabilization and 39-Short-term Residential Treatment to OCA <u>MHCCS</u>-ME Core Crisis Set Aside MHBG Sup1 ○ Added OCA <u>MS924</u>-ME LSFA Opioid Epidemic-ME Comm Engagement (Eff Date: 11/1/21; Project Code: B1, Program Codes 1-4, Fund Codes: 2, 5 ● Added Covered Services 11-Intervention and 42-Intervention-Group to OCA <u>MSSPV</u>-ME SA Suicide Prevention SAPT Sup1 |
| 1/28/2022 | Data Code Values | <ul style="list-style-type: none"> ● FASAMS Modifiers <ul style="list-style-type: none"> ○ Added 97-Carry Forward Funding FY 19-20 ○ Added 98-Carry Forward Funding FY 20-21 |

| Date | Document | Brief Description of Change |
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| 1/28/2022 | Header Column | <ul style="list-style-type: none"> • Evaluation Level Table <ul style="list-style-type: none"> ○ Added "(Forensic Clients Only)" to "Requires Determination" column header |
| 11/22/2021 | Data Code Values | <ul style="list-style-type: none"> • Changed General Functional Improvement Codes for FARS, CFARS, and NFCAS/CAT, CANS, DLA-20, GAIN, and Other LOF Assessment from: <ul style="list-style-type: none"> • 1 for Baseline, • 2 for Improved Functioning • 3 for Not Improved Functioning • 4 for Maintain Stable Functioning • to: • 101 for Baseline • 102 for Improved Functioning • 103 for Not Improved Functioning • 104 for Maintain Stable Functioning |
| 11/22/2021 | Data Code Values | <ul style="list-style-type: none"> • Add Program Area Code 3 to OCA MH078 |
| 11/9/2021 | Data Code Values | <ul style="list-style-type: none"> • Evaluation Level Table <ul style="list-style-type: none"> ○ Split Score Range or Code List into 2 columns-Score Range and Score Code ○ Added the following language under Biopsychosocial (3): (Level Codes 1-6 Effective Thru 6/30/21) ○ Added the following language under FARS (5), CFARS (6), and NFCAS/CAT (8): "Current reporting allows for both the specific value generated by the given evaluation & the new General Functioning Improvement score. Individual evaluations & their scores will remain available for reporting for 6 months until 5/1/22. On 5/22/22, the only score allowed will be the GFI. Please plan accordingly." Score codes 1-4 also added to these Evaluation tools <ul style="list-style-type: none"> ▪ 1 for Baseline ▪ 2 for Improved Functioning ▪ 3 for Not Improved Functioning ▪ 4 for Maintain Stable Functioning ○ Remove General Functional Improvement (10) ○ Add the following new Evaluation tools: CANS (11), DLA-20 (12), GAIN (13), SAMHSA NOMS (14), and Other LOF Assessment (15) with the following Score Codes: <ul style="list-style-type: none"> ▪ 1 for Baseline ▪ 2 for Improved Functioning ▪ 3 for Not Improved Functioning ▪ 4 for Maintain Stable Functioning ○ Move 1 for Yes and 2 for No to Score Code column under Competency to Proceed to Trial (7) |
| 10/22/2021 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added Program Area 4-CSA to OCA MSRC4 |

| Date | Document | Brief Description of Change |
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| 10/14/2021 | Data Code Values | <ul style="list-style-type: none"> • Added “each month” after “per provider” in Table 5 Project Codes for Project Code C1-Sustainability Payment for COVID related funds/services. • Added Project Code C-1-Sustainability Payment for COVID related funds/services to the following OCAs: <ul style="list-style-type: none"> ○ MH000, MH001, MH009, MH018, MH01S, MH09S, MH18S, MH02S, MH25S, MHOCN, MHFHR, MHSCR, MS000, MS003, MS011, MS021, MS025, MS03S, MS081, MS11S, MS21S, MS907, MS916, MS0CN, MSCBS, MSSM2, MSSM3, MSSM4 • Removed the following OCAs from Table 9 FY 2021-22 Historical OCA Codes: <ul style="list-style-type: none"> ○ MH036 and MH046 |
| 10/1/2021 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added Program Area 1-AMH to OCA MH065 |
| 10/1/2021 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added Effective Date 7/1/2015 to OCA’s MSTVS and MSTRV |
| 9/9/2021 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added Covered Services 46, 47, 48, 50 to MHHMD ○ Changed expiration dates from 9/29/21 to 9/29/22 |
| 8/27/2021 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added Program Area 1 – AMH to OCA MH0BN |
| 8/23/2021 | Data Code Values | <ul style="list-style-type: none"> • HCPCS Code Table <ul style="list-style-type: none"> ○ Added new code IEQ00 Incidental Expenses - Child Care (Table 10) |
| 8/16/2021 | Data Code Values | <ul style="list-style-type: none"> • Active OCA Table <ul style="list-style-type: none"> ○ Added new or reactivated OCAs: CBHTS, MH01S, MH036, MH046, MH09S, MH18S, MH25S, MH063, MH064, MH065, MH066, MH068, MH069, MH075, MH077, MH078, MH0FT, MH211, MH26S, MHAJF, MHASP, MHCCS, MHCJ3, MHCM2, MHCOM, MHCOS, MHCR2, MHFHR, MHRES, MHSPV, MS25S, MS922, MS925, MSCEI, MSCOM, MSCS2, MSLAB, MSPPS, MSRC4, MSSG4, MSSM4, MSSP4, MSSPV, MSTVS, MS03S, MS11S, MS21S ○ Added/Updated OCA Expiration Date to 6/30/22: MH011, MH016, MH027, MH031, MH032, MH034, MH035, MH037, MH048, MH051, MH089, MH819, MHRM5, MHS50 MHS52, MS921, To 8/19/21: MHMMR To 9/29/21: MSSM2 ○ Added Covered Services 46 and 47 to OCA MHMCT Covered Service 09 to OCA MHS52 Covered Services 01, 02, and 35 to OCA MHSUN ○ Removed Covered Services 28, 35, and 42 from OCA MS023 in Pamphlet Covered Services 19, 20, 21, and 24 from OCA MS918 ○ Added Project Code B1 to OCAs MSRC2 and MSRC3 ○ Added Program Code 4-CSA to OCA MS027 |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Removed Program Codes: 1-AMH and 2-ASA from OCA MH0BN; Program Code 3-CMH from OCA MHDRF Program Code 3-CMH from OCA MHFMH ○ Placed asterisk next to Covered Service 30 for OCA MS025-Valid through 12/31/20 ○ Removed carry forward language from OCA MS918 ○ Removed Effective Date, asterisks, and “Valid through 6/30/19” for covered services and project codes for OCA MSTRV ● Updated OCA MS918 Name from ME SA St Johns EPIC Recovery Ctr-Detox/Res Bed Capac to ME SA St Johns EPIC Recovery Ctr-Women’s Res Bed |
| 8/16/2021 | Data Code Values | <ul style="list-style-type: none"> ● Carry Forward OCA Table <ul style="list-style-type: none"> ○ Moved OCAs from Active to Carry Forward Table w/new or updated expiration dates: MH021, MH073, MH952, MHCA2, MHCA8, MHCAJ, MHCAM, MHCAR, MSCAF, MSCAS ○ Added Covered Services 18 and 25 to OCA MHCAJ and moved to Carry Forward table |
| 8/16/2021 | Data Code Values | <ul style="list-style-type: none"> ● Historical OCA Table <ul style="list-style-type: none"> ○ Moved OCAs from Active to Historical Table: MHC0V, MHES4, MHHST, MS0F4, MS0F5, MS0H4, MS0H5, MS0W4, MS0W5, MS912, MSSGP, MSS0H, MSSOW, MSSP2 ○ Moved OCA MH049 from Carry Forward to Historical table ○ Moved OCAs from Historical to Active table: MH036, MH046 |
| 8/16/2021 | Data Code Values | <ul style="list-style-type: none"> ● Changed Bio Psychosocial Levels in Table 16 – Evaluation Level to: <ul style="list-style-type: none"> ○ 1 – Recovery Maintenance and Health Management ○ 2 – Low Intensity Community Based Services ○ 3 – High Intensity Community Based Services ○ 4 – Medically Monitored Non-Residential Services ○ 5 – Medically Monitored Residential Services ○ 6 – Medically Managed Residential Services ○ 7 – CSU/Inpatient ○ 8 – Inpatient Detoxification ○ 9 – Residential ○ 10 – Outpatient ○ 11 – State Mental Health Treatment Facility ○ 12 – Discharge ○ 13 – No Placement Recommended |
| 7/22/2021 | Data Code Values | <ul style="list-style-type: none"> ● Added the code IEK00 into cell that was previously omitted |
| 6/30/2021 | Data Code Values | <ul style="list-style-type: none"> ● Changed Bio Psychosocial levels in Table 16 - Evaluation Level to: <ul style="list-style-type: none"> ○ 1 - CSU/Inpatient ○ 2 - Inpatient Detoxification ○ 3 - Residential ○ 4 - Outpatient ○ 5 - State Mental Health Treatment Facility ○ 6 - Discharge ○ 7 - No Placement Recommended |

| Date | Document | Brief Description of Change |
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| 6/3/2021 | Data Code Values | <ul style="list-style-type: none"> • Changed "Valid Covered Services" to "Recommended Covered Services" in Table 10 HCPCS Codes with Modifiers and Covered Services |
| 5/19/2021 | Data Code Values | <ul style="list-style-type: none"> • Changed Score Range for LOCUS and CALOCUS in Table 16 Evaluation Level to: <ul style="list-style-type: none"> ○ LOC1 - ≥ 10 - 13 ○ LOC2 - ≥ 14 - 16 ○ LOC3 - ≥ 17 - 19 ○ LOC4 - ≥ 20 - 22 ○ LOC5 - ≥ 23 - 27 ○ LOC6 - ≥ 28 |
| 5/13/2021 | Data Code Values | <ul style="list-style-type: none"> • Evaluation Level/Level of Functioning <ul style="list-style-type: none"> ○ Removed the 7/1/2021 expiration date from FARS, CFARS and NCFAS/CAT |
| 5/12/2021 | Data Code Values | <ul style="list-style-type: none"> • OCA Code Table <ul style="list-style-type: none"> ○ Broke the OCA Code Table out into three tables for Active, Carry Forward and Historical |
| 5/5/2021 | Data Code Values | <ul style="list-style-type: none"> • Changed the effective date to 7/01/2021 • Changed the name of the Substance Use Disorder Table to Substances Used |
| 4/29/2021 | Data Code Values | <ul style="list-style-type: none"> • Service Category Table <ul style="list-style-type: none"> ○ Added Child Mental Health and Child Substance Abuse to 5 – Peer Support Services Program Area • Child Dependency or Delinquency Status Table <ul style="list-style-type: none"> ○ 01 – Changed “Juvenile Justice program or facility” to “DJJ facility”. ○ 02 – Changed “DJJ residential/commitment placement” to “DJJ facility”. |
| 4/15/2021 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Added Covered Services 11 and 42 to MSSM2 and MSSOW |
| 3/11/2021 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Added Covered Service 30 to MS024, MSOW4 and MSOW5 ○ Added Covered Service 12 to MHTLH ○ Added new OCA Code MHSUN -ME Sunrise/Sunset Beds Pilot ○ Added new OCA Code MHTTI – ME Transform Transfer Initiative – Peer Spec Jails |
| 2/24/2021 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Added Covered Services 12 and 28 to OCA Code MH031 |
| 2/23/2021 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Corrected a typo in the Covered Services for OCA Code MS921 <ul style="list-style-type: none"> ▪ Originally listed as 18, 18, 20 – Corrected to 18, 19, 20 |
| 2/1/2021 | Data Code Values | <ul style="list-style-type: none"> • Evaluation Level Table <ul style="list-style-type: none"> ○ Added an expiration date of 7/1/2021 to ToolCodes 5 FARS, 6 CFARS, and 8 NCFAS/CAT |
| 1/28/2021 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Corrected Program Codes for OCA Codes MH073 and MH011 ○ Added the following new OCA Codes: <ul style="list-style-type: none"> ▪ MHCA2 ME MH Community Action Teams (CAT) – CARES ACT ▪ MHCA8 ME 211 Helpline Supports – CARES ACT |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ MHCAF ME FACT Program Administration – CARES ACT ▪ MHCAJ ME Jail-Based and Forensic Services Diversion – CARES ACT ▪ MHCAM Adult and Children’s Care Coordination – CARES ACT- ME ▪ MHCAR Short-Term Residential Treatment (SRT) – CARES ACT ▪ MHCAS Adult and Children’s Care Coordination – CARES ACT- Direct Client Services ▪ MSCAF ME SA FAMILY INTENSIVE TREATMENT (FIT) – CARES ACT ▪ MSCAS NAS/SEN Care Coordination – CARES ACT - Providers |
| 1/15/2021 | Data Code Values | <ul style="list-style-type: none"> • Evaluation Level Table <ul style="list-style-type: none"> ○ Added General Functional Improvement |
| 1/12/2021 | Data Code Values | <ul style="list-style-type: none"> • FASAMS Modifier Table <ul style="list-style-type: none"> ○ Added Modifier Code CR Telehealth |
| 12/28/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Removed Covered Service 13 from OCA Code MS0TB |
| 12/11/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Added new OCA Code MSSP3 – ME State Opioid Response Disc-Prev-Yr 3 |
| 11/12/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Added Covered Service Codes 11 and 42 to OCA Code MSSM3 |
| 11/5/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Added the following new OCA Codes: <ul style="list-style-type: none"> ▪ MHHMD – ME FL Hurricane Michael Disaster Response ▪ MHTLH – ME MH Telehealth Behavioral Health Services ▪ MSRC3 – ME State Opioid Response Disc Svcs – Comm Org – Year 3 ▪ MSSG3 – ME State Opioid Response Disc Grant – GPRA – Year 3 ▪ MSSM3 – ME State Opioid Response Svcs – MAT – Year 3 ▪ SORC3 – State Opioid Response Disc – HQ Contracts – Year 3 |
| 10/22/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Added Covered Services 10, 15, 29, 30, 46 and 47 to OCA Code MH0FA |
| 10/8/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Changed the expiration date from 9/29/2020 to 6/30/2021 on OCA Code MHES4. |
| 9/30/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Table <ul style="list-style-type: none"> ○ Added Covered Service 28 to OCA MH029 ○ Added Project Code A7 and deleted Project Code A8 from OCA MSSOW ○ Added Project Code B6 to OCA MH013 ○ Added Project Code B1 to OCA MH049 ○ Added “Valid for Carry Forward Funding Only for FY 19-20” to OCA MS 917 |
| 9/22/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Code Table <ul style="list-style-type: none"> ○ Changed the program area code on all OCA’s from just MH and SA to correspond with what they are actually set up as in FASAMS from the following codes: <ul style="list-style-type: none"> ▪ 1-AMH ▪ 2-ASA |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ 3-CMH ▪ 4-CSA ▪ 5-ASA/AMH ▪ 6-CSA/CMH |
| 9/1/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Valid for Carry Forward Funding Only FY 20-21 to the following OCA Codes: <ul style="list-style-type: none"> ▪ MH012 ▪ MH033 ▪ MH036 – Also added expiration date of 6/30/20 ▪ MH046 - Also added expiration date of 6/30/20 ▪ MH049 - Also added expiration date of 6/30/20 ▪ MH060 - Also added expiration date of 6/30/20 ▪ MH061 - Also added expiration date of 6/30/20 ▪ MHS51 ▪ MS920 ○ Reactivated and added an expiration date of 6/30/21 to OCA Code MH016 ○ Added an expiration date of 6/30/21 to the following OCA Codes: <ul style="list-style-type: none"> ▪ MH011 ▪ MH021 ▪ MH027 ▪ MH031 ▪ MH032 ▪ MH034 ▪ MH035 ▪ MH037 ▪ MH048 ▪ MH051 ▪ MH089 ▪ MH819 ▪ MHRM5 ▪ MHS50 ▪ MHS52 ○ Added Inactive to the following OCA Codes: <ul style="list-style-type: none"> ▪ MH096 – Also added expiration date of 6/30/2020 ▪ MHCME – Also added expiration date of 6/30/2020 ▪ MHESP – Also added expiration date of 11/18/19 and deleted Valid through 9/30/19 ▪ MHFLH – Also added expiration date of 6/30/19 ▪ MHTA5 – Also added expiration date of 6/29/20 ▪ MSOFH ▪ MSOJG ▪ MSOWL ▪ MSOPS ▪ MSRCO ▪ MSSOP ▪ MSSOR – Also added expiration date of 9/30/19 ○ Added an expiration date of 8/31/20 to OCA Code MHMMR ○ Added Active for FY 20-21 to OCA Code MS917 ○ Added Expenditure Code Only to OCA Code MS021 |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Added an expiration date of 9/29/20 to OCA Code MHES4 |
| 8/21/2020 | Data Code Values | <ul style="list-style-type: none"> ● Project Code <ul style="list-style-type: none"> ○ Added Project code C1 – Sustainability Payment for COVID related funds/services ● OCA Codes <ul style="list-style-type: none"> ○ Added DACCO to the end of OCA MH029 ○ Added OCA MHCOV – ME Emergency COVID-19 Grant ○ Added OCA MHHST – MH Hillsborough Co Short Term Residential Treatment Facility ○ Added OCA MSOF5 ME FL Partnership for Success – Yr. 5 ○ Added OCA MSOH5 ME FL Partnership for Success – Hospital Pilot – Yr. 5 ○ Added OCA MSOW5 ME State Epidemiology Outcomes Workgroup Local – Yr. 5 ○ Added OCA MSSGP ME State Opioid Response Disc Grant – GPRA ○ Changed the name of OCA MS910 to ME Gateway-Project Save Lives |
| 7/17/2020 | Data Code Values | <ul style="list-style-type: none"> ● OCA Codes <ul style="list-style-type: none"> ○ Added Covered Service 28-Incidental Expenses to OCA MH001-MH 24-Hr Residential Services (Non-Hospitalization) ○ Added Covered Service 07-Drop-In/Self-Help to OCA MH011-ME Stewart Marchman Beh Healthcare ○ Added Covered Service 35-Outpatient-Group and 47-Recovery Support-Group to OCA MH013-PTSD Clinic UCF ○ Added Covered Service 35-Outpatient-Group to OCA MH017-ME MH Johns Hopkins All Children’s Hospital ○ Added Covered 36-Room & Board w/Supervision, Level I to OCA MH032-ME Baycare Beh Health Veterans and Families Pilot Program ○ Added Covered Services 07-Drop-In/Self-Help and 13-MAT to OCA MH073-ME Florida Assertive Community Treatment (FACT) Prog Admin ○ Added Covered Service 47-Recovery Support-Group to OCA MH0BN-ME BNET ○ Removed Covered Service 48-Indicated Prevention from OCA-MH0FH-ME Community Forensic Multidisciplinary Teams for Hospital Diversion ○ Remove Covered Service 03-Crisis Stabilization from OCA MH0TB-ME MH Temporary Assistance for Needy Families ○ Added Covered Service 43-Aftercare-Group to OCA MHESP-ME FL SOC Expansion and Sustainability Project ○ Removed Covered Service 37-Room & Board w/Supervision Level II from OCA MHS51 ○ Added Covered Service 07-Drop-In/Self Help Center to OCA MHTA5-ME MH FL Youth Transition to Adulthood-Yr. 5 ○ Added Covered Services 03-Crisis Stabilization and 40-Mental Health Clubhouse Services to OCA MS000-ME Substance Abuse Services and Support |
| 7/2/2020 | Data Code Values | <ul style="list-style-type: none"> ● OCA Codes <ul style="list-style-type: none"> ○ Covered Service 21 was listed twice under OCA MH0BN – removed the duplication ○ Project Code B7 was listed twice under OCA MHRM5 – removed the duplication |

| Date | Document | Brief Description of Change |
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| 6/11/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Covered Service 04-Crisis Support/Emergency to OCA MH048-ME NW Behavioral Health Svcs-Training Trauma Now |
| 6/4/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Project Code B1-Network Evaluation & Development to OCA MH0CH-ME MH Care Coordination Direct Client Services |
| 5/21/2020 | Data Code Values | <ul style="list-style-type: none"> • Changed the effective date to 11/01/2020 |
| 5/15/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Covered Service 27-TASC to OCA MS081-ME Expand SA Svcs to Pregnant Women, Mothers and Their Families |
| 5/7/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Project B6-Provider Proviso Projects to OCA MHTMH-ME MH Transitional Beds for MH Institution |
| 4/23/2017 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Project Code B6 to OCA MH027 – Directions for Living ○ Added Project Code B1-Network Evaluation & Development to OCAs MHTRV-ME Transitions Vouchers Mental Health and MSTRV-ME Transitions Vouchers Substance Abuse • Modifiers <ul style="list-style-type: none"> ○ Changed Modifier DO to MH0CN-ME MH Care Coordination Direct Client Services and Modifier DV to MS0CN-ME SA Care Coordination Direct Client Services |
| 4/3/2020 | Data Code Values | <ul style="list-style-type: none"> • Changed the effective date to 10/01/2020 |
| 4/2/2020 | Data Code Values | <ul style="list-style-type: none"> • Added Project Code, Method of Payment and Unit of Measure Table |
| 3/25/2020 | Data Code Values | <ul style="list-style-type: none"> • Updates made to entire document, including table revision and document layout. |
| 3/20/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA codes <ul style="list-style-type: none"> ○ Added OCA MHEDT-ME MH Early Diversion of Forensic Individuals to Appendix 1, Table 9 ○ Added Covered Service 51-Universal Indirect Prevention to OCAs MSOWL-ME State Epidemiology Outcomes Workgroup Local and MSOW4-ME State Epidemiology Outcomes Workgroup Local - Yr. 4 |
| 3/5/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Removed Covered Service 39 from OCA MH026 |
| 2/10/2020 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Covered Services 40 and 43 to OCA MHCAT ○ Added Project Code B1 to OCA MHMCT ○ Added Covered Service 22 to OCA MHSCR ○ Added Covered Services 07, 09, 13, 24, 27, 32, 40, 43, 48, 49, 50 and 51 to OCA MHSFP ○ Removed Covered Services 07 and 10 from OCA MS000 ○ Removed Covered Service 21 from OCA MS011 ○ Removed Covered Service 30 from MS025 |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Added Covered Services 04, 05, 08, 12, 13, 15, 18, 22, 25, 27, 29, 30, 32, 36, 37, 38, 42, 43, 44 and 45 to OCA MS027 ○ Added Covered Services 22, 36, 37, 38, 42 and 43 to OCA MS091 ○ Added Covered Service 01 to OCA MS0FH ○ Added Covered Services 05, 06, 08, 18, 19, 24, 25, 26, 32, 36, 37, and 43 to OCA MS912 ○ Added Covered Service 42 to OCA MSCBS ○ Added Covered Services 22, 36 and 37 to OCA MSSOR ○ Added Covered Services 02 and 04 to OCA MSSOH ○ Removed Covered Service 07 to OCA MSRC2 ○ Added Covered Services 22, 36 and 37 to OCA MSSM2 ○ Added Covered Services 04, 11, 22, 36, 37, 38 and 42 to MS920 ○ Added Covered Service 43 and removed "Valid through 6/30/19" for Covered Service 47 from MSTRV ○ Added Project Code B1 to OCA MHMMR ○ Added Covered Service 39 to OCA MHSCR ○ Removed Covered Service 18 from OCA MH026 ○ Added Project Code B6 to OCA MH017 ● HCPCS Codes <ul style="list-style-type: none"> ○ Added procedure code 99220-Evaluation and Management (Initial) Per Diem |
| 1/7/2020 | Data Code Values | <ul style="list-style-type: none"> ● OCA Codes <ul style="list-style-type: none"> ○ Added an effective date of 10/1/2016 to MSOWL ● Modifiers <ul style="list-style-type: none"> ○ Added new modifier code S6 – Buprenorphine Extended Release Injection |
| 1/4/2020 | Data Code Values | <ul style="list-style-type: none"> ● OCA Codes <ul style="list-style-type: none"> ○ Added the following new OCA Codes: <ul style="list-style-type: none"> ▪ MHES4 – ME FL SOC Expansion and Sustainability Proj-Yr 4 ▪ MH033 – ME Youth Crisis Center – Touchstone Village ▪ MH034 – ME UF Health Center for Psychiatry ▪ MH035 – ME Life Stream Central Receiving Facility – Citrus County ▪ MH036 – ME FL Recovery Schools – Youth BH Wraparound Services ▪ MH048 – ME NW Behavioral Health Services – Training Trauma Now ▪ MH049 – ME Bridgeway Center – Okaloosa Telehealth Svcs ▪ MH051 – ME Okaloosa/Walton MH & SA Pretrial Diversion Project ▪ MH952 – ME Apalachee Center – Liberty & Franklin MH CAT ▪ MHCME – ME MH Non-Recurring BG-CAT and MRT Enhancements ▪ MSOH4 – ME FL Partnership for Success – Hospital Pilot – Year 4 ▪ MSOF4 – ME FL Partnership for Success – Year 4 ▪ MSOWL – ME State Epidemiology Outcomes Workgroup Local ▪ MSOW4 – ME State Epidemiology Outcomes Workgroup Local – Year 4 ▪ MSSOH – ME State Opioid Response Disc Grant – Hospital Bridge ▪ MSSOW – ME State Opioid Response Disc Grant Child Welfare ▪ MSRCO – ME State Opioid Response Disc Svcs – Rec Comm Org ▪ MSRC2 – ME State Opioid Response Disc – Rec Comm Org – Year 2 ▪ MSSP2 – ME State Opioid Response Disc Grant Svcs-Prevent – Year 2 |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ MSSM2 – ME State Opioid Response SVCS-MAT – Year 2 ▪ MS918 – ME St. Johns Epic Recovery Center – Detox/Res Bed Capac ▪ MS920 – ME Road to Recovery – Opioid Response ▪ MHMMR – ME MH Hurricane Michael Mental Health Response |
| 12/11/19 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Covered Service 09-Inpatient to OCA MHS50-ME Lifestream Center ○ Added the following Covered Services to OCA MS000-ME Substance Abuse Services and Support <ul style="list-style-type: none"> ▪ 07-Drop-In, Self-Help ▪ 09-Inpatient ▪ 10-Intensive Case Management ○ Added “Valid through 6/30/19” to Covered Services 13, 32, 45, and 47 and Project Codes A2 and B7 under OCA MSTRV-ME Transition Vouchers Substance Abuse ○ Added “Valid for Carry Forward Funding Only, FY 19-20” for the following OCA’s: <ul style="list-style-type: none"> ▪ MH010 ▪ MH013 ▪ MH014 ▪ MH015 ▪ MH016 ▪ MH017 ▪ MH019 ▪ MH023 ▪ MH028 ▪ MH029 ▪ MHMSD ▪ MHS55 ▪ MS902 ▪ MS904 ▪ MS905 ▪ MS906 ▪ MS908 ▪ MS909 ▪ MS911 ▪ MS914 ▪ MS915 ▪ MS917 ○ Added “Valid through 9/30/19” to the following OCA’s <ul style="list-style-type: none"> ▪ MHESP ▪ MHFLH ▪ MSOFS ▪ MSSOP ▪ MSSOR ○ Added “Not Valid for FY 19-20” to the following OCA’s <ul style="list-style-type: none"> ▪ MH0FA ▪ MH0MD ▪ MH0PL ▪ MH0TA ▪ MHHIP |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ MHHIR ▪ MHHMO ▪ MHHMI ▪ MHHMP ▪ MHOER ▪ MHSMB ▪ MHTA4 ▪ MSOPH ▪ MSOPM |
| 10/3/2019 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Removed “Hospital Pilot” from OCA MS0FS-ME FL Partnerships for Success • Project Codes <ul style="list-style-type: none"> ○ Changed MS0FS to MS0FS under Project Code A7 ○ Added Project Code B1-Network Evaluation & Development to OCA MSSOR-ME State Opioid Response Services • Substance Use Disorder <ul style="list-style-type: none"> ○ Added 2Q-Ethchlorvynol (Placidyl) ○ Added 2Q-Diphenylhydantoin/Phenytoin (Dilantin) |
| 9/24/2019 | Data Code Values | <ul style="list-style-type: none"> • Substance Use Disorder <ul style="list-style-type: none"> ○ Deleted the alphabetical and numerical drug code tables and created one drug code table adding in categories of drugs. |
| 9/20/2019 | Data Code Values | <ul style="list-style-type: none"> • Modifiers <ul style="list-style-type: none"> ○ Added expenditure modifier 96 Carry Forward Funding FY 18-19 • Project Codes <ul style="list-style-type: none"> ○ Added Project Code C0 to the following OCA’s <ul style="list-style-type: none"> ▪ MHMCT – ME Mobile Crisis Teams ▪ MSOPP – ME SA Prevention Partnership Program ▪ MSCBC – ME SA Community Based Svcs ○ Removed Project Code A0 from OCA MHMCT – ME Mobile Crisis Teams • Covered Service <ul style="list-style-type: none"> ○ Added Covered Service 43 – Aftercare Group to OCA MSCBS – ME SA Community Based Svcs |
| 9/12/2019 | Data Code Values | <ul style="list-style-type: none"> • Modifiers <ul style="list-style-type: none"> ○ Added the following modifiers <ul style="list-style-type: none"> ▪ AP MS909-SalusCare Wraparound Services ▪ AT MS915-Westcare Gulf Coast Veterans ▪ FQ MH018-CSU/Baker Act Inpatient Services ▪ 13 89Q01-BNET ▪ 14 89Q13-BNET ○ Delete “Legacy only – Not to be used in FASAMS” from modifier DO ○ Added “Legacy Only – Not to be used in FASAMS” to the following modifiers <ul style="list-style-type: none"> ▪ A4 MHFLH-ME MH Florida Hurricane SERG ▪ AN MSSOR-ME State Opioid Response Services – MAT/Hospital ▪ B0 MHA01-Adult Mental Health 24hr Residential Services ▪ B1 MHA09-Adult Mental Health Non-Residential Services ▪ B2 MHA18-Adult Mental Health Crisis Services ▪ B3 MHA25-Adult Mental Health Prevention Services |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ B5 MHA72-Community Forensic Beds ▪ B8 MHA76-Indigent Psychiatric Medication Program ▪ BA MHAPG-Grants PATH ▪ BB MHATB-Adult Mental Health TANF Eligible ▪ BC MHC01-Children Mental Health 24hr Residential Services ▪ BD MHC09-Children Non-Residential Services ▪ BE MHC18-Children Crisis Services ▪ BF MHC25-Children Prevention Services ▪ BH MHC71-Residential Treatment for Emotionally Disturbed Children/Youth ▪ BI MHCBN-Title XXI Children’s Health Insurance Program (Behavioral Health Network) ▪ BJ MHCMD Miami Wraparound Grant ▪ BK MHCFA-FACES Miami ▪ BL MSA03-Adult 24hr Residential Services ▪ BN MSA21-Adult Detoxification Services ▪ BO MSA23-Adult HIV Services ▪ BP MSA25-Adult Prevention Services ▪ BQ MSA27 SAPTBG Set-Aside for Pregnant Women and Children ▪ BS MSA81-Expansion of Services for Pregnant Women and their Families ▪ BT MSATB-Adult TANF Eligible ▪ BU MSC03-Children 24hr Residential Services ▪ BV MSC11-Children Non-Residential Services ▪ BW MSC21-Children Detoxification Services ▪ BX MSC23-Children’s HIV Services ▪ BY MSC25-Children Prevention Services ▪ CA MSCTB-Children TANF Eligible ▪ CB MSCPP-Partners for Prevention Grant ▪ CC MSC80-Informed Families ▪ CD MHA93- Guidance Care Center – Key West ▪ CE MHA93- Camillus Health Network ▪ CF MHA94-Citrus Health Network ▪ CI MHC87-Baycare Behavioral Health Children ▪ CJ MHA90-Northside Mental Health Center ▪ CK MHA89-Clay Behavioral Health Center ▪ CL MSC95-DACCO ▪ CM MHA86-Baycare Behavioral Health Vets ▪ CN MHA97-Crisis Center of Tampa Bay – Adult ▪ CO MHA26-EI for SMI and Psych Disorder ▪ CP MHS51-Circles of Care Cedar Village ▪ CQ MHS52-Circles of Care Crisis Stabilization ▪ CR MHA79-Clay Crisis Behavioral Prevention Team ▪ CS MH010-Miami-Dade Homeless Trust ▪ CW MHA92-Palm Beach MH SA Treatment ▪ CX MHA93-Camillus Health Network Homeless ▪ CY MHA94-Citrus Health Network ▪ CZ MHA96-Jerome Golden Center for Behavioral Health ▪ DA MHATA-FL Youth Transitions to Adulthood ▪ DB MHC77-Child at Risk Emotionally Disturbed ▪ DC MHC87 Baycare Behavioral Health Child |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ DD MSC95-SA DACCO ▪ DE MHC98-ME SalusCare Center – Children ▪ DF MH819-Gracepoint Center – Adult ▪ DG MHRM5-Renaissance Center – Adult ▪ DH MS903-Adult SA Proviso Allocation for Here’s Help ▪ DI MHS50-Lifestream – Adult ▪ DJ MHSMB-Meridian – Adult ▪ DK MS902-First Step of Sarasota – Drug Free Babies ▪ DL MHESP-SOC Expansion and Sustainability Project ▪ DN MH011-Stewart Marchman Behavioral Healthcare ▪ DP MH031-David Lawrence Center Behavioral Health Services ▪ DQ MH032-Baycare Behavioral Health Veterans Intervention Program ▪ DR MH037-Fort Myers Salvation Army Behavioral Health Services ▪ DT MH047-Lakeview Center – MH & SA Adult ▪ DU MH050-Specialized Treatment, Education and Prevention Services (STEPS) ▪ DW MH061-Northside Mental Health Center ▪ DY MHDRF-ME Disability Rights Florida – Mental Health ▪ EB MSOJG Special Services for Jerome Golden Center – Substance Abuse ▪ ED MHS55 Circles of Care Geropsychiatric Care – Adult MH ▪ EF MHTMH Civil Transitional Beds for MH ▪ EG MHFMH Forensic Transitional Beds for MH ▪ EH MHSFP MH for Profit Contracting ▪ EJ MHSOC MH System of Care ▪ EK MSOPM Opioid Crisis Grant – STR ▪ EL Apalachee Center Forensic Treatment Svcs ▪ EM Bridgeway Emergency Mobile Access Team ▪ EN MS906 Opioid Addiction Recovery Peer Pilot – Manatee County ▪ EO Orlando Emergency Crisis Counseling Svcs ▪ EP SA Memorial Reg. Hosp. Maternal Addiction Treatment Program ▪ EQ New Hope Residential SAMH Treatment Project ▪ ER MH013 MH UCF PTSD Clinic for Vets ▪ ES MH015 ME MH Jewish Family Svc Suncoast ▪ ET MH016 ME MH PEMHS CSU ▪ EU MHEMP ME MH Supported Employment Svcs ▪ EV MSOPH FL Targeted Opioid Crisis – Hospital ▪ EY MS905 ME SA Opioid Abuse Pilot Project – Palm Beach ▪ FA MH014 Starting Point Behavioral Healthcare – MH ▪ FD FACT Non-Face-To-Face contact ▪ FI FACT Indirect contact ▪ FJ MS011 Ambulatory/Community Non-24 Hour Care ▪ FP MSSOP ME State Opioid Response Disc Grant Svcs – Prevention ▪ I1 MS911 ME Phoenix Affiliates – Family Stabilz for Opioid ▪ 10 27CHV Children IV ▪ 11 27HIV IV Drug Usage ▪ 12 27Wom Services to Women ▪ 15 CFBAS-Comm Forensic Beds ▪ 16 DPG08-Indigent Drug Program ▪ 17 GJDT1 – Jail Diversion and Trauma Recovery |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ 18 GX018 – PATH ▪ 19 SB004 – Screening Intervention ▪ 20 SP503 – Family Emergency Treatment Center - Manatee ▪ 21 SP505 - Charlotte County CMH Center ▪ 22 SP511 – SRT – Hillsborough ▪ 23 SP516 – Cooper CSU ▪ 24 SP525 – Family Emergency Treatment Ctr – Pinellas ▪ 25 SP542 – CSU District 08 ▪ 26 SP553 – Family Emergency Treatment Ctr – Sarasota ▪ 27 SP560 – Ruth Cooper CSU – Lee ▪ 28 SP611 – Adol Res SA Tx Facility ▪ 29 SP645 – Phoenix House ▪ 30 SP646 – First Step Mother/Infants ▪ 31 SP647 – DACCO ▪ 32 SP651 – First Step Mother/Infants ▪ 33 SPRM5 – Orange County Receiving Center ▪ 34 WO027 – Title IV B ▪ 35 HCR – Haitian Community Response Mental ▪ 36 HCR – Haitian Community Response Substance Abuse ▪ 37 FACES – Wraparound Project ▪ 42 FACES Miami ▪ 52 Opioid – Non-Grant Funded SFBHN ▪ 53 Pinellas CJMHSR Reinvestment Grant ▪ 54 Polk Helping Hands ▪ 55 Northside County Residential Beds ▪ 56 Hillsborough Substance Abuse Evaluations ▪ 57 Foundation for Healthy St. Pete ▪ 58 Hillsborough Post Release Treatment ▪ 90 Suncoast C-10 Providers |
| 8/27/2019 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Covered Service 25 to OCA MH026 ○ Added Covered Service 44 to OCA MHCAT ○ Added an * to Covered Service 28 for MS023 to make it effective through 6/30/19 • Modifiers <ul style="list-style-type: none"> ○ Delete “Legacy only – Not to be used in FASAMS” from modifier DV |
| 8/9/2019 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes and Covered Service Codes <ul style="list-style-type: none"> ○ Added the following language above the OCA Code Table and the Covered Service Code Table: <ul style="list-style-type: none"> ▪ To assist service providers who are not yet fully compliant with PAM 155-2 V13, we are including modifier codes and descriptions for data that was reportable in SAMHIS as Modifier 4, Other Cost Accumulators (OCAs). FASAMS has a dedicated field in service events for OCAs. Thus, the former Modifier 4 codes are NOT reportable in FASAMS. All items marked as legacy are presented to allow service providers that continue to report data under V12 to submit data to their respective Managing Entities (ME). MEs are expected to report the actual five character OCA in the FASAMS OCA field. OCA modifiers are not appropriate for covered services. |

| Date | Document | Brief Description of Change |
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| 7/26/2019 | Data Code Values | <ul style="list-style-type: none"> • Modifiers <ul style="list-style-type: none"> ○ Added the following Modifiers as Legacy only – Not to be used in FASAMS <ul style="list-style-type: none"> ▪ AD - MHMCT – Mobile Crisis Teams ▪ AS - MS914 – DACCO Behavioral Healthcare Expansion MAT ▪ AW - MSCBS – Community Based Services ▪ B6 - MH073 – Adult Mental Health FACT Team ▪ CG - MS091 – Family Intensive Treatment (FIT) ▪ DM - MHTRV – ME Transition Vouchers-MH ▪ DO - MH0CN – ME Care Coordination-MH ▪ DS – MSTRV – Transition Vouchers-SA ▪ DX – MH0FH – Community Forensic Multidisciplinary Teams for Hospital Diversion ▪ EC – MHSCR – ME Centralized Receiving Facilities-MH & SA; Adult and Children ▪ EE – ME MH Community Action Teams (CAT) ▪ 49 – Family Intensive Treatment (FIT) ▪ 50 - FACT |
| 7/19/2019 | Data Code Values | <ul style="list-style-type: none"> • Modifiers <ul style="list-style-type: none"> ○ Added new Expenditure Modifier DV to OCA MS0CN – ME SA Care Coordination Direct Client Services (Legacy only - Not to be used in FASAMS) |
| 7/19/2019 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Covered Service 29 Aftercare to MH009 Ambulatory/Community Non-24 Hour Care and 40 MH Clubhouse Services to MHEMP ME MH Supported Employment Services |
| 7/12/2019 | Data Code Values | <ul style="list-style-type: none"> • OCA Codes <ul style="list-style-type: none"> ○ Added Covered Service 40 MH Clubhouse Services to OCA MH000 Mental Health Services & Support, MH009 Ambulatory/Community Non-24 Hour Care and MH026 Early Intervention Svcs-Psychotic Disorders. ○ Added Covered Service 09 Inpatient Services to OCA MHS55 ME Circles of Care – Geropsychiatric Care. ○ Added Covered Service 15 Outreach to OCA MHSCR ME Centralized Receiving Systems. ○ Added Covered Service 35 Outpatient-Group and 42 Intervention-Group to MS023 HIV Services effective through 6/30/19. ○ Added Covered Service 43 Aftercare-Group to OCA MS011 Ambulatory/Community Non-24 Hour Care A/C. ○ Added Covered Service 30 Information and Referral to OCA MS025 ME Prevention Services. |
| 7/12/2019 | Data Code Values | <ul style="list-style-type: none"> • Evaluation Level <ul style="list-style-type: none"> ○ Added Score Range 5-35 to LOCUS and CALOCUS |
| 7/1/2019 | Data Code Values | <ul style="list-style-type: none"> • Covered Service or Project <ul style="list-style-type: none"> ○ Added relevant Service/Treatment Setting Code and Setting Name to each row for consistency. |
| 6/18/2019 | Data Code Values | <ul style="list-style-type: none"> • Modifiers |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Changed the name of the grant and updated the fund source information for Modifiers S1 through S5. |
| 6/7/2019 | Data Code Values | <ul style="list-style-type: none"> ● Covered Service or Project <ul style="list-style-type: none"> ○ Added project code B5 to MH073 - ME Florida Assertive Community Treatment (FACT) Program Admin. ○ Deleted project code B7 from MH073 - ME Florida Assertive Community Treatment (FACT) Program Admin. ○ Added project code 07 to MH009 - Ambulatory/Community Non-24 Hour Care. |
| 5/24/2019 | Data Code Values | <ul style="list-style-type: none"> ● Covered Service or Project <ul style="list-style-type: none"> ○ Table Header Title change <ul style="list-style-type: none"> ▪ FASAMS Service/Treatment Setting Code ▪ FASAMS Service/Treatment Setting Name ▪ Covered Service or Project Code ▪ Covered Service or Project Name ○ Added the following codes to 04-Rehabilitation/Residential - Short term (30 days or fewer): <ul style="list-style-type: none"> ▪ 18 - Residential Level I ▪ 19 - Residential Level II ▪ 20 - Residential Level III ▪ 21 - Residential Level IV ▪ 36 - Room and Board with Supervision Level I ▪ 37 - Room and Board with Supervision Level II ▪ 38 - Room and Board with Supervision Level III ▪ A1 - BNET ▪ A2 - FIT Team ▪ A3 - Central Receiving System ▪ A7 - Federal Project Grant ▪ A8 - Local Diversion Forensic Project ▪ B6 - Provider Proviso Projects ▪ C0 - Other Bundled Projects ○ Added the following codes to 05- Rehabilitation/Residential -Long term (more than 30 days) <ul style="list-style-type: none"> ▪ A1 - BNET ▪ A2 - FIT Team ▪ A3 - Central Receiving System ▪ A7 - Federal Project Grant ▪ A8 - Local Diversion Forensic Project ▪ B6 - Provider Proviso Projects ▪ C0 - Other Bundled Projects ○ Added the following codes to 06-Ambulatory – Intensive outpatient <ul style="list-style-type: none"> ▪ 14 - Outpatient ▪ 44 - Comprehensive Community Service Team ▪ 45 - Comprehensive Community Service Team – Group ▪ A2 - FIT Team ▪ B4 - CAT Team ▪ B5 - FACT Team ○ Added the following codes to 07-Ambulatory – Non-Intensive outpatient <ul style="list-style-type: none"> ▪ 04 - Crisis Support/Emergency |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ 05 - Day Care ▪ 08 - In-Home and On-Site ▪ 14 - Outpatient ▪ 15 - Outreach ▪ 22 - Respite Services ▪ 28 - Incidental Expenses ▪ 44 - Comprehensive Community Service Team ▪ 45 - Comprehensive Community Service Team – Group ▪ A0 - Forensic Multidisciplinary Team ▪ A1 - BNET ▪ A3 - Central Receiving System ▪ A4 - Care Coordination ▪ A5 - First Episode Team ▪ A6 - Self-Directed Care ▪ A7 - Federal Project Grant ▪ A8 - Local Diversion Forensic Project ▪ A9 - Disaster Behavioral Health ▪ B2 - Transition Voucher ▪ B6 - Provider Proviso Projects ▪ B7 - Wraparound ▪ C0 - Other Bundled Projects ○ Deleted 05 - Daycare from “97-Other FASAMS Service/Setting” ○ Deleted 22 – Respite Services from “97-Other FASAMS Service/Setting” ○ Changed “Client-Specific” to “Non-Client Specific” for 48-Indicated Prevention under “97-Other FASAMS Service/Setting” ○ Added the following codes to 97-Other FASAMS Service/Setting <ul style="list-style-type: none"> ▪ 44 - Comprehensive Community Service Team ▪ 45 - Comprehensive Community Service Team – Group ▪ 04 – Crisis Support/Emergency |
| 5/21/2019 | Data Code Values | <ul style="list-style-type: none"> • HCPCS Codes with Modifiers and Covered Services <ul style="list-style-type: none"> ○ Added Code 12 (Medical Services) to H2000 HO, H2000 HP, and H2000 HP, GT. |
| 5/1/2019 | Data Code Values | <ul style="list-style-type: none"> • Project Codes <ul style="list-style-type: none"> ○ Added the sentence “See the OCA code table for additional OCAs.” or “See the OCA code table for OCAs.” to the table ○ Moved Table above OCA Table • OCA Codes <ul style="list-style-type: none"> ○ Added Valid Project Codes column and codes to corresponding OCAs ○ Added the following OCA codes: <ul style="list-style-type: none"> ▪ MH025 - Prevention Services ▪ MH046 - ME Centerstone Florida ▪ Added MHFLH - ME MH Florida Hurricane SERGMS0FS - ME FL Partnership For Success-Hospital Pilot ▪ MS911 - ME Phoenix Affiliates-Family Stabiliz for Opioid ▪ MS0FS - ME FL Partnerships For Success ○ Added the wording “Expenditure Code Only” under the following expenditure OCA codes: <ul style="list-style-type: none"> ▪ MH001 - MH 24-Hr Residential Services (Non-Hospitalization) ▪ MH009 - Ambulatory/Community Non-24 Hour Care ▪ MH018 - CSU, Baker Act, Inpatient Crisis Services |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ MH025 –Preventive Services ▪ MH026 - ME Early Intervention Services for SMI & Psych Disorder ▪ Added MHFLH - ME MH Florida Hurricane SERG ▪ MS003 - SA 24- Hour Residential Services (Non-Hospitalization) ▪ MS011 - Ambulatory/Community Non-24 Hour Care ▪ MS027 - Federal Pregnant Women and Women with Dependent Children ○ Added Covered Service to 47 to OCA MH0CN - ME MH Care Coordination Direct Client Services ○ Added Covered Services 4, 24, and 37 to OCA MS0JG - ME Special Services for Jerome Golden Center ○ Removed incorrect OCA code MS0JG ○ Removed Covered Services 48, 49, and 50 from MS0WL - ME State Epidemiology Outcomes Workgroup Local ○ Removed Covered Services 35 and 42 from MS023 – ME HIV Services ○ Updated OCA Title names to reflect current Fiscal Year OCA names ● Modifiers <ul style="list-style-type: none"> ○ Added the following Modifiers: <ul style="list-style-type: none"> ▪ A4 - MHFLH - ME MH Florida Hurricane SERG ▪ FJ - MS011 – Ambulatory/Community Non-24 Hour Care ▪ I1 – MS911- ME Phoenix Affiliates-Family Stabiliz for Opioid ○ Removed the following Modifiers <ul style="list-style-type: none"> ▪ BM - MSA11 - Adult Non-Residential Services ○ Changed Modifier 58 from TBD to Hillsborough Post Release Treatment and removed the words “Local Use” ○ Added new Project Code Method of Payment and Unit of Measure Table |
| 2/25/2019 | Data Code Values | <ul style="list-style-type: none"> ● OCA Codes <ul style="list-style-type: none"> ○ Add Covered Service to MS909 ● HCPCS Codes with Modifiers and Covered Services <ul style="list-style-type: none"> ○ Added the following codes: <ul style="list-style-type: none"> ▪ 90885 ▪ 99214 ● Modifiers <ul style="list-style-type: none"> ○ Added the following codes: <ul style="list-style-type: none"> ▪ AN ▪ FP ○ Removed Local use - CFBHN Guidance for GT ● Project Code <ul style="list-style-type: none"> ○ Added Policy Guidance to all Project codes ○ Added the following codes: <ul style="list-style-type: none"> ▪ B6 ▪ C0 ● Formatted Tables |
| 1/17/2019 | Data Codes Values | <ul style="list-style-type: none"> ● HCPCS Codes with Modifiers and Covered Services <ul style="list-style-type: none"> ○ The following Incidental Expense Codes have been added: <ul style="list-style-type: none"> ▪ IE100 ▪ IE101 ▪ IE200 ▪ IE300 |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ▪ IE400 ▪ IEA00 ▪ IEB00 ▪ IEC00 ▪ IED00 ▪ IED01 ▪ IED02 ▪ IED03 ▪ IED04 ▪ IED05 ▪ IEE00 ▪ IEF00 ▪ IEF01 ▪ IEF02 ▪ IEF03 ▪ IEF04 ▪ IEG00 ▪ IEG01 ▪ IEG02 ▪ IEG03 ▪ IEH00 ▪ IEH01 ▪ IEH02 ▪ IEI00 ▪ IEJ00 ▪ IEJ01 ▪ IEJ02 ▪ IEJ03 ▪ IEJ04 ▪ IEJ05 ▪ IEK00 ▪ IEL00 ▪ IEM00 ▪ IEN00 ▪ IEP00 ▪ IEP01 ▪ IEP02 ▪ IEP03 ○ The following HCPCS codes have added: <ul style="list-style-type: none"> ▪ H0025 ▪ H0026 ▪ H0028 ▪ H0029 ○ The following CPT codes have been added: <ul style="list-style-type: none"> ▪ 90801 ▪ 90834 ▪ 99211 ▪ 99212 ▪ 99213 ▪ 99221 ● OCA Codes |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Added the following OCA codes <ul style="list-style-type: none"> ▪ MH001 ▪ MH009 ▪ MH018 ▪ MS003 ▪ MS011 ▪ MS021 ▪ MS027 ▪ MS902 ▪ MSOJG ▪ MSSOR ▪ MSSOP ○ Added the following Covered Service Codes: <ul style="list-style-type: none"> ▪ 35 ▪ 42 ▪ 43 ▪ 45 ▪ 47 ○ Added Event Type, Client – Specific, to Covered Service Code 17 ○ Added Event Type, Non-Client-Specific, from Covered Service Code 28. ○ Added Prevention Covered Services to OCA MSSFP ○ Standardized code names ● Formatted Tables |
| 10/31/2018 | Data Code Values | <ul style="list-style-type: none"> ● Deleted comments from August 31 revision of documents Added CGAS tool to Evaluation Table |
| 8/31/2018 | Data Code Values | <ul style="list-style-type: none"> ● Children Dependency or Delinquency Status <ul style="list-style-type: none"> ○ Code descriptions have changed. ○ Code 9 has been removed. ● Education Grade Level <ul style="list-style-type: none"> ○ Code 43 has been added for Unknown ● Employment Status <ul style="list-style-type: none"> ○ Code 97 has been added for Unknown ● Staff Education <ul style="list-style-type: none"> ○ Code 97 has been added for Unknown ● Evaluation Level <ul style="list-style-type: none"> ○ NCFAS/CAT has been added as a Level of Functioning tool. ○ Description on ASAM Level Code 8 has changed slightly. ○ For FARS and CFARS, score ranges have been broken out by level codes. ● Covered Service <ul style="list-style-type: none"> ○ Max Allowed Units column has been removed. This is no longer being validated. ● New table for Living Arrangement has been added. ● Substance Use Disorder |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Code 01 for None has been added. ● HCPCS Procedure table has been replaced with a table for HCPCS codes with modifiers and covered services. ● New table added for Expenditure OCA codes with covered services. ● New table for Modifiers has been added. ● Priority Population Code Determination table has been removed. ● New table for Project Code has been added. |
| 6/13/2018 | Data Code Values | <ul style="list-style-type: none"> ● Covered Service: <ul style="list-style-type: none"> ○ A new column to indicate Payment Type has been added to the Covered Service table. ○ Program areas for these Covered Service Codes have changed. <ul style="list-style-type: none"> ▪ 03 ▪ 06 ▪ 05 ○ The description for these Covered Service Codes have changed. <ul style="list-style-type: none"> ▪ 39 ▪ 14 ▪ 25 ▪ 29 ▪ 44 ▪ 46 ▪ 05 ▪ 22 ▪ 48 ▪ 49 ▪ 50 ▪ 51 ○ Covered Service Code 39 has been removed as a valid service under Treatment Setting 05. ○ The following Covered Service Codes have been removed: <ul style="list-style-type: none"> ▪ 35 ▪ 42 ▪ 43 ▪ 45 ▪ 47 ○ Removed Event Type, Non-Client-Specific, from Covered Service Code 28. ● Expenditure OCA: <ul style="list-style-type: none"> ○ A placeholder has been added for Expenditure OCA codes. ● HCPCS Procedure Modifier: ● A placeholder has been added for HCPCS modifier codes. |
| 5/21/2018 | Data Code Values | <ul style="list-style-type: none"> ● Covered Service: <ul style="list-style-type: none"> ○ Covered Service Code 03 Crisis Stabilization has been removed as a code under Treatment Setting 04. It has been added under Treatment Setting 03. |

| Date | Document | Brief Description of Change |
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| | | <ul style="list-style-type: none"> ○ Treatment Setting Code 09 Crisis Stabilization Unit has been removed. ○ Additional columns have been added for future chapters. ● Discharge Destination: <ul style="list-style-type: none"> ○ Codes and descriptions have changed. ● Employment Status: <ul style="list-style-type: none"> ○ Name of Code 70 has changed. ○ Name of Code 84 has changed. ○ Name of Code 81 has changed. ○ Name of Code 31 has changed. ○ Code 85 has been removed. ● Evaluation Level: <ul style="list-style-type: none"> ○ EvaluationToolCodes have changed and new codes have been added. ○ ASAM Level Code names have changed, and new codes have been added. ● Referral Source: <ul style="list-style-type: none"> ○ Codes and descriptions have changed. ● Staff Identifier Education Level: <ul style="list-style-type: none"> ○ New codes have been added. ● Substance Use Disorder: <ul style="list-style-type: none"> ○ Code 49 has been removed. ● The following new sections have been added in preparation for future chapters: ● HCPCS Procedure |
| 4/4/2018 | Data Code Values | <ul style="list-style-type: none"> ● Added new sections needed for Treatment Episode: <ul style="list-style-type: none"> ○ Children Delinquency or Dependency Status Codes ○ Discharge Destination Codes, Education Grade Level Codes ○ Employment Status Codes ○ Evaluation Level Codes ○ Referral Source Codes ○ Staff Identifier Education Level Codes ○ Substance Use Disorder Codes ○ In the Covered Services section, added Treatment Setting code 06 for Crisis Stabilization Unit. |
| 3/6/2018 | Data Code Values | <ul style="list-style-type: none"> ● Initial document published. |

1.2.12 Appendix 2 Common Data Types

| Date | Document | Brief Description of Change |
|-----------|-------------------|--|
| 5/5/2021 | Common Data Types | <ul style="list-style-type: none"> ● Changed the effective date to 7/01/2021 |
| 5/21/2020 | Common Data Types | <ul style="list-style-type: none"> ● Changed the effective date to 11/01/2020 |

| Date | Document | Brief Description of Change |
|----------|-------------------|---|
| 4/3/2020 | Common Data Types | <ul style="list-style-type: none"> Changed effective date to 10/01/2020 |
| 5/1/2019 | Common Data Types | <ul style="list-style-type: none"> Limitation of first 3 characters to Pseudo SSN (0027) Enhancement <ul style="list-style-type: none"> Removed the word numeric from “X represents any alpha numeric character” |

1.2.13 Appendix 3 FASAMS Web Services

| Date | Document | Brief Description of Change |
|-----------|--------------|--|
| 5/5/2021 | Web Services | <ul style="list-style-type: none"> Changed the effective date to 7/01/2021 |
| 5/28/2020 | Web Services | <ul style="list-style-type: none"> Changed the effective date to 11/01/2020 |

1.2.14 Appendix 4 Community Persons Served Satisfaction Survey (CPSSS)

| Date | Document | Brief Description of Change |
|-----------|----------|---|
| 9/9/2021 | CPSSS | <ul style="list-style-type: none"> Changed document language from “required” to “recommended” |
| 7/27/2021 | CPSSS | <ul style="list-style-type: none"> Created new Appendix 4. Survey was added to FASAMS web page |

1.2.15 Appendix 10 Pamphlet Companion Guide

| Date | Document | Brief Description of Change |
|-----------|--------------------------|--|
| 3/01/2022 | Pamphlet Companion Guide | <ul style="list-style-type: none"> Added new appendix: Appendix 10 Pamphlet Companion Guide |