

Meeting Summary



Project / Initiative:		FASAMS			
Meeting Purpose:		Data Advisory Committee (DAC) Meeting			
Meeting Date:		4/20/2021			
Meeting Time:		10:00am - 11:00am			
	Attendee	Office		Attendee	Office
			x	Danielle Downing,	Credible
x	Richard Power	SAMH		Natalie Kelly	FAME
x	Greg Nix	SAMH		Paul Bebee	FAME
x	Tracey Fannon	SAMH	x	Jesse Lindsey	FEI
	Shivana Gentry	SAMH		Andrew Barden	FEI
x	Ed De Cardenas	SAMH		Rodney Pritchard	Knight Software
	Nathan McPherson	OITS		Josh Botbol	Let's Talk Counseling
	Mark Grant	OITS		Arthur Cooksey	Let's Talk Interactive
	Victor Gaines	OITS		Jason Lee	Let's Talk Interactive
x	Wen Cao	OITS	x	Jennifer Ramirez	LSF
	Mike Idoni	BHCPNS	x	Ryan Lavender	Netsmart
x	Beau Frierson	BHCPNS		Andy Mead	Netsmart
x	Sharyn Dodrill	Carisk		Roderick Harris	NWFHN (BBCBC)
x	Diego Wartensleben	Carisk		Lisa Tajdari	NWFHN (BBCBC)
x	Larry Brown	CFBHN		Roderick Harris	NWFHN (BBCBC)
	Joseph Glidden	CFBHN		Seana Zagar	Qualifacts
x	Joanne Szocinski	CFBHN		Matt Lightner	Streamline
	Nydia Neris	CFBHN	x	Katie Morrow	Streamline
x	Mike Lupton	CFCHS	x	Johnny Guimaraes	Thriving Mind (SFBHN)
x	Tom Rose	CFCHS	x	Debbie Stephenson	Five Points
x	William Garcia	CFCHS		Bryan Micu	
	Steve Lord	Circles of Care	x	Dan Field	
x	Lori Nicolosi		x	Chris Jones	
x	Ronesha Jefferson	SAMH			

Agenda and Discussion Summary

#	Topic	Comments
1	Review Action Items	<p>(Reference THIS spreadsheet)</p> <p><i>Nathan opened the meeting with a review of the action items. He confirmed today's agenda is very similar to the prior meeting. He identified some issues received from the field to be discussed later in the meeting. Her reviewed the two action items from last week – substance abuse disorder field and option to enter PBPS data into FASAMS. Nathan said any changes to the first item have to wait for v15. He then spoke to the PBPS question. Rich reviewed that 48,49,50,51 have traditionally been available in FASAMS. Diego brought up the issue of duplicate work in the field to report on those services. Greg spoke up and asked how the duplication is occurring</i></p>

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because prevention is entered into PBPS and not FASAMS. Sharyn and Diego said the financial reconciliation is not happening accurately. Brief discussion held on the duplicate entry issues. Sharyn clarified that her providers are entering the data twice – once to PBPS and once to FASAMS for financial reconciliation process. Joe, Mike, and Steve said they are not experiencing this issue. Joe reviewed past discussions with Walesca Marrero and the other prevention people to create an exportable report. Nathan summarized that this issue is broader than expected, that this duplicate entry is localized to a few MEs not the whole state, and that there is potentially a report currently generated that may fit the needs identified by Sharyn and Diego.

2	Review Plans for Submission of Historical Data	<h2 style="color: #0070C0;">Plans for Submission of Historical Data</h2> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #D9E1F2;"> <th style="text-align: center;">Submitting Entity</th> <th style="text-align: center;">Plan Description</th> <th style="text-align: center;">Estimated Completion</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">SFBHN</td> <td>Will convert all historical data into v14 and request a wipe of v13 data from FEI</td> <td style="text-align: center;">4/30/21</td> </tr> <tr> <td style="text-align: center;">LSF</td> <td>Will convert all historical data into v14 and request a wipe of v13 data from FEI</td> <td style="text-align: center;">4/30/21</td> </tr> <tr> <td style="text-align: center;">CFCHS (Five Points supported)</td> <td>Will request a purge of V13 and will resubmit V13</td> <td style="text-align: center;">4/30/21</td> </tr> <tr> <td style="text-align: center;">CFBHN</td> <td>Will request a purge of V13 and will resubmit V13</td> <td style="text-align: center;">4/30/21</td> </tr> <tr> <td style="text-align: center;">NWF Health (formerly BBCBC) (Five Points supported)</td> <td>Will request a purge of V13 and will resubmit V13</td> <td style="text-align: center;">4/30/21</td> </tr> <tr style="background-color: #D9EAD3;"> <td style="text-align: center;">BBHC (Carisk supported)</td> <td>Will convert all historical data into v14 and request a wipe of v13 data from FEI</td> <td style="text-align: center;">Complete</td> </tr> <tr style="background-color: #D9EAD3;"> <td style="text-align: center;">SEFBHN (Carisk supported)</td> <td>Will convert all historical data into v14 and request a wipe of v13 data from FEI</td> <td style="text-align: center;">Complete</td> </tr> </tbody> </table>			Submitting Entity	Plan Description	Estimated Completion	SFBHN	Will convert all historical data into v14 and request a wipe of v13 data from FEI	4/30/21	LSF	Will convert all historical data into v14 and request a wipe of v13 data from FEI	4/30/21	CFCHS (Five Points supported)	Will request a purge of V13 and will resubmit V13	4/30/21	CFBHN	Will request a purge of V13 and will resubmit V13	4/30/21	NWF Health (formerly BBCBC) (Five Points supported)	Will request a purge of V13 and will resubmit V13	4/30/21	BBHC (Carisk supported)	Will convert all historical data into v14 and request a wipe of v13 data from FEI	Complete	SEFBHN (Carisk supported)	Will convert all historical data into v14 and request a wipe of v13 data from FEI	Complete
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<p>Nathan then moved to this topic and asked if the current deadlines are achievable. Johnny said he would know for certain next week and may have to push his deadline out a week. Nathan acknowledged and offered DCF help. Debbie said they are waiting for the delete to happen before moving forward and can confirm the deadline when the purge is complete. He asked Jesse to speak to this. Jesse said he is</p>																												

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		<p>waiting for DCF approval which is waiting on Rich to finalize a last task to ensure the data purge will happen without issue.</p>																																
<p>3 Open Issues</p>		<p>1. DCF's review of valid OCA combinations DCF staff have drafted a reorganized version Pamphlet 155-2, Appendix 1, Table 7 (OCA Codes) as discussed in previous meetings. Update: DCF staff are populating the "Expiration Date" column in the set of historical OCA codes. The updated version of Appendix 1 should be published by the end of the month with these changes.</p> <p>11 FY 2020-21 Historical OCA Codes</p> <table border="1"> <thead> <tr> <th>Code</th> <th>Name</th> <th>Effective Date</th> <th>Expiration Date</th> <th>Valid Covered Services</th> <th>Valid Project Codes</th> <th>Valid Programs</th> <th>Valid Funds</th> </tr> </thead> <tbody> <tr> <td>MH010</td> <td>ME MH Miami Dade Homeless Trust</td> <td>7/1/2018</td> <td></td> <td>01, 02, 08, 10, 11, 12, 14, 19, 25, 26, 28, 35, 44, 45, 46, 47</td> <td>A8, B3, B6, B7</td> <td>1-AMH 2-ASA 3-CMH 4-CSA 5-ASA/AMH 6-CSA/CMH</td> <td>SAMH (2), Local Match (5)</td> </tr> <tr> <td>MH012</td> <td>ME Apalachee Center - Forensic Treatment Services</td> <td>7/1/2017</td> <td></td> <td>39</td> <td>A8, B3, B6, B7</td> <td>1-AMH 3-CMH 5-ASA/AMH 6-CSA/CMH</td> <td>SAMH (2), Local Match (5)</td> </tr> <tr> <td>MH013</td> <td>PTSD Clinic UCF</td> <td>7/1/2017</td> <td></td> <td>01, 04, 11, 14, 35, 46 47</td> <td>B6</td> <td>1-AMH 3-CMH</td> <td>SAMH (2),</td> </tr> </tbody> </table> <p><i>Nathan then moved to this topic. He reported that by the end of the month the finalized OCA tables should be complete. He reported the finalization would be reported in the relevant Stakeholder Report.</i></p> <p>2. Reporting Provider Readiness DCF needs help from our Managing Entities to assess and report the readiness of each of our service providers to submit FASAMS data in v14 format after 7/1/2021. Update: First submission received from MEs – Thank you! SAMH is assembling the first report for our Secretary using this data.</p> <p><i>Nathan then moved to this item. He thanked all the MEs for responding to this request from Secretary Harris. Mike asked the reporting frequency. Nathan confirmed this information from the ME's is needed bi-weekly.</i></p> <p>3. ME Access to FASAMS Base Tables On 4/2/2021, DCF met with the users provided this access. These users were provided with credentials and instructions to connect to the base tables in the UAT environment. Update: PROD access will be available on 4/22/2021 after the current submission window closes.</p> <p><i>Nathan then turned to this item and he confirmed the work would be wrapped up this week. Diego and Jesse discussed Diego's issue which was turned into an action</i></p>	Code	Name	Effective Date	Expiration Date	Valid Covered Services	Valid Project Codes	Valid Programs	Valid Funds	MH010	ME MH Miami Dade Homeless Trust	7/1/2018		01, 02, 08, 10, 11, 12, 14, 19, 25, 26, 28, 35, 44, 45, 46, 47	A8, B3, B6, B7	1-AMH 2-ASA 3-CMH 4-CSA 5-ASA/AMH 6-CSA/CMH	SAMH (2), Local Match (5)	MH012	ME Apalachee Center - Forensic Treatment Services	7/1/2017		39	A8, B3, B6, B7	1-AMH 3-CMH 5-ASA/AMH 6-CSA/CMH	SAMH (2), Local Match (5)	MH013	PTSD Clinic UCF	7/1/2017		01, 04, 11, 14, 35, 46 47	B6	1-AMH 3-CMH	SAMH (2),
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item for Jesse to follow up on. Jesse will schedule a meeting with those that have access to verify they are getting what they need – will send out the meeting invite today. Diego advised he's unable to connect. Jesse said if he tried accessing the on the 15th or afterwards the window would've been closed at that time. Diego expressed this being a possible issue and asked that this be reviewed for changes. Jesse stated it's being monitored at this time. Nathan advised this is the current policy, but it can be evaluated in the future for changes. Diego needs it 3 days before submission date at the most. Nathan advised Diego to use the access window the best he can for now as it's the standing policy.

4. Discuss Proposed Rule Changes

DCF is reviewing several of the rules in FASAMS regarding:

- a. CGAS (only going to be required once at initial admission)
- b. Disorder code (not going to require frequency, age of first use, codes 98 and 99)
- c. POMS (suspended for V14 historical where a V13 exists)

DCF would like to collect feedback from the committee regarding these or other recommended rule changes.

Nathan then turned to these items. He reviewed that these rule changes were requested from the field and no issues were identified when DCF staffed the requests. Jesse spoke to the changes. He said the first issue was the CGAS and that it will only be required once at initial admission. No questions issued. He then moved to disorder code 98 or 99 and that frequency, age of first use no longer required. He then moved to POMS and that a rule was disabled to match the request from the field. He then identified the request to remove the ability to submit PAC 5 & 6 in service event which is being reviewed. He also addressed the version control rule being disabled in UAT. No issues raised with the proposed changes. Proposed - One more change being made -removing ability to submit program area code (PAC) 5 and 6. Steve asked are we still submitting program type? Jesse pulled up this chapter and advised it's not a field. Rich advised he doesn't recall seeing this in FASAMS. Danielle stated the previous requirement said it had to match the admissions program area and MEs had code validating that – suggests this code change will require more changes.

5. Requested Appendix 1 Changes from Sharyn Dodrill ***NEW***

Sharyn Dodrill requested seven changes to Appendix 1.

Nathan then moved to this topic. He then pulled Sharyn's email up to go through and discuss. The first item was the LOCUS/CALOCUS codes. Sharyn said the current care ranges are incorrect values. Greg reviewed with Sharyn that only the code ranges are given and what she wanted was a reduction in the ambiguity so the specific score ranges in the different levels. Sharyn then moved to the FARS and CFARS that what's in the pamphlet does not match the agreements made previously between DCF and the DAC. She said this issue may not be able to be resolved by QI and instead is a guidance document and contract issue that the Contract Unit needs to provide clarity to the reporting requirements. She said the issue of required evals compared to the "General Functional Improvement Tool" needs to be resolved and finalized by DCF so there is no hiccup in reporting when v14 goes live. Joe agreed with Sharyn's position that this issue needs to be given a final determination by DCF as to required evals and assessments. Discussion held, Greg said a meeting with Jimmers would be necessary to better understand current and future reporting requirements are clarified. General discussion ensued amongst

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	<p>participants on various requirements and being able to determine the specifics the providers have to report in on. Joe said this is a DCF internal issue regarding Guidance 24. Greg concurred that QI would need to staff this with Contracts and Practice especially in light of previous Practice Director Gazioch pushing so hard for the General Functional Improvement tool. Rich said his preferred approach this issue by staffing with Jimmers. He then moved on to “table 3 SA Detox and CSU should include utilization. Sharyn said this came from her contracts people who were hoping for this change being made. No issue identified by DCF. Change to be made. Nathan then moved to the issue of having CRPS-Y included in peer support services for CMH and CSA. Greg said this should not be a problem and would f/u with Practice to confirm. She then identified the DJJ discrepancy b/w Table 14 and Table 16 – the language should be the same. Nathan said DCF would look into this. He then move to title of Table 20. Nathan clarified that this is not a structural change but a documentation change. Jesse said he thinks its just a table name change but he could not state that with 100% certainty. Sharyn then brought up the SU Diagnosis part that doesn’t have any data points for collecting the assessment conducted and the diagnosis settled upon. Greg concurred with Sharyn that there are problems in this section because it doesn’t match clinical reality. Joe asked for caution on making any of these changes because he was concerned with potential impacts on his data reporting. Nathan then ended the meeting.</p> <p>6. Questions from Mike Lupton *NEW*</p> <p>a. If an element is only required for a specific program area and is not to be provided otherwise, should that element be excluded entirely? For example the SchoolDaysAttended element</p> <p>b. The Unable to perform daily living activities element has historically been an AMH only element. In the current documentation it says it is used for priority population determination, but otherwise it is just generally required – should it be provided for all program areas?</p> <p>c. One other issue which was discussed back in the fall and approved by Ute, but I think fell off the radar with Ute and Jonathan leaving, was the aligning of the Bio-psycho-social levels with the Placement codes. The current values match the LOCUS/CALOCUS levels, which doesn’t make much sense.</p> <p><i>No discussion held on this topic due to time constraints.</i></p> <p>7. Questions from Dan Field *NEW*</p> <p>Dan submitted questions pertaining to:</p> <p>a. UnableToPerformDailyLivingActivitiesCode</p> <p>b. AnnualPersonallIncomeAmount and AnnualFamilyIncomeAmount</p> <p><i>No discussion held on this topic due to time constraints.</i></p>
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New Action Items

#	Item Description	Assignee	Estimated Completion
1	Verify Diego’s access to UAT	Jesse Linsey	4/21/2021

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#	Item Description	Assignee	Estimated Completion
2	<p>Determine what changes are required to the GD and/or pamphlet so that guidance regarding functioning tool code information is consistent between the two.</p> <p>EITHER all references to/requirements for use of FARS, CFARS, NCFAS/CAT and DLA-20 should be removed from the GDs and Templates (and replaced with references to the General Functional Improvement Tool)</p> <p>OR the FARS, CFARS and NCFAS/CAT Tool Codes options SHOULD NOT BE REMOVED from FASAMS as now scheduled to take place as of July 1st.</p>	Greg Nix	4/26/2021
3	Evaluate the request update Table 3 SA Detox and CSU to include "Utilization" as a payment type option.	Greg Nix	4/26/2021
4	Evaluate the request to update Table 4, Service Categories, Peer Support Services should include CMH and CSA since Table 19 includes CRPS-Y (Certified Recovery Peer Specialist -Youth).	Greg Nix	4/26/2021
5	Evaluate the request to update the reference to DJJ facility in Table 14 and the "DJJ residential/commitment" language in Table 16 to make them more consistent.	Greg Nix	4/26/2021
6	Evaluate the request to update the title of Table 20, Substance Use Disorder, should be changed to "Substances Used" or something similar since it is a listing of drugs that can be used and abused.	Greg Nix	4/26/2021

New Open Issues

#	Issue Description
1	Should PBPS have data exports for MEs?
2	Should a new rule be established requiring that a matching SU Diagnosis has been reported for any client where a 'Substance Use Disorder' is identified in a client's POM?

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New Decisions

#	Decision Maker	Description
1	Rich Power	The following proposed rule changes were approved and will be included in an enhance scheduled for the August release: <ul style="list-style-type: none">- CGAS (only going to be required once at initial admission)- Disorder code (not going to require frequency, age of first use, codes 98 and 99)- Removing the ability to submit PAC 5 & 6 in service event