

## SUMMARY OF DARMHA SFY 2016 CHANGES

**JULY 16, 2015**

### CONSUMER PAGE

- Medicaid ID/HIP ID will move to the Consumer page.

### EPISODE PAGE

- Active Medicaid/HIP field will still be on the Episode page.
- If you close an episode as “Episode Status = Death,” you cannot open up a new episode.

### NEW DIAGNOSIS PAGE

- **NEW - Diagnosis Fields 1 thru 5:** The Primary Diagnosis should be in the 1<sup>st</sup> field. Providers can use DSM 5 or ICD-10 codes. A complete list of codes can be found on the DARMHA Documents page.
- **NEW- Health Conditions reported by the Consumer** (Integer): Chose all that apply.

*Diabetes* (0 = No; 1 = Yes)

*Cardiovascular Disease* (0 = No; 1 = Yes)

*Hypertension (high blood pressure)* (0 = No; 1 = Yes)

*Hyperlipidemia (high cholesterol)* (0 = No; 1 = Yes)

*Cancer* (0 = No; 1 = Yes)

*Smoking* (0 = No; 1 = Yes)

*Obesity* (0 = No; 1 = Yes)

*Asthma* (0 = No; 1 = Yes)

*COPD* (0 = No; 1 = Yes)

- New codes and diagnosis data required starting October 1, 2015. No old codes will not be accepted after September 30, 2015. You will need to submit a new diagnosis record for all SFY 2016 consumers, including those only seen in July, August and September. (Records need to be submitted after September 30, 2015. )

## **CHANGES TO ANSA**

- Changes to development disability item language
- Three new items in a health module triggered by the physical/medical health item
- The Crime Module will be triggered by both legal and criminal behavior items
- Four new items in the trauma module to be more consistent with the CANS and move towards trauma informed screening and assessment

## **CHANGES TO CANS**

- Changes to the developmental item and module. The format for the new DD module has been enhanced with four new items and new definitions and questions to assist in rating the items
- Change in the algorithm for LON 4 for birth-five tool that will enable more young children who need intensive community based services to access them

## **IF SUBMITTING AN ANSA, THE FOLLOWING FIELDS MUST BE INCLUDED:**

***NEW - SMI/Co-Occurring Carve-Out***

***ACT Indicator***

***IMR – Illness Management and Recovery***

***IDDT - Integrated Dual Diagnosis Treatment***

***Motivational Interviewing***

***Cognitive Behavioral Therapy***

***MATRIX Model***

***DBT - Dialectical Behavior Therapy***

***New - Clubhouse***

***New - Peer Support***

***New - Reporting Field 1 and 2***

**IF SUBMITTING A CANS BIRTH TO FIVE, THE FOLLOWING FIELDS MUST BE INCLUDED:**

*New - Strengthening Families Program*

*New - Parent Child Interactive Therapy (PCIT)*

*New - Incredible Years*

*New - Reporting Field 1 and 2*

**IF SUBMITTING A CANS 5 - 17, THE FOLLOWING FIELDS MUST BE INCLUDED:**

*New - Trauma Focused Cognitive Behavior Therapy (TF-CBT)*

*New - Aggression Replacement Training (ART)*

*New - Cannabis Youth Treatment (CYT)*

*New - Strengthening Families Program*

*New - Parent Child Interactive Therapy (PCIT)*

*New - Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS)*

*New - Dialectical Behavior Therapy (DBT)*

*New - Cognitive Behavior Intervention for Therapy in Schools (CBITS)*

*New - Incredible Years*

*New - Functional Family Therapy (FFT)*

*New - High Fidelity Wraparound*

*New - Youth First's Family Connections (YFFC)*

*New - Alternatives for Families: A Cognitive-Behavioral Therapy (AF-CBT)*

*New - Child-Parent Psychotherapy (CPP)*

*New - Motivational interviewing*

*New - Cognitive Behavioral Therapy (CBT)*

*New - Reporting Field 1 and 2*

**NOMS**

The addition of two EBPs from the EBP Page. EBP page will only be for historic info.

- **Supported Employment**
- **Supported Housing**