

SUMMARY OF DARMHA SFY 2016 CHANGES

JULY 16, 2015

CONSUMER PAGE

- Medicaid ID/HIP ID will move to the Consumer page.
- Fields for new program. If your agency is not participating in the new program you do not need to have these fields.
 - **Department of Correction ID** (string): Field is utilized for new program. It is an optional field for the new program
 - **New Program Checkbox**: This field will be utilized to register for the new program.

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 1st 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 - Child-Parent Psychotherapy (CPP)

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 - 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**