

Project / Initiative: FASAMS	
Meeting Purpose: Data Advisory Committee (DAC) Meeting	
Meeting Date:	6/8/2021
Meeting Time:	10:00am - 11:00am

	Attendee	Office		Attendee	Office
Х	Ronesha Jefferson	SAMH	Х	Danielle Downing	Credible
Х	Richard Power	SAMH		Natalie Kelly	FAME
Х	Greg Nix	SAMH		Paul Bebee	FAME
	Tracey Fannon	SAMH	Х	Jesse Lindsey	FEI
Х	Kyle Knowles	SAMH		Andrew Barden	FEI
Х	Ed De Cardenas	SAMH		Rodney Pritchard	Knight Software
Х	Nathan McPherson	OITS		Josh Botbol	Let's Talk Counseling
Х	Mark Granto	OITS		Arthur Cooksey	Let's Talk Interactive
	Victor Gaines	OITS		Jason Lee	Let's Talk Interactive
	Wen Cao	OITS	Х	Jennifer Ramirez	LSF
	Mike Idoni	BHCPNS		Ryan Lavender	Netsmart
Х	Beau Frierson	BHCPNS		Andy Mead	Netsmart
Х	Sharyn Dodrill	Carisk		Roderick Harris	NWFHN (BBCBC)
Х	Diego Wartensleben	Carisk		Lisa Tajdari	NWFHN (BBCBC)
Х	Larry Brown	CFBHN		Roderick Harris	NWFHN (BBCBC)
Х	Joseph Glidden	CFBHN		Seana Zagar	Qualifacts
Х	Joanne Szocinski	CFBHN		Matt Lightner	Streamline
	Nydia Neris	CFBHN	Х	Katie Morrow	Streamline
Х	Mike Lupton	CFCHS	Х	Johnny Guimaraes	Thriving Mind (SFBHN)
	Tom Rose	CFCHS	Х	Debbie Stephenson	Five Points
Х	William Garcia	CFCHS		Bryan Micu	
Х	Steve Lord	Circles of Care	Х	Dan Field	
	Lori Nicolosi		Х	Chris Jones	
	Christi Anderson	SAMH	Х	Corey Chafin	
Х	Wendy Scott	SAMH	Х	Maura Comer	SAMH
Х	Heather Allman	SAMH			



### **Agenda and Discussion Summary**

#	Topic	Comments		
1	Review Action Items	(Reference THIS spreadsheet)		
	Review Plans for Submission of Historical Data	Plans for S Submitting Entity	Submission of Historical Plan Description	Data Estimated Completion
2		SFBHN	Will convert all historical data into v14 and request a wipe of v13 data from FEI  1) Encountering "Unexpected Errors" 2) Longer unusual processing times 3) FASAMS flagging records as duplicates - Client records 4) Getting "No Admission" errors on Treatment Episode submissions  Diego – can unique constraint rules be included in pamphlet?  - Mike – recommended these be included in each chapter - Rich – thinks this would be best	6/4/21
		CFCHS (Five Points supported)	Will convert all historical data into v14 and request a wipe of v13 data from FEI  1) Encountering "Unexpected Errors" 2) Longer unusual processing times 3) System processes files sequentially - evaluate options to process files in parallel – multiple lanes for each ME 4) Certain OCAs are being rejected – ticket already submitted – DCF to follow-up – vocabulary may not have been updated  Will request a purge of V13 and will resubmit V13	6/4/21 Complete



		NWF Health (formerly BBCBC) (Five Points supported) BBHC (Carisk	Will request a purge of V13 and will resubmit V13  Encountering same errors  Will request a purge of V13 and will resubmit V13  Will convert all historical data into v14 and request a wipe of v13 data from	6/4/21  Complete  Complete	
		SEFBHN (Carisk supported)	Will convert all historical data into v14 and request a wipe of v13 data from FEI	Complete	
		**Multiple N	MEs reporting slower than normal proces	ssing times**	
3	Open Issues	1. Provider Readiness for Version 14  The group will discuss recent activities to help ensure providers are ready to submit data in Version 14 format by July 1, 2021.  Review last report  Upcoming data submissions (6/15/2021 and 6/29/2021)  Review of plan submitted by our MEs  Nathan asked Jesse to provide an update. Jesse got feedback from AWS and they've recommended an update to one of the driver on the virtual machine which is que up to do. He stated we want to try and trigger the error on our own first prior to implementing different changes so we know what actually fixes it. In addition to this AWS recommendation, with DCF's permission we plan to ask for the UAT environment to be globally locked from Thursday morning through Monday. Once its locked resubmission will be completed to try and retrigger the errors. Then there are two other updates to command timeouts and retry logic.  Wendy asked if these changes would require the vendors to make changes in their systems? Jesse said not at all and it will not impact anything submitted. Wendy asked if it would impact the MEs. Jesse said no other than hopefully making it better.  Nathan asked if what Jesse proposed about taking UAT down will hinder everyone. Joseph said yes and Johnny agreed. He asked for suggestions on different downtimes that wouldn't hinder everyone. Johnny said it's not ideal, but they'll make it work. Jennifer agreed they'll make it work as well.  Jesse added these are primarily server changes. The expectation is to lockdown UAT, run a lot of files through it, trigger the error, and then resubmit again. Jennifer asked if these are separate servers or the same. Jesse answered with they are the same. The also stated right now UAT and production are both on		which prior prior prior to their dy t	



server 1 and der 2 as there is always a backup. All processing is done on server 1 and all reporting is on server 2. After UAT is down the processing test will actually be done on server 2 so it doesn't impact the production processing at the same time. In all UAT is being isolated to be tested without impacting production. Then they plan to proceed with making the changes on both servers where the production processing occurs. Jennifer said she doesn't understand because she's getting a lot more unexpected errors and Joseph said he got one as well. Jesse asked for them to send him examples.

#### 2. FASAMS "Unexpected Error"

FEI will provide an update on the work in progress to address this issue.

#### Time did not allow for this discussion

#### 3. Administrative Discharge Question \*NEW\*

Some of Netsmart's providers have asked questions about Administrative Discharges. Do they still exist in FASAMS and if so, what the criteria is, how it affects Treatment Episode/Services data submitted, and how they are to be handled?

Administrative discharge is still identified in Chapter 5 for DischargeReasonCode

DischargeReasonCode	string	The code indicating the outcome of the treatment episode or discontinuance of treatment.  Required  Must be one of the following values:
		o 1 for Successfully Completed Treatment/Services
		<ul> <li>2 for Did not Complete Treatment-Voluntary (Examples: (lost contact left against medical advice, eloped, failed to return from leave, and individual choice)</li> </ul>
		<ul> <li>3 for Did Not Complete Treatment-Involuntary (Examples: Administrative discharge (no longer eligible for services, funding source change, assessment only, agency closure)</li> </ul>
		o 4 for Successfully CompletedTransferred to Another Provider
		o 5 for Incarcerated
		o 6 for Death
		o 8 for Transferred to State Mental Health Treatment Facility

Last Revision Date: 05/24/2021 Effective Date: 7/01/2021

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Field	Value Type	Description/Validation Rules
- HATEACO		o 9 for Client Moved Out of Service Area
		<ul> <li>10 for Client Only Received Non-Treatment Services (e.g. assessment detox, intervention, prevention, etc.)</li> </ul>
		<ul> <li>14 for Did Not Complete Treatment-Transferred to Another Provider (i.e. Long Term Medical Care)</li> </ul>
		This field is part of TEDS minimum data set for reporting DIS 10 – Reason for Discharge, Transfer or Discontinuance of Treatment Discharge.
		Note: Vocabulary Codes under review and may be updated by DCF policy makers.

#### Time did not allow for this discussion

#### 4. Unique constraint for the

Contract/Subcontract/ProgramArea/CoveredService (Larry Brown) \*NEW\*

"We have scenarios in our contracting system that allow for different rates when they are renegotiated and or are a result from one fiscal year to another such as



rates that change from a prior fiscal year and are allowable to be used under carry forward funding. Other situations could also occur when a provider subcontracting with another agency sets up different rates, etc."

Joseph stated they typically contract at different rates under the same subcontract program area and covered service. Over the last year its been more frequent due to COVID and our contracts and finance department changing rates midway through the year for providers. We have contracted servers for multiple rates but in FASAMS the system doesn't allow it anymore whereas before it would just give a warning. The issue now is we are receiving errors and warnings initial records are accepted – updates are being rejected due to newer unique constraint rules. However, the records are still getting in the system even though errors are being received. He believes the unique constraint rule for that particular data set seems to not operate unless there's existing data in the system.

Jesse asked if he means when he submits the subcontract services is he able to get the same combination at different rates? Joseph says yes. The initial records are accepted but the updates are being rejected due to newer constraint rules.

Jesse asked for Joseph to submit a ticket with this information for him to look further into and we will circle back to this next week

#### **New Decisions**

#	Decision Maker	Description	
1	INIGITAGO IVICEDACECA	A code value of "12" will be used for the new record to include "DCF" as an option for PrimaryPaymentSourceCode in Chapter 5.	

#### **New Action Items**

#	Item Description	Assignee	Estimated Completion
	Include the unique constraint rules within each applicable chapter of Pamphlet 155-2	Jesse Lindsey	6/25/2021
2	Evaluate options the enable multiple files in a submitting entity's queue to be processed simultaneously vs. sequentially	Jesse Lindsey	6/30/2021

#### **New Open Issues**

#	Issue Description
1	Multiple MEs reporting slower than usual file processing