

Arizona Department of Health Services Division of Behavioral Health Services PROVIDER MANUAL

Section 7.5 **Enrollment, Disenrollment and Other Data Submission**

- 7.5.1 **Introduction**
- 7.5.2 **References**
- 7.5.3 **Scope**
- 7.5.4 **Did you know...?**
- 7.5.5 **Definitions**
- 7.5.6 **Objectives**
- 7.5.7 **Procedures**
- 7.5.7-A: **Enrollment and disenrollment transactions**
- 7.5.7-B: **Demographic and clinical data**

7.5.1 Introduction

The collection and reporting of accurate complete, and timely enrollment, demographic, clinical, and disenrollment data is of vital importance to the successful operation of the Arizona Department of Health Services / Division of Behavioral Health Services (ADHS/DBHS) behavioral health service delivery system. It is necessary for behavioral health providers to submit specific data on each person who is enrolled into the behavioral health system. As such, it is important for behavioral health provider staff (e.g., intake workers, clinicians, data entry staff) to have a thorough understanding of why it is necessary to collect the data, how it can be used and how to accurately label the data.

This data in turn is used by ADHS/DBHS to:

- Monitor and report on enrolled persons' outcomes (e.g., changes in diagnosis or GAF, employment/educational status, place of residence, substance use, number of arrests),
- Comply with federal and state funding and/or grant requirements,
- Assist with financial-related activities such as budget development and rate setting,
- Support quality management and utilization management activities, and
- Respond to requests for information.

The intent of this section is to describe requirements for behavioral health providers to submit the following data in a timely, complete, and accurate manner:

- Enrollment and disenrollment transactions,
- Demographic and clinical data, including changes in a person's behavioral health status, and

Arizona Department of Health Services

Division of Behavioral Health Services

PROVIDER MANUAL

- Information about persons disenrolled from the behavioral health system, when necessary and appropriate.

7.5.2 References

The following citations can serve as additional resources for this content area:

[AHCCCS/ADHS Contract](#)

[ADHS/RBHA Contracts](#)

[ADHS/TRBHA IGAs](#)

[Section 3.2, Appointment Standards and Timeliness of Service](#)

[Section 3.8, Outreach, Engagement, Re-Engagement and Closure](#)

[Section 3.9, Intake, Assessment and Service Planning](#)

[Section 3.17, Transition of Persons](#)

[Section 6.1, Submitting Claims and Encounters](#)

[ADHS/DBHS Demographic Data Set User Guide](#)

[ADHS/DBHS Covered Behavioral Health Services Guide](#)

7.5.3 Scope

To whom does this apply?

This applies to all behavioral health providers who are delivering behavioral health services to persons who are enrolled in the ADHS/DBHS behavioral health system. It has particular relevance for those behavioral health providers that conduct intakes, assessments, ongoing service planning, and annual updates.

7.5.4 Did you know...?

- HIPAA 834-enrollment transactions must be submitted by T/RBHAs to ADHS/DBHS within 14 days of first contact with a behavioral health recipient. Behavioral health providers may be required to submit 834 transactions to the T/RBHA within a shorter timeframe (see subsection 7.5.7-A. for required timeframe).
- Behavioral health providers are permitted to submit and change single data fields when necessary, without being required to re-submit every data field contained in a demographic record transaction.
- Behavioral health providers delivering services to a Non-Title XIX person are not required to submit fund source changes if the person posts retroactive Title XIX eligibility. The ADHS/DBHS system will be notified by AHCCCS to change the person's fund source from Non-Title XIX eligible to Title XIX eligible and requires no action from the behavioral health provider. In instances where fund source is changed, a corresponding retroactive behavioral health enrollment will also occur.

Arizona Department of Health Services

Division of Behavioral Health Services

PROVIDER MANUAL

- Personal financial information does not have to be collected during the intake process for persons who are Title XIX/XXI eligible. However, household income must be reported on all behavioral health recipients, regardless of eligibility status.
- ADHS/DBHS has developed a flow chart that includes the timeframes for enrollment (intake), clinical and demographic, and disenrollment (closure) data. See [PM Attachment 7.5.1](#).

7.5.5 Definitions

[834 Transaction Enrollment/Disenrollment](#)

[Annual Update](#)

[Assessment](#)

[Behavioral Health Category Assignment](#)

[Change](#)

[Client Information System \(CIS\)](#)

[Closure](#)

[Day](#)

[Descriptive Characteristics](#)

[Edit](#)

[Health Insurance Portability and Accountability Act of 1996 \(HIPAA\)](#)

[Intake / Enrollment](#)

[Outcome Measures](#)

7.5.6 Objectives

To ensure that data elements specified by ADHS/DBHS and the T/RBHAs are collected and submitted in a timely, complete and accurate manner for each person enrolled in the public behavioral health system.

Arizona Department of Health Services

Division of Behavioral Health Services

PROVIDER MANUAL

7.5.7 Procedures

7.5.7-A: Enrollment and disenrollment transactions

General requirements

- All persons who are served through the ADHS/DBHS behavioral health system must be enrolled, even if the person only receives a single service (e.g., crisis intervention, one time face-to-face consultation).
- For a person to be enrolled, behavioral health providers must submit an 834 enrollment transaction to the T/RBHA.
- Behavioral health providers must submit enrollment data for any person receiving covered behavioral health services or the provider will not be reimbursed.
- A person who receives a covered behavioral health service must be enrolled effective the date of first contact by a behavioral health provider.

When is enrollment information collected?

Information necessary to complete an 834 transaction is usually collected during the intake and assessment process (see [Section 3.9, Intake, Assessment and Service Planning](#)). [PM Attachment 7.5.2](#), 834 Transaction Data Requirements, contains a list of the data elements necessary to create an 834 enrollment transaction.

What kind of data must be submitted to complete an enrollment or disenrollment?

The data fields that are included in the 834 transmittals are dictated by HIPAA and consist of:

- Key client identifiers (e.g., person's name, address, social security number, date of birth) used for file matching,
- Basic demographic information (e.g., gender, marital status), and
- Information on third party insurance coverage.

For a specific list of data elements necessary to create an 834 enrollment and disenrollment, see [PM Attachment 7.5.2](#).

What happens if there is not enough information to complete an enrollment?

Behavioral health providers must actively secure any needed information to complete the enrollment (834 transaction). An 834 transaction will not be accepted by the T/RBHA if required data elements are missing.

What are the timeframes for submitting enrollment and disenrollment data?

The following data submittal timeframes apply to the enrollment/disenrollment transactions:

Page 7.5-4

7.5-Enrollment, Disenrollment and Other Data Submission
Last Revised: 02/20/2008
Effective Date: 04/01/2008

Arizona Department of Health Services

Division of Behavioral Health Services

PROVIDER MANUAL

The 834-enrollment transaction must be submitted to NARBHA MIS Department within 14 days of the first contact with a behavioral health recipient;

The 834 disenrollment transaction must be submitted to NARBHA MIS Department within 14 days of the person being disenrolled from the system; and any changes to the enrollment/disenrollment transaction data fields (e.g., change in address, insurance coverage) must be submitted 14 days from the date of identifying the need for the change.

What other events require a submittal of an 834 transaction?

In addition to submitting an 834 transaction at enrollment and disenrollment, an 834 transaction must also be submitted when any of the following elements of the 834 transaction have changed:

- Name,
- Address,
- Date of birth,
- Gender,
- Marital status,
- Social security number, or
- Third party insurance information.

Other considerations

- When a person re-locates from one T/RBHA's geographic area to another T/RBHA's geographic area, an inter-T/RBHA transfer must occur (see [Section 3.17, Transition of Persons](#)). The steps that are necessary to facilitate an inter-T/RBHA transfer include the following data submission requirements:
 - The home T/RBHA must submit an 834 disenrollment transaction on the date of transfer; and
 - The receiving T/RBHA must submit an 834 enrollment transaction on the date of accepting the person for services.
- When a T/RBHA enrolled person is determined eligible for the Arizona Long Term Care System (ALTCS) Elderly and Physically Disabled (EPD) Program, the behavioral health provider must submit an 834 disenrollment transaction, effective the date of ALTCS/EPD eligibility.
- When a data element common to the 834 transaction and the demographic data set (e.g., the person's name) has changed, the change must first be reported in an 834 transaction,

Arizona Department of Health Services

Division of Behavioral Health Services

PROVIDER MANUAL

as edits to the demographic data set will prevent the entering of data that is inconsistent with the 834 transaction.

What technical assistance is available to help with problems associated with electronic data submission?

At times, technical problems or other issues may occur in the electronic transmission of the data from the behavioral health provider to the receiving T/RBHA. If a behavioral health provider requires assistance for technical related problems or issues, please contact NARBHA MIS Specialists or NARBHA MIS Production Manager at 928-774-7128 or 1-800-640-2123.

7.5.7-B: Demographic and clinical data

When is demographic and clinical data collected?

Demographic and clinical data will initially be collected during the intake and assessment process. Additional clinical data may be collected at subsequent assessment and service planning meetings with the enrolled person (e.g., education, vocation) as well as during periodic and annual updates. Demographic and clinical data recorded in the person's behavioral health medical record must match the demographic file on record with ADHS/DBHS.

What are the specific data elements?

The [ADHS/DBHS Demographic Data Set User Guide](#) describes the data elements that comprise the demographic data set and the timeframe requirements for submitting the demographic data set. T/RBHAs must ensure that providers collect required demographic data set elements. NARBHA does not require providers to use a specific form for data collection. NARBHA utilizes a data collection/edit program (CASPER) to ensure that all required data elements are present. When ADHS/DBHS issues updates to the demographic data set, T/RBHAs are responsible for updating their required form(s) and communicating changes to their providers.

What are the timeframes for submitting demographic and clinical data?

The following timeframes apply to demographic and clinical data submissions (see the [ADHS/DBHS Demographic Data Set User Guide](#)):

- All required demographic data submitted to NARBHA MIS Department within 45 days of the initial intake for all enrolled persons.

- Outcome measures, for children birth through age 17, submitted to NARBHA MIS Department within 14 days of the 6 month anniversary date of intake/enrollment (see [Section 3.9, Intake, Assessment and Service Planning](#)). For outcome measures submission dates that do not coincide with the annual update, the reason for submission will be indicated as a "change" (see specific instructions in the ADHS/DBHS Demographic Data Set User Guide).

Arizona Department of Health Services

Division of Behavioral Health Services

PROVIDER MANUAL

- All required demographic data submitted to NARBHA MIS Department within 14 days of the annual update ([see Section 3.9, Intake, Assessment and Service Planning](#)).
- All required demographic data submitted to NARBHA MIS Department within 14 days of a recorded change in the person's demographic data record. Behavioral health providers must ensure that the person's behavioral health medical record matches the demographic data set on file with ADHS/DBHS.
- All required data elements submitted to NARBHA MIS Department within 14 days of disenrollment. The required data elements include the reason for the person's disenrollment. See the [ADHS/DBHS Demographic Data Set User Guide](#) to determine the specific data elements that must accompany a demographic disenrollment transaction.

Determining a behavioral health recipient's behavioral health category assignment

Behavioral health providers must designate a person's behavioral health category assignment during the intake and assessment process as well as at any other times that necessitate changes to the person's assignment (e.g., transition to adulthood). Behavioral health categories include:

- Child,
- Seriously Emotionally Disturbed (SED) Child (see [Attachment 7.5.3, SMI and SED Qualifying Diagnoses Table](#)),
- Adult with SMI,
- Adult, non-SMI with general mental health need, and
- Adult, non-SMI with substance abuse (see [Attachment 7.5.4, Substance Abuse Disorders Qualifying Diagnoses Table](#)).

Behavioral health providers must initially assign and update, as necessary, behavioral health category assignments as follows (see the [ADHS/DBHS Demographic Data Set User Guide](#) for more detailed instructions on assignment of behavioral health categories):

- For a child who is non-SED, enter "C";
- For a child who is SED, enter "Z";
- For a person determined to have a Serious Mental Illness enter "S" (see [Section 3.10, Serious Mental Illness Eligibility Determination](#));
- For an adult non-SMI person with a general mental health need (who does not have a substance abuse problem) enter "M"; and

Arizona Department of Health Services

Division of Behavioral Health Services

PROVIDER MANUAL

- For an adult non-SMI person with a reported substance abuse problem enter “G”.

How can demographic and clinical data be used?

Behavioral health providers are encouraged to utilize demographic and clinical data to improve operational efficiency and gain information about the persons who receive behavioral health services. Behavioral health providers may consider:

- Utilizing and integrating collected demographic data into the person’s assessments,
- Monitoring the nature of the provider’s behavioral health recipient population, and
- Evaluating the effectiveness of the provider’s behavioral health services towards improving the clinical outcomes of persons enrolled in the ADHS/DBHS system.

What technical assistance is available to help with problems associated with demographic and clinical data submission?

At times, technical problems or other issues may occur in the electronic transmission of the clinical and demographic data from the behavioral health provider to the receiving T/RBHA. If a behavioral health provider requires assistance for technical related problems or issues, please contact NARBHA MIS Specialists or NARBHA MIS Production Manager at 928-774-7128 or 1-800-640-2123.