

Since July 1, 2016, and the process of administrative simplification, AHCCCS has spent a great deal of time soliciting stakeholder feedback in a variety of ways regarding provider reporting of Demographic and Outcome Data Set (commonly known as the DUG) data. The consistent message received is that there is an undue burden placed on providers for reporting this data, most of which is necessary for grant reporting. Also included in the DUG data, however, are important elements regarding members' social determinants of health which could be leveraged by AHCCCS and its Contractors to improve member outcomes. As AHCCCS embarks on its most transformative changes to the delivery system in the history of the program, with behavioral health services for the majority of members to be managed by a number of integrated Contractors in the same geographical region, it is clear that simplification at the provider level must be a priority.

After extensive research, numerous workgroups, and a thorough review of this critical stakeholder feedback, AHCCCS has developed a plan to transition the collection of demographic data. At this time, AHCCCS has opted not to make the DUG data collection specific to services funded from grant only funds. The goal of the transition plan is to facilitate the reduction of the number of data points behavioral health providers will be required to report in order to relieve administrative burden, and to ensure that the current burdensome process is not duplicated with the implementation of the AHCCCS Complete Care (ACC) Program effective October 1, 2018.

AHCCCS' transition plan consists of a three-pronged approach to collecting members' demographic data.

1. The Use of Alternative Data Sources

AHCCCS, with the assistance of stakeholders, has identified demographic elements that currently exist in other AHCCCS data systems, and/or available through other data source agreements. These elements include:

- T/RBHA ID
- AHCCCS ID
- Date of Birth
- Race
- Gender
- Diagnosis (behavioral health and physical health)
- Behavioral Health Category
- Assessment Date
- Member Enrollment and Disenrollment From Services (will be determined through the AHCCCS Behavioral Health Enrolled and Served methodology, which identifies members who are actively receiving behavioral health services via claims and encounter data)

The use of alternative data sources will be implemented October 1, 2018.

2. The Use of Social Determinants of Health ICD-10 Diagnosis Codes

AHCCCS will begin to use Social Determinants of Health diagnosis codes reported on applicable claims to track member outcomes where possible. AHCCCS will require the usage of these codes

beginning April 1, 2018, as outlined in the attached memorandum. AHCCCS expects all providers with ICD-10 coding capabilities will use these codes as appropriate.

3. For those demographic elements with no identified alternative data source or Social Determinate identifier, AHCCCS will create an online portal to be accessed directly by behavioral health providers for the collection of the remaining data elements for members receiving behavioral health services. It is AHCCCS' intent that the provider organizations that historically provided data for the DUG will transition to providing the required data via the portal on 10-1-18.

The table below delineates those elements to be included in this portal:

<i>Demographic Elements for Online Portal</i>
Referral Date
Referral Source
Involvement in DES Rehabilitative Services
Participate in self-help/recovery
CASII Intensity Level
CASII Intensity Date
Substance Use Type (Primary, Secondary, Tertiary)
Substance Use Frequency (Primary, Secondary, Tertiary)
Substance Use Route (Primary, Secondary, Tertiary)
Substance Use Age First Use (Primary, Secondary, Tertiary)
Employment Status
Treatment Participation
Number of Arrests
ADC or Parole
ADJC Parole
AOC Adult Probation
AOC Juvenile Probation
School Special Ed
SP Woman DC
Military Status

As noted, the Portal is expected to be operational effective October 1, 2018. The current DUG process will be discontinued upon the implementation of the Portal. In the interim, no changes to the current DUG process are contemplated.

All of the demographic data collected by AHCCCS, via one or more of the three methods identified above, will be shared with the ACC Contractor, RBHA, or TRBHA with which the member is enrolled, as well as the RBHA responsible for the GSA in which the member resides, if applicable. AHCCCS will work closely with providers, ACC Contractors, RBHAs, and TRBHAs to test both the Portal and the transmission of member specific demographic data as outlined above. AHCCCS expects this process will be ongoing as future sources of information are identified, and will continue to seek stakeholder feedback. This collaboration will be vital to ensure successful completion of this transition, and to achieve the goals of reducing provider burdens.

Should you have any questions about these requirements, the portal or this plan, please email CodingPolicyQuestions@azahcccs.gov.