



# Combined Behavioral Health Assessment and Federal Data Collection

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*Magellan Healthcare of Idaho  
Provider Training*

The Magellan Healthcare logo, featuring the word 'Magellan' in a bold, black, sans-serif font, with 'HEALTHCARE.' in a smaller, blue, sans-serif font below it. The logo is set against a white background that is part of a larger graphic element on the right side of the slide.

**Magellan**  
HEALTHCARE.

# Agenda

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- » Introducing the Combined BH Assessment
- » Using the Combined BH Assessment
- » Introduction to Federal reporting
- » Provider responsibilities in Federal reporting

## Current State:

- Federal data collection is focused solely on clients receiving SAMHSA funded services
- Multiple assessments depending upon member need and provider type

## Future State:

- Federal data collection on *all clients receiving services provided by treatment facilities and programs operating with public funds (state/federal funding i.e., Medicaid, SAMHSA, etc.)*.
- Unified approach to behavioral health, including co-occurring members and whole person care
- Co-occurring assessment with embedded federal data collection

# Is the Combined BH Assessment required?

- » IBHP providers **are not required** to use the FULL Combined BH Assessment as their clinical assessment.
- » Providers **are required** to complete the Federal reporting data elements.

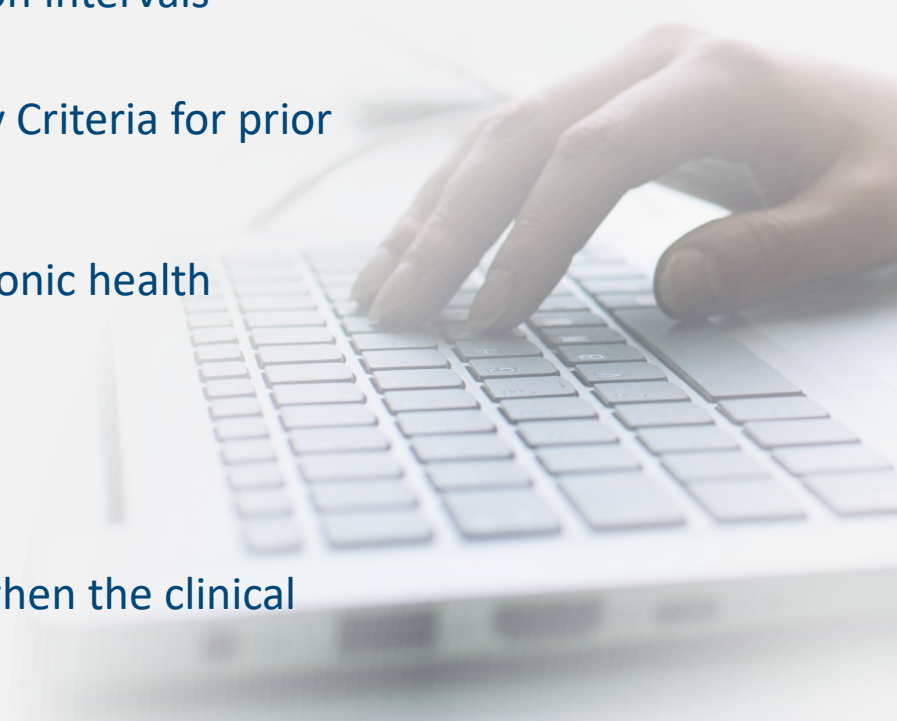


# Designed with provider needs in mind



## Advantages of using the clinical assessment in Magellan's platform:

- 1 Available in Magellan's assessment system (accessed via Availity Essentials) and can be updated easily
- 2 Efficient tool for timely data collection and updates at the required collection intervals
- 3 Providers will not need to upload assessments to support Medical Necessity Criteria for prior authorizations for services
- 4 Assessments can be downloaded as a PDF and included in a paper or electronic health record
- 5 Assessments in Magellan's portal can be shared with other providers
- 6 Includes many dropdowns and check lists, which allow for data collection when the clinical portions of the assessment are used



# Key terms and definitions



## Federal reporting

Industry-standard submission of data for national collection.

## Treatment episode data set (TEDS)

Treatment Episode Data Set or TEDS is The Substance Abuse and Mental Health Services Administration (SAMHSA) reporting requirement for collecting episodic data for individuals undergoing substance use or Mental Health treatment provided by treatment facilities and programs operating with public funds (state/federal funding i.e. Medicaid, SAMHSA funding).

## Treatment episode

A consumer's participation in treatment from beginning to end.

## Provider

A location/facility (this is important because the TEDS ID for reporting is at the facility/location level, not at the agency/HIPAA covered entity level).

# Federal data collection

Providers are required to complete assessments at the following intervals throughout treatment:



At admission to services (SUD) or first service (MH)



At any change in level of care or service level



Mental health members with no change in service level require an annual update



For both MH and SUD members, a discharge from services

Providers must ensure that an appropriate assessment is conducted for all members who receive federal funds for their mental health or SUD treatment

# Assessment details



## Co-occurring assessment with skip logic

- ASAM Criteria included
- Multiple areas with radio buttons and dropdowns
- Skip logic:
  - Condition based
  - Type based (Admission versus Update)

## Built into Magellan's provider platform

- Share with other providers with member consent
- Updatable from version to version
- Automatically available to Magellan's UM team to support medical necessity
- PDF export

## What it was designed to do

- Provide all federally required data
- Provide data points for global clinical evaluation, program enhancements and new service needs over time

## Assessment points in time

Admission

Transition to a new level of care service  
or change in treatment setting

MH annual update

Final discharge



# Substance use disorder (SUD)



## Substance use disorder

Admission through discharge, with reportable data required at every change in American Society of Addiction Medicine (ASAM) level of care.

### Federally required points of data collection:

#### » Admission

First service provision (not the assessment).

#### » Transfer

When a provider moves a member to a different level of care (e.g., ASAM: IOP to OP) within a facility/location, or to the same level of care at a different facility/location a transfer process is conducted.

#### » Discharge

A substance use treatment episode should be assumed to have ended if the client has not received a treatment service in 3 days in the case of inpatient or residential treatment, or 30 days in the case of outpatient treatment.

# Mental health



## Federally required points of data collection:

### » Admission

Considered the first service and may be a screening, or a stay at a crisis stabilization unit (CSU). It can also be an assessment for clinical services, which may include an assessment that does not result in a recommendation for continued services.

### » Transfer

Involves a change for the same member from one of the following service levels to another: state hospital; other psychiatric hospital; state/federally funded community-based service; residential treatment center; institutions under the justice system.

### » Annual update

Used for individuals who remain in the same service level for a year. This allows SAMHSA to have certain outcomes collected for MH members who are very likely in services year after year.

### » Discharge

Entails a provider ending service with a member. The member may be receiving services at a different provider or a different facility within the same agency.



## Mental health

First delivered service through discharge, with reportable data required at every change in service level as well as at every annual date since beginning of treatment for those who remain in the same service level for more than one year.

# State opioid response (SOR) grant

## SOR grant recipients must complete surveys at three intervals:

1. Intake assessment
2. Follow up
3. Discharge

## Provider responsibilities for SOR funding:

- Inform Magellan the day services begin
- Keep Magellan informed of any changes
- Participate in the assessments as needed by Magellan
- Notify Magellan upon discharge of a member



Magellan is responsible for gathering the assessment information from members and providers for SOR

# Completing the Combined BH Assessment



# How to submit the Combined BH Assessment

## Option 1

Magellan outcomes and assessment system (accessed via Availity Essentials)



## Option 2

Provider upload

# Submission steps



# Magellan's Outcomes and Assessments System



# What is the outcomes and assessments system?





# Magellan utilization



# Accessing assessments

Accessed directly via Availity Essentials

The screenshot displays the Availity Essentials user interface. At the top, the navigation bar includes the Availity logo, 'essentials', and menu items for Home, Notifications, and My Favorites. Below this, a secondary navigation bar contains 'Patient Registration', 'Claims & Payments', 'Clinical', 'My Providers', 'Payer Spaces', and 'More'. An orange arrow points from the 'Payer Spaces' menu item to a callout box on the right. The callout box, titled 'Assessments' with a heart icon, contains the text: 'Manage federal data, assessments and YES member care plans'. In the main content area, there is a 'Notification Center' section with the message 'You have no notifications'. Below that is the 'My Top Applications' section, which features three application tiles: 'CE Claims & Encounters', 'Assessments' (highlighted with a yellow border), and 'Magellan HEALTHCARE Idaho' (also highlighted with a yellow border). The 'Assessments' tile includes the Magellan HEALTHCARE logo and the word 'Idaho'.



## Accessed directly via Availity Essentials

Home > Magellan of Idaho > Magellan Assessments

### Magellan Assessments

Select an Organization

Magellan Healthcare (Tax ID: 123456782) x | v

**1** → Select a Provider

Select... v

This field is required.

You are about to be re-directed to a third-party site away from Availity's secure site, which may require a separate log-in. Availity provides the link to this site for your convenience and reference only. Availity cannot control such sites, does not necessarily endorse and is not responsible for their content, products, or services. You will remain logged in to Availity.

Cancel Submit

**2** →

# Whom can I contact for help?

## Magellan Customer Service

Magellan Customer Service will address questions related to:

- Magellan's data
- Eligibility inquiries
- Claim adjustments
- Copayment discrepancies

Magellan can **NOT** answer questions regarding Availity Essentials outages. You can access Help & Training > View Network Outages for details.

Magellan Provider Support: **1-855-202-0983**

## Availity Customer Service (ACS)

ACS will **ONLY** address calls related to the following:

- Availity Essentials registration
- Adding providers to your organization
- Login information
- Error messages on the Availity Essentials screen

ACS does **NOT** have access to Magellan data. They cannot verify eligibility, check claims status, etc. Contact Magellan to address those types of questions.

Availity Customer Service: **1-800-282-4548**

# Tips for Submitting the Combined BH Assessment





# Beginning an assessment



**Magellan HEALTHCARE.**

- Dashboard
- Individuals
- Assessment Templates
- Insights
- Settings

**P-CIS** |   English(Mag)   **Laura Bartram**  
Example Position Title

[Dashboard](#) > [Search Results](#) > [Back](#)

### Users and Individuals

Name	Email	Type
<a href="#">Tim Burton</a>		Person

Total: 1

[Advanced search](#)

# Beginning an assessment



The screenshot displays the Magellan Healthcare P-CIS interface. On the left is a navigation sidebar with the Magellan Healthcare logo and menu items: Dashboard, Individuals (highlighted with an orange box), Assessment Templates, Insights, and Settings. The main content area shows the user profile for Tim Burton, with a breadcrumb trail: Dashboard > Notifications > Tim Burton. The profile page has a top navigation bar with tabs: Profile (highlighted with an orange box), Assessment Templates, Notifications, and Reports. Below this is a 'Contact Info' section with a dropdown arrow. The fields are as follows:

Field	Value
First Name	Tim
Middle Name	
Last Name	Burton
Suffix	
Address 1	
Address 2	
Country	United States of America
City	
State/Province/Region	
Zip/Postal Code	
Phone 1	
Phone 2	
Texting Permitted	<input type="checkbox"/>
Email	
Email Permitted	<input type="checkbox"/>

Below the Contact Info section is a 'Personal Info' section with a dropdown arrow. The visible fields are:

Field	Value
Date Of Birth	Jun 14, 2001
Identified Gender	Male
Sex	

At the bottom right of the profile page are two buttons: 'Edit Individual' (orange) and 'Cancel' (grey).

# Beginning an assessment



**Magellan HEALTHCARE.**

P-CIS | Search | English(Mag) | Laura Bartram | Example Position Title

Dashboard > Notifications > Tim Burton

**Tim Burton**  
DOB: Jun 14, 2001

Profile | **Assessment Templates** | Notifications | Reports

	ID ^	Instrument ^	Assessment Template Name ^	Reminder Schedule ^	Alert Schedule ^	End Date ^
<input type="radio"/>	20	DAS	DAST	Annual	Triggering Event	
<input type="radio"/>	21	CAN	Idaho CANS 3.0	Every 90 days		
<input type="radio"/>	22	SDO	Social Determinants of Health (SDOH)	Test Schedule		
<input type="radio"/>	23	BAR	Brief Assessment of Recovery Capital (BARC-10)			
<input checked="" type="radio"/>	106	MHC	Combined BH Assessment			

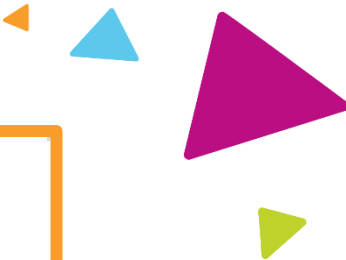


# Beginning an assessment



The screenshot displays the Magellan Healthcare P-CIS interface. On the left is a sidebar with navigation options: Dashboard, Individuals (selected), Assessment Templates, Insights, and Settings. The main content area shows a table with one row selected out of five total. The table has columns for Status, Data Source, Days in Care, Time Period, Date, and Individual Score. An 'ADD' button is highlighted in an orange box next to the 'Assessment Details' header. Above the table are filter dropdowns for 'Collaboration' (set to 'Lifetime') and 'Data Source'. Below the table are toggle switches for '+/- Categories', '+/- Items', and 'Focused View'. At the bottom, there are expandable sections for 'Assessor Information', 'Assessment Profile Information', 'Risk Assessment', and 'General Clinical Information'.

# Assessment options



## Add New Assessment

Date <sup>*</sup> 5/6/2024	Data Source <sup>*</sup> Communimet...	Reason <sup>*</sup> Initial
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Notes

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//

Cancel

Start Blank

Copy Previous

Invite To Complete

# Combined assessment overview

What's included?

- Assessor information
- Member demographics
- Risk assessment
- General clinical information
- Client treatment history
- Current symptoms assessment
- Substance use history
- ASAM dimensions
- Functional assessment
- Mental status exam
- Diagnosis
- Recommendations
- Discharge

# Assessment type



- Individuals
- Assessment Templates
- Insights
- Settings

Assessor Information:

- Type:

Type

- 1() = TEDS Admission Data Only (0)
- 2() = Full Clinical Assessment - Admission (0)
- 3() = TEDS Transfer (0)
- 4() = TEDS Annual Update (0)
- 5() = Full Clinical Assessment - Transfer/Update (0)
- 6() = TEDS Discharge Only (0)
- 7() = Full Clinical Assessment - Discharge (0)

+ Date of Admission:

+ Assessment Date (date of face to face):

+ Beginning Time:

+ Ending Time:

+ Member Funding:

# Navigating the fields



**Magellan HEALTHCARE**

P-CIS

Search  English(Mag) Lea Bush Super Admin

- Dashboard
- Individuals**
- Assessment Templates
- Insights
- Settings
- Switch Agency

+ Risk of harm to self:	-	-
+ Risk of harm to others:	-	-
+ Client safety and other risk factors:	-	-

**General Clinical Information** 0.00 0.00 100%

+ Presenting problem (in client's own words):		
+ Strengths:		
+ Marital status: *	01	-
+ Living situation:	01	-
- # of days in stable housing in the last 90 days: *	45	-

Days in housing

45

- Highest level of education completed: *	00	-
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Education level

- 00() = Less than one grade completed or no schooling (0)
- 72() = Nursery school/pre-school (0)
- 73() = Kindergarten (0)
- 74() = Self-contained special education class (0)
- 01() = Grade 1 (0)

Delete Cancel Save

# Skip logic



**Magellan HEALTHCARE.**

- Dashboard
- Individuals**
- Assessment Templates
- Insights
- Settings
- Switch Agency

Chat icon

P-CIS

970 - Unknown (0)

Gender: 2

Gender

1() = Male (0)

2() = Female (0)

7() = Unknown (0)

Pregnant at admission? \* 02

Pregnant

01() = Yes (0)

02() = No (0)

07() = Unknown (0)

Veteran Status: \* 02

Who referred you for treatment? \* 01

Referral

01(96) = Individual (0)

02(96) = Alcohol/Drug use care provider (0)

03(96) = Other health care provider (0)

04(96) = School (Educational) (0)

Delete Cancel Save

Magellan HEALTHCARE.

Dashboard

**Individuals**

Assessment Templates

Insights

Settings

Switch Agency

P-CIS

970 - Unknown (0)

Gender: 1

Gender

1() = Male (0)

2() = Female (0)

7() = Unknown (0)

Pregnant at admission? \* -

Pregnant

01() = Yes (0)

02() = No (0)

07() = Unknown (0)

Veteran Status: \* 02

Who referred you for treatment? \* 01

Referral

01(96) = Individual (0)

02(96) = Alcohol/Drug use care provider (0)

03(96) = Other health care provider (0)

04(96) = School (Educational) (0)

Delete Cancel Save

# Adding/deleting a group



Psychosocial

Dgn() = Select a diagnosis (0)

— Psychosocial: Group 1

Code

Principal

— Psychosocial: Group 2

Code

Principal

[— Remove Psychosocial: Group](#)  
[Add Psychosocial: Group](#)

# Complete all fields

P-CIS | MGL Testing

Assessor Information: 0.00

Type: 1

Type

- 1() = TEDS Admission Data Only (0)
- 2() = Full Clinical Assessment - Admission (0)
- 3() = TEDS Transfer (0)
- 4() = TEDS Annual Update (0)
- 5() = Full Clinical Assessment - Transfer/Update (0)
- 6() = TEDS Discharge Only (0)
- 7() = Full Clinical Assessment - Discharge (0)

+ Date of Admission: \*

+ Beginning Time:

+ Ending Time:

+ Member Funding: \*

+ Facility: \*

Assessment Profile Information 0.00

+ Health Insurance: \*

Status	In Progress	In Progress	In Progress	In Progress
Data Source	Willy Wo...	Communi...	Wednesd...	Communi...
Days In Care	0	4	32	32
Time Period	Month 1	Month 1	Month 2	Month 2
Date	05/06/2024	05/10/2024	06/07/2024	06/07/2024
Individual Score	0.00	0.00	0.00	0.00

Assessor Information: 0.00 0.00 0.00 0.00

+ Type: 1

+ Date of Admission: 05/10/2024 6/2/2024

+ Beginning Time:

+ Ending Time:

+ Member Funding:

+ Facility:

Assessment Profile Information 0.00 0.00 0.00 0.00

+ Health Insurance:

+ Hispanic or Latino Origin:

+ Gender:

+ Pregnant at admission?

Delete Cancel Save

Submit & Approve

Save & Close

Save & Continue

Delete Cancel

Please answer all the questions.

Once assessment is submitted it **CANNOT** be edited unless it is returned by your supervisor



# Combined BH Assessment demonstration



# Support resources

## Magellan Resources

- Step-by-Step Guides
- Located on the Magellan Healthcare of Idaho website: [MagellanofIdaho.com](http://MagellanofIdaho.com)
- Includes easy to follow steps and screenshots for visual reference
- Call Magellan Healthcare of Idaho:  
**1-855-202-0983**

## System Resources

- Chat function within P-CIS
- Customer Support Portal
  - <https://support.p-cis.com/>
  - P-CIS User Manual
  - How To's
  - Training Videos
  - Learning Tasks

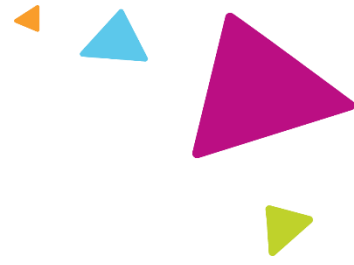




Thank you

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HEALTHCARE®

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