

Idaho Behavioral Health Plan SUPRT Forms – Provider FAQs

Introduction

The Substance Abuse and Mental Health Services (SAMHSA) Unified Performance Reporting Tool (SUPRT) is the new system for collecting information about how grant-funded programs support recovery. It replaces the old Government Performance and Results Act (GPRA) form and includes two parts: SUPRT-A, completed by providers, and SUPRT-C, completed by clients or caregivers.

This FAQ helps providers understand when and how to complete each form, what data to report, and how to handle common situations during the reporting process.

Questions?

If you have further questions related to the SUPRT forms, please contact Magellan at:

MagellanSUPRTForms@MagellanHealth.com

FAQs

Q. What is the SUPRT form?

A. The SUPRT form (Unified Performance Reporting Tool) is the new federal survey that is replacing the old GPRA form. It helps SAMHSA understand how grant-funded services are helping people in their recovery journey. SUPRT is only a requirement for SOR funded clients.

Q. Who fills out the SUPRT form?

A. There are two distinct forms:

- **SUPRT-A:** Completed by program staff and providers. This form captures information already in the client record (like services received, screenings, diagnoses, etc.).
- **SUPRT-C:** Completed directly by the client or caregiver (with consent). This part focuses on the client's perspective, things like housing, employment, recovery, and quality of life.

Q. What are the required data collection points for providers?

A. Providers will complete SUPRT-A at:

- At the start of services (**Baseline**)
- At 6 months (**Reassessment**)
- Once a year if they are still in care (**Annual**)
- When they end treatment (**Closeout**)

Q. When do clients complete the SUPRT-C form?

A. Clients are asked to complete the form at key points during their care:

- At the start of services (**Baseline**)
- At 6 months (**Reassessment**)
- Once a year if they are still in care (**Annual, Adults only**)

Not every client will have all of these — it depends on how long they stay in the program. During the manual entry process, providers are expected to send all SUPRT-C forms to Magellan along with the SUPRT-A forms

Q. Why are SUPRT forms being collected manually right now?

A. Magellan is temporarily collecting SUPRT-A and SUPRT-C forms manually while the SUPRT assessments are being built and configured in the P-CIS system. During this interim period, providers are required to complete SUPRT forms using the approved PDF versions and submit them to Magellan for processing.

During the manual collection period, Magellan will be responsible for entering all required SUPRT-A and SUPRT-C data into SAMHSA's data collection system once they have been completed by the providers and/or clients.

This temporary process ensures required federal reporting continues while the permanent electronic workflow is finalized.

Q. Where should providers submit SUPRT forms during the manual collection period?

A. During the temporary manual SUPRT collection period, providers must submit completed SUPRT forms by secure email to: MagellanSUPRTForms@MagellanHealth.com.

SUPRT forms should NOT be faxed, mailed, or uploaded to other systems unless specifically directed by Magellan. This centralized inbox allows Magellan to track, review, and enter SUPRT data into SAMHSA's data collection system in a timely and compliant manner.

Q. How long will the manual SUPRT process be in place?

A. The manual SUPRT collection process is temporary and will remain in place until the SUPRT assessments are fully built, tested, and operational within the P-CIS system. While an exact end date is not yet available, Magellan anticipates the manual process will be in place for 3-4 months.

Providers will receive advance communication from Magellan prior to any transition away from the manual process.

Q. What if a client refuses to complete their part?

A. That's okay. Participation in the client form (SUPRT-C) is voluntary. If a client declines, staff will still complete the staff form (SUPRT-A) using information already available in the record.

Please note that SUPRT-C's Record Management section must always be completed by grantee staff at each assessment point, even if SUPRT-C is declined.

Q. Will this affect services?

A. No. Completing (or choosing not to complete) the client form (SUPRT-C) does **not** affect a client's eligibility for services or the care they receive. While the client's services will not be affected if they decide not to fill out the SUPRT-C form, providers are still required to complete the SUPRT-A form. The information is only used to improve programs and services nationwide.

Q. Do we have to collect information on every person our program serves?

A. SUPRT-A is required for all clients receiving services under the State Opioid Response (SOR) grant. A *client* is defined as a person who is actively receiving treatment through a grant funded program. An *episode of care* begins when the client begins to receive services under the grant, as defined by the program, and ends when the client is closed out and no longer receiving services through the provider's project.

Q. A client returned after completing their closeout, can they re-enroll in services?

A. Yes, a client can re-enroll in services and start a new episode of care. For each episode of care, a new baseline is conducted. The client then has new reassessment and annual assessment due dates. The same client identification number can be used in this case.

Q. If a client refused to complete SUPRT-C, do I have to complete SUPRT-A?

A. Yes, providers must complete SUPRT-A for every client for each of the assessment types even if the client refused to complete SUPRT-C.

Q. If a client completed SUPRT-C, do I have to complete SUPRT-A?

A. Providers are required to complete SUPRT-A for each of the required assessments, even if a client completes SUPRT-C. The only exception is SUPRT-A Section F. The demographics section at baseline is not completed if a client or caregiver initially consented to completing the SUPRT-C for their baseline assessment and then declined, even if they only answered one question.

Q. Do we have to complete a reassessment and annual assessment for each client?

A. Reassessment and annual assessments are required for each client who has received a baseline assessment and has not received a closeout assessment.

Q. What is an assessment window?

A. An *assessment window* is the time allotted for completing the SUPRT-A assessment. The assessment window for each assessment opens 30 days before the assessment's due date and closes 30 days after the due date. This applies to the baseline, 6-month reassessment, and annual assessment. (See table on page 4).

Assessment	Completion Window	Example Date	Example Assessment Completion Window ¹	
			Start	End
SUPRT-A Baseline	Within 30 days of intake	3/3/2025		
6-month reassessment	Due 180 days from baseline assessment Completed +/-30 days from due date	8/30/2025	7/31/2025	9/29/2025
SUPRT-A/C² Annual	Due every 12-month anniversary of the baseline assessment Completed +/-30 days from due date	3/3/2026	2/1/2026	4/2/2026
Close Out	Due w/in 30 days of end of episode of care	5/1/2026	5/1/2026	5/31/2026

¹ Excludes programs designated by CSAT as homeless programs, which have different completion ranges

² Note that only adults are required to complete a SUPRT-C annual assessment

Q. The typical episode of care for my clients is very short. Many clients may end up with baseline and closeout assessment dates very close to one another. Do I still have to collect both records?

A. Yes, both assessments are required regardless of the amount of time between the two, however, a client's last day of services cannot be the same date as the first day of services.

Q. Where do I find the information reported in SUPRT-A?

A. Information reported in SUPRT-A should be pulled from data recorded in the provider's record keeping system(s). Additionally, if the data were collected for another grant program, providers can use that information if it was collected within 30 days before the client's first date of services received with the current program.

Q. We have collected information about demographics in our EHR. Can we use this to complete the demographics section when the client declined to complete SUPRT-C?

A. Providers can use their client records, including their Electronic Health Record (EHR) systems to complete the demographics section only if the categories match SUPRT-A. Staff should not speculate on or try to map demographic categorizations. If there are no client- or caregiver-reported demographic data, you will select "Not documented in records or not documented in records using this standard."

Q. What should I enter if I do not have access to some of the client's information?

A. When data are not available for providers to report through record keeping system(s), providers should select that the data are "Not documented in records or not documented in records using this standard."

Q. Do the Behavioral Health History, Screening, and Diagnoses sections need to be filled out by a licensed clinician?

A. Data collection and entry for the behavioral health sections can be input by any provider staff. The behavioral health screening should be performed by any appropriately trained provider staff. Only a licensed clinician can make a behavioral health diagnosis, i.e., the ICD-10 code must be assigned by a licensed clinician.

Q. We missed collecting the assessment during the window period, should we still enter in a record?

A. For baseline or closeout assessments that were not done during the window for data collection (+/- 30 days of first services or closeout for most grant programs), a SUPRT-A assessment should be done as soon as possible.

For reassessment and annual assessments that were not done during the window for data collection (+/- 30 days of assessment due date), no assessment record is required. The provider can complete the next assessment due.

Q. When should providers collect SUPRT-C from the client, proxy, or caregiver or parent?

A. For each episode of care:

Baseline assessment: Collected at any time between 30 days before and 30 days after the client first receives services. Note: If the SUPRT-C baseline assessment is completed before the client begins receiving services, provider staff should promptly follow up with the client to schedule a service appointment.

6-month reassessment: A client has a SUPRT-A baseline assessment date of March 3rd. The client is due for a 6-month reassessment on August 30th and can complete it between July 31st and September 29th.

Annual assessment: due 12 months (or 365 days) after the SUPRT-A baseline assessment and annually thereafter, until the client stops receiving grant services. Annual assessments should only be completed by individuals who completed the Adult (18+) version of SUPRT-C at baseline. The annual assessment window opens 30 days before the 12-month anniversary of the SUPRT-A baseline assessment date and closes 30 days after. For example: Annual assessment: A client has a SUPRT-A baseline assessment date of May 3rd. The client is due for an annual assessment on May 3rd of the subsequent year (in a non-leap year) and can complete it between April 3rd and June 2nd.

Q. Should reassessments and annual assessments be collected if clients are no longer active in the program?

A. SUPRT-A closeout assessments should be completed when the client is no longer receiving services through the grant program. SUPRT-C reassessments and annual assessments are no longer required once a closeout is completed.

Q. Which SUPRT-C form should the client, proxy, or caregiver or parent complete?

A. Please follow these guidelines:

- **For clients aged 0-4**, caregivers or parents should complete the Young Child assessment.
- **For clients aged 5-11**, caregivers or parents should complete the Child assessment.
- **For clients aged 12-17**, clients can complete either the Youth assessment independently (or with assistance from a proxy), or a caregiver or parent may complete the Child assessment on their behalf. The choice depends on the client's preference and abilities (e.g., cognitive ability, reading level). The Youth assessment is directed to the client (e.g., What is your race or ethnicity?"")

The Child assessment is directed to the caregiver or parent (e.g., "What is your child's race or ethnicity?").

- **For clients aged 18 years and older**, the adult assessment should be completed either by the client or by a caregiver or proxy if needed.

Clients, proxies, or caregivers/parents should complete the *same* age version of SUPRT-C at each subsequent assessment, regardless of the client's age at the time. For example, a client who completes the Youth baseline assessment should complete the Youth reassessment, even if they have turned 18 years old at reassessment.

Provider staff should ensure that respondents receive the correct form at each assessment. Refer to Table 2 for a list of SUPRT-C forms by client age range, respondent type and assessment point.

Q. Does the same proxy or caregiver or parent have to complete every assessment?

A. No. SUPRT-C should always be about the same client, but a different proxy, caregiver, or parent can complete the assessment across rounds.

Q. Does the SUPRT-C baseline assessment need to be completed at the same time as the SUPRT-A baseline assessment?

A. No, SUPRT-C baseline assessments do not need to be completed at the same time as the SUPRT-A baseline assessment.

Q. Does the Record Management section need to be completed for each assessment?

A. Yes, provider staff must complete the Record Management section for every client at each assessment point, regardless of whether the assessment was completed or declined.

Q. Does a new SUPRT-C baseline assessment need to be offered to clients starting a new episode of care?

A. Yes, provider staff should offer the SUPRT-C baseline assessment for each episode of care, and the version of the form will depend on the client's age at the time of the new episode of care. The client's previous episode of care will become inactive in SPARS but will not be deleted. Providers must use the same Client ID for all episodes of care.

Q. How should providers handle clients who are readmitted for treatment services?

A. Occasionally, a client will return for treatment after stopping services and being discharged. When this happens, providers should initiate a new episode of care by completing another SUPRT-A baseline assessment as in previous episodes of care and offering the client, proxy, or caregiver or parent the SUPRT-C baseline assessment. The client's identification number may remain the same.

Q. If a client declines to participate in a SUPRT-C assessment, should they be offered to complete future assessments?

A. Yes, provider staff should still offer clients, proxies, or caregivers/parents the opportunity to complete future assessments as long as a SUPRT-A baseline was completed. A client's decision to decline a SUPRT-C assessment applies only to that specific assessment (i.e., baseline, reassessment, or annual).

Q. What will change once SUPRT is available in P-CIS?

A. Once SUPRT functionality is live in P-CIS, providers will complete SUPRT-A assessments electronically within the P-CIS system as part of their standard documentation workflows. PDF submission to Magellan will no longer be required at that time.

Magellan will provide advance notice, training materials, and updated instructions to providers before transitioning to the electronic SUPRT process in P-CIS to ensure a smooth implementation.

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