State of California—Health and Human Services Agency
Department of Health Care Services

DATE: January 22, 2020

Behavioral Health Information Notice No: 20-003

TO: California Alliance of Child and Family Services
California Association for Alcohol/Drug Educators
California Association of Alcohol & Drug Program Executives, Inc.
California Association of DUI Treatment Programs
California Consortium of Addiction Programs and Professionals
California Council of Community Behavioral Health Agencies
California Opioid Maintenance Providers
California State Association of Counties
Coalition of Alcohol and Drug Associations
County Behavioral Health Directors
County Behavioral Health Directors Association of California
County Drug & Alcohol Administrators
California Department of Social Services

SUBJECT: Pediatric Symptom Checklist (PSC-35) and the Child and Adolescent Needs and Strengths (CANS-50) Functional Assessment Tool Data Collection Technical Update

PURPOSE: The purpose of this Information Notice is to inform counties submitting Child and Adolescents Needs and Strengths (CANS) data to the Department of Health Care Services (DHCS) that effective April 1, 2020, all PSC-35 and CANS-50 submissions must contain a Client Index Number (CIN). This field will no longer be optional.


Background: Data for use in Quality Improvement Efforts:

MHSUDS IN No.17-052 states the primary purpose for the data obtained from the functional assessment tools is for quality improvement efforts. As recommended by UCLA, the data gathered in the first one to two years will be considered baseline. DHCS has begun the process of monitoring and improving data quality to ensure complete and accurate data for county and state baseline measurements.
Policy:

Implementation and Data Submission Date:

As part of its data quality monitoring and improvement efforts, DHCS is changing the CIN data element from optional to mandatory for all PSC-35 and CANS-50 records. **This update to the data system will become effective 04/20/2020.** We encourage counties to begin submitting CINs prior to this date. After 04/20/2020, all submissions without a mandatory CIN will produce a Fatal Error and the submission will fail.

MHP Costs and Reimbursement:

Mental Health Plans (MHPs) may incur costs for making the technical changes to county data systems which ensure that the CIN is captured and required on all CANS and PSC-35 data submissions. As a reminder, DHCS will reimburse MHPs for data system modifications and the time that staff spend preparing, entering, and submitting this data. Data entry and training costs are considered Utilization Review/Quality Assurance costs which are currently claimed on the MC 1982 C claim form. Costs incurred for system modifications/IT upgrades are considered Administrative costs, which are currently claimed on MC 1982 B claim form.

These Certification Forms can be found at: [http://www.dhcs.ca.gov/services/MH/Pages/MedCCC-Library.aspx](http://www.dhcs.ca.gov/services/MH/Pages/MedCCC-Library.aspx)

Additional cost and audit information may be found in IN No. 17-052.

The required technical format for the CIN can be viewed in the Data Dictionary available on the Behavioral Health Information Systems - MHSA FAST (Functional Assessment Screening Tool) Web Application, under the Help Menu’s System Documentation.

If you have any questions regarding this Information Notice, please contact DHCS at BHData@dhcs.ca.gov.

Sincerely,

Original signed by

Marlies Perez, Chief
Community Services Division
Behavioral Health