



DUGless Portal Updates for October 2020

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Overview of Updates

1. Adding two new fields: CALOCUS Score and CALOCUS Date
2. New edit: Date of Birth will be calculated by Effective Date
3. Adding values to the Referral Source and Substance Use Type

****These updates will go live on 10/01/2020****

Testing will be available starting 8/31/2020

New: CALOCUS Fields

- ❖ Based on the announcement sent in May 2020, AHCCCS will no longer use the CASII instrument and begin the implementation of the CALOCUS instrument, effective ~~October 1, 2020~~. TBD
- ❖ This change will affect the current DUGless Portal.
- ❖ Any remaining CASII data will be allowed to be submitted into the Portal, ~~but the Effective Date must be dated before 10/01/2020~~.
- ❖ For records with an Effective Date on or after 10/01/2020, the CALOCUS ~~data will be required, and CASII data will not be allowed~~.

CALOCUS Date and Score

Rules and Definitions

- ❖ Entry must be ascertained by a clinical professional.
- ❖ If a Member is age 6 or older and less than age 18, a CALOCUS fields are required.
- ❖ If a Member is younger than 6 years OR 18 years old or greater the CALOCUS Date must be blank and CALOCUS Score must be '99' Not Applicable due to Age.
- ❖ Age is based on the Effective Date field in the record

Date Valid Values - YYYYMMDD

Score Valid Values - 07-40 or 99

CALOCUS Score – Valid Values

Score

Level of Care

07-09

Level Zero - Basic Services for Prevention & Maintenance

10-13

Level One - Recovery Maintenance & Health Management

14-16

Level Two - Low Intensity Community Based Services

17-19

Level Three - High Intensity Community Based Services

20-22

Level Four - Medically Monitored Community Based Services

23-27

Level Five - Medically Monitored Residence Based Services

28-40

Level Six - Medically Managed Residence Based Services

OR

99

Not applicable due to age (0-5, 18+)

New CALOCUS Fields – Single Case Record

Reaching across Arizona to provide comprehensive, quality health care for those in need.

Member Supplemental Data [Members Supplemental Data Users History](#)

Single Record Entry
 Multiple Records Entry
 Upload Members Consent

Member Verification : Member Search

AHCCCS ID:
 Member Search
 Date of Birth: (mm/dd/yyyy)

Member's Information

Last Name:
 First Name:
 Gender: F

Referral Source

Provider ID:
 Referral Date:
 Referral Source:

Effective Date:

Outcome Measures

Treatment Participation:
 No. of Arrests:
 Employment Status:

SP Woman DC:
 Social Support of Recovery:
 Military Status:

Other Agency Information

OA ADC or Parole:
 OA ADJC Parole:
 OA AOC Adult Probation:

OA AOC Juvenile Probation:
 OA DES RSA:
 OA School Special Ed:

Primary Substance

SA Primary Type:
 SA Frequency 1:

SA Route 1:
 SA Age First Use 1:

Secondary Substance

SA Secondary Type:
 SA Frequency 2:

SA Route 2:
 SA Age First Use 2:

Tertiary Substance

SA Tertiary Type:
 SA Frequency 3:

SA Route 3:
 SA Age First Use 3:

CASII & CALOCUS Fields

CASII Intensity Level:
 CASII Intensity Date:

CALOCUS Score:
 CALOCUS Date:



New CALOCUS Fields – Multiple Records Entry – File Layout

Field Label	Data Type	Length	Start	End
PROVIDER_ID	varchar	6	1	6
AHCCCS_ID	varchar	9	7	15
DOB (YYYYMMDD)	datetime	8	16	23
REFERRAL_DATE (YYYYMMDD)	datetime	8	24	31
REFERRAL_SOURCE	varchar	2	32	33
EFFECTIVE_DATE (YYYYMMDD)	datetime	8	34	41
TREATMENT_PARTICIPATION	varchar	1	42	42
NUMBER_OF_ARRESTS	tinyint	2	43	44
OA_ADC	varchar	1	45	45
OA_ADJC	varchar	1	46	46
OA_AOC_ADULT	varchar	1	47	47
OA_AOC_JUVENILE	varchar	1	48	48
OA_DES_RSA	varchar	1	49	49
OA_SCHOOL_SPECIAL_ED	varchar	1	50	50
EMPLOYMENT_STATUS	varchar	2	51	52
SP_WOMAN_DC	varchar	1	53	53
SUPPORT_GROUPS_PARTICIPATION	varchar	1	54	54
MILITARY_STATUS	varchar	1	55	55

Field Label	Data Type	Length	Start	End
CASII_INTENSITY_LEVEL	varchar	2	56	57
CASII_INTENSITY_DATE (YYYYMMDD)	datetime	8	58	65
SA_PRIMARY_TYPE	varchar	4	66	69
SA_FREQUENCY_1	varchar	1	70	70
SA_ROUTE_1	varchar	1	71	71
SA_AGE_1	tinyint	2	72	73
SA_SECONDARY_TYPE	varchar	4	74	77
SA_FREQUENCY_2	varchar	1	78	78
SA_ROUTE_2	varchar	1	79	79
SA_AGE_2	tinyint	2	80	81
SA_TERTIARY_TYPE	varchar	4	82	85
SA_FREQUENCY_3	varchar	1	86	86
SA_ROUTE_3	varchar	1	87	87
SA_AGE_3	tinyint	2	88	89
CONSENT_VALID	varchar	1	90	90
CALOCUS_Date (YYYYMMDD)	datetime	8	91	98
CALOCUS_Score	varchar	2	99	100

New CALOCUS Fields – Multiple Records Entry – File Record Sample

- ❖ If entering CASII fields, leave CALOCUS fields blank/spaces
- ❖ If entering CALOCUS fields, leave CASII fields blank/spaces

```
*log.txt - Notepad
File Edit Format View Help
568769 [blue box] 0325202007230320200722V00YXINXYX25Y1AXX [white box] 000116000001160000011600X CALOCUS Score 99
568769 [blue box] 0311202007210120200713V00XYXYNN24X1X00 [white box] 07152020000116000001160000011600X
568769 [blue box] 0311202007210120200713C00XYXYNN24X1X [white box] 000116000001160000011600X 07152020 11
CASII Intensity Date CALOCUS Date
```


New Edit – Effective Date & Date of Birth

- ❖ Date of Birth will be calculated based on the Effective Date entered in the record.
- ❖ The following fields have age edits/rules:
 - AZ Dept of Corrections (ADC)/Parole (OA_ADC)
 - AZ Dept of Juvenile Corrections (OA_ADJC)
 - Adult Probation (OA_AOC_Adult)
 - Juvenile Probation (OA_AOC_Juvenile)
 - School Special Education (OA_SCHOOL_SPECIAL_ED)
 - Employment Status
 - Military Status
 - CASII Date/Score
 - CALOCUS Date/Score

Adding values to Referral Source and Substance Use Type

- ❖ Adding the following two valid values to the Referral Source field:
 - 02 – Alcohol/Drug Abuse Care Provider
 - 06 – Employer/Employee Assistance Program (EAP)
- ❖ Adding and editing the following valid values to the fields SA_Primary, SA_Secondary , and SA_Tertiary Types:
 - 0601 – Non-prescription Methadone
 - 0801 – PCP (Phencyclidine)
 - 1401 – Other Tranquilizers
 - 1501 – Barbiturates
 - 1605 – Other Sedatives (CNS Depressants)
 - 1801 – Over the Counter Medication

Testing

- ❖ Testing will be available to all providers starting 8/31/2020.
- ❖ Please send an email to request a test login and password.
- ❖ If new testing account, please include the following information in your email:
 - Provider Name
 - Name of Person Entering Data
 - AHCCCS Provider ID
 - National Provider Identifier (NPI)
 - Tax Identification Number (TIN)

Questions?

Please email angela.aguayo@azahcccs.gov

Thank You.