Child and Adolescent Level of Care Utilization System (CALOCUS®) FAQs
Updated: 12/1/2021
Q1: What is CALOCUS®?
A1: The CALOCUS is a standardized assessment tool that provides determination of the appropriate intensity of services needed by a child or adolescent and their family, and guides provision of ongoing service planning and treatment outcome monitoring in all clinical and community-based settings.”

Q2: What is the difference between the CALOCUS and the Child and Adolescent Service Intensity (CASII®) Instrument?
A2: The CALOCUS-CASII (CALOCUS) is the result of the merger between the CASII and CALOCUS. This new instrument contains streamlined language and updated descriptions of anchor points, dimensions, and service intensity levels. The CALOCUS-CASII User’s Manual and asynchronous online training are both compatible with the current Deerfield electronic scoring software for the CALOCUS.

Q3: Will the CALOCUS® be available in another language?
A3: At the present time, the CALOCUS is not available in another language.

Q4: Can the CALOCUS® be used to assess infants and toddlers?
A4: There is a different tool that is used to assess infants and toddlers, known as the “Early Childhood Service Intensity Instrument” (ECSI®). AHCCCS currently encourages use of the ECSII under its Targeted Investment program but use of the ECSII is not required at this time.

Q5: Can the CALOCUS be used to assess adults?
A5: There is a different tool that is used to assess adults, known as the Level of Care Utilization System (LOCUS®). AHCCCS does not currently require use of the LOCUS.

Q6: Who can conduct the CALOCUS assessment?
A6: Any other trained provider (PCP, specialty provider, etc.) working with children and adolescents is also able to conduct the CALOCUS assessment and trained providers can coordinate with the health home to share the assessment results for care coordination purposes.

Q7: How long does it take to conduct the CALOCUS assessment?
A7: Approximately 5 to 10 minutes, depending on the experience of the Behavioral Health Professional (BHP) or Behavioral Health Technician (BHT) who is administering the CALOCUS.

Q8: Can the CALOCUS be used in integrated care settings?
A8: Yes. The CALOCUS can be utilized in any care setting, if those administering the CALOCUS have been trained on use of the tool.

Q9: Does the CALOCUS assessment replace the CASII?
A9: Yes, the CALOCUS replaces the Child and Adolescent Service Intensity Instrument. However, the two tools are nearly identical.
Q10: Is the CALOCUS required for Fee-for-Service (FFS) Providers?
A10: The CALOCUS is not required to be used for FFS members including American Indian Health Plan (AIHP), Tribal Regional Behavioral Health Authorities (TRBHA) & Tribal Arizona Long Term Care System (ALTCS) members. Regardless of whether the CALOCUS is used for FFS, coordination with AIHP (Division of Fee for Service Management), TRBHA, and Tribal ALTCS should take place.

Q11: What is the cost of the CALOCUS?
A11: There is no cost to complete the CALOCUS through AHCCCS’ hosted version, or for the associated training through Deerfield. See Q & A Item on page 5, regarding primary training requirements that outline the process for accessing training at no cost.

AHCCCS REQUIREMENTS

Q1: How are AHCCCS and Deerfield working together to implement the CALOCUS?
A1: AHCCCS has contracted with Deerfield Behavioral Health (Deerfield) to license the Child and Adolescent Level of Care Utilization System (CALOCUS) and Level of Care Utilization System (LOCUS) software, as well as access to online training for the use of these tools. The agreement includes the licensing of both CALOCUS/LOCUS online, though AHCCCS is currently only requiring the use of the CALOCUS. This also includes licensing of the integrated Electronic Health Record (EHR) products, with the intent that providers include the assessment in their data feeds into the Health Information Exchange (HIE).

Q2: Which AHCCCS providers are required to conduct the CALOCUS?
A2: AHCCCS providers who deliver behavioral health services to children and adolescents are required to conduct the CALOCUS. While not currently required, any other trained provider (PCP, pediatrician, specialty behavioral or physical health provider, etc.) working with children and adolescents is also able to conduct the CALOCUS assessment and can coordinate with the health home to share the assessment results for care coordination purposes. Integration of CALOCUS into HIE is intended to assist with this coordination.

Q3: By what date will providers be required to utilize the CALOCUS?
A3: Providers are required to start utilizing the CALOCUS by October 1, 2021.

Q4: What is the process for integrating the CALOCUS into the provider’s EHR?
A4: Providers should start the process by speaking with their own EHR vendor about integrating the CALOCUS into their system. The providers and/or vendors can reach out to CALOCUS contact mmonago@journeyhealth.org for technical assistance related to EHR integration. You will be provided with information on EHR integrations. Please note that EHR integrations can take several months or more to deploy depending upon your EHR’s functionality and vendor resource availability.

Q5: What is the level of integration for the CALOCUS?
A5: The intent is for the full integration of the CALOCUS into the Provider EHR. Full integration will allow providers/clinicians to stay within their own EHR resulting in ease of use and allow for clinical data and utilization reports to be generated within their own system.
Q6: Is integration required if a provider already has the forms built into their own EHR system?
A6: The provider must ensure the CALOCUS assessment forms are the most updated versions. Providers must have their versions validated by Deerfield as a component of the integration process.

Q7: What member ID is required?
A7: The AHCCCS ID is required for enrolled members. If the member has not yet been enrolled, a “dummy” number should be used (S00000000). Providers should not use any other member identification number in this field. Deerfield is in the process of setting specific parameters to ensure correct ID number structure is followed. If any ID other than the AHCCCS ID or the dummy number identified in parentheses immediately above, the information will not be accepted.

Q8: Does the CALOCUS Level of Care Score need to be entered into the DUGless?
A8: Providers who are using the AHCCCS-hosted version of the tool, or those who are transmitting from their EHR to HIE are not required to enter the CALOCUS score into the DUGless.

Q9: Why are my files getting denied when attempting to submit the DUGless without CALOCUS scores?
A9: Providers should leave both CASII and CALOCUS fields blank (do not enter zeros or any other digit). Each has two fields (e.g., date/score), so both fields must be left blank. If a formatting error comes up, it will most likely be due to a spacing issue. A point of contact at AHCCCS for CALOCUS or DUGLESS challenges is Angela.Aguayo@azahcccs.gov. It may be helpful to include a screenshot of the issues when the email is sent to Angela.

Q10: What should be done if a parent or guardian does not want their child to participate in the CALOCUS assessment?
A10: Document the refusal in clinical chart.

Q11: Who should providers contact if they have general questions about CALOCUS that are not answered within these FAQs?
A11: Providers should contact their AHCCCS contracted health plan representative, and the Contractor will elevate the question to AHCCCS if necessary.

Q12: Is there a paper form available for the CALOCUS?
A12: No. Providers shall use the online instrument until the EHR integration can be completed. Assessment information will be automatically compiled through Deerfield, so providers will no longer be required to submit the CALOCUS scores separately through the DUGless portal.

AHCCCS TRAINING REQUIREMENTS:

Q1: Is everyone required to take the CALOCUS training through Deerfield, even if they have previously been trained on CASII Administration?
A1: Yes, everyone will be required to complete the CALOCUS training to ensure an initial level of fidelity. For those that have formerly received CASII training but have not yet been able to take the CALOCUS when training, AHCCCS has implemented a deadline of November 30, 2021, for completion of the CALOCUS
training for all individuals who will be administering the CALOCUS, even if they have previously taken CASII training.

Q2: Will there be enough training slots for everyone to complete the training?
A2: The training calendar is available on http://locusonline.com/training.asp.

Q3: If there is not an open training slot, are staff able to share or “double-up” to take the training when only one person has registered for the training?
A3: No – AHCCCS contract requires all those who administer the CALOCUS, to take the training provided through Deerfield. All trainees must individually register and individually attend the training. One person cannot log in and have others participate with them during the training.

Q4: What are the primary training requirements/steps to follow for taking the CALOCUS training?
A4: Upon initial registration with Deerfield, providers will receive a training discount code specific to their organization. This code should not be shared with outside organizations or with contractors. Training can be booked online at http://locusonline.com/training.asp immediately upon receiving the code. The discount code will provide a 100 percent discount on all booked trainings.

Q5: Who should providers contact if they cannot access a training slot or if they completed the training and cannot obtain a certificate of completion?
A5: Providers may send an email to sales@locusonline.

Q6: How do we know if we are conducting the CALOCUS according to fidelity requirements?
A6: AHCCCS is developing fidelity requirements in partnership with Workforce Development Administrators, AACAP and AACP and updates will be forthcoming.

Q7: Is it possible for more than one provider to complete a CALOCUS for any child receiving services?
A7: Duplication of the CALOCUS administration is discussed in AHCCCS Medical Policy Manual (AMP 320-O). Should the CALOCUS be completed by more than one provider (e.g., a provider outside of the health home), the assessments shall be discussed collaboratively to address the clinical implications for treatment needs.

Q8: Does our CALOCUS training certificate follow us if we work for a different provider?
A8: Yes

Q9: Will health plans have access to a roster of information on all provider staff who have successfully completed Deerfield training for CALOCUS?
A9: For the present time, Deerfield can provide a training roster. AHCCCS is working on development of an additional method for verification of completed trainings.