



Iowa Behavioral Health Reporting System Transition Plan

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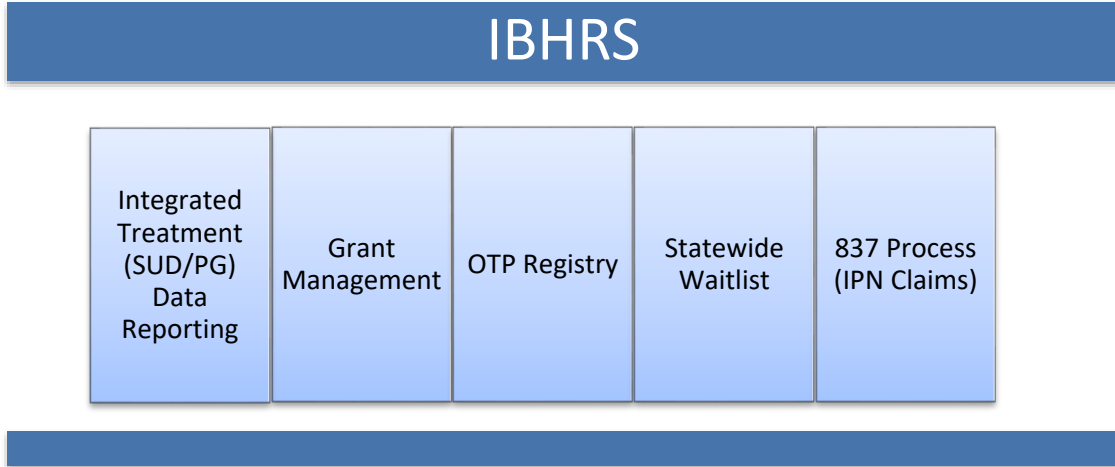
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1 Introduction

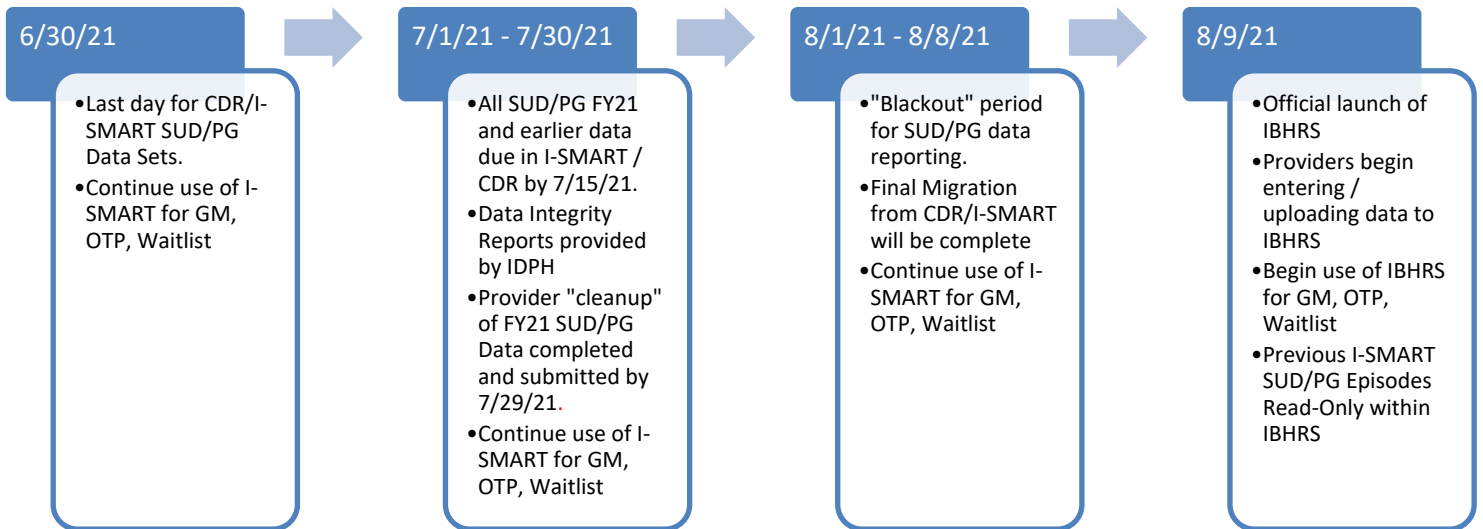
The IBHRS Transition Plan outlines the activities necessary for the transition between I-SMART/CDR and IBHRS. This document outlines the steps to be taken, and the timeline of those steps to ensure a successful transition to submitting required data to IBHRS.

IBHRS contains several modules, as depicted in the diagram below.



2 Transition Timeline

The following figure highlights the four key time frames for successful transition to reporting via IBHRS.



3 Provider and Facility Transition

The following section describes the provider and facility transition between I-SMART/CDR and IBHRS.

3.1.1 Provider Agencies

- IBHRS will contain all Licensed Provider Agencies and only IDPH will be able to modify.

3.1.2 Provider Agency Facilities

- IBHRS Provider Agency Facilities will be based on Licensure information for each Provider Agency. IDPH will manage all Provider Agency Facilities within IBHRS.
- I-SMART Grant Management Episodes
 - ACTIVE GRANTS (SOR1, SOR2, COVID-19) will be migrated to the corresponding IBHRS Provider Agency Facilities.
 - INACTIVE GRANTS (SBIRT, PPW, MAT-PDOA, etc.) will be migrated to IBHRS and will be **read-only** under the old I-SMART Agency Facility names.
- I-SMART Substance Abuse and Problem Gambling Episodes
 - ACTIVE and INACTIVE Substance Abuse and Problem Gambling Episodes will be migrated to IBHRS and will be **read-only** under the old I-SMART Agency Facility names.
 - For ACTIVE Substance Abuse and Problem Gambling Episodes at the time of Go-Live, Provider Agencies reporting via the IBHRS Data Entry Screens, will be able to modify/update and/or add new information via the IBHRS Data Entry Screens.

4 I-SMART, SFTP, and IBHRS Staff Member Accounts

During the transition from I-SMART/CDR to IBHRS, there will be a blackout period of access to the I-SMART Substance Use, Gambling, SBIRT, and Prevention Domains. This will prevent all access to view or edit client episodes of these domains during the 8/1/21 to 8/8/21 period. The I-SMART Grant Management Domain client episodes will not be impacted during this period. The following steps will take place:

- **7/30/21 (12pm CT):** FEI will complete a FINAL load of CDR data from I-SMART and any providers submitting data from their EHRs to the CDR. FEI will disable file processing for the CDR. Additionally, SFTP access for CDR reporting providers will be disabled.
- **7/30/21 (3pm CT):** FEI will lock and dissociate all I-SMART Staff Member Accounts with the exception of active I-SMART Grant Management, OTP Registry, Statewide Waitlist and Prevention staff members as identified by IDPH. FEI will also un-assign all user roles from all dissociated accounts. FEI will also lock all applicable System Accounts at this time.
 - Excluded I-SMART Staff Member Accounts for Grant Management, OTP Registry, Statewide Waitlist and Prevention will have the SUD/PG Domains, as well as the Staff Administrator role, removed from their accounts.
 - Excluded I-SMART Staff Member Accounts may continue to be used until 7am on 8/9/21 at which point the accounts will be locked/dissociated.
- **8/9/21:** IDPH will create a **new user account** in the IBHRS production environment for each **IBHRS Acceptable Use Agreement** received.

The ability to create new user accounts, manage role assignments, and lock / unlock accounts will be managed by IDPH. New accounts will be created using "firstname.lastname." If this naming convention was used for an I-SMART staff

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member account, a digit will be added after the last name to differentiate between the two accounts. After new user accounts are established in IBHRS, agency administrators will have the ability to update existing user accounts within their agency, including:

- Edit staff member profiles
- Reset passwords / TOTP
- Enable / disable accounts

NOTE - SSRS reports will be changed/updated to reflect the changes made in IBHRS.

5 IBHRS Module Specific Information

5.1 Grant Management

As outlined under the **Provider and Facility Transition** section, all Grant Management Episodes for ACTIVE GRANTS (SOR1, SOR2, COVID-19) will be migrated by FEI to the new/updated facilities created by IDPH. Users will have access to ACTIVE GRANT data within the Grant Management Domain, including GPRA, Encounters, etc.

NOTE – There is a truncated blackout period beginning at 7:00am CT on 8/9/21 through the creation of new user accounts as described in Section 4.

5.2 OTP Registry

ACTIVE **OTP Registry Program Enrollments** within I-SMART will be migrated by FEI to the new/updated facilities created by IDPH. CLOSED **OTP Registry Program Enrollments** will be available under the Provider Agency **OTP Registry** facility.

NOTE – There is a truncated blackout period beginning at 7:00am CT on 8/9/21 through the creation of new user accounts as described in Section 4.

5.3 Statewide Waitlist

Statewide Waitlist records that are not Closed or Rejected will be migrated by FEI to the new/updated facilities created by IDPH. Closed and Rejected records will be available under the Provider Agency Facility when the referral was made.

NOTE – There is a truncated blackout period beginning at 7:00am CT on 8/9/21 through the creation of new user accounts as described in Section 4.

5.4 837 Process - IPN Claims

NEW 837 PROCESS for Integrated Provider Network (IPN) CLAIMS! IPN claims will be submitted via IBHRS and requirements included in the **837P Companion Guide** found on the [IBHRS website](#). This will take effect for all services provided on/after 7/1/21. Submission of 837P claims for SFY 2022 services will begin on 8/9/21. Additional guidance will be provided by IDPH on the steps needed to submit the IowaGrants Claim Form.

5.5 Integrated Treatment (SUD/PG) Data XML File Uploads & Data Entry

Provider Agencies will fall into one of the following data reporting categories/types:

- Group 1: Providers Transitioning from I-SMART Reporting to Reporting via IBHRS Data Entry Screens
- Group 2: Providers Transitioning from I-SMART Reporting to Reporting via IBHRS XML Data Uploads
- Group 3: Providers Transitioning from CDR Reporting to Reporting via IBHRS XML Data Uploads
 - Option A. Providers using the same EHR system in reporting to CDR and IBHRS

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- Option B. Providers changing EHR systems between CDR and IBHRS (between July 1, 2021 – August 8, 2021)
- Group 4: Providers Transitioning from CDR Reporting to Reporting via IBHRS Data Entry

5.5.1 Group 1: Providers Transitioning from I-SMART Reporting to Reporting via IBHRS Data Entry Screens

- No need to discharge clients within I-SMART as part of the transition to reporting via IBHRS Data Entry Screens.
- The ACTIVE client episodes will be accessible through the IBHRS Data Entry Screens.
 - Users may search for their Agency Clients, Treatment Episodes, and Service Events using these screens, make updates as necessary, delete records, and add new records via the IBHRS Data Entry Screens.

NOTES

- Any I-SMART user who had “Clinical (Full Access)” will no longer have those same features within IBHRS (e.g., Treatment Plan, Groups, etc.). These users will have **read only** access to the historical information for their SUD/PG episodes within IBHRS. Starting 8/9/21, only the minimum Integrated Treatment (SUD/PG) activity data that occurs on/after 7/1/2021 will be reported via the IBHRS Data Entry Screens.

5.5.2 Group 2: Providers Transitioning from I-SMART Reporting to Reporting via IBHRS XML Data Uploads

- A discharge will need to be completed for every open case/episode in I-SMART (as of the cut-over date of 6/30/21) using the last date of service before the cut-over date as the **Discharge Date** and **Last Contact Date**. Upon completion of the Discharge, close the Episode (Intake screen).
 - **Discharge Reason = Other** (When discharging, use the reason "Other")
- An IBHRS Client dataset for each client discharged from I-SMART will need to be created within the Provider Agency Electronic Health Record (EHR) and reported via XML File Upload on/after 8/9/21.
- An Admission will be created for each client discharged from I-SMART within the Provider Agency EHR and reported via XML File Upload.
 - **Admission Date** = date client returns for service (and an encounter is to be reported for this date) which is on/after 7/1/21
 - **Care Status** = Admission

NOTES

- For new clients that are seen for the first time on/after the cut-over date, the provider will submit IBHRS Client, Treatment Episode and Service Event datasets to IBHRS through the XML File Upload process.
- Any I-SMART user who had “Clinical (Full Access)” will no longer have those same features within IBHRS (e.g., Treatment Plan, Groups, etc.). These users will have **read only** access to the historical information for their SUD/PG episodes within IBHRS. Starting 8/9/21, only the minimum Integrated Treatment (SUD/PG) activity data that occurs on/after 7/1/2021 is to be reported via IBHRS XML Data Uploads.

5.5.3 Group 3: Providers Transitioning from CDR Reporting to Reporting via IBHRS XML Data Uploads

5.5.3.1 Option A. Providers using the same EHR system in reporting to CDR and IBHRS

- IDPH/FEI will complete a data migration of records from the CDR and will use the existing Source IDs (Client_no, Episode_no, Admission_no, Service_no, Discharge_no) that were submitted to the CDR.
- When submitting the IBHRS Integrated Treatment (SUD/PG) datasets to IBHRS for Treatment Episodes that began before 7/1/21, provider EHRs should use the exact same Source IDs submitted to the CDR as the Source Record Identifiers (SRIs) for IBHRS.

- **NOTE** – Upon submission to IBHRS, the system will find the existing records to update or link to. If a provider does not use the existing Source IDs for these records, then IBHRS would create new records (potentially duplicate records).
- For new clients that are seen for the first time on/after 7/1/21, the agency will submit IBHRS Client, Treatment Episode and Service Event datasets to IBHRS through the XML File Upload process.

5.5.3.2 *Option B. Providers changing EHR systems between CDR and IBHRS (between July 1, 2021 – August 8, 2021)*

- For every open case in the CDR (as of the cut-over date of 6/30/21), a Discharge will need to be completed in the source EHR using the last date of service before the cut-over date as the **Discharge Date** and **Last Contact Date**.
 - **Discharge Reason = Other** (When discharging, use the reason "Other")
- An IBHRS Client dataset for each client discharged from the source EHR will need created within the Provider Agency new Electronic Health Record (EHR) and reported via XML File Upload.
- An Admission will be created for each client discharged from CDR within the Provider Agency's new Electronic Health Record (EHR) and reported via XML File Upload.
 - **Admission Date** = date client returns for service (and an encounter is to be entered reported for this date) which is on/after 7/1/21
 - **Care Status** = Admission
- For new clients that are seen for the first time on/after the cut-over date, the agency will submit IBHRS Client, Treatment Episode and Service Event datasets to IBHRS through the XML File Upload process.

5.5.4 **Group 4: Providers Transitioning from CDR Reporting to Reporting via IBHRS Data Entry**

- No need to discharge clients from the source EHR as part of the transition to reporting via IBHRS Data Entry Screens.
- The ACTIVE client episodes will be accessible through the IBHRS Data Entry Screens.
 - Users may search for their Agency Clients, Treatment Episodes, and Service Events using these screens, make updates as necessary, delete records, and add new records via the IBHRS Data Entry Screens.
- For new clients that are seen for the first time on/after the cut-over date, the agency will enter the IBHRS Client, Treatment Episode and Service Event datasets to IBHRS through the IBHRS Data Entry Screens using SRIs which can be tracked back to their EHR (for easier lookup).
- If the Provider Agency continues to use their EHR please **use the EHR SRIs** when entering data within the IBHRS Data Entry Screens.