

Behavioral Health Data System

Behavioral Health Supplemental Transaction Data Guide

Interim Guidance April 26, 2024; *effective May 6, 2024*

Interim Guidance

The following guidance applies to the Behavioral Health Supplemental Data Guide Version 5.8 issued on April 12, 2024.

The Washington Health Care Authority (HCA) communicated changes in Issue #37820 wherein the billing provider “Provider NPI” is added to the body of the Client Demographic, Client Address, and Funding transactions in BHDS. The changes previously communicated and shown below must be implemented by May 06, 2024. The changes listed below will be formally added to the next release of the BHDG Version 5.9.

HCA will not accept the previous version of the transaction codes (20.08, 22.03, 140.02) if the effective date in the transaction is => May 06, 2024.

Updated transactions and rules are listed below.

Client Demographics 020.09

TRANSACTION ID:	020.09	TYPE	LENGTH	ALLOW NULL
ACTION CODE:	“A” ADD “C” CHANGE	VARCHAR	1	N
PRIMARY KEY:	SUBMITTER ID	VARCHAR	20	N
	CLIENT ID	VARCHAR	20	N
	EFFECTIVE DATE	DATE	CCYYMMDD	N
BODY	FIRST NAME	VARCHAR	35	N
	MIDDLE NAME	VARCHAR	25	Y
	LAST NAME	VARCHAR	60	N
	ALTERNATE LAST NAME	VARCHAR	60	Y
	SOCIAL SECURITY NUMBER	VARCHAR	9	Y
	BIRTHDATE	DATE	CCYYMMDD	N
	GENDER	VARCHAR	2	N
	HISPANIC ORIGIN	VARCHAR	3	N
	PRIMARY LANGUAGE	VARCHAR	3	Y
	RACE(S)	VARCHAR	18	N
	SEXUAL ORIENTATION	VARCHAR	2	N
	SOURCE TRACKING ID	VARCHAR	40	Y
	PROVIDER NPI	VARCHAR	10	N

Rules

- The Client demographic transaction is required before the submission of any other transaction to BHDS and must be updated upon change.
- The client demographic transaction is required to be collected and reported at assessment/intake and updated upon change. It is understood that the values in data elements Gender, Hispanic Origin, Primary Language, Race, and Sexual Orientation may change based on what the client reports to each provider agency and the changes will be passed to the BHDS without the provider agency identified.
- The effective date reported on the client demographic transaction must be within 45 days of (before or after) the “from date of service” reported on the completed Assessment/Intake encounter.
- The “Provider NPI” is a required field and must be the same Billing Provider NPI submitted in Loop 2010AA, NM1*85 segment on the corresponding encounter data as it is used to link BHDS and encounter data services.

Client Address 022.04

TRANSACTION ID:	022.04	TYPE	LENGTH	ALLOW NULL
ACTION CODE:	“A” ADD “C” CHANGE “D” DELETE	VARCHAR	1	N
PRIMARY KEY:	SUBMITTER ID	VARCHAR	20	N
	CLIENT ID	VARCHAR	20	N
	EFFECTIVE DATE	DATE	CCYYMMDD	N
BODY	ADDRESS LINE 1	VARCHAR	120	N
	ADDRESS LINE 2	VARCHAR	120	Y
	CITY	VARCHAR	50	Y
	COUNTY	VARCHAR	5	Y
	STATE	VARCHAR	2	N
	ZIP CODE	VARCHAR	10	Y
	FACILITY FLAG	VARCHAR	1	N
	SOURCE TRACKING ID	VARCHAR	40	Y
PROVIDER NPI	VARCHAR	10	N	

Rules

- Client address is required to be collected and reported at assessment/intake and updated upon change.
- The effective date reported on the client address transaction must be within 45 days of (before or after) the “from date of service” reported on the completed Assessment/Intake encounter.
- The “Provider NPI” is a required field and must be the same Billing Provider NPI submitted in Loop 2010AA, NM1*85 segment on the corresponding encounter data as it is used to link BHDS and encounter data services.
- The client’s address of residency is most preferred.
- If a client’s address of residency is not available, then submit the client’s mailing address; if mailing is not available, report address elements available; at a minimum report county, city, and state or zip.

- If a client is homeless or unable to provide an address of residency or mailing address, report what is available, including city, county, and state or zip code. In the case of residence in a tent in the woods, report the closest city, county, and state or zip code (or the closest by proximity), but do not report provider agency as the closest proximity.
- Follow detailed instructions for Address Line 1 outlined in Address Line 1 data element.
- If the client is staying at a facility, submit the facility address with the facility flag as Y.
- If the client’s address of residency is not in U.S., then all body elements are optional (can be left blank), except “STATE” must be reported as “OT” for Other.

Funding 140.03

TRANSACTION ID:	140.03	TYPE	LENGTH	ALLOW NULL
ACTION CODE:	“A” ADD “C” CHANGE “D” DELETE	VARCHAR	1	N
PRIMARY KEY:	SUBMITTER ID	VARCHAR	20	N
	CLIENT ID	VARCHAR	20	N
	EFFECTIVE DATE	DATE	CCYMMDD	N
	BLOCK GRANT FUNDING	VARCHAR	2	N
BODY	TYPE OF FUNDING	VARCHAR	2	N
	SOURCE OF INCOME	VARCHAR	2	N
	SOURCE TRACKING ID	VARCHAR	40	Y
	PROVIDER NPI	VARCHAR	10	N

Rules

- The Funding transaction is required to be collected and reported at assessment/intake, upon change and discharge.
- The effective date Indicates the date the funding elements were collected and is associated with the client’s current completed assessment/intake encounter.
- The effective date reported on the funding transaction must be within 45 days of (before or after) the “from date of service” reported on the completed Assessment/Intake encounter.
- The “Provider NPI” is a required field and must be the same Billing Provider NPI submitted in Loop 2010AA, NM1*85 segment on the corresponding encounter data as it is used to link BHDS and encounter data services.
- If the client’s funding source changes at any point during treatment, this transaction must be updated to reflect that change.
- The funding transaction is collected and reported by the contracted provider agency.