

Chapter 8 - Functional Assessment Rating Scale (FARS)

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I. Document Revision History

Table 1. Document Revision History

Document Revision History				
Version Number	Effective Date	Revision Date	Description	Author
12.0	07/01/2017	05/10/2017	◆ Completed Version 12.0	SAMH Data Unit
12.0	07/01/2017	06/27/2017	◆ Corrected File Layout Order	Sherry Catledge

II. General Policies and Considerations

II.A. Contractors Required to Submit FARS Data

1. Contractors that provide adult mental health services or services to adults who are dually diagnosed are required to submit the Functional Assessment Rating Scale (FARS) data.

II.B. Adding a FARS Record

1. A FARS should be completed for every adult who is to be served in an adult mental health target population group at the beginning of an episode of care, at 6 month intervals thereafter, and at discharge.
2. A demographic record must exist for the same SSN, CONTRACTORID, and PROVIDERID.
3. The FARS manual and certification training may be found at <http://www.myflfamilies.com/service-programs/substance-abuse/SAMHIS>. Use of the manual when completing ratings is necessary to ensure reliable and valid ratings. A copy of the rater's certification must be placed in the rater's employment file. Questions regarding certification should be sent to SAMH@myflfamilies.com.

II.C. Updating FARS Records

1. A FARS record can be updated by submitting a record with the same mandatory key fields. Refer to the mandatory key fields in Table 3 to identify the record to update. If the key fields match the record will be updated, otherwise it will be added.

II.D. Deleting FARS Records

1. To delete a FARS record, a FARS deletion file must be submitted according to the file layout in Table 2.

Table 2. FARS Record Deletion File Layout

Field	Position	Length	Format
SSN	1	9	XXXXXXXXXX
CONTRACTORID	10	10	XX-XXXXXXXX
PURPOSE	20	1	X
EVALDATE	21	8	YYYYMMDD
PROVIDERID	29	10	XX-XXXXXXXX

III. Functional Assessment Rating Data File Layout (FARS)

Table 3. FARS Data File Layout

Field Name	Pos	Type / Size	Edits and Validations
SSN (Mandatory Key)	1	CHAR(9)	<ul style="list-style-type: none"> Format: XXXXXXXXXX Must match SSN in DEMO record.
			Descriptions and Instructions: Social Security Number - See General Policies and Considerations on Adding a FARS Record.
CONTRACTORID (Mandatory Key)	10	CHAR(10)	<ul style="list-style-type: none"> Format: XX-XXXXXXX Contractor must be registered in SAMHIS. Must match CONTRACTORID in DEMO record.
			Descriptions and Instructions: Contractor Identification Number - The contractor id is the Federal Employer Identification Number of the entity which holds a contract with DCF.
PURPOSE (Mandatory Key)	20	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 4.
			Descriptions and Instructions: Purpose Code - Indicate the purpose code of the assessment. Refer to the FARS/CFARS Purpose of Assessment Codes Table in Appendix 5 – Data Code Tables. Note: Changed from DCFPURP to PURPOSE and deleted code 5 as of 07/01/2015. [1] Admission [3] Discharge [2] Six-Month Assessment [4] Administrative Discharge
EVALDATE (Mandatory Key)	21	CHAR (8)	<ul style="list-style-type: none"> Format: YYYYMMDD Must be >= client's date of birth and <= system date. Must be within the begin and end date of the contract in CONTNUM1.
			Descriptions and Instructions: Evaluation Date - The date on which this evaluation is conducted.
PROVIDERID (Mandatory Key)	29	CHAR(10)	<ul style="list-style-type: none"> Format: XX-XXXXXXX Provider must be registered in SAMHIS.
			Descriptions and Instructions: Provider Identification Number - The provider id is the Federal Employer Identification Number of the entity which provides the service to the client.
PROGPURP	39	CHAR(1)	<ul style="list-style-type: none"> Space filled.
			Descriptions and Instructions: Program Evaluation Purpose - No longer used as of July 1, 2015.
MGAFFSCORE	40	CHAR (2)	<ul style="list-style-type: none"> Must be 01 through 99 or space. MGAFFSCORE is used for clients who are receiving medications-only services.
			If a score is entered, the selection of Rating Scales is not required. If a client is receiving other services besides medications, this item may be left blank. Note: Copies of the M-GAF instrument are available from your local DCF SAMH Program Office.
EDULEVEL (Mandatory)	42	CHAR(2)	<ul style="list-style-type: none"> Must be 01 through 07.
			Descriptions and Instructions: Education Level - Indicate the degree level of the staff completing the FARS. Refer to the Staff ID Education Codes Table in Appendix 5 – Data Code Tables.

Field Name	Pos	Type / Size	Edits and Validations									
FMHINUM (Mandatory)	44	CHAR(9)	<ul style="list-style-type: none"> Must be the nine-digit FMHI Certification Number. 									
	Descriptions and Instructions: Florida Mental Health Number - Enter the nine-digit FMHI Certification Number of the person who completed the Problem Severity Ratings. This is the ID number received upon successful completion of the FARS Rater Certification test.											
SAHIST (Mandatory)	53	CHAR(1)	<ul style="list-style-type: none"> Must be 0 or 1. 									
	Descriptions and Instructions: Substance Abuse History Status - Indicate whether or not the client being evaluated has abused drugs or alcohol within the past six months. [0] No [1] Yes											
Enter the appropriate problem severity code for the following 18 scales. (Positions 54 through 71)												
<table border="0"> <tr> <td>[1] No Problem</td> <td>[4] Slight to Moderate Problem</td> <td>[7] Severe Problem</td> </tr> <tr> <td>[2] Less than Slight Problem</td> <td>[5] Moderate Problem</td> <td>[8] Severe to Extreme Problem</td> </tr> <tr> <td>[3] Slight Problem</td> <td>[6] Moderate to Severe Problem</td> <td>[9] Extreme Problem</td> </tr> </table>				[1] No Problem	[4] Slight to Moderate Problem	[7] Severe Problem	[2] Less than Slight Problem	[5] Moderate Problem	[8] Severe to Extreme Problem	[3] Slight Problem	[6] Moderate to Severe Problem	[9] Extreme Problem
[1] No Problem	[4] Slight to Moderate Problem	[7] Severe Problem										
[2] Less than Slight Problem	[5] Moderate Problem	[8] Severe to Extreme Problem										
[3] Slight Problem	[6] Moderate to Severe Problem	[9] Extreme Problem										
NOTE: These scale ratings are not required if PURPOSE = 4 (Administrative Discharge). A space is allowed in this instance.												
DEPRESS	54	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFSCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFSCORE is not a space. 									
	Descriptions and Instructions: Depression Scale.											
ANXIETY	55	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFSCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFSCORE is not a space. 									
	Descriptions and Instructions: Anxiety Scale.											
HYPERAFF	56	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFSCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFSCORE is not a space. 									
	Descriptions and Instructions: Hyper Affective Scale.											
THOUGHT	57	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFSCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFSCORE is not a space. 									
	Descriptions and Instructions: Thought Process Scale.											
COGNITIV	58	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFSCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFSCORE is not a space. 									
	Descriptions and Instructions: Cognitive Performance Scale.											
MEDICAL	59	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFSCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFSCORE is not a space. 									
	Descriptions and Instructions: Medical / Physical Scale.											
TRAUMATI	60	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFSCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFSCORE is not a space. 									
	Descriptions and Instructions: Traumatic Stress Scale.											

Field Name	Pos	Type / Size	Edits and Validations
SUBSTANC	61	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Substance Abuse Scale.
RELATION	62	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Interpersonal Relationships Scale.
FAMRELA	63	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Family Relationships Scale.
FAMENVI	64	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Family Environment Scale.
SOCLEGAL	65	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Socio-Legal Scale.
WORKSCHO	66	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Work / School Scale.
ADLFUNCT	67	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: ADL Functioning Scale.
SELFCARE	68	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Ability to Care for Self Scale.
DANGSELF	69	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Danger to Self Scale.
DANGOTH	70	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.
			Descriptions and Instructions: Danger to Others Scale.
SECURITY	71	CHAR(1)	<ul style="list-style-type: none"> Must be 1 through 9 if MGAFCORE is a space. (Mandatory for purpose 1 through 3) Must be 1 through 9 or space if MGAFCORE is not a space.

Field Name	Pos	Type / Size	Edits and Validations
	Descriptions and Instructions: Security Management Scale.		
PROVINFO	72	CHAR(20)	<ul style="list-style-type: none"> Left justified/space filled.
	Descriptions and Instructions: Provider Information - Contractor use only.		
CONTNUM1 (Mandatory)	92	CHAR (5)	<ul style="list-style-type: none"> Must be a valid and active SAMH contract number that is in the Florida Accountability Contract Tracking System (FACTS).
	Descriptions and Instructions: Contract Number 1 - Contract under which the services were provided.		
CONTNUM2	97	CHAR (5)	<ul style="list-style-type: none"> Format: XXXXX; space filled.
	Descriptions and Instructions: Contract Number 2 - No longer used as of 07/01/2015.		
CONTNUM3	102	CHAR (5)	<ul style="list-style-type: none"> Format: XXXXX; space filled.
	Descriptions and Instructions: Contract Number 3 - No longer used as of 07/01/2015.		
MEDRECPID	107	CHAR (10)	<ul style="list-style-type: none"> Space filled.
	Descriptions and Instructions: Medicaid Recipient Paid - No longer used as of 07/01/2015.		
MEDPROVID	117	CHAR (9)	<ul style="list-style-type: none"> Space filled.
	Descriptions and Instructions: Medicaid Provider Id - No longer used as of 07/01/2015.		
MEDPLANID	126	CHAR (2)	<ul style="list-style-type: none"> Space filled.
	Descriptions and Instructions: Medicaid Plan Id - No longer used as of 07/01/2015.		
CNTYSERV	128	CHAR (2)	<ul style="list-style-type: none"> Must be between 01 and 67 or space filled.
	Descriptions and Instructions: Indicate the county where the FARS was completed. Refer to the Florida County Codes Table in Appendix 5 – Data Code Tables.		