

Crosswalk Management System

Report	REPORT CROSSWALK TO STATE
Filename	adobe pdf
Run by	ASIRROCCO
Report Date	15-JUN-12 02:30

Crosswalk Report

Status : FN

Substance Abuse and Mental Health Services Administration
Center for Behavioral Health Statistics and Quality

Media ID : CIR - CT

Start Date : 01-JAN-93

End Date :

Follow-up :

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

System

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	System Transaction Type	- SDS 1		Transaction Type Added to Each Record (SYS 1)
	A Add	A		Add - at this point Delaware only submits A (Add) records
K 2	State Code	- SDS 2		FIPS Code for DE added to Each Record (SYS 2)
3	Reporting Date	- SDS 3		Month & Year of Submission Added to Each Record (SYS 3)

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Version : 1

K = Key Field

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 1	Provider Identifier	-- M01>		Provider ID # (MDS 1)
	test			
K 2	Client Identifier (Admission)	-- M02>		Client Identifier (admission) (MDS 2)
K 3	Co-Dependent/Collateral	-- M03>		Co-Dependent/Collateral (MDS 3)
	2 No	2		No - DE plugs field with "2", all clients are primary not collaterals
K 4	Client Transaction Type	-- M04>		Source/Agency (MDS 4)
	A Admission	R		Referred
	A Admission	S		Self-referred
	T Transfer/Change in Service	T		Transferred
	A Admission	U		Unknown
K 5	Date of Admission	-- M05>		DADAMH Admission Date (MDS 5)
6	Number of Prior Treatment Episodes	-- M06>		Number of prior treatment episodes (MDS 6 - Not Collected)

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	-- M07>		Referral Agency List (MDS 7)
97	Unknown	AA000		Individual, Employer, Church, or School
01	Individual (includes self-referral))	AA001		Self
01	Individual (includes self-referral))	AA002		Family
01	Individual (includes self-referral))	AA003		Friend/Significant Other
05	Employer/EAP	AA004		Employer/EAP/Union based program
06	Other Community Referral	AA005		Clergy/Minister/Pastor
04	School (Educational)	AA006		School System/Education Agency
06	Other Community Referral	AB000		Self-Help Groups
07	Court/Criminal Justice/DUI/DWI	BA000		Court-Legal
06	Other Community Referral	BB000		Advocacy Groups
07	Court/Criminal Justice/DUI/DWI	CA000		Police Department
03	Other Health Care Provider	DA000		Hospitals, ER, and Other Medical Facilities
03	Other Health Care Provider	EA000		Mental Health Hospital/Psych. Unit
03	Other Health Care Provider	FA000		Community Mental Health Center
03	Other Health Care Provider	GA000		Community Support Program
03	Other Health Care Provider	HA000		Crisis Management
03	Other Health Care Provider	IA000		Private Health Services
03	Other Health Care Provider	JA000		MH/MR Residential

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	-- M07>		Referral Agency List (MDS 7)
06	Other Community Referral	KA000		Shelters, Transitional Housing
03	Other Health Care Provider	LA000		Nursing Homes, Long Term Care Facilities
02	Alcohol/Drug Abuse Provider	MA000		A&D Residential
02	Alcohol/Drug Abuse Provider	NA000		A&D Outpatient Counseling
02	Alcohol/Drug Abuse Provider	OA000		A&D Detoxification & Stabilization
02	Alcohol/Drug Abuse Provider	PA000		A&D Continuous Treatment Teams
02	Alcohol/Drug Abuse Provider	QA000		A&D Intensive Outpatient
02	Alcohol/Drug Abuse Provider	RA000		A&D Outpatient Case Management
02	Alcohol/Drug Abuse Provider	SA000		Outpatient Methadone
06	Other Community Referral	TA000		AIDS Outreach/Coordination
97	Unknown	U		Unknown
06	Other Community Referral	UA000		Prevention And Early Intervention
02	Alcohol/Drug Abuse Provider	VA000		DADAMH Screening and Evaluation Team (SET)
06	Other Community Referral	WA000		Services for Children and Youth
06	Other Community Referral	XA000		Other Public Agencies
06	Other Community Referral	YA000		Other Social Services
97	Unknown	ZZ000		Other

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	-- M07>		Referral Agency List (MDS 7)
01	Individual (includes self-referral))	AA000		Individual, Employer, Church, or School
01	Individual (includes self-referral))	AA001		Self
01	Individual (includes self-referral))	AA002		Family
01	Individual (includes self-referral))	AA003		Friend/Significant Other
05	Employer/EAP	AA004		Employer/EAP/Union based program
06	Other Community Referral	AA005		Clergy/Minister/Pastor
04	School (Educational)	AA006		School System/Education Agency
06	Other Community Referral	AB000		Self-Help Groups
07	Court/Criminal Justice/DUI/DWI	BA000		Court-Legal
06	Other Community Referral	BB000		Advocacy Groups
07	Court/Criminal Justice/DUI/DWI	CA000		Police Department
03	Other Health Care Provider	DA000		Hospitals, ER, and Other Medical Facilities
03	Other Health Care Provider	EA000		Mental Health Hospital/Psych. Unit
03	Other Health Care Provider	FA000		Community Mental Health Center
03	Other Health Care Provider	GA000		Community Support Program
03	Other Health Care Provider	HA000		Crisis Management
03	Other Health Care Provider	JA000		MH/MR Residential
06	Other Community Referral	KA000		Shelters, Transitional Housing

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	-- M07>		Referral Agency List (MDS 7)
03	Other Health Care Provider	LA000		Nursing Homes, Long Term Care Facilities
02	Alcohol/Drug Abuse Provider	MA000		A&D Residential
02	Alcohol/Drug Abuse Provider	NA000		A&D Outpatient Counseling
02	Alcohol/Drug Abuse Provider	OA000		A&D Detoxification & Stabilization
02	Alcohol/Drug Abuse Provider	PA000		A&D Continuous Treatment Teams
02	Alcohol/Drug Abuse Provider	QA000		A&D Intensive Outpatient
02	Alcohol/Drug Abuse Provider	RA000		A&D Outpatient Case Management
02	Alcohol/Drug Abuse Provider	SA000		Outpatient Methadone
06	Other Community Referral	TA000		AIDS Outreach/Coordination
97	Unknown	U		Unknown
06	Other Community Referral	UA000		Prevention And Early Intervention
02	Alcohol/Drug Abuse Provider	VA000		DADAMH Screening and Evaluation Team (SET)
06	Other Community Referral	WA000		Services for Children and Youth
06	Other Community Referral	XA000		Other Public Agencies
06	Other Community Referral	YA000		Other Social Services
97	Unknown	ZZ000		Other

No longer effective as of: 06-30-2001

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Item No	Treatment Episode Data Set	Item	Value	State System Data
8	Date of Birth	-- M08>	Birth Date (MDS 8)	
01010007	Unknown		07/07/2777	Unknown
01010008	Not Collected		08/08/2888	Not collected
MMDDY YYY	Date of birth		mmddyyy	Date of birth
9	Sex	-- M09>	Gender (MDS 9)	
2	Female		F	Female
1	Male		M	Male
7	Unknown		U	Unknown

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Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Race	-- M10>	Race (MDS 10)	
02	American Indian (Other than Alaskan Native)	AA		American Indian
02	American Indian (Other than Alaskan Native)	AP		AA Plus Other Race(s)
04	Black or African American	BL		Black/African American
04	Black or African American	BP		Bl Plus Other Race(s)
05	White	CA		White/Caucasian
05	White	CP		CA Plus Other Race(s)
23	Native Hawaiians or Other Pacific Islanders	HA		Native Hawaiiin/Other Pacific Islander
23	Native Hawaiians or Other Pacific Islanders	HP		HA Plus Other Race(s)
21	Two or More Races	MU		Multi-racial, unspecified
20	Other Single Race	O		Other
13	Asian	PA		Asian or Pacific Islander
13	Asian	PP		PA Plus Other Race(s)
97	Unknown	U		Unknown

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Item No Treatment Episode Data Set

Item

Value

State System Data

10	Race	-- M10>	Race (MDS 10)
02	American Indian (Other than Alaskan Native)	AA	American Indian
04	Black or African American	BL	Black/Africian American
05	White	CA	White/Caucasian
20	Other Single Race	O	Other
03	Asian or Pacific Islander	PA	Asian or Pacific Islander
97	Unknown	U	Unknown
13	Asian		
23	Native Hawaiians or Other Pacific Islanders		

No longer effective as of: 06-30-2001

11 Ethnicity

-- M11>

Ethnicity (MDS 11)

03	Cuban	C	Cuban
02	Mexican	M	Mexican
05	Not of Hispanic Origin	N	Not of Hispanic Origin
04	Other Specific Hispanic	O	Other Hispanic
01	Puerto Rican	P	Puerto Rican
97	Unknown	U	Unknown

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Item No	Treatment Episode Data Set	Item	Value	State System Data
12	Education	-- M12>	Highest Grade Completed (MDS 12)	
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	01-19		Years of school
00	Less Than One Grade Completed	96		Never completed any grade
97	Unknown	97		Unknwon
13	Employment Status	-- M13>	Primary Employment (MDS 13)	
04	Not in Labor Force	D		Disabled/Unable to Work
01	Full Time	F		Full Time (37.5 hours a week or more)
04	Not in Labor Force	H		Homemaker
04	Not in Labor Force	I		Inmate or Resident of an Institution
03	Unemployed	L		Unemployed - Looking for Work
01	Full Time	M		Military Armed Forces, Active Duty (Active Reserves, Reserves)
04	Not in Labor Force	N		Unemployed - Not Looking
97	Unknown	O		Other
02	Part Time	P		Part Time (less than 37.5 hours per week)
04	Not in Labor Force	R		Retired
04	Not in Labor Force	S		Student (if student does not work)
97	Unknown	U		Unknown
04	Not in Labor Force	V		Volunteer

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Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiar-14C)	-- M14>		Substance Type, Primary, Secondary, Tertiary (MDS 14)
02	Alcohol	AL		Alcohol
11	Other Amphetamines	AM		Other Amphetamines
15	Barbiturates	BA		Barbiturates
13	Benzodiazepines	BE		Benzodiazepines
03	Cocaine, Crack	CO		Cocaine
03	Cocaine, Crack	CR		Crack
18	Over-the-Counter	CS		Cough Syrups and Mixtures
09	Other Hallucinogens	HA		Other Hallucinogens
05	Heroin	HE		Heroin
17	Inhalants	IN		Inhalants
09	Other Hallucinogens	LS		LSD
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preperations)	MA		Marijuana/Hashish
06	Non-Prescription Methadone	MD		Non-Prescription Methadone
10	Methamphetamine	ME		Methamphetamine
01	None	N		None
20	Other	O		Other
18	Over-the-Counter	OC		Over-the-Counter Drugs
07	Other Opiates and Synthetics	OP		Other Opiates and Synthetics

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Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	- - M14>		Substance Type, Primary, Secondary, Tertiary (MDS 14)
12	Other Stimulants	OS		Other Stimulants
08	PCP	PC		PCP
16	Other Non-Barbituate Sedatives or Hypnotics	SE		Other Sedatives or Hypnotics
20	Other	ST		Steroids
14	Other Non-Benzodiazapine Tranquilizers	TR		Major Tranquilizers
97	Unknown	U		Unknown

15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiar-15C)	- - M15>		Route of Administration (MDS 15)
03	Inhalation	B		Breathe/Inhale/Snort
04	Injection (IV or intramuscular)	I		Other Injection
01	Oral	M		Mouth (Oral)
97	Unknown	N		None
20	Other	O		Other
02	Smoking	S		Smoke
97	Unknown	U		Unknown
04	Injection (IV or intramuscular)	V		Intravenous

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Item No	Treatment Episode Data Set	Item	Value	State System Data
16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	-- M16>		Frequency of Use (MDS 16)
05	Daily	D		Daily
04	3-6 times per week	F		Frequently (3-6 times per week)
02	1-3 times in past month	I		Infrequent (1-3 times past month)
05	Daily	M		More than Twice Daily
01	No use in the past month	N		No Use in Past Month
03	1-2 times per week	O		Often (1-2 times per week)
97	Unknown	U		Unknown

17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	-- M17>		Age of First Use (MDS 17)
00	Indicates a Newborn with a substance dependency problem	-1		Newborn/addicted at birth
01-95	Indicates The Age at First Use	1-95		1-95
97	Unknown	96		None
97	Unknown	97		Unknown
98	Not Collected	98		Not collected

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	- - M18>	Type of Service (MDS 18)	
Delaware collects by individual provider - has been coded by category to match TEDS				
01	Detoxification - Hospital Inpatient (Detox, 24 hour Service)	*1		All Facilities offering - Detox, 24 hour serv, Hospital Inpatient
02	Detoxification Free-standing Residential (Detox, 24 hour Service)	*2		All Facilities offering - Detox, 24 hour serv, Free Standing Residential
03	Rehabilitation/Residential - Hospital (other than detox)	*3		All Facilities offering - Rehabilitation/Residential Hospital (other than detox)
04	Rehabilitation/Residential - Short-term, (30 days or fewer)	*4		All Facilities offering - Rehabilitation/Residential - short term 30 days or less
05	Rehabilitation/Residential - Long-term, (more than 30 days)	*5		All Facilities offering - Rehabilitation/Residential - long term 30 days or more
06	Ambulatory - Intensive Outpatient	*6		All Facilities offering - Ambulatory Intensive Outpatient
07	Ambulatory - Non-Intensive Outpatient	*7		All Facilities offering - Ambulatory Non-Intensive Outpatient
08	Ambulatory Detoxification	*8		All Facilities offering - Ambulatory Detoxification

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Minimum

Delaware

Item No Treatment Episode Data Set

Item

Value

State System Data

K 18	Type of Services	-- M18>	Type of Service (MDS 18)
02	Detoxification Free-standing Residential (Detox, 24 hour Service)	100022-01	Net-Kirkwood Detox
06	Ambulatory - Intensive Outpatient	100055-03	Kent County Counseling
07	Ambulatory - Non-Intensive Outpatient	100105-01	SODAT Counseling & Treatment
07	Ambulatory - Non-Intensive Outpatient	100139-01	Brandywine Counseling, Inc
06	Ambulatory - Intensive Outpatient	100139-03	Brandywine Counseling
05	Rehabilitation/Residential - Long-term, (more than 30 days)	100295-01	NET-GLASSHOUSE
05	Rehabilitation/Residential - Long-term, (more than 30 days)	100303-01	NET-SENTAC
07	Ambulatory - Non-Intensive Outpatient	100337-01	Open Door, Inc
06	Ambulatory - Intensive Outpatient	100410-01	NET-Continuing Care Unit
07	Ambulatory - Non-Intensive Outpatient	100410-02	NET-Continuum for Recovery
06	Ambulatory - Intensive Outpatient	100576-01	Psychotherapeutic Services Relapse
05	Rehabilitation/Residential - Long-term, (more than 30 days)	100600-01	NET-Long Term Care
06	Ambulatory - Intensive Outpatient	100618-01	NET-FOUNDATIONS (Men)
06	Ambulatory - Intensive Outpatient	100618-02	NET-FOUNDATIONS (Women)
06	Ambulatory - Intensive Outpatient	100618-03	NET-FOUNDATIONS (CTT Program)
05	Rehabilitation/Residential - Long-term, (more than 30 days)	100634-01	Serenity Place
05	Rehabilitation/Residential - Long-term, (more than 30 days)	100725-01	NET-Reflection House
07	Ambulatory - Non-Intensive Outpatient	301083-01	People's Place Counseling Center

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Item No Treatment Episode Data Set

Item

Value

State System Data

K 18	Type of Services	-- M18>	Type of Service (MDS 18)
02	Detoxification Free-standing Residential (Detox, 24 hour Service)	750024-01	Kent/Sussex Detox
05	Rehabilitation/Residential - Long-term, (more than 30 days)	900538-01	Corinthian House
04	Rehabilitation/Residential - Short-term, (30 days or fewer)	900553-01	NET-RCD 28 day residential
06	Ambulatory - Intensive Outpatient	900611-03	Turnabout Counseling Center
No longer effective as of: 12-31-2003			

19	Opioid Replacement Therapy (Planned/ Actual)Was -Use of Methadone Planned/Actual	-- M18>	Type of Service (MDS 18)
No longer effective as of: 12-31-2010			

19	Opioid Replacement Therapy (Planned/ Actual)Was -Use of Methadone Planned/Actual	-- M19>	Opiod replacement therapy (MDS 19)
2	No	N	No
7	Unknown	Null	Unknown
1	Yes	Y	Yes
8	Not Collected	Z	Not collected

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Optional

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Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~ S01>		Detail drug code (SUDS 1,2,3) - Not Collected
2	Detail Drug Code, Secondary	~ S01>		Detail drug code (SUDS 1,2,3) - Not Collected
3	Detail Drug Code, Tertiary	~ S01>		Detail drug code (SUDS 1,2,3) - Not Collected
4	DSM Diagnosis	~ S04>		Axis I diagnosis (SUDS 4)
XXX.XX	DSM/ICD codes	-		Axis I diagnosis > DE uses DSM IV-TR
999.97	Unknown	999.97		Unknown
999.98	Not Collected	999.98		Not Collected
999.98	Not Collected	V71.09		None
5	Psychiatric Problem in Addition to Alcohol or Drug Problem	~ S05>		Alert Information (SUDS 5 - psych)
2	No	2		No Psychiatric Disability Reported
1	Yes	C		Clinician Reported Psychiatric Disability
2	No	N		Self Reported Psychiatric Disability - TO BE ADDED
1	Yes	S		Self Reported Psychiatric Disability
7	Unknown	U		Unknown
1	Yes	Y		Clinician Reported Psychiatric Disability - TO BE ADDED

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Item No	Treatment Episode Data Set	Item	Value	State System Data
6	Pregnant at Time of Admission	~ S06>		Currently Pregnant (SUDS 6)
6	Not Applicable	96		Males (not applicable) - TO BE ADDED
2	No	N		No
7	Unknown	U		Unknown
1	Yes	Y		Yes
7	Veteran Status	~ S07>		Veteran Status (SUDS 7)
1	Yes	AD		Yes (Active duty) - TO BE ADDED
2	No	FM		No (Immediate family member of military or veteran) - TBA
2	No	N		No
2	No	NA		No (None of the above) - TO BE ADDED
7	Unknown	U		Unknown
1	Yes	VP		Yes (Veteran/previous military service) - TO BE ADDED
1	Yes	Y		Yes

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Item No	Treatment Episode Data Set	Item	Value	State System Data
8	Living Arrangements	~ S08>		Living Arrangement (L), Residential Arrangement (R) (SUDS 8)
02	Dependent Living	BH		Boarding House/SRO (R)
02	Dependent Living	CJ		Corrections Facility/Jail (R)
02	Dependent Living	FC		Adult Foster Care (R)
02	Dependent Living	GS		Group Setting/Community Residence - Supervised (R)
03	Independent Living	GU		Group Setting/Community Residence - Unsupervised (R)
02	Dependent Living	I		Other Institution (R)
01	Homeless	N		None - On the Street/In a Shelter/Homeless (R)
02	Dependent Living	NH		Nursing Home/CF or SNF Facilities (R)
97	Unknown	O		Other (R)
02	Dependent Living	PS		Private House or Residence - Supervised (R)
03	Independent Living	PU		Private House or Residence - Unsupervised (R)
97	Unknown	U		Unknown

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Item No	Treatment Episode Data Set	Item	Value	State System Data
9	Source of Income/Support	~ S09>	Primary Source of Household Income (SUDS 9)	
02	Public Assistance	A	AFDC	
04	Disability	D	Private Disability Insurance	
01	Wages/Salary	E	Employment	
20	Other	F	Family/Friends	
02	Public Assistance	G	General Assistance	
20	Other	I	Investments/Savings	
20	Other	IL	Illegal	
21	None	N	None	
20	Other	O	Other	
03	Retirement/Pension	P	Pension/Retirement Income (IRA,KEOGH,SEP,ESOP)	
20	Other	S	Spouse	
04	Disability	SD	SSDI	
02	Public Assistance	SI	SSI	
03	Retirement/Pension	SS	Social Security	
97	Unknown	U	Unknown	
20	Other	UI	Unemployment Insurance	
04	Disability	VD	VA - Disability	
03	Retirement/Pension	VR	VA - Retirement	

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Item No	Treatment Episode Data Set	Item	Value	State System Data
9	Source of Income/Support	~ S09>		Primary Source of Household Income (SUDS 9)
04	Disability	W		Workman's Comp.
10	Health Insurance	~ S10>		Health Insurance (Primary Carrier) (SUDS 10)
04	Medicaid	A		Medicaid
02	Blue Cross/Blue Shield	B		Blue Cross/Blue Shield
20	Other (e.g. TriCare)	C		Champus
04	Medicaid	E		Delaware Managed Medicaid MCO
20	Other (e.g. TriCare)	G		Other Government Funds for Care
06	Health Maintenance Organization (HMO)	H		HMO (service contract)
03	Medicare	M		Medicare
21	None	N		None
20	Other (e.g. TriCare)	O		Other
01	Private Insurance (other than BCBS or HMO)	P		Other Private Commercial Health Insurance
97	Unknown	U		Unknown
20	Other (e.g. TriCare)	V		VA

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10	Health Insurance	~ S10>	Health Insurance (Primary Carrier) (SUDS 10)
04	Medicaid	A	Medicaid
02	Blue Cross/Blue Shield	B	Blue Cross/Blue Shield
20	Other (e.g. TriCare)	C	Champus
20	Other (e.g. TriCare)	G	Other Government Funds for Care
06	Health Maintenance Organization (HMO)	H	HMO (service contract)
03	Medicare	M	Medicare
21	None	N	None
20	Other (e.g. TriCare)	O	Other
01	Private Insurance (other than BCBS or HMO)	P	Other Private Commercial Health Insurance
97	Unknown	U	Unknown
20	Other (e.g. TriCare)	V	VA

No longer effective as of: 06-01-2001

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Item No	Treatment Episode Data Set	Item	Value	State System Data
11	Expected/Actual Primary Source of Payment	~ S11>		Expected Source of Payment (SUDS 11)
04	Medicaid	A		Medicaid
02	Blue Cross/Blue Shield	B		Blue Cross/Blue Shield
05	Other Government Payments	C		TriCare
05	Other Government Payments	D		DSAMH
04	Medicaid	E		Delaware Managed Medicaid MCO
05	Other Government Payments	G		Other Government Sources
07	Other Health Insurance Companies	H		HMO
01	Self-Pay	I		Individual Resources (Patient's or Patient's Family)
03	Medicare	M		Medicare
08	No Charge (Free, Charity, Special Research or Teaching)	N		None, Provider Absorbs Total Cost (Charity, Research, Teaching)
09	Other	O		Other
07	Other Health Insurance Companies	P		Other Private Commercial Health Insurance
05	Other Government Payments	S		SENTAC
97	Unknown	U		Unknown
05	Other Government Payments	V		Veterans Administration
06	Worker's Compensation	W		Worker's Compensation

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Item No	Treatment Episode Data Set	Item	Value	State System Data
11	Expected/Actual Primary Source of Payment	~ S11>		Expected Source of Payment (SUDS 11)
04	Medicaid	A		Medicaid
02	Blue Cross/Blue Shield	B		Blue Cross/Blue Shield
05	Other Government Payments	C		TriCare
05	Other Government Payments	D		DADAMH
05	Other Government Payments	G		Other Government Sources
07	Other Health Insurance Companies	H		HMO
01	Self-Pay	I		Individual Resources (Patient's or Patient's Family)
03	Medicare	M		Medicare
08	No Charge (Free, Charity, Special Research or Teaching)	N		None, Provider Absorbs Total Cost (Charity, Research, Teaching)
09	Other	O		Other
07	Other Health Insurance Companies	P		Other Private Commercial Health Insurance
05	Other Government Payments	S		SENTAC
97	Unknown	U		Unknown
05	Other Government Payments	V		Veterans Administration
06	Worker's Compensation	W		Worker's Compensation
98	Not Collected	Z		Not Collected

No longer effective as of: 06-30-2001

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
12	Detailed Not in Labor Force	~ S12>	Primary employment (SUDS 12)	
04	Disabled	D		Disabled/Unable to work
01	Homemaker	H		Homemaker
05	Inmate of Institution (Prison or Institution - keeps people out of work force)	I		Inmate or resident of an institution
06	Other	N		Unemployed - Not looking
06	Other	O		Other
03	Retired	R		Retired
02	Student	S		Student
97	Unknown	U		Unknown
06	Other	V		Volunteer

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
13	Detailed Criminal Justice Referral Categories	~ S13>		Detail Criminal Justice Record (SUDS 13)
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	BA000		Court-Legal (includes all except specific ones broken out)
01	State/Federal Court	BA002		State Court
01	State/Federal Court	BA003		Federal Court
03	Probation/Parole	BA007		Probation
03	Probation/Parole	BA008		Parole
05	Diversionsary Program (E.G. TASC)	BA013		Diversionsary Program (TASC)
07	DUI/DWI	BA018		DUI/DWI
97	Unknown	U		Unknown

13	Detailed Criminal Justice Referral Categories	~ S13>		Detail Criminal Justice Record (SUDS 13)
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	BA000		Court-Legal (includes all except specific ones broken out)
01	State/Federal Court	BA002		State Court
01	State/Federal Court	BA003		Federal Court
03	Probation/Parole	BA007		Probation
03	Probation/Parole	BA008		Parole
05	Diversionsary Program (E.G. TASC)	BA013		Diversionsary Program (TASC)
07	DUI/DWI	BA018		DUI/DWI
No longer effective as of: 06-30-2001				

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Marital Status	~ S14>		Marital (SUDS 14)
04	Divorced	D		Divorced
02	Now Married (includes those living together as married)	M		Married
01	Never Married	S		Single - Never Married
97	Unknown	U		Unknown
05	Widowed	W		Widowed
03	Separated (legally seperated or otherwise absent becasue of marital discord)	X		Separated
15	Days Waiting to Enter Treatment	~ S15>		Days waiting to enter treatment (SUDS 15) - Not Collected
16	Number of Arrests in the 30 Days Prior to Admission	~ S16>		Number of arrests in 30 days prior to admission (SUDS 16)
00-96	Number of Arrests	00-96		Number of arrests
97	Unknown	97		Unknown
17	Frequency of Attendance at Self-Help Programs in 30 days prior to Admission	~ S17>		Freq attendance at self-help prog (SUDS 17) - Not collected
98	Not Collected	-		Not collected

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	System Transaction at Discharge	~~ D01>		System Transaction at Discharge (DIS 1)
	A Add	A		Add - at this point DE only submits A (Add) records
2	State Code at Discharge	~~ D02>		State code at discharge (DIS 2)
3	Reporting Date at Discharge	~~ D03>		Reporting date at discharge (DIS 3)
4	Provider Identifier at Discharge	~~ D04>		Provider identifier at discharge (DIS 4)
5	Client Identifier at Discharge	~~ D05>		Client identifier at discharge (DIS 5)
6	Co-Dependent/Collateral at Discharge	~~ D06>		Co-Dependent/Collateral at Discharge (DIS 6)
	2 No	2		No- DE plugs field with "2" as all clients are primary, not collaterals

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Type of Service at Discharge	~~ D07>		Type of service (DIS 7)
01	Detoxification, 24-Hour Service, Hospital Inpatient	*1		facilities offering - Detox 24 hr services, hospital inpatient
02	Detoxification, 24-Hour Service, Free Standing Residential	*2		facilities offering - Detox 24 hr services, free standing residential
03	Rehabilitation/Residential - Hospital	*3		facilities offering - Rehab/Residential hospital (other than Detox)
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)	*4		facilities offering - Rehab/Residential - short term 30 days or less
05	Rehabilitation/Residential - Long Term (More than 30 Days)	*5		facilities offering - Rehab/Residential - long term 30 days or more
06	Ambulatory - Intensive -Outpatient	*6		facilities offering - Ambulatory Intensive outpatient
07	Ambulatory -Non Intensive -Outpatient	*7		facilities offering - Ambulatory Non-Intensive outpatient
08	Ambulatory Detoxification	*8		facilities offering - Ambulatory Detoxification
8	Date of Last Contact	~~ D08>		Date of last contact (DIS 8)
9	Date of Discharge	~~ D09>		Date of discharge (DIS 9)

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Reason for Discharge, Transfer, or Discontinuance of Treatment	~~ D10>		Reason for Discharge (DIS 10)
07	Other	A		Administrative discontinuation / Lost contact
05	Incarcerated	C		Correction / Jail
06	Death	D		Consumer died
07	Other	E		Eligibility lapsed
03	Ternimated by Facility	F		Failed to meet criteria
01	Treatment Completed	G		Program completed here - all goals
07	Other	O		Other
02	Left Against Professional Advice	R		Refused service
01	Treatment Completed	S		Program completed here - some goals
04	Transferred to Another Substance Abuse Treatment Program or Facility	T		Treatment continued in other program
08	Unknown	U		Unknown

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	~~ D21>		Substance Problem at Discharge (DIS 21)
02	Alcohol	AL		Alcohol
11	Other Amphetamines	AM		Other Amphetamines
15	Barbiturates	BA		Barbiturates
13	Benzodiazepines	BE		Benzodiazepines
03	Cocaine/Crack	CO		Cocaine
03	Cocaine/Crack	CR		Crack
18	Over-The-Counter	CS		Cough Syrups and Mixtures
09	Other Hallucinogens	HA		Other Hallucinogens
05	Heroin	HE		Heroin
17	Inhalants	IN		Inhalants
09	Other Hallucinogens	LS		LSD
04	Marijuana/Hashish	MA		Marijuana/Hashish
06	Non-Prescription Methadone	MD		Non-Prescription Methadone
10	Methamphetamine	ME		Methamphetamines
01	None	N		None
20	Other	O		Other
18	Over-The-Counter	OC		Over-the-counter drugs
07	Other Opiates and Synthetics	OP		Other Opiates and Synthetics

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	~~ D21>		Substance Problem at Discharge (DIS 21)
12	Other Stimulants	OS		Other Stimulants
08	PCP	PC		PCP
16	Other Non- Barbiturate Sedatives or Hypnotics	SE		Other Sedatives or Hypnotics
20	Other	ST		Steroids
14	Other Non-Benzodiazepine Tranquilizer	TR		Major Tranquilizers
97	Unknown	U		Unknown
22	Frequency of Use at Discharge (Primary, Secondary, Tertiary)	~~ D22>		Frequency of Use at Discharge (DIS 22)
05	Daily	D		Daily
04	3-6 Times in the Past Week	F		Frequently (3-6 times per week)
02	1-3 Times in the Past Month	I		Infrequent (1-3 times past month)
05	Daily	M		More than twice daily
01	No Use in the Past Month	N		No use in past month
03	1-2 Times in the Past Week	O		Often (1-2 times per week)
97	Unknown	U		Unknown
98	Not Collected	Z		Not collected or null value

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
23	Living Arrangements at Discharge	~~ D23>		Living arrangement (L), Residential Arrangement (R) - (DIS 23)
02	Dependent Living	BH		Boarding House/SRO (R)
02	Dependent Living	CJ		Corrections Facility/Jail (R)
02	Dependent Living	FC		Adult Foster Care (R)
02	Dependent Living	GS		Group Setting/Community Residence - Supervised (R)
03	Independent Living	GU		Group Setting/Community Residence - Unsupervised (R)
02	Dependent Living	I		Other Institution (R)
01	Homeless	N		None - On the street / In a shelter / Homeless (R)
02	Dependent Living	NH		Nursing Home/CF or SNF Facilities (R)
97	Unknown	O		Other (R)
02	Dependent Living	PS		Private House or Residence - Supervised (R)
03	Independent Living	PU		Private House or Residence - Unsupervised (R)
97	Unknown	U		Unknown

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
24	Employment at Discharge	~~ D24>		Primary Employment at discharge (DIS 24)
04	Not in Labor Force	D		Disabled / Unable to work
01	Full Time	F		Full time (37.5 hours a week or more)
04	Not in Labor Force	H		Homemaker
04	Not in Labor Force	I		Inmate or Resident of an Institution
03	Unemployed	L		Unemployed - Looking for work
01	Full Time	M		Military Armed Forces, Active Duty (Active Reserves, Reserves)
04	Not in Labor Force	N		Unemployed - Not looking
97	Unknown	O		Other
02	Part Time	P		Part time (less than 37.5 hours per week)
04	Not in Labor Force	R		Retired
04	Not in Labor Force	S		Student (if student does not work)
97	Unknown	U		Unknown
04	Not in Labor Force	V		Volunteer

Delaware's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Delaware

Item No	Treatment Episode Data Set	Item	Value	State System Data
25	Detailed Not In Labor Force at Discharge	~~ D25>		Primary Employment - not in labor force (DIS 25)
04	Disabled	D		Disabled / Unable to work
01	Homemaker	H		Homemaker
05	Inmate of Institution	I		Inmate or Resident of an institution
06	Other	N		Unemployed - Not looking
06	Other	O		Other
03	Retired	R		Retired
02	Student	S		Student
97	Unknown	U		Unknown
06	Other	V		Volunteer
26	Number of Arrests in 30 Days Prior to Discharge	~~ D26>		Number of arrests in the 30 days prior to discharge
00-96	Number of Arrests	00-96		Number of arrests
997	Unknown	97		Unknown
27	Frequency of Attendance at Self-Help program in the 30 Days Prior to Discharge	~~ D27>		Freq attendance at self-help prog (DIS 27) - Not collected
98	Not Collected	-		Not collected

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report