

Crosswalk Management System

Report	REPORT CROSSWALK TO STATE
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Crosswalk Report

Status : FN Substance Abuse and Mental Health Services Administration

Media ID : DHWHWSA100 Office of Applied Studie
 Start Date : 01-JUL-92
 End Date :
 Follow-up :

Idaho's Treatment Episode Data Set
 Version : 1

K = Key Field

System

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	System Transaction Type	-		System Transaction Type Added To Each Record
	A Add		A Add	
	C Change		C Change	
	D Delete		D Delete	
K 2	State Code	-		FIPS Code Added To Each Record
3	Reporting Date	-		Month and Year of Submission Added To Each Record
	m/y mmyyyy		- mmyyyy	

Crosswalk Report

Idaho's Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
K 1	Provider Identifier	- -	Facility Provider Number	
K 2	Client Identifier (Admission)	- -	Client ID Number	
K 3	Co-Dependent/Collateral	02	Co-Dependent/Collateral - -	
	2 No		N No	
	1 Yes		Y Yes	
K 5	Date of Admission	- -	Date of Admission	
	m/d/ mmddyyyy y		- mmddyyyy	
6	Number of Prior Treatment Episodes	07	Number of Prior Treatments - -	
	0 0 Previous Episodes		00 00	
	1 1 Previous Episodes		01 01	
	2 2 Previous Episodes		02 02	
	3 3 Previous Episodes		03 03	
	4 4 Previous Episodes		04 04	
	5 5 Or More Previous Episodes		05+ 05+	
	7 Unknown		07 Unknown	

Idaho's Treatment Episode Data Set
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Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	05	Principal Source of Referral - -	
02	Alcohol/Drug Abuse Provider	ADP	Alcohol/Drug Abuse Provider	
07	Court/Criminal Justice/DUI/DWI	BYR	Byrne Grant non-drug court probation	
06	Other Community Referral	CPS	Child Protective services	
06	Other Community Referral	DHC	DHW/FACS-CPS	
06	Other Community Referral	DHO	DHW/FACS - Other	
06	Other Community Referral	DHW	DHW/FACS	
07	Court/Criminal Justice/DUI/DWI	DUI	Court/Criminal Justice/DUI, DWI	
05	Employer/EAP	EAP	Employer/EAP	
03	Other Health Care Provider	HCP	Other Health Care Provider	
01	Individual (includes self-referral))	IND	Individual (self)	
06	Other Community Referral	MHA	Mental Health Agency	
06	Other Community Referral	NAA	Indian Agency	
07	Court/Criminal Justice/DUI/DWI	NDU	Court/Criminal Justice Non-DUI	
07	Court/Criminal Justice/DUI/DWI	OCJ	Other Criminal Justice	
06	Other Community Referral	OCR	Other Community Referral	
07	Court/Criminal Justice/DUI/DWI	PPO	Probation/Parole Officer	
04	School (Educational)	SED	School/Educational	
06	Other Community Referral	SHG	Self Help Group	

Crosswalk Report

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	05	Principal Source of Referral - -	
06	Other Community Referral		SHH	State Hospital (N&S)
06	Other Community Referral		SRP	Adult/Youth Self Reliance - TAFI
97	Unknown		UNK	Unknown

No longer effective as of: 06-30-2003

Idaho's Treatment Episode Data Set
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Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	05	Principal Source of Referral - -	
02	Alcohol/Drug Abuse Provider	ADP	Alcohol/Drug Abuse Provider	
07	Court/Criminal Justice/DUI/DWI	BYR	Byrne Grant non-drug court probation	
07	Court/Criminal Justice/DUI/DWI	DCR	Drug Court Referral	
06	Other Community Referral	DHC	DHW/FACS-CPS	
06	Other Community Referral	DHO	DHW/FACS - Other	
06	Other Community Referral	DHW	DHW/FACS- Mental Health	
07	Court/Criminal Justice/DUI/DWI	DUI	Court/Criminal Justice/DUI	
05	Employer/EAP	EAP	Employer/EAP	
03	Other Health Care Provider	HCP	Other Health Care Provider	
01	Individual (includes self-referral))	IND	Individual (self)	
06	Other Community Referral	MHA	Mental Health Agency	
06	Other Community Referral	NAA	Indian Agency	
07	Court/Criminal Justice/DUI/DWI	NDU	Court/Criminal Justice Non-DUI	
07	Court/Criminal Justice/DUI/DWI	OCJ	Other Criminal Justice	
06	Other Community Referral	OCR	Other Community Referral	
07	Court/Criminal Justice/DUI/DWI	PAR	IDOC-Re-entry Program Parole	
07	Court/Criminal Justice/DUI/DWI	PPO	Probation/Parole Officer	
04	School (Educational)	SED	School/Educational	

Crosswalk Report

Idaho's Treatment Episode Data Set
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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	05	Principal Source of Referral - -	
06	Other Community Referral		SHG Self Help Group	
06	Other Community Referral		SHH State Hospital (N&S)	
06	Other Community Referral		SRP Adult/Youth Self Reliance - TAFI	
97	Unknown		UNK Unknown	
8	Date of Birth	- -	Date of Birth	
	MM Date of birth DDY YYY		- mmdyyy	
9	Sex	- -	Gender	
2	Female		F Female	
1	Male		M Male	
7	Unknown		U Unknown	

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Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Race	- -	Race	
02	American Indian (Other than Alaskan Native)		AI	American Indian
01	Alaska Native (Aleut, Eskimo, Indian)		AN	Alaskan Native
03	Asian or Pacific Islander		AP	Asian/Pacific Islander
04	Black or African American		BL	Black
20	Other Single Race		OT	Other
97	Unknown		UN	Unknown
05	White		WH	White
13	Asian			
23	Native Hawaiians or Other Pacific Islanders			

11	Ethnicity	- -	Ethnicity	
03	Cuban		CU	Cuban
02	Mexican		MX	Mexican
05	Not of Hispanic Origin		NH	Not of Hispanic Origin
04	Other Specific Hispanic		OH	Other Hispanic
01	Puerto Rican		PR	Puerto Rican
97	Unknown		UN	Unknown

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Item No	Treatment Episode Data Set	Item	Value	State System Data
12	Education	08	Education - -	
00	Less Than One Grade Completed	00	Less than one grade completed	
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	01-25	01-25	
97	Unknown	97	Unknown	
13	Employment Status	11	Current Employment Status - -	
01	Full Time	AF	In Armed Forces	
01	Full Time	FT	Full Time	
04	Not in Labor Force	IN	Inmate of Institution	
04	Not in Labor Force	NL	Not in Labor Force	
02	Part Time	PT	Part Time	
03	Unemployed	UE	Unemployed	
97	Unknown	UN	Unknown	

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Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	21	Substance Problem Codes - -	
01	None	01	None	
02	Alcohol	02	Alcohol	
03	Cocaine, Crack	03	Cocaine/Crack	
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preperations)	04	Marijuana/Hashish	
05	Heroin	05	Heroin	
06	Non-Prescription Methadone	06	Non-Rx Methadone	
07	Other Opiates and Synthetics	07	Other Opiates and Synthetics	
08	PCP	08	PCP	
09	Other Hallucinogens	09	Other Hallucinogens	
10	Methamphetamine	10	Methamphetamine	
11	Other Amphetamines	11	Other Amphetamines	
12	Other Stimulants	12	Other Stimulants	
13	Benzodiazepines	13	Benzodiazepines	
14	Other Non-Benzodiazapine Tranquilizers	14	Other Tranquilizers	
15	Barbiturates	15	Barbiturates	
16	Other Non-Barbituate Sedatives or Hypnotics	16	Other Sedatives or Hypnotics	
17	Inhalants	17	Inhalants	
18	Over-the-Counter	18	Over The Counter	

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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)	21	Substance Problem Codes - -	
	20 Other		20 Other	
	97 Unknown		97 Unknown	
15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiar-15C)	21	Usual Route of Administration - -	
	01 Oral		01 Oral	
	02 Smoking		02 Smoking	
	03 Inhalation		03 Inhalation	
	04 Injection (IV or intramuscular)		04 Injection	
	20 Other		05 Other	
	96 Not Applicable		96 NA	
	97 Unknown		97 Unknown	

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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)	21	Frequency of Use - -	
01	No use in the past month	01	No Past Month Use	
02	1-3 times in past month	02	1-3 Times Per Month	
03	1-2 times per week	03	1-2 Times Per Week	
04	3-6 times per week	04	3-6 Times Per Week	
05	Daily	05	Daily	
96	Not Applicable	96	NA	
97	Unknown	97	Unknown	
17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	21	Age of First Use - -	
00	Indicates a Newborn with a substance dependency problem	00	Newborn	
01-95	Indicates The Age at First Use	01-95	01-95	
96	Not Applicable	96	NA (when 2nd or 3rd substance code = none)	
97	Unknown	97	Unknown	

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	03	Type of Service - -	
07	Ambulatory - Non-Intensive Outpatient	AS	Ancillary Services	
02	Detoxification Free-standing Residential (Detox, 24 hour Service)	DF	Detox-Free Standing Residential	
01	Detoxification - Hospital Inpatient (Detox, 24 hour Service)	DH	Detox-Hospital Inpatient	
08	Ambulatory Detoxification	DO	Detox-Outpatient Ambulatory Methadone Detox	
03	Rehabilitation/Residential - Hospital (other than detox)	HP	Hospital Residential	
06	Ambulatory - Intensive Outpatient	IO	Intensive Outpatient	
05	Rehabilitation/Residential - Long-term, (more than 30 days)	LR	Long Term Residential (>30 days)	
07	Ambulatory - Non-Intensive Outpatient	NO	Non-Intensive Outpatient	
04	Rehabilitation/Residential - Short-term, (30 days or fewer)	SR	Short Term Residential (<less than 30 days)	
19	Opioid Replacement Therapy (Planned/ Actual)Was -Use of Methadone Planned/Actual	16	Methadone Planned As Part of Treatment - -	
2	No	N	No	
7	Unknown	U	Unknown	
1	Yes	Y	Yes	

Crosswalk Report

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Version : 1

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Optional

Idaho

Item No Treatment Episode Data Set

Item

Value

State System Data

Idaho's Treatment Episode Data Set
Version : 1

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~		Detail Drug
	0201 Alcohol		0201	Alcohol
	0301 Crack		0301	Crack
	0302 Other Cocaine		0302	Other Cocaine
	0401 Marijuana/Hashish		0401	Marijuana/Hashish
	0501 Heroin		0501	Heroin
	0601 Non - Prescription Methadone		0601	Non-prescription Methadone
	0701 Codeine		0701	Codeine
	0702 Propoxyphene (Darvon)		0702	Propoxyphene (Darvon)
	0703 Oxycodone (Oxycontin)		0703	Oxycodone (Oxycontin)
	0704 Meperidine (Demerol)		0704	Meperidine (Demerol)
	0705 Hydromorphone (Dilaudid)		0705	Hydromorphone (Dilaudid)
	0706 Other Opiates or Synthetics		0706	Other Opiates or Synthetics
	0707 Pentazocine (Talwin)		0707	Pentazocine (Talwin)
	0708 Hydrocodone (Vicodin)		0708	Hydrocodone (Vicodin)
	0709 Tramadol (Ultram)		0709	Tramadol (Ultram)
	0801 PCP or PCP Combinations		0801	PCP or PCP Combination
	0901 LSD		0901	LSD
	0902 Other Hallucinogens		0902	Other Hallucinogens

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~	Detail Drug	
1001	Methamphetamine/Speed	1001	Methamphetamine/Speed	
1101	Amphetamine	1101	Amphetamine	
1103	Methyleneioxymethamphetamine (MDMA, Ecstasy)	1103	MDMA, Ecstasy	
1109	Other Amphetamines	1109	Other Amphetamines	
1201	Other Stimulants	1201	Other Stimulants	
1202	Methylphenidate - (Ritalin)	1202	Methylphenidate (Ritalin)	
1301	Alprazolam (Xanax)	1301	Alprazolam (Xanax)	
1302	Chlordiazepoxide (Librium)	1302	Chlordiazepoxide (Librium)	
1303	Clorazepate (Tranzene)	1303	Clorazepate (Tranzene)	
1304	Diazepam (Valium)	1304	Diazepam (Valium)	
1305	Flurazepam (Dalmane)	1305	Flurazepam (Dalmane)	
1306	Lorazepam (Ativan)	1306	Lorazepam (Ativan)	
1307	Triazolam (Halcion)	1307	Triazolam (Halcion)	
1308	Other Benzodiazepine	1308	Other Benzodiazepine	
1309	Flunitrazepam (Rohypnol)	1309	Flunitrazepam (Rohypnol)	
1310	Clonazepam - (Klonopin, Rivotril)	1310	Clonazepam (Klonopin, Rivotril)	
1401	Meprobamate (Miltown)	1401	Meprobamate (Miltown)	
1403	Other Tranquilizer	1403	Other Tranquilizer	
1501	Phenobarbital	1501	Phenobarbital	

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Version : 1

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~	Detail Drug	
	1502 Secobarbital/Amobarbital (Tuinal)		1502 Secobarbital/Amobarbital (Tuinal)	
	1503 Secobarbital (Seconal)		1503 Secobarbital (Seconal)	
	1509 Other Barbiturate Sedatives		1509 Other Barbiturate Sedatives	
	1601 Ethchlorvynol (Placidyl)		1601 Ethchlorvynol (Placidyl)	
	1602 Glutethimide (Doriden)		1602 Glutethimide (Doriden)	
	1603 Methaqualone		1603 Methaqualone	
	1604 Other Non-Barbiturate Sedatives		1604 Other Non-barbiturate Sedatives	
	1605 Other Sedatives		1605 Other Sedatives	
	1701 Aerosols		1701 Aerosols	
	1702 Nitrites		1702 Nitrites	
	1703 Other Inhalants		1703 Other Inhalants	
	1704 Solvents		1704 Solvents	
	1705 Anesthetics		1705 Anesthetics	
	1801 Diphenhydramine		1801 Diphenhydramine	
	1809 Other Over-The-Counter		1809 Other Over-the-counter	
	2001 Dephenylhydantoin/Phenytoin (Dilantin)		2001 Diphenylhydantoin/Phenytoin (Dilantin)	
	2002 Other Drugs		2002 Other Drugs	
	2003 GHB/GBL - (gamma-hydroxybutyrate, gamma-butyrolactone)		2003 GHB/GBL	

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Version : 1

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~	Detail Drug	
	2004 Ketamine - (Special K)		2004 Ketamine (Special K)	
	9996 Not Applicable		9996 NA	
	9997 Unknown		9997 Unknown	
4	DSM Diagnosis	~	DSM Diagnosis	
	999. Unknown 97		999.9 Unknown 7	
	XXX DSM III-R Category .XX		xxx.x Specify if code is from DSM or ICD x	
5	Psychiatric Problem in Addition to Alcohol or Drug Problem	20	Psychiatric Problem and Alcohol or Drug Problem ~	
	2 No		N No	
	7 Unknown		U Unknown	
	1 Yes		Y Yes	
6	Pregnant at Time of Admission	15	Now Pregnant ~	
	2 No		N No	
	7 Unknown		U Unknown	
	1 Yes		Y Yes	

Idaho's Treatment Episode Data Set
Version : 1

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Veteran Status	~	Veteran	
2	No		N	No
7	Unknown		U	Unknown
1	Yes		Y	Yes
8	Living Arrangements	09	Living Arrangements ~	
02	Dependent Living		D	Dependent Living
01	Homeless		H	Homeless
03	Independent Living		I	Independent Living
97	Unknown		U	Unknown
9	Source of Income/Support	12	Primary Souce of Income or Support ~	
04	Disability		D	Disability
21	None		N	None
20	Other		O	Other
02	Public Assistance		P	Public Assistance
03	Retirement/Pension		R	Retirement/Pension
97	Unknown		U	Unknown
01	Wages/Salary		W	Wages/Salary

Idaho's Treatment Episode Data Set
Version : 1

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Health Insurance	13	Health Insurance ~	
02	Blue Cross/Blue Shield	BB	Blue Cross/Bule Shield	
06	Health Maintenance Organization (HMO)	HM	Health Maintenance Organization (HMO)	
04	Medicaid	MD	Medicaid	
03	Medicare	ME	Medicare	
21	None	NO	None	
20	Other (e.g. TriCare, Champus)	OT	Other	
01	Private Insurance (other than BCBS or HMO)	PI	Private Insurance	
97	Unknown	UN	Unknown	

Idaho's Treatment Episode Data Set
Version : 1

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
11	Expected/Actual Primary Source of Payment	14	Source of Payment ~	
02	Blue Cross/Blue Shield	BB	Blue Cross/Blue Shield	
08	No Charge (Free, Charity, Special Research or Teaching)	HM	No Charge (HMO)	
04	Medicaid	MD	Medicaid	
03	Medicare	ME	Medicare	
05	Other Government Payments	OG	Other Government Payments	
07	Other Health Insurance Companies	OH	Other Health Insurance Companies	
09	Other	OT	Other	
01	Self-Pay	SP	Self Pay	
97	Unknown	UN	Unknown	
06	Worker's Compensation	WC	Workman's Comp	

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
12	Detailed Not in Labor Force	~		Detailed not in labor force
01	Homemaker		01	Homemaker
02	Student		02	Student
03	Retired		03	Retired
04	Disabled		04	Disabled
05	Inmate of Institution (Prison or Institution - keeps people out of work force)		05	Inmate of Institution
06	Other		06	Other
96	Not Applicable		96	Not applicable
97	Unknown		97	Unknown

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Version : 1

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Optional

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
13	Detailed Criminal Justice Referral Categories	~		Detailed criminal justice referral
01	State/Federal Court		01	State/Federal Court
02	Other Court (Not State or Federal)		02	Other court
03	Probation/Parole		03	Probation/Parole
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board		04	Other recognized legal entity
05	Diversiory Program (E.G. TASC)		05	Diversiory program (e.g. Tasc)
06	Prison		06	Prison
07	DUI/DWI		07	DUI/DWI
08	Other		08	Other
96	Not Applicable		96	Not applicable
97	Unknown		97	Unknown

Idaho's Treatment Episode Data Set
Version : 1

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Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Marital Status	~		Marital Status
04	Divorced		D	Divorced
02	Now Married (includes those living together as married)		L	Living Together
02	Now Married (includes those living together as married)		M	Now Married
03	Separated (legally seperated or otherwise absent becасue of marital discord))		P	Separated
01	Never Married		S	Never Married (Single)
97	Unknown		U	Unknown
05	Widowed		W	Widowed

15	Days Waiting to Enter Treatment	~		Time Waiting to Enter Treatment
000-996	Days		000-996	Days waiting
997	Unknown		997	Unknown

16	Number of Arrests in the 30 Days Prior to Admission	~		Arrests in 30 days prior to admission
00-96	Number of Arrests		00	None
00-96	Number of Arrests		01-96	01-96 days
97	Unknown		97	Unknown

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Version : 1

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Discharge/NOMS

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	System Transaction at Discharge	~~		System Transaction Code - Discharge
	A Add		A Add	
	C Change		C Change	
	D Delete		D Delete	
2	State Code at Discharge	~~		State Code Discharge
3	Reporting Date at Discharge	~~		Mo-Yr Data File Submitted - Discharge
	- MMYYYY		- mmyyyy	
4	Provider Identifier at Discharge	~~		Provider ID - Discharge
5	Client Identifier at Discharge	~~		Client ID - Discharge
6	Co-Dependent/Collateral at Discharge	~~		Collateral - Discharge
	2 No		N No	
	1 Yes		Y Yes	

Idaho's Treatment Episode Data Set
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Discharge/NOMS

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Type of Service at Discharge	~~		Service - Discharge
02	Detoxification, 24-Hour Service, Free Standing Residential	DF		Detox - Free-standing residential
01	Detoxification, 24-Hour Service, Hospital Inpatient	DH		Detox - Hosp Inpatient
08	Ambulatory Detoxification	DO		Detox - outpatient ambulatory
03	Rehabilitation/Residential - Hospital	HP		Hospital residential
06	Ambulatory - Intensive - Outpatient	IO		Intensive outpatient
05	Rehabilitation/Residential - Long Term (More than 30 Days)	LR		Long term residential
07	Ambulatory -Non Intensive - Outpatient	NO		Non-intensive outpatient
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)	SR		Short term residential
97	Unknown	UN		Unknown
8	Date of Last Contact	~~		Date of last contact - Discharge
-	MMDDYYYY			MMDDYYYY
9	Date of Discharge	~~		End date of last service - Discharge
-	MMDDYYYY			MMDDYYYY

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Discharge/NOMS

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Reason for Discharge, Transfer, or Discontinuance of Treatment	~~		Reason for Discharge
04	Transferred to Another Substance Abuse Treatment Program or Facility		04	Transferred
14	Transferred to Another Substance Abuse Trtment Prog or Facil, but did not report		14	Transferred - no report
02	Left Against Professional Advice		APA	Left against professional advice
01	Treatment Completed		CTS	Treatment completed
06	Death		D	Death
05	Incarerated		INC	Incarcerated
07	Other		O	Other
03	Ternimated by Facility		TDS	Terminated by facility
08	Unknown		U	Unknown
11	Provider Identifier at Admission	~~		Provider ID from admission ~~
-	Comes from admission file			
12	Client Identifier at Admission	~~		Client ID at admission - from admission file ~~
-	Comes from admission file			

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Discharge/NOMS

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
13	Co-Dependent/Collateral at Admission	~~	Collateral - from admission file	~~
	-		Comes from admission file	
15	Date of Admission.	~~	Date of admission - from admission file	~~
	-		Comes from admission file	
16	Type of Service at Admission	~~	Type of service - from admission file	~~
	-		Comes from admission file	
17	Date of Birth.	~~	Date of birth - from admission file	~~
	-		Comes from admission file	
18	Sex.	~~	Gender - from admission file	~~
	-		Comes from admission file	
19	Race.	~~	Race - from admission file	~~
	-		Comes from admission file	
20	Ethnicity.	~~	Ethnicity - from admission file	~~
	-		Comes from admission file	

Crosswalk Report

Idaho's Treatment Episode Data Set
Version : 1

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Discharge/NOMS

Idaho

Item No Treatment Episode Data Set

Item

Value

State System Data

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Discharge/NOMS

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	~~		Substance problem - Discharge
01	None		01	None
02	Alcohol		02	Alcohol
03	Cocaine/Crack		03	Cocaine/Crack
04	Marijuana/Hashish		04	Marijuana/Hashish
05	Heroin		05	Heroin
06	Non-Prescription Methadone		06	Non-Prescription Methadone
07	Other Opiates and Synthetics		07	Other Opiates and Synthetics
08	PCP		08	PCP-phencyclidine
09	Other Hallucinogens		09	Other Hallucinogens
10	Methamphetamine		10	Methamphetamine
11	Other Amphetamines		11	Other Amphetamines
12	Other Stimulants		12	Other Stimuants
13	Benzodiazepines		13	Benzodiazepine
14	Other Non-Benzodiazepine Tranquilizer		14	Other non-Benzodiazepine Tranquilizers
15	Barbiturates		15	Barbiturates
16	Other Non- Barbiturate Sedatives or Hyponotics		16	Other non-Barbiturate Sedatives or Hypnotics
17	Inhalants		17	Inhalents
18	Over-The-Counter		18	Over-the-counter

Idaho's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	~~		Substance problem - Discharge
20	Other		20	Other
97	Unknown		97	Unknown
22	Frequency of Use at Discharge (Primary, Secondary, Tertiary)	~~		Frequency of use at discharge
01	No Use in the Past Month		01	No use in the past month
02	1-3 Times in the Past Month		02	1-3 times in past month
03	1-2 Times in the Past Week		03	1-2 times in past week
04	3-6 Times in the Past Week		04	3-5 times in past week
05	Daily		05	Daily
96	Not Applicable		96	Not applicable
97	Unknown		97	Unknown
23	Living Arrangements at Discharge	~~		Living arrangement at discharge
01	Homeless		01	Homeless
02	Dependent Living		02	Dependent living
03	Independent Living		03	Independent living
97	Unknown		97	Unknown

Idaho's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
24	Employment at Discharge	~~		Employment status at discharge
01	Full Time		01	In armed forces
01	Full Time		01	Full time
02	Part Time		02	Part time
03	Unemployed		03	Unemployed
04	Not in Labor Force		04	Inmate of institution
04	Not in Labor Force		04	Not in labor force
97	Unknown		97	Unknown

25	Detailed Not In Labor Force at Discharge	~~		Detailed not in labor force at discharge
01	Homemaker		01	Homemaker
02	Student		02	Student
03	Retired		03	Retired
04	Disabled		04	Disabled
05	Inmate of Institution		05	Inmate of institution
06	Other		06	Other
96	Not Applicable		96	Not applicable
97	Unknown		97	Unknown

Idaho's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Idaho

Item No	Treatment Episode Data Set	Item	Value	State System Data
26	Number of Arrests in 30 Days Prior to Discharge	~~	Arrests in 30 days prior to discharge	
00-96	Number of Arrests		00	None
00-96	Number of Arrests		01-96	01-96
997	Unknown		97	Unknown

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report