

Crosswalk Management System

Report	REPORT CROSSWALK TO STATE
Filename	adobe pdf
Run by	OPS\$PCUMMING
Report Date	05-JUL-12 10:50

Crosswalk Report

Status : FN

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

Media ID : DARTS - IL

Start Date : 01-JAN-90

End Date :

Follow-up :

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

System

Illinois

Item No Treatment Episode Data Set

Item

Value

State System Data

1	System Transaction Type	-	System Transaction Type Added to Each Record
			Added to each record. Will Be Generated by the System
	A Add	A	Add
	C Change	C	Change
	D Delete	D	Delete
No longer effective as of: 06-30-2006			

1	System Transaction Type	-	System Transaction Type Added to Each Record
			Added to each record. Will be generated by the system.
	A Add	2	A Add
	C Change	3	C Change
	D Delete	4	D Delete

K 2	State Code	IL	FIPS Code Added to Each Record
			Added to each record
	- State Postal Abbreviation	-	IL

3	Reporting Date	-	Month and Year of Submission Added to Each Record
			(MMYYYY)

Crosswalk Report

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
K 1	Provider Identifier	-		Provider
	=			
				No longer effective as of: 06-30-2006

K 1	Provider Identifier	NFR		National Facility Register
				6 character NFR number

K 2	Client Identifier (Admission)	-		Client's SSN
	(9) Character Client ID (SSN). If SSN is not available, then system will generate a number based on client's last name, date of birth and sex. This information is not given to CDS, but a 15 position identifier that is based upon system date and time client was added to NIDA file which ties back to client record			
				No longer effective as of: 06-30-2006

K 2	Client Identifier (Admission)	Client Id		Generated Id or RIN
				Generated ID (for Clients before 7/1/2007) (15 Digits)and Recipient ID (for clients after 6/30/2007) (9 Digits)

K 3	Co-Dependent/Collateral	-		Problem Area
	2	No	1	Alcohol
	2	No	2	Drugs
	2	No	3	Both Alcohol and Drugs
	1	Yes	4	Not Applicable
	1	Yes	5	No Diagnosis
				No longer effective as of: 06-30-2006

Illinois' Treatment Episode Data Set
Version : 1

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Minimum

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
K 3	Co-Dependent/Collateral	-		Problem Area
2	No	1		Alcohol
2	No	2		Drugs
2	No	3		Alcohol and Drugs
1	Yes	4		Co-Dependence
2	No	5		None
2	No	6		Alchol/Drugs and Gambling
2	No	7		Gambling

K 4	Client Transaction Type	-		Services Dates
A	Admission	-		1st Service Date
T	Transfer/Change in Service	-		2nd Service Date
No longer effective as of: 06-30-2006				

K 4	Client Transaction Type	-		Client Transaction Type.
A	Admission	A		Admission (1st Service Type Data)
T	Transfer/Change in Service	T		Transfer (2nd Service Type Data)

K 5	Date of Admission	-		Open Date
add 19 to prefix year. MMDDYYYY Date Client is opened to agency and became eligible to receive services.				
No longer effective as of: 06-30-2006				

Crosswalk Report

Illinois' Treatment Episode Data Set
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Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
K 5	Date of Admission	-	First Date of Service	
			MMDDYYYY	

6	Number of Prior Treatment Episodes	-	Prior Treatment Episodes
0	0 Previous Episodes	A	0
1	1 Previous Episodes	B	1
2	2 Previous Episodes	C	2
3	3 Previous Episodes	D	3
4	4 Previous Episodes	E	4
5	5 Or More Previous Episodes	F	5 or More
7	Unknown	G	Unknown

No longer effective as of: 06-30-2006

Crosswalk Report

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Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
6	Number of Prior Treatment Episodes	-		Prior Treatment Episodes
0	0 Previous Episodes	0		0
1	1 Previous Episodes	1		1
2	2 Previous Episodes	2		2
3	3 Previous Episodes	3		3
4	4 Previous Episodes	4		4
5	5 Or More Previous Episodes	5		5
7	Unknown			

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	-		Referral Source
03	Other Health Care Provider	01		Health Care Provider
07	Court/Criminal Justice/DUI/DWI	02		DOC System
07	Court/Criminal Justice/DUI/DWI	03		Court Services
07	Court/Criminal Justice/DUI/DWI	04		Law Enforcement
05	Employer/EAP	05		Labor (employer,job corp.)
01	Individual (includes self-referral))	06		Family
01	Individual (includes self-referral))	07		Self
04	School (Educational)	08		School
02	Alcohol/Drug Abuse Provider	09		Other State Agency
02	Alcohol/Drug Abuse Provider	10		Division of ASA Supported Program
03	Other Health Care Provider	11		DMH/DD
06	Other Community Referral	12		Advocacy Groups
03	Other Health Care Provider	13		DCFS
07	Court/Criminal Justice/DUI/DWI	14		TASC
07	Court/Criminal Justice/DUI/DWI	15		DUI
07	Court/Criminal Justice/DUI/DWI	16		Attorneys (States Attorneys, Private Attorney)
07	Court/Criminal Justice/DUI/DWI	17		Out-of-State CJS
06	Other Community Referral	18		Community Agency (Head Start, Faith)

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	-		Referral Source
03	Other Health Care Provider	19		DHS
No longer effective as of: 06-30-2007				

7	Principal Source of Referral	-		Referral Source
01	Individual (includes self-referral))	A		Individual/Family/Friend
02	Alcohol/Drug Abuse Provider	B		Addiction Treatment Provider
03	Other Health Care Provider	C		Early Intervention Provider
03	Other Health Care Provider	D		Prevention Provider
03	Other Health Care Provider	E		Other Health Care Provider
04	School (Educational)	F		School
05	Employer/EAP	G		Labor (employer, job corp)
06	Other Community Referral	H		other community referral
07	Court/Criminal Justice/DUI/DWI	I		Criminal Justice Referral
06	Other Community Referral	K		Hurricane Katrina Guest
06	Other Community Referral	R		Hurricane Rita Guest

8	Date of Birth	-		Birth Date
				MMDDYYYY

Crosswalk Report

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Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
9	Sex	-		Sex
2	Female	F		Female
1	Male	M		Male

10	Race	-		Race
02	American Indian (Other than Alaskan Native)	A		American Indian
01	Alaska Native (Aleut, Eskimo, Indian)	B		Alaskan Native
13	Asian	C		Asian
23	Native Hawaiians or Other Pacific Islanders	D		Pacific Islander
04	Black or African American	E		Black Origins
05	White	F		White
20	Other Single Race	J		Other

No longer effective as of: 06-30-2007

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Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Race	-		Race
02	American Indian (Other than Alaskan Native)	A		American Indian
01	Alaska Native (Aleut, Eskimo, Indian)	B		Alaskan Native
13	Asian	C		Asian
23	Native Hawaiians or Other Pacific Islanders	D		Pacific Islander
04	Black or African American	E		Black Origins
05	White	F		White
20	Other Single Race	L		Other Single Race

11	Ethnicity	-		Race
01	Puerto Rican	G		Hispanic, Puerto Rican
02	Mexican	H		Hispanic, Mexican
03	Cuban	I		Hispanic, Cuban
04	Other Specific Hispanic	K		Hispanic, Other
No longer effective as of: 06-30-2007				

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Item No	Treatment Episode Data Set	Item	Value	State System Data
11	Ethnicity	-	Race	
01	Puerto Rican	1		Puerto Rican
02	Mexican	2		Mexican
03	Cuban	3		Cuban
04	Other Specific Hispanic	4		Other Specific Hispanic
05	Not of Hispanic Origin	5		Not of Hispanic Origin
06	Hispanic - Specific Origin not Specified	6		Hispanic - specific orgin unknown

12	Education	-	Education Level
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	00-11	Completed grades 0 -11
00	Less Than One Grade Completed	00-11	Completed grades 0 -11
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	12	Completed grade 12
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	13-15	Completed grades 13 -15
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	16	Completed grade 16
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	17	Completed grade 17
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	18-25	Completed grades 18-25

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Illinois' Treatment Episode Data Set
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Item No	Treatment Episode Data Set	Item	Value	State System Data
12	Education	-		Education Level
00	Less Than One Grade Completed	00		0
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	01-20		01-20

13	Employment Status	-		Employment Status
01	Full Time	A		Full Time (35 hours or more per week)
02	Part Time	B		Part-Time (less than 35 hours per week)
03	Unemployed	C		Employed, but not Working due to Extended Illness, Furlough or Strike
02	Part Time	D		Seasonal Worker
03	Unemployed	E		Unemployed
04	Not in Labor Force	F		Not in Labor Force (Homemaker, Student, Disabled, Retired, or Inmate)
No longer effective as of: 06-30-2007				

13	Employment Status	-		Employment Status
01	Full Time	1		Full Time (35 hours or more per week)
02	Part Time	2		Part-Time (less than 35 hours per week)
03	Unemployed	3		Employed, but not Working due to Extended Illness, Furlough or Strike
04	Not in Labor Force	4		Not in Labor Force (Homemaker, Student, Disabled, Retired, or Inmate)

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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)	-		Substance Abused, Primary, Secondary, Tertiary
01	None	00		None
05	Heroin	A1		Heroin (including Karachi)
06	Non-Prescription Methadone	A2		Non-Rx Methadone
07	Other Opiates and Synthetics	A3		Opiods and other synthetics
07	Other Opiates and Synthetics	A4		Prescription Opioids (Oxycontin, Darvon, Vicodin, Dilaudid, Demerol, Codeine etc
02	Alcohol	B1		Alcohol
12	Other Stimulants	C1		Nicotine (secondary choice only)
13	Benzodiazepines	D1		Benzodiazepines
15	Barbiturates	D2		Barbiturates
16	Other Non-Barbituate Sedatives or Hypnotics	D3		Non-Barbiturate - sedatives/hypnotics other than benzodiazepines
14	Other Non-Benzodiazapine Tranquilizers	D4		Other Tranquilizers
13	Benzodiazepines	D5		Clonazepan (Klonopin, Rivotril)
11	Other Amphetamines	E1		Amphetamines
10	Methamphetamine	E2		Methamphetamine
03	Cocaine, Crack	E3		Cocaine
03	Cocaine, Crack	E4		Crack
12	Other Stimulants	E5		Other Stimulants

Crosswalk Report

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Version : 1

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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)	-		Substance Abused, Primary, Secondary, Tertiary
17	Inhalants	G1		Inhalants
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preperations)	H1		Marijuana, Hashish, THC
09	Other Hallucinogens	I1		Other Hallucinogens (peyote, LSD, etc)
18	Over-the-Counter	J1		Over-the-Counter
20	Other	K1		Other
11	Other Amphetamines	L1		MDMA, Ecstasy
20	Other	L2		GHB/GBL
20	Other	L3		Ketamine (Special K)
13	Benzodiazepines	L4		Rohypnol (Flunitrazepam)
12	Other Stimulants	L5		Steriods
08	PCP	L6		PCP
20	Other	L7		Ephedrine/Pseudoephedrine

No longer effective as of: 06-30-2007

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Version : 1

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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)	-		Substance Abused, Primary, Secondary, Tertiary
01	None	01		None
02	Alcohol	02		Alcohol
03	Cocaine, Crack	03		Cocaine/Crack
04	Marijuana, Hashish (includes THC and other Cannabis Sativa preparations)	04		Marijuana, Hashish, THC
05	Heroin	05		Heroin
06	Non-Prescription Methadone	06		Non-Rx Methadone
07	Other Opiates and Synthetics	07		Opiods and other synthetics
08	PCP	08		PCP
09	Other Hallucinogens	09		Other Hallucinogens (peyote, LSD, etc)
10	Methamphetamine	10		Methamphetamine
11	Other Amphetamines	11		Amphetamines
12	Other Stimulants	12		Other Stimulants
13	Benzodiazepines	13		Benzodiazepines
14	Other Non-Benzodiazapine Tranquilizers	14		Other non-Benzodiazepines Tranquilizers
15	Barbiturates	15		Barbiturates
16	Other Non-Barbituate Sedatives or Hypnotics	16		Non-Barbiturate - sedatives/hypnotics other than benzodiazepines
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, Tertiart-14C)	-		Substance Abused, Primary, Secondary, Tertiary
12	Other Stimulants	19		Nicotine (only as secondary or tertiary choice)
20	Other	20		Other - includes - Ketamine (Special K) and GHB/GBL
11	Other Amphetamines	22		Ecstasy
13	Benzodiazepines	23		Rohypnol
12	Other Stimulants	24		Steriods
20	Other	25		Ephedrine/Pseudoephedrine

15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiar-15C)	-		Administration Route
01	Oral	1		Oral
02	Smoking	2		Smoking
03	Inhalation	3		Inhalation
04	Injection (IV or intramuscular)	4		Intramuscular
04	Injection (IV or intramuscular)	5		Intravenous
20	Other	7		Other

No longer effective as of: 06-30-2006

Illinois' Treatment Episode Data Set
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Minimum

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiari-15C)	-		Administration Route
01	Oral	1		Oral
02	Smoking	2		Smoking
03	Inhalation	3		Inhalation
04	Injection (IV or intramuscular)	4		Injection IV or intramuscular
96	Not Applicable	5		Not Applicable
16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	-		Frequency of Use
01	No use in the past month	1		No use month prior to admission
02	1-3 times in past month	2		1-3 times in the past month
03	1-2 times per week	3		1-2 times in the past week
04	3-6 times per week	4		3-6 times per week
05	Daily	5		Daily
96	Not Applicable	6		None

16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	-	Not Collected
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No longer effective as of: 06-30-2006

Crosswalk Report

Illinois' Treatment Episode Data Set
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Item No	Treatment Episode Data Set	Item	Value	State System Data
17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	-		Age First Used
01-95	Indicates The Age at First Use	01-96		01-96
No longer effective as of: 06-30-2006				

17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	-		Age First Used
96	Not Applicable	-		Not Applicable
00	Indicates a Newborn with a substance dependency problem	00		00
01-95	Indicates The Age at First Use	01-95		01-95

Illinois' Treatment Episode Data Set
Version : 1

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Minimum

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	SC		Setting Codes
01	Detoxification - Hospital Inpatient (Detox, 24 hour Service)	(SC),DX		Hospital Detox
02	Detoxification Free-standing Residential (Detox, 24 hour Service)	(SC),DX0		Detoxification
05	Rehabilitation/Residential - Long-term, (more than 30 days)	(SC),HH		Halfway House
05	Rehabilitation/Residential - Long-term, (more than 30 days)	(SC),LT		Long Term Residential/Maintenance
06	Ambulatory - Intensive Outpatient	(SC),OR		Intensive Outpatient Rehab
07	Ambulatory - Non-Intensive Outpatient	(SC),PO		Outpatient
05	Rehabilitation/Residential - Long-term, (more than 30 days)	(SC),SN		Sanctuary
04	Rehabilitation/Residential - Short-term, (30 days or fewer)	(SC),ST		Short Term Residential
01	Detoxification - Hospital Inpatient (Detox, 24 hour Service)	--		Provider Number
04	Rehabilitation/Residential - Short-term, (30 days or fewer)	--		Provider Number and Seeting Code (SC) equal to ST or LT
No longer effective as of: 06-30-2006				

K 18	Type of Services	SC	Setting Codes
02	Detoxification Free-standing Residential (Detox, 24 hour Service)	DX	Detoxification
05	Rehabilitation/Residential - Long-term, (more than 30 days)	HH	Halfway House
07	Ambulatory - Non-Intensive Outpatient	OP	Level I (Outpatient)
06	Ambulatory - Intensive Outpatient	OR	Level II (Intensive Outpatient)
04	Rehabilitation/Residential - Short-term, (30 days or fewer)	RR	Level III (Residential Rehabilitation)

Illinois' Treatment Episode Data Set
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Minimum

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
19	Opioid Replacement Therapy (Planned/ Actual)Was -Use of Methadone Planned/Actual	-		Methadone Client
2	No	N		No
1	Yes	Y		Yes
No longer effective as of: 06-30-2006				

19	Opioid Replacement Therapy (Planned/ Actual)Was -Use of Methadone Planned/Actual	-		Opiod Maintenance Therapy
2	No	N		No
1	Yes	Y		Yes

Illinois' Treatment Episode Data Set
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Optional

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	-	Not Collected	

1	Detail Drug Code, Primary	-	Primary Drug of Abuse
0201	Alcohol	A1	Alcohol
0501	Heroin/Morphine	A1	Heroin
0501	Heroin/Morphine	A2	Morphine
0601	Methadone	A3	Non RX Methadone
0302	Other Cocaine	E3	Cocaine
0302	Other Cocaine	E4	Base Cocaine
0301	Crack	E5	Crack Cocaine
0401	Marijuana/Hashish	H1	Marijuana
0401	Marijuana/Hashish	H2	Hashish
No longer effective as of: 06-30-2006			

2	Detail Drug Code, Secondary	-	Not Collected
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3	Detail Drug Code, Tertiary	-	Not Collected
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4	DSM Diagnosis	-	Medical Diagnosis
XXX.XX	DSM/ICD codes	###.##	###.##
No longer effective as of: 06-30-2006			

Illinois' Treatment Episode Data Set
Version : 1

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Optional

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
4	DSM Diagnosis	-		Medical Diagnosis
			DSM and ICD codes	
	XXX.XX			DSM/ICD codes

5	Psychiatric Problem in Addition to Alcohol or Drug Problem	-		Medical Diagnosis
	Determined from Medical Disgnosis Codes (Illinois allows for two diagnosis codes) If either of the two codes is other tha 291,292,303,304, or 305 prefix then it is a diagnosis with some Psych problem. If only 291,292,303,304 or 305 prefix on the diagnosis codes submitted than no Psych problem.			
	1	Yes	-	If second code is other than 291, 292,303,304 or 305
			see comments above	
	2	No	-	If only 291, 292,303,304 or 305 code submitted

5	Psychiatric Problem in Addition to Alcohol or Drug Problem	-		Dual Diagnosis Special Population Code
	2	No	N	No
	1	Yes	Y	Yes
	No longer effective as of: 06-30-2006			

6	Pregnant at Time of Admission	-		Pregnant at Open
	2	No	N	No
	1	Yes	Y	Yes

7	Veteran Status	-		Veteran
	2	No	N	No
	1	Yes	Y	Yes

Crosswalk Report

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Item No Treatment Episode Data Set

Item

Value

State System Data

8	Living Arrangements	-	Living Arrangement
03	Independent Living	1	Independent Living
02	Dependent Living	2	Dependent Living
01	Homeless	3	Homeless
No longer effective as of: 06-30-2011			

8	Living Arrangements	-	Living Arrangement
01	Homeless	A	Shelter
01	Homeless	B	Street/Outdoors
02	Dependent Living	C	Institutional
03	Independent Living	D	Owned or Rented Residence
02	Dependent Living	E	Someone else's residence
02	Dependent Living	F	College Residence
02	Dependent Living	G	Halfway House
02	Dependent Living	H	Residential
02	Dependent Living	I	Recovery Home
02	Dependent Living	J	Other Home

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Optional

Illinois

Item No Treatment Episode Data Set Item Value State System Data

9	Source of Income/Support	-	Income Status
01	Wages/Salary	1	Wages/Salary
02	Public Assistance	2	Public Assistance
03	Retirement/Pension	3	Retirement/Pension
04	Disability	4	Disability
20	Other	5	Donations/Gifts
21	None	6	None
No longer effective as of: 06-30-2007			

9	Source of Income/Support	-	Income Status
01	Wages/Salary	1	Wages/Salary
02	Public Assistance	2	Public Assistance
03	Retirement/Pension	3	Retirement/Pension
04	Disability	4	Disability
21	None	6	None

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Item No Treatment Episode Data Set

Item

Value

State System Data

10	Health Insurance	-	Insurance Type
21	None	A	No Health Insurance
02	Blue Cross/Blue Shield	B	Blue Cross/Blue Shield
01	Private Insurance (other than BCBS or HMO)	C	Other Private Insurance
03	Medicare	D	Medicare
20	Other (e.g. TriCare)	E	CHAMPUS
20	Other (e.g. TriCare)	F	Other Public Funds for Health Care
04	Medicaid	G	Medicaid (01) Aged
04	Medicaid	H	Medicaid (91) Aged
04	Medicaid	I	Medicaid (02) Blind
04	Medicaid	J	Medicaid (92) Blind
04	Medicaid	K	Medicaid (03) Disabled
04	Medicaid	L	Medicaid (93) Disabled
04	Medicaid	M	Medicaid (P3) Disabled
04	Medicaid	N	Medicaid (04) ADC
04	Medicaid	O	Medicaid (94) ADC
04	Medicaid	P	Medicaid (06) ADC
04	Medicaid	Q	Medicaid (96) ADC
04	Medicaid	R	Medicaid (98) DCFS Wards

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Illinois

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Item

Value

State System Data

10	Health Insurance	-	Insurance Type
04	Medicaid	S	Medicaid (00) Refugee
04	Medicaid	T	Medicaid (90) Refugee
04	Medicaid	U	Medicaid (07) GA
04	Medicaid	V	Medicaid (97) GA
No longer effective as of: 06-30-2006			

10 **Health Insurance**

-

Third Party Payer

01	Private Insurance (other than BCBS or HMO)	1	Private
02	Blue Cross/Blue Shield	2	Blue Cross/Blue Shield
03	Medicare	3	Medicare
04	Medicaid	4	Medicaid
06	Health Maintenance Organization (HMO)	5	HMO
20	Other (e.g. TriCare)	6	Other
21	None	7	None

Illinois' Treatment Episode Data Set
Version : 1

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Optional

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
11	Expected/Actual Primary Source of Payment	-		Health Insurance
02	Blue Cross/Blue Shield	B		Blue Cross/Blue Shield
07	Other Health Insurance Companies	C		Other Health Care Insurance
03	Medicare	D		Medicare
05	Other Government Payments	F		Other Public Funds for Health Care
04	Medicaid	G		Medicaid (01) Aged
04	Medicaid	H		Medicaid (91) Aged
04	Medicaid	I		Medicaid (02) Blind
04	Medicaid	J		Medicaid (92) Blind
04	Medicaid	K		Medicaid (03) Disabled
04	Medicaid	L		Medicaid (93) Disabled
04	Medicaid	M		Medicaid (P3) Disabled
04	Medicaid	N		Medicaid (04) ADC
04	Medicaid	O		Medicaid (94) ADC
04	Medicaid	P		Medicaid (06) ADC
04	Medicaid	Q		Medicaid (96) ADC
04	Medicaid	R		Medicaid (98) DCFS Wards
04	Medicaid	S		Medicaid (00) Refugee
04	Medicaid	T		Medicaid (90) Refugee

Crosswalk Report

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
11	Expected/Actual Primary Source of Payment	-		Health Insurance
04	Medicaid	U		Medicaid (07) GA
04	Medicaid	V		Medicaid (97) GA
No longer effective as of: 06-30-2006				

Item No	Treatment Episode Data Set	Item	Value	State System Data
11	Expected/Actual Primary Source of Payment	-		Third Party Payer
01	Self-Pay	1		Private
02	Blue Cross/Blue Shield	2		Blue Cross/Blue Shield
03	Medicare	3		Medicare
04	Medicaid	4		Medicaid
07	Other Health Insurance Companies	5		HMO

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Illinois

Item No Treatment Episode Data Set Item Value State System Data

12	Detailed Not in Labor Force	-	Detailed not in labor force
CURRENTLY NOT COLLECTED. WILL START COLLECTING BEGINNING 7/1/2007			
01	Homemaker	1	Homemaker
02	Student	2	Student
03	Retired	3	Retired
04	Disabled	4	Disabled
05	Inmate of Institution (Prison or Institution - keeps people out of work force)	5	Inmate of Institution
06	Other	6	Other
96	Not Applicable	7	Not Applicable
No longer effective as of: 06-30-2011			

12	Detailed Not in Labor Force	-	Detailed not in labor force
CURRENTLY NOT COLLECTED. WILL START COLLECTING BEGINNING 7/1/2007			
01	Homemaker	1	Homemaker
02	Student	2	Student
03	Retired	3	Retired
04	Disabled	4	Disabled
05	Inmate of Institution (Prison or Institution - keeps people out of work force)	5	Inmate of Institution
06	Other	6	Other
96	Not Applicable	7	Not Applicable
06	Other	8	Volunteer Work
06	Other	9	Not Looking for Work

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Illinois

Item No Treatment Episode Data Set Item Value State System Data

13	Detailed Criminal Justice Referral Categories	-	Referral Source
06	Prison	02	DOC System
02	Other Court (Not State or Federal)	03	Court Services
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	04	Law Enforcement
05	Diversionary Program (E.G. TASC)	14	TASC
07	DUI/DWI	15	DUI
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	16	Attorneys (States Attorneys, Private Attorney)
08	Other	17	Out-of-State CJS
No longer effective as of: 06-30-2007			

13	Detailed Criminal Justice Referral Categories	-	Referral Source
01	State/Federal Court	1	State/Federal Court
02	Other Court (Not State or Federal)	2	Other Court
03	Probation/Parole	3	Probation/Parole
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	4	Other Recognized Legal Entity
05	Diversionary Program (E.G. TASC)	5	Diversionary Program
06	Prison	6	Prison
07	DUI/DWI	7	DUI
08	Other	8	Other

Crosswalk Report

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Marital Status	-		Marital Status
01	Never Married	1		Never married
02	Now Married (includes those living together as married)	2		Married
05	Widowed	3		Widowed
04	Divorced	4		Divorced
03	Separated (legally seperated or otherwise absent becasue of marital discord))	5		Separated
02	Now Married (includes those living together as married)	6		Remarried
No longer effective as of: 07-01-2006				

14	Marital Status	-		Marital Status
01	Never Married	1		Never married
02	Now Married (includes those living together as married)	2		Married
05	Widowed	3		Widowed
04	Divorced	4		Divorced
03	Separated (legally seperated or otherwise absent becasue of marital discord))	5		Separated

15	Days Waiting to Enter Treatment	-		From Waiting List
				Calculated from screening date
000-996	Days		000-996	000-996

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
16	Number of Arrests in the 30 Days Prior to Admission	-	-	Not Collected
No longer effective as of: 06-30-2006				

Item No	Treatment Episode Data Set	Item	Value	State System Data
16	Number of Arrests in the 30 Days Prior to Admission	-	-	Number of Arrests (within 30 days preceding admission)

00-96	Number of Arrests	00	00
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00-96	Number of Arrests	01-96	01-96
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Item No	Treatment Episode Data Set	Item	Value	State System Data
17	Frequency of Attendance at Self-Help Programs in 30 days prior to Admission	-	-	Self-Help Group Detail (entered after Self Help Group)

01	No Attendance in past month	0	-	Self help group first answered 'No' or 'Refused'
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02	1-3 times in past month (less than once per week)	01-03	-	Self help group first answered 'yes'
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03	4-7 times in past month (about once per week)	04-07	-	Self help group first answered 'yes'
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04	8-15 times in past month (2 or 3 times per week)	08-15	-	Self help group first answered 'yes'
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05	16-30 times in past month (4 or more times per week)	16-30	-	Self help group first answered 'yes'
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97	Unknown	DK	-	Self Help Group answered 'Does Not Know
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06	Some Attendance in past month, but frequency unknown	Y-RF/DK	-	Self help group first answered 'yes' and Self Help Group answered 'Does Not Know
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Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	System Transaction at Discharge	-		System Transaction Type Added to Each Record
A	Add	A		Add
C	Change	C		Change
D	Delete	D		Delete
No longer effective as of: 06-30-2006				

1	System Transaction at Discharge	-		System Transaction Type Added to Each Record
A	Add	2		A Add
C	Change	3		C Change
D	Delete	4		D Delete

2	State Code at Discharge	IL		FIPS Code Added to Each Record
-	State abbreviation according postal codes	-		IL

3	Reporting Date at Discharge	-		Month and Year of Submission Added to Each Record
		MMYYYY		

4	Provider Identifier at Discharge	-		Provider Id At Discharge
No longer effective as of: 06-30-2006				

4	Provider Identifier at Discharge	NFR		National Facility Register
		6 characters		

Crosswalk Report

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
5	Client Identifier at Discharge	-		Client Identifier At Dicharge
No longer effective as of: 06-30-2006				

5 Client Identifier at Discharge **Client Id** **Generated Id or RIN**
Generated ID (for Clients before 7/1/2007) and Recipient ID (for clients after 6/30/2007)

6	Co-Dependent/Collateral at Discharge	-	Problem Area
2	No	1	Alcohol
2	No	2	Drugs
2	No	3	Both Alcohol and Drugs
1	Yes	4	Co-Dependence
2	No	5	None
2	No	6	Alchol/Drugs and Gambling
2	No	7	Gambling

6	Co-Dependent/Collateral at Discharge	-	Problem Area at Discharge
No longer effective as of: 06-30-2006			

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No Treatment Episode Data Set

Item

Value

State System Data

7	Type of Service at Discharge	SC	Setting Codes
03	Rehabilitation/Residential - Hospital	(SC) NOT=DX	Other Hospital Services
01	Detoxification, 24-Hour Service, Hospital Inpatient	(SC),DX	Hospital Detox
05	Rehabilitation/Residential - Long Term (More than 30 Days)	(SC),HH	Halfway House
05	Rehabilitation/Residential - Long Term (More than 30 Days)	(SC),LT	Long Term Residential
06	Ambulatory - Intensive -Outpatient	(SC),OR	Intensive Outpatient Rehab
07	Ambulatory -Non Intensive -Outpatient	(SC),PO	Outpatient
05	Rehabilitation/Residential - Long Term (More than 30 Days)	(SC),SN	Sanctuary
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)	(SC),ST	Short Term Residential

No longer effective as of: 06-30-2006

7	Type of Service at Discharge	SC	Setting Codes
02	Detoxification, 24-Hour Service, Free Standing Residential	DX	Detoxification
05	Rehabilitation/Residential - Long Term (More than 30 Days)	HH	Halfway House
07	Ambulatory -Non Intensive -Outpatient	OP	Level I (Outpatient)
06	Ambulatory - Intensive -Outpatient	OR	Level II (Intensive Outpatient)
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)	RR	Level III (Residential Rehabilitation)

8	Date of Last Contact	-	Date Of Last Contact
			MMDYYYYY

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
9	Date of Discharge	-		Date Of Discharge
			MMDDYYYY	
10	Reason for Discharge, Transfer, or Discontinuance of Treatment	-		Reason for Discharge/Closing
01	Treatment Completed	B		Completeion of Treatment Services
02	Left Against Professional Advice	C		Left against staff advice
03	Ternimated by Facility	D		Terminated by facility
04	Transferred to Another Substance Abuse Treatment Program or Facility	E		Transferred to another DASA facility
05	Incarerated	F		Incarcerated
06	Death	G		Death
14	Transferred to Another Substance Abuse Trtment Prog or Facil, but did not report	H		Completed level of care, but patient refused referral to other service.
No longer effective as of: 06-30-2011				

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Reason for Discharge, Transfer, or Discontinuance of Treatment	-		Reason for Discharge/Closing
01	Treatment Completed	B		Completeion of Treatment Services
02	Left Against Professional Advice	C		Left against staff advice
03	Terminated by Facility	D		Terminated by facility
05	Incarcerated	F		Incarcerated
06	Death	G		Death
14	Transferred to Another Substance Abuse Trtment Prog or Facil, but did not report	H		Completed level of care, but patient refused referral to other service.
04	Transferred to Another Substance Abuse Treatment Program or Facility	I		Transferred to another DASA facility. Non-completion of current level of care.
04	Transferred to Another Substance Abuse Treatment Program or Facility	J		Transferred to another DASA facility. Completion of current level of care.
04	Transferred to Another Substance Abuse Treatment Program or Facility	T		Transfer within the same provider. Completion of current level of care.
04	Transferred to Another Substance Abuse Treatment Program or Facility	U		Transfer within the same provider. Non-completion of current level of care.
11	Provider Identifier at Admission	-		Provider
-	Comes from admission file			
12	Client Identifier at Admission	-		Client's SSN
-	Comes from admission file			

Crosswalk Report

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
13	Co-Dependent/Collateral at Admission	-		Problem Area
-	Comes from admission file			
14	Client Transaction Type.	-		Services Dates
-	Comes from admission file			
15	Date of Admission.	-		Open Date
-	Comes from admission file			
16	Type of Service at Admission	PC, SC		Program Codes, Setting Codes
-	Comes from admission file			
17	Date of Birth.	-		Birth Date
-	Comes from admission file			
18	Sex.	-		Sex
-	Comes from admission file			

Crosswalk Report

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
19	Race.	-	Race	
-	Comes from admission file			
20	Ethnicity.	-	Part of Race	
-	Comes from admission file			

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	-		Substance Abused, Primary, Secondary, Tertiary
01	None	00		None
05	Heroin	A1		Heroin
06	Non-Prescription Methadone	A2		Non-Rx Methadone
07	Other Opiates and Synthetics	A3		Opioids and other synthetics
07	Other Opiates and Synthetics	A4		Prescription Opioids (Oxycontin, Darvon, Vicodin, Dilaudid, Demerol, Codeine etc
02	Alcohol	B1		Alcohol
12	Other Stimulants	C1		Nicotine (secondary choice only)
13	Benzodiazepines	D1		Benzodiazepines
15	Barbiturates	D2		Barbiturates
16	Other Non- Barbiturate Sedatives or Hypnotics	D3		Non-Barbiturate - sedatives/hypnotics other than benzodiazepines
14	Other Non-Benzodiazepine Tranquilizer	D4		Other Tranquilizers
13	Benzodiazepines	D5		Clonazepan (Klonopin, Rivotril)
11	Other Amphetamines	E1		Amphetamines
10	Methamphetamine	E2		Methamphetamine
03	Cocaine/Crack	E3		Cocaine
03	Cocaine/Crack	E4		Crack
12	Other Stimulants	E5		Other Stimulants
17	Inhalants	G1		Inhalants

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	-		Substance Abused, Primary, Secondary, Tertiary
04	Marijuana/Hashish	H1		Marijuana, Hashish, THC
09	Other Hallucinogens	I1		Other Hallucinogens (peyote, LSD, etc)
18	Over-The-Counter	J1		Over-the-Counter
20	Other	K1		Other
11	Other Amphetamines	L1		MDMA, Ecstasy
20	Other	L2		GHB/GBL
20	Other	L3		Ketamine (Special K)
13	Benzodiazepines	L4		Rohypnol (Flunitrazepam)
12	Other Stimulants	L5		Steriods
08	PCP	L6		PCP
20	Other	L7		Ephedrine/Pseudoephedrine
No longer effective as of: 06-30-2007				

21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	-		Substance Abused, Primary, Secondary, Tertiary
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- Same as codes in MDS14

22	Frequency of Use at Discharge (Primary, Secondary, Tertiary)	-		Frequency of Use
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- Sames as coodes in MDS16

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No Treatment Episode Data Set Item Value State System Data

22 Frequency of Use at Discharge - **Not Collected**
(Primary, Secondary, Tertiary)

No longer effective as of: 06-30-2006

23 Living Arrangements at Discharge - **Living Arrangement**

03 Independent Living 1 Independent Living

02 Dependent Living 2 Dependent Living

01 Homeless 3 Homeless

No longer effective as of: 06-30-2011

23 Living Arrangements at Discharge - **Living Arrangement**

- Codes same as in SUDS8

24 Employment at Discharge - **Employment Status**

01 Full Time A Full Time (35 hours or more per week)

02 Part Time B Part-Time (less than 35 hours per week)

04 Not in Labor Force C Employed, but not Working due to Extended Illness, Furlough or Strike

04 Not in Labor Force D Seasonal Worker

03 Unemployed E Unemployed

04 Not in Labor Force F Not in Labor Force (Homemaker, Student, Disabled, Retired, or Inmate)

No longer effective as of: 06-30-2007

Crosswalk Report

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
24	Employment at Discharge	-		Employment Status
	- Codes same as MDS 13			
25	Detailed Not In Labor Force at Discharge	-		Detailed not in labor force
	CURRENTLY NOT COLLECTED. WILL START COLLECTING BEGINNING 7/1/2007			
	- Codes same as SuDS 12			
	No longer effective as of: 06-30-2011			
25	Detailed Not In Labor Force at Discharge	-		Detailed not in labor force
	CURRENTLY NOT COLLECTED. WILL START COLLECTING BEGINNING 7/1/2007			
	- Codes same as SuDS 12			
26	Number of Arrests in 30 Days Prior to Discharge	-		Not Collected
	No longer effective as of: 06-30-2006			
26	Number of Arrests in 30 Days Prior to Discharge	-		Arrests 30 days prior to discharge
00-96	Number of Arrests	00		00
00-96	Number of Arrests	01-96		01-96

Illinois' Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
27	Frequency of Attendance at Self-Help program in the 30 Days Prior to Discharge	-		Self-Help Group Detail (entered after Self Help Group)
01	No Attendance in past month	0		Self help group first answered 'No' or 'Refused'
02	1-3 times in the past month (less than once per week)	01-03		Self help group first answered 'yes'
03	4-7 times in the past month (about once per week)	04-07		Self help group first answered 'yes'
04	8-15 times in the past month (2-3 times per week)	08-15		Self help group first answered 'yes'
05	16-30 times in past month (4 or more times per week)	16-30		Self help group first answered 'yes'
97	Unknown	DK		Self Help Group answered 'Does Not Know'
06	Some attendance, but frequency unknown	Y-RF/DK		Self help group first answered 'yes' and Self Help Group answered 'Does Not Know'

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report