

Crosswalk Management System

Report	REPORT CROSSWALK TO STATE
Filename	adobe PDF
Run by	OPS\$PCUMMING
Report Date	15-MAY-08 10:30

Crosswalk Report

Status : FN Substance Abuse and Mental Health Services Administration

Media ID : DMHSASCDC - OK Office of Applied Studies

Start Date : 01-JAN-90

End Date :

Follow-up :

Oklahoma's Treatment Episode Data Set

Version : 1

K = Key Field

System

Oklahoma

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	OK		FIPS Code Added To Each Record
3	Reporting Date	-		Month and Year of Submission Added to Each Record MMYYYY

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Oklahoma's Treatment Episode Data Set
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K = Key Field

Minimum

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 1	Provider Identifier	-	-	3
K 2	Client Identifier (Admission)	-	-	9 characters
	No longer effective as of: 02-21-2002			

K 2	Client Identifier (Admission)	Section I	Client Id - State Unique	
				9 characters

K 3	Co-Dependent/Collateral	-	Primary Referral	
	2 No		-	all other codes
	1 Yes		740	Co-Dependent
	1 Yes		744	Dependent Child of a SA Client in Treatment
	1 Yes		745	Dep Child of Alc Abuse Client
	1 Yes		746	Dep Child of Drug Abuse Client
	1 Yes		747	Dep Child of Drug Abuse Client
	1 Yes		748	Co-Dependent of an Alc Abuser
	1 Yes		749	Co-Dependent of an Drug Abuser
	1 Yes		750	Co-Dependent of an Poly-Abuser
	1 Yes		751	Family Member or Significant Other of an SA Client

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 3	Co-Dependent/Collateral	-		Presenting Problem
1	Yes		740,744	Presenting Problem Code Absent (not used since 6/30/1999)
1	Yes		745	Dependent Child of an Alcohol Abuse Client (not used since 6/30/1999)
1	Yes		746	Dependent Child of an Drug Abuse Client
1	Yes		747	Dependent Child of an Poly Abuse Client
1	Yes		748	Co-Dependent of an Alcohol Abuser
1	Yes		749	Co-Dependent of an Drug Abuser
1	Yes		750	Co-Dependent of an Poly Abuser
1	Yes		751	Family Member or Significant Other of an SA Client
No longer effective as of: 06-01-2007				

K 4	Client Transaction Type	-		Transaction Type
A	Admission		23	Admission
T	Transfer/Change in Service		40	Sublevel of Care Change
No longer effective as of: 06-30-2007				

K 4	Client Transaction Type	-		Transaction Type
A	Admission		23	Admission
T	Transfer/Change in Service		40	Level of Care Change

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 5	Date of Admission	-	Transaction Date MMDDYYYY	
6	Number of 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+

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	Section I	Primary Referral/Secondary Referral	
01	Individual (includes self-referral))	01	Self	
01	Individual (includes self-referral))	02	Significant Other	
04	School (Educational)	03	School	
06	Other Community Referral	04	Church/Clergy	
06	Other Community Referral	05	Group Home	
05	Employer/EAP	06	Employer, Union	
03	Other Health Care Provider	08	Non-Psychiatric Hospital	
03	Other Health Care Provider	09	VA Hospital	
03	Other Health Care Provider	10	Indian Health Services	
03	Other Health Care Provider	11	Department of Health	
07	Court/Criminal Justice/DUI/DWI	12	Department of Corrections	
06	Other Community Referral	14	Department of Human Services	
03	Other Health Care Provider	18	Nursing Home	
03	Other Health Care Provider	21	Pvt Psychiatric/MH Prof	
06	Other Community Referral	22	Social Security	
06	Other Community Referral	23	Attorney/Legal Aid	
07	Court/Criminal Justice/DUI/DWI	25	Law enforcement	
06	Other Community Referral	26	Reachout Hot-Line/Advertising Media	

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	Section I	Primary Referral/Secondary Referral	
06	Other Community Referral		30	Shelter for Homeless
97	Unknown		31	Additional Services Recommended, Referral not Obtainable
07	Court/Criminal Justice/DUI/DWI		32	Court
07	Court/Criminal Justice/DUI/DWI		33	Probation
07	Court/Criminal Justice/DUI/DWI		34	Parole
06	Other Community Referral		35	Department of Public Safety
03	Other Health Care Provider		37	Private Physician
03	Other Health Care Provider		38	HMO/MCO
98	Not Collected		39	Change in pay source
03	Other Health Care Provider		40	DMHSAS funded facility
03	Other Health Care Provider		41	Non-DMHSAS funded Psychiatric Hospital
03	Other Health Care Provider		42	Non-DMHSAS funded Mental Health Center
06	Other Community Referral		43	Non-DMHSAS funded Community Agency
03	Other Health Care Provider		44	Non-DMHSAS funded Residential Care Home
02	Alcohol/Drug Abuse Provider		45	Non-DMHSAS funded Alcohol/Drug Program
06	Other Community Referral		46	Non-DMHSAS funded Domestic Violence Facility
03	Other Health Care Provider		47	Non-DMHSAS funded Crisis/Stablization Facility
07	Court/Criminal Justice/DUI/DWI		48	Office if Juvenile Affairs

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Item No Treatment Episode Data Set

Item

Value

State System Data

7	Principal Source of Referral	Section I	Primary Referral/Secondary Referral
06	Other Community Referral	49	TANF
06	Other Community Referral	50	Change in Eligibility Standards
06	Other Community Referral	51	Self Help Group

No longer effective as of: 06-30-2007

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	Section I	Primary Referral/Secondary Referral	
01	Individual (includes self-referral))	01	Self	
01	Individual (includes self-referral))	02	Significant Other	
04	School (Educational)	03	School	
06	Other Community Referral	04	Church/Clergy	
06	Other Community Referral	05	Group Home	
05	Employer/EAP	06	Employer, Union	
03	Other Health Care Provider	08	Non-Psychiatric Hospital	
03	Other Health Care Provider	09	VA Hospital	
03	Other Health Care Provider	10	Indian Health Services	
03	Other Health Care Provider	11	Department of Health	
07	Court/Criminal Justice/DUI/DWI	12	Department of Corrections	
06	Other Community Referral	14	Department of Human Services	
03	Other Health Care Provider	18	Nursing Home	
03	Other Health Care Provider	21	Pvt Psychiatric/MH Prof	
06	Other Community Referral	22	Social Security	
06	Other Community Referral	23	Attorney/Legal Aid	
07	Court/Criminal Justice/DUI/DWI	25	Law enforcement	
06	Other Community Referral	26	Reachout Hot-Line/Advertising Media	

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	Section I	Primary Referral/Secondary Referral	
06	Other Community Referral		30	Shelter for Homeless
97	Unknown		31	Additional Services Recommended, Referral not Obtainable
07	Court/Criminal Justice/DUI/DWI		32	Court
07	Court/Criminal Justice/DUI/DWI		33	Probation
07	Court/Criminal Justice/DUI/DWI		34	Parole
06	Other Community Referral		35	Department of Public Safety
03	Other Health Care Provider		37	Private Physician
03	Other Health Care Provider		38	HMO/MCO
03	Other Health Care Provider		40	DMHSAS funded facility
03	Other Health Care Provider		41	Non-DMHSAS funded Psychiatric Hospital
03	Other Health Care Provider		42	Non-DMHSAS funded Mental Health Center
06	Other Community Referral		43	Non-DMHSAS funded Community Agency
03	Other Health Care Provider		44	Non-DMHSAS funded Residential Care Home
02	Alcohol/Drug Abuse Provider		45	Non-DMHSAS funded Alcohol/Drug Program
06	Other Community Referral		46	Non-DMHSAS funded Domestic Violence Facility
03	Other Health Care Provider		47	Non-DMHSAS funded Crisis/Stablization Facility
07	Court/Criminal Justice/DUI/DWI		48	Office if Juvenile Affairs
06	Other Community Referral		49	TANF

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	Section I	Primary Referral/Secondary Referral	
06	Other Community Referral		50	Change in Eligibility Standards
06	Other Community Referral		51	Self Help Group

8	Date of Birth	-	-	
No longer effective as of: 02-21-2002				

8	Date of Birth	Section I	Birth Year	
				MMDDYYYY

9	Sex	-	-	3rd character of state client ID
2	Female		F	Female
1	Male		M	Male

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Item No Treatment Episode Data Set

Item

Value

State System Data

10	Race	Section I	Client Race/Ethnicity.
02	American Indian (Other than Alaskan Native)	1	American Indian
03	Asian or Pacific Islander	1	Asian
04	Black or African American	1	Black
05	White	1	White
21	Two or More Races	1	Two or more races
23	Native Hawaiians or Other Pacific Islanders	1	Native Hawaiian or Pacific Islander
No longer effective as of: 06-30-2007			

10	Race	Section I	Client Race/Ethnicity.
02	American Indian (Other than Alaskan Native)	1	American Indian
03	Asian or Pacific Islander	1	Asian
04	Black or African American	1	Black/African American
05	White	1	White
21	Two or More Races	1	Two or more races
23	Native Hawaiians or Other Pacific Islanders	1	Native Hawaiian or Pacific Islander

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Item No Treatment Episode Data Set

Item

Value

State System Data

11	Ethnicity	Section I	Client Race/Ethnicity.
06	Hispanic - Specific Origin not Specified	1	Hispanic
05	Not of Hispanic Origin	Blank	Non-Hispanic
No longer effective as of: 06-30-2004			

11	Ethnicity	Section I	Client Race/Ethnicity.
06	Hispanic - Specific Origin not Specified	1	Hispanic/Latino
05	Not of Hispanic Origin	2	Non-Hispanic/Latino

12	Education	Section III	Education - (Highest Grade Completed)
00	Less Than One Grade Completed	00	0 Years of Education Completed
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	01-11	1-11 Years of School Completed
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	12	High School Graduate/GED
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	13-16	Number of Post High School Years Completed
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	99	GED
97	Unknown	Blank	Unknown
No longer effective as of: 06-01-2007			

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Item No	Treatment Episode Data Set	Item	Value	State System Data
12	Education	Section III	Education - (Highest Grade Completed)	
00	Less Than One Grade Completed	0	Less than one grade completed	
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	01-25	Years completed	

13	Employment Status	-	Employment
01	Full Time	1	Full Time
02	Part Time	2	Part Time
03	Unemployed	3	Unemployed
04	Not in Labor Force	4	Retired

No longer effective as of: 02-21-2002

13	Employment Status	Section II	Employment.
01	Full Time	1	Full-time
02	Part Time	2	Part-time
03	Unemployed	3	Unemployed
04	Not in Labor Force	4	Not in labor force

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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)	Section III		Drugs of Choice
01	None		01	None
02	Alcohol		02	Alcohol
05	Heroin		03	Heroin
06	Non-Prescription Methadone		04	Non-RX Methadone
07	Other Opiates and Synthetics		05	Other Opiates & Synectics
15	Barbiturates		06	Barbituates
16	Other Non-Barbituate Sedatives or Hypnotics		07	Other Sediatives/Hypnotics
11	Other Amphetamines		08	Amphetamines
03	Cocaine, Crack		09	Cocaine
04	Marijuana, Hashish (includes THC and other Cannabis Sativa preperations)		10	Marijuana/Hashish
09	Other Hallucinogens		11	Other Hallucinogens
17	Inhalants		12	Inhalants
18	Over-the-Counter		13	Over-the-counter
14	Other Non-Benzodiazapine Tranquilizers		14	Tranquilizers
08	PCP		15	PCP
20	Other		16	Other
97	Unknown		17	Unknown
20	Other		18	Methamphetamines

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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)	Section III	Drugs of Choice
13	Benzodiazepines		19 Benzodiazepine
12	Other Stimulants		20 Other Stimulants

No longer effective as of: 06-30-2004

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K = Key Field

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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)	Section III	Drugs of Choice	
01	None	01	None	
02	Alcohol	02	Alcohol	
05	Heroin	03	Heroin	
06	Non-Prescription Methadone	04	Non-RX Methadone	
07	Other Opiates and Synthetics	05	Other Opiates & Synectics	
15	Barbiturates	06	Barbituates	
16	Other Non-Barbituate Sedatives or Hypnotics	07	Other Sediatives/Hypnotics	
11	Other Amphetamines	08	Amphetamines	
03	Cocaine, Crack	09	Cocaine	
04	Marijuana, Hashish (includes THC and other Cannabis Sativa preperations)	10	Marijuana/Hashish	
09	Other Hallucinogens	11	Other Hallucinogens	
17	Inhalants	12	Inhalants	
18	Over-the-Counter	13	Over-the-counter	
14	Other Non-Benzodiazapine Tranquilizers	14	Tranquilizers	
08	PCP	15	PCP	
20	Other	16	Other	
97	Unknown	17	Unknown	
20	Other	18	Methamphetamines	

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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)	Section III		Drugs of Choice
13	Benzodiazepines		19	Benzodiazepine
12	Other Stimulants		20	Other Stimulants
20	Other		21	Club Drugs

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

No longer effective as of: 02-21-2002

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Item No	Treatment Episode Data Set	Item	Value	State System Data
15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiari-15C)	Section III		Usual Route of Administration.
01	Oral		1	Oral
02	Smoking		2	Smoking
03	Inhalation		3	Inhalation
04	Injection (IV or intramuscular)		4	Injection
20	Other		5	Other

16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	-		Frequency of Use
01	No use in the past month		1	No Past Month Use
02	1-3 times in past month		2	1-3 Times In Past Month
03	1-2 times per week		3	1-2 Times Per Week
04	3-6 times per week		4	3-6 Times Per Week
05	Daily		5	Daily

No longer effective as of: 02-21-2002

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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)	Section III	Frequency of Use.	
01	No use in the past month		1	No Past Month Use
02	1-3 times in past month		2	1-3 Times/Month
03	1-2 times per week		3	1-2 Times/Week
04	3-6 times per week		4	3-6 Times/Week
05	Daily		5	Daily

17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	-	Age At First Use/Intoxication
No longer effective as of: 02-21-2002			

17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	Section III	Age First Used
01-95	Indicates The Age at First Use		01-95 00-99

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	-		Services Sheet
03	Rehabilitation/Residential - Hospital (other than detox)		001A	Inpatient
01	Detoxification - Hospital Inpatient (Detox, 24 hour Service)		001B	Medical Dextofication
03	Rehabilitation/Residential - Hospital (other than detox)		001C	Acute Medical Care
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002A	Residential Substance Abuse Treatment
02	Detoxification Free-standing Residential (Detox, 24 hour Service)		002B	Medically Supervised Detoxification
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002C	Non Medical Detoxification (Social Detox)
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002D	Adolescent Group Home
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002E	Residential Treatment- Acute
05	Rehabilitation/Residential - Long-term, (more than 30 days)		002F	Residential Treatment - Long Term
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003B	Half-Way House
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003C	Independent Living
06	Ambulatory - Intensive Outpatient		004C	Day School - 6 Hours
07	Ambulatory - Non-Intensive Outpatient		130	Individual/Counseling/Therapy
07	Ambulatory - Non-Intensive Outpatient		131	Group Counseling/Therapy
07	Ambulatory - Non-Intensive Outpatient		430	Day Treatment (3 Hours At Least 2 Days Per Week)
07	Ambulatory - Non-Intensive Outpatient		431	Psycho-Social Treatment
No longer effective as of: 06-30-2003				

Oklahoma's Treatment Episode Data Set
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Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	-	Services Sheet	
HIPAA Code + Modifiers				
03	Rehabilitation/Residential - Hospital (other than detox)		001A	Inpatient
01	Detoxification - Hospital Inpatient (Detox, 24 hour Service)		001B	Medical Dextofication
03	Rehabilitation/Residential - Hospital (other than detox)		001C	Acute Medical Care
03	Rehabilitation/Residential - Hospital (other than detox)		001D	Acute Inpatient
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002A	Residential Substance Abuse Treatment
02	Detoxification Free-standing Residential (Detox, 24 hour Service)		002B	Medically Supervised Detoxification
08	Ambulatory Detoxification		002C	Non Medical Detoxification (Social Detox)
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002D	Adolescent Group Home
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002E	Residential Treatment- Acute
05	Rehabilitation/Residential - Long-term, (more than 30 days)		002F	Residential Treatment - Long Term
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002G	Residential Treatment for Adolscents
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002H	Residential Treatment-Women with Children
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002J	Residential Treatment for Dually Diagnosed
02	Detoxification Free-standing Residential (Detox, 24 hour Service)		002K	Non-Medically Detox.-Preg Women and Women with Dependent Childrens
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002M	Services to Dependent Childen of SA res. Treatment
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002N	Intensive Residential SA Treatment
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		002S	Residential Treatment - Mental Health
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003A	Halfway House Services - Pregnant & Post Partum Women

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	-	Services Sheet	
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003B	Half-Way House
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003C	Independent Living
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003D	Community Lodge Program
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003E	Supervised Housing
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003H	Residential Shelter for Dependents
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003K	Residential Care
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003M	Services Dep. Children of Substance Abusers in Halfway
04	Rehabilitation/Residential - Short-term, (30 days or fewer)		003N	Services Dep. Children of Substance Abusers in Res. Tx.
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003S	Halfway House Services for Women with Dep. Children
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003T	Halfway House Services for Dually Diagnosed
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003V	Permanent Congregate Housing for Onsite Support
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003Y	Halfway House services for Adolescents
05	Rehabilitation/Residential - Long-term, (more than 30 days)		003Z	Permanent Congregate Housing
06	Ambulatory - Intensive Outpatient		004C	Day School - 6 Hours
07	Ambulatory - Non-Intensive Outpatient		130	Individual/Counseling/Therapy
07	Ambulatory - Non-Intensive Outpatient		131	Group Counseling/Therapy
07	Ambulatory - Non-Intensive Outpatient		132	Family Marital Counseling
07	Ambulatory - Non-Intensive Outpatient		135	Individual Counseling MH Professional
07	Ambulatory - Non-Intensive Outpatient		136	Group Counseling MH Professional

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	-		Services Sheet
07	Ambulatory - Non-Intensive Outpatient		137	Family /Medical Counseling - MH Professional
07	Ambulatory - Non-Intensive Outpatient		138	Institution Based Substance Abuse Screening
07	Ambulatory - Non-Intensive Outpatient		202	Socialization
07	Ambulatory - Non-Intensive Outpatient		211	SA Dx/ Problem Related Education
07	Ambulatory - Non-Intensive Outpatient		212	Case Management Services
07	Ambulatory - Non-Intensive Outpatient		213	Intensive Case Management
07	Ambulatory - Non-Intensive Outpatient		214	Assertive Community Treatment
07	Ambulatory - Non-Intensive Outpatient		215	Rehab Services
07	Ambulatory - Non-Intensive Outpatient		216	Individual Rehabilitative Treatment
07	Ambulatory - Non-Intensive Outpatient		217	Group Rehabilitative Treatment
07	Ambulatory - Non-Intensive Outpatient		218	Dx (or Presenting Problem) Related Educational Individual
07	Ambulatory - Non-Intensive Outpatient		219	Dx (or Presenting Problem) Related Educational Group
07	Ambulatory - Non-Intensive Outpatient		224	SA Dx. Problem Related Education (Family)
07	Ambulatory - Non-Intensive Outpatient		225	Case Management
07	Ambulatory - Non-Intensive Outpatient		241	Peer Counseling
07	Ambulatory - Non-Intensive Outpatient		243	Employment Training
07	Ambulatory - Non-Intensive Outpatient		244	Vocational Services
07	Ambulatory - Non-Intensive Outpatient		245	Pre-Vocational Services
07	Ambulatory - Non-Intensive Outpatient		300	Treatment Plan Review

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	-		Services Sheet
07	Ambulatory - Non-Intensive Outpatient		301	Laboratory
07	Ambulatory - Non-Intensive Outpatient		304	Pharmacological Management
07	Ambulatory - Non-Intensive Outpatient		305	Medical Review
07	Ambulatory - Non-Intensive Outpatient		400	Treatment Planning
07	Ambulatory - Non-Intensive Outpatient		430	Day Treatment (3 Hours At Least 2 Days Per Week)
07	Ambulatory - Non-Intensive Outpatient		431	Psycho-Social Treatment
06	Ambulatory - Intensive Outpatient		432	Intensive Outpatient Substance Abuse Services
06	Ambulatory - Intensive Outpatient		433	Intensive Outpatient Services Individual - SA
06	Ambulatory - Intensive Outpatient		434	Intensive Outpatient Services - Group SA
07	Ambulatory - Non-Intensive Outpatient		560	SA Early Intervention
19	Opioid Replacement Therapy (Planned/ Actual) Was -Use of Methadone Planned/Actual	-		Agency Code
2	No		-	All other codes
1	Yes		928	Agency

Crosswalk Report

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	-	Not Collected	
2	Detail Drug Code, Secondary	-	Not Collected	
3	Detail Drug Code, Tertiary	-	Not Collected	
4	DSM Diagnosis	-	ICD-9 codes	
	No longer effective as of: 06-30-2007			
4	DSM Diagnosis	-	Axis1Prim	
5	Psychiatric Problem in Addition to Alcohol or Drug Problem	-	Diagnosis/Presenting Problem	
1	Yes	-	Non -AOD diagnoses or presenting problem (500-650)	
	No longer effective as of: 06-30-2007			
5	Psychiatric Problem in Addition to Alcohol or Drug Problem	-	Diagnosis/Presenting Problem	
1	Yes	-	Non -AOD diagnoses or presenting problem (500-650)	
2	No	-	All others	

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Oklahoma

Item No Treatment Episode Data Set Item Value State System Data

6	Pregnant at Time of Admission	Section II	Is Client Pregnant?
2	No		0 Not Pregnant
1	Yes		1-9 Months Pregnant
No longer effective as of: 09-09-2003			

6	Pregnant at Time of Admission	Section II	Is Client Pregnant?
2	No		0 Not Pregnant
1	Yes		1-9 Months Pregnant
6	Not Applicable		6 sex=male

7	Veteran Status	-	Military Status
2	No		1 Never Served
2	No		2 Active
2	No		3 Reserves
1	Yes		4 Veteran
1	Yes		5 Retired/Disabled
No longer effective as of: 02-21-2002			

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Veteran Status	Section III	Veteran Status	
1	Yes		1	Yes
2	No		2	No

8	Living Arrangements	Section II	Current Residence:
03	Independent Living		1 Private Residence
01	Homeless		2 On the Street
02	Dependent Living		3 Residential Care Home
02	Dependent Living		4 Institutional Setting
02	Dependent Living		5 Nursing Home
01	Homeless		6 Community Shelter
02	Dependent Living		7 Supported Living

No longer effective as of: 06-30-2007

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
8	Living Arrangements	Section II	Current Residence:	
03	Independent Living	A	Permanent Housing	
03	Independent Living	B	Perm Sup Hou-Non-Cong	
02	Dependent Living	C	Perm Sup Hou-Cong	
02	Dependent Living	D	Transitional Housing	
03	Independent Living	E	Temporary Housing	
02	Dependent Living	F	RC Facility/Group Home	
02	Dependent Living	G	Nursing Home	
02	Dependent Living	H	Institutional Setting	
01	Homeless	J	Homeless-Street	
01	Homeless	i	Homeless-Shelter	

9 Source of Income/Support - Not Collected

10	Health Insurance	Section I	Insurance
03	Medicare	1	Yes
04	Medicaid	1	Yes
98	Not Collected	Blank	Unknown

No longer effective as of: 06-30-2007

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Health Insurance	Section	Insurance	
			Not Collected	
03	Medicare	1	Medicare	
04	Medicaid	1	Medicaid	
98	Not Collected	Blank	Unknown	

11	Expected/Actual Primary Source of Payment	-	Expected Source Of Payment
08	No Charge (Free, Charity, Special Research or Teaching)	0	None (Charity)
01	Self-Pay	1	Self Pay
07	Other Health Insurance Companies	2	Private Health Insurance
07	Other Health Insurance Companies	3	Health Maint Organization (HMO) Employers Assistance Program (EAP)
03	Medicare	4	Medicare
04	Medicaid	5	Medicaid
07	Other Health Insurance Companies	6	VA
05	Other Government Payments	7	CHAMPUS
06	Worker's Compensation	8	Worker's Compensation
05	Other Government Payments	9	Other Public Resources

No longer effective as of: 02-21-2002

11	Expected/Actual Primary Source of Payment	-	Not Collected
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Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Oklahoma

Item No Treatment Episode Data Set Item Value State System Data

12	Detailed Not in Labor Force	-	Not Collected
No longer effective as of: 06-30-2006			

12	Detailed Not in Labor Force	-	Type of Employment/Not in Labor Force
01	Homemaker	A	Homemaker
02	Student	B	Student
03	Retired	C	Retired
04	Disabled	D	Disabled
05	Inmate of Institution (Prison or Institution - keeps people out of work force)	E	Inmate of Institution
06	Other	F	Other

13	Detailed Criminal Justice Referral Categories	-	Primary Referral
06	Prison	12	Department of Corrections
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	25	Law Enforcement
01	State/Federal Court	32	Court
03	Probation/Parole	33	Probation
03	Probation/Parole	34	Parole
07	DUI/DWI	35	Dept opf Public Safety
04	Other Recognized Legal Entity (Local Law, Corr. Agency, Youth Ser., Review Board	48	Office of Juvenile Affairs

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Oklahoma

Item No Treatment Episode Data Set Item Value State System Data

13	Detailed Criminal Justice Referral Categories	-	Not Collected
No longer effective as of: 06-30-2003			

14	Marital Status	-	Marital Status
01	Never Married	1	Not Married
02	Now Married (includes those living together as married)	2	Married
04	Divorced	3	Divorced
05	Widowed	4	Widowed
02	Now Married (includes those living together as married)	5	Living As Married
03	Separated (legally seperated or otherwise absent becasue of marital discord))	6	Seperated
No longer effective as of: 02-21-2002			

14	Marital Status	Section II	Marital Status.
01	Never Married	1	Never Married
02	Now Married (includes those living together as married)	2	Married
04	Divorced	3	Divorced
05	Widowed	4	Widowed
02	Now Married (includes those living together as married)	5	Living as Married
03	Separated (legally seperated or otherwise absent becasue of marital discord))	6	Seperated

Crosswalk Report

Oklahoma's Treatment Episode Data Set
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K = Key Field

Optional

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
15	Days Waiting to Enter Treatment	-	Not Collected	
16	Number of Arrests in the 30 Days Prior to Admission	-	Arrested 30 Days	
	00- Number of Arrests 96		00	None
	00- Number of Arrests 96		01-96	01-99

Crosswalk Report

Oklahoma's Treatment Episode Data Set
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K = Key Field

Discharge/NOMS

Oklahoma

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	
2	State Code at Discharge	OK	FIPS Code Added To Each Record	
3	Reporting Date at Discharge	-	Month and Year of Submission Added to Each Record	
4	Provider Identifier at Discharge	-	Provider ID at Discharge	
		3		
5	Client Identifier at Discharge	-	Client ID at Discharge	
		9		
	No longer effective as of: 02-21-2002			
5	Client Identifier at Discharge	Section I	Client Id - State Unique	
		9		

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
6	Co-Dependent/Collateral at Discharge	-	Primary Referral	
2	No	-	all other codes	
1	Yes	740	Co-Dependent	
1	Yes	744	Dependent Child of a SA Client in Treatment	
1	Yes	745	Dep Child of Alc Abuse Client	
1	Yes	746	Dep Child of Drug Abuse Client	
1	Yes	747	Dep Child of Drug Abuse Client	
1	Yes	748	Co-Dependent of an Alc Abuser	
1	Yes	749	Co-Dependent of an Drug Abuser	
1	Yes	750	Co-Dependent of an Poly-Abuser	
1	Yes	751	Family Member or Significant Other of an SA Client	

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No Treatment Episode Data Set

Item

Value

State System Data

6	Co-Dependent/Collateral at Discharge	-	Presenting Problem
2	No	-	All other codes
1	Yes	740,7 44	Presenting Problem Code Absent (not used since 6/30/1999)
1	Yes	745	Dependent Child of an Alcohol Abuse Client (not used since 6/30/1999)
1	Yes	746	Dependent Child of an Drug Abuse Client
1	Yes	747	Dependent Child of an Poly Abuse Client
1	Yes	748	Co-Dependent of an Alcohol Abuser
1	Yes	749	Co-Dependent of an Drug Abuser
1	Yes	750	Co-Dependent of an Poly Abuser
1	Yes	751	Family Member or Significant Other of an SA Client

No longer effective as of: 06-30-2007

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Type of Service at Discharge	-	Services Sheet	
HIPAA Code + Modifiers				
03	Rehabilitation/Residential - Hospital		001A	Inpatient
01	Detoxification, 24-Hour Service, Hospital Inpatient		001B	Medical Dextofication
03	Rehabilitation/Residential - Hospital		001C	Acute Medical Care
03	Rehabilitation/Residential - Hospital		001D	Acute Inpatient
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002A	Residential Substance Abuse Treatment
02	Detoxification, 24-Hour Service, Free Standing Residential		002B	Medically Supervised Detoxification
08	Ambulatory Detoxification		002C	Non Medical Detoxification (Social Detox)
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002D	Adolescent Group Home
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002E	Residential Treatment- Acute
05	Rehabilitation/Residential - Long Term (More than 30 Days)		002F	Residential Treatment - Long Term
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002G	Residential Treatment for Adolscents
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002H	Residential Treatment-Women with Children
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002J	Residential Treatment for Dually Diagnosed
02	Detoxification, 24-Hour Service, Free Standing Residential		002K	Non-Medically Detox.-Preg Women and Women with Dependent Childrens
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002M	Services to Dependent Childen of SA res. Treatment
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002N	Intensive Residential SA Treatment
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002S	Residential Treatment - Mental Health
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003A	Halfway House Services - Pregnant & Post Partum Women

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Type of Service at Discharge	-	Services Sheet	
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003B	Half-Way House
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003C	Independent Living
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003D	Community Lodge Program
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003E	Supervised Housing
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003H	Residential Shelter for Dependents
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003K	Residential Care
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003M	Services Dep. Children of Substance Abusers in Halfway
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		003N	Services Dep. Children of Substance Abusers in Res. Tx.
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003S	Halfway House Services for Women with Dep. Children
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003T	Halfway House Services for Dually Diagnosed
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003V	Permanent Congregate Housing for Onsite Support
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003Y	Halfway House services for Adolescents
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003Z	Permanent Congregate Housing
06	Ambulatory - Intensive - Outpatient		004C	Day School - 6 Hours
07	Ambulatory -Non Intensive - Outpatient		130	Individual/Counseling/Therapy
07	Ambulatory -Non Intensive - Outpatient		131	Group Counseling/Therapy
07	Ambulatory -Non Intensive - Outpatient		132	Family Marital Counseling
07	Ambulatory -Non Intensive - Outpatient		135	Individual Counseling MH Professional
07	Ambulatory -Non Intensive - Outpatient		136	Group Counseling MH Professional

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K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Type of Service at Discharge	-		Services Sheet
07	Ambulatory -Non Intensive - Outpatient		137	Family /Medical Counseling - MH Professional
07	Ambulatory -Non Intensive - Outpatient		138	Institution Based Substance Abuse Screening
07	Ambulatory -Non Intensive - Outpatient		202	Socialization
07	Ambulatory -Non Intensive - Outpatient		211	SA Dx/ Problem Related Education
07	Ambulatory -Non Intensive - Outpatient		212	Case Management Services
07	Ambulatory -Non Intensive - Outpatient		213	Intensive Case Management
07	Ambulatory -Non Intensive - Outpatient		214	Assertive Community Treatment
07	Ambulatory -Non Intensive - Outpatient		215	Rehab Services
07	Ambulatory -Non Intensive - Outpatient		216	Individual Rehabilitative Treatment
07	Ambulatory -Non Intensive - Outpatient		217	Group Rehabilitative Treatment
07	Ambulatory -Non Intensive - Outpatient		218	Dx (or Presenting Problem) Related Educational Individual
07	Ambulatory -Non Intensive - Outpatient		219	Dx (or Presenting Problem) Related Educational Group
07	Ambulatory -Non Intensive - Outpatient		224	SA Dx. Problem Related Education (Family)
07	Ambulatory -Non Intensive - Outpatient		225	Case Management
07	Ambulatory -Non Intensive - Outpatient		241	Peer Counseling
07	Ambulatory -Non Intensive - Outpatient		243	Employment Training
07	Ambulatory -Non Intensive - Outpatient		244	Vocational Services
07	Ambulatory -Non Intensive - Outpatient		245	Pre-Vocational Services
07	Ambulatory -Non Intensive - Outpatient		300	Treatment Plan Review

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K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Type of Service at Discharge	-		Services Sheet
07	Ambulatory -Non Intensive - Outpatient		301	Laboratory
07	Ambulatory -Non Intensive - Outpatient		304	Pharmacological Management
07	Ambulatory -Non Intensive - Outpatient		305	Medical Review
07	Ambulatory -Non Intensive - Outpatient		400	Treatment Planning
07	Ambulatory -Non Intensive - Outpatient		430	Day Treatment (3 Hours At Least 2 Days Per Week)
07	Ambulatory -Non Intensive - Outpatient		431	Psycho-Social Treatment
06	Ambulatory - Intensive - Outpatient		432	Intensive Outpatient Substance Abuse Services
06	Ambulatory - Intensive - Outpatient		433	Intensive Outpatient Services Individual - SA
06	Ambulatory - Intensive - Outpatient		434	Intensive Outpatient Services - Group SA
07	Ambulatory -Non Intensive - Outpatient		560	SA Early Intervention

Oklahoma's Treatment Episode Data Set

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K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Type of Service at Discharge	-	Services	
03	Rehabilitation/Residential - Hospital		001A	Inpatient
01	Detoxification, 24-Hour Service, Hospital Inpatient		001B	Medical Dextofication
03	Rehabilitation/Residential - Hospital		001C	Acute Medical Care
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002A	Residential Substance Abuse Treatment
02	Detoxification, 24-Hour Service, Free Standing Residential		002B	Medically Supervised Detoxification
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002C	Non Medical Detoxification (Social Detox)
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002D	Adolescent Group Home
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002E	Residential Treatment- Acute
05	Rehabilitation/Residential - Long Term (More than 30 Days)		002F	Residential Treatment - Long Term
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002G	Residential Treatment - Adolscents
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		002H	Residential Treatment - womenw/dep children
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003B	Half-Way House
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003C	Independent Living
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003J	Sponsored Housing Program
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003K	Residentail Care
04	Rehabilitation/Residential - Short Term (30 Days or Fewer)		003N	Serv. to dep. child of SA in residential tx
05	Rehabilitation/Residential - Long Term (More than 30 Days)		003Y	1/2way house services for -adolscents
05	Rehabilitation/Residential - Long Term (More than 30 Days)		004C	Day School - 6 Hours

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K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Type of Service at Discharge	-		Services
07	Ambulatory -Non Intensive - Outpatient		121	outpat crisis intervention - face to face
07	Ambulatory -Non Intensive - Outpatient		123	Mobile Crisis Service
07	Ambulatory -Non Intensive - Outpatient		130	Individual/Counseling/Therapy
07	Ambulatory -Non Intensive - Outpatient		131	Group Counseling/Therapy
07	Ambulatory -Non Intensive - Outpatient		202	Socialization
07	Ambulatory -Non Intensive - Outpatient		203	Client Education
07	Ambulatory -Non Intensive - Outpatient		207	Home-bases services
07	Ambulatory -Non Intensive - Outpatient		211	SA Dx/Probelm related Education
07	Ambulatory -Non Intensive - Outpatient		213	Intensive case management
07	Ambulatory -Non Intensive - Outpatient		215	Rehab Services
07	Ambulatory -Non Intensive - Outpatient		223	Other adjunctive services
07	Ambulatory -Non Intensive - Outpatient		304	Pharmacological management
07	Ambulatory -Non Intensive - Outpatient		305	Medical Review
07	Ambulatory -Non Intensive - Outpatient		430	Day Treatment (3 Hours At Least 2 Days Per Week)
07	Ambulatory -Non Intensive - Outpatient		431	Psycho-Social Treatment
06	Ambulatory - Intensive - Outpatient		432	Intensive outpatient
No longer effective as of: 06-30-2003				

8	Date of Last Contact	-	Last Service Date
			MMDDYYYY

Crosswalk Report

Oklahoma's Treatment Episode Data Set
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K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
9	Date of Discharge	-	Transaction Date MMDDYYYY	
10	Reason for Discharge, Transfer, or Discontinuance of Treatment	-	Transaction Type	
01	Treatment Completed		60	Completed Treatment
01	Treatment Completed		61	Completed Court Treatment
02	Left Against Professional Advice		62	Left ACA/90 Days No Contact
07	Other		63	Moved
04	Transferred to Another Substance Abuse Treatment Program or Facility		64	Transferred to Another Facility
05	Incarerated		65	Incarcerated
03	Ternimated by Facility		66	Broke Rules
02	Left Against Professional Advice		67	AWOL
06	Death		68	Death
02	Left Against Professional Advice		69	Failed to Begin Treatment
07	Other		70	Treatment Incompatilby
07	Other		91	Admistrative Discharge - Agency Closed
02	Left Against Professional Advice		92	Admistrative Discharge - Client not seen in 180 days

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No Treatment Episode Data Set Item Value State System Data

10 Reason for Discharge, Transfer, or Discontinuance of Treatment - Reason for Discharge

01 Treatment Completed

03 Terminated by Facility

04 Transferred to Another Substance Abuse Treatment Program or Facility

06 Death

07 Other

07 Other

No longer effective as of: 06-30-1999

11 Provider Identifier at Admission - -

- Comes from admission file

12 Client Identifier at Admission Section I Client Id - State Unique

- Comes from admission file

13 Co-Dependent/Collateral at Admission - Reason For Contact

- Comes from admission file

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Client Transaction Type.	-	Transaction Type	
	- Comes from admission file			
15	Date of Admission.	-	Transaction Date	
	- Comes from admission file			
16	Type of Service at Admission	-	Services Sheet	
	- Comes from admission file			
17	Date of Birth.	Section I	Birth Year	
	- Comes from admission file			
18	Sex.	-	-	
	- Comes from admission file			
19	Race.	Section I	Client Race/Ethnicity.	
	- Comes from admission file			

Crosswalk Report

Oklahoma's Treatment Episode Data Set
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K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
20	Ethnicity.	Section I	Client Race/Ethnicity.	

- Comes from admission file

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	Section III	Drugs of Choice	
01	None	01	None	
02	Alcohol	02	Alcohol	
05	Heroin	03	Heroin	
06	Non-Prescription Methadone	04	Non-RX Methadone	
07	Other Opiates and Synthetics	05	Other Opiates & Synectics	
15	Barbiturates	06	Barbituates	
16	Other Non- Barbiturate Sedatives or Hypontics	07	Other Sediatives/Hypnotics	
11	Other Amphetamines	08	Amphetamines	
03	Cocaine/Crack	09	Cocaine	
04	Marijuana/Hashish	10	Marijuana/Hashish	
09	Other Hallucinogens	11	Other Hallucinogens	
17	Inhalants	12	Inhalants	
18	Over-The-Counter	13	Over-the-counter	
14	Other Non-Benzodiazepine Tranquilizer	14	Tranquilizers	
08	PCP	15	PCP	
20	Other	16	Other	
20	Other	17	Unknown	
20	Other	18	Methamphetamines	

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
21	Substance Problem At Discharge, (Primary, Secondary, Tertiary)	Section III		Drugs of Choice
13	Benzodiazepines		19	Benzodiazepine
12	Other Stimulants		20	Other Stimulants
20	Other		21	Club Drugs
22	Frequency of Use at Discharge (Primary, Secondary, Tertiary)	Section III		Frequency of Use.
01	No Use in the Past Month		1	No Past Month Use
02	1-3 Times in the Past Month		2	1-3 Times/Month
03	1-2 Times in the Past Week		3	1-2 Times/Week
04	3-6 Times in the Past Week		4	3-6 Times/Week
05	Daily		5	Daily

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No Treatment Episode Data Set

Item

Value

State System Data

23	Living Arrangements at Discharge	Section II	Current Residence:
03	Independent Living	1	Private Residence
01	Homeless	2	On the Street
02	Dependent Living	3	Residential Care Home
02	Dependent Living	4	Institutional Setting
02	Dependent Living	5	Nursing Home
01	Homeless	6	Community Shelter
02	Dependent Living	7	Supported Living

No longer effective as of: 06-30-2007

Oklahoma's Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

Oklahoma

Item No	Treatment Episode Data Set	Item	Value	State System Data
23	Living Arrangements at Discharge	Section II	Current Residence:	
03	Independent Living	A	Permanent Housing	
03	Independent Living	B	Perm Sup Hou-Non-Cong	
02	Dependent Living	C	Perm Sup Hou-Cong	
02	Dependent Living	D	Transitional Housing	
03	Independent Living	E	Temporary Housing	
02	Dependent Living	F	RC Facility/Group Home	
02	Dependent Living	G	Nursing Home	
02	Dependent Living	H	Institutional Setting	
01	Homeless	J	Homeless-Street	
01	Homeless	i	Homeless-Shelter	

24	Employment at Discharge	Section II	Employment.	
01	Full Time	1	Full-time	
02	Part Time	2	Part-time	
03	Unemployed	3	Unemployed	
04	Not in Labor Force	4	Not in labor force	

Crosswalk Report

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K = Key Field

Discharge/NOMS

Oklahoma

Item No Treatment Episode Data Set

Item

Value

State System Data

25	Detailed Not In Labor Force at Discharge	-	Not Collected
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No longer effective as of: 06-30-2006

25	Detailed Not In Labor Force at Discharge	-	Type of Employment/Not in Labor Force
-----------	---	---	--

- | | | | |
|----|-----------------------|---|-----------------------|
| 01 | Homemaker | A | Homemaker |
| 02 | Student | B | Student |
| 03 | Retired | C | Retired |
| 04 | Disabled | D | Disabled |
| 05 | Inmate of Institution | E | Inmate of Institution |
| 06 | Other | F | Other |

26	Number of Arrests in 30 Days Prior to Discharge	-	Arrested 30 Days
-----------	--	---	-------------------------

No longer effective as of: 06-03-2007

26	Number of Arrests in 30 Days Prior to Discharge	-	Arrested 30 Days
-----------	--	---	-------------------------

- | | | | |
|-------|-------------------|-------|-------|
| 00-96 | Number of Arrests | 00 | None |
| 00-96 | Number of Arrests | 01-96 | 01-99 |

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report