

## Crosswalk Management System

Report           REPORT CROSSWALK TO STATE  
Filename  
Run by           CWMS\_PROXY  
Report Date    23-DEC-16  02:22

# 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
<b>1</b>	<b>System Transaction Type</b>	-		<b>System Transaction Type Added to Each Record</b>
				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

<b>1</b>	<b>System Transaction Type</b>	-		<b>System Transaction Type Added to Each Record</b>
				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				

<b>K 2</b>	<b>State Code</b>	<b>IL</b>		<b>FIPS Code Added to Each Record</b>
				Added to each record
	-		-	IL
	State Postal Abbreviation			

<b>3</b>	<b>Reporting Date</b>	-		<b>Month and Year of Submission Added to Each Record</b>
				(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
<b>K 1</b>	<b>State Provider Identifier</b>	<b>NFR</b>	<b>National Facility Register</b>	
	IL then 6 digit NFR number			

<b>K 1</b>	<b>State Provider Identifier</b>	<b>NFR</b>	<b>National Facility Register</b>	
	6 character NFR number			
	No longer effective as of: 06-30-2015			

<b>K 2</b>	<b>Client Identifier (Admission)</b>	-	<b>Client's SSN</b>	
	(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			

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

<b>K 3</b>	<b>Co-Dependent/Collateral</b>	-	<b>Problem Area</b>	
	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			

# 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
<b>K 3</b>	<b>Co-Dependent/Collateral</b>	-		<b>Problem Area</b>
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

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

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

<b>K 5</b>	<b>Date of Admission</b>	-		<b>First Date of Service</b>
MMDDYYYY				

# 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
---------	----------------------------	------	-------	-------------------

<b>K 5</b>	<b>Date of Admission</b>	-	<b>Open Date</b>	
------------	--------------------------	---	------------------	--

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

<b>6</b>	<b>Prior Treatment Episodes</b>	-	<b>Prior Treatment Episodes</b>	
----------	---------------------------------	---	---------------------------------	--

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		

<b>6</b>	<b>Prior Treatment Episodes</b>	-	<b>Prior Treatment Episodes</b>	
----------	---------------------------------	---	---------------------------------	--

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

## Illinois' Treatment Episode Data Set Version : 1

K = Key Field

**Minimum**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>7</b>	<b>Principal Source of Referral</b>	-		<b>Referral Source</b>
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/Employer Assistance ProgramEAP	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

# 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
<b>7</b>	<b>Principal Source of Referral</b>	-		<b>Referral Source</b>
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/Employer Assistance ProgramEAP	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)

# 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
<b>7</b>	<b>Principal Source of Referral</b>	-		<b>Referral Source</b>
	03 Other Health Care Provider	19		DHS
No longer effective as of: 06-30-2007				

---

<b>8</b>	<b>Date of Birth</b>	-		<b>Birth Date</b>
				MMDDYYYY

---

<b>9</b>	<b>Gender</b>	-		<b>Sex</b>
	2 Female	F		Female
	1 Male	M		Male

---

<b>10</b>	<b>Race (Hispanic collected as race to be reported as 97 in Race and 06 in Ethnicit</b>	-		<b>Race</b>
	02 American Indian/Alaskan Native ( States using Alaskan Native in 01 use for other	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

# 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
<b>10</b>	<b>Race (Hispanic collected as race to be reported as 97 in Race and 06 in Ethnicit</b>	-		<b>Race</b>
02	American Indian/Alaskan Native ( States using Alaskan Native in 01 use for other	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				

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>11</b>	<b>Hispanic or Latino Origin ( Ethnicity)</b>	-		<b>Race</b>
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 or Latino Origin	5		Not of Hispanic Origin
06	Hispanic or Latino - Specific Origin not Specified	6		Hispanic - specific orgin unknown

# 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
<b>11</b>	<b>Hispanic or Latino Origin ( Ethnicity)</b>	-		<b>Race</b>
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				

<b>12</b>	<b>Education</b>	-		<b>Education Level</b>
00	Less Than One Grade Completed	00		0
01-25	Years of School(Highest Grade) ( General Equivalency Degree, use 12)	01-20		01-20

<b>12</b>	<b>Education</b>	-		<b>Education Level</b>
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
No longer effective as of: 06-30-2007				

# 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
<b>13</b>	<b>Employment Status</b>	-		<b>Employment Status</b>
01	Full Time - works 35 or more hours a week- includes military	1		Full Time (35 hours or more per week)
02	Part Time - works less tahn 35 hours per week	2		Part-Time ( less than 35 hours per week)
03	Unemployed - looking for work in past 30 days or on layoff from job	3		Employed, but not Working due to Extended Illness, Furlough or Strike
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	4		Not in Labor Force (Homemaker, Student, Disabled, Retired, or Inmate)

<b>13</b>	<b>Employment Status</b>	-		<b>Employment Status</b>
01	Full Time - works 35 or more hours a week- includes military	A		Full Time (35 hours or more per week)
02	Part Time - works less tahn 35 hours per week	B		Part-Time ( less than 35 hours per week)
03	Unemployed - looking for work in past 30 days or on layoff from job	C		Employed, but not Working due to Extended Illness, Furlough or Strike
02	Part Time - works less tahn 35 hours per week	D		Seasonal Worker
03	Unemployed - looking for work in past 30 days or on layoff from job	E		Umemployed
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	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

**Minimum**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>14</b>	<b>Substance Problem Codes ( Primary-14A,Secondary-14B, Tertiart-14C)</b>	-		<b>Substance Abused, Primary, Secondary, Tertiary</b>
01	None	01		None
02	Alcohol	02		Alcohol
03	Cocaine, Crack	03		Cocaine/Crack
04	Marijuana, Hashish ( includesTHC 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	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

# 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
<b>14</b>	<b>Substance Problem Codes ( Primary-14A,Secondary-14B, Tertiart-14C)</b>	-		<b>Substance Abused, Primary, Secondary, Tertiary</b>
18	Over-the-Counter	18		Over-the-Counter
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

# 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
<b>14</b>	<b>Substance Problem Codes ( Primary-14A,Secondary-14B, Tertiart-14C)</b>	-		<b>Substance Abused, Primary, Secondary, Tertiary</b>
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

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Minimum**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>14</b>	<b>Substance Problem Codes ( Primary-14A,Secondary-14B, Tertiart-14C)</b>	-		<b>Substance Abused, Primary, Secondary, Tertiary</b>
17	Inhalants	G1		Inhalants
04	Marijuana, Hashish ( includes THC and other Cannabis Sativa preparations)	H1		Marijuana, Hashish, THC
09	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

# 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
<b>15</b>	<b>Usual Route of Administration ( Primary-15A, Secondary-15B, Tertiar-15C)</b>	-		<b>Administration Route</b>
01	Oral	1		Oral
02	Smoking	2		Smoking
03	Inhalation	3		Inhalation
04	Injection (IV or intramuscular, intradermal or subcutaneous)	4		Injection IV or intramuscular
96	Not Applicable	5		Not Applicable

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

No longer effective as of: 06-30-2006

# 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
<b>16</b>	<b>Frequency of Use ( Primary-16A, Secondary-16B, Tertiary-16C)</b>	-		<b>Frequency of Use</b>
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

<b>16</b>	<b>Frequency of Use ( Primary-16A, Secondary-16B, Tertiary-16C)</b>	-	<b>Not Collected</b>
-----------	---	---	----------------------

No longer effective as of: 06-30-2006

<b>17</b>	<b>Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)</b>	-	<b>Age First Used</b>
-----------	--	---	-----------------------

96	Not Applicable	-	Not Applicable
00	Newborn with a substance dependency problem	00	00
01-95	Age at First Use, in years	01-95	01-95

<b>17</b>	<b>Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)</b>	-	<b>Age First Used</b>
-----------	--	---	-----------------------

01-95	Age at First Use, in years	01-96	01-96
-------	----------------------------	-------	-------

No longer effective as of: 06-30-2006

# 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
<b>K 18</b>	<b>Type of Services</b>	<b>SC</b>	<b>Setting Codes</b>	
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)

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
04	Rehabilitation/Residential - Short-term, ( 30 days or fewer)	--	Provider Number and Seeting Code (SC) equal to ST or LT
01	Detoxification - Hospital Inpatient ( Detox, 24 hour Service)	--	Provider Number

No longer effective as of: 06-30-2006

# 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
<b>19</b>	<b>Medication-Assisted Opioid Therapy</b>	-		<b>Opiod Maintenance Therapy</b>
2	No	N		No
1	Yes	Y		Yes

<b>19</b>	<b>Medication-Assisted Opioid Therapy</b>	-		<b>Methadone Client</b>
-----------	---	---	--	-------------------------

2	No	N		No
1	Yes	Y		Yes

No longer effective as of: 06-30-2006

# Crosswalk Report

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>1</b>	<b>Detail Drug Code, Primary</b>	-		<b>Primary Drug of Abuse</b>
0201	Alcohol	A1		Alcohol
0501	Heroine/Morphine	A1		Heroin
0501	Heroine/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,THC and any other cannabis sativa preparation	H1		Marijuana
0401	Marijuana/Hashish,THC and any other cannabis sativa preparation	H2		Hashish
No longer effective as of: 06-30-2006				

<b>1</b>	<b>Detail Drug Code, Primary</b>	-		<b>Not Collected</b>
<b>2</b>	<b>Detail Drug Code, Secondary</b>	-		<b>Not Collected</b>
<b>3</b>	<b>Detail Drug Code, Tertiary</b>	-		<b>Not Collected</b>
<b>4</b>	<b>Diagnostic Code (DSM or ICD) field should be coded 999.98 - field 19 replaces i</b>	-		<b>Not Collected</b>
			DSM and ICD codes	
999.98	Not Collected		999.98	Not Collected

# Crosswalk Report

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>4</b>	<b>Diagnostic Code (DSM or ICD) field should be coded 999.98 - field 19 replaces i</b>	-	<b>Medical Diagnosis</b>	
			DSM and ICD codes	
	XXX.XX			DSM/ICD codes
No longer effective as of: 06-30-2015				

<b>5</b>	<b>Psychiatric Problem in Addition to Alcohol or Drug Problem</b>	-	<b>Medical Diagnosis</b>	
<p>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.</p>				
	2	No	-	If only 291, 292,303,304 or 305 code submitted
	1	Yes	-	If second code is other than 291, 292,303,304 or 305
			-	see comments above

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

<b>6</b>	<b>Pregnant at Admission</b>	-	<b>Pregnant at Open</b>	
	2	No - female client was not pregnant at admission	N	No
	1	Yes - female client was pregnant at admission	Y	Yes

# Crosswalk Report

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>7</b>	<b>Veteran Status</b>	-		<b>Veteran</b>
2	No	N		No
1	Yes	Y		Yes
<b>8</b>	<b>Living Arrangements</b>	-		<b>Living Arrangement</b>
01	Homeless - clients with no fixed address; includes homeless shelter	A		Shelter
01	Homeless - clients with no fixed address; includes homeless shelter	B		Street/Outdoors
02	Dependent Living - clients living in a supervised setting	C		Institutional
03	Independent Living - clients living alone or with others but no supervision	D		Owned or Rented Residence
02	Dependent Living - clients living in a supervised setting	E		Someone else's residence
02	Dependent Living - clients living in a supervised setting	F		College Residence
02	Dependent Living - clients living in a supervised setting	G		Halfway House
02	Dependent Living - clients living in a supervised setting	H		Residential
02	Dependent Living - clients living in a supervised setting	I		Recovery Home
02	Dependent Living - clients living in a supervised setting	J		Other Home

# Crosswalk Report

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
---------	----------------------------	------	-------	-------------------

<b>8</b>	<b>Living Arrangements</b>	-		<b>Living Arrangement</b>
----------	----------------------------	---	--	---------------------------

	03 Independent Living - clients living alone or with others but no supervision	1		Independent Living
	02 Dependent Living - clients living in a supervised setting	2		Dependent Living
	01 Homeless - clients with no fixed address; includes homeless shelter	3		Homeless

No longer effective as of: 06-30-2011

<b>9</b>	<b>Source of Income/Support</b>	-		<b>Income Status</b>
----------	---------------------------------	---	--	----------------------

	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



Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>10</b>	<b>Health Insurance</b>	-		<b>Insurance Type</b>
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

# Crosswalk Report

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>10</b>	<b>Health Insurance</b>	-		<b>Insurance Type</b>
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				

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

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>11</b>	<b>Expected/Actual Primary Source of Payment</b>	-		<b>Health Insurance</b>
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





Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>13</b>	<b>Detailed Criminal Justice Referral Categories</b>	-		<b>Referral Source</b>
06	Prison	02		DOC System
02	Other Court ( Not State or Federal)	03		Court Services
04	Other Recognized Legal Entity ( Local Law, Corr. Agncy, 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. Agncy, 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				

<b>14</b>	<b>Marital Status</b>	-		<b>Marital Status</b>
01	Never Married - includes clients who are single or whose	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				

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>14</b>	<b>Marital Status</b>	-		<b>Marital Status</b>
01	Never Married - includes clients who are single or whose	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
<b>15</b>	<b>Days Waiting to Enter Treatment</b>	-		<b>From Waiting List</b>
				Calculated from screening date
000-996	Number of Days waiting	000-996		000-996
<b>16</b>	<b>Number of Arrests in the 30 Days Prior to Admission</b>	-		<b>Not Collected</b>
				No longer effective as of: 06-30-2006
<b>16</b>	<b>Number of Arrests in the 30 Days Prior to Admission</b>	-		<b>Number of Arrests (within 30 days preceding admission)</b>
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

**Supplemental**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>17</b>	<b>Frequency of Attendance at Self-Help Programs in 30 days prior to Admission</b>	-		<b>Self-Help Group Detail (entered after Self Help Group)</b>
01	No Attendance in past month	0		Self help group first answered 'No' or 'Refused'
02	less than once a week -1 to 3 times in past 30 days	01-03		Self help group first answered 'yes'
03	About once a week - 4 to 7 times in past 30 days	04-07		Self help group first answered 'yes'
04	2 to 3 times a week - 8 to 15 times in past 30 days	08-15		Self help group first answered 'yes'
05	4 or more times a week - 16 to 30 times in past 30 days	16-30		Self help group first answered 'yes'
97	Unknown	DK		Self Help Group answered 'Does Not Know'
06	Some Attendance in past month, but number of times and frequency is unknown	Y-RF/DK		Self help group first answered 'yes' and Self Help Group answered 'Does Not Know'

<b>18</b>	<b>Diagnostic Code Set</b>	-	<b>Medical Diagnosis</b>
-----------	----------------------------	---	--------------------------

2	ICD-9	2	ICD9
3	ICD-10	3	ICD10

<b>18</b>	<b>Diagnostic Code Set</b>	-	<b>Not Collected</b>
-----------	----------------------------	---	----------------------

No longer effective as of: 06-30-2015

<b>19</b>	<b>Diagnostic Code (ICD-10 Form)</b>	-	<b>Medical Diagnosis</b>
-----------	--------------------------------------	---	--------------------------

xxx.xx__	where "-" represents a blank...	-	ICD9
xxx.xxxx	7 digit code	-	ICD10

# Crosswalk Report

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

## Supplemental

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
---------	----------------------------	------	-------	-------------------

<b>19</b>	<b>Diagnostic Code (ICD-10 Form)</b>	-	<b>Not Collected</b>	
-----------	--------------------------------------	---	----------------------	--

No longer effective as of: 06-30-2015

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

<b>1</b>	<b>System Transaction at Discharge</b>	-		<b>System Transaction Type Added to Each Record</b>
A	Add	A		Add
C	Change	C		Change
D	Delete	D		Delete
No longer effective as of: 06-30-2006				

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

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

<b>4</b>	<b>State Provider Identifier at Discharge</b>	<b>NFR</b>		<b>National Facility Register</b>
	IL now comes before 6 digit NFR number			

<b>4</b>	<b>State Provider Identifier at Discharge</b>	<b>NFR</b>		<b>National Facility Register</b>
		6 characters		
No longer effective as of: 06-30-2015				

# 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
<b>5</b>	<b>Client Identifier at Discharge</b>	-		<b>Client Identifier At Discharge</b>
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			

# 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
<b>7</b>	<b>Type of Treatment Service/Treatment Setting at Discharge</b>	<b>SC</b>		<b>Setting Codes</b>
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)

<b>7</b>	<b>Type of Treatment Service/Treatment Setting at Discharge</b>	<b>SC</b>		<b>Setting Codes</b>
03	Rehabilitation/Residential - Hospital (other than detoxification)	(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

# 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
<b>8</b>	<b>Date of Last Contact or Data Update</b>	-		<b>Date Of Last Contact</b>
		MMDDYYYY		
<b>9</b>	<b>Date of Discharge</b>	-		<b>Date Of Discharge</b>
		MMDDYYYY		

10	Reason for Discharge, Transfer, or Discontinuance of Treatment	-	Reason for Discharge/Closing
01	Treatment Completed	B	Completeion of Treatment Services
02	Dropped out of treatment (lost contact, Left Against Professional Advice	C	Left against staff advice
03	Ternimated by Facility	D	Terminated by facility
04	Transferred to Another Treatment Program or Facility	E	Transferred to another DASA facility
05	Incarerated or released by or to courts	F	Incarcerated
06	Death	G	Death
14	Transferred to 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
<b>10</b>	<b>Reason for Discharge, Transfer, or Discontinuance of Treatment</b>	-		<b>Reason for Discharge/Closing</b>
01	Treatment Completed	B		Completeion of Treatment Services
02	Dropped out of treatment (lost contact, Left Against Professional Advice	C		Left against staff advice
03	Terminated by Facility	D		Terminated by facility
05	Incarerated or released by or to courts	F		Incarcerated
06	Death	G		Death
14	Transferred to Trtment Prog or Facil, but did not report	H		Completed level of care, but patient refused referral to other service.
04	Transferred to Another Treatment Program or Facility	I		Transferred to another DASA facility. Non-completion of current level of care.
04	Transferred to Another Treatment Program or Facility	J		Transferred to another DASA facility. Completion of current level of care.
04	Transferred to Another Treatment Program or Facility	T		Transfer within the same provider. Completion of current level of care.
04	Transferred to Another Treatment Program or Facility	U		Transfer within the same provider. Non-completion of current level of care.

**11 Provider Identifier at Admission**      **NFR**      **National Facility Register**  
 6 character NFR number  
 No longer effective as of: 06-30-2015

---

**11 Provider Identifier at Admission**      **NFR**      **National Facility Register**  
 IL now comes before the 6 digit NFR number

---

**12 Client Identifier at 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)

# 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
<b>12</b>	<b>Client Identifier at Admission</b>	-	<b>Client's SSN</b>	
	-		Comes from admission file	
No longer effective as of: 06-30-2006				

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>13</b>	<b>Co-Dependent/Collateral at Admission</b>	-	<b>Problem Area</b>	
	2	Client	1	Alcohol
	2	Client	2	Drugs
	2	Client	3	Alcohol and Drugs
	1	Codependent/collateral	4	Co-Dependence
	2	Client	5	None
	2	Client	6	Alchol/Drugs and Gambling
	2	Client	7	Gambling

<b>13</b>	<b>Co-Dependent/Collateral at Admission</b>	-	<b>Problem Area</b>	
	2	Client	1	Alcohol
	2	Client	2	Drugs
	2	Client	3	Both Alcohol and Drugs
	1	Codependent/collateral	4	Not Applicable
	1	Codependent/collateral	5	No Diagnosis
No longer effective as of: 06-30-2006				

# 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
<b>14</b>	<b>Client Transaction Type (pulled from admission dataset)</b>	-		<b>Client Transaction Type.</b>
A	Initial Admission (SA)	A		Admission (1st Service Type Data)
T	Transfer or change in service (SA)	T		Transfer (2nd Service Type Data)

<b>14</b>	<b>Client Transaction Type (pulled from admission dataset)</b>	-		<b>Services Dates</b>
T	Transfer or change in service (SA)	-		2nd Service Date
A	Initial Admission (SA)	-		1st Service Date
No longer effective as of: 06-30-2006				

<b>15</b>	<b>Date of Admission (pulled from admission dataset)</b>	-		<b>First Date of Service</b>
MMDDYYYY				

<b>15</b>	<b>Date of Admission (pulled from admission dataset)</b>	-		<b>Open Date</b>
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  
Version : 1

K = Key Field

**Discharge/NOMS**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>16</b>	<b>Type of Service at Admission (pulled from admission dataset)</b>	<b>SC</b>		<b>Setting Codes</b>
01	Detoxification, 24-hour service - Hospital Inpatient	(SC),DX		Hospital Detox
02	Detoxification , 24 hour service , Free-Standing Residential	(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, 24-hour service - Hospital Inpatient	--		Provider Number
04	Rehabilitation/Residential - Short Term (30 days or fewer)	--		Provider Number and Setting Code (SC) equal to ST or LT
No longer effective as of: 06-30-2006				

16	Type of Service at Admission (pulled from admission dataset)	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)

# 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
<b>17</b>	<b>Date of Birth (pulled from admission dataset)</b>	-	<b>Birth Date</b>	
			MMDDYYYY	
<b>18</b>	<b>Gender (pulled from admission dataset)</b>	-	<b>Sex</b>	
2	Female	F		Female
1	Male	M		Male
<b>20</b>	<b>Ethnicity (pulled from admission dataset)</b>	-	<b>Race</b>	
01	Puerto Rican	1		Puerto Rican
02	Mexican	2		Mexican
03	Cuban	3		Cuban
04	Other Specific Hispanic or Latino	4		Other Specific Hispanic
05	Not of Specific Hispanic or Latino Origin	5		Not of Hispanic Origin
06	Hispanic or Latino - specific origin not specified	6		Hispanic - specific orgin unknown



# 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
<b>21</b>	<b>Substance Problem At Discharge, (Primary, Secondary, Tertiary)</b>	-		<b>Substance Abused, Primary, Secondary, Tertiary</b>
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 Sedatives or Hypnotics	D3		Non-Barbiturate - sedatives/hypnotics other than benzodiazepines
14	Other Tranquilizer	D4		Other Tranquilizers
13	Benzodiazepines	D5		Clonazepan (Klonopin, Rivotril)
11	Other Amphetamines	E1		Amphetamines
10	Methamphetamine/SPeed	E2		Methamphetamine
03	Cocaine/Crack	E3		Cocaine
03	Cocaine/Crack	E4		Crack
12	Other Stimulants	E5		Other Stimulants
17	Inhalants	G1		Inhalants

# 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
<b>21</b>	<b>Substance Problem At Discharge, (Primary, Secondary, Tertiary)</b>	-		<b>Substance Abused, Primary, Secondary, Tertiary</b>
04	Marijuana/Hashish	H1		Marijuana, Hashish, THC
09	Hallucinogens	I1		Other Hallucinogens (peyote, LSD, etc)
18	Over-The-Counter medicines	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- phencyclidine	L6		PCP
20	Other	L7		Ephedrine/Pseudoephedrine
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
<b>21</b>	<b>Substance Problem At Discharge, (Primary, Secondary, Tertiary)</b>	-		<b>Substance Abused, Primary, Secondary, Tertiary</b>
01	None	01		None
02	Alcohol	02		Alcohol
03	Cocaine/Crack	03		Cocaine/Crack
04	Marijuana/Hashish	04		Marijuana, Hashish, THC
05	Heroin	05		Heroin
06	Non-Prescription Methadone	06		Non-Rx Methadone
07	Other Opiates and Synthetics	07		Opioids and other synthetics
08	PCP- phencyclidine	08		PCP
09	Hallucinogens	09		Other Hallucinogens (peyote, LSD, etc)
10	Methamphetamine/SPeed	10		Methamphetamine
11	Other Amphetamines	11		Amphetamines
12	Other Stimulants	12		Other Stimulants
13	Benzodiazepines	13		Benzodiazepines
14	Other Tranquilizer	14		Other non-Benzodiazepines Tranquilizers
15	Barbiturates	15		Barbiturates
16	Other Sedatives or Hypnotics	16		Non-Barbiturate - sedatives/hypnotics other than benzodiazepines
17	Inhalants	17		Inhalants
18	Over-The-Counter medicines	18		Over-the-Counter

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Discharge/NOMS**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>21</b>	<b>Substance Problem At Discharge, (Primary, Secondary, Tertiary)</b>	-		<b>Substance Abused, Primary, Secondary, Tertiary</b>
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

<b>22</b>	<b>Frequency of Use at Discharge (Primary, Secondary, Tertiary)</b>	-		<b>Not Collected</b>
-----------	---	---	--	----------------------

No longer effective as of: 06-30-2006

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>22</b>	<b>Frequency of Use at Discharge (Primary, Secondary, Tertiary)</b>	-		<b>Frequency of Use</b>
01	No Use in the Past Month	1		No use month prior to admission
02	1-3 Times in the Past Month	2		1-3 times in the past month
03	1-2 Times in the Past Week	3		1-2 times in the past week
04	3-6 Times in the Past Week	4		3-6 times per week
05	Daily	5		Daily
96	Not Applicable	6		None

Illinois' Treatment Episode Data Set  
Version : 1

K = Key Field

**Discharge/NOMS**

Illinois

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>23</b>	<b>Living Arrangements at Discharge</b>	-		<b>Living Arrangement</b>
01	Homeless - clients with no fixed address; includes homeless shelter	A		Shelter
01	Homeless - clients with no fixed address; includes homeless shelter	B		Street/Outdoors
02	Dependent Living - clients living in a supervised setting	C		Institutional
03	Independent Living - clients living alone or with others but no supervision	D		Owned or Rented Residence
02	Dependent Living - clients living in a supervised setting	E		Someone else's residence
02	Dependent Living - clients living in a supervised setting	F		College Residence
02	Dependent Living - clients living in a supervised setting	G		Halfway House
02	Dependent Living - clients living in a supervised setting	H		Residential
02	Dependent Living - clients living in a supervised setting	I		Recovery Home
02	Dependent Living - clients living in a supervised setting	J		Other Home

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

No longer effective as of: 06-30-2011

Item No	Treatment Episode Data Set	Item	Value	State System Data
<b>24</b>	<b>Employment at Discharge</b>	-		<b>Employment Status</b>
01	Full Time - works 35 or more hours a week- includes military	1		Full Time (35 hours or more per week)
02	Part Time - works less tahn 35 hours per week	2		Part-Time ( less than 35 hours per week)
03	Unemployed - looking for work in past 30 days or on layoff from job	3		Employed, but not Working due to Extended Illness, Furlough or Strike
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	4		Not in Labor Force (Homemaker, Student, Disabled, Retired, or Inmate)

# 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
---------	----------------------------	------	-------	-------------------

<b>24</b>	<b>Employment at Discharge</b>	-		<b>Employment Status</b>
-----------	--------------------------------	---	--	--------------------------

No longer effective as of: 06-30-2007

<b>25</b>	<b>Detailed Not In Labor Force at Discharge</b>	-		<b>Detailed not in labor force</b>
-----------	---	---	--	------------------------------------

CURRENTLY NOT COLLECTED. WILL START COLLECTING BEGINNING 7/1/2007

- Codes same as SuDS 12

No longer effective as of: 06-30-2011

<b>25</b>	<b>Detailed Not In Labor Force at Discharge</b>	-		<b>Detailed not in labor force</b>
-----------	---	---	--	------------------------------------

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

<b>26</b>	<b>Number of Arrests in 30 Days Prior to Discharge</b>	-		<b>Not Collected</b>
-----------	--	---	--	----------------------

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
<b>26</b>	<b>Number of Arrests in 30 Days Prior to Discharge</b>	-		<b>Arrests 30 days prior to discharge</b>
00-96	Number of Arrests	00		00
00-96	Number of Arrests	01-96		01-96
<b>27</b>	<b>Frequency of Attendance at Self-Help program in the 30 Days Prior to Discharge</b>	-		<b>Self-Help Group Detail (entered after Self Help Group)</b>
01	No Attendance in past month	0		Self help group first answered 'No' or 'Refused'
02	less than once a week -1 to 3 times in past 30 days	01-03		Self help group first answered 'yes'
03	About once a week - 4 to 7 times in past 30 days	04-07		Self help group first answered 'yes'
04	2 to 3 times a week - 8 to 15 times in past 30 days	08-15		Self help group first answered 'yes'
05	4 or more times a week - 16 to 30 times in past 30 days	16-30		Self help group first answered 'yes'
97	Unknown	DK		Self Help Group answered 'Does Not Know
06	Some Attendance in past month, but number of times and frequency is 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