

Crosswalk Management System

Report REPORT CROSSWALK TO STATE
Filename
Run by CWMS_PROXY
Report Date 27-DEC-16 09:12

Crosswalk Report

Status : VA

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

Media ID : NJ-SAMS

Start Date : 01-JAN-05

End Date :

General reporting comments: [.] denotes [TableName.FieldName(s)]

Follow-up :

SAMS 2005 - New Jersey Treatment Episode Data Set

Version : 1

K = Key Field

System

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	System Transaction Type	~		System Transaction Type
	A Add	A		Add
	C Change	C		Change
	D Delete	D		Delete
K 2	State Code	NJ		FIPS State Code
	- State Postal Abbreviation	-		NJ
3	Reporting Date	~		Month and year data file submitted MMYYYY Format

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

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Minimum

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
K 1	State Provider Identifier	~~		Provider ID
			"NJ" + 6 characters	
K 2	Client Identifier (Admission)	~~		ID Combo (Client ID + Episode Code + Event Code)
			14 or 15 characters (depending if episode is 1 or 2 digits)	
K 3	Co-Dependent/Collateral	~~		Co-Dependent/collateral
	2 No		-	Unknown (None of the above)
	2 No		1	Alcohol/Drug Abuser
	1 Yes		2	Co-Dependent/Family
K 4	Client Transaction Type	~~		Client Transaction Type
	A Admission (SA)		A	Admission
	T Transfer/Change in Service (SA)		T	Transfer
K 5	Date of Admission	~~		Date of Admission
				MMDDYYYY Format

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SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

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Item No	Treatment Episode Data Set	Item	Value	State System Data
6	Prior Treatment Episodes	~~		No. of Prior treatment episodes
7	Unknown	-		Unknown (None of the above)
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	>4		5 or more

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	~~		Principal source of referral
97	Unknown	-		Unknown (None of the above)
03	Other Health Care Provider	-		n/a
01	Individual (includes self-referral))	1		Self
06	Other Community Referral	10		Hot Line
97	Unknown	11		Other Referral Source
01	Individual (includes self-referral))	2		Family/Friend
02	Alcohol/Drug Abuse Provider	31		AddictionTreatment Program
02	Alcohol/Drug Abuse Provider	32		County Drug and Alcohol Coordinator
02	Alcohol/Drug Abuse Provider	33		South New Jersey Initiative
03	Other Health Care Provider	34		Other Addictions Services
07	Court/Criminal Justice/DUI/DWI	41		Municipality - Municipal Court
07	Court/Criminal Justice/DUI/DWI	42		County - Family Court
07	Court/Criminal Justice/DUI/DWI	43		County - Drug Court
07	Court/Criminal Justice/DUI/DWI	44		County - Probation
07	Court/Criminal Justice/DUI/DWI	45		County - Detention Center
07	Court/Criminal Justice/DUI/DWI	46		County - Other (Pre-Trial Intervention, Judge,....)
07	Court/Criminal Justice/DUI/DWI	47		STATE - NJ Department of Corrections
07	Court/Criminal Justice/DUI/DWI	48		STATE - NJ State Parole Board/District Office

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	~~		Principal source of referral
07	Court/Criminal Justice/DUI/DWI	49		FEDERAL - US Federal Prison
07	Court/Criminal Justice/DUI/DWI	5		IDRC
07	Court/Criminal Justice/DUI/DWI	50		FEDERAL - US Federal Court
07	Court/Criminal Justice/DUI/DWI	51		Juvenile Justice Commission (JJC)
07	Court/Criminal Justice/DUI/DWI	52		Other Corrections Program
03	Other Health Care Provider	61		Mental Health Screening Center
03	Other Health Care Provider	62		Mental Health Provider/Clinic
03	Other Health Care Provider	63		Hospital
03	Other Health Care Provider	64		Other Mental Health
03	Other Health Care Provider	65		MICA Program
03	Other Health Care Provider	71		County or Municipal Health Department
03	Other Health Care Provider	72		Hospital, Crisis Emergency Room
03	Other Health Care Provider	73		Other Hospital
03	Other Health Care Provider	74		Health Care Agency/Private Physician
03	Other Health Care Provider	75		Other Medical/Health
06	Other Community Referral	81		NJ Dept. Human Services - DYFS
06	Other Community Referral	82		WFNJ - Substance Abuse Initiative (SAI)
06	Other Community Referral	83		Substance Abuse Research Demonstration
06	Other Community Referral	84		Other Welfare/Social Service

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Item No Treatment Episode Data Set Item Value State System Data

7	Principal Source of Referral	~	Principal source of referral
05	Employer/Employer Assistance ProgramEAP	9	Employee Assistance Program

No longer effective as of: 11-05-2014

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	~~		Principal source of referral
97	Unknown	-		Unknown (None of the above)
04	School (Educational)	-		n/a
01	Individual (includes self-referral))	1		Self
06	Other Community Referral	10		Hot Line
06	Other Community Referral	11		Other Referral Source
01	Individual (includes self-referral))	2		Family/Friend
02	Alcohol/Drug Abuse Provider	31		AddictionTreatment Program
02	Alcohol/Drug Abuse Provider	32		County Drug and Alcohol Coordinator
02	Alcohol/Drug Abuse Provider	33		South New Jersey Initiative
02	Alcohol/Drug Abuse Provider	34		Other Addictions Services
07	Court/Criminal Justice/DUI/DWI	41		Municipality - Municipal Court
07	Court/Criminal Justice/DUI/DWI	42		County - Family Court
07	Court/Criminal Justice/DUI/DWI	43		County - Drug Court
07	Court/Criminal Justice/DUI/DWI	44		County - Probation
07	Court/Criminal Justice/DUI/DWI	45		County - Detention Center
07	Court/Criminal Justice/DUI/DWI	46		County - Other (Pre-Trial Intervention, Judge,....)
07	Court/Criminal Justice/DUI/DWI	47		STATE - NJ Department of Corrections
07	Court/Criminal Justice/DUI/DWI	48		STATE - NJ State Parole Board/District Office

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Item No	Treatment Episode Data Set	Item	Value	State System Data
7	Principal Source of Referral	~~		Principal source of referral
07	Court/Criminal Justice/DUI/DWI	49		FEDERAL - US Federal Prison
07	Court/Criminal Justice/DUI/DWI	5		IDRC
07	Court/Criminal Justice/DUI/DWI	50		FEDERAL - US Federal Court
07	Court/Criminal Justice/DUI/DWI	51		Juvenile Justice Commission (JJC)
07	Court/Criminal Justice/DUI/DWI	52		Other Corrections Program
03	Other Health Care Provider	61		Mental Health Screening Center
03	Other Health Care Provider	62		Mental Health Provider/Clinic
03	Other Health Care Provider	63		Hospital
03	Other Health Care Provider	64		Other Mental Health
03	Other Health Care Provider	65		MICA Program
03	Other Health Care Provider	71		County or Municipal Health Department
03	Other Health Care Provider	72		Hospital, Crisis Emergency Room
03	Other Health Care Provider	73		Other Hospital
03	Other Health Care Provider	74		Health Care Agency/Private Physician
03	Other Health Care Provider	75		Other Medical/Health
06	Other Community Referral	81		NJ Dept. Human Services - DYFS
06	Other Community Referral	82		WFNJ - Substance Abuse Initiative (SAI)
06	Other Community Referral	83		Substance Abuse Research Demonstration
06	Other Community Referral	84		Other Welfare/Social Service

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Item No	Treatment Episode Data Set	Item	Value	State System Data
<hr/>				
7	Principal Source of Referral	~~		Principal source of referral
05	Employer/Employer Assistance ProgramEAP	9		Employee Assistance Program
<hr/>				
8	Date of Birth	~~		DOB mmdyyyyy
<hr/>				
9	Gender	~~		Gender
7	Unknown	-		Unknown (None of the above)
1	Male	1		Male
2	Female	2		Female
7	Unknown	3		Transgender
7	Unknown	4		Other

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Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Race (Hispanic collected as race to be reported as 97 in Race and 06 in Ethnicit	~~		Race
20	Other Single Race	-		n/a
97	Unknown	-		Unknown (None of the above)
21	Two or More Races	-		if Race2 has value between and 6 inclusive and equal to Race1
05	White	1		White
04	Black or African American	2		Black
13	Asian	3		Asian
01	Alaska Native (Aleut, Eskimo, Indian)	4		Alaskan Native
02	American Indian/Alaskan Native (States using Alaskan Native in 01 use for other	5		American Indian
23	Native Hawaiians or Other Pacific Islanders	6		Native Hawaiian or other Pacific Islander

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General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
10	Race (Hispanic collected as race to be reported as 97 in Race and 06 in Ethnicit	~~		Race
97	Unknown	-		Unknown (None of the above)
05	White	1		White
04	Black or African American	2		Black
13	Asian	3		Asian
01	Alaska Native (Aleut, Eskimo, Indian)	4		Alaskan Native
02	American Indian/Alaskan Native (States using Alaskan Native in 01 use for other	5		American Indian
23	Native Hawaiians or Other Pacific Islanders	6		Native Hawaiian or other Pacific Islander
No longer effective as of: 11-05-2014				

11	Hispanic or Latino Origin (Ethnicity)	~~		Ethnicity
97	Unknown	-		Unknown (None of the above)
05	Not of Hispanic or Latino Origin	1		Not of Hispanic Orgin
01	Puerto Rican	2		Puerto Rican
02	Mexican	3		Mexican
03	Cuban	4		Cuban
04	Other Specific Hispanic	5		Dominican
06	Hispanic or Latino - Specific Origin not Specified	6		Other Hispanic

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Item No	Treatment Episode Data Set	Item	Value	State System Data
12	Education	~~		Education
97	Unknown	-		Unknown (None of the above)
00	Less Than One Grade Completed	0		Less Than One Grade Completed
01	Grade 1	1		Grade 1
10	Grade 10	10		Grade 10
11	Grade 11	11		Grade 11
12	12th Grade or GED	12		12th Grade or GED
13	1st year of College/Iniversity (Freshman)	13		1st Year of College/University (Freshman)
14	2nd year of College/Iniversity (Sophomore)	14		2nd Year of College University (Sophomore) or Associate Degree
15	3rd year of College/Iniversity (Junior)	15		3rd Year of College/University (Junior)
16	4th year of College/Iniversity (Senior) or Bachelor's Degree)	16		4th Year of College (Senior) or Bachelor's Degree
17	Some Post-Graduate Study - Degree not completed	17		Some Post-Graduate Study - Degree not completed
18	Master's Degree Completed	18		Master's Degree completed
19-25	Post Graduate Study	19-20		Post graduate study
02	Grade 2	2		Grade 2
03	Grade 3	3		Grade 3
04	Grade 4	4		Grade 4
05	Grade 5	5		Grade 5
06	Grade 6	6		Grade 6

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Item No	Treatment Episode Data Set	Item	Value	State System Data
12	Education	~~		Education
07	Grade 7	7		Grade 7
08	Grade 8	8		Grade 8
09	Grade 9	9		Grade 9

12	Education	~~		Education
97	Unknown	-		Unknown (None of the above)
00	Less Than One Grade Completed	0		Less Than One Grade Completed
01-25	Years of School(Highest Grade) (General Equivalency Degree, use 12)	1-20		Years of School (Highest Grade) Completed
No longer effective as of: 11-05-2014				

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Item No	Treatment Episode Data Set	Item	Value	State System Data
13	Employment Status	~~		Employment Status (Admission and Discharge)
97	Unknown	-		Unknwn (None of the above)
01	Full Time - works 35 or more hours a week- includes military	1		Full-Time Work or Military
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	10		Disabled
02	Part Time - works less tahn 35 hours per week	2		Part-Time (Regular Hours)
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	3		Student
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	4		Homemaker
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	5		Retired
03	Unemployed - looking for work in past 30 days or on layoff from job	6		Unemployed: Actively looking for work
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	7		Unemployed: Not looking for work
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	8		Unemployed: Volunteer Work
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	9		Unemployed: Living in an institution

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Item No	Treatment Episode Data Set	Item	Value	State System Data
13	Employment Status	~~		Employment Status (Admission and Discharge)
97	Unknown	-		Unknwn (None of the above)
01	Full Time - works 35 or more hours a week- includes military	1		Full-Time Work or Military
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	10		Unemployed: Living in an institution
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	11		Disabled
02	Part Time - works less tahn 35 hours per week	2		Part-Time (Regular Hours)
02	Part Time - works less tahn 35 hours per week	3		Part-Time (Not Regular Hours)
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	4		Student
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	5		Homemaker
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	6		Retired
03	Unemployed - looking for work in past 30 days or on layoff from job	7		Unemployed: Actively looking for work
04	Not in Labor Force - not looking for work in past 30 days - stdent, retired etc.	8		Unemployed: Not looking for work
03	Unemployed - looking for work in past 30 days or on layoff from job	9		Unemployed: Volunteer Work
No longer effective as of: 11-05-2014				

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Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Substance Problem Codes (Primary-14A,Secondary-14B,Tertiart-14C)	~~		Primary Drug (Admission and Discharge)
18	Over-the-Counter	-		n/a
14	Other Non-Benzodiazapine Tranquilizers	-		n/a
16	Other Non-Barbituate Sedatives or Hypnotics	-		n/a
97	Unknown	-		Unknown (None of the above)
02	Alcohol	1		Alcohol
20	Other	10		GHB
09	Hallucinogens	11		Hallucingens - LSD
08	PCP	12		Hallucingens - PCP
09	Hallucinogens	13		Hallucingens - Other
17	Inhalants	14		Inhalants
20	Other	15		Ketamine
06	Non-Prescription Methadone	16		Methadone (non prescription)
07	Other Opiates and Synthetics	17		Opiate - Other
07	Other Opiates and Synthetics	18		Oxycontin
13	Benzodiazepines	19		Rohypnol
05	Heroin	2		Heroin
20	Other	20		Other (Phenytoin, etc)

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Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	~~		Primary Drug (Admission and Discharge)
01	None	21		None
11	Other Amphetamines	22		Other Amphetamines
07	Other Opiates and Synthetics	23		Buprenorphine (non-prescription)
07	Other Opiates and Synthetics	24		Codeine
07	Other Opiates and Synthetics	25		Propoxyphene (Darvon)
07	Other Opiates and Synthetics	26		Meperidine (Demerol)
07	Other Opiates and Synthetics	27		Hydromorphone (Dilaudid)
07	Other Opiates and Synthetics	28		Pentazocine
07	Other Opiates and Synthetics	29		Hydrocodone (Vicodin)
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preparations)	3		Marijuana/Hashish
07	Other Opiates and Synthetics	30		Tramadol (Ultram)
12	Other Stimulants	31		Methylphenidate (Ritalin)
13	Benzodiazepines	32		Alprazolam (Xanax)
13	Benzodiazepines	33		Chlordiazepoxide (Librium)
13	Benzodiazepines	34		Clorazepate (Tranzene)
13	Benzodiazepines	35		Diazepam (Valium)
13	Benzodiazepines	36		Flurazepam (Dalmane)
13	Benzodiazepines	37		Lorazepam (Ativan)

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Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Substance Problem Codes (Primary-14A,Secondary-14B,Tertiart-14C)	~~		Primary Drug (Admission and Discharge)
20	Other	38		Synthetic Cannabinoids (Synthetic Marijuana, K2, Spice)
11	Other Amphetamines	39		Bath Salts
03	Cocaine, Crack	4		Cocaine - Powder
03	Cocaine, Crack	5		Crack
10	Methamphetamine	6		Amphetamines/Methamphetamines
15	Barbiturates	7		Barbiturates
13	Benzodiazepines	8		Benzodiazepines
11	Other Amphetamines	9		MDMA (MOLLY), Ecstasy

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Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	~~		Primary Drug (Admission and Discharge)
97	Unknown	-		Unknown (None of the above)
02	Alcohol	1		Alcohol
20	Other	10		GHB
09	Hallucinogens	11		Hallucingens - LSD
08	PCP	12		Hallucingens - PCP
09	Hallucinogens	13		Hallucingens - Other
17	Inhalants	14		Inhalants
20	Other	15		Ketamine
06	Non-Prescription Methadone	16		Methadone (non prescription)
07	Other Opiates and Synthetics	17		Opiate - Other
07	Other Opiates and Synthetics	18		Oxycontin
13	Benzodiazepines	19		Rohypnol
05	Heroin	2		Heroin
20	Other	20		Other (Phenytoin, etc)
01	None	21		None
11	Other Amphetamines	22		Other Amphetamines
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preparations)	3		Marijuana/Hashish

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Item No	Treatment Episode Data Set	Item	Value	State System Data
14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	~~		Primary Drug (Admission and Discharge)
03	Cocaine, Crack	4		Cocaine - Powder
03	Cocaine, Crack	5		Crack
10	Methamphetamine	6		Amphetamines/Methamphetamines
15	Barbiturates	7		Barbiturates
13	Benzodiazepines	8		Benzodiazepines
11	Other Amphetamines	9		MDMA (MOLLY), Ecstasy
No longer effective as of: 11-05-2014				

Item No	Treatment Episode Data Set	Item	Value	State System Data
15	Usual Route of Administration (Primary-15A, Secondary-15B, Tertiar-15C)	~~		Primary Route
96	Not Applicable	-		n/a
20	Other	-		n/a
97	Unknown	-		Unknwn (None of the above)
01	Oral	1		Oral
03	Inhalation	2		Inhalantion/Sniffing
02	Smoking	3		Smoking
04	Injection (IV or intramuscular, intradermal or subcutaneous)	4		Intramuscular/Sub-Cutaneous
04	Injection (IV or intramuscular, intradermal or subcutaneous)	5		Intravenous

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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)	~~		Primary Route
97	Unknown	-		Unknwn (None of the above)
01	Oral	1		Oral
03	Inhalation	2		Inhalantion/Sniffing
02	Smoking	3		Smoking
04	Injection (IV or intramuscular, intradermal or subcutaneous)	4		Intramuscular/Sub-Cutaneous
04	Injection (IV or intramuscular, intradermal or subcutaneous)	5		Intravenous

No longer effective as of: 11-05-2014

16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	~~		Primary Frequency (Admission and Discharge)
97	Unknown	-		Unknown (None of the above)
01	No use in the past month	1		No use past month
02	1-3 times in past month	2		Less than weekly
03	1-2 times per week	3		1 to 2 times per week
04	3-6 times per week	4		3 to 6 times per week
05	Daily	5		Daily

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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)	~~		Primary Frequency (Admission and Discharge)
96	Not Applicable	-		n/a
97	Unknown	-		Unknown (None of the above)
01	No use in the past month	1		No use past month
02	1-3 times in past month	2		Less than weekly
03	1-2 times per week	3		1 to 2 times per week
04	3-6 times per week	4		3 to 6 times per week
05	Daily	5		Daily
17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	~~		Primary Age
00	Newborn with a substance dependency problem	-		n/a
96	Not Applicable	-		n/a
97	Unknown	-		Unknown (None of the above)
01-95	Age at First Use, in years	01-95		Age

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Item No Treatment Episode Data Set Item Value State System Data

**17 Age of First Use (Primary-17A,
Secondary-17B, Tertiary-17C)**

~~

Primary Age

97 Unknown

-

Unknown (None of the above)

97 Unknown

-

Unknown - ages 00-06 not collected

01-95 Age at First Use, in years

07-96

Age

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Item No	Treatment Episode Data Set	Item	Value	State System Data
K 18	Type of Services	~~		Level of Care (Admission and Discharge)
07	Ambulatory - Non-Intensive Outpatient	1		Standard/Traditional Outpatient
01	Detoxification - Hospital Inpatient (Detox, 24 hour Service)	10		Detox-Hospital Inpatient
08	Ambulatory Detoxification	11		Detox-Outpatient (Non-Methadone)
07	Ambulatory - Non-Intensive Outpatient	12		OPIOID - Methadone Outpatient
08	Ambulatory Detoxification	13		Detox-Methadone Outpatient
07	Ambulatory - Non-Intensive Outpatient	14		Non-traditional Outpatient
06	Ambulatory - Intensive Outpatient	15		Intensive Outpatient -OPIOID-Maintenance
06	Ambulatory - Intensive Outpatient	2		Intensive Outpatient
06	Ambulatory - Intensive Outpatient	3		Partial-Hospitalization
05	Rehabilitation/Residential - Long-term, (more than 30 days)	4		Transitional Care/Extended Care
05	Rehabilitation/Residential - Long-term, (more than 30 days)	5		Halfway House
05	Rehabilitation/Residential - Long-term, (more than 30 days)	6		Long-Term Residential
04	Rehabilitation/Residential - Short-term, (30 days or fewer)	7		Short-Term Residential (Medically Monitored)
03	Rehabilitation/Residential - Hospital (other than detox)	8		Hospital-Based (acute) Residential
02	Detoxification Free-standing Residential (Detox, 24 hour Service)	9		Detox-free Standing Residential (Sub-Acute)

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
19	Medication-Assisted Opioid Therapy	~~		Methadone Maintenance
1	Yes	-		Yes - Vivitrol and primary drug IS an Opioid
1	Yes	-		Yes - Buprenorphine/Suboxone TX
1	Yes	-		Yes - Methadone TX
2	No	-		No - Psychotropic drug
6	Not Applicable	-		n/a
2	No	-		No - Naltrexone
2	No	-		No - Acamprosate
2	No	-		No
7	Unknown	-		Unknown (None of the above)
2	No	-		No - Vivitrol and primary drug IS Alcohol

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Minimum

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
19	Medication-Assisted Opioid Therapy	~~		Methadone Maintenance
2	No	0		No
1	Yes	1		Yes - Methadone TX
1	Yes	2		Yes - Buprenophene/Suboxone TX
2	No	3		No- Acamprostate
2	No	4		No - Naltrexone
1	Yes	5		Yes - Vivitrol, if primary drug IS an Opiod
2	No	5		No - Vivitrol, if primary drug IS NOT an Opiod
2	No	6		No - Psychotropic drug
7	Unknown	7		None (no record)
7	Unknown	8		Other
7	Unknown	9		Don't Know

No longer effective as of: 11-05-2014

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
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Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~~		Primary Drug (Admission and Discharge)
9997	Unknown	-		Unknown (None of the above)
9996	Not Applicable	-		***MDS 14 is 01 (none)
0201	Alcohol	1		Alcohol
2003	GHB/GBL - (gamma-hydroxybutyrate, gamma-butyrolactone)	10		GHB
0901	LSD	11		Hallucingens - LSD
0801	PCP or PCP Combinations	12		Hallucingens - PCP
0902	DMT, mescaline, peyote,STD and Other Hallucinogens	13		Hallucingens - Other
1701	Aerosols	14		Inhalants
2004	Ketamine - (Special K)	15		Ketamine
0601	Non - Prescription Methadone	16		Methadone (non prescription)
0706	Other Opiates or Synthetics	17		Opiate - Other
0703	Oxycodone (Oxycotin)	18		Oxycontin
1309	Flutirazepam (Rohypnol)	19		Rohypnol
0501	Heroine	2		Heroin
2002	Synthetic Cannabinoid (Spice), Carisoprodol (Soma) and other drugs	20		Other (Phenytoin, etc)
1109	Other Amphetamines	22		Other Amphetamines
0710	Buprenorphine (Subutex,Suboxone)	23		Buprenorphine (non-prescription)
0701	Codeine	24		Codeine

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~~		Primary Drug (Admission and Discharge)
0702	Propoxyphene (Darvon)	25		Propoxyphene (Darvon)
0704	Meperidine (Demerol)	26		Meperidine (Demerol)
0705	Hydromorphone (Dilaudid)	27		Hydromorphone (Dilaudid)
0707	Pentazocine (Talwin)	28		Pentazocine
0708	Hydrocodone (Vicodin)	29		Hydrocodone (Vicodin)
0401	Marijuana/Hashish,THC and any other cannabis sativa preparation	3		Marijuana/Hashish
0709	Tramadol (Ultram)	30		Tramadol (Ultram)
1202	Methylphenidate - (Ritalin)	31		Methylphenidate (Ritalin)
1301	Alprazolam (Xanax)	32		Alprazolam (Xanax)
1302	Chlordiazepoxide (Librium)	33		Chlordiazepoxide (Librium)
1303	Clorazepate (Tranzene)	34		Clorazepate (Tranzene)
1304	Diazepam (Valium)	35		Diazepam (Valium)
1305	Flurazepam (Dalmane)	36		Flurazepam (Dalmane)
1306	Lorazepam (Ativan)	37		Lorazepam (Ativan)
2002	Synthetic Cannabinoid (Spice), Carisoprodol (Soma) and other drugs	38		Synthetic Cannabinoids (Synthetic Marijuana, K2, Spice)
1109	Other Amphetamines	39		Bath Salts
0302	Other Cocaine	4		Cocaine - Powder
0301	Crack	5		Crack
1001	Methamphetamine/Speed	6		Amphetamines/Methamphetamines

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~~		Primary Drug (Admission and Discharge)
1501	Phenobarbital	7		Barbiturates
1304	Diazepam (Valium)	8		Benzodiazepines
1103	Methylenedioxyamphetamine (MDMA, Ecstasy)	9		MDMA (MOLLY), Ecstasy

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~~		Primary Drug (Admission and Discharge)
9996	Not Applicable	-		***MDS 14 is 01 (none)
9997	Unknown	-		Unknown (None of the above)
0201	Alcohol	1		Alcohol
2003	GHB/GBL - (gamma-hydroxybutyrate, gamma-butyrolactone)	10		GHB
0901	LSD	11		Hallucingens - LSD
0801	PCP or PCP Combinations	12		Hallucingens - PCP
0902	DMT, mescaline, peyote,STD and Other Hallucinogens	13		Hallucingens - Other
1701	Aerosols	14		Inhalants
2004	Ketamine - (Special K)	15		Ketamine
0601	Non - Prescription Methadone	16		Methadone (non prescription)
0706	Other Opiates or Synthetics	17		Opiate - Other
0703	Oxycodone (Oxycotin)	18		Oxycontin
1309	Flutirazepam (Rohypnol)	19		Rohypnol
0501	Heroine	2		Heroin
2002	Synthetic Cannabinoid (Spice), Carisoprodol (Soma) and other drugs	20		Other (Phenytoin, etc)
1109	Other Amphetamines	22		Other Amphetamines
0401	Marijuana/Hashish,THC and any other cannabis sativa preparation	3		Marijuana/Hashish
0302	Other Cocaine	4		Cocaine - Powder

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	~~		Primary Drug (Admission and Discharge)
0301	Crack	5		Crack
1001	Methamphetamine/Speed	6		Amphetamines/Methamphetamines
1501	Phenobarbital	7		Barbiturates
1304	Diazepam (Valium)	8		Benzodiazepines
1103	Methyleneioxymethamphetamine (MDMA, Ecstasy)	9		MDMA (MOLLY), Ecstasy
No longer effective as of: 11-05-2014				

2	Detail Drug Code, Secondary	~~		Primary Drug (Admission and Discharge)
_	Same as Detail Drug Code, Primary			
No longer effective as of: 11-05-2014				

2	Detail Drug Code, Secondary	~~		Primary Drug (Admission and Discharge)
_	Same as Detail Drug Code, Primary			

3	Detail Drug Code, Tertiary	~~		Primary Drug (Admission and Discharge)
_	Same as Detail Drug Code, Primary			

3	Detail Drug Code, Tertiary	~~		Primary Drug (Admission and Discharge)
_	Same as Detail Drug Code, Primary			
No longer effective as of: 11-05-2014				

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
4	Diagnostic Code (DSM or ICD) field should be coded 999.98 - field 19 replaces i	~~~		Not Collected
	999.98 Not Collected		999.98	Not Collected

5	Psychiatric Problem in Addition to Alcohol or Drug Problem	~~~		Psych Problem In Addition to Alcohol or Drug
7	Unknown	-		Unknown (None of the above)
2	No	0		No
1	Yes	1-30		Yes
7	Unknown	9		Don't Know
No longer effective as of: 11-05-2014				

5	Psychiatric Problem in Addition to Alcohol or Drug Problem	~~~		Psych Problem In Addition to Alcohol or Drug
7	Unknown	-		Unknown (None of the above)
2	No	0		No
1	Yes	1		Yes
7	Unknown	9		Don't Know

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

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

6	Pregnant at Admission	~~~		Pregnant at Admission
7	Unknown	-		Unknown (None of the above)
2	No - female client was not pregnant at admission	0		No
1	Yes - female client was pregnant at admission	1		Yes
7	Unknown	9		Don't know
No longer effective as of: 11-05-2014				

6	Pregnant at Admission	~~~		Pregnant at Admission
7	Unknown	-		Unknown (None of the above)
6	Not Applicable - use this code for male clients or children in prepuberty age	-		Male client
2	No - female client was not pregnant at admission	0		No
1	Yes - female client was pregnant at admission	1		Yes
2	No - female client was not pregnant at admission	2		No
7	Unknown	9		Don't know

7	Veteran Status	~~~		Veteran Status
7	Unknown	-		Unknown (None of the above)
2	No	0		No
1	Yes	1		Yes

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
8	Living Arrangements	~~~		Living Arrangement (Admission and Discharge)
97	Unknown	-		Unknown (None of the above)
02	Dependent Living - clients living in a supervised setting	1		Dependent Living/Institution
01	Homeless - clients with no fixed address; includes homeless shelter	2		Homeless - Shelter
01	Homeless - clients with no fixed address; includes homeless shelter	3		Homeless - Streets
03	Independent Living - clients living alone or with others but no supervision	4		Independent Living

8	Living Arrangements	~~~		Living Arrangement (Admission and Discharge)
97	Unknown	-		Unknown (None of the above)
01	Homeless - clients with no fixed address; includes homeless shelter	1		Homeless - Shelter
01	Homeless - clients with no fixed address; includes homeless shelter	2		Homeless - Streets
02	Dependent Living - clients living in a supervised setting	3		Dependent Living/Institution
03	Independent Living - clients living alone or with others but no supervision	4		Independent Living
No longer effective as of: 11-05-2014				

9	Source of Income/Support	~~~		Not Collected
98	Not Collected	98		Not Collected
No longer effective as of: 11-05-2014				

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No	Treatment Episode Data Set	Item	Value	State System Data
9	Source of Income/Support	~~~		Source of Income
01	Wages/Salary	-		Wages/salary
02	Public Assistance	-		Public assistance
03	Retirement/Pension	-		Retirement/pension
97	Unknown	-		Unknown (All variables not equal to 1)
20	Other	-		Other
21	None	-		None
04	Disability	-		Disability

10 Health Insurance

~~~

**Health Insurance**

This is a T/F set up - check box for that that converts to our code

|    |                                            |   |  |                               |
|----|--------------------------------------------|---|--|-------------------------------|
| 01 | Private Insurance (other than BCBS or HMO) | - |  | NJ Family Care                |
| 02 | Blue Cross/Blue Shield                     | - |  | BCBS, Aetha....               |
| 03 | Medicare                                   | - |  | Medicare                      |
| 04 | Medicaid                                   | - |  | Medicaid                      |
| 97 | Unknown                                    | - |  | Unknown (None of the above)   |
| 20 | Other (e.g. TriCare)                       | - |  | Other                         |
| 20 | Other (e.g. TriCare)                       | - |  | VA/Champus                    |
| 21 | None                                       | - |  | Uninsured                     |
| 06 | Health Maintenance Organization (HMO)      | - |  | HMO, Provider Network, PPO... |

# Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

New Jersey

**General reporting comments: [.] denotes [TableName.FieldName(s)]**

| Item No                                                             | Treatment Episode Data Set                               | Item | Value | State System Data                                   |
|---------------------------------------------------------------------|----------------------------------------------------------|------|-------|-----------------------------------------------------|
| <b>11</b>                                                           | <b>Expected/Actual Primary Source of Payment</b>         | ~~~  |       | <b>Expected Source of Payment</b>                   |
| This is a T/F set up - check box for that that converts to our code |                                                          |      |       |                                                     |
| 97                                                                  | Unknown                                                  | -    |       | Unknown (None of the other options)                 |
| 02                                                                  | Blue Cross/Blue Shield                                   | -    |       | n/a                                                 |
| 06                                                                  | Worker's Compensation                                    | -    |       | n/a                                                 |
| 05                                                                  | Other Government Payments                                | 1    |       | Child Welfare Reform Progerm (CWRP)                 |
| 05                                                                  | Other Government Payments                                | 10   |       | Driving Under Influence Initiative (DUII)           |
| 05                                                                  | Other Government Payments                                | 11   |       | South Jersey Initiative (SJI)                       |
| 09                                                                  | Other                                                    | 12   |       | Not assigned for any payer                          |
| 05                                                                  | Other Government Payments                                | 13   |       | Juvenile Justice Commission (JJC)                   |
| 05                                                                  | Other Government Payments                                | 14   |       | Woman's Set Aside                                   |
| 05                                                                  | Other Government Payments                                | 15   |       | HIV Set Aside                                       |
| 05                                                                  | Other Government Payments                                | 17   |       | Parole (DOC - CSAT)                                 |
| 05                                                                  | Other Government Payments                                | 18   |       | Parole Day Reporting/Aftercare                      |
| 05                                                                  | Other Government Payments                                | 19   |       | SAMHSA - HIV                                        |
| 05                                                                  | Other Government Payments                                | 2    |       | Work First NJ Substance Abuse Initiative (WFNJ-SAI) |
| 05                                                                  | Other Government Payments                                | 20   |       | Other Mental Health Services                        |
| 05                                                                  | Other Government Payments                                | 21   |       | Ryan White                                          |
| 08                                                                  | No Charge ( Free, Charity, Special Research or Teaching) | 22   |       | No Reimbrusemant Source/No Fee                      |
| 05                                                                  | Other Government Payments                                | 23   |       | Patient Incentive Program                           |

# Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

New Jersey

**General reporting comments: [.] denotes [TableName.FieldName(s)]**

| Item No   | Treatment Episode Data Set                       | Item | Value | State System Data                                  |
|-----------|--------------------------------------------------|------|-------|----------------------------------------------------|
| <b>11</b> | <b>Expected/Actual Primary Source of Payment</b> | ~~~  |       | <b>Expected Source of Payment</b>                  |
| 09        | Other                                            | 24   |       | Other                                              |
| 05        | Other Government Payments                        | 25   |       | SAMHSA - General                                   |
| 05        | Other Government Payments                        | 3    |       | Slot - DAS Non-Initiative                          |
| 01        | Self-Pay                                         | 30   |       | Family Pay                                         |
| 07        | Other Health Insurance Companies                 | 31   |       | Private Insurance                                  |
| 04        | Medicaid                                         | 32   |       | Medicaid                                           |
| 03        | Medicare                                         | 33   |       | Medicare                                           |
| 05        | Other Government Payments                        | 4    |       | Drug Court - Slotted                               |
| 05        | Other Government Payments                        | 5    |       | Drug Court - Fee for Services (DC-FFS)             |
| 05        | Other Government Payments                        | 51   |       | Chapter 51                                         |
| 05        | Other Government Payments                        | 52   |       | Enhancement                                        |
| 05        | Other Government Payments                        | 53   |       | Direct County Funding                              |
| 05        | Other Government Payments                        | 54   |       | Youth Services Commission                          |
| 05        | Other Government Payments                        | 55   |       | Other County Funding                               |
| 05        | Other Government Payments                        | 6    |       | Department of Corrections (DOC)                    |
| 05        | Other Government Payments                        | 7    |       | Medically Assisted Treatment Initiative (MATI) FFS |
| 05        | Other Government Payments                        | 8    |       | MATI Mobile Medication Unit (MMU)                  |
| 05        | Other Government Payments                        | 9    |       | State Parole Board (SPB)                           |

# Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

New Jersey

**General reporting comments: [.] denotes [TableName.FieldName(s)]**

| Item No                                                             | Treatment Episode Data Set                               | Item | Value | State System Data                                   |
|---------------------------------------------------------------------|----------------------------------------------------------|------|-------|-----------------------------------------------------|
| <b>11</b>                                                           | <b>Expected/Actual Primary Source of Payment</b>         | ~~~  |       | <b>Expected Source of Payment</b>                   |
| This is a T/F set up - check box for that that converts to our code |                                                          |      |       |                                                     |
| 97                                                                  | Unknown                                                  | -    |       | Unknown (None of the other options)                 |
| 05                                                                  | Other Government Payments                                | 1    |       | Child Welfare Reform Progerm (CWRP)                 |
| 05                                                                  | Other Government Payments                                | 10   |       | Driving Under Influence Initiative (DUII)           |
| 05                                                                  | Other Government Payments                                | 11   |       | South Jersey Initiative (SJI)                       |
| 05                                                                  | Other Government Payments                                | 13   |       | Juvenile Justice Commission (JJC)                   |
| 05                                                                  | Other Government Payments                                | 14   |       | Woman's Set Aside                                   |
| 05                                                                  | Other Government Payments                                | 15   |       | HIV Set Aside                                       |
| 09                                                                  | Other                                                    | 16   |       | Other                                               |
| 05                                                                  | Other Government Payments                                | 17   |       | Parole (DOC - CSAT)                                 |
| 05                                                                  | Other Government Payments                                | 18   |       | Parole Day Reporting/Aftercare                      |
| 05                                                                  | Other Government Payments                                | 19   |       | SAMHSA - HIV                                        |
| 05                                                                  | Other Government Payments                                | 2    |       | Work First NJ Substance Abuse Initiative (WFNJ-SAI) |
| 05                                                                  | Other Government Payments                                | 20   |       | Other Mental Health Services                        |
| 05                                                                  | Other Government Payments                                | 21   |       | Ryan White                                          |
| 08                                                                  | No Charge ( Free, Charity, Special Research or Teaching) | 22   |       | No Reimbrusemant Source/No Fee                      |
| 05                                                                  | Other Government Payments                                | 25   |       | SAMHSA - General                                    |
| 05                                                                  | Other Government Payments                                | 3    |       | Slot - DAS Non-Initiative                           |
| 01                                                                  | Self-Pay                                                 | 30   |       | Family Pay                                          |

# Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

New Jersey

**General reporting comments: [.] denotes [TableName.FieldName(s)]**

| Item No                               | Treatment Episode Data Set                       | Item | Value | State System Data                                  |
|---------------------------------------|--------------------------------------------------|------|-------|----------------------------------------------------|
| <b>11</b>                             | <b>Expected/Actual Primary Source of Payment</b> | ~~~  |       | <b>Expected Source of Payment</b>                  |
| 07                                    | Other Health Insurance Companies                 | 31   |       | Private Insurance                                  |
| 04                                    | Medicaid                                         | 32   |       | Medicaid                                           |
| 03                                    | Medicare                                         | 33   |       | Medicare                                           |
| 05                                    | Other Government Payments                        | 4    |       | Drug Court - Slotted                               |
| 05                                    | Other Government Payments                        | 5    |       | Drug Court - Fee for Services (DC-FFS)             |
| 05                                    | Other Government Payments                        | 51   |       | Chapter 51                                         |
| 05                                    | Other Government Payments                        | 52   |       | Enhancement                                        |
| 05                                    | Other Government Payments                        | 53   |       | Direct County Funding                              |
| 05                                    | Other Government Payments                        | 54   |       | Youth Services Commission                          |
| 05                                    | Other Government Payments                        | 55   |       | Other County Funding                               |
| 05                                    | Other Government Payments                        | 6    |       | Department of Corrections (DOC)                    |
| 05                                    | Other Government Payments                        | 7    |       | Medically Assisted Treatment Initiative (MATI) FFS |
| 05                                    | Other Government Payments                        | 8    |       | MATI Mobile Medication Unit (MMU)                  |
| 05                                    | Other Government Payments                        | 9    |       | State Parole Board (SPB)                           |
| No longer effective as of: 11-05-2014 |                                                  |      |       |                                                    |

# Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

New Jersey

**General reporting comments: [.] denotes [TableName.FieldName(s)]**

| Item No   | Treatment Episode Data Set                                                      | Item | Value | State System Data                                  |
|-----------|---------------------------------------------------------------------------------|------|-------|----------------------------------------------------|
| <b>12</b> | <b>Detailed Not in Labor Force</b>                                              | ~~   |       | <b>Employment Status (Admission and Discharge)</b> |
| 97        | Unknown                                                                         | -    |       | Unknwn (None of the above)                         |
| 04        | Disabled                                                                        | 10   |       | Disabled                                           |
| 02        | Student                                                                         | 3    |       | Student                                            |
| 01        | Homemaker                                                                       | 4    |       | Homemaker                                          |
| 03        | Retired                                                                         | 5    |       | Retired                                            |
| 06        | Other                                                                           | 7    |       | Unemployed: Not looking for work                   |
| 05        | Inmate of Institution ( Prison or Institution - keeps people out of work force) | 9    |       | Unemployed: Living in an institution               |

|           |                                                                                 |    |  |                                                    |
|-----------|---------------------------------------------------------------------------------|----|--|----------------------------------------------------|
| <b>12</b> | <b>Detailed Not in Labor Force</b>                                              | ~~ |  | <b>Employment Status (Admission and Discharge)</b> |
| 97        | Unknown                                                                         | -  |  | Unknwn (None of the above)                         |
| 05        | Inmate of Institution ( Prison or Institution - keeps people out of work force) | 10 |  | Unemployed: Living in an institution               |
| 04        | Disabled                                                                        | 11 |  | Disabled                                           |
| 02        | Student                                                                         | 4  |  | Student                                            |
| 01        | Homemaker                                                                       | 5  |  | Homemaker                                          |
| 03        | Retired                                                                         | 6  |  | Retired                                            |
| 06        | Other                                                                           | 8  |  | Unemployed: Not looking for work                   |

No longer effective as of: 11-05-2014

# Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

New Jersey

**General reporting comments: [.] denotes [TableName.FieldName(s)]**

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

| <b>13</b> | <b>Detailed Criminal Justice Referral Categories</b> | ~~~ | <b>Detailed Criminal Justice Referral</b> |
|-----------|------------------------------------------------------|-----|-------------------------------------------|
|-----------|------------------------------------------------------|-----|-------------------------------------------|

This is a T/F set up - check box for that that converts to our code

|    |                                                                                   |   |                             |
|----|-----------------------------------------------------------------------------------|---|-----------------------------|
| 01 | State/Federal Court                                                               | - | Case Pending                |
| 03 | Probation/Parole                                                                  | - | Probation Case              |
| 04 | Other Recognized Legal Entity ( Local Law, Corr. Agency, Youth Ser., Review Board | - | DYFS or Family Court        |
| 05 | Diversionary Program (E.G. TASC)                                                  | - | Drug Court                  |
| 96 | Not Applicable                                                                    | - | No Legal Problem            |
| 07 | DUI/DWI                                                                           | - | DWI License Suspension      |
| 08 | Other                                                                             | - | Other                       |
| 97 | Unknown                                                                           | - | Unknown (None of the Above) |
| 06 | Prison                                                                            | - | Jail/Prison Inmate          |

No longer effective as of: 04-30-2009

# Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set  
Version : 1

K = Key Field

**Supplemental**

New Jersey

**General reporting comments: [.] denotes [TableName.FieldName(s)]**

| Item No                                                             | Treatment Episode Data Set                                                        | Item | Value | State System Data                         |
|---------------------------------------------------------------------|-----------------------------------------------------------------------------------|------|-------|-------------------------------------------|
| <b>13</b>                                                           | <b>Detailed Criminal Justice Referral Categories</b>                              | ~~~  |       | <b>Detailed Criminal Justice Referral</b> |
| This is a T/F set up - check box for that that converts to our code |                                                                                   |      |       |                                           |
| 01                                                                  | State/Federal Court                                                               | -    |       | Case Pending                              |
| 03                                                                  | Probation/Parole                                                                  | -    |       | Probation/Parole                          |
| 04                                                                  | Other Recognized Legal Entity ( Local Law, Corr. Agency, Youth Ser., Review Board | -    |       | DYFS or Family Court                      |
| 05                                                                  | Diversionary Program (E.G. TASC)                                                  | -    |       | Drug Court                                |
| 96                                                                  | Not Applicable                                                                    | -    |       | No Legal Problem                          |
| 07                                                                  | DUI/DWI                                                                           | -    |       | DWI License Suspension                    |
| 08                                                                  | Other                                                                             | -    |       | Other                                     |
| 97                                                                  | Unknown                                                                           | -    |       | Unknown (None of the Above)               |
| 06                                                                  | Prison                                                                            | -    |       | Jail/Prison Inmate                        |

**14 Marital Status**

~~~ **Marital Status**

| | | | | |
|----|---|---|--|-----------------------------|
| 97 | Unknown | - | | Unknown (None of the above) |
| 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 |
| 03 | Separated (legally seperated or otherwise absent becasue of marital discord)) | 4 | | Separated |
| 04 | Divorced | 5 | | Divorced |

No longer effective as of: 11-05-2014

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|---------------------------------------|--|-------|-------|--|
| 14 | Marital Status | ~~~ | | Marital Status |
| 97 | Unknown | - | | Unknown (None of the above) |
| 01 | Never Married - includes clients who are single or whose | 1 | | Single |
| 02 | Now Married (includes those living together as married) | 2 | | Married |
| 03 | Separated (legally seperated or otherwise absent becasue of marital discord) | 3 | | Separated |
| 04 | Divorced | 4 | | Divorced |
| 05 | Widowed | 5 | | Widowed |
| 02 | Now Married (includes those living together as married) | 6 | | Civil Union |
| 15 | Days Waiting to Enter Treatment | ~~~ | | Not Collected |
| 998 | Not Collected | 998 | | Not Collected |
| No longer effective as of: 12-30-2005 | | | | |
| 15 | Days Waiting to Enter Treatment | ~~~ | | Days Waiting to Enter Treatment |
| 997 | Unknown | - | | Unknown (Not between 0 and 96 inclusive) |
| 000-996 | Number of Days waiting | 0-996 | | Day(s) |
| 16 | Number of Arrests in the 30 Days Prior to Admission | ~~~ | | Number of Arrests in 30 Days Prior to Admission |
| 97 | Unknown | - | | Unknown (Not between 0 and 96 inclusive) |
| 00-96 | Number of Arrests | 0-96 | | Arrest(s) |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

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

| | | | | |
|-----------|--|-----|--|---------------|
| 16 | Number of Arrests in the 30 Days Prior to Admission | ~~~ | | Not Collected |
|-----------|--|-----|--|---------------|

No longer effective as of: 12-30-2005

| | | | | |
|-----------|--|-----|--|---|
| 17 | Frequency of Attendance at Self-Help Programs in 30 days prior to Admission | ~~~ | | Frequency of attendance at self-help programs in past 30 days prior to admission |
|-----------|--|-----|--|---|

| | | | | |
|----|---|----|--|--|
| 97 | Unknown | - | | Unknown (None of the other codes) |
| 01 | No Attendance in past month | 1 | | No attendance in past month |
| 02 | less than once a week - 1 to 3 times in past 30 days | 2 | | 1-3 times in past month |
| 03 | About once a week - 4 to 7 times in past 30 days | 3 | | 4-7 times in past month |
| 04 | 2 to 3 times a week - 8 to 15 times in past 30 days | 4 | | 8-15 times in past month |
| 05 | 4 or more times a week - 16 to 30 times in past 30 days | 5 | | 16-30 times in past month |
| 06 | Some Attendance in past month, but number of times and frequency is unknown | 6 | | Some attendance in past month, but frequency unknown |
| 98 | Not Collected | 98 | | n/a |

No longer effective as of: 11-05-2014

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Supplemental

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|--|------|-------|---|
| 17 | Frequency of Attendance at Self-Help Programs in 30 days prior to Admission | ~~~ | | Frequency of attendance at self-help programs in past 30 days prior to admission |
| 97 | Unknown | - | | Unknown (None of the other codes) |
| 01 | No Attendance in past month | 1 | | No attendance in past month |
| 02 | less than once a week -1 to 3 times in past 30 days | 2 | | 1-3 times in past month |
| 03 | About once a week - 4 to 7 times in past 30 days | 3 | | 4-7 times in past month |
| 04 | 2 to 3 times a week - 8 to 15 times in past 30 days | 4 | | 8-15 times in past month |
| 05 | 4 or more times a week - 16 to 30 times in past 30 days | 5 | | 16-30 times in past month |
| 06 | Some Attendance in past month, but number of times and frequency is unknown | 6 | | Some attendance in past month, but frequency unknown |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|----------|---|------|-------|---|
| 1 | System Transaction at Discharge | ~ | | System Transaction Type |
| | A Add | A | | Add |
| | C Change | C | | Change |
| | D Delete | D | | Delete |
| 2 | State Code at Discharge | NJ | | FIPS State Code |
| | - State abbreviation according postal codes | - | | NJ |
| 3 | Reporting Date at Discharge | ~ | | Month and year data file submitted |
| | | | | MMYYYY |
| 4 | State Provider Identifier at Discharge | ~~ | | Provider ID |
| | | | | "NJ" + 6 characters |
| 5 | Client Identifier at Discharge | ~~ | | ID Combo (Client ID + Episode Code + Event Code) |
| | | | | 14 or 15 characters (depending if episode is 1 or 2 digits) |
| 6 | Co-Dependent/Collateral at Discharge | ~~ | | Co-Dependent/collateral |
| | 2 No | - | | Unknown (None of the above) |
| | 2 No | 1 | | Alcohol/Drug Abuser |
| | 1 Yes | 2 | | Co-Dependent/Family |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|----------|---|------|-------|---|
| 7 | Type of Treatment Service/Treatment Setting at Discharge | ~~ | | Level of Care (Admission and Discharge) |
| 07 | Ambulatory -Non Intensive -Outpatient | 1 | | Standard/Traditional Outpatient |
| 01 | Detoxification, 24-Hour Service, Hospital Inpatient | 10 | | Detox-Hospital Inpatient |
| 08 | Ambulatory Detoxification | 11 | | Detox-Outpatient (Non-Methadone) |
| 07 | Ambulatory -Non Intensive -Outpatient | 12 | | OPIOID - Methadone Outpatient |
| 08 | Ambulatory Detoxification | 13 | | Detox-Methadone Outpatient |
| 07 | Ambulatory -Non Intensive -Outpatient | 14 | | Non-traditional Outpatient |
| 06 | Ambulatory - Intensive -Outpatient | 15 | | Intensive Outpatient -OPIOID-Maintenance |
| 06 | Ambulatory - Intensive -Outpatient | 2 | | Intensive Outpatient |
| 03 | Rehabilitation/Residential - Hospital (other than detoxification) | 3 | | Partial-Hospitalization |
| 05 | Rehabilitation/Residential - Long Term (More than 30 Days) | 4 | | Transitional Care/Extended Care |
| 05 | Rehabilitation/Residential - Long Term (More than 30 Days) | 5 | | Halfway House |
| 05 | Rehabilitation/Residential - Long Term (More than 30 Days) | 6 | | Long-Term Residential |
| 04 | Rehabilitation/Residential - Short Term (30 Days or Fewer) | 7 | | Short-Term Residential (Medically Monitored) |
| 03 | Rehabilitation/Residential - Hospital (other than detoxification) | 8 | | Hospital-Based (acute) Residential |
| 02 | Detoxification, 24-Hour Service, Free Standing Residential | 9 | | Detox-free Standing Residential (Sub-Acute) |
| 8 | Date of Last Contact or Data Update | ~~~~ | | Date of Last Contact |
| | | | | MMDDYYYY |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|--|------|---------|--|
| 9 | Date of Discharge | ~~~~ | | Date of Discharge |
| | | | MMDYYYY | |
| 10 | Reason for Discharge, Transfer, or Discontinuance of Treatment | ~~~~ | | Reason for Discharge |
| 24 | Transferred to anoither treatment program or facility that is not inSSA or SMHA | - | | n/a - not collected by state |
| 01 | Treatment Completed | - | | Treatment plan completed |
| 02 | Dropped out of treatment (lost contact, Left Against Professional Advice | - | | Quit or dropped out |
| 03 | Ternimated by Facility | - | | Administrative Discharge/Rule Non-compliance |
| 08 | Unknown - This code will still be accepted by states shouls use 97 Unknown | - | | Unknown (None of the other options) |
| 14 | Transferred to Trtment Prog or Facil, but did not report | - | | n/a - not collected by state |
| 05 | Incarerated or released by or to courts | - | | Incarcerated |
| 06 | Death | - | | Deceased |
| 07 | Other - includes aging out of MH childrens system, extended placement (condition | - | | Other |
| 04 | Transferred to Another Treatment Program or Facility | - | | Medical Discharge/Hospitalized |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| 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 | - | | Treatment plan completed |
| 02 | Dropped out of treatment (lost contact, Left Against Professional Advice | - | | Quit or dropped out |
| 03 | Terminated by Facility | - | | Administrative Discharge/Rule Non-compliance |
| 04 | Transferred to Another Treatment Program or Facility | - | | Medical Discharge/Hospitalized |
| 08 | Unknown - This code will still be accepted by states should use 97 Unknown | - | | Unknown (None of the other options) |
| 05 | Incarerated or released by or to courts | - | | Incarcerated |
| 06 | Death | - | | Deceased |
| 07 | Other - includes aging out of MH childrens system, extended placement (condition | - | | Other |
| 14 | Transferred to Trtment Prog or Facil, but did not report | - | | n/a - not collected by state |
| No longer effective as of: 11-05-2014 | | | | |

| | | | |
|-----------|---|----|--|
| 11 | Provider Identifier at Admission | ~~ | Provider ID
"NJ" + 6 characters |
| 12 | Client Identifier at Admission | ~~ | ID Combo (Client ID + Episode Code + Event Code)
14 or 15 characters (depending if episode is 1 or 2 digits) |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|--|------|-----------------|--------------------------------|
| 13 | Co-Dependent/Collateral at Admission | ~~ | | Co-Dependent/collateral |
| 2 | Client | - | | Unknown (None of the above) |
| 2 | Client | 1 | | Alcohol/Drug Abuser |
| 1 | Codependent/collateral | 2 | | Co-Dependent/Family |
| 14 | Client Transaction Type (pulled from admission dataset) | ~~ | | Client Transaction Type |
| A | Initial Admission (SA) | A | | Admission |
| T | Transfer or change in service (SA) | T | | Transfer |
| 15 | Date of Admission (pulled from admission dataset) | ~~ | | Date of Admission |
| | | | MMDDYYYY Format | |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|---|
| 16 | Type of Service at Admission
(pulled from admission dataset) | ~~ | | Level of Care (Admission and Discharge) |
| 01 | Detoxification, 24-hour service - Hospital Inpatient | 10 | | Detox-Hospital Inpatient |
| 08 | Ambulatory Detoxification | 11 | | Detox-Outpatient (Non-Methadone) |
| 07 | Ambulatory - Non-Intensive Outpatient | 12 | | OPIOID - Methadone Outpatient |
| 08 | Ambulatory Detoxification | 13 | | Detox-Methadone Outpatient |
| 07 | Ambulatory - Non-Intensive Outpatient | 14 | | Non-traditional Outpatient |
| 06 | Ambulatory - Intensive Outpatient | 15 | | Intensive Outpatient -OPIOID-Maintenance |
| 06 | Ambulatory - Intensive Outpatient | 2 | | Intensive Outpatient |
| 06 | Ambulatory - Intensive Outpatient | 3 | | Partial-Hospitalization |
| 05 | Rehabilitation/Residential - Long Term (more than 30 days) | 4 | | Transitional Care/Extended Care |
| 05 | Rehabilitation/Residential - Long Term (more than 30 days) | 5 | | Halfway House |
| 05 | Rehabilitation/Residential - Long Term (more than 30 days) | 6 | | Long-Term Residential |
| 07 | Ambulatory - Non-Intensive Outpatient | 7 | | Short-Term Residential (Medically Monitored) |
| 04 | Rehabilitation/Residential - Short Term (30 days or fewer) | 7 | | Short-Term Residential (Medically Monitored) |
| 03 | Rehabilitation/Residential - Hospital (other than Detoxification) | 8 | | Hospital-Based (acute) Residential |
| 02 | Detoxification , 24 hour service , Free-Standing Residential | 9 | | Detox-free Standing Residential (Sub-Acute) |

17 Date of Birth (pulled from admission dataset)

~~

DOB

mmdyyy

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K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|-----------------------------|
| 18 | Gender (pulled from admission dataset) | ~~ | | Gender |
| 7 | Unknown | - | | Unknown (None of the above) |
| 1 | Male | 1 | | Male |
| 2 | Female | 2 | | Female |
| 7 | Unknown | 3 | | Transgender |
| 7 | Unknown | 4 | | Other |

| | | | | |
|-----------|---|----|--|---|
| 19 | Race (pulled from admission dataset) | ~~ | | Race |
| 97 | Unknown | - | | Unknown (None of the above) |
| 05 | White | 1 | | White |
| 04 | Black or African American | 2 | | Black |
| 13 | Asian | 3 | | Asian |
| 01 | Alaskan Native (Aleut, Eskimo) | 4 | | Alaskan Native |
| 02 | American Indian | 5 | | American Indian |
| 23 | Native Hawaiian or other Pacific Islander | 6 | | Native Hawaiian or other Pacific Islander |

No longer effective as of: 11-05-2014

SAMS 2005 - New Jersey Treatment Episode Data Set
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Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|--|------|-------|---|
| 19 | Race (pulled from admission dataset) | ~~ | | Race |
| 21 | Two or more races | - | | if Race2 has value between and 6 inclusive and equal to Race1 |
| 20 | Other single race | - | | n/a |
| 97 | Unknown | - | | Unknown (None of the above) |
| 05 | White | 1 | | White |
| 04 | Black or African American | 2 | | Black |
| 13 | Asian | 3 | | Asian |
| 01 | Alaskan Native (Aleut, Eskimo) | 4 | | Alaskan Native |
| 02 | American Indian | 5 | | American Indian |
| 23 | Native Hawaiian or other Pacific Islander | 6 | | Native Hawaiian or other Pacific Islander |
| 20 | Ethnicity (pulled from admission dataset) | ~~ | | Ethnicity |
| 97 | Unknown | - | | Unknown (None of the above) |
| 05 | Not of Specific Hispanic or Latino Origin | 1 | | Not of Hispanic Origin |
| 01 | Puerto Rican | 2 | | Puerto Rican |
| 02 | Mexican | 3 | | Mexican |
| 03 | Cuban | 4 | | Cuban |
| 04 | Other Specific Hispanic or Latino | 5 | | Dominican |
| 06 | Hispanic or Latino - specific origin not specified | 6 | | Other Hispanic |

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Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

Item No Treatment Episode Data Set Item Value State System Data

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K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|---|
| 21 | Substance Problem At Discharge,
(Primary, Secondary, Tertiary) | ~~ | | Primary Drug (Admission and Discharge) |
| 97 | Unknown | - | | Unknown (None of the above) |
| 02 | Alcohol | 1 | | Alcohol |
| 20 | Other | 10 | | GHB |
| 09 | Hallucinogens | 11 | | Hallucingens - LSD |
| 08 | PCP- phencyclidine | 12 | | Hallucingens - PCP |
| 09 | Hallucinogens | 13 | | Hallucingens - Other |
| 17 | Inhalants | 14 | | Inhalants |
| 20 | Other | 15 | | Ketamine |
| 06 | Non-Prescription Methadone | 16 | | Methadone (non prescription) |
| 07 | Other Opiates and Synthetics | 17 | | Opiate - Other |
| 07 | Other Opiates and Synthetics | 18 | | Oxycontin |
| 13 | Benzodiazepines | 19 | | Rohypnol |
| 05 | Heroin | 2 | | Heroin |
| 20 | Other | 20 | | Other (Phenytoin, etc) |
| 01 | None | 21 | | None |
| 11 | Other Amphetamines | 22 | | Other Amphetamines |
| 04 | Marijuana/Hashish | 3 | | Marijuana/Hashish |
| 03 | Cocaine/Crack | 4 | | Cocaine - Powder |

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Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|---|
| 21 | Substance Problem At Discharge,
(Primary, Secondary, Tertiary) | ~~ | | Primary Drug (Admission and Discharge) |
| 03 | Cocaine/Crack | 5 | | Crack |
| 10 | Methamphetamine/SPeed | 6 | | Amphetamines/Methamphetamines |
| 15 | Barbiturates | 7 | | Barbiturates |
| 13 | Benzodiazepines | 8 | | Benzodiazepines |
| 11 | Other Amphetamines | 9 | | MDMA (MOLLY), Ecstasy |

No longer effective as of: 11-05-2014

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Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|---|
| 21 | Substance Problem At Discharge,
(Primary, Secondary, Tertiary) | ~~ | | Primary Drug (Admission and Discharge) |
| 97 | Unknown | - | | Unknown (None of the above) |
| 16 | Other Sedatives or Hypnotics | - | | n/a |
| 18 | Over-The-Counter medicines | - | | n/a |
| 14 | Other Tranquilizer | - | | n/a |
| 02 | Alcohol | 1 | | Alcohol |
| 20 | Other | 10 | | GHB |
| 09 | Hallucinogens | 11 | | Hallucingens - LSD |
| 08 | PCP- phencyclidine | 12 | | Hallucingens - PCP |
| 09 | Hallucinogens | 13 | | Hallucingens - Other |
| 17 | Inhalants | 14 | | Inhalants |
| 20 | Other | 15 | | Ketamine |
| 06 | Non-Prescription Methadone | 16 | | Methadone (non prescription) |
| 07 | Other Opiates and Synthetics | 17 | | Opiate - Other |
| 07 | Other Opiates and Synthetics | 18 | | Oxycontin |
| 13 | Benzodiazepines | 19 | | Rohypnol |
| 05 | Heroin | 2 | | Heroin |
| 20 | Other | 20 | | Other (Phenytoin, etc) |
| 01 | None | 21 | | None |

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Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|---|
| 21 | Substance Problem At Discharge,
(Primary, Secondary, Tertiary) | ~~ | | Primary Drug (Admission and Discharge) |
| 11 | Other Amphetamines | 22 | | Other Amphetamines |
| 07 | Other Opiates and Synthetics | 23 | | Buprenorphine (non-prescription) |
| 07 | Other Opiates and Synthetics | 24 | | Codeine |
| 07 | Other Opiates and Synthetics | 25 | | Propoxyphene (Darvon) |
| 07 | Other Opiates and Synthetics | 26 | | Meperidine (Demerol) |
| 07 | Other Opiates and Synthetics | 27 | | Hydromorphone (Dilaudid) |
| 07 | Other Opiates and Synthetics | 28 | | Pentazocine |
| 07 | Other Opiates and Synthetics | 29 | | Hydrocodone (Vicodin) |
| 04 | Marijuana/Hashish | 3 | | Marijuana/Hashish |
| 07 | Other Opiates and Synthetics | 30 | | Tramadol (Ultram) |
| 12 | Other Stimulants | 31 | | Methylphenidate (Ritalin) |
| 13 | Benzodiazepines | 32 | | Alprazolam (Xanax) |
| 13 | Benzodiazepines | 33 | | Chlordiazepoxide (Librium) |
| 13 | Benzodiazepines | 34 | | Clorazepate (Tranzene) |
| 13 | Benzodiazepines | 35 | | Diazepam (Valium) |
| 13 | Benzodiazepines | 36 | | Flurazepam (Dalmane) |
| 13 | Benzodiazepines | 37 | | Lorazepam (Ativan) |
| 20 | Other | 38 | | Synthetic Cannabinoids (Synthetic Marijuana, K2, Spice) |

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Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|--|
| 21 | Substance Problem At Discharge,
(Primary, Secondary, Tertiary) | ~~ | | Primary Drug (Admission and Discharge) |
| 11 | Other Amphetamines | 39 | | Bath Salts |
| 03 | Cocaine/Crack | 4 | | Cocaine - Powder |
| 03 | Cocaine/Crack | 5 | | Crack |
| 10 | Methamphetamine/SPeed | 6 | | Amphetamines/Methamphetamines |
| 15 | Barbiturates | 7 | | Barbiturates |
| 13 | Benzodiazepines | 8 | | Benzodiazepines |
| 11 | Other Amphetamines | 9 | | MDMA (MOLLY), Ecstasy |
| 22 | Frequency of Use at Discharge
(Primary, Secondary, Tertiary) | ~~ | | Primary Frequency (Admission and Discharge) |
| 97 | Unknown | - | | Unknown (None of the above) |
| 01 | No Use in the Past Month | 1 | | No use past month |
| 02 | 1-3 Times in the Past Month | 2 | | Less than weekly |
| 03 | 1-2 Times in the Past Week | 3 | | 1 to 2 times per week |
| 04 | 3-6 Times in the Past Week | 4 | | 3 to 6 times per week |
| 05 | Daily | 5 | | Daily |

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Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|---------------------------------------|---|------|-------|---|
| 23 | Living Arrangements at Discharge | ~~~ | | Living Arrangement (Admission and Discharge) |
| 97 | Unknown | - | | Unknown (None of the above) |
| 01 | Homeless - clients with no fixed address; includes homeless shelter | 1 | | Homeless - Shelter |
| 01 | Homeless - clients with no fixed address; includes homeless shelter | 2 | | Homeless - Streets |
| 02 | Dependent Living - clients living in a supervised setting | 3 | | Dependent Living/Institution |
| 03 | Independent Living - clients living alone or with others but no supervision | 4 | | Independent Living |
| No longer effective as of: 11-05-2014 | | | | |

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|---|
| 23 | Living Arrangements at Discharge | ~~~ | | Living Arrangement (Admission and Discharge) |
| 97 | Unknown | - | | Unknown (None of the above) |
| 02 | Dependent Living - clients living in a supervised setting | 1 | | Dependent Living/Institution |
| 01 | Homeless - clients with no fixed address; includes homeless shelter | 2 | | Homeless - Shelter |
| 01 | Homeless - clients with no fixed address; includes homeless shelter | 3 | | Homeless - Streets |
| 03 | Independent Living - clients living alone or with others but no supervision | 4 | | Independent Living |

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Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|---------------------------------------|--|------|-------|--|
| 24 | Employment at Discharge | ~~ | | Employment Status (Admission and Discharge) |
| 97 | Unknown | - | | Unknwn (None of the above) |
| 01 | Full Time - works 35 or more hours a week- includes military | 1 | | Full-Time Work or Military |
| 04 | Not in Labor Force - not looking for work in past 30 days - stdent, retired etc. | 10 | | Unemployed: Living in an institution |
| 04 | Not in Labor Force - not looking for work in past 30 days - stdent, retired etc. | 11 | | Disabled |
| 02 | Part Time - works less tahn 35 hours per week | 2 | | Part-Time (Regular Hours) |
| 02 | Part Time - works less tahn 35 hours per week | 3 | | Part-Time (Not Regular Hours) |
| 04 | Not in Labor Force - not looking for work in past 30 days - stdent, retired etc. | 4 | | Student |
| 04 | Not in Labor Force - not looking for work in past 30 days - stdent, retired etc. | 5 | | Homemaker |
| 04 | Not in Labor Force - not looking for work in past 30 days - stdent, retired etc. | 6 | | Retired |
| 03 | Unemployed - looking for work in past 30 days or on layoff from job | 7 | | Unemployed: Actively looking for work |
| 04 | Not in Labor Force - not looking for work in past 30 days - stdent, retired etc. | 8 | | Unemployed: Not looking for work |
| 03 | Unemployed - looking for work in past 30 days or on layoff from job | 9 | | Unemployed: Volunteer Work |
| No longer effective as of: 11-05-2014 | | | | |

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|--|
| 24 | Employment at Discharge | ~~ | | Employment Status (Admission and Discharge) |
| 97 | Unknown | - | | Unknwn (None of the above) |
| 01 | Full Time - works 35 or more hours a week- includes military | 1 | | Full-Time Work or Military |
| 04 | Not in Labor Force - not looking for work in past 30 days - student, retired etc. | 10 | | Disabled |
| 02 | Part Time - works less than 35 hours per week | 2 | | Part-Time (Regular Hours) |
| 04 | Not in Labor Force - not looking for work in past 30 days - student, retired etc. | 3 | | Student |
| 04 | Not in Labor Force - not looking for work in past 30 days - student, retired etc. | 4 | | Homemaker |
| 04 | Not in Labor Force - not looking for work in past 30 days - student, retired etc. | 5 | | Retired |
| 03 | Unemployed - looking for work in past 30 days or on layoff from job | 6 | | Unemployed: Actively looking for work |
| 04 | Not in Labor Force - not looking for work in past 30 days - student, retired etc. | 7 | | Unemployed: Not looking for work |
| 04 | Not in Labor Force - not looking for work in past 30 days - student, retired etc. | 8 | | Unemployed: Volunteer Work |
| 04 | Not in Labor Force - not looking for work in past 30 days - student, retired etc. | 9 | | Unemployed: Living in an institution |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|---------------------------------------|---|------|-------|--|
| 25 | Detailed Not In Labor Force at Discharge | ~~ | | Employment Status (Admission and Discharge) |
| 97 | Unknown | - | | Unknwn (None of the above) |
| 05 | Inmate of Institution (Prison or Institution - keeps people out of work force) | 10 | | Unemployed: Living in an institution |
| 04 | Disabled | 11 | | Disabled |
| 02 | Student | 4 | | Student |
| 01 | Homemaker | 5 | | Homemaker |
| 03 | Retired | 6 | | Retired |
| 06 | Other | 8 | | Unemployed: Not looking for work |
| No longer effective as of: 11-05-2014 | | | | |

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|---|------|-------|--|
| 25 | Detailed Not In Labor Force at Discharge | ~~ | | Employment Status (Admission and Discharge) |
| 97 | Unknown | - | | Unknwn (None of the above) |
| 04 | Disabled | 10 | | Disabled |
| 02 | Student | 3 | | Student |
| 01 | Homemaker | 4 | | Homemaker |
| 03 | Retired | 5 | | Retired |
| 06 | Other | 7 | | Unemployed: Not looking for work |
| 05 | Inmate of Institution (Prison or Institution - keeps people out of work force) | 9 | | Unemployed: Living in an institution |

Crosswalk Report

SAMS 2005 - New Jersey Treatment Episode Data Set
Version : 1

K = Key Field

Discharge/NOMS

New Jersey

General reporting comments: [.] denotes [TableName.FieldName(s)]

| Item No | Treatment Episode Data Set | Item | Value | State System Data |
|-----------|--|------|-------|--|
| 26 | Number of Arrests in 30 Days Prior to Discharge | ~~~~ | | Number of Arrests in 30 Days Prior to Discharge |
| 97 | Unknown | - | | Unknown (Not between 0 and 96 inclusive) |
| 00-96 | Number of Arrests | 0-96 | | Arrest(s) |

| | | | |
|-----------|---|-----|----------------------|
| 27 | Frequency of Attendance at Self-Help program in the 30 Days Prior to Discharge | ~~~ | Not Collected |
|-----------|---|-----|----------------------|

No longer effective as of: 01-27-2010

| | | | |
|-----------|---|------|--|
| 27 | Frequency of Attendance at Self-Help program in the 30 Days Prior to Discharge | ~~~~ | Frequency of attendance at self-help programs in 30 days prior to Discharge |
| 97 | Unknown | - | Unknown (None of the other codes) |
| 01 | No Attendance in past month | 1 | No attendance in the past month |
| 02 | less than once a week -1 to 3 times in past 30 days | 2 | 1-3 times in past month |
| 03 | About once a week - 4 to 7 times in past 30 days | 3 | 4-7 times in past month |
| 04 | 2 to 3 times a week - 8 to 15 times in past 30 days | 4 | 8-15 times in past month |
| 05 | 4 or more times a week - 16 to 30 times in past 30 days | 5 | 16-30 times in past month |
| 06 | Some Attendance in past month, but number of times and frequency is unknown | 6 | Some attendance in past month, but frequency unknown |

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report