Mental Health Division
Consumer Information System (MHD/CIS)

Data Dictionary

Effective Implementation Date
October 1, 1997

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Mental Health Division • PO Box 45320 • Olympia WA 98504-5320 • FAX (360) 902-7691

memorandum

Date: July 1, 1997

To: Users of this Data Dictionary

From: Frederick A. Carmody, Chief

Business Technology, MHD

RE: Content of the Data Dictionary

This data dictionary represents an effort to accommodate several important needs:

- to conform to the requirements of the 97-99 Integrated Services Contract;

- to capture at least the minimum amount of data essential in 1997 to the statewide coordination of public mental health programs under managed care;

- to impose no unjustified data collection requirement; and

- to present no greater systems development challenge than contractors can reasonably be expected to meet by the start of the contract period.

A number of areas remain for further definition and development during the coming year. As we approach each of these elements, we will ask for input from the contractors. Final changes will be announced in accordance with contractual time frames. Contractors may anticipate that significant data enhancements will be announced for July 1, 1998.

I encourage you to contact me with questions and comments at any time. You may write me at Mail Stop 45320, Olympia, WA, 98504-5320, or via electronic mail to fcarmody@dshs.wa.gov. I can also be reached by phone at (360) 902-0792, or by fax at (360) 902-0809.

Thank you for the cordial and cooperative relationship we have enjoyed over the past year. I look forward hopefully to a continuation of that relationship in the coming biennium.

Table of Contents

Mental Health Division
Consumer Information System (MHD/CIS)

Section
I
Change Summary

Introduction:

This *data dictionary* is identified by reference in contract. This dictionary is divided into 3 parts: the Change Summary, Batch Transaction formats and Data Definitions.

Changes to Transaction:

On October 1, 1997, the following transactions will no longer be processed by the MHD/CIS.

1. Transaction ID 030.01:   Consumer ID
2. Transaction ID 111.01:   Residential Situation
3. Transaction ID 140.01:   State Funding Source
4. Transaction ID 150.01:   Status
5. Transaction ID 210.02:   Tier Placement

On October 1, 1997, the following transactions will be replaced to reflect changes in formats:

1. Transaction ID 020.02:   Consumer Demographics will be replaced with
    Transaction ID 020.03:   Consumer Demographics.
2. Transaction ID 150.01:   Status will be replaced with
    Transaction ID 150.02:   Current Status

The following transactions will be valid for information associated with service prior to October 1, 1997. These transactions will be retired and will become invalid on January 1, 1998.

1. Transaction ID 035.01:   Case Review - The Case Review Month must be prior to
    October 1997.
2. Transaction ID 010.01:   Consumer Cross Reference
3. Transaction ID 070.01:   Inpatient Service - The Start Date must be prior to October
    1, 1997.
4. Transaction ID 090.01:   Priority - The Event Date must be prior to October 1, 1997.
5. Transaction ID 120.01:   Service Detail- The Event Date must be prior to October 1,
    1997.

Effective January 1, 1998, the following revised transactions will be valid only for Consumers with a unique identifier assigned by a Contractor to MHD.

1. Transaction ID 011.01:   Consumer Case Manager
2. Transaction ID 020.03:   Consumer Demographics
3. Transaction ID 150.02:   Current Status

New transaction replacing old transactions where the data is to be collected on consumer served on October 1, 1997 forward.

1. Transaction ID 020.03:   **Consumer Demographics** replaces
   Transaction ID 020.02:   **Consumer Demographics**
2. Transaction ID 150.02:   **Current Status** replaces
   Transaction ID 150.01:   **Status**
3. Transaction ID 070.02:   **Inpatient Service** replaces
   Transaction ID 070.01:   **Inpatient Service**
4. Transaction ID 035.02:   **Monthly Case Status** replaces
   Transaction ID 035.01:   **Case Review** and
   Transaction ID 090.01:   **Priority**
5. Transaction ID 120.02:   **Outpatient Service** replaces
   Transaction ID 120.01:   **Service Detail**
6. Transaction ID 130.02:   **Void Consumer ID** replaces
   Transaction ID 030.01:   Consumer ID (Cascade Delete)

The following transactions are new and will be implemented for consumers with ITA related service on or after January 1, 1998.

1. Transaction ID 161.01:   ITA Detention
2. Transaction ID 162.01:   ITA Hearing
3. Transaction ID 160.01:   Crisis Investigation
4. Transaction ID 170.01:   Residential Usage

Changes to Data Definitions:

The following definitions have been dropped or replaced (see related transactions):
1. **Financial Eligibility Identifier**
2. **Person Identification Code**
3. **Service Transaction ID**
4. **Tier Level**
5. **Tier Month**
6. **Start Date**
7. **Case Review Month**
8. **Service Code**
9. **End Date**
10. **Daily Activity Code**
11. **Residential Arrangement Code**
12. **RSN-Financed/Controlled Residential Setting Code**
13. **Event Date**

The following definitions have been redefined:
1. **Admission Date** was added to clarify **Start Date**.

2. **Case Status Month** replaces **Case Review Month**
3. **Contractor ID** was added to clarify **Reporting Unit ID**
4. **Direct Service Indicator** replaces **Service Code**
5. **Discharge Date** was added to clarify **End Date**
6. **Emergency/Crisis Indicator** replaces **Service Code**
7. **Education** replaces **Daily Activity Code**
8. **Employment** replaces **Daily Activity Code**
9. **Face to Face Indicator** replaces **Service Code**
10. **Outpatient Serivce Type** replaces **Service Code**
11. **Gender** has been expanded
12. **Residential Type** replaces **Residential Arrangement Code** and **RSN-Financed/Controlled Residential Setting Code**
13. **Service Date** replaces **Event Date**
14. **Service Location** has been expanded
15. **State Hospital ID** was added to clarify **Reporting Unit ID**

The following definitions have been added:
1. **Adults in Independent Living**
2. **Authorization Date**
3. **Days Commitment by Court**
4. **Days inResidence**
5. **Detention Age Group**
6. **Detention County**
7. **Detention Date**
8. **Detention Location**
9. **Hearing County**
10. **Hearing Date**
11. **Hearing Outcome**
12. **Homeless Indicator**
13. **Investigtion County**
14. **Investigation Date**
15. **Investigation Outcome**
16. **Investigation Start Time**
17. **Legal Status**
18. **Referenced Consumer ID**
19. **Service Month**
20. **Sexual Orientation**
21. **Vocational Rehabilitation Participation**

Implementation Schedule:

October 1, 1997:
- Process all baches received by 8:00 A.M. October 1, 1997.

- Install new edits for October 1, 1997. This will discontinue processing old transactions and enforce new rules.
- Archive database and make structural changes.
- Start processing batches received after 8:00 A.M. under new formats.

December 31, 1997:
- Install transaction going into effect on January 1, 1998.

Discontinued Processes:

- The Variance Report will be discontinued effective October 1, 1997. This report identifies duplication problems.
- Server to Server on-line queries. - All Contractors and their designated sub-contractors will use the MHD Intranet access as required in contract.
- Case Manager Locator Systerm (CMLS) discontinued in telnet mode on October 1, 1997. It will be made available under the MHD Intranet on September 1, 1997.

Mental Health Division

Section
II
Batch Transaction Formats

Table of Contents

MHD BATCH TRANSACTION FORMAT DEFINITIONS

Primary Key: Part of the record used to uniquely identify an instance or occurrence. Used to identify a record in the database. All information requested in the Primary Key for the particular transaction **must be included**.

Body: Other information that describes the data being collected.

Transaction ID: Identifies the transaction in the batch file.

Value: An assigned numerical quantity for the particular transaction.

Action Code: Identifies what the transaction code is for - adds, changes, deletes.

"A" Add:	If the item already exists, it will change the item.
"C" Change:	If the item already exists, it will change; if it does not exist, it will be added.
"D" Delete:	If the item does not exist, the system sends back an error message.

Transaction Process

The RSN/PHP and State Hospitals report information to the MHD Core Database with transaction submitted within batch files. The bulk of the information is generated and posted once each month.

Each batch file submitted has a sequential number assigned by the submitting agency. All batches are processed in order of this assigned number. Each day, after MHD posts all batches submitted, an Exception Report is generated for each submitting agency. An audit log is kept of all errors and warnings found in each batch.

Transaction Format.

The sequence of transaction elements within a transaction is as follows:

    Transaction ID   Action Code   Primary Key   Body

Transaction ID and Action Code are each followed by a tab, as is each primary key field and body field is except for the last field in the transaction. The last field in the transaction (whether part of the primary key or the body) is followed only by a linefeed character, or CRLF if the transaction file is created in the MSDOS environment. A few sample transactions follow:

    Consumer Cross Reference - Add:
    010.01tabA:..b411tab23tab356091:.ab25tab402162lf
    Consumer ID - Cascade Delete:
    030.01tabCDtab21tab3599211lf
    Daily Activity Evaluation - Delete:
    040.01tabDtab3tab356091tab19760704tab07lf

The format of the Header transaction is as follows:

    000.01tabBatch DatetabSAIDtabBatchNumberlf

The SAID is a Reporting Unit ID for the submitting RSN. In cases where an agency is subcontracting the reporting task for an RSN, the Reporting Unit ID for the submitting RSN is still used, not the Reporting Unit ID for the agency.

Transaction Validation and Posting:

The following rules apply to all transactions unless otherwise noted within the transaction description:

1) If the primary key of the transaction contains any fields which are blank, null or out of range, an error is reported and the transaction is not processed.

2) If the action code specified in the transaction is not one of those listed below for the transaction, an error is reported and that transaction is not processed.

3) If for a delete transaction the record to be deleted cannot be found, an error is reported and the transaction is not processed.

4) If any fields in the transaction are omitted, those fields will be considered to be null.

5) If the primary key already exists an Add transaction (action code A) is treated as a Change transaction (action code C). If the primary key is not found a Change transaction (action code C) is treated as an Add transaction (action code A).

6) When a Change transaction is processed, all fields in the transaction are posted to the database, not just the fields that were changed.

7) Date values must be between 1/1/1850 and 12/31/2099 and must contain no more than the correct number of days for the month (29 for February). Start date must not be greater than End date.

For each Batch File processed, a record is kept of the number of warnings, errors and transactions processed

*Note: Each data item has been annotated with the term "Required" or "Optional" in the body of the transactions. This annotation indicates what the edit program is looking for when validating a transaction. If a field is "Required", then a valid value is expected. If a field is "Optional" then the field may be left blank. **All data items in the primary key must contain valid values and may not be left blank.***

Transaction:	Header

Definition:

This transaction is an identifier and is the first item that goes in a batch file. The Header tells what number the batch is, the originator, and the date sent.

- **Transaction ID:**

    Value: "000.01"

- **Action Code:**

    None.

- **Primary Key:**

    None.

- **Body:**

    Batch Date *(Required)*
    Submitting Reporting Unit ID *(Required)*
        AKA: Reporting Unit ID
    Batch Number *(Required)*

Note: Required transaction as the first record of each batch.

Edit:
1. The whole batch will be rejected if the Batch Number does not match the number in the file name.
2. The whole batch will be rejected if the Submitting Reporting Unit ID does not match the number in the file name.
3. All batches are processed in Batch Number order.

Transaction:	Case Manager

Definition:

Information needed to support the Case Manager Locator System (CMLS). This information may be attached to any consumer. *(See Consumer Case Manager Transaction for more details.)*

- **Transaction ID:**

  Value "100.01"

- **Action Code:**

  Value "A"   Add
        "C"   Change
        "D"   Delete

- **Primary Key:**

  Case Manager Reporting Unit ID
      AKA Reporting Unit ID
  Case Manager ID

- **Body:**

  Case Manager Primary Phone *(Required)*
  Case Manager Primary Comment *(Optional)*
  Case Manager Secondary Phone *(Optional)*
  Case Manager Secondary Comment *(Optional)*
  Case Manager Password *(Required)*

Edits:
1. This transaction will be rejected if the Case Manager Reporting Unit ID is not located in the service area of the Contractor identified in the Header transaction.
2. The transaction will be rejected if a value is not entered for the Case Manager Password.
3. The transaction will be rejected if a value is not entered for the Case Manager Primary Phone.

Transaction:	Case Review

Definition:

The Case Review transaction is required for each consumer at time of intake and at every 180 day review. Case Review may be submitted more frequently. Only one case review will be maintained each month. An agency may submit a case review once each month. If a person receives no service for an extended period which exceeds the 180 days, then no Case Review would be expected until that person resumed their services.

- **Transaction ID:**

  Value "035.01"

- **Action Code:**

  Value "A"   Add
         "C"   Change
         "D"   Delete

- **Primary Key:**

  Reporting Unit ID
  Consumer ID
  Case Review Month (yyyymm)   *(Please note that the day is not included)*

- **Body:**

  Title XIX Indicator *(Required)*
  Daily Activity Code *(Required)*
  Residential Arrangement Code *(Required*
  EPSDT Certification Level *(Required for children only.)*
  Income Indicator *(Required)*

Edits:

1. This transaction is replaced by Transaction ID 035.02, Monthly Case Status and will no longer process after December 31, 1997. Between October and December 1997, this record will be accepted where Case Review Month is prior to October 1997.

Transaction:	Consumer Case Manager

Definition:

This transaction associates the Case Manager with the consumer. It identifies the Case Manager assigned to the consumer.

- **Transaction ID:**

  Value: "011.01"

- **Action Code:**

  Value "A"   Add
         "C"   Change
         "D"   Delete

- **Primary Key:**

  Reporting Unit ID
       AKA: Contractor ID
  Consumer ID

- **Body:**

  Case Manager ID *(Required)*
  Case Manager Reporting Unit ID *(Required)*
       AKA: Reporting Unit ID

Edits:
1. On January 1, 1998, this transaction will require a Contractor ID in place of the Reporting Unit ID in the Primary Key. After January 1, 1998, all Consumer Case Manager transaction will be removed where the Reporting Unit ID is a Contractor ID.
2. This transaction will be rejected if the Consumer Demographic transaction has not been posted.
3. This transaction will be rejected if the Case Manager transaction has not been posted.

Transaction:	Consumer Cross Reference

Definition:

This transaction identifies if a consumer is identified in the system more than once.

- **Transaction ID:**
  Value: "010.01"
- **Action Code:**
  Value: "A"   Add
         "D"   Delete
- **Primary Key:**
  Identifying Unit ID
     AKA Reporting Unit ID
  Primary Unit ID
     AKA Reporting Unit ID
  Primary Consumer ID
     AKA Consumer ID
  Secondary Unit ID
     AKA Reporting Unit ID
  Secondary Consumer ID
     AKA Consumer ID

- **Body:**
  None

Edit:
1. This transaction will be discontinued on December 31, 1997.

Note:

Identifying Unit ID - identifies who is reporting the fact that more than one consumer identification numbers represent the same person.

Primary and Secondary ID - Report the different identifiers for a consumer and associate them as being the same consumer. The order of who is Primary and who is Secondary does not matter.

Transaction:	Consumer Demographics

Definition:

This transaction identifies the consumer demographics.

- **Transaction ID:**

  Value: "020.03"

- **Action Code:**

  Value: "A"   Add
        "C"   Change
        "D"   Delete (Valid through December 31, 1997)

- **Primary Key:**

  Reporting Unit ID
     AKA: Contractor ID
  Consumer ID

- **Body:**

  Surname *(Required)*
  Given Names *(Required)*
  Gender *(Required)*
  Date of Birth *(Required)*
  Ethnicity *(Required)*
  Hispanic Origin *(Required)*
  Language Code *(Required)*
  County of Residence *(Required)*
  Social Security Number *(Required)*.
  Impairment Kind *(Required)*
  Sexual Orientation *(Required)* See edit & definitions for clarification.

Edits:

1. If the Consumer ID has been marked "voided" then the transaction will be rejected.
2. Effective January 1, 1998, only those Consumer Demographic transactions submitted using a Contractor ID will be accepted.
3. The Surname is required. The transaction will be rejected if it is blank or null.
4. The Given Names is required. The transaction will be rejected if it is blank or null.
5. The Gender is required and must be a valid value. A value of "U" for *Unknown* will be used for all invalid codes.
6. The Date of Birth is required. The transaction will not be rejected. The date must be a valid date. This field will be monitored for compliance.
7. A valid Ethnicity code is required. The transaction will reject if this code is not supplied or is invalid.
8. A valid Hispanic Origin code is required. The transaction will reject if this code is not supplied or is invalid.
9. A valid Language Spoken Within the Home code is required. This transaction will be rejected if this code is not supplied or is invalid.
10. A valid County of Residence code is required. This transaction will be rejected if the code is invalid.
11. A valid Social Security Number is required. The transaction will not be rejected if it is absent. This field will be monitored for compliance. It will be submitted for verification against the Social Security Administration files. At the discretion of MHD, the Contractor may be required to verify and correct inaccurate information.
12. A valid Impairment Kind code is required. A value of "Z" will be used if the codes submitted are not valid or the field is blank.
13. A valid Sexual Orientation code is required. This transaction will be rejected if the code submitted is invalid or blank. See definition for consumer's option.

Transaction:	Crisis Investigation

Definition:

This transaction documents each investigation classified as a crisis and made by a County Designated Mental Health Professional (CDMHP) or crisis worker.

- **Transaction ID:**

  Value "160.01"

- **Action Code:**

  Value "A"   Add
  "C"   Change
  "D"   Delete

- **Primary Key:**

  Contractor ID
  Consumer ID
  Investigation Date
  Investigation Start Time

- **Body:**
  Investigation County
  Investigation Outcome

Edits:
1. This transaction will be valid for investigations on or after January 1, 1998
2. This transaction will be rejected if a Consumer Demographic transaction has not been successfully processed by the Contractor.

Transaction:	Current Status

Definition:

This transaction identifies a consumer's classification as to whether he/she is currently registered or enrolled as defined in RCW.

- **Transaction ID:**

  Value "150.02"

- **Action Code:**

  Value "A"   Add
        "C"   Change
        "D"   Delete

- **Primary Key:**

  Reporting Unit ID
      AKA: Contractor ID
  Consumer ID

- **Body:**

  Status Code

Note: On October 1, 1997, all Status records in the MHD/CIS database will be converted to the current status. The history of these status records will be archived. This new transaction will replace the old transaction effective October 1, 1997. On January 1, 1998, only those Status Transactions where the Status Code applies to a Contractor ID will be considered valid. On this date, all Status Codes attributed for records where the Reporting Unit ID is not the Contractor ID will be removed.

Edit:
1. This transaction will be rejected if the Consumer Demographic transaction has not been posted.

Transaction:	Inpatient Service (Old)

Definition:

This transaction identifies that the consumer is currently in a Community Hospital or E&T, or length of time a consumer spent in the Community Hospital or E&T, if the consumer has been discharged.

- **Transaction ID:**

  Value: "070.01"

- **Action Code:**

  Value: "A"   Add
  "C"   Change
  "D"   Delete

- **Primary Key:**
  Reporting Unit ID
  Consumer ID
  Start Date*(Required)*

- **Body:**
  End Date*(Optional)*

Edits:
1. This transaction will be valid through December 31, 1997 for inpatient stays where the admission date is prior to October 1, 1997.

Transaction:	Inpatient Service (New)

Definition:

This transaction identifies a consumer's stay in a Community Hospital or Evaluation
&Treatment Facility. Enter after the discharge date is known.

Note: This transaction can be submitted from two difference sources. The Contractor or
Seattle Children's Home may submit this transaction. Seattle Children's Home may only
submit transactions where the Reporting Unit ID represents a Community Hospital. The
Contractor may submit transactions where the Reporting Unit ID is an Evaluation &
Treatment Center.

- **Transaction ID:**

    Value: "070.02"

- **Action Code:**

    Value: "A"   Add
           "C"   Change
           "D"   Delete

- **Primary Key:**
    Contractor ID
    Consumer ID
    Reporting Unit ID (Community Hospital, E&T)
    Admission Date

- **Body:**
    Discharge Date*(Required)*
    Legal Status*(Required)*

Edits:
1. This transaction will be rejected if the Admission Date is prior to October 1, 1997.
2. This transaction will be rejected if the Contractoi submits a transaction for a
    community hospital.
3. This transaction will be rejected if Seattle Children's Home submits a transaction for an
    Evaluation & Treatment Center.
4. This transaction will be rejected if a Consumer Demographic transaction has not been
    successfully processed by the Contractor.
5. The transaction will be rejected if the Reporting Unit ID is not a valid code for a
    specific Community Hospital or Evaluation and Treatment Center.

6. The transaction will be rejected if the Admission and Discharge Dates are not valid dates.
7. The transaction will be rejected if the Discharge Date is prior or equal to the Admission Date.
8. The transaction will be rejected if the Admission or Discharge Dates are post dated.
9. The transaction will be rejected if the Admission Date is older than 1 year from date of processing by MHD-CIS.
10. The Legal Status must be a valid code.
11. The transaction will be rejected if the Consumer Demographic transaction has been voided.

Transaction:	Inpatient Service State Hospital

Definition:

This transaction identifies an **adult** consumer's authorized stay at a State Hospital.

- **Transaction ID:**

  Value: "071.02"

- **Action Code:**

  Value: "A"   Add

  "C"   Change

  "D"   Delete

- **Primary Key:**
  Contractor ID
  Consumer ID
  Authorization Date

- **Body:**
  State Hospital ID *(Required)*
  Census Medical Record Number*(Required)*

Edits:
1. This transaction will be required for all adult admissions to State Hospitals on or after October 1, 1997.
2. This transaction will be rejected if a Consumer Demographic transaction has not been successfully processed.
3. The Authorization Date must not be post dated and must be a valid date.
4. The State Hospital ID must be a valid code for **Western State Hospital** or **Eastern State Hospital**.
5. This transaction will be rejected if the Census Medical Record Number has not been registered by the State Hospital.

Transaction:	ITA Detention

Definition:

This transaction documents each detention made under the Involuntary Treatment Act.

- **Transaction ID:**

  Value "161.01"

- **Action Code:**

  Value "A"   Add
         "C"   Change
         "D"   Delete

- **Primary Key:**

  Contractor ID
  Consumer ID
  Detention Date

- **Body:**
  Detention County
  Detention Age Group
  Detention Location

Edits:
1. This transaction will be valid for detentions on or after January 1, 1998
2. This transaction will be rejected if a Consumer Demographic transaction has not been successfully processed by the Contractor.

| Transaction: | ITA Hearing |

Definition:

This transaction documents each hearing made under the Involuntary Treatment Act. This includes hearings at the State Hospitals.

- **Transaction ID:**

  Value "162.01"

- **Action Code:**

  Value "A"   Add
     "C"   Change
     "D"   Delete

- **Primary Key:**

  Contractor ID
  Consumer ID
  Hearing Date

- **Body:**
  Hearing County
  Hearing Outcome
  Days Commitment by Court

Edits:
1. This transaction will be valid for hearings on or after January 1, 1998
2. This transaction will be rejected if a Consumer Demographic transaction has not been successfully processed by the Contractor.

Transaction:	Monthly Case Status

Definition:

The Case Status transaction is required monthly for each consumer who received an outpatient service through the Contractor during the month.

- **Transaction ID:**

  Value "035.02"

- **Action Code:**

  Value "A"   Add
  "C"   Change
  "D"   Delete

- **Primary Key:**

  Contractor ID)
  Consumer ID
  Case Status Month (yyyymm) *(Please note that the day is not included)*

- **Body:**

  Title XIX Indicator *(Required)*
  Priority Code *(Required)*
  EPSDT Certification Level *(Required for children only.)*
  Acute Indicator*(Required)*
  Homeless Indicator*(Required)*
  Employment *(Required)*
  Vocational Rehabilitation Participation *(Required)*
  Education *(Required)*
  Adults in Independent Living *(Required)*

Edits:
1. This record become fixed after one year. The a record can be neither added, changed, nor deleted after one year.
2. This transaction will be valid for information collected on or after October 1, 1997.
3. This transaction will be rejected if the Action Code = "D" for *Delete* and Outpatient Service information is found.
4. This transaction will be rejected if a Consumer Demographic transaction has not been successfully processed by the Contractor.

Transaction:	Outpatient Service

Definition:

This transaction quantifies outpatient services delivered to the consumer.

Note: This transaction replaces Transaction ID 120.01 Service Detail.

- **Transaction ID:**

  Value "120.02"

- **Action Code:**

  Value "A"   Add
           "C"   Change
           "D"   Delete

- **Primary Key:**

  Contractor ID
  Consumer ID

  Service Date
  Reporting Unit ID (Subcontractor who provided service)

  Service Location

  Face to Face Indicator
  Direct Service Indicator
  Emergency/Crisis Indicator
  Outpatient Service Type

- **Body:**

  Minutes of Service *(Required)*

Edits:
1. This transaction will be valid for outpatient services delivered on or after October 1, 1997.
2. This transaction will be rejected if the Contractor has not successfully submitted a Consumer Demographic transaction.

3. This transaction will be rejected if the Event Date is post dated or the date is not valid or more than 1 year prior to the processing date.
4. This transaction will be rejected if the Reporting Unit ID is not identified as being within the Contractor's area of service.
5. This transaction will be reject if the Service Location code is not valid.
6. This transaction will be reject if the Contractor has not successfully submitted a Monthly Case Status transaction.

Transaction:	Priority

Definition:

This transaction identifies whether the consumer is a member of a targeted group as established by legislative mandate.

- **Transaction ID:**

  Value: "090.01"

- **Action Code:**

  Value: "A"   Add
        "C"   Change
        "D"   Delete

- **Primary Key:**

  Reporting Unit 1D
  Consumer ID
  Event Date

- **Body:**

  Priority Code *(Required)*

Edits:
1. This transaction will be effective for priorities assigned to a consumer prior to October 1, 1997. See Monthly Case Status after September 1997.

Transaction:	Residential Usage

Definition:

This transaction documents each consumer's monthly use of residential bed days in the community which are supported by the Contractor.

- **Transaction ID:**

    Value "170.01"

- **Action Code:**

    Value "A"   Add
    "C"   Change
    "D"   Delete

- **Primary Key:**

    Contractor ID
    Consumer ID
    Service Month (YYYYMM)
    Residential Type

- **Body:**
    Days in Residence

Edits:
1. This transaction will be valid for consumers using residential bed days on or after January 1, 1998
2. This transaction will be rejected if a Consumer Demographic transaction has not been successfully processed by the Contractor.

Transaction:	Service Detail (Old)

Definition:

This transaction identifies services delivered to the consumer.

- **Transaction ID:**

  Value   "120.01"

- **Action Code:**

  Value   "A"   Add
         "C"   Change
         "D"   Delete

- **Primary Key:**

  Reporting Unit ID
  Consumer ID
  Event Date
  Service Transaction ID

- **Body:**

  Service Code *(Required)*
  Service Location *(Required)*
  Acute Indicator *(Required)*
  Minutes of Service *(Required)*

Note: This record is retained for 1 year. It is then purge.. ..fter it is summarized into a monthly service record.

Edits:
1. This transaction will be valid for services delivered prior to October 1, 1997. The transaction will be discontinued on January 1, 1998.

Transaction:	Void Consumer ID

Definition:

This transaction will void a Consumer ID and bar its use in the future. A Consumer ID is voided when two different identifiers have been established by the Contractor for a single person. The contractor must identify the Consumer ID to be voided and also identify the Consumer ID to reference in its place.

- **Transaction ID:**

  Value "130.02"

- **Action Code:**

  None

- **Primary Key:**

  Contractor ID
  Consumer ID *(The ID to be voided)*

- **Body:**

  Referenced Consumer ID *(Required - The ID for future reference)*

Edits:
1. This transaction will be rejected if the Contractor ID and Consumer ID are unknown to the system or if the ID has already been voided.
2. This transaction will be rejected if the Referenced Consumer ID is voided or is unknown to the system.

Index

Mental Health Division
Consumer Information System (MHD/CIS)

Section
III

Data Definitions

Effective Implementation Date
October 1, 1997

Table of Contents

Attribute:	Action Code

Definition:

Each batch transaction sent to the Regional Support Network/Consumer Information System contains a code which indicates a given action take place. Actions allowed on a given transaction are defined below.

Maximum character length: 2   Variable

Code	Definition
A	Add a Record
C	Change a Record
D	Delete

Where used:

Transaction ID	Values Allowed	Transaction Title
100.01	A, C or D	Case Manager
035.01	A, C or D	Case Review
011.01	A, C or D	Consumer Case Manager
010.01	A or D	Consumer Cross Reference
020.03	A, C or D	Consumer Demographics
150.02	A or C	Current Status
070.01	A, C or D	Inpatient Service (Old)
070.02	A, C or C	Inpatient Service (New)
071.02	A, C or D	Inpatient Service State Hospital
161.01	A, C or D	ITA Detention
162.01	A, C or D	ITA Hearing
160.01	A, C or D	Crisis Investigation
035.02	A, C or D	Monthly Case Status
120.02	A, C or D	Outpatient Service
170.01	A, C or D	Residential Usage
120.01	A, C or D	Service Detail (Old)

Attribute:	Acute Indicator

Definition:

A flag to indicate if the service was for a person experiencing an acute episode. An acute episode is defined as a short-term severe crisis episode.
(see WAC 275-56-015)

Maximum character length: (1)

Codes	Definition
1	Service was for person experiencing an Acute episode or the person experienced an Acute episode during the month.
0	Service was not for a person experiencing an Acute episode or the person did not experience an Acute episode during the month.

Where used:

Transaction ID	Transaction Title
120.01	Service Detail (Old)
035.02	Monthly Case Status

Attribute:	Admission Date

Definition:

Date a person was admitted to a facility.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
070.02	Inpatient Service

Attribute:	Adults in Independent Living

Definition:

Is the client living in a house or apartment alone or with one or more others of their own choosing?

Maximum character length:

Code	Definition
1	Yes
2	No
8	Not applicable
9	Unknown or missing

Where used:

Transaction ID	Transaction Title
035.02	Monthly Case Status

MHD/CIS Data Definitions

Attribute:	Authorization Date	

Definition:

Date an inpatient service was authorized by the Contractor.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
071.02	Inpatient Service State Hospital

Attribute:	Batch Date

Definition:

Date a batch file of transactions was created by a submitting agency.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
000.01	Header

MHD/CIS Data Definitions

Attribute:	Batch Number

Definition:

A sequential number assigned to the batch file by the submitting agency. When the batch number exceeds 99999 the submitting agency will reset the batch number to 00001.

Maximum character length: 5   Fill with leading zeros.

Where used:

Transaction ID	Transaction Title
000.01	Header

Attribute:	Case Manager Comment

Definition:

Free-form field for commenting on the phone numbers (e.g. daytime, nighttime, beeper, etc.) or for entering other case manager information.

This information is stored at the State for the purposes of supporting the Case Manager Locator System.

Maximum character length: 255   Variable Length

Where used:

Transaction ID	Transaction Title	AKA
100.01	Case Manager	Case Manager Primary Comment Case Manager Secondary Comment

Attribute:	Case Manager ID

Definition:

A code established by an RSN to identify the case manager or case management team for a given consumer. A case management team may consist of one or more case management staff who share responsibility for the care of a consumer. Case Manager ID can be established only by the RSN/PHP.

Maximum character length: 10   Variable Length

Where used:

Transaction ID	Transaction Title
100.01	Case Manager
011.01	Consumer Case Manager

Attribute:	Case Manager Password

Definition:

A keyword which identifies that the requester has authority to inquire about a consumer.
The password is updated in accordance with the RSN's Policy on Security of Consumer
Information.

Maximum character length: 30   Variable Length

Where used:

Transaction ID	Transaction Title
100.01	Case Manager

Attribute:	Case Manager Phone

Definition:

The phone number where the appointed case manager can be reached.

Maximum character length: 20   Variable Length

Where used:

Transaction ID	Transaction Title	AKA
100.01	Case Manager	Case Manager Primary Phone Case Manager Secondary Phone

Attribute:	Case Manager Reporting Unit ID

Definition:

Agency assigned by the Contractor to provide 24 hour crisis line. (See Reporting Unit ID)

Maximum character length: 3   left zero fill

Where used:

Transaction ID	Transaction Title
100.01	Case Manager
911,91	Consumer Case Manager

Attribute:	Case Review Month

Definition:

This identifies the month and year a case was last reviews by a given agency. The day of the month is not required.

Note: This definition is being replaced and will no longer be in use after December 31, 1997.

Maximum character length: 6

Format: YYYYMM

Format	Definition
YYYY	Year
MM	Month

Where used:

Transaction ID	Transaction Title
035.01	Case Review

MHD/CIS Data Definitions

Attribute:	Case Status Month

Definition:

This identifies the month and year a case status was submitted by a given contractor. The day of the month is not required.

Maximum character length: 6

Format: YYYYMM

Format	Definition
YYYY	Year
MM	Month

Where used:

Transaction ID	Transaction Title
035.02	Monthly Case Status

Attribute:	Census Medical Record Number

Definition:

This is the State Hospital's Consumer ID.

Maximum character length: 6 characters.

Where used:

Transaction ID	Transaction Title	AKA
071.02	Inpatient Service State Hospital	Census Medical Record Number

Attribute:	Consumer ID

Definition:

The identifier established by a Reporting Unit which uniquely identifies a consumer.
Consumers are identified by the RSN/PHP, State Hospital and Community Service Office.

Maximum character length: 20   Variable Length

Where used:

Transaction ID	Transaction Title	AKA
035.01	Case Review	Consumer ID
011.01	Consumer Case Manager	Consumer ID
010.01	Consumer Cross Reference	Primary Consumer ID Secondary Consumer ID
020.03	Consumer Demographics	Consumer ID
150.02	Current Status	Consumer ID
070.01	Inpatient Service (Old)	Consumer ID
070.02	Inpatient Service (New)	Consumer ID
071.02	Inpatient Service State Hospital	Consumer ID
161.01	ITA Detention	Consumer ID
162.01	ITA Hearing	Consumer ID
160.01	Crisis Investigation	Consumer ID
035.02	Monthly Case Status	Consumer ID
120.02	Outpatient Service	Consumer ID
170.01	Residential Usage	Consumer ID
120.01	Service Detail (Old)	Consumer ID
130.02	Void Consumer ID	Consumer ID Referenced Consumer ID

Attribute:	Contractor ID

Definition:

A code established by the Mental Health Division (MHD) which identifies a legal entity under contract to MHD who has the authority to establish a Master Patient Index of people served within their jurisdiction or service area.

Maximum character length: 3   Left zero fill.

Where used:

Transaction ID	Transaction Title	AKA
011.01	Consumer Case Manager	Contractor ID
020.03	Consumer Demographics	Contractor ID
150.02	Current Status	Contractor ID
070.02	Inpatient Service (New)	Contractor ID
071.02	Inpatient Service State Hospital	Contractor ID
161.01	ITA Detention	Contractor ID
162.01	ITA Hearing	Contractor ID
160.01	Crisis Investigation	Contractor ID
035.02	Monthly Case Status	Contractor ID
120.02	Outpatient Service	Contractor ID
170.01	Residential Usage	Contractor ID
130.02	Void Consumer ID	Contractor ID

Valid Codes: 410 through 429

Attribute:	County Code

Definition:

A code ranging from '01' through '40'. Codes '01' through '39' identify the 39 counties in alphabetical order. Code '40' represents unknown county.

Maximum character length: 2   Left zero fill.

Codes	Definition	Codes	Definition
01	Adams	21	Lewis
02	Asotin	22	Lincoln
03	Benton	23	Mason
04	Chelan	24	Okanogan
05	Clallam	25	Pacific
06	Clark	26	Pend Oreille
07	Columbia	27	Pierce
08	Cowlitz	28	San Juan
09	Douglas	29	Skagit
10	Ferry	30	Skamania
11	Franklin	31	Snohomish
12	Garfield	32	Spokane
13	Grant	33	Stevens
14	Grays Harbor	34	Thurston
15	Island	35	Wahkiakum
16	Jefferson	36	Walla Walla
17	King	37	Whatcom
18	Kitsap	38	Whitman
19	Kittitas	39	Yakima
20	Klickitat	40	Unknown

Where used:

Transaction ID	Transaction Title	AKA
020.03	Consumer Demographics	Coded Area of Residence

Attribute:	County of Residence

Definition:

A code indicate the county the person lives.

Maximum character length: 2   Left zero fill.

See County Code for values.

Where used:

Transaction ID	Transaction Title	AKA
020.03	Consumer Demographics	Coded Area of Residence

Attribute:	Daily Activity Code

Definition:

A code which describes the consumer's primary daily activity. This is an outcome measure. The purpose of this measure is to determine each consumers' primary daily activity. The goal is for consumers to engage in daily activity that is normal for most individuals of their age and culture. See contract terms for application of these codes.

Note: This definition is being replaced and will no longer be in use after December 31, 1997.

Maximum character length: 2   Left zero fill.

Codes	Definition
	Employment - full-time
01	Full-time competitive employment outside the mental health center, including self-employment or work on a family farm, Supported Employment Program, where full-time work is considered >= 30 hours per week.
02	School - currently enrolled full-time >= 6 hours per day or twelve credit hours and an expectation of completion of course work.
	Employment - part time
03	Part-time competitive employment - part-time is defined as < 30 hours per week of scheduled employment outside the mental health center, includes the Supported Employment Program. This does not include occasional lawn-mowing, child-care etc.
	School - part time
04	School - part time or less than six hours per day or 12 credit hours of regular attendance at a formal program of course work at a school or college.
05	Agency Assisted Employment - Includes sheltered workshop and other agency operated employment where a provider or the RSN is the employer. Examples are where the agency employs the client for jobs such as maintenance, janitorial, landscaping, etc.
	Preparation for Employment
06	Attending skill building classes within a mental health agency or similar setting that are designed to assist individuals in obtaining and/or keeping employment. This does NOT include vocational school/training courses in a formal program of course work at a school or college.
	Other normal for Age
07	Participates in activities (other than codes 1, 2, 3, 4, or 5) that are normal for most individuals of the consumer's age and culture: e.g., Pre-school, retired, caregiver or home-maker, volunteer activity.

Other	
08	Other structured daily activity: e.g., day treatment, partial hospitalization, residential and nursing home facility day program, etc.
09	No daily structured activity; such as jail, in-patient.
10	Unknown

Where used:

Transaction ID	Transaction Title
035.01	Case Review

MHD/CIS Data Definitions

Attribute:	Date of Birth

Definition:

A date a person was reported born.

Submit the date in the format YYYYMMDD. November 26, 1933 would be submitted on the batch transaction as 19331126.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year - Defaults to process year if not valid.
MM	Month - Defaults to "01" if not valid.
DD	Day - Defaults to "01" if not valid.

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

Attribute:	Days Commitment by Court

Definition:

The number of days commitment as order by the court.

Maximum character length: length of integer left justified

Where used:

Transaction ID	Transaction Title
162.01	ITA Hearing

MHD/CIS Data Definitions

Attribute:	Days in Residence

Definition:

The total number of days in a specified residence during a month.

Maximum character length: length of integer left justified

Where used:

Transaction ID	Transaction Title
170.01	Residential Usage

Attribute:	Detention Age Group

Definition:

A code indicating the age group a person was detained under the Involuntary Treatment Act.

Maximum character length: 1   Left zero fill.

Format	Definition
A	Adult
C	Child

Where used:

Transaction ID	Transaction Title	AKA
161.01	ITA Detention	Detention Age Group

Attribute:	Detention County

Definition:

A code indicate the county a person was detained under the Involuntary Treatment Act.

Maximum character length: 2   Left zero fill.

See County Code for values.

Where used:

Transaction ID	Transaction Title	AKA
161.01	ITA Detention	Detention County

Attribute:	Detention Date

Definition:

Date of a detention under the Involuntary Treatment Act.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
161.01	ITA Detention

Attribute:	Detention Location

Definition:

A code indicating the location a person was detained under the Involuntary Treatment Act.

Maximum character length: 1   Left zero fill.

Format	Definition
1	State Hospital
2	Evaluation and Treatment Center
3	Community Hospital
9	Other

Where used:

Transaction ID	Transaction Title	AKA
161.01	ITA Detention	Detention Location

Attribute:	Direct Service Indicator

Definition:

A code to indicate if service was delivered directly to the consumer or someone related to the consumer.

Maximum character length: 1

Codes	Definition
Y	Yes - service delivered directly to the consumer.
N	No - service was not delivered directly to the consumer.

Where used:

Transaction ID	Transaction Title
120.02	Outpatient Service

Attribute:	Discharge Date

Definition:

Date a person was released from a facility.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
070.02	Inpatient Service

Attribute:	Education

Definition:

Describes if a consumer is in an educational/training activities. This includes but is not limited to home schooling.

Maximum character length: 1

Code	Definition
1	Full time educational/training activities (average of 12 hours or more per week)
2	Part time educational/training activities (on average less than 12 hours per week)
3	Other educational/training activities
8	Not in educational/training activities
9	Unknown

Where used:

Transaction ID	Transaction Title
035.02	Monthly Case Status

Attribute:	Emergency/Crisis Indicator

Definition:

A code to indicate if service was delivered under emergency or crisis conditions.

Maximum character length: 1

Codes	Definition
Y	Yes - service was for emergency/crisis.
N	No - service was not for emergency/crisis.

Where used:

Transaction ID	Transaction Title
120.02	Outpatient Service

Attribute:	Employment

Definition:

Employment status for the month.

Maximum character length: 1

Code	Definition
1	Full time paid (37.5 hours per week or more)
2	Part time paid (Less than 37.5 hours per week)
3	Unpaid employment (variable number of hours without pay)
4	Supported employment (An individual who receives ongoing, intensive assistance to remain employed, irrespective of hours worked.)
5	Other employment
8	Not Employed
9	Unknown

Where used:

Transaction ID	Transaction Title
035.02	Monthly Case Status

Attribute:	End Date

Definition:

This describes the date an event has ended.

Submit the date in the format YYYYMMDD. November 26, 1933 would be submitted as 19331126 on the batch transaction.

Note: This definition is being replaced and will no longer be in use after December 31, 1997.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
070.01	Inpatient Service (Old)

Attribute:	EPSDT Certification Level

Definition:

This is the level of service determined by the EPSDT Resource Manager the child will initially receive or continue to receive.

Maximum character length: 1

Codes	Definition
1	Level 1 Services. - Short term services. The child was certified for less than 16 hours of services.
2	Level 2 Services - Long term services. NO TEAM*. The child was certified for more than 15 hours of services.
3	Level 2 Services - Long term services. WITH TEAM*. The child was certified for more than 15 hours of services.
4	Not Certified. The child was NOT certified for any services.

*TEAM is defined as: Individual Treatment Team -- A child specific team which includes (as appropriate) individuals from education, child welfare, mental health, drug and alcohol, developmental disabilities, juvenile justice, who know and actually work with the child, and the parent or guardian of the child. Individuals from other systems or informal supports may be included at the family's request. The child is to be included, if age thirteen or older; a younger child may be included if the team agrees or the parent requests.

Where used:

Transaction ID	Transaction Title
035.01	Case Review
035.02	Monthly Case Status

Attribute:	Ethnicity

Definition:

This code is used to indicate a consumer's primary ethnicity as reported by the consumer. Roll-up codes "010" through "060" may only be used with ITA and Crisis one-time services.

If the client identifies as multiracial, invite the client to select their primary ethnicity. If the client has no choice, select Other Race as primary ethnicity. If the RSN/PHP receives various views from their providers, then RSN will submit to MHD the most recent received..

Note that every person should have both an Ethnicity code and an Hispanic Origin code. This is a Federal requirement, established by the Bureau of the Census.

Maximum character length: 3   Left zero fill.

Codes	Definition	Codes	Definition
Roll Up Codes		**Detail Codes**	
010	Caucasian/White	597	American Indian
020	Native American	600	Asian Indian
030	Asian Pacific	604	Cambodian
040	Afro-American	605	Chinese
050	Other Race	608	Filipino
060	Unknown/Not Reported	611	Japanese
		612	Korean
		613	Laotian
		618	Thai
		619	Vietnamese
		653	Hawaiian
		655	Samoan
		660	Guamanian
		699	Other Asian/Pacific Islanders
		799	Other Race
		800	White / Caucasian
		870	Black/African American
		935	Eskimo
		941	Aleut
		999	Not Reported/Unknown

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

Attribute:	Event Date

Definition:

This describes the date of an event, including the date a service was provided.

Note: This definition is being replaced and will no longer be in use after December 31, 1997.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
120.01	Service Detail (Old)

Attribute:	Face to Face Indicator

Definition:

A code to indicate if service was delivered face to face with the person receiving the service.

Maximum character length: 1

Codes	Definition
Y	Yes - service was face to face.
N	No - service was not face to face. This could include telephone contact.

Where used:

Transaction ID	Transaction Title
120.02	Outpatient Service

Attribute:	Gender

Definition:

A code indicating either Male or Female. Indicate the gender of male or female.

Maximum character length: 1

Codes	Definition
1	Female
2	Male
3	Unknown

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

Attribute:	Given Names

Definition:

The given/first/informal names of a consumer as provided by a Reporting Unit. (May include Title.)

In general, follow the rules of the appropriate culture when determining which name is the surname and which the given name. Consistency is important here, because the last name and given names are both used as elements to uniquely identify the person across the system.

The given name as recorded on significant documentation can be used to resolve contradictions. Use reasonable judgment to determine the best choice.

Maximum character length: 40   Variable Length

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

MHD/CIS Data Definitions

Attribute:	Hearing County

Definition:

A code indicate the county a person's court hearing was held under the Involuntary Treatment Act.

Maximum character length: 2   Left zero fill.

See County Code for values.

Where used:

Transaction ID	Transaction Title	AKA
162.01	ITA Hearing	Hearing County

Attribute:	Hearing Date

Definition:

Date of a court hearing under the Involuntary Treatment Act.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
162.01	ITA Hearing

MHD/CIS Data Definitions

Attribute:	Hearing Outcome

Definition:

A code indicate the outcome of a person's court hearing held under the Involuntary
Treatment Act.

Maximum character length: 1   Left zero fill.

Code	Definition
1	Inpatient Committed
2	Less Restrictive Commitment
3	Released by Court
4	Conditional Release (RCW 1077)
5	Dismissed

Where used:

Transaction ID	Transaction Title	AKA
162.01	ITA Hearing	Hearing Outcome

Attribute:	Hispanic Origin

Definition:

A person of Mexican, Puerto Rican, Cuban, Central American or South American, or other Spanish origin or descent, regardless of race. The code is for primary self-reported Hispanic type. Roll-up code "000" may only be used with ITA and Crisis one-time services.

Use the code that describes the person's identification with Hispanic culture, origin or descent, in addition to the race/ethnicity recorded under Race/Ethnicity. If the RSN/PHP has conflicting views from their providers, the RSN/PHP will submit the most recent reported..

Every person should have an entry for both Ethnicity and Hispanic Origin codes.

Maximum character length: 3   Left zero fill.

Codes	Definition
000	General Hispanic
709	Cuban
722	Mexican/Mexican-American/Chicano
727	Puerto Rican
799	Other Spanish/Hispanic
998	Not Spanish/Hispanic
999	Unknown

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

Attribute:	Homeless Indicator

Definition:

Those persons of all ages who lack a fixed, regular and adequate nighttime residence, including persons whose primary nighttime residence is a supervised public or private shelter designated to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for mentally ill), an institution that provides a temporary residence for individuals intended to be institutionalized; or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodations for human beings. (Stewart B. McKinney Homeless Assistance Act (Public Law 100-77): or is at imminent risk of being homeless such as, individuals or families who have a recent history of homelessness, currently are living "doubled up", or who are otherwise temporally and inadequately housed in a residence which is (12) not their own and (2) who may be high risk of becoming homeless in the future (The Governor's Task Force on Homelessness).

Maximum Length: 1

Codes	Definition
Y	Yes - this person meets the definition of homeless.
N	No - this person does not meet the definition of homeless.
U	The status is unknown or not reported.

Where used:

Transaction ID	Transaction Title
- 035.02	Monthly Case Status

Attribute:	Impairment Kind

Definition:

The set of codes which identifies an individual's disability, in addition to the mental disorder for which they are being treated. These disabilities are in addition to mental health. The disability should have a major impact on the person and their ability to function in the community and to procure food, clothing, and a safe place to live. Multiple categories can be selected to describe the individual's impairment(s). Enter all applicable disability codes.

Maximum character length: 3 - Use up to 3 codes listed below (Variable Length). .

THE DISABILITY SHOULD HAVE A MAJOR IMPACT ON THE PERSON AND THEIR ABILITY TO FUNCTION IN THE COMMUNITY AND TO PROCURE FOOD, CLOTHING, AND A SAFE PLACE TO LIVE.

Codes	Definition
A	Limits development or intelligence; i.e., mental retardation or developmental disorder, organic brain syndrome
B	Sensory or communication.; i.e., major visual disability (does not include wearing glasses) or auditory disability.
C	Physical, i.e., unable to walk without assistance, unable to care for self, chronic illness.
D	Alcohol or drug dependence; i.e., dependence on alcohol or drugs which negatively affects the individual's ability to maintain a stable living arrangement, unable to remain in competitive employment, unable to provide adequate care for dependents, legal problems such as loss of driver's license or arrests.
X	Other - Medical or physical disabilities not listed above.
Y	Unknown
Z	None - No disability

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

Attribute:	Income Indicator

Definition:

An outcome indicator of family unit economic level based on federal poverty standards. Guidelines periodically distributed by the State Mental Health Division.

Use the information available or your best estimate in determining this element. If the person is on SSI, or is eligible for Washington State medical assistance, assume that the person is below the Federal Poverty definition.

This is an outcome measure.

Maximum character length: 1

NOTE: VALUES 1 AND 2 ARE INCORRECT AND PROVIDING INCORRECT DATA; THEREFORE, VALUE 1 AND 2 WILL NO LONGER BE ACCEPTED AFTER DECEMBER 1, 1993. VALUES 4 AND 5 WILL BE THE CORRECT CODES.

RSNs may begin transmitting values 4 and 5 effective August 30, 1993.

Codes	Label
1	~~Below federal poverty definition - No regular or routine source of income.~~
2	~~Above federal poverty definition - No regular or routine source of income~~
3	Above federal poverty definition
4	Below federal poverty definition - With regular or routine source of income, including SSI, GAU, SSA.
5	Below federal poverty definition - With NO regular or routine source of income.
9	Unknown

Where used:

Transaction ID	Transaction Title
035.01	Case Review
035.02	Monthly Case Status

Attribute:	Investigation County

Definition:

A code indicate the county a person was investigated under the Involuntary Treatment Act.

Maximum character length: 2   Left zero fill.

See County Code for values.

Where used:

Transaction ID	Transaction Title	AKA
160.01	Crisis Investigation	Investigation County

Attribute:	Investigation Date

Definition:

Date of an investigation was made under the Involuntary Treatment Act.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
160.01	Crisis Investigation

Attribute:	Investigation Outcome

Definition:

A code indicating the outcome to a person investigated under the Involuntary Treatment Act.

Maximum character length: 1   Left zero fill.

Format	Definition
1	Detention
2	Referral to hospital/outpatient services
9	None/No action taken

Where used:

Transaction ID	Transaction Title
160.01	Crisis Investigation

Attribute:	Investigation Start Time

Definition:

Time of day an investigation was started under the Involuntary Treatment Act.

Maximum character length: 4

Format: HHMM

Format	Definition
HH	Military hour (00 - 24)
MM	Minutes (00 - 59)

Where used:

Transaction ID	Transaction Title
160.01	Crisis Investigation

Attribute:	Legal Status

Definition:

A code indicating the legal status of a person upon entering a facility. If a person changes the legal status during the admission, use the status at time of admission.

Maximum character length: 1   Left zero fill.

Format	Definition
V	Voluntary
I	Involuntary (Committed via ITA or courts)

Where used:

Transaction ID	Transaction Title
070.02	Inpatient Service

Attribute:	Language Code

Definition:

This code identifies language spoken in the home or prefers to receive services.

Maximum character length: 2 Left zero fill.

Codes	Definition	Codes	Definition
00	Language Unknown	17	Hungarian
01	Japanese	18	Russian
02	Korean	19	Romanian
03	Spanish	20	Polish
04	Vietnamese	21	Greek
05	Laotian	22	Tigrigna
06	Cambodian	23	Amharic
07	Mandarin	24	Finnish
08	Hmong	25	Farsi
09	Samoan	26	Czech
10	Ilocano	27	Mien
11	Tagalog	28	Yakama
12	French	29	Salish
13	English	30	Puyallup
14	German	31	Thai
15	American Sign Language	99	Other Language
16	Cantonese		

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

MHD/CIS Data Definitions

Attribute:	Minutes of Service

Definition:

The number of minute a specific service was provided..

Maximum character length: 5   Variable Length

Where used:

Transaction ID	Transaction Title
120.01	Service Detail (Old)
120.02	Outpatient Service

Attribute:	Outpatient Service Type

Definition:

A code to indicate the category of outpatient service delivered.

Maximum character length: 1

Codes	Definition
1	Individual
2	Group
3	Day Treatment
4	Medication Management
9	Other

Where used:

Transaction ID	Transaction Title
120.02	Outpatient Service

Attribute:	Priority Code

Definition:

An indicator of whether the consumer is a member of a targeted group as established by legislative mandate. Adults and Children definitions are included below:

ADULTS:

Gravely Disabled
"Gravely Disabled" means a condition in which a person, as a result of a mental disorder: (a) Is in danger of serious physical harm resulting from a failure to provide for his essential human needs of health or safety, or (b) manifests severe deterioration in routine functioning evidenced by repeated and escalating loss of cognitive or volitional control over his or her actions and is not receiving such care as is essential for his or her health or safety. See RCW 71.05.020.

Mental Disorder
"Mental Disorder" means any organic, mental, or emotional impairment which has substantial adverse effects on an individual's cognitive or volitional functions. See RCW 71.05.020.

Likelihood of Serious Harm
"Likelihood of Serious Harm means either: (a) A substantial risk that physical harm will be inflicted by an individual upon his or her own person, as evidenced by threats or attempts to commit suicide or inflict physical harm on one's self, (b) a substantial risk that physical harm will be inflicted by an individual upon another, as evidenced by behavior which as caused such harm or which places another person or persons in reasonable fear of sustaining such harm, or (c) a substantial risk that physical harm will be inflicted by an individual upon the property of others, as evidenced by behavior which has caused substantial loss or damage to the property of others.

ADULTS:

Chronic (Adult):Meets at least one of the following criteria: (a) Has undergone two or more episodes of hospital care for a mental disorder within the preceding two years; or (b) Has experienced a continuous psychiatric hospitalization or residential treatment exceeding six months' duration within the preceding year; or (c) Has been unable to engage in any substantial gainful activity by reason of any mental disorder which has lasted for a continuous period of not less than twelve months. See RCW71.24.025 (5). **Code as** *Chronic,* **Code value 1**.

Seriously At risk (Adult): A seriously disturbed person as defined below, who is determined by the RSN at their sole discretion to be at risk of becoming acutely or

chronically mentally ill. See RCW 71.24.025 (14).   **Code as *Seriously at risk*, Code value 2.**

Serious (Adult): A seriously disturbed person. Meets at least one of: gravely disabled or presents likelihood of serious harm to self or others; on conditional release status some time in the past 2 years; has a mental disorder causing major impairment in daily living; suicidal preoccupation. See RCW 71.24.025 (16).   **Code as *Other*, Code value 3**.

Other (Adult) Persons who do not meet the criteria for Code value 1 or Code value 2.
CHILDREN

Definitions (See RCW 71.34)

Mental Disorder
Any organic, mental or emotional impairment that has substantial adverse effects on an individual's cognitive or volitional functions. The presence of alcohol abuse, drug abuse, juvenile criminal history, antisocial behavior, or mental retardation alone is insufficient to justify a finding of 'mental disorder' within the meaning of this section.

Gravely disabled
A minor who, as a result of a mental disorder, is in danger of serious physical harm resulting from a failure to provide for his or her essential human needs of health or safety, or manifests severe deterioration in routine functioning evidence by repeated and escalating loss of cognitive or volitional control over his or her actions and is not receiving such care as is essential for his or her health or safety. .

Likelihood of serious harm
Means either: a) A substantial risk that physical harm will be inflicted by an individual upon his or her own person, as evidenced by threats or attempts to commit suicide or inflict physical harm on oneself; b) a substantial risk that physical harm will be inflicted by an individual upon another, as evidenced by behavior which has caused such harm or which places another person or persons in reasonable fear of sustaining such harm; or c) a substantial risk that physical harm will be inflicted by an individual upon the property of others, as evidenced by behavior which has caused substantial loss or damage to the property of others.

Severely Emotionally Disturbed (Children):
A child who has been determined to be experiencing a mental disorder (including those that result in a behavioral or conduct disorder) that is clearly interfering with the child's functioning in family or school or with peers AND meets at least one of the following criteria:
a) has undergone inpatient treatment or placement outside of the home related to a mental disorder within the last two years;
b) has undergone involuntary treatment under chapter 71.34 RCW with the last two years;

c) is currently served by at least one of the following child-serving systems: Juvenile justice, child-protection/welfare, special education, or developmental disabilities; OR
d) is at risk of escalating maladjustment due to:
i) chronic family dysfunction involving a mentally ill or inadequate caretaker;
ii) changes in custodial adult;
iii) going to, residing in or returning from any placement outside of the home (e.g. psychiatric hospital, short-term inpatient, residential treatment, group or foster home, or correctional facility);
iv) subject to repeated physical abuse or neglect;
v) drug or alcohol abuse
vi) homelessness.
Code as *Severely Emotionally Disturbed (children)*, Code Value 1.

Seriously Disturbed (Children):
A person who meets the description of Serious (Adult) above OR
is a child diagnosed by a mental health professional as experiencing a mental disorder which is clearly interfering with the child's functioning in family or school or with peers or is clearly interfering with the child's personality development and learning. **Code as *Seriously Disturbed (Children)*, Code Value 2.**

Other (Children):
Not a member of a priority population as defined above.

Maximum character length: 1

Codes	Definition
1	*Chronic* (adult)/Severely Emotionally Disturbed (children)
2	*Seriously at risk* (adult)/Seriously Disturbed (children)
3	*Other.*

Where used:

Transaction ID	Transaction Title
035.02	Monthly Case Status
150.01	Status

Attribute:	Referenced Consumer ID

Definition:

This ID of a consumer established by a Contractor that will serve to replace an ID used in error. The replaced ID will be voided.

Maximum character length: 20

Where used:

Transaction ID	Transaction Title	AKA
130.02	Void Consumer ID	Referenced Contractor ID

Attribute:	Reporting Unit ID

Definition:

A code established by the Mental Health Division to uniquely identify an organization delivering services to a consumer.

Maximum character length: 3   Left zero fill.

Where used:

Transaction ID	Transaction Title	AKA
000.01	Header	Submitting RSN Reporting Unit ID
100.01	Case Manager	Case Manager Reporting Unit ID
035.01	Case Review	Reporting Unit ID
035.02	Monthly Case Status	Contractor ID
011.01	Consumer Case Manager	Reporting Unit ID Contractor ID Case Manager Reporting Unit ID
010.01	Consumer Cross Reference	Identifying Unit ID Primary Unit ID Secondary Unit ID
020.03	Consumer Demographics	Reporting Unit ID Contractor ID
070.01	Inpatient Service (Old)	Reporting Unit ID
070.02	Inpatient Service (New)	Reporting Unit ID Contractor ID
161.01	ITA Detention	Contractor ID
162.01	ITA Hearing	Contractor ID
160.01	Crisis Investigation	Contractor ID
120.01	Service Detail (Old)	Reporting Unit ID
120.02	Outpatient Service	Contractor ID Reporting Unit ID
170.01	Residential Usage	Contractor ID
150.02	Current Status	Reporting Unit ID Contractor ID
130.02	Void Consumer ID	Contractor ID

Attribute:	Residential Arrangement Code

Definition:

This is a code describing the consumer's current residential situation.

Choose the code that best fits the client's most typical--i.e., most frequent--living arrangement for the previous 30 days.   This code should be updated when a change occurs, or at least every 180 days the case manager should review and update this item.

Note: This definition is being replaced and will no longer be in use after December 31, 1997.

Maximum character length: 3   Left zero fill.

Codes	Definitions
Facility Based	
010	Adult Residential Treatment Facility (ARTF) - Long Term Rehabilitation Facility (LTRF) or Residential Treatment Facility (RTF)
020	Nursing Facility - Long-Term Adaptive (LTA)
030	Child Group Home
040	Congregate Care Facility (CCF) - Supervised Living
050	Jail/Juvenile Correctional Facility
060	Interim Placement; i.e., Planned, short term facility placement (30 days or less) such as Crisis or Respite.
Home Like	
110	Adult Family Home
120	Foster Home
Other	
310	Own Home - By choice. If the consumer is living with friends, parents, or relatives, by choice, but does not actually own the home, it is also considered "Own Home."
320	Other's home not by choice: e.g., Living with family (includes adult living with parents, elderly living with children) or living with friends. Does NOT include Adult Family Homes, Foster Homes, nor Children (0-17 years) living with parents. The purpose of this code is to identify individuals who are living with family members who are acting in a caretaking capacity.
330	Homeless - Those persons who lack a fixed, regular and adequate nighttime residence, including persons whose primary nighttime residence is a public or private shelter designed to provide temporary living accommodations; or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.
998	Unknown
999	Other

Where used:

Transaction ID	Transaction Title
035.01	Case Review

Attribute:	Residential Type

Definition:

A code established by the Mental Health Division to uniquely identify type of residence as identified in WAC.

Maximum character length: 2   Left zero fill.

Codes	Definition
01	Adult Family Home - WAC 388-76
02	Boarding Home - WAC 246-316
03	Adult Residential Rehabilitative Facility - WAC 346-325
04	Assisted Living - WAC 388-110

Where used:

Transaction ID	Transaction Title	AKA
170.01	Residential Usage	Residential Type

Attribute:	Service Code

Definition:

A code which identifies services delivered to the consumer.

Note: This definition is being replaced and will no longer be in use after December 31, 1997.

Maximum character length: 5   Left zero fill.

Codes	Definition
02600	Crisis Services (In Facility)
02610	Crisis Services (Out Facility)
02630	Stabilization Services (Out Facility)
02640	Intake Evaluation (In Facility)
02650	Intake Evaluation (Out Facility)
02660	Special Population Evaluation (In Facility)
02670	Special Population Evaluation (Out Facility)
02680	Interdiscip. Evaluation (In Facility)
02690	Interdiscip. Evaluation (Out Facility)
02700	Psycholog. Assessment (In Facility)
02710	Psycholog. Assessment (Out Facility)
02720	Med. Mgt. Individual (In Facility)
02730	Med. Mgt. Individual (Out Facility)
02740	Med. Mgt. Group (In Facility)
02750	Med. Mgt. Group (Out Facility)
02760	Individual Treatment Services (In Facility)
02770	Individual Treatment Services (Out Facility)
02780	Group Treatment Services (In Facility)
02790	Group Treatment Services (Out Facility)
02800	Adult Day Tx. (In Facility)
02810	Adult Day Tx. (Out Facility)
02820	Adult Acute Diversion (In Facility)
02830	Adult Acute Diversion (Out Facility)
02840	Child and Adolescent Day Tx (In Facility)
02850	Child and adolescent Day Tx (Out Facility)
02860	Child and Adolescent Acute Diversion (In Facility)
02870	Child and Adolescent Acute Diversion (Out Facility)
02880	Family Therapy (In Facility)
02890	Family Therapy (Out Facility)
02900	Critical Mental Health Services
03001	(Other direct services)

Where used:

Transaction ID	Transaction Title
120.01	Service Detail (Old)

Attribute:	Service Date

Definition:

Date of a service was provided.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
120.02	Outpatient Service

Attribute:	Service Location

Definition:

The code identifying a physical location of outpatient service.

Maximum character length: 1

Codes	Definition
1	Place of Residence
2	Place of Work/School
3	In facility - This will include contact of the consumer by telephone.
4	Hospital or Emergency Room
5	Jail or Place of Detention
6	Street
7	Community
9	Other

Where used:

Transaction ID	Transaction Title
120.01	Service Detail (Old)
120.02	Outpatient Service

Attribute:	Service Month

Definition:

The month and year a service was provided.

Maximum character length: 6

Format: YYYYMM (Y= year, M = month)

Where used:

Transaction ID	Transaction Title
170.01	Residential Usage

Attribute:	Service Transaction ID

Definition:

A number or identifier that helps to uniquely identify a service contact. This ID is used when reporting individual service records.

Note: This definition is being replaced and will no longer be in use after December 31, 1997.

Maximum character length: 6

Where used:

Transaction ID	Transaction Title
120.01	Service Detail (Old)

Attribute:	Sexual Orientation

Definition:

A code that describes a person's voluntarily stated sexual orientation. This code should not be inferred by the clinician. The information should be collected during assessment, on discharge or upon notification by the person.

Maximum character length: 1

Code	Definition
1	The person states they are heterosexual
2	The person states they are gay, lesbian, bisexual or transgendered
9	Unknown/Not voluntarily given by person

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

Attribute:	Social Security Number

Definition:

A number assigned by the Social Security Administration which uniquely identifies a person.

Maximum character length: 9

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

Attribute:	Start Date

Definition:

The date an event began. An event with a Start Date should eventually have an End Date reported.

Submit the date in the format YYYYMMDD. November 26, 1933 would be submitted on the batch transaction as 19331126.

Note: This definition is being replaced and will no longer be in use after December 31, 1997.

Maximum character length: 8

Format: YYYYMMDD

Format	Definition
YYYY	Year
MM	Month
DD	Day

Where used:

Transaction ID	Transaction Title
070.01	Inpatient Service (Old)

Attribute:	State Hospital ID

Definition:

A code that identifies a specific State Hospital.

Maximum character length: 1

Codes	Definition
430	Child Study and Treatment Center
431	Western State Hospital
432	Northern State Hospital (Closed)
433	Eastern State Hospital
436	Program for Adaptive Living Skills

Where used:

Transaction ID	Transaction Title
071.02	Inpatient Service State Hospital

Attribute:	Status Code

Definition:

A code describing a person's classification as enrolled or registered as defined in RCW in each RSN. The sole use of this item is for feed back to the RSN in the Case Management Locator System (CMLS). The term "enrolled" is not the same as stated in contract.

Maximum character length: 1

Codes	Definition
1	**Registered** - Consumers having at least one contact with the mental health system and for whom additional services are planned shall be registered.
2	**Enrolled** - Registered consumers approved by resource management services for community support or residential services shall be considered enrolled.

Where used:

Transaction ID	Transaction Title
150.02	Current Status

Attribute:	**Submitting Reporting Unit ID**

Definition:

Identifies a Regional Support Network or other assigned agency as identified by MHD who can submit Core Data Information to MHD-CIS.

Maximum character length: 3   Fill with leading zeros.

Where used:

Transaction ID	Transaction Title
000.01	Header

Attribute:	Surname

Definition:

The surname/family/last name of a consumer as provided by an RSN/PHP, State Hospital or Community Service Office. In general, follow the rules of the appropriate culture when determining which name is the surname. Consistency is important here, because the last name will be used as one element to uniquely identify the person across our system.

Maximum character length: 30   Variable Length

Where used:

Transaction ID	Transaction Title
020.03	Consumer Demographics

Attribute:	Title XIX Indicator

Definition:

A code to indicate if a person receiving services presented evidence of entitlement to Title XIX benefits. The burden of proof is upon the person receiving the service to present evidence of eligibility. The RSN or their agent may optionally assist the person in establishing such proof.

Maximum character length: 1

Codes	Definition
1	Title XIX Eligible
0	Not Title XIX Eligible

Where used:

Transaction ID	Transaction Title
035.01	Case Review
035.02	Monthly Case Status

Attribute:	Transaction ID

Definition:

A code to indicate the type of transaction record to be processed in a batch file.

Maximum character length: 6

Where used:

Transaction ID	Transaction Title
000.01	Header
100.01	Case Manager
035.01	Case Review
035.02	Monthly Case Status
011.01	Consumer Case Manager
010.01	Consumer Cross Reference
020.03	Consumer Demographics
150.02	Current Status
070.01	Inpatient Service (Old)
070.02	Inpatient Service (New)
071.02	Inpatient Service State Hospital
061.01	ITA Detention
062.01	ITA Hearing
060.01	Crisis Investigation
120.02	Outpatient Service
120.01	Service Detail (Old)
170.01	Residential Usage
090.01	Priority

Attribute:	Vocational Rehabilitation Participation

Definition:

Identifies whether the service recipient is an active Vocational Rehabilitation client. To the best of the contractor's knowledge, is the consumer currently an active recipient of vocational services from the state Division of Vocational Rehabilitation, or any other social service agency which offers employment services?

Maximum character length: 1

Code	Definition
1	Yes
2	No
8	Missing
9	Unknown

Where used:

Transaction ID	Transaction Title
035.02	Monthly Case Status