



*Arizona Department of Health Services*  
**Division of Behavioral Health Services**

**DEMOGRAPHIC DATA SET  
USER GUIDE  
(DUG)**



Version 2.3

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**Introduction**

This document provides detailed information for the completion and submission of the demographic data set, a set of data elements Tribal and Regional Behavioral Health Authorities (T/RBHAs) are required to collect and submit to the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS). The demographic data set is reported to ADHS/DBHS through the ADHS Client Information System (CIS) and is used to:

- Monitor and report on enrolled clients' outcomes;
- Comply with federal and state funding and/or grant requirements to ensure continued funding for the behavioral health system;
- Assist with financial-related activities such as budget development and rate setting;
- Support quality management and utilization management activities; and
- Respond to requests for information.

It is anticipated that demographic data will be integrated into the T/RBHA and provider performance improvement processes.

The data fields contained in the demographic data set are mandatory and must be collected and submitted within the required timeframes, recorded using valid values, and conform to the definitions contained herein. ADHS does not prescribe a standard data collection tool but recommends using the Client Demographic Information Sheet. The contents of the demographic data record must match the client's behavioral health medical records. ADHS/DBHS may periodically conduct chart reviews to ensure that T/RBHA demographic data submitted to ADHS/DBHS is consistent with clients' behavioral health medical records.

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**Contacts**

If you have any questions or discover any errors or omissions, please call your individual T/RBHA Representative. T/RBHAs will forward all issues to the appropriate contact at ADHS/DBHS for resolution.

This document will be made available for public comment periodically. Any suggestions for edits outside of the public comment period should be submitted to the ADHS/DBHS Policy Office for consideration during the next scheduled revision of this document.

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**Updates**

Updates to the Demographics System (Field addition/removal, valid value modifications, etc) are planned to occur on a semi-annual basis in January and July. Updates to this manual will be consistent with Demographic System changes.

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**Interactive Reference**

Although this manual serves as a quick reference in printed form, it has been developed as an interactive reference in an Acrobat PDF (Portable Document Format) document medium. From the Table of Contents through each data fields section to the Data Field's Reference Table, hyperlinks exist that will allow a quick single-click reference to individual key sections within the document and other policy and support documents located throughout the ADHS/DBHS web site. All [hyperlinks](#) are displayed as such.

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**Key References**

The following key references have been noted within this manual or provide further insight and support to demographics.

**Manuals & Sections within:**

[ADHS/DBHS Provider Manual: Section 7.5, Enrollment, Disenrollment and Other Data Submission Office of Program Support Procedure Manuals](#)  
[ADHS/DBHS CIS File Layout and Specifications Manual](#)  
[Provider Manual Section 3.8, Outreach, Engagement, Re-engagement and Closure](#)

**Forms & Attachments:**

[ADHS/DBHS Provider Manual: Section 13 – Forms & Attachments](#)  
[Provider Manual Form 3.9.1, Behavioral Health Assessment and Service Plan](#)  
[Provider Manual Form 3.9.2, Behavioral Health Assessment: Birth-5 and Service Plan](#)  
[PM Attachment 7.5.3 SMI and SED Qualifying Diagnoses Table](#)  
[PM Attachment 7.5.4 Substance Abuse Disorders Qualifying Diagnoses Table](#)

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**Definitions**

The following terms have been identified as either important to know or have been specifically referenced throughout this manual.

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[Age Groups](#)

The following age groups have been defined to provide consistency to data field requirements.

<b>Othru 4</b>	Birth through age 4 but not equal to age 5.	<b>5thru17</b>	Age 5 thru age 17 but not equal to age 18.
<b>Othru 17</b>	Birth through age 17 but not equal to age18.	<b>5&amp;Older</b>	Age 5 and older.
		<b>18&amp;Older</b>	Age 18 and older.

[834 Transaction Enrollment / Disenrollment](#)

The HIPAA-compliant transmission, by a behavioral health provider to a T/RBHA and by a T/RBHA to ADHS, of information to establish or terminate a client's enrollment in the ADHS/DBHS behavioral health service delivery.

[Annual Update](#)

An annual review and documented update of a client's behavioral health assessments, treatment and progress toward meeting defined service goals over the past year. In addition to meeting with the client and other team members this involves a review of the client's behavioral health record including assessments, progress notes, medications, service plans and reviews, demographic and clinical data elements for the past 12 months.

[Assessment](#)

The ongoing collection and analysis of a client's medical, psychological, psychiatric and social condition in order to initially determine if a behavioral health disorder exists and if there is a need for behavioral health services and on an ongoing basis ensure that the client's service plan is designed to meet the client's (and family's) current needs and long term goals.

[Behavioral Health Category Assignment](#)

One of five possible designations (i.e., child non-SED, child with SED, adult with SMI, adult non-SMI with general mental health need and adult non-SMI with substance abuse) which are assigned to each client enrolled in the ADHS/DBHS behavioral health system.

<a href="#">Change</a>	Any modification to a client’s demographic record that occurs after the Initial Demographic has been accepted by ADHS/DBHS, which does not include the annual update (as the “annual update” is separately identified).
<a href="#">CIS</a>	The Client Information System is the data system used by ADHS/DBHS.
<a href="#">Closure</a>	The disenrollment of an enrolled client from a T/RBHA by the T/RBHA or provider after all re-engagement activities described in <a href="#">Provider Manual Section 3.8, Outreach, Engagement, Re-engagement and Closure</a> , have been exhausted. Please see field 81- Reason for Disenrollment.
<a href="#">Day</a>	A calendar day unless otherwise specified.
<a href="#">Descriptive Characteristics</a>	Information used to profile clients at intake and during treatment in the behavioral health system and includes the following areas: <ul style="list-style-type: none"> <li>▪ Socio-demographic profile;</li> <li>▪ Treatment characteristics;</li> <li>▪ Participation status;</li> <li>▪ Medical condition;</li> <li>▪ Other agency involvement;</li> <li>▪ Special fund source identifier; and</li> <li>▪ Served by CFT.</li> </ul>
<a href="#">Edit</a>	A check to ensure that data in a field is valid and complete.
<a href="#">Intake/Enrollment</a>	The collection by appropriately trained T/RBHA/provider staff of basic information about a client in order to enroll him/her in the ADHS/DBHS system, to screen for Title XIX/XXI AHCCCS eligibility and to determine the need for any co-payments.
<a href="#">OMB</a>	Office of Management and Budget
<a href="#">Outcome Measures</a>	Information that allows measurement of behavioral health outcomes for Adults and Children.  At a minimum, outcome measures for adults and children include the following: <ul style="list-style-type: none"> <li>▪ Adults must be completed and submitted at intake/enrollment, annually (on the anniversary of the client’s intake date) and at disenrollment</li> <li>▪ Children (0 thru 17) must be completed and submitted at intake/enrollment, every 6 months (6 months from the client’s intake date) and at disenrollment</li> </ul>
<a href="#">PC</a>	Presenting Concerns
<a href="#">SP</a>	Special Populations

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**Date / Period Calculations**

Various dates and/or periods are calculated to determine available valid values for demographic fields, sanctioning, data submission requirements and so forth. The following terms have been identified and defined by their calculation.

Age of client at time of service	<p>The difference between the most current "Descriptive Characteristics (or) Outcome Measures Effective Date" or "Assessment Date" AND the client's Date of Birth.</p> <p>Used to determine the age group a client was in at the time service was provided and/or data was collected. Various data fields are age group specific.</p>
Assessment period	<p>The difference or period between the most recent of the "Descriptive Characteristics (or) Outcome Measures Effective Date" or the "Assessment Date" AND the Intake Date.</p> <p>Used to determine...</p> <ul style="list-style-type: none"><li>• when a client's annual assessment or 6-month outcome measures update was due and/or last completed</li><li>• the period (days) that determines the rules associated with <b>submitting</b> an initial demographic or disenrollment demographic (see <a href="#">#3-Reason for submission</a>)</li></ul>
BHS Eligibility period	<p>The difference or period between the Closure Date and the Intake Date.</p>
Days between Closure	<p>The difference or period between the current date and the Closure Date.</p> <ul style="list-style-type: none"><li>• Used to determine the due date / days for a complete disenrollment demographic.</li></ul>
Days between Intake	<p>The difference or period between the current date and the Intake Date.</p> <ul style="list-style-type: none"><li>• Used to determine the due date / days for a complete initial demographic.</li></ul>

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**Data Submission Requirements, Deadlines, & Completeness**

Submission of data to ADHS/DBHS is associated with the four (4) events listed below. Demographic data is to be formatted for submission as defined in the Demographic Data Set File Layout section of the [ADHS/DBHS CIS File Layout and Specifications Manual](#). Intake and closure data is to be submitted using the HIPAA 834 Benefit Enrollment and Maintenance file layout.

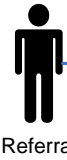
The following table summarizes the data submission deadline criteria for each event based on the associated medium. Timeframes indicate deadlines for data from T/RBHAs to ADHS/DBHS. T/RBHAs establish deadlines for data from providers, in accordance with the T/RBHA edition of Provider Manual Section 7.5, Enrollment, Disenrollment and Other Data Submission. [Diagram 1](#) provides a graphical representation of the data submission process.

Event	Submission Deadline to ADHS/DBHS	
	Demographic	HIPAA 834
Enrollment	Initial Demographic within 0-55 days.	Within 0-14 days of Intake
Change	Within 0-55 days of reported change	Within 0-55 days of reported change, when applicable
Annual or 6-month Outcome Measures Update	Within 0-55 before and up to 0-55 days after the anniversary of the Intake	Within 0-55 days of reported change, when applicable
Disenrollment	Within 0-14 days of Disenrollment	0-14 days following decision to disenroll

All demographic data sets must be complete to be accepted into the CIS system. To identify what fields are required for each event, reference the field's "T/RBHA Data Submit" column in the [Data Field Reference Table](#).

Event	Demographic Data Set Submission/Completion Criteria
	Rules
Enrollment	Initial Demographic ( <a href="#">Reason for Submission = 1</a> ): <ul style="list-style-type: none"> <li>An intake must exist.</li> <li>Only <b>one</b> submission will be accepted per client intake.</li> <li>All fields identified (<a href="#">T/RBHA Data Submit = I</a>) in the <a href="#">Data Field Reference Table</a> will be required (see Exceptions).</li> </ul>
Annual / 6-month Outcome Measures Update	Full Update ( <a href="#">Reason for Submission = 2</a> ): <ul style="list-style-type: none"> <li>An intake must exist.</li> <li>An open Demographic record must exist.</li> <li>All fields identified (<a href="#">T/RBHA Data Submit = F</a>) in the <a href="#">Data Field Reference Table</a> will be required.</li> </ul>
Change	Change ( <a href="#">Reason for Submission = 3</a> ): <ul style="list-style-type: none"> <li>An intake must exist.</li> <li>A Demographic record must exist.</li> <li>Only the field(s) being changed need(s) to be populated, along with certain identifying fields.</li> </ul>
Disenrollment	Disenrollment Demographic ( <a href="#">Reason for Submission = 4</a> ): <ul style="list-style-type: none"> <li>A closed intake (closure) must have been accepted.</li> <li>All fields identified (<a href="#">T/RBHA Data Submit = D</a>) in the <a href="#">Data Field Reference Table</a> will be required (see Exceptions).</li> </ul>
Exceptions	If the <a href="#">assessment period</a> for the intake is 55 days or less; or is crisis only. <ol style="list-style-type: none"> <li>An initial demographic is NOT required.</li> <li>A Disenrollment demographic must be submitted.</li> </ol>

Diagram 1

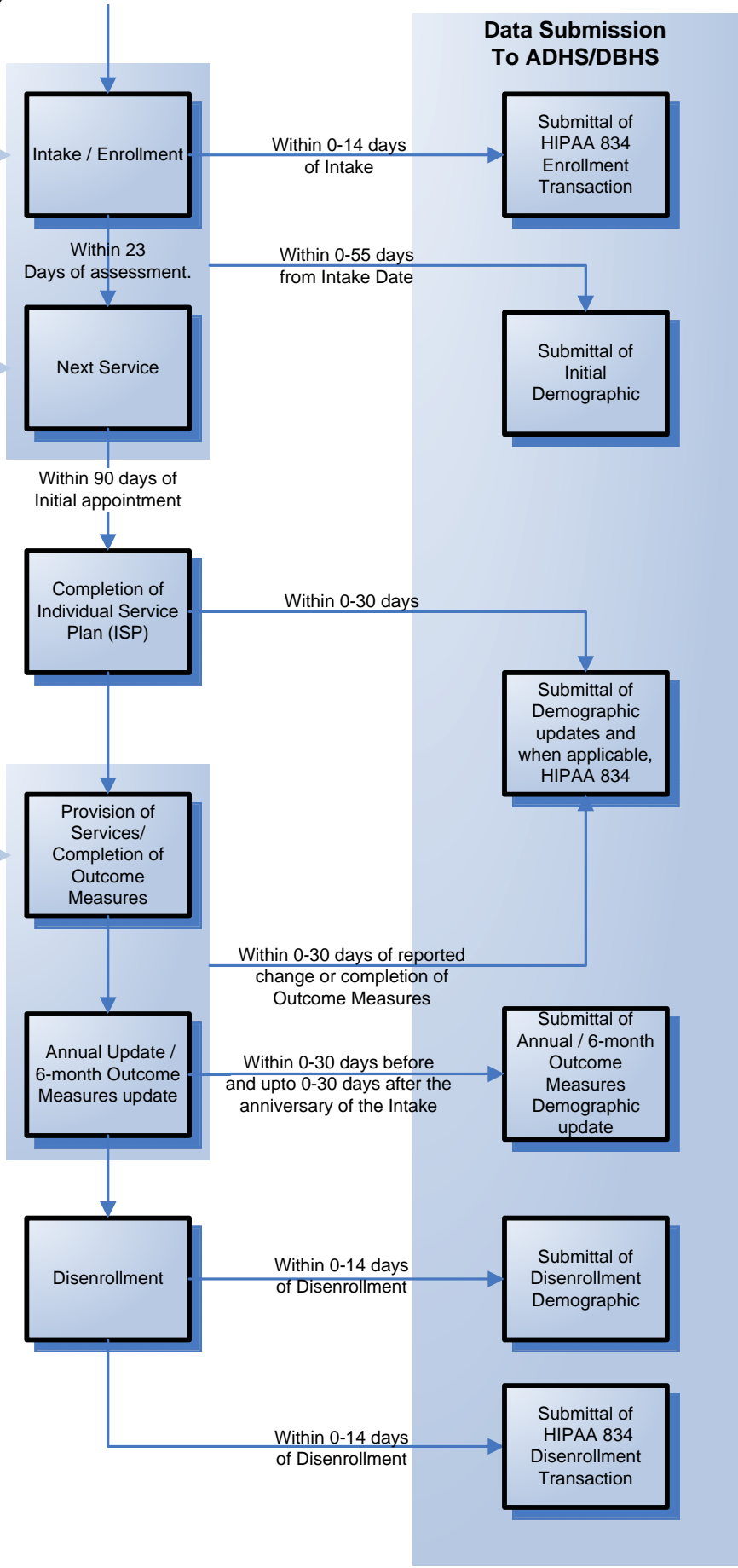


Appointment availability within 7 days or sooner.

-Enrollment/Demographic Information  
-Core Assessment  
-Applicable Addenda  
-Interim Service Plan

-Completion of applicable addenda and/or  
-Behavioral Health Services

-Including ongoing assessments and revisions to Service Plan as appropriate



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## Demographic Data Fields

This section provides detail on each demographic data field. Further detail on the file layout and formats for each data field can be found in the Demographic Data Set File Layout section of the [ADHS/DBHS CIS File Layout and Specifications Manual](#).

Each data field is identified by a field number and a field name. For each data field, further explanation is provided within the following sub-sections.

Sub-Section	Description
Description	Describes the data field itself through definition and/or question, the age group it applies to, and its relationship to other data fields.
Valid Values	A list of all current and past valid values.
Special Considerations	Directs attention to situations that may impact how the data field is to be used, its association to other data fields, valid value considerations, and how often it should be updated.
Updates	Lists the updates made to the data field and the date it was updated.
Examples	Describes one or more situations and the valid value(s) used in the situation(s).

### Hyperlinks

Each data field's detail section title is hyperlinked to its corresponding data field in the [Data Field Reference Table](#). To jump (link) to a field in the Reference Table from a field's detail section, **click** on the data field's title.

In addition, each data field name in the Data Field Reference Table is hyperlinked to its associated data field detail section. To jump (link) to a field's detail **click** on the field name within the table.

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## 1 - Record Type

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<b>Description</b>	Distinguishes Header Records from Detail Records. A Header Record identifies who is sending the file and how many records the file contains. A Detail Record includes the elements comprising the demographic data set.
<b>Valid Values</b>	H Header Record Detail Record (valid value is a space)
<b>Special Considerations</b>	Required on all transactions.
<b>Updates</b>	8/1/03 Field added.
<b>Example</b>	The record being submitted includes demographic data set data elements for a group of specific members. <b>Enter a space.</b>

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## 2 - RBHA ID

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<b>Description</b>	Identifies the T/RBHA submitting the file.
<b>Valid Values</b>	02 Cenpatico GSA 2 07 Magellan 11 Gila River 14 Navajo Nation 15 NARBHA 22 Cenpatico GSA 4 28 White Mountain Apache 25 Pascua Yaqui 26 CPSA GSA 5 27 CPSA GSA 3
<b>Special Considerations</b>	Required on all transactions.
<b>Updates</b>	8/1/03 Field added 7/1/05 Added valid values 02 Cenpatico GSA 2 and 22 Cenpatico GSA 4 11/1/07 Added valid values 07 Magellan GSA 6 and 28 White Mountain GSA 1 7/01/07 Deleted valid value 03 EXCEL, 08 ValueOptions, and 23 PGBHA
<b>Example</b>	The T/RBHA submitting the file is NARBHA. <b>Enter 15.</b>

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### 3 - Reason for Submission

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**Description** Indicates reason for the data submission.

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**Valid Values**

1	Initial Demographic
2	Full Update (Annual, 6-month outcome measures update)
3	Change
4	Disenrollment

---

**Special Considerations** Required on all transactions.

**Valid value "1"** is entered if this is the first "initial" demographic data being submitted.

- It will only be accepted once and must be complete (see "Exception #1").
- An 834 (intake) enrollment record must previously exist.

A complete "initial" demographic data set must be received within 55 days after intake.

**Exception #1:** If the [assessment period](#) for an intake is within 55 days and the client has been disenrolled,

- An initial demographic is not required.
- If submitted, it must be complete.
- [Please see Valid Value 4 Exception #2](#)

**Valid value "2"** is entered if the demographic data is being submitted for an Annual or 6-month Outcome Measures update.

- An initial Demographic record must exist.

**Valid value "3"** is entered if the following conditions are met:

- The client is not being or has not been disenrolled from the system; and
- A Demographic record must exist.

**NOTE:** If a Descriptive Characteristic or Outcome Measure field is being changed, then

- The corresponding Assessment Date (field 29) and/or Effective date (field 57) must also be updated and submitted.

**Valid value "4"** is entered if the demographic data set is being submitted due to a client's disenrollment from the behavioral health system.

- It will only be accepted once and must be complete (see "Exception #2").
- An open Demographic record must exist (see "Exception #1").
- An 834 (closure) must previously exist.

**Exception #2:** If the [assessment period](#) for an intake is within 55 days,

- A complete 55-day disenrollment demographic will require a minimum of, but not limited to, the following fields:
    - 81-Reason for Disenrollment
    - 29-Assessment Date
    - 1 - Record Type
    - 2 - RBHA ID
    - 3 - Reason for Submission
    - 4 - Client ID
    - 5 - Intake Date
    - 6 - Client First Name
    - 8 - Client Last Name
    - 9 - Date of Birth
- 

**Updates** 8/1/03 Field added.

2/1/06 Added valid value "2 - Full Update (Annual, 6-month outcome measures update)."

---

**Example**

A Demographic record exists and it is necessary to update a few of the fields. **Enter a "3"**

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## 4 - Client ID

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<b>Description</b>	The unique CIS identifier for the client (primary client ID).
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<b>Valid Values</b>	A unique 10 character ID.
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<b>Special Considerations</b>	Required on all transactions.
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<b>Updates</b>	8/1/03      Field added.
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<b>Example</b>	Clients who have been previously enrolled in the CIS system will already have a unique identifier, the CIS client ID. If the client has never been enrolled in CIS, a CIS client ID will be assigned by the system when the 834 initial enrollment (intake) is submitted for the client. This client ID must be used when submitting all subsequent enrollment, demographic and disenrollment transactions.
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## 5 - Intake Date

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<b>Description</b>	The date of the initial contact (intake) with the client ("intake may be done by phone or in person").
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<b>Valid Values</b>	YYYYMMDD Format
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<b>Special Considerations</b>	Required on all transactions.
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<b>Updates</b>	8/1/03      Field added.
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<b>Example</b>	The intake date is recorded as the 4 digit year, 2 digit month and 2 digit day. A client's intake date is June 20, 1976. <b>Enter 19760620.</b>
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## 6 - Client First Name

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<b>Description</b>	The client's first name.
<b>Valid Values</b>	Maximum size is 25 characters Must match first name on intake (834 enrollment)
<b>Special Considerations</b>	Required on all transactions.
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	The name of the client is Michael Stevens. <b>Enter Michael.</b>

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## 8 - Client Last Name

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<b>Description</b>	The client's last name (family name)
<b>Valid Values</b>	Maximum size is 35 characters Must match last name on intake (834 enrollment)
<b>Special Considerations</b>	Required on all transactions.
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	The name of the client is Michael Stevens. <b>Enter Stevens.</b>

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## 9 - Date of Birth

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<b>Description</b>	The day the client was born.
<b>Valid Values</b>	YYYYMMDD Format Must match DOB on intake (834 enrollment)
<b>Special Considerations</b>	Required on all transactions.
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	Date is recorded as the 4-digit year, 2-digit month and 2-digit day. A client's date of birth is March 9, 1943. <b>Enter 19430309.</b>

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## 10 - Referral Date

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<b>Description</b>	<b>(intake only)</b> The date when the T/RBHA or provider received a referral for service. A referral includes an oral, written, faxed or electronic request for services made by the client or on the client's behalf (not always equal to the intake date).
<b>Valid Values</b>	YYYYMMDD Format
<b>Special Considerations</b>	This date should be equal to or less than the intake date. (Intake Only)
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	Date is recorded as the 4 digit year, 2 digit month and 2 digit day. The T/RBHA receives a call on January 3, 2005, requesting services. <b>Enter 20050103</b>

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## 11 - Referral Source

**Description** (At intake only) Identifies the principal source of referral for a client.

<b>Valid Values</b>	01	Self/Family/Friend	37	Community agency other than Behavioral Health Provider (homeless shelter, church, employer)
	03	Other Behavioral Health Provider	38	Arizona Department of Economic Security (ADES) (Adult or other non-urgent CPS referral, DDD, RSA)
	19	Federal Agency (VA, IHS, Federal Prison, etc.)	39	Arizona Department of Education (ADE)
	35	AHCCCS Health Plan and/or PCP	40	Criminal justice/correctional (includes AOC-Probation, ADOC, ADJC, Jail)
	36	CPS-24 Hour Urgent Response (child only)	41	Other

**Special Considerations** (Intake Only)

**Updates** 8/1/03 Field added.

**Example** A referral is received from the Arizona Department of Economic Security/Child Protective Services (ADES/CPS) for an urgent response to provide behavioral health services to a child removed from the home. **Enter 36.**

## 12 - OMB-American Indian

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**Description**            **(At intake only)** The client's racial background. Is client American Indian or Alaska Native?

Clients should be offered the option of selecting **one or more** racial designations. Self-identification is the preferred means of obtaining information about a client's race.

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**Valid Values**

Y	Yes
N	No

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**Special Considerations**            A valid value of Y must be entered in at least one of the following fields: 12, 13, 14, 15 or 16. Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

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**Updates**                                8/1/03            Field added.

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**Example**                                A client identifies himself as being a member of the Navajo Nation and an African American. **Enter Y.**

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## 13 - OMB-Asian

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<b>Description</b>	<p><b>(At intake only)</b> The client's racial background. Is client Asian?</p> <p>Clients should be offered the option of selecting <b>one or more</b> racial designations. Self-identification is the preferred means of obtaining information about a client's race.</p>				
<b>Valid Values</b>	<table><tr><td>Y</td><td>Yes</td></tr><tr><td>N</td><td>No</td></tr></table>	Y	Yes	N	No
Y	Yes				
N	No				
<b>Special Considerations</b>	<p>A valid value of Y must be entered in at least one of the following fields: 12, 13, 14, 15 or 16. Field 29-Assessment Date must be updated when this field is changed. (Intake Only)</p>				
<b>Updates</b>	<table><tr><td>8/1/03</td><td>Field added.</td></tr></table>	8/1/03	Field added.		
8/1/03	Field added.				
<b>Example</b>	<p>A client identifies himself as being a member of the Navajo Nation and an African American. <b>Enter N.</b></p>				

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## 14 - OMB-Black

---

<b>Description</b>	<p><b>(At intake only)</b> The client's racial background. Is client Black or African American?</p> <p>Clients should be offered the option of selecting <b>one or more</b> racial designations. Self-identification is the preferred means of obtaining information about a client's race.</p>				
<b>Valid Values</b>	<table><tr><td>Y</td><td>Yes</td></tr><tr><td>N</td><td>No</td></tr></table>	Y	Yes	N	No
Y	Yes				
N	No				
<b>Special Considerations</b>	<p>A valid value of Y must be entered in at least one of the following fields: 12, 13, 14, 15 or 16. Field 29-Assessment Date must be updated when this field is changed. (Intake Only)</p>				
<b>Updates</b>	<table><tr><td>8/1/03</td><td>Field added.</td></tr></table>	8/1/03	Field added.		
8/1/03	Field added.				
<b>Example</b>	<p>A client identifies himself as being a member of the Navajo Nation and an African American. <b>Enter Y.</b></p>				

---

## 15 - OMB-Native Hawaiian

**Description** (At intake only) The client's racial background. Is client Native Hawaiian or Pacific Islander?

Clients should be offered the option of selecting **one or more** racial designations. Self-identification is the preferred means of obtaining information about a client's race.

**Valid Values**

Y	Yes
N	No

**Special Considerations** A valid value of Y must be entered in at least one of the following fields: 12, 13, 14, 15 or 16. Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

**Updates** 8/1/03 Field added.

**Example** A client identifies himself as being a member of the Navajo Nation and an African American. Enter N.

## 16 - OMB-White

**Description** (At intake only) The client's racial background. Is client White?

Clients should be offered the option of selecting **one or more** racial designations. Self-identification is the preferred means of obtaining information about a client's race.

**Valid Values**

Y	Yes
N	No

**Special Considerations** A valid value of Y must be entered in at least one of the following fields: 12, 13, 14, 15 or 16. Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

**Updates** 8/1/03 Field added.

**Example** A client identifies himself as being a member of the Navajo Nation and an African American. Enter N.

## 17 - OMB-Hispanic-Latino

---

<b>Description</b>	<b>(At intake only)</b> The client's ethnic background. Is client Hispanic or Latino?  Self-identification is the preferred means of obtaining information about a client's ethnicity.
<b>Valid Values</b>	Y    Yes N    No
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed. (Intake Only)
<b>Updates</b>	8/1/03    Field added.
<b>Example</b>	A client identifies his ethnicity as Hispanic. <b>Enter Y.</b>

---

## 18 - PC-Self-Harm

---

<b>Description</b>	<b>(At intake only)</b> Describes the client's <u>presenting concerns or issues</u> upon initial intake. The client may identify as many presenting concerns as applicable. Is the client at risk of injury to her/himself upon <b>initial intake</b> ?
<b>Valid Values</b>	Y    Yes N    No
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed. (Intake Only)
<b>Updates</b>	8/1/03    Field added.
<b>Example</b>	A client indicates that she feels like harming herself. <b>Enter Y.</b>

---

## 19 - PC-Danger to Others

---

**Description**      **(At intake only)** Describes the client’s presenting concerns or issues upon initial intake. The client may identify as many presenting concerns as applicable. Is the client assaultive or Danger To Others (DTO) upon **initial intake**?

---

**Valid Values**      Y      Yes  
                             N      No

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

---

**Updates**              8/1/03      Field added.

---

**Example**              A client indicates that he may harm another person. **Enter Y.**

---

## 20 - Victim ANV

---

**Description**      **(At intake only)** Describes the client’s presenting concerns or issues **upon initial intake**. The client may identify as many presenting concerns as applicable. Is the client a victim of abuse, neglect, or violence **upon initial intake**?

---

**Valid Values**      Y      Yes  
                             N      No

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

---

**Updates**              8/1/03      Field added.

---

**Example**              A client indicates that she has been abused. **Enter Y.**

---

## 21 - PC-Anxiety-Stress

---

**Description**      **(At intake only)** Describes the client’s presenting concerns or issues upon initial intake. The client may identify as many presenting concerns as applicable. Is the client experiencing anxiety or stress upon **initial intake**?

---

**Valid Values**      Y      Yes  
                             N      No

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

---

**Updates**              8/1/03      Field added.

---

**Example**              A client indicates he is very stressed. **Enter Y.**

---

## 22 - PC-Depressed

---

**Description**      **(At intake only)** Describes the client’s presenting concerns or issues upon initial intake. The client may identify as many presenting concerns as applicable. Does the client have a depressed mood or report depression upon **initial intake**?

---

**Valid Values**      Y      Yes  
                             N      No

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

---

**Updates**              8/1/03      Field added.

---

**Example**              A client indicates that he is depressed. **Enter Y.**

---

## 23 - PC-Psychotic

---

**Description** (At intake only) Describes the client's presenting concerns or issues **upon initial intake**. The client may identify as many presenting concerns as applicable. Is the client psychotic (experiencing impaired reality, thought disorganization) upon **initial intake**?

---

**Valid Values**

Y	Yes
N	No

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

---

**Updates** 8/1/03 Field added.

---

**Example** A client's symptoms indicate that he is psychotic. **Enter Y.**

---

## 24 - PC-Substance Abuse

---

**Description** (At intake only) Describes the client's presenting concerns or issues **upon initial intake**. The client may identify as many presenting concerns as applicable. Is the client intoxicated or reporting a SA problem upon **initial intake**?

---

**Valid Values**

Y	Yes
N	No

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

If "Y" (Yes) used, then,

- One or more of the SA (Substance Abuse) groups must be completed.
    - SA-Primary (fields 72-75)
    - SA-Secondary (fields 76-79)
    - SA-Tertiary (fields 97-100)
- 

**Updates** 8/1/03 Field added.

---

**Example** A client indicates that she is abusing alcohol. **Enter Y.**

---

## 25 - PC-Unable to Care

---

<b>Description</b>	<b>Age 5 and older Only (At intake only)</b> Describes the client's presenting concerns or issues <b>upon initial intake</b> . The client may identify as many presenting concerns as applicable. Is the client <u>unable to care for himself/herself</u> (e.g., dehydrated, malnourished, malodorous) upon <b>initial intake</b> ?
<b>Valid Values</b>	Y    Yes N    No X    Not Applicable due to age
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed. (Intake Only)
<b>Updates</b>	8/1/03    Field added. 1/16/07    Added valid value "X - Not applicable due to age" because this field has been defined for ages 5 and Older.
<b>Example</b>	Upon assessment, the client is unable to care for himself. <b>Enter Y.</b>

---

## 26 - PC-Relational

---

<b>Description</b>	<b>(At intake only)</b> Describes the client's presenting concerns or issues <b>upon initial intake</b> . The client may identify as many presenting concerns as applicable. Is the client having a family relational problem upon <b>initial intake</b> ?
<b>Valid Values</b>	Y    Yes N    No
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed. (Intake Only)
<b>Updates</b>	8/1/03    Field added.
<b>Example</b>	A client indicates that she is having problems with her family. <b>Enter Y.</b>

---

## 27 - PC-Child Behavior

---

**Description**      **Age 0 thru 17 only (At intake only)** Describes the client's presenting concerns or issues **upon initial intake**. The client may identify as many presenting concerns as applicable. Is the client, age 0 thru 17, having behavioral problems upon **initial intake**?

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

---

**Updates**

8/1/03	Field added.
1/16/07	Added valid value "X - Not applicable due to age" because this field has been defined for ages 0 thru 17.

---

**Example**      A client, age 0 thru 17, indicates that he is having behavioral problems. **Enter Y.**

---

## 28 - PC-Other

---

**Description**      **(At intake only)** Describes the client's presenting concerns or issues **upon initial intake**. The client may identify as many presenting concerns as applicable. Is the client having problems other than those listed in field numbers 18-27 upon **initial intake**?

---

**Valid Values**

Y	Yes
N	No

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed. (Intake Only)

---

**Updates**

8/1/03	Field added.
--------	--------------

---

**Example**      A client indicates that she is having transgender issues. **Enter Y.**

---

## 29 - Assessment Date

---

**Description** Refers to the date in which the most recent assessment is completed.

---

**Valid Values** YYYYMMDD Format

---

**Special Considerations** Date must occur during intake segment.

---

**Updates** 7/1/08 Field replaces Descriptive Characteristics Effective Date

---

**Example** Date is recorded as the 4 digit year, 2 digit month and 2 digit day. An assessment (Initial or Update) is completed on March 26, 2008. **Enter 20080326.**

---

## 30 - Household Size

---

<b>Description</b>	Refers to the total number of people, <u>including the client</u> , who belong to the client's family household. Family household consist of the client, partner, parents of a minor child, child, step child / adoptive child, child's children, child's partner, related child living in the home, child age 19-21 who is a student.
<b>Valid Values</b>	01 – 99
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed.
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	A client's household includes a partner and two children. <b>Enter 04</b>

---

## 31 - Household Income

---

<b>Description</b>	Refers to the <u>gross monthly</u> family income. Family household consists of the income of immediate family members, i.e. spouse, to spouse, parent to child or adoptive child but not step parent to stepchild or grandparent to grandchild. Do not count earned income of students less than 19 years of age.
<b>Valid Values</b>	000000 - 999999
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed.
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	A client earns \$300 per month and the client's spouse earns \$235 per month. <b>Enter 000535</b>

---

## 32 - Treatment Participation

<b>Description</b>	<p>Refers to the presence of a court order or conditions of parole/probation surrounding the Behavioral Health services.</p> <p><b>Voluntary</b> participation is when a client (or a parent/guardian, if applicable) is applying for or receiving services voluntarily.</p> <p><b>Involuntary – Criminal; DUI/condition of parole/probation</b> is when a client applies for/receives services as a result of criminal court ordered treatment OR when a client applies for/receives services as a result of a court ordered DUI screening, education or treatment.</p> <p><b>Involuntary - Civil/MH Court Order / Drug Court Order</b> is when a client applies for/receives services as a result of Title 36 proceedings for a court ordered evaluation (COE) or treatment (COT).</p>
<b>Valid Values</b>	<p>V Voluntary</p> <p>C Involuntary – Criminal; DUI or conditions of parole/probation</p> <p>N Involuntary – Civil: MH court order, Drug court...</p>
<b>Special Considerations</b>	<p>Field 29-Assessment Date must be updated when this field is changed.</p>
<b>Updates</b>	<p>8/1/03 Field added.</p> <p>7/1/05 Values "1- Voluntary", "6-Civil or MH Court Order", "7-DUI Court Order", and "8-Criminal Court Order" will become <b>invalid</b> for dates of service after 8/31/05 Values V,C,N will become <b>valid</b> for dates of service after 7/1/05</p>
<b>Example</b>	<p>A client has undergone a court ordered evaluation (COE) through the civil commitment process. <b>Enter N</b></p>

### 33 - OA ADC or Parole

---

**Description**      **Age 18 & older Only.** Refers to other agencies with a current and/or ongoing role with the client. Is the client, age 18 and older, involved with the Arizona Department of Corrections (ADC) or on parole?

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

---

**Updates**

8/1/03	Field added.
1/16/07	Added valid value "X – Not applicable due to age" because this field has been defined for ages 18 & Older.

---

**Example**      The client is currently on parole from ADC. **Enter Y.**

---

### 34 - OA ADJC Parole

---

**Description**      **Age 0 thru 17 Only.** Refers to other agencies with a current and/or ongoing role with the client. Is the client, age 0 thru 17, involved with the Arizona Department of Juvenile Corrections (ADJC)?

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

---

**Updates**

8/1/03	Field added.
1/16/07	Added valid value "X – Not applicable due to age" because this field has been defined for ages 0 thru 17.

---

**Example**      The client is currently involved with ADJC. **Enter Y.**

---

## 35 - OA ADHS CRS

---

**Description**      **Age 0 thru 17 Only.** Refers to other agencies with a current and/or ongoing role with the client. Is the client, age 0 thru 17, involved with the Arizona Department of Health Services (ADHS)/ Children’s Rehabilitative Services (CRS)? CRS provides family-centered medical treatment, rehabilitation and related support services to enrolled individuals who have certain medical, handicapping or potentially disabling conditions.

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

---

**Updates**

8/1/03	Field added.
1/16/07	Added valid value “X – Not applicable due to age” because this field has been defined for ages 0 thru 17.

---

**Example**      The client is currently involved with ADHS/CRS. **Enter Y.**

---

## 36 - OA AOC Adult Probation

---

**Description**      **Age 18 & older Only.** Refers to other agencies with a current and/or ongoing role with the client. Is the client, age 18 & older, on adult probation through the Administrative Office of the Courts (AOC)?

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

---

**Updates**

8/1/03	Field added.
1/16/07	Added valid value “X – Not applicable due to age” because this field has been defined for ages 18 & Older.

---

**Example**      The client, age 18 & older, is currently on adult probation through AOC. **Enter Y.**

---

37 -  
**OA AOC Juvenile Probation**

---

**Description**      **Age 0 thru 17 Only.** Refers to other agencies with a current and/or ongoing role with the client. Is the client, age 0 thru 17, in juvenile probation through the Administrative Office of the Courts (AOC)?

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

---

**Updates**

8/1/03	Field added.
1/16/07	Added valid value "X – Not applicable due to age" because this field has been defined for ages 0 thru 17.

---

**Example**      The client is currently on juvenile probation through AOC. **Enter Y.**

---

38 -  
**OA DES CPS**

---

**Description**      Refers to other agencies with a current and/or ongoing role with the client. Is the client involved with the Department of Economic Security (DES)/ Child Protective Services (CPS)?

---

**Valid Values**

Y	Yes
N	No

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

---

**Updates**

8/1/03	Field added.
--------	--------------

---

**Example**      DES/CPS has removed a client from his parent's home. **Enter Y.**

---

39 -  
OA DES DDD

---

**Description** Refers to other agencies with a current and/or ongoing role with the client. Is the client enrolled with the Department of Economic Security (DES)/ Division of Developmental Disabilities (DDD)?

---

**Valid Values** Y Yes  
N No

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

---

**Updates** 8/1/03 Field added.

---

**Example** The client is currently enrolled with DES/DDD. **Enter Y.**

---

40 -  
OA DES RSA

---

**Description** Refers to other agencies with a current and/or ongoing role with the client. Is the client involved with the Department of Economic Security (DES)/ Rehabilitative Services Administration (RSA)?

---

**Valid Values** Y Yes  
N No

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

---

**Updates** 8/1/03 Field added.

---

**Example** The client is currently involved with DES/RSA. **Enter Y.**

---

42 -  
OA School Special Ed

---

**Description** Refers to other agencies with a current and/or ongoing role with the client. Is the client involved with a special education program at his/her school?

---

**Valid Values** Y Yes  
N No

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

---

**Updates** 8/1/03 Field added.

---

**Example** The client is currently taking special education classes at school. **Enter Y.**

---

43 -  
OA Other

---

**Description** Refers to other agencies with a current and/or ongoing role with the client. Is the client involved with an agency other than those described in fields 33-40, 42?

---

**Valid Values** Y Yes  
N No

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

---

**Updates** 8/1/03 Field added.

---

**Example** The client is not involved in any other agencies. **Enter N.**

---

## 45 - Formal Schooling Level

**Description** Refers to the current or highest level of formal (school) education completed.

<b>Valid Values</b>	1	Less than one year	A	Grades K – 3
	3	High school graduate or GED	B	Grades 4 – 6
	4	Vocational/Technical school	C	Grades 7 – 8
	5	Some college, no degree	D	Grades 9 – 12
	6	AA/BA degree		
	7	Graduate or post-graduate		
	8	Unknown ( <b>ages 0 thru 4 only</b> )		

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

If a client, age 0 thru 4, is in school...

- Use valid value "A."
- Otherwise, use valid value "8."

All valid values except "8" can be used for clients' age 5 & Older.

**Updates**

8/1/03	Field added.
7/1/05	(1)Removed value "2-Grades K to 11" not valid after date of service 8/31/05; (2)Added values (A-D) A: K-3, B: 4-6, C: 7-8, D: 9-12
1/16/07	Rule added: Value "8-Unkown" valid for age 0 thru 4 only. If applicable, value "A-Grades K – 3" can be used for age 0 thru 4.

**Example** The client, age 17, is currently in 12<sup>th</sup> grade, but has not graduated from high school. **Enter D.**  
OR  
The client, age 5, is currently in Kindergarten. **Enter A.**

## 46 - SP COOL

---

**Description**      **Age 18 & Older Only.** Identifies clients receiving behavioral health services through the Correctional Officer Offender Liaison (COOL) program. Is the client, 18 & older, receiving services through the COOL program? Adults referred by ADOC & enrolled in adult SA **category G** (Behavioral Health Category).

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**

Field 29-Assessment Date must be updated when this field is changed.

If value "Y" is used, then...

- OA ADC Parole (field 33) must be "Y."
- Behavioral Health Category (field 65) must be "G."

---

**Updates**

8/1/03	Field added.
1/16/07	Added valid value "X - Not applicable due to age" because this field has been defined for ages 18 & Older.

---

**Example**      The client, age 18, is currently receiving services through the COOL program. **Enter Y.**

---

---

## 49 - SP Pregnancy

---

<b>Description</b>	<b>Female Only.</b> Identifies clients who are pregnant or post-partum?
<b>Valid Values</b>	Y    Yes N    No X    Not applicable due to gender
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed.  For the purposes of this field, a client may only be considered post-partum up to 6 months from the day of the client's delivery.
<b>Updates</b>	8/1/03    Field added. 1/16/07    Valid value added "X-Not applicable due to gender.
<b>Example</b>	The client is currently pregnant. <b>Enter Y.</b>

---

## 50 - SP Woman DC

---

<b>Description</b>	<b>Female Only.</b> Identifies clients who have dependent child(ren). Includes children that have been removed and are in the custody of CPS.
<b>Valid Values</b>	Y    Yes N    No X    Not applicable due to gender
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed.
<b>Updates</b>	8/1/03    Field added. 1/16/07    Valid value added "X-Not applicable due to gender.
<b>Example</b>	The client is a woman with a dependent child or children. <b>Enter Y.</b>

---

## 51a - SP Priority SMI

---

**Description**      **Age 18 & older & Maricopa Only.** Identifies clients, age 18 and older, who are part of the Maricopa County seriously mentally ill priority population consistent with the Arnold v. Sarn exit stipulation criteria.

Priority Population – class members currently in the system who since July 1, 1993 are or have been:

- a resident of the Arizona State Hospital;
- a resident of a supervisory care home;
- a resident of a twenty-four resident program;
- an inmate in a jail who has a major biological mental illness; or
- hospitalized for mental illness twice or more in a year or a frequent recipient of crisis services.

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age or GSA

---

**Special Considerations**

Field 29-Assessment Date must be updated when this field is changed.

This field is only completed for clients who are enrolled in the RBHA that serves Maricopa County (GSA 6) and who have been determined to be part of the seriously mentally ill priority population consistent with the Arnold v. Sarn exit stipulation criteria.

Valid value "Y" will only be accepted if Behavioral Health Category (field 65) has a valid value of "S."

---

**Updates**

8/1/03	Field added.
9/1/05	Field identified for a specialty purpose (see special considerations)
1/16/07	Valid value added "X-Not applicable due to GSA" for GSAs not serving Maricopa County and applied age group 18 & older.

---

**Example**

A client has been determined to be part of the seriously mentally ill priority population consistent with the Arnold v. Sarn exit stipulation criteria and is enrolled with the RBHA that serves Maricopa County. **Enter Y.**

---

**52 -  
AXIS III-1**

**Description**            AXIS III-1 thru AXIS III-5 (fields 52-56) refers to the client's current general medical conditions that are potentially relevant to the understanding and management of a client's behavioral health disorder. Up to 5 medical conditions may be reported. The medical condition classification is consistent with the broad medical condition classification in DSM IV AXIS III.

**Valid Values**

<b>Effective 9/1/07</b>	20	Congestive Heart Failure	36	Fluid Electrolyte Disorders
	21	Cardiac Arrhythmias	37	Obesity
	22	Myocardial Infarction	38	Weight Loss
	23	Cardiomyopathy	39	Renal Disease
	24	Valvular Disease	40	Renal Failure
	25	Cerebrovascular Disease	41	Liver Disease
	26	Peripheral Vascular Disorders	42	Inflammatory Bowel Disease
	27	Atherosclerosis	43	Peptic Ulcer Disease
	28	Hypertension	44	Solid Tumor without Metastasis
	29	Pulmonary Circulation Disorders	45	Lymphoma/Leukemia
	30	Chronic Pulmonary disease	46	Metastatic Cancer
	31	Paralysis	47	AIDS/HIV
	32	Other Neurological Disorders	52	Osteoarthritis
	33	Diabetes Melitus	53	Coagulopathy
34	Hypothyroidism	54	Rheumatological /Collagen Disease	
35	Other Endocrine Disorders	55	Anemia	

<b>Effective 10/1/07</b>	56	Deaf/Hard of Hearing	57	Blind
--------------------------	----	----------------------	----	-------

<b>Effective 1/26/09</b>	58	Prematurity	67	Intrauterine Growth Restriction
	59	Intrauterine Drug/Alcohol Exposure	68	Birth Deformities
	60	Genetic Disorders: specify	69	Colic
	61	Orthopedic Disorders: specify	70	Unexplained Crying
	62	Feeding Problems: specify	71	Traumatic Injuries
	63	Ingestion of Poisonous/toxic substances	72	Chronic Ear Infections
	64	Low Birth Weight	73	Perinatal/Postnatal Complications
	65	Fetal Alcohol Syndrome/Effects	74	No Known Medical History
	66	Shaken Baby Syndrome		

**Special Considerations**

Field 29-Assessment Date must be updated when this field is changed.

If valid value "74" is used in Axis III-1, then...

- Axis III-2 through Axis III-5 must be "74"

If a valid value other than "74" is used,

- it may not be repeated in any other AXIS III field (used only once)
- And, when multiple medical conditions exist Axis III-1 thru III-5 must be populated in sequence (III-1, III-2, III-3, etc. NOT out of order).

<b>Updates</b>	8/1/03	Field added.
<b>Updates Cont.</b>	11/1/07	Added Valid AXISIII values
	1/26/09	Added Valid AXISIII values

**Example** The client has a renal disease and has anemia.  
**Enter 39. (Enter 55 on AXIS III-2.)**

---

## 53 - AXIS III-2

---

**Description** AXIS III-1 thru AXIS III-5 (fields 52-56) refers to the client's current general medical conditions that are potentially relevant to the understanding and management of a client's behavioral health disorder. Up to 5 medical conditions may be reported. The medical condition classification is consistent with the broad medical condition classification in DSM IV AXIS III.

---

**Valid Values** Reference the "Valid Values" in [AXIS III-1](#)

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

If valid value "74" is used in Axis III-1, then...

- Axis III-2 through Axis III-5 must be "74"

If a valid value other than "74" is used,

- it may not be repeated in any other AXIS III field (used only once)
  - And, when multiple medical conditions exist Axis III-1 thru III-5 must be populated in sequence (III-1, III-2, III-3, etc. NOT out of order).
- 

**Updates** 8/1/03 Field added.

---

**Example** The client has a disease of the digestive system, and has an injury.  
**Enter 16. (08 was entered on AXIS III-1).**

---

## 54 - AXIS III-3

---

**Description**      AXIS III-1 thru AXIS III-5 (fields 52-56) refers to the client's current general medical conditions that are potentially relevant to the understanding and management of a client's behavioral health disorder. Up to 5 medical conditions may be reported. The medical condition classification is consistent with the broad medical condition classification in DSM IV AXIS III.

---

**Valid Values**      Reference the "Valid Values" in [AXIS III-1](#)

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

If valid value "74" is used in Axis III-1, then...

- Axis III-2 through Axis III-5 must be "74"

If a valid value other than "74" is used,

- it may not be repeated in any other AXIS III field (used only once)
- And, when multiple medical conditions exist Axis III-1 thru III-5 must be populated in sequence (III-1, III-2, III-3, etc. NOT out of order).

---

**Updates**      8/1/03      Field added.

---

**Example**      The client has a disease of the digestive system, and has an injury.  
**Enter 74. (08 was entered for AXIS III-1 and 16 was entered for AXIS III-2.)**

---



## 56 - AXIS III-5

---

**Description**      AXIS III-1 thru AXIS III-5 (fields 52-56) refers to the client's current general medical conditions that are potentially relevant to the understanding and management of a client's behavioral health disorder. Up to 5 medical conditions may be reported. The medical condition classification is consistent with the broad medical condition classification in DSM IV AXIS III.

---

**Valid Values**      Reference the "Valid Values" in [AXIS III-1](#)

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

If valid value "74" is used in Axis III-1, then...

- Axis III-2 through Axis III-5 must be "74"

If a valid value other than "74" is used,

- it may not be repeated in any other AXIS III field (used only once)
- And, when multiple medical conditions exist Axis III-1 thru III-5 must be populated in sequence (III-1, III-2, III-3, etc. NOT out of order).

---

**Updates**      8/1/03      Field added.

---

**Example**      The client has a disease of the digestive system, and has an injury.  
**Enter 74. (08 was entered for AXIS III-1 and 16 was entered for AXIS III-2).**

---

## 57 – Effective Date

---

<b>Description</b>	Refers to the effective date of any addition or change to a demographic field.
<b>Valid Values</b>	YYYYMMDD Format
<b>Special Considerations</b>	Date must be within the range of the intake.
<b>Updates</b>	7/1/08      Field replaces Outcome Measures Effective Date
<b>Example</b>	Date is recorded as the 4 digit year, 2 digit month and 2 digit day. A client earns a high school degree on March 26, 2008, requiring a change in Field 45, Formal Schooling Level. <b>Enter 20080326</b>

---

## 58 - AXIS I-1

---

**Description**

Refers to all disorders or conditions in the DSM IV Classification that may be a focus of clinical attention except for the Personality Disorders and Mental Retardation (which are reported on AXIS II).

When an individual has more than one AXIS I disorder, all must be reported (up to 5) using fields 58-62.

---

**Valid Values**

Valid DSM IV Codes

---

**Special Considerations**

Field 29-Assessment Date must be updated when this field is changed.

If valid value V71.09 is used in Axis I-1, then...

- Axis I-2 through Axis I-5 must be "NONE" and
- Axis II-1 (field #63) must have a valid diagnosis other than V71.09

If a valid value other than V71.09 is used,

- it may NOT be repeated in any other AXIS I field (used only once)
- And, when entering multiple disorders Axis I-1 thru I-5 must be populated in sequence (I-1, I-2, I-3, etc. NOT out of order).

799.9 is NOT allowed for any AXIS I or II field.

Value V71.09 is not allowed in Axis I-2 through Axis I-5.

---

**Updates**

8/1/03      Field added.

---

**Example**

The client's disorder has been classified as follows: Simple Type Schizophrenic Disorder, chronic (295.02); Major Depressive Disorder, Recurrent Episode, Moderate (296.32); Acute Alcoholic Intoxication, Continuous (303.01).

**Enter 295.02. (296.32 will be entered for AXIS I-2 and 303.01 will be entered for AXIS I-3.)**

---

## 59 - AXIS I-2

---

<b>Description</b>	Refers to all disorders or conditions in the DSM IV Classification that may be a focus of clinical attention except for the Personality Disorders and Mental Retardation (which are reported on AXIS II).
<b>Valid Values</b>	Valid DSM IV Codes NONE      Not collected, not applicable
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed.  If valid value V71.09 is used in Axis I-1, then... <ul style="list-style-type: none"><li>• Axis I-2 through Axis I-5 must be "NONE" and</li><li>• Axis II-1 (field #63) must have a valid diagnosis other than V71.09</li></ul> If a valid value other than NONE is used, <ul style="list-style-type: none"><li>• it may NOT be repeated in any other AXIS I field (used only once)</li><li>• And, when entering multiple disorders Axis I-1 thru I-5 must be populated in sequence (I-1, I-2, I-3, etc. NOT out of order).</li></ul> 799.9 is NOT allowed for any AXIS I or II field. Value V71.09 is not allowed in Axis I-2 through Axis I-5.
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	The client's disorder has been classified as follows: Simple Type Schizophrenic Disorder, chronic (295.02); Major Depressive Disorder, Recurrent Episode, Moderate (296.32); Acute Alcoholic Intoxication, Continuous (303.01). <b>Enter 296.32. (295.02 was entered for AXIS I-1 and 303.01 will be entered for AXIS I-3.)</b>

---

## 60 - **AXIS I-3**

---

**Description** Refers to all disorders or conditions in the DSM IV Classification that may be a focus of clinical attention except for the Personality Disorders and Mental Retardation (which are reported on AXIS II). All AXIS I data fields must be completed within 45 days of intake.

---

**Valid Values** Valid DSM IV Codes  
NONE Not collected, not applicable

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

If valid value V71.09 is used in Axis I-1, then...

- Axis I-2 through Axis I-5 must be "NONE" and
- Axis II-1 (field #63) must have a valid diagnosis other than V71.09

If a valid value other than NONE is used,

- it may NOT be repeated in any other AXIS I field (used only once)
- And, when entering multiple disorders Axis I-1 thru I-5 must be populated in sequence (I-1, I-2, I-3, etc. NOT out of order).

799.9 is NOT allowed for any AXIS I or II field.  
Value V71.09 is not allowed in Axis I-2 through Axis I-5.

---

**Updates** 8/1/03 Field added.

---

**Example** The client's disorder has been classified as follows: Simple Type Schizophrenic Disorder, chronic (295.02); Major Depressive Disorder, Recurrent Episode, Moderate (296.32); Acute Alcoholic Intoxication, Continuous (303.01).  
**Enter 303.01. (295.02 was entered for AXIS I-1 and 296.32 was entered for AXIS I-2).**

---

## 61 - **AXIS I-4**

---

**Description** Refers to all disorders or conditions in the DSM IV Classification that may be a focus of clinical attention except for the Personality Disorders and Mental Retardation (which are reported on AXIS II).

---

**Valid Values** Valid DSM IV Codes  
NONE Not collected, not applicable

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

If valid value V71.09 is used in Axis I-1, then...

- Axis I-2 through Axis I-5 must be "NONE" and
- Axis II-1 (field #63) must have a valid diagnosis other than V71.09

If a valid value other than NONE is used,

- it may NOT be repeated in any other AXIS I field (used only once)
- And, when entering multiple disorders Axis I-1 thru I-5 must be populated in sequence (I-1, I-2, I-3, etc. NOT out of order).

799.9 is NOT allowed for any AXIS I or II field.  
Value V71.09 is not allowed in Axis I-2 through Axis I-5.

---

**Updates** 8/1/03 Field added.

---

**Example** The client's disorder has been classified as follows: Simple Type Schizophrenic Disorder, chronic (295.02); Major Depressive Disorder, Recurrent Episode, Moderate (296.32); Acute Alcoholic Intoxication, Continuous (303.01). **Enter None. (295.02 was entered for AXIS I-1; 296.32 was entered for AXIS I-2; and 303.01 was entered for AXIS I-3.)**

---

## 62 - AXIS I-5

---

<b>Description</b>	Refers to all disorders or conditions in the DSM IV Classification that may be a focus of clinical attention except for the Personality Disorders and Mental Retardation (which are reported on AXIS II).
<b>Valid Values</b>	Valid DSM IV Codes NONE      Not collected, not applicable
<b>Special Considerations</b>	Field 29-Assessment Date must be updated when this field is changed.  If valid value V71.09 is used in Axis I-1, then... <ul style="list-style-type: none"><li>• Axis I-2 through Axis I-5 must be "NONE" and</li><li>• Axis II-1 (field #63) must have a valid diagnosis other than V71.09</li></ul> If a valid value other than NONE is used, <ul style="list-style-type: none"><li>• it may NOT be repeated in any other AXIS I field (used only once)</li><li>• And, when entering multiple disorders Axis I-1 thru I-5 must be populated in sequence (I-1, I-2, I-3, etc. NOT out of order).</li></ul> 799.9 is NOT allowed for any AXIS I or II field. Value V71.09 is not allowed in Axis I-2 through Axis I-5.
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	The client's disorder has been classified as follows: Simple Type Schizophrenic Disorder, chronic (295.02); Major Depressive Disorder, Recurrent Episode, Moderate (296.32); Acute Alcoholic Intoxication, Continuous (303.01). <b>Enter None. (295.02 was entered for AXIS I-1; 296.32 was entered for AXIS I-2; and 303.01 was entered for AXIS I-3.)</b>

---

## 63 - AXIS II-1

---

**Description** Refers to Developmental and Personality Disorders. May also be used for noting prominent maladaptive personality features and defense mechanisms.

All AXIS II diagnoses (up to 2) must be reported in fields 63 thru 64.

---

**Valid Values** Valid DSM IV Codes

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

If valid value V71.09 is used in Axis II-1, then...

- Axis II-2 must be "NONE" and
- Axis I-1 (field #58) must have a valid diagnosis other than V71.09.

If a valid value other than V71.09 is used,

- it may NOT be repeated in any other AXIS II field (used only once)
- And, when entering multiple disorders Axis II-1 must be populated before AXIS-II-2.

799.9 is NOT allowed for any AXIS I or II field.

Value V71.09 is not allowed in Axis II-2.

---

**Updates** 8/1/03 Field added.

---

**Example** The client's AXIS II disorder has been classified as Narcissistic Personality Disorder (301.81).  
**Enter 301.81.**

---

## 64 - AXIS II-2

---

**Description** Refers to Developmental and Personality Disorders. May also be used for noting prominent maladaptive personality features and defense mechanisms.

---

**Valid Values** Valid DSM IV Codes  
NONE Not collected, not applicable

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

If valid value V71.09 is used in Axis II-1, then...

- Axis II-2 must be "NONE" and
- Axis I-1 (field #58) must have a valid diagnosis other than V71.09.

If a valid value other than NONE is used,

- it may NOT be repeated in any other AXIS II field (used only once)
- And, when entering multiple disorders Axis II-1 must be populated before AXIS-II-2.

799.9 is NOT allowed for any AXIS I or II field.  
Value V71.09 is not allowed in Axis II-2.

---

**Updates** 8/1/03 Field added.

---

**Example** The client's disorder has been classified as Narcissistic Personality Disorder (301.81).  
**Enter None. 301.81 has been entered for AXIS II-1.**

---

## 65 - Behavioral Health Category

<b>Description</b>	Identifies the behavioral health category on the basis of age, diagnosis and, when applicable, functional status.
<b>Valid Values</b>	<p><b>Only valid for ages 0 thru 17:</b></p> <p>C Child Z Child, Seriously Emotionally Disturbed (SED).</p> <p><b>Only valid for ages 18 &amp; Older:</b></p> <p>S Adult, with serious mental illness M Adult, non-seriously mentally ill, with general mental health need G Adult, non-seriously mentally ill, Substance abuse, either alcohol or drug</p>
<b>Special Considerations</b>	<p>Field 29-Assessment Date must be updated when this field is changed.</p> <p>When selecting valid value "C," the determination is first based on age (0 thru 17) and secondly on the <b>absence of</b> an SED qualifying diagnosis on AXIS I-1, AXIS I-2, AXIS I-3, AXIS I-4, AXIS I-5 (fields 58-62), AXIS II-1 or AXIS II-2 (fields 63-64). See <a href="#">PM Attachment 7.5.3 SMI and SED Qualifying Diagnoses Table</a> for a listing of qualifying SED diagnoses.</p> <p>When selecting valid value "Z," the determination is first based on age (0 thru 17) and secondly on the <b>presence of</b> an SED qualifying diagnosis on AXIS I-1, AXIS I-2, AXIS I-3, AXIS I-4, AXIS I-5 (fields 58-62), AXIS II-1 or AXIS II-2 (fields 63-64). See <a href="#">PM Attachment 7.5.3 SMI and SED Qualifying Diagnoses Table</a> for a listing of qualifying SED diagnoses. Additional information on SED can be found online at <a href="http://www.azdhs.gov/bhs/children/sed.pdf">http://www.azdhs.gov/bhs/children/sed.pdf</a>.</p> <p>When selecting valid value "S," the determination is based on age (18 &amp; Older) and secondly in accordance with <a href="#">ADHS/DBHS Provider Manual Section 3.10, SMI Eligibility Determination</a>. See <a href="#">PM Attachment 7.5.3 SMI and SED Qualifying Diagnoses Table</a> for a listing of qualifying SMI diagnoses.</p> <p>When selecting valid value "G," the determination is based on age (18 &amp; Older) and secondly upon the <b>presence of</b> a qualifying AXIS I-1, AXIS I-2, AXIS I-3, AXIS I-4, AXIS I-5 for substance use disorder (field 58) diagnosis. See <a href="#">PM Attachment 7.5.4 Substance Abuse Disorders Qualifying Diagnoses Table</a> for qualifying SA diagnoses.</p> <p>When selecting valid value "M," the determination is based on age (18 &amp; Older) and secondly upon the <b>presence of</b> a primary diagnosis on AXIS I-1, AXIS I-2, AXIS I-3, AXIS I-4, AXIS I-5 (fields 58-62) or AXIS II-1 or AXIS II-2 (fields 63 and 64).</p>
<b>Updates</b>	8/1/03 Field added.
<b>Example</b>	The client is an adult (18 & Older) who has been determined to have a serious mental illness in accordance with <a href="#">ADHS/DBHS Provider Manual Section 3.10, SMI Eligibility Determination</a> . <b>Enter S.</b>

**Description**

The client's current employment status.

**Competitively Employed Full Time (both with and without support)**

Refers to work performed in an integrated community setting on a full time basis (35 or more hours per week) for which an individual is compensated in accordance with the Fair Labor Standards Act; or person is in military service. Criteria for competitive employment must include the following three components: pay at minimum wage or higher, a job located in a mainstream integrated setting, and a job that was not set aside for mental health consumers. This category may also include individuals who are employed as Peer Support Specialists / Recovery Support Specialists. Employment may be *with or without* interventions, assistance or supports typically provided by staff of a vocational or other rehabilitation program. The individual may have obtained the job with the assistance of a vocational program *or* on their own.

**Competitively Employed Part Time (both with and without support)**

Refers to work performed in an integrated community setting on a part time basis (less than 35 hours per week) for which an individual is compensated in accordance with the Fair Labor Standards Act; or person is in military service. Criteria for competitive employment must include the following three components: pay at minimum wage or higher, a job located in a mainstream integrated setting, and a job that was not set aside for mental health consumers. This category may also include individuals who are employed as Peer Support Specialists / Recovery Support Specialists. Employment may be *with or without* interventions, assistance or supports typically provided by staff of a vocational or other rehabilitation program. The individual may have obtained the job with the assistance of a vocational program *or* on their own.

**Work Adjustment Training**

Facility or community based paid training program that teaches the meaning, value and demands of work. Individuals perform paid work activities and are accompanied by a job coach. These paid work activities are geared towards assisting the individual in gaining work experience and developing the soft skills needed to obtain competitive employment. Participation in work adjustment training programs should preferably be time-limited, with a long term goal of obtaining competitive employment. Participation in a work adjustment training program is set aside for mental health consumers and/or other participants of a rehabilitation program.

**Transitional Employment Placement**

Temporary employment placements secured by a vocational agency (such as a Fountain House model clubhouse program) and set aside for mental health consumers. Employment is paid and is in an integrated / mainstream business setting. Individuals are actual employees of the company, not of the clubhouse. Individuals are paid at least minimum wage, and preferably the prevailing rate received by regular company employees for the same job. Placement work is done in the company's place of business, never in the clubhouse.

**Unemployed**

Not currently employed, but looking for work in the past 30 days or on layoff from a job.

**Disabled**

Not currently employed or looking for work. Not involved in any other rehabilitation activity. Use this category only if the individual does not fit in any other category.

**Student**

If an individual is currently in school and not involved in any other work activity, they shall be categorized as "student". If an individual is in school, but also competitively employed or involved in Transitional Employment or Work Adjustment Training, they shall be categorized in the appropriate employment category.

### Unpaid Rehabilitation Activity

This may include individuals engaging in any rehabilitation activity not already specified in one of the other categories, such as: work exploration, pre-vocational skill building groups and activities, community activities such as church groups, social skill building activities, mobility training, adjustment to disability training, etc.

---

<b>Valid Values</b>	01	Employed full-time without support (End-Date 01/25/2009)	20	Student
	02	Employed part-time without support (End-Date 01/25/2009)	21	Retired
	03	Employed full-time with support (End-Date 01/25/2009)	22	Disabled
	04	Employed part-time with support (End-Date 01/25/2009)	23	Inmate of Institution
	08	Unemployed	24	Competitively Employed Full Time (Start Date 01/26/2009)
	14	Volunteer	25	Competitively Employed Part Time (Start Date 01/26/2009)
	17	Unpaid rehabilitation activities	26	Work Adjustment Training (Start Date 01/26/2009)
	18	Retired, Homemaker, or Student (End-Date 04/16/2007)	27	Transitional Employment Placement (Start Date 01/26/2009)
	19	Homemaker	99	Unknown ( <b>ages 0 thru 17 only</b> )

---

### Special Considerations

Field 57- Effective Date must be updated when this field is changed.

Valid values "24, 25, 26, 27" must be entered for clients that meet the criteria as defined in the "Description" section above.

Valid value "14" must be entered for clients who engage in an activity for an organization without being compensated.

Valid value "17" must be entered for clients who engage in an unpaid activity designed to support recovery and job skill development.

Valid value "99" must be entered for clients' ages 0 thru 17 if it applies. Otherwise, use the appropriate valid value.

---

## 66- Employment Status – continued

<b>Updates</b>	8/1/03	Field added.
	1/16/07	Removed valid value "18-Retired, homemaker, or student" and replaced with new valid values 19 thru 23. Valid value "99-Unknown" only applicable to age group 0 thru 17.
	1/26/08	Added Valid Employment Status values

---

**Example** A client works 20 hours per week but requires a job coach to perform the functions of her position. **Enter 04.**

---

## 67 - Educational Status

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**Description** The client's current educational status. Is the client currently attending a school or a vocational program?

---

**Valid Values**

Y	Yes
N	No

---

**Special Considerations** Field 57- Effective Date must be updated when this field is changed.

Valid value "Y" must be entered if the client is attending a school or vocational program, regardless of the number of credit hours the client receives or whether the client's status is full time or part time.

---

**Updates** 8/1/03 Field added.

---

**Example** The client is currently in high school. **Enter Y.**  
OR  
The client is currently taking a course at a community college. **Enter Y.**

---

## 69 - Primary Residence

<b>Description</b>	<p>The place where the client has spent most of his/her time within the past 30 days prior to intake or any change thereafter.</p> <p><b>Arizona State Hospital</b> – a publicly funded inpatient facility for persons with mental illness.</p> <p><b>Boarding Home</b> – An unlicensed residence that provides no behavioral health services but includes room and board.</p> <p><b>Foster home</b> – when a client lives in a home <b>other than</b> that of the <b>client’s family</b>. This includes therapeutic foster care facilities/home.</p> <p><b>Home with family</b> – when a client lives with parents, relatives, adopted family, or legal guardian.</p> <p><b>Homeless</b> – a person is considered homeless if he/she lacks a fixed, regular and adequate nighttime residence and/or his/her primary nighttime residence is either of the following: (1) a supervised publicly or privately operated shelter designed to provide temporary living accommodations; (2) an institution that provides a temporary residence for individuals intended to be institutionalized; or (3) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings (e.g., on the street).</p> <p><b>Independent living</b> – client lives in a private residence with or without support in activities of daily living. Living arrangement may be with a roommate, housemate, and spouse or by self.</p> <p><b>Jail/Correctional facility</b> – when an individual resides in a jail and/or correctional facility with care provided 24 hours, 7 days a week basis. This includes jail, correctional facility, prison, youth authority facility, juvenile hall, boot camp or Boys Ranch.</p> <p><b>Level 1, 2, 3 treatment settings</b> – <b>Level 1</b> facilities provide a structured treatment setting with daily 24-hour supervision and an intensive treatment program, including medical support services. Level 1 facility includes the following subcategories: (a) hospitals; (b) sub-acute facilities; and (c) residential treatment centers. <b>Level 2</b> Behavioral Health Residential facilities provide structured treatment setting with 24-hour supervision and counseling or other therapeutic activities for persons who do not require on-site medical services, under the supervision of an on-site or on-call behavioral health professional. <b>Level 3</b> Behavioral Health Residential facilities provide continuous 24-hour supervision and treatment in a group residential setting to persons who are determined to be capable of independent functioning but still need some protective oversight to insure they receive needed services.</p> <p><b>Nursing home</b> – an establishment that provides living quarters and care for the elderly and the chronically ill.</p> <p><b>Supervisory care/assisted living</b> – a facility licensed by ADHS Assisted Living licensure.</p> <p><b>Transitional housing</b> refers to a shelter/housing arrangement for short-term care. This includes DES children group homes, half-way/three-quarter way house, rural substance abuse transitional center, and all others not included in Levels I, 2, and 3 treatment settings.</p>
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<b>Valid Values</b>	<table border="0"> <tr> <td>01</td> <td>Independent (with roommate or by self, no support)</td> <td>09</td> <td>Foster home or Therapeutic Foster Home</td> </tr> <tr> <td>02</td> <td>Hotel</td> <td>12</td> <td>Nursing home/ICF-MR</td> </tr> <tr> <td>03</td> <td>Boarding home</td> <td>16</td> <td>Home with family</td> </tr> <tr> <td>04</td> <td>Supervisory care/assisted living</td> <td>19</td> <td>Crisis shelter</td> </tr> <tr> <td>05</td> <td>Arizona State Hospital</td> <td>22</td> <td>Level I, II, or III behavioral health treatment setting</td> </tr> <tr> <td>06</td> <td>Jail/prison/detention</td> <td>23</td> <td>Transitional housing (Level IV) or DES group homes for children</td> </tr> <tr> <td>07</td> <td>Homeless/homeless shelter</td> <td>08</td> <td>Other</td> </tr> </table>	01	Independent (with roommate or by self, no support)	09	Foster home or Therapeutic Foster Home	02	Hotel	12	Nursing home/ICF-MR	03	Boarding home	16	Home with family	04	Supervisory care/assisted living	19	Crisis shelter	05	Arizona State Hospital	22	Level I, II, or III behavioral health treatment setting	06	Jail/prison/detention	23	Transitional housing (Level IV) or DES group homes for children	07	Homeless/homeless shelter	08	Other
01	Independent (with roommate or by self, no support)	09	Foster home or Therapeutic Foster Home																										
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06	Jail/prison/detention	23	Transitional housing (Level IV) or DES group homes for children																										
07	Homeless/homeless shelter	08	Other																										

**Special Considerations** Field 57- Effective Date must be updated when this field is changed.

**Updates** 8/1/03 Field added.

**Example** The client currently resides at home with his/her family. **Enter 16.**

70 -  
AXIS V

**Description** The clinician’s judgment of the client’s overall level of functioning within the past 30 days prior to intake, as indicated on the Global Assessment of Functioning (GAF) Scale for clients 18 & older, or on the Children’s Global Assessment Scale (CGAS) for clients 0 thru 17.

**Valid Values** 000 - 100

Scale	Children’s Global Assessment Scale Ages 0 thru 17	Global Assessment of Functioning Ages 18 & Older
100-91	Superior functioning	Superior functioning
90-81	Good functioning in all areas	No or minimal symptoms
80-71	No more than slight impairment in functioning	Slight impairment if symptoms are present
70-61	Some difficulty in a single area, but generally functioning pretty well	Mild Symptoms
60-51	Variable functioning with sporadic difficulties or symptoms in several but not all areas	Moderate symptoms
50-41	Moderate degree of interference in functioning in most social areas or severe impairment of functioning in one area	Impaired reality testing/major symptoms in several areas
40-31	Major impairment in functioning in several areas and unable to function in one of these areas	Some impaired reality testing/major impairment in several areas
30-21	Unable to function in almost all areas	Delusional/hallucinations/inability to function in almost all areas
20-11	Needs considerable supervision	Danger to self/others/gross impairment in functioning/hygiene
10-1	N/A	Persistent danger/serious impairments
10-0	Needs constant supervision	N/A
0	N/A	Inadequate information

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.

**Updates** 8/1/03 Field added.  
1/16/07 Valid value rage changed from 01-100 to 000-100.

**Example** The 15 year-old client is noted to require considerable supervision. Therefore, the client’s GAF is 18. **Enter 18.**

71 -  
**Number of Arrests**

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**Description**            The number of times the client has been arrested within the last 30 days.

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**Valid Values**            00 - 99

---

**Special Considerations**    Field 57- Effective Date must be updated when this field is changed.

---

**Updates**            8/1/03        Field added.

---

**Example**            The client has been arrested once during the last 30 days. **Enter 01**

---

## 72 - SA Primary

<b>Description</b>	The primary psychoactive substance used 30 days prior to the client's current assessment in the behavioral health system, or since the last update. For clients who present for treatment after leaving a controlled environment (jail or prison), use should reflect the 30 days prior to incarceration.			
<b>Valid Values</b>	0001	None (No substance use in past 30 days)	1001	Methamphetamine/Speed (CNS Stimulants)
	0201	Alcohol	1201	Other Stimulants
	0302	Cocaine/Crack (CNS Stimulants)	1308	Benzodiazepines (CNS Depressants)
	0401	Marijuana/Hashish	1605	Other Sedatives/Tranquilizers (CNS Depressants)
	0501	Heroin / Morphine (Opiates / Narcotics)	1703	Inhalants
	0706	Other Opiates/Synthetics	2002	Other Drugs
	0902	Hallucinogens		
<b>Special Considerations</b>	Field 57- Effective Date must be updated when this field is changed.			
	If valid value "0001" is used, then...			
	<ul style="list-style-type: none"> <li>Expected values for "none / no use" must be used in fields 73-75, in the SA Secondary fields (76-79), and in the SA Tertiary fields (97-100).</li> </ul>			
	If valid values other than "0001" are used,			
	<ul style="list-style-type: none"> <li>they may NOT be repeated in SA-Secondary or SA-Tertiary (used only once)</li> <li>And, when entering multiple substance use SA-Primary, SA-Secondary, and SA-Tertiary must be populated in order</li> </ul>			
<b>Updates</b>	8/1/03	Field added.		
<b>Example</b>	The client's primary substance use in the 30 days prior to current assessment has been heroin. <b>Enter 0501.</b>			



## 74 - SA Route 1

---

**Description**            The route of administration of the current primary substance use (field 72-SA Primary).

---

**Valid Values**

1	Oral
2	Smoking
3	Inhalation
4	Injection
6	No use during the past month

---

**Special Considerations**    Field 57- Effective Date must be updated when this field is changed.

If "0001" is entered for SA-Primary (72), then

- Valid value "6" must be entered.

---

**Updates**

8/1/03	Field added.
7/1/05	Valid value "6 No use during the past month" was added (see special considerations)
8/1/05	Valid value "5-Other" was removed.

---

**Example**                    The client has been administering heroin via intravenous injection. **Enter 4.**

---

75 -  
SA Age First Use 1

---

**Description**            The client’s age at first use of the reported current primary substance use (Field 72-SA Primary).

---

**Valid Values**        01-99    Years of age  
                              00        No use

---

**Special Considerations**    Field 29-Assessment Date must be updated when this field is changed.

                                      If “0001” is entered for SA-Primary (72), then

- Valid value “00” must be entered.

                                      Otherwise, valid value “00” may NOT be entered.

---

**Updates**                8/1/03        Field added.

---

**Example**                The client began using heroin at age 25. **Enter 25.**

---

## 76 - SA Secondary

---

<b>Description</b>	The secondary psychoactive substance used 30 days prior to the client's current assessment in the behavioral health system, or since the last update. For clients who present for treatment after leaving a controlled environment (jail or prison), use should reflect the 30 days prior to incarceration.
<b>Valid Values</b>	Reference the "Valid Values" in <a href="#">72 - SA Primary</a>
<b>Special Considerations</b>	<p>Field 57- Effective Date must be updated when this field is changed.</p> <p>If valid value "0001" is used in 72-SA Primary, "0001" must be used and therefore...</p> <ul style="list-style-type: none"><li>• Expected values for "none / no use" must be used in fields 77-79, and in the SA Tertiary fields (97-100).</li></ul> <p>If valid values other than "0001" are used,</p> <ul style="list-style-type: none"><li>• they may NOT be repeated in SA-Primary or SA-Tertiary (used only once)</li><li>• And, when entering multiples substance use SA-Primary, SA-Secondary, and SA-Tertiary must be populated in order</li></ul>
<b>Updates</b>	8/1/03      Field added.
<b>Example</b>	<p>The client's secondary substance use in the 30 days prior to current assessment has been alcohol. <b>Enter 0201.</b></p> <p>Please note: This field must be actively completed</p>

---

## 77 - SA Freq 2

---

**Description**            The frequency of use of the current secondary substance use (field 76-SA Secondary).

---

**Valid Values**            Reference the "Valid Values" in [73-SA Freq 1](#)

---

**Special Considerations**            Field 57- Effective Date must be updated when this field is changed.  
If "0001" is entered for SA-Secondary (76), then

- Valid value "1" must be entered.

---

**Updates**            8/1/03            Field added.

---

**Example**            The client has used alcohol three times in the past month. **Enter 2.**

---

## 78 - SA Route 2

---

**Description**            The route of administration of the current secondary substance use (field 76-SA Secondary).

---

**Valid Values**            Reference the "Valid Values" in [74-SA Route 1](#)

---

**Special Considerations**            Field 57- Effective Date must be updated when this field is changed.  
If "0001" is entered for SA-Secondary (76), then

- Valid value "6" must be entered.

---

**Updates**            8/1/03            Field added.

---

**Example**            The client has been administering alcohol orally. **Enter 1.**

---

## 79 - SA Age First Use 2

---

**Description**            The client's age at first use of the reported current secondary substance use (Field 76-SA Secondary).

---

**Valid Values**        01-99    Years of age  
                              00        No use

---

**Special Considerations**    Field 29-Assessment Date must be updated when this field is changed.

If "0001" is entered for SA-Secondary (76), then

- Valid value "00" must be entered.

Otherwise, valid value "00" may not be entered.

---

**Updates**                8/1/03        Field added.

---

**Example**                The client began using Alcohol at age 15. **Enter 15.**

---

## 80 - Past SA Type

---

**Description**            Refers to the type of substance use in the past 12 months (or substance problem for which the client is currently in remission), which is NOT otherwise reported as current primary substance abuse (field 72), current secondary substance abuse (field 76) or current tertiary substance abuse (field 97).

---

**Valid Values**        Reference the "Valid Values" in [72-SA Primary](#)

---

**Special Considerations**    Field 29-Assessment Date must be updated when this field is changed.

---

**Updates**                8/1/03        Field added.

---

**Example**                The client has been using heroin and alcohol in the past month; however the client has used cocaine in the past year, but not in the past month.  
**Enter 0302. (In this example, 0501 was entered in Field 72 and 0201 was entered in Field 76.)**

---

## 81 - **Reason for Disenrollment**

<b>Description</b>	Indicates the client's reason for disenrollment from the T/RBHA.		
<b>Valid Values</b>	00	Client not disenrolled	
	01	Treatment completed	<b>CRISIS Only</b>
	02	Change in eligibility/entitlement information	21 <b>CRISIS-Treatment completed</b>
	03	Client declined further service	23 <b>CRISIS-Client declined further service</b>
	04	Lack of contact	24 <b>CRISIS-Lack of contact</b>
	06	Incarceration	
	07	Death of client	
	08	Moved out of area	BHS use only
	09	Inter-T/RBHA transfer	99 BHS Administrative Action
<b>Special Considerations</b>	<p>Field 29-Assessment Date must be updated when this field is changed.</p> <p>If field 3-Reason for Submission is NOT "4" (client is NOT being disenrolled), enter "00".</p> <p>If value other than "00" is entered into this field, then:</p> <ul style="list-style-type: none"> <li>• Field "3-Reason for Submission" must be "4" and</li> <li>• An 834 Closure must have previously been submitted and accepted</li> </ul> <p>Please note that all applicable re-engagement activities described in <a href="#">Provider Manual Section 3.8, Outreach, Engagement, Re-engagement and Closure</a>, must be completed prior to disenrolling a client from the behavioral health system.</p>		
<b>Updates</b>	8/1/03	Field added.	
	x/x/x	Valid value "11-Other" was removed.	
	7/1/05	Valid value "10 Crisis event" added and stipulations defined (see special considerations)	
	1/16/07	Changed value for "Client not disenrolled" from 2 spaces to '00'. Removed value "10-Crisis event" and added values 21, 23, 24 so that Field "82-Reason for Disenrollment – Crisis Event" could be combined with field 81. Added value "99-BHS Administrative Action" for the creation of Disenrollment Demographics (Field 3-Reason for Submission = 4) during the cleanup efforts in 2006.	
<b>Example</b>	<p>The client is being disenrolled because of death. <b>Enter 07.</b></p> <p>OR</p> <p>The client is being disenrolled because the client declined further treatment following a crisis event. <b>Enter 23.</b></p>		

## 83 - Avoid Delinquency

---

<b>Description</b>	<p><b>Age 5 thru 17 Only.</b> Represents the child's progress toward avoiding delinquency as determined by the Child and Family Team or the Clinical Liaison.</p> <p>Is the child, age 5 thru 17, successfully avoiding delinquency? The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:</p> <ul style="list-style-type: none"><li>• Decreased contact with law enforcement;</li><li>• No contact with law enforcement;</li><li>• Child is complying with the terms of their probation;</li><li>• Decrease in illegal behavior;</li><li>• Decrease in use of illegal substances; and/or</li><li>• No use of illegal substances.</li></ul>
<b>Valid Values</b>	<p>Y Yes N No X Not applicable due to age O Obsolete</p>
<b>Special Considerations</b>	<p>Field 57- Effective Date must be updated when this field is changed.</p> <p>If "Y" or "N" is entered, then...</p> <ul style="list-style-type: none"><li>• Field 65- Behavioral Health Category must be "C" or "Z" and</li><li>• the child must be age 5 thru 17</li></ul> <p>Otherwise, enter "X."</p> <p>This field must be completed:</p> <ul style="list-style-type: none"><li>• within 45 days of enrollment,</li><li>• every 6 months<sup>1</sup> thereafter, and</li><li>• upon disenrollment</li></ul> <p><sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.</p> <p>The Child and Family Team or Clinical Liaison should consider the child's behavior</p> <ul style="list-style-type: none"><li>• during the initial enrollment period (first 45 days) over the last 6 months</li><li>• during all subsequent updates (every 6 months)only the 6 months since the previous update</li></ul>
<b>Updates</b>	<p>9/1/05 Field added.</p>
<b>Example</b>	<p>The child has decreased contact with law enforcement. <b>Enter Y.</b></p>

---

## 84 - Success in School

**Description**      **Age 5 thru 17 Only.** Describes the child's progression toward being successful in school as determined by the Child and Family Team or Clinical Liaison.  
Is the child, age 5 thru 17, achieving success in school?  
The Child and Family Team or Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:

- Increased attendance;
- Working at grade level;
- Improved grades;
- Completing homework;
- Obeying school rules;
- Improved peer relations;
- Making progress toward grade level;
- Showing progress toward IEP goals;
- Making progress toward educational goals established by the family, child and school representative;
- Taking steps toward obtaining educational diploma (e.g., GED, trade school); and/or
- Participating in extra-curricular activities.

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age
O	Obsolete

**Special Considerations**

Field 57- Effective Date must be updated when this field is changed.

If "Y" or "N" is entered, then...

- Field 65- Behavioral Health Category must be "C" or "Z" and
- the child must be age **OLDER** than 5 or thru 17

Child age 5 thru 17 enter "Y", "N" or "X" whichever is applicable.  
Otherwise, enter "X."

This field must be completed:

- within 45 days of enrollment,
- every 6 months<sup>1</sup> thereafter, and
- upon disenrollment

<sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.

The Child and Family Team or Clinical Liaison should consider the child's behavior

- during the initial enrollment period (first 45 days) over the last 6 months
- during all subsequent updates (every 6 months) only the 6 months since the previous update

**Updates**      9/1/05      Field added.

**Example**      The child is working at grade level. **Enter Y.**

85 -  
**Stable and Productive Adults**

**Description**

**Age 5 thru 17 Only.** Describes the child’s progression toward becoming a stable and productive adult as determined by the Child and Family Team or Clinical Liaison.  
Is the child, age 5 thru 17, making progress toward becoming a stable and productive adult? The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of “Y”, as applicable, in answering this question:

- Improved ability to manage emotions;
- Improvement in social interactions
- Money management skills;
- Understands medical/psychiatric conditions and symptoms;
- Has learned to use transportation;
- Learning vocational / technical / educational skills;
- Has friends and/or recreational opportunities;
- Learning/demonstrates organizational skills;
- Working on a long term plan with goals and necessary supports;
- Developing greater acceptance of social norms; and/or
- Responding to authority figures in an appropriate manner.

**Valid Values**

- Y    Yes  
N    No  
X    Not applicable due to age  
O    Obsolete

**Special Considerations**

Field 57- Effective Date must be updated when this field is changed.

If “Y” or “N” is entered, then...

- Field 65- Behavioral Health Category must be “C” or “Z” and
- the child must be age 5 thru 17

Otherwise, enter “X.”

This field must be completed:

- within 45 days of enrollment,
- every 6 months<sup>1</sup> thereafter, and
- upon disenrollment

<sup>1</sup>Based on the Child and Family Team’s or Clinical Liaison’s ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.

The Child and Family Team or Clinical Liaison should consider the child’s behavior

- during the initial enrollment period (first 45 days) over the last 6 months
- during all subsequent updates (every 6 months)only the 6 months since the previous update

**Updates**

9/1/05    Field added.

**Example**

The child is improving his/her ability to manage emotions. **Enter Y.**

## 86 - Lives with Family

---

<b>Description</b>	<p><b>Age 0 thru 17 Only.</b> Describes the child's living situation. Is the child, age 0 thru 17, living with his/her family? For the purposes of this field, family means the biological, adoptive or self-created unit of people residing together and consisting of adult(s) and children, with adult(s) performing duties of parenthood for the children. The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:</p> <ul style="list-style-type: none"><li>• Lives with family;</li><li>• Moving toward living with family;</li><li>• Lives in adequate, stable housing with appropriate support; or</li><li>• For children in foster care: a viable permanency plan is being pursued.</li></ul>
<b>Valid Values</b>	<p>Y Yes N No X Not applicable due to age O Obsolete</p>
<b>Special Considerations</b>	<p>Field 57- Effective Date must be updated when this field is changed.</p> <p>If "Y" or "N" is entered, then...</p> <ul style="list-style-type: none"><li>• Field 65- Behavioral Health Category must be "C" or "Z" and</li><li>• the child must be age 0 thru 17</li></ul> <p>Otherwise, enter "X."</p> <p>This field must be completed:</p> <ul style="list-style-type: none"><li>• within 45 days of enrollment,</li><li>• every 6 months<sup>1</sup> thereafter, and</li><li>• upon disenrollment</li></ul> <p><sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.</p> <p>The Child and Family Team or Clinical Liaison should consider the child's behavior</p> <ul style="list-style-type: none"><li>• during the initial enrollment period (first 45 days) over the last 6 months</li><li>• during all subsequent updates (every 6 months) only the 6 months since the previous update</li></ul>
<b>Updates</b>	<p>9/1/05 Field added.</p>
<b>Example</b>	<p>The child is living with his adoptive family. <b>Enter Y.</b></p>

---

## 87 - **Increased Stability**

---

<b>Description</b>	<p><b>Age 5 thru 17 Only.</b> Describes the level of stability experienced by the child in terms of housing/treatment settings.</p> <p>Has the child, age 5 thru 17, experienced an increase in stability? The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:</p> <ul style="list-style-type: none"><li>• No avoidable moves (moves due to an increase in symptoms, crisis, staff issues, procedural/contracting issues);</li><li>• No shelter placements; and/or</li><li>• Lives in permanent housing with appropriate supports.</li></ul>
<b>Valid Values</b>	<p>Y Yes N No X Not applicable due to age O Obsolete</p>
<b>Special Considerations</b>	<p>Field 57- Effective Date must be updated when this field is changed.</p> <p>If "Y" or "N" is entered, then...</p> <ul style="list-style-type: none"><li>• Field 65- Behavioral Health Category must be "C" or "Z" and</li><li>• the child must be age 5 thru 17</li></ul> <p>Otherwise, enter "X."</p> <p>This field must be completed:</p> <ul style="list-style-type: none"><li>• within 45 days of enrollment,</li><li>• every 6 months<sup>1</sup> thereafter, and</li><li>• upon disenrollment</li></ul> <p><sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.</p> <p>The Child and Family Team or Clinical Liaison should consider the child's behavior</p> <ul style="list-style-type: none"><li>• during the initial enrollment period (first 45 days) over the last 6 months</li><li>• during all subsequent updates (every 6 months) only the 6 months since the previous update</li></ul>
<b>Updates</b>	<p>9/1/05 Field added.</p>
<b>Example</b>	<p>The child has experienced no avoidable moves in the past 6 months. <b>Enter Y.</b></p>

---

88 -  
**Decrease in Safety Risk**

---

**Description**      **Age 5 thru 17 Only.** Describes whether or not safety risks are present due to the child's behavior or the behavior of others.  
Has the child, age 5 thru 17, experienced a decrease in safety risks?  
The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:

- Decrease in child's behavior that poses safety risks;
- Decrease in other's behavior that poses safety risks;
- Decrease in substance use that poses a risk to safety ;and/or
- Maintaining acceptably low level of safety risks (e.g. risks to safety are age-appropriate)

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**      Field 57- Effective Date must be updated when this field is changed.

If "Y" or "N" is entered, then...

- Field 65- Behavioral Health Category must be "C" or "Z" and
- the child must be age 5 thru 17

Otherwise, enter "X."

This field must be completed:

- within 45 days of enrollment,
- every 6 months<sup>1</sup> thereafter, and
- upon disenrollment

<sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.

The Child and Family Team or Clinical Liaison should consider the child's behavior

- during the initial enrollment period (first 45 days) over the last 6 months
- during all subsequent updates (every 6 months)only the 6 months since the previous update

---

**Updates**      9/1/05      Field added.

---

**Example**      There has been a decrease in the child's behavior that poses safety risks. **Enter Y.**

---

---

**Description**      **Age 0 thru 17 Only.** Indicates whether the child, age 0 thru 17, is part of a functioning Child and Family Team.  
The Child and Family Team is a group of people that includes, at a minimum, the child and his/her family, any foster parents, a behavioral health representative, and any individuals important in the child's life and who are identified and invited to participate by the child and family. This may include, for example, teachers, extended family members, friends and other natural supports, family support partners, healthcare providers, coaches, community resource providers, representatives from churches, synagogues or mosques, agents from other service systems like Child Protective Services or the Division of Developmental Disabilities, etc.

Effective, August 31, 2005, a functioning Child and Family Team is a team that has:

1. A trained facilitator;
2. Met at least once and, since then, has continued to function in accordance with ADHS/DBHS Technical Assistance Document #3, The Child and Family Team Process; and
3. Completed an initial strengths, needs and cultural discovery.

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.

If "Y" or "N" is entered, then...

- Field 65- Behavioral Health Category must be "C" or "Z" and
- the child must be age 0 thru 17

Otherwise, enter "X."

**Note:** At the initial submission, the behavioral health representative, child and family member(s) may not have had sufficient time to form a functioning child and family team. In these cases, the valid value "N" should be recorded.

This field must be completed:

- within 45 days of enrollment,
- every 6 months<sup>1</sup> thereafter, and
- upon disenrollment

<sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.

The Child and Family Team or Clinical Liaison should consider the child's behavior

- during the initial enrollment period (first 45 days) over the last 6 months
- during all subsequent updates (every 6 months) only the 6 months since the previous update

---

**Updates**      9/1/05      Field added.

---

**Example**      The child is part of a functioning Child and Family Team. **Enter Y.**

---

90 -  
Clinical Liaison Name

---

<b>Description</b>	Identifies the client's clinical liaison.
<b>Valid Values</b>	Clinical Liaison name is recorded as the first initial of the first name and the entire last name up to 15 characters.
<b>Special Considerations</b>	None
<b>Updates</b>	9/1/05      Field added.
<b>Example</b>	The clinical liaison's name is Sharon Miller-Jacobson. Enter smiller-jacobso. OR The clinical liaison's name is Michael Bolten. <b>Enter mbolten.</b>

---

91 -  
Clinical Liaison Billing ID

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<b>Description</b>	Indicates the AHCCCS ID the clinical liaison uses for billing purposes.
<b>Valid Values</b>	Valid 6 digit AHCCCS ID
<b>Special Considerations</b>	None
<b>Updates</b>	9/1/05      Field added.
<b>Example</b>	The clinical liaison's AHCCCS ID is 121212. <b>Enter 121212.</b>

---

## 92 - Acceptable Emotional Regulation

---

**Description**      **Age 0 thru 4 Only.** Describes whether or not the child, age 0 thru 4, has acceptable emotional regulation.  
Has the child made progress in exhibiting acceptable emotional regulation?  
The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:

- My child demonstrates a full range of emotions consistent with what would be expected for the situation (smiles/laughs/cries/angers);
- My child can (better) tolerate feeling frustrated when needs are not immediately met; and/or
- My child has few(er) unexplained temper tantrums/mood swings.

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age
O	Obsolete

---

**Special Considerations**      Field 57- Effective Date must be updated when this field is changed.

If "Y" or "N" is entered, then...

- Field 65- Behavioral Health Category must be "C" or "Z" and
- the child must be age 0 thru 4

Otherwise, enter "X."

This field must be completed:

- within 45 days of enrollment,
- every 6 months<sup>1</sup> thereafter, and
- upon disenrollment

<sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.

The Child and Family Team or Clinical Liaison should consider the child's behavior

- during the initial enrollment period (first 45 days) over the last 6 months
  - during all subsequent updates (every 6 months) only the 6 months since the previous update
- 

**Updates**      2/1/06      Field added.

---

**Example**      The child is able to demonstrate a full range of emotions consistent with what would be expected for the situation. **Enter Y.**

---

## 93 - Ready to Learn

---

<b>Description</b>	<p><b>Age 0 thru 4 Only.</b> Describes whether or not the child, age 0 thru 4, is ready to learn. Has the child made progress in exhibiting a readiness to learn? The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:</p> <ul style="list-style-type: none"><li>• My child can express needs in an age-appropriate way;</li><li>• My child is able to pay attention, consistent with what is expected for age;</li><li>• I provide my child with an environment that promotes learning (e.g., toys, reading out loud books, singing, music, games, social interactions, etc.);</li><li>• My child interacts in an appropriate way with other children and adults; and/or</li><li>• My child has age-appropriate pre-academic skills (e.g., can recognize letters, count).</li></ul>
<b>Valid Values</b>	<p>Y Yes N No X Not applicable due to age O Obsolete</p>
<b>Special Considerations</b>	<p>Field 57- Effective Date must be updated when this field is changed.</p> <p>If "Y" or "N" is entered, then...</p> <ul style="list-style-type: none"><li>• Field 65- Behavioral Health Category must be "C" or "Z" and</li><li>• the child must be age 0 thru 4</li></ul> <p>Otherwise, enter "X."</p> <p>This field must be completed:</p> <ul style="list-style-type: none"><li>• within 45 days of enrollment,</li><li>• every 6 months<sup>1</sup> thereafter, and</li><li>• upon disenrollment</li></ul> <p><sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.</p> <p>The Child and Family Team or Clinical Liaison should consider the child's behavior</p> <ul style="list-style-type: none"><li>• during the initial enrollment period (first 45 days) over the last 6 months</li><li>• during all subsequent updates (every 6 months)only the 6 months since the previous update</li></ul>
<b>Updates</b>	<p>2/1/06 Field added.</p>
<b>Example</b>	<p>The child is expressing his/her needs in an age-appropriate way. <b>Enter Y.</b></p>

---

## 94 - **Explore and Adapt**

---

**Description**

**Age 0 thru 4 Only.** Describes the ability of the child to explore and adapt to his/her environment.

Has the child, age 0 thru 4, progressed in his/her ability to explore and adapt to the environment?

The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:

- My child actively and easily explores the environment;
  - My child uses me as a "secure base" (returns to me after brief exploration of his/her environment);
  - My child is (better) able to tolerate family/caregiver separations; and/or
  - My child can (better) tolerate a stimulating (loud/crowded) environment without becoming upset.
- 

**Valid Values**

Y Yes  
N No  
X Not applicable due to age  
O Obsolete

---

**Special Considerations**

Field 57- Effective Date must be updated when this field is changed.

If "Y" or "N" is entered, then...

- Field 65- Behavioral Health Category must be "C" or "Z" and
- the child must be age 0 thru 4

Otherwise, enter "X."

This field must be completed:

- within 45 days of enrollment,
- every 6 months<sup>1</sup> thereafter, and
- upon disenrollment

<sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.

The Child and Family Team or Clinical Liaison should consider the child's behavior

- during the initial enrollment period (first 45 days) over the last 6 months
  - during all subsequent updates (every 6 months) only the 6 months since the previous update
- 

**Updates**

2/1/06 Field added.

---

**Example**

The child is actively and easily exploring his/her environment. **Enter Y**

---

## 95 - Parent Child Interaction

---

**Description**      **Age 0 thru 4 Only.** Describes the child and parent's progress toward positive parent child interactions.

Has the child, age 0 thru 4, and parent progressed toward positive parent child interactions? The Child and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:

- For infants: my child and I engage in eye contact, vocalizations and touch to communicate with each other;
- My child seeks comfort from me;
- I am able to effectively soothe and calm my child;
- My child likes to play with me; and/or
- I feel competent to respond to my child's needs.

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age
O	Obsolete

---

**Special Considerations**      Field 57- Effective Date must be updated when this field is changed.

If "Y" or "N" is entered, then...

- Field 65- Behavioral Health Category must be "C" or "Z" and
- the child must be age 0 thru 4

Otherwise, enter "X."

This field must be completed:

- within 45 days of enrollment,
- every 6 months<sup>1</sup> thereafter, and
- upon disenrollment

<sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.

The Child and Family Team or Clinical Liaison should consider the child's behavior

- during the initial enrollment period (first 45 days) over the last 6 months
  - during all subsequent updates (every 6 months)only the 6 months since the previous update
- 

**Updates**      2/1/06      Field added.

---

**Example**      The child seeks comfort from his/her parent. **Enter Y**

---

## 96 - Improve Family Stress

---

**Description**

**Age 0 thru 4 Only.** Describes the family's progress toward improving family stress. Has the family progressed toward improving family stress? The Child, age 0 thru 4 and Family Team or the Clinical Liaison shall utilize the following guidelines for a valid value of "Y", as applicable, in answering this question:

- I have a stronger support system for myself (family, friends, services);
- I feel better able to relate with my child;
- I feel less angry and frustrated with my life; and/or
- My family has resources that provide housing, food, clothing and healthcare.

---

**Valid Values**

Y	Yes
N	No
X	Not applicable due to age
O	Obsolete

---

**Special Considerations**

Field 57- Effective Date must be updated when this field is changed.

If "Y" or "N" is entered, then...

- Field 65- Behavioral Health Category must be "C" or "Z" and
- the child must be age 0 thru 4

Otherwise, enter "X."

This field must be completed:

- within 45 days of enrollment,
- every 6 months<sup>1</sup> thereafter, and
- upon disenrollment

<sup>1</sup>Based on the Child and Family Team's or Clinical Liaison's ongoing assessment of the child this field must be completed every 6 months regardless of whether there is a change.

The Child and Family Team or Clinical Liaison should consider the child's behavior

- during the initial enrollment period (first 45 days) over the last 6 months
- during all subsequent updates (every 6 months) only the 6 months since the previous update

---

**Updates**

2/1/06      Field added.

---

**Example**

The family has resources that provide housing, food, clothing and healthcare. **Enter Y.**

---

## 97 - SA Tertiary

---

<b>Description</b>	The tertiary psychoactive substance used 30 days prior to the client's current assessment in the behavioral health system, or since the last update. For clients who present for treatment after leaving a controlled environment (jail or prison), use should reflect the 30 days prior to incarceration.
<b>Valid Values</b>	Reference the "Valid Values" in <a href="#">72 - SA Primary</a>
<b>Special Considerations</b>	<p>Field 57- Effective Date must be updated when this field is changed.</p> <p>If valid value "0001" is used in 72-SA Primary or 76-SA-Secondary, then...</p> <ul style="list-style-type: none"><li>• "0001" must be use and</li><li>• Expected values for "none / no use" must be used in fields 98-100</li></ul> <p>If valid values other then "0001" are used,</p> <ul style="list-style-type: none"><li>• they may NOT be repeated in SA-Primary or SA-Secondary (used only once)</li><li>• And, when entering multiple substance use SA-Primary, SA-Secondary, and SA-Tertiary must be populated in order</li></ul>
<b>Updates</b>	1/16/07      Field added.
<b>Example</b>	<p>The client's tertiary substance use in the 30 days prior to current assessment has been alcohol. <b>Enter 0201.</b></p> <p>Please note: This field must be actively completed</p>

---

## 98 - SA Freq 3

---

**Description**            The frequency of use of the current tertiary substance use (97-SA Tertiary).

---

**Valid Values**            Reference the "Valid Values" in [73-SA Freq 1](#)

---

**Special Considerations**            Field 57- Effective Date must be updated when this field is changed.  
If "0001" is entered for SA-Tertiary (97), then

- Valid value "1" must be entered.

---

**Updates**            1/16/07      Field added.

---

**Example**            The client has used alcohol three times in the past month. **Enter 2.**

---

## 99 - SA Route 3

---

**Description**            The route of administration of the current tertiary substance use (97-SA Tertiary).

---

**Valid Values**            Reference the "Valid Values" in [74-SA Route 1](#)

---

**Special Considerations**            Field 57- Effective Date must be updated when this field is changed.  
If "0001" is entered for SA-Tertiary (97), then

- Valid value "6" must be entered.

---

**Updates**            1/16/07      Field added.

---

**Example**            The client has been administering alcohol orally. **Enter 1.**

---

100 -  
SA Age First Use 3

---

**Description**            The client's age at first use of the reported current tertiary substance use (97-SA Tertiary).

---

**Valid Values**        01-99    Years of age  
                              00        No use

---

**Special Considerations**    Field 29-Assessment Date must be updated when this field is changed.

If "0001" is entered for SA-Tertiary (97), then

- Valid value "00" must be entered.

Otherwise, valid value "00" may not be entered.

---

**Updates**                1/16/07    Field added.

---

**Example**                The client began using Alcohol at age 15. **Enter 15.**

---



102 -  
**ACT Team**

---

**Description**      **Age 18 & older Only.** Identifies the ACT team assigned to a client, age 18 & older, who is a part of the Maricopa County seriously mentally ill priority population consistent with the Arnold v. Sam exit stipulation criteria.

---

**Valid Values**      Five (5) digit Id to be defined                      00000    Not applicable

---

**Special Considerations**      Field 29-Assessment Date must be updated when this field is changed.  
  
Maricopa County only

---

**Updates**              1/16/07      Field added.

---

**Example**              None

---

103 -  
Clinical Site ID

---

**Description** Identifies the Clinical Site for clients who are a part of the Maricopa County seriously mentally ill priority population consistent with the Arnold v. Sam exit stipulation criteria.

---

**Valid Values** Unique 6-digit AHCCCS id assigned to the clinical site. 000000 Not applicable

---

**Special Considerations** Field 29-Assessment Date must be updated when this field is changed.  
Maricopa County only

---

**Updates** 1/16/07 Field added.

---

**Example** None

---

[104 -  
Custom\\_1](#)

---

**Description**            **(T/RBHA use only)** This is a 15-byte customer field for T/RBHA use only.

---

**Valid Values**            T/RBHA defined 15-byte text field

---

**Special Considerations**            If the associated transaction is successfully accepted by CIS, any data entered in this field will pass through CIS (unedited) and back to the T/RBHA.

---

**Updates**            1/16/07      Field added.

---

**Example**            None

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## 105 - Principle Diagnosis

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<b>Description</b>	Refers to the Axis I-1 or Axis II-1 disorder/condition which is the focus of clinical attention and directly impacts the Behavioral Health Category field (field 65) which is selected.
<b>Valid Values</b>	Value must match diagnoses listed for Axis I-1 - Axis I-5 or Axis II-1 – Axis II-2. Value must be a valid DSM IV code. 799.9 is NOT allowed.
<b>Special Considerations</b>	The clinician conducting the assessment is responsible for determination of principle diagnosis. Principle Diagnosis value will influence the determination of 65 – Behavioral Health Category Field 57- Effective Date must be updated when this field is changed.  If valid value V71.09 is used in Axis I-1, then... <ul style="list-style-type: none"><li>• Field #-Principle Diagnosis must match Axis II-1.</li></ul>
<b>Updates</b>	7/1/08      Field added.
<b>Example</b>	The behavioral health recipient’s disorders have been classified as follows: Axis I    305.1    DSM-IV Nicotine Dependence Axis II   308.83 DSM-IV Borderline Personality Disorder <b>Enter 308.83</b>  Axis I    295.30 DSM-IV Schizophrenia, Paranoid Type Axis II   317     DSM-IV Mild Mental Retardation <b>Enter 295.30</b>

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## 106 - CASII Intensity Level

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<b>Description</b>	The CASII applies to children ages 6 thru 17, measuring objective quantifiable criteria for determination of service intensity. It describes an array of services and a level of service intensity rather than a specific treatment setting or program. It does not describe a recommended level of care. <b>The CASII is required as part of the initial 45 day assessment period, at a minimum of every 6 months thereafter, and at time of disenrollment from BH services.</b>
<b>Valid Values</b>	00- Basic Services for Prevention and Maintenance 01- Recovery Maintenance and Health Management 02- Outpatient Services 03- Intensive Outpatient Services 04- Intensive Integrated Services without 24-Hour Psychiatric Monitoring 05- Non-Secure, 24-Hour Services with Psychiatric Monitoring 06- Secure, 24-Hour Services with Psychiatric Management XX – Not applicable due to age
<b>Special Considerations</b>	If client is at least 6 and less than age 18, CASII Intensity Level is required. If client is age 18 or greater CASII Intensity Level must be XX.
<b>Updates</b>	7/1/08      Field added.
<b>Example</b>	A behavioral health recipient is assessed using the CASII at the time of the initial assessment and is determined to have needs requiring intensive integrated services without 24-hour psychiatric monitoring. <b>Enter 04.</b>

---

## 107 - CASII Intensity Date

---

<b>Description</b>	The CASII Intensity Date must reflect the date on which the CASII Intensity Level (Field 47) was assessed.
<b>Valid Values</b>	YYYYMMDD Format 99991230 Not applicable due to age
<b>Special Considerations</b>	A valid date value must be provided each time a CASII Intensity Level is provided.
<b>Updates</b>	7/1/08      Field added.
<b>Example</b>	Date is recorded as the 4 digit year, 2 digit month and 2 digit day. A client's CASII Intensity Level (field 47) changed on March 26, 2008. <b>Enter 20080326.</b>

---

**Data Field Reference Table**

**Description**

The Reference Table summarizes key information associated with each data field. A description of each table column follows.

Column	Description
Field #.	A unique reference number given to each data field. These same field numbers correspond to the fields in the <a href="#">ADHS/DBHS CIS File Layout and Specifications Manual: Demographics Data File Layout</a> .
Name	The data field's descriptive name.
Last Change	The last occurrence a change or addition took place for the data field. For a detailed description of all changes applied to a particular data field, reference the field's "Updates" sub-section.
T/RBHA Data Submit	Identifies the <b>data submission</b> requirements of the data field for each T/RBHA. <b>D</b> – Disenrollment Demographic <b>I</b> – Initial demographic <b>F</b> – Full Update (annual, 6-month outcome measures update) <b>Yes</b> – Always required
Client Data Collect	Identifies the required data to be <b>collected</b> from the client. <b>D</b> – Disenrollment Demographic <b>I</b> – Initial demographic <b>F</b> – Full Update (annual, 6-month outcome measures update)
Age Group	Specific age group(s) associated with this field.
Category	The category or categories a data field is associated with... Desc Char    Descriptive Characteristic Maricopa    Maricopa County only Outcome    Outcome Measures being reported
Field Relationship	Identifies other fields that relate to this field. For a detailed description of the association(s), reference the data fields "Special Considerations" sub-section.

**Hyperlink**

Each data field name in the following table is hyperlinked to its associated data field detail section. To jump (link) to a field's detail, click on the field name within the table.

In addition, each data field's detail section title is hyperlinked to its corresponding entry in the Reference Table. To jump (link) to a field in the Reference Table, from a field's detail section, click on the data field's title

<u>FIELD #</u>	<u>NAME</u>	<u>LAST CHANGE</u>	<u>T/RBHA DATA SUBMIT</u>	<u>CLIENT DATA COLLECT</u>	<u>AGE GROUP</u>	<u>CATEGORY</u>	<u>FIELD RELATIONSHIP</u>
1	<a href="#">Record-Type</a>	08/01/03	Yes	N/A	N/A		
2	<a href="#">RBHA-ID</a>	11/01/07	Yes	N/A	N/A		
3	<a href="#">Reason-for-Submission</a>	02/01/06	Yes	N/A	N/A		
4	<a href="#">Client-ID</a>	08/01/03	Yes	N/A	N/A		
5	<a href="#">Intake-Date</a>	08/01/03	Yes	N/A	N/A		
6	<a href="#">Client-First-Name</a>	08/01/03	Yes	N/A	N/A		
7	N/A						
8	<a href="#">Client-Last-Name</a>	08/01/03	Yes	N/A	N/A		
9	<a href="#">Date-of-Birth</a>	08/01/03	Yes	N/A	N/A		
10	<a href="#">Referral-Date</a>	08/01/03	I, D, F	I	All		
11	<a href="#">Referral-Source</a>	08/01/03	I, D, F	I	All		
12	<a href="#">OMB-American Indian</a>	08/01/03	I, D, F	I	All	Desc Char	12-16,29
13	<a href="#">OMB-Asian</a>	08/01/03	I, D, F	I	All	Desc Char	12-16,29
14	<a href="#">OMB-Black</a>	08/01/03	I, D, F	I	All	Desc Char	12-16,29
15	<a href="#">OMB-Native Hawaiian</a>	08/01/03	I, D, F	I	All	Desc Char	12-16,29
16	<a href="#">OMB-White</a>	08/01/03	I, D, F	I	All	Desc Char	12-16,29
17	<a href="#">OMB-Hispanic-Latino</a>	08/01/03	I, D, F	I	All	Desc Char	29
18	<a href="#">PC-Self Harm</a>	08/01/03	I, D, F	I	All	Desc Char	29
19	<a href="#">PC-Assaultive</a>	08/01/03	I, D, F	I	All	Desc Char	29
20	<a href="#">PC-Victim-ANV</a>	08/01/03	I, D, F	I	All	Desc Char	29
21	<a href="#">PC-Anxiety-Stress</a>	08/01/03	I, D, F	I	All	Desc Char	29
22	<a href="#">PC-Depressed</a>	08/01/03	I, D, F	I	All	Desc Cha	29
23	<a href="#">PC-Psychotic</a>	08/01/03	I, D, F	I	All	Desc Char	29
24	<a href="#">PC-Substance-Abuse</a>	08/01/03	I, D, F	I	All	Desc Char	29, 72-79, 97-100
25	<a href="#">PC-Unable-to-Care</a>	01/16/07	I, D, F	I	5 & older	Desc Char	29
26	<a href="#">PC-Relational</a>	08/01/03	I, D, F	I	All	Desc Char	29
27	<a href="#">PC-Child-Behavior</a>	01/16/07	I, D, F	I	0 thru 17	Desc Char	29
28	<a href="#">PC-Other</a>	08/01/03	I, D, F	I	All	Desc Char	29
29	<a href="#">Assessment Date</a>	08/01/03	I, D, F	I, D, F	All		12-28, 30-40, 42-43, 45-46, 49-51a, 52-56, 58-65, 70, 75, 79-81, 89, 100-103
30	<a href="#">Household-Size</a>	08/01/03	I, D, F	I, F	All	Desc Char	29
31	<a href="#">Household-Income</a>	08/01/03	I, D, F	I, F	All	Desc Char	29
32	<a href="#">Treatment-Participation</a>	07/01/05	I, D, F	I, F	All	Desc Char	29
33	<a href="#">OA-ADC-Parole</a>	01/16/07	I, D, F	I, F	18 & Older	Desc Char	29
34	<a href="#">OA-ADJC-Parole</a>	01/16/07	I, D, F	I, F	0 thru 17	Desc Char	29
35	<a href="#">OA-ADHS-CRS</a>	01/16/07	I, D, F	I, F	0 thru 17	Desc Char	29
36	<a href="#">OA-AOC-Adult-Probation</a>	01/16/07	I, D, F	I, F	18 & Older	Desc Char	29
37	<a href="#">OA-AOC-Juvenile-Probation</a>	01/16/07	I, D, F	I, F	0 thru 17	Desc Char	29
38	<a href="#">OA-DES-CPS</a>	08/01/03	I, D, F	I, F	All	Desc Char	29
39	<a href="#">OA-DES-DDD</a>	08/01/03	I, D, F	I, F	All	Desc Char	29
40	<a href="#">OA-DES-RSA</a>	08/01/03	I, D, F	I, F	All	Desc Char	29
41	N/A						
42	<a href="#">OA-School-Special-Ed</a>	08/01/03	I, D, F	I, F	All	Desc Cha	29
43	<a href="#">OA-Other</a>	08/01/03	I, D, F	I, F	All	Desc Char	29, 33-40, 42
44	N/A						
45	<a href="#">Formal-Schooling-Level</a>	01/16/07	I, D, F	I, F	0 thru 4 5 & Older	Desc Char	29
46	<a href="#">SP-COOL</a>	01/16/07	I, D, F	I, F	18 & Older	Desc Char	29, 33, 65
47	N/A						
48	N/A						
49	<a href="#">SP-Pregnancy</a>	01/16/07	I, D, F	I, F	All	Desc Char	29
50	<a href="#">SP-Woman-DC</a>	01/16/07	I, D, F	I, F	All	Desc Char	29

<u>FIELD #</u>	<u>NAME</u>	<u>LAST CHANGE</u>	<u>T/RBHA DATA SUBMIT</u>	<u>CLIENT DATA COLLECT</u>	<u>AGE GROUP</u>	<u>CATEGORY</u>	<u>FIELD RELATIONSHIP</u>
51a	<a href="#">SP-Priority-SMI</a>	01/16/07	I, D, F	I, D, F	18 & Older	Desc Char, Maricopa	29, 65
51b	N/A						
52	<a href="#">AXIS-III-1</a>	01/26/09	I, D, F	I, F	All	Desc Char	29, 53-56
53	<a href="#">AXIS-III-2</a>	10/01/07	I, D, F	I, F	All	Desc Char	29, 52
54	<a href="#">AXIS-III-3</a>	10/01/07	I, D, F	I, F	All	Desc Char	29, 52
55	<a href="#">AXIS-III-4</a>	10/01/07	I, D, F	I, F	All	Desc Char	29, 52
56	<a href="#">AXIS-III-5</a>	10/01/07	I, D, F	I, F	All	Desc Char	29, 52
57	<a href="#">Effective Date</a>	07/01/08	I, D, F	I, D, F	All		66-67, 69, 71-74, 76-78, 83-88, 92-96
58	<a href="#">AXIS-I-1</a>	08/01/03	I, D, F	I, D, F	All	Desc Char	29, 59-63
59	<a href="#">AXIS-I-2</a>	08/01/03	I, D, F	I, D, F	All	Desc Char	29, 58
60	<a href="#">AXIS-I-3</a>	08/01/03	I, D, F	I, D, F	All	Desc Char	29, 58
61	<a href="#">AXIS-I-4</a>	08/01/03	I, D, F	I, D, F	All	Desc Char	29, 58
62	<a href="#">AXIS-I-5</a>	08/01/03	I, D, F	I, D, F	All	Desc Char	29, 58
63	<a href="#">AXIS-II-1</a>	08/01/03	I, D, F	I, D, F	All	Desc Char	29, 58, 64
64	<a href="#">AXIS-II-2</a>	08/01/03	I, D, F	I, D, F	All	Desc Char	29, 58, 63
65	<a href="#">Behavior-Health-Category</a>	08/01/03	I, D, F	I, D, F	0 thru 17 18 & Older	Desc Char	29, 58-64, 51a, 83-89, 92-96
66	<a href="#">Employment-Status</a>	01/26/09	I, D, F	I, D, F	0 thru 17 18 & Older	Outcome	57
67	<a href="#">Educational-Status</a>	08/01/03	I, D, F	I, D, F	All	Outcome	57
68	N/A						
69	<a href="#">Primary-Residence</a>	08/01/03	I, D, F	I, D, F	All	Outcome	57
70	<a href="#">AXIS-V</a>	01/16/07	I, D, F	I, D, F	0 thru 17 18 & Older	Desc Char	29
71	<a href="#">Number-of-Arrests</a>	08/01/03	I, D, F	I, D, F	All	Outcome	57
72	<a href="#">SA-Type-1</a>	08/01/03	I, D, F	I, D, F	All	Outcome	24, 57, 73-79, 97-100
73	<a href="#">SA-Freq-1</a>	08/01/03	I, D, F	I, D, F	All	Outcome	24, 57, 72
74	<a href="#">SA-Route-1</a>	08/01/05	I, D, F	I, F	All	Outcome	24, 57, 72
75	<a href="#">SA-Age-First-Use-1</a>	08/01/03	I, D, F	I, F	All	Desc Char	24, 29, 72
76	<a href="#">SA-Type-2</a>	08/01/03	I, D, F	I, D, F	All	Outcome	24, 57, 72, 77-80
77	<a href="#">SA-Freq-2</a>	08/01/03	I, D, F	I, D, F	All	Outcome	24, 57, 76
78	<a href="#">SA-Route-2</a>	08/01/03	I, D, F	I, F	All	Outcome	24, 57, 76
79	<a href="#">SA-Age-First-Use-2</a>	08/01/03	I, D, F	I, F	All	Desc Char	24, 29, 76
80	<a href="#">Past-SA-Type</a>	08/01/03	I, D, F	I, F	All	Desc Char	29, 72, 76, 97
81	<a href="#">Reason-for-Disenrollment</a>	01/16/07	I, D, F	I, D, F	All	Desc Char	29
82	N/A						
83	<a href="#">Avoid-Delinquency</a>	01/26/09	I, D, F	I, D, F	5 thru 17	Outcome	57, 65
84	<a href="#">Success-In-School</a>	01/26/09	I, D, F	I, D, F	5 thru 17	Outcome	57, 65
85	<a href="#">Stable-and-Productive-Adult</a>	01/26/09	I, D, F	I, D, F	5 thru 17	Outcome	57, 65
86	<a href="#">Lives-With-Family</a>	01/26/09	I, D, F	I, D, F	0 thru 17	Outcome	57, 65
87	<a href="#">Increased-Stability</a>	01/26/09	I, D, F	I, D, F	5 thru 17	Outcome	57, 65
88	<a href="#">Decrease-in-Safety-Risks</a>	01/26/09	I, D, F	I, D, F	5 thru 17	Outcome	57, 65
89	<a href="#">Served-by-CFT</a>	09/01/05	I, D, F	I, D, F	0 thru 17	Desc Char	29, 65
90	<a href="#">Clinical-Liaison-Name</a>	09/01/05	I, D, F	I, D, F	All		
91	<a href="#">Clinical-Liaison-Billing-ID</a>	09/01/05	I, D, F	I, D, F	All		
92	<a href="#">Acceptable-Emotional-Reg</a>	01/26/09	I, D, F	I, D, F	0 thru 4	Outcome	57, 65
93	<a href="#">Ready-to-Learn</a>	01/26/09	I, D, F	I, D, F	0 thru 4	Outcome	57, 65
94	<a href="#">Explore-and-Adapt</a>	01/26/09	I, D, F	I, D, F	0 thru 4	Outcome	57, 65
95	<a href="#">Parent-Child-Interaction</a>	01/26/09	I, D, F	I, D, F	0 thru 4	Outcome	57, 65
96	<a href="#">Family-Stress-Level</a>	01/26/09	I, D, F	I, D, F	0 thru 4	Outcome	57, 65
97	<a href="#">SA-Type-3</a>	01/16/07	I, D, F	I, D, F	All	Outcome	24, 57, 72, 80, 98-100
98	<a href="#">SA-Freq-3</a>	01/16/07	I, D, F	I, D, F	All	Outcome	24, 57, 97

<u>FIELD #</u>	<u>NAME</u>	<u>LAST CHANGE</u>	<u>T/RBHA DATA SUBMIT</u>	<u>CLIENT DATA COLLECT</u>	<u>AGE GROUP</u>	<u>CATEGORY</u>	<u>FIELD RELATIONSHIP</u>
99	<a href="#">SA-Route-3</a>	01/16/07	I, D, F	I, F	All	Outcome	24, 57, 97
100	<a href="#">SA-Age-First-Use-3</a>	01/16/07	I, D, F	I, F	All	Desc Char	24, 29, 97
101	<a href="#">ISP-Date</a>	01/16/07	F	F	All	Desc Char, Maricopa	29
102	<a href="#">ACT-Team</a>	01/16/07	I, D, F	I, F	18 & Older	Desc Char, Maricopa	29
103	<a href="#">Clinical-Site-ID</a>	01/16/07	I, D, F	I, D, F	All	Desc Char, Maricopa	29
104	<a href="#">Custom-1</a>	01/16/07	-	-	-	-	-
105	<a href="#">Principle Dx</a>	07/01/08					
106	<a href="#">CASII Intensity Level</a>	07/01/08					
107	<a href="#">CASII Intensity Level Date</a>	07/01/08					
108	N/A						