Treatment Episode Data Set (TEDS)
State Instruction Manual

Discharge Data

With
National Outcomes Measures (NOMS)

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CHAPTER 1
INTRODUCTION

1.1 Purpose and Scope

This document describes the Treatment Episode Data Set (TEDS) discharge data system, including the National Outcomes Measures (NOMS) data elements, and provides the information needed to produce TEDS data files and submit the files to the TEDS Contractor. The principal audience for this document is State staff participating in the collection and submission of TEDS data. This document has a companion document, the Treatment Episode Data Set State Instruction Manual for Admissions Data. This document assumes that the State staff is familiar with the content and concepts covered in the companion document.

Information in this document related to the National Outcomes Measures (NOMS) is relevant to States that are including the NOMS data elements in their TEDS data submissions and are participating in the State Outcomes Measurement and Management System (SOMMS) subcontracts.

NOMS specific information is presented in highlighted text.

Every effort has been made to make this Manual consistent with the NOMS reporting requirements, however, in the event there are discrepancies, the requirements specified in the SOMMS subcontract for NOMS reporting take precedence.

1.2 Background

Section 505 (a) of the Public Health Service Act (42 US code 290aa-4) directs the Administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA) to collect data on the number of public and private substance abuse treatment programs and the number and characteristics of individuals seeking treatment through such programs.

This legislation resulted from a need for information at the federal level to document what was being accomplished with block grant funding for substance abuse treatment and prevention. To address the requirements of the legislation and to provide substance abuse treatment data for the research community, SAMHSA began collecting data through the TEDS admissions data system in 1992. To provide more comprehensive data on the treatment of substance abuse clients, SAMHSA began development of the TEDS discharge data system in 1996. After several years of testing in several States, a system was adopted that provides basic discharge data that can be related to the corresponding client admission.
In 2005, the TEDS data system was modified to include data elements for National Outcomes Measures (NOMS). In the TEDS discharge system, 10 NOMS data elements were added. (These are items DIS 21 (A) through DIS 26 in appendix B). Another NOMS data element was added in 2010 (designated DIS 27 in appendix B).

1.3 Document Overview

Chapter 2 describes the discharge data set, reporting options and the quality control procedures.

Chapter 3 describes the data sets that make up a discharge record, namely, the System Data Set (identifying information about the submission), the Discharge Data Set (data elements that describe the discharge event), the Admission Data Set (data elements derived from the companion admission), and the National Outcomes Measures Data Set (data elements added specifically for the construction of outcomes measures).

Chapter 4 describes the procedures for updating the States TEDS crosswalk plan to include discharge data.

Chapter 5 defines a treatment episode as a model for determining the events that should trigger input records to TEDS. The content of the discharge record is discussed and the procedures for submitting the discharge data are presented.

Chapter 6 describes the feedback given to a State after its submission to TEDS has been processed, and the procedures a State should follow to correct records which contain errors. The responsibilities of both the State and the TEDS contractor are presented.

There are three appendices. Appendix A shows examples of the submission acknowledgment letter and the processing reports that provide feedback to the States on the outcomes of processing their data submissions. Appendix B provides detailed information about the discharge data set, including the NOMS, in a data dictionary. Appendix C presents the acceptable formats and methods for submitting the data, and the discharge data file structure.
CHAPTER 2
DISCHARGE DATA SYSTEM OVERVIEW

The submission of discharge data to TEDS requires the following steps:

1. Read this Instruction Manual.
2. Determine the State source for each discharge data item specified in Appendix B and the related admissions data items.
3. Amend the TEDS Crosswalk to include the discharge data items and submit to Synectics (see chapter 4).
4. With approval of the crosswalk, develop a system for producing discharge records in accordance with the approved crosswalk and technical submission instructions in appendix C.
5. Submit a test file of discharge records.

2.1 General Plan

When it is feasible, for States that have not yet begun submitting TEDS discharge data, the initial State data discharge submission should include discharges dating from January 1, 2006 through their most recent data. Thereafter, submissions should be made on a regular basis following the schedule followed for the TEDS admissions data. During processing of the TEDS discharge file, each discharge record will be matched by Synectics with its corresponding admission record. A discharge record with no matching admission record will be added to the TEDS database, but will be identified in the processing report as a non-matching record, i.e. one which needs the associated admission record in TEDS. The discharge data set includes selected items from the admission and the discharge events, which are to be submitted in a single record. The admission data on the discharge record should be included regardless of the year of admission.

In some States, a change in service or provider within a treatment episode results in a discharge and subsequent admission to the new service or provider. Such change of service or provider “admissions” are normally submitted in the TEDS admission data system as "Transfers." A discharge under these conditions should be submitted in the discharge system with the reason for discharge being "Transfer." A more detailed discussion of transfers is provided in Sections 5.2 and 5.3 below.

2.2 Data Set Items for Discharge Record

The basic discharge record is composed of three data elements about the submission, seven elements relating to the discharge event, and ten elements from the corresponding admission event.

States submitting NOMS under the SOMMS subcontracts will also include 11 NOMS data elements.
2.2.1 Items on discharge record that refer to the submission

- System transaction type (either an add, change or delete)
- State Code
- Date of submission

2.2.2 Items on record that refer to discharge event

- Provider identifier
- Client identifier
- Co-Dependent/Collateral code
- Type of Service at discharge
- Date of last contact
- Date of discharge
- Reason for discharge, transfer or discontinuance of treatment

2.2.3 Items on record that refer to admission event

   The following items must exactly match the corresponding items on the associated admission record so that the discharge record and associated admission record will match on all of these items and, therefore, can be linked:

- Provider identifier
- Client identifier
- Co-Dependent/Collateral code
- Client transaction type
- Date of admission
- Type of Service at Admission
- Date of birth
- Sex
- Race
- Ethnicity

2.2.4 Discharge NOMS

   The following are required data elements for States submitting NOMS data elements under the SOMMS subcontracts.

- Substance Problem at discharge (primary, secondary and tertiary)
- Frequency of Use (primary, secondary and tertiary problem)
- Living arrangements at discharge
- Employment status at discharge
- Detailed not in labor force at discharge
- Number of arrests in 30 days prior to discharge
- Frequency of attendance at self-help programs in 30 days prior to discharge
2.3 Data Quality Control

States should develop procedures and perform the edits necessary to ensure that data submitted to TEDS are accurate and in the correct format. The TEDS Contractor will verify that the records meet the standards described in this document. Having good quality control procedures assures SAMHSA and the States that the TEDS Contractor is providing accurate and valid data for administrative and research purposes.

States submitting NOMS data elements under the SOMMS subcontracts should meet the quality and timeliness requirements in their NOMS contract.

2.4 TEDS Contractor Processing

The TEDS contractor is responsible for the prompt processing of State data submissions into the TEDS master files, insuring appropriate security of State submission media (diskettes or CD), and promptly returning the media to the States.

State TEDS Submission System (STSS)
States should use the State TEDS Submission System (STSS) for submitting TEDS data if possible. This system enables the State to test/validate the records in each data file, make any needed corrections and submit the file to Synectics for final processing. Processing reports which summarize the outcome of the test processing and provide detailed lists of any errors are available immediately to the STSS user.

The STSS is available on the following web site:

https://dasis9.samhsa.gov/StateTEDS


2.5 State Feedback and Error Reports

States using the STSS to submit TEDS data files will have all processing reports available online through the STSS. States submitting data by other means will have the processing reports emailed to them when processing is completed. The TEDS Contractor will provide States with feedback after each submission that will include an Acknowledgment Letter and two processing
reports: Submission Processing Results Summary and Fatal and Warning Errors in TEDS Submission-Grouped by Reason. These reports are described in more detail in section 6.3 below, and examples are shown in Appendix A. States are expected to review these reports for each submission and make corrections to erroneous data as needed. Any problems noted by the State should be reported to the TEDS Contractor.
A major reason for collecting discharge data is to link together the admission and the discharge record for individual clients. It is important, therefore, for States to report data for all their clients who are discharged, terminated or who have broken off contact with the provider.

Included in both the admission and the discharge data sets are several key fields. The key fields combine to form a unique identifier (retrieval key) for the record in the TEDS discharge database. Any discharge record submitted to TEDS that matches a record already in the TEDS database on all the discharge key fields is rejected as a duplicate.

Discharge Data Key fields are:

- State Code
- Provider Identifier
- Client Identifier
- Co-dependent/Collateral code
- Type of Service at Discharge
- Date of Discharge

3.1 The Discharge Data Set

All of the following items are required on the discharge record.

Data items relating to the submission process:

- **System Transaction Type** - Identifies whether the record is an addition to the TEDS database, a correction to a field in an existing record in the database, or a deletion of an existing record in the database.

- **State Code** --Identifies the State submitting the record using the standard two-character FIPS Code. This is a key field.

- **Reporting Date** --Identifies the month and year the discharge record file is submitted to TEDS. Every record in a State submission must contain the same reporting date.

Data items relating to the discharge:

- **Provider Identifier**--Identifies the provider of the drug or alcohol abuse treatment at the time of discharge. This is a key field.

- **Client Identifier**--Identifies the client receiving treatment. The identifier is the same identifier used in the admission record. This is a key field.
Participation in SOMMS state subcontracts requires that the State’s client ID be unique within the State. This means that a client is assigned an ID number that will be used each time the client receives substance abuse treatment services, regardless of when or where in the state the service is received or who provides the service, and no other client can be assigned the same number in TEDS.

- **Co-Dependent/Collateral**—Specifies whether the client’s principal problem being treated is substance abuse or arises from the client’s relationship with someone with a substance abuse problem. This is a key field.

- **Type of Service at Discharge**—Identifies the treatment the client is receiving at the time of discharge. This is a key field.

- **Date of Last Contact**—Specifies the month, day and year the client last received treatment. In the event of a transfer, it is the date the service terminated or the date the treatment ended with a particular provider. While not a key field, Date of Last Contact is the preferred date for calculating the client’s length of stay in treatment, an important National Outcomes Measure, and therefore is required for all records.

- **Date of Discharge**—Specifies the month, day and year the client was formally discharged or transferred from the treatment facility, service or program. This date may be the same as date of last contact. This is a key field.

- **Reason for Discharge, Transfer or Discontinuance of Treatment**—A code to indicate the outcome of the treatment episode. The treatment may or may not have been completed. (See Chapter 5 for definition of "completed treatment").

**Data items relating to the associated admission are:**

The following admissions data items are to be reported on the discharge record, but the data should be derived from the admission record that corresponds to the discharge being reported.

- **Provider Identifier at admission**—Identifies the provider of the drug or alcohol abuse treatment at the time of admission. This field must use the State's provider ID as it appears in SAMHSA’s Inventory of Substance Abuse Treatment Services (I-SATS). (If the State does not assign its own provider ID's, the SAMHSA I-SATS ID should be used.)

- **Client Identifier at admission**—Identifies the client receiving treatment.
• **Co-Dependent/Collateral at admission**—Specifies whether the client’s principal problem being treated is substance abuse or arises from the client’s relationship with someone with a substance abuse problem.

• **Client Transaction Type at admission** - Identifies whether the admission record is for an initial admission or a transfer/change in service.

• **Date of Admission**—Specifies the month, day and year the client was admitted and began receiving treatment. In the event of a change of service or provider within an episode of treatment, this is the date the client began treatment at the new provider or service or both.

• **Type of Service at admission** --Identifies the type of treatment the client received at time of admission.

• **Date of Birth**--Specifies the client’s date of birth.

• **Sex**--Specifies the client’s sex.

• **Race** -- Identifies the client’s race

• **Ethnicity**--Identifies the client’s specific Hispanic origin, if applicable.

**NOMS Data items are:**

<table>
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<tr>
<th>Data Item</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td><strong>Substance Problem Codes at discharge</strong></td>
<td>Identifies the client’s substance problem(s) at the time of discharge or discontinuance of treatment. Three fields are provided to identify the client’s primary, secondary and tertiary substance problems at discharge. The codes for these fields are identical to the list of codes for the Substance Problem(s) at admission.</td>
</tr>
<tr>
<td><strong>Frequency of use at discharge</strong></td>
<td>Specifies how often the client is using the substance(s) at the time of discharge. Fields are provided to identify the frequency for the primary, secondary and tertiary substances of abuse.</td>
</tr>
<tr>
<td><strong>Living arrangements at discharge</strong></td>
<td>Specifies whether the client is homeless, a dependent or is living independently at the time of discharge or discontinuance of treatment.</td>
</tr>
<tr>
<td><strong>Employment status at discharge</strong></td>
<td>Designates the client’s employment status at the time of discharge or discontinuance of treatment.</td>
</tr>
<tr>
<td><strong>Detailed not in labor force at discharge</strong></td>
<td>This field provides detailed information on clients who are not in the labor force at the time of discharge or discontinuance of treatment.</td>
</tr>
</tbody>
</table>
- **Arrests in 30 days prior to discharge** – Specifies the number of times in the 30 days prior to discharge that the client was arrested for any cause. In the event that the client was in treatment fewer than 30 days, this item refers to number of arrests during the treatment period only.

- **Frequency of attendance at self-help programs in 30 days prior to discharge.**
  Specifies the number of times that the client attended a self-help program such as meetings of AA, NA or similar groups. When discharge is less than 30 days from admission, this is interpreted to be the frequency of attendance since the date of admission.

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**Reporting Points:**

The admission data items on the discharge record (provider identifier at admission, client identifier at admission, co-dependency status at admission, client transaction type at admission, date of admission and type of service at admission), must match the comparable items in the associated TEDS admission record. During the processing of discharge data, these data items in the discharge record are used to find the matching admission record in the TEDS admission database. The discharge record will match an admission record only if the records match on all of these data items. It is expected that a very high percentage (90-100%) of discharge records will have a matching admission record in the TEDS database.

All discharge data items on the discharge record must reflect their values at discharge. Discharge items should not be retained/derived from the admission record. Any discharge item that cannot be updated or confirmed as unchanged since admission should be coded as “unknown”.

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4.1 Objectives

The objectives of the TEDS Crosswalk Plan are to document the source of the State discharge data and to ensure that the data items in the State’s system are accurately translated to the appropriate TEDS data items. Every effort is made to establish a consistent conversion of State data items to the TEDS database. SAMHSA recognizes, however, that some aspects of State systems may not exactly match the item definitions or categories for TEDS. When such variations exist, they need to be documented in the crosswalk, along with State variations of the episode model described in Chapter 5. This information will aid SAMHSA and other researchers in the interpretation of each State’s TEDS data.

4.2 Preparing a Crosswalk Plan for Discharge Data

States amend their crosswalk to add the discharge data items when beginning to participate in the Discharge Data System. Guidelines to assist States in mapping State data to the TEDS data sets are described in detail in the Treatment Episode Data Set State Instruction Manual for Admission Data. The admissions data items included in the discharge record are already part of the State’s current crosswalk and need not be updated unless they have been changed. A copy of the State’s current crosswalk may be obtained from the crosswalk manager at Synectics, or from the DASIS website at http://wwwdasis.samhsa.gov/dasis2/teds.htm. A crosswalk worksheet in Excel format is also available from Synectics or may be downloaded at the same web address. (When completing the worksheet, only data elements requiring change or addition need to be entered/modified. All elements that are correct on the current crosswalk may be designated as “current”).

States submitting NOMS data elements under the SOMMS subcontracts must also amend their crosswalk with the NOMS elements and review all other data elements for accuracy.

Upon request, the TEDS Contractor will assist a State to develop a TEDS Crosswalk for discharge data items. States are encouraged to develop a draft crosswalk for the discharge data using the Excel worksheet or making changes on their current crosswalk. It will be necessary for the State to add the State codes that correspond to each of the TEDS codes for all new and changed items. After a draft of the Crosswalk Plan is completed, it should be sent to the TEDS Contractor for review. Once the Crosswalk Plan is in final form, it is sent to SAMHSA for final approval. To submit discharge data, the State will develop procedures for preparing a data file in accordance with the TEDS Crosswalk Plan. Once the Crosswalk Plan has been approved by SAMHSA, the State will be notified by the TEDS Contractor and arrangements will be made for the State to begin data submission.
Crosswalk worksheet

A worksheet for drafting a new crosswalk and for updating an existing crosswalk is available on the DASIS web site at http://wwwdasis.samhsa.gov/dasis2/crosswalk_worksheet.xls, or may be requested from Synectics. This is an Excel worksheet that can be completed and submitted electronically to the DASIS contractor, Synectics. Questions, comments and completed worksheets can be sent to TrishaC@SMDI.com

4.3 Reporting Changes in Data Set Items

Whenever a State adds, deletes or changes any data element it submits to TEDS, whether it is an admission item or a discharge item, it must notify the TEDS Contractor. The TEDS Contractor will work with the State to revise the State’s Crosswalk Plan and the TEDS control file to reflect these changes. This is very important because it affects SAMHSA’s ability to correctly identify the data elements when preparing reports based on the TEDS data.
CHAPTER 5
CLIENT DISCHARGE DATA

5.1 Definition of a Client

A client is defined by TEDS as a person who has been admitted for treatment of his/her own drug or alcohol problem. A co-dependent/collateral is defined by TEDS as a person who has no alcohol or drug abuse problem but is seeking services because of problems arising from his or her relationship with an alcohol or drug user, has been formally admitted to a treatment unit, and has his or her own client record or a record within a primary client record. Reporting of co-dependents to TEDS is optional. However, every admission and discharge record must indicate co-dependency/collateral status using the TEDS data item established for that purpose.

5.2 Definition of a Treatment Episode

For purposes of identifying the circumstances under which data should be submitted, TEDS assumes a simplified process model of treatment services delivery related to substance abuse. Basic to this model is a treatment episode, which is defined as the period of service between the beginning of a treatment service for a drug or alcohol problem and the termination of services for the prescribed treatment plan. The first event in this episode is an admission and the last event is a discharge. Any change in service and/or provider during a treatment episode should be reported as a discharge, with “transfer” given as the reason for termination. The subsequent admission should be reported in the TEDS admissions data system with a Client Transaction Type code of "T" for transfer. (States unable to provide or identify transfers should note that fact in their Crosswalk).

For TEDS purposes, "completion of treatment" is defined as completion of all planned substance abuse treatment for the current treatment episode. Completion of substance abuse treatment at one level of care or with one provider is not "completion of treatment" if there is additional treatment planned as part of the current treatment episode.

5.3 Reporting of a Discharge

When a treatment episode ends and a “discharge” occurs, this event is to be reported to TEDS in the form of a discharge record. For cases in which the client leaves treatment against facility advice, i.e., drops out, the client may not be formally discharged until considerable time has elapsed. (Sometimes these are called “administrative” discharges.) It is important that each State use an operational definition to assign a discharge date for clients that drop out of treatment and that the definition be noted on the State’s TEDS crosswalk. For States that do not already have such rules, TEDS encourages use of the following: Assume that a treatment episode has ended when an inpatient or residential client has not been seen for 3 days or an outpatient client has not been seen for 30 days. In such cases, the discharge date assigned should be as close as possible to the actual end of treatment; the date of last service may be used as the date of discharge.
Reporting point: A client who returns for treatment services after the elapsed time described in these guidelines (or other guidelines adopted by the State) is to be reported as an admission to a new treatment episode.

Reporting of co-dependents is optional. However, if the State has elected to report co-dependent admissions to TEDS, then it is expected that co-dependents will be reported in the discharge system.

5.4 Date of Discharge and Date of Last Contact

In many cases, the client’s Date of Discharge and Date of Last Contact will be the same or very close together. However, in situations such as those describe in the preceding section, a client may drop out of treatment and not be “discharged” for weeks or months after the end of treatment. Since the Date of Discharge may be used to calculate the length of stay in treatment, delayed discharge dates could result in invalid length of stay calculations. For this reason, the TEDS discharge data set includes both the Date of Discharge and the Date of Last Contact. States should report both the Date of Discharge and the Date of Last Contact in the TEDS discharge record.

5.5 Submission Procedures

5.5.1 Creating a TEDS Discharge Record

The State’s processing procedures convert the individual State data items and respective codes to TEDS codes in accordance with the State’s Crosswalk Plan. One record is created for each discharge (including terminations and transfers). The record should follow exactly the sequence of fields in the record layout shown in Appendix C.

Note that States submitting NOMS data elements under the SOMMS subcontracts may submit a data file with a different record length than States not reporting NOMS elements.

An important field for the proper processing of a record is the System Transaction Type field. This field directs the processing of the record. An “A” is entered into the System Transaction Type field for discharge records that are to be added to the TEDS database. A “C” in the System Transaction Type field is to change data in a record already in the TEDS database. A “D” is entered into the System Transaction Type field for discharge records that are used to delete a record from the TEDS discharge database that has matching key fields. See section 6.4.1 and 6.4.2 for a further discussion of these latter two cases.

The discharge data are to be submitted in a file format using procedures as specified in Appendix C (Technical Preparation Requirements). The TEDS Contractor can provide advice and guidance on converting State data to the TEDS format.
5.5.2 Scheduling Submissions

State’s first discharge submission
A State’s initial discharge data submission should include all of the discharges that have occurred since January 1, 2006 for which data are available. It is suggested that States beginning to submit discharge data do so by first sending a small test file containing between 200 and 500 records. Once this file has been processed successfully, submissions of the remaining data can be made on a regular basis. It is recommended that submissions be sent monthly, or that they be sent on the same schedule followed for the State’s admissions data. States will find a monthly schedule to their advantage because relatively small submissions will have fewer errors to fix in any one submission. Errors detected on one submission can be fixed and submitted in the next submission.

States submitting NOMS elements under the SOMMS subcontracts must submit data on either a monthly or quarterly basis.

5.5.3 Submission Information

Use of the State TEDS Submission System (STSS) is encouraged. This system enables the State to test/validate the records in each data file, review processing reports, make any needed corrections, and submit the file to Synectics for final processing. States using the STSS for submitting data to TEDS will have all processing reports immediately available through the STSS.

The STSS is accessed through the following web site: [https://dasis9.samhsa.gov/StateTEDS](https://dasis9.samhsa.gov/StateTEDS)


States that choose to submit data other than through the STSS must provide the information in the TEDS Data Submission Form (shown in Appendix D), which is relevant to the submission medium. Data files are to be submitted in one of the following methods:

- CD or diskette - Data submitted on diskette or CD should be mailed to:

  Synectics for Management Decisions, Inc.
  SAMHSA/TEDS Project Team
  1901 North Moore Street
  Suite 900
  Arlington, VA 22209
Appropriate mailing containers should be used to avoid damage and delay in the receipt of the submission.

- Electronic transmission - To submit data electronically, States should contact the Synectics TEDS Support Team to identify a mutually acceptable methodology for transmission. The telephone number for scheduling the transmission is (703) 807-2340. When submitting data electronically, the State needs to provide the TEDS Contractor with the relevant information contained on the TEDS Data Submission Form.

- Internet transmission - Submission of data via the Internet is also permissible. States wanting to transmit files via the Internet must contact the TEDS staff at Synectics to make appropriate arrangements.
CHAPTER 6
PROCESSING STATE DATA

This chapter describes the quality control process used by the TEDS Contractor, the feedback provided to the States and the procedures used to correct and resubmit data.

6.1 Submission and processing through the STSS

When data are submitted through the STSS, most processing and editing steps are done automatically, with immediate feedback of processing reports available to the State. Data files uploaded by the State to the STSS are tested with all TEDS edit procedures, and processing reports are automatically generated. States may correct errors and retest the file until the data are deemed ready for final processing and addition to the TEDS database. At that time, the State submits the file through the STSS to the TEDS contractor, who does the final processing.

The information that follows describes procedures that relate to the STSS or are performed by Synectics for non-STSS data submissions.

6.2 Objectives of the TEDS Quality Control Program

The objective of the TEDS quality control procedures is to assure that States are providing accurate data that meet the TEDS data standards established by SAMHSA. The feedback provided to the States is used to help States identify and resolve data problems. This ongoing process helps SAMHSA and the States to monitor and improve the quality of the data.

6.2.1 Responsibilities

The TEDS Contractor is responsible for:

- Ensuring that States are submitting data in an acceptable file format
- Checking each record submitted to ensure it contains all TEDS key fields
- Cross checking information within records to ensure consistency and accuracy
- Ensuring that each record in the TEDS database is unique
- Notifying States of errors in their data submissions and providing help to resolve any State submission problems

Each State is responsible for:

- Ensuring that each record in the data submission contains the required key fields, all fields in the record contain valid values, and no records are repeated
- Cross-checking data items for consistency across fields
- Submitting data to TEDS according to the agreed-upon reporting schedule
- Notifying the TEDS Contractor as soon as the State determines it cannot meet a scheduled submission
Responding promptly to TEDS error reports by resubmitting corrected data where appropriate

6.3 TEDS Contractor Processing and Data Editing

Basic to the processing of TEDS records are the key fields and the System Transaction Type codes. The key fields are combined to create a unique record identifier. When processing the TEDS data, these fields are used as a unique retrieval key to search the database. The System Transaction Type code directs the system to Add the record to the database, Delete an existing record from the database, or Change a record already in the database. The key fields and System Transaction Type codes are critical to the proper processing of a TEDS record and are especially important for correcting or deleting records existing in the TEDS database. Records containing invalid entries in any key field will be rejected.

Records submitted with a System Transaction Type code of “A” will be added to the database unless the key fields match a record already in the TEDS database. If the key fields match a record in the TEDS database, the new record will be rejected as a duplicate. Records submitted with a System Transaction Type code of “D” will delete a record in the database with matching key fields. Records submitted with a System Transaction Type code of “C” will change a record in the database with matching key fields.

A common mistake is the submission of a record with the wrong System Transaction Type code. Frequently, a record is submitted to change or correct a record already in the database, but is sent with a System Transaction Type code of “A” instead of “C.” Instead of correcting an existing record, these records are rejected as duplicates of records already in the database. More details on record correction and deletion are given in section 6.4.1 and 6.4.2

Within each record, an edit is done on a field-by-field basis to make sure each field has valid codes. A description of the valid codes for the discharge data items is given in Appendix B. If invalid codes are detected in the submission, they are identified in the processing report. Records having valid key fields but one or more invalid codes in other fields are added to the TEDS database, and the invalid codes are reported to the State on the submission processing reports. States are urged to review these reports and submit corrections in the next data submission. When data are submitted through the STSS, the corrections should be made before the file is submitted for final processing.

6.4 Reporting State’s Submission Results

An important part of the TEDS processing system is reporting to the State the processing results for each submission. In this way, States and SAMHSA are able to monitor and improve the quality of reporting. The STSS generates processing feedback reports automatically for files submitted through STSS. When data are submitted in another manner, Synectics processes each State submission with the TEDS data system in an editing mode. In this mode, edits are performed and rejected records and accepted records with errors are identified. The results are printed to reports to permit a review of the data prior to its addition to the TEDS database. If the
submission has few rejected records or accepted records with errors, the processing of the submission is completed by adding all accepted records to the discharge database. When processing is complete, processing reports are generated showing the results of the edit, which are emailed to the State. If there are accepted records with errors, the State may use the reports to identify the problem and submit corrections. States are expected to resolve the errors for records accepted in the database and submit corrections for them with the next regular submission. As noted above, when STSS is used, errors are detected early and corrections are made prior to data submission through the STSS.

If the edit run shows a significant number of records with errors, a significant number of records rejected, or a pattern of errors that indicates a systematic data problem, then a member of the TEDS project team will contact the State by phone to discuss the problem. In these situations, records are not added to the database until the State has made the necessary corrections and resubmitted the data.

If the submitted data file is unreadable, the state will be notified immediately by the TEDS contractor so the State can resolve the problem and resubmit the data.

For each (non-STSS) data submission, States will be sent some or all of the following submission processing reports:

- **Acknowledgment letter** confirming that the TEDS contractor has received and incorporated the State’s data into TEDS. (See Appendix A for an example.)

- **Submission Processing Results Summary-Discharges** showing the number of records submitted, accepted and rejected in the submission. This report also provides information on the number of records rejected by reason for rejection, and provides summary statistics on any invalid data in the Minimum and Supplementary Data Set fields.

The State will also be sent one or more of the following reports:

- **Fatal and Warning Errors in TEDS Submission-Grouped by Reason** - displays records rejected in the processing because of problems found in key fields (fatal errors) and records with errors in non-key fields that will be added to the database with the error. Records are displayed in groups according to the reason for the error.

- **Fatal and Warning Errors in TEDS Submission-Grouped by Field** - displays records rejected in the processing because of problems found in key fields (fatal errors) and records with errors in non-key fields that will be added to the database with the error. Records are displayed in groups according to the field responsible for the error.
The Submission Processing Results Summary—Discharges and the Fatal and Warning Errors in TEDS Submission reports, along with other report options, are immediately available to the STSS user. These reports will be sent as email attachments for data files not submitted through the STSS.

Examples of the acknowledgment letter and the error reports are shown in Appendix A.

6.5 Error Resolution and Correction of Client Records

A review of the submission processing reports is very helpful in identifying both systematic and individual errors found in edited records. The Submission Processing Results Summary provides counts of the total number of errors found in any of the fields of the discharge records submitted. The records are divided into two groups: (1) records rejected because they are duplicates or have an invalid code in a key field, and (2) records with an error in a non-key field. Examination of this report will give an overall evaluation of the quality of the submission. If State edits are working properly, the number of errors in any submission should be minimal. If a field has a large number of errors, it usually indicates a systematic error that, once corrected, will resolve the errors for all or many of the records.

Non-systematic errors found in a submission will require the examination of individual records to identify the error and discover the cause. Examination of the Fatal and Warning Errors in TEDS Submission report will help States to determine the cause of the errors. This and related reports show each individual record by Client ID, provide a brief explanation of the field that failed the edit, and show the erroneous "raw" data submitted (see Appendix A). Examination of this information will help States to resolve most errors. For any cases that are still in question, the TEDS Contractor will assist the State in error resolution.

6.5.1 Making Corrections to Discharge Records in TEDS Database

Corrections to records previously added to the database can be made in either of two ways. One way is to resubmit the complete record with the correct data using a “C” in the System Transaction Type field. The new, corrected record must contain the information for all five key fields, along with a “C” entered in the System Transaction Type field. All the fields in the discharge record can be corrected this way except “key” fields.

- Note that changes to admission data items (in the discharge record) must be the result of errors entering admission data on the discharge record and not errors in the original TEDS admission record. If the error is in the original TEDS admission record, then the original admission record must be corrected according to the TEDS admission data system procedures. Any time that admission data are changed, the final data must be the same on the admission and corresponding discharge record so that the records will match.

The second method for correcting erroneous data in a previously submitted record is to resubmit the original (erroneous) record with System Transaction Type code “D”, followed by a correct replacement record with System Transaction Type code “A” (see below). All data items may be...
corrected in this manner, including key fields. This method is particularly useful when numerous data items within a record are in error.

6.5.2 Deleting a Discharge Record from the TEDS Database

It may be necessary to remove a record from the TEDS database because the record was submitted in error or, as noted in the above section, numerous fields have errors. To delete a record from the database, a record must be submitted containing at least the System Transaction Type code, State Code, Reporting Date, and the key fields from the discharge data set (Provider ID, Client ID, Co-dependent code, Type of Service at Discharge, and Date of Discharge) The System Transaction Type code must have a value of “D”. Alternatively, a record can be deleted by submitting the complete record previously submitted with a “D” in the System Transaction Type code.
# APPENDIX A
## TEDS PROCESSING REPORTS

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<thead>
<tr>
<th>Section</th>
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<th>Page</th>
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<td>Acknowledgment Letter</td>
<td>2</td>
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<td>A.2</td>
<td>Processing Reports</td>
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<td>A.2.1</td>
<td>Submission Processing Results Summary</td>
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<td>A.2.2</td>
<td>Fatal and Warning Errors in TEDS Submission</td>
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<td>Example-Submission Processing Results Summary</td>
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<td>Example-Fatal and Warning Errors in TEDS Submission</td>
<td>6</td>
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</table>
Date

Ms. State Submitter
Coordinator, Research and Evaluation
Department of Human Resources
Division of Alcohol and Drug Abuse
1000 Any Street
State Capitol, AS 99999-9999

Dear Ms. Submitter:

Discharge submission number AS062008 was received on June 10, 2010 and processing was completed on June 11, 2010.

Enclosed for your review are the Submission Processing Results Summary report and the Fatal and Warning Errors in TEDS Submission report, which provide details of the recently processed submission. Please direct inquiries regarding the results of the submission to the TEDS contractor at the address below:

Ms. Mayra Walker
Synectics, Inc.
1901 North Moore Street
Suite 900
Arlington, VA 22209

Or contact Ms. Walker at:
Voice: 703-807-2337
Fax: 703-528-8990
Email: mayra@smdi.com

Please note that, when applicable, the submission media has been returned to the person indicated in the instructions provided by your State. Thank you for your continued cooperation.

Sincerely,

TEDS Project Manager

February 2010
A.2 Processing Reports

When a TEDS Discharge data file is processed by the TEDS Contractor, reports are generated that provide detailed information about the outcome. These reports provide information about the number and types of records rejected in the processing, and errors found in records accepted into the database. Specific records with errors are listed for State review and correction. These reports are sent to the State TEDS Contact as email attachments.

When TEDS data files are processed and submitted through the STSS, the processing summary and error reports described here are available to the STSS user immediately after a file is validated (tested). When a file is submitted in any other manner to Synectics, these reports are sent as email attachments to the State immediately after the file is processed.

When reports are generated, three types (levels) of errors may be displayed: Fatal errors, Warning errors and Information errors. A “Fatal Error” is an error in an individual record that results in that record being rejected (not added to the TEDS database). Generally, fatal errors are the result of missing or invalid data in a key field. “Warning Errors” are non-fatal errors, meaning the record will be added to the TEDS database, though the value in the erroneous field(s) will be changed to the invalid code. “Information Errors” are situations in the data that do not require corrective action, but may be useful to the State to improve some aspect of TEDS. All 3 levels of errors are described in detail for each affected record in the TEDS processing reports. When data are processed and reports generated by Synectics, the error reports generally include only fatal and warning errors. When data are submitted through the STSS, the user may chose the level of errors to be displayed. The default report level in the STSS it to display the fatal and warning level errors. Two basic processing reports are produced as follows:

A.2.1. Submission Processing Results Summary - Discharges (see page A-5 below) – This report summarizes the processing outcome by showing:

A. The number of records accepted and rejected for each “system transaction type” (add, change or delete record).
B. The number of rejected records by the reason for rejection, for each transaction type.
C. The number of errors in accepted records for each data field.
A.2.2 Fatal and Warning Errors in TEDS Submission - Grouped by Reason (see page A-6 below) – This report displays specific information for each rejected record and for each error in records accepted into the TEDS database. Records are usually grouped according to the reason for the rejection or error, but the STSS user may chose to group them according to the data field with an error.

Displayed for each record are:

- Key fields - System transaction code, provider ID, client ID, Co-dependent code, Date of Discharge, and type of service at discharge code.
- Record Number – The sequential number of the record in the data file submitted by the State.
- Raw Value – The value of the erroneous data, or the value in the field causing a fatal error, when applicable.
- Critical Error – Indicator as to whether the error was fatal or not.
- Explanation – Brief description of the reason for the error.

Further details of the “explanation” of errors can be found in the “Listing of Error Report Messages by Field Name” on page 7 in Appendix E of the TEDS State Instruction Manual – Admissions Data.
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
OFFICE OF APPLIED STUDIES
TREATMENT EPISODE DATA SET
SUBMISSION PROCESSING RESULTS SUMMARY - DISCHARGES

SUBMISSION NUMBER: NE062009
STATE: NE - Nebraska
REPORTING DATE: 06/2009
RECORDS SUBMITTED: 4,098

DATE OF LAST CONTACT/ DISCHARGE
EARLIEST 04/01/2009
LATEST 06/30/2009

PROCESSING RESULTS SUMMARY

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REJECTED RECORDS: REASONS FOR REJECTION

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ACCEPTED RECORDS WITH NO ADMISSION RECORD INFORMATION 1
ACCEPTED RECORDS WITH NON-CRITICAL ERRORS 104
ACCEPTED RECORDS WITH NO ASSOCIATED ADMISSION RECORD 68

ACCEPTED RECORDS: DATA SET ERRORS

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## FATAL AND WARNING ERRORS IN TEDS SUBMISSION - GROUPED BY REASON

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APPENDIX B

TEDS Discharge Data Dictionary
with
National Outcomes Measures
Appendix B
TEDS Discharge Data Items

The discharge record is a client specific record and contains System Data Elements (information needed to process the record), Discharge Data Elements (data items about the discharge event), Corresponding Admission Data Elements (data items from the admission that corresponds to the discharge), and National Outcomes Measures (NOMS) (data items specified for NOMS data collection). This data dictionary contains detailed information about these data items including the item definitions, acceptable item categories and coding structure, and guidelines for collecting and reporting the data to TEDS. (Note that the definitions for the corresponding admissions items are the same as those used for the TEDS admissions data as provided in the Treatment Episode Data Set State Instruction Manual for Admission Data).

NATIONAL OUTCOMES MEASURES (NOMS)

The NOMS data elements will be reported in TEDS by States that are participating in the State Outcomes Measurement and Management System (SOMMS) subcontracts. Participation in SOMMS includes reporting all of the following data elements in the TEDS discharge record, including:
- All System Data Set items;
- All Discharge Data Set items, including a state-wide unique client identifier;
- All designated items from the admissions data set; and
- The 11 highlighted NOMS discharge items, which are the new NOMS outcomes measures.

DATA SET ELEMENTS FOR DISCHARGE RECORD

<table>
<thead>
<tr>
<th>DISCHARGE DATA SET ITEM</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>System data Set</strong></td>
<td></td>
</tr>
<tr>
<td>System transaction type (DIS 1)</td>
<td>4</td>
</tr>
<tr>
<td>State code - key field (DIS 2)</td>
<td>5</td>
</tr>
<tr>
<td>Reporting date (DIS 3)</td>
<td>6</td>
</tr>
<tr>
<td><strong>Discharge data Set</strong></td>
<td></td>
</tr>
<tr>
<td>Provider identifier - key field (DIS 4)</td>
<td>7</td>
</tr>
<tr>
<td>Client identifier - key field (DIS 5)</td>
<td>8</td>
</tr>
<tr>
<td>Co-dependent/collateral - key field (DIS 6)</td>
<td>9</td>
</tr>
</tbody>
</table>
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Date of last contact (DIS 8) .................................................................................. 12
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Co-dependent/collateral (DIS 13) .......................................................................... 18
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Employment status at discharge (DIS 24) NOM .............................................. 35
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Number of arrests in 30 days prior to discharge (DIS 26) NOM .......................... 37
Frequency of attendance at self-help programs in 30 days prior to discharge (DIS 27) NOM .......................... 38
Description: Designates whether the record adds information to the TEDS database, changes an existing record in the database, or deletes an existing record in the database.

Valid Entries:

A (Add)
C (Change)
D (Delete)

An invalid entry in this field is automatically changed to "A."

Guidelines: Corrections and other changes to a record in the TEDS database can be accomplished by Submitting a "Change" (C) record or by submitting a delete (D) record along with an add (A) record to replace the deleted record.

States submitting NOMS data under the SOMMS subcontracts should use the “change” (C) process to make data corrections when possible.

Other Fields: None

Field Length: 1

ASCII Format Information:

Field: 1
Data Type: Alphanumeric
Begin Column: 1
End Column: 1
STATE CODE - (KEY FIELD)  DIS 2

Description: Identifies the state submitting the record.

Valid Entries: The valid FIPS two-letter state code for the submitting State.
   An invalid entry in this field automatically causes record to fail.

Other Fields: None

Field Length: 2

ASCII Format Information:

<table>
<thead>
<tr>
<th>Field:</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Type:</td>
<td>Alphanumeric</td>
</tr>
<tr>
<td>Begin Column:</td>
<td>2</td>
</tr>
<tr>
<td>End Column:</td>
<td>3</td>
</tr>
</tbody>
</table>
Description: The month and year that the data are submitted.

Valid Entries: **MMYYYY**

Identifies the month and year the records are submitted to the contractor. Every record in a state submission must contain the same date of submission.

Other Fields: None

Field Length: 6

ASCII Format Information:

```
Field: 3
Data Type: Numeric
Begin Column: 4
End Column: 9
```
Description: Identifies the provider of the alcohol or drug treatment service at time of discharge.

Valid Entries: Entry must contain a valid provider ID that matches the State ID or the I-SATS ID in SAMHSA's I-SATS.

If this field is blank, the record will not be processed.

Other Fields: None

Field Length: 15

ASCII Format Information:

<table>
<thead>
<tr>
<th>Field</th>
<th>Data Type</th>
<th>Begin Column</th>
<th>End Column</th>
</tr>
</thead>
<tbody>
<tr>
<td>Field:</td>
<td>4</td>
<td>10</td>
<td>24</td>
</tr>
<tr>
<td>Data Type:</td>
<td>Alphanumeric (Left-justified and filled with blank spaces)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Description: A “client” is a person who meets all of the following criteria:

1. Has an alcohol or drug related problem, or is being treated as a co-dependent.
2. Has completed the screening and intake process.
3. Has been formally admitted for treatment or recovery service in an Alcohol or Drug Treatment Unit.
4. Has his or her own client record.

(A person is not a client if he or she has only completed a screening or intake process or has been placed on a waiting list).

Other considerations:
- Participation in SOMMS state subcontracts will require that the State’s client ID be unique within the State and be used each time the client receives substance abuse treatment services, regardless of provider.
- Identifier must not be reassigned to another client.
- Identifier can be meaningless.
- Responsibility for assigning the identifier belongs to the State.
- Identifier must ensure confidentiality of client records.

Valid entries: An identifier of from 1 to 15 alphanumeric characters that is unique within the state for NOMS participation and for states not participating in NOMS must, at a minimum, be unique within the provider. If the field is blank, the record will not be processed.

Other Fields: None.

Field Length: 15

ASCII Format Information:

Field: 5
Data Type: Alphanumeric (Left-justified and filled with blank spaces)
Begin Column: 25
End Column: 39
Description: A Co-Dependent/Collateral is a person who has no alcohol or drug abuse problem, but:

1. Is seeking services because of problems arising from his or her relationship with an alcohol or drug user.
2. Has been formally admitted for service to a treatment unit.
3. Has his or her own client record or has a record within a primary client record.

Valid Entries: 1 Yes
              2 No

The record will not be processed if this field contains an invalid value.

Guideline: If the State opts to report co-dependent information, the mandatory fields are the same as for a discharge client.

Other considerations:

If a client with an existing record in the TEDS becomes a co-dependent, a new client record should be submitted indicating that the client is an "initial Admission" as a co-dependent. The reverse is also true for a person who is a co-dependent first and then becomes a client.

Other Fields: None

Field Length: 1

ASCII Format Information:
    Field:       6
    Data Type:   Numeric
    Begin Column: 40
    End Column:  40
Description: Describes the type of service the client was receiving prior to discharge.

Valid entries:

01 **Detoxification, 24-Hour Service, Hospital Inpatient**
   24 hour per day medical acute care services in hospital setting for detoxification for persons with severe medical complications associated with withdrawal.

02 **Detoxification, 24 Hour Service, Free-Standing Residential**
   24 hour per day services in non-hospital setting providing for safe withdrawal and transition to ongoing treatment.

03 **Rehabilitation/Residential—Hospital (other than detoxification)**
   24 hour per day medical care in a hospital facility in conjunction with treatment services for alcohol and other drug abuse and dependency.

04 **Rehabilitation/Residential—Short Term (30 days or fewer)**
   Typically, 30 days or less of non-acute care in a setting with treatment services for alcohol and other drug abuse and dependency.

05 **Rehabilitation/Residential—Long Term (more than 30 days)**
   Typically, more than 30 days of non-acute care in a setting with treatment services for alcohol and other drug abuse and dependency; this may include transitional living arrangements such as halfway houses.

06 **Ambulatory—Intensive-Outpatient**
   As a minimum, the client must receive treatment lasting two or more hours per day for three or more days per week. (Includes partial hospitalization)

07 **Ambulatory—Non-Intensive Outpatient**
   Ambulatory treatment services including individual, family and or group services; these may include pharmacological therapies.

08 **Ambulatory—Detoxification**
   Outpatient treatment services providing for safe withdrawal in an ambulatory setting (pharmacological or non-pharmacological).

96 **Not Applicable** – Use this code only for co-dependents/collateral clients.

If this field contains an invalid value or is blank, the record will not be processed.

Other Fields: None.

Field Length: 2
ASCII Format Information:
  Field: 7
  Data Type: Numeric
  Begin Column: 41
  End Column: 42
Description: The day when the client is last seen for a treatment. The date may be the same date as the date of discharge. In the event of a change of service or provider within an episode of treatment, it is the date the client transferred to another service or provider.

Valid Entries: **MMDDYYYY**

The record must have a valid date. MM must be 01 through 12 and DD must be 01 through 31. YYYY must be 2001 or later.

Other Fields: None.

Field Length: 8

ASCII Format Information:

<table>
<thead>
<tr>
<th>Field</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Type:</td>
<td>Numeric</td>
</tr>
<tr>
<td>Begin Column:</td>
<td>43</td>
</tr>
<tr>
<td>End Column:</td>
<td>50</td>
</tr>
</tbody>
</table>
Description: Specifies the month, day and year when the client was formally discharged from the treatment facility or service. The date may be the same as date of last contact. In the event of a change of service or provider within an episode of treatment, it is the date the service terminated or the date the treatment ended at a particular provider.

Valid Entries: MMDDYYYY

The record must have a valid date. MM must be 01 through 12 and DD must be 01 through 31. YYYY must be 2001 or later.

Other Fields: None.

Field Length: 8

ASCII Format Information:

Field: 9
Data Type: Numeric
Begin Column: 51
End Column: 58
REASON FOR DISCHARGE, TRANSFER, OR DISCONTINUANCE  DIS 10
OF TREATMENT

Description: Indicates the outcome of treatment or the reason for transfer or discontinuance of treatment

Valid Entries:

<table>
<thead>
<tr>
<th>Code</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Treatment completed</td>
</tr>
<tr>
<td>02</td>
<td>Left against professional advice (includes “dropped out” of treatment)</td>
</tr>
<tr>
<td>03</td>
<td>Terminated by facility</td>
</tr>
<tr>
<td>04</td>
<td>Transferred to another substance abuse treatment program or facility</td>
</tr>
<tr>
<td>14</td>
<td>Transferred to another substance abuse treatment program or facility, but did not report.</td>
</tr>
<tr>
<td>05</td>
<td>Incarcerated - This code is to be used for all clients whose course of treatment is terminated because the client has been incarcerated.</td>
</tr>
<tr>
<td>06</td>
<td>Death</td>
</tr>
<tr>
<td>07</td>
<td>Other</td>
</tr>
<tr>
<td>08</td>
<td>Unknown</td>
</tr>
</tbody>
</table>

Guidelines:

<table>
<thead>
<tr>
<th>Code</th>
<th>Category</th>
<th>Comments/Guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Treatment completed</td>
<td>All parts of the treatment plan or program were completed.</td>
</tr>
<tr>
<td>02</td>
<td>Left against professional advice (includes drop-outs)</td>
<td>Client chose not to complete treatment program, with or without specific advice to continue treatment. Includes clients who “drop out” of treatment for unknown reason and clients who have not received treatment for some time and are discharged for “administrative” reasons.</td>
</tr>
<tr>
<td>03</td>
<td>Terminated by facility</td>
<td>Treatment terminated by action of facility, generally because of client non-compliance or violation of rules, laws or procedures (not because client dropped out of treatment, client incarcerated or other client motivated reason).</td>
</tr>
<tr>
<td>04</td>
<td>Transferred to another substance abuse treatment program or facility</td>
<td>Client was transferred to another substance abuse treatment program, provider or facility, and reported or it is not known whether client reported</td>
</tr>
<tr>
<td>14</td>
<td>Transferred to another substance abuse</td>
<td>Client was transferred to another substance abuse treatment program, provider or facility, and it is known that client did not report the next program.</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
<td>Additional Information</td>
</tr>
<tr>
<td>------</td>
<td>---------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>05</td>
<td>Incarcerated</td>
<td>Jail, prison, house confinement</td>
</tr>
<tr>
<td>06</td>
<td>Death</td>
<td>Self explanatory</td>
</tr>
<tr>
<td>07</td>
<td>Other</td>
<td>E.g. Moved, illness, hospitalization, or other reason somewhat out of client’s control</td>
</tr>
<tr>
<td>08</td>
<td>Unknown</td>
<td>Client status at discharge in not known because, for example, discharge record is lost or incomplete. <strong>DO NOT USE THIS CATEGORY FOR CLIENTS WHO DROP OUT OF TREATMENT, WHETHER REASON FOR DROP-OUT IS KNOWN OR UNKNOWN.</strong></td>
</tr>
</tbody>
</table>

Other Fields: None.

Field Length: 2

ASCII Format Information:

- Field: 10
- Data Type: Numeric
- Begin Column: 59
- End Column: 60
PROVIDER IDENTIFIER AT ADMISSION  

Description: Identifies the provider of the alcohol or drug treatment service at time of admission. This number will usually be the same as the entry in DIS 4 (provider ID at discharge), but may be different. Even if the same, it must be entered in both fields DIS 4 and DIS 11.

Valid Entries: Entry must contain a valid provider ID that matches the State ID in SAMHSA's I-SATS.

Other Fields: None

Field Length: 15

ASCII Format Information:

<table>
<thead>
<tr>
<th>Field:</th>
<th>Data Type:</th>
<th>Begin Column:</th>
<th>End Column:</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Alphanumeric (Left-justified and filled with blank spaces)</td>
<td>61</td>
<td>75</td>
</tr>
</tbody>
</table>
Description: A “client” is defined in DIS 5 above. This number should be the same as the entry in DIS.5 (client ID at discharge) when client ID is unique within the state.

Other considerations:
• **Participation in SOMMS state subcontracts will require that the State’s client ID be unique within the State and be used each time the client receives substance abuse treatment services, regardless of provider.**
• Identifier must not be reassigned to another client.
• Identifier can be meaningless.
• Responsibility for assigning the identifier belongs to the State.
• Identifier must ensure confidentiality of client records.

Valid entries: An identifier of from 1 to 15 alphanumeric characters that is unique within the state for NOMS participation and for states not participating in NOMS must, at a minimum, be unique within the provider. If the field is blank, the record will not be processed.

Other Fields: None.

Field Length: 15

ASCII Format Information:

<table>
<thead>
<tr>
<th>Field</th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Type:</td>
<td>Alphanumeric (Left-justified and filled with blank spaces)</td>
</tr>
<tr>
<td>Begin Column:</td>
<td>76</td>
</tr>
<tr>
<td>End Column:</td>
<td>90</td>
</tr>
</tbody>
</table>
Description: A Co-Dependent/Collateral is defined in item DIS 6 above.

Other considerations:

If a client with an existing record in the TEDS becomes a co-dependent, a new client record should be submitted indicating that the client is an "initial Admission" as a co-dependent. The reverse is also true for a person who is a co-dependent first and then becomes a client.

Valid Entries:  
1 Yes
2 No

Other Fields: None

Field Length: 1

ASCII Format Information:

Field: 13
Data Type: Numeric
Begin Column: 91
End Column: 91
Description: This field identifies whether the Admission record is for an initial admission (A) or a Transfer/change in service (T).

Valid entries: (Admission Record)
- A Admission
- T Transfer

Other fields: None.

Field Length 1

ASCII Format Information
- Field: 14
- Data Type: Alphanumeric
- Begin Column: 92
- End Column: 92
Description: The day when the client receives his or her first direct treatment or recovery service.

Valid entries: **MMDDYYYY**

MM must be 01 through 12 and DD must be 01 through 31. Any year of admission is acceptable for discharges beginning January 1, 2001.

Other fields: None.

Field Length: 8

ASCII Format Information:

<table>
<thead>
<tr>
<th>Field:</th>
<th>15</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Numeric</td>
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<tr>
<td>Begin Column:</td>
<td>93</td>
</tr>
<tr>
<td>End Column:</td>
<td>100</td>
</tr>
</tbody>
</table>
Description: Describes the type of service the client received.

Valid entries:

01 Detoxification, 24-Hour Service, Hospital Inpatient
   24 hour per day medical acute care services in hospital setting for
detoxification for persons with severe medical complications associated
with withdrawal.

02 Detoxification, 24 Hour Service, Free-Standing Residential
   24 hour per day services in non-hospital setting providing for safe
withdrawal and transition to ongoing treatment.

03 Rehabilitation/Residential—Hospital (other than detoxification) -
   24 hour per day medical care in a hospital facility in conjunction with
treatment services for alcohol and other drug abuse and dependency.

04 Rehabilitation/Residential—Short Term (30 days or fewer)
   Typically, 30 days or less of non-acute care in a setting with treatment
services for alcohol and other drug abuse and dependency.

05 Rehabilitation/Residential—Long Term (more than 30 days)
   Typically, more than 30 days of non-acute care in a setting with
   treatment services for alcohol and other drug abuse and dependency;
   this may include transitional living arrangements such as halfway
   houses.

06 Ambulatory—Intensive-Outpatient -
   As a minimum, the client must receive treatment lasting two or more
hours per day for three or more days per week.

07 Ambulatory— Non-Intensive Outpatient -
   Ambulatory treatment services including individual, family and or
group services; these may include pharmacological therapies.

08 Ambulatory—Detoxification -
   Outpatient treatment services providing for safe withdrawal in an
ambulatory setting (pharmacological or non-pharmacological).

Other Fields: None.

Field Length: 2

ASCII Format Information:
   Field:  16
   Data Type: Numeric
   Begin Column: 101
   End Column: 102
DATE OF BIRTH

Description: Client's date of birth.
Valid entries: MMDDYYYY

MM must be 01 through 12 and DD must be 01 through 31.

Field Length: 8

ASCII Format Information:

Field: 17
Data Type: Numeric
Begin Column: 103
End Column: 110
Description: Identifies client's sex.

Valid entries: 1 Male
2 Female
7 Unknown
8 Not Collected

Field Length: 1

ASCII Format Information:
  Field: 18
  Data Type: Numeric
  Begin Column: 111
  End Column: 111
Description: Specifies the client's race

Valid entries:

01 Alaska Native (Aleut, Eskimo, Indian)—Origins in any of the original people of Alaska.
02 American Indian (Other than Alaska Native)—Origins in any of the original people of North America and South America (including Central America) and who maintain cultural identification through tribal affiliation or community attachment.
13 Asian - Origins in any of the original people of the Far East, the Indian subcontinent, or Southeast Asia, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Philippine Islands, Thailand, and VIETNAM.
23 Native Hawaiian or Other Pacific Islander - Origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

(States that cannot separate Asian from Native Hawaiian and other Pacific Islander should use code 03)
03 Asian or Pacific Islander - Origins in any of the original people of the Far East, the Indian subcontinent, Southeast Asia or the Pacific Islands.

04 Black or African American — Origins in any of the black racial groups of Africa.
05 White—Origins in any of the original people of Europe, North Africa or the Middle East.
20 Other single race—A default category for use in instances in which the client is not classified above or whose origin group, because of area custom, is regarded as a racial class distinct from the above categories. (Do not use this Category for clients indicating multiple races)

21 Two or More Races – Use this code when the State data system allows multiple race selection and more than one race is indicated. (See guidelines below).

97 Unknown
98 Not Collected

Unknown (97) - Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

Not Collected (98) - Use this code for all records if the State does not collect these data for submission to TEDS.
If the value in the field is not a valid entry, Invalid (99) will be entered in the field and the record will be processed and added to the database.

Guidelines:

If State does not distinguish between American Indian and Alaska Native, code both as 02, American Indian.

States that can separate “Asian” and “Native Hawaiian or Other Pacific Islander” should use codes 13 and 23 for those categories. States that cannot make the separation should use the combined code 03 until the separation becomes possible. Once a State begins using codes 13 and 23, code 03 should no longer be used by that State. States are asked to convert to the new categories when possible.

States that collect multiple races:
A. When a single race is designated, that specific race code should be used.
B. If the state system collects a “primary” or “preferred” race along with additional races, the code for the primary/preferred race should be used, regardless of whether or not additional races have been designated.
C. If the state uses a system, such as an algorithm, to select a single race when multiple races have been selected for an individual, the same system may be used to designate the race code for TEDS.
D. If B or C above do not apply, when two or more races are designated, code 21 (two or more races) should be used.

Other fields: None

Field Length: 2

ASCII Format Information:
Field: 19
Data Type: Numeric
Begin Column: 112
End Column: 113
Description: Identifies client's specific Hispanic Origin.

Valid entries:

01 **Puerto Rican** — Of Puerto Rican origin regardless of race.
02 **Mexican** — Of Mexican origin regardless of race.
03 **Cuban** — Of Cuban origin regardless of race.
04 **Other specific Hispanic** — Of known Central or South American or any other Spanish cultural origin (including Spain), other than Puerto Rican, Mexican or Cuban, regardless of race.
05 **Not of Hispanic Origin**
06 **Hispanic-specific origin not specified** — Of Hispanic Origin, but specific origin not known or not specified

97 **Unknown**

98 **Not Collected**

Other fields: None

Field Length: 2

ASCII Format Information:

Field: 20
Data Type: Numeric
Begin Column: 114
End Column: 115
Description: This field identifies the client's primary substance problem at discharge.

Each substance problem code (primary, secondary, or tertiary problem code) has an associated field for frequency of use.

Valid entries:

01 None
02 Alcohol
03 Cocaine/Crack
04 Marijuana/Hashish—Includes THC and any other cannabis sativa preparations.
05 Heroin
06 Non-Prescription Methadone
07 Other Opiates and Synthetics—Includes Buprenorphine, codeine, hydrocodone, hydromorphone, meperidine, morphine, opium, oxycodone, pentazocine, propoxyphene, tramadol, and any other drug with morphine-like effects.
08 PCP—Phencyclidine
09 Other Hallucinogens—Includes LSD, DMT, STP, hallucinogens, mescaline, peyote, psilocybin, etc.
10 Methamphetamine
11 Other Amphetamines—Includes amphetamines, MDMA, phenmetrazine, and other unspecified amines and related drugs.
12 Other Stimulants—Includes methylphenidate and any other stimulants.
13 Benzodiazepines—Includes alprazolam, chlordiazepoxide, clonazepam, clorazepate, diazepam, flunitrazepam, flurazepam, halazepam, lorazepam, oxazepam, prazepam, temazepam, triazolam, and other unspecified benzodiazepines.
14 Other non-Benzodiazepine Tranquilizers—Includes meprobamate, tranquilizers, etc.
15 Barbiturates—Includes amobarbital, pentobarbital, phenobarbital, secobarbital, etc.
16 Other non-Barbiturate Sedatives or Hypnotics—Includes chloral hydrate, ethchlorvynol, glutethimide, methaqualone, sedatives/hypnotics, etc.
17 Inhalants—Includes chloroform, ether, gasoline, glue, nitrous oxide, paint thinner, etc.
18 Over-the-Counter—Includes aspirin, cough syrup, diphenhydramine and other anti-histamines, sleep aids, and any other legally obtained, non-prescription medication.
20 Other—Includes diphenylhydantoin/phenytoin, GHB/GBL, ketamine, etc.

97 Unknown
98  **Not Collected**

**Unknown** (97) - Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

**Not Collected** (98) - Use this code if the State does not collect these data for submission to TEDS

If the value in the field is not a valid entry, **Invalid** (99) will be entered in the field and the record will be processed and added to database.

Field Length: 2

ASCII Format Information:
- Field: 21
- Data Type: Numeric
- Begin Column: 116
- End Column: 117
SUBSTANCE PROBLEM AT DISCHARGE, SECONDARY DIS 21(b)

Description: This field identifies the client's secondary substance problem.

Valid entries: See Substance Problem Code, Primary for valid code entries

Other fields: See Substance Problem Code, Primary

Field Length: 2

ASCII Format Information:

<table>
<thead>
<tr>
<th>Field</th>
<th>Data Type</th>
<th>Begin Column</th>
<th>End Column</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Numeric</td>
<td>118</td>
<td>119</td>
</tr>
</tbody>
</table>
SUBSTANCE PROBLEM AT DISCHARGE, TERTIARY

Description: This field identifies the client's tertiary substance problem.

Valid entries: See Substance Problem Code, Primary, for valid code entries.

Other fields: See Substance Problem Code, Primary

Field Length 2

ASCII Format Information
  Field: 23
  Data Type: Numeric
  Begin Column: 120
  End Column: 121
FREQUENCY OF USE AT DISCHARGE, PRIMARY

Description: Identifies the frequency of use of the substance identified in DIS 21(a) Substance Problem Code, Primary.

Valid entries:

- 01 No use in the past month (or during treatment, if client was in treatment fewer than 30 days)*
- 02 1-3 times in the past month
- 03 1-2 times in the past week
- 04 3-6 times in the past week
- 05 Daily
- 96 Not Applicable
- 97 Unknown
- 98 Not Collected

Not Applicable (96) Use this code when the value in DIS 21(A) is 01 None.

Unknown (97) Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

Not Collected (98) Use this code if the State does not collect these data for submission to TEDS.

If the value in the field is not a valid entry, Invalid (99) will be entered in the field and the record will be processed and added to database.

* In the event treatment was initiated less than 30 days prior to discharge, code 01 is defined to mean “no use since treatment was initiated”.

Field Length 2

ASCII Format Information

Field: 24
Data Type: Numeric
Begin Column: 122
End Column: 123
FREQUENCY OF USE AT DISCHARGE, SECONDARY

Description: Identifies the frequency of use of the substance identified in DIS 21(b) Substance Problem Code, Secondary.

Valid entries:

01 No use in the past month (or during treatment, if client was in treatment fewer than 30 days)*
02 1-3 times in the past month
03 1-2 times in the past week
04 3-6 times in the past week
05 Daily

96 Not Applicable
97 Unknown
98 Not Collected

Not Applicable (96) Use this code when the value in DIS 21(B) is 01 None.

Unknown (97) Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

Not Collected (98) Use this code if the State does not collect these data for submission to TEDS.

If the value in the field is not a valid entry, Invalid (99) will be entered in the field and the record will be processed and added to database.

* In the event treatment was initiated less than 30 days prior to discharge, code 01 is defined to mean “no use since treatment was initiated”.

Field Length 2

ASCII Format Information

Field: 25
Data Type: Numeric
Begin Column: 124
End Column: 125
FREQUENCY OF USE AT DISCHARGE, TERTIARY

Description: Identifies the frequency of use of the substance identified in DIS 21(c) Substance Problem Code, Tertiary.

Valid entries:

01  No use in the past month (or during treatment, if client was in treatment fewer than 30 days)*
02  1-3 times in the past month
03  1-2 times in the past week
04  3-6 times in the past week
05  Daily

96  Not Applicable
97  Unknown
98  Not Collected

Not Applicable (96) Use this code when the value in MDS 14(C) is 01 None.

Unknown (97) Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

Not Collected (98) Use this code if the State does not collect these data for submission to TEDS.

If the value in the field is not a valid entry, Invalid (99) will be entered in the field and the record will be processed and added to database.

* In the event treatment was initiated less than 30 days prior to discharge, code 01 is defined to mean “no use since treatment was initiated”.

Field Length 2

ASCII Format Information
Field: 26
Data Type: Numeric
Begin Column: 126
End Column: 127
LIVING ARRANGEMENTS AT DISCHARGE

Description: Specifies whether the client is homeless, living with parents, in a supervised setting, or living on his or her own at the time of discharge.

Valid entries: 01 **Homeless**—Clients with no fixed address; includes shelters.
02 **Dependent living**—Clients living in a supervised setting such as a residential institution, halfway house or group home, and children (under age 18) living with parents, relatives, or guardians or in foster care.
03 **Independent Living**—Clients living alone or with others without supervision.

97 **Unknown**
98 **Not Collected**

**Unknown** (97) Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

**Not Collected** (98) Use this code if the State does not collect these data for submission to TEDS. This code is also used if the State collects only a subset of the categories in the list above.

Any other entry sets the field to **Invalid** (99).

Other fields: None.

Field Length 2

ASCII Format Information

| Field:  | 27 |
| Data Type: | Numeric |
| Begin Column: | 128 |
| End Column: | 129 |
EMPLOYMENT STATUS AT DISCHARGE

Description: Identifies the client's employment status at the time of discharge.

Valid entries:

01 Full Time—Working 35 hours or more each week, including members of the uniformed services.
02 Part Time—Working fewer than 35 hours each week.
03 Unemployed—Looking for work during the past 30 days or on layoff from a job.
04 Not in Labor Force—Not looking for work during the past 30 days or a student, homemaker, disabled, retired or inmate of an institution. Clients in this category are further defined in DIS 25-Detailed Not In Labor Force.

97 Unknown
98 Not Collected

Unknown (97) Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

Not Collected (98) Use this code if the State does not collect these data for submission to TEDS.

If the value in the field is not a valid entry, Invalid (99) will be entered in the field and the record will be processed and added to database.

Guidelines: Seasonal workers are coded in this category based on their employment status at time of discharge. For example, if they are employed full time at the time of discharge, they are coded 01. If they are not in labor force at the time of discharge, they are coded 04.

Other fields: DIS 25 (Detailed Not in Labor force) is used to provide a detailed breakdown of the “Not in Labor Force” category (04).

Field Length 2

ASCII Format Information

Field: 28
Data Type: Numeric
Begin Column: 130
End Column: 131
DETAILED NOT IN LABOR FORCE AT DISCHARGE

Description: This field gives more detailed information about those clients who are coded as "not in the labor force" in item DIS 24 - EMPLOYMENT Status.

Valid entries:
- 01 Homemaker
- 02 Student
- 03 Retired
- 04 Disabled
- 05 Inmate of Institution (E.g. Prison, long-term hospital, etc.)
- 06 Other
- 96 Not Applicable
- 97 Unknown
- 98 Not Collected

Not Applicable (96) Use this code if Employment Status (MDS 13) is coded 01, 02, 03 or 96.

Unknown (97) Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

Not Collected (98) Use this code if the State does not collect these data for submission to TEDS. Not Collected is also used for any not-collected categories when the State collects only a subset of the categories in the list above.

Any other entry sets the field to Invalid (99).

Guidelines: This field is applicable only when Employment Status (DIS 24) is coded 04 “Not in Labor Force." For all other entries in Employment Status, this field should be coded 96 - Not Applicable

Field Length 2

ASCII Format Information
- Field: 29
- Data Type: Numeric
- Begin Column: 132
- End Column: 133
NUMBER OF ARRESTS IN 30 DAYS PRIOR TO DISCHARGE DIS 26

Description: The number of arrests in the 30 days PRECEDING discharge from treatment services. If client is in treatment less than 30 days, use number of arrests during period of treatment.

Valid entries: 00-96 Number of arrests
97 Unknown
98 Not Collected

Unknown (997) Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

Not Collected (998) Use this code if the State does not collect these data for submission to TEDS.

Any other entry sets the field to Invalid (999).

Guidelines: This item is intended to capture the number of times the client was arrested for any cause during the 30 days preceding discharge from treatment. In the event treatment was initiated less than 30 days prior to discharge, this item refers to the number of arrests since the treatment was initiated. Any formal arrest is to be counted regardless of whether incarceration or conviction resulted and regardless of the status of the arrest proceedings at the time of discharge.

Other fields: None.

Field Length 2

ASCII Format Information
Field: 30
Data Type: Numeric
Begin Column: 134
End Column: 135
FREQUENCY OF ATTENDANCE AT SELF-HELP PROGRAMS (e.g., AA, NA, etc.) IN 30 DAYS PRIOR TO DISCHARGE

Description: The number of times the client has attended a self-help program in the 30 days preceding the date of discharge from treatment services. Includes attendance at AA, NA, and other self-help/mutual support groups focused on recovery from substance abuse and dependence.

Valid entries:
- **01** No attendance in the past month
- **02** 1-3 times in past month (less than once per week)
- **03** 4-7 times in past month (about once per week)
- **04** 8-15 times in past month (2 or 3 times per week)
- **05** 16-30 times in past month (4 or more times per week)
- **06** Some attendance, but frequency unknown
- **97** Unknown
- **98** Not Collected

Unknown (97) Use this code if the State collects these data, but for some reason this record does not reflect an acceptable value.

Not Collected (98) Use this code if the State does not collect these data for submission to TEDS.

Any other entry sets the field to Invalid (99) during processing.

Guidelines:
Use **Code 06** (frequency unknown) only if it is known that the client attended a self-help program during the month prior to discharge, but there is insufficient information to record one of the specific frequency categories. Use **Code 97** (unknown) when it is not known whether the client attended a self-help program during the month prior to discharge.

This item is intended to capture the frequency with which the client attended self-help groups during the 30 days preceding discharge from treatment. In the event treatment was initiated less than 30 days prior to discharge, this item refers to the frequency of attendance since the treatment was initiated.

Use number of times attended self-help programs, not number of days, i.e., if a client attends self-help programs multiple times per day, let the number of times rather than the approximate times per week determine the response category. If the number exceeds 30 times in the prior 30 days, use the response category 16-30 times.

Other fields: None.
Field Length 2

ASCII Format Information

Field: 31
Data Type: Numeric
Begin Column: 136
End Column: 137
Appendix C

Technical Preparation Instructions
APPENDIX C - TECHNICAL PREPARATION REQUIREMENTS

1. Data file submission protocol

States are encouraged to use the State TEDS Submission System (STSS) to submit all data when feasible. The STSS internet address is https://dasis9.samhsa.gov/StateTEDS. A user ID and password are available from Synectics, and the most current STSS User Manual is available online at http://wwwdasis.samhsa.gov/dasis2/stss_user_guide.pdf.

When the STSS is not used for data submission, the data must be submitted on a PC diskette, CD-R, or transmitted electronically by FTP, or via the Internet as an email attachment. Each data file must be accompanied by the information shown on the TEDS Data Submission Form provided on the last page of this Appendix. For electronic transmissions, the relevant information from the TEDS Data Submission Form may be provided verbally, or by email or fax prior to the transmission. Passwords for password-protected files are to be transmitted to the TEDS contractor (Synectics) independent of the data transmission.

2. Data file format

Data files must be submitted as an **ASCII Flat File**.

3. Data transmission specifications

   The following provides more detail for data submissions to TEDS according to submission method:

**PC Diskette - Formatted personal computer diskette**

<table>
<thead>
<tr>
<th>File formats</th>
<th>ASCII flat file</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOS Format version</td>
<td>3.0 or higher</td>
</tr>
<tr>
<td>Size</td>
<td>3.5 inch</td>
</tr>
<tr>
<td>Density</td>
<td>Double or High</td>
</tr>
</tbody>
</table>

Note: If data file is too large for a single disk, use the compression utility program PKZip.

**Electronic Transmission - Data transmission via modem**

<table>
<thead>
<tr>
<th>File Formats</th>
<th>ASCII flat file</th>
</tr>
</thead>
<tbody>
<tr>
<td>BPS</td>
<td>28800, 14400, 9600</td>
</tr>
<tr>
<td>Parity</td>
<td>None</td>
</tr>
<tr>
<td>Data Bits</td>
<td>8</td>
</tr>
<tr>
<td>Stop Bits</td>
<td>1</td>
</tr>
<tr>
<td>Communication Protocol</td>
<td>ZMODEM, YMODEM, KERMIT</td>
</tr>
</tbody>
</table>

Note: For electronic transmission, contact TEDS Contractor to arrange transmission.
CD – Compact Disk

<table>
<thead>
<tr>
<th>CD type</th>
<th>CD-R, (CD-RW not recommended)</th>
</tr>
</thead>
<tbody>
<tr>
<td>File formats</td>
<td>ASCII flat file</td>
</tr>
</tbody>
</table>

Internet Transmission - File transmission as email attachment

<table>
<thead>
<tr>
<th>File format</th>
<th>ASCII flat file</th>
</tr>
</thead>
</table>

Note: File must be password protected and may be encrypted. Before sending an encrypted file, contact the TEDS contractor for information on acceptable encryption software. File may be compressed using a compression utility program.

4. Data file specifications

**ASCII Flat File Format**

ASCII flat files have each record represented by a single line terminated by an end-of-line indicator. The standard ASCII end-of-line indicator is a carriage return, line feed. An end-of-line marker is optional. Other specifications are:

<table>
<thead>
<tr>
<th>Record</th>
<th>A single line terminated by an end-of-line indicator with each field in a specified column</th>
</tr>
</thead>
<tbody>
<tr>
<td>Field</td>
<td>Fixed length in columns shown below</td>
</tr>
<tr>
<td>Alphanumeric Fields</td>
<td>Left-justified and filled with blank spaces</td>
</tr>
<tr>
<td>Numeric Fields</td>
<td>Right-justified and filled with zeros.</td>
</tr>
</tbody>
</table>

5. Discharge Data File Structure

The field specifications for ASCII Discharge data file are provided below.

(K) = Key field

**DATA SUBMISSION INFORMATION**

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
<th>Data Type</th>
<th>Length</th>
<th>Begin Col.</th>
<th>End Col.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>System Transaction Type</td>
<td>Alphanumeric</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>State Abbreviation</td>
<td>Alphanumeric</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>Mo. And Yr. of Submission</td>
<td>Numeric</td>
<td>6</td>
<td>4</td>
<td>9</td>
</tr>
</tbody>
</table>
### BASIC TEDS DISCHARGE DATA

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
<th>Data Type</th>
<th>Length</th>
<th>Begin Col.</th>
<th>End Col.</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 (K)</td>
<td>Provider Identifier</td>
<td>Alphanumeric</td>
<td>15</td>
<td>10</td>
<td>24</td>
</tr>
<tr>
<td>5 (K)</td>
<td>Client Identifier</td>
<td>Alphanumeric</td>
<td>15</td>
<td>25</td>
<td>39</td>
</tr>
<tr>
<td>6 (K)</td>
<td>Co-Dependent/Collateral</td>
<td>Numeric</td>
<td>1</td>
<td>40</td>
<td>40</td>
</tr>
<tr>
<td>7 (K)</td>
<td>Services at discharge</td>
<td>Numeric</td>
<td>2</td>
<td>41</td>
<td>42</td>
</tr>
<tr>
<td>8</td>
<td>Date Last Contact</td>
<td>Numeric</td>
<td>8</td>
<td>43</td>
<td>50</td>
</tr>
<tr>
<td>9 (K)</td>
<td>Date of Discharge</td>
<td>Numeric</td>
<td>8</td>
<td>51</td>
<td>58</td>
</tr>
<tr>
<td>10</td>
<td>Reason for Discharge</td>
<td>Numeric</td>
<td>2</td>
<td>59</td>
<td>60</td>
</tr>
</tbody>
</table>

### ADMISSIONS DATA REPORTED ON DISCHARGE RECORD

The data in fields 11 through 20 are for the admission (or transfer) that corresponds to the discharge reported in the record. The data in these fields should match exactly with the data reported in the corresponding TEDS admission (or transfer) record so that the discharge record can be matched with the appropriate admission (or transfer) record in the TEDS system.

<table>
<thead>
<tr>
<th>Field</th>
<th>Description (items from admission record)</th>
<th>Data Type</th>
<th>Length</th>
<th>Begin Col.</th>
<th>End Col.</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Provider identifier</td>
<td>Alphanumeric</td>
<td>15</td>
<td>61</td>
<td>75</td>
</tr>
<tr>
<td>12</td>
<td>Client identifier</td>
<td>Alphanumeric</td>
<td>15</td>
<td>76</td>
<td>90</td>
</tr>
<tr>
<td>13</td>
<td>Co-Dependent/Collateral</td>
<td>Numeric</td>
<td>1</td>
<td>91</td>
<td>91</td>
</tr>
<tr>
<td>14</td>
<td>Client transaction type</td>
<td>Alphanumeric</td>
<td>1</td>
<td>92</td>
<td>92</td>
</tr>
<tr>
<td>15</td>
<td>Date of Admission</td>
<td>Numeric</td>
<td>8</td>
<td>93</td>
<td>100</td>
</tr>
<tr>
<td>16</td>
<td>Services at admission</td>
<td>Numeric</td>
<td>2</td>
<td>101</td>
<td>102</td>
</tr>
<tr>
<td>17</td>
<td>Date of Birth</td>
<td>Numeric</td>
<td>8</td>
<td>103</td>
<td>110</td>
</tr>
<tr>
<td>18</td>
<td>Sex</td>
<td>Numeric</td>
<td>1</td>
<td>111</td>
<td>111</td>
</tr>
<tr>
<td>19</td>
<td>Race</td>
<td>Numeric</td>
<td>2</td>
<td>112</td>
<td>113</td>
</tr>
<tr>
<td>20</td>
<td>Ethnicity</td>
<td>Numeric</td>
<td>2</td>
<td>114</td>
<td>115</td>
</tr>
</tbody>
</table>
## DISCHARGE DATA NOMS ELEMENTS

The data in fields 21-30 are the NOMS data elements for the discharge data set.

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
<th>Data Type</th>
<th>Length</th>
<th>Begin Col.</th>
<th>End Col.</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>Substance Problem at discharge, primary</td>
<td>Numeric</td>
<td>2</td>
<td>116</td>
<td>117</td>
</tr>
<tr>
<td>22</td>
<td>Substance Problem at discharge, secondary</td>
<td>Numeric</td>
<td>2</td>
<td>118</td>
<td>119</td>
</tr>
<tr>
<td>23</td>
<td>Substance Problem at discharge, tertiary</td>
<td>Numeric</td>
<td>2</td>
<td>120</td>
<td>121</td>
</tr>
<tr>
<td>24</td>
<td>Frequency of use at Discharge, primary</td>
<td>Numeric</td>
<td>2</td>
<td>122</td>
<td>123</td>
</tr>
<tr>
<td>25</td>
<td>Frequency of use at Discharge, secondary</td>
<td>Numeric</td>
<td>2</td>
<td>124</td>
<td>125</td>
</tr>
<tr>
<td>26</td>
<td>Frequency of use at Discharge, tertiary</td>
<td>Numeric</td>
<td>2</td>
<td>126</td>
<td>127</td>
</tr>
<tr>
<td>27</td>
<td>Living arrangements at discharge</td>
<td>Numeric</td>
<td>2</td>
<td>128</td>
<td>129</td>
</tr>
<tr>
<td>28</td>
<td>Employment status at discharge</td>
<td>Numeric</td>
<td>2</td>
<td>130</td>
<td>131</td>
</tr>
<tr>
<td>29</td>
<td>Detailed not in labor force at discharge</td>
<td>Numeric</td>
<td>2</td>
<td>132</td>
<td>133</td>
</tr>
<tr>
<td>30</td>
<td>Number of arrests in 30 days prior to discharge</td>
<td>Numeric</td>
<td>2</td>
<td>134</td>
<td>135</td>
</tr>
<tr>
<td>31</td>
<td>Frequency of attendance at self-help programs in 30 days prior to discharge</td>
<td>Numeric</td>
<td>2</td>
<td>136</td>
<td>137</td>
</tr>
</tbody>
</table>
TEDS Data Submission Form

<table>
<thead>
<tr>
<th>O ADMISSIONS</th>
<th>O DISCHARGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>State</td>
<td>Date Submitted</td>
</tr>
<tr>
<td>Reporting Date (MMY YYYY)</td>
<td>Number of Records in file</td>
</tr>
<tr>
<td>Re-submission? O Yes O No</td>
<td>File encrypted? O Yes O No</td>
</tr>
<tr>
<td>Encryption method</td>
<td></td>
</tr>
</tbody>
</table>

MEDIA / TRANSMISSION METHOD AND FORMAT INFORMATION

<table>
<thead>
<tr>
<th>O PC Diskette or CD:</th>
<th>ASCII flat file</th>
<th>File Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of disks/CD’s</td>
<td>Return Disks/CD? O Yes O No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>O FTP:</th>
<th>ASCII flat file</th>
<th>File Name</th>
</tr>
</thead>
</table>

| O Internet Transmission: | ASCII flat file | File Name |

Comments, other information:

State Contact: Name Fax Phone Email