

NPI FTP from Value to NS RDM/UA Adult 2/1/07					
Field	Char	Len	Begin	End	Comment/Decode
Rec	Alpha	12	1	12	NSADDRDM = NS adult RDM
Comp	Alpha	3	13	15	085= ValueOptions
Case	Alpha	10	16	25	NorthSTAR ID
Batch_No	Alpha	2	26	27	Assigned by the component (VO probably leave blank)
Trans_enter_dt	Num	8	28	35	Date file was created and sent to NS (VO system date)
Lastup_ID	Alpha	8	36	43	User ID of the person that entered the transaction on the component's system (VO probably leave blank)
Log_Trans_no	Alpha	6	44	49	Use for sort for processing order - use leading zeros
ID	Alpha	10	50	59	CARE ID (FILLER - VO will leave blank)
LAST_NM	Alpha	16	60	75	Client's last name.
LAST_SUF	Alpha	3	76	78	client's name suffix 'JR.', 'SR.', 'I', 'II', Etc
Firstnm	Alpha	11	79	89	Client's first name.
MIDNM	Alpha	1	90	90	Client's middle initial
Filler		9	91	99	Filler
MH_Assess_Type	Alpha	1	100	100	"Assessment Purpose: Intake, Update and Discharge" on form. Decodes are: E = Crisis, I=Intake; U=Update, D=Discharge.
Action_CD	Alpha	1	101	101	A=Add
Disch_Reas	Alpha	1	102	102	Reason for discharge: Acceptable Values: C="Level of Care services complete," J="Incarcerated in Jail or Prison," M="Moved out of local service area," N="Never Returned for Services within authorized Service Period," T="Transferred to other community provider in local service area," Z="Other", X="auto-closed" Required entry only if assessment purpose is a 'D'
Eff_dt	Num	8	103	110	"Discharge Date" on form if MH_ASSESS_TYPE = "D" Required entry only if assessment purpose is a 'D'. Will be blank if not D.
TRAG_HARM	Alpha	1	111	111	The "Risk of Harm" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-5.
TRAG_SUPPORT	Alpha	1	112	112	The "Support Needs" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-5.
TRAG_PSYCH_HOSP	Alpha	1	113	113	The "Psychiatric-Related Hospitalizations" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-5.
TRAG_FUNC_IMP	Alpha	1	114	114	The "Functional Impairment" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-5.
TRAG_EMP_PROB	Alpha	1	115	115	The "Employment Problems" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-5.
TRAG_HOUSE_INSTAB	Alpha	1	116	116	The "Housing Instability" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-5.

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TRAG_SA	Alpha	1	117	117	The "Co-Occurring Substance Use" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-5.
TRAG_CRIM_JUSTICE	Alpha	1	118	118	The "Criminal Justice Involvement" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-5.
TRAG_MED_TREAT	Alpha	1	119	119	The "Response to Medication Treatment (MDD only)" Adult-TRAG Dimension Rating in Section 1. Acceptable values are 1-3 or blank
TRAG_ASSESS_DT	Num	8	120	127	Section 1 Assessment Date. Can not be future date
TRAG_LEV_CARE_AUTH	Alpha	1	128	128	"Level of Care Authorized (LOC-A)" on form. Acceptable values: 0-4, 9.
TRAG_REAS_1	Alpha	1	129	129	Y, 'N' - If LOC-A is different from LOC-R (Default is N)
TRAG_REAS_2	Alpha	1	130	130	Y, 'N' - If LOC-A is different from LOC-R (Default is N)
TRAG_REAS_3	Alpha	1	131	131	Y, 'N' - If LOC-A is different from LOC-R (Default is N)
TRAG_REAS_4	Alpha	1	132	132	Y, 'N' - If LOC-A is different from LOC-R (Default is N)
TRAG_REAS_5	Alpha	1	133	133	Y, 'N' - If LOC-A is different from LOC-R (Default is N)
LOCA_EFF_DT	Alpha	8	134	141	"Authorization Date" on form. Format = YYYYMMDD.
DEST_REF	Alpha	2	142	143	List of destinations that the consumer may be "referred to" or be transferred after treatment has been completed, and/or discharged from services: 1=Private Practitioner; 2=Federally Qualified Health Home (FQHC); 3=Community Indigent Health Clinic; 4= Relinquishment of Custody (DFSP)-Child Adolescents Only; 5=Residential Treatment Placement; 6=Adult Criminal or Juvenile Justice System; 7=Different Center; 8=Nursing Home; 9=No Service; 10= Unknown; 11= Other Public Provider. <u>Required if a discharge</u>
Schiz_PSRS	Alpha	2	144	145	The "Total Positive Symptom Rating Scale (PSRS)" rating in the 'Schizophrenia Algorithm (PSRS & BNSA)' part of Section 3. Acceptable values: 4-28.
SCHIZ_BNSA	Alpha	2	146	147	The "Total Brief Negative Symptom Assessment (BNSA)" rating in the 'Schizophrenia Algorithm (PSRS & BNSA)' part of Section 3. Acceptable values: 4-24.
BDSS	Alpha	2	148	149	The "Total Brief Bipolar Disorder Symptom Scale (BDSS)" rating in the 'Bipolar Algorithm (BDSS) of Section 3. Acceptable values: 10-70.

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QIDS	Alpha	2	150	151	The "Total Quick Inventory of Depressive Symptomatology" rating in the 'Major Depression algorithm (QIDS-SR or QIDS-C) of Section 3. Acceptable values: 0-27.
QIDS_VERS	Alpha	1	152	152	The "QIDS Version" rating in the 'Major Depression algorithm (QIDS-SR or QIDS-C) of Section 3. Acceptable values: 1 = QIDS-SR (Self-report) and 2 = QIDS-C (Clinician).
COM_ASSES_DT	Num	8	153	160	"Assessment Date" in Section 3 on form. Format = YYYYMMDD. Can not be future dated
EXT_REV	Alpha	1	161	161	Extended review indicator. Acceptable values are Y or N. (Value will autofill with N)
UA_RES_TYPE	Alpha	1	162	162	The "Residence Type (Current)" score in section 4. Acceptable values are 1-5.
UA_PD_EMP	Alpha	1	163	163	The "Paid Employment Type (Current)" score in section 4. Acceptable values are 1-4.
REAS_NOTLABORFOR	Alpha	1	164	164	The "Main Reason for Being Out of the Labor Force aid Employment Type (Current)" score in section 4. Acceptable values are 1-7.
MULTNO_DT	Num	8	165	172	"Assessment Date" in Section 4 on form. Format = YYYYMMDD. Can not be future dated
TRAG_LEV_CARE_RECOM	Num	1	173	173	"Calculated Level of Care Recommended (LOC-R)" on form. Acceptable values: 0-4, 9.
TCOOMMI	Alpha	1	174	174	TCOOMMI indicator will indicate if a consumer is receiving assistance through a TCOOMMI contract. "Y"= Yes, "N"= No (Default is N)
ASSESSOR_SECT1	Alpha	25	175	199	The person name of the authorizing or performing the assessment in Section One:Adult-TRAG & Recommended Level of Care. Must be completed by LMHA QMHP at Intake or Provider QMHP at update.
CRED_SECT1	Alpha	2	200	201	Credentials of the person authorizing or performing assessment in Section One. Valid values: 1 – 11. 1=QMH-CS; 2=RN; 3=LCSW; 4=LMSW-ACP; 5=LMFT; 6=LPC; 7=LPHD-PSY; 8=RN-APN; 9=PA; 10=MD; 11=DO
ASSESSOR_SECT2	Alpha	25	202	226	The name of the person authorizing or performing the assessment in Section Two:Authorized Level of Care (LOC-A). LMHA Utilization Management LPHA staff.
CRED_SECT2	Alpha	2	227	228	Credentials of the person authorizing or performing assessment in Section Two. Valid values 1 – 11. 1=QMH-CS; 2=RN; 3=LCSW; 4=LMSW-ACP; 5=LMFT; 6=LPC; 7=LPHD-PSY; 8=RN-APN; 9=PA; 10=MD; 11=DO
ASSESSOR_SECT3	Alpha	25	229	253	The name of the person authorizing or performing the assessment in Section Three: Diagnosis-Specific Clinical Symptom Rating Scales. Completed by Provider QMHP staff.

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CRED_SECT3	Alpha	2	254	255	Credentials of the person authorizing or performing assessment in Section Three. Valid values 1 – 11. 1=QMH-CS; 2=RN; 3=LCSW; 4=LMSW-ACP; 5=LMFT; 6=LPC; 7=LPHD-PSY; 8=RN-APN; 9=PA; 10=MD; 11=DO; 12 = LVN
LOC_PROV_ID	Num	9	256	264	Local provider (location/unit) number. Left justified and only 6 digits for NS
APPEAL_FLG	Alpha	2	265	266	
DOC_NO	Alpha	18	267	284	Document number for internal use at VO.
VENDOR_NBR	Alpha	15	285	299	Internal identifier used by VO. Is actually only 9 digits. The number always leading alpha character.
ADMIN_DENY	Alpha	1	300	300	Values are Y=Yes, N=No. Use this field to designate that the UA was administratively denied by Value and took more than 30 days to process.
SUBJ_FAIR_HEAR	Alpha	1	301	301	Subject to Medicaid Fair Hearing indicator. "Y" = Yes, Blank = No
NPI	Num	10	302	311	Provider NPI
FILLER30		19	312	330	Filler