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DATA CODE TABLES**Document Revision History**

Document Revision History				
Version	Effective Date	Revision Date	Description	Author
11.0	07/01/2015	04/13/2015	◆ Completed Version 11.0	SAMH Data Unit
11.1	07/01/2015	04/30/2015	◆ Completed Version 11.1 revisions	SAMH Data Unit
11.1.1	07/01/2015	05/29/2015	◆ Completed Version 11.1.1 revisions	SAMH Data Unit
11.1.2	07/01/2015	06/20/2015	◆ Completed Version 11.1.2 revisions	SAMH Data Unit
11.1.2	07/01/2015	12/2015	◆ Removed OCA MHA74	SAMH Data Unit
11.1.2	07/01/2015	11/20/2015	◆ Added Covered Service 02 and 12 to OCAs MSA23 and MSC23 for SERV ◆ Removed HIV OCA from EVNT	SAMH Data Unit
11.1.2	07/01/2015	1/27/2016	◆ Changed Day Treatment to SERV/EVNT on Table 1 ◆ Added Day TX Covered Service Code 06 to EVNT OCAs: MHA09, MHA26, MHA73, MHA79, MHA86, MHA89, MHA92, MHA96, MHATA, HSMB, MHC09, MHC77, MHC87, MSA11, MSA27, SA81, MSA91, MSC11, MSCPP, MSC80, MSC95 ◆ Added EVNT OCA for MHC71 for Covered Service 06 – Day Treatment if needed ◆ Added MH097 to EVNT OCAs	SAMH Data Unit
11.1.2	07/01/2015	2/04/2016	◆ Added Covered Service Code 12 – Medical Services to appropriate EVNT OCAs	SAMH Data Unit
11.1.2	07/01/2015	2/18/2016	◆ Added Covered Service Codes 06 and 21 to OCA MHA93	SAMH Data Unit
11.1.2	07/01/2015	7/06/2016	◆ Changed Day Treatment and Medical Services back to SERV only on Table 1 ◆ Removed Day TX (06) and Medical Services (12) from EVNT OCAs ◆ Removed EVNT OCA MHC71	SAMH Data Unit
11.1.3	07/01/2016	08/20/2016	◆ Completed Version 11.1.3 revisions	SAMH Data Unit
11.1.3	07/01/2016	08/31/2016	◆ Removed all covered services from MSCPP except for 48 under SERV and removed codes 15 and 30 from EVNT	SAMH Data Unit
11.1.3	07/01/2016	03/23/2017	◆ Added OCAs: MHSFP, MSSFP and MHSOC	SAMH Data Unit

DATA CODE TABLES

Table 1. Covered Services Codes and Units					
Covered Services Codes	Covered Services Description	Reporting Measure	Unit	Program	Report Format
01	Assessment	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
02	Case management	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
03	Crisis Stabilization	Day (Max = 1 day per SERV)	Day	AMH, CMH	SERV
04	Crisis Support / Emergency	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV/EVNT
05	Day Care Services	Minutes (Max = 240 per SERV) Max reimbursed-4 hrs per calendar day	Direct Staff Hour	ASA, AMH	SERV
06	Day Treatment (Formerly Day/Night)	Minutes (Max = 240 per SERV) Max reimbursed-4 hrs per calendar day	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
07	Drop In / Self Help Centers	Minutes (Max = 1440 per SERV)	Non Direct Staff Hour	AMH	EVNT
08	In-Home/ On-Site Services	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
09	Inpatient	Day (Max = 1 day per SERV)	Day	AMH, CMH	SERV
10	Intensive Case Management	Minutes (Max = 1440 per SERV)	Direct Staff Hour	AMH, CMH	SERV
11	Intervention-Individual	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
12	Medical Services	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
13	Medication Assisted Treatment (Formerly Methadone)	Dosage (1 dose per SERV record)	Dosage	ASA, CSA	SERV
14	Outpatient – Individual	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
15	Outreach	Minutes (Max = 1440 per SERV)	Non Direct Staff Hour	ASA, AMH, CSA, CMH	EVNT
18	Residential Level 1	Day (Max = 1 day per SERV)	Day	ASA, AMH, CSA, CMH	SERV
19	Residential Level 2	Day (Max = 1 day per SERV)	Day	ASA, AMH, CSA, CMH	SERV
20	Residential Level 3	Day (Max = 1 day per SERV)	Day	ASA, AMH, CSA, CMH	SERV
21	Residential Level 4	Day (Max = 1 day per SERV)	Day	ASA, AMH, CSA, CMH	SERV
22	Respite Services	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
24	Substance Abuse Detoxification	Day (Max = 1 day per SERV)	Day	ASA, CSA	SERV
25	Supported Employment	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
26	Supported Housing/Living	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
27	TASC	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, CSA	SERV

DATA CODE TABLES

Table 1. Covered Services Codes and Units					
Covered Services Codes	Covered Services Description	Reporting Measure	Unit	Program	Report Format
28	*Incidental Expenses	Dollar Amount (Round to nearest \$1)	Dollars Spent	ASA, AMH, CSA, CMH	SERV
29	Aftercare/Follow-up – Individual	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
30	Information and Referral	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	EVNT
32	Outpatient Detoxification	Minutes (Max = 240 per SERV) (Maximum 4 hrs per Calendar Day)	Direct Staff Hour	ASA, CSA	SERV
35	Outpatient – Group	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
36	Room & Board with Supervision, L1	Day (Max = 1 day per SERV)	Day	ASA, AMH, CSA, CMH	SERV
37	Room & Board with Supervision, L2	Day (Max = 1 day per SERV)	Day	ASA, AMH, CSA, CMH	SERV
38	Room & Board with Supervision, L3	Day (Max = 1 day per SERV)	Day	ASA, AMH, CSA, CMH	SERV
39	Short-term Residential Treatment	Day (Max = 1 day per SERV)	Day	AMH	SERV
40	Mental Health Clubhouse	Minutes (Max = 1440 per SERV)	Direct Staff Hour	AMH	EVNT
42	Intervention – Group	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
43	Aftercare – Group	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
44	CCST – Individual	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV/EVNT
45	CCST – Group	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV/EVNT
46	Recovery Support – Individual	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
47	Recovery Support – Group	Minutes (Max = 1440 per SERV)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
48	Indicated Prevention	Minutes (Max = 480 per SERV) (Max 8 hrs per calendar day)	Direct Staff Hour	ASA, AMH, CSA, CMH	SERV
49	Selective Prevention	Minutes (Max = 1440 per SERV)	Non-Direct Staff Hour	ASA, AMH, CSA, CMH	EVNT
50	Universal Direct Prevention	Minutes (Max = 1440 per SERV)	Non-Direct Staff Hour	ASA, AMH, CSA, CMH	EVNT
51	Universal Indirect Prevention	Minutes (Max = 1440 per SERV)	Non-Direct Staff Hour	ASA, AMH, CSA, CMH	EVNT

* Incidental Expenses (28) may be used as EVNT (non-client Specific) reporting only for IDP bulk purchases. Otherwise, it is for SERV (client specific) reporting only.

For more information on the Substance Abuse and Mental Health Covered Services, please refer to Appendix 7 – Covered Services and Definitions and the Financial Rule 65E-14.021.

DATA CODE TABLES

Table 2. Dependency / Criminal Status Codes	
[00] Insufficient Information	
CHILDREN	
Adjudicated Children	
[01] Delinquent, in physical custody	A delinquent youth in the physical custody of the Department of Juvenile Justice, who is either committed to a Juvenile Justice facility, e.g., training school, group treatment home, halfway house; or placed in a non-Juvenile Justice commitment.
[02] Delinquent, not in physical custody	A delinquent youth placed on community control or in a Juvenile Justice non-residential commitment program, e.g., Special Intensive Group (SIG), day treatment or Juvenile Alternatives Services Programs (JASP).
[03] Dependent, in physical custody	A dependent child in the physical custody of the Department of Children and Families; including children in foster care, temporary placement in an emergency shelter or residing in a CSU.
[04] Dependent, not in physical custody	A dependent child is a person that remains in his/her home, and who is under protective services supervision.
[05] Dependent & Delinquent, in physical custody	A combination of codes 01 and 03 as defined above.
[06] Dependent & Delinquent, not in physical custody	A combination of codes 02 and 04 as defined above.
[07] "Children in Need of Services" (CINS), not in physical custody	A child in need of services is a child where there is not a pending departmental investigation into an allegation of suspicion of abuse, neglect or delinquent, or no current supervision by the department for adjudication for dependency or delinquency. The child must also be found by the court to be a persistent runaway, habitual truant, or to have persistently disobeyed the reasonable and lawful demands of parent or legal guardians, pursuant to Chapter 39, F.S.
Non-Adjudicated Children	
[08] Other DCF program status	No further description.
[09] Under custody & supervision of family relatives or guardian	A child, who is not under protective supervision, is not delinquent or dependent, <u>and</u> who is living under the custody and supervision of family, relatives or a legal guardian.
Juvenile Incompetent to Proceed Program	
[27] Incompetent to Proceed – Ages 0 – 17	[28] Incompetent to Proceed – Ages 18 – 20
ADULTS	
Adults with No Court Jurisdiction	
[10] Competent, no charges	Use this code for all clients not involved with the criminal justice system and for clients on probation.
[11] Civil incompetence of person or property	Not involved with the criminal justice system/incompetence is of person or property.

DATA CODE TABLES

Table 2. Dependency / Criminal Status Codes	
Adults with Court Jurisdiction (Designate any person who is under the jurisdiction of the court in one of the categories below)	
Criminal Competent: Determined by the court to be competent to proceed in criminal offenses and not adjudicated not guilty by reason of insanity.	
[12] Incarcerated-Competent	[13] Release pending hearing-Competent
[14] This code is no longer used	[15] This code is no longer used
Criminal Incompetent: Adjudicated by the court as Incompetent to Proceed (ITP) at a material stage of a criminal proceeding.	
[16] Release pending hearing-ITP	[17] Involuntarily hospitalized (direct commit) – ITP
[18] Incarcerated-ITP	[19] Involuntarily hospitalized – revocation of conditional release-ITP
[20] This code is no longer used	[21] Conditionally released-ITP
Not Guilty by Reason of Insanity (NGI): Adjudicated by the court as NGI on criminal charges.	
[22] Involuntary hospital – direct commit – NGI	[25] Conditionally released – NGI
[23] Involuntary hospital – revocation of conditional release – NGI	[26] Incarcerated – NGI
[24] Released pending hearing – NGI	[29] Incompetent to Proceed – Age 21 ⁺

Table 3. Educational Levels (GRADE) Codes		
[00] No Years of Schooling	[24] Grade 9	[34] Doctorate Degree
[01] Grade 1	[25] Grade 10	[35] Special School
[02] Grade 2	[26] Grade 11	[36] Vocational School
[03] Grade 3	[27] Grade 12	[37] College Undergraduate Freshman (1 st Year)
[04] Grade 4	[28] High School Graduate (Diploma/GED)	[38] College Undergraduate Sophomore (2 nd Year)
[05] Grade 5	[30] Associate Degree	[39] College Undergraduate Junior (3 rd Year)
[06] Grade 6	[31] Bachelor Degree	[40] College Undergraduate Senior (4 th Year)
[07] Grade 7	[32] Master Degree	[41] Kindergarten
[08] Grade 8	[33] Professional Degree	[42] Nursery School/Preschool/Head Start

Note: These Educational Codes are effective July 1, 2015. Codes 20-23 and 29 are no longer valid.

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Table 4. Employment Status Codes	
Employment Codes	Reasons for Not Being in Workforce
[10] Active military, overseas	[81] Homemaker – must keep house for 1 or more others
[20] Active military, USA	[82] Student
[30] Full Time	[83] Disabled
[31] Unpaid Family Worker (see Note)	[84] Criminal Inmate
[40] Part Time	[85] Inmate Other
[50] Leave of Absence	[86] Not authorized to work
[60] Retired	
[70] Terminated/Unemployed	

Note: Unpaid Family Worker – A family member who works at least 15 hours or more a week without pay in a family-operated enterprise. If an individual refuses to work because they are making money through illegal activities (i.e., drug sales or prostitution) the client should be coded as unemployed '70'.

Table 5. FARS/CFARS Purpose of Assessment Codes	
Code	Description
[1]	Admission: The person's admission to the provider agency: evaluation is being completed at the time of the client's admission to the provider agency. "Admission" is the first service for that client following a previous agency discharge or no prior service for that client at that agency.
[2]	Six-month assessment. One of the six-month assessment periods following admission to the provider agency: this evaluation is every six months from the evaluation date on the admission or last FARS/CFARS/ record for that client at that agency.
[3]	Discharge. The person's discharge from the provider agency: evaluation is being completed at the time of discharge from the provider agency. "Discharge" is the last service for that client at that agency, with no other services expected to be rendered.
[4]	Administrative discharge. Administrative discharge from the provider agency: evaluation is being completed for an administrative discharge, FARS/CFARS ratings and MGAF scores are not required. An "administrative discharge" is used when a provider has no contact with a client for at least the 30 days prior to the evaluation and therefore has no knowledge of the data needed to complete the Problem Severity Ratings Scale.

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Table 6. Florida County Codes				
[01] Alachua	[15] Dixie	[29] Hillsborough	[43] Martin	[57] Santa Rosa
[02] Baker	[16] Duval	[30] Holmes	[44] Monroe	[58] Sarasota
[03] Bay	[17] Escambia	[31] Indian River	[45] Nassau	[59] Seminole
[04] Bradford	[18] Flagler	[32] Jackson	[46] Okaloosa	[60] Sumter
[05] Brevard	[19] Franklin	[33] Jefferson	[47] Okeechobee	[61] Suwannee
[06] Broward	[20] Gadsden	[34] Lafayette	[48] Orange	[62] Taylor
[07] Calhoun	[21] Gilchrist	[35] Lake	[49] Osceola	[63] Union
[08] Charlotte	[22] Glades	[36] Lee	[50] Palm Beach	[64] Volusia
[09] Citrus	[23] Gulf	[37] Leon	[51] Pasco	[65] Wakulla
[10] Clay	[24] Hamilton	[38] Levy	[52] Pinellas	[66] Walton
[11] Collier	[25] Hardee	[39] Liberty	[53] Polk	[67] Washington
[12] Columbia	[26] Hendry	[40] Madison	[54] Putnam	[99] Out-of-State
[13] Dade	[27] Hernando	[41] Manatee	[55] St. Johns	
[14] DeSoto	[28] Highlands	[42] Marion	[56] St. Lucie	

Table 7. Funding Codes	
Type	Description
2-SAMH	Behavioral health services paid for by the agency's contract with the Department. Funds are from general revenue, the Mental Health Block Grant, or the Substance Abuse Prevention and Treatment Block Grant.
3-TANF	Behavioral health service paid for by this federal program. The agency must have a contract with the Department to provide these services. TANF provides support to low-income families to promote work, responsibility, and self-sufficiency and to strengthen families. In Florida, the program provides cash payments to families, job training, and services to preserve families.
5-Local Match Only	Behavioral health services paid for by funds available to an agency that is required for match against the Department's contract. The revenue source can be any funds not prohibited by the contract, e.g. other federal grants or state contracts.
B-Title 21	Behavioral health services paid for by Title XXI funds.

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Table 8. Marital Status Codes	
[1]	Single (includes individuals whose only marriage was annulled)
[2]	Married (includes individuals living as married under official common law)
[3]	Widowed
[4]	Divorced
[5]	Separated
[6]	Unreported
[7]	Registered Domestic Partner
[8]	Legally Separated

Table 9. Mental Health Purpose of Evaluation Codes	
Code	Description
[1]	Admission to Provider – This code is used to indicate the performance evaluation that is done at admission for new clients or for existing clients returning to the provider after a previous discharge. If an existing client, the purpose code for the previous performance evaluation must be a type 3, 4 or 5.
[2]	Quarterly Evaluation – This code is used to indicate the performance evaluations that occur every 90 days, counting from the admission date. The purpose code for the previous performance evaluation must be either a 1 or 2.
[3]	Regular Discharge from Provider – This code is used to indicate the performance evaluation that is done at discharge, which is defined as the last service for that client at that provider, with no further services expected at that time. The purpose code for the previous performance evaluation must be either a 1 or 2.
[4]	Administrative Discharge – This code is used to indicate the performance evaluation that is done when discharging clients with whom no contact has been made in at least the 30 days prior to discharge and there is, therefore, inadequate knowledge of the information needed to complete the performance outcome. The purpose code for the previous performance evaluation must be either a 1 or 2. If code 4 is used, then the only other mandatory fields are ContractorID, SSN, EvalDate, InitEvaDa, Staff id, Contract 1 and ProvID.
[5]	Immediate Discharge – This code is used to indicate the performance evaluation that is done when clients are discharged whose length of stay at the provider is less than 24 hours and/or assessment-only services are provided, and there is no plan to return to the provider at that time. Allowable covered services are 01-Assessment and 11-Intervention (Individual)

DATA CODE TABLES

Table 10. OCA Codes and Descriptions for SERV				
OCA	Code	Description	Eligible Covered Services	Description
MHA01	B0	Adult MH 24-Hr Residential Services (Non-Hospitalization)	Covered Services: 18 , 19, 20, 21, 36, 37, 38	Fund = 2, 5 Program = 1
MHA09	B1	Adult Non-Residential Care	Covered Services: 01, 02, 04, 05, 06, 08, 10, 11, 12, 14, 22, 25, 26, 28, 29, 35, 42, 43, 44, 45	Fund = 2, 5 Program = 1
MH010	CS	Miami Dade Homeless Trust – Adult Mental Health	Covered Services: 21	Fund = 2, 5 Program = 1
MH011	DN	Stewart Marchman Behavioral Healthcare - FACT Team	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 1
MHA18	B2	Adult Crisis Services	Covered Services: 03, 04, 09, 39	Fund = 2, 5 Program = 1
MHA25	B3	Adult Prevention Services	Covered Service: 48	Fund = 2, 5 Program = 1
MHA26	CO	Early Intervention for SMI and Psych Disorder	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MH0CN	DO	ME Care Coordination – Mental Health	Covered Services: 01, 02, 04, 08, 10, 11, 26, 28, 42, 46, 47	Fund = 2, 5 Program = 1
MH031	DP	David Lawrence Center Behavioral Health Services	Covered Services: 02, 08, 14, 35	Fund = 2, 5 Program = 1
MH032	DQ	Baycare Behavioral Health Veterans Intervention Program	Covered Services: 03, 19, 28	Fund = 2, 5 Program = 1
MH037	DR	Fort Myers Salvation Army Behavioral Health Services	Covered Services: 19	Fund = 2, 5 Program = 1
MH047	DT	Lakeview Center – MH & SA Adult	Covered Services: 01, 02, 04, 05, 06, 08, 10, 11, 12, 14, 22, 25, 26, 27, 28, 29, 35, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 1 & 2
MHS51	CP	Circles of Care – Cedar Village MH Adult Services	Covered Services: 19, 37	Fund = 2, 5 Program = 1
MHS52	CQ	Circles of Care Crisis Stabilization	Covered Services: 03	Fund = 2, 5 Program = 1
MH061	DW	Northside Mental Health Center – Adult Services	Covered Services: 03	Fund = 2, 5 Program = 1

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Table 10. OCA Codes and Descriptions for SERV				
OCA	Code	Description	Eligible Covered Services	Description
MHA72	B5	Community Forensic Beds	Covered Services: 01, 02, 03, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 26, 28, 35, 36, 37, 38, 44, 45, 46, 47	Fund = 2, 5 Program = 1
MHA73	B6	Adult MH FACT Team	Covered Service: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 1
MHA79	CR	Clay Crisis Behavioral Prevention Team	Covered Service: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHA86	CM	Baycare Behavioral Health Vets	Covered Service: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 1
MHA89	CK	Clay Behavioral Health Center	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHA92	CW	Palm Beach MH SA Treatment	Covered Service: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHA93	CE	Camillus Health Network SA Homeless	Covered Service: 06, 19, 21	Fund = 2, 5 Program = 1
MHA94	CF	Citrus Health Network	Covered Service: 03	Fund = 2, 5 Program = 1
MHA96	CZ	Jerome Golden Center for Behavioral Health	Covered Service: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHA97	CN	Crisis Center of Tampa Bay – Adult	Covered Services: 14, 28, 35	Fund = 2, 5 Program = 1
MH0FH	DX	Community Forensic Multidiscipli- nary Teams for Hospital Diversion	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHAPG	BA	Grants PATH	Covered Services: 01, 02, 11, 12, 14, 25, 26, 28, 35, 42, 44, 45, 46	Fund = 2, 5 Program = 1
MHATA	DA	FL Youth Transitions to Adulthood	Covered Service: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHATB	BB	TANF Eligible Participants	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45 Note: Code 15 is billable only if the client ends up being TANF Eligible	Fund = 3 Program = 1

DATA CODE TABLES

Table 10. OCA Codes and Descriptions for SERV				
OCA	Code	Description	Eligible Covered Services	Description
MHDRF	DY	ME Disabilitiy Rights Florida - MH	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 1
MHRM5	DG	Renaissance Center – Adult	Covered Services: 02, 26, 28	Fund = 2, 5 Program = 1
MHTRV	DM	ME Transition Vouchers - MH	Covered Services: 01, 02, 05, 06, 08, 10, 11, 12, 14, 22, 25, 26, 28, 29, 46	Fund = 2, 5 Program = 1
MH819	DF	Gracepoint Center – Adult	Covered Services: 03, 04	Fund = 2, 5 Program = 1
MHS50	DI	Lifestream – Adult	Covered Services: 03, 04, 09	Fund = 2, 5 Program = 1
MHS55	ED	Circles of Care Geropsychiatric Care – AMH	Covered Services: 03, 04, 09	Fund = 2, 5 Program = 1
MHSCR	EC	ME Centralized Receiving Facilities – MH Adult and Children	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 42, 43, 44, 45, 46, 47 Note: Do not use code 05 for children.	Fund = 2, 5 Program = 1
MHSFP	EH	MH For Profit Contracting	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHSMB	DJ	Meridian – Adult	Covered Service: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHSOC	EJ	MH System of Care	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 1
MHC01	BC	Children 24 Hour Residential Services (Non-Hospitalization)	Covered Services: 18, 19, 20, 21, 36, 37, 38	Fund = 2, 5 Program = 1
MHC09	BD	Children Non-Residential Services	Covered Services: 01, 02, 04, 06, 08, 10, 11, 12, 14, 22, 25, 26, 28, 29, 35, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 1
MHC18	BE	Children Crisis Services	Covered Services: 03, 04, 09	Fund = 2, 5 Program = 1
MHC25	BF	Children Prevention Services	Covered Services: 48	Fund = 2, 5 Program = 1
MHC71	BH	Residential Treatment Services for Emotionally Disturbed Children	Covered Services: 09, 18, 19, 20, 21, 36, 37, 38	Fund = 2, 5 Program = 1

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Table 10. OCA Codes and Descriptions for SERV				
OCA	Code	Description	Eligible Covered Services	Description
MHC77	DB	Child At Risk Emotionally Disturbed	Covered Service: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 1
MHC87	CI	Baycare Behavioral Health	Covered Service: 01, 02, 03, 04, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 1
MHC98	DE	ME Salus Care Center – Children	02, 12, 14, 28, 35	Fund = 2, 5 Program = 1
MHCBN	BI	Title 21 Children's Health Insurance Program	Covered Services: 01, 02, 03, 08, 11, 12, 14, 28, 35, 42, 44, 45	Fund = B Program = 1
MHCFA	BK	FACES Miami	Covered Services: 01, 02, 08, 11, 14, 28, 35, 42, 44, 45	Fund = 2, 5 Program = 1
MHCMD	BJ	Miami Wrap Around Grant	Covered Services: 01, 02, 08, 11, 14, 28, 35, 42, 44, 45	Fund = 2, 5 Program = 1
MHCPL	EA	ME Project Launch	Covered Services: 02, 14, 35	Fund = 2, 5 Program = 1
MSA03	BL	Adult SA 24- Hour Residential Services (Non-Hospitalization)	Covered Services: 18 , 19, 20, 21, 36, 37, 38	Fund = 2, 5 Program = 2
MSA11	BM	Adult SA Non-Residential Services	Covered Services: 01, 02, 04, 05, 06, 08, 11, 12, 13, 14, 22, 25, 26, 27, 28, 29, 35, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 2
MSA21	BN	Adult SA Detoxification Services	Covered Services: 04, 24, 32	Fund = 2, 5 Program = 2
MSA23	BO	HIV	Covered Services: 02, 11, 12, 14, 35, 42	Fund = 2, 5 Program = 2
MSA25	BP	Adult Prevention Services	Covered Services: 48	Fund = 2, 5 Program = 2
MSA27	BQ	SAPTBG Set-Aside for Pregnant Women and Children	Covered Services: 01, 02, 04, 05, 06, 08, 11, 12, 13, 14, 18, 19, 20, 21, 22, 24, 25, 26, 27, 28, 29, 32, 35, 36, 37, 38, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 2
MH050	DU	Specialized Treatment, Education and Prevention Services (STEPS) SA Services	Covered Services: 01, 02, 04, 05, 06, 08, 11, 12, 13, 14, 18, 19, 20, 21, 22, 24, 25, 26, 27, 28, 29, 32, 35, 36, 37, 38, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 2

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Table 10. OCA Codes and Descriptions for SERV				
OCA	Code	Description	Eligible Covered Services	Description
MSA81	BS	Expansion of SA Services for Pregnant Women	Covered Services: 01, 02, 04, 05, 06, 08, 11, 12, 13, 14, 18, 19, 20, 21, 22, 24, 25, 26, 27, 28, 29, 32, 35, 36, 37, 38, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 2
MSATB	BT	TANF Eligible Participants	Covered Services: 01, 02, 04, 05, 06, 08, 11, 14, 18, 19, 20, 21, 22, 25, 26, 27, 28, 29, 35, 36, 37, 38, 42, 43, 44, 45, 46, 47 Note: Code 15 is billable only if the client ends up being TANF Eligible	Fund = 3 Program = 2
MSA91	CG	Family Intensive Treatment (FIT)	Covered Services: 01, 02, 04, 06, 08, 11, 12, 14, 18, 19, 20, 21, 24, 25, 26, 27, 28, 29, 32, 35, 36, 37, 38, 42, 43, 44, 45, 46, 47 Covered Service for Mental Health: 14 only	Fund = 2, 5 Program = 1 or 2
MS902	DK	First Step of Sarasota – Drug Free Babies	Covered Services: 19	Fund = 2, 5 Program = 2
MS903	DH	Proviso Allocation for Here's Help - ASA	Covered Services: 19	Fund = 2, 5 Program = 2
MS0CN	DV	ME Care Coordination – SA	Covered Services: 01, 02, 04, 08, 11, 26, 28, 42, 46, 47	Fund = 2, 5 Program = 2
MSSFP	EI	SA For Profit Contracting	Covered Services: 01, 02, 03, 04, 05, 06, 08, 09, 10, 11, 12, 14, 18, 19, 20, 21, 22, 25, 26, 28, 29, 35, 36, 37, 38, 39, 42, 44, 45, 46, 47, 48	Fund = 2, 5 Program = 2
MSC03	BU	Children SA 24 Hour Residential Services (Non-Hospitalization)	Covered Services: 18, 19, 20, 21, 36, 37, 38	Fund = 2, 5 Program = 2
MSC11	BV	Children Non-Residential Services	Covered Services: 01, 02, 04, 06, 08, 11, 12, 13, 14, 22, 25, 26, 27, 28, 29, 35, 42, 43, 44, 45, 46, 47	Fund = 2, 5 Program = 2
MSC21	BW	Children SA Detoxification Services	Covered Services: 04, 24, 32	Fund = 2, 5 Program = 2
MSC23	BX	Children SA HIV Services	Covered Services: 02, 11, 12, 14, 35, 42	Fund = 2, 5 Program = 2
MSC25	BY	Children SA Prevention Services	Covered Services: 48	Fund = 2, 5 Program = 2
MSCTB	CA	TANF Eligible Participants	Covered Services: 01, 02, 04, 06, 08, 11, 14, 18, 19, 20, 21, 22, 25, 26, 27, 28, 29, 35, 36, 37, 38, 42, 43, 45, 46, 46, 47 Note: Code 15 is billable only if the client ends up being TANF Eligible	Fund = 3 Program = 2

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Table 10. OCA Codes and Descriptions for SERV				
OCA	Code	Description	Eligible Covered Services	Description
MSCPP	CB	Partners for Prevention Grant	Covered Services: 48	Fund = 2, 5 Program = 2
MSC80	CC	Informed Families	Covered Services: 01, 02, 04, 06, 08, 11, 12, 13, 14, 18, 19, 20, 21, 22, 24, 25, 26, 27, 28, 29, 32, 35, 36, 37, 38, 42, 43, 46, 47	Fund = 2, 5 Program = 2
MSC95	CL	SA DACCO	Covered Services: 01, 02, 04, 06, 08, 11, 12, 13, 14, 18, 19, 20, 21, 22, 24, 25, 26, 27, 28, 29, 32, 35, 36, 37, 38, 42, 43, 46, 47	Fund = 2, 5 Program = 2
MS0JG	EB	Jerome Golden Center Special SA Services	Covered Services: 04,18,19, 20, 21, 24, 36, 37, 38	Fund = 2, 5 Program = 2
MSTRV	DS	ME Transition Vouchers – SA Adult	Covered Services: 01, 02, 05, 06, 08,11,12, 13,14, 22, 25, 26, 28, 29, 32, 46	Fund = 2, 5 Program = 2

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Table 11. OCA Codes and Descriptions for EVNT				
OCA	Code	Description	Eligible Covered Service	Other Validations
MHA09	B1	Adult Non-Residential Care	Covered Services: 04, 07, 15, 30, 40, 44, 45	Fund = 2, 5 Program = 1
MHA18	B2	Adult Crisis Services	Covered Services: 04	Fund = 2, 5 Program = 1
MHA25	B3	Adult Prevention Services	Covered Services: 30, 49, 50, 51	Fund = 2, 5 Program = 1
MHA26	CO	Early Intervention for SMI and Psych Disorders	Covered Services: 04, 07, 15, 30, 44, 45, 49, 50, 51	Fund = 2 Program = 1
MH0CN	DO	ME Care Coordination – Mental Health	Covered Services: 15	Fund = 2, 5 Program = 1
MH011	DN	Stewart Marchman Behavioral Healthcare - FACT Team	Covered Services: 04, 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 1
MH031	DP	David Lawrence Center Behavioral Health Services	Covered Services: 15	Fund = 2 Program = 1
MHS51	CP	Circles of Care Cedar Village	Covered Services: 04, 07, 15, 30, 49, 50, 51	Fund = 2, 5 Program = 1
MHS52	CQ	Circles of Care Crisis Stabilization	Covered Services: 04, 07, 15, 30, 49, 50, 51	Fund = 2, 5 Program = 1
MHA72	B5	Community Forensic Beds	Covered Service: 15, 44, 45	Fund = 2, 5 Program = 1
MHA73	B6	Adult MH FACT Admin Svcs	Covered Services: 04, 07, 15, 30, 44, 45	Fund = 2, 5 Program = 1
MHA76	B8	Indigent Psychiatric Medication Program	Covered Services: 28	Fund = 2, 5 Program = 1
MHA79	CR	Clay Crisis Behavioral Prevention Team	Covered Services: 04, 07, 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 1
MHA86	CM	Baycare Behavioral Health Vets	Covered Services: 04, 07, 15, 30, 44, 45	Fund = 2, 5 Program = 1
MHA88	CD	Guidance Care Center – Key West	Covered Service: 04, 07, 15, 30	Fund = 2, 5 Program = 1

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Table 11. OCA Codes and Descriptions for EVNT				
OCA	Code	Description	Eligible Covered Service	Other Validations
MHA89	CK	Clay Behavioral Health Center	Covered Services: 04, 07, 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 1
MHA92	CW	Palm Beach MH SA Treatment	Covered Services: 04, 07, 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 1
MHA96	CZ	Jerome Golden Center for Behavioral Health	Covered Services: 04, 07, 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 1
MHDRF	DY	ME Disabilitiy Rights Florida - MH	Covered Services: 04, 07, 15, 30, 40, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 1
MH097	CN	Crisis Center of Tampa Bay – Adult	Covered Services: 30	Fund = 2, 5 Program = 1
MH0FH	DX	Community Forensic Multidisciplinary Teams for Hospital Diversion Adult MH	Covered Services: 15	Fund = 2, 5 Program = 1
MHSCR	EC	ME Centralized Receiving Facilities – MH Adult & Children	Covered Services: 04,15, 30, 44, 45	Fund = 2, 5 Program = 1 & 2
MHSCD	DO	ME Care Coordination	Covered Services: 04, 15	Fund = 2, 5 Program = 1
MHAPG	BA	Grants PATH	Covered Services: 15, 40, 44, 45	Fund = 2, 5 Program = 1
MHATA	DA	FL Youth Transitions to Adulthood	Covered Services: 04, 07, 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 1
MHSMB	DJ	Meridian - Adult	Covered Service: 04, 07, 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 1
MHSFP	EH	MH For Profit Contracting	Covered Service: 04, 07, 15, 30, 40, 44, 45, 49, 50, 51	
MHC09	BD	Children Non-Residential Services	Covered Services: 04, 15, 30, 44, 45	Fund = 2, 5 Program = 1
MHC18	BE	Children Crisis Services	Covered Services: 04	Fund = 2, 5 Program = 1
MHC25	BF	Children Prevention Services	Covered Services: 30, 49, 50, 51	Fund = 2, 5 Program = 1
MHC77	DB	Child At Risk Emotionally Disturbed	Covered Services: 04, 15, 30, 44, 45	Fund = 2, 5 Program = 1

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Table 11. OCA Codes and Descriptions for EVNT				
OCA	Code	Description	Eligible Covered Service	Other Validations
MHC87	CI	Baycare Behavioral Health Child	Covered Services: 04, 15, 30	Fund = 2, 5 Program = 1
MHCMD	BJ	Miami Wrap Around Grant	Covered Service: 15, 44, 45	Fund = 2, 5 Program = 1
MHCFA	BK	FACES Miami	Covered Service: 15, 44, 45	Fund = 2, 5 Program = 1
MHCPL	EA	Project Launch	Covered Services: 15	Fund = 2, 5 Program = 1
MSA11	BM	Adult Non-Residential Services	Covered Services: 04, 15, 30, 44, 45	Fund = 2, 5 Program = 2
MSA21	BN	Adult Detoxification Services	Covered Service: 04	Fund = 2, 5 Program = 2
MSA25	BP	Adult Prevention Services	Covered Services: 30, 49, 50, 51	Fund = 2, 5 Program = 2
MSA27	BQ	SAPTBG Set-Aside for Pregnant Women and Children	Covered Services: 04, 15, 30	Fund = 2, 5 Program = 2
MSA81	BS	Expansion of SA Services for Pregnant Women	Covered Services: 04, 15, 30, 44, 45	Fund = 2, 5 Program = 2
MSA91	CG	Family Intensive Treatment (FIT) SA	Covered Services: 04, 15, 30, 44, 45	Fund = 2, 5 Program = 2
MH050	DU	Specialized Treatment, Education and Prevention Services (STEPS) - SA Adult	Covered Services: 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 2
MS0CN	DV	ME Care Coordination – SA	Covered Services: 15	Fund = 2, 5 Program = 1
MS0JG	EB	Jerome Golden Center Special SA Adult Services	Covered Services: 04	Fund = 2, 5 Program = 2
MSSFP	EI	SA For Profit Contracting	Covered Services: 04, 15, 30, 44, 45, 49, 50, 51	Fund = 2, 5 Program = 2
MSC11	BV	Children Non-Residential Services	Covered Services: 04, 15, 30, 44, 45	Fund = 2, 5 Program = 2

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Table 11. OCA Codes and Descriptions for EVNT				
OCA	Code	Description	Eligible Covered Service	Other Validations
MSC21	BW	Children Detoxification Services	Covered Service: 04	Fund = 2, 5 Program = 2
MSC25	BY	Children Prevention Services	Covered Services: 30, 49, 50, 51	Fund = 2, 5 Program = 2
MSC80	CC	Informed Families	Covered Services: 04, 15, 30, 49, 50, 51	Fund = 2, 5 Program = 2
MSC95	CL	SA DACCO	Covered Services: 04, 15, 30, 44, 45	Fund = 2, 5 Program = 2
MSCPP	CB	Partners for Prevention Grant	Covered Services: 49, 50, 51	Fund = 2, 5 Program = 2

Table 12. Primary Source of Income Codes
[1] Salary – Compensation for services, paid to the client on a regular basis
[2] TANF – Income received by the client through the Temporary Assistance to Needy Families Program
[3] Retirement/Pension/SSI – Income received by the client for fulfilling certain conditions of prior employment.
[4] Disability – Income received by the client, usually from government or insurance sources, for prior handicapping conditions. This includes SSDI.
[5] Other – Non-specified income including “illegal” income.
[6] None – Client has no source of income. Do not use this for unknown income sources.
[7] Unknown – Use this code if you can’t determine the source of the client’s income.

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Table 13. Provider Type Codes		
[01] Counselors by subtype	[07] Nursing service related provider by type/subtype	[12] Specialist
[02] Marriage & Family Therapist	[08] Physician assistant and advanced practice nursing providers by type/subtype	[13] School Psychologist
[03] Therapist	[09] Physician/Osteopath by subtype	[14] Social Worker
[04] Neuropsychologist	[10] Psychosocial	[15] Sociologist
[05] Psychoanalyst by subtype	[11] Rehabilitation	[16] Other
[06] Psychologist by subtype		

Table 14. Referral Codes and Descriptions	
Referral Code	Description
[01] Individual (Self-Referral)	This includes only those persons that are requesting substance abuse services on their own behalf and have not been referred by any of the other referral sources that are listed below.
[02] Substance Abuse Care Provider	This includes any agency or other health care provider whose principal objective is the treatment of clients who have substance abuse problems, or a program whose activities are related to prevention, education and/or treatment of alcoholism or drug abuse.
[03] Mental Health Care Provider	This includes psychiatric hospitals or institutions, community mental health centers and licensed health care professionals who provide counseling, psychological, or psychiatric treatment. Include referral from your agency's Mental Health program, OR, if under a subcontractor or ASO, from the mental health subcontractor to the same contractor.
[04] Juvenile Justice	This includes clients referred by the state's juvenile justice system. This may be a direct or indirect referral. Juvenile TASC should use this to admit individuals to their caseload. All adolescent TASC juvenile assessment center clients are considered juvenile justice referrals. If the TASC case manager is referring a juvenile justice client to you for substance abuse treatment, the referral source is TASC.
[05] County Public Health Unit	This includes physicians or other licensed health care professionals associated or working with the county's public health unit.

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Table 14. Referral Codes and Descriptions	
Referral Code	Description
[06] School (Education)	This includes a school principal, counselor, teacher, student assistance program (SAP), the school system, or education agency.
[07] Employer/Employee Assistance Program (EAP)	This includes an employee, a supervisor, or an employee counselor.
[08] Other Social Service/Health/Community Referral	This includes family and friends or a federal, state or local agency that provides aid in the areas of poverty relief, unemployment, shelter, social welfare or other types of health/community services. Community and religious organizations are included in this category.
[09] TASC (Assessment Centers)	This includes referrals from the Treatment Alternatives for Safer Communities (TASC) program. All juvenile justice clients placed in outpatient or residential treatment from a TASC program should be coded as a TASC referral.
[10] Probation/Parole/Controlled	This includes referrals from a judge, prosecutor, probation or parole officer, or other personnel affiliated with the criminal justice system. This also includes work release and/or home furlough participants.
[11] DUI/DWI	This source is for those clients referred to a treatment provider as a result of either a DUI/DWI issue [e.g. driving under the influence (DUI) or driving while intoxicated (DWI)] or a condition for reinstatement of driving privileges.
[12] Pretrial	This includes clients who are referred in lieu of or deferred from prosecution; pretrial release before official adjudication. The client need not be officially designated as “on probation”.
[13] Prison/Jail	This includes clients currently in a prison, a jail or a correctional facility.
[14] Other Court Order/Recognized Legal Entity	This includes clients who have been referred as a result of civil commitment (Chapter 397) or other police, law enforcement, defense attorney or other non-voluntary referral not identified above.
[16] CINS/FINS	Child/Family-In-Need-Of-Services is a child or family for whom there is no pending DCF investigation into an allegation or suspicion of abuse, neglect or abandonment; no pending referral alleging the child is delinquent; or no current supervision by the department for an adjudication for dependency or delinquency. The child must also, pursuant to Chapter 39, F.S., be found by the court to be a persistent run away, a habitual truant, or to have persistently disobeyed the reasonable and lawful demands of parents or legal guardians.
[17] Addiction Receiving Facilities (ARFS)	A community-based, secure facility, designed for persons found to be substance abuse impaired as described in section 397.675, F.S., and who are in need of detoxification assessment, stabilization, and short-term treatment.
[18] Outreach Program	A formal or informal program designed to refer specific groups of individuals into treatment through a variety of programs. The programs can range from going out into the community to seek these individuals out or being referred by agencies to a substance abuse provider under a formal agreement.

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Table 14. Referral Codes and Descriptions

Referral Code	Description
[19] DCF/SAMH	This includes individuals referred by the department's ADM Office. This may be a direct or indirect referral. For example, the family may bring in a client, but at the suggestion of an ADM staff member. These clients are not being followed by Family Safety and are not in DCF custody.
[20] Community Hospital	This includes individuals referred by a Community Hospital for mental health services. This may be a direct or indirect referral.
[21] State Hospital	This includes persons referred by a State Hospital for services following their release.
[22] Physician/Doctor	This includes persons who are referred by their doctor or another physician for services.
[23] Law Enforcement	This includes persons who are either referred by law enforcement officers or who are brought in by them.
[24] Family Safety Foster Care (CBC)	This includes individuals referred by the department's Office of Family Safety (FS) office for Foster Care. This may be a direct or indirect referral. For example, the family may bring in a client, but at the suggestion of a Family Safety counselor. These are clients in DCF custody.
[25] Family Safety Protective Svcs	This includes individuals referred by the department's Office of Family Safety (FS) office for protective supervision. This may be a direct or indirect referral. For example, the family may bring in a client, but at the suggestion of a Family Safety counselor. These are clients in DCF custody.
[99] None of the Above	Use this selection only when none of the other referral sources are applicable.

Table 15. Residential Status Codes

<u>Independent living</u> means the client is paying (through any source of income) either all costs of living or an equal share of the total cost with others. Just contributing to the cost at less than an estimated equal share is not independent living.
[01] Independent Living – Alone
[02] Independent Living – with Relatives
[03] Independent Living – with Non-Relatives
<u>Dependent living</u> means the client is paying less than an estimated equal share amount of the total combined living expenses.
[04] Dependent Living – with Relatives
[05] Dependent Living – with Non-Relatives
<u>Other Residential</u>
[06] Assisted Living Facility (ALF) (Limited MH-ALF should use code 17)
[07] Foster Care/Home

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Table 15. Residential Status Codes	
[08]	Adult Residential Treatment Facility (Group Home)
[09]	Homeless
[10]	State Mental Health Treatment Facility (State Hospitals)
[11]	Nursing Home
[12]	Supported Housing
[13]	Correctional Facility
[14]	DJJ Facility
[15]	Crisis Residence
[16]	Children Residential Treatment Facility
[17]	Limited Mental Health Licensed ALF
[18]	Other Residential Status (New Code – Effective July 1, 2015)
[99]	Not Available or Unknown

Table 16. Service Setting Codes	
[01] Assisted Living Facilities	[11] Provider Premises – Other than BHOS
[02] Recipient's Home or Apartment	[12] School
[03] County Health Department	[13] Shelter Facility
[04] Court	[14] State Hospital
[05] Delinquency Commitment	[15] Other DCF-funded Provider
[06] Foster Home	[16] Other Setting
[07] DCF Office	[17] DJJ BHOS
[08] Jail	[18] Family Safety BHOS
[09] Juvenile Detention Center	[19] Selected Prevention Services
[10] Nursing Home	[20] Indicated Prevention Services
[21] Addictions Receiving Facility - An ARF is a community-basis secure facility operated on a 24-hour a day basis that is designated by the department for persons found to be substance abuse impaired, as described in Section 397.675, F.S. The program may include detoxification, assessment, stabilization, and short-term treatment.	
[22] Interim Services - Are those minimal services provided to a person while the person is waiting for admission into a substance abuse treatment setting.	
[23] FYI Grant Services - Any indicated prevention program conducted under the Florida Youth Initiative (FYI) Grant. These can be either school based or non-school based.	
[24] SA Pregnant Women Program	[28] Residential Treatment Center

DATA CODE TABLES**Table 16. Service Setting Codes**

[25] Therapeutic Foster Home	[29] Statewide Inpatient Psychiatric Program
[26] Specialized Therapeutic Foster Home Level 1	[30] Therapeutic Group Care
[27] Specialized Therapeutic Foster Home Level 2	

Table 17. Staff ID Education Codes

[01] Non-Degree Trained Technician.
[02] AA Degree Trained Technician
[03] BA/BS – Bachelor's Degree from an accredited university or college with a major in counseling, social work, psychology, nursing, rehabilitation, special education, health education or related human services field.
[04] MA/MS – Master's Degree from an accredited university or college with a major in the field of counseling, social work, psychology, nursing, rehabilitation, special education, health education or related human services field.
[05] Licensed Practitioner of the Healing Arts - MA/MS advanced registered nurse practitioner, physician assistants, clinical social workers, mental health counselors, marriage and family therapists.
[06] PhD/PsyD/Ed.D - Licensed psychologist
[07] MD/DO – Board Certified

Table 18. Substance Abuse Discharge Reason Codes

[01] Completed Episode Of Care – No Substance use	The client is discharged from an agency and is not referred for any further substance abuse treatment. The client has completed the episode of care by remaining substance free for at least 30 days prior to discharge and ASAM PPC-2 discharge criteria were met for the final level of care. When the episode of care is less than 30 days, the client must maintain abstinence during treatment.
[02] Completed Treatment - Some Substance use (some impairment)	The client has completed treatment, however, there may be some limited substance abuse use/impairment. While not the ideal discharge status, this attempts to recognize that some people complete a treatment program and are able to function outside the treatment program with regard to employment and family responsibilities in spite of some minimal substance use. It is expected that individuals with this discharge status will continue his or her recovery process outside of the treatment program. The person may use private counselors, AA, or other established sources.
[06] Non-Compliant With Agency's Rules	The client is discharged for violation of the agency's rules (e.g., continued drug and alcohol involvement, violence, etc.) and treatment cannot be completed.
[07] Left before completing treatment	The client is discharged because they leave treatment due to circumstances beyond their control. This includes

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Table 18. Substance Abuse Discharge Reason Codes

(Involuntary)	hospitalization where there is little likelihood of the client returning, job transfer, family moves out of state, etc. This does not include clients who are incarcerated.
[08] Incarcerated	The client is discharged because he or she is incarcerated. Treatment has not been completed. This also includes those clients receiving treatment in prison who are transferred to another prison where services cannot be continued. Clients placed in a DJJ commitment facility are also included.
[09] Died	The client is discharged because of the client's death.
The next two codes are used only for clients whose services include only non-treatment types of services. Non-Treatment services are Detoxification, TASC, Intervention, or Prevention.	
[10] Completed Non-Treatment Service(s)	The client is discharged from this non-treatment placement and successfully completed the service. For example, a client completed his or her Alpha or Beta program or a TASC client's case management/monitoring is completed and the client fulfilled the TASC requirements.
[11] Did Not Complete Non-Treatment Service(s)	The client is discharged from this non-treatment placement but did not complete the service. For example, a client may have been placed in an Alpha or Beta program, but due to any reason, did not complete the program; or, a TASC client's case management/monitoring is terminated without the client's fulfillment of the TASC requirements.
The next two discharge reasons are used for clients who are referred to another agency within the State of Florida. Clients who are referred to an agency outside the state should be coded with the appropriate final discharge reason.	
[13] Referred Outside Of Agency - Episode Of Care Completed	The client is discharged from an agency and is referred for continued treatment for problems that may be related to substance abuse. This may include medical or nursing services, developmental services, or psychiatric care. The client has completed the episode of care by remaining substance abuse free for at least 30 days prior to discharge and ASAM PPC-2 discharge criteria were met for the final level of care. When the episode of care is less than 30 days, the client must maintain abstinence during treatment.
[14] Referred Outside Of Agency – Episode Of Care Not Completed	The client is discharged from an agency and is referred for continued treatment for substance abuse problems. The services provided were not completed and ASAM PPC-2 discharge criteria were not met. The episode of care is not completed.
[15] Left Voluntarily Before Completing Treatment	The client is discharged because of his or her decision to leave the agency before completing treatment, or refusal to continue a further phase of treatment, or has not shown up for treatment in the last 30 days. Examples: AWOL, escape, against medical advice-client left treatment.
[16] Administrative Discharge (Initiated by the agency)	A client fails to engage in treatment and is discharged prior to the fourth day of residential treatment or the fourth outpatient session.
[17] Agency Closed with no Referral	An agency has closed and the clients have not been referred to another agency for continuing services.

Table 19. Substance Abuse Drug Codes (Code Order)

[02] Alcohol	[50] Glutethimide (Doriden)	[97] Pemoline
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DATA CODE TABLES

Table 19. Substance Abuse Drug Codes (Code Order)		
[03] Crack Cocaine (use smoking for route)	[51] Methaqualone (Quaalude, Sopor)	[98] Presenting At-Risk
[04] Marijuana/Hashish	[52] Other Non-Barbiturate Sedatives	[99] Presenting Substance Abuse Problem, Not Confirmed
[05] Heroin	[53] Flunitrazepam (Rohypnol)	[1A] Phendimetrazine
[06] Non-Prescription Methadone	[54] GHB/GBL – Gamma-Hydroxybutyric Acid	[1B] Phentermine
[07] Other Opiates or Opioids	[55] Ketamine (Ketalar, Ketanest, Ketaset)	[1C] Propylhexedrine
[08] PCP-Phencyclidine	[56] Clonazepam (Klonopin, Ceberclon, Valpax)	[1D] Nicotine
[09] Other Hallucinogens/Psychedelics	[57] Other Aerosols	[1E] Methamphetamine - Pharmaceutical
[10] Methamphetamines	[58] Other Nitrites	[1F] Caffeine
[11] Other Amphetamines	[59] Other Solvents	[1G] 1,4-Butanediol
[12] Other Stimulants	[60] Diphenhydramine	[1H] 4-Methoxyamphetamine (PMA)
[13] Other Benzodiazepines	[61] Dextromethorphan	[1I] 4-Methyl-2,5-Dimethoxyamphetamine (DOM)
[14] Other Tranquilizers	[62] Diphenoxylate (Lomotil)	[1J] 5-Methoxy-Disopropyltryptamine (5-MeO-DIPT)
[15] Other Barbiturates	[63] Methylphenobarbital (Mephobarbital, Mebaral)	[1K] Alpha-Ethyltryptamine
[16] Other Sedatives/Hypnotics	[64] Estazolam (ProSom, Eurodin)	[1L] Dimethyltryptamine (DMT)
[17] Other Inhalants	[65] Bromazepam (Bromazaniil)	[1M] Ibogaine
[18] Over-the-Counter	[66] Halazepam (Paxipam)	[1N] Mescaline or Peyote
[19] Ice	[67] Medazepam (Rudotel)	[1O] Methylenedioxymphetamine (MDA)
[20] Other	[68] Nitrazepam (Mogadan)	[1P] Psilocybin or Psilocin
[22] Other Cocaine	[69] Oxazepam (Serax)	[1Q] Salvia Divinorum or Salvinorin A
[23] Morphine (Avinza, Kadian, MS Contin, Oramorph)	[70] Prazepam (Centrax)	[1R] Synthetic Cannabinoids
[24] Methadone (Dolophine, Methadose)	[71] Quazepam (Doral)	[1S] Synthetic Cathinones
[25] Codeine	[72] Temazepam (Restoril)	[1T] Acetone
[26] D-Propoxyphene	[73] Chloral Hydrate (Somnote, Aquachloral Supporettes)	[1U] Computer Duster
[27] Oxycodone	[74] Eszopiclone (Lunesta)	[1V] Cyclohexanone
[28] Meperidine HCL	[75] Opium	[1W] Diethyl Ether (Ether)
[29] Hydromorphone (Dilaudid, Exalgo, Hydrostat)	[76] Barbitol	[1X] Ethyl Acetate
[30] Other Narcotic Analgesics	[77] Butabarbital	[1Y] EstyleneGlycol Monomethyl Ether Acetate

DATA CODE TABLES

Table 19. Substance Abuse Drug Codes (Code Order)		
[31] Pentazocine (Talwin, Talacen)	[78] Butalbital	[1Z] Freon, Helium or Xenon
[32] Hydrocodone	[79] Pentobarbital (Pentobarbitone)	[2A] Gasoline, Lighter Fluid, butane, Kerosene, Propane
[33] Carisoprodol (Soma, Soprodal, Vanadom)	[80] Meprobamate	[2B] Glue or other Adhesives
[34] Butrphanol (Stadol)	[81] Zaleplon	[2C] Hexane
[35] LSD	[82] Zolpidem	[2D] Isopropanol
[36] Methylphenidate (Ritalin, Concerta, Metadate)	[83] Buprenorphine	[2E] Methyl Ethyl Ketone
[37] Methylenedioxymethamphetamine (MDMA)	[84] Fentanyl	[2F] Methyl Isobutyl Ketone
[38] Ephedrine	[85] Levo-Alphaacetylmethadol (LAAM)	[2G] Nitrous Oxide
[39] Alprazolam (Xanax, Niravam)	[86] Oxymorphone	[2H] Toluene
[40] Chlordiazepoxide (Librium, H-Tran, Libritabs)	[87] Propoxyphene	[2I] Toluol
[41] Clorazepate (Tranxene, Gen-xene)	[88] Tramadol	[2J] Trichloroethane or Trichloromethane
[42] Diazepam (Valium, Valrelease)	[89] Benzphetamine	[2K] Trichloroethylene
[43] Flurazepam (Dalmane)	[90] Dexmethylphenidate	[2L] Amphetamine and Dextroamphetamine(d-amphetamine)
[44] Lorazepam (Ativan)	[91] Diethylpropion	[2M] Dextroamphetamine (d-amphetamine)
[45] Triazolam	[92] Khat(Cathinone)	[2N] Alpha-PVP (Flakka or Gravel)
[46] Phenobarbital (Phenobarbitone, Solfoton)	[93] <u>Lisdexamfetamine</u>	[2O] Kratom (Ketum or Mitragyna Speciosa)
[47] Amobarbital (Amylobarbitone, Amytal)	[94] Mazindol	[2P] Etizolam (Etilaam, Etizest, Etidev, Etizola, Sedekopan, Pasaden or Depas)
[48] Secobarbital (Seconal)	[95] Phenmetrazine	
[49] No Longer Used	[96] Methcathinone	

DATA CODE TABLES

Table 20. Substance Abuse Drug Codes (Alphabetical Order)		
[1G] 1,4-Butanediol	[43] Flurazepam (Dalmane)	[11] Other Amphetamines
[1H] 4-Methoxyamphetamine (PMA)	[1Z] Freon, Helium or Xenon	[15] Other Barbiturates
[1I] 4-Methyl-2,5-Dimethoxyamphetamine (DOM)	[2A] Gasoline, Lighter Fluid, butane, Kerosene, Propane	[13] Other Benzodiazepines
[1J] 5-Methoxy-Disopropyltryptamine (5-MeO-DIPT)	[54] GHB/GBL - Gamma-Hydroxybutyric Acid	[22] Other Cocaine
[1T] Acetone	[2B] Glue or other Adhesives	[09] Other Hallucinogens/Psychedelics
[02] Alcohol	[50] Glutethimide (Doriden)	[17] Other Inhalants
[1K] Alpha-Ethyltryptamine	[66] Halazepam (Paxipam)	[30] Other Narcotic Analgesics
[2N] Alpha-PVP (Flakka or Gravel)	[05] Heroin	[58] Other Nitrites
[39] Alprazolam (Xanax, Niravam)	[2C] Hexane	[52] Other Non-Barbiturate Sedatives
[47] Amobarbital (Amylobarbitone, Amytal)	[32] Hydrocodone	[07] Other Opiates or Opioids
[2L] Amphetamine and Dextroamphetamine (d-amphetamine)	[29] Hydromorphone (Dilaudid, Exalgo, Hydrostat)	[16] Other Sedatives/Hypnotics
[76] Barbitol	[1M] Ibogaine	[59] Other Solvents
[89] Benzphetamine	[19] Ice	[12] Other Stimulants
[65] Bromazepam (Bromazaniol)	[2D] Isopropanol	[14] Other Tranquilizers
[83] Buprenorphine	[55] Ketamine (Ketalar, Ketanest, Ketaset)	[18] Over-the-Counter
[77] Butabarbital	[92] Khat(Cathinone)	[69] Oxazepam (Serax)
[78] Butalbital	[20] Kratom (Ketum or Mitragyna Speciosa)	[27] Oxycodone
[34] Butrphanol (Stadol)	[85] Levo-Alphacetylmethadol (LAAM)	[86] Oxymorphone
[1F] Caffeine	[93] Lisdexamfetamine	[08] PCP-Phencyclidine
[33] Carisoprodol (Soma, Soprodon, Vanadom)	[44] Lorazepam (Ativan)	[97] Pemoline
[73] Chloral Hydrate (Somnote, Aquachloral Supporettes)	[35] LSD	[31] Pentazocine (Talwin, Talacen)
[40] Chlordiazepoxide (Librium, H-Tran, Libritabs)	[04] Marijuana/Hashish	[79] Pentobarbital (Pentobarbitone)
[56] Clonazepam (Klonopin, Ceberclon, Valpax)	[94] Mazindol	[1A] Phendimetrazine
[41] Clorazepate (Tranxene, Gen-xene)	[67] Medazepam (Rudotel)	[95] Phenmetrazine
[25] Codeine	[28] Meperidine HCL	[46] Phenobarbital (Phenobarbitone, Solfoton)
[1U] Computer Duster	[80] Meprobamate	[1B] Phentermine

DATA CODE TABLES

Table 20. Substance Abuse Drug Codes (Alphabetical Order)		
[03] Crack Cocaine (use smoking for route of this drug)	[1N] Mescaline or Peyote	[70] Prazepam (Centrax)
[1V] Cyclohexanone	[24] Methadone (Dolophine, Methadose)	[98] Presenting At-Risk
[90] Dexmethylphenidate	[1E] Methamphetamine - Pharmaceutical	[99] Presenting Substance Abuse Problem, Not Confirmed
[2M] Dextroamphetamine (d-amphetamine)	[10] Methamphetamines	[87] Propoxyphene
[61] Dextromethorphan	[51] Methaqualone (Quaalude, Sopor)	[1C] Propylhexedrine
[42] Diazepam (Valium, Valrelease)	[96] Methcathinone	[1P] Psilocybin or Psilocin
[1W] Diethyl Ether (Ether)	[2E] Methyl Ethyl Ketone	[71] Quazepam (Doral)
[91] Diethylpropion	[2F] Methyl Isobutyl Ketone	[1Q] Salvia Divinorum or Salvinorin A
[1L] Dimethyltryptamine (DMT)	[10] Methylenedioxyamphetamine (MDA)	[48] Secobarbital (Seconal)
[60] Diphenhydramine	[37] Methylenedioxymethamphetamine (MDMA)	[1R] Synthetic Cannabinoids
[62] Diphenoxylate (Lomotil)	[36] Methylphenidate (Ritalin, Concerta, Metadate)	[1S] Synthetic Cathinones
[26] D-Propoxyphene	[63] Methylphenobarbital (Mephobarbital, Mebaral)	[72] Temazepam (Restoril)
[38] Ephedrine	[23] Morphine (Avinza, Kadian, MS Contin, Oramorph)	[2H] Toluene
[64] Estazolam (ProSom, Eurodin)	[1D] Nicotine	[2I] Toluol
[1Y] EstyleneGlycol Monomethyl Ether Acetate	[68] Nitrazepam (Mogadan)	[88] Tramadol
[74] Eszopiclone (Lunesta)	[2G] Nitrous Oxide	[45] Triazolam
[2P] Etizolam (Etilaam, Etizest, Etidev, Etizola, Sedekopan, Pasaden or Depas)	[06] Non-Prescription Methadone	[2J] Trichloroethane or Trichloromethane
[1X] Ethyl Acetate	[75] Opium	[2K] Trichloroethylene
[84] Fentanyl	[20] Other	[81] Zaleplon
[53] Flunitrazepam (Rohypnol)	[57] Other Aerosols	[82] Zolpidem

DATA CODE TABLES

Table 21. Substance Abuse Drug Codes (By Category)	
I.	ALCOHOL
	[02] Alcohol
II.	OPIATES and OPIOIDS
	[83] Buprenorphine
	[34] Butorphanol (Stadol)
	[25] Codeine
	[62] Diphenoxylate (Lomotil)
	[26] D-Propoxyphene
	[84] Fentanyl
	[05] Heroin
	[32] Hydrocodone (Vicodin, Lortab, Lorcet, Zydane)
	[29] Hydromorphone (Dilaudid)
	[20] Kratom (Ketum, Mitragyna Speciosa)
	[85] Levo-Alphaacetylmethadol (LAAM)
	[28] Meperidine HCL (Demerol)
	[24] Methadone (Dolophine, Methadose)
	[23] Morphine (MSContin, Avinza, Kadian, Oramorph)
	[06] Non-Prescription Methadone
	[75] Opium
	[30] Other Narcotic Analgesics
	[07] Other Opiates or Opioids
	[27] Oxycodone (Oxycontin)
	[86] Oxymorphone
	[31] Pentazocine (Talwin)
	[87] Propoxyphene
	[88] Tramadol
III.	SEDATIVE - HYPNOTICS
	A. BARBITUARATES

DATA CODE TABLES

Table 21. Substance Abuse Drug Codes (By Category)	
[47]	Amobarbital (Tuinal)
[76]	Barbital
[77]	Butabarbital
[78]	Butalbital
[63]	Methylphenobarbital (Mephobarbital (Mebaral)
[15]	Other Barbiturates
[79]	Pentobarbital (Pentobarbitone)
[46]	Phenobarbital (Phenobarbitone, Solfoton
[48]	Secobarbital (Seconal)
B. BENZODIAZEPINES	
[39]	Alprazolam (Xanax)
[65]	Bromazepam (Bromazanil
[40]	Chlordiazepoxide (Librium)
[56]	Clonazepam (Klonopin)
[41]	Clorazepate (Tranxene)
[42]	Diazepam (Valium)
[64]	Estazolam (ProSom)
[2P]	Etizolam (Etilaam, Etizest, Etidev, Etizola, Sedekopan, Pasaden or Depas)
[43]	Flurazepam (Dalmane)
[53]	Flunitrazepam (Rohypnol)
[66]	Halazepam (Paxipam)
[44]	Lorazepam (Ativan)
[67]	Medazepam (Rudotel)
[68]	Nitrazepam (Mogadan)
[13]	Other Benzodiazepines
[14]	Other Tranquilizer
[69]	Oxazepam (Serax)
[70]	Prazepam (Centrax)

DATA CODE TABLES

Table 21. Substance Abuse Drug Codes (By Category)	
	[71] Quazepam (Doral)
	[72] Temazepam (Restoril)
	[45] Triazolam (Halcion)
C.	OTHER SEDATIVES
	[33] Carisoprodol (Soma)
	[73] Chloral Hydrate (Somnote, Aquachloral Suppnettes)
	[60] Diphenhydramine (Benadryl)
	[74] Eszopiclone
	[54] GHB/GBL (Gamma-Hydroxybutyric Acid/Gamma-Butyrolactone)
	[50] Glutethimide (Doriden)
	[80] Meprobamate
	[51] Methaqualone (Quaaludes, Ludes)
	[52] Other Non-Barbiturate Sedatives
	[16] Other Sedatives or Hypnotics
	[81] Zaleplon
	[82] Zolpidem
IV.	STIMULANTS
	[2N] Alpha-PVP (Flakka, Gravel)
	[2L] Amphetamine and Dextroamphetamine(d-amphetamine)
	[89] Benzphetamine
	[1F] Caffeine
	[03] Crack Cocaine (use smoking for route of administration)
	[90] Dexmethylphenidate
	[2M] Dextroamphetamine (d-amphetamine)
	[91] Diethylpropion
	[38] Ephedine
	[19] ICE - Includes the crystalline form of methamphetamine (usually heated and inhaled)

DATA CODE TABLES

Table 21. Substance Abuse Drug Codes (By Category)	
	[92] Khat (Cathinone)
	[93] Lisdexamfetamine
	[94] Mazindol
	[1E] Methamphetamine - Pharmaceutical
	[96] Methcathinone
	[10] Methamphetamine – Non-Pharmaceutical (Includes crystal meth, or crank. (not “ECSTACY”))
	[36] Methylphenidate (Ritalin, Concerta, Metadate)
	[1D] Nicotine
	[11] Other Amphetamines
	[22] Other Cocaine
	[12] Other Stimulants
	[97] Pemoline
	[1A] Phendimetrazine
	[95] Phenmetrazine
	[1B] Phentermine
	[1C] Propylhexedrine
	[1S] Synthetic Cathinones
V.	HALLUCINOGENS – PSYCHEDELICS
	[1G] 1,4-Butanediol
	[1H] 4-Methoxyamphetamine (PMA)
	[1I] 4-Methyl-2,5-Dimethoxyamphetamine (DOM)
	[1J] 5-Methoxy-Disopropyltryptamine (5-MeO-DIPT)
	[1K] Alpha-Ethyltryptamine
	[61] Dextromethorphan (DXM)
	[1L] Dimethyltryptamine (DMT)
	[1M] Ibogaine
	[55] Ketamine (Special K, Jet, Super C)
	[35] LSD (Lysergic Acid Diethylamide)

DATA CODE TABLES

Table 21. Substance Abuse Drug Codes (By Category)	
	[04] Marijuana/Hashish
	[1N] Mescaline or Peyote
	[1O] Methylenedioxyamphetamine (MDA)
	[37] Methylenedioxymethamphetamine (Ecstasy, MDMA)
	[09] Other Hallucinogens/Psychedelics - This includes DMT, STP, psilocybin, etc.
	[08] PCP - Phencyclidine
	[1P] Psilocybin or Psilocin
	[1Q] Salvia Divinorum or Salvinorin A
	[1R] Synthetic Cannabinoids
VI.	SOLVENTS/AEROSOLS/NITRITES/FUELS – PSYCHEDELICS
	[1T] Acetone
	[58] Alkyl Nitrites
	[1U] Computer Duster
	[1V] Cyclohexanone
	[1W] Diethyl Ether (Ether)
	[1Y] EstyleneGlycol Monomethyl Ether Acetate
	[1X] Ethyl Acetate
	[1Z] Freon, Helium or Xenon
	[2A] Gasoline, Lighter Fluid, butane, Kerosene, Propane
	[2B] Glue or other Adhesives
	[2C] Hexane
	[2D] Isopropanol
	[2E] Methyl Ethyl Ketone
	[2F] Methyl Isobutyl Ketone
	[2G] Nitrous Oxide
	[57] Other Aerosols
	[17] Other Inhalants
	[59] Other Solvents

DATA CODE TABLES

Table 21. Substance Abuse Drug Codes (By Category)	
	[2H] Toluene
	[2I] Toluol
	[2J] Trichloroethane or Trichloromethane
	[2K] Trichloroethylene
VII.	NOT CLASSIFIED AS PRESCRIPTION OR NON-PRESCRIPTION
	[18] Over-The-Counter
	[20] Other
	[98] Presenting At-Risk
	[99] Presenting Substance Abuse Problem, Not Confirmed