

**ACSIS Data Element Dictionary
EPISODE File**

10/25/2024

CLIENT

Field Name Client Case Number

Type Character **Length** 6 **Decimal** 0 **Requirement** Y - Required

Description Case number assigned to the client by the CMHC

Comments

ENDDATE

Field Name Episode End Date

Type Character **Length** 10 **Decimal** 0 **Requirement** Y - Required

Description Date the client was discharged from the program

Comments Report in MM/DD/YYYY format

ENDSTATUS**Field Name** Episode End Status**Type** Character **Length** 2 **Decimal** 0 **Requirement** Y - Required**Description** Code to indicate the reason the client was discharged from the program**Comments** Code Table

Value	Description	Definition	Status	Status Date
01	Aged Out	The youth's age exceeds the allowable age in the service description	A	10/01/2023
02	Client Lost Contact	CMHC could not locate youth after multiple attempts using different means of contact (for at least 90 days)	A	10/01/2023
03	Completed Service	Youth successfully completed program and no longer requires service	A	10/01/2023
04	Deceased	Youth passes during care	A	10/01/2023
05	Ind/Family Relocated	Youth moved out of the catchment area	A	10/01/2023
06	Placed in Setting that Excludes Service	Youth moved to a setting disallowed by the service (for example, youth is sent to detention or in RTC with more than 90 days before discharge)	A	10/01/2023
07	Terminated Services AMA	Youth/family decide to terminate service before treatment is completed	A	10/01/2023
11	CMHC Discharged - Staff Unavailable	Youth no longer able to receive care because staff became unavailable at CMHC. Example might be that there is 1 HICC, who resigns with no replacement. Youth can no longer receive the service. In this instance youth would need to be discharged and re-referred to HICC and added to the waitlist.	A	10/01/2023
12	From Waitlist ONLY, Declined when Reoffered	When member on waitlist and re-offered service (e.g., when slot became available or additional staff hired), youth/family declined	A	12/01/2023

Code Status: **A** - Active; **I** - Inactive

EPISODEID

Field Name Episode ID

Type Character **Length** 20 **Decimal** 0 **Requirement** Y - Required

Description Provider supplied value that uniquely identifies the Episode record. Unique for Client and referral. Will be used to track the episode over time.

Comments

OFFERDATE

Field Name Offer Date

Type Character **Length** 10 **Decimal** 0 **Requirement** Y - Required

Description Date the CMHC speaks to the family and offers the service

Comments Report in MM/DD/YYYY format

ORGID

Field Name Organization ID

Type Character **Length** 3 **Decimal** 0 **Requirement** Y - Required

Description Provider ID of the CMHC as assigned by ADMH

Comments

PROGTYPE

Field Name Program Type Code

Type Character **Length** 4 **Decimal** 0 **Requirement** Y - Required

Description Code to identify the program that relates to the Episode

Comments Valid codes are '1715' (HICC) or '1690' (IHI)

REFDATE

Field Name Referral Date

Type Character **Length** 10 **Decimal** 0 **Requirement** Y - Required

Description Date the client was referred to the program

Comments Report in MM/DD/YYYY format

SVCSTATUS

Field Name Episode Service Status

Type Character **Length** 1 **Decimal** 0 **Requirement** Y - Required

Description Code to indicate the current or final status of service delivery. May change over time

Comments Code Table

Value	Description	Definition	Status	Status Date
1	Received Services	Service (e.g., HICC or IHI) was delivered	A	10/01/2023
2	Removed Prior to Receiving Services (Waitlist)	Youth/family requested the service and was placed on waitlist, but the youth did not receive it prior to being enrolled in the service. Example is when the member requests service, is put on the waitlist and moves out of the catchment area before receiving services.	A	10/01/2023
3	Declined HICC, Accepted LICC	Youth is referred for HICC, and youth/family declines HICC but accepts LICC (as a note, this value cannot be used for IHI records)	A	10/01/2023
4	Declined Services	Youth referred for service(s), and the youth/family declines the service(s). This value should also be used when the youth/family declines HICC and then declines LICC when offered.	A	10/01/2023
5	Currently on Waitlist	Youth referred for and accepts service. Currently, the CMHC does not have capacity to deliver the service to the youth (current staff vacancy or HICC/IHI careloads full). The youth is added to the waitlist (as a note, this can never be the final status for the referral; should always change to 1 or 2 over time).	A	10/01/2023
6	Not Appropriate for Service	Youth referred for service(s), and the CMHC determines that the youth cannot be offered the service (e.g., does not meet criteria for service or is in a site where the service cannot be delivered)	I	11/01/2024
7	Unable to Make Contact after 90 Days from Initial Contact Attempt	Youth referred for service, and CMHC attempted to offer service. Staff has not been able to contact youth or family to offer the service for at least 90 days (with weekly engagement attempts). The episode was not started because the youth and family were not able to be contacted. CMHC should report the initial contact attempt as the "Date HICC Offered/Notified" (in all other instances, this is the date the CMHC speaks to the family to offer the service).	A	10/01/2023
8	Does not Meet Service Criteria for Service	Youth referred for service but does not meet service criteria for service (e.g., LICC and HICC are not medically necessary, Primary Non-SED, out of age range, setting excludes HICC delivery, HICC would be a duplicative service, etc.)	A	10/01/2023

Code Status: **A** - Active; **I** - Inactive