Public Burden Statement: An agency may not conduct or sponsor, and a person is not currently valid OMB control number. The OMB control number for this project is 05 estimated to average XX hours per respondent, per year, including the time for review data needed, and completing and reviewing the collection of information. Send comr information, including suggestions for reducing this burden, to SAMHSA Reports Cl 20857.

LEGEND

Key field = must not be blank. Key fields, taken together, are used to uniquely identify and link records.

Data set classifications, i.e., SDS, MDS, and SuDS, apply to MH-TEDS admission variables only.

			TEDS/MH-1	
	Data F	Data Field Reference Number		
		Discharge/Update Recor		
		Value taken	Value taken at	
		from	time of	
Variable Name	Admission Record	admission record	discharge or data update	
variable Name	Record	Tecord	SYSTEM DATA :	
System Transaction Type	SDS 1		DIS 1	
System Transaction Type	5551		D13 1	
State Code – Key field	SDS 2		DIS 2	
Reporting Date	SDS 3		DIS 3	
			MINIMUM DATA	
State Provider Identifier – Key field	MDS 1	DIS 11	DIS 4	
Client Identifier – Key field	MDS 2	DIS 12	DIS 5	
Codependent or Collateral – Key field	MDS 3	DIS 13	DIS 6	
Client Transaction Type – Key field	MDS 4	DIS 14		
Date of Administra - Kou field	MDS 5	DIS 15		
Date of Admission – Key field		DIS 12		
Previous SU Treatment Episodes	MDS 6			
Referral Source	MDS 7			

Date of Birth	MDS 8	DIS 17	
Date of Billin	IMDS 6	DIS 11	
Sex	MDS 9	DIS 18	
Race	MDS 10	DIS 19	
Hispanic or Latino Origin (Ethnicity)	MDS 11	DIS 20	
Education	MDS 12		MHD 5
Employment Status	MDS 13		DIS 24
	ı	•	•

Substance Use (Primary, Secondary, Tertiary)	MDS 14A MDS 14B MDS 14C		DIS 21a DIS 21b DIS 21c	
Route of Administration (of Primary, Secondary, Tertiary Substances)	MDS 15A MDS 15B MDS 15C			
Frequency of Use (of Primary, Secondary, Tertiary Substances)	MDS 16A MDS 16B MDS 16C		DIS 22a DIS 22b DIS 22c	
Age at First Use (of Primary, Secondary, Tertiary, Substances)	MDS 17A MDS 17B MDS 17C			
Type of Treatment/Service Setting – Key field	MDS 18	DIS 16	DIS 7	

	•		•	•	
Medications for Opioid Use Disorder	MDS 19				
Medications for Opioid OSC Disorder	WIDO 13				
		SUPI	PLEMENTAL DA		
Detailed Drug Code (Primary, Secondary, Tertiary)	SuDS 1 SuDS 2 SuDS 3				
	SuDS 2 SuDS 3				

		I	
Diagnostic Code (DCM or ICD)	CuDC 4		
Diagnostic Code (DSM or ICD)	SuDS 4		
Co-occurring Mental and Substance Use Disorders	SuDS 5		
Pregnant at Admission	SuDS 6		
-			
Veteran Status	SuDS 7		
Living Arrangements	SuDS 8		DIS 23
	-	-	-

1	1 1	1
Source of Income/Support	SuDS 9	
Health Insurance	SuDS 10	
Payment Source, Primary (Expected or Actual)	SuDS 11	
Detailed Not-in-Labor Force	SuDS 12	DIS 25
Detailed Criminal Justice Referral	SuDS 13	
Marital Status	SuDS 14	

1	1 1	
Days Waiting to Enter SU Treatment	SuDS 15	
Days Waiting to Enter 30 Treatment	3003 15	
Arrests in Past 30 Days	SuDS 16	DIS 26
Attendance at SU Self-Help Groups in Past 30 Days	SuDS 17	DIS 27
Attendance at 30 Sen-Help Groups in Fast 30 Days	3uD3 17	DI3 21
Diagnostic Code Set Identifier	SuDS 18	MHD 1
Substance Use Diagnosis	SuDS 19	
Gender Identity	SuDS 20	
Sexual Orientation	SuDS 21	
		Other Varia

Date of Last Contact or Data Update - Key Field			DIS 8
Date of Discharge - Key field			DIS 9
Reason for Discharge, Transfer, or Discontinuance of Treatment			DIS 10
Client Discharge Transaction Type - Key field		DIS 14	DIS 28
MH Diagnostic Code - One (ICD-9 or ICD-10)	MHA 1a		MHD 2a
MH Diagnostic Code - Two (ICD-9 or ICD-10)	MHA 1b		MHD 2b
MH Diagnostic Code - Three (ICD-9 or ICD-10)	MHA 1c		MHD 2c
SMI/SED Status	MHA 2		MHD 3
School Attendance Status	МНА З		MHD 4
Legal Status at Admission to State Hospital	MHA 4		

GAF/CGAS Score	MHA 5	MHD 6

OMB No.0930-0335

Expiration Date: XX/XX/XXXX

required to respond to, a collection of information unless it displays a 30-0335. Public reporting burden for this collection of information is ving instructions, searching existing data sources, gathering and maintaining the nents regarding this burden estimate or any other aspect of this collection of earance Officer, 5600 Fishers Lane, Room 15E57-A, Rockville, Maryland,

TEDS
Categories
SET (SDS)
A=Add
C=Change
D=Delete
2 character state abbreviation
MMYYYY
SET (MDS)
1-15 alphanumeric
1-15 alphanumeric
1=Codependent/Collateral
2=Client
A=Initial Admission (SU)
T=Transfer (SU)
D=Discharge (SU)
M=Initial Admission (MH)
X=Transfer (MH)
E=Discharge (MH)
U=Update (MH)
MMDDYYYY
Optional reporting MH clients
0=0 Previous episodes
1=1 Previous episode
2=2 Previous episodes
3=3 Previous episodes
4=4 Previous episodes
5=5 or more previous episodes
6=Not applicable
7=Unknown
8=Not collected
Optional reporting for MH

01=Individual 02=Alcohol/Drug use care provider 03=Other health care provider 04=School (Educational) 05=Employer/Employee Assistance Program (EAP) 06=Other community referral 07=Court/Criminal justice referral/DUI/DWI 97=Unknown 98=Not collected MMDDYYYY 01010007=Unknown 01010008=Not collected 1=Male 2=Female 7=Unknown 8=Not collected 01=Alaska Native (Aleut, Eskimo) 02=American Indian or Alaska Native 03=Asian or Pacific Islander 13=Asian 23=Native Hawaiian or Other Pacific Islander 04= Black or African American 05=White 20=Other single race 21=Two or more races 97=Unknown 98=Not collected 01=Puerto Rican 02=Mexican 03=Cuban 04=Other Specific Hispanic or Latino 05=Not of Hispanic or Latino Origin 06=Hispanic or Latino - specific origin not specified 97=Unknown 98=Not collected 00= Less than one school grade or no schooling 01-11=Grades 1 - 11 12=Grade 12 or GED 13=1st year of College/University (Freshman) 14=2nd Year of College/Univserity (Sophomore) or Associate Degree 15=3rd Year of College/University (Junior) 16=4th Year of College/University (Senior) or Bachelor's Degree 17=Some Post-Graduate Study- Degree not completed 18= Master's Degree completed 19-25=Post-graduate study 70=Graduate or Professional School 71=Vocational School (MH only) 72=Nursery School or Pre-school (MH only) 73=Kindergarten (MH only) 74=Self-contained Special Education Class (MH only) 97=Unknown 98=Not collected 01=Full time 02=Part time 03=Unemployed 04=Not in the labor force

05=Employed, full/part time not specified (Temporary code, should be used in MH reporting only) 97=Unknown 98=Not collected Optional reporting for MH clients-01=None 02=Alcohol 03=Cocaine 04=Marijuana/hashish 05=Heroin 06=Non-prescription methadone 07=Other opiates and synthetics 08=PCP-phencyclidine 09=Hallucinogens 10=Methamphetamine/speed 11=Other amphetamines 12=Other stimulants 13=Benzodiazepine 14=Other tranquilizers 15=Barbiturates 16=Other sedatives or hypnotics 17=Inhalants 18=Over-the-counter medications 20=Other drugs 96=Not applicable (MH only) 97=Unknown 98=Not collected Optional reporting for MH clients - see Manual for SU route of administration categories 01=Oral 02=Smoking 03=Inhalation 04=Injection (intravenous, intramuscular, intradermal, or subcutaneous) 20=Other 96=Not applicable 97=Unknown 98=Not collected Optional reporting for MH clients - see Manual for SU frequency of use categories 01=No Use in the Past Month 02=1-3 Days in the Past Month 03=1-2 Days in the Past Week 04=3-6 Days in the Past Week 05=Daily 96=Not applicable 97=Unknown 98=Not collected Optional reporting for MH clients with co-occurring SU 00=Newborn 01-95=Age at first use 96=Not applicable 97=Unknown 98=Not collected 01=Withdrawal management, 24-hour service, Hospital Inpatient (SU only) 02=Withdrawal management, 24-hour service, Free-Standing Residential (SU only) 03=Rehabilitation/Residential - Hospital (other than withdrawal management) (SU only) 04=Rehabilitation/Residential - Short term (30 days or fewer) (SU only) 05=Rehabilitation/Residential - Long term (more than 30 days) (SU only)

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06=Ambulatory-Intensive outpatient (SU only)
07=Ambulatory-Non-intensive outpatient (SU only)
08=Ambulatory-withdrawal management (SU only)
72=State psychiatric hospital (MH only)
73=SMHA funded/operated community-based program (MH only)
74=Residential treatment center (MH only)
75=Other psychiatric inpatient (MH only)
76=Institutions under the justice system (MH only)
96=Not applicable (use only for codependents or collateral clients (SU only)
Optional reporting for MH clients-
1=Yes
2=No
6=Not applicable
7=Unknown
8=Not collected
TA SET (SuDS)
Optional reporting for MH clients
0201=Alcohol
0301=Crack
0302=Other cocaine
0401=Marijuana/Hashish, THC, and any other cannabis sativa preparations
0501=Heroin
0601=Non-prescription methadone
0701=Codeine
0702=Propoxyphene (Darvon)
0703=Oxycodone (Oxycontin)
0704=Meperidine (Demerol)
0705=Hydromorphone (Dilaudid)
0706=Butorphanol (Stadol), morphine (MS Contin), opium, and other narcotic analgesics,
opiates, or synthetics
0707=Pentazocine (Talwin)
0708=Hydrocodone (Vicodine)
0709=Tramadol (Ultram)
0710=Buprenorphin (subutex, suboxone)
0711=Fentanyl
0801=PCP
0901=LSD
0902=DMT, mescaline, peyote, psilocybin, STP, and other hallucinogens
1001=Methamphetamine/speed
1101=Amphetamine
1103= Methylenedioxymethamphetamine (MDMA, Ecstasy)
1109="Bath Salts", phenmetrazine, and other amines and related drugs
1201=Other stimulants
1202=Methylphenidate (Ritalin)
1301=Alprazolam (Xanax)
1302=Chlordiazepoxide (Librium)
1303=Clorazepate (Tranzene)
1304=Diazepam (Valium)
1305=Flurazepam (Dalmane)
1306=Lorazepam (Ativan)
1307=Triazolam (Halcion)
1308=Halazepam, oxazepam (Serax), prazepam, temazepam (Restoril), and other
Benzodiazepines
1309=Flunitrazepam (Rohypnol)
1310=Clonazepam (Klonopin, Rivotril)
1401=Meprobamate (Miltown)
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1403=Other non-benzodiazepine tranquilizers
1501=Phenobarbital
1502=Secobarbital/amobarbital (Tuinal)
1503=Secobarbital (Seconal)
1509=Amobarbital, pentobarbital (Nembutal) and other barbiturate sedatives
1601=Ethchlorvynol (Placidyl)
1602=Glutethimide (Doriden)
1603=Methaqualone (Quaalude)
1604=Chloral hydrate and other Non-Barbiturate Sedatives/hypnotics
1605=Xylazine
1701=Aerosols
1702=Nitrites
1703=Gasoline, glue, and other inappropriately inhaled products
1704=Solvents (paint thinner and other solvents)
1705=Anesthetics (chloroform, ether, nitrous oxide, and other anesthetics)
1801=Diphenhydramine
1809=Other antihistamines, aspirin, Dextromethorphan (DXM) and other cough syrups,
Ephedrine, sleep aids, and any other legally obtained, non-prescription medication
2001=Diphenylhydantoin/Phenytoin (Dilantin)
2002=Synthetic Cannabinoid "Spice", Carisoprodol (Soma) and other drugs
2003=GHB/GBL (gamma-hydroxybutyrate, gammabutyrolactone)
2004=Ketamine (Special K)
9996=Not applicable - use when the value in "Substance Use" is 01 (None)
9997=Unknown
9998=Not collected
xxx.xx
999.96=No SU Diagnosis (MH only)
999.97=Unknown
999.98=Not collected
1=Yes - Client has co-occurring mental and substance use disorders
2=No - Client does not have co-occurring mental and substance use disorders
7=Unknown
8=Not collected
Optional reporting for both SU and MH
1=Yes, client was pregnant at admission
2=No, client was not pregnant at admission
6=Not applicable - Use this code for male clients or pre-pubescent females.
7=Unknown
8=Not collected
Optional reporting for both SU and MH
1=Veteran
2=Not a veteran
7=Unknown
8=Not collected
01=Homeless-
02=Dependent Living
22=Dependent living: residential care (MH-only)
32=Dependent living: foster home/foster care (MH only)
42=Dependent living: crisis residence (MH only)
52=Dependent living: institutional setting (MH only)
62=Dependent living: jail and other institutions under the justice system (MH only)
72=Dependent living: adults in private residence who needs assistance in daily living (MH only)
03=Independent Living
04=Private residence, living arrangement not specified, adults (temporary code MH-only)
97=Unknown
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98=Not collected Optional reporting for both SU and MH 01=Wages/salary 02=Public assistance 03=Retirement/pension 04=Disability 20=Other 21=None 97=Unknown 98=Not collected Optional reporting for MH 01=Private insurance 02=Blue Cross/Blue Shield 03=Medicare 04=Medicaid 06=Health Maintenance Organization (HMO) 20=Other (e,g., Tricare) 21=None 97=Unknown 98=Not collected Optional reporting for both SU and MH 01=Self-pay 02=Blue Cross/Blue Shield 03=Medicare 04=Medicaid 05=Other government payments 06=Worker's compensation 07=Other health insurance companies 08=No Charge - For example, free, charity, special research, or teaching 09=Other 97=Unknown 98=Not collected 01=Homemaker 02=Student 03=Retired 04=Disabled 05= Resident of institution 06=Other-07=Sheltered/non-competitive employment (MH only) 96=Not applicable 97=Unknown 98=Not collected Optional reporting for both SU and MH 01=State/federal Court 02=Other Court 03=Probation/parole 04=Other Recognized Legal Entity 05=Diversionary program 06=Prison 07=DUI/DWI 08=Other 96=Not applicable 97=Unknown 98=Not collected Optional reporting for both SU and MH 01=Never Married

02=Now Married 03=Separated 04=Divorced 05=Widowed 97=Unknown 98=Not collected Optional reporting for MH clients with co-occurring SU 000-995=Number of days waiting 996=Not applicable (MH only) 997=Unknown 998=Not collected 00-96=Number of arrests 97=Unknown 98=Not collected Optional reporting for MH clients with co-occurring SU 01=No attendance 02=Less than once a week - 1 to 3 times in the past 30 days 03=About once a week - 4 to 7 times in the past 30 days 04=2 to 3 times per week - 8 to 15 times in the past 30 days 05=At least 4 times a week - 16 to 30 times in the past 30 days 06=Some attendance - Number of times and frequency is unknown 96=Not applicable 97=Unknown 98=Not collected 1=DSM-IV 2=ICD-9 3=ICD-10 4=DSM-5 5=DSM-III-R 7=Unknown 8=Not collected XXX.XXX 999.9996=No Substance use diagnosis (MH only) 999.9997=Unknown 999.9998=Not collected 01=Male 02=Female 03=Transgender (Male to Female) 13=Transgender (Female to Male) 23=Transgender [Temporary code] 04=Two-Spirit [American Indian or Alaska Native only] 06=Other 16=I don't know 26=Prefer not to answer 97=Unknown 98=Not Collected 01=Straight or Heterosexual 02=Lesbian or Gay 03=Bisexual 04=Two-Spirit [American Indian or Alaska Native only] 06=Other 16=I don't know 26=Prefer not to answer 97=Unknown 98=Not Collected ables

MMDDYYYY 01010007=Unknown 01010008=Not collected 1010006=Not Applicable (use for MH update record only) 01=Treatment completed 02=Dropped out of treatment 03=Terminated by facility 04=Transferred to another treatment program or facility 14=Transferred to another treatment program but client is no show 24=Transferred to another treatment program or facility that is not in the SSA or SMHA reporting system. 34 =Discharged temporarily to an acute medical facility for medical services (MH-only) 05=Incarcerated or released by or to courts 06=Death 07=Other 08= Unknown - This code will continue to be accepted. However, states are encouraged to use the code 97 Unknown instead 96 = Not appliciable 97=Unknown 98=Not collected A=Initial Admission (SU) T=Transfer (SU) D=Discharge (SU) M=Initial Admission (MH) X=Transfer (MH) E=Discharge (MH) U=Update (MH) XXX.XXX 999.9996=No MH Diagnosis-One (SU only) 999.9997=Unknown 999.9998=Not collected XXX.XXX 999.9996=No MH diagnosis - two 999.9997=Unknown 999.9998=Not collected XXX.XXX 999.9996=No MH diagnosis - three 999.9997=Unknown 999.9998=Not collected Optional reporting for SU clients 1=SMI 2=SED 3=At risk for SED (optional) 4=Not SMI/SED 6=Not Applicable 7=Unknown 8=Not collected Optional reporting for SU clients 1=Yes, client has attended school at any time in the past 3 months 2=No, client has not attended school at any time in the past three months 6=Not applicable 7=Unknown 8=Not collected Not applicable for SU clients

01=Voluntary-self

02=Voluntary-others (parents, guardians, etc)

03=Involuntary-civil

04=Involuntary-criminal

05=Involuntary-juvenile justice

06=Involuntary-civil, sexual

96=Not applicable

97=Unknown

98=Not collected

Optional reporting for MH clients with co-occurring SU 0-100=GAF/CGAS Score

996=Not applicable (SU only)

997=Unknown

998=Not collected