

DECISION SUPPORT 2000+
HUMAN RESOURCES CORE DATA
STANDARDS

**A Collaborative Activity of the Human Resources Data
Workgroup and the Mental Health Statistics Improvement
Program (MHSIP) and the Decision Support 2000+
(DS2000+) Team**

June 2006

*Funded by the Center for Mental Health Services,
Substance Abuse and Mental Health Services Administration*



Decision Support 2000+
Human Resources Core Data Standards
June 2006

Introduction

The Human Resources (HR) Data Standards are designed to cover key information on the workforce involved in the provision of mental health services. The standards allow service delivery agencies to describe and analyze data for their single largest cost center and enable accurate assessment of workforce trends in the industry.

The Human Resources Data Standards were developed through a collaborative effort involving the Human Resources Workgroup, the Mental Health Statistics Improvement Program (MHSIP), and the Decision Support 2000+ Initiative (DS2000+) of the Survey and Analysis Branch of the Center for Mental Health Services. The Data Standards have three components: a core set of data elements relevant to all users; a state-specific data set with additional data elements of particular interest to states; and a human resources workgroup-specific set of data elements of particular interest to workgroup members.

The core data standards include applicable data elements required by the Health Information Portability and Accountability Act (HIPAA). Newer versions of X12N's Type 3 Technical Report (formerly known as an Implementation Guide) for "Health Care Claim: Professional," and the "Health Care Claim: Institutional" are presently in their final stages of preparation. In addition to routine upgrades and enhancements, these new documents have been specifically modified to support the new National Provider Identifier (NPI); i.e., clinician ID. Draft copies of each are available via <http://www.wpc-edi.com/content/view/414/160/>. As both of these documents are not at this writing finally published nor officially promulgated for use, the data standards will need to be updated at an appropriate future date.

The key categories of information pertaining to the service provider are identification of the reporting provider and/or organization, location, demographics, professional characteristics, employment status, employment characteristics, types of services provided and case load characteristics. With the new NPI, users can link human resources data with other data sets to examine a wide variety of issues. For example, by linking human resources data with the financial (claims) data users can examine the relationship between provider characteristics and types and costs of services; by linking with organizational data it will be possible to look at workforce characteristics by type of organization.

A major challenge facing development of uniform human resources data relates to the wide variety of disciplines involved in the provision of mental health care and the lack of standardization across the different entities that collect human resource information. For example, there are few national standards for licensing and certification across states. Similarly there is considerable variation in the service locations where practitioners provide treatment. It is hoped that widespread use of data standards will, over time, contribute to greater uniformity of



the data needed to analyze operations across many diverse systems. For in depth discussions of the uses and limitations of human resource data standards see Pion et al. and Leginski et al.

Several issues emerged from the dialogue with different stakeholders: whether to build minimum or comprehensive data sets; how to standardize data and still retain the ability to capture the unique characteristics of an evolving and diverse workforce; protection of personal information while creating and using identifiers to link across data sets; engaging users in voluntary data reporting; creating uniform data standards to meet the diverse needs of a wide range of stakeholders including consumers, service providers, and managers.



Decision Support 2000+
Human Resources Core Data Standards
June 2006

Core Data Elements

Entity Identifier Code
Entity Type Qualifier
Address
Name (Provider of Organization) (Last, First, Middle)
City Name
State Code
Postal Code
Country Code
Identification Code Qualifier
Identification Code
Reference identification Qualifier
Reference Identification Code
Date of Birth
Gender
Race
Ethnicity
Primary Professional Identification
Highest Degree Earned
Year of Highest Degree
Other Degree
Year of Other Degree
License and State
National Certifications/Credentials
Employment Status
Hours Worked
Number of Positions
Zip Code
Employment Setting(s)
Number of Hours by Work Activities
Number of Consumers Receiving Direct Care
Caseload by Age
Caseload by Gender
Caseload by Race
Caseload by Ethnicity
Languages Other Than English
Percent requiring Other Languages
Diagnoses Treated
Co-occurring Disorders



Disability Status of Caseload
Health Problems
Percent of Adults with Serious Mental Illness
Percent of Children with Serious Emotional Disturbance



Decision Support 2000+
Human Resources Core Data Standards
June 2006

References

Leginski WA, Croze C, Driggers J, Dumpman S, Geertsen D, Kamis-Gould E, et al. Series FN-10, Data Standards for Mental Health Decision Support (DHHS Publication No. ADM 89-1589). Washington, DC: Supt. of Docs., U.S. Government Printing Office, 1989.

Pion G, Merwin E, and the Human Resources Workgroup. Core Data Elements for Mental Health and Substance Abuse Providers: Needed Information for Improving the Healthcare System. In RW Manderscheid & M J Henderson (Eds.), Mental Health, United States 1998. DHHS Pub. (SMA) 99-3285. Washington, DC: U.S. Government Printing Office, 1999.

West J C, Kohout, J, Pion G M, Wicherski M M, Vandivort-Warren R E, et al. Mental health practitioners and trainees. In RW Manderscheid & M J Henderson (Eds.), Mental Health, United States 2000. DHHS Pub. (SMA) 01-3537. Washington, DC: U.S. Government Printing Office, 2001.

Data Sources

Mental Health Statistics Improvement Program, FN-11 Workgroup Documents, Human Resources, 1998. <http://www.mhsip.org/fn11.html#The%20FN-11%20Work%20Group>

Center for Mental Health Services. Mental Health, United States, 2002 (SMA04-3938) <http://www.mentalhealth.samhsa.gov/publications/allpubs/SMA04-3938/Chapter18.asp>

<http://www.mentalhealth.samhsa.gov/publications/allpubs/SMA04-3938/AppendixA.asp>

Human Resources Workgroup. Survey Tool for Mental Health Professionals Core Minimum Human Resources Data Set, Unpublished report, .May 2003.

Center for Mental Health Services. Uniform Data Definitions FY2004 State Reports. August 2005. <http://www.nri-inc.org/SDICC/SDICC05/datad05.pdf>

Bureau of Labor Statistics, U.S. Census Bureau. Current Population Survey, Technical Paper 63RV, Design and Methodology. March 2002.

<http://www.census.gov/prod/2002pubs/tp63rv.pdf>

National Electronic Data Interchange Transaction Set Implementation Guides: Health Care Claim: Professional 837, ASC X12N 837 (004010X098),

<http://www.ihs.gov/AdminMngrResources/HIPAA/docs/x098.pdf>

Addenda: <http://www.lamedicare.com/provider/edi/837PA1.pdf>



Payment/Advice 835, ASC X12N 835 (004010X091),
<http://www.ihs.gov/AdminMngrResources/HIPAA/docs/x091.pdf>
Addenda: <http://www.hguard.com/HIPAA/X091A1.pdf>

Health Care Claim: Institutional 837, ASC X12N 837 (004010X096)
<http://www.ihs.gov/AdminMngrResources/HIPAA/docs/x096.pdf>
Addenda: <http://www.arkbluecross.com/Websitedocs/Forms/providers/edi/837ia1.pdf>

Center for Disease Control. Prevalence of Disabilities and Associated Health Conditions Among Adults --- United States. 1999.
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5007a3.htm>

Key Contributors

Human Resources Workgroup
Mental Health Statistics Improvement Program (MHSIP)
Ron Mandersheid, Ph.D.
Marilyn Henderson, M.A.
Elizabeth I. Merwin, Ph.D., R.N., F.A.A.N.
David Fienberg, Ph.D.

Prepared by

Sharon Guidera, M.A.
Sarah Minden, M.D.



Decision Support 2000+
Human Resources Core Data Standards
June 2006

Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
HIPAA Unique identifiers ¹					
Entity Identifier Code		Code identifying an organization entity, a physical location, property or an individual	HIPAA NM101, 98	In a HIPAA transaction, this code is used to identify the entity about whom the information is provided, e.g. the billing provider or the submitter.	Data elements in this domain provide identifying and contact information.
Entity Type Qualifier	1 - Person 2 - Non-Person Entity	Code identifying an organizational entity, a physical location, property or an individual	HIPAA NM102, 1065	If Non-Person Entity is used (e.g., organization) then the rendering provider NM1 loop 2310B in the 837p IG or the attending physician NMI loop 2310A in the 837i IG must be used when appropriate to identify the person who rendered the service.	
Name Last or Organization Name		Individual last name or organization name	HIPAA NM103, 1035		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Name First		Individual first name	HIPAA NM104, 1036		
Name Middle		Individual middle name	HIPAA NM105, 1037		
Address Information		Provider's address	HIPAA N301, 166	Address information is present only in the billing and pay to provider loops and must be taken from these regardless of the loop used for the provider identifier.	
City Name			HIPAA N401, 19		
State or Province Code			HIPAA N402, 156		
Postal Code			HIPAA N403, 116		
Country Code			HIPAA N404, 26		
Identification Code Qualifier		Code designating the system/method of code structure used for Identification	HIPAA NM108, 66		
	Employer's Identification Number				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Social Security Number				
	XX - Health Care Financing Administration ID Number	Required value when the National Provider ID is mandated for use. Otherwise, one of the other listed codes may be used.			
Identification Code		Code identifying a party or other Code. This is the primary provider identification code.	HIPAA NM109, 67		Use to link to other data sets



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Reference Identification Qualifier			HIPAA REF01, 128	Code designating the system/method of code structure used for Identification Code. The REF fields typically are used for alternate or additional identification; the primary identification is carried in the NM 108/9 segments. These additional fields are not mandatory, but are included here specifically because they carry the identification codes for the provider's state license number, insurance numbers, facility numbers, employer identification numbers, and person identification numbers such as a social security number. The HIPAA claims transactions may contain and the DS2000+ will allow for up to 8 additional REF fields.	



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	OB - State License Number				
	1A - Blue Cross Provider Number				
	1B - Blue Shield Provider Number				
	1C - Medicare Provider Number				
	1D - Medicaid Provider Number				
	1G - Provider UPIN Number				
	1H - CHAMPUS Identification Number				
	E1 - Employer's Identification Number				
	G2 - Provider Commercial Number				
	LU - Location Number				
	N5 - Provider Plan Network ID Number				
	SY - Social Security Number				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Reference Identification code		This is the identification code that provides the data for the type of number described in REF 101, e.g., the provider's state license number, blue cross blue shield number, or social security number.	HIPAA REF02, 127	Use this code only to provide additional identification numbers for the provider; the primary identification number is contained in NM109.	Use to link to other data sets
Provider Demographic Characteristics					



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Date of Birth	CCYYMMDD	Date of Birth of the Provider		The newly operating National Plan and Provider Enumeration System (NPPES) will also store some provider demographic information. At this time, the Center for Medicare and Medicaid Services (CMS) has not issued a planned Notice specifying which NPPES data elements will be available for dissemination. This notice will be reviewed for usefulness to the DS2000+ data standards when it is issued. https://nppes.cms.hhs.gov/NPPES/Welcome.do	Use in analyzing recruitment and retention issues in workforce.
Gender	F - Female M - Male U - Unknown		HIPAA format		Distribution may indicate barriers to recruitment and can identify gender issues in care



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Race			US Census 2000	Mark one or more races to indicate what this person considers himself/herself to be.	Distribution may indicate barriers to recruitment & cultural appropriate care issues. Index of quality of care where client population and staff share cultural backgrounds.
	White				
	Black, African American or Negro				
	American Indian or Alaska Native			Specify tribe	
	Asian Indian				
	Chinese				
	Filipino				
	Japanese				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Korean				
	Vietnamese				
	Other Asian			Specify	
	Native Hawaiian				
	Guamanian or Chamorro				
	Samoan				
	Other Pacific Islander			Specify	
	Some other race			Specify	
	Don't know				
	Refused				
Ethnicity	Not Spanish/Hispanic/Latino		US Census 2000		
	Mexican, Mexican American, Chicano				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Puerto Rican				
	Cuban				
	Other Spanish/Hispanic/Latino				
Provider Professional Characteristics (Type of Provider)					



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Primary Professional Identification		<p>Self-selected category that best reflects the major discipline (s), training, or profession (s) for which staff member has been trained or hired.</p> <p>Note: The categories listed below include all those in the HIPAA Provider Taxonomy for purposes of completeness and because some behavioral health organizations may have these providers in their workforce. The list only includes the main categories—subcategories and codes are listed in Exhibit 1.</p>	<p>HIPAA Provider Taxonomy, Level I Version 3.0.1 (April 2003) www.wpc-edi.com/taxonomy/Codes.html</p>	Code all that apply.	Provides information when linked with training on field shifting.
	Allopathic & Osteopathic Physicians	A broad category grouping state licensed providers in allopathic or osteopathic medicine whose scope of practice is determined by education.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Behavioral Health and Social Providers	Broad classification aggregating providers who are trained and educated to perform services related to behavioral health, mental health, and counseling and may be licensed or practice within the scope or licensure or training.			
	Chiropractic Providers	A provider qualified by a Doctor of Chiropractic (D.C.), licensed by the State and who practices chiropractic Medicine—that discipline within the healing arts which deals with the nervous system and its relationship to the spinal column and its interrelationship with other body systems.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Dental Providers	Broad category to identify practitioners who render services related the practice of dentistry. Dentistry is defined as the evaluation, diagnosis, prevention and/or treatment (nonsurgical, surgical or related procedures) of diseases, disorders and/or conditions of the oral cavity, maxillofacial area and/or the adjacent and associated structures and their impact on the human body; provided by a dentist, within the scope of his/her education, training and experience, in accordance with the ethics of the profession and applicable law.			
	Dietary and Nutritional Service Providers	Broad category defining practitioners who help prevent and treat illness by promoting healthy eating habits, scientifically evaluating diets and suggesting modifications. They may also assess the nutritional needs of patients, develop and implement nutritional care plans.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Emergency Medical Service Providers	Broad category for individuals who complete additional training and education in the area of pre-hospital emergency services and are licensed and/or practice within the scope of that training.			
	Eye and Vision Service Providers	Broad category grouping individuals who renders services related to the human eye and visual systems, but are not an allopathic or osteopathic physicians.			
	Nursing Service Providers	Providers who are trained and educated to perform services in health promotion, disease prevention, acute and chronic care, and restoration of health, and health maintenance across the life span.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Nursing Service Related Providers	Providers who are trained and educated to perform and administer services related to health promotion, disease prevention, and acute and chronic care, spiritual guidance and comfort for healing and health, restoration of health and health maintenance across the life span.			
	Other Service Providers	Providers not otherwise classified, who perform or administer services in or related to the delivery or research of health care services, disease, and restoration of health. An individual provider who is not represented in one of the identified categories but whose data may be needed for clinical, operational or administrative processes.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Pharmacy Service Providers	A broad category grouping providers who render services relating to the preparation and dispensing of drugs.			
	Physician Assistants and Advanced Practice Nurse Providers	A broad grouping of providers who are: (1) trained, educated and certified to perform basic medical and minor surgical services or to assist the physician in performance of more complex services; and (2) trained, educated at a post-graduate level, and certified to perform autonomous and specialized roles as nurse practitioners, midwives, nurse anesthetists, or clinical nurse specialists.			
	Podiatric Medicine & Surgery Service Providers	Broad category grouping licensed providers who renders services related to the human foot.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Respiratory, Rehabilitative and Restorative Service Providers	A provider who is trained and educated to perform services related to respiratory care, physical therapy, occupational therapy, rehabilitation and restorative services and may be licensed, certified or practice within the scope of training.			
	Speech, Language and Hearing Service Providers	A provider who renders services to improve communicative skills of people with language, speech and hearing impairments.			
	Technologists, Technicians, and Other Technical Service Providers	A broad category grouping providers who apply scientific knowledge in solving practical or theoretical problems or applies technical procedures in accordance with their training and experience.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Highest Degree Earned			HR Work Group (modified), FN11	Code one.	Allows examination of relationships between level of education and functions positions perform. Allows broad insight into basic roles professionals are serving. Improves salary surveys by examining relationships between training and compensation. Training of workforce as implications on ability to meet standards (e.g. evidenced based practices, accreditation).
	Doctorate	Ph.D., Sc.D., J.D., Ed.D.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Doctorate of Medicine	M.D., D.O.			
	Master's	M.A., M.S., M.S.W.			
	Baccalaureate	B.A., B.S.			
	Associate's Degree				
	Some college but no degree				
	High school diploma/GED				
	Less than high school/GED				
Year of Highest Degree	CCYYMMDD		HIPAA format		Allows examination of length of time since completion of training.
Other Degree	Doctorate	Other degree (not including highest degree) used in current employment	MHSIP Task Group	If your highest degree is not the degree primarily used in your current employment select other degree below. Check one.	See "Highest Degree Earned".



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Doctorate of Medicine				
	Master's				
	Baccalaureate				
	Associate's Degree				
	Some college but no degree				
	High school diploma/GED				
	Less than high school/GED				
Year of Other Degree	CCYYMMDD	Year of other degree	HIPAA format		Allows examination of length of time since completion of training.
License and State		Current license(s) or certification(s) from state boards of licensure or certification.	HR Work Group (modified), FN11 (modified)	Code all current licenses or certifications.	Proxy for quality of work force (skill level) from an external source
	Medicine				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Physician Assistant				
	Psychologist				
	Clinical Social Worker				
	Marriage and Family Therapist				
	Pastoral Counselor				
	Counselor				
	Advance Practice Nurse				
	Nursing				
	Occupational Therapy				
	Addictions				
	School Psychologist				
	Rehabilitative Provider				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Other			Specify	
National Certifications/ Credentials		Current national certifications and credentials.	HR Workgroup (modified), FN11 (modified)	Code all.	Proxy for skill level and training of work force.
	American Board of Medical Specialists				
	American Board of Professional Psychology				
	National Certified School Psychologists				
	National Association of Social Workers				
	Association of Social Work Boards				
	American Nurses Credentialing Center				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	American Academy of Nurse Practitioners				
	National Board for Certified Counselors				
	American Association of Pastoral Counselors				
	National Association for Addiction Professionals				
	American Association for Marriage and Family Therapy				
	Other			Specify	



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Provider Employment Status, Hours, and Geographic Location					
Employment Status			Current Population Survey, Census Bureau	Code one.	Number of persons employed or seeking work (total and by discipline) provides information about the availability and capacity of the workforce to meet demand. Information by discipline is key for understanding the economic opportunities or lack of and/or supply or over-supply.



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Employed-At Work	Employed persons are those who, during the reference week, did any work at all (for at least 1 hour) as paid employees; worked in their own businesses, professions, or on their own farms; or worked 15 hours or more as unpaid workers in an enterprise operated by a family member.			
	Employed-Absent	Reasons for absence include slack work/business conditions, waiting for a new job to begin, vacation/personal days, own illness/injury/medical problems, child care problems, other family/personal obligation, maternity/paternity leave, labor dispute, weather affected job, school/training, civic/military duty.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Unemployed-Looking	Unemployed persons are those who were not employed during the reference week but were available for work (excluding temporary illness) and had made specific efforts to find employment some time during the 4-week period.			
	Unemployed-Layoff	Persons "on layoff" are those who have been separated from a job to which they are waiting to be recalled.			
	Retired-Not in Labor Force				
	Disabled-Not in Labor Force				
	Student, trainee, intern				
	Other - Not in Labor Force				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Hours Worked		Number of hours worked for pay in a typical week.	HR Work group		Patterns of employment by discipline useful indicators of supply.
Number of Positions		Number of different employment positions held.	HR Workgroup	Count full or part time positions. For more than one position in same work place with different titles, count each as separate.	Allows examination of work patterns by discipline (e.g., how many persons are in the work force engaged in multiple employment situations?)
Zip Code		First five digits of zip code.	HR Work group	For work locations code in order of most time to least time at location.	Use to assess the availability and accessibility of services by geographic areas.
	Residence				
	Workplace - 1				
	Workplace - 2				
	Workplace - 3				



Decision Support 2000+ Human Resources Core Data Standards					
DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Provider Employment Setting: general					
Employment Setting(s)		Percentage of time in employment setting(s).	There are several ways to categorize employment setting. ¹	For each setting, compute percentage of total work time spent in setting.	Allows examination of employment patterns by discipline and setting and of availability and access by discipline for clients who receive services in certain settings.
Provider Employment Setting: HIPAA Provider Taxonomy					

¹ One can use the non-individual categories in the HIPAA Provider Taxonomy; the Facility/Place of Service/Health Care Service Location codes provided by the Center for Medicare and Medicaid Services (CMS) (see below) and listed in the HIPAA 837 Professional Implementation Guide in data element CLM05-1, 1331; the organizations listed in the Survey of Mental Health Organizations (SMHO); the Human Resources Workgroup codes, FN11 and FN10; etc. We present these different codes in four sections: first the HIPAA Provider Taxonomy codes; second, the Facility/Place of Service/Health Care Service Location codes; and third, non-HIPAA Behavioral Health Specific codes. In Exhibit 1 we provide a cross-walk between the Provider Taxonomy, CLM05, and SMHO codes. For completeness we list all the non-individual categories in the HIPAA Provider Taxonomy because some organizations may include them.



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Employment setting(s)	Agencies	A non-facility provider that renders outpatient outreach services that are not provided at a specific location. The licensure or registration is assigned to the agency rather than to the individual practitioners as would be the case in a group practice.	HIPAA Provider Taxonomy. http://www.wpc-edi.com/codes/taxonomy		
	Ambulatory health care facility	A state-licensed facility that is not hospital based where services are provided at a fixed specific location. An ambulatory facility does not provide overnight accommodations.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Hospital units	A distinct part of a general acute care hospital. The distinctness of a unit is determined by characteristics such as the following: the unit has admission and discharge records that are separately identified from those of the hospital; the hospital has policies specifying that necessary clinical information is transferred to the unit when a patient of the hospital is transferred to the unit; the hospital's utilization review plan includes separate standards for the type of care offered in the unit; the beds assigned to the unit are physically separate from beds not included in the unit; the unit is treated as a separate cost center for cost reporting, funding and apportionment purposes.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Hospitals	A health care organization that has a governing body, an organized medical staff and professional staff and inpatient facilities and provides medical nursing and related services for ill and injured patients 24 hrs per day, seven days per week. For licensing purposes, each state has its own definition of hospital.			
	Laboratories	A room or building equipped for scientific experimentation, research, testing, or clinical studies of materials, fluids, or tissues obtained from patients.			
	Managed care organization	Exclusive Provider Organization, Health Maintenance Organization, or Preferred Provider Organization.			
	Nursing and custodial care facilities	Broad category identifying licensed facilities with inpatient beds specializing in nursing and custodial care.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Residential treatment facility	Live in facilities where patients or clients, who because of their physical, mental, or emotional condition, are not able to live independently, and who receive treatment appropriate to their particular needs in a less restrictive environment than an inpatient facility. For example, an RTC may provide educational training and therapy for children with emotional disturbances or continuing care and therapy for people with severe mental handicaps.			
	Respite Care Facilities	A facility with dorm rooms where individuals who are unable to care for themselves may stay on a short term basis overnight to allow relief to persons normally providing care to them.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Suppliers	A provider, other than a pharmacy, who supplies healthcare related products. The term supplier also includes pharmacies.			
	Transportation Services	A provider who moves a patient, tissue specimen or equipment from one location to another.			
Provider Employment Setting: Other HIPAA codes					
Employment setting(s)			Place of Service Codes for Professional Claims (3/29/04) www.cms.hhs.gov/statelocplac/posdata/pdf Simple Data Element /Code References 1332/B Electronic Media Claims National Standard Format Short list available in HIPAA CLM05 –1, 1131		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	3 - School	A facility whose primary purpose is education			
	4 - Homeless Shelter	A facility or location whose primary purpose is to provide temporary housing to homeless persons (e.g. emergency shelter, individual or family shelters).			
	5 - Indian Health Services Free-standing Facility	Outpatient facility owned and operated by the Indian Health Service, which provides diagnostic, therapeutic, and rehabilitation services to American Indians and Alaska Natives.			
	6 - Indian Health Services Provider based Facility	Facility owned and operated by the Indian Health Service, which provides diagnostic, therapeutic and rehabilitation services to American Indians and Alaska Natives admitted as inpatients or outpatients.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	7 - Tribal 638 Free-standing Facility	Outpatient facility, owned and operated by a federally recognized American Indian or Alaska Native tribe or tribal organization under a 638 agreement, which provides diagnostic, therapeutic, and rehabilitation services to tribal members.			
	8 - Tribal 638 Provider-Based Facility	Outpatient facility, owned and operated by a federally recognized American Indian or Alaska Native tribe or tribal organization under a 638 agreement, which provides diagnostic, therapeutic, and rehabilitation services to tribal members admitted as inpatients or outpatients.			
	11 - Office	Location, other than a hospital, skilled nursing facility (SNF), military treatment center, ...where the health professional routinely provides health examinations, diagnosis,			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	12 - Home	Location, other than a hospital or other facility, where the patient receives care in a private residence.			
	13 - Assisted Living Facility	Congregate residential facility with self-contained living units providing assessment of each resident's needs and on-site support 24 hours a day, 7 days a week, with the capacity to deliver or arrange for services including some health care and other services.			
	14 - Group Home	A residence, with shared living areas, where clients receive supervision and other services such as social and /or behavioral services, custodial service, and minimal services (e.g., medication administration.			
	15 - Mobile Unit	A facility/unit that moves from place-to-place equipped to provide preventive, screening, diagnostic, and /or treatment services.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	20 - Urgent Care Facility	Location, distinct from a hospital emergency room, an office, or a clinic, whose purpose is to diagnose and treat illness or injury for unscheduled, ambulatory patients seeking immediate medical attention.			
	21 – Inpatient Hospital	A facility, other than psychiatric, which primarily provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services by, or under, the supervision of physicians to patients admitted for a variety of medical conditions.			
	22 - Outpatient Hospital	A portion of a hospital which provides diagnostic, therapeutic (both surgical and non-surgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	23 - Emergency Room - Hospital	A portion of a hospital where emergency diagnosis and treatment of illness or injury is provided.			
	24 - Ambulatory Surgical Center	A freestanding facility, other than a physician's office, where surgical and diagnostic services are provided on an ambulatory basis.			
	25 – Birthing Center	A facility, other than a hospital's maternity facilities or a physician's office, which provides a setting for labor, delivery, and immediate post-partum care as well as immediate care of new born infants.			
	26 – Military Treatment Facility	A medical facility operated by one or more of the Uniformed Services. Military Treatment Facility (MTF) also refers to certain former U.S. Public Health Service (USPHS) facilities now designated as Uniformed Service Treatment Facilities (USTF).			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	31 – Skilled Nursing Facility	A facility which primarily provides inpatient skilled nursing care and related services to patients who require medical, nursing, or rehabilitative services but does not provide the level of care or treatment available in a hospital.			
	32 – Nursing Facility	A facility which primarily provides to residents skilled nursing care and related services for the rehabilitation of injured, disabled, or sick persons, or, on a regular basis, health-related care services above the level of custodial care to other than mentally retarded individuals.			
	33 – Custodial Care Facility	A facility which provides room, board and other personal assistance services, generally on a long term basis, and which does not include a medical component.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	34 - Hospice	A facility, other than a patient's home, in which palliative and supportive care for terminally ill patients and their families are provided.			
	41 - Ambulance - Land	A land vehicle specifically designed, equipped and staffed for lifesaving and transporting the sick or injured.			
	42 - Ambulance - Air or Water	An air or water vehicle specifically designed, equipped and staffed for lifesaving and transporting the sick or injured.			
	49 – Independent Clinic	by any other Place of Service code, that is organized and operated to provide preventive, diagnostic, therapeutic, rehabilitative, or palliative services to outpatients only.			
	50 - Federally Qualified Health Center	A facility located in a medically underserved area that provides Medicare beneficiaries preventive primary medical care under the general direction of a physician.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	51 - Inpatient Psychiatric Facility	A facility that provides inpatient psychiatric services for the diagnosis and treatment of mental illness on a 24-hour basis, by or under the supervision of a physician.			
	52 - Psychiatric Facility Partial Hospitalization	A facility for the diagnosis and treatment of mental illness that provides a planned therapeutic Hospitalization program for patients who do not require full time hospitalization, but who need broader programs than are possible from outpatient visits to a hospital-based or hospital-affiliated facility.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	53 - Community Mental Health Center	A facility that provides the following services: outpatient services, including specialized outpatient services for children, the elderly, individuals who are chronically ill, and residents of the CMHC's mental health services area who have been discharged from inpatient treatment at a mental health facility; 24 hour a day emergency care services; day treatment, other partial hospitalization services, or psychosocial rehabilitation services; screening for patients being considered for admission to State mental health facilities to determine the appropriateness of such admission; and consultation and education services.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	54 - Intermediate Care Facility/Mentally Retarded	A facility which primarily provides health-related care and services above the level of custodial care to mentally retarded individuals but does not provide the level of care or treatment available in a hospital or SNF.			
	55 - Residential Substance Abuse Treatment Facility	A facility which provides treatment for substance (alcohol and drug) abuse to live-in residents who do not require acute medical care. Services include individual and group therapy and counseling, family counseling, laboratory tests, drugs and supplies, psychological testing, and room and board.			
	56 - Psychiatric Residential Treatment Center	A facility or distinct part of a facility for psychiatric care which provides a total 24-hour therapeutically planned and professionally staffed group living and learning environment.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	57 - Non-residential Substance Abuse Facility	A location which provides treatment for substance (alcohol and drug) abuse on an ambulatory basis. Services include individual and group therapy and counseling, family counseling, laboratory tests, drugs and supplies, and psychological testing.			
	60 - Mass Immunization Center	A location where providers administer pneumococcal pneumonia and influenza virus vaccinations and submit these services as electronic media claims, paper claims, or using the roster billing method. This generally takes place in a mass immunization setting, such as , a public health center, pharmacy, or mall but may include a physician office setting.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	61 - Comprehensive Inpatient Rehabilitation Facility	A facility that provides comprehensive Inpatient Rehabilitation Facility rehabilitation services under the supervision of a physician to inpatients with physical disabilities. Services include physical therapy, occupational therapy, speech pathology, social or psychological services, and orthotics and prosthetics services.			
	62 - Comprehensive Outpatient Rehabilitation Facility	A facility that provides comprehensive rehabilitation services under the supervision of a physician to outpatients with physical disabilities. Services include physical therapy, occupational therapy, and speech pathology services.			
	65 - End Stage Renal Disease Treatment Facility	A facility other than a hospital, which provides dialysis treatment, maintenance, and/or training to patients or caregivers on an ambulatory or home-care basis.			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	71 - State or Local Public Health Clinic	A facility maintained by either State or local health departments that provides ambulatory primary medical care under the general direction of a physician.			
	72 - Rural Health Clinic	A certified facility which is located in a rural medically underserved area that provides ambulatory primary medical care under the general direction of a physician.			
	81 - Independent Laboratory	A facility other than a hospital, which provides dialysis treatment, maintenance, and/or training to patients or caregivers on an ambulatory or home-care basis.			
	99 - Other Place of Service	Other place of service not identified above.			
Provider Employment Setting: Survey of Mental Health Organizations (SMHO)					



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Public psychiatric hospital	Primarily provides 24-hour inpatient care and treatment in a hospital setting to persons with mental illnesses. Public psychiatric hospitals may be under State or county auspices.	NCHS http://www.cdc.gov/nchs/dataawh/nchsdefs/list.htm		
	Private psychiatric Hospital	Primarily provides 24-hour inpatient care and treatment in a hospital setting to persons with mental illnesses. Private psychiatric hospitals may be under private for profit, or private nonprofit auspices.	NCHS		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Residential treatment center for emotionally disturbed children	Must meet all of the following criteria: (a) provide 24-hour residential services; (b) are not licensed as a psychiatric hospital and have the primary purpose of providing individually planned mental health treatment services in conjunction with residential care; (c) include a clinical program directed by a psychiatrist, psychologist, social worker, or psychiatric nurse with a graduate degree; (d) serve children and youth primarily under the age of 18; and (e) have the primary diagnosis as mental illness, classified as other than mental retardation, developmental disability, or substance-related disorders, according to DSM-II/ICDA-8 or DSM-III-R/ICD-9-CM codes, for the majority of admissions.	NCHS		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Residential treatment center for adults				
	General hospital with separate psychiatric services	Provides psychiatric services with assigned staff for 24-hour inpatient or residential care and/or less than 24-hour outpatient care in a separate ward, unit, floor, or wing of the hospital.	NCHS		
	General hospital without psychiatric units				
	Department of Veterans Affairs Medical Center (or clinic)	Hospitals operated by the Department of Veterans Affairs (formerly Veterans Administration) and include Department of Veterans Affairs general hospital psychiatric services (including large neuropsychiatric units) and Department of Veterans Affairs psychiatric outpatient clinics.	SAMHSA		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Partial care mental health organization	Provide a program of ambulatory mental health services or rehabilitation, habitation, or educational programs.	NCHS		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Outpatient mental health clinic	Provides only ambulatory mental health services. A psychiatrist generally assumes the medical responsibility for all patients/clients and/or for direction of the mental health program. Beginning in 1986, the definition was changed so that for an organization to be classified as an outpatient clinic, it must provide only outpatient services. In 1994 and 1998, no differentiation was made between outpatient and partial care services. Any organization that was classified in previous years as either a freestanding psychiatric outpatient clinic, a freestanding partial care organization, or in some cases as a multiservice mental health organization with neither 24-hour inpatient nor residential services is now classified as an organization with less than 24-hour care services.	SAMHSA		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Multi-setting mental health organization				
	Substance abuse organization				
	Community residential organization				
	General Hospital				
	Veterans Administration Medical Center or Clinic	Hospitals operated by the Department of Veterans Affairs (formerly the Veterans Administration) and include VA general hospital psychiatric services (including large neuropsychiatric units) and VA psychiatric outpatient clinics.			
	Skilled Nursing Facility (SNF)				
	Intermediate Care Home/Facility (ICF)				
	Group Care Home				
	Apartment Program				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Single Room Occupancy (SRO)				
	Halfway House				
	Shelter				
	MultiSetting CRO				
	Other CRO			Speciy	
	Other			Specify	
Provider Employment Setting: Non-HIPAA Behavioral Health Specific Codes					
	Preschool – Kindergarten – 12 th grade	School settings: preschool & K-12.	HR Work Group		
	Academic Setting – Post Secondary	Academic setting – college or other post secondary school	HR Work Group		
	Multi-setting mental health organization		SMHO		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Consumer run mental health organization	Provides mental health treatment or support services that are provided by current or former mental health consumers. Includes social clubs, peer-support groups, and other peer-organized or consumer run activities.			
	Partial care mental health organization	Provides structured programs of treatment, activity, or other mental health services in clusters of 3 or more hours per day	FN10		
	Correctional Facility	State prison or local jail facility			
	Other Place of service	Other place of service not identified above		Specify	

Types of Services and Number of Hours



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Number of hours		Total number of hours spent in specified work activities for all paid positions combined.	HR Work Group	Code number of hours spent in specific work activities in all positions combined.	Allows examination of distribution of disciplines in various activities and availability of certain disciplines and skills for direct care or other activities.
	Direct Care	Diagnostic assessment, evaluation, medication prescription and management, rehabilitation and treatment			
	Clinical supervision of staff and trainees	Supervision of staff and trainees providing direct care			
	Clinical community consultation and prevention	Does not include direct care			
	Educational activities	Teaching courses or professional workshops, curriculum development, course evaluation			



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Management and administration	Policy or program development and review, personnel administration, recruiting, budgeting			
	Research	Basic and applied			
	Other activity not mentioned above	e.g., scholarly writing			
Caseload size					
Number of consumers currently receiving direct care		Number of consumers treated in last typical week of practice	HR Work Group	Code number of consumers treated in last typical week of practice. Count members of the family only if they are participating in therapy.	Provides estimate of volume served when links to encounter and other databases are not possible. Caseloads can be categorized by age, gender, race, and ethnicity to indicate ability of agency to meet needs of specific consumer groups.
Caseload characteristics: age, gender, race, ethnicity, language					



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA	
Caseload by age	Children (0-12 years)	Percent of case load by age group	HR Work Group (Modified)	Compute percent of caseload in category.	Examine availability of providers across age groups.	
	Adolescents (13-17 years)					Examine age characteristics of providers and clients.
	Young Adults (18-34 years)					
	Adults (35-64 years)					
	Older Adults (65+ years)					
Caseload by gender	Male	Percent of caseload by gender	HR Work Group	Compute percent of caseload in category		
	Female					
Caseload by race	White	Percentage of caseload by race	US Census	Compute percent of caseload in category		
	Black, African Am., or Negro					
	American Indian or Alaska Native-					Specify tribe
	Asian Indian					



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Chinese				
	Filipino				
	Japanese				
	Korean				
	Vietnamese				
	Other Asian-			Specify	
	Native Hawaiian				
	Guamanian or Chamorro				
	Samoan				
	Other Pacific Islander				
	Some other race			Specify	
	Don't know				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Caseload by ethnicity	Not Spanish/Hispanic/Latino	Percentage of caseload by ethnicity	US Census	Compute percent of caseload in category	
	Mexican, Mexican American, Chicano				
	Puerto Rican				
	Cuban				
	Other Spanish/Hispanic/Latino			Specify	
	Don't know				
Caseload by language Other than English	See note 2 for list of languages	Ability to provide direct services in language other than English including sign language	HR Work Group (Modified)	Code all that apply.	Indicates ability to meet special language needs of consumers served.
Percent of caseload requiring other languages	Percent of caseload	Percent of caseload requiring direct services in any language other than English.	HR Workgroup	Percent of consumers who require direct services in language other than English including sign language.	Provides estimate of clients requiring services in language other than English.
Caseload characteristics: diagnoses, co-occurring disorders, disability status, health status					



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Diagnoses treated		Percent of consumers with diagnosis.	ICD-9-CM, DSM IV (American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, fourth edition. Washington DC, American Psychiatric Association, 1994.)	Compute percent of consumers with each diagnosis. Code all that apply.	
	1 - Infectious and parasitic diseases (001-139)		ICD-9-CM: http://icd9cm.chrisendres.com/index.php?action=contents		
	2 - Neoplasms (140-239)				
	3 - Endocrine, nutritional and metabolic diseases, and immunity disorders (240-279)				
	4 - Diseases of the blood and blood-forming organs (280-289)				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	5 - Mental disorders (290-319)				
	6 – Diseases of the nervous system and sense organs (320- 389)				
	7 - Diseases of the circulatory system (390-459)				
	8 - Diseases of the respiratory system (460-519)				
	9 - Diseases of the digestive system (520-579)				
	10 - Diseases of the genitourinary system (580-629)				
	11 - Complications of pregnancy, childbirth and the puerperium (630-677)				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	12 - Diseases of the skin and subcutaneous tissue (680-709)				
	13 - Diseases of the musculoskeletal system and connective tissue (710-739)				
	14 - Congenital anomalies (740-759)				
	15 - Certain conditions originating in the perinatal period (760-779)				
	16 - Symptoms, signs, and ill-defined conditions (780-799)				
	17 - Injury and poisoning (800-999)				



Decision Support 2000+ Human Resources Core Data Standards					
DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Supplementary classification of factors influencing health status and contact with health services (v01-v85)				
	Supplementary classification of external causes of injury and poisoning (e800-e999)				
	Disorders usually first diagnosed in infancy, childhood, or adolescence		DSM IV (American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, fourth edition. Washington DC, American Psychiatric Association, 1994.)		



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Mental retardation and other developmental disorders				
	Delirium, dementia, and amnesic and other cognitive disorders				
	Mental disorders due to a general medical condition not elsewhere classified				
	Substance-related disorders				
	Schizophrenia and other psychotic disorders				
	Mood disorders				
	Anxiety disorders				
	Somatoform disorders				
	Factitious disorders				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Dissociative disorders				
	Sexual and gender identity disorders				
	Eating disorders				
	Sleep disorders				
	Impulse-control disorders not elsewhere classified				
	Adjustment disorders				
	Personality disorders				
	Other conditions that may be a focus of clinical attention				
	Additional codes				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
Co-occurring disorders		Percent of consumers with a mental health, substance abuse and/or developmental disability		Compute percent of consumers that have co-occurring diagnosis or multiple diagnoses in the following areas: mental health, addictions, developmental disabilities and/or health problems.	
Disability status of caseload		Percent of consumers who have impairments	Center for Disease Control (CDC)	Compute the percent of consumers with functional problems that require assistance/daily care.	
	Arthritis or rheumatism				
	Back or spine problem				
	Heart trouble/hardening of the arteries				
	Lung or respiratory problem				
	Deafness or hearing problem				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Limb/extremity stiffness				
	Mental or emotional problem				
	Diabetes				
	Blindness or vision problem				
	Stroke				
	Broken bone/fracture				
	Mental retardation				
	Cancer				
	High blood pressure				
	Head or spinal cord injury				
	Learning disability				
	Alzheimer disease/senility/dementia				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Kidney problems				
	Paralysis				
	Missing limbs				
	Stomach/digestive problems				
	Epilepsy				
	Alcohol or drug problem				
	Hernia or rupture				
	AIDS or AIDS-related condition				
	Cerebral palsy				
	Tumor/cyst/growth				
	Speech disorder				
	Thyroid problems				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Other				
	Congestive heart failure (CHF)				
	Diabetes				
	Asthma				
	Stroke				
	High risk obstetrics				
	Chronic Obstructive Lung Disease (COPD)				
Health Problems	Cancer	Percent of caseload with health problems		Compute percent of consumers in category.	
	Hypertension				
	Renal Disease				
	Arthritis				
	Epilepsy				



Decision Support 2000+ Human Resources Core Data Standards

DATA ELEMENT	CATEGORIES	DEFINITION	SOURCE	INSTRUCTIONS	USES OF DATA
	Physical Developmental Problems				
	HIV/AIDS				
	Other				
	Unable to specify				
	Renal Disease				
Caseload characteristics: SMI, SED					
Percent of adults with serious mental illness (SMI)		Percent of adults served with serious mental illness ³	HR Work Group (modified)	Compute percent of adults served with a serious mental illness.	
Percent of children with serious emotional disturbance (SED)		Percent of children with serious emotional disturbance ⁴		Compute percent of youth served with a serious emotional disorder.	



Notes

¹ The standard for reporting identifying information for providers has been taken from the HIPAA Health Care Claim: Professional and Health Care Claim: Institutional Implementation Guides (IG; 837p and 837i). Each IG provides the same identifying information for many different types of providers. While the identical identifying information is reported using the same segment and data element numbers (e.g., segment number NM101 and data element number 98 always indicate the “entity identifier code”), this information is carried in a separate loop for each provider type (e.g., in the 837p loop 2010AA carries information on the billing provider and loop 2010AB carries information on the pay-to provider). Below we list the loops and provider types for both implementation guides.

837 professional

LOOP ID - 2010AA BILLING PROVIDER NAME
LOOP ID - 2010AB PAY-TO PROVIDER NAME
LOOP ID - 2310A REFERRING PROVIDER NAME
LOOP ID - 2310B RENDERING PROVIDER NAME
LOOP ID - 2310C PURCHASED SERVICE PROVIDER
LOOP ID - 2310D SERVICE FACILITY LOCATION
LOOP ID - 2310E SUPERVISING PROVIDER NAME
LOOP ID - 2420A RENDERING PROVIDER NAME
LOOP ID - 2420B PURCHASED SERVICE PROVIDER
LOOP ID - 2420C OTHER PROVIDER INFORMATION
LOOP ID - 2420D SUPERVISING PROVIDER NAME
LOOP ID - 2420E ORDERING PROVIDER NAME
LOOP ID - 2420F REFERRING PROVIDER NAME



837 institutional

LOOP ID - 2010AA BILLING PROVIDER NAME
LOOP ID - 2010AB PAY-TO PROVIDER NAME
LOOP ID - 2310A ATTENDING PHYSICIAN NAME
LOOP ID - 2310B OPERATING PHYSICIAN NAME
LOOP ID - 2310C OTHER PROVIDER NAME
LOOP ID - 2310D REFERRING PROVIDER NAME
LOOP ID - 2310E SERVICE FACILITY NAME
LOOP ID - 2330D OTHER PAYER ATTENDING
LOOP ID - 2330E OTHER PAYER OPERATING PROVIDER
LOOP ID - 2330F OTHER PAYER OTHER PROVIDER
LOOP ID - 2330G OTHER PAYER REFERRING PROVIDER
LOOP ID - 2420A ATTENDING PHYSICIAN NAME
LOOP ID - 2420B OPERATING PHYSICIAN NAME
LOOP ID - 2420C OTHER PROVIDER NAME
LOOP ID - 2420D REFERRING PROVIDER NAME

² **List of languages**

America Sign Language
Other Sign Language
Spanish
Cantonese
Mandarin
Other Chinese Language
Japanese



Korean
Tagalog (Philippines)
Ilocano
Cambodian
Mien
Hmong
Laotian, Lao
Vietnamese
Thai
Samoan
Russian
Armenian
Turkish
Hebrew
Arabic
Farsi
Polish
French
Portuguese
Italian
Albanian
Amharic
Bengali
Bosnian (Serbo Croat)
Creole (Haiti Fr)
Croatian
Czech
German
Greek
Gujarati (Indian)
Hebrew
Hindi (India)
Hmong



Ibo
Indonesian
Latvian
Lithuanian
Malay
Malayalam (India)
Pashto/Pushtu
Punjabi/Panjabi
Romanian
Serbian
Slovak
Slovene
Somali
Swahili
Tamil
Turkish
Ukranian
Urdo
Yoruba
Other non-English
Unknown/Not reported

³ Pursuant to section 1912 [c] of the Public Health Service Act, adults with serious mental illness (SMI) are persons: (1) age 18 and over and (2) who currently have, or at any time during the past year had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within DSM-IV or their ICD-9-CM equivalent (and subsequent revisions) with the exception of DSM-IV “V” codes, substance use disorders and developmental disorders, which are excluded, unless they co-occur with another diagnosable serious mental illness and (3) that has resulted in functional impairment, which substantially interferes with or limits one or more major life activities. (Federal Register Volume 58 No.96

⁴ Pursuant to section 1912 [c] of the Public Health Service Act, children with a serious emotional disturbance (SED) are persons: (1) from birth up to age 18 and (2) who currently have, or at any time during the past year had a diagnosable mental, behavioral, or emotional disorder of sufficient



duration to meet diagnostic criteria specified within DSM-IV or their ICD-9-CM equivalent (and subsequent revisions) and (3) that results in functional impairment which substantially interferes with or limits the child's life or functioning in family, school, or community settings.

