

**CalOMS Monthly Data Calendar
for
CalOMS Errors, Admissions, Discharges, and Annual data updates.**

FY 2015-2016 CALOMS		Monthly CalOMS Data COMPLETION Due Dates for Provider Staff	Monthly CalOMS Data State File Due Date
CalOMS Data Submission Month	CalOMS Data Submission Year		
June	2015	Complete by the 25th day of the month 07/25/15	** (Delinquent if submitted after the due date) 08/10/15
July	2015	08/25/15	09/10/15
August	2015	09/25/15	10/09/15
September	2015	10/25/15	11/10/15
October	2015	11/25/15	12/10/15
November	2015	12/23/15	01/11/16
December	2015	01/25/16	02/10/16
January	2016	02/25/16	03/10/16
February	2016	03/25/16	04/11/16
March	2016	04/25/16	05/10/16
April	2016	05/25/16	06/10/16
May	2016	06/25/16	07/11/16
June	2016	07/25/16	08/10/16

****This will show up as delinquent for CalOMS data submission and will be included as a deficiency on the next SUD Fiscal Year State-County Contract Compliance Audit Report.**

Client Registration, Episode Opening/Closing documents available on the BHCS Providers website: <http://www.acbhcs.org/providers>

CLIENT EPISODE - OPENING

NOTE: The "Z4" (Client Unable to Answer) code is only allowable for certain questions and ONLY when the client is coded in the Client Registration screen as having a Physical Disability of "Developmentally Disabled" or enrolled in a detoxification program.

Item 5 - Diagnosis

303.90 Alcohol Dependence	305.20 Cannabis Abuse	304.50 PCP/Hallucinogen Dependence
305.00 Alcohol Abuse	304.20 Cocaine Dependence	305.30 Hallucinogen Abuse
304.40 Amphetamine Dependence	305.60 Cocaine Abuse	305.90 PCP Abuse/Psychoactive Substance Abuse NOS
305.70 Amphetamine Abuse	304.60 Inhalant Dependence	304.90 Polysubstance Dependence/Psychoactive Substance Dependence
304.10 Barbiturate or similarly acting sedative dependence	305.90 Inhalant Abuse	799.9 Deferred diagnosis
305.40 Barbiturate or similarly active sedative abuse	304.00 Opioid Dependence	
304.30 Cannabis Dependence	305.50 Opioid Abuse	

Item 6 - Referred From

1 Fed/State Criminal Justice	10 Mental Health	19 Other
2 Local/County Criminal Justice	11 Public Guardian	20 12 Step Program
3 Self	12 Public Health/Public Health Nursing	21 SACPA Court Probation
4 Family/Friend	13 Residential Care Facility	22 SACPA Court Parole
5 Employer	14 Drug Residential	23 DUI / DWI
6 School/College	15 Drug Outpatient	24 State Drug Partnership (DCP)
7 Medical; hospital/clinic/physicians/nurse	16 Alcohol Residential/Outpatient	25 Comprehensive Drug Court Implementation (CDCI)
8 Social Services	17 Telephone Directory	26 Dependency Court / Child Protective Services
9 Community Agency	18 Brochure/Flyer/Newspaper/Newsletter	

Item 7 - Admission Status

1 Substance Abuser	3 Adult Child of Substance Abuser	5 Parent of Substance Abuser
2 Spouse of Substance Abuser	4 Minor Child of Substance Abuser	6 Other Co-dependent of Substance Abuser

Item 9 - Admission Legal Status

1 Not Applicable	4 On probation on any federal, state or local jurisdiction	7 Awaiting Trial
2 Under Parole Supervision by CDC A	5 Admitted under diversion from any court	Z4 Unable to answer
3 On parole from any other jurisdiction	6 Incarcerated	

Item 10 - Admission Employment Status

01 Full time (35 hours or more per week)	04 Unemployed not in the labor force (not seeking work)
02 Part time (less than 35 hours per week)	05 Not in the labor force (not seeking work)
03 Unemployed looking for work	

Item 12 - Current Living Situation

1 Homeless	2 Dependent Living	3 Independent Living
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Item 15 - Coded Remarks

1-6	CDC Number (Only for clients in RU's ending in "2" BASN programs.			
10	Y - Yes a Veteran	N - No Not a Veteran	Z0 - Client declined to State	Z4 - Client unable to answer
17	Y - Medi-Cal Beneficiary	N - Not a Medi-Cal Beneficiary	Z4 - Client unable to answer	
22	Y - CalWORKs Recipient	N - Not a CalWORKs Recipient	Z1 - Not Sure / Don't Know	
23	Y - The Client is receiving substance abuse treatment under CalWORKs recipient's Welfare-To-Work plan.	N - The Client is not receiving substance abuse treatment under CalWORKs.	Z1 - Not Sure	

Item 17 - Medication Prescribed

1 None	2 Methadone	3 LAMM	4. Buprenorphine (Subutex)	5. Buprenorphine (Suboxone)	Z3. Other
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Item 19 - Substance Problem - Primary & Secondary

01 Heroin	06 Other Amphetamines	11 Other Hallucinogens	16 Inhalants	Z1 Unknown
02 Alcohol	07 Other Stimulants	12 Benzodazepine	17 Over the Counter	Z3 Other (specify)
03 Barbiturates	08 Cocaine/Crack	13 Other Tranquilizers	18 OcyCodone/OcyContin	22 None (Secondary Only)
04 Other Seds/Hypnotics	09 Marijuana/Hashish	14 Non-Prescription Methadone	19 Ecstasy	
05 Methamphetamines	10 PCP	15 Other Opiates and Synthetics	20 Other Club Drugs	

Item 20 - Usual Route of Administration - Primary & Secondary

1 Oral	3 Inhalant	Z2 None or not applicable
2 Smoking	4 Injection (IV or intramuscular)	Z3 Other

Item 21 - Frequency of Use - Primary & Secondary

Enter the number of days	Z2 None or not applicable
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SUD InSyst Episode Opening screen Enhancement for ICD-10

Overview: Effective October 1, 2015, you will continue to input the DSM-IV diagnosis code in the InSyst system on the Episode opening screen and the system will cross-walk to the ICD-10 diagnosis code behind the scenes. Please refer to the information below.

1. The ICD-10 diagnosis code and description will be added to the InSyst Episode screen effective 10/01/15.
2. The ICD-10 diagnosis code Information will display on the InSyst episode opening screen after entering the DSM-IV diagnosis code for the primary code only.
3. BHCS and our vendor (Echo Group) have collaborated with other Counties to build the DSM-IV to ICD-10 cross-walk for the ICD-10 diagnosis codes.

Episode Opening

Client Number:
CALOMS TEST
RU: 99991

	Coded Remarks	Position
Admit Date: / /	CDC Number:	1-6
Axis: I: II	Veteran:	18
ICD10: Staff	Perinatal:	
Referred From:	Case Mgt:	14
Admission Status:	Indicator 1:	15
Initial Admission:	Indicator 2:	16
Admission Legal Status:	Medi-Cal:	17
Admission Employment Status:	CalWORKs:	
Number of Children in Household:	Recipient:	22
Number of Children Under 3:	Sub Abuse Trmt:	23
Client Pregnant at Admission:		
Client Homeless at Admission:		
Arrests in Last 24 Months:		
Special Contract County:		
Special Contract Number:	CalOMS Zip Code:	

Form Ok Y/N:
Confidential Information
USER: DIEDRICK

Client 10012854 is currently open at reporting unit 99991



DEPARTMENT OF ALCOHOL and DRUG PROGRAMS

Program Services Division

**California Outcomes Measurement System
(CalOMS)**

TREATMENT DATA COMPLIANCE STANDARDS

*Version 1.0
September 26, 2005*

California Outcomes Measurement System (CalOMS) Treatment Data Compliance Standards

The Department of Alcohol and Drug Programs (ADP) has established the following data compliance standards for the California Outcomes Measurement System (CalOMS). These data standards are intended to provide counties and the provider community with clear direction on submitting complete and accurate CalOMS data in a timely manner.

Compliance with these data standards will help ADP more effectively achieve the CalOMS data collection and outcomes measurement objectives, including:

- Effectively manage and improve the provision of treatment services provided to AOD clients at the State, county and provider levels.
- Meet federal and State reporting requirements, including reporting obligations to other State agencies.
- Report to the Administration, Legislature, federal government, county boards of supervisors, provider boards of directors and other third-party payers information regarding the effectiveness of AOD programs in California.

Timeliness

Standard: Counties and direct providers shall submit CalOMS treatment data to ADP as soon as possible but not later than 45 days after the end of the report month.

ADP expects counties and direct providers to submit their monthly electronic CalOMS treatment data as soon as it is available, either during or after the end of the report month (i.e., the calendar month in which the admissions, discharges, or annual updates occur). Counties and direct providers may submit their CalOMS treatment data in one or more batch files, as frequently as best fits their business processes.

Standard: Counties and direct providers shall correct data errors identified by ADP and resubmit corrected CalOMS treatment data to ADP as soon as possible but not later than 75 days after the end of the original report month.

Standard: Annually, not more than five percent (5%) of individual admission reports and ten percent (10%) of individual discharge reports shall be submitted from months prior to the current report month.

Completeness

Standard: Counties shall account for all (100 percent) of their treatment providers in their monthly CalOMS treatment batch file.

ADP will measure county and direct provider completeness of reporting. Counties shall account for all (100 percent) of their treatment providers, including providers with transaction records, (e.g. admissions, discharges, or annual updates) as well as providers that show no activity.

Standard: All providers shall submit CalOMS data for all admissions, discharges, or annual updates every month.

All providers must report each month. If a provider has no reportable CalOMS activity, the provider must report "No Activity" as defined in the CalOMS Input Data File Instructions and the CalOMS Data Dictionary.

Standard: Counties and direct providers shall submit CalOMS treatment data that contains valid entries in every field of every record.

Every data field in every CalOMS record is important. Failure to successfully answer any CalOMS data requirement will result in a fatal record error that will be reported to the county or direct provider for correction and resubmission. Discharge records for which there is not a current or previously submitted admission record will be rejected.

A ratio of discharge to admission data will be established for each county and direct provider. ADP will monitor these percentages on a quarterly basis to determine if they are within the historical average. A percentage of the annual average of data records submissions will be established for each county and direct provider. ADP will monitor these percentages on a quarterly basis to determine if they are within the historical average.

Data Accuracy

Standard: The rate of fatal record errors detected shall not exceed five percent (5%) for each CalOMS treatment data batch file submitted.

ADP will be conducting ongoing monitoring of data submission through automated processes and producing automated reports. After each county's and direct provider's monthly submission, ADP will generate detail and summary compliance reports and send them to the counties and direct providers. Detailed reports will show errors at the individual record level. After receiving an error report, counties and direct providers shall correct all records that had fatal errors and return them to ADP according to the timeliness standard described above.

Top Ten Most Frequent CalOMS Errors

1. Invalid CDCR Number
2. Criminal Justice Status cannot be 1
IF InSyst Referred From value = 1 or 2 (1=Fed/State Criminal Justice, 2=Local/County Criminal Justice)
Admission Legal Status CAN NOT = 1
3. Needle use cannot be 0 if Primary or Secondary drug route = 4
4. Alcohol Frequency cannot = Z2 if Primary or Secondary Problem = 02
5. Alcohol frequency value invalid
6. Residence Zip Code Missing (on Admission or Discharge)
7. Client Registration 2nd Screen Errors (one, or all items below missing)
 - Client Birth First Name Missing
 - Client Birth Last Name Missing
 - Client Birth County Missing
 - Client Birth State Missing
 - Client Driver's License Missing
 - Client Driver's License State Missing
 - Client Mothers First Name Missing
8. If the state is entered the driver's license must also be entered ", "99902"
9. Provider Class MNT must name medication, Medication:1
10. Z4 allowed only with DD or detox facility
 - **Note:** The "Z4" (Client Unable to Answer) code is only allowable for certain questions and ONLY when the client is coded in the Client Registration screen as having a Physical Disability of "Developmentally Disabled" or enrolled in a Detoxification program.

Special Note:

The CalOMS TX Treatment Data Collection Guide references alternative values as a five-digit code; each County agreed to use a two-digit code.

- Listed below are the State alternative codes and the County's alternative codes used for InSyst with a brief description:

State Code to County Code Description crosswalk

99900	Z0	Client Declined to State
99901	Z1	Unknown or Not Sure/Don't Know
99902	Z2	None or Not Applicable
99903	Z3	Other
99904	Z4	Client Unable to Answer

Report PSP119C - Summary - All Providers with Open Episodes and no Service 45+ Days

Please note, for clients who have never received a service the report uses the opening date as the last service date.

Provider Name	Reporting Unit	# Open Episodes	# Open Episodes No Svc 45+
BAY AREA ART METHADONE PRIVATE	01AG55	94	86
SAACS - METHADONE MAINTENANCE	810850	354	85
H.A.A.R.T.-CV - MMV PRIVATE	810455	86	83
SAACS - METHADONE PRIVATE	810855	56	54
BAY AREA ART - MAINTENANCE	01AG50	504	52
BERKELEY ADDICTION TX MNT PRI	018155	35	35
H.A.A.R.T. MNT PRIVATE	016755	31	26
ST. MARY'S ODF COUNTY	000860	58	15
HIGHLAND HOSPITAL ODF PRIVATE	010965	13	11
LIFELINE METHADONE PRIVATE	019655	10	10
BAART EHS-DETOX PRIVATE	811654	10	8
MAGNOLIA WMS RES-PERINATAL WL	01AF2W	21	7
HIGHLAND HOSPITAL - CASE MGMT	0109C6	30	5
HIGHLAND HOSPITAL ODF	010960	17	5
WOHC - OUTPAT SRV - DCH CNTY	017070	10	5
CURA - PRIVATE	013425	4	4
THUNDER ROAD RES TL YOUTH	0735T7	7	4
VALLEY COMMUNITY HLTH CIR-ODFY	018567	27	4
AXIS COMMUNITY HEALTH INC-ODF	812160	46	3
ASIAN CMH ADOLESCENT PROGRAM	011667	19	2
BI-BETT - ORCHID	007020	10	2
CURA - RESIDENTIAL FREMONT WL	01342W	9	2
EBCRP RES PROJ PRIDE OAKLND WL	01062W	2	2
HIGHLAND HOSPITAL DAY	010970	14	2
MAGNOLIA RECOVERY PGM RES PERI	01AF21	3	2
SECOND CHANCE - TRI-CITY	017960	176	2
WOHC ODF CRC WEST	812210	30	2
2ND CHANCE - BASN	017912	1	1
BI-BETT RESIDENTIAL ORCHID WL	00702W	1	1
H.A.A.R.T. - MNT CORE	016750	406	1
THUNDER ROAD - RES COUNTY	073527	2	1

Report PSP119A - Open Episodes with no services in 60 plus days.

ODF COUNTY (000123)

Please note, for clients who have never received a service the report uses the opening date as the last service date.

Client#	Name	Opening	LSD	#Days No Svc	
087654321	XXXXXX	XXXX	10-Jan-2013	11-Mar-2015	146
012345678	XXXXXX	XXXXXX	7-Dec-2011	5-Mar-2015	152
012344444	XXXX	XXXXXXXX	8-Dec-2012	24-Dec-2014	223
012355555	XXXXXX	XXXX	2-Feb-2015	6-Feb-2015	179
024567890	XXXXXXXX	XXXXXXXX	1-Feb-2015	17-Feb-2015	168
034567891	XXXXXX	XXXXXX	18-Nov-2014	26-Nov-2014	251
045678910	XXXXX	XXXXXXXX	2-Feb-2015		183

Total Episodes with no service 60 plus days: 7

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Report PSP119D - Provider Summary of Annual Review Due or Delinquent
CalOMS State Reporting for SUD Providers requires an Annual Update for clients based on episode opening date.

Reporting Unit	Provider Name	Open Episodes	#Episodes Due or Delinquent
01AG50	BAY AREA ART - MAINTENANCE	504	321
810850	SAACS - Methadone Maintenance	354	192
019650	LIFELINE TRMT SERVICES, INC	323	164
016750	H.A.A.R.T. - MNT Core	406	140
018150	Berkeley Addiction Tx - MNT	182	125
810450	H.A.A.R.T.-CV - MNT Core	264	109
01AG55	BAY AREA ART METHADONE PRIVATE	94	73
810455	H.A.A.R.T.-CV - MMV PRIVATE	86	49
017050	WOHC-Methadone	59	42
017960	SECOND CHANCE - TRI-CITY	176	40
000860	ST. MARY'S ODF COUNTY	58	39
018155	Berkeley Addiction Tx MNT Pri	35	35
810855	SAACS - METHADONE PRIVATE	56	35
012060	OPTIONS RECOVERY - ODF	129	33
002560	Second Chance - Hayward	272	32
017260	WOHC - CRC EAST	36	14
0109C6	Highland Hospital - Case Mgmt	30	13
018060	2ND CHNCE - PHX WNS CTR - ODFC	40	12
0179E0	SECOND CHANCE - TRI CITY ODF2	21	12
010965	Highland Hospital ODF Private	13	11
019655	LIFELINE METHADONE PRIVATE	10	10
811560	SENIOR SUPPORT TRI-VALLEY ODF	12	9
812160	AXIS COMMUNITY HEALTH INC-ODF	46	7
016755	H.A.A.R.T. MNT Private	31	7
813660	OPTIONS RECOVERY ODF-WO	56	6
0025E0	SECOND CHANCE - HAYWARD ODF2	18	5
017070	WOHC - OUTPATNT SRV - DCH CNITY	10	5
017056	WOHC-Methadone Parenting	5	5
013425	CURA - PRIVATE	4	4
010620	EBCRP - Residential County	19	4
0180E0	SECOND CHANCE - PHX-WNS ODF2	4	4
018567	VALLEY COMMUNITY HLTH CTR-ODFY	27	4
811654	BAART EHS-DETOX PRIVATE	10	3
810456	H.A.A.R.T.-CV - MNT Parenting	8	3
0120E0	OPTIONS RECOVERY - BERKLY ODF2	7	3
812210	WOHC ODF CRC WEST	30	3
010970	Highland Hospital Day	14	2
010960	Highland Hospital ODF	17	2
017912	2ND CHANCE - BASN	1	1
011667	ASIAN CMH ADOLESCENT PROGRAM	19	1
007020	BI BETT - ORCHID	10	1
00702W	BI-BETT RESIDENTIAL ORCHID WL	1	1
003060	Bi-Bett - EORC	42	1
017867	HORIZON - PROJECT EDEN YOUTH	34	1
073517	THUNDER ROAD RES TL YOUTH	7	1
073527	Thunder Road - Res County	2	1

Report PSP119B - Annual Review Update Due Caseload

ODF COUNTY (000123)

CalOMS State Reporting for SUD Providers requires an Annual Update for clients based on episode opening date. Clients on this report have either never had an Annual Update and have been opened in excess of one year or are within 60 days of the Annual Update due date or are delinquent (over 365 days) with or without an Annual Update. The report is sorted by Annual Days (descending) so providers can give their immediate attention to the delinquent records. CalOMS Reporting occurs monthly during the first week for the prior month data. Please make every effort to get your data in for the prior month before the 5th of the new month. Thank you, BHCS Administration.

Client #	Client Name	Opened	#Epi Days	Epi Staff	Last Svc	#Svc Days	Annual Date	#Annual Days	Status
012345678	XXXXXX	6-Dec-2005	3,528	PETER	10-Jul-2015	25		3,528	DELQ
087654321	XXXXXXXX	11-Jan-2007	3,127	PETER	23-Jul-2015	12		3,127	DELQ
012344444	XXXXXXXX	8-Oct-2008	2,491	PAUL	20-Jul-2015	15		2,491	DELQ
012355555	XXXXXX	1-Feb-2010	2,010	MARY	9-Apr-2015	117		2,010	DELQ
013455555	XXXXXXXX	1-Sep-2010	1,798	KIM	22-Jul-2015	13		1,798	DELQ
024567890	XXXXXXXXXX	1-Sep-2011	1,433	PETER	24-Jul-2015	11		1,433	DELQ
034567891	XXXXXX	8-Aug-2014	361	STEVEN	12-Jan-2015	204		361	Due

Total Episodes with Annual Update Due or Delinquent: 7

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