Recovery Support File Specification FY2021

Effective July 1, 2020

Division of Substance Abuse and Mental Health

Updated 2/26/2020

Change History

Date	Author	Version	Notes
2/26/2020	Justin Hyatt	2.2	Changed “Client ID” field title to “Provider Client ID.”
8/9/2019	Kimberlie Raymond	2.1	Added row 23
4/3/2019	Kimberlie Raymond	2.0	Added a nonbinary option to gender to identify client’s gender
7/12/2017	Kimberlie Raymond	1.0	Made changes to table 22; changed #1 to Drug Court Billing, made changes to #4; changed STR to Opioid Grant and Added #6.
3/28/2017	Ryan Carrier	.03	Added STR funding source
7/22/2016	Casey Loveland	.02	Final draft
6/5/2016	Casey Loveland	.01	Initial draft

Introduction

The purpose of this file is to allow providers to submit recovery support services to the division.

Client Name Validation Rules:

The file has fields for the following parts of a name:

- Last name
- First name
- Middle name

Naming Rules:

Names can be entered in upper case, lower case, or a mix.

Spaces: Allowed in first and middle names. NOT allowed in last names.
Example: Mc Donald should be entered as McDonald
De La Cruz should be entered as DeLaCruz
Example: Le Ann Mary Ann Mc Cartney
Can be entered as:
First: Le Ann
Middle: Mary Ann
Last: McCartney

Hyphens: Allowed in first, middle and last names. It is the only punctuation character allowed.
Examples:
(last name) Smith-Jones should be entered as Smith-Jones
(first name) Jo-Ann should be entered as Jo-Ann
(last name) O'Rilley should be entered as ORilley
(last name) St. James should be entered as StJames
(first name) D'Ann should be entered as DAnn or D Ann

Numeric characters: Not allowed in any name

First name is an initial: The initial can be entered in the first name field but no periods.
Middle name: If there is no middle name or it is not available, leave blank. Supply the full legal middle name where possible and the middle initial if that is all that is available. Periods are not allowed.
Second name: Enter the second name in the middle name field
Example: J. Edgar Hoover
First name: J (no period)
Middle name: Edgar
Last Name: Hoover

Enter legal names rather than nicknames
Example: "Bill" should be entered as William
"Bob" should be entered as Robert
"C.J." should be entered as Carlos as a first name and James as the middle name

Naming rules synopsis:

Character	Last Name	First and Middle Names
Alpha Characters	Allowed	Allowed
Hyphen	Allowed	Allowed
Spaces	Not Allowed	Allowed
Apostrophe	Not allowed	Not allowed
Numeric Characters	Not allowed	Not allowed

Submitting for Multiple Providers

Recovery support files can contain data for more than one provider per file. SAMHIS backend processing engines associate data in the file to the provider ID specified on every row in the file.

Processing Rules

A change that will affect all types of rows is a new validation that will only allow services that are contained within the open billing fiscal year. Prior year records or records submitted early will be rejected. The validation rule for records submitted early will be effective every month and not just the last month of the fiscal year.

Key Fields

When processing data the following fields are used to match new data with previously loaded data.

- Provider Id
- Record No

The only way to change a key field is to send a Delete record and then an Add record.

Add

The only change to the processing of Add rows is the previously mentioned validation where service date must be contained within the open billing fiscal year.

Delete

When a Recovery Support Delete record is submitted it must match an existing row of data in SAMHIS. If a matching record is not found the row will error out and the only course of action will be to cancel the row and resubmit.
For Delete records that match existing data the previously submitted data will not be deleted, but instead a reversing transaction will be inserted into the database for the open billing month.

Change

When a Change record is submitted, it must match an existing row of data in SAMHIS. If a matching record is not found the row will error out and the only course of action will be to cancel the row and resubmit the data.
Change records will only process changes to the following fields:
(All other field in the record will be ignored, but must be present in the file for validation purposes.)
Key fields cannot be modified.

- client id
- first name
- last name
- middle name
- date of birth
- gender
- veteran status*
- ssn
- race

- ethnicity
- living arrangement*
- employment*
- enrolled in education*
- recovery capital score*

** These fields should only be changed if the data was wrong for the given date of service. If the data is updated after the date of service, old records should reflect the old value and new records when submitted should reflect the new value(s). If it is found the old value was incorrect for the give service date then update the records.*

CSV File Generation Guidelines

1. All files should be submitted without a header row.
2. It is recommended that fields **NOT** contain extra spaces for padding. For example, if a field allows 11 digits but the code values only use 3 digits then 3 digits is an acceptable width for the field. Adding the spaces only increases the size of the file and slows down uploading and processing of files.
3. Non-required fields must either be blank or contain a valid value.
4. Commas are not allowed within the data in any field. (Commas are column delimiters.)
5. Do not use quotes in any fields.
6. Do not insert blank lines between rows.

Column Specs

The following table lists the fields and all rules associated with those fields.

NOTE: No blanks fields are allowed in the file except where specified in the note field.

Field #	Field name	Codes/Allowed Values	Format	Notes
1	Unique Recovery Support Event ID	alphanumeric values. Must uniquely identity the service for the client and provider	string(50)	Key field - Must uniquely identify the service for the provider across all clients at the provider.
2	System Transaction Type Code	A - Add D - Delete C - Change	string(1)	Add is for adding new rows. Delete is for removing rows from SAMHIS. Submit a delete row in conjunction with an Add row to fix a key field that has changed. Change is for updating an existing row with new updated information for an existing admission. Update cannot be used to fix a key field change. For Add and Change system transaction type codes all fields must be supplied with valid data in each field. Only difference will be that a change record will error out if an existing admission record is not already found. Change records should be sent anytime one of the data elements in the spec are modified or when needing to change a baseline (T1 or T2) or discharge value for a NOM data element. For Delete records all the key fields must be supplied. The rest of the fields can be filled-in or left blank. Remember that every row must have the correct number of commas.
3	Provider Client ID	alphanumeric values. Unique client ID for the provider	string(15)	An identifier that is from 1 to 15 alphanumeric characters and at a minimum is unique within the provider. The identifier: 1. Must NOT be reassigned to another client, 2. Can be meaningless, and 3. Must ensure confidentiality of client records - must not identify the client 4. An individual cannot have more than one ID at a given provider
4	Provider ID	unique value for provider	string(40)	If you are unsure of what value to provide here contact a SAMHIS administrator.
5	SAMHIS Client Id	ID provided by the Division	number(10)	May be left blank. Should not have leading zeros.
6	First Name Client full legal first name		string(25)	The first name of the client. Please limit the first name to 25 letters. Any names exceeding 25 letters will be truncated to fit in the field.
7	Last Name Client full legal last name		string(30)	The last name of the client. Please limit the last name to 30 letters. Any names exceeding 30 letters will be truncated to fit.
8	Middle Name Client full legal middle name	Can be left blank	string(25)	Middle name of the client. If there is no middle name or it is not available, leave blank. Supply the full legal middle name where possible and the middle initial if that is all that is available. Periods are not allowed. May be left blank.
9	Date of Birth	Date no time mm/dd/yyyy	string(10)	
10	Gender	1 = Male 2 = Female 3=Nonbinary	number(1)	Identifies client's gender

11	Veteran Status	Y = Yes N = No 97 = Unknown	string(2)	This required variable is to be updated at the 6-month case review. (Have you ever or are you currently serving in the military?)
12	Social Security Number	000-00-0000 = Unknown 999-99-9999 = None	string(11) nnn-nn-nnnn	The client's social security number. SSA modified the SSN assignment rules June 25, 2011 and SSNs are assigned randomly using all available numbers except those starting 000, 666, 900-999. We will also do not allow 123-45-6789 or 099-99-9999. Valid SSNs cannot be utilized by more than 1 client.
13	Race	1 = Alaskan Native 2 = American Indian 3 = Asian 4 = Native Hawaiian or Other Pacific Islander 5 = Black/African American 6 = White 7 = Unknown 8 = Two or more races 0 = Other single race	number(2)	Indicates the client's race. If you don't distinguish between American Indian and Alaska Native, code both as American Indian. Clients of Hispanic ethnicity are typically coded as "White" in the racial category. Pacific Islander Alaska Native: (Aleut, Eskimo, Indian) Origins in any of the original people of Alaska. American Indian: (Other than Alaska Native) Origins in any of the original people of North American and South America (including Central America) and who maintain cultural identification through tribal affiliation or community attachment. Asian: Origins in any of the original people of the Far East, the Indian subcontinent, Southeast Asia, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Philippine Islands, Thailand, Vietnam. Native Hawaiian or Other Pacific Islander: Origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. Black or African American: Origins in any of the black racial groups of Africa. White: Origins in any of the original people of Europe, North Africa or the Middle East. Two or more races: Use this code when your system collects multiple races and does not have a way to designate a primary race. Other single race: Use this category for instance in which the client is not classified in any other category or whose origin group, because of area custom is regarded as a racial class distinct from the above categories. (DO NOT use this category for clients indicating multiple races.)
14	Ethnicity	1=Puerto Rican 2=Mexican 3=Cuban 4=Other 5=Not of Hispanic Origin 7=Unknown	number(1)	Identifies the specific Hispanic Origin. Puerto Rican: Of Puerto Rican origin regardless of race. Mexican: Of Mexican origin regardless of race. Cuban: Of Cuban origin regardless of race. Other Specific Hispanic: Of known or unknown Central or South American or any other Spanish cultural origin (including Spain), other than Puerto Rican, Mexican or Cuban, regardless of race.

15	Living Arrangement	1=On the street or in a homeless number 2=Private residence - Independent 3=Private residence - Dependent 4=Jail or correctional facility 5=Institutional setting (NH, IMD, psych. IP, VA, state hospital) 6=24-hour residential care 7=Adult or child foster home	number(1)	Private Residence - Independent = Individual lives alone or with others without supervision. Private Residence - Dependent = Individual is living with parents, relatives, or guardians. Data is to be verified by treatment staff.
16	Employment	1=Employed Full Time 2=Employed Part time 3=Unemployed 4=Homemaker 5=Student 6=Retired 7=Disabled 10 = Ages 0-5 20=Other "Not In the Labor Force" 97=Unknown	number(2)	Identifies the client's current employment status. Employed Full Time: Working 35 hours or more each week, including members of the uniformed service. Employed Part Time: Working fewer than 35 hours each week. Unemployed: Looking for work during the past 30 days or on layoff from a job. Other "Not in the Labor Force": Not looking for work during the past 30 days. *If the client is employed and going to school, the employment code takes priority over the "Student" code. Field 50 indicates whether the client is enrolled in an education program. Data is to be verified by treatment staff.
17	Enrolled in Education	1=Yes 2=No 97=Unknown	number(2)	
18	Recovery Capital Score	0-100 = Score 997=Unknown 998=Not Collected	number(3)	Scale being developed by ROSC committee
19	Service Code	(See Recovery Support codes on website)	string(10)	For a definition of each service refer to the ATR manual. No space padding is necessary. If you do pad with spaces then right pad.
20	Service Date	Date no time mm/dd/yyyy	string(10)	Date service was provided
21	Units	Number of Hours, days, etc. (see notes)	string(7) NNN.NN	May be left blank depending on service code field.
22	Contract	1 = Drug Court Billable 2 = PATR 3 = General 4 = Opioid Grant 5 = JRI 6 = Drug Court 7 = SLCO MAT Pilot 8 = SLC DWS RS Housing	number(2)	Drug Court Billable (1) should only be used for direct billing through the SAMHIS system and not KISSFLOW.

23	DLA 20 Overall Score	0-100 Submit score can be 0-100 with an optional two trailing digits after decimal. (ie. XX, XXX, Numeric (5 with additional decimal)		DLA Overall Score Domain. Submit score 1-100. Null is allowed.