

Required Encounter Attributes by Service and Event Type

Required Fields for Authorization

The CDS system requires certain, basic information in order to perform authorizations for services to be performed. This authorization occurs prior to admission and requires that the following information, at a minimum, be available at that time.

Encounter Identifying Information

- First and Last Name
- Date of Birth
- Service to be Performed
- Funding Region
- Provider

Clinical Information

- Axis1_1
 - Must be a valid ICD-10 diagnosis code for MH or SUD.
 - Dual Disorder services required at least one code of each type.
- Diagnosis12MonthDuration_1 - *required whenever Axis1 is required*
- DiagnosisFirstTreatment_1 - *required whenever Axis1 is required*

Substance Use Information

Substance use information is required for SUD and Dual Disorder services. All of the fields listed are required for each substance used. The format supports up to 3 substances.

- SubstanceUsedID_N (where N is the field grouping 1-3)
- SubstanceAgeOfFirstUse_N
- SubstanceFrequencyOfUseAdmitID_N
- SubstanceVolumeOfUse_N
- SubstanceRouteOfUseID_N

Some registered services do not require complete clinical information. See the listings below for specific requirements for each service.

Required Fields by Service and Event

24 Hour Crisis Line - MH				
Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationCompleteAndAccurate	X			
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
City	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

24 Hour Crisis Line - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationCompleteAndAccurate	X			
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
City	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
SchoolAbsencesID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Acute Inpatient Hospitalization - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
MMFirstAvailableID				X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Ambulatory Detox - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Assertive Community Treatment - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Assessment - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Assessment - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Client Assistance Program - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LegalStatusID	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Client Assistance Program - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
PhoneTypeID				X
PregnancyStatusID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Community Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Community Support - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Coordinated Specialty Care - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

CPC Services - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Crisis Assessment - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Crisis Assessment - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Crisis Inpatient Youth - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Crisis Psychotherapy - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X			X
LegalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State	X			X
ZipCode				X

Crisis Psychotherapy - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X			X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PrimaryFundingSourceID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State	X			X
ZipCode				X

Crisis Response - MH

Column Name	Admit	CCR	CSR	Discharge
AcceptedFollowupServicesID *				X
Address1	X			X
AttestationDiagnosis	X	X	X	
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	
AttestationLivingArrangements	X	X	X	X
City	X			X
CountyOfAdmissionID	X			X
CrisisDangerousnessID *				X
CrisisDispositionID				X
CrisisLocationID	X			X
CrisisSituationID *	X			X
DestinationAfterDischargeID				X
EmploymentStatusID				X
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
FollowUpServiceReferred				X
FollowupWithin72HoursID				X
HadTrauma				X
HasMilitaryService	X			X
IndividualDivertedFromID *				X
InitialResponseStartTime	X			
InitialResponseStopTime	X			
InitialResponseTimeEngagedFacetoFace	X			
InitialResponseTravelTime	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

InsuranceStatusID	X			X
IsLawEnforcementRequested				X
IsResolvedInInitialCRContact				X
IsSubstantialRiskForHarm				X
IsVeteran	X			X
LastName	X	X	X	X
LivingArrangementsID				X
PhoneTypeID				X
ReferralSourceID	X			
State				X
StatusCheckID *				X
TypeOfAssessmentID	X			X
WereServiceBarriersIdentified				X
ZipCode	X			X

Crisis Response - SUD

Column Name	Admit	CCR	CSR	Discharge
AcceptedFollowupServicesID *				X
Address1	X			X
AttestationDiagnosis	X	X	X	
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	
AttestationLivingArrangements	X	X	X	X
City	X			X
CountyOfAdmissionID	X			X
CrisisDangerousnessID *				X
CrisisDispositionID				X
CrisisLocationID	X			X
CrisisSituationID *	X			X
DestinationAfterDischargeID				X
EmploymentStatusID				X
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
FollowUpServiceReferred				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FollowupWithin72HoursID				X
HadTrauma				X
HasMilitaryService	X			X
IndividualDivertedFromID *				X
InitialResponseStartTime	X			
InitialResponseStopTime	X			
InitialResponseTimeEngagedFacetoFace	X			
InitialResponseTravelTime	X			
InsuranceStatusID	X			X
IsLawEnforcementRequested				X
IsResolvedInInitialCRContact				X
IsSubstantialRiskForHarm				X
IsVeteran	X			X
LastName	X	X	X	X
LivingArrangementsID				X
PhoneTypeID				X
ReferralSourceID	X			
State				X
StatusCheckID *				X
TypeOfAssessmentID	X			X
WereServiceBarriersIdentified				X
ZipCode	X			X

Crisis Stabilization - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Crisis Stabilization - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Crisis Stabilization-5 - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
ZipCode				X

Crisis Stabilization-5 - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

HasMilitaryService	X			X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
ZipCode				X

CrisisResponseinCCBHC - MH

Column Name	Admit	CCR	CSR	Discharge
AcceptedFollowupServicesID *				X
Address1	X			X
AttestationDiagnosis	X	X	X	
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	
AttestationLivingArrangements	X	X	X	X
City	X			X
CountyOfAdmissionID	X			X
CrisisDangerousnessID *				X
CrisisDispositionID				X
CrisisLocationID	X			X
CrisisSituationID *	X			X
DestinationAfterDischargeID				X
EmploymentStatusID				X
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
FollowUpServiceReferred				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FollowupWithin72HoursID				X
HadTrauma				X
HasMilitaryService	X			X
IndividualDivertedFromID *				X
InitialResponseStartTime	X			
InitialResponseStopTime	X			
InitialResponseTimeEngagedFacetoFace	X			
InitialResponseTravelTime	X			
InsuranceStatusID	X			X
IsLawEnforcementRequested				X
IsResolvedInInitialCRContact				X
IsSubstantialRiskForHarm				X
IsVeteran	X			X
LastName	X	X	X	X
LivingArrangementsID				X
PhoneTypeID				X
ReferralSourceID	X			
State				X
StatusCheckID *				X
TypeOfAssessmentID	X			X
WereServiceBarriersIdentified				X
ZipCode	X			X

CrisisResponseinCCBHC - SUD

Column Name	Admit	CCR	CSR	Discharge
AcceptedFollowupServicesID *				X
Address1	X			X
AttestationDiagnosis	X	X	X	
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	
AttestationLivingArrangements	X	X	X	X
City	X			X
CountyOfAdmissionID	X			X
CrisisDangerousnessID *				X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

CrisisDispositionID				X
CrisisLocationID	X			X
CrisisSituationID *	X			X
DestinationAfterDischargeID				X
EmploymentStatusID				X
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
FollowUpServiceReferred				X
FollowupWithin72HoursID				X
HadTrauma				X
HasMilitaryService	X			X
IndividualDivertedFromID *				X
InitialResponseStartTime	X			
InitialResponseStopTime	X			
InitialResponseTimeEngagedFaceToFace	X			
InitialResponseTravelTime	X			
InsuranceStatusID	X			X
IsLawEnforcementRequested				X
IsResolvedInInitialCRContact				X
IsSubstantialRiskForHarm				X
IsVeteran	X			X
LastName	X	X	X	X
LivingArrangementsID				X
PhoneTypeID				X
ReferralSourceID	X			
State				X
StatusCheckID *				X
TypeOfAssessmentID	X			X
WereServiceBarriersIdentified				X
ZipCode	X			X

CSCinCCBHC - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Cultural Activities - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X			X
AttestationEmploymentStatus	X			X
AttestationLivingArrangements	X			X
AxisI *	X			
BirthDate	X			X
City	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X			X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
PhoneTypeID	X			X
PrimaryFundingSourceID	X			X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

State	X			X
ZipCode	X			X

Cultural Activities - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X			X
AttestationEmploymentStatus	X			X
AttestationLivingArrangements	X			X
AxisI *	X			
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X			X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
PhoneTypeID	X			X
PrimaryFundingSourceID	X			X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State	X			X
SubstanceUsedID *	X			X
ZipCode	X			X

Day Rehabilitation - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Day Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ZipCode				X
Day Treatment - MH				
Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Dual Disorder Residential - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Dual Disorder Residential - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Emergency Community Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Emergency Community Support - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X	X		X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X		X
City	X	X		X
CountyOfAdmissionID	X			
CountyOfResidenceID	X	X		X
DestinationAfterDischargeID				X
EthnicityID	X	X		
FamilyHasMilitaryService	X	X		X
FirstName	X	X		X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X	X		X
InsuranceStatusID	X	X		X
IsVeteran	X	X		X
LastName	X	X		X
LegalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID		X		X
RaceID *	X	X		
ReferralSourceID	X			
SexID	X			
State	X	X		X
SubstanceUsedID *	X	X		
WaitlistConfirmationDate	X			
ZipCode		X		X

Emergency Protective Custody - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AdmissionReasonEPCID	X			
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Emergency Psychiatric Observation - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

ERCS Transition - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ZipCode				X
Family Navigator - MH				
Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
RaceID *	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Family Navigator - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
RaceID *	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
State				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

WaitlistConfirmationDate	X			
ZipCode				X

Family Peer Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
RaceID *	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Family Peer Support - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
Diagnosis12MonthDuration *	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
RaceID *	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

State				X
WaitlistConfirmationDate	X			
ZipCode				X

Family Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationEmploymentStatus	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
NumArrestsPast30Days	X			X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			X
ReferralSourceID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SexID	X			
State				X
ZipCode				X

Halfway House - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Homeless Transition - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Hospital Diversion Less than 24 hours - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Hospital Diversion Over 24 hours - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DestinationAfterDischargeID				X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Inpatient Post Commitment Treatment Days - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *				X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Inpatient Post Commitment Treatment Days - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *				X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Intensive Case Management - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Intensive Case Management - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Intensive Community Services - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Intensive Community Services - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Intensive Outpatient - Matrix - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Intensive Outpatient / Adult - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Intensive Outpatient / Adult - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Intensive Outpatient / Youth - MH				
Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Intensive Outpatient / Youth - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Intermediate Residential - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X		X	X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X		X	X
BirthDate	X		X	X
City	X		X	X
CountyOfAdmissionID	X			
CountyOfResidenceID	X		X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X		X	X
DiagnosisCommunityDeficit	X		X	X
DiagnosisDailyLivingDeficit	X		X	X
DiagnosisEducationDeficit	X		X	X
DiagnosisFirstTreatment *	X		X	X
DiagnosisMoodDeficit	X		X	X
DiagnosisPersonalCareDeficit	X		X	X
DiagnosisPhysicalDeficit	X		X	X
DiagnosisPsychStateDeficit	X		X	X
DiagnosisRelationshipDeficit	X		X	X
DiagnosisSocialDeficit	X		X	X
EducationLevelID	X			X
EmploymentStatusID	X		X	X
EthnicityID	X		X	X
FamilyHasMilitaryService	X		X	X
FirstName	X		X	X
HadTrauma	X		X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X		X	X
InsuranceStatusID	X		X	X
IsRelativeOrSigOtherPrimaryClient	X		X	X
IsVeteran	X		X	X
LanguagePreferredID	X			
LastName	X		X	X
LegalStatusID	X			X
LivingArrangementsID	X		X	X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID	X			X
PhysicalHealthPoorDaysIn30	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X		X	
ReferralSourceID	X			
SexID	X		X	X
SocialSupportsID	X			X
SSIEligibilityID	X			X
State	X		X	X
WaitlistConfirmationDate	X			
ZipCode	X		X	X

Intermediate Residential - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Language - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X			X
AttestationEmploymentStatus	X			X
AttestationLivingArrangements	X			X
AxisI *	X			
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FirstName	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X			X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
PhoneTypeID	X			X
PrimaryFundingSourceID	X			X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State	X			X
ZipCode	X			X

Language - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X			X
AttestationEmploymentStatus	X			X
AttestationLivingArrangements	X			X
AxisI *	X			
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X			X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
PhoneTypeID	X			X
PrimaryFundingSourceID	X			X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State	X			X
SubstanceUsedID *	X			X
ZipCode	X			X

Medically Monitored Withdrawal Management - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days				X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID				X
LivingArrangementsID	X			X
NumArrestsPast30Days				X
PhoneTypeID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
ZipCode				X

Medication Management - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Medication Management - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Mental Health Respite - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Mental Health Respite - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Multisystemic Therapy - MH				
Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Navigator - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma				X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
NumArrestsPast30Days				X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State				X
ZipCode				X

Navigator - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma				X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
NumArrestsPast30Days				X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State				X
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Opioid Treatment Program (OTP) - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Outpatient Dual Disorder - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Outpatient Dual Disorder - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Outpatient Psychotherapy - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Outpatient Psychotherapy - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ZipCode				X
PACT - MH				
Column Name	Admit	CCR	CSR	Discharge
Address1				X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X	X	X	X
MaritalStatusID	X	X	X	X
NumDependents	X			
PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
SocialSupportsID	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SSIEligibilityID	X			
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Peer Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X	X	X	X
MaritalStatusID	X	X	X	X
PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SexID	X			
SocialSupportsID	X	X	X	X
SSIEligibilityID	X			
State	X			X
WaitlistConfirmationDate	X			
ZipCode	X			X

Peer Support - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X	X	X	X
MaritalStatusID	X	X	X	X
PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ReferralSourceID	X			
SexID	X			
SocialSupportsID	X	X	X	X
SSIEligibilityID	X			
State	X			X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode	X			X

Pilot Recovery Wellness Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X	X		X
AnnualGrossIncome	X			
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X		X
City	X	X		X
CountyOfAdmissionID	X			
CountyOfResidenceID	X	X		X
EthnicityID	X	X		
FamilyHasMilitaryService	X	X		X
FirstName	X	X		X
HasMilitaryService	X	X		X
InsuranceStatusID	X	X		X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X	X		X
LanguagePreferredID	X			
LastName	X	X		X
LivingArrangementsID	X	X		X
MaritalStatusID	X			X
NumDependents	X			
PhoneTypeID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X	X		
ReferralSourceID	X			
SexID	X	X		
SocialSupportsID	X			X
SSIEligibilityID	X			X
State	X	X		X
ZipCode		X		X

Pilot Recovery Wellness Support - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X	X		X
AnnualGrossIncome	X			
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X		X
City	X	X		X
CountyOfAdmissionID	X			
CountyOfResidenceID	X	X		X
EthnicityID	X	X		
FamilyHasMilitaryService	X	X		X
FirstName	X	X		X
HasMilitaryService	X	X		X
InsuranceStatusID	X	X		X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X	X		X
LanguagePreferredID	X			
LastName	X	X		X
LivingArrangementsID	X	X		X
MaritalStatusID	X			X
NumDependents	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X	X		
ReferralSourceID	X			
SexID	X	X		
SocialSupportsID	X			X
SSIEligibilityID	X			X
State	X	X		X
SubstanceUsedID *	X	X		X
ZipCode		X		X

Professional Partner - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
RaceID *	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Psych Res Treat (PRTF) - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationEmploymentStatus	X	X	X	X
AttestationFileUpload	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Psychiatric Residential Rehabilitation - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Psychological Testing - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Recovery Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X			X
MaritalStatusID	X			X
NumDependents	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Recovery Support - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LivingArrangementsID	X			X
MaritalStatusID	X			X
NumDependents	X			
PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Secure Residential - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Secure Residential R&B - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X	X	X	X
MaritalStatusID	X	X	X	X
NumDependents	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
SocialSupportsID	X	X	X	X
SSIEligibilityID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

SEESinCCBHC - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
Employer	X	X		
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
HourlyWage	X			
HourlyWageCurrent		X		
HoursPerWeek	X			
HoursPerWeekCurrent		X		
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

RaceID *	X			
ReferralSourceID	X			
ReferredToVRDate	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSecurityNumber	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
ZipCode				X

SEESinCCBHC - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
Employer	X	X		
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
HourlyWage	X			
HourlyWageCurrent		X		
HoursPerWeek	X			
HoursPerWeekCurrent		X		
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ReferralSourceID	X			
ReferredToVRDate	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSecurityNumber	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
ZipCode				X

Short Term Residential - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

SOAR - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X	X	X	X
MaritalStatusID	X	X	X	X
NumDependents	X			
PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SexID	X			
SocialSupportsID	X	X	X	X
SSIEligibilityID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

SOAR - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X	X	X	X
MaritalStatusID	X	X	X	X
NumDependents	X			
PhoneTypeID				X
PrimaryFundingSourceID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
SocialSupportsID	X	X	X	X
SSIEligibilityID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Social Detoxification - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Sub-acute Inpatient Hospitalization - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
MMFirstAvailableID				X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

WaitlistConfirmationDate	X			
ZipCode				X

Supported Education - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X			X
MaritalStatusID	X			X
NumDependents	X			
PhoneTypeID				X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Supported Employment - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Supported Employment - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Supported Employment Extended Services - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X	X		X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
Employer	X	X		
EmploymentStatusID	X	X		X
EthnicityID	X			
FamilyHasMilitaryService	X			
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			
HourlyWage	X			
HourlyWageCurrent		X		
HoursPerWeek	X			
HoursPerWeekCurrent		X		
ImpactOnSchoolAttendanceID				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID	X			X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
ReferredToVRDate	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSecurityNumber	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State	X			X
ZipCode	X			X

Supported Employment Extended Services - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X	X		X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
Employer	X	X		
EmploymentStatusID	X	X		X
EthnicityID	X			
FamilyHasMilitaryService	X			
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			
HourlyWage	X			
HourlyWageCurrent		X		
HoursPerWeek	X			
HoursPerWeekCurrent		X		
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID	X			X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
ReferredToVRDate	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSecurityNumber	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State	X			X
ZipCode	X			X

Supported Housing - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
DeterminationApprovalDate	X			
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
HousingPriorityID	X			
ImpactOnSchoolAttendanceID				X
InitialSection8Date	X			
InitialSection8StatusID	X			
IsUSCitizen	X			
IsVeteran	X			X
LastName	X	X	X	X
NumArrestsPast30Days	X			X
NumDependents	X			
NumIndividualsInHousehold	X			
PhoneTypeID				X
PriorityPopulationID	X			
RaceID *	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SchoolAbsencesID	X			X
Section8StatusID	X			
Section8UpdatedDate		X		
SexID	X			
SSIEligibilityID	X			X
State				X
ZipCode				X

Supported Housing - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
DeterminationApprovalDate	X			
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
HousingPriorityID	X			
ImpactOnSchoolAttendanceID				X
InitialSection8Date	X			
InitialSection8StatusID	X			
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
NumIndividualsInHousehold	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
Section8StatusID	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Section8UpdatedDate		X		
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
ZipCode				X

Supportive Living - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Supportive Living - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Sweat Lodge - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X			X
AttestationEmploymentStatus	X			X
AttestationLivingArrangements	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AxisI *	X			
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X			X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
PhoneTypeID	X			X
PrimaryFundingSourceID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State	X			X
ZipCode	X			X

Sweat Lodge - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X			X
AttestationEmploymentStatus	X			X
AttestationLivingArrangements	X			X
AxisI *	X			
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FirstName	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X			X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
PhoneTypeID	X			X
PrimaryFundingSourceID	X			X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State	X			X
SubstanceUsedID *	X			X
ZipCode	X			X

Talking Circle - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X			X
AttestationEmploymentStatus	X			X
AttestationLivingArrangements	X			X
AxisI *	X			
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X			X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
PhoneTypeID	X			X
PrimaryFundingSourceID	X			X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State	X			X
ZipCode	X			X

Talking Circle - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AnnualGrossIncome	X			X
AttestationDiagnosis	X			X
AttestationEmploymentStatus	X			X
AttestationLivingArrangements	X			X
AxisI *	X			
BirthDate	X			X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			X
FamilyHasMilitaryService	X			X
FirstName	X			X
HasMilitaryService	X			X
InsuranceStatusID	X			X
IsUSCitizen	X			X
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X			X
LegalStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

LivingArrangementsID	X			X
MaritalStatusID	X			X
PhoneTypeID	X			X
PrimaryFundingSourceID	X			X
RaceID *	X			X
ReferralSourceID	X			
SexID	X			X
State	X			X
SubstanceUsedID *	X			X
ZipCode	X			X

Therapeutic Community - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

State				X
SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

Therapeutic Consultation - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Therapeutic Group Home - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Tribal Community Support - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Tribal Community Support - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SexID	X			
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Urgent Medication Management - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *				X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Urgent Outpatient Psychotherapy - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *				X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsVeteran	X			X
LastName	X	X	X	X
LegalStatusID	X			X
NumArrestsPast30Days	X			X
PhoneTypeID				X
PregnancyStatusID	X			
PrimaryFundingSourceID				X
RaceID *	X			
ReferralSourceID	X			
SexID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Warm Hand Off - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Warm Hand Off - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Youth Assessment - MH

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Youth Assessment - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1	X			X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
AxisI *	X			X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
DestinationAfterDischargeID				X
Diagnosis12MonthDuration *	X			X
DiagnosisCommunityDeficit	X			X
DiagnosisDailyLivingDeficit	X			X
DiagnosisEducationDeficit	X			X
DiagnosisFirstTreatment *	X			X
DiagnosisMoodDeficit	X			X
DiagnosisPersonalCareDeficit	X			X
DiagnosisPhysicalDeficit	X			X
DiagnosisPsychStateDeficit	X			X
DiagnosisRelationshipDeficit	X			X
DiagnosisSocialDeficit	X			X
EducationLevelID	X			X
EmploymentStatusID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

FirstName	X	X	X	X
HadTrauma	X			X
HasAttemptedSuicide30Days	X			X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LegalStatusID	X			X
LivingArrangementsID	X			X
MaritalStatusID	X			X
MentalHealthPoorDaysIn30	X			X
NumArrestsPast30Days	X			X
NumDependents	X			
PhoneTypeID				X
PhysicalHealthPoorDaysIn30	X			X
PregnancyStatusID	X			X
PrimaryFundingSourceID	X			
PriorityPopulationID	X			
RaceID *	X			
ReferralSourceID	X			
SchoolAbsencesID	X			X
SexID	X			
SocialSupportsID	X			X
SSIEligibilityID	X			X
State				X
WaitlistConfirmationDate	X			
ZipCode				X

Youth Transition Services - MH

Column Name	Admit	CCR	CSR	Discharge
Address1				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X	X	X	X
MaritalStatusID	X	X	X	X
NumDependents	X			
PhoneTypeID				X
PrimaryFundingSourceID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
SocialSupportsID	X	X	X	X
SSIEligibilityID	X			
State				X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.

NEBRASKA DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Behavioral Health - Centralized Data System



Required Encounter Attributes by Service and Event Type

Youth Transition Services - SUD

Column Name	Admit	CCR	CSR	Discharge
Address1				X
AnnualGrossIncome	X			X
AttestationDiagnosis	X	X	X	X
AttestationEmploymentStatus	X	X	X	X
AttestationFunctionalDeficits	X	X	X	X
AttestationLivingArrangements	X	X	X	X
BirthDate	X	X	X	X
City	X			X
CountyOfAdmissionID	X			
CountyOfResidenceID	X			X
EthnicityID	X			
FamilyHasMilitaryService	X			X
FirstName	X	X	X	X
HasMilitaryService	X			X
ImpactOnSchoolAttendanceID				X
InsuranceStatusID	X			X
IsRelativeOrSigOtherPrimaryClient	X			
IsVeteran	X			X
LanguagePreferredID	X			
LastName	X	X	X	X
LivingArrangementsID	X	X	X	X
MaritalStatusID	X	X	X	X
NumDependents	X			
PhoneTypeID				X
PrimaryFundingSourceID	X			
RaceID *	X			
ReferralSourceID	X			
SexID	X			
SocialSupportsID	X	X	X	X
SSIEligibilityID	X			
State				X

* These attributes support multiple values. Typically, only the first value is required.

Required Encounter Attributes by Service and Event Type

SubstanceUsedID *	X	X	X	X
WaitlistConfirmationDate	X			
ZipCode				X

* These attributes support multiple values. Typically, only the first value is required.