



**LAC**  
**DMH**  
LOS ANGELES COUNTY  
DEPARTMENT OF  
**MENTAL HEALTH**

## **Legal Entity Extract Files**

Reporting Repository Tables – Data Dictionaries V.2.1

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# Table List

Table	Description
<a href="#">rpt_BillingProvider</a>	Stores billing providers
<a href="#">rpt_Client</a>	Stores each client.
<a href="#">rpt_ClientBenefit</a>	Stores client benefits – does not include Medi-Cal benefits.
<a href="#">rpt_CodeMaster</a>	Stores various code values and their internal ids
<a href="#">rpt_CommunityService</a>	Stores a record for each community service
<a href="#">Rpt_CommunityServiceStaff</a>	Stores a record for each additional staff for a community service
<a href="#">rpt_CrosswalkProcedureCode</a>	Stores crosswalk types for each procedure code
<a href="#">rpt_DeletedService</a>	Stores a record for each instance of a service that has been deleted
<a href="#">rpt_DMHClaim</a>	Stores a record for each instance of a service that has been submitted for claiming. Does not contain services that have been deleted, provider is retired or due to errors basic data cannot be populated.
<a href="#">rpt_DMHClaimPlan</a>	Stores the plans for each instance of a service. Does not include plans for services that are in 'Submitted' status.
<a href="#">rpt_Episode</a>	Store in/outpatient and day-treatment episodes for an enrolled client.
<a href="#">rpt_GroupSessionStaff</a>	Stores a record for each additional staff for a group session
<a href="#">rpt_LegalEntity</a>	Stores legal entity providers
<a href="#">rpt_MediCalEligibility</a>	Contains Client Medi-Cal eligibility request and response information
<a href="#">rpt_PayerClaim</a>	Stored information for the external payers of an inbound claim where an outbound claim has been sent to the external payer by the IS
<a href="#">rpt_ProcedureCode</a>	Stores each procedure code allowable by DMH.
<a href="#">rpt_ProviderAltID</a>	Stores alternate identification values for a provider
<a href="#">rpt_ProviderContractedPlan</a>	Stores the plans that a provider is assigned.
<a href="#">rpt_ProviderLicense</a>	Stores the taxonomy and corresponding license assigned to a provider
<a href="#">rpt_RenderingProvider</a>	Stores rendering providers
<a href="#">rpt_RuleFailClaims</a>	Stores claims that failed certain IS business rules. These claims include those that due to lack of sufficient data cannot be stored in rpt_DMHClaim.
<a href="#">rpt_Service</a>	Contains a record for each instance of a service that has been submitted or not submitted for claiming. Does not contain services that are voided, deleted or where the provider is retired.
<a href="#">rpt_ServiceLocation</a>	Stores service location providers
<a href="#">rpt_ServiceStaff</a>	Stored a record for each non-deleted additional staff recorded on an instance of a service. This does not contain the main rendering provider that the instance of the service is recorded against.
<a href="#">rpt_PayerAdjustment</a>	Contains external payer adjustment and remark codes returned in their 835s for an outbound claim. There may be multiple adjustment and remark codes returned in an 835
<a href="#">rpt_ServiceEBP</a>	Contains non-deleted Evidence Based Practice information for an instance of a service. There may be many EBP records per service instance

# rpt\_BillingProvider

<b>Description</b>	Contains records for providers set as Billing Providers Locations in the IS. Only the non-deleted records that have an association record to a legal entity provider are included.
<b>Primary IS Repository Source Tables</b>	hrp_Provider – where BillingFlag = 'Y' & PayToFlag = 'N' hrp_Contact hrp_ProviderInstance
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository (First connection) Transform Data Task: rpt_BillingProvider

Column Name	Type	Reqd	Foreign Key	Description
providerID	Int	Y		ID Internal ID for the legal entity provider
ProviderName	Vchar(62)	Y		Name of the Billing Provider Format: If Billing has a first name format is: 'Last Name, First Name' If Billing does not have a first name format is: '4 Digit Provider Number, Last Name'
ProviderNameLast	Vchar(35)	Y		Last name of Billing Provider
ProviderNameFirst	Vchar(25)	N		First name of Billing Provider
ProviderType	Vchar(30)	N		Organization type of the Billing Provider Valid Values: FFS 1 FFS 2 INDIVIDUAL FFS 2 GROUP FFS 2 ORG LP CONTRACT LP DIRECTLY OP
ServiceArea	Int	N		Service area that provider is delivering services in
OPCode	Vchar(10)	N		Identifies agency type of provider.
Bureau	Vchar(20)	N		Identifies bureau within DMH that provider belongs to
MentalHealthDist	Vchar(20)	N		Identifies the mental health district of the provider
CensusTract	Vchar(15)	N		Identifies the census tract of the provider.
SupervisoryDist	Vchar(15)	N		Identifies the supervisory district of the provider.
Medi-CalCeritficationStart	DateTime	N		Start date that the provider was certified by Medi-Cal
Medi-CalCeritficationEnd	DateTlme	N		End date that the provider is certified by Medi-Cal

Column Name	Type	Reqd	Foreign Key	Description
ProviderPIN	Vchar(30)	N		Provider PIN value.
FFSProviderID	Vchar(9)	N		Provide FFS ID. NOTE: FFS provider Ids are at the Service Location Level based on the locations association. Do not use this field for FFS provider Ids
MedicareProviderID	Vchar(15)	N		Provider's Medicare ID. NOTE: For outbound claims, IS uses Medicare ID at the Service Location and Rendering Provider levels. Therefore value in this field is not used
MedicareClinicID	Vchar(15)	N		Provider's Medicare ID. NOTE: For outbound claims, IS uses Medicare ID at the Service Location and Rendering Provider levels. Therefore value in this field is not used
FFSID	Vchar(10)	N		NOTE: FFS provider Ids are at the Service Location Level based on the locations association. Do not use this field for FFS provider Ids
FFSMedi-CallID	Vchar(6)	N		NOTE: FFS provider Ids are at the Service Location Level based on the locations association. Do not use this field for FFS provider Ids
ContactName	Vchar(50)	N		Contact Name for the pay to provider
Address1	Vchar(50)	N		Address1 of the Legal Entity
Address2	Vchar(50)	N		Address2 of the Legal Entity
City	Vchar(50)	N		City of the Legal Entity
State	Vchar(15)	N		State of the Legal Entity
PostalCode	Vchar(10)	N		Postal Code of the Legal Entity
Country	Vchar(10)	N		Country of the Legal Entity
Telephone	Vchar(10)	N		Telephone of the Legal Entity
Fax	Vchar(10)	N		Fax of the Legal Entity
Email	Vchar(30)	N		Email of the Legal Entity
ActiveDate	Date/time	Y		Starting date for the Pay To Provider's association to the legal entity. This date is the start date for with the most recent Inactive Date.
InactiveDate	Date/time	N		Most recent ending date for the Pay To Provider's association to the legal entity
ServiceType	Char(1)	N		Identifies the service type of the provider
PayToProviderID	Int	Y	Rpt_PayToProvider.ProviderID	IS Internal ID for the Pay To Provider that the Billing Provider is associated to
PayToProviderName	Vchar(62)	Y		Name for the Pay To Provider that the Billing Provider is associated to Format: If Legal Entity has a first name format is: 'Last Name, First Name' If Legal Entity does not have a first name format is:

Column Name	Type	Reqd	Foreign Key	Description
				'Value entered in the Reporting Unit field in the IS Maintain Provider UI, First Name'
LegalEntityProviderID	Int	Y	Rpt_LegalEntity.ProviderID	IS Internal ID for the Legal Entity that the Pay To Provider is associated to
LegalEntityProviderName	Vchar(62)	Y		Name for the Legal Entity that the Pay To Provider is associated to Format: If Legal Entity has a first name format is: 'Last Name, First Name' If Legal Entity does not have a first name format is: 'Value entered in the Reporting Unit field in the IS Maintain Provider UI, First Name'
GenActiveDate	DateTime	N		Starting date when the Pay To Provider is authorized to provide service
GenInactiveDate	DateTime	N		Ending date when the Pay To Provider is authorized to provide service.

# rpt\_Clients

<b>Description</b>	Contains clients that have a DMH ID and have not been deleted
<b>Primary IS Repository Source Tables</b>	Cln_Client IS_Code
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Reporting_Stage_4 Transform Data Task: rpt_client

Column Name	Type	Reqd	FK	Description
ClientID	Char(35)	Y		The Client's DMHID.
NameLast	Vchar(50)	N		Last Name of the Client
NameFirst	Vchar(50)	N		First Name of Client
NameMid	Vchar(50)	N		Middle Name of the Client
Gender	Vchar(255)	N		Gender of the client
BirthDate	DateTime	N		Date of birth of client
SSN	Char(11)	N		Client's social security number
LevelofCare	Char(255)	N		Level of care associated with a client. Value is id from is Code table
EnglishSpeaking	Bit	N		Indicates if the client can speak English Valid Values: 1 – Yes 0 - No
LanguagePrimary	Vchar(255)	N		Primary language of client Value is id from is_Code table
LanguagePreferred	Vchar(255)	N		Client's preferred language Value is id from is_Code table
APR	Vchar(255)	N		Client's APR
Veteran	Int	N		Identifies if client is a veteran
Ethnicity	Vchar(255)	N		Client's ethnicity
Handicap	Vchar(255)	N		Identifies client's handicap
DateofDeath	DateTime	N		Client's date of death

Column Name	Type	Reqd	FK	Description
Transient	Bit	N		Indicates client is a transient Valid Values: 1 – Yes 0 - No
TimeHomeless	Vchar(255)	N		Indicates how long the client has been a transient
Address1	Vchar(75)	N		Client's address
Address2	Vchar(75)	N		Client's address
City	Vchar(50)	N		Client's city
State	Char(2)	N		Client's State
PostalCode	Vchar(15)	N		
County	Int	N		Client's County Value is from IS_County table
PhoneHome	Vchar(25)	N		Client's home phone number
PhoneBusiness	Vchar(25)	N		Client's business phone number
AddressMemo	Vchar(250)	N		Free format text field of address information
UMDPDate	DateTime	N		Date the UMDAP was performed.
IncomeSource	Vchar(50)	N		Indicates the client's income source code.
UMDAPProviderInstanceID	Int	N		Billing Provider Instance ID for the UMDAP. This is set to the Provider Context Service Location when the UMDPDate is entered.
UMDAPProviderID	Int	N		IS Internal ID for the Billing Provider
UMDAPProviderName	Vchar(62)			Name of the Billing Provider Format: If Billing has a first name format is: 'Last Name , First Name' If Billing does not have a first name format is: '4 digit Provider Number, First Name'
Dependents	Int	N		The client's number of dependents
Family Income	Money	N		Client's family income
AnnualLiability	Money	N		Client's annual liability
BirthCounty	Vchar(50)	N		Client's birth county
BirthState	Char(2)	N		Client's birth state
BirthCountry	Char(2)	N		Client's birth country
SPFRProviderInstanceID	Int	N		Rendering Provider Instance ID for the Single Fixed point of Responsibility (SFPR) for the client. This is a rendering provider.

Column Name	Type	Reqd	FK	Description
SFPRProviderID	Int	N		IS Internal ID for the SFPR (Rendering Provider)
SFPRProviderName	Vchar(62)	N		Name of the SFPR Provider Format: If SFPR Rendering Provider has a first name format is: 'Last Name , First Name' If SFPR Rendering Provider does not have a first name format is: '4 digit Provider Number, First Name'
SFPRTelephone			Vchar(10)	Not populated
ClinicalClientID	Vchar(50)	N		IS Internal ID for the client record
DateCreated	DateTime	N		Date the client record was created
DateUpdated	DateTime	N		Date the client record was last updated
NameMotherMaiden	Vchar(50)	N		Client's mother's maiden name
AkaNameFirst	Vchar(50)	N		AKA First name of client
AkaNameMid	Vchar(50)	N		AKA Middle name or client
AkaNameLast	Vchar(50)	N		AKA/Maiden Last name of client
Origin	Vchar(255)	N		Client's origin
Tribe	Vchar(255)	N		Client's tribe
SFPRSpecialProgram	Vchar(255)	N		SFPR Special Program name assigned to the client

# rpt\_ClientBenefit

<b>Description</b>	Contains client benefits that have not been deleted. Does not include client Medi-Cal benefits (based on Medi-Cal eligibility) that were added in IS2.
<b>Primary IS Repository Source Tables</b>	Cln_ClientBenefit Cln_Client IS_Code
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Reporting_Stage_4 Transform Data Task: rpt_ClientBenefit

Column Name	Type	Reqd	FK	Description
ClientID	Char(35)	Y	Rpt_Client.Clien ntID	The Client's DMHID.
NameLast	Vchar(50)	N		Last Name of the Client
NameFirst	Vchar(50)	N		First Name of Client
BenefitID	Vchar(50)	Y		ID value of the benefit
BenefitType	Int	Y		Client's benefit type value Value is from is_Code table
BenefitTypeDescription				Client's benefit type
Description	Vchar(100)	N		Description of the benefit
CardIssueDate	DateTime	N		Date a particular benefit type was issued. E.g. When the benefit is Medi-Cal CIN, this field is populated with the Medi-Cal card issue date
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_CodeMaster

<b>Description</b>	Contains various code values
<b>Primary IS Repository Source Tables</b>	Is_Code IS_CodeList Hrp_IGCode is_drugcode Hrp_procedurecode Hrp_TarRejectCodes Is_NDCCode Is_ServiceArea Wpc_ClaimStatus Wpc_ClaimStatusCat Is_DMHPlan Hrp_Taxonomy
<b>DTS Load Package</b>	Name: IS_Repository_ReportingCodeMaster Connection: SQL Server Transform Data Task: rpt_CodeMaster

Column Name	Type	Reqd	Foreign Key	Description
GroupName	VChar(50)	Y		Identifies the code type
CodeTitle	Vchar(50)	Y		IS Internal ID for the code
SourceDB	Vchar(15)	N		Identifies database of the source code table
SourceTable	Vchar(50)	N		Identifies the IS Repository source table for the code
GroupID	Vchar(15)	N		Identifies the IS internal id for the code type
CodeType	Char(1)	N		A secondary identifier for the code type. Not used for any functionality
CodeID	Vchar(50)	N		IS Internal ID for an individual code. This may not be a unique value as this field is populated from many source tables. Need to use combination of Group Name and Group ID as well to get a unique row
CodeDescription	Text	N		Description of an individual code
CodeCommentSource	Vchar(50)	N		Free format comment about the code
CodeComment	Text	N		Free format comment about the code

# rpt\_CommunityService

<b>Description</b>	Contains information for each non-deleted community service.
<b>Primary IS Repository Source Tables</b>	cln_CommunityService hrp_Provider hrp_ProviderInstance is_DMHPlan
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository_3 Transform Data Task: rpt_CommunityService

Column Name	Type	Reqd	Foreign Key	Description
CommunityServiceID	GUID	Y		IS Internal ID for the community service record
BillingProviderID	GUID	Y	Rpt_BillingProvider.ProviderID	IS internal ID for the Billing Provider of the community service
BillingProviderName	Int	Y		Name for the Billing Provider Format: If provider has a first name format is: 'Last Name , First Name' If provider does not have a first name format is: 'Value in Reporting Unit field on UI, Last Name'
RenderingProviderInstanceID	Int	Y		IS internal ID for the rendering provider's association to the service location of the community service
RenderingProviderID	Int	Y	Rpt_RenderingProvider.ProviderID	IS internal ID for the rendering provider location of the community service
RenderingProviderName	Vchar(62)	Y		Name for the Rendering Provider Format: If provider has a first name format is: 'Last Name , First Name'
ServiceDate	DateTime	Y		Date the community service was performed
LocationInformation	Vchar(100)	N		Location information
ServiceCode	Vchar(50)	N		Service code and description
ServiceCodeID	Int	N		Service ID
ServiceTime	Int	N		Time of the community service
RecipientType	Vchar(50)	N		Type of recipient for the community service

Column Name	Type	Reqd	Foreign Key	Description
PeopleContacted	Int	Y		Identifies the people contacted for the service
ServiceDescription	Vchar(100)	N		Description of the service performed
AgeCategory	Vchar(50)	N		Age Category
PrimaryLanguage	Vchar(50)	N		Primary Language
Ethnicity	Vchar(50)	N		Ethnicity
Handicap	Vchar(50)	N		Handicap
ProgramArea	Vchar(50)	N		Program Area
FundingSource	Vchar(50)	N		Funding Source (plan)
ClinicalCommunityServiceID	GUID	Y		IS Internal id
DateCreated	Vchar(35)	Y		Date the community service record was created
DateUpdated	DateTime	Y		Date the community service record was last updated
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_CommunityServiceStaff

<b>Description</b>	Contains information for each non-deleted additional staff recorded for a community service. This does not contain the main rendering provider recorded for the community service. There may be multiple staff per community service
<b>Primary IS Repository Source Tables</b>	cln_CommunityServiceStaff cln_CommunityService hrp_Provider hrp_ProviderInstance
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository_3 Transform Data Task: rpt_CommunityServiceStaff

Column Name	Type	Reqd	Foreign Key	Description
ClinicalCommunityServiceStaffID	GUID	Y		IS Internal ID for the community service additional staff record
CommunityServiceID	GUID	Y	Rpt_CommunityService. CommunityServiceID  Rpt_CommunityService. ClinicalCommunityServiceID	IS internal ID for the community service that the additional staff is recorded against
RenderingProviderInstID	Int	Y	Rpt_RenderingProvider.ProviderInstanceID	IS internal ID for the additional staff's association to a service location
RenderingProviderID	Int	Y	Rpt_RenderingProvider.ProviderID	IS internal ID for the additional staff
RenderingProviderNameLast	Vchar(35)	Y		Last name of the additional staff
RenderingProviderNameFirst	Vchar(25)	N		First name of the additional staff
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# is\_CrosswalkProcedureCode

<b>Description</b>	Contains various crosswalk values(e.g. MHMIS Activity Code, Medi-Cal outbound claim procedure code) for a procedure code. A procedure code may have multiple crosswalk values This is a direct copy from the IS Repository
<b>Primary IS Repository Source Tables</b>	hrp_CrosswalkProcedureCode
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository_6 Transform Data Task: rpt_CrosswalkProcedureCode

Column Name	Type	Reqd	Foreign Key	Description
CodeKey	Int	Y		Unique IS internal ID for the crosswalk record
Entity	Vchar(35)	Y		Defines the type of crosswalk value for a procedure
ProcedureID	Int	Y	Rpt_Procedure Code.Procedure ID	Unique IS internal ID for the procedure
EntityCode	Vchar(20)	Y		Code values for the crosswalk type.
EntityQual1	Vchar(20)	N		Additional qualifier code for the crosswalk type
EntityQual2	Vchar(20)	N		Additional qualifier code for the crosswalk type
EntityQual3	Vchar(20)	N		Additional qualifier code for the crosswalk type
EntityQual4	Vchar(20)	N		Additional qualifier code for the crosswalk type
EntityPlaceofService	Vchar(20)	N		Place of service for the crosswalk type
ActiveDate	Date/time	Y		Earliest date crosswalk is valid
InactiveDate	Date/time	N		Latest date crosswalk is valid
DateCreated	Date/time	Y		Date and time the crosswalk record was created
DateUpdated	Date/time	Y		Date and time the crosswalk record was last updated

# rpt\_DeletedService

<b>Description</b>	Contains information for instances of a service that have been deleted.
<b>Primary IS Repository Source Tables</b>	cln_ServiceInstance cln_Service cln_Episode cln_Client hrp_Provider hrp_ProviderInstance is_Code
<b>DTS Load Package</b>	Name: IS_REPOSITORY_ServiceStaging Connection: SQL Server 3 Transform Data Task: rpt_DeletedService

Column Name	Type	Reqd	Foreign Key	Description
ClinicalServiceID	GUID	Y		IS Internal ID for the service instance record
ClientID	Vchar(35)	N	Rpt_Client.ClientID	DMH ID for the client of the service instance. Leading zeros are populated
NameLast	Vchar(50)	N		Last Name for the client
NameFirst	Vchar(50)	N		First Name for the client
ClaimNumber	Vchar(50)	N		Submitter claim ID for the service instance. This is the inbound claim id
ServiceDate	DateTime	Y		Starting service date
ServiceEndDate	DateTime	N		Ending service date
ProcedureCode	Vchar(50)	N		Code for the procedure
ProcedureDescription	Vchar(255)	N		Description for the procedure
CollateralFamily	Int	N		The number of collateral
CollateralNonFamily	Int	N		The number of non-family collateral. No longer populated
MinutesTotal	Int	N		Total units spent for the service instance. Depending on the procedure this may be in minutes, units or days
MinutesFacetoFace	Int	N		Face to face time for a service instance
MinutesOther	Int	N		Other time (non-face to face) time for a service instance
TelephoneService	Bit	N		Indicates if the service instance was performed via telephone
Ward	Vchar(50)	N		Indicates the ward for the service instance.
RenderingProviderInstanceID	Int	N		IS internal ID for the Rendering Provider's association to the service location of the service instance

Column Name	Type	Reqd	Foreign Key	Description
RenderingProviderID	Int	N	Rpt_Rendering Provider.ProviderID	IS internal ID for the Rendering Provider
RenderingProviderNameLast	Vchar(35)	N		Last name for the Rendering Provider
RenderingProviderNameFirst	Vchar(25)	N		First name for the Rendering Provider
ServiceLocationID	Int	N	Rpt_ServiceLocation.ProviderID	IS internal ID for the Service Location
ServiceLocationName	Vchar(62)	N		Name for the Service Location of the service instance. Format: If Service Location has a first name format is: 'Last Name , First Name' If Billing Provider does not have a first name format is: 'RU, Last Name'
ClinicalEpisodeID	GUID	Y	Rpt_Episode.ClinicalEpisodeID	IS internal ID for the episode
FacilityTypeCode	Vchar(255)	N		
SubmittingUser	Vchar(50)	N		User that submitted the service instance
GroupSessionID	GUID	N		IS internal ID for the group session that the service was performed
SubmissionStatus	Vchar(15)	N		Status of the service instance
DateUpdated	DateTime	N		Date the service instance was last updated
DateCreated	DateTime	N		Date the service instance was created
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_DMHCclaim

<b>Description</b>	Stores a record for each instance of a service that has been submitted for claiming. Does not contain services that have been deleted, provider is retired, or, due to errors, basic data cannot be populated. NOTE: A service may have multiple instances due to resubmission and/or voids
<b>Primary IS Repository Source Tables</b>	cln_Service cln_ServiceInstance cln_Client cln_Episode hrp_Provider hrp_ProviderInstance is_Code hrp_ProcedureCode Is_DTAAOverride
<b>DTS Load Package</b>	Name: IS_REPOSITORY_ServiceStaging Connection: SQL Server Transform Data Task: rpt_DMHCclaim IPC Claims

Column Name	Type	Reqd	Foreign Key	Description
ClaimNumber	Int	Y	Rpt_Service.ClaimNumber Rpt_PayerClaim.DMHCclaimNumber	IS internal ID for an inbound claim
SubmitDate	DateTime	Y		Date the claim was submitted to the IS. For EDI and FFS Admin claims this the date the inbound claim is initially recorded in the IS repository. For Clinical claims this is the date the service instance was submitted for claiming
ClaimType	Char(8)	N		Description of the type of claim (e.g. Original, Resub, Void)
ClaimStatus	Vchar(25)	N		Status of the inbound claim
ReasonCode	Vchar(20)	N		Not Populated
PayToProviderID	Int	N	rpt_PayToProvider.ProviderID	IS Internal ID for the Pay to Provider of the inbound claim
PayToProviderName	Vchar(62)	Y		Name for the Pay to Provider of the inbound claim Format: If First Name is not empty 'LastName, FirstName' If First Name is empty

Column Name	Type	Reqd	Foreign Key	Description
				'Value in DMHRptUnit field LastName'
BillingProviderID	Int	N	Rpt_BillingProvider.Pr oviderID	IS Internal ID for the Billing Provider of the inbound claim
BillingProviderName	Vchar(62)	Y		Name for the Billing of the inbound claim Format: If First Name is not empty 'LastName, FirstName' If First Name is empty '4 digit Provider Number, LastName'
ClientID	Vchar(35)	N	Cln_Client.DMHID	DMH ID for the client of the inbound claim
HIC	Vchar(20)	N		Clients Medicare ID when the claim has Medicare as a payer. For FFS and EDI claims this is the value sent in the inbound claim. For Clinical claims this is the value in the client record at the time the claim was submitted
Medi-CalID	Vchar(20)	N		Clients Medi-Cal ID when the claim has Medi-Cal as a payer. For FFS and EDI claims this is the value sent in the inbound claim. For Clinical claims this is the value in the client record at the time the claim was submitted
AIDCode	Vchar(30)	N		Not Populated
PersonID	Int	N		Not Populated
NameLast	Vchar(35)	N		Last name of the client for the inbound claim
NameFirst	Vchar(25)	N		First name of the client for the inbound claim
NameMid	Vchar(25)	N		Middle name of the client for the inbound claim
BirthDate	DateTime	N		Birthdate of the client for the inbound claim
Gender	Char(1)	N		Gender of the client for the inbound claim
SSN	Vchar(35)	N		SSN of the client for the inbound claim
ServiceDateBegin	DateTime	N		Starting service date for the for the inbound claim
ServiceDateEnd	DateTime	N		Ending service date for the for the inbound claim
TotalClaimChargeAmount	Money	N		Claim Amount for the for the inbound claim
Minutes	Int	N		Total time for the inbound claim
EmergencyIndicator	Char(1)	N		Not Populated
FacilityCodeValue	Vchar(50)	N		Place of service code for the inbound claim
ClaimFrequencyTypeCode	Char(1)	N		Code for the type of claim (e.g. 1 = Original, 7 = Resub, 8 = Void)
MedicareAssignmentCode	Vchar(50)	N		Medicare Assignment code for the inbound claim
DiagnosisCode	Vchar(50)	N		Primary Diagnosis code for the inbound claim
ProcedureCode	Vchar(50)	N		Code for the procedure of the inbound claim. May be empty if the procedure code cannot be populated

Column Name	Type	Reqd	Foreign Key	Description
Modifier1	Vchar(10)	N		First modifier for the procedure of the inbound claim
Modifier2	Vchar(10)	N		Second modifier for the procedure of the inbound claim
Modifier3	Vchar(10)	N		Third modifier for the procedure of the inbound claim
Modifier4	Vchar(10)	N		Fourth modifier for the procedure of the inbound claim
ProcedureFFSMaxUnits	Int	N		Max FFS units for the for the procedure of the inbound claim NOTE: This field is not used by any functionality in the IS
ProcedureMinTime	Int	N		Minimum minutes for the procedure of the inbound claim. If not populated, there is no minimum value
ProcedureMaxTime	Int	N		Maximum minutes for the procedure of the inbound claim. If not populated, there is no minimum value
ContractedRate	Decimal(19,2)	N		Contract value for the claim (Service Location rate * claim units)
LocalAmount	Decimal(19,2)	N		Amount of claim that DMH is responsible for Lesser of (TotalClaimChargeAmount or ContractedRate) – (ClientPaidAmount + PrivateInsuranceAmount + MedicarePaidAmount + Medi-CalPaidAmount)
EPSDTAmt	Decimal(19,2)	N		Not populated
ClientPaidAmount	Decimal(19,2)	N		Amount that client has paid for the claim
PrivateInsuranceAmount	Decimal(19,2)	N		Amount that private insurance has paid for the claim
MedicarePaidAmount	Decimal(19,2)	N		Amount that Medicare has paid for the claim
Medi-CalPaidAmount	Decimal(19,2)	N		Amount that Medi-Cal insurance has paid for the claim
PaidToProvider	Decimal(19,2)	N		Amount that DMH may pay to the provider LP Directly Operated: LocalAmount + MediCarePaidAmount + Medi-CalPaidAmount LP Contracted: LocalAmount + Medi-CalPaidAmount
PaymentDate	DateTime	N		Date a positive 835 was created for the provider.
AdjudicationDate	DateTime	N		Date the claim was adjudicated by DMH
PlanName	Vchar(30)	N		Name of the first plan on the claim
MediCalClaim	Bit	N		Indicates if Medi-Cal is a payer in the claim
MedicareClaim	Bit	N		Indicates if Medicare is a payer in the claim
InsuranceClaim	Bit	N		Indicates if Private insurance is a payer in the claim
DenySource	Vchar(15)	N		For denied claims indicates the source of the denial
DenyReason	Vchar(10)	N		For denied claims indicates the 835 adjustment reason code of the denial
DenyGroup	Vchar(4)	N		For denied claims indicates the 835 adjustment group code of the denial
DenyRuleFailure	Vchar(80)	N		Indicates the IS Rule failure description for claims that failed IS Business Rules or the MHMIS error message for claims that failed MHMIS business rules.

Column Name	Type	Reqd	Foreign Key	Description
				Not populated for other types of denials (e.g. FFS legacy, Finance Adjudication)
PlanID	Int	N	Rpt_CodeMaster. CodeID Where rpt_CoseMaster.Grou pName = 'DMH Plan'	IS internal Id for the first plan of the claim
OrgType	Vchar(30)	N		Organization type for the billing provider of the claim
RenderingProviderID	Int	N	Rpt_RenderingProvid er.ProviderID	IS internal ID for the Rendering Provider of the inbound claim
RenderingProviderName	Vchar(62)	N		Name for the Rendering Provider of the inbound claim Format: 'NameLast + NameFirst'
RenderingProviderNameLast	Vchar(35)	N		Last Name for the Rendering Provider of the inbound claim
RenderingProviderNameFirst	Vchar(25)	N		First Name for the Rendering Provider of the inbound claim
ServiceLocationProviderID	int	N	Rpt_ServiceLocation. ProviderID	IS internal ID for the Service Location of the inbound claim
ServiceLocationName	Vchar(62)	N		Name for the Service Location of the inbound claim Format: If First Name is not empty 'LastName, FirstName' If First Name is empty 'RU, LastName'
FFSProviderID	Vchar(9)	N		Not Populated
FFSClaimID	Vchar(13)	N		Not Populated
SubmitterID	Int	N		Is Internal ID for the submitter of the claim. This may be DDE, Clinical or the EDI submitter id
ClaimSubmittersIdentifier	Vchar(38)	Y		Claim ID sent on the inbound claim. For EDI and FFS DDE claims this is the value from CLM01 of the inbound claim. For Clinical claims this is assigned by the IS
ClaimStatusDataID	Int	Y		Set to zero. No longer used
ClaimKey	GUID	Y	Rpt_Service.ClinicalS erviceID Rpt_PayerClaim.Clai mKey	IS internal ID for the inbound claim
RAKey	GUID	N		IS Internal ID for the outbound 835 send to the provider.
SubmittingUser	Vchar(50)	N		User that submitted the claim
ResubParentClaimKey	Vchar(38)	N		For claims that are resubs or voids, the IS Internal ID for the parent claim
ServiceUnitType	Vchar(4)	N		The unit type for the claim
ServiceUnitCount	Decimal(19,2)	N		The number of units billed for the claim
DDEVisible	Bit	N		Always set to 1

Column Name	Type	Reqd	Foreign Key	Description
PatientFileNumber	Vchar(50)	N		The Patient File Number for the episode of the inbound claim. Not populated for FFS claims
EpisodeReptUnit	Char(5)	N		The service location reporting unit code for the episode of the claim
EpisodeSeqNumber	Char(3)	N		The MHMIS sequence number for the episode of the claim
DMHActivityCode	Vchar(30)	N		The MHMIS Activity code for the procedure of the inbound claim
DMHSvcCode1	Vchar(30)	N		The CRDC Service Function Code of the claim
DMHSvcCode2	Vchar(30)	N		The CRDC Mode of the claim
UOFSRecSeq	Int	N		Set to zero
UOFSegSeq	Int	N		The MHMIS segment sequence number for the inbound claim.
FFSServiceCode	Vchar(10)	N		For FFS claims, the FFS service code for the inbound claims. This is based on the FFS procedure code conversion tables
DateCreated	DateTime	N		The date the instance of the service record was created
DateUpdated	DateTime	N		The date the instance of the service record was last updated
FFSServiceQty	Int	N		For FFS claims, the FFS service quantity for the claim. This is based on the FFS procedure code conversion tables
ProcedureID	Int	N	Hrp_ProcedureCode. ProcedurID	IS internal ID for the procedure of the claim
VoidStatus	Vchar(20)	N		Indicates the void status of the claim
ResubmitDate	DateTime	N		The date that a resub was sent for the service
LateCode	Int	N		The HIPAA late code for the claim
HFFlag	Bit	N		Indicates if the claim is a healthy family claim
AuthCode	Vchar(50)	N		The authorization code for the claim. This is for LP inpatient claims only
BillingProviderNPI	VChar(35)	N	Rpt_ProviderAltID.Alt ernatID	NPI for the Billing Provider of the claim
ServiceLocationProviderNPI	VChar(35)	N	Rpt_ProviderAltID.Alt ernatID	NPI for the Service Location of the clam
RenderingProviderNPI	VChar(35)	N	Rpt_ProviderAltID.Alt ernatID	NPI for the Rendering Provider of the claim
SatelliteFlag	Char(1)	N		Indicates if the Service Location of the claim is a Satellite
PublicSchoolFlag	Char(1)	N		Indicates if the Service Location of the claim is a Public School
CPETHresholdID	Integer	N		IS internal ID for the CPE Threshold applied against the inbound claim
CPEReleaseID	Integer	N		IS internal ID for the CPE Release applied against the inbound claim
CPEContractAmount	Decimal(9,2)	N		Contract amount for a claim processed using the CPE rate
CPEMCalOnlyFlag	Bit	N		When the claim is eligible for a CPE Threshold will indicates if Medi-Cal is the only payer Valid Values:

Column Name	Type	Reqd	Foreign Key	Description
				1 – Claim has a CPE Threshold and Medi-Cal is a billable payer and there are no other payers with a payment amount >0 0 - Claim does not have a CPE Threshold or Claim has a CPE Threshold and Medi-Cal is a billable payer and there are other payers with a payment amount >0
DTAOverrideID	Int	N		Indicates DTA override ID that was active for the claim's service location and service date, and was also applied to the claim
EPSDTFlag	Bit	N		Indicates if the claim was for EPSDT screening referral 0 - EPSDT was not indicated on the inbound claim 1 – EPSDT was indicated on the inbound claim
EmergencyFlag	Bit	N		Indicates if the claim was for emergency 0 - Emergency was not indicated on the inbound claim 1 – Emergency was indicated on the inbound claim
PregnancyFlag	Bit	N		Indicates if the client in the claim is pregnant 0 - Pregnancy was not indicated on the inbound claim 1 – Pregnancy was indicated on the inbound claim
DupOverrideFlag	Bit	N		Indicates the claim is a valid duplicate 0 – Duplicate Override was not indicated on the inbound claim 1 – Duplicate Override was indicated on the inbound claim
SDPhaseIIFlag	Int	N		Indicate if the claim is for SD phase II 0 – Phase I claim 1 – Phase II claim
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.
EPSDTFlag	Bit	N		Indicates if the claim was for EPSDT screening referral 0 - EPSDT was not indicated on the inbound claim 1 – EPSDT was indicated on the inbound claim
EmergencyFlag	Bit	N		Indicates if the claim was for emergency 0 - Emergency was not indicated on the inbound claim 1 – Emergency was indicated on the inbound claim
PregnancyFlag	Bit	N		Indicates if the client in the claim is pregnant 0 - Pregnancy was not indicated on the inbound claim 1 – Pregnancy was indicated on the inbound claim
DupOverrideFlag	Bit	N		Indicates the claim is a valid duplicate 0 – Duplicate Override was not indicated on the inbound claim 1 – Duplicate Override was indicated on the inbound claim
SDPhaseIIFlag	Int	N		Indicate if the claim is for SD phase II 0 – Phase I claim 1 – Phase II claim



# rpt\_DMHCclaimPlan

<b>Description</b>	Contains information for plans attributed to an inbound claim. Only those plans for submitted claims not in 'Submitted' status are populated
<b>Primary IS Repository Source Tables</b>	cln_ServiceInstPlan cln_ServiceInstance is_DMHPlan is_Code
<b>DTS Load Package</b>	Name: IS_REPOSITORY_ServiceStaging Connection: SQL Server 3 Transform Data Task: rpt_DMHCclaimPlan

Column Name	Type	Reqd	Foreign Key	Description
ID	Int	Y		Internal ID for the record. Identity field automatically populated by Reporting Repository
ClaimNumber	Int	Y	Rpt_DmhClaim.ClaimNumber	IS Internal ID for an outbound claim
PlanID	Int	Y	Rpt_CodeMaster.CodeID where rpt_CodeMaster.GroupName = 'DMH Plan'	IS internal ID for the plan on an inbound claim
PlanName	Vchar(30)	Y		Name for the plan on an inbound claim
ClaimPlanStatus	Vchar(20)	Y		Status of the plan on an inbound claim
ClaimPlanChargeSequence	Int	Y		Charge sequence number for the plan on an inbound claim
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_Episode

<b>Description</b>	Contains record of each episode that is not deleted and contains an MHMIS Sequence Number. Also does not contain episodes for retired providers or where the episode's service location is inactive for the episode Admit date Table contains inpatient, outpatient and day-treatment episodes.
<b>Primary IS Repository Source Tables</b>	Cln_Episode Cln_Client Hrp_provider Hrp_ProviderInstance Cln_Diagnosis IS_Code
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Reporting_Stage_4 Transform Data Task: rpt_Episode

Column Name	Type	Reqd	Foreign Key	Description
ClinicalEpisodeID	GUID	Y		IS Internal ID for the episode
ClientID	Vchar(35)	Y	rpt_Client.ClientID	DMH ID for the client
EpisodeType	Char(1)	Y		Identifies the type of episode Valid Values: O – Outpatient I – Inpatient D – Day Treatment
NameLast	Vchar(50)	N		Last Name of the Client
NameFirst	Vchar(50)	N		First Name of Client
NameMid	Vchar(50)	N		Middle Name of the Client
Gender	Vchar(255)	N		Gender of the client
BirthDate	DateTime	N		Date of birth of client
PhoneHome	Vchar(25)	N		Client's home phone number
LevelofCare	Vchar(255)	N		Level of care associated with a client. Value is id from is_Code table
Transient	Bit	N		Indicates client is a transient Valid Values: 1 – Yes 0 - No

Column Name	Type	Reqd	Foreign Key	Description
AdmitDate	DateTime	Y		Date the episode was created
DischargeDate	DateTime	N		Date the episode was closed
DischargeTime	Vchar(10)	N		Time the episode was closed. Required for inpatient episodes only
PrimaryDxAdmit	Vchar(50)	N	rpt_Diagnosis.PrimaryDx	Admit Primary diagnosis
PrimaryDxDescriptionAdmit	Vchar(255)	N		Description of the Admit Primary diagnosis
PrimaryDxDischarge	Vchar(50)	N	rpt_Diagnosis.PrimaryDx	Discharge Primary diagnosis
PrimaryDxDescriptionDischarge	Vchar(255)	N		Description of the Discharge Primary diagnosis
SecondaryDxAdmit	Vchar(50)	N	rpt_Diagnosis.SecondaryDx	Admit Secondary diagnosis
SecondaryDxDescriptionAdmit	Vchar(255)	N		Description of the Admit Secondary diagnosis
SecondaryDxDischarge	Vchar(50)	N	rpt_Diagnosis.SecondaryDx	Discharge Secondary diagnosis
SecondaryDxDescriptionDischarge	Vchar(255)	N		Description of the Discharge Secondary diagnosis
DualDxAdmit	Vchar(50)	N		Admit dual diagnosis
DualDxDischarge	Vchar(50)	N		Discharge dual diagnosis. This is not populated.
GAFAdmit	Vchar(50)	N	Rpt_Diagnosis.Axis5	Admit GAF. This is Axis 5 diagnosis from the admission diagnosis record
GAFDischarge	Vchar(50)	N	Rpt_Diagnosis.Axis5	Discharge GAF. This is Axis 5 diagnosis from the discharge diagnosis record
IntentofService	Vchar(255)	N		Intent of Service description
ReferralIn	Vchar(255)	N		Referral In code
ReferralInContactID	Int(4)	N	Rpt_ServiceLocation.ProviderID	IS Internal ID for the Referral In Provider
ReferralInContactNameLast	Vchar(35)	N		Referral In provider last name
ReferralInContactNameFirst	Vchar(25)	N		Referral in provider first name
Ward	Vchar(50)	N		Ward for the episode
PhysicalDisabilityAdmit	Vchar(255)	N		Physical Disability code on episode admission

Column Name	Type	Reqd	Foreign Key	Description
PhysicalDisabiityDischarge	Vchar(255)	N		Not populated
DevelopmentalDisabilityAdmit	Vchar(255)	N		Developmental Disability code on episode admission
DevelopmentalDisabilityDischarge	Vchar(255)	N		Not populated
ReferralOut	Vchar(255)	N		Referral Out code for the episode
ReferralOutContactID	Int(4)	N	Rpt_Service Location.ProviderID	IS Internal id for the referral out provider
ReferralOutContactNameLast	Vchar(35)	N		Referral Out provider last name
ReferralOutContactNameFirst	Vchar(25)	N		Referral Out provider first name
LegalStatusAdmit	Vchar(255)	N		Legal Status code on episode admission
LegalStatusDischarge	Vchar(255)	N		Legal Status code on episode discharge
PrimaryProblemArea	Vchar(255)	Y		Primary Problem Area for the episode
PatientFileNumber	Vchar(50)	N		Patient File number for the episode
ServicePlanDue	DateTime	N		Date the Service plan for the episode is due
CoordinationPlanDue	DateTime	N		Date the Coordination plan for the episode is due
LastServiceDate	DateTime	N		Service date for the most recent successfully submitted non-voided claim for the episode.
ClientStatus	Vchar(255)	N		Client status code for the episode
SFPRProviderID	Int	N	Rpt_RenderingProvider.ProviderID	IS Internal ID for the SFPR of the client
SFPRProviderInstanceID	Int	N		IS Internal association ID for the SFPR's association to the episode service location
SFPRProviderName	Vchar(62)	N		SFPR Name Format: If SFPR has a first name format is: 'Last Name , First Name' If SFPR does not have a first name format is: 'Last Name'
SFPRTelephone	Vchar(10)	N		Not Populated
RenderingProviderID	Int	N	Rpt_RenderingProvider.ProviderID	IS Internal ID for the Rendering Provider who is the Primary Contact for the episode.
RenderingProviderInstanceID	Int	N		IS Internal association ID for the Primary Contact's (Rendering Provider) association to the episode service location
RenderingProviderNameLast	Vchar(35)	N		Last Name for the Rendering Provider who is the Primary Contact for the episode.

Column Name	Type	Reqd	Foreign Key	Description
RenderingProviderNameFirst	Vchar(25)	N		First Name for the Rendering Provider who is the Primary Contact for the episode.
MedicalStaffID	Int	N	Rpt_RenderingProvider.ProviderID	IS Internal ID for the Rendering Provider who is the assigned Medical staff for the episode
MedicalStaffInstanceID	Int	N		IS Internal association ID for the Rendering Provider who is the assigned Medical staff for the episode. The association is for the rendering Provider to the Service Location
MedicalStaffNameLast	Vchar(35)	N		Last Name of the Rendering Provider who is the assigned Medical staff for the episode
MedicalStaffNameFirst	VChar(25)	N		First Name of the Rendering Provider who is the assigned Medical staff for the episode
BillingProviderID	Int	N	Rpt_BillingProvider.ProviderID	IS Internal ID for the billing provider of the episode
BillingProviderName	Vchar(62)	Y		Name of the Billing Provider for the episode Format: If Billing Provider has a first name format is: 'Last Name , First Name' If Billing Provider does not have a first name format is: '4 digit Provider Number, Last Name'
ServiceLocationID	Int(4)	Y	Rpt_ServiceLocation.ProviderID	IS internal ID for the Service Location of the episode
Service Location Name	Vchar(62)	Y		Name of the Service Location for the episode Format: If Service Location has a first name format is: 'Last Name , First Name' If Service Location does not have a first name format is: '5 Character RU, Last Name'
ClinicalClientID	GUID	N	Rpt_Client.ClinicalClientID	IS Internal ID for the client record
LastUpdatedBy	Date	N		ID of the user who last updated the record.
DateCreated	Date	N		Date & time that the client record was created
DateUpdated	Date	N		Date & time for the last update to the client record
MHMISSequenceNumber	Vchar(25)	N		MHMIS Sequence number for the episode
EpisodeID	Int	N		Not Populated
DDEDocumentEncounterID	Int	N		Not Populated
EpisodeSeqID	Vchar(25)	N		Not Populated
ProviderNo	Int	N		Not Populated

Column Name	Type	Reqd	Foreign Key	Description
isOpenEpisode	Bit	N		Not Populated
isOrphaned	Bit	N		Not Populated
DeleteFlag	Bit	N		Not Populated
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_GroupSessionStaff

<b>Description</b>	Contains information for each staff recorded on a group session. This is a direct copy from the IS Repository.
<b>Primary IS Repository Source Tables</b>	cln_GroupSessionStaff
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository_3 Transform Data Task:cln_GroupSessionStaff

Column Name	Type	Reqd	Foreign Key	Description
ID	GUID	Y		IS Internal ID for the group session staff record
GroupSessionID	GUID	Y		IS internal ID for the group session
StaffID	Int	Y	Rpt_Rendering Provider.ProviderInstanceID	IS internal ID for the additional staff's association to the service
Minutes	Int	Y		Minutes assigned to each staff that participated in the group session
DateCreated	Vchar(35)	Y		Date the group session staff record was created
DateUpdated	DateTime	Y		Date the group session staff record was last updated
LastUpdatedBy	Varchar(100)	Y		Last user that updated the group session staff record
DeleteStatus	Bit	Y		Indicates if the staff was deleted from the session or not. Deleted staff are not part of the session.
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_LegalEntity

<b>Description</b>	Contains records for providers set as Legal Entities in the IS
<b>Primary IS Repository Source Tables</b>	hrp_Provider hrp_Contact
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository (First connection) Transform Data Task: rpt_LegalEntity

Column Name	Type	Reqd	Foreign Key	Description
ID	Int	Y		ID Internal ID for the legal entity provider
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.
ProviderType	Vchar(30)	N		Organization type of the Legal Entity Valid Values: FFS 1 FFS 2 INDIVIDUAL FFS 2 GROUP FFS 2 ORG LP CONTRACT LP DIRECTLY OP
ProviderName	Vchar(62)	Y		Name of the Legal Entity Format: If Legal Entity has a first name format is: 'Last Name , First Name' If Legal Entity does not have a first name format is: 'Value in Reporting Unit field on UI, Last Name'
ProviderNameLast	Vchar(35)	Y		Last name of Legal Entity
ProviderNameFirst	Vchar(25)	N		First name of Legal Entity
ProviderNameMid	Vchar(25)	N		Middle name of Legal Entity
OPCode	Vchar(10)	N		Identifies agency type of provider.
ActiveDate	Date/time	Y		Starting date when a provider is authorized to provide service
ContactName	Vchar(50)	N		Contact person at Legal Entity
InactiveDate	Date/time	N		Ending date when a provider is authorized to provide service.
Address1	Vchar(50)	N		Address1 of the Legal Entity
Address2	Vchar(50)	N		Address2 of the Legal Entity
City	Vchar(50)	N		City of the Legal Entity

Column Name	Type	Reqd	Foreign Key	Description
State	Vchar(15)	N		State of the Legal Entity
PostalCode	Vchar(10)	N		Postal Code of the Legal Entity
Country	Vchar(10)	N		Country of the Legal Entity
Telephone	Vchar(10)	N		Telephone of the Legal Entity
Fax	Vchar(10)	N		Fax of the Legal Entity
Email	Vchar(30)	N		Email of the Legal Entity Contact Person
GenActiveDate	DateTime	N		Starting date when a provider is authorized to provide service
GenInactiveDate	DateTime	N		Ending date when a provider is authorized to provide service.

# rpt\_MediCalEligibility

<b>Description</b>	Contains Client Medi-Cal eligibility request and response information
<b>Primary IS Repository Source Tables</b>	is_MCalEligibility hrp_EligRequest is_EligibilityPayer
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository_6 Transform Data Task: rpt_MediCalEligibility

Column Name	Type	Reqd	Foreign Key	Description
MediCalClientID	GUID	Y		Client's Medi-Cal ID sent in the eligibility request
ProviderPIN	Vchar(30)	N		Provider PIN value sent in the eligibility request
ServiceDate	DateTime	Y		Service Date sent in the eligibility request
EVC	Vchar(30)	N		EVC value returned from Medi-Cal eligibility response
AidCode	Vchar(30)	N		Aid Code value returned from Medi-Cal eligibility response
Message	Text	N		Message returned from Medi-Cal eligibility response
DateCreated	DateTime	N		Date the Medi-cal eligibility response information was stored
DMHID	INT	N		The clients DMHID for which the eligibility was performed for. Eligibility requests received by the IS from FFS DDE or EDI providers may not include a Client DMHID. In these circumstances the DMH ID will not be populated
ProvMCALNumber	Vchar(30)	N		Provider's Medi-Cal ID for the eligibility request. This is typically a 4-digit value



Column Name	Type	Reqd	Foreign Key	Description
NameFirst	Vchar(24)	N		First name of the client for the inbound claim
NameMid	Vchar(25)	N		Middle name of the client for the inbound claim
BirthDate	DateTime	N		Birth date of the client for the inbound claim
Gender	Char(1)	N		Gender of the client for the inbound claim
SSN	Vchar(35)	N		SSN of the client for the inbound claim
ServiceDateBegin	DateTime	N		Starting service date for the for the inbound claim
ServiceDateEnd	DateTime	N		Ending service date for the for the inbound claim
TotalClaimChargeAmount	Money	N		Claim Amount for the for the inbound claim
Minutes	Int	N		Total time for the inbound claim
EmergencyIndicator	Char(1)	N		Not populated
FacilityCodeValue	Vchar(50)	N		Place of service code for the inbound claim
ClaimFrequencyTypeCode	Vchar(50)	N		Code for the type of claim (e.g. 1 = Original, 7 = Resub, 8 = Void)
MedicareAsignementCode	Vchar(50)	N		Not populated
InsuranceTypeCode	Vchar(50)	N		Not populated
ClaimFilingIndicatorCode	Vchar(50)	N		Not populated
COBAllowedAmount	Money	N		Not populated
ProcedureCode	Vchar(50)	N		Code for the procedure of the inbound claim
Modifier1	Vchar(10)	N		First modifier for the procedure of the inbound claim
Modifier2	Vchar(10)	N		Second modifier for the procedure of the inbound claim
Modifier3	Vchar(10)	N		Third modifier for the procedure of the inbound claim
Modifier4	Vchar(10)	N		Fourth modifier for the procedure of the inbound claim
ProcedureFFSMaxUnits	Int	N		Max FFS units for the for the procedure of the inbound claim NOTE: This field is not used by any functionality in the IS
ProcedureMinTime	Int	N		Minimum minutes for the procedure of the inbound claim. If not populated, there is no minimum value
ProcedureMaxTime	Int	N		Maximum minutes for the procedure of the inbound claim. If not populated, there is no minimum value
AuthorizationNumber	Vchar(30)	N		Authorization number for the external payer. (e.g. Medi-Cal EVC value)
DenySource	Vchar(15)	N		Source of the denial for the inbound claim.
DenyReason	Vchar(10)	N		835 Adjustment Reason code of the denial for the inbound claim.
DenyGroup	Vchar(4)	N		835 Adjustment Group code of the denial for the inbound claim.

Column Name	Type	Reqd	Foreign Key	Description
DenyRuleFailure	Vchar(80)	N		Not populated
RenderingProviderID	Int	N		IS Internal ID for the Rendering Provider to the inbound claim
RenderingProviderName	Vchar(20)	N		Name for the Rendering Provider to the inbound claim Format: 'LastName, FirstName'
RenderingProviderNameLast	Vchar(35)	N		First Name for the Rendering Provider of the inbound claim
RenderingProviderNameFirst	Vchar(25)	N		Last Name for the Rendering Provider of the inbound claim
ServiceLocationProviderID	Int	N		IS internal ID for the Service Location of the inbound claim
ServiceLocationProviderName	Vchar(30)	N		Name for the Service Location of the inbound claim Format: If First Name is not empty 'LastName, FirstName' If First Name is empty 'RU, LastName'
PaidFlag	Char(1)	N		Indicates if the external payer pays DMH.
BillableFlag	Char(1)	N		Indicates if the external payer can be billed
ActualPaidAmount	Money	N		Indicates the amount the external payer actually paid
PaymentTraceNumber	Vchar(30)	N		An identifier sent in the external payer's 835 for the outbound claim
SettlementDate	DateTime	N		The settlement date sent in the external payer's 835 for the outbound claim
ProductionDate	DateTime	N		The production date sent in the external payer's 835 for the outbound claim
RATotalActualPayment	Decimal(19, 2)	N		The external payer's total payment for the group of claims that the 835 for the outbound claim is contained in
FFSPProviderID	Vchar(9)	N		Not populated
FFSClaimID	Vchar(13)	N		Not populated
SubmitterID	Int	N		IS internal ID for the submitter of the inbound claim
ClaimSubmittersIdentifier	Vchar(38)	Y	Rpt_DMHClaim.SubmitterClaimID Rpt_Service.Claim Number	IS internal ID for the inbound claim
ClaimKey	GUID	Y	Rpt_DmhCLaim.ClaimKey	IS Internal ID for the inbound claim
835CLP02	Int	N		835 Remit Status returned by the external payer for the outbound claim
OutboundClaimID	Vchar(38)	N		Outbound Claim ID sent in the outbound claim to the payer
DateCreated	DateTime	N		Date the payer record was created
DateUpdated	DateTime	N		Date the payer record was last updated
ServiceUnitType	Vchar(4)	N		Indicates the unit type for the unit quantity billed on the inbound claim
ServiceUnitCount	Decimal(9,2)	N		Indicates the number of units billed on the inbound claim

Column Name	Type	Reqd	Foreign Key	Description
EOBProcessed	Char(1)	N		Not populated
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.
AdjudicationDate	DateTime	N		The adjudication date of the other payer that is returned in the payers' 835 received & processed by the IS. Any claims that existed prior to implementation of SD II will not be populated except for the following: For Medi-Medi claims that were still Forwarded to Medicare at time of implementation of SD II will have the Adjudication date set to the submit date of the inbound claim
PayerClaimID	VChar(80)			The internal claim id of the payer that is returned in the payers 835 received & processed in the IS. Any claims that existed prior to implementation of SD II will not be populated

# rpt\_ProcedureCode

<b>Description</b>	Contains list of procedure codes. This is a direct copy from the IS Repository
<b>Primary IS Repository Source Tables</b>	hrp_ProcedureCode
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository_6 Transform Data Task: rpt_ProcedureCode

Column Name	Type	Reqd	Foreign Key	Description
ProcedureID	Int	Y		Unique IS internal ID for the procedure
Code	Vchar(50)	Y		Code for the procedure
Modifier1	Vchar(10)	N		First modifier for the procedure If the value is '*' any modifier can be used
Modifier2	Vchar(10)	N		Second modifier for the procedure If the value is '*' any modifier can be used
Modifier3	Vchar(10)	N		Third modifier for the procedure If the value is '*' any modifier can be used
Modifier4	Vchar(10)	N		Fourth modifier for the procedure If the value is '*' any modifier can be used
PlaceofService	Vchar(10)			Place of service for the procedure If the value is '*' any place of service can be used
Description	Vchar(100)	Y		Description of the procedure
HIPAA_Unit	Char(2)	Y		Defines the appropriate unit type accepted for procedure
MinuteConvQty	Int	N		Number of minutes equating to the unit type defined
FFSMaxUnits	Int	N		Maximum # of units allowed for the procedure. Applies to FFS claims only
MinTime	Int	N		Minimum time for the procedure
MaxTime	Int	N		Maximum time for the procedure
ActiveDate	DateTime	Y		Earliest date the procedure is active
InactiveDate	DateTime	N		Last date the procedure is active
DateCreated	DateTime	Y		Date and time the procedure record was created
DateUpdated	DateTime	Y		Date and time the procedure record was last updated
ClaimBaseRate	Char(1)	N		Determines if the base rate should be used as the claim and contract amount.

Column Name	Type	Reqd	Foreign Key	Description
				'Y' – Claim/contract amount = rate 'N' – Claim/Contract amount = rate * units

# rpt\_ProviderAltID

<b>Description</b>	Contains records for various Identifiers that a provider may have. All the records for the IS Repository are included
<b>Primary IS Repository Source Tables</b>	hrp_ProviderAltID
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository (First connection) Transform Data Task: rpt_ProviderAltID

Column Name	Type	Reqd	Foreign Key	Description
ID	Int	N		IS internal ID for the provider's alternate ID
ProviderID	Int	N	Rpt_LegalEntity.ProviderID Rpt_PayToProvider.ProviderID Rpt_BillingProvider.ProviderID Rpt_ServiceLocation.ProviderID Rpt_RenderingProvider.ProviderID	IS internal ID for the Provider
IDQualifier	Vchar(10)	N		Valid Values: ID: Medicaid provider number SV: Service ID 46: Electronic Submission ID FI: Federal Taxpayers ID 34: SSN MC: Medicaid provider number HPI: HCFA National Provider ID UP: Provider UPIN Number N5: Provider Plan Network ID  NOTE: Based on changing DMH business rules, not all of the values in these fields are used by the system or are valid at this level. For example 'MC' Medicaid provider number is not used for FFS Medi-Cal ID as the FFS values are based on service location association.  However values remain as they may be added via Maintain Provider and they

Column Name	Type	Reqd	Foreign Key	Description
				allow flexibility depending on DMH and/or HIPAA requirements
AlternateID	Vchar(62)	N		Value associated with the ID qualifier.
ActiveDate	Date/time	N		Starting date that the alternate ID is valid.
InactiveDate	Date/time	N		Ending date that the alternate ID is valid.
LastUpdatedBy		N		User that last updated the record
DateCreated		N		Date & Time that the record was created
DateUpdated		N		Date & time that the record was last updated
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_ProviderContractedPlan

<b>Description</b>	Contains plans assigned to billing providers. Plans are by fiscal year
<b>Primary IS Repository Source Tables</b>	hrp_Provider is_ServiceRate is_ServiceRateDetail is_DMHPlan
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository (First connection) Transform Data Task: rpt_ProviderContractedPlan

Column Name	Type	Reqd	Foreign Key	Description
BillingProviderID	Int	Y	Rpt_BillingProvider.ProviderID	IS Internal ID for a billing provider
BillingProviderName	Vchar(62)	Y		Name for the billing provider Format: If provider has a first name format is: 'Last Name , First Name' If provider does not have a first name format is: 'Value in Reporting Unit field, Last Name'
BillingProviderType	Char(1)	N		Identifies the organization type for the billing provider
RptUnit	Char(5)	N		Identifies the provider number for the billing provider
PlanID	Int	Y		The identifier for the plan assigned to the billing provider
PlanName	VChar(30)	Y		The name of the plan assigned to the billing provider
PayerID	Int	Y		IS Internal ID for the payer of the plan.
PayerName	Vchar(35)	Y		Name for the payer of the plan
FiscalYear	Char(5)	Y		The fiscal year for which the plan has been assigned to the billing provider
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_ProviderLicense

<b>Description</b>	Contains taxonomy and license values for a provider. As a provider may have multiple taxonomies there is one record per taxonomy.
<b>Primary IS Repository Source Tables</b>	hrp_ProviderTaxonomy hrp_Provider hrp_ProviderInstance hrp_Taxonomy
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository (First connection) Transform Data Task: rpt_ProviderLicense

Column Name	Type	Reqd	Foreign Key	Description
ProviderLicenseID	Int			IS internal ID for the provider taxonomy record which contains the provider license value
RenderingProviderInstanceID	Int	Y		
RenderingProviderID	Int	Y	Rpt_RenderingPr ovider.ProviderID	IS Internal ID for a Rendering Provider
RenderingProviderNameLast	Vchar (35)	Y		Last name of the Rendering Provider
RenderingProviderNameFirst	Vchar (25)	N		First name of the Rendering Provider
RenderingProviderNameMid	Vchar (25)	N		Middle name of the Rendering Provider
Taxonomy	Vchar (15)	Y		Taxonomy code assigned to the Rendering Provider
TaxonomyDescription	Vchar (40)	Y		Taxonomy description assigned to the Rendering Provider
License	Vchar (20)	N		License value of the Rendering Provider
ActiveDate	DateT ime	Y		Starting date that the provider's taxonomy and license are active
ExpirationDate	DateT ime	N		Ending date that the provider's taxonomy and license are active
LegalEntityNumber	Vchar (10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_RenderingProvider

<b>Description</b>	Contains records for providers set as Rendering Providers in the IS. Only the non-deleted, non-retired providers that have an association to at least one service location are included. As a rendering provider may have associations to multiple service locations, there is one record per association.
<b>Primary IS Repository Source Tables</b>	hrp_Provider – where RenderingFlag = 'Y' hrp_Contact hrp_ProviderInstance hrp_ProviderInstanceAttributes
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository (First connection) Transform Data Task: rpt_renderingProvider

Column Name	Type	Reqd	Foreign Key	Description
ProviderInstanceID	Int	Y		IS internal ID for the rendering provider's association to a service location
ProviderID	Int	Y		IS internal ID for the Rendering Provider
StaffCode	Vchar(10)	N		DMH assigned ID for the Rendering Provider
ProviderName	Vchar(62)	Y		Name of the Rendering Provider Format: If Rendering Provider has a first name format is: 'Last Name , First Name' If Rendering Provider does not have a first name format is: 'Last Name'
ProviderNameLast	Vchar(35)	Y		Last name of provider
ProviderNameFirst	Vchar(25)	N		Last name of provider
ProviderNameMid	Vchar(25)	N		Last name of provider
AttendingFlag	Char(1)	N		Indicates if the provider is Attending or not. NOTE: This field is not maintained by the IS, therefore its setting should not be used
Language	Vchar(512 )	N		Language of the provider
DEAId	Vchar(10)	N		DEA Identifier for the provider
DEAExpireDate	DateTime	N		DEA expiration date for the provider
FTE	Vchar(10)	N		FTE for the provider
FfsID	Vchar(10)	N		FFS ID for the provider. This is the providers ID at the service location
FfsMedi-CalID	Vchar(6)	N		FFS Medi-Cal ID for the provider. This is the providers ID at the service location

Column Name	Type	Reqd	Foreign Key	Description
ActiveDate	Date/time	Y		Starting date for the rendering provider's association to the service location.
InactiveDate	Date/time	N		Ending date for the rendering provider's association to the service location.
Address1	Vchar(50)	N		Address1 of the provider
Address2	Vchar(50)	N		Address2 of the provider
City	Vchar(50)	N		City of the provider
State	Vchar(15)	N		State of the provider
PostalCode	Vchar(10)	N		Postal Code of the provider
Country	Vchar(10)	N		Country of the provider
Telephone	Vchar(10)	N		Telephone of the provider
Fax	Vchar(10)	N		Fax of the provider
Email	Vchar(30)	N		Email of the provider
ServceLocationProviderID	Int	Y	Rpt_ServiceLocation.ProviderID	IS Internal ID for the Service Location that the Rendering Provider is associated to
ServceLocationName	Vchar(62)	Y		Name for the Service Location that the Rendering Provider is associated to Format: If Service Location has a first name format is: 'Last Name , First Name' If Service Location does not have a first name format is: 'Value in Reporting Unit field on UI, Last Name'
BillingProviderID	Int	Y		Not populated (always set to 0)
BillingProviderName	Vchar(62)	Y		Not Populated (always set to 'BillingProviderName')
GenActiveDate	DateTime	N		Starting date when the Pay To Provider is authorized to provide service
GenInactiveDate	DateTime	N		Ending date when the Pay To Provider is authorized to provide service.
PPIN	Vchar(10)	N		Medicare PPIN for the Rendering Provider. This is the provider's ID at the service location
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_RuleFailClaims

<b>Description</b>	Contains inbound claims that failed IS Rules but are not in rpt_DMHClaim. These claims could not be populated in rpt_DMHClaim because basic data is invalid.
<b>Primary IS Repository Source Tables</b>	cln_ServiceInstance hrp_Provider hrp_ProviderInstance is_RulesErrorCode is_Code
<b>DTS Load Package</b>	Name: IS_REPOSITORY_LoadRpt_RuleFailClaims Connection: Hipaa Transform Data Task: rpt_RuleFailClaims

Column Name	Type	Reqd	Foreign Key	Description
ClaimKey	GUID	Y		IS Internal ID for the community service additional staff record
ClaimID	Vchar(38)	Y		Submitter Claim ID from 2300-CLM01 of the 837
SubscriberID	Vchar(50)	N		Subscriber's ID sent in 2010BA_NM109. This may be a DMH ID
SubscriberLastName	Vchar(35)	N		Subscriber's last name. Populated if the Subscriber ID is an existing client DMH ID
SubscriberFirstName	Vchar(35)	N		Subscriber's last name. Populated if the Subscriber ID is an existing client DMH ID
PayToProvID	Int	N		IS Internal ID for the Pay to Provider of the claim.
PayToProvName	Vchar(60)	N		Name of the Pay To provider. Populated if the Pay To Provider ID exists in the IS
BillingProvID	Int	Y		IS Internal ID for the Billing provider of the claim.
BillingProvName	Vchar(60)	N		Name of the Pay To provider. Populated if the Billing Provider ID exists in the IS
ServiceLocProvID	Int	N		IS Internal ID for the Service Location provider of the claim.
ServiceLocName	Vchar(60)	N		Name of the Service Location provider. Populated if the Service Location ID exists in the IS
RenderingProvID	Int	N		IS Internal ID for the Rendering provider of the claim.
RenderingProvName	Vchar(60)	N		Name of the Rendering provider. Populated if the Service Location ID exists in the IS
Status	Vchar(30)	Y		Status of the claim
RuleFail	Vchar(30)	N		Code for the rule failure

Column Name	Type	Reqd	Foreign Key	Description
RuleFailDesc	Vchar(150)	N		Description of the rule failure
SubmitDate	DateTime	Y		Date the claim was submitted. For claims submitted via EDI and Admin this is the date in BHT_04. For claims submitted from Clinical, this is the date the claim was submitted.
ServiceDateBegin	DateTime	Y		Starting service date of the claim
ServiceDateEnd	DateTime	Y		Ending service date of the claim
OrgType	Vchar(30)	N		Organization type of the claim
DateCreated	DateTime	Y		Date the service record was created.
DateUpdated	DateTime	Y		Date the service record was updated.
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_Service

<b>Description</b>	Contains information for each instance of a service. Contain services that have and have not been submitted for claiming. Does not contain services that are voided, deleted or the provider is retired. NOTE: There are multiple instances for a service when the service is resubmitted/voided.
<b>Primary IS Repository Source Tables</b>	cln_Service cln_ServiceInstance cln_Client cln_Episode hrp_Provider hrp_ProviderInstance is_Code hrp_ProcedureCode
<b>DTS Load Package</b>	Name: IS_REPOSITORY_ServiceStaging Connection: SQL Server 3 Transform Data Task: rpt_Service

Column Name	Type	Reqd	Foreign Key	Description
ClinicalServiceID	GUID	Y		IS Internal ID for the service instance record
ClientID	Vchar(35)	N	Rpt_Client.CientID	DMH ID for the client of the service instance. Leading zeros are populated
NameLast	Vchar(50)	N		Last Name for the client of the service instance
NameFirst	Vchar(50)	N		First Name for the client of the service instance
ClaimNumber	Vchar(50)	N	Rpt_DMHClaim.SubmitterClaimID	Submitter claim ID for the service instance. This is the inbound claim id
ServiceDate	DateTime	Y		Starting service date of the service instance
ServiceEndDate	DateTime	N		Ending service date of the service instance
ProcedureCode	Vchar(50)	N		Code for the procedure of the service instance
ProcedureDescription	Vchar(255)	N		Description for the procedure of the service instance
CollateralFamily	Int	N		The number of collateral for the service instance
CollateralNonFamily	Int	N		The number of non-family collateral for the service instance No longer populated
MinutesTotal	Int	N		Total units spent for the service instance. Depending on the procedure this may be in minutes, units or days
MinutesFacetoFace	Int	N		Face to face time for a service instance
MinutesOther	Int	N		Other time (non-face to face) time for a service instance
TelephoneService	Bit	N		Indicates if the service instance was performed via telephone

Column Name	Type	Re qd	Foreign Key	Description
Ward	Vchar(50)	N		Indicates the ward for the service instance.
RenderingProviderInstanceID	Int	N		IS internal ID for the Rendering Provider's association to the service location of the service instance
RenderingProviderID	Int	N	Rpt_RenderingProvider.ProviderID	IS internal ID for the Rendering Provider of the service instance
RenderingProviderNameLast	Vchar(35)	N		Last name for the Rendering Provider of the service instance
RenderingProviderNameFirst	Vchar(25)	N		First name for the Rendering Provider of the service instance
ServiceLocationID	Int	N	Rpt_ServiceLocation.ProviderID	IS internal ID for the Service Location of the service instance
ServiceLocationName	Vchar(62)	N		Name for the Service Location of the service instance. Format: If Service Location has a first name format is: 'Last Name , First Name' If Billing Provider does not have a first name format is: 'RU, Last Name'
ClinicalEpisodeID	GUID	Y	Rpt_Episode.ClinicalEpisodeID	IS internal ID for the episode of the service instance
FacilityTypeCode	Vchar(255)	N		
SubmittingUser	Vchar(50)	N		User that submitted the service instance
GroupSessionID	GUID	N		IS internal ID for the group session that the service was performed
SubmissionStatus	Vchar(15)	N		Status of the service instance
DateCreated	DateTime	N		Date the service instance was created
DateUpdated	DateTime	N		Date the service instance was last updated
ProcedureID	Int	N	Rpt_ProcedureCode.ProcedureID	IS internal ID for the procedure of the service instance
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.
SDPhaseIIFlag	Int	N		Indicate if the claim is for SD phase II 0 – Phase I claim 1 – Phase II claim

# rpt\_ServiceLocation

<b>Description</b>	Contains records for providers set as Service Locations in the IS. Only the non-deleted records that have an association record to a billing provider are included.
<b>Primary IS Repository Source Tables</b>	hrp_Provider – where ServicLocFlag = 'Y' hrp_Contact hrp_ProviderInstance
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository (First connection) Transform Data Task: rpt_servicelocation

Column Name	Type	Reqd	Foreign Key	Description
ProviderID	Int	Y		ID Internal ID for the legal entity provider
ProviderName	Vchar(62)	Y		Name of the Pay To Provider Format: If Service Location has a first name format is: 'Last Name , First Name' If Service Location does not have a first name format is: 'RU, Last Name'
ActiveDate	Date/time	Y		Starting date for the Service Location's association to the billing provider. This date is the start date set with the most recent Inactive Date.
InactiveDate	Date/time	N		Most recent ending date for the Service Location's association to the billing provider
ServiceType	Char(1)	N		Identifies the service type of the provider
RptUnit	Vchar(5)	N		Value assigned by DMH in the IS Reporting Unit Field on the Maintain Provider UI. For Service Location's this is typically a 5 character value (e.g. '1904A') where the first 4 digits identify the billing provider number
BusinessUnit	Vchar(20)	N		Identifies the business unit of the provider..
CensusTract	Vchar(15)	N		Identifies the census tract of the provider.
ContactName	Vchar(50)	N		Contact Name for the provider
Address1	Vchar(50)	N		Address1 of the provider
Address2	Vchar(50)	N		Address2 of the provider
City	Vchar(50)	N		City of the provider
State	Vchar(15)	N		State of the provider
PostalCode	Vchar(10)	N		Postal Code of the provider
Country	Vchar(10)	N		Country of the provider
Telephone	Vchar(10)	N		Telephone of the provider

Column Name	Type	Reqd	Foreign Key	Description
Fax	Vchar(10)	N		Fax of the provider
Email	Vchar(30)	N		Email of the provider
PublicSchool	Char(1)	N		Indicates of the provider is a Public School
Satellite	Char(1)	N		Indicates of the provider is a Satellite
BillingProviderID	Int	Y	Rpt_BillingProvider.ProviderID	IS Internal ID for the Billing Provider that the Service location is associated to
BillingProviderName	Vchar(62)	Y		Name for the Billing Provider that the Service location is associated to Format: If Service Location has a first name format is: 'Last Name , First Name' If Service Location does not have a first name format is: 'Value in Reporting Unit field on UI, First Name'
GenActiveDate	DateTime	N		Starting date when the Pay To Provider is authorized to provide service
GenInactiveDate	DateTime	N		Ending date when the Pay To Provider is authorized to provide service.
Mode	Char(2)	N		Identifies the mode of service that the provider can perform.
MCMMode	Char(2)	N		Medi-Cal mode that drives the activity code crosswalk. Valid values: '12' or '18'
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_ServiceStaff

<b>Description</b>	Contains information for each non-deleted additional staff recorded on an instance of a service. This does not contain the main rendering provider that the instance of the service is recorded against. Note that for each instance of a service, the additional staff may change.
<b>Primary IS Repository Source Tables</b>	cln_ServiceInstStaff cln_ServiceInstance hrp_Provider hrp_ProviderInstance
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository_3 Transform Data Task: rpt_ServiceStaff

Column Name	Type	Reqd	Foreign Key	Description
ClinicalServiceStaffID	GUID	Y		IS Internal ID for the service staff record
ClinicalServiceID	GUID	Y	Rpt_Service.ClinicalServiceID	IS internal ID for the service instance
RenderingProviderInstID	Int	Y	Rpt_RenderingProvider.ProviderInstanceID	IS internal ID for the additional staff's association to a service location
RenderingProviderID	Int	Y	Rpt_RenderingProvider.ProviderID	IS internal ID for the additional staff
RenderingProviderNameLast	Vchar(35)	N		Last name of the additional staff
RenderingProviderNameFirst	Vchar(25)	N		First name of the additional staff
Minutes	Int	Y		The number of minutes that the additional staff spent on the service instance
LegalEntityNumber	Vchar(10)	N		Value assigned by DMH/MHMIS to identify legal entities.

# rpt\_PayerAdjustment

<b>Description</b>	Contains external payer adjustment and remark codes returned in their 835s for an outbound claim. There may be multiple adjustment and remark codes returned in an 835
<b>Primary IS Repository Source Tables</b>	is_COBAdjustment cln_ServiceInstPayer is_PayerClaim
<b>DTS Load Package</b>	Name: IS_REPOSITORY_Staging Connection: Clinical_Repository_2 Transform Data Task: rpt_PayerAdjustments

Column Name	Type	Reqd	Foreign Key	Description	IS Repository Source
PayerClaimNumber	Int	Y		IS internal ID for the outbound claim to a payer (e.g. Medi-cal, Medicare)	Is_PayerClaim.OutboundISClaimID Where is_PayerClaim.ClaimKey = cln_ServiceInstPayer.ClaimKey AND cln_ServiceInstPayer.ServiceInstPayerKey = is_COBAdjustment.ServiceInstPayerKey
Segment	Vchar(35)	Y		The 835 segment name that the adjustment or remark code was returned in	Is_CobAdjustment.Segment
Element1	Vchar(25)	N		Contains the 835 the adjustment reason group code or remark qualifier code returned in the 835	Is_CobAdjustment.Element1
Element2	Vchar(38)	N		Contains the 835 the adjustment reason code or remark code returned in the 835	Is_CobAdjustment.Element2
Element3	Int	N		Contains the 835 the adjustment amount returned in the 835	Is_CobAdjustment.Element3
DateCreated	DateTime	Y		Date the adjustment or reason was stored	Is_CobAdjustment.DateCreated

# rpt\_ServiceEBP

<b>Description</b>	Contains non-deleted Evidence Based Practice information for an instance of a service. There may be many EBP records per service instance
<b>Primary IS Repository Source Tables</b>	cln_ServiceInstEBP is_Code
<b>DTS Load Package</b>	Name: IS_REPOSITORY_ServiceStaging Connection: SQL Server 3 Transform Data Task: rpt_serviceEBP

Column Name	Type	Reqd	Foreign Key	Description	IS Repository Source
ID	GUID	N		IS internal ID for the service EBP record	Cln_ServiceInstEBP.ID
ClinicalServiceID			Rpt_Service.ClinicalServiceID Rpt_DMHClaim.ClaimKey	IS Internal ID for the service instance	Cln_ServiceInstEBP.ServiceInstKey
EBP				Code for the EBP of the service instance	Is_Code.Code where is_Code.ID = cln_ServiceInstEBP.EBPCode
DateCreated				Date the service instance EBP record was created	Cln_ServiceInstEBP.DateCreated
DateUpdated				Date the service instance EBP record was last updated	Cln_ServiceInstEBP.DateUpdated
LastUpdatedBy				User that last updated the service instance EBP record	Cln_ServiceInstEBP.LastUpdatedBy