DISCHARGE REFERRAL SUMMARY - CODING GUIDE

1. **Discharge Referral Summary (DRS) Treatment Center #**
Enter the four-digit Level I/II Treatment Center identification number for the clinic site at which the client received education or treatment services. Multiple clinic sites within the same program may have separate DRS Numbers. If the client was seen at multiple sites within a program, enter the DRS number of the site where the client received the majority of services.

2. **Agency’s License #**
The Agency License Number is the six-digit (4 digits, hyphen, 2 digits) number assigned to a facility/clinic by ADAD at the time of licensure/certification. For facilities/clinics with multiple locations, the first four digits may be identical, but the last two digits are unique numbers specific to individual locations or sites.

3. **Court Case #**
Alphanumeric, up to 12 characters in length possible.

4. **Judicial District**
Numeric, 2 in length. Only 1-22 applicable.

5. **Client Name**
Last Name – up to 40 alpha characters; double last names may include a hyphen or space; last names may have a space followed by “jr.” or “II” or some other designation.
First Name – up to 23 alpha characters; double first names may include a hyphen or space.
Middle Initial – only 1 alpha character; no hyphens, spaces or punctuation allowed. If client does not have a Middle Initial, leave this line blank.

6. **Client Date of Birth**
Enter the client’s date of birth in order of month (2 digits), day (2 digits), year (4 digits). Always enter leading zeros for months and days designated by a single digit.

7. **Level of Client Participation**
Check the box associated with the level of education and/or treatment in which the client participated or was court ordered to participate. If the client participated in both education and therapy, complete a single DRS to reflect both of these components. A DRS should be submitted upon the client’s completion of Level II Education only if the client was ordered to complete education only, is being discharged as non-compliant or is transferring to another clinic.

Enter the hours attended and the number of weeks the client was enrolled and attending each applicable level of care.

| Level I Education (12 hrs., minimum of 2 days) | Level II halfway house |
| Level II Education (24 hrs., 8-12 weeks) | Level II transitional residential tx |
| Level II non-intensive outpatient | Level II intensive residential tx |
| Level II intensive outpatient | Level II hospital based |
| Level II day treatment | Level II therapeutic community |

8. **Enter up to 4 adjuncts**

1 = Meds to reduce alcohol use  (Use this for all clients who are on monitored Disulfiram [Antabuse]. This is also used for clients who are taking Naltrexone or other approved drugs to reduce alcohol use.)
2 = Meds to reduce drug use   (Use this for all clients who take medications to reduce their use of illicit drugs [i.e., Naltrexone for Opioid use].)
3 = Random U.A.s/breath testing  (Use this code for all clients who are on a random schedule of urine screens for detecting legal or illegal drug use, or random schedule of breath tests to detect alcohol use.)
4 = VIP  (Use this code for all clients who are required to attend Victim Impact Panels such as Mother’s Against Drunk Driving [MADD].)
5 = Interlock  (Use this code for all clients who are required to install an interlock drive on their motor vehicle(s).)
6 = Electronic monitoring  (Use this code for all clients who are court ordered to comply with a home detention or other electronic monitoring system.)
7 = Support group  (Use this code for clients involved in AA, CA, NA, RR or other substance-abuse related support group program.)
8 = Opioid replacement therapy  (Use this code for all clients who take medications such as Methadone or LAAM.)
9 = Other  (Use this code for all clients who are required to participate in adjuncts not listed above.)

9. **Treatment Track Assigned**
There are four separate treatment tracks based on level of severity. Item may also be unknown or blank.

<table>
<thead>
<tr>
<th>TRACK</th>
<th>B.A.C. PRIORS</th>
<th>LENGTH OF TX</th>
<th>LENGTH OF TX</th>
<th>LENGTH OF L2 ED</th>
<th>COMBINED LENGTH OF L2 ED AND TX</th>
</tr>
</thead>
<tbody>
<tr>
<td>A:</td>
<td>.150-.199</td>
<td>5 months 21 weeks</td>
<td>42 hours</td>
<td>24 hours</td>
<td>7-8 months 66</td>
</tr>
<tr>
<td>B:</td>
<td>.20 or over</td>
<td>6 months 26 weeks</td>
<td>52 hours</td>
<td>24 hours</td>
<td>8-9 months 76</td>
</tr>
<tr>
<td>C:</td>
<td>under .20 1 or more</td>
<td>8 months 34 weeks</td>
<td>68 hours</td>
<td>24 hours</td>
<td>10-11 months 92</td>
</tr>
<tr>
<td>D:</td>
<td>.20 or over 1 or more</td>
<td>10 months 43 weeks</td>
<td>86 hours</td>
<td>24 hours</td>
<td>12-13 months 110</td>
</tr>
</tbody>
</table>

10. Client Status at Discharge

**Completed education/treatment**
Check if client completed all court-ordered education, and/or education/treatment. Do not check this item if client’s sentence includes both education and therapy but the client has completed the education component only.

**Transferred to Treatment Center #**
Check the line and write the treatment center number for the clinic to which the client is being transferred, along with the reason code. Do not use this for clients who have completed all requirements or who are continuing voluntarily.

**Other**
Check this option only when unusual circumstances occur that do not fit the other discharge status categories. An explanation code must be included.

**Did not completed education/treatment because**
Check this option if the client has not completed all required education and therapy. Enter one reason code for the client’s incomplete status.

**Reason Codes:**
1 = Inappropriate referral  
2 = Attendance  
3 = Attitude  
4 = Intoxicated  
5 = Fee payment  
6 = Other (hospitalized, charges dropped, enlisted, etc.)  
7 = Lack of Progress  
8 = Non-Coop with adjuncts  
9 = Moved  
0 = Died

11. Test Scores
Enter the client’s scores from the standardized pre- and post-tests. The pretest scores are to be entered by “AD” for both Parts 1 and 2. The Part 1 and Part 2 post-test scores are to be entered by “DIS”. The scores given for Part 1 must be between 1 and 20, and the scores given for Part 2 must be between 210 and 893.

12. Education/Treatment
The admission and discharge dates in order of month/day/year are required items. Do not discharge a client if you are attempting to get the client back into treatment. However, do not wait longer than 60 days after your last contact to discharge the client. The discharge date is the last date the client participated in education, treatment, or adjuncts to treatment. The discharge date must be equal to or greater than the admission date.

May 23, 2002