File Format for CalTOP Admission CA Transactions

Ref #	Business Name	Record Seq #	CalTOP Log Column Name	Valid Values	Good Record Male	Good Record Female
	Sender's Record Number	1	BATCH_UNIQUE_ID	Maximum 20 Bytes		
119	Transaction Type	2	TRANSACTION_TYPE	ADMCA	ADMCA	ADMCA
	Process Code	3	PROCESS_TYPE	1, 2, 3	1	1
8	CalTOP Client ID	4	CLN_ID	Number (10,0)	79	107
	County/Provider Client ID (File #)	5	FILE_NUMBER_ID	Maximum 13 Bytes		
290	Transaction ID	6	TRANSACTION_ID	Number (10,0)		
	Userid	7	CREATED_BY	Maximum 30 Bytes		
202	Provider ID	8	ADP_ID	Number (10,0)	10004	10004
120	Transaction Date	9	TRANSACTION_DATE	DATE (mm/dd/yyyy)	1/15/2001	2/15/2001
259	Date of Last Discharge-Drug program	10	LAST_TREATMENT_DATE	DATE (mm/dd/yyyy), -98	1/17/2001	2/17/2001
63	Wait List	11	WAIT_DAY	Whole number between 0 and 999	0	0
18	Primary Disability	12	DISABILITY_CODE1	NONE, VSN, HRNG, SPCH, MBL, MNTL, DVDS, OTHDS	NONE	NONE
19	Secondary Disability	13	DISABILITY_CODE2	NONE, VSN, HRNG, SPCH, MBL, MNTL, DVDS, OTHDS	NONE	NONE
20	Tertiary Disability	14	DISABILITY_CODE3	NONE, VSN, HRNG, SPCH, MBL, MNTL, DVDS, OTHDS	NONE	NONE
271	CADDS Transaction Type	15	TRANSACTION_CADDS_TYPE	INADMS, XFRCHG	INADMS	INADMS
243	Referral Source	16	REFERRAL_CODE	INDIV, AODCAR, OTHHCP, SCHOOL, EMPEAP, CRTCJ, STEP12, OTHCOM, SCRTCJ, SPAROL	INDIV	INDIV
27	CalWorks	17	CALWORKS	N, Y	N	N
64	Welfare to Work	18	WELFARE_WORK	N, Y	N	N
49	Perinatal Services	19	PERINATAL_SERVICE	N, Y	N	N
329	Perinatal Case Management	20	PERINATAL_CASE	N, Y	N	N
44	Medi-Cal	21	MEDI_CAL	N, Y	N	N
252	Locator Form	22	LOCATOR	N, Y	N	N
251	Consent Form	23	CONSENT_OBTAINED	N, Y	N	N
29	CoDependent	24	CODEPENDENT	N, Y	N	N
291	Case Management	25	ANCILLARY_CASE	N, Y	N	N
292	Child Welfare	26	ANCILLARY_CHILD_WELFARE	N, Y	N	N
294	Housing	27	ANCILLARY_HOUSING	N, Y	N	N
297	Infant Programs	28	ANCILLARY_INFANT	N, Y	N	N
299	Other AOD Programs	29	ANCILLARY_OTHER_AOD	N, Y	N	N
295	Parent Education	30	ANCILLARY_EDUCATION	N, Y	N	N
298	Public Assistance	31	ANCILLARY_ASSISTANCE	N, Y	N	N
296	Self-Help Programs	32	ANCILLARY_SELFHELP	N, Y	N	N

File Format for CalTOP Admission CA Transactions

Ref #	Business Name	Record Seq #	CalTOP Log Column Name	Valid Values	Good Record Male	Good Record Female
293	Vocational Education	33	ANCILLARY_VOCATION	N, Y	N	N
300	Other Service	34	ANCILLARY_OTHER_SERVICE	N, Y	N	N
255	Ancillary Services - Other	35	ANCILLARY_OTHER_SPECIFIED	Up to 50 bytes		
28	Chronic Mental Problem	36	CHRONIC_MENTAL	N, Y	N	N
54	Meds Presecribed for AOD	37	PRESCRIBED_MEDS	NONE, MDLAAM, OTH	NONE	NONE
312	Number of Prior Episodes	38	PRIOR_TREATMENT_NUM	Whole number between 0 and 9	0	0
46	Needles- 12 Months	39	NEEDLE_USED	N, Y	N	N
130	Legal Status	40	LEGAL_STATUS_CODE	NA, PARCDC, PAROTH, PROBAT, DVERSN, INCARC	NA	NA
	Funding Source	41	FUNDING_SOURCE	PSN, FOTP, NA	NA	NA
38	Female Parolee Priority	42	FEMALE_PAROLEE	DIRECT, AFTER, PAROLE, NA	NA	NA