



LACDMH | Chief Information Office Bureau (CIOB)

Integrated Behavioral Information Systems (IBHIS)

Client Service

Companion Guide

Version 3.4.2

09/18/2020

### **Disclosure Statement**

This document represents the Los Angeles County Department of Mental Health (LACDMH) implementation instructions for Client Service (web services). This document specifies the required operation workflow, and data elements along with associated restrictions to exchange data electronically with LACDMH. LACDMH reserves the right to modify and change the document at any time. LACDMH will disseminate the information in a timely manner, should there be any change to this document.

### Revision and Sign-off Sheet

#### Version History

Date	Author	Version	Change Reference
07/15/2013	LACDMH Integration Team	1.0	Initial Release
09/16/2020	LACDMH Integration Team	3.4.2	Latest Release

#### Reviewers

Name	Version Approved	Position	Date
Juan Fermin	3.4.2	IT Manager	09/18/2020

#### Distribution

Name	Position
Trading Partners and their IT vendors	N/A

#### Document Properties

Item	Details
Document Title	LAC DMH Client Service Companion Guide v 3.4.2
Author	LAC DMH Integration Team
Creation Date	July 15, 2013
Last Updated	September 18, 2020

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# A. INTRODUCTION

## A.1 BACKGROUND

Los Angeles County Department of Mental Health (LACDMH) provides behavioral health services to Los Angeles County clients in partnership with contracted Legal Entities (LEs) and Fee-For-Service (FFS) Mental Health Providers also known as Contracted Providers or Trading Partners (TPs). Currently, TP representatives directly access the LACDMH’s Integrated System (IS) to capture clinical, financial, and administrative data related to the clients they serve. This typically results in redundant manual effort for TPs, as they maintain similar data sets in their respective Electronic Health Record (EHR) systems. With the implementation of the LACDMH Client Service of Integrated Behavioral Health Information System (IBHIS), TPs have the opportunity to directly exchange information with IBHIS in a business-to-business (b2b) Electronic Data Interchange (EDI) model. Through this, they can streamline care coordination and improve data exchange.

## A.2 PURPOSE

The purpose of this guide is to describe the IBHIS Client Service interface and associated workflows. It is intended for LACDMH’s TPs and their respective IT vendors to integrate with Client Service from their respective EHR systems. This companion guide describes interface operations, workflows, business cases, required data and relevant error message information processed through Client Service.

## A.3 OVERVIEW

This guide assumes the reader has a working understanding of web service technology including but not limited to the open protocols and standards such as SOAP, WSDL, XSD, etc. for exchanging data electronically between applications or systems. This guide also assumes the reader has a working knowledge of user authentication using x.509 certificates, PKI exchange, Certificate Authority and third party validation authority.

The LACDMH Client Service supports the following operations to facilitate information exchange between IBHIS and TPs’ EHR systems:

SearchClient	UpdateClientFinEligibility	GetClientDiagnosis
AdmitNewClient	DischargeClient	GetClientDiagnosisHistory
AdmitExistingClient	GetClientDetails	GetClientActiveEpisode
CreateClientCSI	GetClientCSI	GetClientEpisodeHistory
CreateClientUMDAP	GetClientUMDAPDetails	AddCSI
CreateClientPregnancy	GetClientPregnancyDetails	SearchCSI
CreateClientDiagnosis	GetDCFSServiceHistory	GetCSI
UpdateClientDetails	GetPublicGuardianServiceHistory	UpdateCSI
UpdateClientUMDAP	GetClientFinancialEligibility	DeleteCSI
UpdateClientPregnancy	GetClientServiceHistory	
UpdateClientDiagnosis	GetClientLegacyServiceHistory	

This Guide describes service operations and their related data elements and/or attributes. Each operation is listed in a table based on the example below. There are two types of actions – Request and Response. The Request action indicates what LACDMH will be expecting as “Input”. The Response action indicates what LACDMH will be returning as “Output”. The remaining columns are intended to provide usage direction for the data attributes listed.

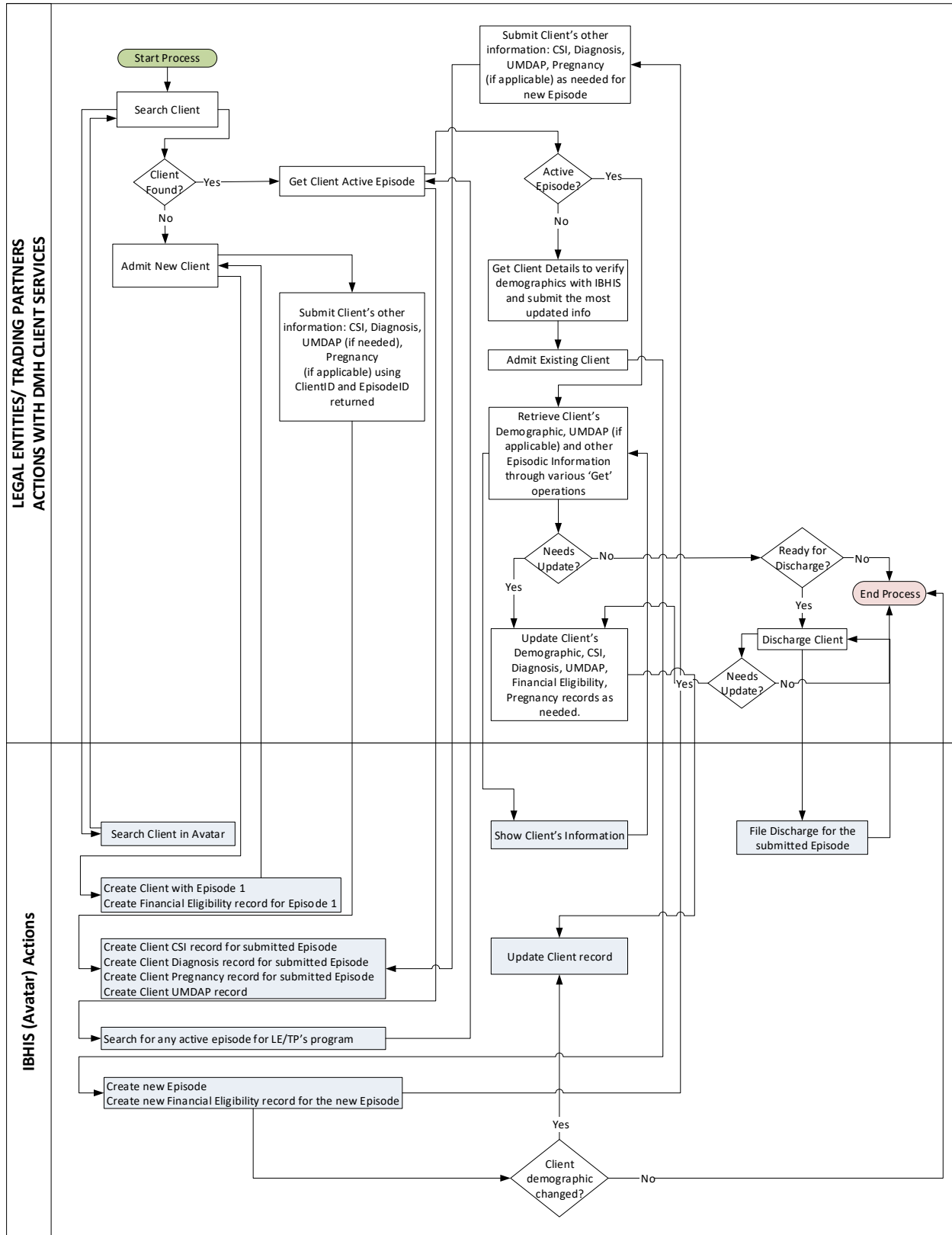
The following table describes Requests:

<b>Operation Name REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>This column provides the Name of the data attribute as it appears in the Service Operation.</b>	This column states whether the data attribute is Required (R), Conditionally Required (CR) or Optional (O).	This column notes the expected data type of the value being submitted (e.g. String, Date, Time, Enumeration, Integer) and if there’s any format enforced such as date field YYYY-MM-DD.	This column notes the maximum length or fixed length allowed for the value being submitted.	When denoted, this column describes restrictions to be applied on any value being submitted—such as enforced format, allowed and disallowed characters and acceptable enumerated value sets.

The following table describes Responses:

<b>Operation Name RESPONSE</b>		
<b>Data Attribute</b>	<b>Type &amp; Format</b>	<b>MaxL</b>
<b>This column provides the Name of the data attribute as it appears in the Web Service Operation.</b>	This column notes the data type of the value being returned (e.g. String, Date, Time, Integer); and if there’s any format enforced such as date field YYYY-MM-DD.	This column notes the maximum length allowed for the value being returned.

A.4 CLIENT SERVICE PROCESS WORKFLOW DIAGRAM:



## B. USE CASE & SERVICE OPERATIONS

This section describes the Client Service' operations and associated use cases.

Trading Partners begin interfacing with IBHIS by establishing an admission for clients in treatment. There are two admission types : New Admissions and Existing Admissions.

**New Admission:** If a client has never been admitted in IBHIS, the client is considered a new admission and will need to be admitted into the system. TPs can perform this action by submitting *AdmitNewClient* operation. A client record will then be created to assign an identifier to the client. Since each client-admission in IBHIS is episodic, a new episode will also be created for the calling party's program.

**Existing Admission:** When a client exists in IBHIS, but there are no active episode for the TP, then the TP can perform an *AdmitExistingClient* operation, which creates a new episode for the calling party's program in IBHIS.

Each episode needs the following information to complete the client record:

- CSI
- Diagnosis
- UMDAP
- Financial Eligibility
- Pregnancy (if applicable)

TPs can create or update (as needed) this information as appropriate for each episode. The TPs' electronic health record system (EHR) is expected to capture and transmit both the required and optional data. Since most of these domains are episode dependent, an Episode ID is needed for most of the *Create*, *Update* and *Get* operations.

### Episode ID

When a new client or an existing client is admitted to IBHIS to a program, an active episode is generated for the client under the TP's calling program and is indicated by a numeric value. The EpisodeID returned from *Admit* operation will be required to create, retrieve and update other information related to the client's admission such as CSI, Financial Eligibility, Diagnosis, Pregnancy (for female clients) etc.

The next series of sections describe the various business domains and related Client Service operations in detail. Each sub-section describes Use case, pre-condition(s), web service operations with data attributes and any notes to follow.

## B.1 Client Search

**Definition:** Client look up in IBHIS based on certain search criteria.

**Use Case:** Trading Partner (TP) needs to search for a client using demographics or ID to verify if the client exists in IBHIS.

**Web Service Action:** Client Service offers *SearchClient* operation which allows TPs to search for a client in IBHIS as follows:

- *Search by Client ID*
- *Client First Name, Client Last Name and Gender*
- *Client First Name, Client Last Name, Gender and Date of Birth*
- *Client First Name, Client Last Name, Gender and Social Security Number*
- *Alias name or Alias ID (Numeric ID)*
- *By providing values in all data attributes*

**Precondition:** TP is authenticated.

**Search by Client ID:** It will return one exact match if there is an existing client in IBHIS with that Client ID. Otherwise, search results will return in order of most probable match to least likely. A score accompanies each result.

A higher score indicates a closer match.

**Client Name:** When searching by Names—the combination of Client First Name and Client Last Name should not exceed 39 characters.

The following sections describe the input and output of the operation. Any empty data attribute will be omitted in the Output.

### B.1.1 SEARCHCLIENT\_INPUT

Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	O	String	9	Must contain a numeric value.
ClientFirstName	CR When searched with Last Name and Gender	String	38	Alpha and the following special characters are allowed hyphen (-), apostrophe (') and space ( ).
ClientLastName	CR When searched with First Name and Gender	String	38	Alpha and the following special characters are allowed hyphen (-), apostrophe (') and space ( ).
DateOfBirth	O	Date YYYY-MM-DD	10 Fixed length	Format enforced.
SocialSecurityNumber	O	String XXXXXXXX XXXXXXXXP XXXXXXXXQ	9 Fixed length	First 8 characters have to be numeric. Ninth character can be numeric or P or Q.
Gender	CR When searched with First Name and Last Name	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .

Data Attribute	Required	Type & Format	MaxL	Restriction
Alias	O	String	80	Numbers, alpha and the following special characters are allowed hyphen (-), apostrophe (') and space ( ).
SubscriberClientIndex Number	O	String	9	<ul style="list-style-type: none"> <li>• Must contain exactly 9 characters.</li> <li>• Must start with a '9'.</li> <li>• Must contain 8 numeric digits.</li> <li>• Must end with an alpha character of:</li> <li>• 'A', 'C' through 'H', 'M', 'N', or 'S' through 'Y'.</li> </ul>

**B.1.2 SEARCHCLIENT\_OUTPUT**

Data Attribute	Type & Format	MaxL
ClientID	String	9
ClientPrefix	String	3
ClientFirstName	String	38
ClientMiddleInitial	String	1
ClientLastName	String	38
ClientSuffix	String	3
DateOfBirth	Date YYYY-MM-DD	10
StreetAddress1	String	40
StreetAddress2	String	40
City	String	20
State	String	2
Alias	String	80
Gender	String	1
SocialSecurityNumber	String XXXX or XXXP or XXXQ (Note: Only last four digits will be returned.)	4
Score	Integer	3

**B.1.3 DATA ATTRIBUTE DESCRIPTION**

Data Attribute (In alphabetical order)	Description
Alias	Other name(s) or any alias ID stored as an Alias.
City	US city where client's address is located.
ClientFirstName	Self-descriptive.
ClientID	DMH unique client identifier in IBHIS.
ClientLastName	Self-descriptive.
ClientMiddleInitial	First letter of client's middle name.
ClientPrefix	Self-descriptive.



Data Attribute <i>(In alphabetical order)</i>	Description
ClientSuffix	Self-descriptive.
DateOfBirth	Self-descriptive.
Gender	Self-descriptive.
Score	Each field in the SearchClient operation contributes a value in order to calculate the 'Score' returned by the call. ClientID and Social Security Number contribute the highest value of '100'. Alias 75; ClientLastName 50; ClientFirstName, DateOfBirth (Month/Day) 25; Gender and DateOfBirth (Year) 15. The output result shows a score based on the number of items matched from the input. Example: A search is done by entering ClientFirstName, ClientLastName, Gender, SSN and the system found no match by First Name + Last Name + Gender + SSN; but found a match by SSN + Gender; then the score will be 100+15 = 115.
SocialSecurityNumber	Self-descriptive.
State	US state where client's address is located.
StreetAddress1	Street information of client's address.
StreetAddress2	Additional street address information such as building/apartment/house/unit/suite number.
SubscriberClientIndexNumber	Client's MediCal number (AKA CIN number).

**B.1.4 XML STRUCTURE OF SEARCHCLIENTREQUEST**

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:SearchClient_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <Client ClientID="?" ClientFirstName="?" ClientLastName="?" DateOfBirth="?" SocialSecurityNumber="?"
Gender="?" Alias="?"/>
    </ns:SearchClient_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

**B.1.5 XML STRUCTURE OF SEARCHCLIENTRESPONSE**

```
SUCCESSFUL:
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:SearchClient_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Process completed successfully."/>
      <Clients>
        <Client ClientID="" ClientFirstName="" ClientMiddleInitial="" ClientLastName="" DateOfBirth=""
StreetAddress1="" StreetAddress2="" City="" State="" Alias="" Gender="" SocialSecurityNumber="" Score=""/>
      </Clients>
    </ns0:SearchClient_Output>
  </s:Body>
</s:Envelope>
UNSUCCESSFUL:
See XML STRUCTURE OF UNSUCCESSFUL RESPONSE in Appendix.
```

## B.2 Episode Search

**Definition:**

When a client is admitted to IBHIS, the system creates an active episode for the admission under the TP’s Program. The active episode is indicated by a numeric value called EpisodeID. TPs need to store this EpisodeID returned by Admit operation since it will be needed to create, retrieve and update other information such as Demographics, CSI, Diagnosis, Financial Eligibility, etc. When a discharge is filed for a client in IBHIS, the active episode becomes non-active or Discharged Episode.

**Use Cases:**

- # 1: TP needs to verify if a client currently has an active episode in IBHIS under TP’s program and retrieve the active admission data.
- # 2: Client does not have an active episode under TP’s program in IBHIS. TP needs to look up historical episode information for the client across all programs to find out if the client ever had any episode under TP’s program.

**Web Service Action:**

Client Service offers following operations to meet the Use cases.

*GetClientActiveEpisode* for Use Case # 1

*GetClientEpisodeHist* for Use Case # 2

**Precondition:**

- TP is authenticated.
- Client exists in IBHIS.

**Notes:**

Limitation: All admission data can be retrieved except AdmissionTime.

The following sections describe the input and output of the operations. Any empty data attribute will be omitted in the output.

**B.2.1 GETCLIENTACTIVEEPISODE\_INPUT**

Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
ProgramOfAdmission	CR <i>For '24 Hour' admission episode</i>	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .

**B.2.2 GETCLIENTACTIVEEPISODE\_OUTPUT**

Data Attribute	Type & Format	MaxL
ClientID	String	9
EpisodeID	String	3
Program	String	6
AdmissionDate	Date YYYY-MM-DD	10
TypeOfAdmission	String	14
AdmittingStaffNPI	String	10
SourceOfAdmission	String	29

**B.2.3 GETCLIENTEPISODEHIST\_INPUT**

Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.

**B.2.4 GETCLIENTEPISODEHIST\_OUTPUT**

Data Attribute	Type & Format	MaxL
ClientID	String	9
EpisodeID	String	3
Program	String	6
AdmissionDate	Date YYYY-MM-DD	10
TypeOfAdmission	String	14
AdmittingStaffNPI	String	10
DateOfDischarge	Date YYYY-MM-DD	10
SourceOfAdmission	String	29

**B.2.5 DATA ATTRIBUTE DESCRIPTION**

Data Attribute <i>(In alphabetical order)</i>	Description
ClientID	DMH unique client identifier in IBHIS.
ProgramOfAdmission	Program identifier pertaining to the program ID of the Trading Partner (TP) admitted the client for treatment.
EpisodeID	IBHIS unique identifier assigned to an episode.
Program	Program ID of the TP.
AdmissionDate	Self-descriptive.
TypeOfAdmission	Self-descriptive.
AdmittingStaffNPI	NPI number of staff that admitted the client.
SourceOfAdmission	Source of Admission Code for a '24-Hour' episode.
DateOfDischarge	Self-descriptive.

**B.2.6. XML STRUCTURE GETCLIENTACTIVEEPISODEREQUEST**

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:typ="http://b2b.dmh.lacounty.gov/ews/EstablishClient/types">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetClientActiveEpisode_Input>
      <mes:MessageContextInput ProgramID=""/>
      <Client typ:ClientID="">
        <!--Optional:-->
        <Admission24Hour typ:ProgramOfAdmission=""/>
      </Client>
    </ns:GetClientActiveEpisode_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

### B.2.7 XML STRUCTURE GETCLIENTACTIVEEPISODERESPONSE

SUCCESSFUL:

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:GetClientActiveEpisode_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/ews/EstablishClient/201702"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Process completed successfully."/>
      <Client ClientID=""/>
      <Episodes>
        <Episode EpisodeID="" Program="" AdmissionDate="" TypeOfAdmission=" " AdmittingStaffNPI=""/>
      </Episodes>
    </ns0:GetClientActiveEpisode_Output>
  </s:Body>
</s:Envelope>
```

UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

### B.2.8 XML STRUCTURE GETCLIENTEPISODEHISTREQUEST

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetClientEpisodeHist_Input>
      <mes:MessageContextInput ProgramID=""/>
      <Client ClientID=""/>
    </ns:GetClientEpisodeHist_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

### B.2.9 XML STRUCTURE GETCLIENTEPISODEHISTRESPONSE

SUCCESSFUL:

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:GetClientEpisodeHist_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Process completed successfully."/>
      <Client ClientID=""/>
      <Episodes>
        <Episode EpisodeID="" Program="" AdmissionDate="" TypeOfAdmission="" AdmittingStaffNPI=""
SourceOfAdmission=""/>
      </Episodes>
    </ns0:GetClientEpisodeHist_Output>
  </s:Body>
</s:Envelope>
```

UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

## B.3 Admit

---

**Definition:** Admit in IBHIS means either adding a brand new client and creating a new episode for an existing client. When a client is admitted in IBHIS for the first time, a client record is created in the system and an episode is created. If the client has an existing record, only a new episode will be created.

**Use Cases:**

# 1: A client does not exist in IBHIS, client does not have MediCal; Trading Partner (TP) needs to admit that client, create an episode under their program, and create a Financial Eligibility for the new episode with LACounty as the default guarantor in IBHIS by providing the following:

*Demographic data*

*Admission Data*

*Noting client as non-MediCal*

# 2: A client does not exist in IBHIS, client has MediCal; TP needs to admit that client, create an episode under their program, and create a Financial Eligibility for the new episode with MediCal and LACounty guarantors in IBHIS by providing the following:

*Demographic data*

*Admission Data*

*MediCal data*

# 3: A client exists in IBHIS, client does not have MediCal; and does not have any active episode under TP's program; TP needs to create an episode under their program, and create a Financial Eligibility for the new episode with LACounty as the default guarantor in IBHIS by providing the following::

*Demographic data*

*Admission Data*

*Noting client as non-MediCal*

# 4: A client exists in IBHIS, client has MediCal; and does not have any active episode under TP's program; TP needs to create an episode for that client under their program and create a Financial Eligibility for the new episode with MediCal and LACounty guarantors in IBHIS by providing the following:

*Demographic data*

*Admission Data*

*MediCal data*

**Web Service Action:**

Client Service offers following operations to meet the Use cases:

*AdmitNewClient* for Use Case # 1 & 2

*AdmitExistingClient* for Use Case # 3 & 4

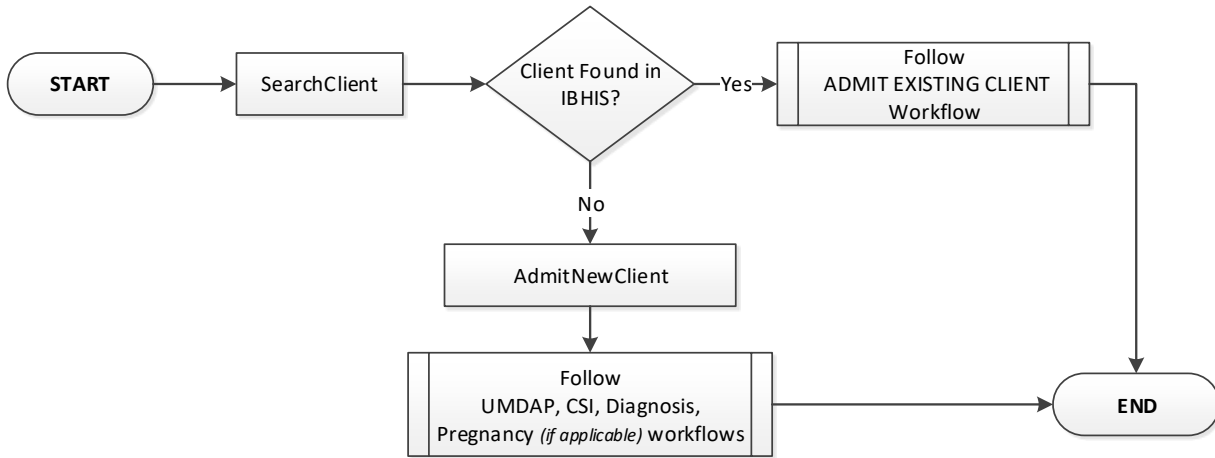
**Precondition:**

- TP is authenticated.
- For New Client: TP has performed search through *SearchClient* operation using various options and search result showed that the client does not exist in IBHIS. For more information on client search—visit section B.1.
- For Existing Client: TP has conducted a search for any active episode through *GetClientActiveEpisode* operation for the client and no active episode found. For more information on episode search visit section B.2.
- For Existing Client: TP has retrieve the demographics data from IBHIS and performed a review before the admit action to make sure TP has the most current demographics data. For more information for retrieving demographics—visit section B.5.2

**B.3.1 APPLICATION FLOW DIAGRAM: ADMIT NEW CLIENT**

Follow the workflow steps below when admitting a new client into IBHIS.

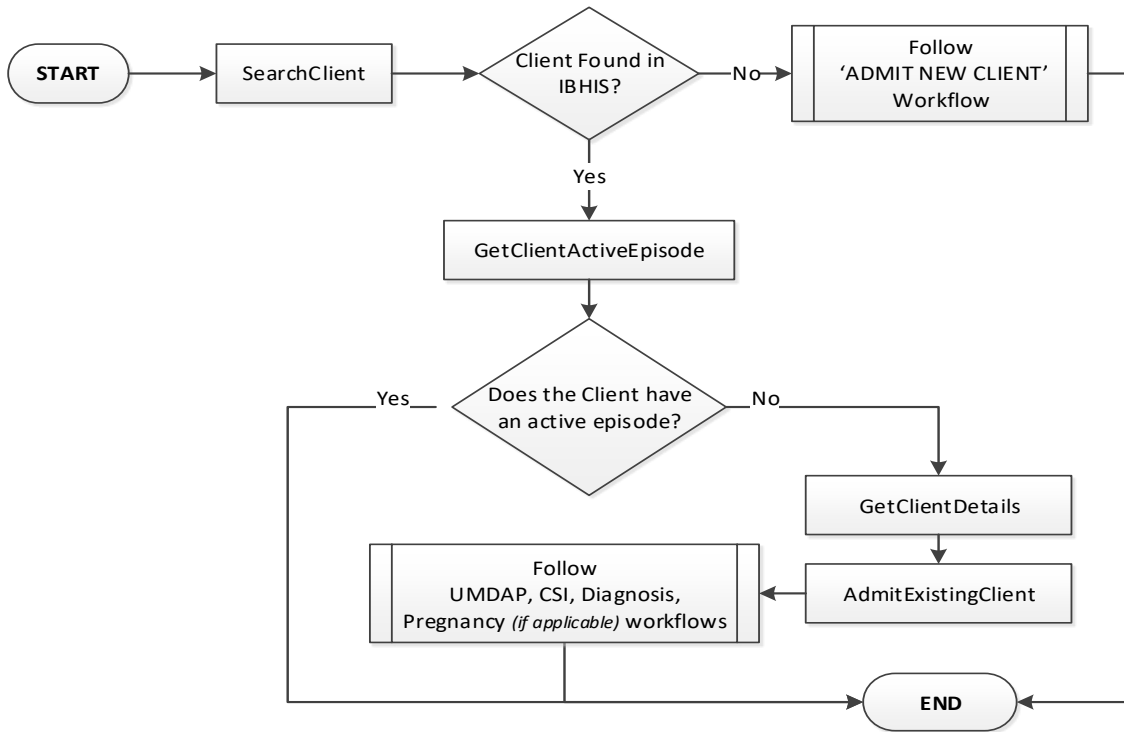
Application Flow for Admit New Client



**B.3.2 APPLICATION FLOW DIAGRAM: ADMIT EXISTING CLIENT**

Follow the workflow steps below when admitting an existing client into IBHIS.

Application Flow for Admit Existing Client



**Notes:**

**EpisodeID:** Store the EpisodeID returned by Admit operation as it will be needed to invoke other operations.

**Duplicate Prevention:** Submission of an Admit call that contains exact same first name, last name and date of birth of an existing client will error out. See Section C Error Handling for more information.

**Client Name:** Full length of client name must not exceed 39 characters in the following format:

*LastName,FirstName<space>MiddleInitial<space>Suffix<space>Prefix*

*Prefix counts as number of characters in prefix+1(for space); Middle initial, if submitted counts as 2 character (1 character for Middle Initial +1 space); Suffix counts as number of characters in suffix+1(for space). If the combination of Prefix, First name, Middle Initial, Last name and Suffix would exceed 39 characters, use the following **PRIORITY** criteria to submit a client name*

*Enter complete last name (up to 38 characters)*

*Enter complete first name (up to 38 characters)*

*If complete FN + complete LN exceeds 39 characters and client name does not have Suffix, MI and Prefix; truncate first name to reach 39 characters for FN+LN*

*Add Suffix (If it fits under 39 characters limit)*

*Add Middle initial (If it fits under 39 characters limit)*

*Add Prefix (If it fits under 39 characters limit)*

**Demographic update:** If the submitted demographic data through *AdmitExistingClient* are different from the existing data in IBHIS, then existing demographic data for all existing episodes will get updated by the new submission.

**Financial Eligibility Data:** When *MediCalClient* is submitted as the type in *ClientFinEligibility*, MediCal and LA County guarantor entries will be established; and when *NonMediCalClient* is submitted as the type in *ClientFinEligibility*, an LA County guarantor entry will be established for the client’s Financial Eligibility.

**Limitation:** Submitted admission data cannot be edited through any Client Service operation.

The following sections describe the input and output of the operations. Any empty data attribute will be omitted in the output.

**B.3.3 ADMITNEWCLIENT\_INPUT**

Data Attribute	Required	Type & Format	MaxL	Restriction
Demographic Data				
ClientPrefix	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.1</a> .
ClientFirstName	R	String	38	Alpha and the following special characters are allowed hyphen (-), apostrophe (') and space ( ). Minimum Length 1. Must start with alpha only.
ClientMiddleInitial	O	String	1	Alpha only.
ClientLastName	R	String	38	Alpha and the following special characters are allowed hyphen (-), apostrophe (') and space ( ). Minimum Length 1. Must start with alpha only.
ClientSuffix	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.2</a> .
Alias	O	String	80	Alpha and following special characters are allowed: underscore ( _ ), hyphen (-), apostrophe ( ' ), space ( ).

Data Attribute	Required	Type & Format	MaxL	Restriction
Email	O	String	40	[AcceptableString]@[DomainName].[Extension] Where [AcceptableString] = alphanumeric and following special characters: hyphen (-), period (.), underscore (_), ampersand (&), plus sign (+) in between. [DomainName] = alphanumeric and special character allowed is hyphen (-) [Extension] = alpha only
Gender	R	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
DateOfBirth	R	Date YYYY-MM-DD	10 Fixed length	Format enforced.
SocialSecurityNumber	R	String XXXXXXXXXX XXXXXXXXXP XXXXXXXXXQ	9 Fixed length	Format enforced. For pseudo-SSN: First 8 characters have to be numeric. Ninth character can be numeric or P or Q. Following restrictions apply to non-pseudo SSN: Numbers only SSN with all 0s, 1s, 2s, 3s, 4s, 5s, 6s, 7s, 8s are not allowed. SSN starting with 000, 666, and 900-998 are not allowed. SSN in the following format - 000#####, ###00####, #####0000 are not allowed SSN from 987654320 to 987654329 are not allowed.
MaritalStatus	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.3</a> .
PrimaryLanguage	R	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
Education	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.10</a> .
EmploymentStatus	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.4</a> .
Ethnicity	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.5</a> .
ClientOtherRace	O	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> . Note: Up to 5 values allowed.



Data Attribute	Required	Type & Format	MaxL	Restriction
SmokingAssessment	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.6.</a>
SmokingAssessmentDate	CR When there is a value in Smoking Assessment	Date YYYY-MM-DD	10 Fixed length	Format enforced.
LivingArrangements	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.9.</a>
ClientsHomePhone	O	String	24	Acceptable formats are: ##### OR ##### X -# up to ##### X -##### (Where # = 0 thru 9) Note: Minimum number of extension digits accepted is 1 and maximum is 9. Example: 123456789 X -0 or 1234567890 X -123456789
StreetAddress1	R	String	40	Any leading space is trimmed.
StreetAddress2	O	String	40	Any leading space is trimmed.
ZipCode	R	String XXXXX-XXXX	10 Fixed length	Format enforced.
Admission Data				
AdmissionDate	R	Date YYYY-MM-DD	10 Fixed length	Format enforced.
AdmissionTime	R	Time HH:MMAM / HH:MMPM	7 Fixed length	Format enforced.
TypeOfAdmission	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.7.</a>
AdmittingStaffNPI	R	String	10	Numeric only.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F.</a>
SourceOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	For acceptable values see section <a href="#">E.1.8.</a>
Financial Eligibility Data				
ClientFinEligibility	R	Enumeration	N/A	Restricted to following two values. -MediCalClient -NonMediCalClient

Data Attribute	Required	Type & Format	MaxL	Restriction
CoverageEffectiveDate	CR For MediCal Client	Date YYYY-MM-DD	10 Fixed length	Format enforced.
SubscriberClientIndexNumber	CR For MediCal Client	String	9	Must contain exactly 9 characters. Must start with a '9'. Must contain 8 numeric digits. Must end with an alpha character of: 'A', 'C' through 'H', 'M', 'N', or 'S' through 'Y'.
SubscriberAddress	O For MediCal Client	String	40	Any leading space is trimmed.
SubscriberAddress2	O For MediCal Client	String	40	Any leading space is trimmed.
SubscriberZip	O For MediCal Client	String XXXXX-XXXX	10 Fixed length	Format enforced.
SubscriberGender	O For MediCal Client	Enumeration	N/A	For acceptable values see section <a href="#">E.2.1</a> .

#### B.3.4 ADMITNEWCLIENT\_OUTPUT

Data Attribute	Type & Format	MaxL
ClientID	String	9
EpisodeID	String	3
ClientPrefix	String	3
ClientFirstName	String	38
ClientMiddleInitial	String	1
ClientLastName	String	38
ClientSuffix	String	3

#### B.3.5 ADMITEXISTINGCLIENT\_INPUT

Data Attribute	Required	Type	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
Demographic Data				
ClientPrefix	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.1</a> .
ClientFirstName	R	String	38	Alpha and the following special characters are allowed hyphen (-), apostrophe (') and space (.). Minimum Length 1. Must start with alpha only.
ClientMiddleInitial	O	String	1	Alpha only.
ClientLastName	R	String	38	Alpha and the following special characters are allowed hyphen (-), apostrophe (') and space (.).

Data Attribute	Required	Type	MaxL	Restriction
				Minimum Length 1. Must start with alpha only.
ClientSuffix	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.2.</a>
Alias	O	String	80	Alpha and following special characters are allowed: underscore ( _ ), hyphen ( - ), apostrophe ( ' ), space ( ).
Email	O	String	40	[AcceptableString]@[DomainName].[Extension] Where [AcceptableString] = alphanumeric and following special characters: hyphen ( - ), period ( . ), underscore ( _ ), ampersand ( & ), plus sign ( + ) in between. [DomainName] = alphanumeric and special character allowed is hyphen ( - ) [Extension] = alpha only
Gender	R	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F.</a>
DateOfBirth	R	Date YYYY-MM-DD	10 Fixed length	Format enforced.
SocialSecurityNumber	R	String XXXXXXXXXX XXXXXXXXXP XXXXXXXXXQ	9 Fixed length	Format enforced. For pseudo-SSN: First 8 characters have to be numeric. Ninth character can be numeric or P or Q. Following restrictions apply to non-pseudo SSN: Numbers only SSN with all 0s, 1s, 2s, 3s, 4s, 5s, 6s, 7s, 8s are not allowed. SSN starting with 000, 666, and 900-998 are not allowed. SSN in the following format - 000#####, ###00####, #####0000 are not allowed SSN from 987654320 to 987654329 are not allowed.
MaritalStatus	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.3.</a>
PrimaryLanguage	R	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F.</a>
Education	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.10.</a>
EmploymentStatus	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.4.</a>
Ethnicity	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.5.</a>

Data Attribute	Required	Type	MaxL	Restriction
ClientOtherRace	O	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> . Note: Up to 5 values allowed.
SmokingAssessment	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.6</a> .
SmokingAssessmentDate	CR When there is a value in Smoking Assessment	Date YYYY-MM-DD	10 Fixed length	Format enforced.
LivingArrangements	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.9</a> .
ClientsHomePhone	O	String	24	Acceptable formats are: ##### OR ##### X -# up to ##### X -##### (Where # = 0 thru 9) Note: Minimum number of extension digits accepted is 1 and maximum is 9. Example: 123456789 X -0 or 1234567890 X -123456789
StreetAddress1	R	String	40	Any leading space is trimmed.
StreetAddress2	O	String	40	Any leading space is trimmed.
ZipCode	R	String XXXXX-XXXX	10 Fixed length	Format enforced.
Admission Data				
AdmissionDate	R	Date YYYY-MM-DD	10 Fixed length	Format enforced.
AdmissionTime	R	Time HH:MMAM / HH:MMPM	7 Fixed length	Format enforced.
TypeOfAdmission	R	Enumeration	N/A	For acceptable values see section <a href="#">E.1.7</a> .
AdmittingStaffNPI	R	String	10	Numeric only.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
SourceOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	For acceptable values see section <a href="#">E.1.8</a> .

Data Attribute	Required	Type	MaxL	Restriction
<b>Financial Eligibility Data</b>				
ClientFinEligibility	R	Enumeration	N/A	Restricted to following two values. -MediCalClient -NonMediCalClient
CoverageEffectiveDate	CR For MediCal Client	Date YYYY-MM-DD	10 Fixed length	Format enforced.
SubscriberClientIndex Number	CR For MediCal Client	String	9	Must contain exactly 9 characters. Must start with a '9'. Must contain 8 numeric digits. Must end with an alpha character of: 'A', 'C' through 'H', 'M', 'N', or 'S' through 'Y'.
SubscriberAddress	O For MediCal Client	String	40	Any leading space is trimmed.
SubscriberAddress2	O For MediCal Client	String	40	Any leading space is trimmed.
SubscriberZip	O For MediCal Client	String XXXXX-XXXX	10 Fixed length	Format enforced.
SubscriberGender	O For MediCal Client	Enumeration	N/A	For acceptable values see section <a href="#">E.2.1</a> .

**B.3.6 ADMITEXISTINGCLIENT\_OUTPUT**

Data Attribute	Type & Format	MaxL
ClientID	String	9
EpisodeID	String	3
ClientPrefix	String	3
ClientFirstName	String	38
ClientMiddleInitial	String	1
ClientLastName	String	38
ClientSuffix	String	3

**B.3.7 DATA ATTRIBUTE DESCRIPTION**

Data Attribute <i>(In alphabetical order)</i>	Description
<b>AdmissionDate</b>	Self-descriptive.
<b>AdmissionTime</b>	Self-descriptive.
<b>AdmittingStaffNPI</b>	NPI number (10-digit-numeric-code) of Staff admitting the client.
<b>Alias</b>	Other name(s) or any alias ID stored as an Alias.
<b>ClientFinEligibility</b>	This is a data element node in the call's xml structure where TP can select one of the two options.
<b>ClientFirstName</b>	Self-descriptive.
<b>ClientID</b>	DMH unique client identifier in IBHIS.
<b>ClientLastName</b>	Self-descriptive.
<b>ClientMiddleInitial</b>	First letter of client's middle name.

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
<b>ClientOtherRace</b>	Self-descriptive.
<b>ClientPrefix</b>	Self-descriptive.
<b>ClientsHomePhone</b>	Self-descriptive.
<b>ClientSuffix</b>	Self-descriptive.
<b>CoverageEffectiveDate</b>	It is the first coverage date by which a client obtained coverage for MediCal. This date should be as accurate as possible. Note: When the clients benefit coverage date is unavailable, the default coverage date 2014-01-01 is acceptable.
<b>DateOfBirth</b>	Client's date of birth.
<b>Education</b>	Highest level of schooling attained by the client.
<b>Email</b>	Client's email.
<b>EmploymentStatus</b>	Client's current employment status.
<b>Ethnicity</b>	Client's ethnic background.
<b>Gender</b>	Client's gender.
<b>LivingArrangements</b>	Client's living arrangement.
<b>MaritalStatus</b>	Client's current marital status.
<b>PrimaryLanguage</b>	Primary language spoken by client.
<b>ProgramOfAdmission</b>	Program identifier pertaining to the program ID of the Trading Partner (TP) admitted the client for treatment.
<b>SmokingAssessment</b>	Client's smoking habit assessment.
<b>SmokingAssessmentDate</b>	Date client's smoking habit assessment is performed.
<b>SocialSecurityNumber</b>	Client's social security number. If no SSN is available, use 999999999.
<b>StreetAddress1</b>	Street information of client's address.
<b>StreetAddress2</b>	Additional street address information such as building/apartment/house/unit/suite number.
<b>SubscriberAddress</b>	Self-descriptive.
<b>SubscriberAddress2</b>	Self-descriptive.
<b>SubscriberClientIndexNumber</b>	Client's MediCal Index Number (CIN).
<b>SubscriberZip</b>	TPs should use a valid 9-digit zip code whenever possible. At a minimum DMH expects a valid 5-digit zip code with the suffix of 9998 when the complete 9-digit zip code is not available.
<b>SubscriberGender</b>	Subscriber's Gender. Note that values 'FTM' and 'MTF' are not available for this attribute.
<b>TypeOfAdmission</b>	Self-descriptive. For outpatient episode, select 'Elective'.
<b>ZipCode</b>	TPs should use a valid 9-digit zip code whenever possible. At a minimum DMH expects a valid 5-digit zip code with the suffix of 9998 when the complete 9-digit zip code is not available.

### B.3.8 XML STRUCTURE ADMITNEWCLIENTREQUEST

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientSmokingAssessment"
xmlns:cli1="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientLivingArrangement"
xmlns:adm="http://b2b.dmh.lacounty.gov/CS/202001/Entity/Admission"
xmlns:fin="http://b2b.dmh.lacounty.gov/CS/202001/Entity/FinancialEligibility">
  <soapenv:Header/>
```

```

<soapenv:Body>
  <ns:AdmitNewClient_Input>
    <mes:MessageContextInput ProgramID=""/>
    <Client ClientPrefix="" ClientFirstName="" ClientMiddleInitial="" ClientLastName="" ClientSuffix="" Alias=""
Email="" Gender="" DateOfBirth="" SocialSecurityNumber="" MaritalStatus="" PrimaryLanguage="" Education=""
EmploymentStatus="" Ethnicity="">
      <!--0 to 5 repetitions-->
      <ClientOtherRace></ClientOtherRace>
    </Client>
    <!--Optional-->
    <cli:ClientSmokingAssessment SmokingAssessment="" SmokingAssessmentDate=""/>
    <cli1:ClientLivingArrangement LivingArrangements="" ClientsHomePhone="" StreetAddress1=""
StreetAddress2="" ZipCode=""/>
    <adm:Admission AdmissionDate="" AdmissionTime="" TypeOfAdmission="" AdmittingStaffNPI="">
      <!--Optional-->
      <Admission24Hour ProgramOfAdmission="" SourceOfAdmission=""/>
    </adm:Admission>
    <fin:ClientFinEligibility>
      <!--You have a CHOICE of the next 2 items at this level-->
      <NonMediCalClient/>
      <MediCalClient CoverageEffectiveDate="" SubscriberClientIndexNumber="" SubscriberAddress=""
SubscriberAddress2="" SubscriberZip="" SubscriberGender=""/>
    </fin:ClientFinEligibility>
  </ns:AdmitNewClient_Input>
</soapenv:Body>
</soapenv:Envelope>

```

### B.3.9 XML STRUCTURE ADMITNEWCLIENTRESPONSE

#### SUCCESSFUL:

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:AdmitNewClient_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Client has been admitted and the Financial Eligibility has
been created successfully in IBHIS."/>
      <Client ClientID="" EpisodeID="" ClientPrefix="" ClientFirstName="" ClientMiddleInitial="" ClientLastName=""
ClientSuffix=""/>
    </ns0:AdmitNewClient_Output>
  </s:Body>
</s:Envelope>

```

#### UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

### B.3.10 XML STRUCTURE ADMITEXISTINGCLIENTREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientSmokingAssessment"
xmlns:cli1="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientLivingArrangement"
xmlns:adm="http://b2b.dmh.lacounty.gov/CS/202001/Entity/Admission"
xmlns:fin="http://b2b.dmh.lacounty.gov/CS/202001/Entity/FinancialEligibility">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:AdmitExistingClient_Input>
      <mes:MessageContextInput ProgramID=""/>
      <Client ClientID="" ClientPrefix="" ClientFirstName="" ClientMiddleInitial="" ClientLastName=""
ClientSuffix="" Alias="" Email="" Gender="" DateOfBirth="" SocialSecurityNumber="" MaritalStatus=""
PrimaryLanguage="" Education="" EmploymentStatus="" Ethnicity="">
        <!--0 to 5 repetitions-->
        <ClientOtherRace></ClientOtherRace>
      </Client>
      <!--Optional-->
      <cli:ClientSmokingAssessment SmokingAssessment="" SmokingAssessmentDate=""/>
      <cli1:ClientLivingArrangement LivingArrangements="" ClientsHomePhone="" StreetAddress1=""
StreetAddress2="" ZipCode=""/>
      <adm:Admission AdmissionDate="" AdmissionTime="" TypeOfAdmission="" AdmittingStaffNPI="">
        <!--Optional-->
        <Admission24Hour ProgramOfAdmission="" SourceOfAdmission=""/>
      </adm:Admission>
      <fin:ClientFinEligibility>
        <!--You have a CHOICE of the next 2 items at this level-->
        <NonMediCalClient/>
        <MediCalClient CoverageEffectiveDate="" SubscriberClientIndexNumber="" SubscriberAddress=""
SubscriberAddress2="" SubscriberZip="" SubscriberGender=""/>
      </fin:ClientFinEligibility>
    </ns:AdmitExistingClient_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

### B.3.11 XML STRUCTURE ADMITEXISTINGCLIENTRESPONSE

SUCCESSFUL:

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:AdmitExistingClient_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Client has been admitted and the Financial Eligibility has
been created successfully in IBHIS."/>
    </ns0:AdmitExistingClient_Output>
  </s:Body>
</s:Envelope>

```



```
<Client ClientID="" EpisodeID="" ClientPrefix="" ClientFirstName="" ClientMiddleInitial="" ClientLastName=" "
ClientSuffix=""/>
</ns0:AdmitExistingClient_Output>
</s:Body>
</s:Envelope>
```

UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

## B.4 CSI

**Definition:** CSI (Client & Service Information) data is a set of data collected from the client as mandated by State.

**Use Cases:**

# 1: Trading Partner (TP) needs to add State mandated CSI data for an existing client with for an episode under TP’s program in IBHIS.

# 2: TP needs to retrieve State mandated CSI data form IBHIS for an existing client with an episode under TP’s program in IBHIS.

# 3: TP needs to update CSI data of an existing client for an episode under TP’s program in IBHIS.

**Web Service Action:**

*CreateClientCSI* for Use Case # 1 & 3

*GetClientCSI* for Use Case # 2

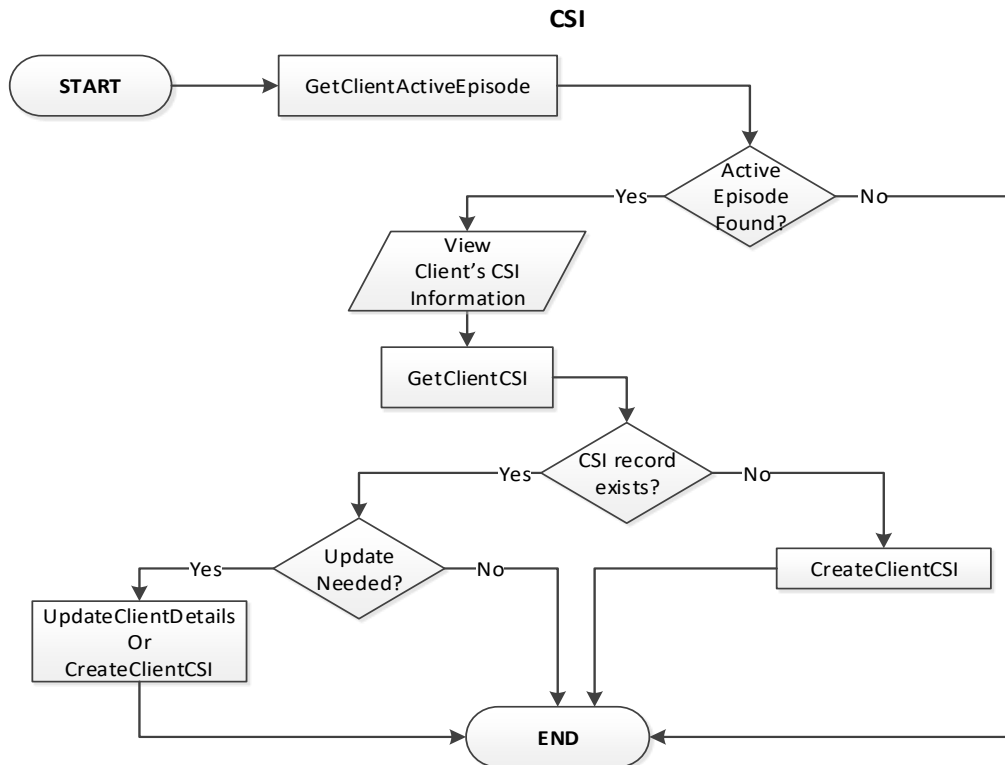
*UpdateClientDetails* for Use Case # 1 &3. For more information on *UpdateClientDetails* visit section B.5

**Precondition:**

- TP is authenticated.
- Client exists in IBHIS.
- Client has an active and/or discharged episode under TP’s program in IBHIS.
- Prior to performing the Create or Update operation, TP has invoked the Get operation, and determined the information being submitted is more current than what is retrieved through the Get operation.

**B.4.1 APPLICATION FLOW DIAGRAM: CSI**

Follow the workflow steps below when adding/updating CSI records in IBHIS.



**Notes:**

**Update Behavior:** Any subsequent submission of the *CreateClientCSI* or *UpdateClientDetails* operation updates the CSI data set. If there's no value present in an optional CSI data attribute in the subsequent submission, the operation will wipe out the existing value in IBHIS.

**Episodic:** CSI record is episodic which means a client can have different CSI records for different episodes and an Episode ID is required for retrieving, creating and updating diagnosis.

The following sections describe the input and output of the operations. Any empty data attribute will be omitted in the output.

B.4.2 GETCLIENTCSI\_INPUT

<b>GetClientCSI REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .

B.4.3 GETCLIENTCSI\_OUTPUT

<b>GetClientCSI RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
BirthFirstName	String	15
BirthLastName	String	20
BirthMiddleName	String	20
MothersFirstName	String	20
FiscallyResponsibleCountyForClient	String	15
PlaceOfBirthCounty	String	19
PlaceOfBirthState	String	2
PlaceOfBirthCountry	String	39
AdmissionNecessityCode	String	29
ConservatorshipCourtStatus	String	44
SpecialPopulation	String	65
LegalClass	String	64
CountySchool	String	7
PreferredLanguage	String	25
NumberOfDependentsLessThan18YO	Integer	2
NumberOfDependentsOver18YO	Integer	2
CSIRace	String Note: May repeat up to 5 times	28
CSIEthnicity	String	19

B.4.4 CREATECLIENTCSI\_INPUT

<b>CreateClientCSI REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>ClientID</b>	R	String	9	Must contain a numeric value.
<b>EpisodeID</b>	R	String	3	Must contain a numeric value.
<b>ProgramOfAdmission</b>	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
<b>BirthFirstName</b>	R	String	15	Alpha and following special characters are allowed: underscore ( _ ), hyphen ( - ), apostrophe ( ' ), space ( ). Minimum Length 1. Must start with alpha only.
<b>BirthLastName</b>	O	String	20	Alpha and following special characters are allowed: underscore ( _ ), hyphen ( - ), apostrophe ( ' ), space ( ).
<b>BirthMiddleName</b>	O	String	20	Alpha and following special characters are allowed: underscore ( _ ), hyphen ( - ), apostrophe ( ' ), space ( ).
<b>MothersFirstName</b>	O	String	20	Alpha and following special characters are allowed: underscore ( _ ), hyphen ( - ), apostrophe ( ' ), space ( ).
<b>FiscallyResponsibleCounty ForClient</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.1</a> .
<b>PlaceOfBirthCounty</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.2</a> .
<b>PlaceOfBirthState</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.3</a> .
<b>PlaceOfBirthCountry</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.4</a> .
<b>AdmissionNecessityCode</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.5</a> .
<b>ConservatorshipCourtStatus</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.6</a> .
<b>SpecialPopulation</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.7</a> .
<b>LegalClass</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.8</a> .
<b>CountySchool</b>	O	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
<b>NumberOfDependents LessThan18YO</b>	O	Integer	2	Must be a value between 0 and 99 (inclusive).
<b>NumberOfDependentsOver18YO</b>	O	Integer	2	Must be a value between 0 and 99 (inclusive).
<b>PreferredLanguage</b>	R	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
<b>CSIEthnicity</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.9</a> .
<b>CSIRace</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.10</a> .

B.4.5 CREATECLIENTCSI\_OUTPUT

<b>CreateClientCSI RESPONSE</b>		
<b>Data Attribute</b>	<b>Type &amp; Format</b>	<b>MaxL</b>
<b>ClientID</b>	String	9
<b>EpisodeID</b>	String	3

B.4.6 DATA ATTRIBUTE DESCRIPTION

Data Attribute <i>(In alphabetical order)</i>	Description
<b>AdmissionNecessityCode</b>	Self-descriptive.
<b>ClientID</b>	DMH unique client identifier in IBHIS.
<b>BirthFirstName</b>	The given first name of client at birth. Note: If the information is not available, use 'Unknown'.
<b>BirthLastName</b>	The given last name of client at birth. Note: If the information is not available, use 'Unknown'.
<b>BirthMiddleName</b>	The given middle name of client at birth.
<b>ConservatorshipCourtStatus</b>	Self-descriptive.
<b>CountySchool</b>	Self-descriptive. Applies to young adult.
<b>CSIEthnicity</b>	Self-descriptive. Note: If no value sent, it will default to any existing value in demographic Ethnicity field.
<b>CSIRace</b>	Self-descriptive.
<b>EpisodeID</b>	IBHIS unique identifier assigned to an episode.
<b>FiscallyResponsibleCountyForClient</b>	Self-descriptive.
<b>LegalClass</b>	Type of commitment proceeding that resulted in a client's placement in a mental health care.
<b>MothersFirstName</b>	First name of client's Mother.
<b>NumberOfDependentsLessThan18YO</b>	Self-descriptive.
<b>NumberOfDependentsOver18YO</b>	Self-descriptive.
<b>PlaceOfBirthCountry</b>	Self-descriptive.
<b>PlaceOfBirthCounty</b>	Self-descriptive.
<b>PlaceOfBirthState</b>	Self-descriptive.
<b>PreferredLanguage</b>	Self-descriptive.
<b>ProgramOfAdmission</b>	Program identifier pertaining to the program ID of the Trading Partner (TP) admitted the client for treatment.
<b>SpecialPopulation</b>	Self-descriptive. Note: System defaults it to 'No special population services' when no value is sent.

B.4.7.1 XML STRUCTURE CREATECLIENTCSIREQUEST

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:CreateClientCSI_Input>
      <mes:MessageContextInput ProgramID=""/>
      <Client ClientID="" EpisodeID="">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission=""/>
      </Client>
      <CSI BirthFirstName="" BirthLastName="" BirthMiddleName="" MothersFirstName=""
FiscallyResponsibleCountyForClient="" PlaceOfBirthCounty="" PlaceOfBirthState="" PlaceOfBirthCountry=""
AdmissionNecessityCode="" ConservatorshipCourtStatus="" SpecialPopulation="" LegalClass="" CountySchool=""
NumberOfDependentsLessThan18YO="" NumberOfDependentsOver18YO="" PreferredLanguage=""
CSIEthnicity="">
        <!--1 to 5 repetitions:-->
```

```

        <CSIRace></CSIRace>
    </CSI>
</ns:CreateClientCSI_Input>
</soapenv:Body>
</soapenv:Envelope>

```

#### B.4.7.2 XML STRUCTURE CREATECLIENTCSIRESPONSE

SUCCESSFUL:

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:CreateClientCSI_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="CSI Admission web service has been filed successfully."/>
      <Client ClientID="" EpisodeID=""/>
    </ns0:CreateClientCSI_Output>
  </s:Body>
</s:Envelope>

```

UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

#### B.4.7.3 XML STRUCTURE GETCLIENTCSIREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetClientCSI_Input>
      <mes:MessageContextInput ProgramID=""/>
      <cli:ClientEpisodeRestricted ClientID="" EpisodeID="">
        <!--Optional-->
        <Admission24Hour ProgramOfAdmission=""/>
      </cli:ClientEpisodeRestricted>
    </ns:GetClientCSI_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

#### B.4.7.4 XML STRUCTURE GETCLIENTCSIRESPONSE

SUCCESSFUL:

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:GetClientCSI_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Process completed successfully."/>
      <Client ClientID=""/>
      <ClientCSI BirthFirstName="" BirthLastName="" BirthMiddleName="" MothersFirstName=""
FiscallyResponsibleCountyForClient="" PlaceOfBirthCounty="" PlaceOfBirthState="" PlaceOfBirthCountry=""
PreferredLanguage="" AdmissionNecessityCode="" ConservatorshipCourtStatus="" SpecialPopulation=""

```

```
LegalClass="" CountySchool="" NumberOfDependentsLessThan18YO="" NumberOfDependentsOver18YO=""
CSIEthnicity=""
<!--0 to 5 repetitions:-->
  <CSIRace></CSIRace>
</ClientCSI>
</ns0:GetClientCSI_Output>
</s:Body>
</s:Envelope>
```

UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

## B.5 Demographics

**Definition:** Patient demographics form the core of the data which allows for the identification and categorization of clients.

**Use Cases:**

# 1: Trading Partner (TP) needs to retrieve demographic data of an existing client from IBHIS.

# 2: TP needs to update demographic data of an existing client for an episode under TP’s program in IBHIS.

**Web Service Action:** Client Service offers following operations to meet the Use cases.

*GetClientDetails* for Use Case # 1

*UpdateClientDetails* for Use Case # 2 & 3

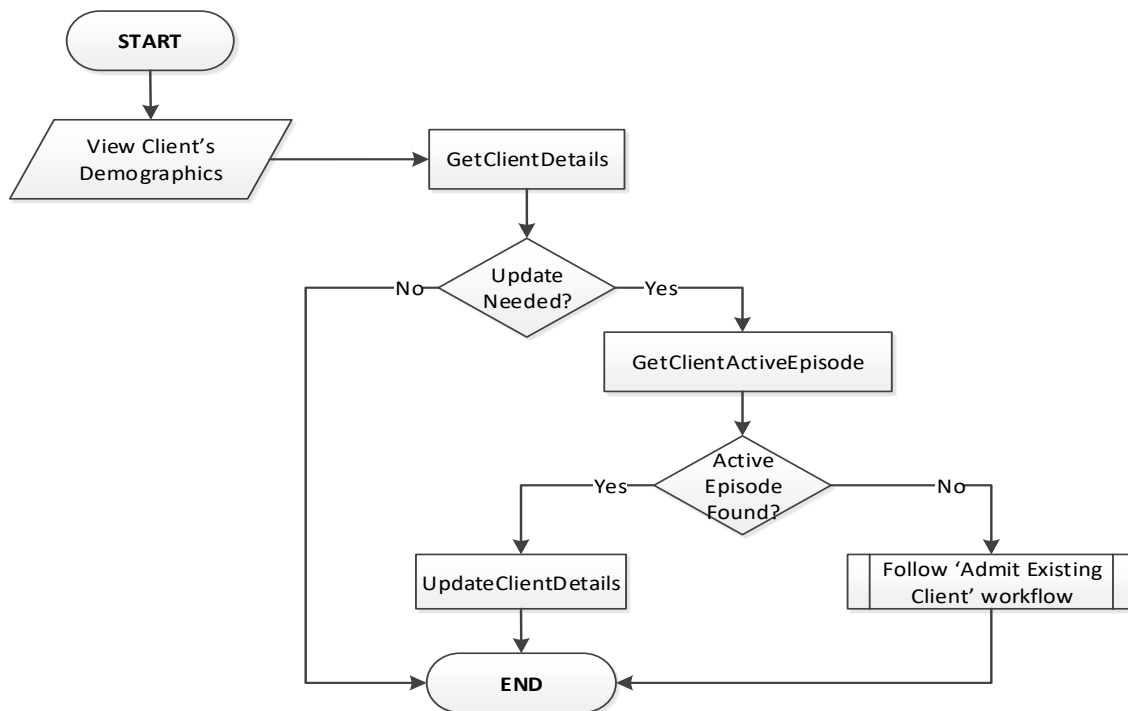
**Precondition:**

- TP is authenticated.
- Client exists in IBHIS.
- For performing update, TP has an active and/or discharged episode for the client under TP’s program in IBHIS and client has BirthFirstName recorded or it is available for submission.
- Prior to performing the Update operation, TP has invoked the *Get* operation, and determined the information being submitted is more current than what is retrieved through the *Get* operation.

**B.5.1 APPLICATION FLOW DIAGRAM: DEMOGRAPHICS**

Follow the workflow steps below when updating client demographics in IBHIS.

**Demographics**





**Notes:**

**Creation:** Client demographics are created through Admit operations.

**Duplicate Prevention:** Submission of an Update call that contains different first name, last name and date of birth than the existing ones will error out.

**Not Episodic:** Demographic data lives at the client level, not at the episode level this means once demographic data is updated, all consumers of that data will receive the propagated change. Therefore, TPs are responsible for ensuring the accuracy of the data before sending it to IBHIS.

**EpisodeID:** EpisodeID is not needed for retrieving demographics, however it is needed to update the data.

**CSI:** Update operation’s input is a combination of Demographic and CSI data attributes. In addition to updating the demographics, the operation also creates a new CSI record or updates the existing CSI record for the given episode. If there’s no value present in an optional CSI data attribute in the Update operation, then the system will wipe out the existing value in IBHIS.

**Update Behavior:** If there’s no value present in an optional demographic data attribute in the Update operation, then the system will retain the existing value in IBHIS.

**Client and Subscriber:** If any or some or all of client’s demographics is/are being updated through *Update* operation and client is the subscriber for the Financial Eligibility; then the same demographics need to be updated for the subscriber through *UpdateClientFinEligibility* operation (see section B.7.4); unless there is a business need to keep client and subscriber’s demographics distinct.

**Client Name:** Full length of client name must not exceed 39 characters in the following format:

*LastName,FirstName<space>MiddleInitial<space>Suffix<space>Prefix*

**Prefix counts as number of characters in prefix+1(for space); Middle initial, if submitted counts as 2 character (1 character for Middle Initial +1 space); Suffix counts as number of characters in suffix+1(for space). If the combination of Prefix, First name, Middle Initial, Last name and Suffix would exceed 39 characters, use the following **PRIORITY** criteria to submit a client name**

*Enter complete last name (up to 38 characters)*

*Enter complete first name (up to 38 characters)*

*If complete FN + complete LN exceeds 39 characters and client name does not have Suffix, MI and Prefix; truncate first name to reach 39 characters for FN+LN*

*Add Suffix (If it fits under 39 characters limit)*

*Add Middle initial (If it fits under 39 characters limit)*

*Add Prefix (If it fits under 39 characters limit)*

The following sections describe the input and output of the operations. Any empty data attribute will be omitted in the output.

**B.5.2 GETCLIENTDETAILS\_INPUT**

<b>GetClientDetails REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>ClientID</b>	R	String	9	Must contain a numeric value.

B.5.3 GETCLIENTDETAILS\_OUTPUT

<b>GetClientDetails RESPONSE</b>		
<b>Data Attribute</b>	<b>Type &amp; Format</b>	<b>MaxL</b>
ClientID	String	9
ClientPrefix	String	3
ClientFirstName	String	38
ClientMiddleInitial	String	1
ClientLastName	String	38
ClientSuffix	String	3
Alias	String	80
Email	String	40
Gender	String	3
DateOfBirth	Date YYYY-MM-DD	10
SocialSecurityNumber	String XXXXXXXX or XXXXXXXXP or XXXXXXXXQ	9
MaritalStatus	String	19
PrimaryLanguage	String	18
Education	String	25
EmploymentStatus	String	3
ClientOtherRace	String	26
Ethnicity	String Note: May repeat up to 5 times	19
SmokingAssessment	String	25
SmokingAssessmentDate	Date	10
Street Address1	String YYYY-MM-DD	40
Street Address2	String	40
ZipCode	String XXXXX-XXXX	10
City	String	20
State	String	2
ClientsHomePhone	String	24

B.5.4 UPDATECLIENTDETAILS\_INPUT

<b>UpdateClientDetails REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
<b>Demographic Data</b>				
ClientPrefix	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.1</a> .
ClientFirstName	R	String	38	Alpha and the following special characters are allowed hyphen (-), apostrophe (') and space (.). Minimum Length 1. Must start with alpha only.
ClientMiddleInitial	O	String	1	Alpha only.

<b>UpdateClientDetails REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>ClientLastName</b>	R	String	38	Alpha and the following special characters are allowed hyphen (-), apostrophe (') and space ( ). Minimum Length 1. Must start with alpha only.
<b>ClientSuffix</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.2.</a>
<b>Alias</b>	O	String	80	Alpha and the following special characters are allowed space ( ), underscore ( _ ), hyphen (-), apostrophe ( ' ).
<b>Email</b>	O	String	40	[AcceptableString]@[DomainName].[Extension] Where [AcceptableString] = alphanumeric and following special characters: hyphen (-), period (.), underscore ( _ ), ampersand (&), plus sign (+) in between. [DomainName] = alphanumeric and special character allowed is hyphen (-) [Extension] = alpha only
<b>Gender</b>	O	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F.</a>
<b>DateOfBirth</b>	O	Date YYYY-MM-DD	10 Fixed length	Format enforced.
<b>SocialSecurityNumber</b>	O	String XXXXXXXX XXXXXXXXP XXXXXXXXQ	9 Fixed length	Format enforced. For pseudo-SSN: First 8 characters have to be numeric. Ninth character can be numeric or P or Q. Following restrictions apply to non-pseudo SSN: Numbers only SSN with all 0s, 1s, 2s, 3s, 4s, 5s, 6s, 7s, 8s are not allowed. SSN starting with 000, 666, and 900-998 are not allowed. SSN in the following format - 000#####, ####00####, #####0000 are not allowed SSN from 987654320 to 987654329 are not allowed.
<b>MaritalStatus</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.3.</a>
<b>PrimaryLanguage</b>	O	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F.</a>
<b>Education</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.10.</a>
<b>EmploymentStatus</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.4.</a>
<b>Ethnicity</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.5.</a>
<b>ProgramOfAdmission</b>	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F.</a>

<b>UpdateClientDetails REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>ClientOtherRace</b>	O	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> . Note: Up to 5 values allowed.
<b>SmokingAssessment</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.1.6</a> .
<b>SmokingAssessmentDate</b>	CR	Date YYYY-MM-DD	10 Fixed length	Format enforced.
<b>ClientsHomePhone</b>	O	String	24	Acceptable formats are: ##### OR ##### X -# up to ##### X -##### (Where # = 0 thru 9) Note: Minimum number of extension digits accepted is 1 and maximum is 9. Example: 123456789 X -0 or 1234567890 X -123456789
<b>StreetAddress1</b>	O	String	40	Any leading space is trimmed.
<b>StreetAddress2</b>	O	String	40	Any leading space is trimmed.
<b>ZipCode</b>	R	String XXXXX-XXXX	10 Fixed length	Format enforced. TPs should use a valid 9 digit zip code whenever possible. At a minimum DMH expects a valid 5 digit zip code with the suffix of 9998 when the complete 9 digit zip code is not available.
<b>CSI Data</b>				
<b>BirthFirstName</b>	R	String	15	Alpha and the following special characters are allowed underscore ( _ ), hyphen ( - ), apostrophe ( ' ) and space ( ). Minimum Length 1. Must start with alpha only.
<b>BirthLastName</b>	O	String	20	Alpha and the following special characters are allowed underscore ( _ ), hyphen ( - ), apostrophe ( ' ) and space ( ). Minimum Length 1. Must start with alpha only.
<b>BirthMiddleName</b>	O	String	20	Alpha and the following special characters are allowed underscore ( _ ), hyphen ( - ), apostrophe ( ' ) and space ( ). Minimum Length 1. Must start with alpha only.
<b>MothersFirstName</b>	O	String	20	Alpha and the following special characters are allowed underscore ( _ ), hyphen ( - ), apostrophe ( ' ) and space ( ). Minimum Length 1. Must start with alpha only.
<b>FiscallyResponsibleCounty ForClient</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.1</a> .
<b>PlaceOfBirthCounty</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.2</a> .
<b>PlaceOfBirthState</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.3</a> .
<b>PlaceOfBirthCountry</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.4</a> .

<b>UpdateClientDetails REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>AdmissionNecessityCode</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.5</a> .
<b>ConservatorshipCourtStatus</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.6</a> .
<b>SpecialPopulation</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.7</a> .
<b>LegalClass</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.3.8</a> .
<b>CountySchool</b>	O	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
<b>NumberOfDependents LessThan18YO</b>	O	Integer	2	Must be a value between 0 and 99 (inclusive).
<b>NumberOfDependents Over18YO</b>	O	Integer	2	Must be a value between 0 and 99 (inclusive).
<b>PreferredLanguage</b>	R	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
<b>CSIEthnicity</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.9</a> .
<b>CSIRace</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.3.10</a> .

B.5.5 UPDATECLIENTDETAILS\_OUTPUT

<b>UpdateClientDetails RESPONSE</b>		
<b>Data Attribute</b>	<b>Type &amp; Format</b>	<b>MaxL</b>
<b>ClientID</b>	String	9
<b>EpisodeID</b>	String	3
<b>ClientPrefix</b>	String	3
<b>ClientFirstName</b>	String	38
<b>ClientMiddleInitial</b>	String	1
<b>ClientLastName</b>	String	38
<b>ClientSuffix</b>	String	3

B.5.6 DATA ATTRIBUTE DESCRIPTION

Visit section [B.4.6](#) for CSI and [B.3.7](#) for Demographic data attribute descriptions.

B.5.7.1 XML STRUCTURE GETCLIENTDETAILSREQUEST

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:typ="http://b2b.dmh.lacounty.gov/ews/EstablishClient/types">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetClientDetails_Input>
      <mes:MessageContextInput ProgramID=""/>
      <Client typ:ClientID=""/>
    </ns:GetClientDetails_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

## B.5.7.2 XML STRUCTURE GETCLIENTDETAILSRESPONSE

## SUCCESSFUL:

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:GetClientDetails_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Process completed successfully."/>
      <Client ClientID="" ClientPrefix="" ClientFirstName="" ClientMiddleInitial="" ClientLastName=""
ClientSuffix="" Alias="" Email="" Gender="" DateOfBirth="" SocialSecurityNumber="" MaritalStatus=""
PrimaryLanguage="" Education="" EmploymentStatus="" Ethnicity="">
        <!--0 to 5 repetitions-->
      <ClientOtherRace></ClientOtherRace>
    </Client>
    <ClientSmokingAssessment SmokingAssessment="" SmokingAssessmentDate=""/>
    <ClientLivingArrangements StreetAddress1="" StreetAddress2="" City="" State="" ZipCode=""
ClientsHomePhone=""/>
  </ns0:GetClientDetails_Output>
</s:Body>
</s:Envelope>

```

## UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

## B.5.7.3 XML STRUCTURE UPDATECLIENTDETAILSREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientSmokingAssessment">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:UpdateClientDetails_Input>
      <mes:MessageContextInput ProgramID=""/>
      <Client ClientID="" EpisodeID="" ClientPrefix="" ClientFirstName="" ClientMiddleInitial="" ClientLastName=""
ClientSuffix="" Alias="" Email="" Gender="" DateOfBirth="" SocialSecurityNumber="" MaritalStatus=""
PrimaryLanguage="" Education="" EmploymentStatus="" Ethnicity="">
        <!--Optional-->
        <Admission24Hour ProgramOfAdmission=""/>
        <!--0 to 5 repetitions-->
        <ClientOtherRace></ClientOtherRace>
      </Client>
      <!--Optional-->
      <cli:ClientSmokingAssessment SmokingAssessment="" SmokingAssessmentDate=""/>
      <ClientLivingArrangements ClientsHomePhone="" StreetAddress1="" StreetAddress2="" ZipCode=""/>
      <ClientCSI BirthFirstName="" BirthLastName="" BirthMiddleName="" MothersFirstName=""
FiscallyResponsibleCountyForClient="" PlaceOfBirthCounty="" PlaceOfBirthState="" PlaceOfBirthCountry=""
AdmissionNecessityCode="" ConservatorshipCourtStatus="" SpecialPopulation="" LegalClass="" CountySchool=""
NumberOfDependentsLessThan18YO="" NumberOfDependentsOver18YO="" PreferredLanguage=""
CSIEthnicity="">
        <!--0 to 5 repetitions-->
        <CSIRace></CSIRace>
      </ClientCSI>
    </ns:UpdateClientDetails_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

```

    </ns:UpdateClientDetails_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

#### B.5.7.4 XML STRUCTURE UPDATECLIENTDETAILSRESPONSE

##### SUCCESSFUL:

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:UpdateClientDetails_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Client Demographics web service has been filed
successfully."/>
        <Client ClientID="" ClientFirstName="" ClientLastName="" ClientMiddleInitial="" ClientPrefix=""
ClientSuffix=""/>
      </ns0:UpdateClientDetails_Output>
    </s:Body>
  </s:Envelope>

```

##### UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

## B.6 UMDAP

**Definition:** The State of California (the State) requires all specialty mental health providers rendering services under a county mental health plan to financially screen clients using the Uniform Method of Determining Ability to Pay (UMDAP). UMDAP was developed to establish a reasonable method of determining the ability of a client (or client’s responsible party) to personally contribute to the cost of the services received. The amount determined using this method covers all services received in a year (annual charge period).

**Use Cases:**

- # 1: Trading Partner (TP) needs to add UMDAP data for an existing client in IBHIS.
- # 2: TP needs to retrieve UMDAP data from IBHIS for an existing client.
- # 3: TP needs to update UMDAP data of an existing client in IBHIS.

**Web Service Action:**

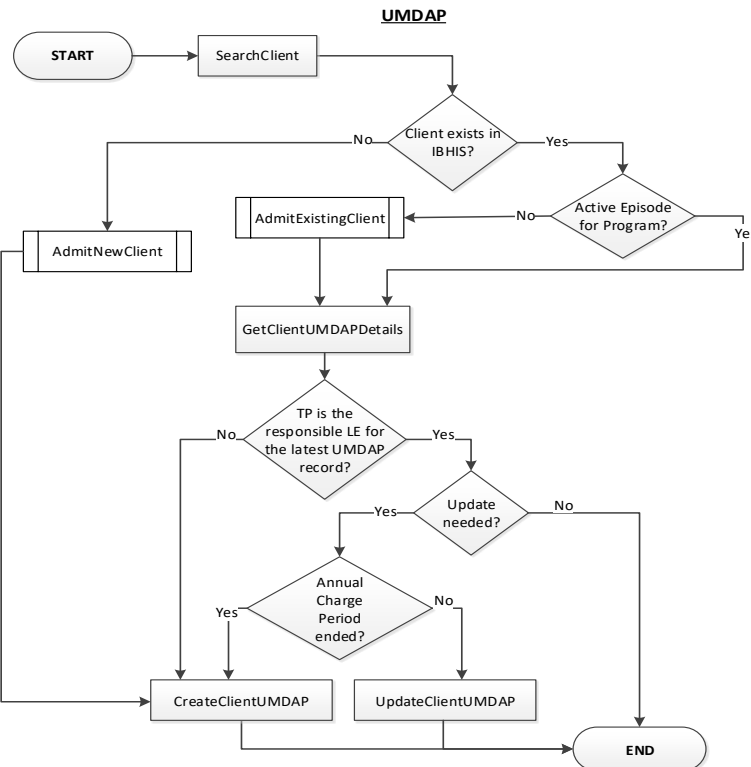
- CreateClientUMDAP for Use Case # 1
- GetClientUMDAPDetails for Use Case # 2
- UpdateClientUMDAP for Use Case # 3.

**Precondition:**

- TP is authenticated.
- Client exists in IBHIS.
- Before adding or updating UMDAP record, TP has retrieved information via the Get operation, reviewed data to determine whether to Create a new UMDAP record or Update the existing UMDAP record.

### B.6.1 APPLICATION FLOW DIAGRAM: UMDAP

Follow the workflow steps below when creating or updating client UMDAP in IBHIS.





**Notes:**

**Not Episodic:** UMDAP record resides at the client level in IBHIS thus will apply to all episodes. Episode ID is not needed to retrieve, create or update UMDAP data. However, TPs should create (or update the existing) UMDAP record after opening an episode for a client in IBHIS with the information captured through financial screening.

**When to use Create:** Create operation should be used If there is no existing UMDAP record in IBHIS for the client OR the annual liability period for the existing UMDAP record has lapsed or TP is not the creator of the most recent UMDAP record.

**When to use Update:** If the existing UMDAP information is not current and the annual liability period has not lapsed, then Update operation should be used to update the existing UMDAP record.

Update Behavior: If a value is not sent for an optional data attribute in the *Update* operation, system will retain the existing value.

**Limitation:** Submitted *AnnualChargePeriod* date can not be edited through any Client Service operation.

The following sections describe the input and output of the operations. Any empty data attribute will be omitted in the output.

**B.6.2 GETCLIENTUMDAPDETAILS\_INPUT**

<b>GetClientUMDAPDetails REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.

**B.6.3 GETCLIENTUMDAPDETAILS\_OUTPUT**

<b>GetClientUMDAPDetails RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
ClientResponsibleLegalEntity	String	40
AnnualChargePeriod	Date YYYY-MM-DD	10
NumberOfDependentsUponIncome	Integer	2
AdjustedMonthlyIncome	Decimal	N/A
AnnualLiability	Decimal	N/A
ResponsiblePerson	String	80
ClientNote	String	80
RecordCreationDate	Date YYYY-MM-DD	10
ClientAdditionalUMDAPUniqueID	String	14

**B.6.4 CREATECLIENTUMDAP\_INPUT**

<b>CreateClientUMDAP REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
NumberOfDependentsUponIncome	O	Integer	2	
AdjustedMonthlyIncome	O	Decimal	N/A	Two decimal places allowed. Must be a positive amount.
AnnualLiability	O	Decimal	N/A	Two decimal places allowed. Must be a positive amount.

<b>CreateClientUMDAP REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>ResponsiblePerson</b>	O	String	80	
<b>ClientNote</b>	O	String	80	
<b>AnnualChargePeriod</b>	R	Date YYYY-MM-DD	10 Fixed length	Format enforced.

B.6.5 CREATECLIENTUMDAP\_OUTPUT

<b>CreateClientUMDAP RESPONSE</b>		
<b>Data Attribute</b>	<b>Type &amp; Format</b>	<b>MaxL</b>
<b>ClientID</b>	String	9
<b>ClientAdditionalUMDAPUniqueID</b>	String	14

B.6.6 UPDATECLIENTUMDAP\_INPUT

<b>UpdateClientUMDAP REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>ClientID</b>	R	String	9	Must contain a numeric value.
<b>NumberOfDependentsUponIncome</b>	O	Integer		
<b>AdjustedMonthlyIncome</b>	O	Decimal	N/A	Two decimal places allowed. Must be a positive amount.
<b>AnnualLiability</b>	O	Decimal	N/A	Two decimal places allowed. Must be a positive amount.
<b>ResponsiblePerson</b>	O	String	80	
<b>ClientNote</b>	O	String	80	
<b>ClientAdditionalUMDAPUniqueID</b>	R	String	14	Format enforced.

B.6.7 UPDATECLIENTUMDAP\_OUTPUT

<b>UpdateClientUMDAP RESPONSE</b>		
<b>Data Attribute</b>	<b>Type &amp; Format</b>	<b>MaxL</b>
<b>ClientID</b>	String	9
<b>ClientAdditionalUMDAPUniqueID</b>	String	14

B.6.8 DATA ATTRIBUTE DESCRIPTION

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
<b>AdjustedMonthlyIncome</b>	Adjusted Monthly Income is determined by using the client/payer’s (including spouse’s income and child or spousal support if applicable) monthly gross income, adding the allowable liquid asset valuation amount, and subtracting the total monthly allowable expenses.
<b>AnnualChargePeriod</b>	Beginning date of the 365-day annual charge period. The UMDAP annual charge period is a twelve-month period that constitutes a client’s fiscal year. In IBHIS, the annual charge period is 365 days long and can start on any day in the month. A client can have only one annual charge period at a time regardless of the number of providers of service within any county in the State of California in which a client is treated. Once the annual charge period has been established TP seeing a client must accept that annual charge period and UMDAP liability sliding scale

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
	fee established by the previous TP for the remainder of the UMDAP liability period. When a client is seen by more than one agency in an annual charge period, TPs must communicate with each other to coordinate the charge period as well as the determination and collection of fees. Once submitted through Create operation, this date cannot be edited through Update operation.
<b>AnnualLiability</b>	Amount the client is responsible to pay for services during the annual charge period based on the UMDAP sliding fee scale.
<b>ClientAdditionalUMDAPUniqueID</b>	This is a unique ID returned for the UMDAP record created by a TP. It is needed to update the record.
<b>ClientID</b>	DMH unique client identifier in IBHIS.
<b>ClientNote</b>	To include name and contact number of the person who financially screened the client and information regarding client’s financial screening and/or annual liability balance.
<b>ClientResponsibleLegalEntity</b>	Legal Entity that created the UMDAP record.
<b>NumberOfDependentsUponIncome</b>	Number of people, including the client relying or dependent upon the family’s adjusted monthly income.
<b>RecordCreationDate</b>	The date UMDAP record is created in IBHIS through the Create operation.
<b>ResponsiblePerson</b>	Client, spouse of client, parent of client, legal guardian of client, or conservator of client.

**B.6.9.1 XML STRUCTURE CREATECLIENTUMDAPREQUEST**

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:CreateClientUMDAP_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <Client ClientID="?"/>
      <ClientUMDAP NumberOfDependentsUponIncome=? AdjustedMonthlyIncome=? AnnualLiability=?
ResponsiblePerson=? ClientNote=? AnnualChargePeriod=?"/>
    </ns:CreateClientUMDAP_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

**B.6.9.2 XML STRUCTURE UPDATECLIENTUMDAPREQUEST**

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:UpdateClientUMDAP_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <Client ClientID="?"/>
    </ns:UpdateClientUMDAP_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

```

    <ClientUMDAP NumberOfDependentsUponIncome="?" AdjustedMonthlyIncome="?" AnnualLiability="?"
    ResponsiblePerson="?" ClientNote="?" ClientAdditionalUMDAPUniqueID="?" />
  </ns:UpdateClientUMDAP_Input>
</soapenv:Body>
</soapenv:Envelope>

```

#### B.6.9.3 XML STRUCTURE GETCLIENTUMDAPDETAILSREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header />
  <soapenv:Body>
    <ns:GetClientUMDAPDetails_Input>
      <mes:MessageContextInput ProgramID="?" />
      <Client ClientID="?" />
    </ns:GetClientUMDAPDetails_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

#### B.6.9.4 XML STRUCTURE CREATECLIENTUMDAPRESPONSE

SUCCESSFUL:

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:CreateClientUMDAP_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Client Additional UMDAP web service has been filed
successfully." />
      <Client ClientID="" ClientAdditionalUMDAPUniqueID="" />
    </ns0:CreateClientUMDAP_Output>
  </s:Body>
</s:Envelope>

```

UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

#### B.6.9.5 XML STRUCTURE UPDATECLIENTUMDAPRESPONSE

SUCCESSFUL:

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:UpdateClientUMDAP_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Client Additional UMDAP web service has been filed
successfully." />
      <Client ClientID="" ClientAdditionalUMDAPUniqueID="" />
    </ns0:UpdateClientUMDAP_Output>
  </s:Body>
</s:Envelope>

```

UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

#### B.6.9.6 XML STRUCTURE GETCLIENTUMDAPRESPONSE

SUCCESSFUL:

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:GetClientUMDAPDetails_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
      xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput
        Acknowledgement="Process completed successfully."/>
        <Client ClientID="3195855"/>
      <-- 0 to multiple>
      <ClientUMDAP ClientResponsibleLegalEntity="" AnnualChargePeriod="" NumberOfDependentsUponIncome=""
        AdjustedMonthlyIncome="" AnnualLiability="" ResponsiblePerson="" ClientNote="" RecordCreationDate=""
        ClientAdditionalUMDAPUniqueID=""/>
    </ns0:GetClientUMDAPDetails_Output>
  </s:Body>
</s:Envelope>
```

UNSUCCESSFUL:

See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

## B.7 Financial Eligibility

---

**Definition:** Financial Eligibility (FE) is the set up of guarantors in IBHIS for a given episode. Only two guarantors: guarantor 10 (MediCal) and guarantor 16 (LACounty) can be set up in IBHIS. In order to ensure proper adjudication of claims, TPs are required to have current FE recorded with IBHIS for a given client that has an active episode under their program.

**Use Cases:**

# 1a: Trading Partner (TP) needs to establish a new FE record for a new client in IBHIS.

# 1b: Trading Partner (TP) needs to establish a new FE record for an existing client for a new active episode under TP's program in IBHIS.

# 2: TP needs to retrieve any existing FE record for an existing client from IBHIS who has an episode under TP's program in IBHIS.

# 3a: TP needs to update existing FE data of an existing client by adding MediCal coverage who has an episode under their program in IBHIS.

# 3b: TP needs to update existing MediCal coverage of the FE data of an existing client who has an episode under their program in IBHIS.

# 3c: TP needs to update the FE data of an existing client who has no MediCal coverage and has an episode under TP's program in IBHIS.

# 3d: TP needs to update the FE data by removing the MediCal coverage of an existing client who has an episode under TP's program in IBHIS.

**Web Service Action:**

*AdmitNewClient* for Use Case # 1a. Visit section B.3 for more information.

*AdmitExistingClient* for Use Case # 1b. Visit section B.3 for more information.

*GetClientFinEligibility* for Use Case # 2.

*UpdateClientFinEligibility* for Use Case # 3a, 3b, and 3c.

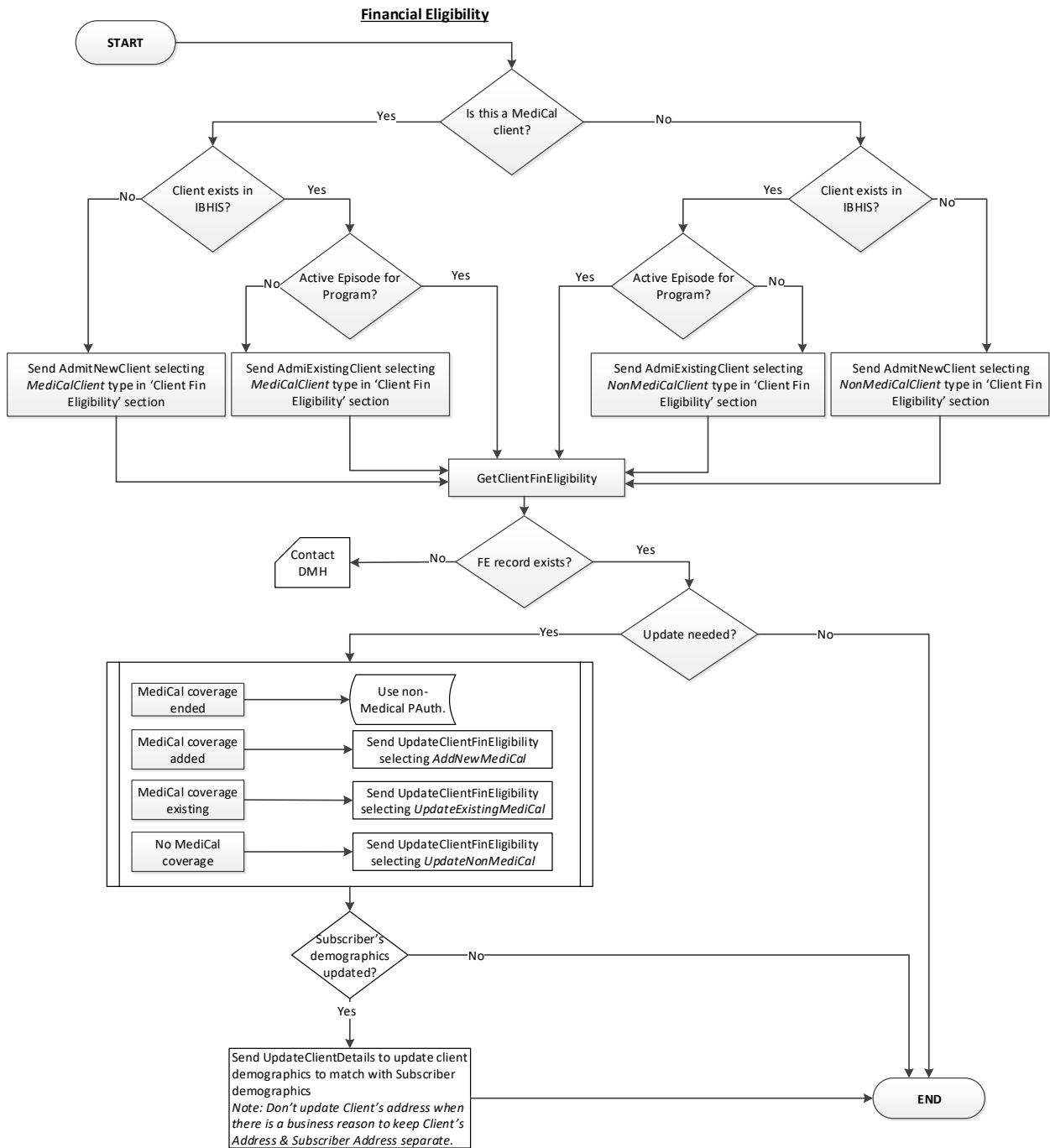
No operation for Use Case # 3d, it is done through P-auth in claiming.

**Precondition:**

- TP is authenticated.
- Client has an active and/or discharged episode under TP's program in IBHIS (for *Update*).
- Prior to performing the *Update* operation, TP has invoked the *Get* operation, and determined the information being submitted is more current than what is retrieved through the *Get* operation.


**B.7.1 APPLICATION FLOW DIAGRAM: FINANCIAL ELIGIBILITY**


Follow the workflow steps below when creating or updating client Financial Eligibility in IBHIS.





**Notes:**


**Episodic:** FE record is episodic which means a client can have different FE records for different episodes and an Episode ID is required for retrieving, creating and updating diagnosis.

 **Client and Subscriber:** If any or some or all of subscriber’s demographics is/are being updated through *Update* operation and client is the subscriber for the FE; then the same demographics need to be updated for the client through *UpdateClientDetails* operation (see section B.5) to keep these two sets of data in sync; unless there is a business need to keep client and subscriber’s demographics distinct.  
Update Behavior: If a value is not sent for an optional data attribute in the *Update* operation, system will retain the existing value.

 **CIN:** To update CIN, send the updated value through the Update call selecting UpdateExistingMediCal value in CreateClientFinEligibility element. CIN ending with ‘P’ or ‘Q’ are not valid. Check the ‘Corrective Action’ in the Error Handling in section C.

 **Subscriber Name:** Subscriber’s Full Name must be within 39 character limit and the format is as follows:  
SubscriberLastName,SubscriberFirstName where  
SubscriberFirstName=SubscriberFirstName+<space>+MI+<space>+Suffix+<space>+Prefix.  
Since Client is the Subscriber for the MediCal and LA County guarantor—Client’s name is the Subscriber name.  
When the combination of Client’s Prefix, First name, Middle Initial, Last name and Suffix exceeds 39 characters, use the following priority criteria to submit a subscriber name:  
*Complete last name (up to 24 characters)*  
*Complete first name (up to 15 characters)*  
*If complete first and complete last exceeds 39 characters, truncate first name to reach 39 characters*  
*Add the Suffix (if there’s any) to Subscriber First Name when it fits under 39 characters limit*  
*Add the Middle initial (if there’s any) to Subscriber First Name when it fits under 39 characters limit*  
*Add the Prefix (if there’s any) to Subscriber First Name when it fits under 39 characters limit*

 **Client First Name vs Subscriber First Name:** Subscriber name is auto-generated in the Admit operations. If the client has Prefix and/or Suffix and/or Middle Initial in their name, then these are combined into Subscriber’s First Name in the following format:  
SubscriberFirstName=ClientFirstName+<space>+MI+<space>+Suffix+<space>+Prefix  
So, when GetClientDetails and GetClientFinEligibility operations are called after making the Admit call, ClientFirstName and SubscriberFirstName will not match.

 **Limitation:** When a MediCal client loses the MediCal eligibility and becomes a Non-MediCal client; Update operation can’t be used to reflect this change; instead use the MediCal P-Auth to update the client.

The following sections describe the input and output of the operations. Any empty data attribute will be omitted in the output.

**B.7.2 GETCLIENTFINELIGIBILITY\_INPUT**

<b><i>GetClientFinEligibility REQUEST</i></b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>ClientID</b>	R	String	9	Must contain a numeric value.
<b>EpisodeID</b>	R	String	3	Must contain a numeric value.
<b>ProgramOfAdmission</b>	CR For ‘24 Hour’ admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .



B.7.3 GETCLIENTFINELIGIBILITY\_OUTPUT

GuarantorName through SubscriberGender data attributes will repeat if multiple guarantors exists.

<b>GetClientFinEligibility RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
EpisodeID	String	3
GuarantorName	String	100
GuarantorOrder	Integer	2
CoverageEffectiveDate	Date YYYY-MM-DD	10
ClientsRelationshipToSubscriber	String	13
SubscriberFirstName	String	20
SubscriberLastName	String	24
SubscriberAddress	String	40
SubscriberAddress2	String	40
SubscriberZip	String XXXXX-XXXX	10
SubscriberCity	String	40
SubscriberState	String	2
SubscriberDateOfBirth	Date YYYY-MM-DD	10
SubscriberPolicyNumber	String	20
SubscriberClientIndexNumber	String	9
SubscriberAssignmentOfBenefits	String	7
SubscriberReleaseOfInformation	String	30
CoordinationOfBenefits	String	3
SubscriberSocialSecurityNumber	String	9
SubscriberGender	String	7

B.7.4 UPDATECLIENTFINELIGIBILITY\_INPUT

<b>UpdateClientFinEligibility REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
CreateClientFinEligibility	R	Enumeration	N/A	Restricted to set of values. <i>AddNewMediCal</i> <i>UpdateExistingMediCal</i> <i>UpdateNonMediCal</i>
<MediCalGuarantor>				
SubscriberAddress	O	String	40	Any leading space is trimmed.
SubscriberAddress2	O	String	40	Any leading space is trimmed.
SubscriberZip	O	String XXXXX-XXXX	10 Fixed length	Format enforced.
SubscriberDateOfBirth	O	Date YYYY-MM-DD	10	Format enforced.

<b>UpdateClientFinEligibility REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
			Fixed length	
<b>SubscriberGender</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.2.1</a> .
<b>SubscriberSocialSecurity Number</b>	O	String XXXXXXXXXX XXXXXXXXXP XXXXXXXXXQ	9 Fixed length	Format enforced. For pseudo-SSN: First 8 characters have to be numeric. Ninth character can be numeric or P or Q. Following restrictions apply to non-pseudo SSN: Numbers only SSN with all 0s, 1s, 2s, 3s, 4s, 5s, 6s, 7s, 8s are not allowed. SSN starting with 000, 666, and 900-998 are not allowed. SSN in the following format -000#####, ####00####, #####0000 are not allowed SSN from 987654320 to 987654329 are not allowed.
<b>CoverageEffectiveDate</b>	CR For <AddNew MediCal> Not available for <Update Existing MediCal>	Date YYYY-MM-DD	10 Fixed length	Format enforced.  Updating the CoverageEffectiveDate is NOT allowed when AddNewMediCal is submitted and the Client Eligibility already has a MediCal Guarantor established with IBHIS
<b>SubscriberClientIndex Number</b>	CR For <AddNew MediCal> O For <Update Existing MediCal>	String	9	Must contain exactly 9 characters. Must start with a '9'. Must contain 8 numeric digits. Must end with an alpha character of: 'A', 'C' through 'H', 'M', 'N', or 'S' through 'Y'.
<b>SubscriberFirstName</b>	CR If Subscriber LastName is sent	String	15	Alpha only and the following special characters are allowed: space ( ), apostrophe ('), hyphen (-)
<b>SubscriberLastName</b>	CR If Subscriber FirstName is sent	String	24	Alpha only and the following special characters are allowed: space ( ), apostrophe ('), hyphen (-)
<b>&lt;LACountyGuarantor&gt;</b> <i>Note: To make successful call, send this child node in the xml.</i>				
<b>SubscriberAddress</b>	O	String	40	Any leading space is trimmed.

<b>UpdateClientFinEligibility REQUEST</b>				
<b>Data Attribute</b>	<b>Required</b>	<b>Type &amp; Format</b>	<b>MaxL</b>	<b>Restriction</b>
<b>SubscriberAddress2</b>	O	String	40	Any leading space is trimmed.
<b>SubscriberZip</b>	O	String XXXXX-XXXX	10 Fixed length	Format enforced.
<b>SubscriberDateOfBirth</b>	O	Date YYYY-MM-DD	10 Fixed length	Format enforced.
<b>SubscriberGender</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.2.1</a> .
<b>SubscriberSocialSecurity Number</b>	O	String XXXXXXXX XXXXXXXXP XXXXXXXXQ	9 Fixed length	Format enforced. For pseudo-SSN: First 8 characters have to be numeric. Ninth character can be numeric or P or Q. Following restrictions apply to non-pseudo SSN: Numbers only SSN with all 0s, 1s, 2s, 3s, 4s, 5s, 6s, 7s, 8s are not allowed. SSN starting with 000, 666, and 900-998 are not allowed. SSN in the following format -000#####, ###00####, #####0000 are not allowed SSN from 987654320 to 987654329 are not allowed.
<b>SubscriberFirstName</b>	CR If Subscriber LastName is sent	String	15	Alpha only and the following special characters are allowed: space ( ), apostrophe ('), hyphen (-)
<b>SubscriberLastName</b>	CR If Subscriber FirstName is sent	String	24	Alpha only and the following special characters are allowed: space ( ), apostrophe ('), hyphen (-)

B.7.5 UPDATECLIENTFINELIGIBILITY\_OUTPUT

<b>UpdateClientFinEligibility RESPONSE</b>		
<b>Data Attribute</b>	<b>Type &amp; Format</b>	<b>MaxL</b>
<b>ClientID</b>	String	9
<b>EpisodeID</b>	String	3

B.7.6 DATA ATTRIBUTE DESCRIPTION

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
<b>ClientID</b>	DMH unique client identifier in IBHIS.
<b>CoverageEffectiveDate</b>	It is the first coverage date by which a client obtained coverage for MediCal. This date should be as accurate as possible. Note: When the clients benefit coverage date is unavailable, the default coverage date 2014-01-01 is acceptable.

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
<b>CreateClientFinEligibility</b>	Financial Eligibility type selector data element.
<b>EpisodeID</b>	IBHIS unique identifier assigned to an episode.
<b>ProgramOfAdmission</b>	Program identifier pertaining to the program ID of the Trading Partner (TP) admitted the client for treatment.
<b>SubscriberAddress</b>	Self descriptive.
<b>SubscriberAddress2</b>	Self descriptive.
<b>SubscriberClientIndexNumber</b>	Client's MediCal Index Number (CIN).
<b>SubscriberDateOfBirth</b>	Self descriptive.
<b>SubscriberFirstName</b>	Self descriptive.
<b>SubscriberGender</b>	Self descriptive.
<b>SubscriberLastName</b>	Self descriptive.
<b>SubscriberSocialSecurityNumber</b>	Self descriptive.
<b>SubscriberZip</b>	TPs should use a valid 9 digit zip code whenever possible. At a minimum DMH expects a valid 5 digit zip code with the suffix of 9998 when the complete 9 digit zip code is not available.

**B.7.6.1 XML STRUCTURE GETCLIENTFINELIGIBILITYREQUEST**

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetClientFinEligibility_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <cli:ClientEpisodeRestricted ClientID="?" EpisodeID="?">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission="?"/>
      </cli:ClientEpisodeRestricted>
    </ns:GetClientFinEligibility_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

**B.7.6.3 XML STRUCTURE UPDATECLIENTFINELIGIBILITYREQUEST\_ADDNEWMEDICAL**

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:UpdateClientFinEligibility_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <Client ClientID="?" EpisodeID="?">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission="?"/>
      </Client>
      <ClientFinEligibility>
```

```

<!--You have a CHOICE of the next 3 items at this level-->
<AddNewMediCal>
  <MediCalGuarantor SubscriberAddress=?" SubscriberAddress2=?" SubscriberZip=?"
SubscriberDateOfBirth=?" SubscriberGender=?" SubscriberSocialSecurityNumber=?" CoverageEffectiveDate=?"
SubscriberClientIndexNumber=?">
    <SubscriberName SubscriberFirstName=?" SubscriberLastName=?"/>
  </MediCalGuarantor>
  <LACountyGuarantor SubscriberAddress=?" SubscriberAddress2=?" SubscriberZip=?"
SubscriberDateOfBirth=?" SubscriberGender=?" SubscriberSocialSecurityNumber=?">
    <SubscriberName SubscriberFirstName=?" SubscriberLastName=?"/>
  </LACountyGuarantor>
</AddNewMediCal>
</ClientFinEligibility>
</ns:UpdateClientFinEligibility_Input>
</soapenv:Body>
</soapenv:Envelope>

```

#### B.7.6.4 XML STRUCTURE UPDATECLIENTFINELIGIBILITYREQUEST\_UPDATEEXISTINGMEDICAL

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:UpdateClientFinEligibility_Input>
      <mes:MessageContextInput ProgramID=?"/>
      <Client ClientID=?" EpisodeID=?">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission=?"/>
      </Client>
      <ClientFinEligibility>
        <!--You have a CHOICE of the next 3 items at this level-->
        <UpdateExistingMediCal>
          <MediCalGuarantor SubscriberAddress=?" SubscriberAddress2=?" SubscriberZip=?"
SubscriberDateOfBirth=?" SubscriberGender=?" SubscriberSocialSecurityNumber=?"
SubscriberClientIndexNumber=?">
            <SubscriberName SubscriberFirstName=?" SubscriberLastName=?"/>
          </MediCalGuarantor>
          <LACountyGuarantor SubscriberAddress=?" SubscriberAddress2=?" SubscriberZip=?"
SubscriberDateOfBirth=?" SubscriberGender=?" SubscriberSocialSecurityNumber=?">
            <SubscriberName SubscriberFirstName=?" SubscriberLastName=?"/>
          </LACountyGuarantor>
        </UpdateExistingMediCal>
      </ClientFinEligibility>
    </ns:UpdateClientFinEligibility_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

#### B.7.6.5 XML STRUCTURE UPDATECLIENTFINELIGIBILITYREQUEST\_UPDATENONMEDICAL

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:UpdateClientFinEligibility_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <Client ClientID="?" EpisodeID="?">
        <!--Optional-->
        <Admission24Hour ProgramOfAdmission="?"/>
      </Client>
      <ClientFinEligibility>
        <!--You have a CHOICE of the next 3 items at this level-->
        <UpdateNonMediCal>
          <LACountyGuarantor SubscriberAddress="?" SubscriberAddress2="?" SubscriberZip="?"
SubscriberDateOfBirth="?" SubscriberGender="?" SubscriberSocialSecurityNumber="?">
            <SubscriberName SubscriberFirstName="?" SubscriberLastName="?"/>
          </LACountyGuarantor>
        </UpdateNonMediCal>
      </ClientFinEligibility>
    </ns:UpdateClientFinEligibility_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

#### B.7.6.6 XML STRUCTURE GETCLIENTFINELIGIBILITYRESPONE

SUCCESSFUL:

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:GetClientFinEligibility_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:t="http://b2b.dmh.lacounty.gov/ews/EstablishClient/types"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput
Acknowledgement="Process completed successfully."/>
      <Client ClientID="" EpisodeID=""/>
      <ClientFinEligibility CoverageEffectiveDate="" SubscriberFirstName="" SubscriberLastName=""
SubscriberAddress="" SubscriberAddress2="" SubscriberZip="" SubscriberCity="" SubscriberState=""
SubscriberDateOfBirth="" SubscriberPolicyNumber="" SubscriberAssignmentOfBenefits=""
SubscriberReleaseOfInformation="" CoordinationOfBenefits="" SubscriberSocialSecurityNumber=""
SubscriberGender="">
        <Guarantor GuarantorName="LA County" GuarantorOrder="2" ClientsRelationshipToSubscriber="Self"/>
      </ClientFinEligibility>
      <ClientFinEligibility CoverageEffectiveDate="" SubscriberFirstName="" SubscriberLastName=""
SubscriberAddress="" SubscriberAddress2="" SubscriberZip="" SubscriberCity="" SubscriberState=""
SubscriberDateOfBirth="" SubscriberPolicyNumber="" SubscriberClientIndexNumber=""
SubscriberAssignmentOfBenefits="" SubscriberReleaseOfInformation="" CoordinationOfBenefits=""
SubscriberSocialSecurityNumber="" SubscriberGender="">
        <Guarantor GuarantorName="Medi-Cal" GuarantorOrder="1" ClientsRelationshipToSubscriber="Self"/>
      </ClientFinEligibility>
    </ns0:GetClientFinEligibility_Output>
  </s:Body>
</s:Envelope>
```

```

</ClientFinEligibility>
  </ns0:GetClientFinEligibility_Output>
</s:Body>
</s:Envelope>
    
```

UNSUCCESSFUL:  
 See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

#### B.7.6.7 XML STRUCTURE UPDATECLIENTFINELIGIBILITYRESPONE

```

SUCCESSFUL:
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:UpdateClientFinEligibility_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
    xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput
      Acknowledgement="Financial Eligibility web service has been filed successfully."/>
      <Client ClientID=""
      EpisodeID=""/>
    </ns0:UpdateClientFinEligibility_Output>
  </s:Body>
</s:Envelope>
    
```

UNSUCCESSFUL:  
 See *XML STRUCTURE OF UNSUCCESSFUL RESPONSE* in [Appendix](#).

## B.8 Diagnosis

---

**Definition:** A diagnosis record set in IBHIS is a combination of one or more diagnosis(es). Each diagnosis record set must have one Primary diagnosis. In addition it can have no or multiple Secondary and Tertiary diagnosis(es). Each diagnosis in a diagnosis record set is marked with a Status which could be Active, Working, Resolved or Void. Also each diagnosis must have a Billing Order where Primary diagnosis is always Billing Order 1. A client can have multiple diagnosis record sets for a given episode.

**Use Cases:**

# 1: Trading Partner (TP) needs to retrieve primary diagnosis summary of a client from all existing episodes or any particular episode from IBHIS.

# 2: TP needs to retrieve details of any existing diagnosis record set of a client who has an episode in IBHIS under TP's program.

# 3a: TP needs to add new diagnosis record set for an existing IBHIS client who has an episode in IBHIS under TP's program.

# 3b: TP needs to add replacement diagnosis record set for an existing IBHIS client who has an episode in IBHIS under TP's program.

# 4a: TP needs to replace the existing diagnosis record set for a client who has an episode in IBHIS under TP's program.

# 4b: TP needs to replace a single diagnosis in the existing diagnosis record set for a client who has an episode in IBHIS under TP's program.

# 4c: TP needs to add a single diagnosis in the existing diagnosis record set for a client who has an episode in IBHIS under TP's program.

# 4d: TP needs to replace an erroneous entry in the existing diagnosis record set for a client who has an active episode in IBHIS under TP's program.

**Web Service Action:**

*GetClientDiagnosisHistory* for Use Case # 1

*GetClientDiagnosis* for Use Case # 2

*CreateClientDiagnosis* for Use Case # 3a and 3b

*UpdateClientDiagnosis* for Use Case # 4a , 4b, 4c and 4d

**Precondition:**

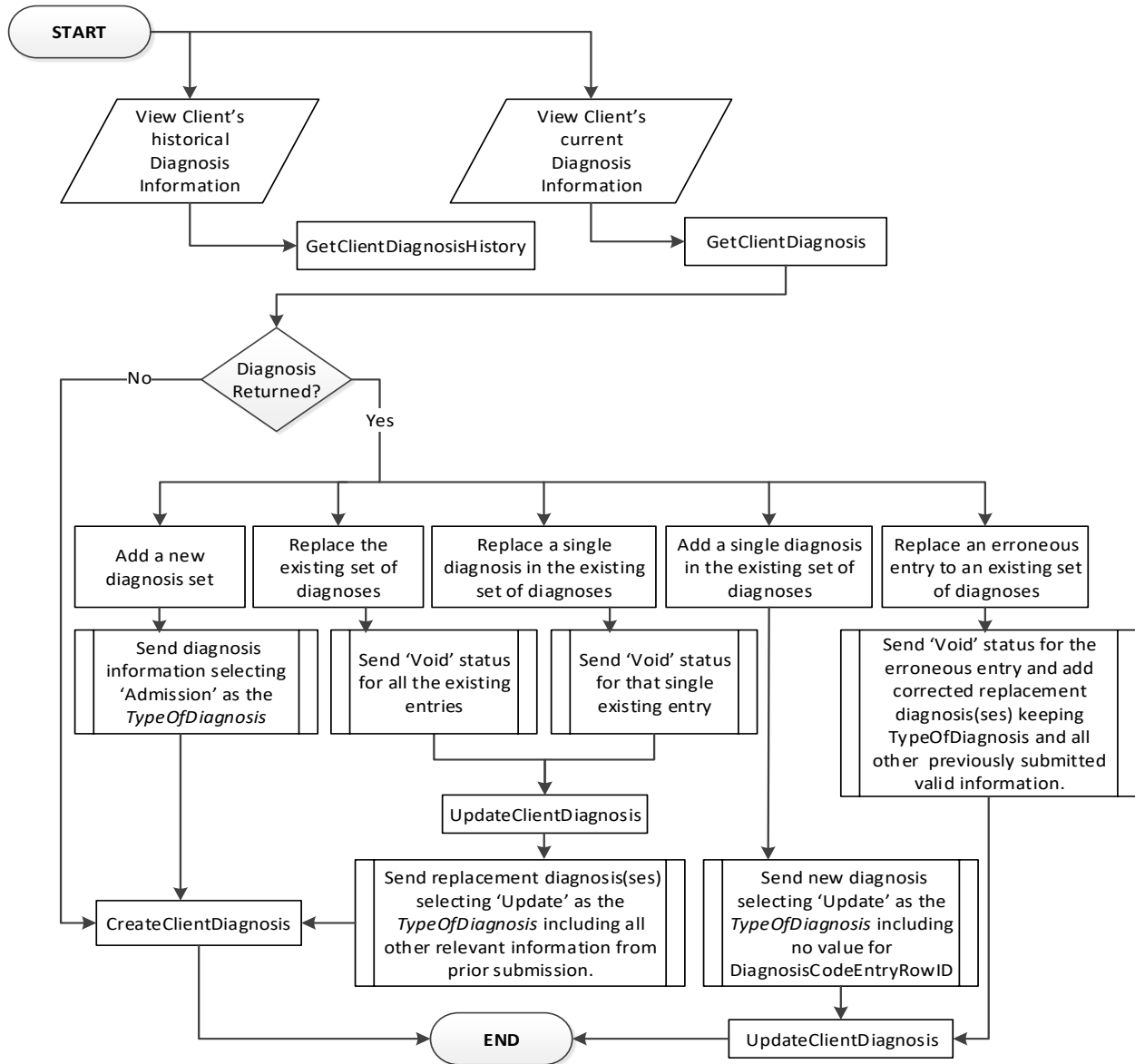
- TP is authenticated.
- Client exists in IBHIS.
- Client has an active and/or discharged episode under TP's program in IBHIS (optional for *Get Diagnosis History* operation).
- TP performed *Get* operation and reviewed the existing diagnosis information before performing *Create* or *Update* operation for a given episode.



**B.8.1 APPLICATION FLOW DIAGRAM: DIAGNOSIS**

Follow the workflow steps below when creating or updating client Diagnosis record in IBHIS.

**Diagnosis**



**Notes:**

**Episodic:** Diagnosis record is episodic which means a client can have different diagnosis records for different episodes and an Episode ID is required for retrieving, creating and updating diagnosis.

**GetClientDiagnosis vs GetClientDiagnosisHistory:** GetClientDiagnosis operation retrieves more information for a client's diagnosis record(s) from the specific episode. TPs need to have an active episode to make this call. GetClientDiagnosisHistory retrieves less information from a client's diagnosis record(s) from all TPs' programs. If

the EpisodeID is provided then the information is pulled for that episode; otherwise the information is pulled from all active and non-active episodes. TPs do not have to have an open episode for the client to make this call.

**Update Behavior:** If a value is not sent for an optional data attribute in the Update operation, system will retain the existing value.

**Error Correction:** To correct an erroneous entry, TPs need to perform the following actions- Send an *Update* operation with all previously submitted information (that was sent through *Create*) including the *DiagnosisUniqueID*, *DiagnosisCodeEntryRowID* (which were returned in the *Create* operation’s response) and ‘Void’ Status for each diagnosis with no Ranking and BillingOrder. Resubmit the *Create* operation with the corrected data along with all other data previously submitted.

**Limitation:** Submitted *DateOfDiagnosis* data can not be edited through any Client Service operation.

The following sections describe the input and output of the operations. Any empty data attribute will be omitted in the output.

B.8.2 GETCLIENTDIAGNOSISHISTORY\_INPUT

<b>GetClientDiagnosisHistory REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
<b>ClientID</b>	R	String	9	Must contain a numeric value.
<b>EpisodeID</b>	R	String	3	Must contain a numeric value.
<b>ProgramOfAdmission</b>	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .

B.8.3 GETCLIENTDIAGNOSISHISTORY\_OUTPUT

EpisodeProgramID thru ICD9Code will repeat as needed based on the number of episodes for the number of Programs and the number of diagnosis records existing in each episode. Note that result will contain diagnosis(es) with Primary Ranking only.

<b>GetClientDiagnosisHistory RESPONSE</b>		
Data Attribute	Type & Format	MaxL
<b>ClientID</b>	String	9
<b>EpisodeID</b>	String	3
<b>EpisodeProgramID</b>	String	5
<b>DateOfDiagnosis</b>	Date YYYY-MM-DD	10
<b>TypeOfDiagnosis</b>	String	9
<b>DiagnosisRanking</b>	String	9
<b>DiagnosisStatus</b>	String	8
<b>ICD10Code</b>	String	40
<b>DiagnosingStaffNPI</b>	String	10
<b>ICD9Code</b>	String	6

B.8.4 GETCLIENTDIAGNOSIS\_INPUT

<b>GetClientDiagnosis REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .

B.8.5 GETCLIENTDIAGNOSIS\_OUTPUT

DiagnosisUniqueID thru ResolvedDate will be repeated as needed based on the number of diagnosis records existing in each episode.

<b>GetClientDiagnosis RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
EpisodeID	String	3
EpisodeProgramID	String	5
DiagnosisUniqueID	String	10
DateOfDiagnosis	Date YYYY-MM-DD	10
TypeOfDiagnosis	String	9
Trauma	String	7
GeneralMedicalConditionSummaryCode	String	20
SubstanceAbuseDependence	String	18
SubstanceAbuseDependenceDiagnosis	String	6
DiagnosisRanking	String	9
DiagnosisStatus	String	8
ICD10Code	String	40
DiagnosisCodeEntryRowID	String	40
DiagnosingStaffNPI	String	10
DiagnosisBillingOrder	String	5
ICD9Code	String	6
ResolvedDate	Date YYYY-MM-DD	10

B.8.6 CREATECLIENTDIAGNOSIS\_INPUT

<b>CreateClientDiagnosis REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
DateOfDiagnosis	R	Date YYYY-MM-DD	10 Fixed length	Format enforced.

<b>CreateClientDiagnosis REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
				Diagnosis Date must be later than or equal to Admission Date; OR must be equal to or prior to the Discharge Date for the submitted episode.  **When Type of Diagnosis is "Admission," Diagnosis Date must equal to Admission Date.
TypeOfDiagnosis	R	Enumeration	N/A	For acceptable values see section <a href="#">E.4.1</a> .
Trauma	O	Enumeration	N/A	For acceptable values see section <a href="#">E.4.2</a> .
GeneralMedicalConditionSummary Code	O	Enumeration	N/A	For acceptable values see section <a href="#">E.4.3</a> .
SubstanceAbuseDependence	O	Enumeration	N/A	For acceptable values see section <a href="#">E.4.4</a> .
SubstanceAbuseDependence Diagnosis	CR <i>When Substance Abuse Dependence is 'Yes'</i>	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
DiagnosingStaffNPI	R	String	10	Must be numeric.
DiagnosisBillingOrder	R	Integer	2	Must be numeric.
Status	R	Enumeration	N/A	For acceptable values see section <a href="#">E.4.5</a> .
DiagnosisRanking	R	Enumeration	N/A	Restricted to two types. <i>DiagnosisRankingPrimaryType</i> <i>DiagnosisRankingNonPrimaryType</i>
Ranking	R	Enumeration	N/A	For acceptable values see section <a href="#">E.4.6</a> .
ICD10Code	R	String	N/A	

B.8.7 CREATECLIENTDIAGNOSIS\_OUTPUT

<b>CreateClientDiagnosis RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
DiagnosisUniqueID	String	10
DiagnosisCodeEntryRowID	String	40
DiagnosisStatus	String	8
DiagnosisRanking	String	9
ICD10Code	String	8

B.8.8 UPDATECLIENTDIAGNOSIS\_INPUT

<b>UpdateClientDiagnosis REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.

<b>UpdateClientDiagnosis REQUEST</b>				
<b>ProgramOfAdmission</b>	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
<b>DiagnosisUniqueID</b>	R	String	10	
<b>TypeOfDiagnosis</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.4.1</a> .
<b>Trauma</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.4.2</a> .
<b>GeneralMedicalConditionSummary Code</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.4.3</a> .
<b>SubstanceAbuseDependence</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.4.4</a> .
<b>SubstanceAbuseDependence Diagnosis</b>	CR <i>When Substance Abuse Dependence is 'Yes'</i>	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
<b>DiagnosisCodeEntryRowID</b>	CR	String	40	It is required when an existing diagnosis row needs to be updated. If it is left blank, a new diagnosis row will be created in the existing diagnosis set.
<b>DiagnosingStaffNPI</b>	R	String	10	Must be numeric.
<b>DiagnosisBillingOrder</b>	CR	Integer	2	It is required if a new diagnosis is being added.
<b>DiagnosisStatus</b>	R	Enumeration	N/A	Restricted to two types. <i>DiagnosisStatusType</i> <i>ResolvedStatusType</i>
<b>Status</b>	R	Enumeration	N/A	For acceptable values see section <a href="#">E.4.5</a> .
<b>ResolvedDate</b>	CR	Date YYYY-MM-DD	10 Fixed length	Format enforced. Its required when [DiagnosisStatus] values is 'Resolved'.
<b>DiagnosisRanking</b>	O	Enumeration	N/A	Restricted to two types. <i>DiagnosisRankingPrimaryType</i> <i>DiagnosisRankingNonPrimaryType</i>
<b>Ranking</b>	O	Enumeration	N/A	For acceptable values see section <a href="#">E.4.6</a> .
<b>ICD10Code</b>	R	String	N/A	

B.8.9 UPDATECLIENTDIAGNOSIS\_OUTPUT

<b>UpdateClientDiagnosis RESPONSE</b>		
<b>Data Attribute</b>	<b>Type &amp; Format</b>	<b>MaxL</b>
<b>ClientID</b>	String	9
<b>DiagnosisUniqueID</b>	String	10
<b>DiagnosisCodeEntryRowID</b>	String	40
<b>DiagnosisStatus</b>	String	8
<b>DiagnosisRanking</b>	String	9
<b>ICD10Code</b>	String	8

B.8.10 DATA ATTRIBUTE DESCRIPTION

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
<b>ClientID</b>	DMH unique client identifier in IBHIS.
<b>DateOfDiagnosis</b>	Self descriptive.
<b>DiagnosingStaffNPI</b>	Diagnosing Practitioner’s 10-digit NPI number.
<b>DiagnosisBillingOrder</b>	For outpatient episode, this is the Diagnosis Ranking relevance for the clinical coordination of care. For ‘24 Hour Admission’ episode, this is related to billing.
<b>DiagnosisCodeEntryRowID</b>	This is the unique ID identifying each diagnosis inside a diagnosis record set. This ID is required in Update for updating the corresponding diagnosis.
<b>DiagnosisRanking</b>	Data element containing two types options to separate primary and non-primary (secondary/tertiary) diagnoses.
<b>DiagnosisStatus</b>	Data element containing two types options where ‘Resolved’ status is one type and the other type includes the remaining statuses.
<b>DiagnosisUniqueID</b>	This is a unique ID returned for the Diagnosis record set created by a TP. It is needed to update the record.
<b>EpisodeID</b>	IBHIS unique identifier assigned to an episode.
<b>EpisodeProgramID</b>	ProgramOfAdmission code or ProgramID tied to submitted episode.
<b>GeneralMedicalConditionSummaryCode</b>	Codes related to client’s general physical health condition.
<b>ICD9Code</b>	Self descriptive.
<b>ICD10Code</b>	Self descriptive.
<b>ProgramOfAdmission</b>	Program identifier pertaining to the program ID of the Trading Partner (TP) admitted the client for treatment.
<b>Ranking</b>	Client’s diagnosis identification ranking.
<b>ResolvedDate</b>	The date an Active or Working diagnosis status changed to resolved.
<b>Status</b>	Diagnosis status identifying the state of the diagnosis.
<b>SubstanceAbuseDependence</b>	Any continued pathological use of a medication, non-medically indicated drug (called drugs of abuse), or toxin.
<b>SubstanceAbuseDependenceDiagnosis</b>	Diagnosis that is based on clusters of behaviors and physiological effects occurring within a specific time-frame.
<b>Trauma</b>	An emotional wound or shock that creates substantial, lasting damage to the psychological development of a person.
<b>TypeOfDiagnosis</b>	The TypeOfDiagnosis ‘Admission’ is expected when submitting an initial diagnosis subsequent to admission. The TypeOfDiagnosis ‘Update’ is expected to capture any change of diagnosis which differs from the ‘Admission’ diagnosis. The TypeOfDiagnosis ‘Discharge’ should only be submitted when the client is deceased and a discharge diagnosis needs to be filed.

B.8.11 XML STRUCTURE CREATECLIENTDIAGNOSISREQUEST\_PRIMARY&SECONDARYDIAGNOSIS

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:CreateClientDiagnosis_Input>
```

```

<mes:MessageContextInput ProgramID="?" />
<cli:ClientEpisodeRestricted ClientID="?" EpisodeID="?">
  <!--Optional:-->
  <Admission24Hour ProgramOfAdmission="?" />
</cli:ClientEpisodeRestricted>
<ClientDiagnosis DateOfDiagnosis="?" TypeOfDiagnosis="?" Trauma="?"
GeneralMedicalConditionSummaryCode="?">
  <!--Optional:-->
  <SubstanceAbuseDependence>
    <!--You have a CHOICE of the next 3 items at this level-->
    <No />
    <UnknownNotReported />
    <Yes SubstanceAbuseDependenceDiagnosis="?" />
  </SubstanceAbuseDependence>
  <!--1 or more repetitions:-->
  <DiagnosisNode DiagnosingStaffNPI="?" DiagnosisBillingOrder="1">
    <DiagnosisStatus>
      <DiagnosisStatusType Status="?" />
    </DiagnosisStatus>
    <DiagnosisRanking>
      <DiagnosisRankingPrimaryType Ranking="Primary" ICD10Code="?" />
    </DiagnosisRanking>
  </DiagnosisNode>
  <DiagnosisNode DiagnosingStaffNPI="?" DiagnosisBillingOrder="2">
    <DiagnosisStatus>
      <DiagnosisStatusType Status="?" />
    </DiagnosisStatus>
    <DiagnosisRanking>
      <DiagnosisRankingNonPrimaryType Ranking="?" ICD10Code="?" />
    </DiagnosisRanking>
  </DiagnosisNode>
</ClientDiagnosis>
</ns:CreateClientDiagnosis_Input>
</soapenv:Body>
</soapenv:Envelope>

```

#### B.8.12 XML STRUCTURE UPDATECLIENTDIAGNOSIS\_VOIDPRIMARYDIAGNOSIS

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
  <soapenv:Header />
  <soapenv:Body>
    <ns:UpdateClientDiagnosis_Input>
      <mes:MessageContextInput ProgramID="?" />
      <cli:ClientEpisodeRestricted ClientID="?" EpisodeID="?">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission="?" />
      </cli:ClientEpisodeRestricted>
      <ClientDiagnosis DiagnosisUniqueID="?" TypeOfDiagnosis="?" Trauma="?"
GeneralMedicalConditionSummaryCode="?">

```

```

<!--Optional:-->
<SubstanceAbuseDependence>
  <!--You have a CHOICE of the next 3 items at this level-->
  <No/>
  <UnknownNotReported/>
  <Yes SubstanceAbuseDependenceDiagnosis="?"/>
</SubstanceAbuseDependence>
<!--1 or more repetitions:-->
<DiagnosisNode DiagnosisCodeEntryRowID="?" DiagnosingStaffNPI="?">
  <DiagnosisStatus>
    <!--You have a CHOICE of the next 2 items at this level-->
    <DiagnosisStatusType Status="Void"/>
  </DiagnosisStatus>
  <DiagnosisRanking>
    <DiagnosisRankingPrimaryType ICD10Code="?"/>
  </DiagnosisRanking>
</DiagnosisNode>
</ClientDiagnosis>
</ns:UpdateClientDiagnosis_Input>
</soapenv:Body>
</soapenv:Envelope>

```

#### B.8.13 XML STRUCTURE UPDATECLIENTDIAGNOSIS\_UPDATENONPRIMARYDIAGNOSIS

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:UpdateClientDiagnosis_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <cli:ClientEpisodeRestricted ClientID="?" EpisodeID="?">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission="?"/>
      </cli:ClientEpisodeRestricted>
      <ClientDiagnosis DiagnosisUniqueID="?" TypeOfDiagnosis="?" Trauma="?"
GeneralMedicalConditionSummaryCode="?">
        <!--Optional:-->
        <SubstanceAbuseDependence>
          <!--You have a CHOICE of the next 3 items at this level-->
          <No/>
          <UnknownNotReported/>
          <Yes SubstanceAbuseDependenceDiagnosis="?"/>
        </SubstanceAbuseDependence>
        <!--1 or more repetitions:-->
        <DiagnosisNode DiagnosisCodeEntryRowID="?" DiagnosingStaffNPI="?" DiagnosisBillingOrder="?">
          <DiagnosisStatus>
            <!--You have a CHOICE of the next 2 items at this level-->
            <DiagnosisStatusType Status="?"/>
          </DiagnosisStatus>
          <DiagnosisRanking>

```



```

        <DiagnosisRankingNonPrimaryType Ranking="?" ICD10Code="?" />
    </DiagnosisRanking>
</DiagnosisNode>
</ClientDiagnosis>
</ns:UpdateClientDiagnosis_Input>
</soapenv:Body>
</soapenv:Envelope>

```

#### B.8.14 XML STRUCTURE GETCLIENTDIAGNOSISREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
    <soapenv:Header/>
    <soapenv:Body>
        <ns:GetClientDiagnosis_Input>
            <mes:MessageContextInput ProgramID="?" />
            <cli:ClientEpisodeRestricted ClientID="?" EpisodeID="?">
                <!--Optional:-->
                <Admission24Hour ProgramOfAdmission="?" />
            </cli:ClientEpisodeRestricted>
        </ns:GetClientDiagnosis_Input>
    </soapenv:Body>
</soapenv:Envelope>

```

#### B.8.15 XML STRUCTURE GETCLIENTDIAGNOSISHISTORYREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
    <soapenv:Header/>
    <soapenv:Body>
        <ns:GetClientDiagnosisHistory_Input>
            <mes:MessageContextInput ProgramID="?" />
            <Client ClientID="?" EpisodeID="?">
                <!--Optional:-->
                <Admission24Hour ProgramOfAdmission="?" />
            </Client>
        </ns:GetClientDiagnosisHistory_Input>
    </soapenv:Body>
</soapenv:Envelope>

```

#### B.8.16 XML STRUCTURE GETCLIENTDIAGNOSISHISTORYRESPONSE

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
    <s:Body>
        <ns0:GetClientDiagnosisHistory_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:dn="http://b2b.dmh.lacounty.gov/CS/202001/Entity/DiagnosisNode">
            <mc:MessageContextOutput Acknowledgement="Process completed successfully." />
        </ns0:GetClientDiagnosisHistory_Output>
    </s:Body>
</s:Envelope>

```

```

<Client ClientID="">
  <Episode EpisodeID="" EpisodeProgramID="">
    <ClientDiagnosis DateOfDiagnosis="" TypeOfDiagnosis="">
      <DiagnosisNode DiagnosisRanking="" DiagnosisStatus="" ICD10Code="" DiagnosingStaffNPI=""/>
    </ClientDiagnosis>
  </Episode>
</Client>
</ns0:GetClientDiagnosisHistory_Output>
</s:Body>
</s:Envelope>

```

#### B.8.17 XML STRUCTURE GETCLIENTDIAGNOSISRESPONSE

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:GetClientDiagnosis_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:dn="http://b2b.dmh.lacounty.gov/CS/202001/Entity/DiagnosisNode"
xmlns:cl="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeProgram">
      <mc:MessageContextOutput Acknowledgement="Process completed successfully."/>
      <Client ClientID="">
        <Episode EpisodeID="" EpisodeProgramID="">
          <ClientDiagnosis DiagnosisUniqueID="" DateOfDiagnosis="" TypeofDiagnosis="" Trauma=""
GeneralMedicalConditionSummaryCode="" SubstanceAbuseDependence="">
            <DiagnosisNode DiagnosisRanking="Primary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID="" DiagnosingStaffNPI="" DiagnosisBillingOrder="1"/>
            <DiagnosisNode DiagnosisRanking="Secondary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID="" DiagnosingStaffNPI="" DiagnosisBillingOrder="2"/>
            <DiagnosisNode DiagnosisRanking="Tertiary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID="" DiagnosingStaffNPI="" DiagnosisBillingOrder="3"/>
          </ClientDiagnosis>
        </Episode>
      </Client>
    </ns0:GetClientDiagnosis_Output>
  </s:Body>
</s:Envelope>

```

#### B.8.18 XML STRUCTURE UPDATECLIENTDIAGNOSISRESPONSE

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:UpdateClientDiagnosis_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:dn="http://b2b.dmh.lacounty.gov/CS/202001/Entity/DiagnosisNode">
      <mc:MessageContextOutput Acknowledgement="Client Diagnosis web service has been filed successfully."/>
      <Client ClientID=""/>
      <ClientDiagnosis DiagnosisUniqueID="">
        <DiagnosisNode DiagnosisRanking="Primary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID=""/>
        <DiagnosisNode DiagnosisRanking="Secondary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID=""/>
      </ClientDiagnosis>
    </ns0:UpdateClientDiagnosis_Output>
  </s:Body>
</s:Envelope>

```

```

        <DiagnosisNode DiagnosisRanking="Tertiary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID=""/>
    </ClientDiagnosis>
</ns0:UpdateClientDiagnosis_Output>
</s:Body></s:Envelope>

```

#### B.8.19 XML STRUCTURE CREATECLIENTDIAGNOSISRESPONSE

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:CreateClientDiagnosis_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:dn="http://b2b.dmh.lacounty.gov/CS/202001/Entity/DiagnosisNode">
      <mc:MessageContextOutput Acknowledgement="Client Diagnosis web service has been filed successfully."/>
      <Client ClientID=""/>
      <ClientDiagnosis DiagnosisUniqueID="">
        <DiagnosisNode DiagnosisRanking="Primary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID=""/>
        <DiagnosisNode DiagnosisRanking="Secondary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID=""/>
        <DiagnosisNode DiagnosisRanking="Tertiary" DiagnosisStatus="" ICD10Code=""
DiagnosisCodeEntryRowID=""/>
      </ClientDiagnosis>
    </ns0:CreateClientDiagnosis_Output>
  </s:Body>
</s:Envelope>

```

## B.9 Pregnancy

---

**Definition:** A pregnancy record in IBHIS is stored in episodes. Each episode may contain none to many pregnancy records as long as the pregnancy start and end dates do not overlap.

**Use Cases:**

# 1: Trading Partner (TP) needs to add pregnancy record for an existing IBHIS client who has an episode in IBHIS for TP's program.

# 2: TP needs to retrieve any existing pregnancy record for an existing client from IBHIS who has an episode in IBHIS for TP's program.

# 3: TP needs to update existing pregnancy data for an existing client who has an episode in IBHIS under TP's program.

**Web Service Action:**

*CreateClientPregnancy* for Use Case # 1

*GetClientPregnancyDetails* for Use Case # 2

*UpdateClientPregnancy* for Use Case # 3

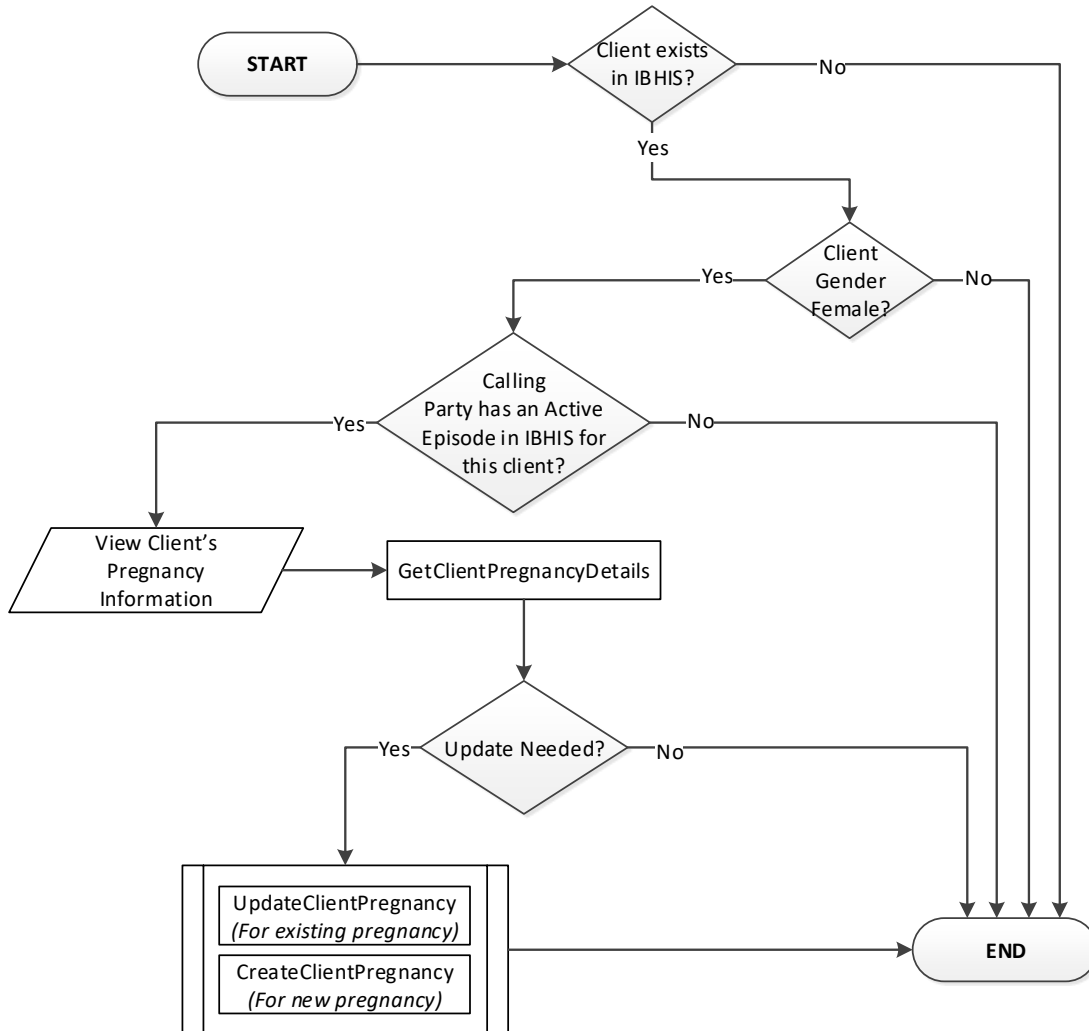
**Precondition:**

- TP is authenticated.
- Client is female.
- Client exists in IBHIS.
- Client has an active and/or discharged episode under TP's program in Pregnancy information being submitted can not conflict with any existing pregnancy information.
- TP performed Get operation and reviewed the existing pregnancy information before performing Create or Update operation.

**B.9.1 APPLICATION FLOW DIAGRAM: PREGNANCY**

Follow the workflow steps below when creating or updating client Pregnancy record in IBHIS.

**Pregnancy**



**Notes:**

**Episodic:** Pregnancy record is episodic which means a client can have different pregnancy records for different episodes and an Episode ID is required for retrieving, creating and updating pregnancy.

**Update Behavior:** If a value is not sent for an optional data attribute in the Update operation, system will wipe out the existing value.

The following sections describe the input and output of the operations. Any empty data attribute will be omitted in the output.

**B.9.2 GETCLIENTPREGNANCYDETAILS\_INPUT**

<b>GetClientPregnancyDetails REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .

**B.9.3 GETCLIENTPREGNANCYDETAILS\_OUTPUT**

<b>GetClientPregnancyDetails RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
PregnancyStartDate	Date YYYY-MM-DD	10
PregnancyEndDate	Date YYYY-MM-DD	10
AssessmentDate	Date YYYY-MM-DD	10
ClientPregnancyUniqueID	String	7

**B.9.4 CREATECLIENTPREGNANCY\_INPUT**

<b>CreateClientPregnancy REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
PregnancyStartDate	R	Date YYYY-MM-DD	10	Format enforced.
PregnancyEndDate	O	Date YYYY-MM-DD	10	Format enforced.
AssessmentDate	R	Date YYYY-MM-DD	10	Format enforced.

**B.9.5 CREATECLIENTPREGNANCY\_OUTPUT**

<b>CreateClientPregnancy RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
ClientPregnancyUniqueID	String	7

B.9.6 UPDATECLIENTPREGNANCY\_INPUT

<b>UpdateClientPregnancy REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
PregnancyStartDate	R	Date YYYY-MM-DD	10 Fixed length	Format enforced.
PregnancyEndDate	O	Date YYYY-MM-DD	10 Fixed length	Format enforced.
AssessmentDate	R	Date YYYY-MM-DD	10	Format enforced.
ClientPregnancyUniqueID	R	String	7	

B.9.7 UPDATECLIENTPREGNANCY\_OUTPUT

<b>UpdateClientPregnancy RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
ClientPregnancyUniqueID	String	7

B.9.8 DATA ATTRIBUTE DESCRIPTION

Data Attribute <i>(In alphabetical order)</i>	Description
AssessmentDate	Assessment Date is the date on which the assessing/treating clinician learned of the client's pregnancy.
ClientID	DMH unique client identifier in IBHIS.
ClientPregnancyUniqueID	Unique identifier assigned to the client pregnancy record.
EpisodeID	IBHIS unique identifier assigned to an episode.
PregnancyEndDate	Self descriptive.
PregnancyStartDate	Self descriptive.
ProgramOfAdmission	Program identifier pertaining to the program ID of the Trading Partner (TP) admitted the client for treatment.

B.9.9.1 XML STRUCTURE CREATECLIENTPREGNANCYREQUEST

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:CreateClientPregnancy_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <cli:ClientEpisodeRestricted ClientID=?" EpisodeID=?">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission=?"/>
      </cli:ClientEpisodeRestricted>
    </ns:CreateClientPregnancy_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

```

    </ns:CreateClientPregnancy_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

#### B.9.9.2 XML STRUCTURE UPDATECLIENTPREGNANCYREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:UpdateClientPregnancy_Input>
      <mes:MessageContextInput ProgramID="?" />
      <cli:ClientEpisodeRestricted ClientID="?" EpisodeID="?">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission="?" />
      </cli:ClientEpisodeRestricted>
      <ClientPregnancy PregnancyStartDate="?" PregnancyEndDate="?" AssessmentDate ="?"
ClientPregnancyUniqueID="?" />
    </ns:UpdateClientPregnancy_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

#### B.9.9.3 XML STRUCTURE GETCLIENTPREGNANCYDETAILSREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:cli="http://b2b.dmh.lacounty.gov/CS/202001/Entity/ClientEpisodeRestricted">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetClientPregnancyDetails_Input>
      <mes:MessageContextInput ProgramID="?" />
      <cli:ClientEpisodeRestricted ClientID="?" EpisodeID="?">
        <!--Optional:-->
        <Admission24Hour ProgramOfAdmission="?" />
      </cli:ClientEpisodeRestricted>
    </ns:GetClientPregnancyDetails_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

#### B.9.9.4 XML STRUCTURE CREATECLIENTPREGNANCYRESPONSE

```

<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:CreateClientPregnancy_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Client Pregnancy web service has been filed successfully." />
      <Client ClientID="" />
      <ClientPregnancy ClientPregnancyUniqueID="" />
    </ns0:CreateClientPregnancy_Output>
  </s:Body>
</s:Envelope>

```



```
</s:Body>
</s:Envelope>
```

#### B.9.9.5 XML STRUCTURE UPDATECLIENTPREGNANCYRESPONSE

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:CreateClientPregnancy_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Client Pregnancy web service has been filed successfully."/>
      <Client ClientID=""/>
      <ClientPregnancy ClientPregnancyUniqueID=""/>
    </ns0:CreateClientPregnancy_Output>
  </s:Body>
</s:Envelope>
```

#### B.9.9.6 XML STRUCTURE GETCLIENTPREGNANCYRESPONSE

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <ns0:GetClientPregnancyDetails_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
      <mc:MessageContextOutput Acknowledgement="Process completed successfully."/>
      <Client ClientID=""/>
      <ClientPregnancy PregnancyStartDate="" PregnancyEndDate="" AssessmentDate=""
ClientPregnancyUniqueID=""/>
    </ns0:GetClientPregnancyDetails_Output>
  </s:Body>
</s:Envelope>
```

## B.10 Discharge

**Definition:** A discharge action closes an episode and marks it as inactive. An outpatient episode can be discharged for only few options—such as—CIN change, client merge, death. A 24-hour-admission episode can be discharged for various reasons (Refer to DMH IBHIS Dictionary Values V4.7) .

**Use Case :** Trading Partner needs to discharge a client from their active episode in IBHIS.

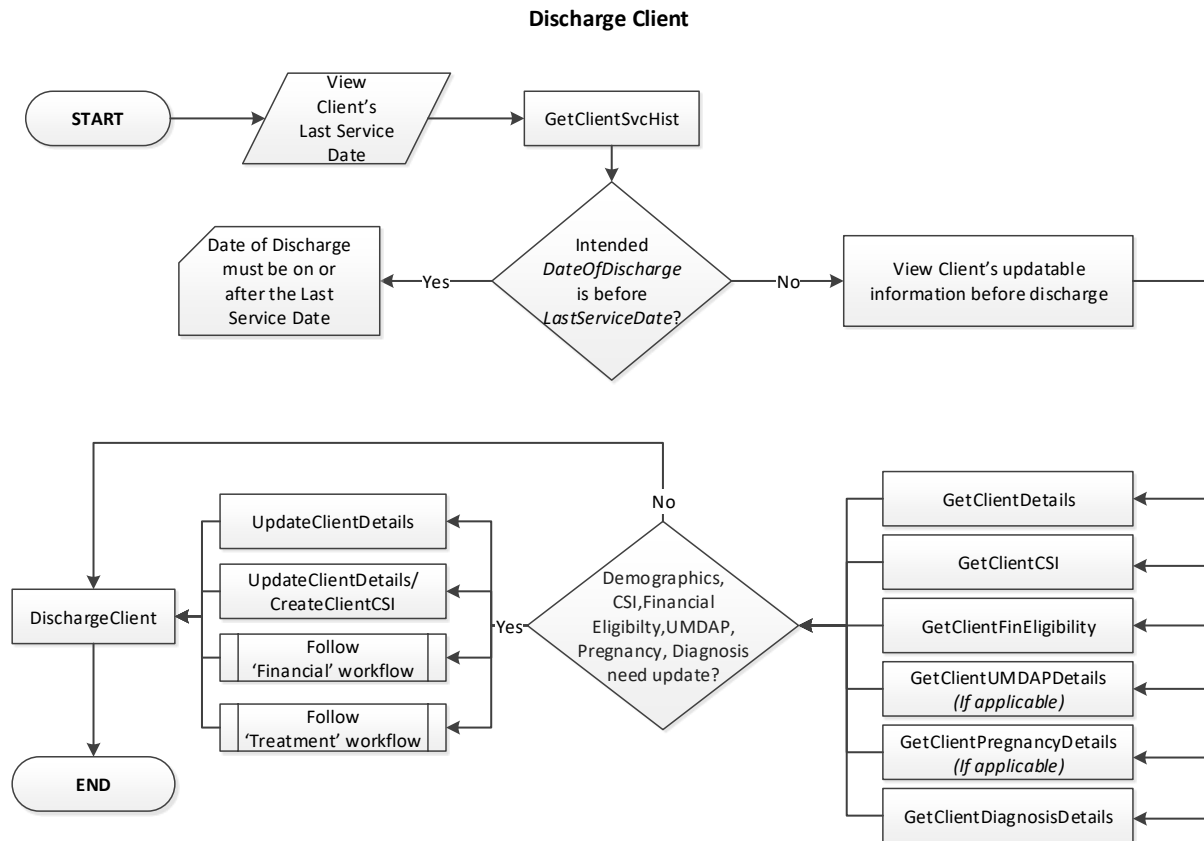
**Web Service Action:** *DischargeClient* operation for Use Case.

**Precondition:**

- TP is authenticated.
- Client has an active episode under TP’s program in IBHIS.
- TP performed *GetClientSvcHist* operation and reviewed the last service date information so that submitted discharge date is on or beyond the last service date. Visit section B.13 for more information on *GetClientSvcHist* operation.

**B.10.1 APPLICATION FLOW DIAGRAM: DISCHARGE**

Follow the workflow steps below when filing Discharge in IBHIS.



**Notes:**

Episodic: Discharge record is episodic and hence an Episode ID is required for filing a discharge.

Limitation: Submitted discharge data can not be edited through any Client Service operation.

B.10.2 DISCHARGECLIENT\_INPUT

<b>DischargeClient REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
EpisodeID	R	String	3	Must contain a numeric value.
ClientAdmission	R	Enumeration	N/A	Restricted to set of values. <i>Outpatient</i> <i>Admission24Hour</i>
TypeOfDischarge	R	Enumeration	N/A	For acceptable values see section <a href="#">E.5</a> .
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section F</a> .
DateOfDischarge	R	Date YYYY-MM-DD	10 Fixed length	Format enforced.
TimeOfDischarge	R	Time HH:MMAM HH:MMPM	7 Fixed length	Format enforced.
DischargingStaffNPI	R	String	10	Numeric only.
EpisodeDischargeComments	O	String	300	

B.10.3 DISCHARGECLIENT\_OUTPUT

<b>DischargeClient RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
EpisodeID	String	3

B.10.4 DATA ATTRIBUTE DESCRIPTION

Data Attribute <i>(In alphabetical order)</i>	Description
ClientAdmission	Data element containing two options to separate 24-Hour-Admission and Outpatient episode discharge filing.
ClientID	DMH unique client identifier in IBHIS.
DateOfDischarge	Unique identifier assigned to the client pregnancy record.
DischargingStaffNPI	10-digit NPI number of clinician filing discharge.
EpisodeDischargeComments	This field is more appropriate for administrative types of comments. There is no requirement to enter anything. If the Discharge Comments field is used, it would NOT be appropriate to describe the client's death in the field.
EpisodeID	IBHIS unique identifier assigned to an episode.
ProgramOfAdmission	Program identifier pertaining to the program ID of the Trading Partner (TP) admitted the client for treatment.
TimeOfDischarge	Self descriptive.
TypeOfDischarge	Self descriptive. Note that 'CIN Change' value should be used only when there's a change in client's Subscriber Client Index Number.

**B.10.5 XML STRUCTURE DISCHARGECLIENTREQUEST**

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:DischargeClient_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <ClientAdmission ClientID="?" EpisodeID="?">
        <!--You have a CHOICE of the next 2 items at this level-->
        <Outpatient TypeOfDischarge="?"/>
        <Admission24Hour TypeOfDischarge="?" ProgramOfAdmission="?"/>
      </ClientAdmission>
      <DischargeClient DateOfDischarge="?" TimeOfDischarge="?" DischargingStaffNPI="?"
EpisodeDischargeComments="?"/>
    </ns:DischargeClient_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

## B.11 Public Guardian Service

**Definition:** The case information data involved with the Los Angeles County Public Guardians’ Office are loaded into IBHIS through a nightly process.

**Use Case:**

Trading Partner needs to retrieve any existing Public Guardian Service information for an existing client from IBHIS.

**Web Service Action:**

*GetPublicGuardianSvcHist* for Use Case

**Precondition:**

- TP is authenticated.
- Client exists in IBHIS.
- Client has existing Public Guardian Service data in IBHIS.

**Notes:**

Not Episodic: These data set is non-episodic. No EpisodeID is needed for the transaction.

B.11.1 GETPUBLICGUARDIANSVCHIST\_INPUT

<b>GetPublicGuardianSvcHist REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.

B.11.2 GETPUBLICGUARDIANSVCHIST\_OUTPUT

<b>GetPublicGuardianSvcHist RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
PublicGuardianCaseStatus	String	40
AssignedDeputyPG	String	40
PGContactNumber	String XXXXXXXXXX	10
DateCaseOpened	Date YYYY-MM-DD	10

B.11.3 DATA ATTRIBUTE DESCRIPTION

Data Attribute <i>(In alphabetical order)</i>	Description
AssignedDeputyPG	Name of the Public Guardian assigned deputy.
ClientID	DMH unique client identifier in IBHIS.
DateCaseOpened	The date the currently active case was opened with the Los Angeles County Office of the Public Guardian.
PGContactNumber	Public Guardian contact telephone number.
PublicGuardianCaseStatus	Two statuses are available: <ul style="list-style-type: none"> <li>• PG Appointed</li> <li>• PG Investigation</li> </ul>

#### B.11.4 XML STRUCTURE GETPUBLICGUARDIANSVCHISTREQUEST

```
</soapenv:Envelope><soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetPublicGuardianSvcHist_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <Client ClientID="?"/>
    </ns:GetPublicGuardianSvcHist_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

## B.12 DCFS Service

**Definition:** The case information data involved with the Los Angeles County Department of Children and Family Services (DCFS) are loaded into IBHIS through a nightly process.

**Use Case:**

Trading Partner needs to retrieve any existing DCFS service information for an existing client from IBHIS.

**Web Service Action:**

GetDCFSClientSvcHist for Use Case

**Precondition:**

- TP is authenticated.
- Client exists in IBHIS.
- Client has existing DCFS Service data in IBHIS.
- Client has an active and/or discharged episode under TP’s program in IBHIS.

**Notes:**

Active Episode: Even though the records are non-episodic, TP cannot retrieve any data without having an episode under their program in IBHIS.

### B.12.1 GETDCFSCLIENTSVCHIST\_INPUT

<b>GetDCFSClientSvcHist REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.
ProgramOfAdmission	CR For '24 Hour' admission episode	Enumeration	N/A	Restricted to set of values. Get the values using Dictionary Service. See <a href="#">section E</a> .

### B.12.2 GETDCFSCLIENTSVCHIST\_OUTPUT

<b>GetDCFSClientSvcHist RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	80
DCFSCaseStatus	String	80
DCFSAssignedOffice	String	40
AssignedCSW	String	10
CSWContactNumber	String XXXXXXXXXX	10
DateCaseOpened	Date YYYY-MM-DD	80

### B.12.3 DATA ATTRIBUTE DESCRIPTION

Data Attribute (In alphabetical order)	Description
AssignedCSW	Name of the Public Guardian assigned deputy.
ClientID	DMH unique client identifier in IBHIS.

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
<b>DateCaseOpened</b>	The date the currently active case was opened with the Los Angeles County Office of the Public Guardian.
<b>DCFSAssignedOffice</b>	Public Guardian contact telephone number.
<b>ProgramOfAdmission</b>	Two statuses are available: <ul style="list-style-type: none"> <li>• PG Appointed</li> <li>• PG Investigation</li> </ul>
<b>DateCaseOpened</b>	The date the currently active case was opened with the Los Angeles County Office of the Public Guardian.
<b>CSWContactNumber</b>	Public Guardian contact telephone number.
<b>DCFSCaseStatus</b>	Two statuses are available: <ul style="list-style-type: none"> <li>• PG Appointed</li> <li>• PG Investigation</li> </ul>

**B.12.4 XML STRUCTURE GETDCFSCLIENTSVCHISTREQUEST**

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext"
xmlns:typ="http://b2b.dmh.lacounty.gov/ews/EstablishClient/types">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetDCFSClientSvcHist_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <Client typ:ClientID="?">
        <!--Optional:-->
        <Admission24Hour typ:ProgramOfAdmission="?"/>
      </Client>
    </ns:GetDCFSClientSvcHist_Input>
  </soapenv:Body>
</soapenv:Envelope>

```



## B.13 Service History

**Definition:** This operation is intended to retrieve client’s first and last services recorded in IBHIS.

**Use Case:**

TPs need to retrieve any existing service history data for an existing client from IBHIS.

**Web Service Action:**

Client Service offers GetClientSvcHist operation to accommodate the Use case.

**Precondition:**

- TP is authenticated.
- Client exists in IBHIS.
- Services have been approved in MSO and sent to PM (MSO and PM are two modules in IBHIS)

### B.13.1 GETCLIENTSVCHIST\_INPUT

<b>GetClientSvcHist REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.

### B.13.2 GETCLIENTSVCHIST\_OUTPUT

<b>GetClientSvcHist RESPONSE</b>		
Data Attribute	Type & Format	MaxL
ClientID	String	9
FirstServiceDate	Date YYYY-MM-DD	10
LastServiceDate	Date YYYY-MM-DD	10
Program	String	40
ServiceProgramType	String	50
ServicePractitionerName	String	40
PrincipalDiagnosis	String	40

### B.13.3 DATA ATTRIBUTE DESCRIPTION

Data Attribute (In alphabetical order)	Description
ClientID	DMH unique client identifier in IBHIS.
FirstServiceDate	First date of service for a client’s service history under TP’s program in IBHIS.
LastServiceDate	Latest date of service for a client’s service history under TP’s program in IBHIS.
Program	Service rendering Program’s name.
ServiceProgramType	Service rendering Program’s type.
ServicePractitionerName	Name of the provider rendering service.
PrincipalDiagnosis	Principal Diagnosis recorded with a service history.

#### B.13.4 XML STRUCTURE GETCLIENTSVCHISTREQUEST

```
<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetClientSvcHist_Input>
      <mes:MessageContextInput ProgramID=""/>
      <Client ClientID=""/>
    </ns:GetClientSvcHist_Input>
  </soapenv:Body>
</soapenv:Envelope>
```

## B.14 Legacy Service (IS) History

**Definition:** This operation is intended to retrieve non-converted clients and their associated service history. The data delivered by this operation is based on IS episodes that are associated with clients that have records in IBHIS, thus it functions similarly to an “episode lookup” in the IS. These data have been extracted from the IS and imported into IBHIS so that it is available for review from within IBHIS. Data is accessed by submitting the valid IBHIS ClientID for the associated client.

**Use Case:**

TPs need to retrieve any legacy service history data for an existing client from IBHIS.

**Web Service Action:**

Client Service offers GetClientLegacySvcHist operation to accommodate the Use case.

**Precondition:**

TP is authenticated.

Client exists in IBHIS.

Client’s legacy service history data is loaded in IBHIS from IS (legacy system).

**Notes:**

Limitation: This data set is not real time. The data set is derived from IS into IBHIS through discrete extraction and load events as opposed to real time integration between these two systems.

### B.14.1 GETCLIENTLEGACYSVCHIST\_INPUT

<b>GetClientLegacySvcHist REQUEST</b>				
Data Attribute	Required	Type & Format	MaxL	Restriction
ClientID	R	String	9	Must contain a numeric value.

### B.14.2 GETCLIENTLEGACYSVCHIST\_OUTPUT

<b>GetClientLegacySvcHist RESPONSE</b>		
Data Attribute	Type & Format	MaxL
LegacyClientID	String	20
LegacyFirstServiceDate	Date YYYY-MM-DD	10
LegacyLastServiceDate	Date YYYY-MM-DD	10
LegacyProgramName	String	40
LegacyProgramType	String	50
LegacyPractitionerName	String	40
LegacyPrimaryDiagnosisDesc	String	64

### B.14.3 DATA ATTRIBUTE DESCRIPTION

Data Attribute (In alphabetical order)	Description
ClientID	DMH unique client identifier in IBHIS.
LegacyClientID	It is a cross-reference to “non-surviving” IS ClientID associated to the surviving IBHIS ClientID.
LegacyFirstServiceDate	IS episode Admission Date.
LegacyLastServiceDate	If the associated IS episode had been discharged at the time of the data extract for that load, the episode discharge date is populated. If,

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
	however, the IS episode remained open at the time of the data extract AND there were services submitted under that IS episode, the date presented is the last date of service in the IS associated to that episode as of the data extract date.
<b>LegacyProgramName</b>	This is the IS Service Location / Reporting Unit number and name associated to the episode.
<b>LegacyProgramType</b>	This is a derived field which maps the episode to a program type within the following categories: Day Tx / Day Rehab; DMH EOB Field Response; IMD/PHF/Other Residential; Jail Mental Health; Jail MH Inpatient; Outpatient; Psych Acute Inpatient; Psychiatric ER/UCC Crisis Stab; Public Guardian; State Hospital.
<b>LegacyPractitionerName</b>	This provides the name of the IS "Primary Contact" associated to the IS episode as of the data extract date.
<b>LegacyPrimaryDiagnosisDesc</b>	If the IS episode had been discharged as of the extract date, the IS Primary Discharge Diagnosis is provided. Otherwise the IS Primary Admission Diagnosis is provided.

B.14.4 XML STRUCTURE GETCLIENTLEGACYSVCHISTREQUEST

```

<soapenv:Envelope xmlns:soapenv="http://schemas.xmlsoap.org/soap/envelope/"
xmlns:ns="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:mes="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <soapenv:Header/>
  <soapenv:Body>
    <ns:GetClientLegacySvcHist_Input>
      <mes:MessageContextInput ProgramID="?"/>
      <Client ClientID="?"/>
    </ns:GetClientLegacySvcHist_Input>
  </soapenv:Body>
</soapenv:Envelope>

```

## B.15 CSI – Assessment Record

**Background:**

In order to comply with California State Department of Health Care Services (DHCS) mandated reporting, Los Angeles County Mental Health is requiring TPs begin capturing and submitting assessment data from their respective Electronic Health Record Systems. This data is referred to as Client and Service Information (CSI) Assessment data. LACDMH is providing five operations to submit and exchange CSI Assessment records.

**Precondition:**

The following preconditions apply:

- TP needs to have an active Service Request Log (SRL) record associated with their Program ID for a given client prior to any CSI Assessment Record creation. To get more information regarding SRL—visit the following URL: <https://dmh.lacounty.gov/pc/cp/srl/>
- TP needs to have an active episode associated with their Program in IBHIS for the client. Episode creation comes prior to CSI assessment. Note that a single episode can have multiple CSI assessment records.
- CSI Assessment transactions are required for Outpatient episodes only.

### B.15.1 SEARCHCSI

**Use Case:**

TPs need to search if there is any existing CSI Assessment record for a given client.

**Web Service Action:**

Client Service offers *SerachCSI* operation to accommodate the Use case.

**Precondition:**

- TP is authenticated.
- TP has an IBHIS Client ID for the client.

#### B.15.1.1 SEARCHCSI\_INPUT

Ref #	Data Element	R CR O	Data Type	Min Len	Max Len	Restriction	Acceptable Values
1	ProgramID	R	String	5	5	n/a	ProgramID configured in BizTalk associated with the Digital Certificate used for authentication.
2	IBHISClientID	R	String	1	9	n/a	Numbers only.

#### B.15.1.2 SEARCHCSI\_OUTPUT

Ref #	Data Element	Data Type	Required	MinL	MaxL
1	IBHISClientID	String	R	1	9
2	ProgramID	String	R	5	5
3	CSISubmissionID	String	R	1	255

B.15.2 AddCSI

**Use Case:**

TPs need to create a new CSI Assessment record for a client.

**Web Service Action:**

Client Service offers *AddCSI* operation to accommodate the Use case.

**Precondition:**

- TP is authenticated.
- Client exists in IBHIS (in other words, client has an IBHIS Client ID).
- Client has an active Service Request Log (SRL) record.

B.15.2.1 ADDCSI\_INPUT

Ref #	Data Element	R CR O	Data Type & Format	Min Len	Max Len	Restriction	Acceptable Values
1	ProgramID	R	String	5	5	n/a	ProgramID configured in BizTalk associated with the Digital Certificate used for authentication.
2	IBHISClientID	R	String	1	9	n/a	Numbers only.
3	ServiceRequestID	R	String	1	255	Must be an active ID.	Numbers only.
4	TreatmentAppointment FirstOfferDate	O	Date YYYY-MM-DD	10	10	n/a	Valid dates according to the following business rules: Must be greater than or equal to January 1, 2018.
5	TreatmentAppointment SecondOfferDate	O	Date YYYY-MM-DD	10	10	n/a	Valid dates according to the following business rules: <ul style="list-style-type: none"> <li>• Treatment Appointment Second Offer Date must be greater than or equal to January 2, 2018</li> <li>• Must be greater than Treatment Appointment First Offer Date</li> <li>• Then the Treatment Appointment First Offer Date must not be Blank</li> </ul>
6	TreatmentAppointment ThirdOfferDate	O	Date YYYY-MM-DD	10	10	n/a	Valid dates according to the following business rules: <ul style="list-style-type: none"> <li>• Treatment Appointment Third Offer Date must be greater than or equal to January 3, 2018</li> <li>• Must be greater than Treatment Appointment Second Offer Date</li> <li>• Then the Treatment Appointment Second Offer Date must not be Blank</li> </ul>
7	TreatmentAppointment AcceptedDate	O	Date YYYY-MM-DD	10	10	n/a	Valid dates according to the following business rules: <ul style="list-style-type: none"> <li>• Treatment Appointment Accepted Date must be greater than or equal to January 1, 2018</li> <li>• If Treatment Appointment Second and Treatment Appointment Third Offer Dates are Blank then</li> </ul>

Ref #	Data Element	R CR O	Data Type & Format	Min Len	Max Len	Restriction	Acceptable Values
							Treatment Appointment Accepted Date must be equal to Treatment Appointment First Offer Date. <ul style="list-style-type: none"> <li>• If the Treatment Appointment Second Offer Date is populated and the Treatment Appointment Third Offer Date is Blank then the Treatment Appointment Accepted Date must be equal to Treatment Appointment Second Offer Date.</li> <li>• If the Treatment Appointment Third Offer Date is populated then the Treatment Appointment Accepted Date must be greater than or equal to the Treatment Appointment Third Offer Date.</li> <li>• If the Treatment Appointment Accepted Date is Blank then the Treatment Appointment First Offer Date should be Blank.</li> </ul>
8	ClosureReason	R	Enumeration	n/a	n/a	Restricted to set of values	<a href="#">See E 5.2</a>
9	ReferredTo	R	Enumeration	n/a	n/a	Restricted to set of values	<a href="#">See E 5.3</a>

B.15.2.2 AddCSI\_OUTPUT

Ref #	Data Element	Data Type & Format	Required	MinL	MaxL
1	CSISubmissionID	String	R	1	255
2	IBHISClientID	String	R	1	9

B.15.3 UPDATECSI

**Use Case:**

TPs need to update an active CSI Assessment record for a client.

**Web Service Action:**

Client Service offers *UpdateCSI* operation to accommodate the Use case.

**Precondition:**

- TP is authenticated.
- Client exists in IBHIS (in other words, client has an IBHIS Client ID).
- Client has an active Service Request Log (SRL) record.
- TP has an active CSI Assessment record that is associated with their Program ID.

B.15.3.1 UPDATECSI\_INPUT

Ref #	Data Element	R CR O	Data Type & Format	Min Len	Max Len	Restriction	Acceptable Values
1	ProgramID	R	String	5	5	n/a	ProgramID configured in BizTalk associated with the Digital Certificate used for authentication.
2	IBHISClientID	R	String	1	9	n/a	Numbers only.
3	ServiceRequestID	R	String	1	255	Must be an active ID.	Numbers only.
4	TreatmentAppointment FirstOfferDate	CR	Date YYYY-MM-DD	10	10	n/a	Valid dates according to the following business rules: Must be greater than or equal to January 1, 2018.
5	TreatmentAppointment SecondOfferDate	CR	Date YYYY-MM-DD	10	10	n/a	Valid dates according to the following business rules: <ul style="list-style-type: none"> <li>• Treatment Appointment Second Offer Date must be greater than or equal to January 2, 2018</li> <li>• Must be greater than Treatment Appointment First Offer Date</li> <li>• Then the Treatment Appointment First Offer Date must not be Blank</li> </ul>
6	TreatmentAppointment ThirdOfferDate	O	Date YYYY-MM-DD	10	10	n/a	Valid dates according to the following business rules: <ul style="list-style-type: none"> <li>• Treatment Appointment Third Offer Date must be greater than or equal to January 3, 2018</li> <li>• Must be greater than Treatment Appointment Second Offer Date</li> <li>• Then the Treatment Appointment Second Offer Date must not be Blank</li> </ul>
7	TreatmentAppointment AcceptedDate	O	Date YYYY-MM-DD	10	10	n/a	Valid dates according to the following business rules: <ul style="list-style-type: none"> <li>• Treatment Appointment Accepted Date must be greater than or equal to January 1, 2018</li> <li>• If Treatment Appointment Second and Treatment Appointment Third Offer Dates are Blank then Treatment Appointment Accepted Date must be equal to Treatment Appointment First Offer Date.</li> <li>• If the Treatment Appointment Second Offer Date is populated and the Treatment Appointment Third Offer Date is Blank then the Treatment Appointment Accepted Date must be equal to Treatment Appointment Second Offer Date.</li> <li>• If the Treatment Appointment Third Offer Date is populated then the Treatment Appointment Accepted Date must be greater</li> </ul>



Ref #	Data Element	R CR O	Data Type & Format	Min Len	Max Len	Restriction	Acceptable Values
							than or equal to the Treatment Appointment Third Offer Date. <ul style="list-style-type: none"> <li>If the Treatment Appointment Accepted Date is Blank then the Treatment Appointment First Offer Date should be Blank.</li> </ul>
8	ClosureReason	R	Enumeration	n/a	n/a	Restricted to set of values	<a href="#">See E 5.2</a>
9	ReferredTo	R	Enumeration	n/a	n/a	Restricted to set of values	<a href="#">See E 5.3</a>
10	CSISubmissionID	R	String	1	255		Numbers only.

#### B.15.3.2 UPDATECSI\_OUTPUT

Ref #	Data Element	Data Type & Format	Required	MinL	MaxL
1	CSISubmissionID	String	R	1	255
2	IBHISClientID	String	R	1	9

#### B.15.4 GETCSI

**Use Case:**

TPs need to retrieve an active CSI Assessment record for a client.

**Web Service Action:**

Client Service offers *GetCSI* operation to accommodate the Use case.

**Precondition:**

- TP is authenticated.
- TP has a CSISubmissionID for an active CSI Assessment record.

#### B.15.4.1 GETCSI\_INPUT

Ref #	Data Element	R CR O	Data Type & Format	Min Len	Max Len	Restriction	Acceptable Values
1	ProgramID	R	String	5	5	n/a	ProgramID configured in BizTalk associated with the Digital Certificate used for authentication.
2	CSISubmissionID	R	String	1	255		Numbers only.

B.15.3.2 GETCSI\_OUTPUT

Ref #	Data Element	Data Type & Format	Required	MinL	MaxL
1	CSISubmissionID	String	R	1	255
2	IBHISClientID	String	R	1	9
3	ServiceRequestID	String	R	1	255
4	TreatmentAppointmentFirstOfferDate	Date YYYY-MM-DD	O	10	10
5	TreatmentAppointmentSecondOfferDate	Date YYYY-MM-DD	O	10	10
6	TreatmentAppointmentThirdOfferDate	Date YYYY-MM-DD	O	10	10
7	TreatmentAppointmentAcceptedDate	Date YYYY-MM-DD	O	10	10
8	ClosureReason	String	R	2	2
9	ReferredTo	String	R	2	2

B.15.5 DELETECSI

**Use Case:**

TPs need to delete an active but erroneous CSI Assessment record for a client.

**Web Service Action:**

Client Service offers *DeleteCSI* operation to accommodate the Use case.

**Precondition:**

- TP is authenticated.
- TP has an active CSI Assessment record that is associated with their Program ID.

B.15.5.1 DELETECSI\_INPUT

Ref #	Data Element	R CR O	Data Type & Format	Min Len	Max Len	Restriction	Acceptable Values
1	ProgramID	R	String	5	5	n/a	ProgramID configured in BizTalk associated with the Digital Certificate used for authentication.
2	CSISubmissionID	R	String	1	255		Numbers only.

B.15.5.2 DELETECSI\_OUTPUT

Ref #	Data Element	Data Type & Format	Required	MinL	MaxL
1	CSISubmissionID	String	R	1	255

B.15.6 DATA ATTRIBUTE DESCRIPTION

<b>Data Attribute</b> <i>(In alphabetical order)</i>	<b>Description</b>
<b>ProgramID</b>	TP's Legal Entity number associated with the LACDMH issued Digital Certificate.
<b>IBHISClientID</b>	LACDMH unique client identifier in IBHIS.
<b>CSISubmissionID</b>	Unique identifier of a specific CSI Assessment record.
<b>ServiceRequestID</b>	Unique identifier of a specific SRL record.
<b>TreatmentAppointment FirstOfferDate</b>	First appointment date that is offered to client for Trreatment/Services addressing the client's mental health needs that are not primarily for the purpose of assessment. Identifies the first Specialty Mental Health Services (SMHS) date offered to the client.
<b>TreatmentAppointment SecondOfferDate</b>	Second appointment date that is offered to client for Trreatment/Services addressing the client's mental health needs that are not primarily for the purpose of assessment. Identifies the second SMHS date offered to the client.
<b>TreatmentAppointment ThirdOfferDate</b>	Third appointment date that is offered to client for Trreatment/Services addressing the client's mental health needs that are not primarily for the purpose of assessment. Identifies the third SMHS date offered to the client.
<b>TreatmentAppointment AcceptedDate</b>	Identifies the SMHS date accepted by the client.
<b>ClosureReason</b>	List of reasons the assessment treatment process was completed/ended.
<b>ReferredTo</b>	Identifies where the beneficiary was referred to.

B.15.7 SAMPLE XMLS

In this section sample xmls of Input and the expected successful Output of all operations are provided.

B.15.7.1 SAMPLE XML OF SEARCHCSI

INPUT:

```
<ns:SearchCSI_Input>
  <mes:MessageContextInput ProgramID="12345"/>
  <typ:SearchCSI IBHISClientID="123456"/>
</ns:SearchCSI_Input>
```

SUCCESSFUL OUTPUT:

```
<ns0:SearchCSI_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:t="http://b2b.dmh.lacounty.gov/CS/202001/types"
xmlns:mco="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <mco:MessageContextOutput Acknowledgement="Completed successfully."/>
  <SearchCSIResults>
    <Record t:IBHISClientID="123456" t:ProgramID="12345" t:CSISubmissionID="12345"/>
    <Record t:IBHISClientID="123456" t:ProgramID="12345" t:CSISubmissionID="67890"/>
  </SearchCSIResults>
</ns0:SearchCSI_Output>
```

## B.15.7.2 SAMPLE XML OF ADDCSI

## INPUT:

```

<ns:AddCSI_Input>
  <mes:MessageContextInput ProgramID="12345"/>
  <typ:AddCSI
IBHISClientID="12345"
ServiceRequestID="456"
TreatmentAppointmentFirstOfferDate="2018-01-01"
TreatmentAppointmentSecondOfferDate="2018-02-01"
TreatmentAppointmentThirdOfferDate="2018-03-01"
TreatmentAppointmentAcceptedDate="2018-03-04"
ClosureReason="04"
ReferredTo="04" />
</ns:AddCSI_Input>

```

## SUCCESSFUL OUTPUT:

```

<ns0:AddCSI_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:t="http://b2b.dmh.lacounty.gov/CS/202001/types"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <mc:MessageContextOutput Acknowledgement="Client CSI record has been created successfully."/>
  <t:CSI t:CSISubmissionID="123" t:IBHISClientID="12345"/>
</ns0:AddCSI_Output>

```

## B.15.7.3 SAMPLE XML OF UPDATECSI

## INPUT:

```

<ns:UpdateCSI_Input>
  <mes:MessageContextInput ProgramID="12345"/>
  <typ: UpdateCSI
IBHISClientID="12345"
ServiceRequestID="456"
ClosureReason="04"
ReferredTo="04"
TreatmentAppointmentFirstOfferDate="2018-01-01"
TreatmentAppointmentSecondOfferDate="2018-02-01"
TreatmentAppointmentThirdOfferDate="2018-03-01"
TreatmentAppointmentAcceptedDate="2018-03-04"
ClosureReason="04"
ReferredTo="04"
CSISubmissionID="123"/>
  </ns:UpdateCSI_Input>

```

## SUCCESSFUL OUTPUT:

```

<ns0:UpdateCSI_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:t="http://b2b.dmh.lacounty.gov/CS/202001/types"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">

```

```
<mc:MessageContextOutput Acknowledgement="CSI record has been updated successfully."/>
<t:CSI t:CSISubmissionID="123" t:IBHISClientID="12345"/>
</ns0:UpdateCSI_Output>
```

#### B.15.7.4 SAMPLE XML OF GETCSI

INPUT:

```
<ns:GetCSIDetails_Input>
  <mes:MessageContextInput ProgramID="12345"/>
  <typ:GetCSI CSISubmissionID="1234"/>
</ns:GetCSIDetails_Input>
```

SUCCESSFUL OUTPUT:

```
<ns0:GetCSIDetails_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:t="http://b2b.dmh.lacounty.gov/CS/202001/types"
xmlns:mco="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
  <mco:MessageContextOutput Acknowledgement="Completed successfully."/>
  <GetCSIDetails>
    <Record>
      <t:CSIDetail
CSISubmissionID="49"
IBHISClientID="232323"
ServiceRequestID="38160"
TreatmentAppointmentFirstOfferDate="2019-01-01"
TreatmentAppointmentSecondOfferDate="2019-01-02"
TreatmentAppointmentThirdOfferDate="2019-01-03"
TreatmentAppointmentAcceptedDate="2019-01-03"
ClosureReason="04"
ReferredTo="04"/>
    </Record>
  </GetCSIDetails>
</ns0:GetCSIDetails_Output>
```

#### B.15.7.5 SAMPLE XML OF DELETECSI

INPUT:

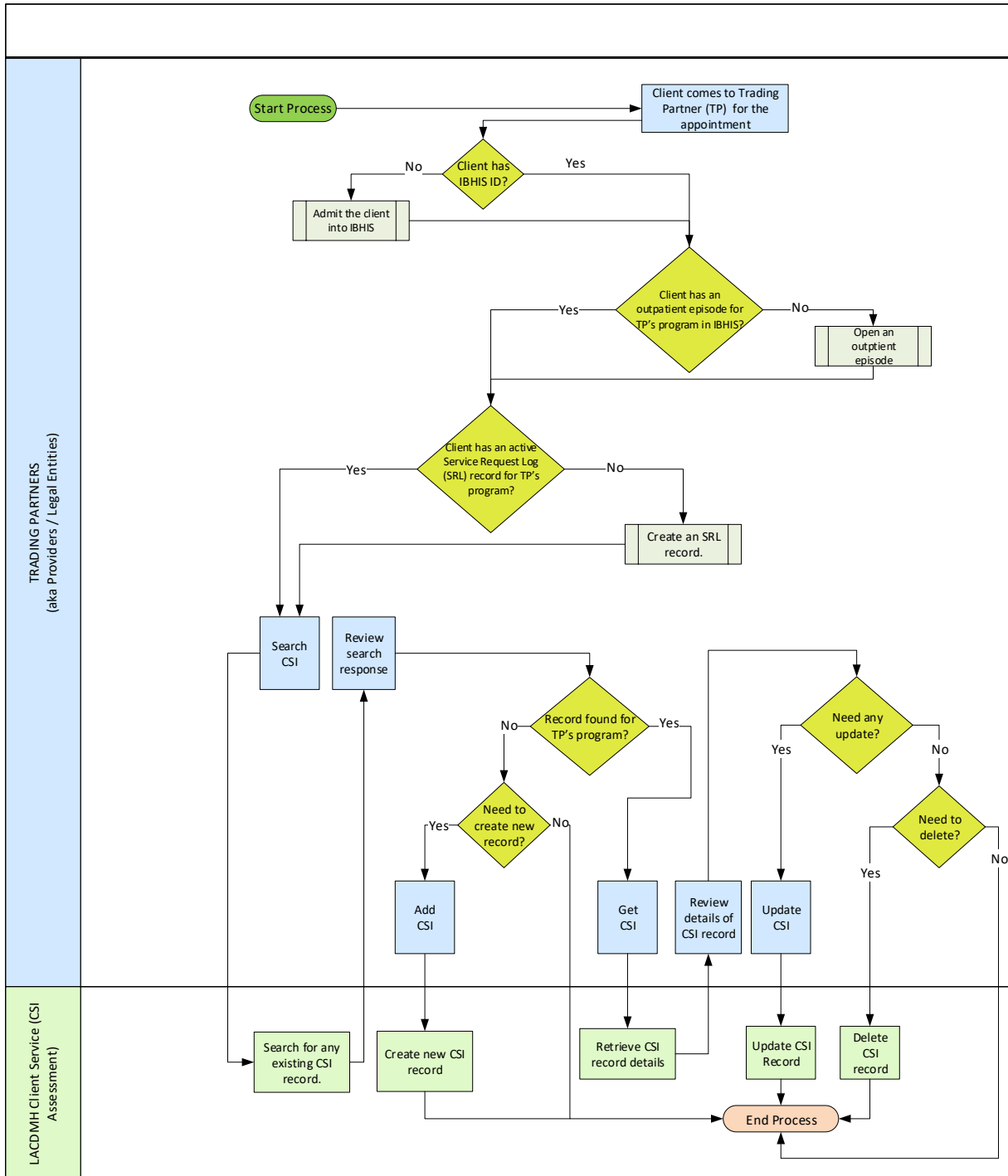
```
<ns>DeleteCSI_Input>
  <mes:MessageContextInput ProgramID="45455"/>
  <typ>DeleteCSI CSISubmissionID="12345"/>
</ns>DeleteCSI_Input>
```

SUCCESSFUL OUTPUT:

```
<ns0>DeleteCSI_Output xmlns:ns0="http://b2b.dmh.lacounty.gov/CS/202001"
xmlns:t="http://b2b.dmh.lacounty.gov/CS/202001/types"
xmlns:mc="http://b2b.dmh.lacounty.gov/CS/202001/MessageContext">
```

```
<mc:MessageContextOutput Acknowledgement="Client CSI record has been deleted  
successfully."/>  
  <t:CSI t:CSISubmissionID="12345"/>  
</ns0:DeleteCSI_Output>
```

B.15.7.6 CSI PROCESS WORKFLOW



## C. Error Handling

The following table lists the most common errors along with reasons and corrective actions. Find the error by the error code and the operation name. If an error occurs that is not listed below- please open a Heat Ticket (check C.3 FAQ section to find out how to open Heat Ticket).

Error Code	Client Service Operation	Error Message	Reason	Corrective Action
s:Client	All operations	Authorization failed. Unauthorized access to this LACDMH web service is prohibited.	ProgramID does not align with the Digital Certificate.	ProgramID tied to the TP's Digital Certificate needs to be used.
s:Client	GetDCFSClient SvcHist and all other operations that accept EpisodeID in the REQUEST	Authorization failed. Program ID is not associated to active episode for this client.	Submitted EpisodeID is already discharged or there's no active episode for the client in IBHIS under TP's program or the submitted episode ID is not tied to TP's program ID.	Check if the correct active episode ID is used (a <i>GetClientActiveEpisode</i> operation can be invoked to get the active episode ID), otherwise client needs to be admitted under TP's program in IBHIS.
s:Client	All operations that accept ProgramOfAdmission in the REQUEST.	ProgramOfAdmission is not associated to ProgramID in Message Context.	Submitted ProgramOfAdmission code is not under TP's Program.	Submitted ProgramOfAdmission code needs to be tied to TP's ProgramID.
s:Client	All operations.	An error has occurred.	Transaction processing error.	Open a Heat Ticket and provide REQUEST and RESPONSE xmls.
s:Client	AdmitNewClient AdmitExisting Client UpdateClient Details UpdateClient FinEligibility	Invalid SSN Format.	Submitted Social Security Number does not conform to the SSN Federal Standard identified in the data dictionary.	Enter a valid SSN.
N/A	All operations.	There was an error communicating with LAC DMH's IBHIS system ( <i>no further information</i> ).	The error relates to TP's internal system.	TP should contact their IT vendor
N/A	All operations.	<h2>403 - Forbidden: Access is denied.</h2><h3>You do not have permission to view this directory or page using the credentials that you supplied.</h3>	Digital certificate missing.	Install and set up the LAC DMH issued digital certificate.



Error Code	Client Service Operation	Error Message	Reason	Corrective Action
-1000	All operations.	Details: The element <name of the element> in namespace <namespace address> has invalid child element <name of the child element> in namespace <namespace address>. List of possible elements expected: <name of the element> in namespace <namespace address>	Submitted REQUEST did not conform to the expected xml structure based on the Client Service wsdl.	Verify the xml structure is correct by Client Service wsdl definition (update the definition if needed), remove and add any elements as necessary and re-submit the call.
-1000	All operations.	Details: The <name of the data attribute> attribute is not declared.	Submitted REQUEST did not conform to the expected xml structure based on the Client Service wsdl.	Verify the xml structure is correct by Client Service wsdl definition (update the definition if needed), remove and add any elements as necessary and re-submit the call.
-1000	All operations.	Finding the document specification by message type..... failed. Verify the schema deployed properly.	Submitted REQUEST is using an older version of Client Service wsdl	Update the Client Service wsdl to the latest version. Visit the following location: <a href="https://dmh.lacounty.gov/pc/cp/cs/">https://dmh.lacounty.gov/pc/cp/cs/</a>
-1000	All operations.	Details: The <name of the data attribute> attribute is invalid - The value <entered value> is invalid according to its datatype <data type> - The Enumeration constraint failed.	Submitted value is not found in the acceptable-values-list (dictionary).	Enter a value from the acceptable-values-list (dictionary). If it is a valid value but not in the dictionary, then contact DMH (open a Heat Ticket providing REQUEST and RESPONSE xmls).
-1000	All operations.	Details: The <name of the data attribute> attribute is invalid - The value <entered value> is invalid according to its datatype <data type> - The actual length is greater than the MaxLength value.	Length of submitted value is longer than the allowed maximum length.	Enter a value that is within the maximum length.
-1000	All operations.	Details: The <name of the data attribute> attribute is invalid - The value <entered value> is invalid according to its datatype <data type> - The actual length is not equal to the specified length.	Submitted value is not equal to the specified fixed length--such as: Phone Number, Zip Code, SocialSecurityNumber.	Enter a value that conforms to the fixed length.

Error Code	Client Service Operation	Error Message	Reason	Corrective Action
-1000	All operations.	<p>Details: The &lt;name of the data attribute&gt; attribute is invalid - The value &lt;entered value&gt; is invalid according to its datatype &lt;data type&gt; - The Pattern constraint failed.</p> <p><i>Example: The XML Validator failed to validate. Details: The 'SubscriberClientIndexNumber' attribute is invalid- The value '93817645P' is invalid according to its datatype 'String'- The Pattern constraint failed.</i></p>	<p>1. Submitted data attribute value has characters not allowed</p> <p>2. REQUEST has an optional non-string-type data attribute empty</p>	<p>1. Check the submitted value to verify it conforms to the data type/format/restriction applied by Client Service</p> <p><i>Note:</i>  <i>SubscriberClientIndexNumber (CIN) ending with P or Q is not a CIN; it is a pseudo Social Security Number (SSN). Use the pseudo SSN to run an eligibility check for the client on the Medi-Cal website. It should return the client's CIN if the pseudo SSN is linked to the CIN. If the CIN is not returned, have the client work with his/her eligibility worker to link the pseudo SSN and the CIN.</i></p> <p>2. Remove the non-string-type optional data attribute from the operation's REQUEST xml.</p>
-1000	All operations	<p>The XML Validator failed to validate.</p> <p>Details: The required attribute &lt;name of the data attribute&gt; is missing.</p>	Submitted REQUEST does not contain the data attribute specified.	Enter the required data attribute with a valid value.
-1000	All operations	<p>The source was not found, but some or all event logs could not be searched. To create the source, you need permission to read all event logs to make sure that the new source name is unique. Inaccessible logs: Security.</p>	Digital Certificate is corrupted and/or DMH BizTalk profile is corrupted.	Contact DMH by opening a Heat Ticket.
-1000	AdmitNewClient AdmitExistingClient UpdateClientDetails SearchClient	<p>FirstName added with LastName Field Lengths exceeds the 40 character limit</p>	Either First Name or Last Name or Combined First Name + Last Name + Suffix + MI + Prefix exceeded the limit.	Follow the <b>Client Name</b> guideline in the Notes of the following sections to accommodate the combined name length: B.1, B.3, B.5
0004	All operations	'Client' does not exist.	Submitted client ID is not found in IBHIS.	Contact DMH to verify if the client ID has been merged and get the survivor client ID to use. Otherwise, perform AdmitNewClient operation to add the client in IBHIS.
0005	All Get and Search operations	The matching record is not found with the criteria you are looking for.	No match or no result found in IBHIS.	If TP is affirmative that a result/match should be returned, then contact DMH (open a Heat Ticket providing

Error Code	Client Service Operation	Error Message	Reason	Corrective Action
				REQUEST and RESPONSE xmls). Otherwise, no corrective action needed. This is just an informational message stating no match/result found in IBHIS.
0007	SearchClient	More than 999 matches found: Please refine search. source: Avatar.	Search parameters found more 1000 or 1000+ matches.	Refine the search by removing optional criteria--such as <i>Alias</i>
0010	All operation	Generic error occured, source : LACountySoaService	Issue on the SOA layer.	Contact DMH by opening a Heat Ticket.
10000	AdmitNewClient AdmitExisting Client	Web service request failed with error : First Name, Last Name, and Date of Birth matches a client already in the system. Filing Canceled. source: Avatar	Submitted First Name, Last Name and Date of Birth matched with another existing client.	Do a Search, if the result shows the intended client is different from the existing client, then open a Heat Ticket.
10000	DischargeClient	Web service request failed with error : Cannot discharge <name of the client> Client has services which occur after discharge date.source: Avatar	Issue with service date validation.	If client does not have service after the discharge date for the given episode, contact DMH by opening a Heat Ticket.
10000	UpdateClient Details	Web service request failed with error : Changing First Name, Last Name, and Date of Birth has been restricted. Filing Canceled. source: Avatar	Trying to change First Name, Last Name and DOB of client at the same time.	Contact DMH by opening a Heat Ticket.
10000	UpdateClient Diagnosis	Web service request failed with error : Ranking cannot be defined for Rule-Out, or Void diagnoses. Source: Avatar	Submitted REQUEST with 'Void' status however, Ranking data attribute is present with a valid value.	Resubmit the REQUEST without <i>Ranking</i> data attribute.
10000	UpdateClient Diagnosis	Web service request failed with error : Bill Order can not be defined for Rule-Out, or Void diagnoses. Source: Avatar	Submitted REQUEST with 'Void' status however, Billing Order data attribute is present with a valid value.	Resubmit the REQUEST without <i>BillingOrder</i> data attribute.
10068	All Admit, Create and Update operations	GUID already in use. source: Avatar	Data error in IBHIS SYSTEM.GUIDIndex table.	Contact DMH by opening a Heat Ticket.
20003	All operations	The following fields are invalid: <name of the data attribute> source: Avatar	When an invalid value is present in any data attribute of the call's input: such as an invalid zip code.	Resubmit the REQUEST with valid value.

Error Code	Client Service Operation	Error Message	Reason	Corrective Action
40012	UpdateClient UMDAP	Enter Valid Unique ID.	Submitted <i>UniqueID</i> does not match with the one returned by related <i>Create</i> operation.	Verify that the UMDAP unique ID being submitted is the same as the one returned by the <i>Create</i> operation.
40015	CreateClient Pregnancy UpdateClient Pregnancy	Only Female Clients may be selected.source: Avatar	Submitted client's gender is not Female in the system.	Verify if it is the correct client record. If the verification is positive, then check if the error is in Gender value, then perform <i>UpdateClientDetails</i> to update the gender to 'Female' then resubmit the pregnancy operation.
40032	AdmitNewClient AdmitExisting Client CreateClient Diagnosis UpdateClient Diagnosis DischargeClient	No Staff Member found with this NPI Number.	Clinician does not exist in IBHIS	Add the clinician in IBHIS through PRM (Provider Registration and Maintenance) application, and then resubmit the Client Service operation. If issue still exists then contact DMH (open a Heat Ticket providing REQUEST and RESPONSE xmls).
40033	CreateClient Pregnancy UpdateClient Pregnancy	Pregnancy End Date cannot be before the Pregnancy Start Date.source: Avatar	Submitted pregnancy end date is prior to existing(or submitted) pregnancy start date.	Submit the operation with a valid pregnancy end date. Perform a <i>Get</i> operation to check the existing pregnancy start date.
40034	CreateClient Pregnancy UpdateClient Pregnancy	This pregnancy conflicts with an already filed pregnancy. Filing Cancelled. source: Avatar.	Submitted dates conflicts with an existing pregnancy record dates.	Perform the Get operation to verify the existing dates to avoid any conflict and resubmit the operation with correct dates.
40035	UpdateClient Pregnancy	This Pregnancy Unique ID is not valid for the specified Episode. source: Avatar.	Submitted <i>UniqueID</i> does not match with the one returned by related <i>Create</i> operation.	Verify that the Pregnancy unique ID being submitted is same as the one returned by the <i>Create</i> operation.
99999	AdmitNewClient AdmitExisting Client UpdateClient Details	Client Name cannot be longer than 40. source: Avatar	Combined length of the submitted client name exceeded the maximum length allowed.	Follow the 'Client Name' Note.
99999	AdmitExisting Client	Client ID [#####] has an existing Financial Eligibility record. source: Avatar	Somehow 'Admit' call is sent twice. The subsequent call tried to re-create the Financial Eligibility.	Contact DMH by opening a Heat Ticket.

Error Code	Client Service Operation	Error Message	Reason	Corrective Action
99999	AdmitExisting Client	ID # XXXXXXXX Already In Use source: Avatar	ID was once in use in IBHIS, now it is deleted.	Deleted IDs are not allowed to be used. Contact DMH by opening a Heat Ticket.
99999	AdmitExisting Client	Client Is Already Active In This Program.... source: Avatar	Submitted client already has an active episode under TP's program in IBHIS for admit date.	Do not send <i>AdmitExistingClient</i> operation. Send a <i>GetClientActiveEpisode</i> operation to retrieve the active episode ID to use for subsequent calls.
99999	AdmitExisting Client	Client Has Future Admission To This Program.... source: Avatar	Submitted client has an active episode in IBHIS under TP's program with a date beyond the submitted admit date.	Do not send <i>AdmitExistingClient</i> operation. Send a <i>GetClientActiveEpisode</i> operation to retrieve the active episode ID to use for subsequent calls.
99999	UpdateClient Diagnosis	Unique ID [#####] not found for client. Source: Avatar.	Submitted <i>UniqueID</i> does not match with the one returned by related <i>Create</i> operation.	Verify that the Diagnosis unique ID being submitted is same as the one returned by the <i>Create</i> operation.
99999	UpdateClient Diagnosis	#####   ##### Record Not Found. Source: Avatar	Submitted <i>DiagnosisRowID</i> does not match with the one returned by related <i>Create</i> operation.	Verify that the Diagnosis Row ID being submitted is same as the one returned by the <i>Create</i> operation.
99999	UpdateClient FinEligibility	Existing Financial Eligibility record not found for Client ID [#####]. source: Avatar	Submitted client does not have a Financial Eligibility established.	Open a Heat Ticket and provide REQUEST and RESPONSE xmls.
99999	UpdateClient FinEligibility	The request does not contain previously filed Guarantor record. Please resubmit the request with Guarantor ID 10 source: Avatar.	Submitted client's established Financial Eligibility contains MediCal (guarantor 10) and LACounty (guarantor 16).	Send <i>UpdateClientFinEligibility</i> including the option 'UpdateExistingMediCal' in ClientFinEligibility node, which will send both MediCal and LACounty guarantors to IBHIS.
99999	UpdateClient FinEligibility	The following fields are missing : ROW:2: Subscriber Assignment Of Benefits ROW:2: Subscriber Release Of Info ROW:2: Coverage Effective Date ROW:2: Guarantor Plan ROW:2: Effective Date Of Contract ROW:2: Eligibility Verified ROW:2: Coordination Of Benefits ROW:2: Subscriber's	Submitted REQUEST is sent with MediCal and LACounty guarantor information inside <i>UpdateExistingMediCal</i> selection.	Resubmit REQUEST with MediCal and LACounty guarantor information inside <i>AddNewMediCal</i> selection.

Error Code	Client Service Operation	Error Message	Reason	Corrective Action
		Covered Days ROW:2: Maximum Covered Dollars ROW:2: Customize Guarantor Plan source: Avatar		
99999	UpdateClient FinEligibility	The following fields are invalid : ROW:2: Guarantor # : The Customization of Guarantor Plan is not allowed for this Guarantor. source: Avatar	LACounty Guarantor settings for customization needs to be fixed.	Contact DMH by opening a Heat Ticket.
s:Client	CreateClient Diagnosis	Date of Diagnosis is not valid: Check Business Rule.	Date of Diagnosis is out of range.	Check the Restriction column for Business Rule for Diagnosis Date and submit accordingly. Refer to section B.8.6.
s:Client	CreateClient Diagnosis	Type of Diagnosis is not valid: Check Business Rule	Entered Type of Diagnosis as "Discharge" however there's no discharge date.	There should be a Discharge filed before submitting Create Diagnosis with Type of Disgnosis as "Discharge".
<b>CSI ASSESSMENT ERROR MESSAGES</b>				
s:Client	AddCSI UpdateCSI	[TreatmentAppointment AcceptedDate] must be greater than or equal to January 1, 2018.	Submitted Treatment Appointment Accepted Date is prior to January 1, 2018.	Check the date and re-submit a date either equal to or beyond January 1, 2018.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment AcceptedDate] must be equal to Treatment Appointment First Offer Date.	Submitted Treatment Appointment Accepted Date is not same as First Offered Appointment Date.	Since there's no second or third offered appointment date, Treatment Appointment Accepted Date must be same as First Offered Appointment Date.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment AcceptedDate] must be equal to Treatment Appointment Second Offer Date.	Submitted Treatment Appointment Accepted Date is not same as Second Offered Appointment Date.	Since there's no third offered appointment date, Treatment Appointment Accepted Date must be same as Seond Offered Appointment Date.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment AcceptedDate] must be greater than or equal to the Treatment Appointment Third Offer Date.	Submitted Treatment Appointment Accepted Date is not same as Third Offered Appointment Date.	Since there's a third offered appointment date, Treatment Appointment Accepted Date must be same as Third Offered Appointment Date.

Error Code	Client Service Operation	Error Message	Reason	Corrective Action
s:Client	AddCSI UpdateCSI	[TreatmentAppointment FirstOfferDate] should be Blank.	Submitted no Treatment Appointment Accepted Date while there is a First Offered Appointment Date.	Do not submit First Offered Appointment Date when there is no Treatment Appointment Accepted Date.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment FirstOfferDate] must be greater than or equal to January 1, 2018.	Submitted Treatment First Offered Appointment Date is prior to January 1, 2018.	Submit a date for Treatment First Offered Appointment Date that is equal to or beyond January 1, 2018.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment SecondOfferDate] must be greater than or equal to January 1, 2018.	Submitted Treatment Second Offered Appointment Date is prior to January 1, 2018.	Submit a date for Treatment Second Offered Appointment Date that is equal to or beyond January 2, 2018.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment SecondOfferDate] must be greater than Treatment Appointment First Offer Date.	Submitted Treatment Second Offered Appointment Date is either equal to or prior to submitted Treatment First Offered Appointment Date.	Submit a date for Treatment Second Offered Appointment Date that is beyond submitted Treatment First Offered Appointment Date.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment FirstOfferDate] must not be blank.	Submitted a Treatment Second Offered Appointment Date while there is no Treatment First Offered Appointment Date.	Submit a date for Treatment First Offered Appointment Date.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment ThirdOfferDate] must be greater than Treatment Appointment Second Offer Date.	Submitted a Treatment Third Offered Appointment Date which is either equal to or prior to Treatment Second Offered Appointment Date.	Submit a date for Treatment Third Offered Appointment Date that is beyond Treatment Second Offered Appointment Date.
s:Client	AddCSI UpdateCSI	[TreatmentAppointment SecondOfferDate] must not be blank.	Submitted a Treatment Third Offered Appointment Date while there is no Treatment Second Offered Appointment Date submission.	Submit a date for Treatment Second Offered Appointment Date.

Error Code	Client Service Operation	Error Message	Reason	Corrective Action
s:Client	AddCSI UpdateCSI	The XML Validator failed to validate. Details: The 'ReferredTo' attribute is invalid - The value "" is invalid according to its datatype 'String' - The Pattern constraint failed.	Submitted code "06-Beneficiary did not meet medical necessity criteria" in Closure Reason while no submission for Referred To. OR Submitted value in Referred To is not from the acceptable-values-list.	Submit a valid value for Referred To data attribute.
s:Client	AddCSI UpdateCSI	The XML Validator failed to validate. Details: The 'ClosureReason' attribute is invalid - The value "" is invalid according to its datatype 'String' - The Pattern constraint failed.	Submitted value in Closure Reason is not from the acceptable-values-list.	Submit a valid value for Closure Reason data attribute.
s:Client	SearchCSI	No active CSI record found for the submitted IBHISID.	Submitted IBHISID does not have any active CSI record.	This is an informative error message. No corrective action needed.
s:Client	SearchCSI	No CSI record found for the submitted IBHISID.	Submitted IBHISID does not have any CSI record.	This is an informative error message. No corrective action needed.
s:Client	AddCSI UpdateCSI	Submitted IBHISID is not associated to the ServiceRequestID of the SRL record.	Self explanatory.	Submit an active Service Request ID that is associated to the submitted IBHISID and note that the IBHISID needs to be associated to the Program ID.
s:Client	AddCSI UpdateCSI	No active SRL record found for the submitted ServiceRequestID.	Self explanatory.	Submit an active Service Request ID that is associated to the submitted IBHISID and note that the IBHISID needs to be associated to the Program ID.
s:Client	AddCSI UpdateCSI	No SRL record found for the submitted ServiceRequestID.	The value submitted for ServiceRequestID does not have any existing SRL record.	Submit an active Service Request ID that is associated to the submitted IBHISID and note that the IBHISID needs to be associated to the Program ID.



Error Code	Client Service Operation	Error Message	Reason	Corrective Action
s:Client	UpdateCSI DeleteCSI GetCSI	No active CSI record found for the submitted CSISubmissionID. OR No active CSI record found for the CSISubmissionID.	The record that was associated to the submitted CSISubmissionID, has been deleted.	Check the CSISubmissionID is correct. If it is and the record should've been active, contact DMH Helpdesk to open a ticket.
s:Client	DeleteCSI	No CSI record found for the CSISubmissionID.	The value submitted for CSISubmissionID does not have any existing record.	Submit an active CSISubmissionID and note that the CSISubmissionID needs to be associated to the Program ID.
s:Client	DeleteCSI UpdateCSI	Submitted ProgramID is not associated to the CSISubmissionID of the CSI record.	Calling TP is not the owner of the CSI record.	Submit an active CSISubmissionID that is associated to the Program ID.
s:Client	GetCSI	No CSI record found for the CSISubmissionID.	The value submitted for CSISubmissionID does not have any existing record.	Submit an active CSISubmissionID.

## D. FAQ

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**Q: How do I open a Heat Ticket?**

A: Go to the following URL

<https://dmh.era.lacounty.gov/dmh/contractor>

and click the link for Heat to open a ticket. You also have the option to call the Help Desk at 213-351-1335 to open a Heat Ticket.

**Q: The DOB on the Financial Eligibility is correct; however, the Client Demographics is listing another DOB. How do I fix it?**

A: Perform an UpdateClientDetails operation. submitting the correct DOB. Verify that the update took place by retrieving the data through GetClientDetails operation.

**Q: Client's Coverage Effective date needs to be updated in IBHIS. How do I do it?**

A: Client Service is not designed to update this field for an existing Financial Eligibility. Contact DMH CBO by opening a Heat Ticket.

**Q: I need to correct some errors for Admission data (such as an incorrect admission date); Discharge data (such as discharge date). How do I proceed?**

A: Admission and Discharge data –such as Admission Date or Discharge Date edits are not allowed through Client Service. It needs to be manually corrected by DMH. Contact DMH by opening a Heat Ticket.

**Q: I need to correct an incorrect Diagnosis date. How do I do it?**

A: Client Service doesn't allow to edit the diagnosis date. It needs to be manually corrected by DMH. Contact DMH by opening a Heat Ticket.

**Q: What is the purpose of IBHIS TST environment (<https://b2btst.dmh.lacounty.gov>)?**

A: The Test environment is intended for Trading Partners integration development. Release Candidates are deployed here to provide a preview of upcoming functionality in order for Trading Partners to analyze, develop, and test against an operational endpoint.

**Q: What is the purpose of the IBHIS QA environment (<https://b2bqa.dmh.lacounty.gov>)?**

A: The QA environment is pre-production. This environment mirrors DMH's production environment in terms of architecture and versioning. This is where trading partners can test and certify prior to promoting to production.

**Q: If my client's address is unknown or not available, what do I enter?**

A: A valid address is expected for all submissions. For clients whose address is unknown, please use the address, city, state and zip of the location where they receive mail (e.g. a DPSS office or a shelter) or your organizations address.

**Q: When comparing a client's IS episode admission date to their IBHIS admission date, the dates do not match. Is this a problem?**

A: The episode Admission Date of 7/1/2013 was used to create IBHIS episodes for converted/surviving clients from the IS who had an admission date prior to 7/1/2013. For any converted/surviving client with an IS admission date subsequent to 7/1/2013, the IS Admission Date was used to create the IBHIS admission.

**Q: I have a client whose First Name and/or Last Name is longer than the allowed name length. What should I do now?**

A: Follow the guidelines below:

If the combination of Prefix, First name, Middle Initial, Last name and Suffix would exceed 39 characters, use the

following priority criteria to submit a client name-

*Enter complete last name (up to 38 characters)*

*Enter complete first name (up to 38 characters)*

*If complete FN + complete LN exceeds 39 characters and client name does not have Suffix, MI and Prefix; truncate first name to reach 39 characters for FN+LN*

*Add Suffix (If it fits under 39 characters limit)*

*Add Middle initial (If it fits under 39 characters limit)*

*Add Prefix (If it fits under 39 characters limit)*

**Q: I have an erroneous Middle Initial in the Client's name submitted to IBHIS. Can I use Update Client Details operation to wipe it out?**

*A: Client Service doesn't allow to wipe any existing data. Open a Heat Ticket to delete any erroneous entry.*

**Q: I have created an episode for a Client. However, when I try to update the Financial Eligibility information, I get an error stating no financial eligibility found for the client?**

*A: When the episode was created the Financial Eligibility was not created. Please open a Heat Ticket and DMH will create the Financial Eligibility record.*

## **CSI Assessment FAQs**

**Q: CSI Assessment record is tied to episodes?**

*A: No. However, you need to have an outpatient episode in IBHIS associated to your Program for a client before you create the CSI Assessment record. You could have multiple CSI assessment records for a single client/single outpatient episode over the course of the client's life.*

**Q: I have one outpatient and one 24-hr-admission episodes. Do I need to create CSI Assessment for both episodes?**

*A: No. CSI Assessment records need to be created for outpatient episode only.*

**Q: Can one IBHIS Episode have more than one CSISubmissionIDs associated to it?**

*A: Yes. You can have multiple CSI Assessment records (thus CSISubmissionIDs) for a single outpatient episode.*

**Q: If a client has an IBHIS ID, however he/she is new to my agency. Do I need to get a new Episode ID?**

*A: Yes, generally this is the time you would ensure there is an outpatient episode in IBHIS for your agency (once the client comes in and you get consent for services).*

**Q: My agency got a referral request and we created an SRL record with an appointment date. Client completed the appointment and treatment is scheduled for another date. Is this when we submit CSI Assessment operations?**

*A: Yes.*

**For more FAQs – visit the following page:** <https://dmh.lacounty.gov/pc/cp/faqs/>

## E. Data Dictionary

**Note-1:**

Following Dictionaries have been discontinued-

Name of the Dictionary	Reason
ClientResponsibleLegalEntity	Get UMDAP operation will return the Legal Entity name, not the code.
ICD10Code	Schema validation has been taken off.
ICD9Code	Obsolete code set.
SubscriberReleaseOfInformation	Get Financial Eligibility operation will return the description, not the code.

**Note-2:**

For the following Dictionaries, get the codes using Dictionary Service application.

- Gender
- PrimaryLanguage
- ClientOtherRace
- CountySchool
- PreferredLanguage
- ProgramOfAdmission
- SubstanceAbuseDependenceDiagnosis

E.1 DEMOGRAPHICS DICTIONARIES

**E.1.1 CLIENTPREFIX**

Dr  
Mr  
Mrs  
Ms

**E.1.2 CLIENTSUFFIX**

Sr  
Jr  
III  
IV  
V  
VI

**E.1.3 MARITALSTATUS**

Single / Never Married  
Now Married (Includes Common-Law)  
Remarried  
Separated  
Divorced (Includes Divorced, Annulled)  
Widowed  
DomesticPartnership  
Unknown

**E.1.4 EMPLOYMENTSTATUS**

CalWORKS (Welfare to Work)  
Full-time competitive employment (salaried)  
Full-time noncompetitive employment (sheltered workshop)  
GROW (General Relief Opportunity ForWork (Welfare to Work)  
Homemaker  
Other  
Part-time competitive employment (salaried)  
Part-time noncompetitive employment (sheltered workshop)  
Retired  
Student  
Unemployed  
Unknown

**E.1.5 ETHNICITY**

HispanicOrLatino  
NotHispanicOrLatino  
UnknownNotReported

*E.1.6 SMOKINGASSESSMENT*

*CurrentEveryDaySmoker*  
*FormerSmoker*  
*NeverSmoked*  
*CurrentSomeDaySmoker*  
*Unknown*  
*HeavyTobaccoSmoker*  
*LightTobaccoSmoker*  
*SmokerWithNoCurrentStatus*

*E.1.7 TYPEOFADMISSION*

*PreAdmission*  
*FirstAdmission*  
*ReAdmission*  
*Emergency*  
*Urgent*  
*Elective*  
*InformationNotAvailable*

*E.1.8 SOURCEOFADMISSION*

*Non-Health Care Facility Point of Origin*  
*Clinic or Physicians Office*  
*Transfer from a Hospital*  
*Transfer from a Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF)*  
*Transfer from Another Health Care Facility*  
*Court/Law Enforcement*  
*InformationNotAvailable*  
*Transfer from one district unit of the hospital to another district unit of the same hospital resulting in a separate claim to the payer*  
*Transfer from Ambulatory Surgery Center*  
*Transfer from Hospice and is Under a Hospice plan of care or enrolled in a Hospice program*

*E.1.9 LIVINGARRANGEMENTS*

*House or apartment (includes trailers, SRO, etc.)*  
*Adult shared independent housing (barracks, sober living, etc)*  
*House or apartment with supportive services (applies to adults only)*  
*Foster family home*  
*Group Home (includes RCL 1-12 for children)*  
*Residential Treatment Center (includes RCL 13-14 for children)*  
*Community Treatment Facility (CTF for children)*  
*Adult Residential Facility, Social Rehab Facility, Crisis Residential, Transitional Residential, Drug/Alcohol Facility*  
*Mental Health Rehabilitation Center (24 hour)*  
*Skilled Nursing Facility/Intermediate Care Facility/Institute of Mental Disease (IMD)*  
*Inpatient Psychiatric Hospital, Psychiatric Health Facility (PHF), or Veterans Affairs (VA) Hospital*  
*State Hospital*  
*Justice related (Juvenile Hall, CYA home, correctional facility, jail, etc.)*  
*Homeless, includes streets, temporary shelter*  
*Other*  
*UnknownNotReported*

*E.1.10 EDUCATION*

*00 - Pre-School*  
*00 - Kindergarten*  
*01 - First grade*  
*02 - Second grade*  
*03 - Third grade*  
*04 - Fourth grade*  
*05 - Fifth grade*  
*06 - Sixth grade*  
*07 - Seventh grade*

*08 - Eighth grade*  
*09 - Ninth grade*  
*10 - Tenth grade*  
*11 - Eleventh grade*  
*12 - Twelfth grade - No Diploma*  
*12 - High School Diploma/GED*  
*Freshman college level*  
*Sophomore college level (No degree)*  
*Junior college level (No degree)*

Senior college level (No degree)  
 Associate of Arts degree  
 Bachelor of Arts degree  
 Masters degree  
 Doctorate degree

Completed vocational training with high school diploma  
 Completed vocational training without high school diploma  
 None  
 Unknown

E.2 FINANCIAL ELIGIBILITY DICTIONARIES

E.2.1 SUBSCRIBER GENDER

F  
 M  
 U

E.2.2 GUARANTOR NAME

Guarantor ID	Guarantor Name	46	Brand New Day Insurance
10	Medi-Cal	47	Bright Health Physicians - POB 1217
11	Healthy Families	48	CAL Care IPA - Compton Ave
12	Medicare	49	Care 1st Health Plan - Potrero
13	Workers Compensation	50	Capitol Administrators
16	LA County	51	Caremore Insurance - POB 366
17	CalWORKS	52	Cedar Sinai - POB 6250
18	Katie A. Medi-Cal	53	Cedar Sinai (Secure Horizons)
20	Aetna Insurance - POB 14079	54	Central Health Medicare Plan
Guarantor ID	Guarantor Name	55	Champ VA Insurance Claims
21	Aetna HMO	56	Champ VA - Submit Denied Claims
22	AETNA Medicare	57	CHAMPUS/Tricare Resubmitted Claims
23	AETNA Student Health	58	Choc Health Alliance - POB 62108
24	Affordable Benefits	59	Cigna Behavioral Health - POB 188022
25	Alameda Alliance For Health	60	Cigna Healthcare (PPO) Greatwest
26	Altamed Medical Group - Citadel Dr	61	Cigna Insurance - POB 46270
27	Accountable IPA	62	Cigna Insurance - POB 5200
28	Anthem Blue Cross - POB 60007	63	Citizens Choice Health Plans - POB 127
Guarantor ID	Guarantor Name	64	College of Health IPA - Pioneer Blvd
29	Anthem Blue Cross Community Family Care	65	Community Family Care - POB2002
30	Anthem Blue Cross Glendale Physicians	66	Care 1st Health Plan - POB4239
31	Anthem Blue Cross Holman Group	67	Community Health Plan - Fremont Bldg
32	Anthem Blue Cross Primary Medical Group	68	CompCare-MLK Blvd
33	Applecare Select - POB 6014	69	Centinela Valley IPA Medical Group
34	APS Healthcare - POB 99	70	Clinica Medica San Miguel IPA
35	Banner Network - POB 16423	71	Directors Guild of America
36	Blue Cross/Blue Shield of Connecticut	72	Easy Choice Health Plan - POB 260519
37	Blue Cross/Blue Shield of Ohio	73	EHS Medical Group - POB 2002
38	Blue Cross/Blue Shield of PA	74	Coast Healthcare Management
39	Blue Shield 65+ Medicare	75	Facey Medical Foundation - POB 9605
40	Blue Shield of CA Federal Employee Prog	76	First Health - POB 6040
41	Blue Shield of CA (Prefix XEG, XEH, XEP)	77	Coventry Healthcare - UBH
42	Blue Shield of California - POB 272540	78	Global Medical Management
43	Blue Shield of California Blue Card IPS	Guarantor ID	Guarantor Name
44	Blue Cross Labor Trust Fund (Prefix LBT)	79	Great West Healthcare - Cigna
45	Blue Shield Senior - THIPA	80	Harrington Health for Kaiser

81	Health Care Partners Medical Group	133	Southern CA Drug Benefit Fund-POB 27920
82	Health Net Commercial Claims (PPO)	134	Southwest Administrators 495 - POB 1121
83	Health Net HMO - POB 6099	135	St Jude Heritage Healthcare - POB 127
84	Health Net Insurance (Prefix R)	136	Talbert Medical Group, Inc. - Scenic Ave
85	Healthcare LA - POB 571420	137	TriCare/TriWest - POB 77028
86	Health Care Partners IPA	138	UCLA Medical Group - Century Blvd
88	Healthy Kids-LA care	139	United American Insurance - POB 8080
89	High Desert Medical Group - POB 7014	140	UFCWU - POB 6010
90	Highmark Blue Shield - POB 890062	141	United Health Care - POB 30755
91	SRC-Strategic Resource Company-Aetna	142	Value Options PPO - POB 1347
92	Hispanic Physicians - 7th Street	143	Vantage Medical Group - Compton Ave
93	Holman Group-Corbin Ave	144	VA - Plummer St
94	Humana - POB 14601	145	Victory Consultants - Coldwater Canyon
95	IEHP - POB 4349	146	Windstone Behavioral Health - Bristol St
96	ILWU PMA Coastwise Insurance-Mission St	147	Assoc Hispanic Phys/AHMC
97	Kaiser Permanente Insurance - POB 7004	150	Foundation for Medical Care - Blue Cross
98	Kaiser - ID No with Prefix 11	151	CDPHP
99	Kaiser EPO Plan	152	Heritage Health Care Medical Group
100	LA Care Healthplan - POB 811580	154	Magan Medical Clinic (PacifiCare/Secure Horizon)
101	Lakeside Community Hlthcare- POB 371390	155	Little Co. of Mary IPA
102	Laundry and Dry Clean Wkrs-Crossroads Pkwy	156	Onecare (Amvi Prospect)
103	Lakeside Medical Group	157	PacifiCare Legacy Account (Secure Horizon)
104	Magellan Health Services	158	Physicians Alliance Network
105	MD Care Inc - POB 92919	159	Prospect Medical Group
106	Midwest National Life Ins- POB 981606	160	St Vincent IPA
107	Molina Advantage Medicare	161	Regal Medical Group Greater Covina
108	Molina Healthcare (AMERIBEN) - POB 7186	163	TRICARE WEST Region Claims (Under United
110	Molina Healthcare of CA		Healthcare)
111	Northridge Medical Group - POB 6099	164	UBH PPO - American Medical Security
112	Optum Health	165	Advanced Primary Care Network(stewart med grp)
113	Oxford Healthplan - POB 7082	166	Allied Physicians
114	PacifiCare Behavioral Health- POB 31053	167	Alpha Care Medical Group (Crown City Med Grp)
115	PacifiCare Behavioral Health-POB 30968	168	Angeles IPA
116	Pinnacle Claims Mgmt Inc. - POB 2220	169	ANTHEM BLUE CROSS-FEDERAL EMPLOYEE PLAN
117	Personal Insurance Admin - POB 6040	170	Central California Alliance for Health-CCA01
118	Physicians Healthways	171	Central California Alliance for Health-SX169
119	Pomona Valley Medical Group - POB 2399	172	Central California Alliance for Health-95311
120	Positive HealthCare - POB 46128	173	Citrus Valley Physicians Group
121	Preferred IPA - POB 4449	174	ElderPlan Inc.
122	Premera - POB 91059	175	FMH Benefit Services Inc.
123	Primary Medical Group (PMG)-Atlantic Blv	176	GEHA Insurance - ATTN: Claims Dept
124	PrimeCare - POB 6903	177	Global Care Inc.
125	Providence Care Network	178	Health Choice Arizona Inc.
126	Regal Medical Group - POB 371330	179	Health Net of CA
127	Scan Health Plan	180	Healthcare Management Adm.Inc
128	Seafarers Health Benefits - POB 380	181	LaSalle Medical Associates
129	Secure Horizons - POB 30968	182	Managed Health Network
130	Secure Horizons - Medicare	183	PacifiCare Behavioral Health
	Guarantor ID Guarantor Name		Guarantor ID Guarantor Name
131	Southland Advantage Medical Group	184	Pacific IPA
132	Sierra Medical Group - POB 7013	185	Physicians United Plan Inc.



186	Riverside Medical Clinic	218	Molina Advantage Medicare - RISK HMO
187	United Agricultural Benefit	219	Molina Healthcare of CA - RISK HMO
188	United Physicians International	220	SCAN Health Plan - RISK HMO
189	Universal Care Inc.	221	Managed Health Network - RISK HMO
190	Virginia Masson Group Health	222	L.A. Care Cal MediConnect Plan - RISK HMO
191	Affiliated Physicians IPA	223	Care1st Cal MediConnect Plan - RISK HMO
192	AIDS Healthcare Foundation	224	CareMore Cal MediConnect Plan - RISK HMO
193	Physician Associate IPA/ HCP	225	ConnectiCare
194	Assurant Health	226	Optum Behavioral Health
195	Advanced Medical Doctors of CA	250	Other Risk HMO
196	Associated Dignity	227	OneCare - RISK HMO
197	Beacon Behavioral Strategies (LA Care Medicare)	228	PHC - Postive Health Care -Risk HMO
198	Managed Health Network (MHN)	229	Health Net - RISK HMO
199	St. Mary IPA	230	United Health Care - POB 30755-Risk HMO
200	Optum Claims	231	Victims of Crime - Generic
201	Santa Monica Unite Here Health Benefit Fund	232	NALC Health Benefit - CIGNA
202	Emblem Health - Behavioral Claims		Guarantor ID Guarantor Name
203	Care1st		
204	Caremore	233	York Risk Services Group
205	Mercy Maricopa Integrated Care	234	City of Gardena Employee Health - ABS
206	Lakewood Medical Group IPA	235	Value Options Claims-Adventist Risk mgt
207	Kaiser Permanente Insurance - Risk HMO	236	Group Health
208	Aetna Insurance - RISK HMO	237	Brandman Centers for Senior Care
209	Anthem Blue Cross - POB 60007 - RISK HMO		
210	Blue Shield 65+ Medicare - RISK HMO		
211	Brand New Day Insurance - RISK HMO		
212	Care 1st Health Plan - Potrero - RISK HMO		
213	Caremore Insurance - POB 366 - RISK HMO		
214	Central Health Medicare Plan - RISK HMO		
215	Citizens Choice Health Plan - POB 127 - RISK HMO		
216	Easy Choice Health Plan - POB 260519 - RISK HMO		
217	Humana - POB 14601 - RISK HMO		

E.3 CSI DICTIONARIES

E.3.1 FISCALLY RESPONSIBLE COUNTY FOR CLIENT

Alameda	Kings	Placer	Sierra
Alpine	Lake	Plumas	Siskiyou
Amador	Lassen	Riverside	Solano
Butte	LosAngeles	Sacramento	Sonoma
Calaveras	Madera	SanBenito	Stanislaus
Colusa	Marin	SanBernardino	Sutter
ContraCosta	Mariposa	SanDiego	Tehama
DelNorte	Mendocino	SanFrancisco	Trinity
EIDorado	Merced	SanJoaquin	Tulare
Fresno	Modoc	SanLuisObispo	Tuolumne
Glenn	Mono	SanMateo	Ventura
Humboldt	Monterey	SantaBarbara	Yolo
Imperial	Napa	SantaClara	Yuba
Inyo	Nevada	SantaCruz	SutterYuba
Kern	Orange	Shasta	TriCity



*E.3.2 PLACEOFBIRTHCOUNTY*

<i>NotCaliforniaCounty</i>	<i>Kern</i>	<i>Orange</i>	<i>Shasta</i>
<i>Alameda</i>	<i>Kings</i>	<i>Placer</i>	<i>Sierra</i>
<i>Alpine</i>	<i>Lake</i>	<i>Plumas</i>	<i>Siskiyou</i>
<i>Amador</i>	<i>Lassen</i>	<i>Riverside</i>	<i>Solano</i>
<i>Butte</i>	<i>LosAngeles</i>	<i>Sacramento</i>	<i>Sonoma</i>
<i>Calaveras</i>	<i>Madera</i>	<i>SanBenito</i>	<i>Stanislaus</i>
<i>Colusa</i>	<i>Marin</i>	<i>SanBernardino</i>	<i>Sutter</i>
<i>ContraCosta</i>	<i>Mariposa</i>	<i>SanDiego</i>	<i>Tehama</i>
<i>DelNorte</i>	<i>Mendocino</i>	<i>SanFrancisco</i>	<i>Trinity</i>
<i>ElDorado</i>	<i>Merced</i>	<i>SanJoaquin</i>	<i>Tulare</i>
<i>Fresno</i>	<i>Modoc</i>	<i>SanLuisObispo</i>	<i>Tuolumne</i>
<i>Glenn</i>	<i>Mono</i>	<i>SanMateo</i>	<i>Ventura</i>
<i>Humboldt</i>	<i>Monterey</i>	<i>SantaBarbara</i>	<i>Yolo</i>
<i>Imperial</i>	<i>Napa</i>	<i>SantaClara</i>	<i>Yuba</i>
<i>Inyo</i>	<i>Nevada</i>	<i>SantaCruz</i>	<i>UnknownCounty</i>

*E.3.3 PLACEOFBIRTHSTATE/STATE/SUBSCRIBERSTATE*

<i>Code</i>	<i>Description</i>	<i>IN</i>	<i>Indiana</i>	<i>NY</i>	<i>New York</i>
<i>00</i>	<i>Not US State</i>	<i>KS</i>	<i>Kansas</i>	<i>OH</i>	<i>Ohio</i>
<i>AK</i>	<i>Alaska</i>	<i>KY</i>	<i>Kentucky</i>	<i>OK</i>	<i>Oklahoma</i>
<i>AL</i>	<i>Alabama</i>	<i>LA</i>	<i>Louisiana</i>	<i>OR</i>	<i>Oregon</i>
<i>AR</i>	<i>Arkansas</i>	<i>MA</i>	<i>Massachusetts</i>	<i>PA</i>	<i>Pennsylvania</i>
<i>Code</i>	<i>Description</i>	<i>MD</i>	<i>Maryland</i>	<i>Code</i>	<i>Description</i>
<i>AZ</i>	<i>Arizona</i>	<i>ME</i>	<i>Maine</i>	<i>RI</i>	<i>Rhode Island</i>
<i>CA</i>	<i>California</i>	<i>MI</i>	<i>Michigan</i>	<i>SC</i>	<i>South Carolina</i>
<i>CO</i>	<i>Colorado</i>	<i>MN</i>	<i>Minnesota</i>	<i>SD</i>	<i>South Dakota</i>
<i>CT</i>	<i>Connecticut</i>	<i>MO</i>	<i>Missouri</i>	<i>TN</i>	<i>Tennessee</i>
<i>Code</i>	<i>Description</i>	<i>Code</i>	<i>Description</i>	<i>TX</i>	<i>Texas</i>
<i>DC</i>	<i>District of Columbia</i>	<i>MS</i>	<i>Mississippi</i>	<i>UN</i>	<i>Unknown State</i>
<i>DE</i>	<i>Delaware</i>	<i>MT</i>	<i>Montana</i>	<i>UT</i>	<i>Utah</i>
<i>FL</i>	<i>Florida</i>	<i>NC</i>	<i>North Carolina</i>	<i>VA</i>	<i>Virginia</i>
<i>GA</i>	<i>Georgia</i>	<i>ND</i>	<i>North Dakota</i>	<i>VT</i>	<i>Vermont</i>
<i>Code</i>	<i>Description</i>	<i>NE</i>	<i>Nebraska</i>	<i>WA</i>	<i>Washington</i>
<i>HI</i>	<i>Hawaii</i>	<i>NH</i>	<i>New Hampshire</i>	<i>WI</i>	<i>Wisconsin</i>
<i>IA</i>	<i>Iowa</i>	<i>NJ</i>	<i>New Jersey</i>	<i>WV</i>	<i>West Virginia</i>
<i>ID</i>	<i>Idaho</i>	<i>NM</i>	<i>New Mexico</i>	<i>WY</i>	<i>Wyoming</i>
<i>IL</i>	<i>Illinois</i>	<i>NV</i>	<i>Nevada</i>		

*E.3.4 PLACEOFBIRTHCOUNTRY*

<i>Country Not Listed</i>	<i>Antartica</i>	<i>Bahamas,The</i>
<i>Unknown Country</i>	<i>Antigua and Barbuda</i>	<i>Bahrain</i>
<i>Afghanistan</i>	<i>Argentina</i>	<i>Baker Island</i>
<i>Albania</i>	<i>Armenia</i>	<i>Bangladesh</i>
<i>Algeria</i>	<i>Aruba</i>	<i>Barbados</i>
<i>American Samoa</i>	<i>Ashmore and Cartier Islands</i>	<i>Bassas Da India</i>
<i>Andorra</i>	<i>Australia</i>	<i>Belarus</i>
<i>Angola</i>	<i>Austria</i>	<i>Belgium</i>
<i>Anguilla</i>	<i>Azerbaijan</i>	<i>Belize</i>

<i>Benin</i>	<i>Federated States of Micronesia</i>	<i>Kiribati</i>
<i>Bermuda</i>	<i>Fiji</i>	<i>Korea, Democratic People's Republic</i>
<i>Bhutan</i>	<i>Finland</i>	<i>Korea, Republic of</i>
<i>Bolivia</i>	<i>France</i>	<i>Kuwait</i>
<i>Bosnia and Herzegovina</i>	<i>French and Southern and Antarctic Lands</i>	<i>Kyrgyzstan</i>
<i>Botswana</i>	<i>French Guinea</i>	<i>Laos</i>
<i>Bouvet Island</i>	<i>French Polynesia</i>	<i>Latvia</i>
<i>Brazil</i>	<i>Gabon</i>	<i>Lebanon</i>
<i>British Indian Ocean Territory</i>	<i>Gambia, The</i>	<i>Lesotho</i>
<i>British Virgin Islands</i>	<i>Gaza Strip</i>	<i>Liberia</i>
<i>Brunai</i>	<i>Georgia</i>	<i>Libya</i>
<i>Bulgaria</i>	<i>Germany</i>	<i>Liechtenstein</i>
<i>Burkina</i>	<i>Ghana</i>	<i>Lithuania</i>
<i>Burma</i>	<i>Gibraltar</i>	<i>Luxembourg</i>
<i>Burundi</i>	<i>Glorioso Islands</i>	<i>Macau</i>
<i>Cambodia</i>	<i>Greece</i>	<i>Macedonia</i>
<i>Cameroon</i>	<i>Greenland</i>	<i>Madagascar</i>
<i>Canada</i>	<i>Grenada</i>	<i>Malawi</i>
<i>Cape Verde</i>	<i>Guadeloupe</i>	<i>Malaysia</i>
<i>Cayman Islands</i>	<i>Guam</i>	<i>Maldives</i>
<i>Central African Republic</i>	<i>Guatemala</i>	<i>Mali</i>
<i>Chad</i>	<i>Guernsey</i>	<i>Malta</i>
<i>Chile</i>	<i>Guinea</i>	<i>Man, Isle of</i>
<i>China</i>	<i>Guinea-Bissau</i>	<i>Marshall Islands</i>
<i>Christmas Island</i>	<i>Guyana</i>	<i>Martinique</i>
<i>Clipperton Island</i>	<i>Haiti</i>	<i>Mauritania</i>
<i>Cocos (Keeling) Islands</i>	<i>Heard Island and McDonald Islands</i>	<i>Mauritius</i>
<i>Columbia</i>	<i>Honduras</i>	<i>Mayotte</i>
<i>Comoros</i>	<i>Hong Kong</i>	<i>Mexico</i>
<i>Congo</i>	<i>Howland Island</i>	<i>Midway Islands</i>
<i>Cook Islands</i>	<i>Hungary</i>	<i>Moldavia</i>
<i>Coral Sea Islands</i>	<i>Iceland</i>	<i>Monaco</i>
<i>Costa Rica</i>	<i>India</i>	<i>Mongolia</i>
<i>Cote D'Ivoire</i>	<i>Indonesia</i>	<i>Montenegro</i>
<i>Croatia</i>	<i>Iran</i>	<i>Montserrat</i>
<i>Cuba</i>	<i>Iraq</i>	<i>Morocco</i>
<i>Cyprus</i>	<i>Ireland</i>	<i>Mozambique</i>
<i>Czech Republic</i>	<i>Israel</i>	<i>Namibia</i>
<i>Denmark</i>	<i>Italy</i>	<i>Nauru</i>
<i>Djibouti</i>	<i>Jamaica</i>	<i>Navassa Island</i>
<i>Dominica</i>	<i>Jan Mayen</i>	<i>Nepal</i>
<i>Dominican Republic</i>	<i>Japan</i>	<i>Netherlands</i>
<i>Ecuador</i>	<i>Jarvis Island</i>	<i>Netherlands Antilles</i>
<i>Egypt</i>	<i>Jersey</i>	<i>New Caledonia</i>
<i>El Salvador</i>	<i>Johnston Atoll</i>	<i>New Zealand</i>
<i>Equatorial Guinea</i>	<i>Jordan</i>	<i>Nicaragua</i>
<i>Eritrea</i>	<i>Juan De Nova Island</i>	<i>Niger</i>
<i>Estonia</i>	<i>Kazakhstan</i>	<i>Nigeria</i>
<i>Ethiopia</i>	<i>Kenya</i>	<i>Niue</i>
<i>Europa Island</i>	<i>Kingman Reef</i>	<i>Norfolk Island</i>
<i>Falkland Islands (Islas Malvinas)</i>		<i>Northern Mariana Islands</i>
<i>Faroe Islands</i>		

Norway	Slovakia	Slovenia	Trinidad and Tobago
Oman	Solomon Islands		Tromelin Island
Pakistan	Somalia		Tunisia
Palau	South Africa		Turkey
Palmyra Atoll	South Georgia/South Sandwich Islands		Turkmenistan
Panama	Spain		Turks and Caicos Islands
Papua New Guinea	Spratly Islands		Tuvalu
Paracel Islands	Sri Lanka		Uganda
Paraguay	St. Helena		Ukraine
Peru	St. Kitts and Nevis		United Arab Emirates
Philippines	St. Lucia		United Kingdom
Pitcairn Islands	St. Pierre and Miquelon		United States
Poland	St. Vincent and the Grenadines		Uruguay
Portugal	Sudan		Uzbekistan
Puerto Rico	Suriname		Vanuatu
Qatar	Svalbard		Vatican City
Reunion	Swaziland		Venezuela
Romania	Sweden		Vietnam
Russia	Switzerland		Virgin Islands
Rwanda	Syria		Wake Island
San Marino	Taiwan		Wallis and Futuna
Sao Tome and Principe	Tajikistan		West Bank
Saudi Arabia	Tanzania		Western Sahara
Senegal	Thailand		Western Samoa
Serbia	Togo		Yemen
Seychelles	Tokelau		Zaire
Sierra Leone	Tonga		Zambia
Singapore			Zimbabwe

**E.3.5 ADMISSIONNECESSITYCODE**

- Emergency
- Planned (Prior Authorization)
- UnknownNotReported

**E.3.6 CONSERVATORSHIPCOURTSTATUS**

- Not Applicable
- Juvenile Court, Dependent of the Court
- Juvenile Court, Ward - Juvenile Offender
- Juvenile Court, Ward - Status Offender
- Lanterman-Petris-Short
- Murphy
- PC 2974
- Probate
- Representative Payee Without Conservatorship
- Temporary Conservatorship
- UnknownNotReported

**E.3.7 SPECIALPOPULATION**

- Assisted Outpatient Treatment service(s) (AB 1421)
- (AB 3632) Individualized education plan (IEP) required service(s)
- Governor's Homeless Initiative (GHI) service(s)
- No special population services

*Welfare-to-work plan specified service(s)*

**E.3.8 LEGALCLASS**

- Voluntary*
- 72 Hour Evaluation and Treatment for Adults*
- 72 Hour Evaluation and Treatment for Children*
- 14 Day Intensive Treatment*
- Additional 14 Day Hold*
- Additional 30 Day Hold*
- Additional 180 Day Hold*
- Other involuntary civil status*
- Charges and/or convictions pending*
- Determination of competency to stand trial*
- Found not guilty by reason of insanity or guilty but insane*
- Determination of sexual psychopathy and related legal categories*
- Transferred from correctional facilities*
- Other involuntary criminal status*
- UnknownNotReported*

**E.3.9 CSIETHNICITY**

- HispanicOrLatino*
- NotHispanicOrLatino*
- UnknownNotReported*

**E.3.10 CSIRACE**

- |                                     |                       |                             |
|-------------------------------------|-----------------------|-----------------------------|
| <i>AmericanIndianOrAlaskaNative</i> | <i>Hmong</i>          | <i>OtherAsian</i>           |
| <i>AsianIndian</i>                  | <i>Japanese</i>       | <i>OtherPacificIslander</i> |
| <i>BlackOrAfricanAmerican</i>       | <i>Korean</i>         | <i>Samoan</i>               |
| <i>Cambodian</i>                    | <i>Laotian</i>        | <i>Vietnamese</i>           |
| <i>Chinese</i>                      | <i>Mien</i>           | <i>WhiteOrCaucasian</i>     |
| <i>Filipino</i>                     | <i>HawaiianNative</i> | <i>UnknownNotReported</i>   |
| <i>Guamanian</i>                    | <i>Other</i>          |                             |

**E.4 DIAGNOSIS DICTIONARIES**

**E.4.1 TYPEOFDIAGNOSIS**

- Admission*
- Discharge*
- Update*

**E.4.2 TRAUMA**

- No*
- Unknown*
- Yes*

**E.4.3 GENERALMEDICALCONDITIONSUMMARYCODE**

- |                                   |   |
|-----------------------------------|---|
| <i>None</i>                       | <i>Carpal Tunnel Syndrome</i>                                 |
| <i>Allergies</i>                  | <i>Chronic Pain</i>   |
| <i>Anemia</i>                     | <i>Cirrhosis</i>  |
| <i>Arterial Sclerotic Disease</i> | <i>Cystic Fibrosis</i>  |
| <i>Arthritis</i>                  | <i>Deaf / Hearing Impaired</i>                                |
| <i>Asthma</i>                     | <i>Diabetes</i>   |
| <i>Birth Defects</i>              | <i>Digestive Disorders (Reflux, Irritable Bowel Syndrome)</i> |
| <i>Blind / Visually Impaired</i>  | <i>Ear Infections</i>   |
| <i>Cancer</i>                     |   |

*Epilepsy / Seizures*  
*Heart Disease*  
*Hepatitis*  
*Hypercholestoralemia*  
*Hyperlipidemia*  
*Hypertension*  
*Hyperthyroid*  
*Infertility*  
*Migraines*  
*Multiple Sclerosis*  
*Muscular Dystrophy*  
*Obesity*

*Osteoporosis*  
*Other*  
*Parkinson's Disease*  
*Physical Disability*  
*Psoriasis*  
*Sexually Transmitted Disease (STD)*  
*Stroke*  
*Tinnitus*  
*Ulcers*  
*UnknownNotReported*

**E.4.4 SUBSTANCEABUSEDEPENDENCE**

*No*  
*UnknownNotReported*  
*Yes*

**E.4.5 STATUS**

*Active*  
*Working*  
*Resolved*  
*Void*

**E.4.6 RANKING**

*Primary*  
*Secondary*  
*Tertiary*

**E.5 DISCHARGE DICTIONARIES**

**E.5.1 TYPEOFDISCHARGE (OUTPATIENT EPISODE)**

*Death*  
*Merged Client*  
*CIN Change*  
*Contract Termination*

**E.5.1 TYPEOFDISCHARGE (INPATIENT EPISODE)**

*Pre-Admission Discharge*  
*Death*  
*Discharged to Home or Self-Care*  
*Discharged/Transferred to General Hospital or Inpatient Care*  
*Discharged/Transferred to Intermediate Care Facility or Assisted Living Facility*  
*Left Against Medical Advice or Discontinued Care Expired*  
*Discharged/Transferred to Court/Law Enforcement*  
*Still Patient*  
*Discharged/Transferred to Federal Health Care Facility*  
*Hospice - Home*  
*Hospice - Medical Facility (Certified) Providing Hospice Level of Care*  
*Discharged/Transferred to a Psychiatric Hospital or Psychiatric District Part Unit of a Hospital*  
*Discharged/Transferred to another Type of Health Care Institution not Defined Elsewhere*  
*Merged Client*  
*CIN Change*

**E.5.2 CLOSUREREASON**

**CODE - DESCRIPTION**

**03 = Beneficiary attended initial assessment appointment but did not complete assessment process.**

- 04 = Beneficiary completed assessment process but declined offered treatment dates.
- 05 = Beneficiary accepted offered treatment date but did not attend initial treatment appointment.
- 06 = Beneficiary did not meet medical necessity criteria.

08 = Beneficiary accepted offered treatment date and attended appointment

#### *E.5.3 REFERRED TO*

##### *CODE - DESCRIPTION*

- 01 = Managed Care Plan
- 02 = Fee-For-Service Provider
- 03 = Other (Specify)
- 04 = No Referral

## F. Dictionary Service

Some dictionaries are not embedded anymore in the WSDL since these dictionaries tend to update more often. A solution is much needed so that a change in the dictionary will not require a WSDL change. As a result DMH implemented a dictionary values lookup solution called 'Dictionary Service' so that Trading Partners can get the acceptable values for certain data attributes using this Dictionary Service application.

The following data attributes' acceptable code-list can be retrieved using Dictionary Service:

- Gender
- PrimaryLanguage
- ClientOtherRace
- CountySchool
- PreferredLanguage
- ProgramOfAdmission
- SubstanceAbuseDependenceDiagnosis

Follow the steps below:

Step #	Action
Step # 1	Load the Dictionary Service WSDL from the following URL: <a href="https://b2b.dmh.lacounty.gov/DictionaryService/DictionaryServiceInterface.svc">https://b2b.dmh.lacounty.gov/DictionaryService/DictionaryServiceInterface.svc</a>
Step # 2	Invoke the 'GetDictionary' operation using the criteria specified below.
Step # 2	Enter 'CS' for the 'AppServiceName' data attribute.
Step # 3	Enter following suggested code in 'Type' data attribute to get enumerated lists: <ul style="list-style-type: none"> <li>• For Gender codes, enter Gender</li> <li>• For PrimaryLanguage codes, enter Language</li> <li>• For ClientOtherRace codes, enter RaceEthnicOrigin</li> <li>• For CountySchool codes, enter CountySchool</li> <li>• For PreferredLanguage codes, enter PreferredLanguage</li> <li>• For ProgramOfAdmission codes, enter ProgramOfAdmission</li> <li>• For SubstanceAbuseDependenceDiagnosis codes, enter SubstanceAbuseDependenceDiagnosis</li> </ul>
Step # 4	Submit the call.
Step # 5	Retrieve the values from the output.

## Appendix

### LOCATION OF WSDLs & DOCUMENTATION

- WSDL:**  
 LACDMH IBHIS Client Service WSDL URLs are as follows-  
 TST\_WSDL (For Release Candidate (RC) and TP vendors to build the new features of WSDL)  
<https://b2btst.dmh.lacounty.gov/ClientService/ClientServiceInterface.svc?SingleWsd>  
 QA\_WSDL (For Testing and Certification)  
<https://b2bqa.dmh.lacounty.gov/ClientService/ClientServiceInterface.svc?SingleWsd>  
 Production\_WSDL (For going LIVE)  
<https://b2b.dmh.lacounty.gov/ClientService/ClientServiceInterface.svc?SingleWsd>
- Documents:**  
 Please refer to latest documents from the following locations-  
 (Example: *Release Notes*)  
<https://dmh.lacounty.gov/pc/cp/cs/>

### XML STRUCTURE OF UNSUCCESSFUL RESPONSE

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <Fault xmlns="http://schemas.xmlsoap.org/soap/envelope/">
      <faultcode xmlns="" xmlns:a="http://schemas.xmlsoap.org/soap/envelope/"></faultcode>
      <faultstring xml:lang="en-US" xmlns=""></faultstring>
      <detail xmlns="">
        <Error xmlns="http://schemas.dmh.lacounty.gov/clientservice/entity/fault"
xmlns:i="http://www.w3.org/2001/XMLSchema-instance">
          <ErrorCode></ErrorCode>
          <ErrorDescription></ErrorDescription>
        </Error>
      </detail>
    </Fault>
  </s:Body>
</s:Envelope>
```

Or

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <s:Fault>
      <faultcode></faultcode>
      <faultstring xml:lang="en-US"></faultstring>
      <detail>
        <Error xmlns="http://schemas.dmh.lacounty.gov/clientservice/entity/fault"
xmlns:i="http://www.w3.org/2001/XMLSchema-instance">
          <ErrorCode></ErrorCode>
          <ErrorDescription></ErrorDescription>
        </Error>
      </detail>
    </s:Fault>
  </s:Body>
</s:Envelope>
```



```
</detail>
</s:Fault>
</s:Body>
</s:Envelope>
```

Or

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body>
    <s:Fault>
      <faultcode>s:Client</faultcode>
      <faultstring xml:lang="en-US"></faultstring>
    </s:Fault>
  </s:Body>
</s:Envelope>
```

SUMMARY OF CHANGES IN VERSION 3.4.2

Operation(s) Items Section	Description of Change(s)
All	XML structures of <i>All Operations</i> input/output have been updated to show that the WSDL version has been changed from 201901 to 202001.
B.9.3 B.9.4 B.9.6	CreateClientPregnancy_Input, UpdateClientPregnancy_Input and GetClientPregnancy_Output tables have been update to show the new data attribute AssessmentDate.
B.9.8	AssessmentDate data attribute’s description has been added.
B.9.9.1 B.9.9.2	CreateClientPregnancy_Input and UpdateClientPregnancy_Input xml structures have been replaced to show the updated input schema with AssessmentDate.
B.9.9.6	Section added to show GetClientPregnancy_Output’s xml structure.

| End of the Document |