



Community Reporting System  
(DHSCRS)  
(aka ROCS)  
ICD-10 Training

September 16, 2015



# **ICD-10 Changes for Mental Health Information**

## **Mental Health Information (MH)**

- 1. New MH registrations will no longer be allowed with the ICD-10 version.**
- 2. Existing MH registrations can be updated.**
- 3. Principal Diagnosis no longer needed.**
- 4. Diagnosis Type field removed.**
- 5. Axis Labels removed.**
- 6. Diagnosis fields increased in length, from 5 to 8 bytes, to accommodate ICD-10 codes.**
- 7. Diagnosis Code Type indicators are required for each diagnosis code entered.**
  - Diagnosis Code Type for ICD-9 is 9**
  - Diagnosis Code Type for ICD-10 is A**
- 8. For Client Registrations after September 30, 2015; ICD-10 code is required, ICD-9 code is not allowed.**
- 9. For Client Registrations before October 1, 2015; ICD-9 code is required, ICD-10 code is allowed but not required.**
- 10. Duplicate diagnoses may not be entered.**
- 11. Codes for Deferred Diagnosis and No Diagnosis no longer allowed.**
- 12. It is recommended that Diagnosis codes are entered in sequential order.**



# **ICD-10 Changes for Developmental Disabilities Information**

## **Developmental Disabilities Information (DD)**

- 1. Principal Diagnosis no longer needed.**
- 2. Diagnosis Type field removed.**
- 3. Axis Labels removed.**
- 4. Diagnosis fields increased in length, from 5 to 8 bytes, to accommodate ICD-10 codes.**
- 5. Diagnosis Code Type indicators are required for each diagnosis code entered.**
  - Diagnosis Code Type for ICD-9 is 9**
  - Diagnosis Code Type for ICD-10 is A**
- 6. For Client Registrations after September 30, 2015; ICD-10 code is required, ICD-9 code is not allowed.**
- 7. For Client Registrations before October 1, 2015; ICD-9 code is required, ICD-10 code is allowed but not required.**
- 8. When entering ICD-10 code, a minimum of one approved ICD-10 code is required. (ICD-10 Replacement Codes is the Approved list)**
- 9. Duplicate diagnoses may not be entered.**
- 10. Codes for Deferred Diagnosis and No Diagnosis no longer allowed.**
- 11. It is recommended that Diagnosis codes are entered in sequential order.**



# ICD-10 Replacement Codes

**These codes are shown without decimals. This is how they are entered in the system.**

Category Name	ICD-9 Code	ICD-10 Equivalent
Autism	2990	F840
Childhood Disintegrative Disorder	2991	F842, F843, F845
Persuasive Developmental Disorder	2998	F848, F849
Cerebral Palsy	3439	G800, G801 ,G802, G803 ,G804, G808, G809
Mild Mental Retardation	317	F70
Moderate MR	3180	F71
Severe MR	3181	F72
Profound MR	3182	F73
Unspecified Mental Retardation	319	F79, F78
Epilepsy	3450	G40001, G40009, G4001, G40011, G40019, G4010, G40101, G40109, G40111, G40119, G40201, G40209, G40211, G40219, G40301, G40309, G40311, G40319, G40A01, G40A09, G40A11, G40A19, G40B01, G40B09, G40B11, G40B19, G40401, G40409, G40411, G40419, G40501, G40509, G40801, G40802, G40803, G40804, G40811, G40812, G40813, G40814, G40821, G40822, G40823, G40824, G40901, G40909, G40911, G40919

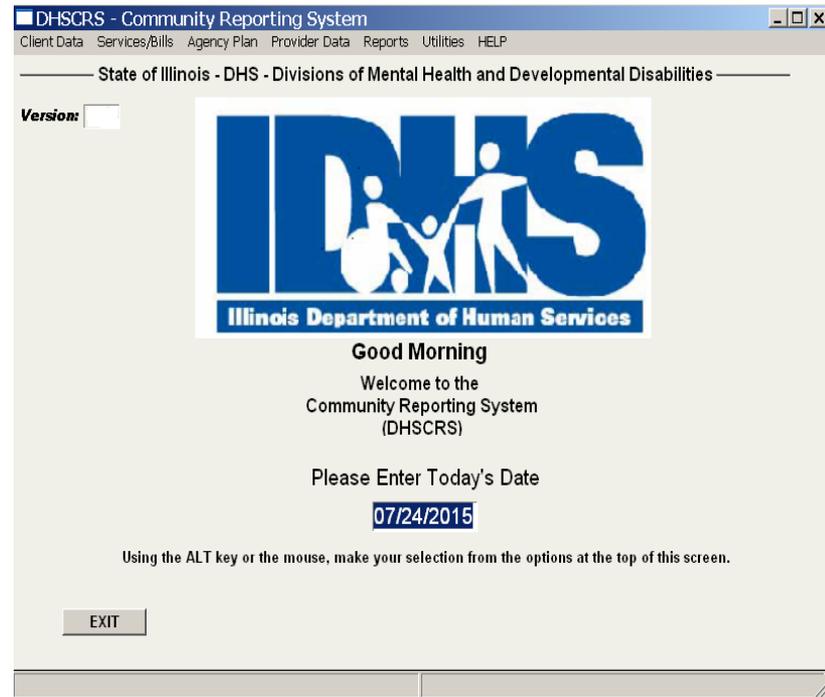
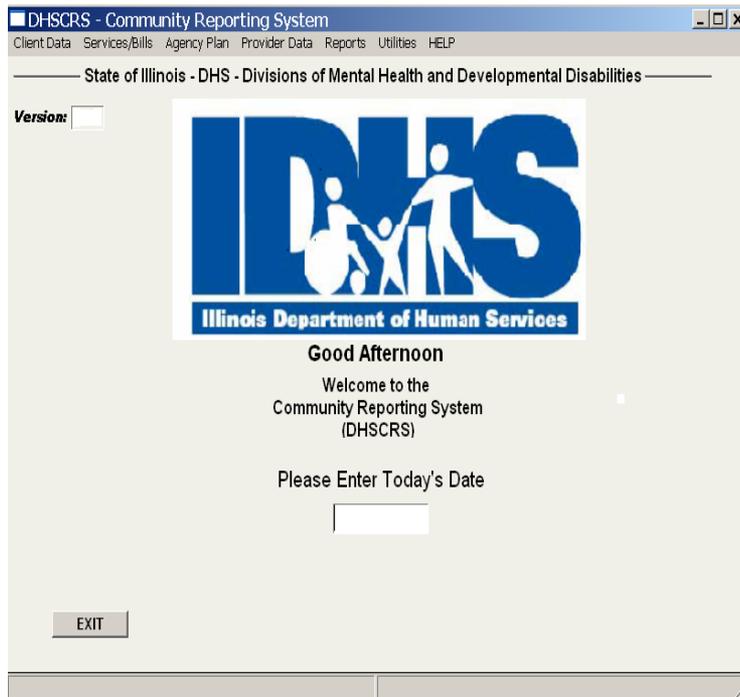


# **Mental Health Information Changes**



## Mental Health Information Changes

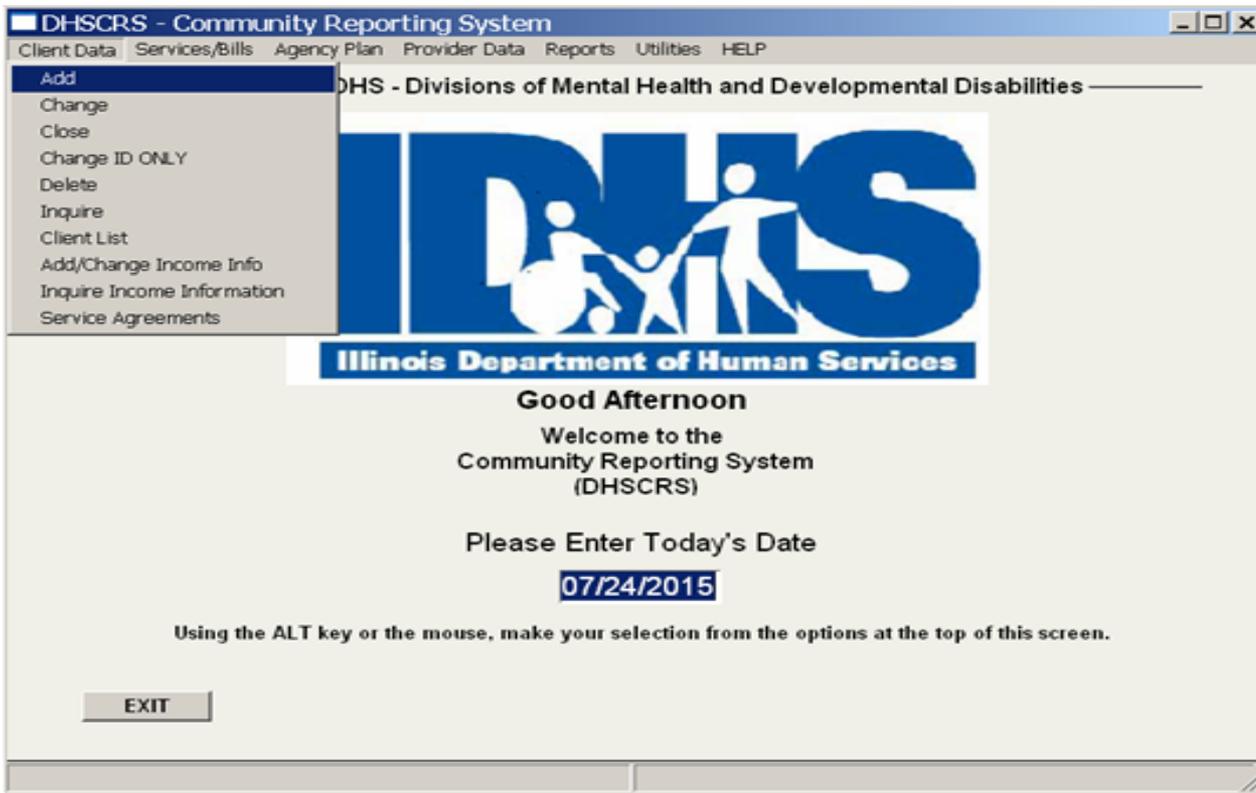
New MH registrations will no longer be allowed in the ICD-10 version.  
The following screenshots show the changes to the system.





# Mental Health Information Changes

Select ADD from Client Data





# Mental Health Information Changes

## Current version

The option to add MH information was enabled.

## ICD-10 version

The option to add MH Registration is disabled.

DHS ROCS - Reporting Of Community Services

State of Illinois - DHS - Offices of Mental Health and Developmental Disabilities

Version: 4.49 CLIENT INFORMATION SELECTION CED21000

Selected Option: ADD NEW CLIENT

Client ID:  (for DD Clients use SSN)

Choose the type of information you want to enter for this client:

- Demographic
- Mental Health (MH)
- Developmental Disabilities (DD)
- Guardian Information

EXIT CONTINUE

DHS ROCS - Reporting Of Community Services

State of Illinois - DHS - Offices of Mental Health and Developmental Disabilities

Version:  CLIENT INFORMATION SELECTION CED21000

Selected Option: ADD NEW CLIENT

Client ID:  (for DD Clients use SSN)

Choose the type of information you want to enter for this client:

- Demographic
- Mental Health (MH)
- Developmental Disabilities (DD)
- Guardian Information

EXIT CONTINUE

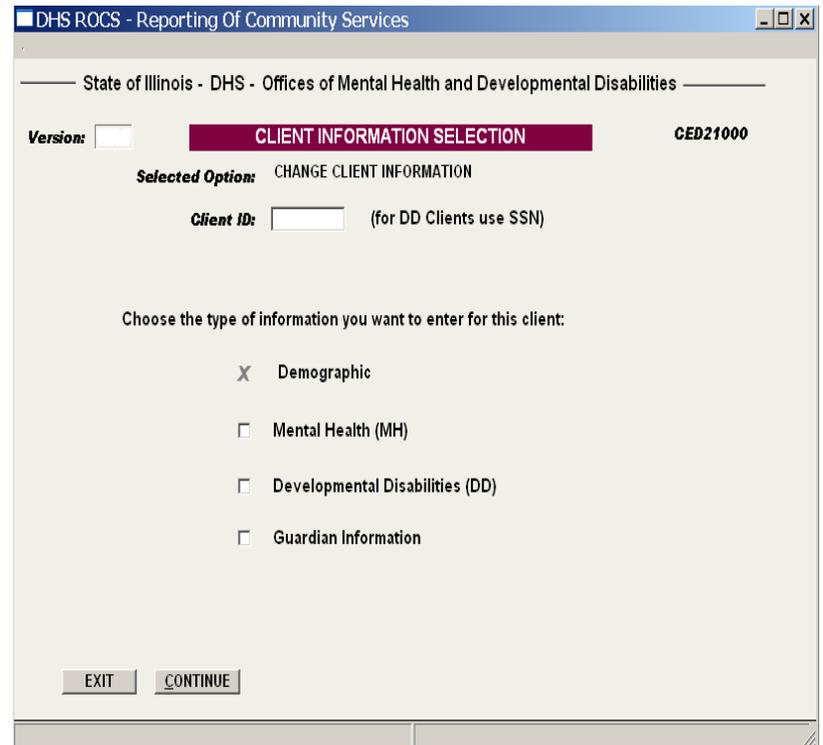
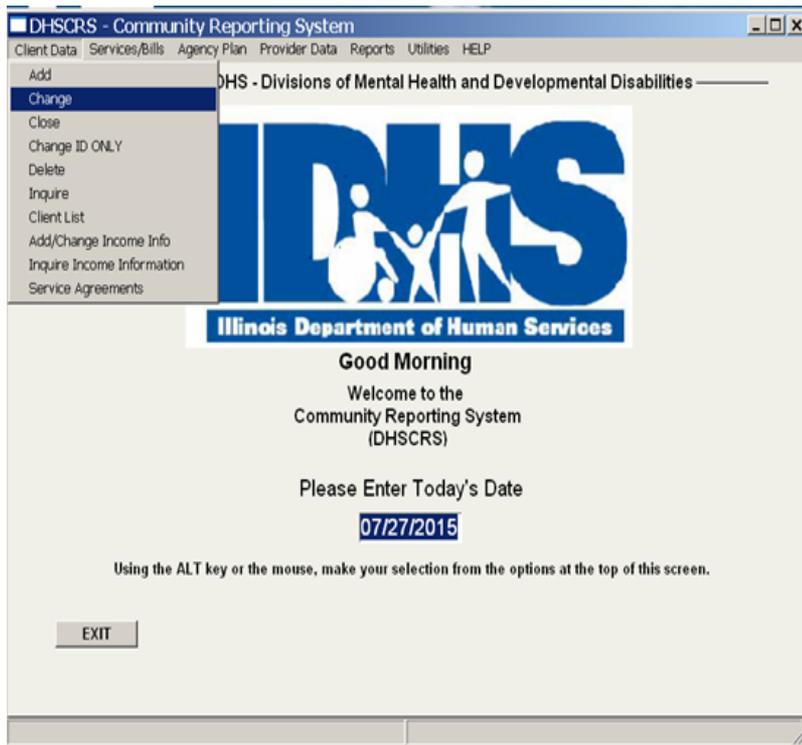


# Mental Health Information Changes

Only updates to MH Information allowed with ICD-10 version.

Select Change from Client Data.

Option to update or change MH is enabled.





# Mental Health Information Changes

Update to MH Information allowed with ICD-10 version (continued)

Enter Client ID. Select Mental Health (MH), Click Continue.

Client Demographic Information Screen will be displayed. Click Process.

DHS ROCS - Reporting Of Community Services

State of Illinois - DHS - Offices of Mental Health and Developmental Disabilities

Version:  **CLIENT INFORMATION SELECTION** CED21000

Selected Option: CHANGE CLIENT INFORMATION

Client ID:  (for DD Clients use SSN)

Choose the type of information you want to enter for this client:

- Demographic
- Mental Health (MH)**
- Developmental Disabilities (DD)
- Guardian Information

EXIT CONTINUE

DHSCRS - Community Reporting System

PrintScreen (Ctrl+P)

**CLIENT DEMOGRAPHIC INFORMATION** CAD21010

Version:  Client ID:  Satellite Code:  Status:  Submit Date:

First Name:  M:  Last Name:  Suffix:

Mother's Maiden Last Name:  SSN:  Birth Date:

Sex:  Male  Female Race:  White  Black/African American  Asian  Unknown  American Indian/Alaskan Native  Native Hawaiian or Other Pacific Islander

RIN:  State Operated Fac ID:  Language:

Hispanic Origin:  Area Of Residence County:  Twp/CA:

Medicaid Site ID:  DHS Case ID:

Client Address Street:  City:  State:  Zip Code:

Education Level:  Employment Status:  Marital Status:

SSI/SSDI Eligibility:  DFIC/FI Enrollment:  Citizenship:

Military Status:  Court/Forensic Treatment:  Disaster Guest:

Interpreter Services Needed:  Guest State:

County/Parrish:

EXIT PROCESS CLEAR Optional Data A:  B:  C:



# Mental Health Information Changes

Current version MH screen.

ICD-10 version MH screen.

Principal Diagnosis, Diagnosis Type and Axis Labels removed. Diagnosis fields expanded. Type indicator included for each Diagnosis. The screen will automatically be populated with the appropriate indicators and existing codes.

**DHSCRS - Community Reporting System**

PrintScreen (Ctrl+P)

Version: 4.49 **CLIENT MENTAL HEALTH INFORMATION** CMD21020  
 Satellite Code: 00 349928798 TESTCASE1 TESTCASE1 Status: PENDING  
 Registration Date: 1/01/2015 MH CILA: N Household Composition: 10

Residential Arrangement: 21  
 Family Household Size: 20 Household Income: 5,000 Client Income: 5,000

Diagnosis Type: I  
 A. Axis I #1: 3182 B. Axis I #2: V7109 Principal Diagnosis: A  
 C. Axis I #3: V7109  
 D. Axis II #1: V7109 E. Axis II #2: V7109 F. Axis II #3: V7109  
 Axis III #1: V7109 Axis III #2: V7109 Axis III #3: V7109

GAF/CGAS Score: 20 Scale Used: G

Level of Functioning  
 Social Group/School: 1 Adults Employment: 1 Self Care: Community: 1  
 Financial: 1 Community Living: 1 Social Rel: Family Rel: 1  
 Supportive Social: 1 Daily Living: 1 School: CAFAS  
 Dangerous Behavior: 1 Prev Impairment: 1 MCAS

Co-Occurring Disorders:  Yes  No  
 History of Illness/Disability 1: 2: 3: 4: 5: 1  
 Justice System Involvement: Not Applicable

Discharge Linkage Aftercare/Triage Linkage Aftercare:  Yes  Update/View  No  
 MH Cross Disabilities Database Information:  Yes  Update/View  No

Closing Date: GAF/CGAS Score: Scale Used:  
 Disposition: Submit Date:

EXIT PROCESS PREV MH NEXT MH DD INFO GUARDIAN INFO CLEAR

UPDATED DEMOGRAPHIC RECORD

**DHSCRS - Community Reporting System**

PrintScreen (Ctrl+P)

Version:  **CLIENT MENTAL HEALTH INFORMATION** CMD21020  
 Satellite Code: 00 349928798 TESTCASE1 TESTCASE1 Status: PENDING  
 Registration Date: 1/01/2015 MH CILA: N Household Composition: 10

Residential Arrangement: 21  
 Family Household Size: 20 Household Income: 5,000 Client Income: 5,000

Diagnosis Codes:

Type	Code	Type	Code	Type	Code	Type
ICD-10: A	3182	9	V7109	9	V7109	9
ICD-9: 9	V7109	9	V7109	9	V7109	9
	V7109	9	V7109	9	V7109	9

GAF/CGAS Score: 20 Scale Used: G

Level of Functioning  
 Social Group/School: 1 Adults Employment: 1 Self Care: Community: 1  
 Financial: 1 Community Living: 1 Social Rel: Family Rel: 1  
 Supportive Social: 1 Daily Living: 1 School: CAFAS  
 Dangerous Behavior: 1 Prev Impairment: 1 MCAS  Change MCAS

Co-Occurring Disorders:  Yes  No  
 History of Illness/Disability 1: 2: 3: 4: 5: 1  
 Justice System Involvement: Not Applicable

Discharge Linkage Aftercare/Triage Linkage Aftercare:  Yes  Update/View  No  
 MH Cross Disabilities Database Information:  Yes  Update/View  No

Closing Date: GAF/CGAS Score: Scale Used:  
 Disposition: Submit Date:

EXIT PROCESS PREV MH NEXT MH DD INFO GUARDIAN INFO CLEAR

UPDATED DEMOGRAPHIC RECORD



# Mental Health Information Changes

When updating an MH record, the system will require the Diagnosis Deferred (V7109) and No Diagnosis (7999) codes to be removed. Delete these codes and the corresponding Type indicators and process the record. If the Registration date is before October 1, 2015, ICD-10 code is not required.

DHSCRS - Community Reporting System

PrintScreen (Ctrl+P)

**Version:**  **CLIENT MENTAL HEALTH INFORMATION** **CMD21020**

**Satellite Code:**  00  349928798  TESTCASE1  TESTCASE1 **Status:**  PENDING

**Registration Date:**  1/01/2015 **MH CILA:**  N **Household Composition:**  10

**Residential Arrangement:**  21

**Family Household Size:**  20 **Household Income:**  5,000 **Client Income:**  5,000

Diagnosis Codes:	Code	Type	Code	Type	Code	Type
Type	<input type="text"/> 3182	<input type="text"/> 9	<input type="text"/> V7109	<input type="text"/> 9	<input type="text"/> V7109	<input type="text"/> 9
ICD-10: A	<input type="text"/> V7109	<input type="text"/> 9	<input type="text"/> V7109	<input type="text"/> 9	<input type="text"/> V7109	<input type="text"/> 9
ICD-9: 9	<input type="text"/> V7109	<input type="text"/> 9	<input type="text"/> V7109	<input type="text"/> 9	<input type="text"/> V7109	<input type="text"/> 9

**GAFICGAS Score:**  20 **Scale Used:**  G

**Level of Functioning**

	Adults	Children and Adolescents
<b>Social Group/School:</b>	<input type="text"/> 1	<input type="text"/> Community: <input type="text"/>
<b>Financial:</b>	<input type="text"/> 1	<input type="text"/> Family Rel: <input type="text"/>
<b>Supportive Social:</b>	<input type="text"/> 1	<input type="text"/> FAS
<b>Dangerous Behavior:</b>	<input type="text"/> 1	<input type="text"/>

**Co-Occurring Disorders**  Yes  No

**Discharge Linkage Aftercare/Triage Linkage Aftercare**  Yes  Update/View  No

**MH Cross Disabilities Database Information**  Yes  Update/View  No

**Closing Date:**  **GAFICGAS Score:**  **Scale Used:**

**Disposition:**  **Submit Date:**

EXIT  PROCESS  PREV MH  NEXT MH  DD INFO  GUARDIAN INFO  CLEAR

**CANNOT REPORT V7109,7999, Z0389, R69, OR R99**

OK



# Mental Health Information Changes

Always enter the appropriate Type indicator for each Diagnosis code.

Type indicator for ICD-10 is 'A'.  
Type indicator for ICD-9 is '9'.

DHSCRS - Community Reporting System

Version:  CLIENT MENTAL HEALTH INFORMATION CMD21020

Satellite Code: 00 349928798 TESTCASE1 TESTCASE1 Status: PENDING

Registration Date: 1/01/2015 MH CILA: N Household Composition: 10

Residential Arrangement: 21

Family Household Size: 20 Household Income: 5,000 Client Income: 5,000

Diagnosis Codes	Code	Type	Code	Type	Code	Type
Type ICD-10: A	3182	9	G40919			
ICD-9: 9						

GAFICGAS Score: 20 Scale Used: G

Level of Functioning:

Social Group/School:  and Adolescents:

Financial:  Community:

Supportive Social:  Family Rel:

Dangerous Behavior:  CAFAS:

Co-Occurring Disorders:  1:  3:  4:  5:

Justice System Involvement: Not Applicable

Discharge Linkage Aftercare/Triage Linkage Aftercare:  Yes  Update/View  No

MH Cross Disabilities Database Information:  Yes  Update/View  No

Closing Date:  GAFICGAS Score:  Scale Used:

Disposition:  Submit Date:

EXIT PROCESS PREV MH NEXT MH DD INFO GUARDIAN INFO CLEAR

DHSCRS - Community Reporting System

Version:  CLIENT MENTAL HEALTH INFORMATION CMD21020

Satellite Code: 00 349928798 TESTCASE1 TESTCASE1 Status: PENDING

Registration Date: 1/01/2015 MH CILA: N Household Composition: 10

Residential Arrangement: 21

Family Household Size: 20 Household Income: 5,000 Client Income: 5,000

Diagnosis Codes	Code	Type	Code	Type	Code	Type
Type ICD-10: A	3182	9	G40919	A		
ICD-9: 9						

GAFICGAS Score: 20 Scale Used: G

Level of Functioning:

Social Group/School:  Adults:  Children and Adolescents:

Financial:  Employment:  Self Care:  Community:

Supportive Social:  Community Living:  Social Rel:  Family Rel:

Dangerous Behavior:  Daily Living:  School:  CAFAS:

Co-Occurring Disorders:  Prev Impairment:  MCAS:

History of Illness/Disability: 1:  2:  3:  4:  5:

Justice System Involvement: Not Applicable

Discharge Linkage Aftercare/Triage Linkage Aftercare:  Yes  Update/View  No

MH Cross Disabilities Database Information:  Yes  Update/View  No

Closing Date:  GAFICGAS Score:  Scale Used:

Disposition:  Submit Date:

EXIT PROCESS PREV MH NEXT MH DD INFO GUARDIAN INFO CLEAR



# Mental Health Information Changes

Duplicate ICD-9 diagnosis codes cannot be entered.

Duplicate ICD-10 diagnosis codes cannot be entered.

DHSCRS - Community Reporting System  
PrintScreen (Ctrl+P)

Version:  CLIENT MENTAL HEALTH INFORMATION CMD21020  
Satellite Code: 00 349928798 TESTCASE1 TESTCASE1 Status: PENDING  
Registration Date: 1/01/2015 MH CILA: N Household Composition: 10  
Residential Arrangement: 21  
Family Household Size: 20 Household Income: 5,000 Client Income: 5,000

Diagnosis Codes	Code	Type	Code	Type	Code	Type
Type ICD-10: A ICD-9: 9	3182	9	G40919	A	3182	9

GAFICGAS Score: 20  
Level of Functioning:  Social Group/School:  Financial:  Supportive Social:  Dangerous Behavior:

Co-Occurring Disorders:  Yes  No  
Justice System Involvement: Not Applicable  
Discharge Linkage Aftercare/Triage Linkage Aftercare:  Yes  Update/View  No  
MH Cross Disabilities Database Information:  Yes  Update/View  No

Closing Date:  GAFICGAS Score:  Scale Used:   
Disposition:  Submit Date:

EXIT PROCESS PREV MH NEXT MH DD INFO GUARDIAN INFO CLEAR

DHSCRS - Community Reporting System  
PrintScreen (Ctrl+P)

Version:  CLIENT MENTAL HEALTH INFORMATION CMD21020  
Satellite Code: 00 349928798 TESTCASE1 TESTCASE1 Status: PENDING  
Registration Date: 1/01/2015 MH CILA: N Household Composition: 10  
Residential Arrangement: 21  
Family Household Size: 20 Household Income: 5,000 Client Income: 5,000

Diagnosis Codes	Code	Type	Code	Type	Code	Type
Type ICD-10: A ICD-9: 9	3182	9	G40919	A	G40919	A

GAFICGAS Score: 20  
Level of Functioning:  Social Group/School:  Financial:  Supportive Social:  Dangerous Behavior:

Co-Occurring Disorders:  Yes  No  
Justice System Involvement: Not Applicable  
Discharge Linkage Aftercare/Triage Linkage Aftercare:  Yes  Update/View  No  
MH Cross Disabilities Database Information:  Yes  Update/View  No

Closing Date:  GAFICGAS Score:  Scale Used:   
Disposition:  Submit Date:

EXIT PROCESS PREV MH NEXT MH DD INFO GUARDIAN INFO CLEAR



# Mental Health Information Changes

When Registration Date is on or after October 1, 2015, ICD-9 codes are not allowed; ICD-10 code is required. In this example, the ICD-9 code (3182) and Type (9) needs to be deleted.

DHSCRS - Community Reporting System  
PrintScreen (Ctrl+P)

**CLIENT MENTAL HEALTH INFORMATION**

Version:       **CMD21020**  
Satellite Code: 00    349928798    TESTCASE1    TESTCASE1    Status: PENDING  
Registration Date: 10/01/2015    MH CILA: N    Household Composition: 10  
Residential Arrangement: 21  
Family Household Size: 20    Household Income: 5,000    Client Income: 5,000

Diagnosis Codes	Code	Type	Code	Type	Code	Type
Type ICD-10: A ICD-9: 9	3182	9	G40919	A		

**GAFICGAS**  
Level of Function:     **Children and Adolescents**  
Social Group:     Community:   
F: CANNOT REPORT ICD-9 CODE AFTER SEPTEMBER 30, 2015    Family Rel:   
Supportiv:      CAFAS  
Dangerous B:     CAS:

Co-Occurring Disorders:  Yes  No    History of Injuries/Disability: 1:  2:  3:  4:  5:   
Justice System Involvement: Not Applicable

Discharge Linkage Aftercare/Triage Linkage Aftercare:  Yes  Update/View  No    MH Cross Disabilities Database Information:  Yes  Update/View  No

Closing Date:     GAFICGAS Score:     Scale Used:   
Disposition:     Submit Date:

EXIT    PROCESS    PREV MH    NEXT MH    DD INFO    GUARDIAN INFO    CLEAR



# **Developmental Disabilities Information Changes**



# Developmental Disabilities Information

DD Information screen in the current version.

ICD-10 version DD Screen.

Principal Diagnosis and Diagnosis Type removed. Diagnosis fields expanded. Type indicator added for each Diagnosis field. The screen will automatically be populated with the appropriate indicators and existing codes.

**DHSCRS - Community Reporting System**  
PrintScreen (Ctrl+P) CLIENT DD INFORMATION CDD21030

Version: 4.49 Status: PENDING

Satellite Code: 00 349928798 TESTCASE1 TESTCASE1

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**REGISTRATION INFORMATION**

Registration Date: 1/01/2015 Individuals in Setting:

Residential Arrangement: 20

Area of Origin County: 0001 Twp/CA: 00 Zip Code: 62702

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**CLINICAL INFORMATION**

Diagnosis Type: 1 Principal Diagnosis: A

A. Axis I #1: 3182	B. Axis I #2: V7109	C. Axis I #3: V7109
D. Axis II #1: 3181	E. Axis II #2: V7109	F. Axis #3: V7109
G. Axis III #1: V7109	H. Axis III #2: V7109	I. Axis III #3: V7109

Age at Onset: 00

ICAP/SIB Service Score: 10 Behavioral Score: + 1 Score Type: 1

Mobility:

---

**CLOSING INFORMATION**

Closing Date:  Individuals in Setting:

Disposition:  Submit Date:

Residential Arrangement:

EXIT PROCESS CLEAR PREV DD NEXT DD MH INFO GUARDIAN INFO

UPDATED DEMOGRAPHIC RECORD

**DHSCRS - Community Reporting System**  
PrintScreen (Ctrl+P) CLIENT DD INFORMATION CDD21030

Version:  Status: PENDING

Satellite Code: 00 349928798 TESTCASE1 TESTCASE1

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**REGISTRATION INFORMATION**

Registration Date: 1/01/2015 Individuals in Setting:

Residential Arrangement: 20

Area of Origin County: 0001 Twp/CA: 00 Zip Code: 62702

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**CLINICAL INFORMATION**

Diagnosis Codes:	Code	Type	Code	Type	Code	Type
Type ICD-10: A	3182	9	V7109	9	V7109	9
ICD-9: 9	3181	9	V7109	9	V7109	9
	V7109	9	V7109	9	V7109	9

Age at Onset: 00

ICAP/SIB Service Score: 10 Behavioral Score: + 1 Score Type: 1

Mobility:

---

**CLOSING INFORMATION**

Closing Date:  Individuals in Setting:

Disposition:  Submit Date:

Residential Arrangement:

EXIT PROCESS CLEAR PREV DD NEXT DD MH INFO GUARDIAN INFO

UPDATED DEMOGRAPHIC RECORD



# Developmental Disabilities Information

When Registration Date is before October 1, 2015, ICD-10 is not required, but allowed. When updating a DD record, the system will require the Diagnosis Deferred (V7109) and No Diagnosis (7999) codes to be removed. Delete these codes and their corresponding Type indicators and process the record.

**DHSCRS - Community Reporting System**  
PrintScreen (Ctrl+P)

**Version:**  **CLIENT DD INFORMATION** **CDD21030**

**Satellite Code:**     **Status:**

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**REGISTRATION INFORMATION**

**Registration Date:**  **Individuals in Setting:**

**Residential Arrangement:**

**Area of Origin** **County:**  **Twp/CA:**  **Zip Code:**

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**CLINICAL INFORMATION**

Diagnosis Codes:		Code	Type	Code	Type	Code	Type
Type		<input type="text" value="3182"/>	<input type="text" value="9"/>	<input type="text" value="V7109"/>	<input type="text" value="9"/>	<input type="text" value="V7109"/>	<input type="text" value="9"/>
ICD-10: A		<input type="text" value="3181"/>	<input type="text" value="9"/>	<input type="text" value="V7109"/>	<input type="text" value="9"/>	<input type="text" value="V7109"/>	<input type="text" value="9"/>
ICD-9: 9		<input type="text" value="V7109"/>	<input type="text" value="9"/>	<input type="text" value="V7109"/>	<input type="text" value="9"/>	<input type="text" value="V7109"/>	<input type="text" value="9"/>

**Age at Onset:**

**ICAP/SIB Service**  **Score Type:**

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**CLOSING INFORMATION**

**Closing Date:**  **Submit Date:**

**Disposition:**  **Residential Arrangement:**

CANNOT ENTER V7109, 7999, Z0389, R69, OR R99



# Developmental Disabilities Information

ICD-10 allowed before Registration date of October 1, 2015. When entering ICD-10 codes, enter at least one from the approved list (See ICD-10 Replacement Codes).

**DHSCRS - Community Reporting System** PrintScreen (Ctrl+P)

**Version:**  **CLIENT DD INFORMATION** **CDD21030**

**Satellite Code:**     **Status:**

---

**REGISTRATION INFORMATION**

**Registration Date:**  **Individuals in Setting:**

**Residential Arrangement:**  **Area of Origin** **County:**  **Twp/CA:**  **Zip Code:**

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**CLINICAL INFORMATION**

Diagnosis Codes:		Code	Type	Code	Type	Code	Type
Type		<input type="text" value="3182"/>	<input type="text" value="9"/>	<input type="text" value="G40919"/>	<input type="text" value="A"/>	<input type="text"/>	<input type="text"/>
ICD-10: A		<input type="text" value="3181"/>	<input type="text" value="9"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ICD-9: 9		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Age at Onset:**

**ICAPISIB Service Score:**  **Behavioral Score:**   **Score Type:**

**Mobility:**

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**CLOSING INFORMATION**

**Closing Date:**  **Individuals in Setting:**

**Disposition:**  **Submit Date:**

**Residential Arrangement:**

UPDATED DEMOGRAPHIC RECORD



# Developmental Disabilities Information

ICD-9 codes are not allowed for Registrations dates on or after October 1, 2015.

DHSCRS - Community Reporting System  
PrintScreen (Ctrl+P)

**Version:**  **CLIENT DD INFORMATION** **CDD21030**

**Satellite Code:**     **Status:**

---

**REGISTRATION INFORMATION**

**Registration Date:**  **Individuals in Setting:**

**Residential Arrangement:**

**Area of Origin** **County:**  **Twp/CA:**  **Zip Code:**

---

**CLINICAL INFORMATION**

**Diagnosis Codes:**

Type	Code	Type	Code	Type	Code	Type
ICD-10: A	<input type="text" value="3182"/>	<input type="text" value="9"/>	<input type="text" value="G40919"/>	<input type="text" value="A"/>	<input type="text"/>	<input type="text"/>
ICD-9: 9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Age at Onset:**  **ICAPISIB Service S:**  **Mo:**  **Type:**

---

**CLOSING INFO**

**Closing Date:**  **Submit Date:**

**Disposition:**  **Residential Arrangement:**

CANNOT REPORT ICD-9 FOR OCTOBER 1,2015 OPENINGS



# Developmental Disabilities Information

Duplicate diagnoses cannot be entered.

Appropriate Type indicator must be entered.

DHSCRS - Community Reporting System  
PrintScreen (Ctrl+P)

Version:  CLIENT DD INFORMATION CDD21030

Satellite Code: 00 349928798 TESTCASE1 TESTCASE1 Status: PENDING

REGISTRATION INFORMATION  
Registration Date: 10/01/2015 Individuals in Setting:   
Residential Arrangement: 20  
Area of Origin County: 001 Twp/CA: 00 Zip Code: 62702

CLINICAL INFORMATION

Diagnosis Codes	Code	Type	Code	Type	Code	Type
Type ICD-10: A	G40919	A				
ICD-9: 9	G40919	A				

Age at Onset: 00  
ICAP/SIB Service Score:  Score Type: 1  
Mobility:

CLOSING INFORMATION  
Closing Date:   
Disposition:  Submit Date:   
Residential Arrangement:

EXIT PROCESS CLEAR PREV DD NEXT DD MH INFO GUARDIAN INFO

**DUPLICATE DIAGNOSES CANNOT BE ENTERED**

OK

DHSCRS - Community Reporting System  
PrintScreen (Ctrl+P)

Version:  CLIENT DD INFORMATION CDD21030

Satellite Code: 00 349928798 TESTCASE1 TESTCASE1 Status: PENDING

REGISTRATION INFORMATION  
Registration Date: 10/01/2015 Individuals in Setting:   
Residential Arrangement: 20  
Area of Origin County: 001 Twp/CA: 00 Zip Code: 62702

CLINICAL INFORMATION

Diagnosis Codes	Code	Type	Code	Type	Code	Type
Type ICD-10: A	G40919					
ICD-9: 9						

Age at Onset: 00  
ICAP/SIB Service Score:  Score Type: 1  
Mobility:

CLOSING INFORMATION  
Closing Date:   
Disposition:  Submit Date:   
Residential Arrangement:

EXIT PROCESS CLEAR PREV DD NEXT DD MH INFO GUARDIAN INFO

**APPROPRIATE TYPE INDICATOR MUST BE ENTERED**

OK



# Important Information

The ROCS ICD-10 software update will be deployed on Monday, September 21, 2015. The new software version will be 5.0.

ALL ROCS software users will need to update their software before any new client registration records can be sent in for processing.

Any Client information files sent after September 21, 2015, and not in the new version will be rejected.

Third Party software users can send test files until September 30, 2015.

## **Contact Information**

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Website – <http://www.dhs.state.il.us/page.aspx?item=32575>