

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT  
Unduplicated Edits Report by Edit ID**

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| -4520 | Skip pattern Fatal ..... | 34 |
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| -4870 | Consistency Fatal.....   | 37 |
| -4880 | Consistency Fatal.....   | 37 |
| -4885 | Format Fatal .....       | 37 |
| -4900 | Format Fatal .....       | 37 |
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| -4970 | Consistency Fatal.....   | 38 |
| -4980 | Consistency Fatal.....   | 38 |
| -4990 | Consistency Warning..... | 38 |

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| -5070 | Skip pattern Fatal ..... | 39 |
| -5080 | Skip pattern Fatal ..... | 39 |
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| -5390 | Consistency Fatal.....   | 46 |
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| -5410 | Consistency Fatal.....   | 46 |
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| -5500 | Consistency Fatal.....   | 48 |
| -5510 | Consistency Fatal.....   | 48 |
| -5520 | Skip pattern Fatal ..... | 49 |
| -5530 | Skip pattern Fatal ..... | 49 |
| -5540 | Skip pattern Fatal ..... | 50 |
| -5550 | Skip pattern Fatal ..... | 50 |
| -5560 | Skip pattern Fatal ..... | 50 |
| -5570 | Skip pattern Fatal ..... | 50 |
| -5580 | Skip pattern Fatal ..... | 50 |
| -5590 | Skip pattern Fatal ..... | 51 |
| -5600 | Skip pattern Fatal ..... | 51 |
| -5610 | Skip pattern Fatal ..... | 51 |
| -5620 | Skip pattern Fatal ..... | 51 |
| -5630 | Skip pattern Fatal ..... | 52 |
| -5660 | Consistency Fatal.....   | 52 |
| -9010 | Information None.....    | 52 |

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| -9020 | Information None..... | 52 |
| -9030 | Information None..... | 52 |
| -9040 | Information None..... | 52 |
| -9050 | Information None..... | 52 |
| -9060 | Information None..... | 53 |
| -9080 | Information None..... | 53 |
| -9090 | Information None..... | 54 |
| -9100 | Information None..... | 54 |
| -9110 | Information None..... | 54 |
| -9130 | Information None..... | 54 |
| -9140 | Information None..... | 54 |
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**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT  
Unduplicated Edits Report by Edit ID**

| ID    | Type   | Severity | Text/Items   |
|-------|--------|----------|--|
| -3010 | Format | Fatal    | <p>If this item is not equal to one of the special values (if any) that are listed in the Item Values table of the Detailed Data Specifications Report, then the length of the submitted value must match exactly the maximum length that is listed for the item.</p> <p><b>Items:</b> NATL_PRVDR_ID Agency National Provider ID (NPI)<br/>           SFW_ID Software vendor federal employer tax ID<br/>           M0018_PHYSICIAN_ID Attending physician National Provider ID (NPI)<br/>           M0064_SSN Patient's Social Security number</p>  |
| -3020 | Format | Fatal    | <p>If the value is not equal to [^], the first three characters must not be equal to [000].</p> <p><b>Items:</b> M0064_SSN Patient's Social Security number</p>  |
| -3030 | Format | Fatal    | <p>The value must not be equal to any of the following: [111111111, 333333333, 123456789, 999999999].</p> <p><b>Items:</b> M0063_MEDICARE_NUM Medicare number, including suffix<br/>           M0064_SSN Patient's Social Security number</p>  |
| -3040 | Format | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.21.1 OF THE DATA SPECS ON 04/01/2018.</p> <p><b>Items:</b> M0063_MEDICARE_NUM Medicare number, including suffix</p>  |
| -3050 | Format | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.21.1 OF THE DATA SPECS ON 04/01/2018.</p> <p><b>Items:</b> M0063_MEDICARE_NUM Medicare number, including suffix</p>  |
| -3060 | Format | Fatal    | <p>VALUES OF CODE AND CHECKLIST ITEMS</p> <p>Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.</p> <p><b>Items:</b> ASMT_SYS_CD Assessment system code<br/>           TRANS_TYPE_CD Transaction type code<br/>           ITM_SBST_CD Item subset code<br/>           STATE_CD Agency's state postal code<br/>           M0014_BRANCH_STATE Branch state<br/>           M0018_PHYSICIAN_UK Attending physician NPI: Unknown<br/>           M0032_ROC_DT_NA No resumption of care date<br/>           M0050_PAT_ST Patient state of residence<br/>           M0063_MEDICARE_NA No Medicare number<br/>           M0064_SSN_UK No Social Security number<br/>           M0065_MEDICAID_NA No Medicaid number</p> |

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| ID | Type | Severity | Text/Items   |
|----|------|----------|--|
|    |      |          | <b>Items:</b> M0069_PAT_GENDER Gender                                  |
|    |      |          | M0140_ETHNIC_AI_AN Ethnicity: American Indian or Alaska Native         |
|    |      |          | M0140_ETHNIC_ASIAN Ethnicity: Asian                                    |
|    |      |          | M0140_ETHNIC_BLACK Ethnicity: Black or African American                |
|    |      |          | M0140_ETHNIC_HISP Ethnicity: Hispanic or Latino                        |
|    |      |          | M0140_ETHNIC_NH_PI Ethnicity: Native Hawaiian/Pacific Islander         |
|    |      |          | M0140_ETHNIC_WHITE Ethnicity: White                                    |
|    |      |          | M0150_CPAY_NONE Payment sources: no charge for current services        |
|    |      |          | M0150_CPAY_MCARE_FFS Payment sources: Medicare fee-for-service         |
|    |      |          | M0150_CPAY_MCARE_HMO Payment sources: Medicare HMO/managed care        |
|    |      |          | M0150_CPAY_MCAID_FFS Payment sources: Medicaid fee-for-service         |
|    |      |          | M0150_CPAY_MCAID_HMO Payment sources: Medicaid HMO/managed care        |
|    |      |          | M0150_CPAY_WRKCOMP Payment sources: worker's compensation              |
|    |      |          | M0150_CPAY_TITLEPGMS Payment sources: title programs                   |
|    |      |          | M0150_CPAY_OTH_GOVT Payment sources: other government                  |
|    |      |          | M0150_CPAY_PRIV_INS Payment sources: private insurance                 |
|    |      |          | M0150_CPAY_PRIV_HMO Payment sources: private HMO/managed care          |
|    |      |          | M0150_CPAY_SELFPAY Payment sources: self-pay                           |
|    |      |          | M0150_CPAY_OTHER Payment sources: other                                |
|    |      |          | M0150_CPAY_UK Payment sources: unknown                                 |
|    |      |          | M0080_ASSESSOR_DISCIPLINE Discipline of person completing assessment   |
|    |      |          | M0100_ASSMT_REASON Reason for assessment                               |
|    |      |          | M0102_PHYSN_ORDRD_SOCROC_DT_NA Physician ordered SOC/ROC date - NA     |
|    |      |          | M0110_EPISODE_TIMING Episode timing                                    |
|    |      |          | M1000_DC_LTC_14_DA Past 14 days: disch from LTC NH                     |
|    |      |          | M1000_DC_SNF_14_DA Past 14 days: disch from skilled nursing facility   |
|    |      |          | M1000_DC_IPPS_14_DA Past 14 days: disch from short stay acute hospital |
|    |      |          | M1000_DC_LTCH_14_DA Past 14 days: disch from long term care hospital   |
|    |      |          | M1000_DC_IRF_14_DA Past 14 days: disch from inpatient rehab facility   |
|    |      |          | M1000_DC_PSYCH_14_DA Past 14 days: disch from psych hospital or unit   |
|    |      |          | M1000_DC_OTH_14_DA Past 14 days: disch from other                      |
|    |      |          | M1000_DC_NONE_14_DA Past 14 days: not disch from inpatient facility    |
|    |      |          | M1005_INP_DSCHG_UNKNOWN Inpatient discharge date unknown               |
|    |      |          | M1021_PRIMARY_DIAG_SEVERITY Primary diagnosis severity rating          |
|    |      |          | M1023_OTH_DIAG1_SEVERITY Other diagnosis 1: severity rating            |
|    |      |          | M1023_OTH_DIAG2_SEVERITY Other diagnosis 2: severity rating            |
|    |      |          | M1023_OTH_DIAG3_SEVERITY Other diagnosis 3: severity rating            |
|    |      |          | M1023_OTH_DIAG4_SEVERITY Other diagnosis 4: severity rating            |
|    |      |          | M1023_OTH_DIAG5_SEVERITY Other diagnosis 5: severity rating            |
|    |      |          | M1028_ACTV_DIAG_PVD_PAD Active Diagnoses - PVD or PAD                  |

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| ID | Type | Severity | Text/Items  |
|----|------|----------|---|
|    |      |          | <b>Items:</b> M1028_ACTV_DIAG_DM Active Diagnoses - Diabetes Mellitus               |
|    |      |          | M1028_ACTV_DIAG_NOA Active Diagnoses - None of the above                            |
|    |      |          | M1030_THH_IV_INFUSION Therapies received at home: intravenous, infusion             |
|    |      |          | M1030_THH_PAR_NUTRITION Therapies received at home: parenteral nutrition            |
|    |      |          | M1030_THH_ENT_NUTRITION Therapies received at home: enteral nutrition               |
|    |      |          | M1030_THH_NONE_ABOVE Therapies received at home: none of the above                  |
|    |      |          | M1033_HOSP_RISK_HSTRY_FALLS Hosp risk: 2+ falls or injury fall in past year         |
|    |      |          | M1033_HOSP_RISK_WEIGHT_LOSS Hosp risk: unintentional weight loss                    |
|    |      |          | M1033_HOSP_RISK_MLTPH_HOSPZTN Hosp risk: 2+ hospitalizations in past 6 months       |
|    |      |          | M1033_HOSP_RISK_MLTPH_ED_VISIT Hosp risk: 2+ emergency dept visits in past 6 months |
|    |      |          | M1033_HOSP_RISK_MNTHL_BHV_DCLN Hosp risk: decline mental/emotional/behav status     |
|    |      |          | M1033_HOSP_RISK_COMPLIANCE Hosp risk: difficulty with medical instructions          |
|    |      |          | M1033_HOSP_RISK_5PLUS_MDCTN Hosp risk: taking five or more medications              |
|    |      |          | M1033_HOSP_RISK_CRNT_EXHSTN Hosp risk: current exhaustion                           |
|    |      |          | M1033_HOSP_RISK_OTHR_RISK Hosp risk: other risk(s) not listed                       |
|    |      |          | M1033_HOSP_RISK_NONE_ABOVE Hosp risk: none of the above                             |
|    |      |          | M1041_IN_INFLNZ_SEASON Does episode include Oct 1 thru Mar 31                       |
|    |      |          | M1046_INFLNZ_RECD_CRNT_SEASON Did patient receive influenza vaccine                 |
|    |      |          | M1051_PVX_RCVD_AGENCY Was pneumococcal vaccine received                             |
|    |      |          | M1056_PVX_RSN_NOT_RCVD_AGENCY If pneumococcal vacc not received, state reason       |
|    |      |          | M1100_PTNT_LVG_STUTN Patient living situation                                       |
|    |      |          | M1200_VISION Sensory status: vision   |
|    |      |          | M1242_PAIN_FREQ_ACTVTY_MVMT Freq of pain interfering with pt activity/movement      |
|    |      |          | M1306_UNHLD_STG2_PRSR_ULCR Patient has 1+ unhealed PU/injury at stage 2+            |
|    |      |          | M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch         |
|    |      |          | M1322_NBR_PRSULC_STG1 Number of stage 1 pressure injuries                           |
|    |      |          | M1324_STG_PRBLM_ULCER Stage of most problematic pressure ulcer/injury               |
|    |      |          | M1330_STAS_ULCR_PRSNT Does this patient have a stasis ulcer                         |
|    |      |          | M1332_NBR_STAS_ULCR Number of stasis ulcers   |
|    |      |          | M1334_STUS_PRBLM_STAS_ULCR Status of most problematic stasis ulcer                  |
|    |      |          | M1340_SRGCL_WND_PRSNT Does this patient have a surgical wound                       |
|    |      |          | M1342_STUS_PRBLM_SRGCL_WND Status of most problematic surgical wound                |
|    |      |          | M1400_WHEN_DYSPNEIC When dyspneic   |
|    |      |          | M1600_UTI Treated for urinary tract infection past 14 days                          |
|    |      |          | M1610_UR_INCONT Urinary incontinence or urinary catheter present                    |
|    |      |          | M1620_BWL_INCONT Bowel incontinence frequency                                       |
|    |      |          | M1630_OSTOMY Ostomy for bowel elimination   |
|    |      |          | M1700_COG_FUNCTION Cognitive functioning  |
|    |      |          | M1710_WHEN_CONFUSED When confused (reported or observed)                            |
|    |      |          | M1720_WHEN_ANXIOUS When anxious (reported or observed)                              |

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| ID | Type | Severity | Text/Items  |
|----|------|----------|---|
|    |      |          | <b>Items:</b> M1730_STDZ_DPRSN_SCRNG Screened for depression using validated tool |
|    |      |          | M1730_PHQ2_LACK_INTRST PHQ2: little interest or pleasure in doing things          |
|    |      |          | M1730_PHQ2_DPRSN PHQ2: feeling down, depressed or hopeless                        |
|    |      |          | M1740_BD_MEM_DEFICIT Behavior demonstrated: memory deficit                        |
|    |      |          | M1740_BD_IMP_DECISN Behavior demonstrated: impaired decision-making               |
|    |      |          | M1740_BD_VERBAL Behavior demonstrated: verbal disruption                          |
|    |      |          | M1740_BD_PHYSICAL Behavior demonstrated: physical aggression                      |
|    |      |          | M1740_BD_SOC_INAPPRO Behavior demonstrated: socially inappropriate                |
|    |      |          | M1740_BD_DELUSIONS Behavior demonstrated: delusions                               |
|    |      |          | M1740_BD_NONE Behavior demonstrated: none of the above                            |
|    |      |          | M1745_BEH_PROB_FREQ Frequency of behavior problems                                |
|    |      |          | M1800_CRNT_GROOMING Current: grooming   |
|    |      |          | M1810_CRNT_DRESS_UPPER Current: dress upper body                                  |
|    |      |          | M1820_CRNT_DRESS_LOWER Current: dress lower body                                  |
|    |      |          | M1830_CRNT_BATHG Current: bathing   |
|    |      |          | M1840_CRNT_TOILTG Current: toileting  |
|    |      |          | M1845_CRNT_TOILTG_HYGN Current: toileting hygiene                                 |
|    |      |          | M1850_CRNT_TRNSFRNG Current: transferring   |
|    |      |          | M1860_CRNT_AMBLTN Current: ambulation   |
|    |      |          | M1870_CRNT_FEEDING Current: feeding   |
|    |      |          | M1910_MLT_FCTR_FALL_RISK_ASMT Has patient had a multi-factor fall risk asmt       |
|    |      |          | M2001_DRUG_RGMN_RVW Drug regimen review   |
|    |      |          | M2003_MDCTN_FLWP Medication follow-up   |
|    |      |          | M2005_MDCTN_INTRVTN Medication intervention                                       |
|    |      |          | M2010_HIGH_RISK_DRUG_EDCTN Patient/caregiver high risk drug education             |
|    |      |          | M2016_DRUG_EDCTN_INTRVTN Patient/caregiver drug education intervention            |
|    |      |          | M2020_CRNT_MGMT_ORAL_MDCTN Current: management of oral medications                |
|    |      |          | M2030_CRNT_MGMT_INJCTN_MDCTN Current: management of injectable medications        |
|    |      |          | M2102_CARE_TYPE_SRC_ADL Care mgmt, types/sources: ADL                             |
|    |      |          | M2102_CARE_TYPE_SRC_MDCTN Care mgmt, types/sources: med admin                     |
|    |      |          | M2102_CARE_TYPE_SRC_PRCDR Care mgmt, types/sources: med procs tx                  |
|    |      |          | M2102_CARE_TYPE_SRC_SPRVSN Care mgmt, types/sources: supervision and safety       |
|    |      |          | M2200_THER_NEED_NA Therapy need: not applicable                                   |
|    |      |          | M2301_EMER_USE_AFTR_LAST_ASMT Emergent care: use since most recent SOC/ROC        |
|    |      |          | M2310_ECR_MEDICATION Emergent care reason: medication                             |
|    |      |          | M2310_ECR_HYPOGLYC Emergent care reason: hypoglycemia/hyperglycemia               |
|    |      |          | M2310_ECR_OTHER Emergent care reason: other than above                            |
|    |      |          | M2310_ECR_UNKNOWN Emergent care reason: unknown                                   |
|    |      |          | M2401_INTRVTN_SMRY_DBTS_FT Intervention synopsis: diabetic foot care              |
|    |      |          | M2401_INTRVTN_SMRY_FALL_PRVNT Intervention synopsis: falls prevention             |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID | Type | Severity | Text/Items  |
|----|------|----------|---|
|    |      |          | <b>Items:</b> M2401_INTRVTN_SMRY_DPRSN Intervention synopsis: depression intervention |
|    |      |          | M2401_INTRVTN_SMRY_PAIN_MNTR Intervention synopsis: monitor and mitigate pain         |
|    |      |          | M2401_INTRVTN_SMRY_PRSULC_PRVN Intervention synopsis: prevent pressure ulcers         |
|    |      |          | M2401_INTRVTN_SMRY_PRSULC_WET Intervention synopsis: PU moist wound treatment         |
|    |      |          | M2410_INPAT_FACILITY Inpatient facility   |
|    |      |          | M2420_DSCHRG_DISP Discharge disposition   |
|    |      |          | GG0100A Prior Function - Self Care  |
|    |      |          | GG0100B Prior Function - Indoor Mobility (Ambulation)                                 |
|    |      |          | GG0100C Prior Function - Stairs   |
|    |      |          | GG0100D Prior Function - Functional Cognition   |
|    |      |          | GG0110A Prior Device - Manual wheelchair  |
|    |      |          | GG0110B Prior Device - Motorized wheelchair and/or scooter                            |
|    |      |          | GG0110C Prior Device - Mechanical lift  |
|    |      |          | GG0110D Prior Device - Walker   |
|    |      |          | GG0110E Prior Device - Orthotics/Prosthetics  |
|    |      |          | GG0110Z Prior Device - None of the above  |
|    |      |          | GG0130A1 Eating (SOC/ROC Perf)  |
|    |      |          | GG0130A2 Eating (Dschg Goal)  |
|    |      |          | GG0130A3 Eating (Dischg Perf)   |
|    |      |          | GG0130A4 Eating (Follow-Up Perf)  |
|    |      |          | GG0130B1 Oral Hygiene (SOC/ROC Perf)  |
|    |      |          | GG0130B2 Oral Hygiene (Dschrg Goal)   |
|    |      |          | GG0130B3 Oral Hygiene (Dschrg Perf)   |
|    |      |          | GG0130B4 Oral Hygiene (Follow-Up Perf)  |
|    |      |          | GG0130C1 Toileting hygiene (SOC/ROC Perf)   |
|    |      |          | GG0130C2 Toileting hygiene (Dschrg Goal)  |
|    |      |          | GG0130C3 Toileting hygiene (Dschrg Perf)  |
|    |      |          | GG0130C4 Toileting hygiene (Follow-Up Perf)   |
|    |      |          | GG0130E1 Shower/bathe self (SOC/ROC Perf)   |
|    |      |          | GG0130E2 Shower/bathe self (Dschrg Goal)  |
|    |      |          | GG0130E3 Shower/bathe self (Dschrg Perf)  |
|    |      |          | GG0130F1 Upper body dressing (SOC/ROC Perf)   |
|    |      |          | GG0130F2 Upper body dressing (Dschrg Goal)  |
|    |      |          | GG0130F3 Upper body dressing (Dschrg Perf)  |
|    |      |          | GG0130G1 Lower body dressing (SOC/ROC Perf)   |
|    |      |          | GG0130G2 Lower body dressing (Dschrg Goal)  |
|    |      |          | GG0130G3 Lower body dressing (Dschrg Perf)  |
|    |      |          | GG0130H1 Put on/take off footwear (SOC/ROC Perf)                                      |
|    |      |          | GG0130H2 Put on/take off footwear (Dschrg Goal)                                       |
|    |      |          | GG0130H3 Put on/take off footwear (Dschrg Perf)                                       |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID | Type | Severity | Text/Items   |
|----|------|----------|--|
|    |      |          | <b>Items:</b> GG0170A1 Roll left and right (SOC/ROC Perf)                |
|    |      |          | GG0170A2 Roll left and right (Dschrg Goal)                               |
|    |      |          | GG0170A3 Roll left and right (Dschrg Perf)                               |
|    |      |          | GG0170A4 Roll left and right (Follow-Up Perf)                            |
|    |      |          | GG0170B1 Sit to lying (SOC/ROC Perf)                                     |
|    |      |          | GG0170B2 Sit to lying (Dschrg Goal)                                      |
|    |      |          | GG0170B3 Sit to lying (Dschrg Perf)                                      |
|    |      |          | GG0170B4 Sit to lying (Follow-Up Perf)                                   |
|    |      |          | GG0170C_MOBILITY_SOCROC_PERF Lying to sitting on bed side (SOC/ROC Perf) |
|    |      |          | GG0170C_MOBILITY_DSCHRG_GOAL Lying to sitting on bed side (Dschrg Goal)  |
|    |      |          | GG0170C3 Lying to sitting on bed side (Dschrg Perf)                      |
|    |      |          | GG0170C4 Lying to sitting on bed side (Follow-Up Perf)                   |
|    |      |          | GG0170D1 Sit to stand (SOC/ROC Perf)                                     |
|    |      |          | GG0170D2 Sit to stand (Dschrg Goal)                                      |
|    |      |          | GG0170D3 Sit to stand (Dschrg Perf)                                      |
|    |      |          | GG0170D4 Sit to stand (Follow-Up Perf)                                   |
|    |      |          | GG0170E1 Chair/bed-to-chair transfer (SOC/ROC Perf)                      |
|    |      |          | GG0170E2 Chair/bed-to-chair transfer (Dschrg Goal)                       |
|    |      |          | GG0170E3 Chair/bed-to-chair transfer (Dschrg Perf)                       |
|    |      |          | GG0170E4 Chair/bed-to-chair transfer (Follow-Up Perf)                    |
|    |      |          | GG0170F1 Toilet transfer (SOC/ROC Perf)                                  |
|    |      |          | GG0170F2 Toilet transfer (Dschrg Goal)                                   |
|    |      |          | GG0170F3 Toilet transfer (Dschrg Perf)                                   |
|    |      |          | GG0170F4 Toilet transfer (Follow-Up Perf)                                |
|    |      |          | GG0170G1 Car transfer (SOC/ROC Perf)                                     |
|    |      |          | GG0170G2 Car transfer (Dschrg Goal)                                      |
|    |      |          | GG0170G3 Car transfer (Dschrg Perf)                                      |
|    |      |          | GG0170I1 Walk 10 feet (SOC/ROC Perf)                                     |
|    |      |          | GG0170I2 Walk 10 feet (Dschrg Goal)                                      |
|    |      |          | GG0170I3 Walk 10 feet (Dschrg Perf)                                      |
|    |      |          | GG0170I4 Walk 10 feet (Follow-Up Perf)                                   |
|    |      |          | GG0170J1 Walk 50 feet with two turns (SOC/ROC Perf)                      |
|    |      |          | GG0170J2 Walk 50 feet with two turns (Dschrg Goal)                       |
|    |      |          | GG0170J3 Walk 50 feet with two turns (Dschrg Perf)                       |
|    |      |          | GG0170J4 Walk 50 feet with two turns (Follow-Up Perf)                    |
|    |      |          | GG0170K1 Walk 150 feet (SOC/ROC Perf)                                    |
|    |      |          | GG0170K2 Walk 150 feet (Dschrg Goal)                                     |
|    |      |          | GG0170K3 Walk 150 feet (Dschrg Perf)                                     |
|    |      |          | GG0170L1 Walking 10 feet uneven surf (SOC/ROC Perf)                      |
|    |      |          | GG0170L2 Walking 10 feet uneven surf (Dschrg Goal)                       |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID           | Type          | Severity     | Text/Items   |
|--------------|---------------|--------------|--|
|              |               |              | <b>Items:</b> GG0170L3 Walking 10 feet uneven surf (Dschrng Perf)<br>GG0170L4 Walking 10 feet uneven surf (Follow-Up Perf)<br>GG0170M1 1 step (curb) (SOC/ROC Perf)<br>GG0170M2 1 step (curb) (Dschrng Goal)<br>GG0170M3 1 step (curb) (Dschrng Perf)<br>GG0170M4 1 step (curb) (Follow-Up Perf)<br>GG0170N1 4 steps (SOC/ROC Perf)<br>GG0170N2 4 steps (Dschrng Goal)<br>GG0170N3 4 steps (Dschrng Perf)<br>GG0170N4 4 steps (Follow-Up Perf)<br>GG0170O1 12 steps (SOC/ROC Perf)<br>GG0170O2 12 steps (Dschrng Goal)<br>GG0170O3 12 steps (Dschrng Perf)<br>GG0170P1 Picking up object (SOC/ROC Perf)<br>GG0170P2 Picking up object (Dschrng Goal)<br>GG0170P3 Picking up object (Dschrng Perf)<br>GG0170Q1 Use wheelchair and/or scooter (SOC/ROC Perf)<br>GG0170Q3 Use wheelchair and/or scooter (Dschrng Perf)<br>GG0170Q4 Use wheelchair and/or scooter (Follow-Up Perf)<br>GG0170R1 Wheel 50 feet with two turns (SOC/ROC Perf)<br>GG0170R2 Wheel 50 feet with two turns (Dschrng Goal)<br>GG0170R3 Wheel 50 feet with two turns (Dschrng Perf)<br>GG0170R4 Wheel 50 feet with two turns (Follow-Up Perf)<br>GG0170RR1 Type of wheelchair or scooter (SOC/ROC Perf)<br>GG0170RR3 Type of wheelchair or scooter (Dschrng Perf)<br>GG0170S1 Wheel 150 feet (SOC/ROC Perf)<br>GG0170S2 Wheel 150 feet (Dschrng Goal)<br>GG0170S3 Wheel 150 feet (Dschrng Perf)<br>GG0170SS1 Type of wheelchair or scooter (SOC/ROC Perf)<br>GG0170SS3 Type of wheelchair or scooter (Dschrng Perf)<br>J1800 Falls since SOC/ROC: any falls<br>J1900A Num falls since SOC/ROC: no injury<br>J1900B Num falls since SOC/ROC: injury (except major)<br>J1900C Num falls since SOC/ROC: major injury |
| <b>-3070</b> | <b>Format</b> | <b>Fatal</b> | VALUES OF DATE ITEMS<br>This item must contain either (a) a valid date in YYYYMMDD format, or (b) one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report.  |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID           | Type          | Severity     | Text/Items  |
|--------------|---------------|--------------|---|
|              |               |              | <p>Note that if a date in YYYYMMDD format is submitted, it must be 8 characters in length and each of the 8 characters must contain the digits 0 (zero) through 9. YYYY, MM, and DD must be zero filled, where necessary. For example, January 1, 2014 must be submitted as "20140101".</p> <p><b>Items:</b> M0030_START_CARE_DT                      Start of care date<br/> M0032_ROC_DT    Resumption of care date<br/> M0090_INFO_COMPLETED_DT                      Date assessment completed<br/> M0102_PHYSN_ORDRD_SOCROC_DT                      Physician ordered SOC/ROC date<br/> M0104_PHYSN_RFRL_DT                                      Physician date of referral<br/> M1005_INP_DISCHARGE_DT                              Most recent inpatient discharge date<br/> M1307_OLDST_STG2_ONST_DT                              Date of onset of oldest stage 2 pressure ulcer<br/> M0906_DC_TRAN_DTH_DT                              Discharge, transfer, death date</p>  |
| <b>-3080</b> | <b>Format</b> | <b>Fatal</b> | <p>FORMATTING OF BIRTHDATE</p> <p>This item must contain either (a) a valid date in YYYYMMDD, YYYYMM, or YYYY format, or (b) one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report. Note that if a date in YYYYMMDD format is submitted, it must be 8 characters in length and each of the 8 characters must contain the digits 0 (zero) through 9. YYYY, MM, and DD must be zero filled, where necessary. For example, January 1, 1909 must be submitted as "19090101".</p> <p>If a date is submitted in YYYYMM format, it must be 6 characters in length and each of the 6 characters must contain the digits 0 (zero) through 9. YYYY and MM must be zero filled, where necessary. For example, January, 1909 must be submitted as "190901".</p> <p>If a date is submitted in YYYY format, it must be 4 characters in length and each of the 4 characters must contain the digits 0 (zero) through 9. YYYY must be zero filled, where necessary. For example, 1909 must be submitted as "1909".</p> <p><b>Items:</b> M0066_PAT_BIRTH_DT                              Date of birth</p>  |
| <b>-3090</b> | <b>Format</b> | <b>Fatal</b> | <p>VALUES OF NUMERIC ITEMS</p> <p>Only the values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item. The submitted value must be greater than or equal to the minimum value listed in the table and less than or equal to the maximum value listed in the table, or it must match one of the remaining special values (if any) that are listed in the table. The length of the submitted value must not exceed the allowed maximum length for the item. Signed numbers (with a leading plus or minus sign) will not be accepted.</p> <p><b>Items:</b> CORRECTION_NUM                              Correction number<br/> M1060_HEIGHT_A    Height (in inches)<br/> M1060_WEIGHT_B    Weight (in pounds)<br/> M1311_NBR_PRSULC_STG2_A1                              Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG2_A2                              Number of Stage 2 pressure ulcers at SOC/ROC<br/> M1311_NBR_PRSULC_STG3_B1                              Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG3_B2                              Number of Stage 3 pressure ulcers at SOC/ROC</p> |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT  
Unduplicated Edits Report by Edit ID**

| ID           | Type          | Severity     | Text/Items  |
|--------------|---------------|--------------|---|
|              |               |              | <p><b>Items:</b> M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG4_C2                      Number of Stage 4 pressure ulcers at SOC/ROC<br/> M1311_NSTG_DRSG_D1                                      Num unstage pressure ulcer non-remov dress<br/> M1311_NSTG_DRSG_SOCROC_D2                      Num unstage pressure ulcer non-remov dress SOC/ROC<br/> M1311_NSTG_CVRG_E1                                      Unstageable: coverage by slough or eschar<br/> M1311_NSTG_CVRG_SOCROC_E2                      Unstageable: coverage by slough or eschar SOC/ROC<br/> M1311_NSTG_DEEP_TSUE_F1                              Unstageable: suspect deep tissue injury<br/> M1311_NSTG_DEEP_TSUE_SOCROC_F2                      Unstageable: suspect deep tissue injury SOC/ROC<br/> M2200_THER_NEED_NBR                                      Therapy need: number of visits indicated</p>  |
| <b>-3100</b> | <b>Format</b> | <b>Fatal</b> | <p><b>FORMATTING OF POSITIVE INTEGER NUMERIC ITEMS</b><br/> Only positive integer values and the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report will be accepted for this item. Leading zeroes may be included or omitted from the submitted value as long as the resulting length of the string does not exceed the allowed maximum length for the item. A decimal point and decimal values are not allowed. A sign will not be accepted.<br/> The following examples are allowable if the value to be submitted is equal to [1] and the maximum length is equal to 2: [1], [01]. The following values are NOT allowed and will lead to a fatal error: [1.], [1.0], [01.], [01.0], [1.1], [01.1], [1.01], [+1], [-2], [+1.3], [-4.5].</p> <p><b>Items:</b> CORRECTION_NUM                                      Correction number<br/> M1060_HEIGHT_A    Height (in inches)<br/> M1060_WEIGHT_B    Weight (in pounds)<br/> M1311_NBR_PRSULC_STG2_A1                              Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG2_A2                      Number of Stage 2 pressure ulcers at SOC/ROC<br/> M1311_NBR_PRSULC_STG3_B1                              Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG3_B2                      Number of Stage 3 pressure ulcers at SOC/ROC<br/> M1311_NBR_PRSULC_STG4_C1                              Number of Stage 4 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG4_C2                      Number of Stage 4 pressure ulcers at SOC/ROC<br/> M1311_NSTG_DRSG_D1                                      Num unstage pressure ulcer non-remov dress<br/> M1311_NSTG_DRSG_SOCROC_D2                      Num unstage pressure ulcer non-remov dress SOC/ROC<br/> M1311_NSTG_CVRG_E1                                      Unstageable: coverage by slough or eschar<br/> M1311_NSTG_CVRG_SOCROC_E2                      Unstageable: coverage by slough or eschar SOC/ROC<br/> M1311_NSTG_DEEP_TSUE_F1                              Unstageable: suspect deep tissue injury<br/> M1311_NSTG_DEEP_TSUE_SOCROC_F2                      Unstageable: suspect deep tissue injury SOC/ROC<br/> M2200_THER_NEED_NBR                                      Therapy need: number of visits indicated</p> |
| <b>-3110</b> | <b>Format</b> | <b>Fatal</b> | <p><b>FORMATTING OF NUMERIC TEXT ITEMS</b><br/> If this item is not equal to one of the special values (if any) that are listed in the Item Values table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only numeric characters: [0] through [9].</p>   |



**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>        | <b>Severity</b> | <b>Text/Items</b>  |
|--------------|--------------------|-----------------|--|
| <b>-3140</b> | <b>Format</b>      | <b>Fatal</b>    | <p>FORMATTING OF ALPHANUMERIC TEXT ITEMS THAT CAN CONTAIN SPECIAL CHARACTERS</p> <p>If this item is not equal to one of the special values (if any) that are listed in the Item Values table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <p>a) The numeric characters: [0] through [9].</p> <p>b) The letters [A] through [Z] and [a] through [z].</p> <p>c) The following special characters:</p> <ul style="list-style-type: none"> <li>[@] (at sign)</li> <li>['] (single quote)</li> <li>[/] (forward slash)</li> <li>[+] (plus sign)</li> <li>[,] (comma)</li> <li>[.] (period)</li> <li>[_] (underscore)</li> </ul> <p><b>Items:</b> M0040_PAT_MI Patient's middle initial</p> |
| <b>-3150</b> | <b>Format</b>      | <b>Fatal</b>    | <p>Formatting of email address.</p> <p>Any valid email address will be accepted.</p> <p>The text string may contain any printable characters except the following:</p> <ul style="list-style-type: none"> <li>' (single quote)</li> <li>" (double quote)</li> <li>,</li> <li>;</li> <li>:</li> <li>\ (back slash)</li> <li>() (right and left parentheses)</li> <li>[] (right and left brackets)</li> <li>{ } (right and left braces)</li> <li>&lt; (less than)</li> <li>&gt; (greater than)</li> <li>space (embedded space)</li> </ul> <p><b>Items:</b> SFW_EMAIL_ADR Software vendor email address</p>   |
| <b>-3160</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>HHA_AGENCY_ID is the provider's submission ID. The value submitted for HHA_AGENCY_ID must match the HHA_AGENCY_ID in the QIES ASAP System for the provider.</p> <p><b>Items:</b> HHA_AGENCY_ID Assigned agency submission ID</p>  |



**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT  
Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>        | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|--------------------|-----------------|---|
|              |                    |                 | <b>Items:</b> M0090_INFO_COMPLETED_DT                      Date assessment completed<br>M0100_ASSMT_REASON    Reason for assessment<br>M0906_DC_TRAN_DTH_DT    Discharge, transfer, death date  |
| <b>-3200</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>The first record that is submitted to correct or inactivate an existing record must have a value of "01" in CORRECTION_NUM (correction number). If that correction/inactivation is accepted and if a subsequent correction/inactivation is required, it must have a value of "02", and so on. In other words, the correction number in CORRECTION_NUM on the first correction/inactivation must be "01", and the value on each subsequent correction/inactivation must be incremented by 1. If the value submitted in CORRECTION_NUM is incorrect, a fatal error will result and the submitted record will be rejected.</p> <b>Items:</b> CORRECTION_NUM    Correction number  |
| <b>-3210</b> | <b>Format</b>      | <b>Fatal</b>    | <p>The length of the text submitted for a free-form text item must not exceed the maximum length specified for that item.</p> <b>Items:</b> HHA_AGENCY_ID    Assigned agency submission ID<br>SFW_NAME    Software vendor company name<br>SFW_EMAIL_ADR    Software vendor email address<br>SFW_PROD_NAME    Software product name<br>SFW_PROD_VRSN_CD    Software product version code<br>ACY_DOC_CD    Document ID code (agency use)<br>SUBM_HIPPS_CODE    HIPPS group code: submitted<br>SUBM_HIPPS_VERSION    HIPPS version code: submitted<br>M0016_BRANCH_ID    Branch ID<br>M0020_PAT_ID    Patient ID number<br>M0040_PAT_FNAME    Patient's first name<br>M0040_PAT_MI    Patient's middle initial<br>M0040_PAT_LNAME    Patient's last name<br>M0040_PAT_SUFFIX    Patient's suffix<br>M0063_MEDICARE_NUM    Medicare number, including suffix<br>M0065_MEDICAID_NUM    Medicaid number |
| <b>-3220</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If SFW_PROD_NAME is equal to [^], then SFW_PROD_VRSN_CD must be equal to [^].</p> <b>Items:</b> SFW_PROD_NAME    Software product name<br>SFW_PROD_VRSN_CD    Software product version code  |
| <b>-3230</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If SFW_PROD_NAME is not equal to [^], then SFW_PROD_VRSN_CD must not be equal to [^].</p> <b>Items:</b> SFW_PROD_NAME    Software product name   |



**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT  
Unduplicated Edits Report by Edit ID**

| <b>ID</b> | <b>Type</b> | <b>Severity</b> | <b>Text/Items</b>  |
|-----------|-------------|-----------------|--|
| -3261     | Consistency | Fatal           | <p>DATE ITEM CONSISTENCY: PATTERN 1<br/>Each active item in the list below that contains a valid date (not blank) must be in the specified order.<br/>If M0032_ROC_DT is equal to [^], then the following rules apply:<br/>M0066_PAT_BIRTH_DT &lt;<br/>M1005_INP_DISCHARGE_DT &lt;=<br/>M0102_PHYSN_ORDRD_SOCROC_DT &lt;=<br/>M0030_START_CARE_DT &lt;=<br/>M1307_OLDST_STG2_ONST_DT &lt;=<br/>M0906_DC_TRAN_DTH_DT &lt;=<br/>M0090_INFO_COMPLETED_DT &lt;=<br/>Current date</p> <p><b>Items:</b> M0030_START_CARE_DT                      Start of care date<br/>          M0032_ROC_DT                                Resumption of care date<br/>          M0066_PAT_BIRTH_DT                        Date of birth<br/>          M0090_INFO_COMPLETED_DT                Date assessment completed<br/>          M0102_PHYSN_ORDRD_SOCROC_DT          Physician ordered SOC/ROC date<br/>          M1005_INP_DISCHARGE_DT                Most recent inpatient discharge date<br/>          M1307_OLDST_STG2_ONST_DT              Date of onset of oldest stage 2 pressure ulcer<br/>          M0906_DC_TRAN_DTH_DT                  Discharge, transfer, death date</p> |
| -3270     | Consistency | Fatal           | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p><b>Items:</b> M0030_START_CARE_DT                      Start of care date<br/>          M0032_ROC_DT                                Resumption of care date<br/>          M0066_PAT_BIRTH_DT                        Date of birth<br/>          M0090_INFO_COMPLETED_DT                Date assessment completed<br/>          M0102_PHYSN_ORDRD_SOCROC_DT          Physician ordered SOC/ROC date<br/>          M1005_INP_DISCHARGE_DT                Most recent inpatient discharge date<br/>          M1307_OLDST_STG2_ONST_DT              Date of onset of oldest stage 2 pressure ulcer<br/>          M0906_DC_TRAN_DTH_DT                  Discharge, transfer, death date</p>  |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID    | Type        | Severity | Text/Items   |
|-------|-------------|----------|--|
| -3271 | Consistency | Fatal    | <p>DATE ITEM CONSISTENCY: PATTERN 2<br/>           Each active item in the list below that contains a valid date (not blank) must be in the specified order.<br/>           If M0032_ROC_DT is NOT equal to [^], then the following rules apply:<br/>           M0066_PAT_BIRTH_DT &lt;<br/>           M0030_START_CARE_DT &lt;=<br/>           M1005_INP_DISCHARGE_DT &lt;=<br/>           M0102_PHYSN_ORDRD_SOCROC_DT &lt;=<br/>           M0032_ROC_DT &lt;=<br/>           M1307_OLDST_STG2_ONST_DT &lt;=<br/>           M0906_DC_TRAN_DTH_DT &lt;=<br/>           M0090_INFO_COMPLETED_DT &lt;=<br/>           Current date</p> <p><b>Items:</b> M0030_START_CARE_DT                      Start of care date<br/>                     M0032_ROC_DT                                Resumption of care date<br/>                     M0066_PAT_BIRTH_DT                        Date of birth<br/>                     M0090_INFO_COMPLETED_DT                Date assessment completed<br/>                     M0102_PHYSN_ORDRD_SOCROC_DT          Physician ordered SOC/ROC date<br/>                     M1005_INP_DISCHARGE_DT                Most recent inpatient discharge date<br/>                     M1307_OLDST_STG2_ONST_DT              Date of onset of oldest stage 2 pressure ulcer<br/>                     M0906_DC_TRAN_DTH_DT                   Discharge, transfer, death date</p> |
| -3280 | Consistency | Warning  | <p>If M0100_ASSMT_REASON=[01] and if M0030_START_CARE_DT and M1005_INP_DISCHARGE_DT are both active and contain valid dates (not [^]), then M0030_START_CARE_DT minus M1005_INP_DISCHARGE_DT should be greater than or equal to zero and less than or equal to 14 days.</p> <p><b>Items:</b> M0030_START_CARE_DT                      Start of care date<br/>                     M0100_ASSMT_REASON                        Reason for assessment<br/>                     M1005_INP_DISCHARGE_DT                Most recent inpatient discharge date</p>  |
| -3290 | Consistency | Warning  | <p>If M0100_ASSMT_REASON=[03] and if M0032_ROC_DT and M1005_INP_DISCHARGE_DT are both active and contain valid dates (not [^]), then M0032_ROC_DT minus M1005_INP_DISCHARGE_DT should be greater than or equal to zero and less than or equal to 14.</p> <p><b>Items:</b> M0032_ROC_DT                                Resumption of care date<br/>                     M0100_ASSMT_REASON                        Reason for assessment<br/>                     M1005_INP_DISCHARGE_DT                Most recent inpatient discharge date</p>   |

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**Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>        | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|--------------------|-----------------|---|
| <b>-3300</b> | <b>Consistency</b> | <b>Warning</b>  | <p>If M0100_ASSMT_REASON=[01] and if M0090_INFO_COMPLETED_DT and M0030_START_CARE_DT are both active and contain valid dates (not [^]), then M0090_INFO_COMPLETED_DT minus M0030_START_CARE_DT should be greater than or equal to zero and less than or equal to 5.</p> <p><b>Items:</b> M0030_START_CARE_DT                      Start of care date<br/> M0090_INFO_COMPLETED_DT                      Date assessment completed<br/> M0100_ASSMT_REASON                              Reason for assessment</p>                         |
| <b>-3310</b> | <b>Consistency</b> | <b>Warning</b>  | <p>If M0100_ASSMT_REASON=[03] and if M0090_INFO_COMPLETED_DT and M0032_ROC_DT are both active and contain valid dates (not [^]), then M0090_INFO_COMPLETED_DT minus M0032_ROC_DT should be greater than or equal to zero and less than or equal to 2.</p> <p><b>Items:</b> M0032_ROC_DT                              Resumption of care date<br/> M0090_INFO_COMPLETED_DT                      Date assessment completed<br/> M0100_ASSMT_REASON                              Reason for assessment</p>                                 |
| <b>-3320</b> | <b>Consistency</b> | <b>Warning</b>  | <p>If M0100_ASSMT_REASON=[09] and if M0090_INFO_COMPLETED_DT and M0906_DC_TRAN_DTH_DT are both active and contain valid dates (not [^]), then M0090_INFO_COMPLETED_DT minus M0906_DC_TRAN_DTH_DT should be greater than or equal to zero and less than or equal to 2.</p> <p><b>Items:</b> M0090_INFO_COMPLETED_DT                      Date assessment completed<br/> M0100_ASSMT_REASON                              Reason for assessment<br/> M0906_DC_TRAN_DTH_DT                              Discharge, transfer, death date</p> |
| <b>-3330</b> | <b>Consistency</b> | <b>Warning</b>  | <p>If TRANS_TYPE_CD=[1] (new record), then submission date minus M0090_INFO_COMPLETED_DT should be less than or equal to 30 days.</p> <p><b>Items:</b> TRANS_TYPE_CD                              Transaction type code<br/> M0090_INFO_COMPLETED_DT                              Date assessment completed</p>   |
| <b>-3340</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If TRANS_TYPE_CD=[1], then CORRECTION_NUM must equal [00].</p> <p><b>Items:</b> TRANS_TYPE_CD                              Transaction type code<br/> CORRECTION_NUM                                      Correction number</p>  |
| <b>-3341</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If TRANS_TYPE_CD=[2,3], then CORRECTION_NUM must not equal [00].</p> <p><b>Items:</b> TRANS_TYPE_CD                              Transaction type code<br/> CORRECTION_NUM                                      Correction number</p>  |



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**Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>        | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|--------------------|-----------------|---|
| <b>-3460</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M1005_INP_DSCHG_UNKNOWN=[1], then if M1005_INP_DISCHARGE_DT is active it must equal [^].</p> <p><b>Items:</b> M1005_INP_DISCHARGE_DT                      Most recent inpatient discharge date<br/> M1005_INP_DSCHG_UNKNOWN                      Inpatient discharge date unknown</p> |
| <b>-3470</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0018_PHYSICIAN_UK=[0], then if M0018_PHYSICIAN_ID is active it cannot equal [^].</p> <p><b>Items:</b> M0018_PHYSICIAN_ID                      Attending physician National Provider ID (NPI)<br/> M0018_PHYSICIAN_UK                      Attending physician NPI: Unknown</p>       |
| <b>-3480</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0018_PHYSICIAN_UK=[1], then if M0018_PHYSICIAN_ID is active it must equal [^].</p> <p><b>Items:</b> M0018_PHYSICIAN_ID                      Attending physician National Provider ID (NPI)<br/> M0018_PHYSICIAN_UK                      Attending physician NPI: Unknown</p>         |
| <b>-3490</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0032_ROC_DT_NA=[0], then if M0032_ROC_DT is active it must not equal [^].</p> <p><b>Items:</b> M0032_ROC_DT                      Resumption of care date<br/> M0032_ROC_DT_NA                      No resumption of care date</p>  |
| <b>-3500</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0032_ROC_DT_NA=[1], then if M0032_ROC_DT is active it must equal [^].</p> <p><b>Items:</b> M0032_ROC_DT                      Resumption of care date<br/> M0032_ROC_DT_NA                      No resumption of care date</p>  |
| <b>-3510</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0063_MEDICARE_NA=[0], then if M0063_MEDICARE_NUM is active it must not equal [^].</p> <p><b>Items:</b> M0063_MEDICARE_NUM                      Medicare number, including suffix<br/> M0063_MEDICARE_NA                      No Medicare number</p>                                  |
| <b>-3520</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0063_MEDICARE_NA=[1], then if M0063_MEDICARE_NUM is active it must equal [^].</p> <p><b>Items:</b> M0063_MEDICARE_NUM                      Medicare number, including suffix<br/> M0063_MEDICARE_NA                      No Medicare number</p>                                      |
| <b>-3530</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0064_SSN_UK=[0], then if M0064_SSN is active it must not equal [^].</p> <p><b>Items:</b> M0064_SSN                      Patient's Social Security number<br/> M0064_SSN_UK                      No Social Security number</p>  |

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Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>        | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|--------------------|-----------------|---|
| <b>-3540</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0064_SSN_UK=[1], then if M0064_SSN is active it must equal [^].</p> <p><b>Items:</b> M0064_SSN Patient's Social Security number<br/>M0064_SSN_UK No Social Security number</p>   |
| <b>-3550</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0065_MEDICAID_NA=[0], then if M0065_MEDICAID_NUM is active it must not equal [^].</p> <p><b>Items:</b> M0065_MEDICAID_NUM Medicaid number<br/>M0065_MEDICAID_NA No Medicaid number</p>   |
| <b>-3560</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0065_MEDICAID_NA=[1], then if M0065_MEDICAID_NUM is active it must equal [^].</p> <p><b>Items:</b> M0065_MEDICAID_NUM Medicaid number<br/>M0065_MEDICAID_NA No Medicaid number</p>   |
| <b>-3570</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0102_PHYSN_ORDRD_SOCROC_DT is not equal to [^] (contains a valid date), then if M0102_PHYSN_ORDRD_SOCROC_DT_NA is active it must equal [0,^].</p> <p><b>Items:</b> M0102_PHYSN_ORDRD_SOCROC_DT Physician ordered SOC/ROC date<br/>M0102_PHYSN_ORDRD_SOCROC_DT_NA Physician ordered SOC/ROC date - NA</p> |
| <b>-3580</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0102_PHYSN_ORDRD_SOCROC_DT=[^], then if M0102_PHYSN_ORDRD_SOCROC_DT_NA is active it must equal [1].</p> <p><b>Items:</b> M0102_PHYSN_ORDRD_SOCROC_DT Physician ordered SOC/ROC date<br/>M0102_PHYSN_ORDRD_SOCROC_DT_NA Physician ordered SOC/ROC date - NA</p>   |
| <b>-3590</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0102_PHYSN_ORDRD_SOCROC_DT is not equal to [^] (contains a valid date), then if M0104_PHYSN_RFRL_DT is active it must equal [^].</p> <p><b>Items:</b> M0102_PHYSN_ORDRD_SOCROC_DT Physician ordered SOC/ROC date<br/>M0104_PHYSN_RFRL_DT Physician date of referral</p>                                  |
| <b>-3600</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If M0102_PHYSN_ORDRD_SOCROC_DT=[^] then if M0104_PHYSN_RFRL_DT is active it must not equal [^].</p> <p><b>Items:</b> M0102_PHYSN_ORDRD_SOCROC_DT Physician ordered SOC/ROC date<br/>M0104_PHYSN_RFRL_DT Physician date of referral</p>   |
| <b>-3610</b> | <b>Consistency</b> | <b>Fatal</b>    | <p>If SUBM_HIPPS_CODE is not equal to [^], then M0110_EPISODE_TIMING must equal [01,02,UK].</p> <p><b>Items:</b> SUBM_HIPPS_CODE HIPPS group code: submitted<br/>M0110_EPISODE_TIMING Episode timing</p>  |

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**Unduplicated Edits Report by Edit ID**

| <b>ID</b> | <b>Type</b> | <b>Severity</b> | <b>Text/Items</b>   |
|-----------|-------------|-----------------|---|
| -3620     | Consistency | Fatal           | <p>If all items from M0140_ETHNIC_AI_AN through M0140_ETHNIC_WHITE are active, then at least one of these items must equal [1].</p> <p><b>Items:</b> M0140_ETHNIC_AI_AN                      Ethnicity: American Indian or Alaska Native<br/> M0140_ETHNIC_ASIAN                              Ethnicity: Asian<br/> M0140_ETHNIC_BLACK                              Ethnicity: Black or African American<br/> M0140_ETHNIC_HISP                              Ethnicity: Hispanic or Latino<br/> M0140_ETHNIC_NH_PI                              Ethnicity: Native Hawaiian/Pacific Islander<br/> M0140_ETHNIC_WHITE                              Ethnicity: White</p>   |
| -3630     | Consistency | Fatal           | <p>At least one of the following items must equal [1]: M0150_CPAY_MCARE_FFS, M0150_CPAY_MCARE_HMO, M0150_CPAY_MCAID_FFS, or M0150_CPAY_MCAID_HMO. If all of these items are equal to [0], then the patient's care is not paid by Medicare or Medicaid and the assessment will be rejected if it is submitted.</p> <p><b>Items:</b> M0150_CPAY_MCARE_FFS                      Payment sources: Medicare fee-for-service<br/> M0150_CPAY_MCARE_HMO                              Payment sources: Medicare HMO/managed care<br/> M0150_CPAY_MCAID_FFS                              Payment sources: Medicaid fee-for-service<br/> M0150_CPAY_MCAID_HMO                              Payment sources: Medicaid HMO/managed care</p>   |
| -3640     | Consistency | Fatal           | <p>Both M0150_CPAY_NONE and M0150_CPAY_UK must equal [0].</p> <p><b>Items:</b> M0150_CPAY_NONE                              Payment sources: no charge for current services<br/> M0150_CPAY_UK    Payment sources: unknown</p>  |
| -3650     | Consistency | Fatal           | <p>If M1000_DC_NONE_14_DA=[0], then at least one active item from M1000_DC_LTC_14_DA through M1000_DC_OTH_14_DA must equal [1].</p> <p><b>Items:</b> M1000_DC_LTC_14_DA                              Past 14 days: disch from LTC NH<br/> M1000_DC_SNF_14_DA                              Past 14 days: disch from skilled nursing facility<br/> M1000_DC_IPPS_14_DA                              Past 14 days: disch from short stay acute hospital<br/> M1000_DC_LTCH_14_DA                              Past 14 days: disch from long term care hospital<br/> M1000_DC_IRF_14_DA                              Past 14 days: disch from inpatient rehab facility<br/> M1000_DC_PSYCH_14_DA                              Past 14 days: disch from psych hospital or unit<br/> M1000_DC_OTH_14_DA                              Past 14 days: disch from other<br/> M1000_DC_NONE_14_DA                              Past 14 days: not disch from inpatient facility</p> |
| -3660     | Consistency | Fatal           | <p>If M1000_DC_NONE_14_DA=[1], then all active items from M1000_DC_LTC_14_DA through M1000_DC_OTH_14_DA must equal [0].</p> <p><b>Items:</b> M1000_DC_LTC_14_DA                              Past 14 days: disch from LTC NH<br/> M1000_DC_SNF_14_DA                              Past 14 days: disch from skilled nursing facility</p>   |

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**Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>         | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|---------------------|-----------------|---|
|              |                     |                 | <b>Items:</b> M1000_DC_IPPS_14_DA Past 14 days: disch from short stay acute hospital<br>M1000_DC_LTCH_14_DA Past 14 days: disch from long term care hospital<br>M1000_DC_IRF_14_DA Past 14 days: disch from inpatient rehab facility<br>M1000_DC_PSYCH_14_DA Past 14 days: disch from psych hospital or unit<br>M1000_DC_OTH_14_DA Past 14 days: disch from other<br>M1000_DC_NONE_14_DA Past 14 days: not disch from inpatient facility                      |
| <b>-3880</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M1030_THH_NONE_ABOVE=[0], then at least one active item from M1030_THH_IV_INFUSION through M1030_THH_ENT_NUTRITION must equal [1].</p> <b>Items:</b> M1030_THH_IV_INFUSION Therapies received at home: intravenous, infusion<br>M1030_THH_PAR_NUTRITION Therapies received at home: parenteral nutrition<br>M1030_THH_ENT_NUTRITION Therapies received at home: enteral nutrition<br>M1030_THH_NONE_ABOVE Therapies received at home: none of the above |
| <b>-3890</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M1030_THH_NONE_ABOVE=[1], then all active items from M1030_THH_IV_INFUSION through M1030_THH_ENT_NUTRITION must equal [0].</p> <b>Items:</b> M1030_THH_IV_INFUSION Therapies received at home: intravenous, infusion<br>M1030_THH_PAR_NUTRITION Therapies received at home: parenteral nutrition<br>M1030_THH_ENT_NUTRITION Therapies received at home: enteral nutrition<br>M1030_THH_NONE_ABOVE Therapies received at home: none of the above         |
| <b>-4030</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M1307_OLDST_STG2_AT_DSCHRG=[01,NA], then if M1307_OLDST_STG2_ONST_DT is active it must equal [^].</p> <b>Items:</b> M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch<br>M1307_OLDST_STG2_ONST_DT Date of onset of oldest stage 2 pressure ulcer  |
| <b>-4040</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M1307_OLDST_STG2_AT_DSCHRG=[02], then if M1307_OLDST_STG2_ONST_DT is active it must not equal [^].</p> <b>Items:</b> M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch<br>M1307_OLDST_STG2_ONST_DT Date of onset of oldest stage 2 pressure ulcer   |
| <b>-4131</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers<br>M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers<br>M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers<br>M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar<br>M1311_NSTG_DEEP_TSUE_F1 Unstageable: suspect deep tissue injury   |

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| <b>ID</b> | <b>Type</b> | <b>Severity</b> | <b>Text/Items</b>   |
|-----------|-------------|-----------------|---|
| -4141     | Consistency | Fatal           | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG2_A1                      Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG3_B1                      Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers<br/> M1311_NSTG_CVRG_E1                              Unstageable: coverage by slough or eschar<br/> M1311_NSTG_DEEP_TSUE_F1                      Unstageable: suspect deep tissue injury</p> |
| -4151     | Consistency | Fatal           | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG3_B1                      Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers</p>   |
| -4161     | Consistency | Fatal           | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG2_A1                      Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG3_B1                      Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers<br/> M1311_NSTG_CVRG_E1                              Unstageable: coverage by slough or eschar<br/> M1311_NSTG_DEEP_TSUE_F1                      Unstageable: suspect deep tissue injury</p> |
| -4170     | Consistency | Fatal           | <p>If M1324_STG_PRBLM_ULCER=[01], then if M1322_NBR_PRSULC_STG1 is active it must be greater than [00].</p> <p><b>Items:</b> M1322_NBR_PRSULC_STG1                      Number of stage 1 pressure injuries<br/> M1324_STG_PRBLM_ULCER                      Stage of most problematic pressure ulcer/injury</p>   |
| -4181     | Consistency | Fatal           | <p>If M1324_STG_PRBLM_ULCER=[02], then if M1311_NBR_PRSULC_STG2_A1 is active it must not equal [^] and it must be greater than [00].</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG2_A1                      Number of Stage 2 Pressure Ulcers<br/> M1324_STG_PRBLM_ULCER                      Stage of most problematic pressure ulcer/injury</p>   |
| -4191     | Consistency | Fatal           | <p>If M1324_STG_PRBLM_ULCER=[03], then if M1311_NBR_PRSULC_STG3_B1 is active it must not equal [^] and it must be greater than [00].</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG3_B1                      Number of Stage 3 Pressure Ulcers<br/> M1324_STG_PRBLM_ULCER                      Stage of most problematic pressure ulcer/injury</p>   |
| -4201     | Consistency | Fatal           | <p>If M1324_STG_PRBLM_ULCER=[04], then if M1311_NBR_PRSULC_STG4_C1 is active it must not equal [^] and it must be greater than [00].</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers</p>   |

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| ID    | Type         | Severity | Text/Items   |
|-------|--------------|----------|--|
| -4211 | Consistency  | Fatal    | <p>Items: M1324_STG_PRBLM_ULCER                      Stage of most problematic pressure ulcer/injury</p> <p>If M1322_NBR_PRSULC_STG1 and M1311_NBR_PRSULC_STG2_A1 and M1311_NBR_PRSULC_STG3_B1 and M1311_NBR_PRSULC_STG4_C1 are all equal to [00,^], then if M1324_STG_PRBLM_ULCER is active it must be equal to [NA].</p> <p>Items: M1311_NBR_PRSULC_STG2_A1                      Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG3_B1                      Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers<br/> M1322_NBR_PRSULC_STG1                      Number of stage 1 pressure injuries<br/> M1324_STG_PRBLM_ULCER                      Stage of most problematic pressure ulcer/injury</p> |
| -4220 | Skip pattern | Fatal    | <p>If M1330_STAS_ULCR_PRSNT=[00,03], then all active items from M1332_NBR_STAS_ULCR through M1334_STUS_PRBLM_STAS_ULCR must equal [^].</p> <p>Items: M1330_STAS_ULCR_PRSNT                      Does this patient have a stasis ulcer<br/> M1332_NBR_STAS_ULCR                      Number of stasis ulcers<br/> M1334_STUS_PRBLM_STAS_ULCR                      Status of most problematic stasis ulcer</p>   |
| -4230 | Skip pattern | Fatal    | <p>If M1330_STAS_ULCR_PRSNT=[01,02], then all active items from M1332_NBR_STAS_ULCR through M1334_STUS_PRBLM_STAS_ULCR must not equal [^].</p> <p>Items: M1330_STAS_ULCR_PRSNT                      Does this patient have a stasis ulcer<br/> M1332_NBR_STAS_ULCR                      Number of stasis ulcers<br/> M1334_STUS_PRBLM_STAS_ULCR                      Status of most problematic stasis ulcer</p>   |
| -4240 | Skip pattern | Fatal    | <p>If M1340_SRGCL_WND_PRSNT=[00,02], then if M1342_STUS_PRBLM_SRGCL_WND is active it must equal [^].</p> <p>Items: M1340_SRGCL_WND_PRSNT                      Does this patient have a surgical wound<br/> M1342_STUS_PRBLM_SRGCL_WND                      Status of most problematic surgical wound</p>   |
| -4250 | Skip pattern | Fatal    | <p>If M1340_SRGCL_WND_PRSNT=[01], then if M1342_STUS_PRBLM_SRGCL_WND is active it must not equal [^].</p> <p>Items: M1340_SRGCL_WND_PRSNT                      Does this patient have a surgical wound<br/> M1342_STUS_PRBLM_SRGCL_WND                      Status of most problematic surgical wound</p>  |
| -4320 | Consistency  | Fatal    | <p>If M0100_ASSMT_REASON=[09], then if M1600_UTI is active it cannot equal [UK].</p> <p>Items: M0100_ASSMT_REASON                      Reason for assessment<br/> M1600_UTI                      Treated for urinary tract infection past 14 days</p>  |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID    | Type         | Severity | Text/Items   |
|-------|--------------|----------|--|
| -4330 | Skip pattern | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p>Items: M1610_UR_INCONT                      Urinary incontinence or urinary catheter present</p>  |
| -4340 | Skip pattern | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p>Items: M1610_UR_INCONT                      Urinary incontinence or urinary catheter present</p>  |
| -4350 | Consistency  | Fatal    | <p>If M0100_ASSMT_REASON=[04,05,09], then if M1620_BWL_INCONT is active it cannot equal [UK].</p> <p>Items: M0100_ASSMT_REASON                      Reason for assessment<br/> M1620_BWL_INCONT                      Bowel incontinence frequency</p>  |
| -4360 | Consistency  | Fatal    | <p>If M1620_BWL_INCONT=[00-05,UK], then if M1630_OSTOMY is active it must equal [00].</p> <p>Items: M1620_BWL_INCONT                      Bowel incontinence frequency<br/> M1630_OSTOMY                      Ostomy for bowel elimination</p>   |
| -4370 | Consistency  | Fatal    | <p>If M1620_BWL_INCONT=[NA], then if M1630_OSTOMY is active it must equal [01,02].</p> <p>Items: M1620_BWL_INCONT                      Bowel incontinence frequency<br/> M1630_OSTOMY                      Ostomy for bowel elimination</p>  |
| -4380 | Skip pattern | Fatal    | <p>If M1730_STDZ_DPRSN_SCRNG=[00,02,03], then all active items from M1730_PHQ2_LACK_INTRST through M1730_PHQ2_DPRSN must equal [^].</p> <p>Items: M1730_STDZ_DPRSN_SCRNG                      Screened for depression using validated tool<br/> M1730_PHQ2_LACK_INTRST                      PHQ2: little interest or pleasure in doing things<br/> M1730_PHQ2_DPRSN                      PHQ2: feeling down, depressed or hopeless</p> |
| -4390 | Skip pattern | Fatal    | <p>If M1730_STDZ_DPRSN_SCRNG=[01], then all active items from M1730_PHQ2_LACK_INTRST through M1730_PHQ2_DPRSN must not equal [^].</p> <p>Items: M1730_STDZ_DPRSN_SCRNG                      Screened for depression using validated tool<br/> M1730_PHQ2_LACK_INTRST                      PHQ2: little interest or pleasure in doing things<br/> M1730_PHQ2_DPRSN                      PHQ2: feeling down, depressed or hopeless</p>   |
| -4400 | Consistency  | Fatal    | <p>If M1740_BD_NONE=[0], then at least one active item from M1740_BD_MEM_DEFICIT through M1740_BD_DELUSIONS must equal [1].</p> <p>Items: M1740_BD_MEM_DEFICIT                      Behavior demonstrated: memory deficit<br/> M1740_BD_IMP_DECISN                      Behavior demonstrated: impaired decision-making</p>  |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID    | Type         | Severity | Text/Items   |
|-------|--------------|----------|--|
|       |              |          | <b>Items:</b> M1740_BD_VERBAL Behavior demonstrated: verbal disruption<br>M1740_BD_PHYSICAL Behavior demonstrated: physical aggression<br>M1740_BD_SOC_INAPPRO Behavior demonstrated: socially inappropriate<br>M1740_BD_DELUSIONS Behavior demonstrated: delusions<br>M1740_BD_NONE Behavior demonstrated: none of the above  |
| -4410 | Consistency  | Fatal    | <p>If M1740_BD_NONE=[1], then all active items from M1740_BD_MEM_DEFICIT through M1740_BD_DELUSIONS must equal [0].</p> <b>Items:</b> M1740_BD_MEM_DEFICIT Behavior demonstrated: memory deficit<br>M1740_BD_IMP_DECISN Behavior demonstrated: impaired decision-making<br>M1740_BD_VERBAL Behavior demonstrated: verbal disruption<br>M1740_BD_PHYSICAL Behavior demonstrated: physical aggression<br>M1740_BD_SOC_INAPPRO Behavior demonstrated: socially inappropriate<br>M1740_BD_DELUSIONS Behavior demonstrated: delusions<br>M1740_BD_NONE Behavior demonstrated: none of the above |
| -4421 | Skip pattern | Fatal    | <p>If M2001_DRUG_RGMN_RVW=[0], then M2003_MDCTN_FLWP must equal [^].</p> <b>Items:</b> M2001_DRUG_RGMN_RVW Drug regimen review<br>M2003_MDCTN_FLWP Medication follow-up  |
| -4431 | Skip pattern | Fatal    | <p>If M2001_DRUG_RGMN_RVW=[1], then all active items from M2003_MDCTN_FLWP through M2030_CRNT_MGMT_INJCTN_MDCTN must not equal [^].</p> <b>Items:</b> M2001_DRUG_RGMN_RVW Drug regimen review<br>M2003_MDCTN_FLWP Medication follow-up<br>M2010_HIGH_RISK_DRUG_EDCTN Patient/caregiver high risk drug education<br>M2020_CRNT_MGMT_ORAL_MDCTN Current: management of oral medications<br>M2030_CRNT_MGMT_INJCTN_MDCTN Current: management of injectable medications  |
| -4441 | Skip pattern | Fatal    | <p>If M2001_DRUG_RGMN_RVW=[9], then all active items from M2003_MDCTN_FLWP through M2030_CRNT_MGMT_INJCTN_MDCTN must equal [^].</p> <b>Items:</b> M2001_DRUG_RGMN_RVW Drug regimen review<br>M2003_MDCTN_FLWP Medication follow-up<br>M2010_HIGH_RISK_DRUG_EDCTN Patient/caregiver high risk drug education<br>M2020_CRNT_MGMT_ORAL_MDCTN Current: management of oral medications<br>M2030_CRNT_MGMT_INJCTN_MDCTN Current: management of injectable medications  |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>         | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|---------------------|-----------------|---|
| <b>-4480</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M0100_ASSMT_REASON=[09] then M2020_CRNT_MGMT_ORAL_MDCTN cannot equal [^].</p> <p><b>Items:</b> M0100_ASSMT_REASON Reason for assessment<br/> M2020_CRNT_MGMT_ORAL_MDCTN Current: management of oral medications</p>   |
| <b>-4490</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M0100_ASSMT_REASON=[04,05,09], then M2030_CRNT_MGMT_INJCTN_MDCTN cannot equal [^].</p> <p><b>Items:</b> M0100_ASSMT_REASON Reason for assessment<br/> M2030_CRNT_MGMT_INJCTN_MDCTN Current: management of injectable medications</p>  |
| <b>-4510</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M2200_THER_NEED_NA=[0], then if M2200_THER_NEED_NBR is active it must not equal [^].</p> <p><b>Items:</b> M2200_THER_NEED_NBR Therapy need: number of visits indicated<br/> M2200_THER_NEED_NA Therapy need: not applicable</p>   |
| <b>-4520</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M2200_THER_NEED_NA=[1], then if M2200_THER_NEED_NBR is active it must equal [^].</p> <p><b>Items:</b> M2200_THER_NEED_NBR Therapy need: number of visits indicated<br/> M2200_THER_NEED_NA Therapy need: not applicable</p>   |
| <b>-4531</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M2301_EMER_USE_AFTR_LAST_ASMT=[00,UK], then all active items from M2310_ECR_MEDICATION through M2310_ECR_UNKNOWN must equal [^].</p> <p><b>Items:</b> M2301_EMER_USE_AFTR_LAST_ASMT Emergent care: use since most recent SOC/ROC<br/> M2310_ECR_MEDICATION Emergent care reason: medication<br/> M2310_ECR_HYPOGLYC Emergent care reason: hypoglycemia/hyperglycemia<br/> M2310_ECR_OTHER Emergent care reason: other than above<br/> M2310_ECR_UNKNOWN Emergent care reason: unknown</p>     |
| <b>-4541</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M2301_EMER_USE_AFTR_LAST_ASMT=[01,02], then all active items from M2310_ECR_MEDICATION through M2310_ECR_UNKNOWN must not equal [^].</p> <p><b>Items:</b> M2301_EMER_USE_AFTR_LAST_ASMT Emergent care: use since most recent SOC/ROC<br/> M2310_ECR_MEDICATION Emergent care reason: medication<br/> M2310_ECR_HYPOGLYC Emergent care reason: hypoglycemia/hyperglycemia<br/> M2310_ECR_OTHER Emergent care reason: other than above<br/> M2310_ECR_UNKNOWN Emergent care reason: unknown</p> |
| <b>-4550</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M2310_ECR_UNKNOWN=[0], then at least one active item from M2310_ECR_MEDICATION through M2310_ECR_OTHER must equal [1].</p> <p><b>Items:</b> M2310_ECR_MEDICATION Emergent care reason: medication</p>   |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID    | Type         | Severity | Text/Items   |
|-------|--------------|----------|--|
|       |              |          | <b>Items:</b> M2310_ECR_HYPOGLYC                      Emergent care reason: hypoglycemia/hyperglycemia<br>M2310_ECR_OTHER                                      Emergent care reason: other than above<br>M2310_ECR_UNKNOWN                                  Emergent care reason: unknown  |
| -4560 | Consistency  | Fatal    | <p>If M2310_ECR_UNKNOWN=[1], then all active items from M2310_ECR_MEDICATION through M2310_ECR_OTHER must equal [0].</p> <b>Items:</b> M2310_ECR_MEDICATION                      Emergent care reason: medication<br>M2310_ECR_HYPOGLYC                                      Emergent care reason: hypoglycemia/hyperglycemia<br>M2310_ECR_OTHER    Emergent care reason: other than above<br>M2310_ECR_UNKNOWN    Emergent care reason: unknown |
| -4570 | Consistency  | Fatal    | <p>If M0100_ASSMT_REASON=[09], then if M2410_INPAT_FACILITY is active it must equal [NA].</p> <b>Items:</b> M0100_ASSMT_REASON                      Reason for assessment<br>M2410_INPAT_FACILITY                                      Inpatient facility  |
| -4580 | Consistency  | Fatal    | <p>If M0100_ASSMT_REASON=[06,07], then if M2410_INPAT_FACILITY is active it must not equal [NA].</p> <b>Items:</b> M0100_ASSMT_REASON                      Reason for assessment<br>M2410_INPAT_FACILITY                                      Inpatient facility   |
| -4590 | Skip pattern | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M2410_INPAT_FACILITY                      Inpatient facility   |
| -4600 | Skip pattern | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M2410_INPAT_FACILITY                      Inpatient facility   |
| -4690 | Consistency  | Fatal    | <p>If the assessment was performed by an HHA which has no branches or by a subunit which has no branches, then M0016_BRANCH_ID must contain [N]. This indicates that the assessment was completed by an HHA or subunit which has no branches.</p> <b>Items:</b> M0016_BRANCH_ID                                  Branch ID   |
| -4700 | Consistency  | Fatal    | <p>If the assessment was performed by the home office of an HHA which has branches or by the home office of a subunit which has branches, then M0016_BRANCH_ID must contain [P]. This indicates that the assessment was completed by the home office (an HHA parent or subunit -- not a branch).</p> <b>Items:</b> M0016_BRANCH_ID                                  Branch ID  |



**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT  
Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>         | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|---------------------|-----------------|---|
| <b>-4870</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If the SFW_ID is not equal to [^], then SFW_NAME and SFW_EMAIL_ADR must not equal [^].</p> <p><b>Items:</b> SFW_ID Software vendor federal employer tax ID<br/>SFW_NAME Software vendor company name<br/>SFW_EMAIL_ADR Software vendor email address</p>   |
| <b>-4880</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If the SFW_ID is equal to [^], then SFW_NAME and SFW_EMAIL_ADR must equal [^].</p> <p><b>Items:</b> SFW_ID Software vendor federal employer tax ID<br/>SFW_NAME Software vendor company name<br/>SFW_EMAIL_ADR Software vendor email address</p>   |
| <b>-4885</b> | <b>Format</b>       | <b>Fatal</b>    | <p>FORMATTING OF ICD-10 DIAGNOSIS CODES</p> <p>ICD-10 diagnosis codes must conform with the following formatting rules:</p> <p>a) Character 1 must be alphabetic [A-Z,a-z].<br/>b) Character 2 must be numeric [0-9].<br/>c) Character 3 must be numeric [0-9] or alphabetic [A-Z,a-z].<br/>d) Character 4 must be a decimal point.<br/>e) Characters 5 through 8 must be numeric [0-9], alphabetic [A-Z,a-z], or caret [^].<br/>f) If any character 5 through 8 is equal to [^], all subsequent characters must equal [^].</p> <p>Note that additional formatting rules for particular items may further restrict the range of allowable values in character 1. Also note that an entirely blank ICD code must be submitted as a single caret: [^].</p> <p><b>Items:</b> M1021_PRIMARY_DIAG_ICD Primary diagnosis ICD code<br/>M1023_OTH_DIAG1_ICD Other diagnosis 1: ICD code<br/>M1023_OTH_DIAG2_ICD Other diagnosis 2: ICD code<br/>M1023_OTH_DIAG3_ICD Other diagnosis 3: ICD code<br/>M1023_OTH_DIAG4_ICD Other diagnosis 4: ICD code<br/>M1023_OTH_DIAG5_ICD Other diagnosis 5: ICD code</p> |
| <b>-4900</b> | <b>Format</b>       | <b>Fatal</b>    | <p>RESTRICTIONS ON ICD-10 DIAGNOSIS CODES</p> <p>Character 1 of the ICD code must not equal [V,W,X,Y,v,w,x,y].</p> <p><b>Items:</b> M1021_PRIMARY_DIAG_ICD Primary diagnosis ICD code</p>   |
| <b>-4920</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p><b>Items:</b> M1000_DC_NONE_14_DA Past 14 days: not disch from inpatient facility<br/>M1005_INP_DISCHARGE_DT Most recent inpatient discharge date<br/>M1005_INP_DSCHG_UNKNOWN Inpatient discharge date unknown</p>   |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID    | Type         | Severity | Text/Items   |
|-------|--------------|----------|--|
| -4921 | Skip pattern | Fatal    | <p>If M1000_DC_NONE_14_DA=[1], then M1005_INP_DISCHARGE_DT and M1005_INP_DSCHG_UNKNOWN must equal [^].</p> <p><b>Items:</b> M1000_DC_NONE_14_DA                      Past 14 days: not disch from inpatient facility<br/> M1005_INP_DISCHARGE_DT                      Most recent inpatient discharge date<br/> M1005_INP_DSCHG_UNKNOWN                      Inpatient discharge date unknown</p>  |
| -4970 | Consistency  | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p><b>Items:</b> M1000_DC_LTC_14_DA                      Past 14 days: disch from LTC NH<br/> M1000_DC_SNF_14_DA                      Past 14 days: disch from skilled nursing facility<br/> M1000_DC_IPPS_14_DA                      Past 14 days: disch from short stay acute hospital<br/> M1000_DC_LTCH_14_DA                      Past 14 days: disch from long term care hospital<br/> M1000_DC_IRF_14_DA                      Past 14 days: disch from inpatient rehab facility<br/> M1000_DC_PSYCH_14_DA                      Past 14 days: disch from psych hospital or unit<br/> M1000_DC_OTH_14_DA                      Past 14 days: disch from other</p>  |
| -4980 | Consistency  | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p><b>Items:</b> M1000_DC_NONE_14_DA                      Past 14 days: not disch from inpatient facility</p>  |
| -4990 | Consistency  | Warning  | <p>M1021_PRIMARY_DIAG_SEVERITY should equal [01-04,^]. A warning will be issued if it is equal to [00].</p> <p><b>Items:</b> M1021_PRIMARY_DIAG_SEVERITY                      Primary diagnosis severity rating</p>  |
| -5000 | Consistency  | Fatal    | <p>If a value submitted in items M1021_PRIMARY_DIAG_ICD, M1023_OTH_DIAG1_ICD, M1023_OTH_DIAG2_ICD, M1023_OTH_DIAG3_ICD, M1023_OTH_DIAG4_ICD, or M1023_OTH_DIAG5_ICD is not equal to [^], it must not equal (must not duplicate) any value submitted in the remaining items in this list.</p> <p><b>Items:</b> M1021_PRIMARY_DIAG_ICD                      Primary diagnosis ICD code<br/> M1023_OTH_DIAG1_ICD                      Other diagnosis 1: ICD code<br/> M1023_OTH_DIAG2_ICD                      Other diagnosis 2: ICD code<br/> M1023_OTH_DIAG3_ICD                      Other diagnosis 3: ICD code<br/> M1023_OTH_DIAG4_ICD                      Other diagnosis 4: ICD code<br/> M1023_OTH_DIAG5_ICD                      Other diagnosis 5: ICD code</p> |
| -5030 | Consistency  | Fatal    | <p>If the Primary/Other ICD code in Column 2 code is equal to [^], then the corresponding Column 3 code must equal [^].</p> <p><b>Items:</b> M1021_PRIMARY_DIAG_ICD                      Primary diagnosis ICD code<br/> M1023_OTH_DIAG1_ICD                      Other diagnosis 1: ICD code</p>  |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>         | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|---------------------|-----------------|---|
|              |                     |                 | <b>Items:</b> M1023_OTH_DIAG2_ICD                      Other diagnosis 2: ICD code<br>M1023_OTH_DIAG3_ICD                      Other diagnosis 3: ICD code<br>M1023_OTH_DIAG4_ICD                      Other diagnosis 4: ICD code<br>M1023_OTH_DIAG5_ICD                      Other diagnosis 5: ICD code  |
| <b>-5050</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M1033_HOSP_RISK_NONE_ABOVE is equal to [0], then at least one active item from M1033_HOSP_RISK_HSTRY_FALLS through M1033_HOSP_RISK_OTHR_RISK must equal [1].</p> <b>Items:</b> M1033_HOSP_RISK_HSTRY_FALLS                      Hosp risk: 2+ falls or injury fall in past year<br>M1033_HOSP_RISK_WEIGHT_LOSS                      Hosp risk: unintentional weight loss<br>M1033_HOSP_RISK_MLTPL_HOSPZTN                      Hosp risk: 2+ hospitalizations in past 6 months<br>M1033_HOSP_RISK_MLTPL_ED_VISIT                      Hosp risk: 2+ emergcy dept visits in past 6 months<br>M1033_HOSP_RISK_MNTL_BHV_DCLN                      Hosp risk: decline mental/emotional/behav status<br>M1033_HOSP_RISK_COMPLIANCE                      Hosp risk: difficulty with medical instructions<br>M1033_HOSP_RISK_5PLUS_MDCTN                      Hosp risk: taking five or more medications<br>M1033_HOSP_RISK_CRNT_EXHSTN                      Hosp risk: current exhaustion<br>M1033_HOSP_RISK_OTHR_RISK                      Hosp risk: other risk(s) not listed<br>M1033_HOSP_RISK_NONE_ABOVE                      Hosp risk: none of the above |
| <b>-5060</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M1033_HOSP_RISK_NONE_ABOVE is equal to [1], then all active items from M1033_HOSP_RISK_HSTRY_FALLS through M1033_HOSP_RISK_OTHR_RISK must equal [0].</p> <b>Items:</b> M1033_HOSP_RISK_HSTRY_FALLS                      Hosp risk: 2+ falls or injury fall in past year<br>M1033_HOSP_RISK_WEIGHT_LOSS                      Hosp risk: unintentional weight loss<br>M1033_HOSP_RISK_MLTPL_HOSPZTN                      Hosp risk: 2+ hospitalizations in past 6 months<br>M1033_HOSP_RISK_MLTPL_ED_VISIT                      Hosp risk: 2+ emergcy dept visits in past 6 months<br>M1033_HOSP_RISK_MNTL_BHV_DCLN                      Hosp risk: decline mental/emotional/behav status<br>M1033_HOSP_RISK_COMPLIANCE                      Hosp risk: difficulty with medical instructions<br>M1033_HOSP_RISK_5PLUS_MDCTN                      Hosp risk: taking five or more medications<br>M1033_HOSP_RISK_CRNT_EXHSTN                      Hosp risk: current exhaustion<br>M1033_HOSP_RISK_OTHR_RISK                      Hosp risk: other risk(s) not listed<br>M1033_HOSP_RISK_NONE_ABOVE                      Hosp risk: none of the above         |
| <b>-5070</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M1041_IN_INFLNZ_SEASON=[1], then if M1046_INFLNZ_RECD_CRNT_SEASON is active it must not equal [^].</p> <b>Items:</b> M1041_IN_INFLNZ_SEASON                      Does episode include Oct 1 thru Mar 31<br>M1046_INFLNZ_RECD_CRNT_SEASON                      Did patient receive influenza vaccine   |
| <b>-5080</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M1041_IN_INFLNZ_SEASON=[0], then if M1046_INFLNZ_RECD_CRNT_SEASON is active it must equal [^].</p> <b>Items:</b> M1041_IN_INFLNZ_SEASON                      Does episode include Oct 1 thru Mar 31   |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID    | Type         | Severity | Text/Items   |
|-------|--------------|----------|--|
| -5090 | Skip pattern | Fatal    | <p>Items: M1046_INFLNZ_REC'D_CRNT_SEASON Did patient receive influenza vaccine</p> <p>If M1051_PVX_RCVD_AGENCY=[0], then if M1056_PVX_RSN_NOT_RCVD_AGENCY is active it must not equal [^].</p> <p>Items: M1051_PVX_RCVD_AGENCY Was pneumococcal vaccine received<br/> M1056_PVX_RSN_NOT_RCVD_AGENCY If pneumococcal vacc not received, state reason</p>  |
| -5100 | Skip pattern | Fatal    | <p>If M1051_PVX_RCVD_AGENCY=[1], then if M1056_PVX_RSN_NOT_RCVD_AGENCY is active it must equal [^].</p> <p>Items: M1051_PVX_RCVD_AGENCY Was pneumococcal vaccine received<br/> M1056_PVX_RSN_NOT_RCVD_AGENCY If pneumococcal vacc not received, state reason</p>   |
| -5110 | Skip pattern | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <p>Items: M1306_UNHLD_STG2_PRSR_ULCR Patient has 1+ unhealed PU/injury at stage 2+<br/> M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch<br/> M1307_OLDST_STG2_ONST_DT Date of onset of oldest stage 2 pressure ulcer<br/> M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC<br/> M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC<br/> M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG4_C2 Number of Stage 4 pressure ulcers at SOC/ROC<br/> M1311_NSTG_DRSG_D1 Num unstage pressure ulcer non-remov dress<br/> M1311_NSTG_DRSG_SOCROC_D2 Num unstage pressure ulcer non-remov dress SOC/ROC<br/> M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar<br/> M1311_NSTG_CVRG_SOCROC_E2 Unstageable: coverage by slough or eschar SOC/ROC<br/> M1311_NSTG_DEEP_TSUE_F1 Unstageable: suspect deep tissue injury<br/> M1311_NSTG_DEEP_TSUE_SOCROC_F2 Unstageable: suspect deep tissue injury SOC/ROC</p> |
| -5111 | Skip pattern | Fatal    | <p>If M1306_UNHLD_STG2_PRSR_ULCR=[0], then all active items from M1307_OLDST_STG2_AT_DSCHRG through M1311_NSTG_DEEP_TSUE_SOCROC_F2 must equal [^].</p> <p>Items: M1306_UNHLD_STG2_PRSR_ULCR Patient has 1+ unhealed PU/injury at stage 2+<br/> M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch<br/> M1307_OLDST_STG2_ONST_DT Date of onset of oldest stage 2 pressure ulcer<br/> M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC<br/> M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC<br/> M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers</p>  |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID           | Type                | Severity     | Text/Items  |
|--------------|---------------------|--------------|---|
|              |                     |              | <b>Items:</b> M1311_NBR_ULC_SOCROC_STG4_C2      Number of Stage 4 pressure ulcers at SOC/ROC<br>M1311_NSTG_DRSG_D1      Num unstage pressure ulcer non-remov dress<br>M1311_NSTG_DRSG_SOCROC_D2      Num unstage pressure ulcer non-remov dress SOC/ROC<br>M1311_NSTG_CVRG_E1      Unstageable: coverage by slough or eschar<br>M1311_NSTG_CVRG_SOCROC_E2      Unstageable: coverage by slough or eschar SOC/ROC<br>M1311_NSTG_DEEP_TSUE_F1      Unstageable: suspect deep tissue injury<br>M1311_NSTG_DEEP_TSUE_SOCROC_F2      Unstageable: suspect deep tissue injury SOC/ROC   |
| <b>-5121</b> | <b>Skip pattern</b> | <b>Fatal</b> | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR      Patient has 1+ unhealed PU/injury at stage 2+<br>M1307_OLDST_STG2_AT_DSCHRG      Status of oldest stage 2 pressure ulcer at disch<br>M1311_NBR_PRSULC_STG2_A1      Number of Stage 2 Pressure Ulcers<br>M1311_NBR_PRSULC_STG3_B1      Number of Stage 3 Pressure Ulcers<br>M1311_NBR_PRSULC_STG4_C1      Number of Stage 4 Pressure Ulcers<br>M1311_NSTG_DRSG_D1      Num unstage pressure ulcer non-remov dress<br>M1311_NSTG_CVRG_E1      Unstageable: coverage by slough or eschar<br>M1311_NSTG_DEEP_TSUE_F1      Unstageable: suspect deep tissue injury   |
| <b>-5122</b> | <b>Skip pattern</b> | <b>Fatal</b> | <p>If M1306_UNHLD_STG2_PRSR_ULCR=[1], then the following items must not equal [^]:<br/> M1307_OLDST_STG2_AT_DSCHRG, M1311_NBR_PRSULC_STG2_A1, M1311_NBR_PRSULC_STG3_B1,<br/> M1311_NBR_PRSULC_STG4_C1, M1311_NSTG_DRSG_D1, M1311_NSTG_CVRG_E1, M1311_NSTG_DEEP_TSUE_F1.</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR      Patient has 1+ unhealed PU/injury at stage 2+<br>M1307_OLDST_STG2_AT_DSCHRG      Status of oldest stage 2 pressure ulcer at disch<br>M1311_NBR_PRSULC_STG2_A1      Number of Stage 2 Pressure Ulcers<br>M1311_NBR_PRSULC_STG3_B1      Number of Stage 3 Pressure Ulcers<br>M1311_NBR_PRSULC_STG4_C1      Number of Stage 4 Pressure Ulcers<br>M1311_NSTG_DRSG_D1      Num unstage pressure ulcer non-remov dress<br>M1311_NSTG_CVRG_E1      Unstageable: coverage by slough or eschar<br>M1311_NSTG_DEEP_TSUE_F1      Unstageable: suspect deep tissue injury |
| <b>-5131</b> | <b>Consistency</b>  | <b>Fatal</b> | <p>If M1306_UNHLD_STG2_PRSR_ULCR=[1], then at least one of the following items must be greater than [00]:<br/> M1311_NBR_PRSULC_STG2_A1, M1311_NBR_PRSULC_STG3_B1, M1311_NBR_PRSULC_STG4_C1,<br/> M1311_NSTG_DRSG_D1, M1311_NSTG_CVRG_E1, M1311_NSTG_DEEP_TSUE_F1.</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR      Patient has 1+ unhealed PU/injury at stage 2+<br>M1311_NBR_PRSULC_STG2_A1      Number of Stage 2 Pressure Ulcers<br>M1311_NBR_PRSULC_STG3_B1      Number of Stage 3 Pressure Ulcers<br>M1311_NBR_PRSULC_STG4_C1      Number of Stage 4 Pressure Ulcers<br>M1311_NSTG_DRSG_D1      Num unstage pressure ulcer non-remov dress   |

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**Unduplicated Edits Report by Edit ID**

| ID           | Type               | Severity     | Text/Items   |
|--------------|--------------------|--------------|--|
|              |                    |              | <b>Items:</b> M1311_NSTG_CVRG_E1                      Unstageable: coverage by slough or eschar<br>M1311_NSTG_DEEP_TSUE_F1                      Unstageable: suspect deep tissue injury  |
| <b>-5141</b> | <b>Consistency</b> | <b>Fatal</b> | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR                      Patient has 1+ unhealed PU/injury at stage 2+<br>M1311_NBR_PRSULC_STG2_A1                      Number of Stage 2 Pressure Ulcers   |
| <b>-5151</b> | <b>Consistency</b> | <b>Fatal</b> | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR                      Patient has 1+ unhealed PU/injury at stage 2+<br>M1311_NBR_PRSULC_STG3_B1                      Number of Stage 3 Pressure Ulcers   |
| <b>-5161</b> | <b>Consistency</b> | <b>Fatal</b> | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR                      Patient has 1+ unhealed PU/injury at stage 2+<br>M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers   |
| <b>-5200</b> | <b>Consistency</b> | <b>Fatal</b> | <p>If character 1 of the Primary/Other ICD code in Column 2 is equal to [V,W,X,Y,Z,v,w,x,y,z], then the corresponding severity code must equal [^].</p> <b>Items:</b> M1021_PRIMARY_DIAG_ICD                      Primary diagnosis ICD code<br>M1021_PRIMARY_DIAG_SEVERITY                      Primary diagnosis severity rating<br>M1023_OTH_DIAG1_ICD                      Other diagnosis 1: ICD code<br>M1023_OTH_DIAG1_SEVERITY                      Other diagnosis 1: severity rating<br>M1023_OTH_DIAG2_ICD                      Other diagnosis 2: ICD code<br>M1023_OTH_DIAG2_SEVERITY                      Other diagnosis 2: severity rating<br>M1023_OTH_DIAG3_ICD                      Other diagnosis 3: ICD code<br>M1023_OTH_DIAG3_SEVERITY                      Other diagnosis 3: severity rating<br>M1023_OTH_DIAG4_ICD                      Other diagnosis 4: ICD code<br>M1023_OTH_DIAG4_SEVERITY                      Other diagnosis 4: severity rating<br>M1023_OTH_DIAG5_ICD                      Other diagnosis 5: ICD code<br>M1023_OTH_DIAG5_SEVERITY                      Other diagnosis 5: severity rating |
| <b>-5210</b> | <b>Consistency</b> | <b>Fatal</b> | <p>If the Primary/Other ICD code in Column 2 is NOT equal to [^] AND character 1 of the ICD code is NOT equal to [V,W,X,Y,Z,v,w,x,y,z], then the corresponding severity code must not equal [^].</p> <b>Items:</b> M1021_PRIMARY_DIAG_ICD                      Primary diagnosis ICD code<br>M1021_PRIMARY_DIAG_SEVERITY                      Primary diagnosis severity rating<br>M1023_OTH_DIAG1_ICD                      Other diagnosis 1: ICD code<br>M1023_OTH_DIAG1_SEVERITY                      Other diagnosis 1: severity rating  |

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Unduplicated Edits Report by Edit ID**

| ID           | Type               | Severity       | Text/Items  |
|--------------|--------------------|----------------|---|
|              |                    |                | <b>Items:</b> M1023_OTH_DIAG2_ICD                      Other diagnosis 2: ICD code<br>M1023_OTH_DIAG2_SEVERITY                      Other diagnosis 2: severity rating<br>M1023_OTH_DIAG3_ICD                      Other diagnosis 3: ICD code<br>M1023_OTH_DIAG3_SEVERITY                      Other diagnosis 3: severity rating<br>M1023_OTH_DIAG4_ICD                      Other diagnosis 4: ICD code<br>M1023_OTH_DIAG4_SEVERITY                      Other diagnosis 4: severity rating<br>M1023_OTH_DIAG5_ICD                      Other diagnosis 5: ICD code<br>M1023_OTH_DIAG5_SEVERITY                      Other diagnosis 5: severity rating  |
| <b>-5220</b> | <b>Consistency</b> | <b>Fatal</b>   | <p>If the Primary/Other ICD code in Column 2 is equal to [^], then the corresponding severity code must equal [^].</p> <b>Items:</b> M1021_PRIMARY_DIAG_ICD                      Primary diagnosis ICD code<br>M1021_PRIMARY_DIAG_SEVERITY                      Primary diagnosis severity rating<br>M1023_OTH_DIAG1_ICD                      Other diagnosis 1: ICD code<br>M1023_OTH_DIAG1_SEVERITY                      Other diagnosis 1: severity rating<br>M1023_OTH_DIAG2_ICD                      Other diagnosis 2: ICD code<br>M1023_OTH_DIAG2_SEVERITY                      Other diagnosis 2: severity rating<br>M1023_OTH_DIAG3_ICD                      Other diagnosis 3: ICD code<br>M1023_OTH_DIAG3_SEVERITY                      Other diagnosis 3: severity rating<br>M1023_OTH_DIAG4_ICD                      Other diagnosis 4: ICD code<br>M1023_OTH_DIAG4_SEVERITY                      Other diagnosis 4: severity rating<br>M1023_OTH_DIAG5_ICD                      Other diagnosis 5: ICD code<br>M1023_OTH_DIAG5_SEVERITY                      Other diagnosis 5: severity rating |
| <b>-5230</b> | <b>Consistency</b> | <b>Warning</b> | <p>If the Column 3 diagnosis code is not equal to [^], then the corresponding Column 2 Primary/Other code should be a Z-code (byte 1 of the Column 2 code should equal [Z,z]).</p> <b>Items:</b> M1021_PRIMARY_DIAG_ICD                      Primary diagnosis ICD code<br>M1023_OTH_DIAG1_ICD                      Other diagnosis 1: ICD code<br>M1023_OTH_DIAG2_ICD                      Other diagnosis 2: ICD code<br>M1023_OTH_DIAG3_ICD                      Other diagnosis 3: ICD code<br><b>Items:</b> M1023_OTH_DIAG4_ICD                      Other diagnosis 4: ICD code<br>M1023_OTH_DIAG5_ICD                      Other diagnosis 5: ICD code   |
| <b>-5240</b> | <b>Consistency</b> | <b>Warning</b> | <p>If the Column 4 diagnosis code is not equal to [^], then the corresponding Column 2 Primary/Other code should be a Z-code (byte 1 of the Column 2 code should equal [Z,z]).</p> <b>Items:</b> M1021_PRIMARY_DIAG_ICD                      Primary diagnosis ICD code<br>M1023_OTH_DIAG1_ICD                      Other diagnosis 1: ICD code<br>M1023_OTH_DIAG2_ICD                      Other diagnosis 2: ICD code<br>M1023_OTH_DIAG3_ICD                      Other diagnosis 3: ICD code   |

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**Unduplicated Edits Report by Edit ID**

| ID    | Type        | Severity | Text/Items   |
|-------|-------------|----------|--|
|       |             |          | <b>Items:</b> M1023_OTH_DIAG4_ICD                      Other diagnosis 4: ICD code<br>M1023_OTH_DIAG5_ICD                      Other diagnosis 5: ICD code   |
| -5250 | Consistency | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1000_DC_LTC_14_DA                      Past 14 days: disch from LTC NH<br>M1000_DC_SNF_14_DA                      Past 14 days: disch from skilled nursing facility<br>M1000_DC_IPPS_14_DA                      Past 14 days: disch from short stay acute hospital<br>M1000_DC_LTCH_14_DA                      Past 14 days: disch from long term care hospital<br>M1000_DC_IRF_14_DA                      Past 14 days: disch from inpatient rehab facility<br>M1000_DC_PSYCH_14_DA                      Past 14 days: disch from psych hospital or unit<br>M1000_DC_OTH_14_DA                      Past 14 days: disch from other |
| -5280 | Format      | Fatal    | <p>The value submitted in M0010_CCN must either be equal to [^] or it must be exactly 6 characters in length.</p> <b>Items:</b> M0010_CCN                      Facility CMS certification number (CCN)   |
| -5290 | Consistency | Fatal    | <p>If M0100_ASSMT_REASON=[06,07,08,09], then M0906_DC_TRAN_DTH_DT must not equal [^].</p> <b>Items:</b> M0100_ASSMT_REASON                      Reason for assessment<br>M0906_DC_TRAN_DTH_DT                      Discharge, transfer, death date   |
| -5300 | Consistency | Fatal    | <p>If TRANS_TYPE_CD=[3] (inactivate existing record) and M0100_ASSMT_REASON=[01,03,04,05], then M0906_DC_TRAN_DTH_DT must equal [^].</p> <b>Items:</b> TRANS_TYPE_CD                      Transaction type code<br>M0100_ASSMT_REASON                      Reason for assessment<br>M0906_DC_TRAN_DTH_DT                      Discharge, transfer, death date  |
| -5311 | Consistency | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR                      Patient has 1+ unhealed PU/injury at stage 2+<br>M1311_NSTG_CVRG_E1                      Unstageable: coverage by slough or eschar   |
| -5320 | Consistency | Fatal    | <p>If M1000_DC_NONE_14_DA=[0], then if M1005_INP_DSCHG_UNKNOWN is active it must not equal [^].</p> <b>Items:</b> M1000_DC_NONE_14_DA                      Past 14 days: not disch from inpatient facility<br>M1005_INP_DSCHG_UNKNOWN                      Inpatient discharge date unknown  |

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**Unduplicated Edits Report by Edit ID**

| ID    | Type         | Severity | Text/Items  |
|-------|--------------|----------|---|
| -5340 | Consistency  | Fatal    | <p>If M0104_PHYSN_RFRL_DT is not equal to [^] and if M0100_ASSMT_REASON=[01], then M0104_PHYSN_RFRL_DT must be less than or equal to M0030_START_CARE_DT and must be greater than M0066_PAT_BIRTH_DT.</p> <p><b>Items:</b> M0030_START_CARE_DT Start of care date<br/> M0066_PAT_BIRTH_DT Date of birth<br/> M0100_ASSMT_REASON Reason for assessment<br/> M0104_PHYSN_RFRL_DT Physician date of referral</p> |
| -5350 | Consistency  | Fatal    | <p>If M0104_PHYSN_RFRL_DT is not equal to [^] and if M0100_ASSMT_REASON=[03], then M0104_PHYSN_RFRL_DT must be less than or equal to M0032_ROC_DT and must be greater than M0066_PAT_BIRTH_DT.</p> <p><b>Items:</b> M0032_ROC_DT Resumption of care date<br/> M0066_PAT_BIRTH_DT Date of birth<br/> M0100_ASSMT_REASON Reason for assessment<br/> M0104_PHYSN_RFRL_DT Physician date of referral</p>          |
| -5360 | Format       | Warning  | <p>Version Code Values: The version code submitted should match one of the values listed in the “Item Values” table of the Detailed Data Specifications Report.</p> <p><b>Items:</b> ITM_SET_VRSN_CD Item set version code</p>  |
| -5370 | Consistency  | Fatal    | <p>If M1311_NBR_PRSULC_STG2_A1 is greater than 0, and M1311_NBR_ULC_SOCROC_STG2_A2 is active, then M1311_NBR_ULC_SOCROC_STG2_A2 must be less than or equal to M1311_NBR_PRSULC_STG2_A1.</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC</p>  |
| -5371 | Skip pattern | Fatal    | <p>(a) If M1311_NBR_PRSULC_STG2_A1=0, then if M1311_NBR_ULC_SOCROC_STG2_A2 is active, it must be equal to [^].<br/> (b) If M1311_NBR_PRSULC_STG2_A1&gt;0, then if M1311_NBR_ULC_SOCROC_STG2_A2 is active, it must not be equal to [^].</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC</p>     |
| -5380 | Consistency  | Fatal    | <p>If M1311_NBR_PRSULC_STG3_B1 is greater than 0, and M1311_NBR_ULC_SOCROC_STG3_B2 is active, then M1311_NBR_ULC_SOCROC_STG3_B2 must be less than or equal to M1311_NBR_PRSULC_STG3_B1.</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC</p>  |

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**Unduplicated Edits Report by Edit ID**

| <b>ID</b>    | <b>Type</b>         | <b>Severity</b> | <b>Text/Items</b>   |
|--------------|---------------------|-----------------|---|
| <b>-5381</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>(a) If M1311_NBR_PRSULC_STG3_B1=0, then if M1311_NBR_ULC_SOCROC_STG3_B2 is active, it must be equal to [^].<br/>           (b) If M1311_NBR_PRSULC_STG3_B1&gt;0, then if M1311_NBR_ULC_SOCROC_STG3_B2 is active, it must not be equal to [^].</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG3_B1                      Number of Stage 3 Pressure Ulcers<br/>                             M1311_NBR_ULC_SOCROC_STG3_B2                      Number of Stage 3 pressure ulcers at SOC/ROC</p>                     |
| <b>-5390</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M1311_NBR_PRSULC_STG4_C1 is greater than 0, and M1311_NBR_ULC_SOCROC_STG4_C2 is active, then M1311_NBR_ULC_SOCROC_STG4_C2 must be less than or equal to M1311_NBR_PRSULC_STG4_C1.</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers<br/>                             M1311_NBR_ULC_SOCROC_STG4_C2                      Number of Stage 4 pressure ulcers at SOC/ROC</p>  |
| <b>-5391</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>(a) If M1311_NBR_PRSULC_STG4_C1=0, then if M1311_NBR_ULC_SOCROC_STG4_C2 is active, it must be equal to [^].<br/>           (b) If M1311_NBR_PRSULC_STG4_C1&gt;0, then if M1311_NBR_ULC_SOCROC_STG4_C2 is active, it must not be equal to [^].</p> <p><b>Items:</b> M1311_NBR_PRSULC_STG4_C1                      Number of Stage 4 Pressure Ulcers<br/>                             M1311_NBR_ULC_SOCROC_STG4_C2                      Number of Stage 4 pressure ulcers at SOC/ROC</p>                     |
| <b>-5400</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M1311_NSTG_DRSG_D1 is greater than 0, and M1311_NSTG_DRSG_SOCROC_D2 is active, then M1311_NSTG_DRSG_SOCROC_D2 must be less than or equal to M1311_NSTG_DRSG_D1.</p> <p><b>Items:</b> M1311_NSTG_DRSG_D1                                      Num unstage pressure ulcer non-remov dress<br/>                             M1311_NSTG_DRSG_SOCROC_D2                                      Num unstage pressure ulcer non-remov dress SOC/ROC</p>  |
| <b>-5401</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>(a) If M1311_NSTG_DRSG_D1=0, then if M1311_NSTG_DRSG_SOCROC_D2 is active, it must be equal to [^].<br/>           (b) If M1311_NSTG_DRSG_D1&gt;0, then if M1311_NSTG_DRSG_SOCROC_D2 is active, it must not be equal to [^].</p> <p><b>Items:</b> M1311_NSTG_DRSG_D1                                      Num unstage pressure ulcer non-remov dress<br/>                             M1311_NSTG_DRSG_SOCROC_D2                                      Num unstage pressure ulcer non-remov dress SOC/ROC</p> |
| <b>-5410</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M1311_NSTG_CVRG_E1 is greater than 0, and M1311_NSTG_CVRG_SOCROC_E2 is active, then M1311_NSTG_CVRG_SOCROC_E2 must be less than or equal to M1311_NSTG_CVRG_E1.</p> <p><b>Items:</b> M1311_NSTG_CVRG_E1                                      Unstageable: coverage by slough or eschar<br/>                             M1311_NSTG_CVRG_SOCROC_E2                                      Unstageable: coverage by slough or eschar SOC/ROC</p>  |
| <b>-5411</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>(a) If M1311_NSTG_CVRG_E1=0, then if M1311_NSTG_CVRG_SOCROC_E2 is active, it must be equal to [^].<br/>           (b) If M1311_NSTG_CVRG_E1 &gt;0, then if M1311_NSTG_CVRG_SOCROC_E2 is active, it must not be equal to [^].</p>   |

**Data Submission Specifications for the OASIS Item Set (V2.30.0) – DRAFT**  
**Unduplicated Edits Report by Edit ID**

| ID    | Type         | Severity | Text/Items   |
|-------|--------------|----------|--|
|       |              |          | <b>Items:</b> M1311_NSTG_CVRG_E1                      Unstageable: coverage by slough or eschar<br>M1311_NSTG_CVRG_SOCROC_E2                      Unstageable: coverage by slough or eschar SOC/ROC  |
| -5420 | Consistency  | Fatal    | <p>If M1311_NSTG_DEEP_TSUE_F1 is greater than 0, and M1311_NSTG_DEEP_TSUE_SOCROC_F2 is active, then M1311_NSTG_DEEP_TSUE_SOCROC_F2 must be less than or equal to M1311_NSTG_DEEP_TSUE_F1.</p> <b>Items:</b> M1311_NSTG_DEEP_TSUE_F1                      Unstageable: suspect deep tissue injury<br>M1311_NSTG_DEEP_TSUE_SOCROC_F2                      Unstageable: suspect deep tissue injury SOC/ROC  |
| -5421 | Skip pattern | Fatal    | <p>(a) If M1311_NSTG_DEEP_TSUE_F=0, then if M1311_NSTG_DEEP_TSUE_SOCROC_F2 is active, it must be equal to [^].<br/> (b) If M1311_NSTG_DEEP_TSUE_F1 &gt;0, then if M1311_NSTG_DEEP_TSUE_SOCROC_F2 is active, it must not be equal to [^].</p> <b>Items:</b> M1311_NSTG_DEEP_TSUE_F1                      Unstageable: suspect deep tissue injury<br>M1311_NSTG_DEEP_TSUE_SOCROC_F2                      Unstageable: suspect deep tissue injury SOC/ROC |
| -5430 | Consistency  | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR                      Patient has 1+ unhealed PU/injury at stage 2+<br>M1311_NSTG_DRSG_D1                      Num unstage pressure ulcer non-remov dress  |
| -5450 | Consistency  | Fatal    | <p>***THIS EDIT WAS DELETED IN V2.30.0***</p> <b>Items:</b> M1306_UNHLD_STG2_PRSR_ULCR                      Patient has 1+ unhealed PU/injury at stage 2+<br>M1311_NSTG_DEEP_TSUE_F1                      Unstageable: suspect deep tissue injury  |
| -5460 | Consistency  | Fatal    | <p>The value for M0090_INFO_COMPLETED_DT must be within the allowable date range specified by the value for SPEC_VRSN_CD. The list of SPEC_VRSN_CD values and their corresponding date ranges are provided in the Overview document for the OASIS Data Specifications.</p> <b>Items:</b> SPEC_VRSN_CD                      Specifications version code<br>M0090_INFO_COMPLETED_DT                      Date assessment completed                       |
| -5470 | Consistency  | Fatal    | <p>If M2001_DRUG_RGMN_RVW=[-], then M2003_MDCTN_FLWP must equal [-].</p> <b>Items:</b> M2001_DRUG_RGMN_RVW                      Drug regimen review<br>M2003_MDCTN_FLWP                      Medication follow-up  |

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| <b>ID</b>    | <b>Type</b>         | <b>Severity</b> | <b>Text/Items</b>  |
|--------------|---------------------|-----------------|--|
| <b>-5480</b> | <b>Format</b>       | <b>Fatal</b>    | <p>Incorrect Medicare Number or Medicare Beneficiary Identifier (MBI): This item must conform to one of two possible formats, as defined below:</p> <p>1) MBI format: The MBI shall be eleven characters in length. The first character must be numeric, excluding zero (0). The second, fifth, eighth and ninth characters must be alphabetic, excluding the following letters: S, L, O, I, B, and Z. The fourth, seventh, tenth and eleventh characters must be numeric. The third and sixth characters must be alphabetic (excluding S, L, O, I, B, and Z) or numeric.</p> <p>2) Medicare Number format: If the first character is numeric [0 through 9] (SSN), then the first 9 characters must be digits [0 through 9]. If the first character is alphabetic (RR insurance number), then there must be 1, 2, or 3 alphabetic characters followed by 6 or 9 numbers.</p> <p><b>Items:</b> M0063_MEDICARE_NUM Medicare number, including suffix</p> |
| <b>-5490</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>If M2001_DRUG_RGMN_RVW=[0], then M2010_HIGH_RISK_DRUG_EDCTN must not equal [^].</p> <p><b>Items:</b> M2001_DRUG_RGMN_RVW Drug regimen review<br/> M2010_HIGH_RISK_DRUG_EDCTN Patient/caregiver high risk drug education</p>   |
| <b>-5500</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>GG0110 Consistency:</p> <p>a) If GG0110Z=[1], then all items from GG0110A through GG0110E must be equal to [0].</p> <p>b) If GG0110Z=[0], then at least one of the items GG0110A through GG0110E must be equal to [1].</p> <p>c) If GG0110Z=[-], then at least one item from GG0110A through GG0110E must equal [-], and all remaining items must equal [0,-].</p> <p><b>Items:</b> GG0110A Prior Device - Manual wheelchair<br/> GG0110B Prior Device - Motorized wheelchair and/or scooter<br/> GG0110C Prior Device - Mechanical lift<br/> GG0110D Prior Device - Walker<br/> GG0110E Prior Device - Orthotics/Prosthetics<br/> GG0110Z Prior Device - None of the above</p>   |
| <b>-5510</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>Self-Care and Mobility Discharge Goals:</p> <p>At least one of the Discharge Goal items (GG0130A2, GG0130B2, GG0130C2, GG0130E2, GG0130F2, GG0130G2, GG0130H2, GG0170A2, GG0170B2, GG0170C_MOBILITY_DSCHG_GOAL, GG0170D2, GG0170E2, GG0170F2, GG0170G2, GG0170I2, GG0170J2, GG0170K2, GG0170L2, GG0170M2, GG0170N2, GG0170O2, GG0170P2, GG0170R2, GG0170S2) should be equal to [01,02,03,04,05,06,07,09,10,88].</p> <p><b>Items:</b> GG0130A2 Eating (Dschg Goal)<br/> GG0130B2 Oral Hygiene (DschrG Goal)<br/> GG0130C2 Toileting hygiene (DschrG Goal)<br/> GG0130E2 Shower/bathe self (DschrG Goal)</p>  |

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|-------|--------------|----------|--|
|       |              |          | <b>Items:</b> GG0130F2 Upper body dressing (DschrG Goal)<br>GG0130G2 Lower body dressing (DschrG Goal)<br>GG0130H2 Put on/take off footwear (DschrG Goal)<br>GG0170A2 Roll left and right (DschrG Goal)<br>GG0170B2 Sit to lying (DschrG Goal)<br>GG0170C_MOBILITY_DSCHG_GOAL Lying to sitting on bed side (DschrG Goal)<br>GG0170D2 Sit to stand (DschrG Goal)<br>GG0170E2 Chair/bed-to-chair transfer (DschrG Goal)<br>GG0170F2 Toilet transfer (DschrG Goal)<br>GG0170G2 Car transfer (DschrG Goal)<br>GG0170I2 Walk 10 feet (DschrG Goal)<br>GG0170J2 Walk 50 feet with two turns (DschrG Goal)<br>GG0170K2 Walk 150 feet (DschrG Goal)<br>GG0170L2 Walking 10 feet uneven surf (DschrG Goal)<br>GG0170M2 1 step (curb) (DschrG Goal)<br>GG0170N2 4 steps (DschrG Goal)<br>GG0170O2 12 steps (DschrG Goal)<br>GG0170P2 Picking up object (DschrG Goal)<br>GG0170R2 Wheel 50 feet with two turns (DschrG Goal)<br>GG0170S2 Wheel 150 feet (DschrG Goal) |
| -5520 | Skip pattern | Fatal    | <p>(a) If GG0170I1=[07,09,10,88,^], then GG0170J1, GG0170K1, and GG0170L1 must equal [^].<br/> (b) If GG0170I1=[06,05,04,03,02,01], then GG0170J1, GG0170K1, and GG0170L1 must not equal [^].<br/> (c) If GG0170I1=[-], then GG0170J1, GG0170K1, and GG0170L1 must equal [-].</p> <b>Items:</b> GG0170I1 Walk 10 feet (SOC/ROC Perf)<br>GG0170J1 Walk 50 feet with two turns (SOC/ROC Perf)<br>GG0170K1 Walk 150 feet (SOC/ROC Perf)<br>GG0170L1 Walking 10 feet uneven surf (SOC/ROC Perf)  |
| -5530 | Skip pattern | Fatal    | <p>(a) If GG0170I3=[07,09,10,88,^], then GG0170J3, GG0170K3, and GG0170L3 must equal [^].<br/> (b) If GG0170I3=[06,05,04,03,02,01], then GG0170J3, GG0170K3, and GG0170L3 must not equal [^].<br/> (c) If GG0170I3=[-], then GG0170J3, GG0170K3, and GG0170L3 must equal [-].</p> <b>Items:</b> GG0170I3 Walk 10 feet (DschrG Perf)<br>GG0170J3 Walk 50 feet with two turns (DschrG Perf)<br>GG0170K3 Walk 150 feet (DschrG Perf)<br>GG0170L3 Walking 10 feet uneven surf (DschrG Perf)  |





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| <b>ID</b>    | <b>Type</b>         | <b>Severity</b> | <b>Text/Items</b>  |
|--------------|---------------------|-----------------|--|
| <b>-5630</b> | <b>Skip pattern</b> | <b>Fatal</b>    | <p>a) If J1800=[0], then all active items from J1900A through J1900C must equal [^].<br/> b) If J1800=[1], then all active items from J1900A through J1900C must not equal [^] and at least one of these items must equal [-,1,2].<br/> c) If J1800=[-], then all active items from J1900A through J1900C must equal [-].</p> <p><b>Items:</b> J1800 Falls since SOC/ROC: any falls<br/> J1900A Num falls since SOC/ROC: no injury<br/> J1900B Num falls since SOC/ROC: injury (except major)<br/> J1900C Num falls since SOC/ROC: major injury</p>  |
| <b>-5660</b> | <b>Consistency</b>  | <b>Fatal</b>    | <p>If M0100_ASSMT_REASON=[01,03,04,05], then none of the following items can be equal to [-]:<br/> M1311_NBR_PRSULC_STG2_A1, M1311_NBR_PRSULC_STG3_B1, M1311_NBR_PRSULC_STG4_C1,<br/> M1311_NSTG_DRSG_D1, M1311_NSTG_CVRG_E1, and M1311_NSTG_DEEP_TSUE_F1.</p> <p><b>Items:</b> M0100_ASSMT_REASON Reason for assessment<br/> M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers<br/> M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers<br/> M1311_NSTG_DRSG_D1 Num unstage pressure ulcer non-remov dress<br/> M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar<br/> M1311_NSTG_DEEP_TSUE_F1 Unstageable: suspect deep tissue injury</p> |
| <b>-9010</b> | <b>Information</b>  | <b>None</b>     | <p>Vendor's version number for the software that was used to create the OASIS data submission file.</p> <p><b>Items:</b> SFW_PROD_VRSN_CD Software product version code</p>  |
| <b>-9020</b> | <b>Information</b>  | <b>None</b>     | <p>Valid federal tax ID (EIN) for the company that developed the software used to create the OASIS data submission file.</p> <p><b>Items:</b> SFW_ID Software vendor federal employer tax ID</p>   |
| <b>-9030</b> | <b>Information</b>  | <b>None</b>     | <p>Name of the software that was used to create the OASIS data submission file.</p> <p><b>Items:</b> SFW_PROD_NAME Software product name</p>   |
| <b>-9040</b> | <b>Information</b>  | <b>None</b>     | <p>Email address of the vendor who created the software that was used to produce the OASIS submission file.</p> <p><b>Items:</b> SFW_EMAIL_ADR Software vendor email address</p>   |
| <b>-9050</b> | <b>Information</b>  | <b>None</b>     | <p>Any letters that are contained in this item may be submitted as lower case or upper case, but will be converted and stored as upper case by the ASAP system. System reports will therefore display upper case values.</p> <p><b>Items:</b> SFW_NAME Software vendor company name</p>  |



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|-------|-------------|----------|---|
|       |             |          | <p>Submission of such a resumption of care assessment fulfills the requirement for the follow-up assessment because it includes all of the data items contained in the normal follow-up assessment.</p> <p><b>Items:</b> M0030_START_CARE_DT                      Start of care date<br/> M0032_ROC_DT    Resumption of care date<br/> M0090_INFO_COMPLETED_DT                      Date assessment completed<br/> M0100_ASSMT_REASON                              Reason for assessment</p>  |
| -9090 | Information | None     | <p>This is an optional item that can be used by agency for unique identification of record and tracking of records submitted to the ASAP system.</p> <p><b>Items:</b> ACY_DOC_CD                                      Document ID code (agency use)</p>   |
| -9100 | Information | None     | <p>If a non-blank value for National Provider ID (NPI) in NATL_PRVDR_ID is submitted, it should represent the NPI of the parent agency, not of any branches if they have separate NPIs. The NPI that is submitted should be the one that is used on the agency's HIPAA billing transactions with CMS.</p> <p><b>Items:</b> NATL_PRVDR_ID                              Agency National Provider ID (NPI)</p>   |
| -9110 | Information | None     | <p>If state law prohibits transmission of certain ICD codes (e.g., HIV or STD diagnoses), these codes will be removed by the ASAP system if found on records submitted by HHAs within that state. If any item within an ICD list contains such a code on a submitted record, it will be removed from the list. If any of these items is removed, but a valid code remains in a subsequent item on the list, the subsequent codes will be "moved up" so that no missing codes remain. Therefore, if a non-blank value is required in an ICD code list and all of the submitted items in that list contain blank and/or prohibited codes, a fatal error will result and the record will be rejected. As long as at least one item in such a list contains a non-blank, correctly-formatted, allowable code, a fatal error will not occur.</p> <p><b>Items:</b> M1021_PRIMARY_DIAG_ICD                      Primary diagnosis ICD code<br/> M1023_OTH_DIAG1_ICD                              Other diagnosis 1: ICD code<br/> M1023_OTH_DIAG2_ICD                              Other diagnosis 2: ICD code<br/> M1023_OTH_DIAG3_ICD                              Other diagnosis 3: ICD code<br/> M1023_OTH_DIAG4_ICD                              Other diagnosis 4: ICD code<br/> M1023_OTH_DIAG5_ICD                              Other diagnosis 5: ICD code</p> |
| -9130 | Information | None     | <p>If the agency is located in AS (American Samoa), GU (Guam), or MP (Saipan -- Northern Mariana Islands), then STATE_CD must equal [HI].</p> <p><b>Items:</b> STATE_CD    Agency's state postal code</p>   |
| -9140 | Information | None     | <p>If the assessment was performed by a branch, then M0016_BRANCH_ID must contain a standard branch ID. It must contain numbers or uppercase letters in bytes 1 and 2, Q in byte 3, numbers or uppercase letters in bytes 4 through 7, and numbers in bytes 8 through 10.</p>   |



