

Uniform Data Submission Specifications for the OASIS-B1 (01/2008 Update)
Abbreviated Body Record Layout For Submission From the HHA To The State (Version 1.60)

Form Location	Description	Len	Start	End	Picture	Range if Active	Type
REC_ID	Record ID	2	1	2	XX	B1	CODE
REC_TYPE	Record Type Code	2	3	4	XX	sp(2)	CODE
LOCK_DATE	Assessment Lock Date	8	5	12	X(8)	sp(8)	FILLER
CORRECTION_NUM	Correction Number for Record	2	13	14	XX	00 thru 99	COUNT
ACY_DOC_CD	Document ID Code (Agency Use)	8	15	22	X(8)	Text, sp(8)	TEXT
VERSION_CD1	Version Completed Code	12	23	34	X(12)	B1-1098, B1-0800, B1-1202, B1-0108	CODE
VERSION_CD2	Layout Submitted Version Code	5	35	39	X(5)	01.60, 01.50, 01.40, 01.30, 01.20, 01.10, or 1.04	CODE
SFTW_ID	Software Vendor or Agent Tax ID	9	40	48	X(9)	Numeric, sp(9)	CODE
SFT_VER	Software Version	5	49	53	X(5)	Text, sp(5)	TEXT
HHA_AGENCY_ID	Unique HHA Agency ID Code	16	54	69	X(16)	Valid code	CODE
PAT_ID	Unique Patient ID Code	14	70	83	X(14)	Valid code, sp(14)	CODE
ST_CODE	State ID Code	2	84	85	XX	sp(2)	CODE
ST_ERR_CNT	State Error Count (Number of Fields)	4	86	89	X(4)	sp(4)	COUNT
ST_COR	State Correction/Original Sequence No.	1	90	90	X	sp(1)	CODE
ST_PMT_COR	State Payment Correction Indicator	1	91	91	X	sp(1)	CODE
ST_KEY_COR	State Key Correction Indicator	1	92	92	X	sp(1)	CODE
ST_DELETE	State Deleted Record Flag	1	93	93	X	sp(1)	CODE
MC_COR	Medicare Correction/Original Sequence No.	1	94	94	X	sp(1)	CODE
MC_PMT_COR	Medicare Payment Correction Indicator	1	95	95	X	sp(1)	CODE
MC_KEY_COR	Medicare Key Correction Indicator	1	96	96	X	sp(1)	CODE

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MASK_VERSION_CD	Masking algorithm version code	20	97	116	X(20)	FIPS SHA-1 V1.00, sp(20)	CODE
CNT_FILLER	Control Section Filler (Future Use)	7	117	123	X(7)	sp(7)	FILLER
M0010_MEDICARE_ID	Agency Medicare ID	6	124	129	X(6)	Valid code, sp(6)	CODE
M0012_MEDICAID_ID	Agency Medicaid ID	15	130	144	X(15)	Valid code, sp(15)	CODE
M0014_BRANCH_STATE	Branch State (Optional)	2	145	146	X(2)	Valid state, sp(2).	CODE
M0016_BRANCH_ID	Branch ID (Optional)	10	147	156	X(10)	Alphanumeric code. Sp(10) allowed until 12/31/2003 -- see below.	TEXT
M0020_PAT_ID	Patient ID Number	20	157	176	X(20)	Valid patient ID Code, masked valid patient ID code	CODE
M0030_START_CARE_DT	Start of Care Date	8	177	184	YYYYMMDD	Valid date	DATE
M0032_ROC_DT	Resumption of Care Date	8	185	192	YYYYMMDD	Valid date,sp(8)	DATE
M0032_ROC_DT_NA	No Resumption of Care Date	1	193	193	9	0,1	CODE
M0040_PAT_FNAME	Patient's First Name	12	194	205	X(12)	Text, sp(12), masked text	TEXT
M0040_PAT_MI	Patient's Middle Initial	1	206	206	X	Text,sp(1)	TEXT
M0040_PAT_LNAME	Patient's Last Name	18	207	224	X(18)	Text, masked text	TEXT
M0040_PAT_SUFFIX	Patient's Suffix	3	225	227	X(3)	Text,sp(3)	TEXT
M0050_PAT_ST	Patient State of Residence	2	228	229	XX	Valid code	CODE
M0060_PAT_ZIP	Patient Zip Code	11	230	240	X(11)	Text	CODE
M0063_MEDICARE_NUM	Medicare Number, Including Suffix	12	241	252	X(12)	Valid code, masked valid code, sp(12)	CODE
M0063_MEDICARE_NA	No Medicare Number	1	253	253	9	0,1	CODE
M0064_SSN	Patient's Social Security Number	9	254	262	X(9)	Valid code, masked valid code, sp(9)	CODE

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M0064_SSN_UK	No Social Security Number	1	263	263	9	0,1	CODE
M0065_MEDICAID_NUM	Medicaid Number	14	264	277	X(14)	Valid code, masked valid code, sp(14)	CODE
M0065_MEDICAID_NA	No Medicaid Number	1	278	278	9	0,1	CODE
M0066_PAT_BIRTH_DT	Date of Birth	8	279	286	YYYYMMDD	Valid (or partial) date, dashes(8)	DATE
ITEM_FILLER1	Item Filler	1	287	287	X	sp(1)	FILLER
M0069_PAT_GENDER	Gender	1	288	288	9	1, 2	CODE
M0072_PHYSICIAN_ID	Primary Referring Physician ID	10	289	298	X(10)	Valid code,sp(10)	CODE
M0072_PHYSICIAN_UK	Primary Referring Physician ID: Unknown	1	299	299	9	0,1	CODE
M0080_ASSESSOR_DISCIPLINE	Discipline of Person Completing Assessment	2	300	301	99	01 thru 04	CODE
M0090_INFO_COMPLETED_DT	Date Assessment Completed	8	302	309	YYYYMMDD	Valid date	DATE
M0100_ASSMT_REASON	Reason for Assessment	2	310	311	99	01, 03, 04, 05, 06, 07, 08, 09	CODE
M0140_ETHNIC_AI_AN	Race/Ethnicity: American Indian or Alaska Native	1	312	312	X	0, 1	CODE
M0140_ETHNIC_ASIAN	Race/Ethnicity: Asian	1	313	313	X	0, 1	CODE
M0140_ETHNIC_BLACK	Race/Ethnicity: Black or African-American	1	314	314	X	0, 1	CODE
M0140_ETHNIC_HISP	Race/Ethnicity: Hispanic or Latino	1	315	315	X	0, 1	CODE
M0140_ETHNIC_NH_PI	Race/Ethnicity: Native Hawaiian or Pacific Islander	1	316	316	X	0, 1	CODE
M0140_ETHNIC_WHITE	Race/Ethnicity: White	1	317	317	X	0, 1	CODE
M0140_ETHNIC_UK	Race/Ethnicity: Unknown	1	318	318	X	0, 1	CODE
M0150_CPAY_NONE	Current Payment Sources for Home Care: None; no charge for current services	1	319	319	X	0, 1	CODE

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M0150_CPAY_MCARE_FFS	Current Payment Sources for Home Care: Medicare Traditional Fee-for-Service	1	320	320	X	0, 1	CODE
M0150_CPAY_MCARE_HMO	Current Payment Sources for Home Care: Medicare HMO/Managed Care	1	321	321	X	0, 1	CODE
M0150_CPAY_MCAID_FFS	Current Payment Sources for Home Care: Medicaid Traditional Fee-for-Service	1	322	322	X	0, 1	CODE
M0150_CPAY_MCAID_HMO	Current Payment Sources for Home Care: Medicaid HMO/Managed Care	1	323	323	X	0, 1	CODE
M0150_CPAY_WRKCOMP	Current Payment Sources for Home Care: Worker's Compensation	1	324	324	X	0, 1	CODE
M0150_CPAY_TITLEPGMS	Current Payment Sources for Home Care: Title Programs	1	325	325	X	0, 1	CODE
M0150_CPAY_OTH_GOV'T	Current Payment Sources for Home Care: Other Government	1	326	326	X	0, 1	CODE
M0150_CPAY_PRIV_INS	Current Payment Sources for Home Care: Private Insurance	1	327	327	X	0, 1	CODE
M0150_CPAY_PRIV_HMO	Current Payment Sources for Home Care: Private HMO/Managed Care	1	328	328	X	0, 1	CODE
M0150_CPAY_SELFPAID	Current Payment Sources for Home Care: Self-Paid	1	329	329	X	0, 1	CODE
M0150_CPAY_OTHER	Current Payment Sources for Home Care: Other	1	330	330	X	0, 1	CODE
M0150_CPAY_UNKNOWN	Current Payment Sources for Home Care: Unknown	1	331	331	X	0, 1	CODE
ITEM_FILLER6	Item Filler	6	332	337	X(6)	sp(6)	FILLER
ITEM_FILLER2	Item Filler	5	338	342	X(5)	sp(5)	FILLER
M0180_INP_DISCHARGE_DT	Most Recent Inpatient Discharge Date	8	343	350	YYYYMMDD	Valid date, sp(8)	DATE
M0180_INP_DSCHG_UNKNOWN	Inpatient Discharge Date Unknown	1	351	351	X	0, 1, sp(1)	CODE
M0190_14_DAY_INP1_ICD	Inpatient Stay Within Last 14 Days: ICD Code 1	7	352	358	X999.XX	Valid code, sp(7)	CODE

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M0190_14_DAY_INP2_ICD	Inpatient Stay Within Last 14 Days: ICD Code 2	7	359	365	X999.XX	Valid code, sp(7)	CODE
M0200_REG_CHG_14_DAYS	Medical or Treatment Regimen: Change in Past 14 Days	1	366	366	X	0, 1	CODE
M0210_CHGREG_ICD1	Regimen Change in Past 14 Days: ICD Code 1	7	367	373	X999.XX	Valid code, sp(7)	CODE
M0210_CHGREG_ICD2	Regimen Change in Past 14 Days: ICD Code 2	7	374	380	X999.XX	Valid code, sp(7)	CODE
M0210_CHGREG_ICD3	Regimen Change in Past 14 Days: ICD Code 3	7	381	387	X999.XX	Valid code, sp(7)	CODE
M0210_CHGREG_ICD4	Regimen Change in Past 14 Days: ICD Code 4	7	388	394	X999.XX	Valid code, sp(7)	CODE
M0220_PRIOR_UR_INCON	Prior Condition: Urinary Incontinence	1	395	395	X	0, 1, sp(1)	CODE
M0220_PRIOR_CATH	Prior Condition: Indwelling/Suprapubic Catheter	1	396	396	X	0, 1, sp(1)	CODE
M0220_PRIOR_INTRACT_PAIN	Prior Condition: Intractable Pain	1	397	397	X	0, 1, sp(1)	CODE
M0220_PRIOR_IMPR_DECSN	Prior Condition: Impaired Decision-making	1	398	398	X	0, 1, sp(1)	CODE
M0220_PRIOR_DISRUPTIVE	Prior Condition: Disruptive or Socially Inappropriate Behavior	1	399	399	X	0, 1, sp(1)	CODE
M0220_PRIOR_MEM_LOSS	Prior Condition: Memory Loss, Supervision Required	1	400	400	X	0, 1, sp(1)	CODE
M0220_PRIOR_NONE	Prior Condition: None of the Above	1	401	401	X	0, 1, sp(1)	CODE
M0220_PRIOR_NOCHG_14D	Prior Condition: No Inpatient Discharge, No Change in Regimen in Past 14 Days	1	402	402	X	0, 1	CODE
M0220_PRIOR_UNKNOWN	Prior Condition: Unknown	1	403	403	X	0, 1	CODE
M0230_PRIMARY_DIAG_ICD	Primary Diagnosis ICD Code	7	404	410	XX99.XX	Valid code	CODE
M0230_PRIMARY_DIAG_SEVERITY	Primary Diagnosis Severity Rating	2	411	412	XX	00 through 04	CODE
M0240_OTH_DIAG1_ICD	Other Diagnosis 1: ICD Code	7	413	419	XX99.XX	Valid code, sp(7)	CODE
M0240_OTH_DIAG1_SEVERITY	Other Diagnosis 1: Severity Rating	2	420	421	XX	00 through 04, sp(2)	CODE

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M0240_OTH_DIAG2_ICD	Other Diagnosis 2: ICD Code	7	422	428	XX99.XX	Valid code, sp(7)	CODE
M0240_OTH_DIAG2_SEVERITY	Other Diagnosis 2: Severity Rating	2	429	430	XX	00 through 04, sp(2)	CODE
M0240_OTH_DIAG3_ICD	Other Diagnosis 3: ICD Code	7	431	437	XX99.XX	Valid code, sp(7)	CODE
M0240_OTH_DIAG3_SEVERITY	Other Diagnosis 3: Severity Rating	2	438	439	XX	00 through 04, sp(2)	CODE
M0240_OTH_DIAG4_ICD	Other Diagnosis 4: ICD Code	7	440	446	XX99.XX	Valid code, sp(7)	CODE
M0240_OTH_DIAG4_SEVERITY	Other Diagnosis 4: Severity Rating	2	447	448	XX	00 through 04, sp(2)	CODE
M0240_OTH_DIAG5_ICD	Other Diagnosis 5: ICD Code	7	449	455	XX99.XX	Valid code, sp(7)	CODE
M0240_OTH_DIAG5_SEVERITY	Other Diagnosis 5: Severity Rating	2	456	457	XX	00 through 04, sp(2)	CODE
M0250_THH_IV_INFUSION	Therapies Received at Home: Intravenous, Infusion	1	458	458	X	0, 1	CODE
M0250_THH_PAR_NUTRITION	Therapies Received at Home: Parenteral Nutrition	1	459	459	X	0, 1	CODE
M0250_THH_ENT_NUTRITION	Therapies Received at Home: Enteral Nutrition	1	460	460	X	0, 1	CODE
M0250_THH_NONE_ABOVE	Therapies Received at Home: None of the Above	1	461	461	X	0, 1	CODE
M0260_OVERALL_PROGNOSIS	Overall Prognosis for Recovery From This Episode	2	462	463	XX	00 through 01, UK	CODE
M0270_REHAB_PROGNOSIS	Rehabilitative Prognosis	2	464	465	XX	00 through 01, UK	CODE
M0280_LIFE_EXPECTANCY	Life Expectancy	2	466	467	XX	00 through 01	CODE
M0290_RSK_SMOKING	High Risk Factor: Smoking	1	468	468	X	0, 1	CODE
M0290_RSK_OBESITY	High Risk Factor: Obesity	1	469	469	X	0, 1	CODE
M0290_RSK_ALCOHOLISM	High Risk Factor: Alcoholism	1	470	470	X	0, 1	CODE
M0290_RSK_DRUGS	High Risk Factor: Drugs	1	471	471	X	0, 1	CODE
M0290_RSK_NONE	High Risk Factor: None of the Above	1	472	472	X	0, 1	CODE

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M0290_RSK_UNKNOWN	High Risk Factor: Unknown	1	473	473	X	0, 1	CODE
M0300_CURR_RESIDENCE	Current Residence	2	474	475	XX	01 through 05	CODE
ITEM_FILLER7	Item Filler	5	476	480	X(5)	sp(5)	FILLER
ITEM_FILLER8	Item Filler	12	481	492	X(12)	sp(12)	FILLER
ITEM_FILLER9	Item Filler	13	493	505	X(13)	sp(13)	FILLER
M0340_LIV_ALONE	Lives: Alone	1	506	506	X	0, 1	CODE
M0340_LIV_SPOUSE	Lives: With Spouse or Significant Other	1	507	507	X	0, 1	CODE
M0340_LIV_OTH_FAMILY	Lives: With Other Family	1	508	508	X	0, 1	CODE
M0340_LIV_FRIEND	Lives: With Friend	1	509	509	X	0, 1	CODE
M0340_LIV_PD_HELP	Lives: With Paid Help	1	510	510	X	0, 1	CODE
M0340_LIV_OTHER	Lives: With Other Than Above	1	511	511	X	0, 1	CODE
M0350_AP_REL_FRIEND	Assisting Person: Relative, Friend Outside Home	1	512	512	X	0, 1	CODE
M0350_AP_HM_RESIDENT	Assisting Person: Resides in Home	1	513	513	X	0, 1	CODE
M0350_AP_PD_HELP	Assisting Person: Paid Help	1	514	514	X	0, 1	CODE
M0350_AP_NONE	Assisting Person: None	1	515	515	X	0, 1	CODE
M0350_AP_UNKNOWN	Assisting Person: Unknown	1	516	516	X	0, 1	CODE
M0360_PRIMARY_CAREGIVER	Primary Caregiver	2	517	518	XX	00 through 05, UK, sp(2)	CODE
M0370_FREQ_PRM_ASSTANCE	Frequency of Primary Caregiver Assistance	2	519	520	XX	01 through 06, UK, sp(2)	CODE
M0380_CA_ADL	Type of Primary Caregiver Assistance: ADL	1	521	521	X	0, 1, sp(1)	CODE
M0380_CA_IADL	Type of Primary Caregiver Assistance: IADL	1	522	522	X	0, 1, sp(1)	CODE
M0380_CA_ENVIRONMENT	Type of Primary Caregiver Assistance: Environmental	1	523	523	X	0, 1, sp(1)	CODE

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M0380_CA_PSYCHSOC	Type of Primary Caregiver Assistance: Psychosocial	1	524	524	X	0, 1, sp(1)	CODE
M0380_CA_MEDICAL	Type of Primary Caregiver Assistance: Medical Care	1	525	525	X	0, 1, sp(1)	CODE
M0380_CA_FIN_LEGAL	Type of Primary Caregiver Assistance: Financial, Legal	1	526	526	X	0, 1, sp(1)	CODE
M0380_CA_HLTH_CARE	Type of Primary Caregiver Assistance: Health Care	1	527	527	X	0, 1, sp(1)	CODE
M0380_CA_UNKNOWN	Type of Primary Caregiver Assistance: Unknown	1	528	528	X	0, 1, sp(1)	CODE
M0390_VISION	Sensory Status: Vision	2	529	530	XX	00 through 02	CODE
M0400_HEARING	Sensory Status: Hearing	2	531	532	XX	00 through 04	CODE
M0410_SPEECH	Sensory Status: Speech	2	533	534	XX	00 through 05	CODE
M0420_FREQ_PAIN	Sensory Status: Frequency of Pain	2	535	536	XX	00 through 03	CODE
M0430_INTRACT_PAIN	Experiencing Intractable Pain	1	537	537	X	0, 1	CODE
M0440_LESION_OPEN_WND	Has Skin Lesion or Open Wound	1	538	538	X	0, 1	CODE
M0445_PRESS_ULCER	Has Pressure Ulcer	1	539	539	X	0, 1, sp(1)	CODE
M0450_NBR_PRSULC_STG1	No. Pressure Ulcers - Stage 1	2	540	541	XX	00 thru 04, sp(2)	CODE
M0450_NBR_PRSULC_STG2	No. Pressure Ulcers - Stage 2	2	542	543	XX	00 thru 04, sp(2)	CODE
M0450_NBR_PRSULC_STG3	No. Pressure Ulcers - Stage 3	2	544	545	XX	00 thru 04, sp(2)	CODE
M0450_NBR_PRSULC_STG4	No. Pressure Ulcers - Stage 4	2	546	547	XX	00 thru 04, sp(2)	CODE
M0450_UNOBS_PRSULC	Has Unobserved Pressure Ulcer	1	548	548	X	0, 1, sp(1)	CODE
M0460_STG_PRBLM_ULCER	Stage of Most Problematic Pressure Ulcer	2	549	550	XX	01 through 04, NA, sp(2)	CODE
M0464_STAT_PRBLM_PRSULC	Status of Most Problematic Pressure Ulcer	2	551	552	XX	01 through 03, NA, sp(2)	CODE

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M0468_STASIS_ULCER	Has Stasis Ulcer	1	553	553	X	0, 1, sp(1)	CODE
M0470_NBR_STASULC	No. Stasis Ulcers	2	554	555	XX	00 thru 04, sp(2)	CODE
M0474_UNOBS_STASULC	Has Unobserved Stasis Ulcer	1	556	556	X	0, 1, sp(1)	CODE
M0476_STAT_PRB_STASULC	Status of Most Problematic Stasis Ulcer	2	557	558	XX	01 through 03, NA, sp(2)	CODE
M0482_SURG_WOUND	Has Surgical Wound	1	559	559	X	0, 1, sp(1)	CODE
M0484_NBR_SURGWND	No. Surgical Wounds	2	560	561	XX	00 thru 04, sp(2)	CODE
M0486_UNOBS_SURGWND	Has Unobserved Surgical Wound	1	562	562	X	0, 1, sp(1)	CODE
M0488_STAT_PRB_SURGWND	Status of Most Problematic Surgical Wound	2	563	564	XX	01 through 03, NA, sp(2)	CODE
M0490_WHEN_DYSPNEIC	When Dyspneic	2	565	566	XX	00 through 04	CODE
M0500_RESPTX_OXYGEN	Respiratory Treatments: Oxygen	1	567	567	X	0, 1	CODE
M0500_RESPTX_VENTILATOR	Respiratory Treatments: Ventilator	1	568	568	X	0, 1	CODE
M0500_RESPTX_AIRPRESS	Respiratory Treatments: Airway Pressure	1	569	569	X	0, 1	CODE
M0500_RESPTX_NONE	Respiratory Treatments: None of the Above	1	570	570	X	0, 1	CODE
M0510_UTI	Treated for Urinary Tract Infection in Past 14 Days	2	571	572	XX	00, 01, NA, UK	CODE
M0520_UR_INCONT	Urinary Incontinence or Urinary Catheter Present	2	573	574	XX	00 through 02	CODE
M0530_UR_INCONT_OCCURS	When Urinary Incontinence Occurs	2	575	576	XX	00 through 02, sp(2)	CODE
M0540_BWL_INCONT	Bowel Incontinence Frequency	2	577	578	XX	00 through 05, NA, UK	CODE
M0550_OSTOMY	Ostomy for Bowel Elimination	2	579	580	XX	00 through 02	CODE
M0560_COG_FUNCTION	Cognitive Functioning	2	581	582	XX	00 through 04	CODE
M0570_WHEN_CONFUSED	When Confused (Reported or Observed)	2	583	584	XX	00 through 04, NA	CODE
M0580_WHEN_ANXIOUS	When Anxious (Reported or Observed)	2	585	586	XX	00 through 03, NA	CODE

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M0590_DP_MOOD	Depressive: Mood	1	587	587	X	0, 1	CODE
M0590_DP_SENSE_FAILURE	Depressive: Sense of Failure	1	588	588	X	0, 1	CODE
M0590_DP_HOPELESSNESS	Depressive: Hopelessness	1	589	589	X	0, 1	CODE
M0590_DP_DEATH	Depressive: Recurrent Thoughts of Death	1	590	590	X	0, 1	CODE
M0590_DP_SUICIDE	Depressive: Thoughts of Suicide	1	591	591	X	0, 1	CODE
M0590_DP_NONE	Depressive: None of the Above Feelings Observed or Reported	1	592	592	X	0, 1	CODE
ITEM_FILLER10	Item Filler	7	593	599	X(7)	sp(7)	FILLER
M0610_BD_MEM_DEFICIT	Behavior Demonstrated: Memory Deficit	1	600	600	X	0, 1	CODE
M0610_BD_IMP_DECISN	Behavior Demonstrated: Impaired Decision-making	1	601	601	X	0, 1	CODE
M0610_BD_VERBAL	Behavior Demonstrated: Verbal Disruption	1	602	602	X	0, 1	CODE
M0610_BD_PHYSICAL	Behavior Demonstrated: Physical Aggression	1	603	603	X	0, 1	CODE
M0610_BD_SOC_INAPPRO	Behavior Demonstrated: Socially Inappropriate	1	604	604	X	0, 1	CODE
M0610_BD_DELUSIONS	Behavior Demonstrated: Delusions	1	605	605	X	0, 1	CODE
M0610_BD_NONE	Behavior Demonstrated: None of the Above	1	606	606	X	0, 1	CODE
M0620_BEH_PROB_FREQ	Frequency of Behavior Problems	2	607	608	XX	00 through 05	CODE
M0630_REC_PSYCH_NURS	Receives Psychiatric Nursing	1	609	609	X	0, 1	CODE
M0640_PR_GROOMING	Prior: Grooming	2	610	611	XX	00 through 03, UK	CODE
M0640_CUR_GROOMING	Current: Grooming	2	612	613	XX	00 through 03	CODE
M0650_PR_DRESS_UPPER	Prior: Dress Upper Body	2	614	615	XX	00 through 03, UK	CODE
M0650_CUR_DRESS_UPPER	Current: Dress Upper Body	2	616	617	XX	00 through 03	CODE

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M0660_PR_DRESS_LOWER	Prior: Dress Lower Body	2	618	619	XX	00 through 03, UK	CODE
M0660_CUR_DRESS_LOWER	Current: Dress Lower Body	2	620	621	XX	00 through 03	CODE
M0670_PR_BATHING	Prior: Bathing	2	622	623	XX	00 through 05, UK	CODE
M0670_CUR_BATHING	Current: Bathing	2	624	625	XX	00 through 05	CODE
M0680_PR_TOILETING	Prior: Toileting	2	626	627	XX	00 through 04, UK	CODE
M0680_CUR_TOILETING	Current: Toileting	2	628	629	XX	00 through 04	CODE
M0690_PR_TRANSFERRING	Prior: Transferring	2	630	631	XX	00 through 05, UK	CODE
M0690_CUR_TRANSFERRING	Current: Transferring	2	632	633	XX	00 through 05	CODE
M0700_PR_AMBULATION	Prior: Ambulation	2	634	635	XX	00 through 05, UK	CODE
M0700_CUR_AMBULATION	Current: Ambulation	2	636	637	XX	00 through 05	CODE
M0710_PR_FEEDING	Prior: Feeding	2	638	639	XX	00 through 05, UK	CODE
M0710_CUR_FEEDING	Current: Feeding	2	640	641	XX	00 through 05	CODE
M0720_PR_PREP_LT_MEALS	Prior: Prepare Light Meals	2	642	643	XX	00 through 02, UK	CODE
M0720_CUR_PREP_LT_MEALS	Current: Prepare Light Meals	2	644	645	XX	00 through 02	CODE
M0730_PR_TRANSPORTATION	Prior: Transportation	2	646	647	XX	00 through 02, UK	CODE
M0730_CUR_TRANSPORTATION	Current: Transportation	2	648	649	XX	00 through 02	CODE
M0740_PR_LAUNDRY	Prior: Laundry	2	650	651	XX	00 through 02, UK	CODE
M0740_CUR_LAUNDRY	Current: Laundry	2	652	653	XX	00 through 02	CODE
M0750_PR_HOUSEKEEPING	Prior: Housekeeping	2	654	655	XX	00 through 04, UK	CODE
M0750_CUR_HOUSEKEEPING	Current: Housekeeping	2	656	657	XX	00 through 04,	CODE
M0760_PR_SHOPPING	Prior: Shopping	2	658	659	XX	00 through 03, UK	CODE

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M0760_CUR_SHOPPING	Current: Shopping	2	660	661	XX	00 through 03	CODE
M0770_PR_PHONE_USE	Prior: Telephone Use	2	662	663	XX	00 through 05, NA, UK	CODE
M0770_CUR_PHONE_USE	Current: Telephone Use	2	664	665	XX	00 through 05, NA	CODE
M0780_PR_ORAL_MEDS	Prior: Management of Oral Medications	2	666	667	XX	00 through 02, NA, UK	CODE
M0780_CUR_ORAL_MEDS	Current: Management of Oral Medications	2	668	669	XX	00 through 02, NA	CODE
M0790_PR_INHAL_MEDS	Prior: Management of Inhalant Medications	2	670	671	XX	00 through 02, NA, UK	CODE
M0790_CUR_INHAL_MEDS	Current: Management of Inhalant Medications	2	672	673	XX	00 through 02, NA	CODE
M0800_PR_INJECT_MEDS	Prior: Management of Injectable Medications	2	674	675	XX	00 through 02, NA, UK	CODE
M0800_CUR_INJECT_MEDS	Current: Management of Injectable Medications	2	676	677	XX	00 through 02, NA	CODE
M0810_PAT_MGMT_EQUIP	Patient Management of Equipment	2	678	679	XX	00 through 04, NA	CODE
M0820_CG_MGMT_EQUIP	Caregiver Management of Equipment	2	680	681	XX	00 through 04, NA, UK, sp(2)	CODE
M0830_EC_NONE	Emergent Care: None	1	682	682	X	0, 1	CODE
M0830_EC_EMER_ROOM	Emergent Care: Emergency Room	1	683	683	X	0, 1	CODE
M0830_EC_MD_OFF	Emergent Care: MD Office	1	684	684	X	0, 1	CODE
M0830_EC_OUTPAT	Emergent Care: Outpatient	1	685	685	X	0, 1	CODE
M0830_EC_UNKNOWN	Emergent Care: Unknown	1	686	686	X	0, 1	CODE
M0840_ECR_MEDICATION	Emergent Care Reason: Medication	1	687	687	X	0, 1, sp(1)	CODE
M0840_ECR_NAUSEA	Emergent Care Reason: Nausea	1	688	688	X	0, 1, sp(1)	CODE
M0840_ECR_INJURY	Emergent Care Reason: Injury	1	689	689	X	0, 1, sp(1)	CODE
M0840_ECR_RESP	Emergent Care Reason: Respiratory	1	690	690	X	0, 1, sp(1)	CODE
M0840_ECR_WOUND	Emergent Care Reason: Wound	1	691	691	X	0, 1, sp(1)	CODE

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M0840_ECR_CARDIAC	Emergent Care Reason: Cardiac	1	692	692	X	0, 1, sp(1)	CODE
M0840_ECR_HYPOGLYC	Emergent Care Reason: Hypoglycemia	1	693	693	X	0, 1, sp(1)	CODE
M0840_ECR_GI_BLEED	Emergent Care Reason: GI Bleeding	1	694	694	X	0, 1, sp(1)	CODE
M0840_ECR_OTHER	Emergent Care Reason: Other	1	695	695	X	0, 1, sp(1)	CODE
M0840_ECR_UNKNOWN	Emergent Care Reason: Unknown	1	696	696	X	0, 1, sp(1)	CODE
M0855_INPAT_FACILITY	Inpatient Facility	2	697	698	XX	01 through 04, NA	CODE
M0870_DSCHG_DISP	Discharge Disposition	2	699	700	XX	01 through 03, UK.	CODE
M0880_AFDC_NO_ASSIST	No Assistance After Discharge	1	701	701	X	0, 1, sp(1)	CODE
M0880_AFDC_FAM_ASSIST	Family Assistance After Discharge	1	702	702	X	0, 1, sp(1)	CODE
M0880_AFDC_OTH_ASSIST	Other Assistance After Discharge	1	703	703	X	0, 1, sp(1)	CODE
M0890_HOSP_RSN	Acute Care Hospitalization Reason	2	704	705	XX	01 through 03, UK, sp(2)	CODE
M0895_HOSP_MED	Hospitalized: Medication	1	706	706	X	0, 1, sp(1)	CODE
M0895_HOSP_INJURY	Hospitalized: Injury	1	707	707	X	0, 1, sp(1)	CODE
M0895_HOSP_RESP	Hospitalized: Respiratory	1	708	708	X	0, 1, sp(1)	CODE
M0895_HOSP_WOUND	Hospitalized: Wound	1	709	709	X	0, 1, sp(1)	CODE
M0895_HOSP_HYPOGLYC	Hospitalized: Hypoglycemia	1	710	710	X	0, 1, sp(1)	CODE
M0895_HOSP_GI_BLEED	Hospitalized: GI Bleeding	1	711	711	X	0, 1, sp(1)	CODE
M0895_HOSP_CF_FLUIDS	Hospitalized: CHF, Fluids	1	712	712	X	0, 1, sp(1)	CODE
M0895_HOSP_STROKE	Hospitalized: Stroke	1	713	713	X	0, 1, sp(1)	CODE
M0895_HOSP_CHEMO	Hospitalized: Chemotherapy	1	714	714	X	0, 1, sp(1)	CODE
M0895_HOSP_SURGERY	Hospitalized: Surgery	1	715	715	X	0, 1, sp(1)	CODE

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M0895_HOSP_UR_TRACT	Hospitalized: Urinary Tract	1	716	716	X	0, 1, sp(1)	CODE
M0895_HOSP_IVCATH_INF	Hospitalized: IV Catheter Infection	1	717	717	X	0, 1, sp(1)	CODE
M0895_HOSP_VEIN_PULM	Hospitalized: Vein, Pulmonary	1	718	718	X	0, 1, sp(1)	CODE
M0895_HOSP_PAIN	Hospitalized: Pain	1	719	719	X	0, 1, sp(1)	CODE
M0895_HOSP_PSYCHOTIC	Hospitalized: Psychotic	1	720	720	X	0, 1, sp(1)	CODE
M0895_HOSP_OTHER	Hospitalized: Other	1	721	721	X	0, 1, sp(1)	CODE
M0900_NH_THERAPY	Admitted to Nursing Home: Therapy	1	722	722	X	0, 1, sp(1)	CODE
M0900_NH_RESPITE	Admitted to Nursing Home: Respite	1	723	723	X	0, 1, sp(1)	CODE
M0900_NH_HOSPICE	Admitted to Nursing Home: Hospice	1	724	724	X	0, 1, sp(1)	CODE
M0900_NH_PERMANENT	Admitted to Nursing Home: Permanent Placement	1	725	725	X	0, 1, sp(1)	CODE
M0900_NH_UNSAFE_HOME	Admitted to Nursing Home: Unsafe at Home	1	726	726	X	0, 1, sp(1)	CODE
M0900_NH_OTHER	Admitted to Nursing Home: Other	1	727	727	X	0, 1, sp(1)	CODE
M0900_NH_UNKNOWN	Admitted to Nursing Home: Unknown	1	728	728	X	0, 1, sp(1)	CODE
M0903_LAST_HOME_VISIT	Date of Last Home Visit	8	729	736	YYYYMMDD	Valid date	DATE
M0906_DC_TRAN_DTH_DT	Discharge, Transfer, Death Date	8	737	744	YYYYMMDD	Valid date	DATE
ITEM_FILLER3	Item Filler	2	745	746	XX	sp(2)	FILLER
ITEM_FILLER11	Item Filler	2	747	748	XX	sp(2)	FILLER
M0175_DC_HOSP_14_DAYS	Past 14 Days: Discharged from Hospital	1	749	749	X	0, 1	CODE
M0175_DC_REHAB_14_DAYS	Past 14 Days: Discharged from Rehab Facility	1	750	750	X	0, 1	CODE
M0175_DC_SNF_14_DAYS	Past 14 Days: Discharged from Skilled Nursing Facility	1	751	751	X	0, 1	CODE

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M0175_DC_NH_14_DAYS	Past 14 Days: Discharged from Other Nursing Home	1	752	752	X	0,1	CODE
M0175_DC_OTHER	Past 14 Days: Discharged from Other	1	753	753	X	0,1	CODE
M0175_NONE_14_DAYS	Past 14 Days: Not Discharged from Inpatient Facility	1	754	754	X	0, 1	CODE
ITEM_FILLER12	Item Filler	14	755	768	X(14)	sp(14)	Filler
NATL_PROV_ID	National Provider ID (NPI)	10	769	778	X(10)	Valid code, sp(10)	TEXT
M0110_EPISODE_TIMING	Episode Timing	2	779	780	XX	01, 02, UK, NA	CODE
M0246_PMT_DIAG_ICD_A3	Case Mix Diagnosis: Primary, Column 3	7	781	787	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_B3	Case Mix Diagnosis: First Secondary, Column 3	7	788	794	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_C3	Case Mix Diagnosis: Second Secondary, Column 3	7	795	801	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_D3	Case Mix Diagnosis: Third Secondary, Column 3	7	802	808	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_E3	Case Mix Diagnosis: Fourth Secondary, Column 3	7	809	815	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_F3	Case Mix Diagnosis: Fifth Secondary, Column 3	7	816	822	X999.XX	Valid code, sp(7)Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_A4	Case Mix Diagnosis: Primary, Column 4	7	823	829	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_B4	Case Mix Diagnosis: First Secondary, Column 4	7	830	836	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_C4	Case Mix Diagnosis: Second Secondary, Column 4	7	837	843	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_D4	Case Mix Diagnosis: Third Secondary, Column 4	7	844	850	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_E4	Case Mix Diagnosis: Fourth Secondary, Column 4	7	851	857	X999.XX	Valid code, sp(7)	CODE
M0246_PMT_DIAG_ICD_F4	Case Mix Diagnosis: Fifth Secondary, Column 4	7	858	864	X999.XX	Valid code, sp(7)	CODE
M0826_THER_NEED_NUM	Therapy Need: Number of Visits	3	865	867	999	sp(3), 000 through 999	COUNT

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Form Location	Description	Len	Start	End	Picture	Range if Active	Type
M0826_THER_NEED_NA	Therapy Need: Not Applicable	1	868	868	9	0, 1	CODE
ITEM_FILLER4	Filler for Additional Data Items	212	869	1080	X(212)	sp(212)	FILLER
HIPPS_CODE	HIPPS Group Code	5	1081	1085	X(5)	Valid code, sp(5)	CODE
ITEM_FILLER5	Item Filler	5	1086	1090	X(5)	sp(5)	FILLER
HIPPS_VERSION	HIPPS Version	5	1091	1095	99.99	Appropriate HIPPS version code	CODE
STATE_DATA	State Defined Data	300	1096	1395	X(300)	sp(300), State defined	TEXT
AGENCY_USE	Agency Use Data	50	1396	1445	X(50), sp(50)		TEXT
DATA_END	End of Data Terminator Code	1	1446	1446	X	%	
CRG_RTN	Carriage Return (ASCII 013)	1	1447	1447	X	ASCII 013	
LN_FD	Line Feed (ASCII 010)	1	1448	1448	X	ASCII 010	