

**Track Changes
from Chapter 5 v1.12R
to Chapter 5 v1.13**

Chapter	Section	Page	Change
5	5.1	5-2	<p>Once communication is established with the QIES ASAP system, the provider can access the CMS MDS Welcome Page Welcome to the CMS QIES Systems for Providers page in the MDS system. This site allows providers to submit MDS assessment data and access various information sources such as Bulletins and Questions and Answers. The <i>Minimum Data Set (MDS) 3.0 Provider User's Guide</i> provides more detailed information about the MDS system. It is available on the Welcome to the CMS QIES Systems for Providers page and on the QTSO MDS 3.0 web site at https://www.qtsso.com/mds30.html.</p> <p>When the transmission file is received by the QIES ASAP system, the system performs a series of validation edits to evaluate whether or not the data submitted meet the required standards. MDS records are edited to verify that clinical responses are within valid ranges and are consistent, dates are reasonable, and records are in the proper order with regard to records that were previously accepted by the QIES ASAP system for the same resident. The provider is notified of the results of this evaluation by error and warning messages on a Final Validation Report. All error and warning messages are detailed and explained in Section 5 of the <i>Minimum Data Set (MDS) 3.0 Provider User's Guide</i>.</p>
5	5.1–5.8	5-2– 5-16	Page length changed.
5	5.3	5-4	<p>Initial Submission Feedback. For each file submitted, the submitter will receive confirmation that the file was received for processing and editing by the QIES ASAP system. This confirmation information includes the file submission identification number (ID) as well as, the date and time the file was received for processing as well as the file name.</p>
5	5.4	5-5	<p>Detailed information on the validation edits and the error and warning messages is available in the MDS 3.0 Data Submission Specifications on the CMS MDS 3.0 web site and in Section 5 of the <i>Minimum Data Set (MDS) 3.0 Provider User's Guide</i> on the Welcome to the CMS QIES Systems for Providers page and on the QTSO MDS 3.0 web site.</p>

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5	5.6	5-8	If an MDS assessment is found to have errors that incorrectly reflect the resident's status, then that assessment must be corrected. The correction process depends upon the type of error. MDS assessments that have not yet been accepted in the QIES ASAP system include records that have been submitted and rejected, production records that were inadvertently submitted as test records , or records that have not been submitted at all. These records can generally be corrected and retransmitted without any special correction procedures, since they were never accepted by the QIES ASAP system. The paper copy should be corrected according to standard procedures detailed below.
5	5.7	5-12	<ul style="list-style-type: none"> An MDS 3.0 Manual Assessment Correction/Deletion Request is required to correct: <ul style="list-style-type: none"> — Unit Certification or Licensure Designation (Item A0410), — State-assigned facility submission ID (FAC_ID), — Production/test code (PRODN_TEST_CD) Test record submitted as a production record.
5	5.8	5-14	3. The record has the wrong state-ed state code or facility ID in the control Items STATE_CD or FAC_ID.
5	5.8	5-16	<p>¹Manual deletion request is required if test record submitted as production record, if record contains incorrect FAC_ID, or if record was submitted with an incorrect Unit Certification or Licensure Designation (A0410), for example sent in as Unit is Medicare and/or Medicaid certified (A0410 = 3) but should have been Unit is neither Medicare nor Medicaid certified but MDS data is required by the State (A0410 = 2).</p> <p>²Record has not been data entered, has not been submitted, or has been submitted and rejected by ASAP.</p> <p>³The event occurred if the record reflects an actual entry or discharge or if an assessment was actually performed for the resident. If a record was created in error (e.g., a Discharge assessment was created for a resident who was not actually discharged), then the event did not occur.</p> <p>⁴OBRA comprehensive assessments with A0310A = 01, 03, 04, 05 and Quarterly assessments with A0310B A = 02, 06.</p>