

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 1A

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R1A	Facility Name	Asmt	Text	50	539-588

Item Values

Value	Value Text
Nonblank Text	Facility Name

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1014	Consistency	Fatal	Required Item Is blank: The value for this item is blank. Update the value in your IRF-PAI encoding software and resubmit the record.
-1024	Consistency	Warning	Facility information updated: Submitted values for the item(s) listed are not the same as the values in the CMS National database. The database has NOT been updated.
-1008	Format	Fatal	Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, Ampersands, and Other Special Characters: This nonblank text string may contain only the following characters: [0] - [9], [A] - [Z], [a] - [z], [-] (dash), [@] (at sign), ['] (single quote), [/] (forward slash), [+] (plus sign), [,] (comma), [.] (period), [_] (underscore), [&] (ampersand), [] (embedded space(s)). Embedded spaces are the space character(s) surrounded by any of the characters listed in the preceding sentence. For example, [LEGAL TEXT] would be allowed.
-5156	Format	Fatal	The length of the text submitted for a free-form text item must not exceed the maximum length specified for that item.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 1B

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R1B	CMS Certification Number (CCN)	Asmt	Text	12	589-600

Item Values

Value	Value Text
Nonblank Text	CMS Certification Number (CCN)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1014	Consistency	Fatal	Required Item Is blank: The value for this item is blank. Update the value in your IRF-PAI encoding software and resubmit the record.
-1015	Consistency	Warning	CCN Mismatch: The CCN submitted (1B) on the assessment does not match the CCN stored in the CMS National database for the facility. Please contact the IQIES help desk.
-1006	Format	Fatal	Formatting of Alphanumeric Text Items: If the value submitted is not equal to one of the values listed in the Item Values, then the value must only contain the following alphanumeric characters: [0] - [9], [A] - [Z], [a] - [z].
-1023	Format	Fatal	Invalid CCN length: The CMS Certification Number (CCN) (1B) must be exactly 6 characters.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 2

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R2	Patient Medicare Number	Asmt	Text	12	601-612

Item Values

Value	Value Text
Nonblank Text	Patient Medicare number
^	No Information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1031	Consistency	Warning	Patient Information Updated: Submitted value(s) for the item(s) listed are not the same as the values in the CMS National database. The database has been updated. Note that the Death Date in the CMS National database will be updated with the value in Item 40 (Discharge Date) when item 44C (Was the patient discharged alive) is equal to No (0).
-1109	Consistency	Fatal	***THIS EDIT WAS DELETED IN V5.02.0***
-1006	Format	Fatal	Formatting of Alphanumeric Text Items: If the value submitted is not equal to one of the values listed in the Item Values, then the value must only contain the following alphanumeric characters: [0] - [9], [A] - [Z], [a] - [z].
-1131	Format	Fatal	Incorrect Medicare Beneficiary Identifier (MBI): This item must conform to the format defined below: 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.

Version Changes

Type	ID	Description
Consistency	-1109	[V5.02.0]-This edit was deleted, since items 20A and 20B were deleted.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 3

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R3	Patient Medicaid Number	Asmt	Text	14	613-626

Item Values

Value	Value Text
Nonblank Text	Patient Medicaid number
+	Enter "+" if Medicaid application is pending
^	No information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1031	Consistency	Warning	Patient Information Updated: Submitted value(s) for the item(s) listed are not the same as the values in the CMS National database. The database has been updated. Note that the Death Date in the CMS National database will be updated with the value in Item 40 (Discharge Date) when item 44C (Was the patient discharged alive) is equal to No (0).
-1006	Format	Fatal	Formatting of Alphanumeric Text Items: If the value submitted is not equal to one of the values listed in the Item Values, then the value must only contain the following alphanumeric characters: [0] - [9], [A] - [Z], [a] - [z].

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 4

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R4	Patient First Name	Asmt	Text	12	627-638

Item Values

Value	Value Text
Nonblank Text	Patient first name

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1014	Consistency	Fatal	Required Item Is blank: The value for this item is blank. Update the value in your IRF-PAI encoding software and resubmit the record.
-1031	Consistency	Warning	Patient Information Updated: Submitted value(s) for the item(s) listed are not the same as the values in the CMS National database. The database has been updated. Note that the Death Date in the CMS National database will be updated with the value in Item 40 (Discharge Date) when item 44C (Was the patient discharged alive) is equal to No (0).
-1008	Format	Fatal	Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, Ampersands, and Other Special Characters: This nonblank text string may contain only the following characters: [0] - [9], [A] - [Z], [a] - [z], [-] (dash), [@] (at sign), ['] (single quote), [/] (forward slash), [+] (plus sign), [,] (comma), [.] (period), [_] (underscore), [&] (ampersand), [] (embedded space(s)). Embedded spaces are the space character(s) surrounded by any of the characters listed in the preceding sentence. For example, [LEGAL TEXT] would be allowed.
-5156	Format	Fatal	The length of the text submitted for a free-form text item must not exceed the maximum length specified for that item.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 5A

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R5A	Patient Last Name	Asmt	Text	18	639-656

Item Values

Value	Value Text
Nonblank Text	Patient last name

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1014	Consistency	Fatal	Required Item Is blank: The value for this item is blank. Update the value in your IRF-PAI encoding software and resubmit the record.
-1030	Consistency	Warning	Patient Provider Updated: Our records indicated that a different provider previously cared for this resident. The provider associated with this resident has been updated.
-1031	Consistency	Warning	Patient Information Updated: Submitted value(s) for the item(s) listed are not the same as the values in the CMS National database. The database has been updated. Note that the Death Date in the CMS National database will be updated with the value in Item 40 (Discharge Date) when item 44C (Was the patient discharged alive) is equal to No (0).
-1008	Format	Fatal	Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, Ampersands, and Other Special Characters: This nonblank text string may contain only the following characters: [0] - [9], [A] - [Z], [a] - [z], [-] (dash), [@] (at sign), ['] (single quote), [/] (forward slash), [+] (plus sign), [,] (comma), [.] (period), [_] (underscore), [&] (ampersand), [] (embedded space(s)). Embedded spaces are the space character(s) surrounded by any of the characters listed in the preceding sentence. For example, [LEGAL TEXT] would be allowed.
-5156	Format	Fatal	The length of the text submitted for a free-form text item must not exceed the maximum length specified for that item.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 6

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R6	Birth Date	Asmt	Date	8	657-664

Item Values

Value	Value Text
YYYYMMDD	Patient birth date
YYYYMM	Patient birth date (if day of month is unknown)
YYYY	Patient birth date (if month and day unknown)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1031	Consistency	Warning	Patient Information Updated: Submitted value(s) for the item(s) listed are not the same as the values in the CMS National database. The database has been updated. Note that the Death Date in the CMS National database will be updated with the value in Item 40 (Discharge Date) when item 44C (Was the patient discharged alive) is equal to No (0).
-1046	Consistency	Fatal	Date Too Old: This date is more than 140 years in the past. This date cannot be more than 140 years in the
-1047	Consistency	Fatal	Dates Out of Order: The submitted dates are out of order or in the future. These dates must occur chronologically as follows: Birth Date (6) <= Date of Onset (23) <= Admission Date (12) <= Assessment Reference Date (13) <= Discharge Date (40) <= Submission Date (SUBMISSION_DATE)
-1012	Format	Fatal	Formatting of Birthdate: This item must contain a valid date in YYYYMMDD, YYYYMM, or YYYY format.

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".

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".

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 and must be zero filled, where necessary. For example, 1909

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

must be submitted as "1909" and 1900 must be submitted as "1900".

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 7

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R7	Social Security Number (SSN)	Asmt	Text	9	665-673

Item Values

Value	Value Text
Nonblank Text	Patient Social Security Number (SSN)
^	No information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1031	Consistency	Warning	Patient Information Updated: Submitted value(s) for the item(s) listed are not the same as the values in the CMS National database. The database has been updated. Note that the Death Date in the CMS National database will be updated with the value in Item 40 (Discharge Date) when item 44C (Was the patient discharged alive) is equal to No (0).
-1007	Format	Fatal	Formatting of Numeric Text Items: If the value submitted is not equal to one of the values listed in the Item Values, then the value must only contain the following numeric characters: [0] through [9].
-1108	Format	Fatal	Invalid SSN: If the value is not equal to "No information" [^], it must be 9 characters long, the first three characters must not be equal to [000], and the value must not be equal to any of the following: [111111111, 333333333, 123456789, 999999999].

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 8

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R8	Gender	Asmt	Code	1	674-674

Item Values

Value	Value Text
1	Male
2	Female

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1031	Consistency	Warning	Patient Information Updated: Submitted value(s) for the item(s) listed are not the same as the values in the CMS National database. The database has been updated. Note that the Death Date in the CMS National database will be updated with the value in Item 40 (Discharge Date) when item 44C (Was the patient discharged alive) is equal to No (0).
-1010	Format	Fatal	Invalid Data Value: The submitted value for this item is not in the valid range of acceptable values.

Version Changes

Type	ID	Description
Format	-1010	[V5.02.0]-Added mappings to new items A1400A-A1400K, A1400X, A1400Y, O0350. Removed mappings to the following deleted items: GG0130A2, GG0130B2, GG0130C2, GG0130E2, GG0130F2, GG0130G2, GG0130H2, GG0170A2, GG0170B2, GG0170C2, GG0170D2, GG0170E2, GG0170F2, GG0170G2, GG0170I2, GG0170J2, GG0170K2, GG0170L2, GG0170M2, GG0170N2, GG0170O2, GG0170P2, GG0170R2, GG0170S2, 20A, 20B.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 10

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R10	Marital Status	Asmt	Code	2	681-682

Item Values

Value	Value Text
01	Never Married
02	Married
03	Widowed
04	Separated
05	Divorced
^	No information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1010	Format	Fatal	Invalid Data Value: The submitted value for this item is not in the valid range of acceptable values.

Version Changes

Type	ID	Description
Format	-1010	[V5.02.0]-Added mappings to new items A1400A-A1400K, A1400X, A1400Y, O0350. Removed mappings to the following deleted items: GG0130A2, GG0130B2, GG0130C2, GG0130E2, GG0130F2, GG0130G2, GG0130H2, GG0170A2, GG0170B2, GG0170C2, GG0170D2, GG0170E2, GG0170F2, GG0170G2, GG0170I2, GG0170J2, GG0170K2, GG0170L2, GG0170M2, GG0170N2, GG0170O2, GG0170P2, GG0170R2, GG0170S2, 20A, 20B.

Data Submission Specifications for the IRF-PAI (V5.02.1)
Detailed Data Specifications Report
Section: Identification

Item ID: 11

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R11	ZIP Code of Patient's Pre-hospital Residence	Asmt	Text	5	683-687

Item Values

Value	Value Text
Nonblank Text	Zip code, country abbreviation
^	No information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-5156	Format	Fatal	The length of the text submitted for a free-form text item must not exceed the maximum length specified for that item.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 12

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R12	Admission Date	Asmt	Date	8	688-695

Item Values

Value	Value Text
YYYYMMDD	Admission Date

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1047	Consistency	Fatal	Dates Out of Order: The submitted dates are out of order or in the future. These dates must occur chronologically as follows: Birth Date (6) <= Date of Onset (23) <= Admission Date (12) <= Assessment Reference Date (13) <= Discharge Date (40) <= Submission Date (SUBMISSION_DATE)
-1053	Consistency	Fatal	Inconsistent Admission date: Admission Date (12) should be later than 1980.
-1060	Consistency	Warning	Inconsistent 12/13: The Assessment Reference Date (13) usually must be two days later than the Admission Date (12).
-1114	Consistency	Fatal	Program Interruption Date Out of Order: For the following dates, each date must precede or be the same as the subsequent date, ignoring dates with "No information" [^]. Admission Date (12) <= 1st Interruption Date (43A) <= 1st Return Date (43B) <= 2nd Interruption Date (43C) <= 2nd Return Date (43D) <= 3rd Interruption Date (43E) <= 3rd Return Date (43F) <= Discharge Date (40)
-5083	Consistency	Fatal	Incomplete Stay Skip Pattern: (a) IF (44D=[02, 63, 65, 66]) OR (41=[1]) OR (44C=[0]) OR (Discharge Date (40) minus Admission Date (12) < 3 days), then the following items must equal [^]: GG0130A3, GG0130B3, GG0130C3, GG0130E3, GG0130F3, GG0130G3, GG0130H3, GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.

Data Submission Specifications for the IRF-PAI (V5.02.1)
Detailed Data Specifications Report
Section: Identification

(b) IF (44D=[01, 03, 04, 06, 50, 51, 61, 62, 64, 99]) AND (41=[0]) AND (44C=[1]) AND (Discharge Date (40) minus Admission Date (12) >= 3 days), then the following items must not equal [^]: GG0130A3, GG0130B3, GG0130C3, GG0130E3, GG0130F3, GG0130G3, GG0130H3, GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.

-1045	Format	Fatal	Invalid date: The date listed must be a valid date in YYYYMMDD format or one of the special allowed values.
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Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 13

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R13	Assessment Reference Date	Asmt	Date	8	696-703

Item Values

Value	Value Text
YYYYMMDD	Assessment Reference Date

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1047	Consistency	Fatal	Dates Out of Order: The submitted dates are out of order or in the future. These dates must occur chronologically as follows: Birth Date (6) <= Date of Onset (23) <= Admission Date (12) <= Assessment Reference Date (13) <= Discharge Date (40) <= Submission Date (SUBMISSION_DATE)
-1060	Consistency	Warning	Inconsistent 12/13: The Assessment Reference Date (13) usually must be two days later than the Admission Date (12).
-1045	Format	Fatal	Invalid date: The date listed must be a valid date in YYYYMMDD format or one of the special allowed values.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 14

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R14	Admission Class	Asmt	Code	2	704-705

Item Values

Value	Value Text
01	Initial Rehab
03	Readmission
04	Unplanned Discharge
05	Continuing Rehabilitation
^	No information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-5165	Consistency	Fatal	(a) IF (44D=[02,63,65,66]) OR (14=[04]) OR (41=[1]) OR (44C=[0]), then the following items must equal [^]: B1300_2, C0100_2, D0150A1_2, D0150B1_2, D0700_2, J0510_2. (b) IF (44D=[01,03,04,06,50,51,61,62,64,99]) AND (14=[01,03,05,^]) AND (41=[0]) AND (44C=[1]), then the following items must not equal [^]: B1300_2, C0100_2, D0150A1_2, D0150B1_2, D0700_2, J0510_2.
-1010	Format	Fatal	Invalid Data Value: The submitted value for this item is not in the valid range of acceptable values.

Version Changes

Type	ID	Description
Format	-1010	[V5.02.0]-Added mappings to new items A1400A-A1400K, A1400X, A1400Y, O0350. Removed mappings to the following deleted items: GG0130A2, GG0130B2, GG0130C2, GG0130E2, GG0130F2, GG0130G2, GG0130H2, GG0170A2, GG0170B2, GG0170C2, GG0170D2, GG0170E2, GG0170F2, GG0170G2, GG0170I2, GG0170J2, GG0170K2, GG0170L2, GG0170M2, GG0170N2, GG0170O2, GG0170P2, GG0170R2, GG0170S2, 20A, 20B.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 15A

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R15A	Admit From	Asmt	Code	2	1128-1129

Item Values

Value	Value Text
01	Home (private home/apt., board/care, assisted living, group home, transitional living, other residential care arrangements)
02	Short-term General Hospital
03	Skilled Nursing Facility (SNF)
04	Intermediate Care
06	Home under care of organized home health service organization
50	Hospice (Home)
51	Hospice (medical facility)
61	Swing bed
62	Another Inpatient Rehabilitation Facility
63	Long-Term Care Hospital (LTCH)
64	Medicaid Nursing Facility
65	Inpatient Psychiatric Facility
66	Critical Access Hospital (CAH)
99	Not Listed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1010	Format	Fatal	Invalid Data Value: The submitted value for this item is not in the valid range of acceptable values.

Version Changes

Type	ID	Description
Format	-1010	[V5.02.0]-Added mappings to new items A1400A-A1400K, A1400X, A1400Y, O0350. Removed mappings to the following deleted items: GG0130A2, GG0130B2, GG0130C2, GG0130E2, GG0130F2, GG0130G2, GG0130H2, GG0170A2, GG0170B2, GG0170C2, GG0170D2, GG0170E2, GG0170F2, GG0170G2, GG0170I2, GG0170J2, GG0170K2, GG0170L2, GG0170M2, GG0170N2, GG0170O2, GG0170P2, GG0170R2, GG0170S2, 20A, 20B.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 16A

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R16A	Pre-hospital Living Setting	Asmt	Code	2	1130-1131

Item Values

Value	Value Text
01	Home (private home/apt., board/care, assisted living, group home, transitional living, other residential care arrangements)
02	Short-term General Hospital
03	Skilled Nursing Facility (SNF)
04	Intermediate Care
06	Home under care of organized home health service organization
50	Hospice (Home)
51	Hospice (medical facility)
61	Swing bed
62	Another Inpatient Rehabilitation Facility
63	Long-Term Care Hospital (LTCH)
64	Medicaid Nursing Facility
65	Inpatient Psychiatric Facility
66	Critical Access Hospital (CAH)
99	Not Listed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1105	Consistency	Fatal	Inconsistent 16A/17: If Pre-Hospital Living Setting (16A) is equal to [01], then Pre_Hospital Living With (17) cannot be skipped [^]. If Pre-hospital Living Setting (16A) is not equal to [01], then Pre_Hospital Living With (17) must be skipped [^].
-1010	Format	Fatal	Invalid Data Value: The submitted value for this item is not in the valid range of acceptable values.

Version Changes

Type	ID	Description
Format	-1010	[V5.02.0]-Added mappings to new items A1400A-A1400K, A1400X, A1400Y, O0350. Removed mappings to the following deleted items: GG0130A2, GG0130B2, GG0130C2, GG0130E2, GG0130F2, GG0130G2, GG0130H2, GG0170A2, GG0170B2, GG0170C2, GG0170D2, GG0170E2, GG0170F2, GG0170G2, GG0170I2, GG0170J2,

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

GG0170K2, GG0170L2, GG0170M2, GG0170N2, GG0170O2, GG0170P2, GG0170R2, GG0170S2, 20A, 20B.

Data Submission Specifications for the IRF-PAI (V5.02.1)

Detailed Data Specifications Report

Section: Identification

Item ID: 17

XML Tag	Item Label	Item Group	Item Type	Max Length	Fixed Format Start-End
R17	Pre-Hospital Living With	Asmt	Code	2	710-711

Item Values

Value	Value Text
01	Alone
02	Family/Relatives
03	Friends
04	Attendant
05	Other
^	Skipped

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-1105	Consistency	Fatal	Inconsistent 16A/17: If Pre-Hospital Living Setting (16A) is equal to [01], then Pre_Hospital Living With (17) cannot be skipped [^]. If Pre-hospital Living Setting (16A) is not equal to [01], then Pre_Hospital Living With (17) must be skipped [^].
-1010	Format	Fatal	Invalid Data Value: The submitted value for this item is not in the valid range of acceptable values.

Version Changes

Type	ID	Description
Format	-1010	[V5.02.0]-Added mappings to new items A1400A-A1400K, A1400X, A1400Y, O0350. Removed mappings to the following deleted items: GG0130A2, GG0130B2, GG0130C2, GG0130E2, GG0130F2, GG0130G2, GG0130H2, GG0170A2, GG0170B2, GG0170C2, GG0170D2, GG0170E2, GG0170F2, GG0170G2, GG0170I2, GG0170J2, GG0170K2, GG0170L2, GG0170M2, GG0170N2, GG0170O2, GG0170P2, GG0170R2, GG0170S2, 20A, 20B.