

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---------------|--|---|---------------|--------|---|--|--------|---|--|--------|--|--|--------|--|--|--------|--|--|--------|---|--|--------|--|--|--------|---------------------------------------|--|--------|--|--|--------|--|--|--------|---|--|--------|---|--|--------|--------------------------------------|
| -3502 | None of above | Fatal | <p>If C0900A through C0900D and C0900Z are all active, then the following rules apply:</p> <p>a) If C0900Z=[0], then at least one item from C0900A through C0900D must equal [1].</p> <p>b) If C0900Z=[1], then all items from C0900A through C0900D must equal [0].</p> <p>c) If C0900Z=[-], then at least one item from C0900A through C0900D must equal [-] and all remaining items must equal [0,-].</p> <table><tr><td>Items:</td><td>C0900A</td><td>Staff asmt mental status: recall current season</td></tr><tr><td></td><td>C0900B</td><td>Staff asmt mental status: recall location of room</td></tr><tr><td></td><td>C0900C</td><td>Staff asmt mental status: recall staff names/faces</td></tr><tr><td></td><td>C0900D</td><td>Staff asmt mental status: recall in nh/hosp sw bed</td></tr><tr><td></td><td>C0900Z</td><td>Staff asmt mental status: none of above recalled</td></tr></table> | Items: | C0900A | Staff asmt mental status: recall current season | | C0900B | Staff asmt mental status: recall location of room | | C0900C | Staff asmt mental status: recall staff names/faces | | C0900D | Staff asmt mental status: recall in nh/hosp sw bed | | C0900Z | Staff asmt mental status: none of above recalled | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | C0900A | Staff asmt mental status: recall current season | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900B | Staff asmt mental status: recall location of room | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900C | Staff asmt mental status: recall staff names/faces | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900D | Staff asmt mental status: recall in nh/hosp sw bed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900Z | Staff asmt mental status: none of above recalled | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3503 | None of above | Fatal | <p>If E0100A through E0100B and E0100Z are all active, then the following rules apply:</p> <p>a) If E0100Z=[0], then at least one item from E0100A through E0100B must equal [1].</p> <p>b) If E0100Z=[1], then all items from E0100A through E0100B must equal [0].</p> <p>c) If E0100Z=[-], then at least one item from E0100A through E0100B must equal [-] and all remaining items must equal [0,-].</p> <table><tr><td>Items:</td><td>E0100A</td><td>Psychosis: hallucinations</td></tr><tr><td></td><td>E0100B</td><td>Psychosis: delusions</td></tr><tr><td></td><td>E0100Z</td><td>Psychosis: none of the above</td></tr></table> | Items: | E0100A | Psychosis: hallucinations | | E0100B | Psychosis: delusions | | E0100Z | Psychosis: none of the above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | E0100A | Psychosis: hallucinations | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | E0100B | Psychosis: delusions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | E0100Z | Psychosis: none of the above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3504 | None of above | Fatal | <p>If F0800A through F0800T and F0800Z are all active, then the following rules apply:</p> <p>a) If F0800Z=[0], then at least one item from F0800A through F0800T must equal [1].</p> <p>b) If F0800Z=[1], then all items from F0800A through F0800T must equal [0].</p> <p>c) If F0800Z=[-], then at least one item from F0800A through F0800T must equal [-] and all remaining items must equal [0,-].</p> <table><tr><td>Items:</td><td>F0800A</td><td>Staff assessment: choosing clothes to wear</td></tr><tr><td></td><td>F0800B</td><td>Staff assessment: caring for personal belongings</td></tr><tr><td></td><td>F0800C</td><td>Staff assessment: receiving tub bath</td></tr><tr><td></td><td>F0800D</td><td>Staff assessment: receiving shower</td></tr><tr><td></td><td>F0800E</td><td>Staff assessment: receiving bed bath</td></tr><tr><td></td><td>F0800F</td><td>Staff assessment: receiving sponge bath</td></tr><tr><td></td><td>F0800G</td><td>Staff assessment: snacks between meals</td></tr><tr><td></td><td>F0800H</td><td>Staff assessment: staying up past 8PM</td></tr><tr><td></td><td>F0800I</td><td>Staff assessment: discuss care with family/other</td></tr><tr><td></td><td>F0800J</td><td>Staff assessment: use phone in private</td></tr><tr><td></td><td>F0800K</td><td>Staff assessment: place to lock personal things</td></tr><tr><td></td><td>F0800L</td><td>Staff assessment: reading books, newspapers, mags</td></tr><tr><td></td><td>F0800M</td><td>Staff assessment: listening to music</td></tr></table> | Items: | F0800A | Staff assessment: choosing clothes to wear | | F0800B | Staff assessment: caring for personal belongings | | F0800C | Staff assessment: receiving tub bath | | F0800D | Staff assessment: receiving shower | | F0800E | Staff assessment: receiving bed bath | | F0800F | Staff assessment: receiving sponge bath | | F0800G | Staff assessment: snacks between meals | | F0800H | Staff assessment: staying up past 8PM | | F0800I | Staff assessment: discuss care with family/other | | F0800J | Staff assessment: use phone in private | | F0800K | Staff assessment: place to lock personal things | | F0800L | Staff assessment: reading books, newspapers, mags | | F0800M | Staff assessment: listening to music |
| Items: | F0800A | Staff assessment: choosing clothes to wear | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800B | Staff assessment: caring for personal belongings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800C | Staff assessment: receiving tub bath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800D | Staff assessment: receiving shower | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800E | Staff assessment: receiving bed bath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800F | Staff assessment: receiving sponge bath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800G | Staff assessment: snacks between meals | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800H | Staff assessment: staying up past 8PM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800I | Staff assessment: discuss care with family/other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800J | Staff assessment: use phone in private | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800K | Staff assessment: place to lock personal things | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800L | Staff assessment: reading books, newspapers, mags | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0800M | Staff assessment: listening to music | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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|-------|---------------|----------|---|
| | | | Items: F0800N Staff assessment: being around animals/pets F0800O Staff assessment: keeping up with news F0800P Staff assessment: doing things with groups F0800Q Staff assessment: participate favorite activities F0800R Staff assessment: spend time away from nursng home F0800S Staff assessment: spend time outdoors F0800T Staff assessment: participate religious activities F0800Z Staff assessment: none of above activities |
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| -3506 | None of above | Fatal | a) If H0100Z=[0], then at least one active item from H0100A through H0100D must equal [1]. b) If H0100Z=[1], then all active items from H0100A through H0100D must equal [0]. c) If H0100Z=[-], then at least one active item from H0100A through H0100D must equal [-] and all remaining active items must equal [0,-]. |
| | | | Items: H0100A Appliances: indwelling catheter H0100B Appliances: external catheter H0100C Appliances: ostomy H0100D Appliances: intermittent catheterization H0100Z Appliances: none of the above |
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| -3507 | None of above | Fatal | a) If I7900=[0], then at least one active item from I0100 through I6500 must equal [1]. b) If I7900=[1], then all active items from I0100 through I6500 must equal [0]. c) If I7900=[-], then at least one active item from I0100 through I6500 must equal [-] and all remaining active items must equal [0,-]. |
| | | | Items: I0100 Cancer (with or without metastasis) I0200 Anemia I0300 Atrial fibrillation and other dysrhythmias I0400 Coronary artery disease (CAD) I0500 Deep venous thrombosis (DVT), PE, or PTE I0600 Heart failure I0700 Hypertension I0800 Orthostatic hypotension I0900 Peripheral vascular disease (PVD) or PAD I1100 Cirrhosis I1200 Gastroesophageal reflux disease (GERD) or ulcer I1300 Ulcerative colitis, Crohn's, inflam bowel disease I1400 Benign prostatic hyperplasia (BPH) I1500 Renal insufficiency, renal failure, ESRD |
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|----|------|----------|--|
| | | Items: | I1550 Neurogenic bladder |
| | | | I1650 Obstructive uropathy |
| | | | I1700 Multidrug resistant organism (MDRO) |
| | | | I2000 Pneumonia |
| | | | I2100 Septicemia |
| | | | I2200 Tuberculosis |
| | | | I2300 Urinary tract infection (UTI) (LAST 30 DAYS) |
| | | | I2400 Viral hepatitis (includes type A, B, C, D, and E) |
| | | | I2500 Wound infection (other than foot) |
| | | | I2900 Diabetes mellitus (DM) |
| | | | I3100 Hyponatremia |
| | | | I3200 Hyperkalemia |
| | | | I3300 Hyperlipidemia (e.g., hypercholesterolemia) |
| | | | I3400 Thyroid disorder |
| | | | I3700 Arthritis |
| | | | I3800 Osteoporosis |
| | | | I3900 Hip fracture |
| | | | I4000 Other fracture |
| | | | I4200 Alzheimer's disease |
| | | | I4300 Aphasia |
| | | | I4400 Cerebral palsy |
| | | | I4500 Cerebrovascular accident (CVA), TIA, or stroke |
| | | | I4800 Non-Alzheimer's dementia |
| | | | I4900 Hemiplegia or hemiparesis |
| | | | I5000 Paraplegia |
| | | | I5100 Quadriplegia |
| | | | I5200 Multiple sclerosis |
| | | | I5250 Huntington's disease |
| | | | I5300 Parkinson's disease |
| | | | I5350 Tourette's syndrome |
| | | | I5400 Seizure disorder or epilepsy |
| | | | I5500 Traumatic brain injury (TBI) |
| | | | I5600 Malnutrition (protein, calorie), risk of malnutrit |
| | | | I5700 Anxiety disorder |
| | | | I5800 Depression (other than bipolar) |
| | | | I5900 Bipolar disorder |

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|-------|---------------|----------|--|
| | | | Items: I5950 Psychotic disorder (other than schizophrenia) I6000 Schizophrenia I6100 Post-traumatic stress disorder (PTSD) I6200 Asthma (COPD) or chronic lung disease I6300 Respiratory failure I6500 Cataracts, glaucoma, or macular degeneration I7900 None of above active diseases within last 7 days |
| -3508 | None of above | Fatal | <p>If J0800A through J0800D and J0800Z are all active, then the following rules apply:</p> <p>a) If J0800Z=[0], then at least one item from J0800A through J0800D must equal [1].</p> <p>b) If J0800Z=[1], then all items from J0800A through J0800D must equal [0].</p> <p>c) If J0800Z=[-], then at least one item from J0800A through J0800D must equal [-] and all remaining items must equal [0,-].</p> Items: J0800A Staff pain asmt: non-verbal sounds J0800B Staff pain asmt: vocal complaints of pain J0800C Staff pain asmt: facial expressions J0800D Staff pain asmt: protective movements/postures J0800Z Staff pain asmt: none of these signs observed |
| -3509 | None of above | Fatal | <p>a) If J1100Z=[0], then at least one active item from J1100A through J1100C must equal [1].</p> <p>b) If J1100Z=[1], then all active items from J1100A through J1100C must equal [0].</p> <p>c) If J1100Z=[-], then at least one active item from J1100A through J1100C must equal [-] and all remaining active items must equal [0,-].</p> Items: J1100A Short breath/trouble breathing: with exertion J1100B Short breath/trouble breathing: sitting at rest J1100C Short breath/trouble breathing: lying flat J1100Z Short breath/trouble breathing: none of above |
| -3510 | None of above | Fatal | <p>a) If J1550Z=[0], then at least one active item from J1550A through J1550D must equal [1].</p> <p>b) If J1550Z=[1], then all active items from J1550A through J1550D must equal [0].</p> <p>c) If J1550Z=[-], then at least one active item from J1550A through J1550D must equal [-] and all remaining active items must equal [0,-].</p> Items: J1550A Problem conditions: fever J1550B Problem conditions: vomiting J1550C Problem conditions: dehydrated J1550D Problem conditions: internal bleeding J1550Z Problem conditions: none of the above |

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|---------------|---------------|--|---|---------------|--------|---|--|--------|--|--|--------|---|--|--------|---|--|--------|--|--|--------|--|--|--------|--|--|--------|---------------------------|
| -3511 | None of above | Fatal | <p>If K0100A through K0100D and K0100Z are all active, then the following rules apply:</p> <p>a) If K0100Z=[0], then at least one item from K0100A through K0100D must equal [1].</p> <p>b) If K0100Z=[1], then all items from K0100A through K0100D must equal [0].</p> <p>c) If K0100Z=[-], then at least one item from K0100A through K0100D must equal [-] and all remaining items must equal [0,-].</p> <table><tr><td>Items:</td><td>K0100A</td><td>Swallow disorder: loss liquids/solids from mouth</td></tr><tr><td></td><td>K0100B</td><td>Swallow disorder: holds food in mouth/cheeks</td></tr><tr><td></td><td>K0100C</td><td>Swallow disorder: cough/choke with meals/meds</td></tr><tr><td></td><td>K0100D</td><td>Swallow disorder: difficulty or pain swallowing</td></tr><tr><td></td><td>K0100Z</td><td>Swallow disorder: none of the above</td></tr></table> | Items: | K0100A | Swallow disorder: loss liquids/solids from mouth | | K0100B | Swallow disorder: holds food in mouth/cheeks | | K0100C | Swallow disorder: cough/choke with meals/meds | | K0100D | Swallow disorder: difficulty or pain swallowing | | K0100Z | Swallow disorder: none of the above | | | | | | | | | |
| Items: | K0100A | Swallow disorder: loss liquids/solids from mouth | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0100B | Swallow disorder: holds food in mouth/cheeks | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0100C | Swallow disorder: cough/choke with meals/meds | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0100D | Swallow disorder: difficulty or pain swallowing | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0100Z | Swallow disorder: none of the above | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3513 | None of above | Fatal | <p>If L0200Z is active, and any of L0200A through L0200G are active, then the following rules apply:</p> <p>a) If L0200Z=[0], then at least one active item from L0200A through L0200G must equal [1].</p> <p>b) If L0200Z=[1], then all active items from L0200A through L0200G must equal [0].</p> <p>c) If L0200Z=[-], then at least one active item from L0200A through L0200G must equal [-] and all remaining active items must equal [0,-].</p> <table><tr><td>Items:</td><td>L0200A</td><td>Dental: broken or loosely fitting denture</td></tr><tr><td></td><td>L0200B</td><td>Dental: no natural teeth or tooth fragment(s)</td></tr><tr><td></td><td>L0200C</td><td>Dental: abnormal mouth tissue</td></tr><tr><td></td><td>L0200D</td><td>Dental: cavity or broken natural teeth</td></tr><tr><td></td><td>L0200E</td><td>Dental: inflamed/bleeding gums or loose teeth</td></tr><tr><td></td><td>L0200F</td><td>Dental: pain, discomfort, difficulty chewing</td></tr><tr><td></td><td>L0200G</td><td>Dental: unable to examine</td></tr><tr><td></td><td>L0200Z</td><td>Dental: none of the above</td></tr></table> | Items: | L0200A | Dental: broken or loosely fitting denture | | L0200B | Dental: no natural teeth or tooth fragment(s) | | L0200C | Dental: abnormal mouth tissue | | L0200D | Dental: cavity or broken natural teeth | | L0200E | Dental: inflamed/bleeding gums or loose teeth | | L0200F | Dental: pain, discomfort, difficulty chewing | | L0200G | Dental: unable to examine | | L0200Z | Dental: none of the above |
| Items: | L0200A | Dental: broken or loosely fitting denture | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L0200B | Dental: no natural teeth or tooth fragment(s) | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L0200C | Dental: abnormal mouth tissue | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L0200D | Dental: cavity or broken natural teeth | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L0200E | Dental: inflamed/bleeding gums or loose teeth | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L0200F | Dental: pain, discomfort, difficulty chewing | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L0200G | Dental: unable to examine | | | | | | | | | | | | | | | | | | | | | | | | | |
| | L0200Z | Dental: none of the above | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3515 | None of above | Fatal | <p>If M1200A through M1200I and M1200Z are all active, then the following rules apply:</p> <p>a) If M1200Z=[0], then at least one item from M1200A through M1200I must equal [1].</p> <p>b) If M1200Z=[1], then all items from M1200A through M1200I must equal [0].</p> <p>c) If M1200Z=[-], then at least one item from M1200A through M1200I must equal [-]</p> <table><tr><td>Items:</td><td>M1200A</td><td>Skin/ulcer/injry treat: prssr rduce dvc for chair</td></tr><tr><td></td><td>M1200B</td><td>Skin/ulcer/injry treat: prssr reducing dvc for bed</td></tr><tr><td></td><td>M1200C</td><td>Skin/ulcer/injry treat: turning/repositioning</td></tr><tr><td></td><td>M1200D</td><td>Skin/ulcer/injry treat: nutrition/hydration</td></tr><tr><td></td><td>M1200E</td><td>Skin/ulcer/injry treat: prssr ulcer/injry care</td></tr><tr><td></td><td>M1200F</td><td>Skin/ulcer/injry treat: surgical wound care</td></tr><tr><td></td><td>M1200G</td><td>Skin/ulcer/injry treat: application of dressings</td></tr></table> | Items: | M1200A | Skin/ulcer/injry treat: prssr rduce dvc for chair | | M1200B | Skin/ulcer/injry treat: prssr reducing dvc for bed | | M1200C | Skin/ulcer/injry treat: turning/repositioning | | M1200D | Skin/ulcer/injry treat: nutrition/hydration | | M1200E | Skin/ulcer/injry treat: prssr ulcer/injry care | | M1200F | Skin/ulcer/injry treat: surgical wound care | | M1200G | Skin/ulcer/injry treat: application of dressings | | | |
| Items: | M1200A | Skin/ulcer/injry treat: prssr rduce dvc for chair | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1200B | Skin/ulcer/injry treat: prssr reducing dvc for bed | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1200C | Skin/ulcer/injry treat: turning/repositioning | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1200D | Skin/ulcer/injry treat: nutrition/hydration | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1200E | Skin/ulcer/injry treat: prssr ulcer/injry care | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1200F | Skin/ulcer/injry treat: surgical wound care | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1200G | Skin/ulcer/injry treat: application of dressings | | | | | | | | | | | | | | | | | | | | | | | | | |

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|-------|--------------|----------|--|
| -3517 | Skip pattern | Fatal | Items: M1200H Skin/ulcer/injry treat: apply ointments/meds |
| | | | M1200I Skin/ulcer/injry treat: apply dressings to feet |
| | | | M1200Z Skin/ulcer/injry treat: none of the above |
| | | | a) If A2400A=[0], then all active items from A2400B through A2400C must equal [^]. b) If A2400A=[1], then all active items from A2400B through A2400C must not equal |
| -3518 | Skip pattern | Fatal | Items: A2400A Has resident had Medicare-covered stay |
| | | | A2400B Start date of most recent Medicare stay |
| | | | A2400C End date of most recent Medicare stay |
| | | | a) If A0310A=[05,06], then if A2200 is active it must not equal [^]. b) If A0310A=[01,02,03,04,99], then if A2200 is active it must equal [^]. |
| -3523 | Skip pattern | Fatal | Items: A0310A Type of assessment: OBRA |
| | | | A2200 Previous asmt reference date for signif correction |
| | | | a) If B0100=[0], then all active items from E0100A through E0300 must not equal [^]. b) If B0100=[-], then all active items from E0100A through E0300 must equal [-]. |
| | | | Items: B0100 Comatose |
| -3524 | Skip pattern | Fatal | E0100A Psychosis: hallucinations |
| | | | E0100B Psychosis: delusions |
| | | | E0100Z Psychosis: none of the above |
| | | | E0200A Physical behav symptoms directed toward others |
| | | | E0200B Verbal behav symptoms directed toward others |
| | | | E0200C Other behav symptoms not directed toward others |
| | | | E0300 Overall presence of behavioral symptoms |
| | | | a) If B0100=[0], then all active items from E0800 through E0900 must not equal [^]. b) If B0100=[-], then all active items from E0800 through E0900 must equal [-]. |
| -3525 | Skip pattern | Fatal | Items: B0100 Comatose |
| | | | E0800 Rejection of care: presence and frequency |
| | | | E0900 Wandering: presence and frequency |
| | | | a) If B0100=[0], then all active items from E1100 through F0300 must not equal [^]. b) If B0100=[-], then all active items from E1100 through F0300 must equal [-]. |
| | | | Items: B0100 Comatose |
| | | | E1100 Change in behavioral or other symptoms |
| | | | F0300 Conduct res interview for daily/activity prefs |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | |
|--------|--|----------|--|-------|--|--------|---|--------|---|--------|--|--------|--|--------|---|--------|--|--------|--|--------|--|-------|--|
| -3527 | Consistency | Fatal | <p>a) If C0100=[0,^], then all active items from C0200 through C0600 must equal [^].</p> <p>b) If C0100=[1], then all active items from C0200 through C0600 must not equal [^].</p> <p>c) If C0100=[-], then all active items from C0200 through C0500 must equal [-].</p> <p>d) If C0100=[-], then if C0600 is active it must equal [1,-].</p> <p>Items:</p> <table><tr><td>C0100</td><td>BIMS: should resident interview be conducted</td></tr><tr><td>C0200</td><td>BIMS res interview: repetition of three words</td></tr><tr><td>C0300A</td><td>BIMS res interview: able to report correct year</td></tr><tr><td>C0300B</td><td>BIMS res interview: able to report correct month</td></tr><tr><td>C0300C</td><td>BIMS res interview: can report correct day of week</td></tr><tr><td>C0400A</td><td>BIMS res interview: able to recall "sock"</td></tr><tr><td>C0400B</td><td>BIMS res interview: able to recall "blue"</td></tr><tr><td>C0400C</td><td>BIMS res interview: able to recall "bed"</td></tr><tr><td>C0500</td><td>BIMS res interview: summary score</td></tr><tr><td>C0600</td><td>Staff asmt mental status: conduct asmt</td></tr></table> | C0100 | BIMS: should resident interview be conducted | C0200 | BIMS res interview: repetition of three words | C0300A | BIMS res interview: able to report correct year | C0300B | BIMS res interview: able to report correct month | C0300C | BIMS res interview: can report correct day of week | C0400A | BIMS res interview: able to recall "sock" | C0400B | BIMS res interview: able to recall "blue" | C0400C | BIMS res interview: able to recall "bed" | C0500 | BIMS res interview: summary score | C0600 | Staff asmt mental status: conduct asmt |
| C0100 | BIMS: should resident interview be conducted | | | | | | | | | | | | | | | | | | | | | | |
| C0200 | BIMS res interview: repetition of three words | | | | | | | | | | | | | | | | | | | | | | |
| C0300A | BIMS res interview: able to report correct year | | | | | | | | | | | | | | | | | | | | | | |
| C0300B | BIMS res interview: able to report correct month | | | | | | | | | | | | | | | | | | | | | | |
| C0300C | BIMS res interview: can report correct day of week | | | | | | | | | | | | | | | | | | | | | | |
| C0400A | BIMS res interview: able to recall "sock" | | | | | | | | | | | | | | | | | | | | | | |
| C0400B | BIMS res interview: able to recall "blue" | | | | | | | | | | | | | | | | | | | | | | |
| C0400C | BIMS res interview: able to recall "bed" | | | | | | | | | | | | | | | | | | | | | | |
| C0500 | BIMS res interview: summary score | | | | | | | | | | | | | | | | | | | | | | |
| C0600 | Staff asmt mental status: conduct asmt | | | | | | | | | | | | | | | | | | | | | | |
| -3528 | Consistency | Fatal | <p>a) If C0600=[0], then all active items from C0700 through C1000 must equal [^].</p> <p>b) If C0600=[1], then all active items from C0700 through C1000 must not equal [^].</p> <p>c) If C0600=[-], then all active items from C0700 through C1000 must equal [-].</p> <p>d) If C0600=[^] and C0100=[0], then all active items from C0700 through C1000 must not equal [^].</p> <p>Items:</p> <table><tr><td>C0100</td><td>BIMS: should resident interview be conducted</td></tr><tr><td>C0600</td><td>Staff asmt mental status: conduct asmt</td></tr><tr><td>C0700</td><td>Staff asmt mental status: short-term memory OK</td></tr><tr><td>C0800</td><td>Staff asmt mental status: long-term memory OK</td></tr><tr><td>C0900A</td><td>Staff asmt mental status: recall current season</td></tr><tr><td>C0900B</td><td>Staff asmt mental status: recall location of room</td></tr><tr><td>C0900C</td><td>Staff asmt mental status: recall staff names/faces</td></tr><tr><td>C0900D</td><td>Staff asmt mental status: recall in nh/hosp sw bed</td></tr><tr><td>C0900Z</td><td>Staff asmt mental status: none of above recalled</td></tr><tr><td>C1000</td><td>Cognitive skills for daily decision making</td></tr></table> | C0100 | BIMS: should resident interview be conducted | C0600 | Staff asmt mental status: conduct asmt | C0700 | Staff asmt mental status: short-term memory OK | C0800 | Staff asmt mental status: long-term memory OK | C0900A | Staff asmt mental status: recall current season | C0900B | Staff asmt mental status: recall location of room | C0900C | Staff asmt mental status: recall staff names/faces | C0900D | Staff asmt mental status: recall in nh/hosp sw bed | C0900Z | Staff asmt mental status: none of above recalled | C1000 | Cognitive skills for daily decision making |
| C0100 | BIMS: should resident interview be conducted | | | | | | | | | | | | | | | | | | | | | | |
| C0600 | Staff asmt mental status: conduct asmt | | | | | | | | | | | | | | | | | | | | | | |
| C0700 | Staff asmt mental status: short-term memory OK | | | | | | | | | | | | | | | | | | | | | | |
| C0800 | Staff asmt mental status: long-term memory OK | | | | | | | | | | | | | | | | | | | | | | |
| C0900A | Staff asmt mental status: recall current season | | | | | | | | | | | | | | | | | | | | | | |
| C0900B | Staff asmt mental status: recall location of room | | | | | | | | | | | | | | | | | | | | | | |
| C0900C | Staff asmt mental status: recall staff names/faces | | | | | | | | | | | | | | | | | | | | | | |
| C0900D | Staff asmt mental status: recall in nh/hosp sw bed | | | | | | | | | | | | | | | | | | | | | | |
| C0900Z | Staff asmt mental status: none of above recalled | | | | | | | | | | | | | | | | | | | | | | |
| C1000 | Cognitive skills for daily decision making | | | | | | | | | | | | | | | | | | | | | | |
| -3531 | Skip pattern | Fatal | <p>a) If E0300=[0,^], then all active items from E0500A through E0600C must equal [^].</p> <p>b) If E0300=[1], then all active items from E0500A through E0600C must not equal [^].</p> <p>c) If E0300=[-], then all active items from E0500A through E0600C must equal [-].</p> <p>Items:</p> <table><tr><td>E0300</td><td>Overall presence of behavioral symptoms</td></tr><tr><td>E0500A</td><td>Behav symptoms put res at risk for illness/injury</td></tr><tr><td>E0500B</td><td>Behav symptoms interfere with resident care</td></tr></table> | E0300 | Overall presence of behavioral symptoms | E0500A | Behav symptoms put res at risk for illness/injury | E0500B | Behav symptoms interfere with resident care | | | | | | | | | | | | | | |
| E0300 | Overall presence of behavioral symptoms | | | | | | | | | | | | | | | | | | | | | | |
| E0500A | Behav symptoms put res at risk for illness/injury | | | | | | | | | | | | | | | | | | | | | | |
| E0500B | Behav symptoms interfere with resident care | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| | | | Items: E0500C Behav symptoms interfere with social activities E0600A Behav symptoms put others at risk for injury E0600B Behav symptoms intrude on privacy of others E0600C Behav symptoms disrupt care or living environment |
| | | | a) If E0900=[0,^], then all active items from E1000A through E1000B must equal [^]. b) If E0900=[1,2,3], then all active items from E1000A through E1000B must not equal [^]. c) If E0900=[-], then all active items from E1000A through E1000B must equal [-]. |
| | | | Items: E0900 Wandering: presence and frequency E1000A Wandering: risk of getting to dangerous place E1000B Wandering: intrude on privacy of others |
| | | | a) If F0300=[0], then all active items from F0400A through F0700 must equal [^]. b) If F0300=[1], then all active items from F0400A through F0700 must not equal [^]. c) If F0300=[-], then all active items from F0400A through F0600 must equal [-] and F0700 must not equal [^]. |
| | | | Items: F0300 Conduct res interview for daily/activity prefs F0400A Res interview: choose clothes to wear F0400B Res interview: take care of personal belongings F0400C Res interview: choose tub, bath, shower, sponge F0400D Res interview: have snacks between meals F0400E Res interview: choose own bedtime F0400F Res interview: discuss care with family/friend F0400G Res interview: use phone in private F0400H Res interview: lock things to keep them safe F0500A Res interview: have books, newspaper, mags to read F0500B Res interview: listen to music F0500C Res interview: be around animals/pets F0500D Res interview: keep up with news F0500E Res interview: do things with groups of people F0500F Res interview: do favorite activities F0500G Res interview: go outside when good weather F0500H Res interview: participate in religious practices F0600 Primary respondent: daily/activities prefs F0700 Conduct staff assessment for daily/activity prefs |
| -3532 | Skip pattern | Fatal | |
| -3533 | Consistency | Fatal | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------|--|----------|---|--------|---|--------|--|--------|--|--------|--------------------------------------|--------|------------------------------------|--------|--------------------------------------|--------|---|--------|--|--------|---------------------------------------|--------|--|--------|--|--------|---|--------|---|--------|--------------------------------------|--------|---|--------|--|--------|--|--------|---|--------|--|--------|---------------------------------------|--------|--|--------|--|
| -3534 | Skip pattern | Fatal | <p>a) If F0700=[0], then all active items from F0800A through F0800Z must equal [^].</p> <p>b) If F0700=[1], then all active items from F0800A through F0800Z must not equal [^].</p> <p>c) If F0700=[-], then all active items from F0800A through F0800Z must equal [-].</p> <div><div>Items:</div><table><tr><td>F0700</td><td>Conduct staff assessment for daily/activity prefs</td></tr><tr><td>F0800A</td><td>Staff assessment: choosing clothes to wear</td></tr><tr><td>F0800B</td><td>Staff assessment: caring for personal belongings</td></tr><tr><td>F0800C</td><td>Staff assessment: receiving tub bath</td></tr><tr><td>F0800D</td><td>Staff assessment: receiving shower</td></tr><tr><td>F0800E</td><td>Staff assessment: receiving bed bath</td></tr><tr><td>F0800F</td><td>Staff assessment: receiving sponge bath</td></tr><tr><td>F0800G</td><td>Staff assessment: snacks between meals</td></tr><tr><td>F0800H</td><td>Staff assessment: staying up past 8PM</td></tr><tr><td>F0800I</td><td>Staff assessment: discuss care with family/other</td></tr><tr><td>F0800J</td><td>Staff assessment: use phone in private</td></tr><tr><td>F0800K</td><td>Staff assessment: place to lock personal things</td></tr><tr><td>F0800L</td><td>Staff assessment: reading books, newspapers, mags</td></tr><tr><td>F0800M</td><td>Staff assessment: listening to music</td></tr><tr><td>F0800N</td><td>Staff assessment: being around animals/pets</td></tr><tr><td>F0800O</td><td>Staff assessment: keeping up with news</td></tr><tr><td>F0800P</td><td>Staff assessment: doing things with groups</td></tr><tr><td>F0800Q</td><td>Staff assessment: participate favorite activities</td></tr><tr><td>F0800R</td><td>Staff assessment: spend time away from nursng home</td></tr><tr><td>F0800S</td><td>Staff assessment: spend time outdoors</td></tr><tr><td>F0800T</td><td>Staff assessment: participate religious activities</td></tr><tr><td>F0800Z</td><td>Staff assessment: none of above activities</td></tr></table></div> | F0700 | Conduct staff assessment for daily/activity prefs | F0800A | Staff assessment: choosing clothes to wear | F0800B | Staff assessment: caring for personal belongings | F0800C | Staff assessment: receiving tub bath | F0800D | Staff assessment: receiving shower | F0800E | Staff assessment: receiving bed bath | F0800F | Staff assessment: receiving sponge bath | F0800G | Staff assessment: snacks between meals | F0800H | Staff assessment: staying up past 8PM | F0800I | Staff assessment: discuss care with family/other | F0800J | Staff assessment: use phone in private | F0800K | Staff assessment: place to lock personal things | F0800L | Staff assessment: reading books, newspapers, mags | F0800M | Staff assessment: listening to music | F0800N | Staff assessment: being around animals/pets | F0800O | Staff assessment: keeping up with news | F0800P | Staff assessment: doing things with groups | F0800Q | Staff assessment: participate favorite activities | F0800R | Staff assessment: spend time away from nursng home | F0800S | Staff assessment: spend time outdoors | F0800T | Staff assessment: participate religious activities | F0800Z | Staff assessment: none of above activities |
| F0700 | Conduct staff assessment for daily/activity prefs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800A | Staff assessment: choosing clothes to wear | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800B | Staff assessment: caring for personal belongings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800C | Staff assessment: receiving tub bath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800D | Staff assessment: receiving shower | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800E | Staff assessment: receiving bed bath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800F | Staff assessment: receiving sponge bath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800G | Staff assessment: snacks between meals | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800H | Staff assessment: staying up past 8PM | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800I | Staff assessment: discuss care with family/other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800J | Staff assessment: use phone in private | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800K | Staff assessment: place to lock personal things | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800L | Staff assessment: reading books, newspapers, mags | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800M | Staff assessment: listening to music | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800N | Staff assessment: being around animals/pets | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800O | Staff assessment: keeping up with news | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800P | Staff assessment: doing things with groups | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800Q | Staff assessment: participate favorite activities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800R | Staff assessment: spend time away from nursng home | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800S | Staff assessment: spend time outdoors | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800T | Staff assessment: participate religious activities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F0800Z | Staff assessment: none of above activities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3536 | Skip pattern | Fatal | <p>a) If H0200A=[0,9], then if H0200B is active it must equal [^].</p> <p>b) If H0200A=[1], then if H0200B is active it must not equal [^].</p> <p>c) If H0200A=[-], then if H0200B is active it must equal [-].</p> <div><div>Items:</div><table><tr><td>H0200A</td><td>Urinary toileting program: has been attempted</td></tr><tr><td>H0200B</td><td>Urinary toileting program: response</td></tr></table></div> | H0200A | Urinary toileting program: has been attempted | H0200B | Urinary toileting program: response | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| H0200A | Urinary toileting program: has been attempted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| H0200B | Urinary toileting program: response | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3537 | Skip pattern | Fatal | <p>a) If H0200A=[0], then if H0200C is active it must equal [^].</p> <p>b) If H0200A=[1,9], then if H0200C is active it must not equal [^].</p> <p>c) If H0200A=[-], then if H0200C is active it must equal [-].</p> <div><div>Items:</div><table><tr><td>H0200A</td><td>Urinary toileting program: has been attempted</td></tr></table></div> | H0200A | Urinary toileting program: has been attempted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| H0200A | Urinary toileting program: has been attempted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| -3542 | Skip pattern | Fatal | Items: H0200C Urinary toileting program: current program/trial If M0210=[1], then all active items from M0300A through M0300B1 must not equal [^]. |
| | | | Items: M0210 Resident has 1+ unhealed PU/injuries M0300A Stage 1 pressure injuries: number present M0300B1 Stage 2 pressure ulcers: number present |
| -3543 | Skip pattern | Fatal | If M0210=[1], then if M0300C1 is active it must not equal [^]. Items: M0210 Resident has 1+ unhealed PU/injuries M0300C1 Stage 3 pressure ulcers: number present |
| | | | If M0210=[1], then if M0300D1 is active it must not equal [^]. Items: M0210 Resident has 1+ unhealed PU/injuries M0300D1 Stage 4 pressure ulcers: number present |
| -3544 | Skip pattern | Fatal | If M0210=[1], then if M0300E1 is active it must not equal [^]. Items: M0210 Resident has 1+ unhealed PU/injuries M0300E1 Unstaged due to drssng/dvc: num present |
| | | | If M0210=[1], then if M0300F1 is active it must not equal [^]. Items: M0210 Resident has 1+ unhealed PU/injuries M0300F1 Unstaged slough/eschar: number present |
| -3545 | Skip pattern | Fatal | If M0210=[1], then if M0300G1 is active it must not equal [^]. Items: M0210 Resident has 1+ unhealed PU/injuries M0300G1 Unstageable - deep tissue injury: # present |
| | | | a) If M0300C1=[1-9], then if M0300C2 is active it must not equal [^]. b) If M0300C1=[0,^], then if M0300C2 is active it must equal [^]. c) If M0300C1=[-], then if M0300C2 is active it must equal [-]. |
| -3549 | Skip pattern | Fatal | Items: M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit/reentry |
| | | | a) If M0300D1=[1-9], then if M0300D2 is active it must not equal [^]. b) If M0300D1=[0,^], then if M0300D2 is active it must equal [^]. c) If M0300D1=[-], then if M0300D2 is active it must equal [-]. |
| -3550 | Skip pattern | Fatal | |
| | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit/reentry |
| | | | |
| -3551 | Skip pattern | Fatal | a) If M0300E1=[1-9], then if M0300E2 is active it must not equal [^]. b) If M0300E1=[0,^], then if M0300E2 is active it must equal [^]. c) If M0300E1=[-], then if M0300E2 is active it must equal [-]. |
| | | | Items: M0300E1 Unstaged due to drssng/dvc: num present M0300E2 Unstaged due to drssng/dvc: num at admit/reentry |
| | | | |
| -3552 | Skip pattern | Fatal | a) If M0300F1=[1-9], then if M0300F2 is active it must not equal [^]. b) If M0300F1=[0,^], then if M0300F2 is active it must equal [^]. c) If M0300F1=[-], then if M0300F2 is active it must equal [-]. |
| | | | Items: M0300F1 Unstaged slough/eschar: number present M0300F2 Unstaged slough/eschar: number at admit/reentry |
| | | | |
| -3553 | Skip pattern | Fatal | a) If M0300G1=[1-9], then if M0300G2 is active it must not equal [^]. b) If M0300G1=[0,^], then if M0300G2 is active it must equal [^]. c) If M0300G1=[-], then if M0300G2 is active it must equal [-]. |
| | | | Items: M0300G1 Unstageable - deep tissue injury: # present M0300G2 Unstageable - deep tissue injury: # at adm/reent |
| | | | |
| -3555 | Skip pattern | Fatal | a) If O0250A=[1], then if O0250B is active it must not equal [^]. b) If O0250A=[0], then if O0250B is active it must equal [^]. c) If O0250A=[-], then if O0250B is active it must equal [-]. |
| | | | Items: O0250A Was influenza vaccine received O0250B Date influenza vaccine received. |
| | | | |
| -3556 | Skip pattern | Fatal | a) If O0300A=[0], then if O0300B is active it must not equal [^]. b) If O0300A=[1], then if O0300B is active it must equal [^]. c) If O0300A=[-], then if O0300B is active it must equal [-]. |
| | | | Items: O0300A Is pneumococcal vaccination up to date O0300B If pneumococcal vacc not received, state reason |
| | | | |
| -3560 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10*** |
| | | | Items: O0400D2 Respiratory therapy: number of days |
| | | | |
| -3565 | Format | Fatal | If the value is not equal to [^], it must be 9 characters long. |
| | | | Items: A0600A Social Security Number |
| | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -3566 | Format | Fatal | Items: X0500 Correction: resident social security number If the value is not equal to [^], the first three characters must not be equal to [000]. |
| | | | Items: A0600A Social Security Number X0500 Correction: resident social security number |
| -3567 | Format | Fatal | The value must not be equal to any of the following: [111111111, 333333333, 123456789, 999999999]. Items: A0600A Social Security Number X0500 Correction: resident social security number |
| | | | If A0100A is not equal to [^], then it must be 10 digits long. |
| -3568 | Format | Fatal | Items: A0100A Facility National Provider Identifier (NPI) |
| | | | a) If C0500=[-,99], then if C0600 is active it must equal [1,-]. b) If C0500=[00-15], then if C0600 is active it must equal [0]. |
| -3586 | Skip pattern | Fatal | Items: C0500 BIMS res interview: summary score C0600 Staff asmt mental status: conduct asmt |
| | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| -3588 | Consistency | Fatal | <p>D0600 must equal the sum of the values of the following ten items: D0500A2, D0500B2, D0500C2, D0500D2, D0500E2, D0500F2, D0500G2, D0500H2, D0500I2, D0500J2. These are referred to as the "items in Column 2", below.</p> <p>The following rules describe the computation of the sum that is placed in D0600. These rules consider the "number of missing items in Column 2" which is the number of items in Column 2 that are equal to [-].</p> <p>a) If all of the items in Column 2 have valid values [0,1,2,3], then D0600 must equal the simple sum of those values.</p> <p>b) If any of the items in Column 2 are equal to [-], then count their values as zero in computing the sum.</p> <p>c) If the number of missing items in Column 2 (as defined above) is equal to one, then compute the simple sum of the nine items in Column 2 that have valid values, multiply the sum by 10/9 (1.111), and place the result rounded to the nearest integer in D0600 (see edit -9013 for rounding rules).</p> <p>d) If the number of missing items in Column 2 (as defined above) is equal to two, then compute the simple sum of the eight items in Column 2 that have valid values, multiply the sum by 10/8 (1.250), and place the result rounded to the nearest integer in D0600 (see edit -9013 for rounding rules).</p> <p>e) If the number of missing items in Column 2 (as defined above) is equal to three or more, then D0600 must equal [-].</p> <p>The MDS Submission System will recalculate the value in D0600. If the recalculated value differs from the submitted value, a fatal error message will be issued and the record will be rejected.</p> |

| | | |
|---------------|---------|--|
| Items: | D0500A2 | PHQ staff: little interest or pleasure - frequency |
| | D0500B2 | PHQ staff: feeling down, depressed - frequency |
| | D0500C2 | PHQ staff: trouble with sleep - frequency |
| | D0500D2 | PHQ staff: feeling tired/little energy - frequency |
| | D0500E2 | PHQ staff: poor appetite or overeating - frequency |
| | D0500F2 | PHQ staff: feeling bad about self - frequency |
| | D0500G2 | PHQ staff: trouble concentrating - frequency |
| | D0500H2 | PHQ staff: slow, fidgety, restless - frequency |
| | D0500I2 | PHQ staff: thoughts better off dead - frequency |
| | D0500J2 | PHQ staff: short-tempered - frequency |
| | D0600 | PHQ staff: total mood score |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---------------|--|--|---------------|--------|---|--|--------|---------------------------------------|--|--------|---|--|--------|---|--|--------|--|--|--------|-----------------------------------|--|--------|--|--|--------|-------------------------------------|--|--------|--|--|--------|--|--|--------|--------------------------------|--|--------|---------------------------------------|--|--------|----------------------------------|--|--------|--|--|--------|---------------------------------------|--|--------|---|--|--------|---|--|-------|--|--|-------|---|
| -3590 | Consistency | Fatal | <p>If F0300 is equal to [1], then the following rules apply:</p> <p>a) If 3 or more items from F0400A through F0500H are equal to [9, -] and at least one of these items is not equal to [-], then F0600 must equal [9, -] and F0700 must equal [1, -].</p> <p>b) If 2 or fewer items from F0400A through F0500H are equal to [9, -], then F0600 must equal [1,2,-] and F0700 must equal [0, -].</p> <p>c) If all items from F0400A through F0500H are equal to [-], then F0600 must equal [-]</p> <table><tr><td>Items:</td><td>F0300</td><td>Conduct res interview for daily/activity prefs</td></tr><tr><td></td><td>F0400A</td><td>Res interview: choose clothes to wear</td></tr><tr><td></td><td>F0400B</td><td>Res interview: take care of personal belongings</td></tr><tr><td></td><td>F0400C</td><td>Res interview: choose tub, bath, shower, sponge</td></tr><tr><td></td><td>F0400D</td><td>Res interview: have snacks between meals</td></tr><tr><td></td><td>F0400E</td><td>Res interview: choose own bedtime</td></tr><tr><td></td><td>F0400F</td><td>Res interview: discuss care with family/friend</td></tr><tr><td></td><td>F0400G</td><td>Res interview: use phone in private</td></tr><tr><td></td><td>F0400H</td><td>Res interview: lock things to keep them safe</td></tr><tr><td></td><td>F0500A</td><td>Res interview: have books, newspaper, mags to read</td></tr><tr><td></td><td>F0500B</td><td>Res interview: listen to music</td></tr><tr><td></td><td>F0500C</td><td>Res interview: be around animals/pets</td></tr><tr><td></td><td>F0500D</td><td>Res interview: keep up with news</td></tr><tr><td></td><td>F0500E</td><td>Res interview: do things with groups of people</td></tr><tr><td></td><td>F0500F</td><td>Res interview: do favorite activities</td></tr><tr><td></td><td>F0500G</td><td>Res interview: go outside when good weather</td></tr><tr><td></td><td>F0500H</td><td>Res interview: participate in religious practices</td></tr><tr><td></td><td>F0600</td><td>Primary respondent: daily/activities prefs</td></tr><tr><td></td><td>F0700</td><td>Conduct staff assessment for daily/activity prefs</td></tr></table> | Items: | F0300 | Conduct res interview for daily/activity prefs | | F0400A | Res interview: choose clothes to wear | | F0400B | Res interview: take care of personal belongings | | F0400C | Res interview: choose tub, bath, shower, sponge | | F0400D | Res interview: have snacks between meals | | F0400E | Res interview: choose own bedtime | | F0400F | Res interview: discuss care with family/friend | | F0400G | Res interview: use phone in private | | F0400H | Res interview: lock things to keep them safe | | F0500A | Res interview: have books, newspaper, mags to read | | F0500B | Res interview: listen to music | | F0500C | Res interview: be around animals/pets | | F0500D | Res interview: keep up with news | | F0500E | Res interview: do things with groups of people | | F0500F | Res interview: do favorite activities | | F0500G | Res interview: go outside when good weather | | F0500H | Res interview: participate in religious practices | | F0600 | Primary respondent: daily/activities prefs | | F0700 | Conduct staff assessment for daily/activity prefs |
| Items: | F0300 | Conduct res interview for daily/activity prefs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0400A | Res interview: choose clothes to wear | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0400B | Res interview: take care of personal belongings | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0400C | Res interview: choose tub, bath, shower, sponge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0400D | Res interview: have snacks between meals | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0400E | Res interview: choose own bedtime | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0400F | Res interview: discuss care with family/friend | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0400G | Res interview: use phone in private | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0400H | Res interview: lock things to keep them safe | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0500A | Res interview: have books, newspaper, mags to read | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0500B | Res interview: listen to music | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0500C | Res interview: be around animals/pets | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0500D | Res interview: keep up with news | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0500E | Res interview: do things with groups of people | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0500F | Res interview: do favorite activities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0500G | Res interview: go outside when good weather | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0500H | Res interview: participate in religious practices | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0600 | Primary respondent: daily/activities prefs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | F0700 | Conduct staff assessment for daily/activity prefs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3595 | None of above | Fatal | <p>If M0100A through M0100C and M0100Z are all active, then the following rules apply:</p> <p>a) If M0100Z=[0], then at least one item from M0100A through M0100C must equal [1].</p> <p>b) If M0100Z=[1], then all items from M0100A through M0100C must equal [0].</p> <p>c) If M0100Z=[-], then at least one item from M0100A through M0100C must equal [-]</p> <table><tr><td>Items:</td><td>M0100A</td><td>Risk determination: has PU/injury, scar, dressing</td></tr><tr><td></td><td>M0100B</td><td>Risk determination: formal assessment</td></tr><tr><td></td><td>M0100C</td><td>Risk determination: clinical assessment</td></tr><tr><td></td><td>M0100Z</td><td>Risk determination: none of the above</td></tr></table> | Items: | M0100A | Risk determination: has PU/injury, scar, dressing | | M0100B | Risk determination: formal assessment | | M0100C | Risk determination: clinical assessment | | M0100Z | Risk determination: none of the above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | M0100A | Risk determination: has PU/injury, scar, dressing | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0100B | Risk determination: formal assessment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0100C | Risk determination: clinical assessment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0100Z | Risk determination: none of the above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------|--------------|--|--|--------|-------|---|--|--------|---|--|--------|--|--|--------|--|--|-------|-----------------------|--|-------|------------------------------|--|-------|--------|--|-------|-------------------|--|-------|-----------------|--|-------|--|--|-------|---|--|--------|---|--|--------|--|--|--------|--|--|--------|---|--|--------|---|--|--------|--|--|-------|-----------------------------------|--|-------|--|--|-------|--|--|-------|---|--|--------|---|--|--------|---|--|--------|--|--|--------|--|--|--------|--|
| -3605 | Consistency | Fatal | <p>a) If J1800=[0], then all active items from J1900A through J1900C must equal [^].</p> <p>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].</p> <p>c) If J1800=[-], then all active items from J1900A through J1900C must equal [-].</p> <table><tr><td>Items:</td><td>J1800</td><td>Falls since admit/prior asmt: any falls</td></tr><tr><td></td><td>J1900A</td><td>Falls since admit/prior asmt: no injury</td></tr><tr><td></td><td>J1900B</td><td>Falls since admit/prior asmt: injury (not major)</td></tr><tr><td></td><td>J1900C</td><td>Falls since admit/prior asmt: major injury</td></tr></table> | Items: | J1800 | Falls since admit/prior asmt: any falls | | J1900A | Falls since admit/prior asmt: no injury | | J1900B | Falls since admit/prior asmt: injury (not major) | | J1900C | Falls since admit/prior asmt: major injury | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | J1800 | Falls since admit/prior asmt: any falls | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | J1900A | Falls since admit/prior asmt: no injury | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | J1900B | Falls since admit/prior asmt: injury (not major) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | J1900C | Falls since admit/prior asmt: major injury | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3609 | Skip pattern | Fatal | <p>If B0100=[1], then all active items from B0200 through F0800Z must equal [^].</p> <table><tr><td>Items:</td><td>B0100</td><td>Comatose</td></tr><tr><td></td><td>B0200</td><td>Hearing</td></tr><tr><td></td><td>B0300</td><td>Hearing aid</td></tr><tr><td></td><td>B0600</td><td>Speech clarity</td></tr><tr><td></td><td>B0700</td><td>Makes self understood</td></tr><tr><td></td><td>B0800</td><td>Ability to understand others</td></tr><tr><td></td><td>B1000</td><td>Vision</td></tr><tr><td></td><td>B1200</td><td>Corrective lenses</td></tr><tr><td></td><td>B1300</td><td>Health Literacy</td></tr><tr><td></td><td>C0100</td><td>BIMS: should resident interview be conducted</td></tr><tr><td></td><td>C0200</td><td>BIMS res interview: repetition of three words</td></tr><tr><td></td><td>C0300A</td><td>BIMS res interview: able to report correct year</td></tr><tr><td></td><td>C0300B</td><td>BIMS res interview: able to report correct month</td></tr><tr><td></td><td>C0300C</td><td>BIMS res interview: can report correct day of week</td></tr><tr><td></td><td>C0400A</td><td>BIMS res interview: able to recall "sock"</td></tr><tr><td></td><td>C0400B</td><td>BIMS res interview: able to recall "blue"</td></tr><tr><td></td><td>C0400C</td><td>BIMS res interview: able to recall "bed"</td></tr><tr><td></td><td>C0500</td><td>BIMS res interview: summary score</td></tr><tr><td></td><td>C0600</td><td>Staff asmt mental status: conduct asmt</td></tr><tr><td></td><td>C0700</td><td>Staff asmt mental status: short-term memory OK</td></tr><tr><td></td><td>C0800</td><td>Staff asmt mental status: long-term memory OK</td></tr><tr><td></td><td>C0900A</td><td>Staff asmt mental status: recall current season</td></tr><tr><td></td><td>C0900B</td><td>Staff asmt mental status: recall location of room</td></tr><tr><td></td><td>C0900C</td><td>Staff asmt mental status: recall staff names/faces</td></tr><tr><td></td><td>C0900D</td><td>Staff asmt mental status: recall in nh/hosp sw bed</td></tr><tr><td></td><td>C0900Z</td><td>Staff asmt mental status: none of above recalled</td></tr></table> | Items: | B0100 | Comatose | | B0200 | Hearing | | B0300 | Hearing aid | | B0600 | Speech clarity | | B0700 | Makes self understood | | B0800 | Ability to understand others | | B1000 | Vision | | B1200 | Corrective lenses | | B1300 | Health Literacy | | C0100 | BIMS: should resident interview be conducted | | C0200 | BIMS res interview: repetition of three words | | C0300A | BIMS res interview: able to report correct year | | C0300B | BIMS res interview: able to report correct month | | C0300C | BIMS res interview: can report correct day of week | | C0400A | BIMS res interview: able to recall "sock" | | C0400B | BIMS res interview: able to recall "blue" | | C0400C | BIMS res interview: able to recall "bed" | | C0500 | BIMS res interview: summary score | | C0600 | Staff asmt mental status: conduct asmt | | C0700 | Staff asmt mental status: short-term memory OK | | C0800 | Staff asmt mental status: long-term memory OK | | C0900A | Staff asmt mental status: recall current season | | C0900B | Staff asmt mental status: recall location of room | | C0900C | Staff asmt mental status: recall staff names/faces | | C0900D | Staff asmt mental status: recall in nh/hosp sw bed | | C0900Z | Staff asmt mental status: none of above recalled |
| Items: | B0100 | Comatose | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B0200 | Hearing | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B0300 | Hearing aid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B0600 | Speech clarity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B0700 | Makes self understood | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B0800 | Ability to understand others | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B1000 | Vision | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B1200 | Corrective lenses | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B1300 | Health Literacy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0100 | BIMS: should resident interview be conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0200 | BIMS res interview: repetition of three words | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0300A | BIMS res interview: able to report correct year | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0300B | BIMS res interview: able to report correct month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0300C | BIMS res interview: can report correct day of week | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0400A | BIMS res interview: able to recall "sock" | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0400B | BIMS res interview: able to recall "blue" | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0400C | BIMS res interview: able to recall "bed" | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0500 | BIMS res interview: summary score | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0600 | Staff asmt mental status: conduct asmt | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0700 | Staff asmt mental status: short-term memory OK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0800 | Staff asmt mental status: long-term memory OK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900A | Staff asmt mental status: recall current season | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900B | Staff asmt mental status: recall location of room | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900C | Staff asmt mental status: recall staff names/faces | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900D | Staff asmt mental status: recall in nh/hosp sw bed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900Z | Staff asmt mental status: none of above recalled | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | C1000 Cognitive skills for daily decision making |
| | | | C1310A Acute Onset Mental Status Change |
| | | | C1310B Inattention |
| | | | C1310C Disorganized Thinking |
| | | | C1310D Altered Level of Consciousness |
| | | | D0100 PHQ: should resident mood interview be conducted |
| | | | D0150A1 Mood: Little interest/pleasure doing things: Pres |
| | | | D0150A2 Mood: Little interest/pleasure doing things: Freq |
| | | | D0150B1 Mood: Feeling down, depressed, or hopeless: Pres |
| | | | D0150B2 Mood: Feeling down, depressed, or hopeless: Freq |
| | | | D0150C1 Mood: Trouble falling or staying asleep: Pres |
| | | | D0150C2 Mood: Trouble falling or staying asleep: Freq |
| | | | D0150D1 Mood: Feeling tired or having little energy: Pres |
| | | | D0150D2 Mood: Feeling tired or having little energy: Freq |
| | | | D0150E1 Mood: Poor appetite or overeating: Pres |
| | | | D0150E2 Mood: Poor appetite or overeating: Freq |
| | | | D0150F1 Mood: Feeling bad about yourself: Pres |
| | | | D0150F2 Mood: Feeling bad about yourself: Freq |
| | | | D0150G1 Mood: Trouble concentrating on things: Pres |
| | | | D0150G2 Mood: Trouble concentrating on things: Freq |
| | | | D0150H1 Mood: Moving or speaking so slowly: Pres |
| | | | D0150H2 Mood: Moving or speaking so slowly: Freq |
| | | | D0150I1 Mood: Thoughts of better off dead: Pres |
| | | | D0150I2 Mood: Thoughts of better off dead: Freq |
| | | | D0160 Total severity score |
| | | | D0500A1 PHQ staff: little interest or pleasure - presence |
| | | | D0500A2 PHQ staff: little interest or pleasure - frequency |
| | | | D0500B1 PHQ staff: feeling down, depressed - presence |
| | | | D0500B2 PHQ staff: feeling down, depressed - frequency |
| | | | D0500C1 PHQ staff: trouble with sleep - presence |
| | | | D0500C2 PHQ staff: trouble with sleep - frequency |
| | | | D0500D1 PHQ staff: feeling tired/little energy - presence |
| | | | D0500D2 PHQ staff: feeling tired/little energy - frequency |
| | | | D0500E1 PHQ staff: poor appetite or overeating - presence |
| | | | D0500E2 PHQ staff: poor appetite or overeating - frequency |
| | | | D0500F1 PHQ staff: feeling bad about self - presence |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | |
| | | D0500F2 | PHQ staff: feeling bad about self - frequency |
| | | D0500G1 | PHQ staff: trouble concentrating - presence |
| | | D0500G2 | PHQ staff: trouble concentrating - frequency |
| | | D0500H1 | PHQ staff: slow, fidgety, restless - presence |
| | | D0500H2 | PHQ staff: slow, fidgety, restless - frequency |
| | | D0500I1 | PHQ staff: thoughts better off dead - presence |
| | | D0500I2 | PHQ staff: thoughts better off dead - frequency |
| | | D0500J1 | PHQ staff: short-tempered - presence |
| | | D0500J2 | PHQ staff: short-tempered - frequency |
| | | D0600 | PHQ staff: total mood score |
| | | D0700 | Social Isolation |
| | | E0100A | Psychosis: hallucinations |
| | | E0100B | Psychosis: delusions |
| | | E0100Z | Psychosis: none of the above |
| | | E0200A | Physical behav symptoms directed toward others |
| | | E0200B | Verbal behav symptoms directed toward others |
| | | E0200C | Other behav symptoms not directed toward others |
| | | E0300 | Overall presence of behavioral symptoms |
| | | E0500A | Behav symptoms put res at risk for illness/injury |
| | | E0500B | Behav symptoms interfere with resident care |
| | | E0500C | Behav symptoms interfere with social activities |
| | | E0600A | Behav symptoms put others at risk for injury |
| | | E0600B | Behav symptoms intrude on privacy of others |
| | | E0600C | Behav symptoms disrupt care or living environment |
| | | E0800 | Rejection of care: presence and frequency |
| | | E0900 | Wandering: presence and frequency |
| | | E1000A | Wandering: risk of getting to dangerous place |
| | | E1000B | Wandering: intrude on privacy of others |
| | | E1100 | Change in behavioral or other symptoms |
| | | F0300 | Conduct res interview for daily/activity prefs |
| | | F0400A | Res interview: choose clothes to wear |
| | | F0400B | Res interview: take care of personal belongings |
| | | F0400C | Res interview: choose tub, bath, shower, sponge |
| | | F0400D | Res interview: have snacks between meals |
| | | F0400E | Res interview: choose own bedtime |
| | | F0400F | Res interview: discuss care with family/friend |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | | Items: F0400G Res interview: use phone in private F0400H Res interview: lock things to keep them safe F0500A Res interview: have books, newspaper, mags to read F0500B Res interview: listen to music F0500C Res interview: be around animals/pets F0500D Res interview: keep up with news F0500E Res interview: do things with groups of people F0500F Res interview: do favorite activities F0500G Res interview: go outside when good weather F0500H Res interview: participate in religious practices F0600 Primary respondent: daily/activities prefs F0700 Conduct staff assessment for daily/activity prefs F0800A Staff assessment: choosing clothes to wear F0800B Staff assessment: caring for personal belongings F0800C Staff assessment: receiving tub bath F0800D Staff assessment: receiving shower F0800E Staff assessment: receiving bed bath F0800F Staff assessment: receiving sponge bath F0800G Staff assessment: snacks between meals F0800H Staff assessment: staying up past 8PM F0800I Staff assessment: discuss care with family/other F0800J Staff assessment: use phone in private F0800K Staff assessment: place to lock personal things F0800L Staff assessment: reading books, newspapers, mags F0800M Staff assessment: listening to music F0800N Staff assessment: being around animals/pets F0800O Staff assessment: keeping up with news F0800P Staff assessment: doing things with groups F0800Q Staff assessment: participate favorite activities F0800R Staff assessment: spend time away from nursng home F0800S Staff assessment: spend time outdoors F0800T Staff assessment: participate religious activities F0800Z Staff assessment: none of above activities |

-3610 Skip pattern Fatal If B0100=[1], then all active items from J0200 through J0850 must equal [^].

Items: B0100 Comatose

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| | | | Items: J0200 Should pain assessment interview be conducted J0300 Res pain interview: presence J0410 Pain Frequency J0510 Pain Effect on Sleep J0520 Pain Interference with Therapy Activities J0530 Pain Interference with Day-to-Day Activities J0600A Res pain interview: intensity rating scale J0600B Res pain interview: verbal descriptor scale J0700 Should staff assessment for pain be conducted J0800A Staff pain asmt: non-verbal sounds J0800B Staff pain asmt: vocal complaints of pain J0800C Staff pain asmt: facial expressions J0800D Staff pain asmt: protective movements/postures J0800Z Staff pain asmt: none of these signs observed J0850 Staff pain asmt: frequency of pain |
| -3658 | Consistency | Fatal | <p>Coding of A0410 depends upon the resident's status on the target date for the assessment. The target date is defined as follows:</p> <p>a) If A0310F is equal to [01], then the target date is equal to A1600 (entry date). b) If A0310F is equal to [10,11,12], then the target date is equal to A2000 (discharge date). c) If A0310F is equal to [99], then the target date is equal to A2300 (assessment reference date).</p> <p>Given the target date, the following rules apply:</p> <p>a) If the resident is on a Medicare/Medicaid certified unit on the target date for the assessment, then A0410 must be equal to [3] (federal required submission).</p> <p>b) If the resident is on a unit that is not Medicare/Medicaid certified on the target date and if the State requires MDS submission for individuals on the resident's unit, then A0410 must be equal to [2] (state but not federal required submission).</p> <p>c) If the facility is completing the assessment for another purpose (other than to satisfy Federal or State requirements), then A0410 must be equal to [1] (neither federal nor state required submission).</p> <p>If A0410 is equal to [2,3], then the assessment MUST be submitted to the MDS Submission System. If A0410 is equal to [1], then the assessment MUST NOT be submitted to the MDS Submission System.</p> <p>NOTE: It is a violation of a resident's right to privacy to submit data to CMS's data systems when the data are not required.</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| | | | Items: A0310F Entry/discharge reporting A0410 Submission requirement A1600 Entry date (date of admission/reentry in facility) A2000 Discharge date A2300 Assessment reference date |
| -3659 | Consistency | Fatal | A0900 (birthdate) cannot be more than 140 years earlier than the current date. |
| | | | Items: A0900 Birthdate |
| -3660 | Consistency | Fatal | <p>The following rules refer to the "BIMS component items" which are C0200, C0300A, C0300B, C0300C, C0400A, C0400B, and C0400C.</p> <p>a) If all of the BIMS component items are active and have numeric values (not dash) and if three or fewer of the BIMS component items are equal to [0], then C0500 must equal the sum of the values of the component items.</p> <p>b) If all of the BIMS component items are active and have numeric values (not dash) and if four or more of the BIMS component items are equal to [0], then C0500 must equal the sum of the values of the component items OR it must equal [99].</p> <p>c) If some, but not all, of the BIMS component items have a value of [-], then C0500 must equal [99].</p> <p>d) If all of the BIMS component items have a value of [-], then C0500 must equal [-].</p> |
| | | | Items: C0200 BIMS res interview: repetition of three words C0300A BIMS res interview: able to report correct year C0300B BIMS res interview: able to report correct month C0300C BIMS res interview: can report correct day of week C0400A BIMS res interview: able to recall "sock" C0400B BIMS res interview: able to recall "blue" C0400C BIMS res interview: able to recall "bed" C0500 BIMS res interview: summary score |
| -3662 | Consistency | Fatal | <p>If M0300B1 is equal to [1-9] and M0300B2 is active, then one of the following must be true:</p> <p>a) M0300B2 must be equal to [-], OR</p> <p>b) M0300B2 must be equal to [0-9] and must be less than or equal to M0300B1.</p> |
| | | | Items: M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit/reentry |
| -3663 | Consistency | Fatal | <p>If M0300C1 is equal to [1-9] and M0300C2 is active, then one of the following must be true:</p> <p>a) M0300C2 must be equal to [-], OR</p> <p>b) M0300C2 must be equal to [0-9] and must be less than or equal to M0300C1.</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|---------------|----------|--|
| | | | Items: M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit/reentry |
| | | | |
| -3664 | Consistency | Fatal | <p>If M0300D1 is equal to [1-9] and M0300D2 is active, then one of the following must be true:</p> <p>a) M0300D2 must be equal to [-], OR</p> <p>b) M0300D2 must be equal to [0-9] and must be less than or equal to M0300D1.</p> |
| | | | Items: M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit/reentry |
| | | | |
| -3665 | Consistency | Fatal | <p>If M0300E1 is equal to [1-9], then one of the following must be true:</p> <p>a) M0300E2 must be equal to [-], OR</p> <p>b) M0300E2 must be equal to [0-9] and must be less than or equal to M0300E1.</p> |
| | | | Items: M0300E1 Unstaged due to drssng/dvc: num present M0300E2 Unstaged due to drssng/dvc: num at admit/reentry |
| | | | |
| -3666 | Consistency | Fatal | <p>If M0300F1 is equal to [1-9] and M0300F2 is active, then one of the following must be true:</p> <p>a) M0300F2 must be equal to [-], OR</p> <p>b) M0300F2 must be equal to [0-9] and must be less than or equal to M0300F1.</p> |
| | | | Items: M0300F1 Unstaged slough/eschar: number present M0300F2 Unstaged slough/eschar: number at admit/reentry |
| | | | |
| -3667 | Consistency | Fatal | <p>If M0300G1 is equal to [1-9], then one of the following must be true:</p> <p>a) M0300G2 must be equal to [-], OR</p> <p>b) M0300G2 must be equal to [0-9] and must be less than or equal to M0300G1.</p> |
| | | | Items: M0300G1 Unstageable - deep tissue injury: # present M0300G2 Unstageable - deep tissue injury: # at adm/reent |
| | | | |
| -3669 | None of above | Fatal | <p>If A1550A through A1550E and A1550Z are all active, then the following rules apply:</p> <p>a) If A1550Z=[0], then at least one item from A1550A through A1550E must equal [1].</p> <p>b) If A1550Z=[1], then all items from A1550A through A1550E must equal [0].</p> <p>c) If A1550Z=[-], then at least one item from A1550A through A1550E must equal [-] and all remaining items must equal [0,-].</p> |
| | | | Items: A1550A ID/DD status: Down syndrome A1550B ID/DD status: Autism A1550C ID/DD status: Epilepsy A1550D ID/DD status: other organic ID/DD condition A1550E ID/DD status: ID/DD with no organic condition A1550Z ID/DD status: none of the above |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------|---|----------|---|-------------|--|-------------|--|---------------|---|----------|---|--------------------|------------------------------------|-------|--------------------------------------|-------|------------------|--------|--------------------------|--------|-------------------------|--------|--|--------|---------------------------|--------|-----------------------------|---------|------------------|--------|---|-------|------------------------|-------|-----|--------|--|--------|--|--------|------------------------------|--------|-----------------------|--------|---|--------|---------------------------------------|
| -3675 | Consistency | Fatal | <p>a) If E0200A or E0200B or E0200C is equal to [1,2,3], then if E0300 is active it must be equal to [1].</p> <p>b) If E0200A and E0200B and E0200C are all equal to [0], then if E0300 is active it must be equal to [0].</p> <p>c) If E0200A, E0200B or E0200C is equal to [-] and the remaining two items are equal to [0,-], then if E0300 is active it must be equal to [0,-].</p> <p>Items:</p> <table><tr><td>E0200A</td><td>Physical behav symptoms directed toward others</td></tr><tr><td>E0200B</td><td>Verbal behav symptoms directed toward others</td></tr><tr><td>E0200C</td><td>Other behav symptoms not directed toward others</td></tr><tr><td>E0300</td><td>Overall presence of behavioral symptoms</td></tr></table> | E0200A | Physical behav symptoms directed toward others | E0200B | Verbal behav symptoms directed toward others | E0200C | Other behav symptoms not directed toward others | E0300 | Overall presence of behavioral symptoms | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| E0200A | Physical behav symptoms directed toward others | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| E0200B | Verbal behav symptoms directed toward others | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| E0200C | Other behav symptoms not directed toward others | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| E0300 | Overall presence of behavioral symptoms | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3676 | Format | Fatal | <p>Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.</p> <p>Items:</p> <table><tr><td>ASMT_SYS_CD</td><td>Assessment system code</td></tr><tr><td>ITM_SBST_CD</td><td>Item subset code</td></tr><tr><td>PRODN_TEST_CD</td><td>Production/test indicator</td></tr><tr><td>STATE_CD</td><td>Facility's state postal code</td></tr><tr><td>STATE_PDPM_OBRA_CD</td><td>State calculation of PDPM for OBRA</td></tr><tr><td>A0050</td><td>Type of transaction (formerly X0100)</td></tr><tr><td>A0200</td><td>Type of provider</td></tr><tr><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td>A0310E</td><td>First assessment since most recent entry</td></tr><tr><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td>A0310G</td><td>Planned/unplanned discharge</td></tr><tr><td>A0310G1</td><td>Interrupted Stay</td></tr><tr><td>A0310H</td><td>SNF PPS Part A Discharge (End of Stay) Assessment</td></tr><tr><td>A0410</td><td>Submission requirement</td></tr><tr><td>A0810</td><td>Sex</td></tr><tr><td>A1005A</td><td>Ethnicity: No, not Hispanic, Latino/a, Spanish</td></tr><tr><td>A1005B</td><td>Ethnicity: Yes, Mex, Mex Amer, Chicano/a</td></tr><tr><td>A1005C</td><td>Ethnicity: Yes, Puerto Rican</td></tr><tr><td>A1005D</td><td>Ethnicity: Yes, Cuban</td></tr><tr><td>A1005E</td><td>Ethnicity: Yes, another Hispanic/Latino/Spanish</td></tr><tr><td>A1005X</td><td>Ethnicity: Resident unable to respond</td></tr></table> | ASMT_SYS_CD | Assessment system code | ITM_SBST_CD | Item subset code | PRODN_TEST_CD | Production/test indicator | STATE_CD | Facility's state postal code | STATE_PDPM_OBRA_CD | State calculation of PDPM for OBRA | A0050 | Type of transaction (formerly X0100) | A0200 | Type of provider | A0310A | Type of assessment: OBRA | A0310B | Type of assessment: PPS | A0310E | First assessment since most recent entry | A0310F | Entry/discharge reporting | A0310G | Planned/unplanned discharge | A0310G1 | Interrupted Stay | A0310H | SNF PPS Part A Discharge (End of Stay) Assessment | A0410 | Submission requirement | A0810 | Sex | A1005A | Ethnicity: No, not Hispanic, Latino/a, Spanish | A1005B | Ethnicity: Yes, Mex, Mex Amer, Chicano/a | A1005C | Ethnicity: Yes, Puerto Rican | A1005D | Ethnicity: Yes, Cuban | A1005E | Ethnicity: Yes, another Hispanic/Latino/Spanish | A1005X | Ethnicity: Resident unable to respond |
| ASMT_SYS_CD | Assessment system code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ITM_SBST_CD | Item subset code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PRODN_TEST_CD | Production/test indicator | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STATE_CD | Facility's state postal code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STATE_PDPM_OBRA_CD | State calculation of PDPM for OBRA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0050 | Type of transaction (formerly X0100) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0200 | Type of provider | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0310E | First assessment since most recent entry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0310G | Planned/unplanned discharge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0310G1 | Interrupted Stay | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0310H | SNF PPS Part A Discharge (End of Stay) Assessment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0410 | Submission requirement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0810 | Sex | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005A | Ethnicity: No, not Hispanic, Latino/a, Spanish | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005B | Ethnicity: Yes, Mex, Mex Amer, Chicano/a | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005C | Ethnicity: Yes, Puerto Rican | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005D | Ethnicity: Yes, Cuban | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005E | Ethnicity: Yes, another Hispanic/Latino/Spanish | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005X | Ethnicity: Resident unable to respond | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | A1005Y Ethnicity: Resident declines to respond |
| | | | A1010A Race: White |
| | | | A1010B Race: Black or African American |
| | | | A1010C Race: American Indian or Alaska Native |
| | | | A1010D Race: Asian Indian |
| | | | A1010E Race: Chinese |
| | | | A1010F Race: Filipino |
| | | | A1010G Race: Japanese |
| | | | A1010H Race: Korean |
| | | | A1010I Race: Vietnamese |
| | | | A1010J Race: Other Asian |
| | | | A1010K Race: Native Hawaiian |
| | | | A1010L Race: Guamanian or Chamorro |
| | | | A1010M Race: Samoan |
| | | | A1010N Race: Other Pacific Islander |
| | | | A1010X Race: Resident unable to respond |
| | | | A1010Y Race: Resident declines to respond |
| | | | A1010Z Race: None of the above |
| | | | A1110B Does the patient need or want an interpreter |
| | | | A1200 Marital status |
| | | | A1255 Transportation |
| | | | A1500 Resident evaluated by PASRR |
| | | | A1510A Level II PASRR conditions: Serious Mental Illness |
| | | | A1510B Level II PASRR conditions: Intellectual Disability |
| | | | A1510C Level II PASRR conditions: Other related condition |
| | | | A1550A ID/DD status: Down syndrome |
| | | | A1550B ID/DD status: Autism |
| | | | A1550C ID/DD status: Epilepsy |
| | | | A1550D ID/DD status: other organic ID/DD condition |
| | | | A1550E ID/DD status: ID/DD with no organic condition |
| | | | A1550Z ID/DD status: none of the above |
| | | | A1700 Type of entry |
| | | | A1805 Admitted from |
| | | | A2105 Discharge location |
| | | | A2121 Current Reconciled Medication List - Provider |
| | | | A2122A Provider Trans - Electronic Health Record |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | A2122B Provider Trans - Health Info Exchange |
| | | | A2122C Provider Trans - Verbal |
| | | | A2122D Provider Trans - Paper-based |
| | | | A2122E Provider Trans - Other Methods |
| | | | A2123 Current Reconciled Medication List - Ptnt/Fam/Care |
| | | | A2124A Patient Trans - Electronic Health Record |
| | | | A2124B Patient Trans - Health Info Exchange |
| | | | A2124C Patient Trans - Verbal |
| | | | A2124D Patient Trans - Paper-based |
| | | | A2124E Patient Trans - Other Methods |
| | | | A2400A Has resident had Medicare-covered stay |
| | | | B0100 Comatose |
| | | | B0200 Hearing |
| | | | B0300 Hearing aid |
| | | | B0600 Speech clarity |
| | | | B0700 Makes self understood |
| | | | B0800 Ability to understand others |
| | | | B1000 Vision |
| | | | B1200 Corrective lenses |
| | | | B1300 Health Literacy |
| | | | C0100 BIMS: should resident interview be conducted |
| | | | C0200 BIMS res interview: repetition of three words |
| | | | C0300A BIMS res interview: able to report correct year |
| | | | C0300B BIMS res interview: able to report correct month |
| | | | C0300C BIMS res interview: can report correct day of week |
| | | | C0400A BIMS res interview: able to recall "sock" |
| | | | C0400B BIMS res interview: able to recall "blue" |
| | | | C0400C BIMS res interview: able to recall "bed" |
| | | | C0600 Staff asmt mental status: conduct asmt |
| | | | C0700 Staff asmt mental status: short-term memory OK |
| | | | C0800 Staff asmt mental status: long-term memory OK |
| | | | C0900A Staff asmt mental status: recall current season |
| | | | C0900B Staff asmt mental status: recall location of room |
| | | | C0900C Staff asmt mental status: recall staff names/faces |
| | | | C0900D Staff asmt mental status: recall in nh/hosp sw bed |
| | | | C0900Z Staff asmt mental status: none of above recalled |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | C1000 Cognitive skills for daily decision making |
| | | | C1310A Acute Onset Mental Status Change |
| | | | C1310B Inattention |
| | | | C1310C Disorganized Thinking |
| | | | C1310D Altered Level of Consciousness |
| | | | D0100 PHQ: should resident mood interview be conducted |
| | | | D0150A1 Mood: Little interest/pleasure doing things: Pres |
| | | | D0150A2 Mood: Little interest/pleasure doing things: Freq |
| | | | D0150B1 Mood: Feeling down, depressed, or hopeless: Pres |
| | | | D0150B2 Mood: Feeling down, depressed, or hopeless: Freq |
| | | | D0150C1 Mood: Trouble falling or staying asleep: Pres |
| | | | D0150C2 Mood: Trouble falling or staying asleep: Freq |
| | | | D0150D1 Mood: Feeling tired or having little energy: Pres |
| | | | D0150D2 Mood: Feeling tired or having little energy: Freq |
| | | | D0150E1 Mood: Poor appetite or overeating: Pres |
| | | | D0150E2 Mood: Poor appetite or overeating: Freq |
| | | | D0150F1 Mood: Feeling bad about yourself: Pres |
| | | | D0150F2 Mood: Feeling bad about yourself: Freq |
| | | | D0150G1 Mood: Trouble concentrating on things: Pres |
| | | | D0150G2 Mood: Trouble concentrating on things: Freq |
| | | | D0150H1 Mood: Moving or speaking so slowly: Pres |
| | | | D0150H2 Mood: Moving or speaking so slowly: Freq |
| | | | D0150I1 Mood: Thoughts of better off dead: Pres |
| | | | D0150I2 Mood: Thoughts of better off dead: Freq |
| | | | D0500A1 PHQ staff: little interest or pleasure - presence |
| | | | D0500A2 PHQ staff: little interest or pleasure - frequency |
| | | | D0500B1 PHQ staff: feeling down, depressed - presence |
| | | | D0500B2 PHQ staff: feeling down, depressed - frequency |
| | | | D0500C1 PHQ staff: trouble with sleep - presence |
| | | | D0500C2 PHQ staff: trouble with sleep - frequency |
| | | | D0500D1 PHQ staff: feeling tired/little energy - presence |
| | | | D0500D2 PHQ staff: feeling tired/little energy - frequency |
| | | | D0500E1 PHQ staff: poor appetite or overeating - presence |
| | | | D0500E2 PHQ staff: poor appetite or overeating - frequency |
| | | | D0500F1 PHQ staff: feeling bad about self - presence |
| | | | D0500F2 PHQ staff: feeling bad about self - frequency |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | |
| | | D0500G1 | PHQ staff: trouble concentrating - presence |
| | | D0500G2 | PHQ staff: trouble concentrating - frequency |
| | | D0500H1 | PHQ staff: slow, fidgety, restless - presence |
| | | D0500H2 | PHQ staff: slow, fidgety, restless - frequency |
| | | D0500I1 | PHQ staff: thoughts better off dead - presence |
| | | D0500I2 | PHQ staff: thoughts better off dead - frequency |
| | | D0500J1 | PHQ staff: short-tempered - presence |
| | | D0500J2 | PHQ staff: short-tempered - frequency |
| | | D0700 | Social Isolation |
| | | E0100A | Psychosis: hallucinations |
| | | E0100B | Psychosis: delusions |
| | | E0100Z | Psychosis: none of the above |
| | | E0200A | Physical behav symptoms directed toward others |
| | | E0200B | Verbal behav symptoms directed toward others |
| | | E0200C | Other behav symptoms not directed toward others |
| | | E0300 | Overall presence of behavioral symptoms |
| | | E0500A | Behav symptoms put res at risk for illness/injury |
| | | E0500B | Behav symptoms interfere with resident care |
| | | E0500C | Behav symptoms interfere with social activities |
| | | E0600A | Behav symptoms put others at risk for injury |
| | | E0600B | Behav symptoms intrude on privacy of others |
| | | E0600C | Behav symptoms disrupt care or living environment |
| | | E0800 | Rejection of care: presence and frequency |
| | | E0900 | Wandering: presence and frequency |
| | | E1000A | Wandering: risk of getting to dangerous place |
| | | E1000B | Wandering: intrude on privacy of others |
| | | E1100 | Change in behavioral or other symptoms |
| | | F0300 | Conduct res interview for daily/activity prefs |
| | | F0400A | Res interview: choose clothes to wear |
| | | F0400B | Res interview: take care of personal belongings |
| | | F0400C | Res interview: choose tub, bath, shower, sponge |
| | | F0400D | Res interview: have snacks between meals |
| | | F0400E | Res interview: choose own bedtime |
| | | F0400F | Res interview: discuss care with family/friend |
| | | F0400G | Res interview: use phone in private |
| | | F0400H | Res interview: lock things to keep them safe |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | F0500A Res interview: have books, newspaper, mags to read |
| | | | F0500B Res interview: listen to music |
| | | | F0500C Res interview: be around animals/pets |
| | | | F0500D Res interview: keep up with news |
| | | | F0500E Res interview: do things with groups of people |
| | | | F0500F Res interview: do favorite activities |
| | | | F0500G Res interview: go outside when good weather |
| | | | F0500H Res interview: participate in religious practices |
| | | | F0600 Primary respondent: daily/activities prefs |
| | | | F0700 Conduct staff assessment for daily/activity prefs |
| | | | F0800A Staff assessment: choosing clothes to wear |
| | | | F0800B Staff assessment: caring for personal belongings |
| | | | F0800C Staff assessment: receiving tub bath |
| | | | F0800D Staff assessment: receiving shower |
| | | | F0800E Staff assessment: receiving bed bath |
| | | | F0800F Staff assessment: receiving sponge bath |
| | | | F0800G Staff assessment: snacks between meals |
| | | | F0800H Staff assessment: staying up past 8PM |
| | | | F0800I Staff assessment: discuss care with family/other |
| | | | F0800J Staff assessment: use phone in private |
| | | | F0800K Staff assessment: place to lock personal things |
| | | | F0800L Staff assessment: reading books, newspapers, mags |
| | | | F0800M Staff assessment: listening to music |
| | | | F0800N Staff assessment: being around animals/pets |
| | | | F0800O Staff assessment: keeping up with news |
| | | | F0800P Staff assessment: doing things with groups |
| | | | F0800Q Staff assessment: participate favorite activities |
| | | | F0800R Staff assessment: spend time away from nursng home |
| | | | F0800S Staff assessment: spend time outdoors |
| | | | F0800T Staff assessment: participate religious activities |
| | | | F0800Z Staff assessment: none of above activities |
| | | | GG0100A Prior Functioning - Self Care |
| | | | GG0100B Prior Functioning - Indoor Mobility (Ambulation) |
| | | | GG0100C Prior Functioning - Stairs |
| | | | GG0100D Prior Functioning - Functional Cognition |
| | | | GG0110A Prior Device Use - Manual wheelchair |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | GG0110B Prior Device Use - Mtrzd wheelchair and/or scooter |
| | | | GG0110C Prior Device Use - Mechanical lift |
| | | | GG0110D Prior Device Use - Walker |
| | | | GG0110E Prior Device Use - Orthotics/Prosthetics |
| | | | GG0110Z Prior Device Use - None of the above |
| | | | GG0115A Functional limits - Upper extremity |
| | | | GG0115B Functional limits - Lower extremity |
| | | | GG0120A Mobility Device - Cane/Crutch |
| | | | GG0120B Mobility Device - Walker |
| | | | GG0120C Mobility Device - Wheelchair (manual or electric) |
| | | | GG0120D Mobility Device - Limb prosthesis |
| | | | GG0120Z Mobility Device - None of the Above |
| | | | GG0130A1 Eating (Start of Stay Perf) |
| | | | GG0130A3 Eating (Dschg Perf) |
| | | | GG0130A5 Eating (Interim Perf) |
| | | | GG0130B1 Oral hygiene (Start of Stay Perf) |
| | | | GG0130B3 Oral hygiene (Dschg Perf) |
| | | | GG0130B5 Oral hygiene (Interim Perf) |
| | | | GG0130C1 Toileting hygiene (Start of Stay Perf) |
| | | | GG0130C3 Toileting hygiene (Dschg Perf) |
| | | | GG0130C5 Toileting hygiene (Interim Perf) |
| | | | GG0130E1 Shower/bathe self (Start of Stay Perf) |
| | | | GG0130E3 Shower/bathe self (Dschg Perf) |
| | | | GG0130E5 Shower/bathe self (Interim Perf) |
| | | | GG0130F1 Upper body dressing (Start of Stay Perf) |
| | | | GG0130F3 Upper body dressing (Dschg Perf) |
| | | | GG0130F5 Upper body dressing (Interim Perf) |
| | | | GG0130G1 Lower body dressing (Start of Stay Perf) |
| | | | GG0130G3 Lower body dressing (Dschg Perf) |
| | | | GG0130G5 Lower body dressing (Interim Perf) |
| | | | GG0130H1 Put on/take off footwear (Start of Stay Perf) |
| | | | GG0130H3 Put on/take off footwear (Dschg Perf) |
| | | | GG0130H5 Put on/take off footwear (Interim Perf) |
| | | | GG0130I1 Personal Hygiene (Start of Stay Perf) |
| | | | GG0130I3 Personal Hygiene (Dschg Perf) |
| | | | GG0130I5 Personal Hygiene (Interim Perf) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | GG0170A1 Roll left and right (Start of Stay Perf) |
| | | | GG0170A3 Roll left and right (Dschg Perf) |
| | | | GG0170A5 Roll left and right (Interim Perf) |
| | | | GG0170B1 Sit to lying (Start of Stay Perf) |
| | | | GG0170B3 Sit to lying (Dschg Perf) |
| | | | GG0170B5 Sit to lying (Interim Perf) |
| | | | GG0170C1 Lying to sitting on bed side (Start of Stay Perf) |
| | | | GG0170C3 Lying to sitting on bed side (Dschg Perf) |
| | | | GG0170C5 Lying to sitting on bed side (Interim Perf) |
| | | | GG0170D1 Sit to stand (Start of Stay Perf) |
| | | | GG0170D3 Sit to stand (Dschg Perf) |
| | | | GG0170D5 Sit to stand (Interim Perf) |
| | | | GG0170E1 Chair/bed-to-chair transfer (Start of Stay Perf) |
| | | | GG0170E3 Chair/bed-to-chair transfer (Dschg Perf) |
| | | | GG0170E5 Chair/bed-to-chair transfer (Interim Perf) |
| | | | GG0170F1 Toilet transfer (Start of Stay Perf) |
| | | | GG0170F3 Toilet transfer (Dschg Perf) |
| | | | GG0170F5 Toilet transfer (Interim Perf) |
| | | | GG0170FF1 Tub/Showr Transfer (Start of Stay Perf) |
| | | | GG0170FF3 Tub/Showr Transfer (Dschg Perf) |
| | | | GG0170FF5 Tub/Showr Transfer (Interim Perf) |
| | | | GG0170G1 Car transfer (Start of Stay Perf) |
| | | | GG0170G3 Car transfer (Dschg Perf) |
| | | | GG0170I1 Walk 10 feet (Start of Stay Perf) |
| | | | GG0170I3 Walk 10 feet (Dschg Perf) |
| | | | GG0170I5 Walk 10 feet (Interim Perf) |
| | | | GG0170J1 Walk 50 feet with two turns (Start of Stay Perf) |
| | | | GG0170J3 Walk 50 feet with two turns (Dschg Perf) |
| | | | GG0170J5 Walk 50 feet with two turns (Interim Perf) |
| | | | GG0170K1 Walk 150 feet (Start of Stay Perf) |
| | | | GG0170K3 Walk 150 feet (Dschg Perf) |
| | | | GG0170K5 Walk 150 feet (Interim Perf) |
| | | | GG0170L1 Walking 10 feet uneven surf (Start of Stay Perf) |
| | | | GG0170L3 Walking 10 feet uneven surf (Dschg Perf) |
| | | | GG0170M1 1 step (curb) (Start of Stay Perf) |
| | | | GG0170M3 1 step (curb) (Dschg Perf) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | GG0170N1 4 steps (Start of Stay Perf) |
| | | | GG0170N3 4 steps (Dschg Perf) |
| | | | GG0170O1 12 steps (Start of Stay Perf) |
| | | | GG0170O3 12 steps (Dschg Perf) |
| | | | GG0170P1 Picking up object (Start of Stay Perf) |
| | | | GG0170P3 Picking up object (Dschg Perf) |
| | | | GG0170Q1 Use wheelchair and/or scooter (Start of Stay Perf) |
| | | | GG0170Q3 Use wheelchair and/or scooter (Dschg Perf) |
| | | | GG0170Q5 Use wheelchair and/or scooter (Interim Perf) |
| | | | GG0170R1 Wheel 50 feet with two turns (Start of Stay Perf) |
| | | | GG0170R3 Wheel 50 feet with two turns (Dschg Perf) |
| | | | GG0170R5 Wheel 50 feet with two turns (Interim Perf) |
| | | | GG0170RR1 Type of wheelchair or scooter (Start of Stay Perf) |
| | | | GG0170RR3 Type of wheelchair or scooter (Dschg Perf) |
| | | | GG0170RR5 Type of wheelchair or scooter (Interim Perf) |
| | | | GG0170S1 Wheel 150 feet (Start of Stay Perf) |
| | | | GG0170S3 Wheel 150 feet (Dschg Perf) |
| | | | GG0170S5 Wheel 150 feet (Interim Perf) |
| | | | GG0170SS1 Type of wheelchair or scooter (Start of Stay Perf) |
| | | | GG0170SS3 Type of wheelchair or scooter (Dschg Perf) |
| | | | GG0170SS5 Type of wheelchair or scooter (Interim Perf) |
| | | | H0100A Appliances: indwelling catheter |
| | | | H0100B Appliances: external catheter |
| | | | H0100C Appliances: ostomy |
| | | | H0100D Appliances: intermittent catheterization |
| | | | H0100Z Appliances: none of the above |
| | | | H0200A Urinary toileting program: has been attempted |
| | | | H0200B Urinary toileting program: response |
| | | | H0200C Urinary toileting program: current program/trial |
| | | | H0300 Urinary continence |
| | | | H0400 Bowel continence |
| | | | H0500 Bowel toileting program being used |
| | | | H0600 Constipation |
| | | | I0020 Primary Medical Condition Category |
| | | | I0100 Cancer (with or without metastasis) |
| | | | I0200 Anemia |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | |
| | | I0300 | Atrial fibrillation and other dysrhythmias |
| | | I0400 | Coronary artery disease (CAD) |
| | | I0500 | Deep venous thrombosis (DVT), PE, or PTE |
| | | I0600 | Heart failure |
| | | I0700 | Hypertension |
| | | I0800 | Orthostatic hypotension |
| | | I0900 | Peripheral vascular disease (PVD) or PAD |
| | | I1100 | Cirrhosis |
| | | I1200 | Gastroesophageal reflux disease (GERD) or ulcer |
| | | I1300 | Ulcerative colitis, Crohn's, inflam bowel disease |
| | | I1400 | Benign prostatic hyperplasia (BPH) |
| | | I1500 | Renal insufficiency, renal failure, ESRD |
| | | I1550 | Neurogenic bladder |
| | | I1650 | Obstructive uropathy |
| | | I1700 | Multidrug resistant organism (MDRO) |
| | | I2000 | Pneumonia |
| | | I2100 | Septicemia |
| | | I2200 | Tuberculosis |
| | | I2300 | Urinary tract infection (UTI) (LAST 30 DAYS) |
| | | I2400 | Viral hepatitis (includes type A, B, C, D, and E) |
| | | I2500 | Wound infection (other than foot) |
| | | I2900 | Diabetes mellitus (DM) |
| | | I3100 | Hyponatremia |
| | | I3200 | Hyperkalemia |
| | | I3300 | Hyperlipidemia (e.g., hypercholesterolemia) |
| | | I3400 | Thyroid disorder |
| | | I3700 | Arthritis |
| | | I3800 | Osteoporosis |
| | | I3900 | Hip fracture |
| | | I4000 | Other fracture |
| | | I4200 | Alzheimer's disease |
| | | I4300 | Aphasia |
| | | I4400 | Cerebral palsy |
| | | I4500 | Cerebrovascular accident (CVA), TIA, or stroke |
| | | I4800 | Non-Alzheimer's dementia |
| | | I4900 | Hemiplegia or hemiparesis |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | I5000 Paraplegia |
| | | | I5100 Quadriplegia |
| | | | I5200 Multiple sclerosis |
| | | | I5250 Huntington's disease |
| | | | I5300 Parkinson's disease |
| | | | I5350 Tourette's syndrome |
| | | | I5400 Seizure disorder or epilepsy |
| | | | I5500 Traumatic brain injury (TBI) |
| | | | I5600 Malnutrition (protein, calorie), risk of malnutrit |
| | | | I5700 Anxiety disorder |
| | | | I5800 Depression (other than bipolar) |
| | | | I5900 Bipolar disorder |
| | | | I5950 Psychotic disorder (other than schizophrenia) |
| | | | I6000 Schizophrenia |
| | | | I6100 Post-traumatic stress disorder (PTSD) |
| | | | I6200 Asthma (COPD) or chronic lung disease |
| | | | I6300 Respiratory failure |
| | | | I6500 Cataracts, glaucoma, or macular degeneration |
| | | | I7900 None of above active diseases within last 7 days |
| | | | J0100A Pain: received scheduled pain med regimen |
| | | | J0100B Pain: received PRN pain medications |
| | | | J0100C Pain: received non-medication intervention |
| | | | J0200 Should pain assessment interview be conducted |
| | | | J0300 Res pain interview: presence |
| | | | J0410 Pain Frequency |
| | | | J0510 Pain Effect on Sleep |
| | | | J0520 Pain Interference with Therapy Activities |
| | | | J0530 Pain Interference with Day-to-Day Activities |
| | | | J0600B Res pain interview: verbal descriptor scale |
| | | | J0700 Should staff assessment for pain be conducted |
| | | | J0800A Staff pain asmt: non-verbal sounds |
| | | | J0800B Staff pain asmt: vocal complaints of pain |
| | | | J0800C Staff pain asmt: facial expressions |
| | | | J0800D Staff pain asmt: protective movements/postures |
| | | | J0800Z Staff pain asmt: none of these signs observed |
| | | | J0850 Staff pain asmt: frequency of pain |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | J1100A Short breath/trouble breathing: with exertion |
| | | | J1100B Short breath/trouble breathing: sitting at rest |
| | | | J1100C Short breath/trouble breathing: lying flat |
| | | | J1100Z Short breath/trouble breathing: none of above |
| | | | J1300 Current tobacco use |
| | | | J1400 Prognosis: life expectancy of less than 6 months |
| | | | J1550A Problem conditions: fever |
| | | | J1550B Problem conditions: vomiting |
| | | | J1550C Problem conditions: dehydrated |
| | | | J1550D Problem conditions: internal bleeding |
| | | | J1550Z Problem conditions: none of the above |
| | | | J1700A Fall history: fall during month before admission |
| | | | J1700B Fall history: fall 2-6 months before admission |
| | | | J1700C Fall history: fracture from fall 6 month pre admit |
| | | | J1800 Falls since admit/prior asmt: any falls |
| | | | J1900A Falls since admit/prior asmt: no injury |
| | | | J1900B Falls since admit/prior asmt: injury (not major) |
| | | | J1900C Falls since admit/prior asmt: major injury |
| | | | J2000 Prior Surgery (100 days) |
| | | | J2100 Recent Surgery Requiring Active SNF Care |
| | | | J2300 Knee Replacement - partial or total |
| | | | J2310 Hip Replacement - partial or total |
| | | | J2320 Ankle Replacement - partial or total |
| | | | J2330 Shoulder Replacement - partial or total |
| | | | J2400 Spinal Surgery-spinal cord or major spinal nerves |
| | | | J2410 Spinal surgery - fusion of spinal bones |
| | | | J2420 Spinal surgery - lamina, discs, or facets |
| | | | J2499 Spinal surgery - other |
| | | | J2500 Ortho srgr - rpr frctrd shoulder/arm |
| | | | J2510 Ortho srgr - rpr frctrd pelvis/hip/leg/knee/ankle |
| | | | J2520 Ortho srgr - rpr but not replace joints |
| | | | J2530 Ortho srgr - rpr other bones |
| | | | J2599 Ortho srgr - other |
| | | | J2600 Neuro surgery - brain, surrounding tissue |
| | | | J2610 Neuro surgery - nervous system |
| | | | J2620 Neuro surgery - nsrt neural/brain neurostimulators |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | J2699 Neuro surgery - other |
| | | | J2700 Cardiopulmonary surgery - heart/mjr bld vssls |
| | | | J2710 Cardiopulmonary surgery - respiratory system |
| | | | J2799 Cardiopulmonary surgery - other |
| | | | J2800 Genitourinary surgery - male or female organs |
| | | | J2810 Genitourinary surgery - kidneys |
| | | | J2899 Genitourinary surgery - other |
| | | | J2900 Major surgery - tendons, ligament, or muscles |
| | | | J2910 Major surgery - GI tract/abdominal contents |
| | | | J2920 Major surgery - endocrine organs |
| | | | J2930 Major surgery - breast |
| | | | J2940 Major surgery - repair deep ulcers |
| | | | J5000 Major surgery - other not listed above |
| | | | K0100A Swallow disorder: loss liquids/solids from mouth |
| | | | K0100B Swallow disorder: holds food in mouth/cheeks |
| | | | K0100C Swallow disorder: cough/choke with meals/meds |
| | | | K0100D Swallow disorder: difficulty or pain swallowing |
| | | | K0100Z Swallow disorder: none of the above |
| | | | K0300 Weight loss |
| | | | K0310 Weight Gain |
| | | | K0520A1 Nutritional Approaches (Admission): Parenteral |
| | | | K0520A2 Nutritional Approaches (Non-res): Parenteral |
| | | | K0520A3 Nutritional Approaches (7 days): Parenteral |
| | | | K0520A4 Nutritional Approaches (Discharge): Parenteral |
| | | | K0520B1 Nutritional Approaches (Admission): Feeding tube |
| | | | K0520B2 Nutritional Approaches (Non-res): Feeding tube |
| | | | K0520B3 Nutritional Approaches (7 days): Feeding tube |
| | | | K0520B4 Nutritional Approaches (Discharge): Feeding tube |
| | | | K0520C1 Nutritional Approaches (Admission): Mech Alt Diet |
| | | | K0520C3 Nutritional Approaches (7-day): Mech Alt Diet |
| | | | K0520C4 Nutritional Approaches (Discharge): Mech Alt Diet |
| | | | K0520D1 Nutritional Approaches (Admission): Therapeutic |
| | | | K0520D3 Nutritional Approaches (7-day): Therapeutic |
| | | | K0520D4 Nutritional Approaches (Discharge): Therapeutic |
| | | | K0520Z1 Nutritional Approaches (Admission): None |
| | | | K0520Z2 Nutritional Approaches (Non-res): None |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | K0520Z3 Nutritional Approaches (7-day): None |
| | | | K0520Z4 Nutritional Approaches (Discharge): None |
| | | | K0710A2 Prop calories parenteral/tube feed: while resident |
| | | | K0710A3 Prop calories parenteral/tube feed: 7 days |
| | | | K0710B2 Avg fluid intake per day IV/ tube: while resident |
| | | | K0710B3 Avg fluid intake per day IV/tube: 7 days |
| | | | L0200A Dental: broken or loosely fitting denture |
| | | | L0200B Dental: no natural teeth or tooth fragment(s) |
| | | | L0200C Dental: abnormal mouth tissue |
| | | | L0200D Dental: cavity or broken natural teeth |
| | | | L0200E Dental: inflamed/bleeding gums or loose teeth |
| | | | L0200F Dental: pain, discomfort, difficulty chewing |
| | | | L0200G Dental: unable to examine |
| | | | L0200Z Dental: none of the above |
| | | | M0100A Risk determination: has PU/injury, scar, dressing |
| | | | M0100B Risk determination: formal assessment |
| | | | M0100C Risk determination: clinical assessment |
| | | | M0100Z Risk determination: none of the above |
| | | | M0150 Is resident at risk of developing PU/injuries |
| | | | M0210 Resident has 1+ unhealed PU/injuries |
| | | | M1040A Other skin probs: infection of the foot |
| | | | M1040B Other skin probs: diabetic foot ulcer(s) |
| | | | M1040C Other skin probs: other open lesion(s) on the foot |
| | | | M1040D Other skin probs: lesions not ulcers, rashes, cuts |
| | | | M1040E Other skin probs: surgical wound(s) |
| | | | M1040F Other skin probs: burns (second or third degree) |
| | | | M1040G Skin Tear(s) |
| | | | M1040H Moisture Associated Skin Damage (MASD) |
| | | | M1040Z Other skin probs: none of the above |
| | | | M1200A Skin/ulcer/injry treat: prssr rduce dvc for chair |
| | | | M1200B Skin/ulcer/injry treat: prssr reducing dvc for bed |
| | | | M1200C Skin/ulcer/injry treat: turning/repositioning |
| | | | M1200D Skin/ulcer/injry treat: nutrition/hydration |
| | | | M1200E Skin/ulcer/injry treat: prssr ulcer/injry care |
| | | | M1200F Skin/ulcer/injry treat: surgical wound care |
| | | | M1200G Skin/ulcer/injry treat: application of dressings |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | |
| | | M1200H | Skin/ulcer/injry treat: apply ointments/meds |
| | | M1200I | Skin/ulcer/injry treat: apply dressings to feet |
| | | M1200Z | Skin/ulcer/injry treat: none of the above |
| | | N0415A1 | High-Risk Drug (Is Taking): Antipsychotic |
| | | N0415A2 | High-Risk Drug (Indication): Antipsychotic |
| | | N0415B1 | High-Risk Drug (Is Taking): Antianxiety |
| | | N0415B2 | High-Risk Drug (Indication): Antianxiety |
| | | N0415C1 | High-Risk Drug (Is Taking): Antidepressant |
| | | N0415C2 | High-Risk Drug (Indication): Antidepressant |
| | | N0415D1 | High-Risk Drug (Is Taking): Hypnotic |
| | | N0415D2 | High-Risk Drug (Indication): Hypnotic |
| | | N0415E1 | High-Risk Drug (Is Taking): Anticoagulant |
| | | N0415E2 | High-Risk Drug (Indication): Anticoagulant |
| | | N0415F1 | High-Risk Drug (Is Taking): Antibiotic |
| | | N0415F2 | High-Risk Drug (Indication): Antibiotic |
| | | N0415G1 | High-Risk Drug (Is Taking): Diuretic |
| | | N0415G2 | High-Risk Drug (Indication): Diuretic |
| | | N0415H1 | High-Risk Drug (Is Taking): Opioid |
| | | N0415H2 | High-Risk Drug (Indication): Opioid |
| | | N0415I1 | High-Risk Drug (Is Taking): Antiplatelet |
| | | N0415I2 | High-Risk Drug (Indication): Antiplatelet |
| | | N0415J1 | High-Risk Drug (Is Taking): Hypoglycemic |
| | | N0415J2 | High-Risk Drug (Indication): Hypoglycemic |
| | | N0415K1 | High-Risk Drug (Is Taking): Anticonvulsant |
| | | N0415K2 | High-Risk Drug (Indication): Anticonvulsant |
| | | N0415Z1 | High-Risk Drug (Is taking): None of the Above |
| | | N0450A | Resident received antipsychotic medications |
| | | N0450B | GDR attempted |
| | | N0450D | Physician documented GDR |
| | | N2001 | Drug Regimen Review |
| | | N2003 | Medication Follow-up |
| | | N2005 | Medication Intervention |
| | | O0110A1A | Treatment: Chemotherapy (Admission) |
| | | O0110A1B | Treatment: Chemotherapy (14 days) |
| | | O0110A1C | Treatment: Chemotherapy (Discharge) |
| | | O0110A2A | Treatment: Chemo - IV (Admission) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | O0110A2C Treatment: Chemo - IV (Discharge) |
| | | | O0110A3A Treatment: Chemo - Oral (Admission) |
| | | | O0110A3C Treatment: Chemo - Oral (Discharge) |
| | | | O0110A10A Treatment: Chemo - Other (Admission) |
| | | | O0110A10C Treatment: Chemo - Other (Discharge) |
| | | | O0110B1A Treatment: Radiation (Admission) |
| | | | O0110B1B Treatment: Radiation (14 days) |
| | | | O0110B1C Treatment: Radiation (Discharge) |
| | | | O0110C1A Therapies: Oxygen Therapy (Admission) |
| | | | O0110C1B Therapies: Oxygen Therapy (14 days) |
| | | | O0110C1C Therapies: Oxygen Therapy (Discharge) |
| | | | O0110C2A Therapies: Oxygen - Continuous (Admission) |
| | | | O0110C2C Therapies: Oxygen - Continuous (Discharge) |
| | | | O0110C3A Therapies: Oxygen - Intermittent (Admission) |
| | | | O0110C3C Therapies: Oxygen - Intermittent (Discharge) |
| | | | O0110C4A Therapies: Oxygen - High-concentration (Admission) |
| | | | O0110C4C Therapies: Oxygen - High-concentration (Discharge) |
| | | | O0110D1A Therapies: Suctioning (Admission) |
| | | | O0110D1B Therapies: Suctioning (14 days) |
| | | | O0110D1C Therapies: Suctioning (Discharge) |
| | | | O0110D2A Therapies: Suctioning - Scheduled (Admission) |
| | | | O0110D2C Therapies: Suctioning - Scheduled (Discharge) |
| | | | O0110D3A Therapies: Suctioning - As Needed (Admission) |
| | | | O0110D3C Therapies: Suctioning - As Needed (Discharge) |
| | | | O0110E1A Therapies: Tracheostomy Care (Admission) |
| | | | O0110E1B Therapies: Tracheostomy Care (14 days) |
| | | | O0110E1C Therapies: Tracheostomy Care (Discharge) |
| | | | O0110F1A Therapies: Invasive Mechanical Ventilator (Admis) |
| | | | O0110F1B Therapies: Invasive Mechanical Ventilator (14day) |
| | | | O0110F1C Therapies: Invasive Mechanical Ventilator (Disch) |
| | | | O0110G1A Therapies: Non-Invas Mechanical Ventilator (Admis) |
| | | | O0110G1B Therapies: Non-Invas Mechanical Ventilator (14day) |
| | | | O0110G1C Therapies: Non-Invas Mechanical Ventilator (Disch) |
| | | | O0110G2A Therapies: BiPAP (Admission) |
| | | | O0110G2C Therapies: BiPAP (Discharge) |
| | | | O0110G3A Therapies: CPAP (Admission) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | <div> <div>O0110G3C</div> <div>Therapies: CPAP (Discharge)</div> </div> <div> <div>O0110H1A</div> <div>Other: IV Medications (Admission)</div> </div> <div> <div>O0110H1B</div> <div>Other: IV Medications (14 days)</div> </div> <div> <div>O0110H1C</div> <div>Other: IV Medications (Discharge)</div> </div> <div> <div>O0110H2A</div> <div>Other: IV - Vasoactive medications (Admission)</div> </div> <div> <div>O0110H2C</div> <div>Other: IV - Vasoactive medications (Discharge)</div> </div> <div> <div>O0110H3A</div> <div>Other: IV - Antibiotics (Admission)</div> </div> <div> <div>O0110H3C</div> <div>Other: IV - Antibiotics (Discharge)</div> </div> <div> <div>O0110H4A</div> <div>Other: IV - Anticoagulation (Admission)</div> </div> <div> <div>O0110H4C</div> <div>Other: IV - Anticoagulation (Discharge)</div> </div> <div> <div>O0110H10A</div> <div>Other: IV - Other (Admission)</div> </div> <div> <div>O0110H10C</div> <div>Other: IV - Other (Discharge)</div> </div> <div> <div>O0110I1A</div> <div>Other: Transfusions (Admission)</div> </div> <div> <div>O0110I1B</div> <div>Other: Transfusions (14 days)</div> </div> <div> <div>O0110I1C</div> <div>Other: Transfusions (Discharge)</div> </div> <div> <div>O0110J1A</div> <div>Other: Dialysis (Admission)</div> </div> <div> <div>O0110J1B</div> <div>Other: Dialysis (14 days)</div> </div> <div> <div>O0110J1C</div> <div>Other: Dialysis (Discharge)</div> </div> <div> <div>O0110J2A</div> <div>Other: Hemodialysis (Admission)</div> </div> <div> <div>O0110J2C</div> <div>Other: Hemodialysis (Discharge)</div> </div> <div> <div>O0110J3A</div> <div>Other: Peritoneal dialysis (Admission)</div> </div> <div> <div>O0110J3C</div> <div>Other: Peritoneal dialysis (Discharge)</div> </div> <div> <div>O0110K1B</div> <div>Other: Hospice care (14 days)</div> </div> <div> <div>O0110M1B</div> <div>Other: Isolation - Infectious Disease (14 days)</div> </div> <div> <div>O0110O1A</div> <div>Other: IV Access (Admission)</div> </div> <div> <div>O0110O1B</div> <div>Other: IV Access (14 days)</div> </div> <div> <div>O0110O1C</div> <div>Other: IV Access (Discharge)</div> </div> <div> <div>O0110O2A</div> <div>Other: IV Access - Peripheral (Admission)</div> </div> <div> <div>O0110O2C</div> <div>Other: IV Access - Peripheral (Discharge)</div> </div> <div> <div>O0110O3A</div> <div>Other: IV Access - Midline (Admission)</div> </div> <div> <div>O0110O3C</div> <div>Other: IV Access - Midline (Discharge)</div> </div> <div> <div>O0110O4A</div> <div>Other: IV Access - Central (Admission)</div> </div> <div> <div>O0110O4C</div> <div>Other: IV Access - Central (Discharge)</div> </div> <div> <div>O0110Z1A</div> <div>Other: None of the above (Admission)</div> </div> <div> <div>O0110Z1B</div> <div>Other: None of the above (14 days)</div> </div> <div> <div>O0110Z1C</div> <div>Other: None of the above (Discharge)</div> </div> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | O0250A Was influenza vaccine received |
| | | | O0250C If influenza vaccine not received, state reason |
| | | | O0300A Is pneumococcal vaccination up to date |
| | | | O0300B If pneumococcal vacc not received, state reason |
| | | | O0350 COVID-19 Vaccination Up To Date |
| | | | O0390A Speech-Language Pathology and Audiology Services |
| | | | O0390B Occupational Therapy |
| | | | O0390C Physical Therapy |
| | | | O0390D Respiratory Therapy |
| | | | O0390E Psychological Therapy |
| | | | O0390Z None of the above |
| | | | P0100A Restraints used in bed: bed rail |
| | | | P0100B Restraints used in bed: trunk restraint |
| | | | P0100C Restraints used in bed: limb restraint |
| | | | P0100D Restraints used in bed: other |
| | | | P0100E Restraints in chair/out of bed: trunk restraint |
| | | | P0100F Restraints in chair/out of bed: limb restraint |
| | | | P0100G Restraints in chair/out of bed: chair stops rising |
| | | | P0100H Restraints in chair/out of bed: other |
| | | | P0200A Bed alarm |
| | | | P0200B Chair alarm |
| | | | P0200C Floor mat alarm |
| | | | P0200D Motion sensor alarm |
| | | | P0200E Wander/elopement alarm |
| | | | P0200F Other alarm |
| | | | Q0110A Participants: Resident |
| | | | Q0110B Participants: Family |
| | | | Q0110C Participants: Significant other |
| | | | Q0110D Participants: Legal guardian |
| | | | Q0110E Participants: Other legal representative |
| | | | Q0110Z Participants: None of the Above |
| | | | Q0310A Resident's Overall Goal |
| | | | Q0310B Q0310A info source |
| | | | Q0400A Active discharge planning for return to community |
| | | | Q0490 Resident's preference to avoid being asked |
| | | | Q0500B Do you want to talk about returning to community |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | <div>Q0500C Q0500B info source</div> <div>Q0550A Reasking resident preference</div> <div>Q0550C Q0550A info source</div> <div>Q0610A Referral</div> <div>Q0620 Reason referral not made</div> <div>V0100A Prior OBRA reason for assessment</div> <div>V0100B Prior PPS reason for assessment</div> <div>V0200A01A CAA-Delirium: triggered</div> <div>V0200A01B CAA-Delirium: plan</div> <div>V0200A02A CAA-Cognitive loss/dementia: triggered</div> <div>V0200A02B CAA-Cognitive loss/dementia: plan</div> <div>V0200A03A CAA-Visual function: triggered</div> <div>V0200A03B CAA-Visual function: plan</div> <div>V0200A04A CAA-Communication: triggered</div> <div>V0200A04B CAA-Communication: plan</div> <div>V0200A05A CAA-ADL functional/rehab potential: triggered</div> <div>V0200A05B CAA-ADL functional/rehab potential: plan</div> <div>V0200A06A CAA-Urinary incont/indwell catheter: triggered</div> <div>V0200A06B CAA-Urinary incont/indwell catheter: plan</div> <div>V0200A07A CAA-Psychosocial well-being: triggered</div> <div>V0200A07B CAA-Psychosocial well-being: plan</div> <div>V0200A08A CAA-Mood state: triggered</div> <div>V0200A08B CAA-Mood state: plan</div> <div>V0200A09A CAA-Behavioral symptoms: triggered</div> <div>V0200A09B CAA-Behavioral symptoms: plan</div> <div>V0200A10A CAA-Activities: triggered</div> <div>V0200A10B CAA-Activities: plan</div> <div>V0200A11A CAA-Falls: triggered</div> <div>V0200A11B CAA-Falls: plan</div> <div>V0200A12A CAA-Nutritional status: triggered</div> <div>V0200A12B CAA-Nutritional status: plan</div> <div>V0200A13A CAA-Feeding tubes: triggered</div> <div>V0200A13B CAA-Feeding tubes: plan</div> <div>V0200A14A CAA-Dehydration/fluid maintenance: triggered</div> <div>V0200A14B CAA-Dehydration/fluid maintenance: plan</div> <div>V0200A15A CAA-Dental care: triggered</div> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------|----------|---|
| | | | Items: V0200A15B CAA-Dental care: plan V0200A16A CAA-Pressure ulcer: triggered V0200A16B CAA-Pressure ulcer: plan V0200A17A CAA-Psychotropic drug use: triggered V0200A17B CAA-Psychotropic drug use: plan V0200A18A CAA-Physical restraints: triggered V0200A18B CAA-Physical restraints: plan V0200A19A CAA-Pain: triggered V0200A19B CAA-Pain: plan V0200A20A CAA-Return to community referral: triggered V0200A20B CAA-Return to community referral: plan X0150 Correction: type of provider X0310 Correction: resident sex X0600A Correction: OBRA reason for assessment X0600B Correction: PPS reason for assessment X0600F Correction: entry/discharge reporting X0600H Correction: SNF PPS Part A Discharge (End of Stay) X0900A Correction: modif reasons - transcription error X0900B Correction: modif reasons - data entry error X0900C Correction: modif reasons - software error X0900D Correction: modif reasons - item coding error X0900Z Correction: modif reasons - other error X1050A Correction: inactive reasons - event did not occur X1050Z Correction: inactive reasons - other reason Z0200C State case mix: Short Stay Assessment |
| -3677 | Format | Fatal | <p>Values of Date Items: 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.</p> <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, 2011 must be submitted as "20110101".</p> <p>Items: A1600 Entry date (date of admission/reentry in facility) A1900 Admission date A2000 Discharge date</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------|----------|---|
| | | | Items: A2200 Previous asmt reference date for signif correction A2300 Assessment reference date A2400B Start date of most recent Medicare stay A2400C End date of most recent Medicare stay N0450C Date of last attempted GDR N0450E Date physician documented GDR O0250B Date influenza vaccine received. V0100C Prior assessment reference date V0200B2 CAA-Assessment process signature date V0200C2 CAA-Care planning signature date X0700A Correction: assessment reference date X0700B Correction: discharge date X0700C Correction: entry date X1100E Correction: attestation date Z0500B Date RN signed assessment as complete |
| -3678 | Format | Fatal | <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.</p> <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, 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,</p> <p>Items: A0900 Birthdate X0400 Correction: resident birth date</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---------|--|--|---------------|-------|-----------------------------------|--|-------|----------------------|--|-------|-----------------------------|--|--------|--|--|--------|--------------------|--|--------|--------------------|--|--------|---|--|---------|---|--|---------|--|--|---------|---|--|---------|--|--|---------|---|--|---------|--|--|---------|---|--|---------|--|--|---------|--|--|---------|---|--|---------|---|--|---------|--|--|-------|--------------------------------------|--|-------|--|--|--------|-----------------------------|--|--------|-----------------------------|--|---------|-------------------------------------|--|---------|--|--|---------|--|--|---------|---|--|---------|--|--|---------|----------------------------------|
| -3679 | Format | Fatal | <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> <table><tr><td>Items:</td><td>C0500</td><td>BIMS res interview: summary score</td></tr><tr><td></td><td>D0160</td><td>Total severity score</td></tr><tr><td></td><td>D0600</td><td>PHQ staff: total mood score</td></tr><tr><td></td><td>J0600A</td><td>Res pain interview: intensity rating scale</td></tr><tr><td></td><td>K0200A</td><td>Height (in inches)</td></tr><tr><td></td><td>K0200B</td><td>Weight (in pounds)</td></tr><tr><td></td><td>M0300A</td><td>Stage 1 pressure injuries: number present</td></tr><tr><td></td><td>M0300B1</td><td>Stage 2 pressure ulcers: number present</td></tr><tr><td></td><td>M0300B2</td><td>Stage 2 pressure ulcers: number at admit/reentry</td></tr><tr><td></td><td>M0300C1</td><td>Stage 3 pressure ulcers: number present</td></tr><tr><td></td><td>M0300C2</td><td>Stage 3 pressure ulcers: number at admit/reentry</td></tr><tr><td></td><td>M0300D1</td><td>Stage 4 pressure ulcers: number present</td></tr><tr><td></td><td>M0300D2</td><td>Stage 4 pressure ulcers: number at admit/reentry</td></tr><tr><td></td><td>M0300E1</td><td>Unstaged due to drssng/dvc: num present</td></tr><tr><td></td><td>M0300E2</td><td>Unstaged due to drssng/dvc: num at admit/reentry</td></tr><tr><td></td><td>M0300F1</td><td>Unstaged slough/eschar: number present</td></tr><tr><td></td><td>M0300F2</td><td>Unstaged slough/eschar: number at admit/reentry</td></tr><tr><td></td><td>M0300G1</td><td>Unstageable - deep tissue injury: # present</td></tr><tr><td></td><td>M0300G2</td><td>Unstageable - deep tissue injury: # at adm/reent</td></tr><tr><td></td><td>M1030</td><td>Number of venous and arterial ulcers</td></tr><tr><td></td><td>N0300</td><td>Number of days injectable medications received</td></tr><tr><td></td><td>N0350A</td><td>Insulin: insulin injections</td></tr><tr><td></td><td>N0350B</td><td>Insulin: orders for insulin</td></tr><tr><td></td><td>O0400D2</td><td>Respiratory therapy: number of days</td></tr><tr><td></td><td>O0425A1</td><td>SLP and Audiology Services: Individual Minutes</td></tr><tr><td></td><td>O0425A2</td><td>SLP and Audiology Services: Concurrent Minutes</td></tr><tr><td></td><td>O0425A3</td><td>SLP and Audiology Services: Group Minutes</td></tr><tr><td></td><td>O0425A4</td><td>SLP and Audiology Services: Co-treatment Minutes</td></tr><tr><td></td><td>O0425A5</td><td>SLP and Audiology Services: Days</td></tr></table> | Items: | C0500 | BIMS res interview: summary score | | D0160 | Total severity score | | D0600 | PHQ staff: total mood score | | J0600A | Res pain interview: intensity rating scale | | K0200A | Height (in inches) | | K0200B | Weight (in pounds) | | M0300A | Stage 1 pressure injuries: number present | | M0300B1 | Stage 2 pressure ulcers: number present | | M0300B2 | Stage 2 pressure ulcers: number at admit/reentry | | M0300C1 | Stage 3 pressure ulcers: number present | | M0300C2 | Stage 3 pressure ulcers: number at admit/reentry | | M0300D1 | Stage 4 pressure ulcers: number present | | M0300D2 | Stage 4 pressure ulcers: number at admit/reentry | | M0300E1 | Unstaged due to drssng/dvc: num present | | M0300E2 | Unstaged due to drssng/dvc: num at admit/reentry | | M0300F1 | Unstaged slough/eschar: number present | | M0300F2 | Unstaged slough/eschar: number at admit/reentry | | M0300G1 | Unstageable - deep tissue injury: # present | | M0300G2 | Unstageable - deep tissue injury: # at adm/reent | | M1030 | Number of venous and arterial ulcers | | N0300 | Number of days injectable medications received | | N0350A | Insulin: insulin injections | | N0350B | Insulin: orders for insulin | | O0400D2 | Respiratory therapy: number of days | | O0425A1 | SLP and Audiology Services: Individual Minutes | | O0425A2 | SLP and Audiology Services: Concurrent Minutes | | O0425A3 | SLP and Audiology Services: Group Minutes | | O0425A4 | SLP and Audiology Services: Co-treatment Minutes | | O0425A5 | SLP and Audiology Services: Days |
| Items: | C0500 | BIMS res interview: summary score | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0160 | Total severity score | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0600 | PHQ staff: total mood score | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | J0600A | Res pain interview: intensity rating scale | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0200A | Height (in inches) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0200B | Weight (in pounds) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300A | Stage 1 pressure injuries: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300B1 | Stage 2 pressure ulcers: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300B2 | Stage 2 pressure ulcers: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300C1 | Stage 3 pressure ulcers: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300C2 | Stage 3 pressure ulcers: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300D1 | Stage 4 pressure ulcers: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300D2 | Stage 4 pressure ulcers: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300E1 | Unstaged due to drssng/dvc: num present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300E2 | Unstaged due to drssng/dvc: num at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300F1 | Unstaged slough/eschar: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300F2 | Unstaged slough/eschar: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300G1 | Unstageable - deep tissue injury: # present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300G2 | Unstageable - deep tissue injury: # at adm/reent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1030 | Number of venous and arterial ulcers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0300 | Number of days injectable medications received | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0350A | Insulin: insulin injections | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0350B | Insulin: orders for insulin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | O0400D2 | Respiratory therapy: number of days | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | O0425A1 | SLP and Audiology Services: Individual Minutes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | O0425A2 | SLP and Audiology Services: Concurrent Minutes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | O0425A3 | SLP and Audiology Services: Group Minutes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | O0425A4 | SLP and Audiology Services: Co-treatment Minutes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | O0425A5 | SLP and Audiology Services: Days | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Unduplicated Edits Report by Edit ID

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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | D0600 PHQ staff: total mood score |
| | | | J0600A Res pain interview: intensity rating scale |
| | | | K0200A Height (in inches) |
| | | | K0200B Weight (in pounds) |
| | | | M0300A Stage 1 pressure injuries: number present |
| | | | M0300B1 Stage 2 pressure ulcers: number present |
| | | | M0300B2 Stage 2 pressure ulcers: number at admit/reentry |
| | | | M0300C1 Stage 3 pressure ulcers: number present |
| | | | M0300C2 Stage 3 pressure ulcers: number at admit/reentry |
| | | | M0300D1 Stage 4 pressure ulcers: number present |
| | | | M0300D2 Stage 4 pressure ulcers: number at admit/reentry |
| | | | M0300E1 Unstaged due to drssng/dvc: num present |
| | | | M0300E2 Unstaged due to drssng/dvc: num at admit/reentry |
| | | | M0300F1 Unstaged slough/eschar: number present |
| | | | M0300F2 Unstaged slough/eschar: number at admit/reentry |
| | | | M0300G1 Unstageable - deep tissue injury: # present |
| | | | M0300G2 Unstageable - deep tissue injury: # at adm/reent |
| | | | M1030 Number of venous and arterial ulcers |
| | | | N0300 Number of days injectable medications received |
| | | | N0350A Insulin: insulin injections |
| | | | N0350B Insulin: orders for insulin |
| | | | O0400D2 Respiratory therapy: number of days |
| | | | O0425A1 SLP and Audiology Services: Individual Minutes |
| | | | O0425A2 SLP and Audiology Services: Concurrent Minutes |
| | | | O0425A3 SLP and Audiology Services: Group Minutes |
| | | | O0425A4 SLP and Audiology Services: Co-treatment Minutes |
| | | | O0425A5 SLP and Audiology Services: Days |
| | | | O0425B1 Occupational Therapy: Individual Minutes |
| | | | O0425B2 Occupational Therapy: Concurrent Minutes |
| | | | O0425B3 Occupational Therapy: Group Minutes |
| | | | O0425B4 Occupational Therapy: Co-treatment Minutes |
| | | | O0425B5 Occupational Therapy: Days |
| | | | O0425C1 Physical Therapy: Individual Minutes |
| | | | O0425C2 Physical Therapy: Concurrent Minutes |
| | | | O0425C3 Physical Therapy: Group Minutes |
| | | | O0425C4 Physical Therapy: Co-treatment Minutes |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | | Items: O0425C5 Physical Therapy: Days O0430 Distinct Calendar Days of Part A Therapy O0500A Range of motion (passive): number of days O0500B Range of motion (active): number of days O0500C Splint or brace assistance: number of days O0500D Bed mobility training: number of days O0500E Transfer training: number of days O0500F Walking training: number of days O0500G Dressing and/or grooming training: number of days O0500H Eating and/or swallowing training: number of days O0500I Amputation/prosthesis training: number of days O0500J Communication training: number of days V0100D Prior assessment BIMS summary score V0100E Prior asmt PHQ res: total mood severity score V0100F Prior asmt PHQ staff: total mood score X0800 Correction: correction number |
| | | | -3686 Consistency Fatal <p>a) If the SFTWR_VNDR_ID is not equal to [^], then SFTWR_VNDR_NAME and SFTWR_VNDR_EMAIL_ADR must not equal [^].</p> <p>b) If the SFTWR_VNDR_ID is equal to [^], then SFTWR_VNDR_NAME and SFTWR_VNDR_EMAIL_ADR must equal [^].</p> |
| | | | Items: SFTWR_VNDR_ID Software vendor federal employer tax ID SFTWR_VNDR_NA Software vendor company name ME SFTWR_VNDR_EM Software vendor email address AIL_ADR |
| | | | -3687 Format Fatal <p>Formatting of Numeric Text Items: 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: a) The numeric characters: [0] through [9].</p> |
| | | | Items: SFTWR_VNDR_ID Software vendor federal employer tax ID A0100A Facility National Provider Identifier (NPI) A0600A Social Security Number X0500 Correction: resident social security number |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------|--|----------|---|----------------|---|--------|-----------------------|------------|----------------------|--------|---------------------|--------|--------------------|--------|----------------------|--------|--------------------|--------|-----------------------|--------|-------------|--------|--|--------|------------------------|--------|---------------------------------|
| -3688 | Format | Fatal | <p>Formatting of Alphanumeric Text Items:</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>Items:</p> <table><tr><td>A0100B</td><td>Facility CMS Certification Number (CCN)</td></tr><tr><td>A0100C</td><td>State provider number</td></tr><tr><td>A0600B</td><td>Medicare number</td></tr><tr><td>A0700</td><td>Medicaid number</td></tr></table> | A0100B | Facility CMS Certification Number (CCN) | A0100C | State provider number | A0600B | Medicare number | A0700 | Medicaid number | | | | | | | | | | | | | | | | |
| A0100B | Facility CMS Certification Number (CCN) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0100C | State provider number | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0600B | Medicare number | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0700 | Medicaid number | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3690 | Format | Fatal | <p>Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, and 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 character [-].</p> <p>d) The following special characters:</p> <p> [@] (at sign)</p> <p> ['] (single quote)</p> <p> [/] (forward slash)</p> <p> [+] (plus sign)</p> <p> [,] (comma)</p> <p> [.] (period)</p> <p> [_] (underscore)</p> <p>e) Embedded spaces (spaces surrounded by any of the characters listed above). For example, [LEGAL TEXT] would be allowed.</p> <p>Items:</p> <table><tr><td>SFTWR_PROD_VRS</td><td>Software product version code</td></tr><tr><td>N_CD</td><td></td></tr><tr><td>FAC_DOC_ID</td><td>Facility document ID</td></tr><tr><td>A0500A</td><td>Resident first name</td></tr><tr><td>A0500C</td><td>Resident last name</td></tr><tr><td>A0500D</td><td>Resident name suffix</td></tr><tr><td>A1110A</td><td>Preferred language</td></tr><tr><td>A1300A</td><td>Medical record number</td></tr><tr><td>A1300B</td><td>Room number</td></tr><tr><td>A1300C</td><td>Name by which resident prefers to be addressed</td></tr><tr><td>A1300D</td><td>Lifetime occupation(s)</td></tr><tr><td>X0200A</td><td>Correction: resident first name</td></tr></table> | SFTWR_PROD_VRS | Software product version code | N_CD | | FAC_DOC_ID | Facility document ID | A0500A | Resident first name | A0500C | Resident last name | A0500D | Resident name suffix | A1110A | Preferred language | A1300A | Medical record number | A1300B | Room number | A1300C | Name by which resident prefers to be addressed | A1300D | Lifetime occupation(s) | X0200A | Correction: resident first name |
| SFTWR_PROD_VRS | Software product version code | | | | | | | | | | | | | | | | | | | | | | | | | | |
| N_CD | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FAC_DOC_ID | Facility document ID | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0500A | Resident first name | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0500C | Resident last name | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0500D | Resident name suffix | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1110A | Preferred language | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1300A | Medical record number | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1300B | Room number | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1300C | Name by which resident prefers to be addressed | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1300D | Lifetime occupation(s) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0200A | Correction: resident first name | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------|----------|---|
| | | | Items: X0200C Correction: resident last name X1100A Correction: attestor first name X1100B Correction: attestor last name |
| -3691 | Format | Fatal | <p>Formatting of Alphanumeric Text Items That Can Contain Special Characters: 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]. b) The letters [A] through [Z] and [a] through [z]. c) The following special characters:</p> <p>[@] (at sign) ['] (single quote) [/] (forward slash) [+] (plus sign) [,] (comma) [.] (period) [_] (underscore)</p> |
| -3692 | Format | Fatal | <p>Items: A0500B Resident middle initial</p> <p>Formatting of email address. Any valid email address will be accepted. The text string may contain any printable characters except the following:</p> <p>' single quote " double quote , comma ; semi-colon : colon \ back slash () right and left parentheses [] right and left brackets { } right and left braces < less than > greater than space (embedded space)</p> <p>Items: SFTWR_VNDR_EM Software vendor email address AIL_ADR</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| -3693 | Format | Fatal | <p>FAC_ID is the facility/provider ID.</p> <p>a) This must be the FAC_ID assigned to the provider. The state agency assigns the FAC_ID to nursing homes. The QIES system (QTSO help desk) assigns the FAC_ID to swing bed units. The submitted value must match the FAC_ID in the QIES Assessment Processing System for the facility or provider.</p> <p>b) A user submitting a file for a provider must be authorized to submit for the provider identified by the FAC_ID item in the file.</p> <p>Items: FAC_ID Assigned facility/provider submission ID</p> |
| -3695 | Consistency | Warning | <p>The value submitted for A0100B (provider's CMS Certification Number -- CCN) will be compared with the value that is currently in the MDS Submission System database. If the values do not match, a warning will be issued.</p> <p>Items: A0100B Facility CMS Certification Number (CCN)</p> |
| -3699 | Consistency | Fatal | <p>***THIS EDIT WAS DELETED IN V3.10.0***</p> <p>Items: A0310B Type of assessment: PPS</p> |
| -3702 | Format | Fatal | <p>This is a required text item. A valid non-blank value must be submitted.</p> <p>Items: FAC_ID Assigned facility/provider submission ID A0500A Resident first name A0500C Resident last name</p> |
| -3706 | Consistency | Fatal | <p>The submitted value of A0200 will be checked against the information stored in CMS's database. For nursing homes, A0200 must equal [1]. For swing-bed providers, A0200 must equal [2]. If the value submitted for A0200 is inconsistent with the information stored in CMS's database, a fatal error will occur and the submitted record will be rejected.</p> <p>Items: A0200 Type of provider</p> |
| -3707 | Consistency | Fatal | <p>a) If A0200=[2] (if the provider is a swing bed provider), then A0410 (submission requirement) must equal [3] (it cannot equal [1,2]).</p> <p>b) If A0200=[1] (the provider is a nursing home), then A0410 must equal [2,3].</p> <p>c) For both nursing homes and swing bed providers, A0410 must not be equal to [1].</p> <p>Items: A0200 Type of provider A0410 Submission requirement</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| -3717 | Consistency | Fatal | <p>a) If D0500A1 is equal to [0], then D0500A2 must be equal to [0, -].</p> <p>b) If D0500A1 is equal to [1], then D0500A2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500A1 is equal to [-], then D0500A2 must be equal to [-].</p> <p>Items: D0500A1 PHQ staff: little interest or pleasure - presence D0500A2 PHQ staff: little interest or pleasure - frequency</p> |
| -3718 | Consistency | Fatal | <p>a) If D0500B1 is equal to [0], then D0500B2 must be equal to [0, -].</p> <p>b) If D0500B1 is equal to [1], then D0500B2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500B1 is equal to [-], then D0500B2 must be equal to [-].</p> <p>Items: D0500B1 PHQ staff: feeling down, depressed - presence D0500B2 PHQ staff: feeling down, depressed - frequency</p> |
| -3719 | Consistency | Fatal | <p>a) If D0500C1 is equal to [0], then D0500C2 must be equal to [0, -].</p> <p>b) If D0500C1 is equal to [1], then D0500C2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500C1 is equal to [-], then D0500C2 must be equal to [-].</p> <p>Items: D0500C1 PHQ staff: trouble with sleep - presence D0500C2 PHQ staff: trouble with sleep - frequency</p> |
| -3720 | Consistency | Fatal | <p>a) If D0500D1 is equal to [0], then D0500D2 must be equal to [0, -].</p> <p>b) If D0500D1 is equal to [1], then D0500D2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500D1 is equal to [-], then D0500D2 must be equal to [-].</p> <p>Items: D0500D1 PHQ staff: feeling tired/little energy - presence D0500D2 PHQ staff: feeling tired/little energy - frequency</p> |
| -3721 | Consistency | Fatal | <p>a) If D0500E1 is equal to [0], then D0500E2 must be equal to [0, -].</p> <p>b) If D0500E1 is equal to [1], then D0500E2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500E1 is equal to [-], then D0500E2 must be equal to [-].</p> <p>Items: D0500E1 PHQ staff: poor appetite or overeating - presence D0500E2 PHQ staff: poor appetite or overeating - frequency</p> |
| -3722 | Consistency | Fatal | <p>a) If D0500F1 is equal to [0], then D0500F2 must be equal to [0, -].</p> <p>b) If D0500F1 is equal to [1], then D0500F2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500F1 is equal to [-], then D0500F2 must be equal to [-].</p> <p>Items: D0500F1 PHQ staff: feeling bad about self - presence D0500F2 PHQ staff: feeling bad about self - frequency</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -3723 | Consistency | Fatal | <p>a) If D0500G1 is equal to [0], then D0500G2 must be equal to [0, -].</p> <p>b) If D0500G1 is equal to [1], then D0500G2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500G1 is equal to [-], then D0500G2 must be equal to [-].</p> <p>Items: D0500G1 PHQ staff: trouble concentrating - presence D0500G2 PHQ staff: trouble concentrating - frequency</p> |
| -3724 | Consistency | Fatal | <p>a) If D0500H1 is equal to [0], then D0500H2 must be equal to [0, -].</p> <p>b) If D0500H1 is equal to [1], then D0500H2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500H1 is equal to [-], then D0500H2 must be equal to [-].</p> <p>Items: D0500H1 PHQ staff: slow, fidgety, restless - presence D0500H2 PHQ staff: slow, fidgety, restless - frequency</p> |
| -3725 | Consistency | Fatal | <p>a) If D0500I1 is equal to [0], then D0500I2 must be equal to [0, -].</p> <p>b) If D0500I1 is equal to [1], then D0500I2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500I1 is equal to [-], then D0500I2 must be equal to [-].</p> <p>Items: D0500I1 PHQ staff: thoughts better off dead - presence D0500I2 PHQ staff: thoughts better off dead - frequency</p> |
| -3726 | Consistency | Fatal | <p>a) If D0500J1 is equal to [0], then D0500J2 must be equal to [0, -].</p> <p>b) If D0500J1 is equal to [1], then D0500J2 must be equal to [0,1,2,3,-].</p> <p>c) If D0500J1 is equal to [-], then D0500J2 must be equal to [-].</p> <p>Items: D0500J1 PHQ staff: short-tempered - presence D0500J2 PHQ staff: short-tempered - frequency</p> |
| -3735 | Skip pattern | Fatal | <p>a) If N0300=[0], then all active items from N0350A through N0350B must equal [^].</p> <p>b) If N0300=[1-7], then all active items from N0350A through N0350B must not equal [^].</p> <p>c) If N0300=[-], then all active items from N0350A through N0350B must equal [-].</p> <p>Items: N0300 Number of days injectable medications received N0350A Insulin: insulin injections N0350B Insulin: orders for insulin</p> |
| -3736 | Skip pattern | Fatal | <p>a) If O0250A=[0], then if O0250C is active it must not equal [^].</p> <p>b) If O0250A=[1], then if O0250C is active it must equal [^].</p> <p>c) If O0250A=[-], then if O0250C is active it must equal [-].</p> <p>Items: O0250A Was influenza vaccine received O0250C If influenza vaccine not received, state reason</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|---------------|---|
| -3744 | Consistency | Fatal | If A0310E=[1], then all active items from V0100A through V0100F must equal [^]. |
| | | Items: | <div> <div>A0310E</div> <div>First assessment since most recent entry</div> </div> <div> <div>V0100A</div> <div>Prior OBRA reason for assessment</div> </div> <div> <div>V0100B</div> <div>Prior PPS reason for assessment</div> </div> <div> <div>V0100C</div> <div>Prior assessment reference date</div> </div> <div> <div>V0100D</div> <div>Prior assessment BIMS summary score</div> </div> <div> <div>V0100E</div> <div>Prior asmt PHQ res: total mood severity score</div> </div> <div> <div>V0100F</div> <div>Prior asmt PHQ staff: total mood score</div> </div> |
| -3746 | Consistency | Fatal | If A0050 (formerly X0100)=[1], then all active items from X0150 through X1100E must equal [^]. |
| | | Items: | <div> <div>A0050</div> <div>Type of transaction (formerly X0100)</div> </div> <div> <div>X0150</div> <div>Correction: type of provider</div> </div> <div> <div>X0200A</div> <div>Correction: resident first name</div> </div> <div> <div>X0200C</div> <div>Correction: resident last name</div> </div> <div> <div>X0310</div> <div>Correction: resident sex</div> </div> <div> <div>X0400</div> <div>Correction: resident birth date</div> </div> <div> <div>X0500</div> <div>Correction: resident social security number</div> </div> <div> <div>X0600A</div> <div>Correction: OBRA reason for assessment</div> </div> <div> <div>X0600B</div> <div>Correction: PPS reason for assessment</div> </div> <div> <div>X0600F</div> <div>Correction: entry/discharge reporting</div> </div> <div> <div>X0600H</div> <div>Correction: SNF PPS Part A Discharge (End of Stay)</div> </div> <div> <div>X0700A</div> <div>Correction: assessment reference date</div> </div> <div> <div>X0700B</div> <div>Correction: discharge date</div> </div> <div> <div>X0700C</div> <div>Correction: entry date</div> </div> <div> <div>X0800</div> <div>Correction: correction number</div> </div> <div> <div>X0900A</div> <div>Correction: modif reasons - transcription error</div> </div> <div> <div>X0900B</div> <div>Correction: modif reasons - data entry error</div> </div> <div> <div>X0900C</div> <div>Correction: modif reasons - software error</div> </div> <div> <div>X0900D</div> <div>Correction: modif reasons - item coding error</div> </div> <div> <div>X0900Z</div> <div>Correction: modif reasons - other error</div> </div> <div> <div>X1050A</div> <div>Correction: inact reasons - event did not occur</div> </div> <div> <div>X1050Z</div> <div>Correction: inact reasons - other reason</div> </div> <div> <div>X1100A</div> <div>Correction: attestor first name</div> </div> <div> <div>X1100B</div> <div>Correction: attestor last name</div> </div> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| -3748 | Consistency | Fatal | Items: X1100E Correction: attestation date If A0050 (formerly X0100)=[3], then at least one item from X1050A through X1050Z must equal [1]. |
| | | | Items: A0050 Type of transaction (formerly X0100) X1050A Correction: inactive reasons - event did not occur X1050Z Correction: inactive reasons - other reason |
| -3749 | Consistency | Warning | Date Span Requirements The following rules describe allowable spans between pairs of dates. Each rule applies if both date items in the pair are active and contain valid dates (not dashes or other special values). Violation of these rules will result in warnings. a) Z0500B (completion date) - A2300 (assessment reference date) <= 14 days. b) If A0310A is equal to [03,04,05], then V0200B2 (CAA process signature date) - A2300 (assessment reference date) <= 14 days. c) V0200C2 (CAA care plan signature date) - V0200B2 (CAA process signature date) <= 7 days. d) If A0310A is equal to [01], then Z0500B (completion date) - A1600 (entry date) <= 13 days. e) If A0310A is equal to [01], then V0200B2 (CAA process signature date) - A1600 (entry date) <= 13 days. Items: A0310A Type of assessment: OBRA A1600 Entry date (date of admission/reentry in facility) A2300 Assessment reference date V0200B2 CAA-Assessment process signature date V0200C2 CAA-Care planning signature date Z0500B Date RN signed assessment as complete |
| -3751 | Consistency | Warning | A warning will be issued if J0300=[1] (indicating pain is present) and J0600A=[00] (indicating a pain scale rating of "no pain"). Items: J0300 Res pain interview: presence J0600A Res pain interview: intensity rating scale |
| -3752 | Consistency | Fatal | The value of this item must be consistent with the values of the MDS items used to determine whether this CAA is triggered or not (i.e., the CAA trigger calculation must be accurate). Items: V0200A01A CAA-Delirium: triggered |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| | | | Items: V0200A02A CAA-Cognitive loss/dementia: triggered V0200A03A CAA-Visual function: triggered V0200A04A CAA-Communication: triggered V0200A05A CAA-ADL functional/rehab potential: triggered V0200A06A CAA-Urinary incont/indwell catheter: triggered V0200A07A CAA-Psychosocial well-being: triggered V0200A08A CAA-Mood state: triggered V0200A09A CAA-Behavioral symptoms: triggered V0200A10A CAA-Activities: triggered V0200A11A CAA-Falls: triggered V0200A12A CAA-Nutritional status: triggered V0200A13A CAA-Feeding tubes: triggered V0200A14A CAA-Dehydration/fluid maintenance: triggered V0200A15A CAA-Dental care: triggered V0200A16A CAA-Pressure ulcer: triggered V0200A17A CAA-Psychotropic drug use: triggered V0200A18A CAA-Physical restraints: triggered V0200A19A CAA-Pain: triggered V0200A20A CAA-Return to community referral: triggered |
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| -3753 | Consistency | Fatal | <p>If N0300 is equal to [1-7], then one of the following must be true: a) N0350A must be equal to [-], OR b) N0350A must be equal to [0-7] and must be less than or equal to N0300.</p> <p>Items: N0300 Number of days injectable medications received N0350A Insulin: insulin injections</p> |
| -3775 | Consistency | Fatal | <p>a) If X0600F=[99], then X0700A must contain a valid date and X0700B and X0700C must be equal to [^]. b) If X0600F=[10,11,12], then X0700B must contain a valid date and X0700A and X0700C must be equal to [^]. c) If X0600F=[01], then X0700C must contain a valid date and X0700A and X0700B must be equal to [^].</p> <p>Items: X0600F Correction: entry/discharge reporting X0700A Correction: assessment reference date X0700B Correction: discharge date X0700C Correction: entry date</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|-------------|---|--|---------------|--------|--------------------------------------|--|--------|---|--|--------|--|--|--------|--|--|--------|------------------------|--|--------|---|--|--------|---|--|--------|---------------------------------|--|-------|---------------------------|
| -3778 | Consistency | Fatal | <p>Completion of A1550A through A1550Z, when active.</p> <p>a) If A0310A is equal to [02,06,99], then A1550A through A1550Z must equal [^].</p> <p>b) If the resident's age is 22 years of age or older and A0310A is equal to [01], then A1550A through A1550Z must not equal [^].</p> <p>c) If the resident's age is 22 years of age or older and A0310A is not equal to [01], then A1550A through A1550Z must equal [^].</p> <p>d) If the resident's age is 21 years of age or younger and A0310A is equal to [01,03,04,05], then A1550A through A1550Z must not equal [^].</p> <p>For the rules above, age should be computed in the following way using A0900 (birth date) and A2300 (assessment reference date):</p> <p>a) If only the year is submitted in A0900, then replace the month and day with "0702" (July 2, the midpoint of the year) for the purpose of calculating age.</p> <p>b) If only the year and month are submitted in A0900, replace the day with "15", (the midpoint of the month) for the purpose of calculating age.</p> <p>c) Provisionally compute age (in years) by subtracting the year in A0900 (as modified above, if necessary) from the year in A2300.</p> <p>d) If the month in A2300 is less than the month in A0900, then subtract 1 from the provisional age computed in (c) above.</p> <p>e) If the month in A2300 is equal to the month in A0900 and if the day in A2300 is less than the day in A0900, then subtract 1 from the provisional age computed in (c) above.</p> <table><tr><td>Items:</td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0900</td><td>Birthdate</td></tr><tr><td></td><td>A1550A</td><td>ID/DD status: Down syndrome</td></tr><tr><td></td><td>A1550B</td><td>ID/DD status: Autism</td></tr><tr><td></td><td>A1550C</td><td>ID/DD status: Epilepsy</td></tr><tr><td></td><td>A1550D</td><td>ID/DD status: other organic ID/DD condition</td></tr><tr><td></td><td>A1550E</td><td>ID/DD status: ID/DD with no organic condition</td></tr><tr><td></td><td>A1550Z</td><td>ID/DD status: none of the above</td></tr><tr><td></td><td>A2300</td><td>Assessment reference date</td></tr></table> | Items: | A0310A | Type of assessment: OBRA | | A0900 | Birthdate | | A1550A | ID/DD status: Down syndrome | | A1550B | ID/DD status: Autism | | A1550C | ID/DD status: Epilepsy | | A1550D | ID/DD status: other organic ID/DD condition | | A1550E | ID/DD status: ID/DD with no organic condition | | A1550Z | ID/DD status: none of the above | | A2300 | Assessment reference date |
| Items: | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0900 | Birthdate | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1550A | ID/DD status: Down syndrome | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1550B | ID/DD status: Autism | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1550C | ID/DD status: Epilepsy | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1550D | ID/DD status: other organic ID/DD condition | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1550E | ID/DD status: ID/DD with no organic condition | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1550Z | ID/DD status: none of the above | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A2300 | Assessment reference date | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3779 | Consistency | Fatal | <p>a) If A0050 (formerly X0100)=[2], then all active items from X0900A through X0900Z must not equal [^].</p> <p>b) If A0050 (formerly X0100)=[3], then all active items from X0900A through X0900Z must equal [^].</p> <table><tr><td>Items:</td><td>A0050</td><td>Type of transaction (formerly X0100)</td></tr><tr><td></td><td>X0900A</td><td>Correction: modif reasons - transcription error</td></tr><tr><td></td><td>X0900B</td><td>Correction: modif reasons - data entry error</td></tr><tr><td></td><td>X0900C</td><td>Correction: modif reasons - software error</td></tr></table> | Items: | A0050 | Type of transaction (formerly X0100) | | X0900A | Correction: modif reasons - transcription error | | X0900B | Correction: modif reasons - data entry error | | X0900C | Correction: modif reasons - software error | | | | | | | | | | | | | | | |
| Items: | A0050 | Type of transaction (formerly X0100) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | X0900A | Correction: modif reasons - transcription error | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | X0900B | Correction: modif reasons - data entry error | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | X0900C | Correction: modif reasons - software error | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| | | | Items: X0900D Correction: modif reasons - item coding error X0900Z Correction: modif reasons - other error |
| | | | |
| -3780 | Consistency | Fatal | a) If A0050 (formerly X0100)=[2], then all active items from X1050A through X1050Z must equal [^]. b) If A0050 (formerly X0100)=[3], then all active items from X1050A through X1050Z must not equal [^]. |
| | | | Items: A0050 Type of transaction (formerly X0100) X1050A Correction: inert reasons - event did not occur X1050Z Correction: inert reasons - other reason |
| | | | |
| -3781 | Consistency | Fatal | If A0050 (formerly X0100)=[2,3], then all active items from X1100A through X1100E must not equal [^]. |
| | | | Items: A0050 Type of transaction (formerly X0100) X1100A Correction: attestor first name X1100B Correction: attestor last name X1100E Correction: attestation date |
| | | | |
| -3782 | Consistency | Fatal | V0100A and V0100B cannot both be equal to [99]. |
| | | | Items: V0100A Prior OBRA reason for assessment V0100B Prior PPS reason for assessment |
| | | | |
| -3783 | Consistency | Fatal | The first record that is submitted to correct or inactivate an existing record must have a value of "01" in X0800 (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 X0800 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 X0800 is incorrect, a fatal error will result and the submitted record will be rejected. |
| | | | Items: X0800 Correction: correction number |
| | | | |
| -3784 | Skip pattern | Fatal | Skip patterns based on J0200: a) If J0200=[0], then the following rules apply: ---a1) All active items from J0300 through J0700 must equal [^]. ---a2) If J0800A through J0800Z are active, they must not equal [^]. b) If J0200=[1], then if J0300 is active it must not equal [^]. c) If J0200=[-], then J0300, if active, must equal [-]. |
| | | | Items: J0200 Should pain assessment interview be conducted J0300 Res pain interview: presence J0410 Pain Frequency |
| | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| -3786 | Consistency | Fatal | Items: J0510 Pain Effect on Sleep J0520 Pain Interference with Therapy Activities J0530 Pain Interference with Day-to-Day Activities J0600A Res pain interview: intensity rating scale J0600B Res pain interview: verbal descriptor scale J0700 Should staff assessment for pain be conducted J0800A Staff pain asmt: non-verbal sounds J0800B Staff pain asmt: vocal complaints of pain J0800C Staff pain asmt: facial expressions J0800D Staff pain asmt: protective movements/postures J0800Z Staff pain asmt: none of these signs observed |
| | | | a) If J0700=[0], then all active items from J0800A through J0850 must equal [^]. |
| | | | b) If J0700=[1], then all active items from J0800A through J0800Z must not equal [^]. |
| | | | c) If J0700=[-], then all active items from J0800A through J0800Z must not equal [^]. |
| | | | Items: J0700 Should staff assessment for pain be conducted J0800A Staff pain asmt: non-verbal sounds J0800B Staff pain asmt: vocal complaints of pain J0800C Staff pain asmt: facial expressions J0800D Staff pain asmt: protective movements/postures J0800Z Staff pain asmt: none of these signs observed J0850 Staff pain asmt: frequency of pain |
| | | | a) If J0800Z=[0], then if J0850 is active it must not equal [^]. |
| | | | b) If J0800Z=[1,^], then if J0850 is active it must equal [^]. |
| | | | c) If J0800Z=[-], then if J0850 is active it must equal [-]. |
| | | | Items: J0800Z Staff pain asmt: none of these signs observed J0850 Staff pain asmt: frequency of pain |
| | | | If A0050 (formerly X0100)=[2,3], then if X0800 is active it must not equal [^]. |
| | | | Items: A0050 Type of transaction (formerly X0100) X0800 Correction: correction number |
| | | | The length of the text submitted for a free-form text item must not exceed the maximum length specified for that item. |
| | | | Items: FAC_ID Assigned facility/provider submission ID SFTWR_VNDR_ID Software vendor federal employer tax ID |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | SFTWR_VNDR_NA ME Software vendor company name |
| | | | SFTWR_VNDR_EM AIL_ADR Software vendor email address |
| | | | SFTWR_PROD_NA ME Software product name |
| | | | SFTWR_PROD_VRS N_CD Software product version code |
| | | | FAC_DOC_ID Facility document ID |
| | | | A0100A Facility National Provider Identifier (NPI) |
| | | | A0100C State provider number |
| | | | A0500A Resident first name |
| | | | A0500B Resident middle initial |
| | | | A0500C Resident last name |
| | | | A0500D Resident name suffix |
| | | | A0600A Social Security Number |
| | | | A0600B Medicare number |
| | | | A0700 Medicaid number |
| | | | A1110A Preferred language |
| | | | A1300A Medical record number |
| | | | A1300B Room number |
| | | | A1300C Name by which resident prefers to be addressed |
| | | | A1300D Lifetime occupation(s) |
| | | | X0200A Correction: resident first name |
| | | | X0200C Correction: resident last name |
| | | | X0500 Correction: resident social security number |
| | | | X1100A Correction: attestor first name |
| | | | X1100B Correction: attestor last name |
| | | | Z0100A Medicare Part A: HIPPS code |
| | | | Z0100B Medicare Part A: Version code |
| | | | Z0200A State case mix: Group |
| | | | Z0200B State case mix: Version code |
| | | | Z0250A State case mix: Alternate group |
| | | | Z0250B State case mix: Alternate version code |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| -3794 | Consistency | Fatal | <p>a) If SFTWR_PROD_NAME is equal to [^], then SFTWR_PROD_VRSN_CD must be equal to [^].</p> <p>b) If SFTWR_PROD_NAME is not equal to [^], then SFTWR_PROD_VRSN_CD must not be equal to [^].</p> <p>Items: SFTWR_PROD_NA Software product name ME SFTWR_PROD_VRSN_CD Software product version code</p> |
| -3795 | Consistency | Fatal | <p>If A0050 (formerly X0100) is equal to [2], then at least one item from X0900A through X0900Z must equal [1].</p> <p>Items: A0050 Type of transaction (formerly X0100) X0900A Correction: modif reasons - transcription error X0900B Correction: modif reasons - data entry error X0900C Correction: modif reasons - software error X0900D Correction: modif reasons - item coding error X0900Z Correction: modif reasons - other error</p> |
| -3796 | Consistency | Fatal | <p>The submission system will recalculate the ISC and compare the recalculated value with the value that is submitted in ITM_SBST_CD. If A0050 (formerly X0100)=[3] (the record is an inactivation), then the recalculated ISC value will be [XX]. If A0050=[1,2] (the record is a new record or a modification record), then the recalculated ISC value will be based upon the submitted RFA values. In either case, if the recalculated value does not match the value submitted in ITM_SBST_CD, a fatal error will result.</p> <p>Items: ITM_SBST_CD Item subset code A0050 Type of transaction (formerly X0100) A0200 Type of provider A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310E First assessment since most recent entry A0310F Entry/discharge reporting</p> |
| -3797 | Consistency | Fatal | <p>a) If A0310A is equal to [01] OR A0310E is equal to [1], then all active items J1700A through J1700C must not equal [^].</p> <p>b) If A0310A is not equal to [01] AND A0310E is not equal to [1], then all active items J1700A through J1700C must equal [^].</p> <p>Items: A0310A Type of assessment: OBRA</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| | | | Items: A0310E First assessment since most recent entry J1700A Fall history: fall during month before admission J1700B Fall history: fall 2-6 months before admission J1700C Fall history: fracture from fall 6 month pre admit |
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| -3802 | Format | Fatal | <p>Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, Ampersands, and Other 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 character [-].</p> <p>d) The following special characters:</p> <p>[&] (ampersand)</p> <p>[@] (at sign)</p> <p>['] (single quote)</p> <p>[/] (forward slash)</p> <p>[+] (plus sign)</p> <p>[,] (comma)</p> <p>[.] (period)</p> <p>[_] (underscore)</p> <p>e) Embedded spaces (spaces surrounded by any of the characters listed above). For example, [LEGAL TEXT] would be allowed.</p> |
| | | | Items: SFTWR_VNDR_NA Software vendor company name ME SFTWR_PROD_NA Software product name ME Z0100A Medicare Part A: HIPPS code Z0100B Medicare Part A: Version code Z0200A State case mix: Group Z0200B State case mix: Version code Z0250A State case mix: Alternate group Z0250B State case mix: Alternate version code |
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| -3805 | Consistency | Fatal | <p>If F0300 is equal to [0], then all active items from F0800A through F0800Z must not equal [^].</p> |
| | | | Items: F0300 Conduct res interview for daily/activity prefs F0800A Staff assessment: choosing clothes to wear F0800B Staff assessment: caring for personal belongings F0800C Staff assessment: receiving tub bath F0800D Staff assessment: receiving shower |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------|----------|--|
| | | | Items: F0800E Staff assessment: receiving bed bath F0800F Staff assessment: receiving sponge bath F0800G Staff assessment: snacks between meals F0800H Staff assessment: staying up past 8PM F0800I Staff assessment: discuss care with family/other F0800J Staff assessment: use phone in private F0800K Staff assessment: place to lock personal things F0800L Staff assessment: reading books, newspapers, mags F0800M Staff assessment: listening to music F0800N Staff assessment: being around animals/pets F0800O Staff assessment: keeping up with news F0800P Staff assessment: doing things with groups F0800Q Staff assessment: participate favorite activities F0800R Staff assessment: spend time away from nursng home F0800S Staff assessment: spend time outdoors F0800T Staff assessment: participate religious activities F0800Z Staff assessment: none of above activities |
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| -3807 | Format | Warning | 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. For example, do not submit [1.00.], [1.00.0], [1.00.1], or [1.00.2]. A value of [1.00] should be submitted instead. |
| | | | Items: ITM_SET_VRSN_CD Item set version code SPEC_VRSN_CD Specifications version code |
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| -3808 | Format | Warning | When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted. |
| | | | Items: S0101 Admitted from Community S0102 Admitted from NH or SB S0111 Lived Alone S0113 Resident Living Situation Prior to Admission S0114 Resident has one or more support person(s) S0115 Spouse Location S0120 Prior Residence ZIP Code S0122 Prior Residence State S0123 Prior Residence County |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | S0125 Prior Residence Town Code |
| | | | S0130 Highest Education Completed |
| | | | S0140 Physician License Number |
| | | | S0141 Physician Name |
| | | | S0150 State Resident ID |
| | | | S0153 Resident Identifier |
| | | | S0160 Resident resides in specialty unit |
| | | | S0161A Requires specialized unit: dementia/Alzheimer |
| | | | S0161B Requires specialized unit: behavioral health |
| | | | S0161C Requires specialized unit: TBI |
| | | | S0161D Requires specialized unit: ventilator |
| | | | S0161Z Requires specialized unit: none of the above |
| | | | S0165A Specialty services: Dementia/Alzheimers |
| | | | S0165B Specialty services: Behavioral Health |
| | | | S0165C Specialty services: Traumatic Brain Injury |
| | | | S0165D Specialty services: Ventilator |
| | | | S0165E Specialty services: On-Site Dialysis |
| | | | S0165Z Specialty services: None of the Above |
| | | | S0166 Resident rqrd srvc rsded splcd unit last 14 days |
| | | | S0170A Advanced directive: Guardian |
| | | | S0170B Advanced directive: DPOA-HC |
| | | | S0170C Advanced directive: Living will |
| | | | S0170D Advanced directive: Do not resuscitate |
| | | | S0170E Advanced directive: Do not hospitalize |
| | | | S0170F Advanced directive: Do not intubate |
| | | | S0170G Advanced directive: Feeding restrictions |
| | | | S0170H Advanced directive: Other treatment restrictions |
| | | | S0170Z Advanced directive: None of the above |
| | | | S0171A Resident healthcare proxy exists |
| | | | S0171B Resident healthcare proxy invoked |
| | | | S0172A Goal discussion: documentation received |
| | | | S0172B Goal discussion: hospital |
| | | | S0172C Goal discussion: previous NH |
| | | | S0172D Goal discussion: Home without home health services |
| | | | S0172E Goal discussion: Home with home health services |
| | | | S0172F Goal discussion: PCP office |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | S0172G Goal discussion: Other |
| | | | S0172H Goal discussion: Not occur reason |
| | | | S0173 Documentation of goals of care discussion |
| | | | S0174 Resident has Advanced Directive |
| | | | S0175 Resident has POA for Health Care |
| | | | S0180 Discharged to Community |
| | | | S0183 Discharged prior to admission assessment |
| | | | S0185 Discharge to hospital-healthcare proxy involvement |
| | | | S0195A Lcl Cntct Agency Rfrl Dcsn - Active disch in prcss |
| | | | S0195B Lcl Cntct Agency Rfrl Dcsn - Legal reasons |
| | | | S0195C Lcl Cntct Agency Rfrl Dcsn - Clinical reasons |
| | | | S0195D Lcl Cntct Agency Rfrl Dcsn - Behavioral reasons |
| | | | S0195Y Lcl Cntct Agency Rfrl Dcsn - Other reasons |
| | | | S0195Z Lcl Cntct Agency Rfrl Dcsn - None of the Above |
| | | | S0200A Local Contact Agency Referral Decision |
| | | | S0200B Local Contact Agency Referral Decision - Other |
| | | | S0500 Level of Care |
| | | | S0501 CCNH RHNS Level of Care |
| | | | S0505 Level of care |
| | | | S0509 PASRR Level I completed prior to admission |
| | | | S0509B PASRR Level I completed - Significant change |
| | | | S0510 PASRR Screening Complete |
| | | | S0511 PASRR Level I Complete Date |
| | | | S0512 PASRR Level I |
| | | | S0513 PASRR Screening Outcome |
| | | | S0514 Was a PASRR Level I determination completed? |
| | | | S0515 Mst rcnt PASRR Lvl I or II determination cmplt n dt |
| | | | S0520 Reason for Admission |
| | | | S0521 Reason for Admission |
| | | | S0535 Referral - PASRR Level II Assessment Determination |
| | | | S0540 PASRR Level II Assessment Determination Made |
| | | | S0545 Most Recent PASRR Level II determination |
| | | | S0550 Outcome Of Most Recent Determination |
| | | | S0555 Approved Time Frame for NF Short Term Placement |
| | | | S0600A Meets criteria: requires ventilator 10+ hours |
| | | | S0600B Meets criteria: requires ventilator 16+ hours |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | S0600C Meets criteria: Traumatic Brain Injury-Tier I |
| | | | S0600D Meets criteria: Traumatic Brain Injury-Tier II |
| | | | S0600E Meets criteria: Traumatic Brain Injury-Tier III |
| | | | S0600Z Meets criteria: none of the above |
| | | | S1000 Local Health Department Reporting |
| | | | S1001 State Health Department Reporting |
| | | | S1002 Local Health Department Reporting |
| | | | S1003 State Health Department Reporting |
| | | | S1004 Local/State Health Department Reporting |
| | | | S1100A Disease: Clostridium Difficile |
| | | | S1100B Disease: MRSA |
| | | | S1100C Disease: VRE |
| | | | S1100D Disease: VISA |
| | | | S1100E Disease: VRSA |
| | | | S1100F Disease: Other MDRO |
| | | | S1100F1 Disease: MDRO Name1 |
| | | | S1100F2 Disease: MDRO Name2 |
| | | | S1100G Disease: Tuberculosis |
| | | | S1100H Disease: Herpes Zoster |
| | | | S1100I Disease: Scabies |
| | | | S1100J Disease: CRE |
| | | | S1100Z Disease: None of the Above |
| | | | S1110A Active diagnosis of Asthma/COPD with treatment |
| | | | S1110B Diagnosis of Pneumonia documented |
| | | | S1110C Diagnosis of Septicemia documented |
| | | | S1120A1 Start date for treatment of asthma/COPD |
| | | | S1120A2 End date for treatment of asthma/COPD |
| | | | S1120B Last treatment date of Pneumonia diagnosis |
| | | | S1120C Last treatment date for Septicemia Diagnosis |
| | | | S1150 Active TBI Diagnosis |
| | | | S1200A Primary/secondary SMI dx: schizophrenia |
| | | | S1200B Primary/secondary SMI dx: delusional disorder |
| | | | S1200C Primary/secondary SMI dx: schizoaffective disorder |
| | | | S1200D Primary/secondary SMI dx: psychotic disorder NOS |
| | | | S1200E Primary/secondary SMI dx: bipolar disorder I |
| | | | S1200F Primary/secondary SMI dx: bipolar disorder II |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | |
| | | S1200G | Primary/secondary SMI dx: cyclothymic disorder |
| | | S1200H | Primary/secondary SMI dx: bipolar disorder NOS |
| | | S1200I | Primary/secondary SMI dx: major depress recurrent |
| | | S1210A | Mental Health Diagnoses: Schizophrenia |
| | | S1210B | Mental Health Diagnoses: Delusional |
| | | S1210C | Mental Health Diagnoses: Schizoaffective disorder |
| | | S1210D | Mental Health Diagnoses: Psychotic disorder not sp |
| | | S1210E | Mental Health Diagnoses: Bipolar I mixed, manic |
| | | S1210F | Mental Health Diagnoses: Bipolar disorder II |
| | | S1210G | Mental Health Diagnoses: Cyclothymic disorder |
| | | S1210H | Mental Health Diagnoses: Bipolar disorder not sp |
| | | S1210I | Mental Health Diagnoses: Major depression, recur |
| | | S1210Z | Mental Health Diagnoses: None of the Above |
| | | S2000 | Capable of self-administration of medications |
| | | S2001 | Wishes to self-medicate |
| | | S2010 | Refused meds 3 days |
| | | S2011 | Staff support for meds 3 days |
| | | S2015 | Refused meds occasionally 30 days |
| | | S2016 | Refused meds frequently 30 days |
| | | S2040 | Behavior Management Program |
| | | S2050 | Resists grooming/hygiene |
| | | S2060A | Resident centered care: Oasis |
| | | S2060B | Resident centered care: habilitation therapy |
| | | S2060C | Resident centered care: hand in hand |
| | | S2060D | Resident centered care: consistent assignment |
| | | S2060E | Resident centered care: other |
| | | S2060Z | Resident centered care: none of the above |
| | | S2070 | Type of counseling received by resident |
| | | S2200A | Resident received Restorative Nursing |
| | | S2200B | Evaluation of Restorative program w/licensed nurse |
| | | S2200C | Start date of Restorative program |
| | | S2200D | End date of Restorative program |
| | | S2300A | Resident received Respiratory Therapy |
| | | S2300B | Respiratory Therapy documented as rsnl/ncssry |
| | | S2300C | Date of progress note for Respiratory Therapy |
| | | S3100A | Contractures: Hand |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | S3100B Contractures: Wrist |
| | | | S3100C Contractures: Elbow |
| | | | S3100D Contractures: Shoulder |
| | | | S3100E Contractures: Neck |
| | | | S3100F Contractures: Ankle |
| | | | S3100G Contractures: Knee |
| | | | S3100H Contractures: Hip |
| | | | S3100Z Contractures: Other |
| | | | S3200A Dominant Side |
| | | | S3200B Use of dominant hand/arm |
| | | | S3300 Weight-based Equipment Need |
| | | | S3305A Lifting device for weight |
| | | | S3305B Wheelchair or mobility device for weight |
| | | | S3305C Bed for weight |
| | | | S3305D Seating for weight |
| | | | S3305E More than 2 staff for weight |
| | | | S3305Y Other for weight |
| | | | S3310A Therapy Services Billed - Medicare Part A |
| | | | S3310B Therapy Services Billed - Medicare Part B |
| | | | S3310C Therapy Services Billed - Managed Care Entity |
| | | | S3310D Therapy Services Billed - Medicaid |
| | | | S3310Y Therapy Services Billed - Other |
| | | | S3310Z Therapy Services Billed - None Of The Above |
| | | | S3315A COPD Treatment - Oxygen |
| | | | S3315B COPD Treatment - Inhaler/Nebulizer |
| | | | S3315C COPD Treatment - Acute Monitoring Of Respiratory |
| | | | S3315D COPD Treatment - Medications |
| | | | S3315Y COPD Treatment - Other |
| | | | S3315Z COPD Treatment - None Of The Above |
| | | | S3320A Resident had shortness of breath while lying flat |
| | | | S3320B Last date Rsprrtry/Nrsng note shrtncs brth lyng flt |
| | | | S3321A Rsdnt avoided lying flat scndry to shrtncs of brth |
| | | | S3321B Last date Rsprrtry/Nrsng note avoided lyng flt |
| | | | S4000A Harm: Self Injury/Self-injurious attempt |
| | | | S4000B Harm: Attempt was to kill self |
| | | | S4000C Harm: Considered injuring self |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | S4000D Harm: Self-injury caregiver concern |
| | | | S4010A Hourly Interval Observation |
| | | | S4010B 15- Min. Interval Observation |
| | | | S4010C 5- Min. Interval Observation |
| | | | S4010D Constant Observation for < 1 hr |
| | | | S4010E Constant Observation for > 1 hr |
| | | | S4500 Substance Abuse: Alcoholic Drinks |
| | | | S4510A Substance Abuse: Inhalants |
| | | | S4510B Substance Abuse: Hallucinogens |
| | | | S4510C Substance Abuse: Cocaine and Crack |
| | | | S4510D Substance Abuse: Stimulants |
| | | | S4510E Substance Abuse: Opiates |
| | | | S4510F Substance Abuse: Cannabis |
| | | | S5000 Number of New Pressure Ulcers |
| | | | S5005 New Pressure Ulcer setting |
| | | | S5010A1 Pressure ulcer 1 location |
| | | | S5010A2 Pressure ulcer 1 status |
| | | | S5010B1 Pressure ulcer 2 location |
| | | | S5010B2 Pressure ulcer 2 status |
| | | | S5010C1 Pressure ulcer 3 location |
| | | | S5010C2 Pressure ulcer 3 status |
| | | | S5010D1 Pressure ulcer 4 location |
| | | | S5010D2 Pressure ulcer 4 status |
| | | | S5010E1 Pressure ulcer 5 location |
| | | | S5010E2 Pressure ulcer 5 status |
| | | | S5010F1 Pressure ulcer 6 location |
| | | | S5010F2 Pressure ulcer 6 status |
| | | | S5010G1 Pressure ulcer 7 location |
| | | | S5010G2 Pressure ulcer 7 status |
| | | | S5010H1 Pressure ulcer 8 location |
| | | | S5010H2 Pressure ulcer 8 status |
| | | | S5010I1 Pressure ulcer 9 location |
| | | | S5010I2 Pressure ulcer 9 status |
| | | | S6000 Parenteral/IV feeding in NH |
| | | | S6001A Parenteral nutrition while not a resident |
| | | | S6001B Parenteral nutrition while a resident |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | S6002 501cc or greater of prntrl ntrtn while a resident |
| | | | S6005 IV meds in NH |
| | | | S6010 Oxygen Therapy in NH |
| | | | S6020A Vent/resp specialized RN expertise |
| | | | S6020B Vent/resp specialized CNA training needed |
| | | | S6020C Vent/resp specialized therapy (PT,OT,RT) expertise |
| | | | S6020D Vent/resp specialized equipment |
| | | | S6020Y Vent/resp Other |
| | | | S6020Z Vent/resp None of the Above |
| | | | S6022A Vent/resp days licensed nurse: hourly intervals |
| | | | S6022B Vent/resp days licensed nurse: 15-minute intervals |
| | | | S6022C Vent/resp days licensed nurse: 5-minute intervals |
| | | | S6023A Vent/resp days CNA: hourly intervals |
| | | | S6023B Vent/resp days CNA: 15-minute intervals |
| | | | S6023C Vent/resp days CNA: 5-minute intervals |
| | | | S6024A Vent/resp days RT: hourly intervals |
| | | | S6024B Vent/resp days RT: 15-minute intervals |
| | | | S6024C Vent/resp days RT: 5-minute intervals |
| | | | S6050 Isolation precautions needed |
| | | | S6051A Isolation Precaution: Airborne |
| | | | S6051B Isolation Precaution: Contact |
| | | | S6051C Isolation Precaution: Droplet |
| | | | S6051D Isolation Precaution: Protective |
| | | | S6052 Isolation Required |
| | | | S6053A Met Isolation Requirements Start Date |
| | | | S6053B Met Isolation Requirements End Date |
| | | | S6060A Resident In Strict Isolation |
| | | | S6060B Strict Isolation Start Date |
| | | | S6060C Strict Isolation End Date |
| | | | S6100A Vaccination: Varicella |
| | | | S6100B Vaccination: Tetanus, diphtheria (Td) |
| | | | S6100C Vaccination: Tetanus, diphtheria, pertussis (Tdap) |
| | | | S6100D Vaccination: Measles, Mumps, Rubella (MMR) |
| | | | S6100E Vaccination: Other |
| | | | S6100F1 Vaccination: Other Name 1 |
| | | | S6100F2 Vaccination: Other Name 2 |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | S6100F3 Vaccination: Other Name 3 |
| | | | S6100Z Vaccination: None of the above |
| | | | S6200 Number of Hospital Stays |
| | | | S6201 Number of Unreported Hospital Stays |
| | | | S6202 Hosp admissions w/overnight stay in last 90 days |
| | | | S6205 Number of Observation Stays |
| | | | S6210 Number of ER visits |
| | | | S6211 Number of Unreported ER Visits |
| | | | S6212 ER visits w/o overnight stay in last 90 days |
| | | | S6220 Alzheimer's/Dementia Special Care Unit |
| | | | S6230 Has resident received antipsychotic |
| | | | S6232 Is resident currently receiving antipsychotic |
| | | | S6234 Attempt to reduce amount of antipsychotic |
| | | | S6236 Was reduction in antipsychotic maintained |
| | | | S6299 Resident Currently Has SUD Diagnosis |
| | | | S6300 Resident meds - opioid use disorder |
| | | | S6301 Standing order for Naloxone |
| | | | S6301A Current prescription or standing order - Opioid |
| | | | S6301B Current prescription or standing order - MOUD |
| | | | S6301C Current prescription or standing order - Naxalone |
| | | | S6301Z Current prescription or standing order - None |
| | | | S6302 Buprenorphine prescribed |
| | | | S6303A Counseling for opioid use disorder - No |
| | | | S6303B Counseling for opioid use disorder - onsite |
| | | | S6303C Counseling for opioid use disorder - alt location |
| | | | S6303D Counseling for opioid use disorder - virtually |
| | | | S6303E Counseling for opioid use disorder - No |
| | | | S6303F Counseling for opioid use disorder - onsite |
| | | | S6303G Counseling for opioid use disorder - alt location |
| | | | S6303H Counseling for opioid use disorder - virtually |
| | | | S6304 Resident diag warrants psychotropic medication |
| | | | S6304A Psychotropic med - Antidepressants |
| | | | S6304B Psychotropic med - Anxiolytics |
| | | | S6304C Psychotropic med - Antipsychotics |
| | | | S6304D Psychotropic med - Stimulants |
| | | | S6304E Psychotropic med - Chemical Dependency Adjuncts |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | S6304F Psychotropic med - Monoamine Oxidase Inhibitors |
| | | | S6304G Psychotropic med - Mood Stabilizers |
| | | | S6304H Psychotropic med - Miscellaneous Drugs |
| | | | S6304I Psychotropic med - Other |
| | | | S6305A Active order for PRN psychotropics |
| | | | S6305B Last date received psychotropics |
| | | | S6500 Comfort care provided in the last 14 days |
| | | | S7000 Dental Care |
| | | | S7001 Dental Care Routine |
| | | | S7002 Dental Care Emergent |
| | | | S7500A Resident requires room w/o roommate |
| | | | S7500B Date resident placed in room w/o roommate |
| | | | S7500C Resident behavior puts roommate safety at risk |
| | | | S7500D Resident behavior infringes on roommate rights |
| | | | S7500E Resident care plan documents need for own room |
| | | | S7500F Resident requires own room - bariatric equipment |
| | | | S7500G Date resident placed in own room - bariatric equip |
| | | | S7500H Resident care plan - need for own room - bariatric |
| | | | S8000A1 Medicare - Primary Payor |
| | | | S8000A2 Medicare - Secondary Payor |
| | | | S8000A3 Medicare Payor |
| | | | S8000B1 Medicare Part A - Primary Payor |
| | | | S8000B2 Medicare Part A - Secondary Payor |
| | | | S8000B3 Medicare Part A Payor |
| | | | S8000C1 Medicare Part B - Primary Payor |
| | | | S8000C2 Medicare Part B - Secondary Payor |
| | | | S8000C3 Medicare Part B Payor |
| | | | S8000D1 Medicare Part C - Primary Payor |
| | | | S8000D2 Medicare Part C - Secondary Payor |
| | | | S8000D3 Medicare Part C Payor |
| | | | S8000E1 Medicare per diem - Primary Payor |
| | | | S8000E2 Medicare per diem - Secondary Payor |
| | | | S8000E3 Medicare per diem Payor |
| | | | S8000Z Medicare not a payment source |
| | | | S8010A1 In-state Medicaid - Primary Payor |
| | | | S8010A2 In-state Medicaid - Secondary Payor |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | S8010A3 In-state Medicaid payor |
| | | | S8010B1 Out-of-state Medicaid - Primary Payor |
| | | | S8010B2 Out-of-state Medicaid - Secondary Payor |
| | | | S8010B3 Out-of-state Medicaid Payor |
| | | | S8010C1 Medicaid per diem - Primary Payor |
| | | | S8010C2 Medicaid per diem - Secondary Payor |
| | | | S8010C3 Medicaid per diem Payor |
| | | | S8010D1 Medicaid managed care per diem - Primary Payor |
| | | | S8010D2 Medicaid managed care per diem - Secondary Payor |
| | | | S8010D3 Medicaid managed care per diem Payor |
| | | | S8010E1 Medicaid per diem (not MC) - Primary Payor |
| | | | S8010E2 Medicaid per diem (not MC) - Secondary Payor |
| | | | S8010E3 Medicaid per diem (not MC) Payor |
| | | | S8010F Medicaid per diem type |
| | | | S8010F1 Medicaid Resident Liability - Primary Payor |
| | | | S8010F2 Medicaid Resident Liability - Secondary Payor |
| | | | S8010F3 Medicaid Resident Liability Payor |
| | | | S8010G Medicaid state source |
| | | | S8010G1 Medicare Co-Pay - Primary Payor |
| | | | S8010G2 Medicare Co-pay - Secondary Payor |
| | | | S8010G3 Medicare Co-pay Payor |
| | | | S8010H1 Picture Date reporting |
| | | | S8010H2 Medicaid Other - Secondary Payor |
| | | | S8010H3 Medicaid Other Payor |
| | | | S8010I1 Medicaid Pending - Primary Payor |
| | | | S8010I2 Medicaid Pending - Secondary Payor |
| | | | S8010I3 Medicaid Pending Payor |
| | | | S8010Z Medicaid not a payment source |
| | | | S8015 MMIS Identification Number |
| | | | S8020A1 Private - Primary Payor |
| | | | S8020A2 Private - Secondary Payor |
| | | | S8020A3 Private Payor |
| | | | S8020B1 Private per diem - Primary Payor |
| | | | S8020B2 Private per diem - Secondary Payor |
| | | | S8020B3 Private per diem Payor |
| | | | S8020C1 Private LTC insurance policy - Primary Payor |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | S8020C2 Private LTC insurance policy - Secondary Payor |
| | | | S8020C3 Private LTC insurance policy |
| | | | S8020Z Private insurance not a payment source |
| | | | S8030A1 Self-pay - Primary Payor |
| | | | S8030A2 Self-pay - Secondary Payor |
| | | | S8030A3 Self-pay Payor |
| | | | S8030B1 Family pay - Primary Payor |
| | | | S8030B2 Family pay - Secondary Payor |
| | | | S8030B3 Family pay Payor |
| | | | S8030C Self or Family pay for full per diem |
| | | | S8030Z Self or Family not a payment source |
| | | | S8040A1 State Run Medical Assistance - Primary Payor |
| | | | S8040A2 State Run Medical Assistance - Secondary Payor |
| | | | S8040A3 State Run Medical Assistance Payor |
| | | | S8040B1 Tricare per diem - Primary Payor |
| | | | S8040B2 Tricare per diem - Secondary Payor |
| | | | S8040B3 Tricare per diem Payor |
| | | | S8040C1 VA per diem - Primary Payor |
| | | | S8040C2 VA per diem - Secondary Payor |
| | | | S8040C3 VA per diem Payor |
| | | | S8040D1 Other Public - Primary Payor |
| | | | S8040D2 Other Public - Secondary Payor |
| | | | S8040D3 Other Public Payor |
| | | | S8040Z Other government not a payment source |
| | | | S8050A1 Other - Primary Payor |
| | | | S8050A2 Other - Secondary Payor |
| | | | S8050A3 Other Payor |
| | | | S8050B Other Payor Name 1 |
| | | | S8050C Other Payor Name 2 |
| | | | S8050D Other Payor Name 3 |
| | | | S8055 Primary payor |
| | | | S8099 Payor: None of the Above |
| | | | S8500 Medicaid begin date |
| | | | S8510A Medicaid Therapeutic bed-hold days since last asmt |
| | | | S8510B Medicaid Therapeutic bed-hold days - YTD |
| | | | S8512A Medicaid hospital bed-hold days since last asmt |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | S8512B Medicaid hospital bed-hold days - YTD |
| | | | S8520A Medicaid Leave Days Type 1 |
| | | | S8520B Leave Days for Medicaid begin date 1 |
| | | | S8520C Leave Days for Medicaid end date 1 |
| | | | S8521A Medicaid Leave Days Type 2 |
| | | | S8521B Leave Days for Medicaid begin date 2 |
| | | | S8521C Leave Days for Medicaid end date 2 |
| | | | S9000 IL Skills Training |
| | | | S9001 IL IDPH Subpart S criteria |
| | | | S9002A IL IDPH Subpart S: Schizophrenia |
| | | | S9002B IL IDPH Subpart S: Delusional disorder |
| | | | S9002C IL IDPH Subpart S: Schizoaffective disorder |
| | | | S9002D IL IDPH Subpart S: Psychotic disorder not specified |
| | | | S9002E IL IDPH Subpart S: Bipolar I mixed, manic, & depr |
| | | | S9002F IL IDPH Subpart S: Bipolar disorder II |
| | | | S9002G IL IDPH Subpart S: Cyclothymic disorder |
| | | | S9002H IL IDPH Subpart S: Bipolar disorder not specified |
| | | | S9002I IL IDPH Subpart S: Major depression, recurrent |
| | | | S9003 IL IDPH Subpart S: Ancillary |
| | | | S9020 FL FRAES number |
| | | | S9040A CA POLST |
| | | | S9040B CA POLST Section A |
| | | | S9040C CA POLST Section B |
| | | | S9040C1 CA POLST Section B (revised) |
| | | | S9040D CA POLST Section C |
| | | | S9040D1 CA POLST Section C (revised) |
| | | | S9040E CA POLST D phys/nurse prac/phys asst signature |
| | | | S9040F CA POLST D resident signature |
| | | | S9040G CA POLST D discussed with patient or decisionmaker |
| | | | S9040H CA POLST advanced directive |
| | | | S9060 Reimbursement (Add-on) conditions |
| | | | S9080A PA MA CASE-MIX |
| | | | S9080B PA MA CASE-MIX Date |
| | | | S9080C PA MA CASE-MIX Access Card Number |
| | | | S9080D PA MA CASE-MIX MA NF Effective Date |
| | | | S9080E PA MA CASE-MIX Day One MA |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: S9085A Resident enrolled in Community HealthChoices (CHC) S9085B CHC effective date S9085C CHC product name S9085D CHC member ID S9100A VA Room & Board Payment Assessment Reference Date S9100B VA Room & Board Payment Entry Date S9100C VA Medicaid Room & Board initial date S9120 CT Approved LTC S9140 Completed LAPOST |
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| -3809 | Skip pattern | Fatal | (a) If D0100=[0], then all active items from D0500A1 through D0600 must not equal [^]. |
| | | | Items: D0100 PHQ: should resident mood interview be conducted D0500A1 PHQ staff: little interest or pleasure - presence D0500A2 PHQ staff: little interest or pleasure - frequency D0500B1 PHQ staff: feeling down, depressed - presence D0500B2 PHQ staff: feeling down, depressed - frequency D0500C1 PHQ staff: trouble with sleep - presence D0500C2 PHQ staff: trouble with sleep - frequency D0500D1 PHQ staff: feeling tired/little energy - presence D0500D2 PHQ staff: feeling tired/little energy - frequency D0500E1 PHQ staff: poor appetite or overeating - presence D0500E2 PHQ staff: poor appetite or overeating - frequency D0500F1 PHQ staff: feeling bad about self - presence D0500F2 PHQ staff: feeling bad about self - frequency D0500G1 PHQ staff: trouble concentrating - presence D0500G2 PHQ staff: trouble concentrating - frequency D0500H1 PHQ staff: slow, fidgety, restless - presence D0500H2 PHQ staff: slow, fidgety, restless - frequency D0500I1 PHQ staff: thoughts better off dead - presence D0500I2 PHQ staff: thoughts better off dead - frequency D0500J1 PHQ staff: short-tempered - presence D0500J2 PHQ staff: short-tempered - frequency D0600 PHQ staff: total mood score |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | |
|--------|--------------|--|--|--------|-------|--------------------------------------|--|--------|---|--|--------|--|--|--------|--|--|-------|----------------|--|---------|----------------------------------|--|--------|------------------------------|--|--------|---------------------------------------|
| -3810 | Consistency | Warning | <p>RECORD SUBMISSION TIMING RULES</p> <p>The following rules specify the maximum number of days which should elapse between each date listed and the submission date. There are different rules for new records (where A0050 (formerly X0100)=[1]) and for modifications and inactivations (where A0050 (formerly X0100)=[2,3]).</p> <p>RULES FOR NEW RECORDS (WHERE A0050=[1]):</p> <p>The following rules apply to new records, where A0050=[1].</p> <p>a) If A0310F is equal to [01] (entry record), then submission date - A1600 (entry date) should be less than or equal to 14 days.</p> <p>b) If A0310F is equal to [12] (death in facility record), then submission date - A2000 (discharge date) should be less than or equal to 14 days.</p> <p>c) If A0310F is equal to [10,11,99] and A0310A is equal to [01,03,04,05] (comprehensive assessment), then submission date - V0200C2 (care plan completion date) should be less than or equal to 14 days.</p> <p>d) If A0310F is equal to [10,11,99] and A0310A is equal to [02,06,99] (all other types of assessment), then submission date - Z0500B (assessment completion date) should be less than or equal to 14 days.</p> <p>RULES FOR MODIFICATIONS/INACTIVATIONS (WHERE A0050=[2,3]):</p> <p>e) If A0050 is equal to [2,3] (modification or inactivation record), then submission date - X1100E (attestation date) should be less than or equal to 14 days.</p> <table><tr><td>Items:</td><td>A0050</td><td>Type of transaction (formerly X0100)</td></tr><tr><td></td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>A1600</td><td>Entry date (date of admission/reentry in facility)</td></tr><tr><td></td><td>A2000</td><td>Discharge date</td></tr><tr><td></td><td>V0200C2</td><td>CAA-Care planning signature date</td></tr><tr><td></td><td>X1100E</td><td>Correction: attestation date</td></tr><tr><td></td><td>Z0500B</td><td>Date RN signed assessment as complete</td></tr></table> | Items: | A0050 | Type of transaction (formerly X0100) | | A0310A | Type of assessment: OBRA | | A0310F | Entry/discharge reporting | | A1600 | Entry date (date of admission/reentry in facility) | | A2000 | Discharge date | | V0200C2 | CAA-Care planning signature date | | X1100E | Correction: attestation date | | Z0500B | Date RN signed assessment as complete |
| Items: | A0050 | Type of transaction (formerly X0100) | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1600 | Entry date (date of admission/reentry in facility) | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A2000 | Discharge date | | | | | | | | | | | | | | | | | | | | | | | | | |
| | V0200C2 | CAA-Care planning signature date | | | | | | | | | | | | | | | | | | | | | | | | | |
| | X1100E | Correction: attestation date | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Z0500B | Date RN signed assessment as complete | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3818 | Skip pattern | Fatal | <p>a) If A1500=[1], then all active items from A1510A through A1510C must not equal [^].</p> <p>b) If A1500=[0,9,^], then all active items from A1510A through A1510C must equal [^].</p> <table><tr><td>Items:</td><td>A1500</td><td>Resident evaluated by PASRR</td></tr><tr><td></td><td>A1510A</td><td>Level II PASRR conditions: Serious Mental Illness</td></tr><tr><td></td><td>A1510B</td><td>Level II PASRR conditions: Intellectual Disability</td></tr><tr><td></td><td>A1510C</td><td>Level II PASRR conditions: Other related condition</td></tr></table> | Items: | A1500 | Resident evaluated by PASRR | | A1510A | Level II PASRR conditions: Serious Mental Illness | | A1510B | Level II PASRR conditions: Intellectual Disability | | A1510C | Level II PASRR conditions: Other related condition | | | | | | | | | | | | |
| Items: | A1500 | Resident evaluated by PASRR | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1510A | Level II PASRR conditions: Serious Mental Illness | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1510B | Level II PASRR conditions: Intellectual Disability | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A1510C | Level II PASRR conditions: Other related condition | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---------------|--|--|---------------|--------|---|--|--------|--|--|--------|--|--|--------|--|--|--------|--|--|-------|---|--|--------|---|--|--------|--|--|--------|--|--|--------|---|--|--------|---|--|--------|--|--|-------|-----------------------------------|--|-------|--|--|-------|--|--|-------|---|--|--------|---|--|--------|---|--|--------|--|--|--------|--|--|--------|--|--|-------|--|
| -3826 | Consistency | Fatal | <p>If B0100=[0,-] and A0310G=[2] and A0310A=[99] and A0310B=[99], then all active items from C0100 through C0600 must equal [^] and all active items from C0700 through C1000 must not equal [^].</p> <table><tr><td>Items:</td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td></td><td>A0310G</td><td>Planned/unplanned discharge</td></tr><tr><td></td><td>B0100</td><td>Comatose</td></tr><tr><td></td><td>C0100</td><td>BIMS: should resident interview be conducted</td></tr><tr><td></td><td>C0200</td><td>BIMS res interview: repetition of three words</td></tr><tr><td></td><td>C0300A</td><td>BIMS res interview: able to report correct year</td></tr><tr><td></td><td>C0300B</td><td>BIMS res interview: able to report correct month</td></tr><tr><td></td><td>C0300C</td><td>BIMS res interview: can report correct day of week</td></tr><tr><td></td><td>C0400A</td><td>BIMS res interview: able to recall "sock"</td></tr><tr><td></td><td>C0400B</td><td>BIMS res interview: able to recall "blue"</td></tr><tr><td></td><td>C0400C</td><td>BIMS res interview: able to recall "bed"</td></tr><tr><td></td><td>C0500</td><td>BIMS res interview: summary score</td></tr><tr><td></td><td>C0600</td><td>Staff asmt mental status: conduct asmt</td></tr><tr><td></td><td>C0700</td><td>Staff asmt mental status: short-term memory OK</td></tr><tr><td></td><td>C0800</td><td>Staff asmt mental status: long-term memory OK</td></tr><tr><td></td><td>C0900A</td><td>Staff asmt mental status: recall current season</td></tr><tr><td></td><td>C0900B</td><td>Staff asmt mental status: recall location of room</td></tr><tr><td></td><td>C0900C</td><td>Staff asmt mental status: recall staff names/faces</td></tr><tr><td></td><td>C0900D</td><td>Staff asmt mental status: recall in nh/hosp sw bed</td></tr><tr><td></td><td>C0900Z</td><td>Staff asmt mental status: none of above recalled</td></tr><tr><td></td><td>C1000</td><td>Cognitive skills for daily decision making</td></tr></table> | Items: | A0310A | Type of assessment: OBRA | | A0310B | Type of assessment: PPS | | A0310G | Planned/unplanned discharge | | B0100 | Comatose | | C0100 | BIMS: should resident interview be conducted | | C0200 | BIMS res interview: repetition of three words | | C0300A | BIMS res interview: able to report correct year | | C0300B | BIMS res interview: able to report correct month | | C0300C | BIMS res interview: can report correct day of week | | C0400A | BIMS res interview: able to recall "sock" | | C0400B | BIMS res interview: able to recall "blue" | | C0400C | BIMS res interview: able to recall "bed" | | C0500 | BIMS res interview: summary score | | C0600 | Staff asmt mental status: conduct asmt | | C0700 | Staff asmt mental status: short-term memory OK | | C0800 | Staff asmt mental status: long-term memory OK | | C0900A | Staff asmt mental status: recall current season | | C0900B | Staff asmt mental status: recall location of room | | C0900C | Staff asmt mental status: recall staff names/faces | | C0900D | Staff asmt mental status: recall in nh/hosp sw bed | | C0900Z | Staff asmt mental status: none of above recalled | | C1000 | Cognitive skills for daily decision making |
| Items: | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310G | Planned/unplanned discharge | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | B0100 | Comatose | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0100 | BIMS: should resident interview be conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0200 | BIMS res interview: repetition of three words | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0300A | BIMS res interview: able to report correct year | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0300B | BIMS res interview: able to report correct month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0300C | BIMS res interview: can report correct day of week | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0400A | BIMS res interview: able to recall "sock" | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0400B | BIMS res interview: able to recall "blue" | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0400C | BIMS res interview: able to recall "bed" | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0500 | BIMS res interview: summary score | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0600 | Staff asmt mental status: conduct asmt | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0700 | Staff asmt mental status: short-term memory OK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0800 | Staff asmt mental status: long-term memory OK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900A | Staff asmt mental status: recall current season | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900B | Staff asmt mental status: recall location of room | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900C | Staff asmt mental status: recall staff names/faces | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900D | Staff asmt mental status: recall in nh/hosp sw bed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C0900Z | Staff asmt mental status: none of above recalled | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | C1000 | Cognitive skills for daily decision making | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3828 | None of above | Fatal | <p>a) If M1040Z=[0], then at least one active item from M1040A through M1040H must equal [1].</p> <p>b) If M1040Z=[1], then all active items from M1040A through M1040H must equal [0].</p> <p>c) If M1040Z=[-], then at least one active item from M1040A through M1040H must equal [-] and all remaining active items must equal [0,-].</p> <table><tr><td>Items:</td><td>M1040A</td><td>Other skin probs: infection of the foot</td></tr><tr><td></td><td>M1040B</td><td>Other skin probs: diabetic foot ulcer(s)</td></tr><tr><td></td><td>M1040C</td><td>Other skin probs: other open lesion(s) on the foot</td></tr><tr><td></td><td>M1040D</td><td>Other skin probs: lesions not ulcers, rashes, cuts</td></tr><tr><td></td><td>M1040E</td><td>Other skin probs: surgical wound(s)</td></tr></table> | Items: | M1040A | Other skin probs: infection of the foot | | M1040B | Other skin probs: diabetic foot ulcer(s) | | M1040C | Other skin probs: other open lesion(s) on the foot | | M1040D | Other skin probs: lesions not ulcers, rashes, cuts | | M1040E | Other skin probs: surgical wound(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | M1040A | Other skin probs: infection of the foot | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1040B | Other skin probs: diabetic foot ulcer(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1040C | Other skin probs: other open lesion(s) on the foot | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1040D | Other skin probs: lesions not ulcers, rashes, cuts | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M1040E | Other skin probs: surgical wound(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: M1040F Other skin probs: burns (second or third degree) M1040G Skin Tear(s) M1040H Moisture Associated Skin Damage (MASD) M1040Z Other skin probs: none of the above |
| -3829 | Skip pattern | Fatal | a) If B0100=[0], then all active items from B0200 through B1200 must not equal [^]. b) If B0100=[-], then all active items from B0200 through B1300 must equal [-]. Items: B0100 Comatose B0200 Hearing B0300 Hearing aid B0600 Speech clarity B0700 Makes self understood B0800 Ability to understand others B1000 Vision B1200 Corrective lenses B1300 Health Literacy |
| -3834 | Skip pattern | Fatal | a) If A0310A=[01,03,04,05], then if A1500 is active it must not equal [^]. b) If A0310A=[02,06,99], then if A1500 is active it must equal [^]. Items: A0310A Type of assessment: OBRA A1500 Resident evaluated by PASRR |
| -3837 | Consistency | Fatal | If B0100=[0,-] and A0310G=[2] and A0310A=[99] and A0310B=[99], then all active items from J0200 through J0850 must equal [^]. Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310G Planned/unplanned discharge B0100 Comatose J0200 Should pain assessment interview be conducted J0300 Res pain interview: presence J0410 Pain Frequency J0510 Pain Effect on Sleep J0520 Pain Interference with Therapy Activities J0530 Pain Interference with Day-to-Day Activities J0600A Res pain interview: intensity rating scale J0600B Res pain interview: verbal descriptor scale |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| | | | Items: J0700 Should staff assessment for pain be conducted J0800A Staff pain asmt: non-verbal sounds J0800B Staff pain asmt: vocal complaints of pain J0800C Staff pain asmt: facial expressions J0800D Staff pain asmt: protective movements/postures J0800Z Staff pain asmt: none of these signs observed J0850 Staff pain asmt: frequency of pain |
| -3838 | Skip pattern | Fatal | a) If A0310F=[01,12,99], then if A0310G is active it must equal [^]. b) If A0310F=[10,11], then if A0310G is active it must not equal [^]. |
| | | | Items: A0310F Entry/discharge reporting A0310G Planned/unplanned discharge |
| -3839 | Consistency | Fatal | If A0050 (formerly X0100)=[2] (modification record), then the value in ITM_SBST_CD in the modification record must be equal to the value that was submitted in the prior record (the record that is being modified). |
| | | | Items: ITM_SBST_CD Item subset code A0050 Type of transaction (formerly X0100) |
| -3852 | Format | Fatal | <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].</p> <p>b) Character 2 must be numeric [0-9].</p> <p>c) Character 3 must be numeric [0-9] or alphabetic [A-Z,a-z].</p> <p>d) Character 4 must be a decimal point.</p> <p>e) Characters 5 through 8 must be numeric [0-9], alphabetic [A-Z,a-z], or caret [^].</p> <p>f) If any character 5 through 8 is equal to [^], all subsequent characters must equal [^].</p> |
| | | | Items: I0020B Primary Medical Condition ICD I8000A Additional active ICD diagnosis 1 I8000B Additional active ICD diagnosis 2 I8000C Additional active ICD diagnosis 3 I8000D Additional active ICD diagnosis 4 I8000E Additional active ICD diagnosis 5 I8000F Additional active ICD diagnosis 6 I8000G Additional active ICD diagnosis 7 I8000H Additional active ICD diagnosis 8 I8000I Additional active ICD diagnosis 9 |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -3853 | Consistency | Fatal | Items: I8000J Additional active ICD diagnosis 10 If A0410=[3] (federal required submission), then A0100B (facility CCN) must not equal |
| | | | Items: A0100B Facility CMS Certification Number (CCN) A0410 Submission requirement |
| -3854 | Format | Fatal | The value submitted in A0100B must either be equal to [^] or it must be exactly 6 characters in length. |
| -3860 | Consistency | Fatal | Items: A0100B Facility CMS Certification Number (CCN) If A1700=[1], then A1600 must equal A1900. |
| | | | Items: A1600 Entry date (date of admission/reentry in facility) A1700 Type of entry A1900 Admission date |
| -3861 | Consistency | Fatal | If A1700=[2], then A1600 must be greater than A1900. Items: A1600 Entry date (date of admission/reentry in facility) A1700 Type of entry A1900 Admission date |
| | | | Items: A1600 Entry date (date of admission/reentry in facility) A1700 Type of entry A1900 Admission date |
| -3862 | Skip pattern | Fatal | a) If B0100=[0], then all active items from C1310A through C1310D must not equal [^]. b) If B0100=[-], then all active items from C1310A through C1310D must equal [-]. |
| | | | Items: B0100 Comatose C1310A Acute Onset Mental Status Change C1310B Inattention C1310C Disorganized Thinking C1310D Altered Level of Consciousness |
| -3867 | Skip pattern | Fatal | a) If GG0170Q3=[0,^], then the following items must be equal to [^]: GG0170R3, GG0170RR3, GG0170S3, GG0170SS3. b) If GG0170Q3=[1], then the following items must not be equal to [^]: GG0170R3, GG0170RR3, GG0170S3, GG0170SS3. c) If GG0170Q3=[-], then the following items must be equal to [-]: GG0170R3, GG0170RR3, GG0170S3, GG0170SS3. |
| | | | Items: GG0170Q3 Use wheelchair and/or scooter (Dschg Perf) GG0170R3 Wheel 50 feet with two turns (Dschg Perf) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -3875 | Consistency | Fatal | Items: GG0170RR3 Type of wheelchair or scooter (Dschg Perf) |
| | | | GG0170S3 Wheel 150 feet (Dschg Perf) |
| | | | GG0170SS3 Type of wheelchair or scooter (Dschg Perf) |
| | | | If A0310H=[1], then A2400C must not equal [-----,^]. |
| -3877 | Consistency | Fatal | Items: A0310H SNF PPS Part A Discharge (End of Stay) Assessment |
| | | | A2400C End date of most recent Medicare stay |
| | | | IF (A0310F = 10 or 11) AND ((A2400C = A2000) OR (A2000 - A2400C = 1)) THEN if A0310H is active, it must be equal to 1. |
| | | | Items: A0310F Entry/discharge reporting |
| -3879 | Skip pattern | Fatal | A0310H SNF PPS Part A Discharge (End of Stay) Assessment |
| | | | A2000 Discharge date |
| | | | A2400C End date of most recent Medicare stay |
| | | | a) If N0450A=[0], then all active items from N0450B through N0450E must be equal to [^]. |
| -3880 | Skip pattern | Fatal | Items: N0450A Resident received antipsychotic medications |
| | | | N0450B GDR attempted |
| | | | N0450C Date of last attempted GDR |
| | | | N0450D Physician documented GDR |
| -3881 | Skip pattern | Fatal | N0450E Date physician documented GDR |
| | | | a) If N0450B=[0], then N0450C must be equal to [^]. |
| | | | b) If N0450B=[1], then N0450C must not be equal to [^]. |
| | | | Items: N0450B GDR attempted |
| -3881 | Skip pattern | Fatal | N0450C Date of last attempted GDR |
| | | | a) If N0450D=[0], then N0450E must be equal to [^]. |
| | | | b) If N0450D=[1], then N0450E must not be equal to [^]. |
| | | | Items: N0450D Physician documented GDR |
| | | | N0450E Date physician documented GDR |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---------------|--|--|---------------|---------|---|--|---------|--|--|---------|---|--|---------|--|--|---------|--|--|---------|--|--|---------|---|--|---------|--|--|---------|---|--|---------|--|--|---------|--|--|---------|---|--|---------|---|--|---------|--|
| -3882 | None of above | Fatal | <p>If GG0110A through GG0110E and GG0110Z are all active, then the following rules apply:</p> <p>a) If GG0110Z=[0], then at least one of the items GG0110A through GG0110E must equal [1].</p> <p>b) If GG0110Z=[1], then all items from GG0110A through GG0110E must equal [0].</p> <p>c) If GG0110Z=[-], then at least one item from GG0110A through GG0110E must</p> <table><tr><td>Items:</td><td>GG0110A</td><td>Prior Device Use - Manual wheelchair</td></tr><tr><td></td><td>GG0110B</td><td>Prior Device Use - Mtrzd wheelchair and/or scooter</td></tr><tr><td></td><td>GG0110C</td><td>Prior Device Use - Mechanical lift</td></tr><tr><td></td><td>GG0110D</td><td>Prior Device Use - Walker</td></tr><tr><td></td><td>GG0110E</td><td>Prior Device Use - Orthotics/Prosthetics</td></tr><tr><td></td><td>GG0110Z</td><td>Prior Device Use - None of the above</td></tr></table> | Items: | GG0110A | Prior Device Use - Manual wheelchair | | GG0110B | Prior Device Use - Mtrzd wheelchair and/or scooter | | GG0110C | Prior Device Use - Mechanical lift | | GG0110D | Prior Device Use - Walker | | GG0110E | Prior Device Use - Orthotics/Prosthetics | | GG0110Z | Prior Device Use - None of the above | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | GG0110A | Prior Device Use - Manual wheelchair | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | GG0110B | Prior Device Use - Mtrzd wheelchair and/or scooter | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | GG0110C | Prior Device Use - Mechanical lift | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | GG0110D | Prior Device Use - Walker | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | GG0110E | Prior Device Use - Orthotics/Prosthetics | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | GG0110Z | Prior Device Use - None of the above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3885 | Skip pattern | Fatal | <p>a) If M0300B1=[1-9], then if M0300B2 is active, it must not equal [^].</p> <p>b) If M0300B1=[0,^], then if M0300B2 is active, it must equal [^].</p> <p>c) If M0300B1=[-], then if M0300B2 is active, it must equal [-].</p> <table><tr><td>Items:</td><td>M0300B1</td><td>Stage 2 pressure ulcers: number present</td></tr><tr><td></td><td>M0300B2</td><td>Stage 2 pressure ulcers: number at admit/reentry</td></tr></table> | Items: | M0300B1 | Stage 2 pressure ulcers: number present | | M0300B2 | Stage 2 pressure ulcers: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | M0300B1 | Stage 2 pressure ulcers: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300B2 | Stage 2 pressure ulcers: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3887 | Consistency | Fatal | <p>a) If M0210=[0], then all active items from M0300A through M0300G2 must equal [^].</p> <p>b) If M0210=[-], then all active items from M0300A through M0300G2 must equal [-].</p> <table><tr><td>Items:</td><td>M0210</td><td>Resident has 1+ unhealed PU/injuries</td></tr><tr><td></td><td>M0300A</td><td>Stage 1 pressure injuries: number present</td></tr><tr><td></td><td>M0300B1</td><td>Stage 2 pressure ulcers: number present</td></tr><tr><td></td><td>M0300B2</td><td>Stage 2 pressure ulcers: number at admit/reentry</td></tr><tr><td></td><td>M0300C1</td><td>Stage 3 pressure ulcers: number present</td></tr><tr><td></td><td>M0300C2</td><td>Stage 3 pressure ulcers: number at admit/reentry</td></tr><tr><td></td><td>M0300D1</td><td>Stage 4 pressure ulcers: number present</td></tr><tr><td></td><td>M0300D2</td><td>Stage 4 pressure ulcers: number at admit/reentry</td></tr><tr><td></td><td>M0300E1</td><td>Unstaged due to drssng/dvc: num present</td></tr><tr><td></td><td>M0300E2</td><td>Unstaged due to drssng/dvc: num at admit/reentry</td></tr><tr><td></td><td>M0300F1</td><td>Unstaged slough/eschar: number present</td></tr><tr><td></td><td>M0300F2</td><td>Unstaged slough/eschar: number at admit/reentry</td></tr><tr><td></td><td>M0300G1</td><td>Unstageable - deep tissue injury: # present</td></tr><tr><td></td><td>M0300G2</td><td>Unstageable - deep tissue injury: # at adm/reent</td></tr></table> | Items: | M0210 | Resident has 1+ unhealed PU/injuries | | M0300A | Stage 1 pressure injuries: number present | | M0300B1 | Stage 2 pressure ulcers: number present | | M0300B2 | Stage 2 pressure ulcers: number at admit/reentry | | M0300C1 | Stage 3 pressure ulcers: number present | | M0300C2 | Stage 3 pressure ulcers: number at admit/reentry | | M0300D1 | Stage 4 pressure ulcers: number present | | M0300D2 | Stage 4 pressure ulcers: number at admit/reentry | | M0300E1 | Unstaged due to drssng/dvc: num present | | M0300E2 | Unstaged due to drssng/dvc: num at admit/reentry | | M0300F1 | Unstaged slough/eschar: number present | | M0300F2 | Unstaged slough/eschar: number at admit/reentry | | M0300G1 | Unstageable - deep tissue injury: # present | | M0300G2 | Unstageable - deep tissue injury: # at adm/reent |
| Items: | M0210 | Resident has 1+ unhealed PU/injuries | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300A | Stage 1 pressure injuries: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300B1 | Stage 2 pressure ulcers: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300B2 | Stage 2 pressure ulcers: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300C1 | Stage 3 pressure ulcers: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300C2 | Stage 3 pressure ulcers: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300D1 | Stage 4 pressure ulcers: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300D2 | Stage 4 pressure ulcers: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300E1 | Unstaged due to drssng/dvc: num present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300E2 | Unstaged due to drssng/dvc: num at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300F1 | Unstaged slough/eschar: number present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300F2 | Unstaged slough/eschar: number at admit/reentry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300G1 | Unstageable - deep tissue injury: # present | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | M0300G2 | Unstageable - deep tissue injury: # at adm/reent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | |
|----------|--|----------|---|----------|-----------------------------------|----------|--|----------|--|----------|--|
| -3892 | Skip pattern | Fatal | <p>(a) If GG0170I1=[07,09,10,88,^], then GG0170J1, GG0170K1, and GG0170L1 must equal [^].</p> <p>(b) If GG0170I1=[06,05,04,03,02,01], then GG0170J1, GG0170K1, and GG0170L1 must not equal [^].</p> <p>(c) If GG0170I1=[-], then GG0170J1, GG0170K1, and GG0170L1 must equal [-].</p> <p>Items:</p> <table><tr><td>GG0170I1</td><td>Walk 10 feet (Start of Stay Perf)</td></tr><tr><td>GG0170J1</td><td>Walk 50 feet with two turns (Start of Stay Perf)</td></tr><tr><td>GG0170K1</td><td>Walk 150 feet (Start of Stay Perf)</td></tr><tr><td>GG0170L1</td><td>Walking 10 feet uneven surf (Start of Stay Perf)</td></tr></table> | GG0170I1 | Walk 10 feet (Start of Stay Perf) | GG0170J1 | Walk 50 feet with two turns (Start of Stay Perf) | GG0170K1 | Walk 150 feet (Start of Stay Perf) | GG0170L1 | Walking 10 feet uneven surf (Start of Stay Perf) |
| GG0170I1 | Walk 10 feet (Start of Stay Perf) | | | | | | | | | | |
| GG0170J1 | Walk 50 feet with two turns (Start of Stay Perf) | | | | | | | | | | |
| GG0170K1 | Walk 150 feet (Start of Stay Perf) | | | | | | | | | | |
| GG0170L1 | Walking 10 feet uneven surf (Start of Stay Perf) | | | | | | | | | | |
| -3893 | Skip pattern | Fatal | <p>(a) If GG0170I3=[07,09,10,88,^], then GG0170J3, GG0170K3, and GG0170L3 must equal [^].</p> <p>(b) If GG0170I3=[06,05,04,03,02,01], then GG0170J3, GG0170K3, and GG0170L3 must not equal [^].</p> <p>(c) If GG0170I3=[-], then GG0170J3, GG0170K3, and GG0170L3 must equal [-].</p> <p>Items:</p> <table><tr><td>GG0170I3</td><td>Walk 10 feet (Dschg Perf)</td></tr><tr><td>GG0170J3</td><td>Walk 50 feet with two turns (Dschg Perf)</td></tr><tr><td>GG0170K3</td><td>Walk 150 feet (Dschg Perf)</td></tr><tr><td>GG0170L3</td><td>Walking 10 feet uneven surf (Dschg Perf)</td></tr></table> | GG0170I3 | Walk 10 feet (Dschg Perf) | GG0170J3 | Walk 50 feet with two turns (Dschg Perf) | GG0170K3 | Walk 150 feet (Dschg Perf) | GG0170L3 | Walking 10 feet uneven surf (Dschg Perf) |
| GG0170I3 | Walk 10 feet (Dschg Perf) | | | | | | | | | | |
| GG0170J3 | Walk 50 feet with two turns (Dschg Perf) | | | | | | | | | | |
| GG0170K3 | Walk 150 feet (Dschg Perf) | | | | | | | | | | |
| GG0170L3 | Walking 10 feet uneven surf (Dschg Perf) | | | | | | | | | | |
| -3896 | Skip pattern | Fatal | <p>a) If N2001=[0,9], then N2003 must be equal to [^].</p> <p>b) If N2001=[1], then N2003 must not be equal to [^].</p> <p>(c) If N2001=[-], then N2003 must equal [-].</p> <p>Items:</p> <table><tr><td>N2001</td><td>Drug Regimen Review</td></tr><tr><td>N2003</td><td>Medication Follow-up</td></tr></table> | N2001 | Drug Regimen Review | N2003 | Medication Follow-up | | | | |
| N2001 | Drug Regimen Review | | | | | | | | | | |
| N2003 | Medication Follow-up | | | | | | | | | | |
| -3897 | Consistency | Warning | <p>If A0310B=[01], then the following warning message will apply if a dash is submitted for this item:</p> <p>Payment Reduction Warning: A dash (-) submitted in this quality measure assessment item may result in a payment reduction for your facility of two percentage points for the affected payment determination.</p> <p>Items:</p> <table><tr><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td>A1110A</td><td>Preferred language</td></tr><tr><td>A1110B</td><td>Does the patient need or want an interpreter</td></tr></table> | A0310B | Type of assessment: PPS | A1110A | Preferred language | A1110B | Does the patient need or want an interpreter | | |
| A0310B | Type of assessment: PPS | | | | | | | | | | |
| A1110A | Preferred language | | | | | | | | | | |
| A1110B | Does the patient need or want an interpreter | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | A1255 Transportation |
| | | | B0200 Hearing |
| | | | B1000 Vision |
| | | | B1300 Health Literacy |
| | | | C0100 BIMS: should resident interview be conducted |
| | | | C0200 BIMS res interview: repetition of three words |
| | | | C0300A BIMS res interview: able to report correct year |
| | | | C0300B BIMS res interview: able to report correct month |
| | | | C0300C BIMS res interview: can report correct day of week |
| | | | C0500 BIMS res interview: summary score |
| | | | C1310A Acute Onset Mental Status Change |
| | | | C1310B Inattention |
| | | | C1310C Disorganized Thinking |
| | | | C1310D Altered Level of Consciousness |
| | | | D0150A1 Mood: Little interest/pleasure doing things: Pres |
| | | | D0150A2 Mood: Little interest/pleasure doing things: Freq |
| | | | D0150B1 Mood: Feeling down, depressed, or hopeless: Pres |
| | | | D0150B2 Mood: Feeling down, depressed, or hopeless: Freq |
| | | | D0150C1 Mood: Trouble falling or staying asleep: Pres |
| | | | D0150C2 Mood: Trouble falling or staying asleep: Freq |
| | | | D0150D1 Mood: Feeling tired or having little energy: Pres |
| | | | D0150D2 Mood: Feeling tired or having little energy: Freq |
| | | | D0150E1 Mood: Poor appetite or overeating: Pres |
| | | | D0150E2 Mood: Poor appetite or overeating: Freq |
| | | | D0150F1 Mood: Feeling bad about yourself: Pres |
| | | | D0150F2 Mood: Feeling bad about yourself: Freq |
| | | | D0150G1 Mood: Trouble concentrating on things: Pres |
| | | | D0150G2 Mood: Trouble concentrating on things: Freq |
| | | | D0150H1 Mood: Moving or speaking so slowly: Pres |
| | | | D0150H2 Mood: Moving or speaking so slowly: Freq |
| | | | D0150I1 Mood: Thoughts of better off dead: Pres |
| | | | D0150I2 Mood: Thoughts of better off dead: Freq |
| | | | D0160 Total severity score |
| | | | D0700 Social Isolation |
| | | | GG0130A1 Eating (Start of Stay Perf) |
| | | | GG0130B1 Oral hygiene (Start of Stay Perf) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | GG0130C1 Toileting hygiene (Start of Stay Perf) |
| | | | GG0130E1 Shower/bathe self (Start of Stay Perf) |
| | | | GG0130F1 Upper body dressing (Start of Stay Perf) |
| | | | GG0130G1 Lower body dressing (Start of Stay Perf) |
| | | | GG0130H1 Put on/take off footwear (Start of Stay Perf) |
| | | | GG0170A1 Roll left and right (Start of Stay Perf) |
| | | | GG0170B1 Sit to lying (Start of Stay Perf) |
| | | | GG0170C1 Lying to sitting on bed side (Start of Stay Perf) |
| | | | GG0170D1 Sit to stand (Start of Stay Perf) |
| | | | GG0170E1 Chair/bed-to-chair transfer (Start of Stay Perf) |
| | | | GG0170F1 Toilet transfer (Start of Stay Perf) |
| | | | GG0170G1 Car transfer (Start of Stay Perf) |
| | | | GG0170I1 Walk 10 feet (Start of Stay Perf) |
| | | | GG0170J1 Walk 50 feet with two turns (Start of Stay Perf) |
| | | | GG0170K1 Walk 150 feet (Start of Stay Perf) |
| | | | GG0170L1 Walking 10 feet uneven surf (Start of Stay Perf) |
| | | | GG0170M1 1 step (curb) (Start of Stay Perf) |
| | | | GG0170N1 4 steps (Start of Stay Perf) |
| | | | GG0170O1 12 steps (Start of Stay Perf) |
| | | | GG0170P1 Picking up object (Start of Stay Perf) |
| | | | GG0170Q1 Use wheelchair and/or scooter (Start of Stay Perf) |
| | | | GG0170R1 Wheel 50 feet with two turns (Start of Stay Perf) |
| | | | GG0170RR1 Type of wheelchair or scooter (Start of Stay Perf) |
| | | | GG0170S1 Wheel 150 feet (Start of Stay Perf) |
| | | | GG0170SS1 Type of wheelchair or scooter (Start of Stay Perf) |
| | | | H0400 Bowel continence |
| | | | I0900 Peripheral vascular disease (PVD) or PAD |
| | | | I2900 Diabetes mellitus (DM) |
| | | | J0510 Pain Effect on Sleep |
| | | | J0520 Pain Interference with Therapy Activities |
| | | | J0530 Pain Interference with Day-to-Day Activities |
| | | | J1900C Falls since admit/prior asmt: major injury |
| | | | K0200A Height (in inches) |
| | | | K0200B Weight (in pounds) |
| | | | K0520A1 Nutritional Approaches (Admission): Parenteral |
| | | | K0520B1 Nutritional Approaches (Admission): Feeding tube |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|-----------|--|
| | | Items: | |
| | | K0520C1 | Nutritional Approaches (Admission): Mech Alt Diet |
| | | K0520D1 | Nutritional Approaches (Admission): Therapeutic |
| | | K0520Z1 | Nutritional Approaches (Admission): None |
| | | M0300B1 | Stage 2 pressure ulcers: number present |
| | | M0300C1 | Stage 3 pressure ulcers: number present |
| | | M0300D1 | Stage 4 pressure ulcers: number present |
| | | M0300E1 | Unstaged due to drssng/dvc: num present |
| | | M0300F1 | Unstaged slough/eschar: number present |
| | | M0300G1 | Unstageable - deep tissue injury: # present |
| | | N0415A1 | High-Risk Drug (Is Taking): Antipsychotic |
| | | N0415A2 | High-Risk Drug (Indication): Antipsychotic |
| | | N0415E1 | High-Risk Drug (Is Taking): Anticoagulant |
| | | N0415E2 | High-Risk Drug (Indication): Anticoagulant |
| | | N0415F1 | High-Risk Drug (Is Taking): Antibiotic |
| | | N0415F2 | High-Risk Drug (Indication): Antibiotic |
| | | N0415H1 | High-Risk Drug (Is Taking): Opioid |
| | | N0415H2 | High-Risk Drug (Indication): Opioid |
| | | N0415I1 | High-Risk Drug (Is Taking): Antiplatelet |
| | | N0415I2 | High-Risk Drug (Indication): Antiplatelet |
| | | N0415J1 | High-Risk Drug (Is Taking): Hypoglycemic |
| | | N0415J2 | High-Risk Drug (Indication): Hypoglycemic |
| | | N0415Z1 | High-Risk Drug (Is taking): None of the Above |
| | | N2001 | Drug Regimen Review |
| | | N2003 | Medication Follow-up |
| | | O0110A1A | Treatment: Chemotherapy (Admission) |
| | | O0110A2A | Treatment: Chemo - IV (Admission) |
| | | O0110A3A | Treatment: Chemo - Oral (Admission) |
| | | O0110A10A | Treatment: Chemo - Other (Admission) |
| | | O0110B1A | Treatment: Radiation (Admission) |
| | | O0110C1A | Therapies: Oxygen Therapy (Admission) |
| | | O0110C2A | Therapies: Oxygen - Continuous (Admission) |
| | | O0110C3A | Therapies: Oxygen - Intermittent (Admission) |
| | | O0110C4A | Therapies: Oxygen - High-concentration (Admission) |
| | | O0110D1A | Therapies: Suctioning (Admission) |
| | | O0110D2A | Therapies: Suctioning - Scheduled (Admission) |
| | | O0110D3A | Therapies: Suctioning - As Needed (Admission) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: O0110E1A Therapies: Tracheostomy Care (Admission) O0110F1A Therapies: Invasive Mechanical Ventilator (Admis) O0110G1A Therapies: Non-Invas Mechanical Ventilator (Admis) O0110G2A Therapies: BiPAP (Admission) O0110G3A Therapies: CPAP (Admission) O0110H1A Other: IV Medications (Admission) O0110H2A Other: IV - Vasoactive medications (Admission) O0110H3A Other: IV - Antibiotics (Admission) O0110H4A Other: IV - Anticoagulation (Admission) O0110H10A Other: IV - Other (Admission) O0110I1A Other: Transfusions (Admission) O0110J1A Other: Dialysis (Admission) O0110J2A Other: Hemodialysis (Admission) O0110J3A Other: Peritoneal dialysis (Admission) O0110O1A Other: IV Access (Admission) O0110O2A Other: IV Access - Peripheral (Admission) O0110O3A Other: IV Access - Midline (Admission) O0110O4A Other: IV Access - Central (Admission) O0110Z1A Other: None of the above (Admission) O0350 COVID-19 Vaccination Up To Date |
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| | | | |
| -3898 | Skip pattern | Fatal | (a) If GG0170M1=[07,09,10,88,^], then GG0170N1 must equal [^]. (b) If GG0170M1=[06,05,04,03,02,01], then GG0170N1 must not equal [^]. (c) If GG0170M1=[-], then GG0170N1 must equal [-]. |
| | | | Items: GG0170M1 1 step (curb) (Start of Stay Perf) GG0170N1 4 steps (Start of Stay Perf) |
| | | | |
| -3899 | Skip pattern | Fatal | (a) If GG0170N1=[07,09,10,88,^], then GG0170O1 must equal [^]. (b) If GG0170N1=[06,05,04,03,02,01], then GG0170O1 must not equal [^]. (c) If GG0170N1=[-], then GG0170O1 must equal [-]. |
| | | | Items: GG0170N1 4 steps (Start of Stay Perf) GG0170O1 12 steps (Start of Stay Perf) |
| | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| -3900 | Skip pattern | Fatal | <p>(a) If GG0170M3=[07,09,10,88,^], then GG0170N3 must equal [^].</p> <p>(b) If GG0170M3=[06,05,04,03,02,01], then GG0170N3 must not equal [^].</p> <p>(c) If GG0170M3=[-], then GG0170N3 must equal [-].</p> <p>Items: GG0170M3 1 step (curb) (Dschg Perf) GG0170N3 4 steps (Dschg Perf)</p> |
| -3901 | Skip pattern | Fatal | <p>(a) If GG0170N3=[07,09,10,88,^], then GG0170O3 must equal [^].</p> <p>(b) If GG0170N3=[06,05,04,03,02,01], then GG0170O3 must not equal [^].</p> <p>(c) If GG0170N3=[-], then GG0170O3 must equal [-].</p> <p>Items: GG0170N3 4 steps (Dschg Perf) GG0170O3 12 steps (Dschg Perf)</p> |
| -3906 | Consistency | Fatal | <p>a) If A0310H=[1], then if N2005 is active it must not equal [^].</p> <p>b) If A0310H=[0], then if N2005 is active it must equal [^].</p> <p>Items: A0310H SNF PPS Part A Discharge (End of Stay) Assessment N2005 Medication Intervention</p> |
| -3908 | Consistency | Warning | <p>Payment Reduction Warning: If A0310H=[1], then a dash (-) submitted in this quality measure assessment item may result in a payment reduction for your facility of two percentage points for the affected payment determination.</p> <p>Items: A0310H SNF PPS Part A Discharge (End of Stay) Assessment B1300 Health Literacy C0100 BIMS: should resident interview be conducted C0200 BIMS res interview: repetition of three words C0300A BIMS res interview: able to report correct year C0300B BIMS res interview: able to report correct month C0300C BIMS res interview: can report correct day of week C0500 BIMS res interview: summary score C1310A Acute Onset Mental Status Change C1310B Inattention C1310C Disorganized Thinking C1310D Altered Level of Consciousness D0150A1 Mood: Little interest/pleasure doing things: Pres D0150A2 Mood: Little interest/pleasure doing things: Freq</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | D0150B1 Mood: Feeling down, depressed, or hopeless: Pres |
| | | | D0150B2 Mood: Feeling down, depressed, or hopeless: Freq |
| | | | D0150C1 Mood: Trouble falling or staying asleep: Pres |
| | | | D0150C2 Mood: Trouble falling or staying asleep: Freq |
| | | | D0150D1 Mood: Feeling tired or having little energy: Pres |
| | | | D0150D2 Mood: Feeling tired or having little energy: Freq |
| | | | D0150E1 Mood: Poor appetite or overeating: Pres |
| | | | D0150E2 Mood: Poor appetite or overeating: Freq |
| | | | D0150F1 Mood: Feeling bad about yourself: Pres |
| | | | D0150F2 Mood: Feeling bad about yourself: Freq |
| | | | D0150G1 Mood: Trouble concentrating on things: Pres |
| | | | D0150G2 Mood: Trouble concentrating on things: Freq |
| | | | D0150H1 Mood: Moving or speaking so slowly: Pres |
| | | | D0150H2 Mood: Moving or speaking so slowly: Freq |
| | | | D0150I1 Mood: Thoughts of better off dead: Pres |
| | | | D0150I2 Mood: Thoughts of better off dead: Freq |
| | | | D0160 Total severity score |
| | | | D0700 Social Isolation |
| | | | GG0130A3 Eating (Dschg Perf) |
| | | | GG0130B3 Oral hygiene (Dschg Perf) |
| | | | GG0130C3 Toileting hygiene (Dschg Perf) |
| | | | GG0130E3 Shower/bathe self (Dschg Perf) |
| | | | GG0130F3 Upper body dressing (Dschg Perf) |
| | | | GG0130G3 Lower body dressing (Dschg Perf) |
| | | | GG0130H3 Put on/take off footwear (Dschg Perf) |
| | | | GG0170A3 Roll left and right (Dschg Perf) |
| | | | GG0170B3 Sit to lying (Dschg Perf) |
| | | | GG0170C3 Lying to sitting on bed side (Dschg Perf) |
| | | | GG0170D3 Sit to stand (Dschg Perf) |
| | | | GG0170E3 Chair/bed-to-chair transfer (Dschg Perf) |
| | | | GG0170F3 Toilet transfer (Dschg Perf) |
| | | | GG0170G3 Car transfer (Dschg Perf) |
| | | | GG0170I3 Walk 10 feet (Dschg Perf) |
| | | | GG0170J3 Walk 50 feet with two turns (Dschg Perf) |
| | | | GG0170K3 Walk 150 feet (Dschg Perf) |
| | | | GG0170L3 Walking 10 feet uneven surf (Dschg Perf) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|-----------|---|
| | | Items: | |
| | | GG0170M3 | 1 step (curb) (Dschg Perf) |
| | | GG0170N3 | 4 steps (Dschg Perf) |
| | | GG0170O3 | 12 steps (Dschg Perf) |
| | | GG0170P3 | Picking up object (Dschg Perf) |
| | | GG0170Q3 | Use wheelchair and/or scooter (Dschg Perf) |
| | | GG0170R3 | Wheel 50 feet with two turns (Dschg Perf) |
| | | GG0170RR3 | Type of wheelchair or scooter (Dschg Perf) |
| | | GG0170S3 | Wheel 150 feet (Dschg Perf) |
| | | GG0170SS3 | Type of wheelchair or scooter (Dschg Perf) |
| | | J0510 | Pain Effect on Sleep |
| | | J0520 | Pain Interference with Therapy Activities |
| | | J0530 | Pain Interference with Day-to-Day Activities |
| | | J1900C | Falls since admit/prior asmt: major injury |
| | | K0520A4 | Nutritional Approaches (Discharge): Parenteral |
| | | K0520B4 | Nutritional Approaches (Discharge): Feeding tube |
| | | K0520C4 | Nutritional Approaches (Discharge): Mech Alt Diet |
| | | K0520D4 | Nutritional Approaches (Discharge): Therapeutic |
| | | K0520Z4 | Nutritional Approaches (Discharge): None |
| | | M0300B1 | Stage 2 pressure ulcers: number present |
| | | M0300B2 | Stage 2 pressure ulcers: number at admit/reentry |
| | | M0300C1 | Stage 3 pressure ulcers: number present |
| | | M0300C2 | Stage 3 pressure ulcers: number at admit/reentry |
| | | M0300D1 | Stage 4 pressure ulcers: number present |
| | | M0300D2 | Stage 4 pressure ulcers: number at admit/reentry |
| | | M0300E1 | Unstaged due to drssng/dvc: num present |
| | | M0300E2 | Unstaged due to drssng/dvc: num at admit/reentry |
| | | M0300F1 | Unstaged slough/eschar: number present |
| | | M0300F2 | Unstaged slough/eschar: number at admit/reentry |
| | | M0300G1 | Unstageable - deep tissue injury: # present |
| | | M0300G2 | Unstageable - deep tissue injury: # at adm/reent |
| | | N0415A1 | High-Risk Drug (Is Taking): Antipsychotic |
| | | N0415A2 | High-Risk Drug (Indication): Antipsychotic |
| | | N0415E1 | High-Risk Drug (Is Taking): Anticoagulant |
| | | N0415E2 | High-Risk Drug (Indication): Anticoagulant |
| | | N0415F1 | High-Risk Drug (Is Taking): Antibiotic |
| | | N0415F2 | High-Risk Drug (Indication): Antibiotic |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|-----------|--|
| | | Items: | |
| | | N0415H1 | High-Risk Drug (Is Taking): Opioid |
| | | N0415H2 | High-Risk Drug (Indication): Opioid |
| | | N0415I1 | High-Risk Drug (Is Taking): Antiplatelet |
| | | N0415I2 | High-Risk Drug (Indication): Antiplatelet |
| | | N0415J1 | High-Risk Drug (Is Taking): Hypoglycemic |
| | | N0415J2 | High-Risk Drug (Indication): Hypoglycemic |
| | | N0415Z1 | High-Risk Drug (Is taking): None of the Above |
| | | N2005 | Medication Intervention |
| | | O0110A1C | Treatment: Chemotherapy (Discharge) |
| | | O0110A2C | Treatment: Chemo - IV (Discharge) |
| | | O0110A3C | Treatment: Chemo - Oral (Discharge) |
| | | O0110A10C | Treatment: Chemo - Other (Discharge) |
| | | O0110B1C | Treatment: Radiation (Discharge) |
| | | O0110C1C | Therapies: Oxygen Therapy (Discharge) |
| | | O0110C2C | Therapies: Oxygen - Continuous (Discharge) |
| | | O0110C3C | Therapies: Oxygen - Intermittent (Discharge) |
| | | O0110C4C | Therapies: Oxygen - High-concentration (Discharge) |
| | | O0110D1C | Therapies: Suctioning (Discharge) |
| | | O0110D2C | Therapies: Suctioning - Scheduled (Discharge) |
| | | O0110D3C | Therapies: Suctioning - As Needed (Discharge) |
| | | O0110E1C | Therapies: Tracheostomy Care (Discharge) |
| | | O0110F1C | Therapies: Invasive Mechanical Ventilator (Disch) |
| | | O0110G1C | Therapies: Non-Invas Mechanical Ventilator (Disch) |
| | | O0110G2C | Therapies: BiPAP (Discharge) |
| | | O0110G3C | Therapies: CPAP (Discharge) |
| | | O0110H1C | Other: IV Medications (Discharge) |
| | | O0110H2C | Other: IV - Vasoactive medications (Discharge) |
| | | O0110H3C | Other: IV - Antibiotics (Discharge) |
| | | O0110H4C | Other: IV - Anticoagulation (Discharge) |
| | | O0110H10C | Other: IV - Other (Discharge) |
| | | O0110I1C | Other: Transfusions (Discharge) |
| | | O0110J1C | Other: Dialysis (Discharge) |
| | | O0110J2C | Other: Hemodialysis (Discharge) |
| | | O0110J3C | Other: Peritoneal dialysis (Discharge) |
| | | O0110O1C | Other: IV Access (Discharge) |
| | | O0110O2C | Other: IV Access - Peripheral (Discharge) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| | | | Items: O011003C Other: IV Access - Midline (Discharge) O011004C Other: IV Access - Central (Discharge) O0110Z1C Other: None of the above (Discharge) O0350 COVID-19 Vaccination Up To Date |
| -3909 | Format | Warning | The height value submitted in K0200A is less than 10 inches. Please confirm that the submitted value for K0200A is correct. Items: K0200A Height (in inches) |
| -3910 | Format | Warning | The weight value submitted in K0200B is less than 10 pounds. Please confirm that the submitted value for K0200B is correct. Items: K0200B Weight (in pounds) |
| -3912 | Consistency | Fatal | The date must be greater than or equal to A0900 (Birthdate) and less than or equal to the current date. Items: A0900 Birthdate N0450C Date of last attempted GDR N0450E Date physician documented GDR |
| -3913 | Format | Fatal | Incorrect Medicare Number: This item must conform to the format defined below: The Medicare Number 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. Items: A0600B Medicare number |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | |
|---------------|-------------|---|--|---------------|--------|--------------------------|--|--------|--------------------------|--|--------|-----------------------------|--|--------|---------------------------|--|--------|---|
| -3914 | Consistency | Fatal | <p>The Item Subset Code (ISC) is a two- or three-character code that indicates the type of record that is being submitted. The set of active items is controlled by the ISC. With the exceptions of the IPA and OSA ISCs, the characters of the ISC are defined as follows:</p> <p>Character 1 indicates the type of provider and is based upon the value of A0200, as follows:</p> <p>a) If A0200 is equal to [1] (nursing home record), then character 1 of the ISC is equal to [N].</p> <p>b) If A0200 is equal to [2] (swing bed record), then character 1 of the ISC is equal to [S].</p> <p>Characters 2 and 3 indicate the type of record and are based upon the values of the Reason For Assessment (RFA) items A0310A, A0310B, A0310F, and A0310H. The "Item Subset Code (ISC) Report" that accompanies the data specs lists all possible combinations of the RFA items and their associated ISCs. If the ISC that is listed in the report is equal to dashes, then the combination of RFA items is not allowed. If a record is submitted with one of these invalid RFA combinations, a fatal error will occur and it will be rejected.</p> <p>The ISC_VAL table that is contained in the data specifications Access database is used to generate the ISC report and can be used by programmers as a lookup table. In addition, an appendix of the overview document that accompanies these data specifications contains source code for a Visual Basic function (GetISC_10012019()) that can be used to determine the ISC that is associated with any combination of the RFA items.</p> <table><tr><td>Items:</td><td>A0200</td><td>Type of provider</td></tr><tr><td></td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td></td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>A0310H</td><td>SNF PPS Part A Discharge (End of Stay) Assessment</td></tr></table> | Items: | A0200 | Type of provider | | A0310A | Type of assessment: OBRA | | A0310B | Type of assessment: PPS | | A0310F | Entry/discharge reporting | | A0310H | SNF PPS Part A Discharge (End of Stay) Assessment |
| Items: | A0200 | Type of provider | | | | | | | | | | | | | | | | |
| | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | |
| | A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | |
| | A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | |
| | A0310H | SNF PPS Part A Discharge (End of Stay) Assessment | | | | | | | | | | | | | | | | |
| -3915 | Consistency | Fatal | <p>a) If B0100=[0] and A0310G=[1,^], then if C0100 is active it must not equal [^].</p> <p>b) If B0100=[-] and A0310G=[1,^], then if C0100 is active it must equal [-].</p> <p>c) If B0100=[0] and A0310G=[2] and (A0310A=[01,02,03,04,05,06] or A0310B=[01]), then if C0100 is active it must not equal [^].</p> <p>d) If B0100=[-] and A0310G=[2] and (A0310A=[01,02,03,04,05,06] or A0310B=[01]), then if C0100 is active it must equal [-].</p> <table><tr><td>Items:</td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td></td><td>A0310G</td><td>Planned/unplanned discharge</td></tr><tr><td></td><td>B0100</td><td>Comatose</td></tr><tr><td></td><td>C0100</td><td>BIMS: should resident interview be conducted</td></tr></table> | Items: | A0310A | Type of assessment: OBRA | | A0310B | Type of assessment: PPS | | A0310G | Planned/unplanned discharge | | B0100 | Comatose | | C0100 | BIMS: should resident interview be conducted |
| Items: | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | |
| | A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | |
| | A0310G | Planned/unplanned discharge | | | | | | | | | | | | | | | | |
| | B0100 | Comatose | | | | | | | | | | | | | | | | |
| | C0100 | BIMS: should resident interview be conducted | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| -3916 | Consistency | Fatal | <p>a) If B0100=[0] and A0310G=[1,^], then if D0100 is active it must not equal [^].</p> <p>b) If B0100=[-] and A0310G=[1,^], then if D0100 is active it must equal [-].</p> <p>c) If B0100=[0] and A0310G=[2] and (A0310A=[01,02,03,04,05,06] or A0310B=[01]), then if D0100 is active it must not equal [^].</p> <p>d) If B0100=[-] and A0310G=[2] and (A0310A=[01,02,03,04,05,06] or A0310B=[01]), then if D0100 is active it must equal [-].</p> <p>Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310G Planned/unplanned discharge B0100 Comatose D0100 PHQ: should resident mood interview be conducted</p> |
| -3917 | Consistency | Fatal | <p>If this is a PPS assessment (A0310B=[01,08]), then the Medicare number (A0600B) must be present (not [^]). Thus, the submission will be rejected if this is a PPS assessment and A0600B is equal to [^].</p> <p>Items: A0310B Type of assessment: PPS A0600B Medicare number</p> |
| -3918 | Consistency | Fatal | <p>a) If B0100=[0] and A0310G=[1,^], then if J0200 is active it must not equal [^].</p> <p>b) If B0100=[-] and A0310G=[1,^], then if J0200 is active it must equal [-].</p> <p>c) If B0100=[0] and A0310G=[2] and (A0310A=[01,02,03,04,05,06] or A0310B=[01]), then if J0200 is active it must not equal [^].</p> <p>d) If B0100=[-] and A0310G=[2] and (A0310A=[01,02,03,04,05,06] or A0310B=[01]), then if J0200 is active it must equal [-].</p> <p>Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310G Planned/unplanned discharge B0100 Comatose J0200 Should pain assessment interview be conducted</p> |
| -3919 | Skip pattern | Fatal | <p>If A0310B=[01,08], then I0020 and I0020B must not equal [^].</p> <p>Items: A0310B Type of assessment: PPS I0020 Primary Medical Condition Category I0020B Primary Medical Condition ICD</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|--------------|---|---|---------------|--------|-------------------------|--|--------|--------------------------|--|--------|-------------------------|--|--------|--|--|--------|---|--|-------|----------------|--|-------|---------------------------|--|--------|---------------------------------------|
| -3920 | Consistency | Fatal | <p>a) If A0200=[1] (this is a nursing home record) and A0310E is equal to [1], then A0310A must equal [01,02,03,04,05,06] OR A0310B must equal [01] OR A0310F must equal [10,11].</p> <p>b) If A0200=[2] (this is a swing bed record) and A0310E is equal to [1], then A0310B must equal [01] OR A0310F must equal [10,11].</p> <table><tr><td>Items:</td><td>A0200</td><td>Type of provider</td></tr><tr><td></td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td></td><td>A0310E</td><td>First assessment since most recent entry</td></tr><tr><td></td><td>A0310F</td><td>Entry/discharge reporting</td></tr></table> | Items: | A0200 | Type of provider | | A0310A | Type of assessment: OBRA | | A0310B | Type of assessment: PPS | | A0310E | First assessment since most recent entry | | A0310F | Entry/discharge reporting | | | | | | | | | |
| Items: | A0200 | Type of provider | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310E | First assessment since most recent entry | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3924 | Consistency | Fatal | <p>Date restrictions when combining SNF PPS Part A Discharge assessments with other assessment types:</p> <p>(a) If A0200=[1] and (A0310A=[01,02,03,04,05,06] or A0310B=[01]) and A0310F=[99] and A0310H=[1], then if A2300 and A2400C are active, A2300 must be equal to A2400C.</p> <p>(b) If A0200=[2] and A0310B=[01] and A0310F=[99] and A0310H=[1], then if A2300 and A2400C are active, A2300 must be equal to A2400C.</p> <p>(c) If A0310F=[10,11] and A0310H=[1], then if A2000 and A2400C are active, ((A2400C</p> <table><tr><td>Items:</td><td>A0200</td><td>Type of provider</td></tr><tr><td></td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td></td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>A0310H</td><td>SNF PPS Part A Discharge (End of Stay) Assessment</td></tr><tr><td></td><td>A2000</td><td>Discharge date</td></tr><tr><td></td><td>A2300</td><td>Assessment reference date</td></tr><tr><td></td><td>A2400C</td><td>End date of most recent Medicare stay</td></tr></table> | Items: | A0200 | Type of provider | | A0310A | Type of assessment: OBRA | | A0310B | Type of assessment: PPS | | A0310F | Entry/discharge reporting | | A0310H | SNF PPS Part A Discharge (End of Stay) Assessment | | A2000 | Discharge date | | A2300 | Assessment reference date | | A2400C | End date of most recent Medicare stay |
| Items: | A0200 | Type of provider | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310H | SNF PPS Part A Discharge (End of Stay) Assessment | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A2000 | Discharge date | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A2300 | Assessment reference date | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A2400C | End date of most recent Medicare stay | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3925 | Skip pattern | Fatal | <p>a) If A0310B=[01], then if J2000 is active, it must not be equal to [^].</p> <p>b) If A0310B=[99], then if J2000 is active, it must be equal to [^].</p> <table><tr><td>Items:</td><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td></td><td>J2000</td><td>Prior Surgery (100 days)</td></tr></table> | Items: | A0310B | Type of assessment: PPS | | J2000 | Prior Surgery (100 days) | | | | | | | | | | | | | | | | | | |
| Items: | A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | | | | | | | | | | |
| | J2000 | Prior Surgery (100 days) | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -3926 | Skip pattern | Fatal | <p>a) If A0310B=[01], then if N2001 is active, it must not be equal to [^].</p> <p>b) If A0310B=[99], then if N2001 and N2003 are active, they must be equal to [^].</p> <p>Items: A0310B Type of assessment: PPS N2001 Drug Regimen Review N2003 Medication Follow-up</p> |
| -3928 | Skip pattern | Fatal | <p>a) If A0310B=[01], then all active items from GG0100A through GG0100D must not be equal to [^].</p> <p>b) If A0310B=[99], then all active items from GG0100A through GG0100D must be equal to [^].</p> <p>Items: A0310B Type of assessment: PPS GG0100A Prior Functioning - Self Care GG0100B Prior Functioning - Indoor Mobility (Ambulation) GG0100C Prior Functioning - Stairs GG0100D Prior Functioning - Functional Cognition</p> |
| -3929 | Skip pattern | Fatal | <p>a) If A0310B=[01], then all active items from GG0110A through GG0110Z must not be equal to [^].</p> <p>b) If A0310B=[99], then all active items from GG0110A through GG0110Z must be equal to [^].</p> <p>Items: A0310B Type of assessment: PPS GG0110A Prior Device Use - Manual wheelchair GG0110B Prior Device Use - Mtrzd wheelchair and/or scooter GG0110C Prior Device Use - Mechanical lift GG0110D Prior Device Use - Walker GG0110E Prior Device Use - Orthotics/Prosthetics GG0110Z Prior Device Use - None of the above</p> |
| -3930 | Skip pattern | Fatal | <p>If B0100=[0,-] and A0310G=[2] and A0310A=[99] and A0310B=[99], then all active items from D0100 through D0600 must equal [^].</p> <p>Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310G Planned/unplanned discharge B0100 Comatose D0100 PHQ: should resident mood interview be conducted</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|--|
| | | Items: | |
| | | D0150A1 | Mood: Little interest/pleasure doing things: Pres |
| | | D0150A2 | Mood: Little interest/pleasure doing things: Freq |
| | | D0150B1 | Mood: Feeling down, depressed, or hopeless: Pres |
| | | D0150B2 | Mood: Feeling down, depressed, or hopeless: Freq |
| | | D0150C1 | Mood: Trouble falling or staying asleep: Pres |
| | | D0150C2 | Mood: Trouble falling or staying asleep: Freq |
| | | D0150D1 | Mood: Feeling tired or having little energy: Pres |
| | | D0150D2 | Mood: Feeling tired or having little energy: Freq |
| | | D0150E1 | Mood: Poor appetite or overeating: Pres |
| | | D0150E2 | Mood: Poor appetite or overeating: Freq |
| | | D0150F1 | Mood: Feeling bad about yourself: Pres |
| | | D0150F2 | Mood: Feeling bad about yourself: Freq |
| | | D0150G1 | Mood: Trouble concentrating on things: Pres |
| | | D0150G2 | Mood: Trouble concentrating on things: Freq |
| | | D0150H1 | Mood: Moving or speaking so slowly: Pres |
| | | D0150H2 | Mood: Moving or speaking so slowly: Freq |
| | | D0150I1 | Mood: Thoughts of better off dead: Pres |
| | | D0150I2 | Mood: Thoughts of better off dead: Freq |
| | | D0160 | Total severity score |
| | | D0500A1 | PHQ staff: little interest or pleasure - presence |
| | | D0500A2 | PHQ staff: little interest or pleasure - frequency |
| | | D0500B1 | PHQ staff: feeling down, depressed - presence |
| | | D0500B2 | PHQ staff: feeling down, depressed - frequency |
| | | D0500C1 | PHQ staff: trouble with sleep - presence |
| | | D0500C2 | PHQ staff: trouble with sleep - frequency |
| | | D0500D1 | PHQ staff: feeling tired/little energy - presence |
| | | D0500D2 | PHQ staff: feeling tired/little energy - frequency |
| | | D0500E1 | PHQ staff: poor appetite or overeating - presence |
| | | D0500E2 | PHQ staff: poor appetite or overeating - frequency |
| | | D0500F1 | PHQ staff: feeling bad about self - presence |
| | | D0500F2 | PHQ staff: feeling bad about self - frequency |
| | | D0500G1 | PHQ staff: trouble concentrating - presence |
| | | D0500G2 | PHQ staff: trouble concentrating - frequency |
| | | D0500H1 | PHQ staff: slow, fidgety, restless - presence |
| | | D0500H2 | PHQ staff: slow, fidgety, restless - frequency |
| | | D0500I1 | PHQ staff: thoughts better off dead - presence |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| | | | Items: D0500I2 PHQ staff: thoughts better off dead - frequency D0500J1 PHQ staff: short-tempered - presence D0500J2 PHQ staff: short-tempered - frequency D0600 PHQ staff: total mood score |
| | | | |
| | | | |
| | | | |
| | | | |
| -3935 | Consistency | Warning | <p>If the item is active and contains a value, the value should be consistent with all of the MDS items used in the PDPM classification (i.e., the HIPPS calculation should be correct).</p> <p>For items Z0100A and Z0100B, the submission system will recalculate the (a) HIPPS code, and (b) the version code. The submission system will issue a warning if the recalculated values do not match the submitted values.</p> <p>The following instructions only apply to OSA assessments OR assessments with a target date earlier than 10/01/2023 (i.e., corrections):</p> <p>For items Z0200A, Z0200B, Z0250A and Z0250B, the submission system will recalculate the (a) submitted RUGs group, (b) RUG version code, if the State is using a CMS supported RUG model, and (c) the short stay indicator (Z0200C). A warning will be</p> |
| | | | Items: Z0100A Medicare Part A: HIPPS code Z0100B Medicare Part A: Version code Z0200A State case mix: Group Z0200B State case mix: Version code Z0200C State case mix: Short Stay Assessment Z0250A State case mix: Alternate group Z0250B State case mix: Alternate version code |
| | | | |
| | | | |
| | | | |
| | | | |
| -3939 | Skip pattern | Fatal | <p>a) If A0310F=[01,12,99], then if A0310G1 is active it must equal [^]. b) If A0310F=[10,11], then if A0310G1 is active it must not equal [^].</p> |
| | | | Items: A0310F Entry/discharge reporting A0310G1 Interrupted Stay |
| | | | |
| -3940 | Consistency | Fatal | <p>a) If A0310G1=[1], then if A0310H is active it must equal [0]. b) If A0310H=[1], then if A0310G1 is active it must equal [0,^].</p> |
| | | | Items: A0310G1 Interrupted Stay A0310H SNF PPS Part A Discharge (End of Stay) Assessment |
| | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| -3942 | Skip pattern | Fatal | <p>a) If A0310B=[01,08], then if J2100 is active, it must not be equal to [^].</p> <p>b) If A0310B=[99], then</p> <p>--b1) If STATE_PDPM_OBRA_CD is active and STATE_PDPM_OBRA_CD=[0], then if J2100 is active, it must be equal to [^].</p> <p>--b2) If STATE_PDPM_OBRA_CD is active and STATE_PDPM_OBRA_CD=[1], then if J2100 is active, it must not be equal to [^].</p> <p>--b3) If STATE_PDPM_OBRA_CD is not active, then if J2100 is active, it must be equal to [^].</p> <p>NOTE: The submission system will use the iQIES value instead of STATE_PDPM_OBRA_CD in order to determine whether to enforce the b1 and b2</p> <p>Items: STATE_PDPM_OBR State calculation of PDPM for OBRA A_CD A0310B Type of assessment: PPS J2100 Recent Surgery Requiring Active SNF Care</p> |
| -3943 | Consistency | Fatal | <p>a) If J2100=[0,8,^], then all active items from J2300 through J5000 must equal [^].</p> <p>b) If J2100=[1], then at least one of all active items from J2300 through J5000 must equal [1].</p> <p>Items: J2100 Recent Surgery Requiring Active SNF Care J2300 Knee Replacement - partial or total J2310 Hip Replacement - partial or total J2320 Ankle Replacement - partial or total J2330 Shoulder Replacement - partial or total J2400 Spinal Surgery-spinal cord or major spinal nerves J2410 Spinal surgery - fusion of spinal bones J2420 Spinal surgery - lamina, discs, or facets J2499 Spinal surgery - other J2500 Ortho srgr - rpr frctrd shoulder/arm J2510 Ortho srgr - rpr frctrd pelvis/hip/leg/knee/ankle J2520 Ortho srgr - rpr but not replace joints J2530 Ortho srgr - rpr other bones J2599 Ortho srgr - other J2600 Neuro surgery - brain, surrounding tissue J2610 Neuro surgery - nervous system J2620 Neuro surgery - nsrt neural/brain neurostimulators</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| | | | Items: J2699 Neuro surgery - other J2700 Cardiopulmonary surgery - heart/mjr bld vssls J2710 Cardiopulmonary surgery - respiratory system J2799 Cardiopulmonary surgery - other J2800 Genitourinary surgery - male or female organs J2810 Genitourinary surgery - kidneys J2899 Genitourinary surgery - other J2900 Major surgery - tendons, ligament, or muscles J2910 Major surgery - GI tract/abdominal contents J2920 Major surgery - endocrine organs J2930 Major surgery - breast J2940 Major surgery - repair deep ulcers J5000 Major surgery - other not listed above |
| -3944 | Skip pattern | Fatal | <p>a) If A0310H=[0], then all active items from O0425A1 through O0430 must be equal to [^].</p> <p>b) If A0310H=[1], then the following active items must not be equal to [^]: O0425A1, O0425A2, O0425A3, O0425B1, O0425B2, O0425B3, O0425C1, O0425C2, O0425C3, O0430.</p> Items: A0310H SNF PPS Part A Discharge (End of Stay) Assessment O0425A1 SLP and Audiology Services: Individual Minutes O0425A2 SLP and Audiology Services: Concurrent Minutes O0425A3 SLP and Audiology Services: Group Minutes O0425A4 SLP and Audiology Services: Co-treatment Minutes O0425A5 SLP and Audiology Services: Days O0425B1 Occupational Therapy: Individual Minutes O0425B2 Occupational Therapy: Concurrent Minutes O0425B3 Occupational Therapy: Group Minutes O0425B4 Occupational Therapy: Co-treatment Minutes O0425B5 Occupational Therapy: Days O0425C1 Physical Therapy: Individual Minutes O0425C2 Physical Therapy: Concurrent Minutes O0425C3 Physical Therapy: Group Minutes O0425C4 Physical Therapy: Co-treatment Minutes O0425C5 Physical Therapy: Days O0430 Distinct Calendar Days of Part A Therapy |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| -3945 | Consistency | Fatal | <p>If A0310B=[01,08], then this ICD code must be one of the codes in the data specification table pdpm_icd_codes_FYxxxx (where FYxxxx is the fiscal year matching the target date of the assessment), in order to ensure that the PDPM grouper is able to generate a valid HIPPS code.</p> <p>Items: A0310B Type of assessment: PPS I0020B Primary Medical Condition ICD</p> |
| -3946 | Skip pattern | Fatal | <p>(a) If GG0170I5=[07,09,10,88,^], then GG0170J5 and GG0170K5 must equal [^].</p> <p>(b) If GG0170I5=[06,05,04,03,02,01], then GG0170J5 and GG0170K5 must not equal [^].</p> <p>Items: GG0170I5 Walk 10 feet (Interim Perf) GG0170J5 Walk 50 feet with two turns (Interim Perf) GG0170K5 Walk 150 feet (Interim Perf)</p> |
| -3947 | Consistency | Fatal | <p>Prevent Interrupted Stay on SD ISC.</p> <p>If A0200=[2] and A0310A=[99] and A0310B=[99] and A0310F=[10,11], then A0310G1 must not be equal to [1].</p> <p>Items: A0200 Type of provider A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310F Entry/discharge reporting A0310G1 Interrupted Stay</p> |
| -3948 | Consistency | Fatal | <p>Skip pattern for O0425A4, O0425A5.</p> <p>Compute the sum of minutes in O0425A1, O0425A2, and O0425A3. When computing this sum, if any of these items is coded with [-], count the number of minutes for that item as zero. The following rules apply based upon the computed sum:</p> <p>a) If the sum is equal to zero and at least one of the items O0425A1, O0425A2, and O0425A3 is not equal to [-], then O0425A4 and O0425A5 must equal [^].</p> <p>b) If the sum is greater than zero, then O0425A4 and O0425A5 must not equal [^].</p> <p>c) If O0425A1, O0425A2, and O0425A3 are all equal to [-], then O0425A4 and O0425A5 must equal [-].</p> <p>Items: O0425A1 SLP and Audiology Services: Individual Minutes O0425A2 SLP and Audiology Services: Concurrent Minutes</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| | | | Items: O0425A3 SLP and Audiology Services: Group Minutes O0425A4 SLP and Audiology Services: Co-treatment Minutes O0425A5 SLP and Audiology Services: Days |
| | | | |
| | | | |
| | | | |
| -3949 | Consistency | Fatal | Skip pattern for O0425B4, O0425B5. Compute the sum of minutes in O0425B1, O0425B2, and O0425B3. When computing this sum, if any of these items is coded with [-], count the number of minutes for that item as zero. The following rules apply based upon the computed sum: a) If the sum is equal to zero and at least one of the items O0425B1, O0425B2, and O0425B3 is not equal to [-], then O0425B4 and O0425B5 must equal [^]. b) If the sum is greater than zero, then O0425B4 and O0425B5 must not equal [^]. c) If O0425B1, O0425B2, and O0425B3 are all equal to [-], then O0425B4 and O0425B5 must equal [-]. Items: O0425B1 Occupational Therapy: Individual Minutes O0425B2 Occupational Therapy: Concurrent Minutes O0425B3 Occupational Therapy: Group Minutes O0425B4 Occupational Therapy: Co-treatment Minutes O0425B5 Occupational Therapy: Days |
| -3950 | Consistency | Fatal | Skip pattern for O0425C4, O0425C5. Compute the sum of minutes in O0425C1, O0425C2, and O0425C3. When computing this sum, if any of these items is coded with [-], count the number of minutes for that item as zero. The following rules apply based upon the computed sum: a) If the sum is equal to zero and at least one of the items O0425C1, O0425C2, and O0425C3 is not equal to [-], then O0425C4 and O0425C5 must equal [^]. b) If the sum is greater than zero, then O0425C4 and O0425C5 must not equal [^]. c) If O0425C1, O0425C2, and O0425C3 are all equal to [-], then O0425C4 and O0425C5 must equal [-]. Items: O0425C1 Physical Therapy: Individual Minutes O0425C2 Physical Therapy: Concurrent Minutes O0425C3 Physical Therapy: Group Minutes O0425C4 Physical Therapy: Co-treatment Minutes O0425C5 Physical Therapy: Days |
| -3951 | Consistency | Fatal | If A0310B=[08], then A0310F must equal [99]. |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| | | | Items: A0310B Type of assessment: PPS A0310F Entry/discharge reporting |
| | | | |
| -3953 | Consistency | Fatal | If A0310B=[08], then A0310E must equal [0]. |
| | | | Items: A0310B Type of assessment: PPS A0310E First assessment since most recent entry |
| | | | |
| -3954 | Consistency | Fatal | If A0310B=[08], then A0410 must equal [3]. |
| | | | Items: A0310B Type of assessment: PPS A0410 Submission requirement |
| | | | |
| -3958 | Consistency | Fatal | If a value submitted in items I8000A-J is not equal to [^], it must not equal (must not duplicate) any value submitted in the remaining items in this set. |
| | | | Items: I8000A Additional active ICD diagnosis 1 I8000B Additional active ICD diagnosis 2 I8000C Additional active ICD diagnosis 3 I8000D Additional active ICD diagnosis 4 I8000E Additional active ICD diagnosis 5 I8000F Additional active ICD diagnosis 6 I8000G Additional active ICD diagnosis 7 I8000H Additional active ICD diagnosis 8 I8000I Additional active ICD diagnosis 9 I8000J Additional active ICD diagnosis 10 |
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| -3960 | Consistency | Warning | SLP and Audiology Services Concurrent and Group Therapy Minutes compliance: a) Calculate the Total Therapy Minutes using O0425A1+O0425A2+O0425A3. b) Calculate the Total Concurrent and Group Minutes using O0425A2+O0425A3. c) If A0310F=[10,11,12] and (Total Concurrent and Group Minutes/Total Therapy Minutes) > 0.25, then the number of Concurrent and Group Minutes is non-compliant, and the following warning message will be triggered: The total number of group and/or concurrent minutes for one or more therapy disciplines exceeds the 25 percent limit on concurrent and group therapy. Consistent violation of this limit may result in your facility being flagged for additional medical review. |
| | | | Items: A0310F Entry/discharge reporting O0425A1 SLP and Audiology Services: Individual Minutes O0425A2 SLP and Audiology Services: Concurrent Minutes O0425A3 SLP and Audiology Services: Group Minutes |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | |
|---------------|-------------|--|---|---------------|---------|---------------------------|--|---------|--|--|---------|--|--|---------|-------------------------------------|
| -3961 | Consistency | Warning | <p>Occupational Therapy Concurrent and Group Therapy Minutes compliance:</p> <p>a) Calculate the Total Therapy Minutes using O0425B1+O0425B2+O0425B3.</p> <p>b) Calculate the Total Concurrent and Group Minutes using O0425B2+O0425B3.</p> <p>c) If A0310F=[10,11,12] and (Total Concurrent and Group Minutes/Total Therapy Minutes) > 0.25, then the number of Concurrent and Group Minutes is non-compliant, and the following warning message will be triggered: The total number of group and/or concurrent minutes for one or more therapy disciplines exceeds the 25 percent limit on concurrent and group therapy. Consistent violation of this limit may result in your facility being flagged for additional medical review.</p> <table><tr><td>Items:</td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>O0425B1</td><td>Occupational Therapy: Individual Minutes</td></tr><tr><td></td><td>O0425B2</td><td>Occupational Therapy: Concurrent Minutes</td></tr><tr><td></td><td>O0425B3</td><td>Occupational Therapy: Group Minutes</td></tr></table> | Items: | A0310F | Entry/discharge reporting | | O0425B1 | Occupational Therapy: Individual Minutes | | O0425B2 | Occupational Therapy: Concurrent Minutes | | O0425B3 | Occupational Therapy: Group Minutes |
| Items: | A0310F | Entry/discharge reporting | | | | | | | | | | | | | |
| | O0425B1 | Occupational Therapy: Individual Minutes | | | | | | | | | | | | | |
| | O0425B2 | Occupational Therapy: Concurrent Minutes | | | | | | | | | | | | | |
| | O0425B3 | Occupational Therapy: Group Minutes | | | | | | | | | | | | | |
| -3962 | Consistency | Warning | <p>Physical Therapy Concurrent and Group Therapy Minutes compliance</p> <p>a) Calculate the Total Therapy Minutes using O0425C1+O0425C2+O0425C3.</p> <p>b) Calculate the Total Concurrent and Group Minutes using O0425C2+O0425C3.</p> <p>c) If A0310F=[10,11,12] and (Total Concurrent and Group Minutes/Total Therapy Minutes) > 0.25, then the number of Concurrent and Group Minutes is non-compliant, and the following warning message will be triggered: The total number of group and/or concurrent minutes for one or more therapy disciplines exceeds the 25 percent limit on concurrent and group therapy. Consistent violation of this limit may result in your facility being flagged for additional medical review.</p> <table><tr><td>Items:</td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>O0425C1</td><td>Physical Therapy: Individual Minutes</td></tr><tr><td></td><td>O0425C2</td><td>Physical Therapy: Concurrent Minutes</td></tr><tr><td></td><td>O0425C3</td><td>Physical Therapy: Group Minutes</td></tr></table> | Items: | A0310F | Entry/discharge reporting | | O0425C1 | Physical Therapy: Individual Minutes | | O0425C2 | Physical Therapy: Concurrent Minutes | | O0425C3 | Physical Therapy: Group Minutes |
| Items: | A0310F | Entry/discharge reporting | | | | | | | | | | | | | |
| | O0425C1 | Physical Therapy: Individual Minutes | | | | | | | | | | | | | |
| | O0425C2 | Physical Therapy: Concurrent Minutes | | | | | | | | | | | | | |
| | O0425C3 | Physical Therapy: Group Minutes | | | | | | | | | | | | | |
| -3965 | Consistency | Fatal | <p>If A0310G1=[1], then A2400C must equal [-----].</p> <table><tr><td>Items:</td><td>A0310G1</td><td>Interrupted Stay</td></tr><tr><td></td><td>A2400C</td><td>End date of most recent Medicare stay</td></tr></table> | Items: | A0310G1 | Interrupted Stay | | A2400C | End date of most recent Medicare stay | | | | | | |
| Items: | A0310G1 | Interrupted Stay | | | | | | | | | | | | | |
| | A2400C | End date of most recent Medicare stay | | | | | | | | | | | | | |
| -3966 | Consistency | Warning | <p>If A0310A=[01,02,03,04,05,06] and A0310B=[99] and the target date for the assessment is on or after October 1, 2020, then the iQIES value specified by the state for the date range where the target date of the assessment falls should match the submitted value for STATE PDPM OBRA CD.</p> | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| | | | Items: STATE_PDPM_OBR State calculation of PDPM for OBRA A_CD A0310A Type of assessment: OBRA A0310B Type of assessment: PPS |
| | | | |
| | | | |
| -3967 | Consistency | Warning | <p>If A0310B=[99] and STATE_PDPM_OBRA_CD is active and STATE_PDPM_OBRA_CD=[1] and I0020B cannot be found in either data spec dictionary table pdpm_icd_codes_FYxxxx or pdpm_icd_codes_2_FYxxxx (where FYxxxx is the fiscal year matching the target date of the assessment), then the PDPM cannot be determined for this assessment.</p> <p>NOTE: The submission system will use the iQIES value for the state where the assessment was performed instead of STATE_PDPM_OBRA_CD to determine whether this warning is applicable.</p> |
| | | | Items: STATE_PDPM_OBR State calculation of PDPM for OBRA A_CD A0310B Type of assessment: PPS I0020B Primary Medical Condition ICD |
| | | | |
| | | | |
| -3970 | Consistency | Fatal | <p>Skip patterns based on J0300:</p> <p>a) If J0300=[0], then all active items from J0410 through J0850 must equal [^].</p> <p>b) If J0300=[1], then the following rules apply:</p> <p>---b1) All active items from J0410 through J0530 must not equal [^].</p> <p>---b2) If J0600A and/or J0600B are active items, then at least one of these items must equal a valid value other than [^].</p> <p>---b3) If J0700 is an active item, it must not equal [^].</p> <p>c) If J0300=[9], then the following rules apply:</p> <p>---c1) All active items from J0410 through J0700 must equal [^].</p> <p>---c2) All active items from J0800A through J0800Z must not equal [^].</p> <p>d) If J0300=[-], then the following rules apply:</p> <p>---d1) All active items from J0410 through J0600B must equal [-].</p> <p>---d2) If J0700 is an active item, it must not equal [^].</p> |
| | | | Items: J0300 Res pain interview: presence J0410 Pain Frequency J0510 Pain Effect on Sleep J0520 Pain Interference with Therapy Activities J0530 Pain Interference with Day-to-Day Activities J0600A Res pain interview: intensity rating scale J0600B Res pain interview: verbal descriptor scale J0700 Should staff assessment for pain be conducted J0800A Staff pain asmt: non-verbal sounds |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| | | | Items: J0800B Staff pain asmt: vocal complaints of pain J0800C Staff pain asmt: facial expressions J0800D Staff pain asmt: protective movements/postures J0800Z Staff pain asmt: none of these signs observed J0850 Staff pain asmt: frequency of pain |
| -3971 | Consistency | Fatal | Consistency rules for J0700: a) If J0410=[1,2,3,4,-], then if J0700 is active it must equal [0]. b) If J0410=[9], then if J0700 is active it must equal [1,-]. Items: J0410 Pain Frequency J0700 Should staff assessment for pain be conducted |
| -3972 | Consistency | Fatal | a) If A0310F is equal to [10,11,12], then if A2000 is active, it must not equal [^]. b) If A0310F is not equal to [10,11,12], then if A2000 is active, it must equal [^]. Items: A0310F Entry/discharge reporting A2000 Discharge date |
| -3973 | Skip pattern | Fatal | a) If Q0490=[1], then all active items from Q0500B through Q0550C must equal [^]. b) If Q0490=[0,-], then all active items from Q0500B through Q0550C must not equal [^]. Items: Q0490 Resident's preference to avoid being asked Q0500B Do you want to talk about returning to community Q0500C Q0500B info source Q0550A Reasking resident preference Q0550C Q0550A info source |
| -3974 | Consistency | Fatal | a) If Q0400A=[0,-] and A0310A=[01,03,04,05], then both of the following rules apply: --a1) If Q0490 is active, it must equal [^]. --a2) All active items from Q0500B through Q0550C must not equal [^]. b) If Q0400A=[0,-] and A0310A=[02,06,99], then if Q0490 is active it must not equal [^]. Items: A0310A Type of assessment: OBRA Q0400A Active discharge planning for return to community Q0490 Resident's preference to avoid being asked Q0500B Do you want to talk about returning to community Q0500C Q0500B info source Q0550A Reasking resident preference Q0550C Q0550A info source |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | |
|--------|--|----------|---|-------|--------------------------------------|--------|---------------------------------|--------|--|--------|---------------------------------------|--------|---|--------|--|--------|---------------------------------------|--------|---------------------------------------|--------|--|--------|---------------------------------------|--------|----------------------------|--------|------------------------|
| -3977 | Consistency | Fatal | <p>***THIS EDIT WAS DELETED IN V3.10.1***</p> <p>Items:</p> <table><tr><td>X0150</td><td>Correction: type of provider</td></tr><tr><td>X0200A</td><td>Correction: resident first name</td></tr><tr><td>X0200C</td><td>Correction: resident last name</td></tr><tr><td>X0400</td><td>Correction: resident birth date</td></tr><tr><td>X0500</td><td>Correction: resident social security number</td></tr><tr><td>X0600A</td><td>Correction: OBRA reason for assessment</td></tr><tr><td>X0600B</td><td>Correction: PPS reason for assessment</td></tr><tr><td>X0600F</td><td>Correction: entry/discharge reporting</td></tr><tr><td>X0600H</td><td>Correction: SNF PPS Part A Discharge (End of Stay)</td></tr><tr><td>X0700A</td><td>Correction: assessment reference date</td></tr><tr><td>X0700B</td><td>Correction: discharge date</td></tr><tr><td>X0700C</td><td>Correction: entry date</td></tr></table> | X0150 | Correction: type of provider | X0200A | Correction: resident first name | X0200C | Correction: resident last name | X0400 | Correction: resident birth date | X0500 | Correction: resident social security number | X0600A | Correction: OBRA reason for assessment | X0600B | Correction: PPS reason for assessment | X0600F | Correction: entry/discharge reporting | X0600H | Correction: SNF PPS Part A Discharge (End of Stay) | X0700A | Correction: assessment reference date | X0700B | Correction: discharge date | X0700C | Correction: entry date |
| X0150 | Correction: type of provider | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0200A | Correction: resident first name | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0200C | Correction: resident last name | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0400 | Correction: resident birth date | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0500 | Correction: resident social security number | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600A | Correction: OBRA reason for assessment | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600B | Correction: PPS reason for assessment | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600F | Correction: entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600H | Correction: SNF PPS Part A Discharge (End of Stay) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0700A | Correction: assessment reference date | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0700B | Correction: discharge date | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0700C | Correction: entry date | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3978 | Consistency | Fatal | <p>***THIS EDIT WAS DELETED IN V3.10.1***</p> <p>Items:</p> <table><tr><td>A0050</td><td>Type of transaction (formerly X0100)</td></tr><tr><td>X0150</td><td>Correction: type of provider</td></tr><tr><td>X0200A</td><td>Correction: resident first name</td></tr><tr><td>X0200C</td><td>Correction: resident last name</td></tr><tr><td>X0400</td><td>Correction: resident birth date</td></tr><tr><td>X0600A</td><td>Correction: OBRA reason for assessment</td></tr><tr><td>X0600B</td><td>Correction: PPS reason for assessment</td></tr><tr><td>X0600F</td><td>Correction: entry/discharge reporting</td></tr></table> | A0050 | Type of transaction (formerly X0100) | X0150 | Correction: type of provider | X0200A | Correction: resident first name | X0200C | Correction: resident last name | X0400 | Correction: resident birth date | X0600A | Correction: OBRA reason for assessment | X0600B | Correction: PPS reason for assessment | X0600F | Correction: entry/discharge reporting | | | | | | | | |
| A0050 | Type of transaction (formerly X0100) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0150 | Correction: type of provider | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0200A | Correction: resident first name | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0200C | Correction: resident last name | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0400 | Correction: resident birth date | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600A | Correction: OBRA reason for assessment | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600B | Correction: PPS reason for assessment | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600F | Correction: entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3981 | Skip pattern | Fatal | <p>a) If A0050 (formerly X0100)=[2] and A0310B=[01,99], then the following items, when active, must not equal [^]: X0600A, X0600B, X0600F, X0600H.</p> <p>b) If A0050 (formerly X0100)=[2] and A0310B=[08], then the following items, when active, must not equal [^]: X0600A, X0600B, X0600F.</p> <p>Items:</p> <table><tr><td>A0050</td><td>Type of transaction (formerly X0100)</td></tr><tr><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td>X0600A</td><td>Correction: OBRA reason for assessment</td></tr><tr><td>X0600B</td><td>Correction: PPS reason for assessment</td></tr><tr><td>X0600F</td><td>Correction: entry/discharge reporting</td></tr><tr><td>X0600H</td><td>Correction: SNF PPS Part A Discharge (End of Stay)</td></tr></table> | A0050 | Type of transaction (formerly X0100) | A0310B | Type of assessment: PPS | X0600A | Correction: OBRA reason for assessment | X0600B | Correction: PPS reason for assessment | X0600F | Correction: entry/discharge reporting | X0600H | Correction: SNF PPS Part A Discharge (End of Stay) | | | | | | | | | | | | |
| A0050 | Type of transaction (formerly X0100) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600A | Correction: OBRA reason for assessment | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600B | Correction: PPS reason for assessment | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600F | Correction: entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X0600H | Correction: SNF PPS Part A Discharge (End of Stay) | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------|---|----------|--|--------|--|--------|--|--------|--|--------|-----------------------|--------|---|--------|---------------------------------------|--------|---|--------|--------------|--------|------------------|--------|-------------------|--------|-----------------------|--------|-----------------------------|--------|--------------|--------|------------------------------|--------|----------------------------------|
| -3982 | Consistency | Fatal | <p>(a) At least one active item from A1005A to A1005Y must equal [1].</p> <p>(b) If A1005A=[1], then all active items from A1005B through A1005E must equal [0], and A1005Y must equal [0].</p> <p>(c) If A1005B=[1] or A1005C=[1] or A1005D=[1] or A1005E=[1], then A1005A must equal [0] and A1005Y must equal [0].</p> <p>(d) If A1005X=[1], then A1005Y must equal [0].</p> <p>(e) If A1005Y=[1], then all active items from A1005A to A1005X must equal [0].</p> <p>Items:</p> <table><tr><td>A1005A</td><td>Ethnicity: No, not Hispanic, Latino/a, Spanish</td></tr><tr><td>A1005B</td><td>Ethnicity: Yes, Mex, Mex Amer, Chicano/a</td></tr><tr><td>A1005C</td><td>Ethnicity: Yes, Puerto Rican</td></tr><tr><td>A1005D</td><td>Ethnicity: Yes, Cuban</td></tr><tr><td>A1005E</td><td>Ethnicity: Yes, another Hispanic/Latino/Spanish</td></tr><tr><td>A1005X</td><td>Ethnicity: Resident unable to respond</td></tr><tr><td>A1005Y</td><td>Ethnicity: Resident declines to respond</td></tr></table> | A1005A | Ethnicity: No, not Hispanic, Latino/a, Spanish | A1005B | Ethnicity: Yes, Mex, Mex Amer, Chicano/a | A1005C | Ethnicity: Yes, Puerto Rican | A1005D | Ethnicity: Yes, Cuban | A1005E | Ethnicity: Yes, another Hispanic/Latino/Spanish | A1005X | Ethnicity: Resident unable to respond | A1005Y | Ethnicity: Resident declines to respond | | | | | | | | | | | | | | | | |
| A1005A | Ethnicity: No, not Hispanic, Latino/a, Spanish | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005B | Ethnicity: Yes, Mex, Mex Amer, Chicano/a | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005C | Ethnicity: Yes, Puerto Rican | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005D | Ethnicity: Yes, Cuban | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005E | Ethnicity: Yes, another Hispanic/Latino/Spanish | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005X | Ethnicity: Resident unable to respond | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1005Y | Ethnicity: Resident declines to respond | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3983 | Consistency | Fatal | <p>(a) At least one active item from A1010A through A1010Z must equal [1].</p> <p>(b) If any item from A1010A through A1010N=[1], then A1010Y must equal [0] and A1010Z must equal [0].</p> <p>(c) If A1010X=[1], then A1010Y must equal [0].</p> <p>(d) If A1010Y=[1], then all active items from A1010A to A1010X must equal [0], and A1010Z must equal [0].</p> <p>(e) If A1010Z=[1], then all active items from A1010A to A1010N must equal [0], and A1010Y must equal [0].</p> <p>Items:</p> <table><tr><td>A1010A</td><td>Race: White</td></tr><tr><td>A1010B</td><td>Race: Black or African American</td></tr><tr><td>A1010C</td><td>Race: American Indian or Alaska Native</td></tr><tr><td>A1010D</td><td>Race: Asian Indian</td></tr><tr><td>A1010E</td><td>Race: Chinese</td></tr><tr><td>A1010F</td><td>Race: Filipino</td></tr><tr><td>A1010G</td><td>Race: Japanese</td></tr><tr><td>A1010H</td><td>Race: Korean</td></tr><tr><td>A1010I</td><td>Race: Vietnamese</td></tr><tr><td>A1010J</td><td>Race: Other Asian</td></tr><tr><td>A1010K</td><td>Race: Native Hawaiian</td></tr><tr><td>A1010L</td><td>Race: Guamanian or Chamorro</td></tr><tr><td>A1010M</td><td>Race: Samoan</td></tr><tr><td>A1010N</td><td>Race: Other Pacific Islander</td></tr><tr><td>A1010X</td><td>Race: Resident unable to respond</td></tr></table> | A1010A | Race: White | A1010B | Race: Black or African American | A1010C | Race: American Indian or Alaska Native | A1010D | Race: Asian Indian | A1010E | Race: Chinese | A1010F | Race: Filipino | A1010G | Race: Japanese | A1010H | Race: Korean | A1010I | Race: Vietnamese | A1010J | Race: Other Asian | A1010K | Race: Native Hawaiian | A1010L | Race: Guamanian or Chamorro | A1010M | Race: Samoan | A1010N | Race: Other Pacific Islander | A1010X | Race: Resident unable to respond |
| A1010A | Race: White | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010B | Race: Black or African American | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010C | Race: American Indian or Alaska Native | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010D | Race: Asian Indian | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010E | Race: Chinese | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010F | Race: Filipino | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010G | Race: Japanese | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010H | Race: Korean | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010I | Race: Vietnamese | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010J | Race: Other Asian | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010K | Race: Native Hawaiian | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010L | Race: Guamanian or Chamorro | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010M | Race: Samoan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010N | Race: Other Pacific Islander | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A1010X | Race: Resident unable to respond | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: A1010Y Race: Resident declines to respond |
| | | | A1010Z Race: None of the above |
| -3985 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: A0200 Type of provider |
| | | | A0310A Type of assessment: OBRA |
| | | | A0310B Type of assessment: PPS |
| | | | A0310F Entry/discharge reporting |
| | | | A0310G Planned/unplanned discharge |
| | | | A0310H SNF PPS Part A Discharge (End of Stay) Assessment |
| -3986 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: A0200 Type of provider |
| | | | A0310A Type of assessment: OBRA |
| | | | A0310B Type of assessment: PPS |
| | | | A0310F Entry/discharge reporting |
| | | | A0310G Planned/unplanned discharge |
| | | | A0310H SNF PPS Part A Discharge (End of Stay) Assessment |
| -3987 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: A0310A Type of assessment: OBRA |
| | | | A0310B Type of assessment: PPS |
| | | | A0310F Entry/discharge reporting |
| -3988 | Skip pattern | Fatal | (a) If A0310F=[10,11,12] then A2105, if active, must not equal [^]. (b) If A0310F=[01,99] then A2105, if active, must equal [^]. |
| | | | Items: A0310F Entry/discharge reporting |
| | | | A2105 Discharge location |
| -3991 | Skip pattern | Fatal | (a) If A2121=[0], then all active items from A2122A through A2122E must equal [^] . (b) If A2121=[1], then all active items from A2122A through A2122E must not equal [^]. (c) If A2121=[1], then at least one active item from A2122A through A2122E must equal [1]. |
| | | | Items: A2121 Current Reconciled Medication List - Provider |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: A2122A Provider Trans - Electronic Health Record A2122B Provider Trans - Health Info Exchange A2122C Provider Trans - Verbal A2122D Provider Trans - Paper-based A2122E Provider Trans - Other Methods |
| | | | (a) If A2123=[0], then all active items from A2124A through A2124E must equal [^]. |
| | | | (b) If A2123=[1], then all active items from A2124A through A2124E must not equal [^]. |
| | | | (c) If A2123=[1], then at least one active item from A2124A through A2124E must equal [1]. |
| | | | Items: A2123 Current Reconciled Medication List - Ptnt/Fam/Care A2124A Patient Trans - Electronic Health Record A2124B Patient Trans - Health Info Exchange A2124C Patient Trans - Verbal A2124D Patient Trans - Paper-based A2124E Patient Trans - Other Methods |
| -3993 | Skip pattern | Fatal | |
| | | | B1300 skip patterns: |
| | | | NPE skip: |
| | | | (a) If A0310A=[99] AND A0310B=[99] AND A0310F=[99], then if B1300 is active, it must not equal [^]. |
| | | | Otherwise: |
| | | | (b) If B0100=[0] AND (A0310B=[01] OR (A0310G=[1] AND A0310H=[1])), then if B1300 is active, it must not equal [^]. |
| | | | (c) If B0100=[0] AND (A0310B=[99] AND (A0310G=[2,^] OR A0310H=[0])), then if B1300 is active, it must equal [^]. |
| | | | Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310F Entry/discharge reporting A0310G Planned/unplanned discharge A0310H SNF PPS Part A Discharge (End of Stay) Assessment B0100 Comatose B1300 Health Literacy |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|--------------|---|--|---------------|---------|---|--|---------|--|--|---------|--|--|---------|--------------------------------------|--|---------|---|--|---------|--|--|---------|--------------------------------------|--|---------|------------------------------------|--|---------|--|--|---------|--|--|---------|--|--|---------|---|
| -3995 | Consistency | Fatal | <p>(a) If N0415Z1=[1], then the following items, when active, must equal [0]: N0415A1, N0415B1, N0415C1, N0415D1, N0415E1, N0415F1, N0415G1, N0415H1, N0415I1, N0415J1, N0415K1.</p> <p>(b) If N0415Z1=[0], then at least one of the following items, when active, must equal [1]: N0415A1, N0415B1, N0415C1, N0415D1, N0415E1, N0415F1, N0415G1, N0415H1, N0415I1, N0415J1, N0415K1.</p> <p>(c) If N0415Z1=[-], then at least one of the following items, when active, must equal [-] and the rest of the active items must be [0,-]: N0415A1, N0415B1, N0415C1, N0415D1, N0415E1, N0415F1, N0415G1, N0415H1, N0415I1, N0415J1, N0415K1.</p> <table><tr><td>Items:</td><td>N0415A1</td><td>High-Risk Drug (Is Taking): Antipsychotic</td></tr><tr><td></td><td>N0415B1</td><td>High-Risk Drug (Is Taking): Antianxiety</td></tr><tr><td></td><td>N0415C1</td><td>High-Risk Drug (Is Taking): Antidepressant</td></tr><tr><td></td><td>N0415D1</td><td>High-Risk Drug (Is Taking): Hypnotic</td></tr><tr><td></td><td>N0415E1</td><td>High-Risk Drug (Is Taking): Anticoagulant</td></tr><tr><td></td><td>N0415F1</td><td>High-Risk Drug (Is Taking): Antibiotic</td></tr><tr><td></td><td>N0415G1</td><td>High-Risk Drug (Is Taking): Diuretic</td></tr><tr><td></td><td>N0415H1</td><td>High-Risk Drug (Is Taking): Opioid</td></tr><tr><td></td><td>N0415I1</td><td>High-Risk Drug (Is Taking): Antiplatelet</td></tr><tr><td></td><td>N0415J1</td><td>High-Risk Drug (Is Taking): Hypoglycemic</td></tr><tr><td></td><td>N0415K1</td><td>High-Risk Drug (Is Taking): Anticonvulsant</td></tr><tr><td></td><td>N0415Z1</td><td>High-Risk Drug (Is taking): None of the Above</td></tr></table> | Items: | N0415A1 | High-Risk Drug (Is Taking): Antipsychotic | | N0415B1 | High-Risk Drug (Is Taking): Antianxiety | | N0415C1 | High-Risk Drug (Is Taking): Antidepressant | | N0415D1 | High-Risk Drug (Is Taking): Hypnotic | | N0415E1 | High-Risk Drug (Is Taking): Anticoagulant | | N0415F1 | High-Risk Drug (Is Taking): Antibiotic | | N0415G1 | High-Risk Drug (Is Taking): Diuretic | | N0415H1 | High-Risk Drug (Is Taking): Opioid | | N0415I1 | High-Risk Drug (Is Taking): Antiplatelet | | N0415J1 | High-Risk Drug (Is Taking): Hypoglycemic | | N0415K1 | High-Risk Drug (Is Taking): Anticonvulsant | | N0415Z1 | High-Risk Drug (Is taking): None of the Above |
| Items: | N0415A1 | High-Risk Drug (Is Taking): Antipsychotic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415B1 | High-Risk Drug (Is Taking): Antianxiety | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415C1 | High-Risk Drug (Is Taking): Antidepressant | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415D1 | High-Risk Drug (Is Taking): Hypnotic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415E1 | High-Risk Drug (Is Taking): Anticoagulant | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415F1 | High-Risk Drug (Is Taking): Antibiotic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415G1 | High-Risk Drug (Is Taking): Diuretic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415H1 | High-Risk Drug (Is Taking): Opioid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415I1 | High-Risk Drug (Is Taking): Antiplatelet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415J1 | High-Risk Drug (Is Taking): Hypoglycemic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415K1 | High-Risk Drug (Is Taking): Anticonvulsant | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415Z1 | High-Risk Drug (Is taking): None of the Above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3996 | Skip pattern | Fatal | <p>(a) If N0415A1=[0], then N0415A2 must equal [^].</p> <p>(b) If N0415A1=[1], then N0415A2 must not equal [^].</p> <p>(c) If N0415A1=[-], then N0415A2 must equal [-].</p> <table><tr><td>Items:</td><td>N0415A1</td><td>High-Risk Drug (Is Taking): Antipsychotic</td></tr><tr><td></td><td>N0415A2</td><td>High-Risk Drug (Indication): Antipsychotic</td></tr></table> | Items: | N0415A1 | High-Risk Drug (Is Taking): Antipsychotic | | N0415A2 | High-Risk Drug (Indication): Antipsychotic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | N0415A1 | High-Risk Drug (Is Taking): Antipsychotic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415A2 | High-Risk Drug (Indication): Antipsychotic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3997 | Skip pattern | Fatal | <p>(a) If N0415B1=[0], then N0415B2 must equal [^].</p> <p>(b) If N0415B1=[1], then N0415B2 must not equal [^].</p> <p>(c) If N0415B1=[-], then N0415B2 must equal [-].</p> <table><tr><td>Items:</td><td>N0415B1</td><td>High-Risk Drug (Is Taking): Antianxiety</td></tr><tr><td></td><td>N0415B2</td><td>High-Risk Drug (Indication): Antianxiety</td></tr></table> | Items: | N0415B1 | High-Risk Drug (Is Taking): Antianxiety | | N0415B2 | High-Risk Drug (Indication): Antianxiety | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | N0415B1 | High-Risk Drug (Is Taking): Antianxiety | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | N0415B2 | High-Risk Drug (Indication): Antianxiety | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -3998 | Skip pattern | Fatal | <p>(a) If N0415C1=[0], then N0415C2 must equal [^].</p> <p>(b) If N0415C1=[1], then N0415C2 must not equal [^].</p> <p>(c) If N0415C1=[-], then N0415C2 must equal [-].</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -3999 | Skip pattern | Fatal | Items: N0415C1 High-Risk Drug (Is Taking): Antidepressant N0415C2 High-Risk Drug (Indication): Antidepressant |
| | | | (a) If N0415D1=[0], then N0415D2 must equal [^]. (b) If N0415D1=[1], then N0415D2 must not equal [^]. (c) If N0415D1=[-], then N0415D2 must equal [-]. |
| | | | Items: N0415D1 High-Risk Drug (Is Taking): Hypnotic N0415D2 High-Risk Drug (Indication): Hypnotic |
| -4000 | Skip pattern | Fatal | (a) If N0415E1=[0], then N0415E2 must equal [^]. (b) If N0415E1=[1], then N0415E2 must not equal [^]. (c) If N0415E1=[-], then N0415E2 must equal [-]. |
| | | | Items: N0415E1 High-Risk Drug (Is Taking): Anticoagulant N0415E2 High-Risk Drug (Indication): Anticoagulant |
| | | | (a) If N0415F1=[0], then N0415F2 must equal [^]. (b) If N0415F1=[1], then N0415F2 must not equal [^]. (c) If N0415F1=[-], then N0415F2 must equal [-]. |
| -4001 | Skip pattern | Fatal | Items: N0415F1 High-Risk Drug (Is Taking): Antibiotic N0415F2 High-Risk Drug (Indication): Antibiotic |
| | | | (a) If N0415G1=[0], then N0415G2 must equal [^]. (b) If N0415G1=[1], then N0415G2 must not equal [^]. (c) If N0415G1=[-], then N0415G2 must equal [-]. |
| | | | Items: N0415G1 High-Risk Drug (Is Taking): Diuretic N0415G2 High-Risk Drug (Indication): Diuretic |
| -4002 | Skip pattern | Fatal | (a) If N0415H1=[0], then N0415H2 must equal [^]. (b) If N0415H1=[1], then N0415H2 must not equal [^]. (c) If N0415H1=[-], then N0415H2 must equal [-]. |
| | | | Items: N0415H1 High-Risk Drug (Is Taking): Opioid N0415H2 High-Risk Drug (Indication): Opioid |
| | | | (a) If N0415I1=[0], then N0415I2 must equal [^]. (b) If N0415I1=[1], then N0415I2 must not equal [^]. (c) If N0415I1=[-], then N0415I2 must equal [-]. |
| -4003 | Skip pattern | Fatal | Items: N0415I1 High-Risk Drug (Is Taking): Antiplatelet N0415I2 High-Risk Drug (Indication): Antiplatelet |
| | | | (a) If N0415I1=[0], then N0415I2 must equal [^]. (b) If N0415I1=[1], then N0415I2 must not equal [^]. (c) If N0415I1=[-], then N0415I2 must equal [-]. |
| | | | Items: N0415I1 High-Risk Drug (Is Taking): Antiplatelet N0415I2 High-Risk Drug (Indication): Antiplatelet |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -4005 | Skip pattern | Fatal | <p>(a) If N0415J1=[0], then N0415J2 must equal [^].</p> <p>(b) If N0415J1=[1], then N0415J2 must not equal [^].</p> <p>(c) If N0415J1=[-], then N0415J2 must equal [-].</p> <p>Items: N0415J1 High-Risk Drug (Is Taking): Hypoglycemic</p> <p style="padding-left: 100px;">N0415J2 High-Risk Drug (Indication): Hypoglycemic</p> |
| -4006 | Consistency | Fatal | <p>(a) If O0110A1A=[0], then all active items from O0110A2A through O0110A10A must equal [0].</p> <p>(b) If O0110A1A=[1], then at least one active item from O0110A2A through O0110A10A must equal [1], and remaining items must equal [0,1].</p> <p>(c) If O0110A1A=[-], then all active items from O0110A2A through O0110A10A must equal [-].</p> <p>(d) If O0110A1A=[^], then all active items from O0110A2A through O0110A10A must equal [^].</p> <p>Items: O0110A1A Treatment: Chemotherapy (Admission)</p> <p style="padding-left: 100px;">O0110A2A Treatment: Chemo - IV (Admission)</p> <p style="padding-left: 100px;">O0110A3A Treatment: Chemo - Oral (Admission)</p> <p style="padding-left: 100px;">O0110A10A Treatment: Chemo - Other (Admission)</p> |
| -4007 | Consistency | Fatal | <p>(a) If O0110C1A=[0], then all active items from O0110C2A through O0110C4A must equal [0].</p> <p>(b) If O0110C1A=[1], then at least one active item from O0110C2A through O0110C4A must equal [1], and all remaining item must equal [0,1].</p> <p>(c) If O0110C1A=[-], then all active items from O0110C2A through O0110C4A must equal [-].</p> <p>(d) If O0110C1A=[^], then all active items from O0110C2A through O0110C4A must equal [^].</p> <p>Items: O0110C1A Therapies: Oxygen Therapy (Admission)</p> <p style="padding-left: 100px;">O0110C2A Therapies: Oxygen - Continuous (Admission)</p> <p style="padding-left: 100px;">O0110C3A Therapies: Oxygen - Intermittent (Admission)</p> <p style="padding-left: 100px;">O0110C4A Therapies: Oxygen - High-concentration (Admission)</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| -4008 | Consistency | Fatal | <p>(a) If O0110D1A=[0], then the following items O0110D2A and O0110D3A must equal [0].</p> <p>(b) If O0110D1A=[1], then at least one of the following items O0110D2A and O0110D3A must equal [1], and the remaining item must equal [0,1].</p> <p>(c) If O0110D1A=[-], then the following items O0110D2A and O0110D3A must equal [-].</p> <p>Items: O0110D1A Therapies: Suctioning (Admission) O0110D2A Therapies: Suctioning - Scheduled (Admission) O0110D3A Therapies: Suctioning - As Needed (Admission)</p> |
| -4009 | Consistency | Fatal | <p>(a) If O0110G1A=[0], then O0110G2A and O0110G3A must equal [0].</p> <p>(b) If O0110G1A=[1], then at least one of the following items must equal [1], and the remaining item must equal [0,1]: O0110G2A, O0110G3A.</p> <p>(c) If O0110G1A=[-], then O0110G2A and O0110G3A must equal [-].</p> <p>(d) If O0110G1A=[^], then O0110G2A and O0110G3A must equal [^].</p> <p>Items: O0110G1A Therapies: Non-Invas Mechanical Ventilator (Admis) O0110G2A Therapies: BiPAP (Admission) O0110G3A Therapies: CPAP (Admission)</p> |
| -4010 | Consistency | Fatal | <p>(a) If O0110H1A=[0], then all active items from O0110H2A through O0110H10A must equal [0].</p> <p>(b) If O0110H1A=[1], then at least one active item from O0110H2A through O0110H10A must equal [1], and the remaining items must equal [0,1].</p> <p>(c) If O0110H1A=[-], then all active items from O0110H2A through O0110H10A must equal [-].</p> <p>(d) If O0110H1A=[^], then all active items from O0110H2A through O0110H10A must equal [^].</p> <p>Items: O0110H1A Other: IV Medications (Admission) O0110H2A Other: IV - Vasoactive medications (Admission) O0110H3A Other: IV - Antibiotics (Admission) O0110H4A Other: IV - Anticoagulation (Admission) O0110H10A Other: IV - Other (Admission)</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| -4011 | Consistency | Fatal | <p>(a) if O0110J1A=[0], then O0110J2A and O0110J3A must equal [0].</p> <p>(b) If O0110J1A=[1], then at least one of the following items must equal [1], and the remaining item must equal [0,1]: O0110J2A, O0110J3A.</p> <p>(c) If O0110J1A=[-], then O0110J2A and O0110J3A must equal [-].</p> <p>(d) If O0110J1A=[^], then O0110J2A and O0110J3A must equal [^].</p> <p>Items: O0110J1A Other: Dialysis (Admission) O0110J2A Other: Hemodialysis (Admission) O0110J3A Other: Peritoneal dialysis (Admission)</p> |
| -4012 | Consistency | Fatal | <p>(a) If O0110O1A=[0], then all active items from O0110O2A through O0110O4A must equal [0].</p> <p>(b) If O0110O1A=[1], then at least one active item from O0110O2A through O0110O4A must equal [1], and all remaining items must equal [0,1].</p> <p>(c) If O0110O1A=[-], then all active items from O0110O2A through O0110O4A must equal [-].</p> <p>(d) If O0110O1A=[^], then all active items from O0110O2A through O0110O4A must equal [^].</p> <p>Items: O0110O1A Other: IV Access (Admission) O0110O2A Other: IV Access - Peripheral (Admission) O0110O3A Other: IV Access - Midline (Admission) O0110O4A Other: IV Access - Central (Admission)</p> |
| -4013 | Consistency | Fatal | <p>(a) If O0110A1C=[0], then all active items from O0110A2C through O0110A10C must equal [0].</p> <p>(b) If O0110A1C=[1], then at least one active item from O0110A2C through O0110A10C must equal [1], and remaining items must equal [0,1].</p> <p>(c) If O0110A1C=[-], then all active items from O0110A2C through O0110A10C must equal [-].</p> <p>(d) If O0110A1C=[^], then all active items from O0110A2C through O0110A10C must equal [^].</p> <p>Items: O0110A1C Treatment: Chemotherapy (Discharge) O0110A2C Treatment: Chemo - IV (Discharge) O0110A3C Treatment: Chemo - Oral (Discharge)</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| -4014 | Consistency | Fatal | <p>Items: O0110A10C Treatment: Chemo - Other (Discharge)</p> <p>(a) If O0110C1C=[0], then all active items from O0110C2C through O0110C4C must equal [0].</p> <p>(b) If O0110C1C=[1], then at least one active item from O0110C2C through O0110C4C must equal [1], and all remaining item must equal [0,1].</p> <p>(c) If O0110C1C=[-], then all active items from O0110C2C through O0110C4C must equal [-].</p> <p>(d) If O0110C1C=[^], then all active items from O0110C2C through O0110C4C must equal [^].</p> |
| | | | <p>Items: O0110C1C Therapies: Oxygen Therapy (Discharge)</p> <p>O0110C2C Therapies: Oxygen - Continuous (Discharge)</p> <p>O0110C3C Therapies: Oxygen - Intermittent (Discharge)</p> <p>O0110C4C Therapies: Oxygen - High-concentration (Discharge)</p> |
| | | | <p>(a) If O0110D1C=[0], then the following items O0110D2C and O0110D3C must equal [0].</p> <p>(b) If O0110D1C=[1], then at least one of the following items O0110D2C and O0110D3C must equal [1], and the remaining item must equal [0,1].</p> <p>(c) If O0110D1C=[-], then the following items O0110D2C and O0110D3C must equal [-].</p> |
| | | | <p>Items: O0110D1C Therapies: Suctioning (Discharge)</p> <p>O0110D2C Therapies: Suctioning - Scheduled (Discharge)</p> <p>O0110D3C Therapies: Suctioning - As Needed (Discharge)</p> |
| -4015 | Consistency | Fatal | <p>(a) If O0110G1C=[0], then O0110G2C and O0110G3C must equal [0].</p> <p>(b) If O0110G1C=[1], then at least one of the following items must equal [1], and the remaining item must equal [0,1]: O0110G2C, O0110G3C.</p> <p>(c) If O0110G1C=[-], then O0110G2C and O0110G3C must equal [-].</p> <p>(d) If O0110G1C=[^], then O0110G2C and O0110G3C must equal [^].</p> |
| | | | <p>Items: O0110G1C Therapies: Non-Invas Mechanical Ventilator (Disch)</p> <p>O0110G2C Therapies: BiPAP (Discharge)</p> <p>O0110G3C Therapies: CPAP (Discharge)</p> |
| | | | |
| | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| -4017 | Consistency | Fatal | (a) If O0110H1C=[0], then all active items from O0110H2C through O0110H10C must equal [0]. |
| | | | (b) If O0110H1C=[1], then at least one active item from O0110H2C through O0110H10C must equal [1], and the remaining items must equal [0,1]. |
| | | | (c) If O0110H1C=[-], then all active items from O0110H2C through O0110H10C must equal [-]. |
| | | | (d) If O0110H1C=[^], then all active items from O0110H2C through O0110H10C must equal [^]. |
| | | | <div><div>Items:</div><div><div>O0110H1C</div><div>O0110H2C</div><div>O0110H3C</div><div>O0110H4C</div><div>O0110H10C</div></div><div><div>Other: IV Medications (Discharge)</div><div>Other: IV - Vasoactive medications (Discharge)</div><div>Other: IV - Antibiotics (Discharge)</div><div>Other: IV - Anticoagulation (Discharge)</div><div>Other: IV - Other (Discharge)</div></div></div> |
| -4018 | Consistency | Fatal | (a) if O0110J1C=[0], then O0110J2C and O0110J3C must equal [0]. |
| | | | (b) If O0110J1C=[1], then at least one of the following items must equal [1], and the remaining item must equal [0,1]: O0110J2C, O0110J3C. |
| | | | (c) If O0110J1C=[-], then O0110J2C and O0110J3C must equal [-]. |
| | | | (d) If O0110J1C=[^], then O0110J2C and O0110J3C must equal [^]. |
| | | | <div><div>Items:</div><div><div>O0110J1C</div><div>O0110J2C</div><div>O0110J3C</div></div><div><div>Other: Dialysis (Discharge)</div><div>Other: Hemodialysis (Discharge)</div><div>Other: Peritoneal dialysis (Discharge)</div></div></div> |
| -4019 | Consistency | Fatal | (a) If O0110O1C=[0], then all active items from O0110O2C through O0110O4C must equal [0]. |
| | | | (b) If O0110O1C=[1], then at least one active item from O0110O2C through O0110O4C must equal [1], and all remaining items must equal [0,1]. |
| | | | (c) If O0110O1C=[-], then all active items from O0110O2C through O0110O4C must equal [-]. |
| | | | (d) If O0110O1C=[^], then all active items from O0110O2C through O0110O4C must equal [^]. |
| | | | <div><div>Items:</div><div><div>O0110O1C</div><div>O0110O2C</div></div><div><div>Other: IV Access (Discharge)</div><div>Other: IV Access - Peripheral (Discharge)</div></div></div> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|---------------|----------|---|
| | | | Items: O0110O3C Other: IV Access - Midline (Discharge) O0110O4C Other: IV Access - Central (Discharge) |
| -4020 | None of above | Fatal | <p>(a) If O0110Z1A=[1], then the following items, if active, must equal [0]: O0110A1A, O0110B1A, O0110C1A, O0110D1A, O0110E1A, O0110F1A, O0110G1A, O0110H1A, O0110I1A, O0110J1A, O0110O1A.</p> <p>(b) if O0110Z1A=[0], then at least one item of the following active items must equal [1], and the remaining active items must equal [0,1]: O0110A1A, O0110B1A, O0110C1A, O0110D1A, O0110E1A, O0110F1A, O0110G1A, O0110H1A, O0110I1A, O0110J1A, O0110O1A.</p> <p>(c) If O0110Z1A=[-], then the following items, if active, must equal [-]: O0110A1A, O0110B1A, O0110C1A, O0110D1A, O0110E1A, O0110F1A, O0110G1A, O0110H1A, O0110I1A, O0110J1A, O0110O1A.</p> Items: O0110A1A Treatment: Chemotherapy (Admission) O0110B1A Treatment: Radiation (Admission) O0110C1A Therapies: Oxygen Therapy (Admission) O0110D1A Therapies: Suctioning (Admission) O0110E1A Therapies: Tracheostomy Care (Admission) O0110G1A Therapies: Non-Invas Mechanical Ventilator (Admis) O0110H1A Other: IV Medications (Admission) O0110I1A Other: Transfusions (Admission) O0110J1A Other: Dialysis (Admission) O0110O1A Other: IV Access (Admission) O0110Z1A Other: None of the above (Admission) |
| -4021 | None of above | Fatal | <p>(a) If O0110Z1C=[1], then the following items, if active, must equal [0]: O0110A1C, O0110B1C, O0110C1C, O0110D1C, O0110E1C, O0110F1C, O0110G1C, O0110H1C, O0110I1C, O0110J1C, O0110O1C.</p> <p>(b) if O0110Z1C=[0], then at least one of the following active items must equal [1], and the remaining active items must equal [0,1]: O0110A1C, O0110B1C, O0110C1C, O0110D1C, O0110E1C, O0110F1C, O0110G1C, O0110H1C, O0110I1C, O0110J1C, O0110O1C.</p> <p>(c) If O0110Z1C=[-], then the following items, if active, must equal [-]: O0110A1C, O0110B1C, O0110C1C, O0110D1C, O0110E1C, O0110F1C, O0110G1C, O0110H1C, O0110I1C, O0110J1C, O0110O1C.</p> Items: O0110A1C Treatment: Chemotherapy (Discharge) O0110B1C Treatment: Radiation (Discharge) O0110C1C Therapies: Oxygen Therapy (Discharge) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|---------------|----------|--|
| | | | Items: O0110D1C Therapies: Suctioning (Discharge) O0110E1C Therapies: Tracheostomy Care (Discharge) O0110F1C Therapies: Invasive Mechanical Ventilator (Disch) O0110G1C Therapies: Non-Invas Mechanical Ventilator (Disch) O0110H1C Other: IV Medications (Discharge) O0110I1C Other: Transfusions (Discharge) O0110J1C Other: Dialysis (Discharge) O0110O1C Other: IV Access (Discharge) O0110Z1C Other: None of the above (Discharge) |
| -4022 | None of above | Fatal | <p>(a) If O0110Z1B=[1], then the following items, if active, must equal [0]: O0110A1B, O0110B1B, O0110C1B, O0110D1B, O0110E1B, O0110F1B, O0110G1B, O0110H1B, O0110I1B, O0110J1B, O0110K1B, O0110M1B, O0110O1B.</p> <p>(b) if O0110Z1B=[0], then at least one of the following active items must equal [1], and the remaining active items must equal [0,1]: O0110A1B, O0110B1B, O0110C1B, O0110D1B, O0110E1B, O0110F1B, O0110G1B, O0110H1B, O0110I1B, O0110J1B, O0110K1B, O0110M1B, O0110O1B.</p> <p>(c) If O0110Z1B=[-], then the following items, if active, must equal [-]: O0110A1B, O0110B1B, O0110C1B, O0110D1B, O0110E1B, O0110F1B, O0110G1B, O0110H1B, O0110I1B, O0110J1B, O0110K1B, O0110M1B, O0110O1B.</p> |
| | | | Items: O0110A1B Treatment: Chemotherapy (14 days) O0110B1B Treatment: Radiation (14 days) O0110C1B Therapies: Oxygen Therapy (14 days) O0110D1B Therapies: Suctioning (14 days) O0110E1B Therapies: Tracheostomy Care (14 days) O0110F1B Therapies: Invasive Mechanical Ventilator (14day) O0110G1B Therapies: Non-Invas Mechanical Ventilator (14day) O0110H1B Other: IV Medications (14 days) O0110I1B Other: Transfusions (14 days) O0110J1B Other: Dialysis (14 days) O0110K1B Other: Hospice care (14 days) O0110M1B Other: Isolation - Infectious Disease (14 days) O0110O1B Other: IV Access (14 days) O0110Z1B Other: None of the above (14 days) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---------------|---|---|---------------|--------|--|--|---------|---|--|---------|--|--|---------|---|--|---------|---|--|---------|---|--|---------|--|--|---------|---|--|---------|--|--|---------|---|--|-------|----------------------|
| -4023 | None of above | Fatal | <p>a) If Q0110Z=[0], then at least one active item from Q0110A through Q0110E must equal [1].</p> <p>b) If Q0110Z=[1], then all active items from Q0110A through Q0110E must equal [0].</p> <table><tr><td>Items:</td><td>Q0110A</td><td>Participants: Resident</td></tr><tr><td></td><td>Q0110B</td><td>Participants: Family</td></tr><tr><td></td><td>Q0110C</td><td>Participants: Significant other</td></tr><tr><td></td><td>Q0110D</td><td>Participants: Legal guardian</td></tr><tr><td></td><td>Q0110E</td><td>Participants: Other legal representative</td></tr><tr><td></td><td>Q0110Z</td><td>Participants: None of the Above</td></tr></table> | Items: | Q0110A | Participants: Resident | | Q0110B | Participants: Family | | Q0110C | Participants: Significant other | | Q0110D | Participants: Legal guardian | | Q0110E | Participants: Other legal representative | | Q0110Z | Participants: None of the Above | | | | | | | | | | | | | | | |
| Items: | Q0110A | Participants: Resident | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Q0110B | Participants: Family | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Q0110C | Participants: Significant other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Q0110D | Participants: Legal guardian | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Q0110E | Participants: Other legal representative | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Q0110Z | Participants: None of the Above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -4024 | Skip pattern | Fatal | <p>(a) If A0310E=[1], then the following items must not equal [^]: Q0310A, Q0310B.</p> <p>(b) If A0310E=[0], then the following items must equal [^]: Q0310A, Q0310B.</p> <table><tr><td>Items:</td><td>A0310E</td><td>First assessment since most recent entry</td></tr><tr><td></td><td>Q0310A</td><td>Resident's Overall Goal</td></tr><tr><td></td><td>Q0310B</td><td>Q0310A info source</td></tr></table> | Items: | A0310E | First assessment since most recent entry | | Q0310A | Resident's Overall Goal | | Q0310B | Q0310A info source | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | A0310E | First assessment since most recent entry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Q0310A | Resident's Overall Goal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Q0310B | Q0310A info source | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -4025 | Skip pattern | Fatal | <p>(a) If Q0610A=[0], then Q0620 must not equal [^].</p> <p>(b) If Q0610A=[1], then Q0620 must equal [^].</p> <table><tr><td>Items:</td><td>Q0610A</td><td>Referral</td></tr><tr><td></td><td>Q0620</td><td>Reason referral not made</td></tr></table> | Items: | Q0610A | Referral | | Q0620 | Reason referral not made | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | Q0610A | Referral | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Q0620 | Reason referral not made | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -4026 | Skip pattern | Fatal | <p>(a) If D0100=[1], then the following items must not be equal to [^]: D0150A1, D0150B1.</p> <p>(b) If D0100=[0], then the following items must be equal to [^]: D0150A1, D0150B1, D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1, D0160.</p> <p>(c) If D0100=[-], then the following items must be equal to [-]: D0150A1, D0150B1,</p> <table><tr><td>Items:</td><td>D0100</td><td>PHQ: should resident mood interview be conducted</td></tr><tr><td></td><td>D0150A1</td><td>Mood: Little interest/pleasure doing things: Pres</td></tr><tr><td></td><td>D0150B1</td><td>Mood: Feeling down, depressed, or hopeless: Pres</td></tr><tr><td></td><td>D0150C1</td><td>Mood: Trouble falling or staying asleep: Pres</td></tr><tr><td></td><td>D0150D1</td><td>Mood: Feeling tired or having little energy: Pres</td></tr><tr><td></td><td>D0150E1</td><td>Mood: Poor appetite or overeating: Pres</td></tr><tr><td></td><td>D0150F1</td><td>Mood: Feeling bad about yourself: Pres</td></tr><tr><td></td><td>D0150G1</td><td>Mood: Trouble concentrating on things: Pres</td></tr><tr><td></td><td>D0150H1</td><td>Mood: Moving or speaking so slowly: Pres</td></tr><tr><td></td><td>D0150I1</td><td>Mood: Thoughts of better off dead: Pres</td></tr><tr><td></td><td>D0160</td><td>Total severity score</td></tr></table> | Items: | D0100 | PHQ: should resident mood interview be conducted | | D0150A1 | Mood: Little interest/pleasure doing things: Pres | | D0150B1 | Mood: Feeling down, depressed, or hopeless: Pres | | D0150C1 | Mood: Trouble falling or staying asleep: Pres | | D0150D1 | Mood: Feeling tired or having little energy: Pres | | D0150E1 | Mood: Poor appetite or overeating: Pres | | D0150F1 | Mood: Feeling bad about yourself: Pres | | D0150G1 | Mood: Trouble concentrating on things: Pres | | D0150H1 | Mood: Moving or speaking so slowly: Pres | | D0150I1 | Mood: Thoughts of better off dead: Pres | | D0160 | Total severity score |
| Items: | D0100 | PHQ: should resident mood interview be conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150A1 | Mood: Little interest/pleasure doing things: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150B1 | Mood: Feeling down, depressed, or hopeless: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150C1 | Mood: Trouble falling or staying asleep: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150D1 | Mood: Feeling tired or having little energy: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150E1 | Mood: Poor appetite or overeating: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150F1 | Mood: Feeling bad about yourself: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150G1 | Mood: Trouble concentrating on things: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150H1 | Mood: Moving or speaking so slowly: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150I1 | Mood: Thoughts of better off dead: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0160 | Total severity score | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| -4027 | Consistency | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150A1 Mood: Little interest/pleasure doing things: Pres D0150A2 Mood: Little interest/pleasure doing things: Freq D0150B1 Mood: Feeling down, depressed, or hopeless: Pres D0150B2 Mood: Feeling down, depressed, or hopeless: Freq D0150C1 Mood: Trouble falling or staying asleep: Pres D0150D1 Mood: Feeling tired or having little energy: Pres D0150E1 Mood: Poor appetite or overeating: Pres D0150F1 Mood: Feeling bad about yourself: Pres D0150G1 Mood: Trouble concentrating on things: Pres D0150H1 Mood: Moving or speaking so slowly: Pres D0150I1 Mood: Thoughts of better off dead: Pres |
| -4028 | Consistency | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: B0100 Comatose D0100 PHQ: should resident mood interview be conducted D0150A1 Mood: Little interest/pleasure doing things: Pres D0150A2 Mood: Little interest/pleasure doing things: Freq D0150B1 Mood: Feeling down, depressed, or hopeless: Pres D0150B2 Mood: Feeling down, depressed, or hopeless: Freq D0150C2 Mood: Trouble falling or staying asleep: Freq D0150D2 Mood: Feeling tired or having little energy: Freq D0150E2 Mood: Poor appetite or overeating: Freq D0150F2 Mood: Feeling bad about yourself: Freq D0150G2 Mood: Trouble concentrating on things: Freq D0150H2 Mood: Moving or speaking so slowly: Freq D0150I2 Mood: Thoughts of better off dead: Freq D0160 Total severity score |
| -4029 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150A1 Mood: Little interest/pleasure doing things: Pres D0150A2 Mood: Little interest/pleasure doing things: Freq |
| -4030 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: D0150B1 Mood: Feeling down, depressed, or hopeless: Pres |
| | | | D0150B2 Mood: Feeling down, depressed, or hopeless: Freq |
| -4031 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150C1 Mood: Trouble falling or staying asleep: Pres |
| | | | D0150C2 Mood: Trouble falling or staying asleep: Freq |
| -4032 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150D1 Mood: Feeling tired or having little energy: Pres |
| | | | D0150D2 Mood: Feeling tired or having little energy: Freq |
| -4033 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150E1 Mood: Poor appetite or overeating: Pres |
| | | | D0150E2 Mood: Poor appetite or overeating: Freq |
| -4034 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150F1 Mood: Feeling bad about yourself: Pres |
| | | | D0150F2 Mood: Feeling bad about yourself: Freq |
| -4035 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150G1 Mood: Trouble concentrating on things: Pres |
| | | | D0150G2 Mood: Trouble concentrating on things: Freq |
| -4036 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150H1 Mood: Moving or speaking so slowly: Pres |
| | | | D0150H2 Mood: Moving or speaking so slowly: Freq |
| -4037 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: D0150I1 Mood: Thoughts of better off dead: Pres |
| | | | D0150I2 Mood: Thoughts of better off dead: Freq |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | |
|---------|---|----------|--|---------|--|---------|--|---------|---|---------|---|---------|--|
| -4039 | None of above | Fatal | <p>(a) If K0520Z1=[1], then the following items, if active, must equal [0]: K0520A1, K0520B1, K0520C1, K0520D1.</p> <p>(b) If K0520Z1=[0], then at least one of the following items, if active, must equal [1]: K0520A1, K0520B1, K0520C1, K0520D1.</p> <p>(c) If K0520Z1=[-], then at least one of the following items, if active, must equal [-], and all remaining active items must equal [0,-]: K0520A1, K0520B1, K0520C1,</p> <p>Items:</p> <table><tr><td>K0520A1</td><td>Nutritional Approaches (Admission): Parenteral</td></tr><tr><td>K0520B1</td><td>Nutritional Approaches (Admission): Feeding tube</td></tr><tr><td>K0520C1</td><td>Nutritional Approaches (Admission): Mech Alt Diet</td></tr><tr><td>K0520D1</td><td>Nutritional Approaches (Admission): Therapeutic</td></tr><tr><td>K0520Z1</td><td>Nutritional Approaches (Admission): None</td></tr></table> | K0520A1 | Nutritional Approaches (Admission): Parenteral | K0520B1 | Nutritional Approaches (Admission): Feeding tube | K0520C1 | Nutritional Approaches (Admission): Mech Alt Diet | K0520D1 | Nutritional Approaches (Admission): Therapeutic | K0520Z1 | Nutritional Approaches (Admission): None |
| K0520A1 | Nutritional Approaches (Admission): Parenteral | | | | | | | | | | | | |
| K0520B1 | Nutritional Approaches (Admission): Feeding tube | | | | | | | | | | | | |
| K0520C1 | Nutritional Approaches (Admission): Mech Alt Diet | | | | | | | | | | | | |
| K0520D1 | Nutritional Approaches (Admission): Therapeutic | | | | | | | | | | | | |
| K0520Z1 | Nutritional Approaches (Admission): None | | | | | | | | | | | | |
| -4040 | None of above | Fatal | <p>(a) If K0520Z4=[1], then the following items, if active, must equal [0]: K0520A4, K0520B4, K0520C4, K0520D4.</p> <p>(b) If K0520Z4=[0], then at least one of the following items, if active, must equal [1]: K0520A4, K0520B4, K0520C4, K0520D4.</p> <p>(c) If K0520Z4=[-], then at least one of the following items, if active, must equal [-], and all remaining active items must equal [0,-]: K0520A4, K0520B4, K0520C4,</p> <p>Items:</p> <table><tr><td>K0520A4</td><td>Nutritional Approaches (Discharge): Parenteral</td></tr><tr><td>K0520B4</td><td>Nutritional Approaches (Discharge): Feeding tube</td></tr><tr><td>K0520C4</td><td>Nutritional Approaches (Discharge): Mech Alt Diet</td></tr><tr><td>K0520D4</td><td>Nutritional Approaches (Discharge): Therapeutic</td></tr><tr><td>K0520Z4</td><td>Nutritional Approaches (Discharge): None</td></tr></table> | K0520A4 | Nutritional Approaches (Discharge): Parenteral | K0520B4 | Nutritional Approaches (Discharge): Feeding tube | K0520C4 | Nutritional Approaches (Discharge): Mech Alt Diet | K0520D4 | Nutritional Approaches (Discharge): Therapeutic | K0520Z4 | Nutritional Approaches (Discharge): None |
| K0520A4 | Nutritional Approaches (Discharge): Parenteral | | | | | | | | | | | | |
| K0520B4 | Nutritional Approaches (Discharge): Feeding tube | | | | | | | | | | | | |
| K0520C4 | Nutritional Approaches (Discharge): Mech Alt Diet | | | | | | | | | | | | |
| K0520D4 | Nutritional Approaches (Discharge): Therapeutic | | | | | | | | | | | | |
| K0520Z4 | Nutritional Approaches (Discharge): None | | | | | | | | | | | | |
| -4041 | None of above | Fatal | <p>(a) If K0520Z3=[1], then the following items, if active, must equal [0]: K0520A3, K0520B3, K0520C3, K0520D3.</p> <p>(b) If K0520Z3=[0], then at least one of the following items, if active, must equal [1]: K0520A3, K0520B3, K0520C3, K0520D3.</p> <p>(c) If K0520Z3=[-], then at least one of the following items, if active, must equal [-], and all remaining active items must equal [0,-]: K0520A3, K0520B3, K0520C3,</p> <p>Items:</p> <table><tr><td>K0520A3</td><td>Nutritional Approaches (7 days): Parenteral</td></tr><tr><td>K0520B3</td><td>Nutritional Approaches (7 days): Feeding tube</td></tr><tr><td>K0520C3</td><td>Nutritional Approaches (7-day): Mech Alt Diet</td></tr><tr><td>K0520D3</td><td>Nutritional Approaches (7-day): Therapeutic</td></tr><tr><td>K0520Z3</td><td>Nutritional Approaches (7-day): None</td></tr></table> | K0520A3 | Nutritional Approaches (7 days): Parenteral | K0520B3 | Nutritional Approaches (7 days): Feeding tube | K0520C3 | Nutritional Approaches (7-day): Mech Alt Diet | K0520D3 | Nutritional Approaches (7-day): Therapeutic | K0520Z3 | Nutritional Approaches (7-day): None |
| K0520A3 | Nutritional Approaches (7 days): Parenteral | | | | | | | | | | | | |
| K0520B3 | Nutritional Approaches (7 days): Feeding tube | | | | | | | | | | | | |
| K0520C3 | Nutritional Approaches (7-day): Mech Alt Diet | | | | | | | | | | | | |
| K0520D3 | Nutritional Approaches (7-day): Therapeutic | | | | | | | | | | | | |
| K0520Z3 | Nutritional Approaches (7-day): None | | | | | | | | | | | | |

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Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---------------|--|--|---------------|---------|--|--|---------|--|--|---------|---|--|---------|---|--|---------|--|--|---------|--|--|---------|---|--|---------|--|
| -4042 | None of above | Fatal | <p>(a) If K0520Z2=[1], then the following items, if active, must equal [0]: K0520A2, K0520B2.</p> <p>(b) If K0520Z2=[0], then at least one of the following items, if active, must equal [1]: K0520A2, K0520B2.</p> <p>(c) If K0520Z2=[-], then at least one of the following items, if active, must equal [-],</p> <table><tr><td>Items:</td><td>K0520A2</td><td>Nutritional Approaches (Non-res): Parenteral</td></tr><tr><td></td><td>K0520B2</td><td>Nutritional Approaches (Non-res): Feeding tube</td></tr><tr><td></td><td>K0520Z2</td><td>Nutritional Approaches (Non-res): None</td></tr></table> | Items: | K0520A2 | Nutritional Approaches (Non-res): Parenteral | | K0520B2 | Nutritional Approaches (Non-res): Feeding tube | | K0520Z2 | Nutritional Approaches (Non-res): None | | | | | | | | | | | | | | | |
| Items: | K0520A2 | Nutritional Approaches (Non-res): Parenteral | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0520B2 | Nutritional Approaches (Non-res): Feeding tube | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0520Z2 | Nutritional Approaches (Non-res): None | | | | | | | | | | | | | | | | | | | | | | | | | |
| -4043 | Skip pattern | Fatal | <p>(a) If K0520A2=[1] OR K0520B2=[1] OR K0520A3=[1] OR K0520B3=[1] then K0710A2 through K0710B3 must not equal [^].</p> <p>(b) If K0520A2=[0,-,^] AND K0520B2=[0,-,^] AND K0520A3=[0,-] AND K0520B3=[0,-] then K0710A2 through K0710B3 must equal [^].</p> <table><tr><td>Items:</td><td>K0520A2</td><td>Nutritional Approaches (Non-res): Parenteral</td></tr><tr><td></td><td>K0520A3</td><td>Nutritional Approaches (7 days): Parenteral</td></tr><tr><td></td><td>K0520B2</td><td>Nutritional Approaches (Non-res): Feeding tube</td></tr><tr><td></td><td>K0520B3</td><td>Nutritional Approaches (7 days): Feeding tube</td></tr><tr><td></td><td>K0710A2</td><td>Prop calories parenteral/tube feed: while resident</td></tr><tr><td></td><td>K0710A3</td><td>Prop calories parenteral/tube feed: 7 days</td></tr><tr><td></td><td>K0710B2</td><td>Avg fluid intake per day IV/ tube: while resident</td></tr><tr><td></td><td>K0710B3</td><td>Avg fluid intake per day IV/tube: 7 days</td></tr></table> | Items: | K0520A2 | Nutritional Approaches (Non-res): Parenteral | | K0520A3 | Nutritional Approaches (7 days): Parenteral | | K0520B2 | Nutritional Approaches (Non-res): Feeding tube | | K0520B3 | Nutritional Approaches (7 days): Feeding tube | | K0710A2 | Prop calories parenteral/tube feed: while resident | | K0710A3 | Prop calories parenteral/tube feed: 7 days | | K0710B2 | Avg fluid intake per day IV/ tube: while resident | | K0710B3 | Avg fluid intake per day IV/tube: 7 days |
| Items: | K0520A2 | Nutritional Approaches (Non-res): Parenteral | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0520A3 | Nutritional Approaches (7 days): Parenteral | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0520B2 | Nutritional Approaches (Non-res): Feeding tube | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0520B3 | Nutritional Approaches (7 days): Feeding tube | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0710A2 | Prop calories parenteral/tube feed: while resident | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0710A3 | Prop calories parenteral/tube feed: 7 days | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0710B2 | Avg fluid intake per day IV/ tube: while resident | | | | | | | | | | | | | | | | | | | | | | | | | |
| | K0710B3 | Avg fluid intake per day IV/tube: 7 days | | | | | | | | | | | | | | | | | | | | | | | | | |
| -4045 | Consistency | Warning | <p>If A0200=[2] and A0310F=[10] and A0310H=[0] then the following warning message will apply: For Swing Bed discharge assessments where the return is NOT anticipated, then A0310H (SNF PPS Part A Discharge (End of Stay) Assessment) should usually be</p> <table><tr><td>Items:</td><td>A0200</td><td>Type of provider</td></tr><tr><td></td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>A0310H</td><td>SNF PPS Part A Discharge (End of Stay) Assessment</td></tr></table> | Items: | A0200 | Type of provider | | A0310F | Entry/discharge reporting | | A0310H | SNF PPS Part A Discharge (End of Stay) Assessment | | | | | | | | | | | | | | | |
| Items: | A0200 | Type of provider | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | | | | |
| | A0310H | SNF PPS Part A Discharge (End of Stay) Assessment | | | | | | | | | | | | | | | | | | | | | | | | | |
| -4046 | None of above | Fatal | <p>If GG0120A through GG0120D and GG0110Z are all active, then the following rules apply:</p> <p>a) If GG0120Z=[0], then at least one of the items GG0120A through GG0120D must equal [1].</p> <p>b) If GG0120Z=[1], then all items from GG0120A through GG0120D must equal [0].</p> <p>c) If GG0120Z=[-], then at least one item from GG0120A through GG0120D must equal</p> <table><tr><td>Items:</td><td>GG0120A</td><td>Mobility Device - Cane/Crutch</td></tr></table> | Items: | GG0120A | Mobility Device - Cane/Crutch | | | | | | | | | | | | | | | | | | | | | |
| Items: | GG0120A | Mobility Device - Cane/Crutch | | | | | | | | | | | | | | | | | | | | | | | | | |

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Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: GG0120B Mobility Device - Walker GG0120C Mobility Device - Wheelchair (manual or electric) GG0120D Mobility Device - Limb prosthesis GG0120Z Mobility Device - None of the Above |
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| -4047 | Skip pattern | Fatal | <p>(a) If A0310A=[02,03,04,05,06,99] AND A0310B=[99], then the following items, when active, must be equal to [^]: GG0130A1, GG0130B1, GG0130C1, GG0130E1, GG0130F1, GG0130G1, GG0130H1, GG0130I1.</p> <p>(b) If A0310A=[01] OR A0310B=[01], then the following items, when active, must not be equal to [^]: GG0130A1, GG0130B1, GG0130C1, GG0130E1, GG0130F1, GG0130G1, GG0130H1, GG0130I1.</p> |
| | | | Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS GG0130A1 Eating (Start of Stay Perf) GG0130B1 Oral hygiene (Start of Stay Perf) GG0130C1 Toileting hygiene (Start of Stay Perf) GG0130E1 Shower/bathe self (Start of Stay Perf) GG0130F1 Upper body dressing (Start of Stay Perf) GG0130G1 Lower body dressing (Start of Stay Perf) GG0130H1 Put on/take off footwear (Start of Stay Perf) GG0130I1 Personal Hygiene (Start of Stay Perf) |
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| -4049 | Skip pattern | Fatal | <p>(a) If A0310A=[02,03,04,05,06,99] AND A0310B=[99], then the following items, when active, must be equal to [^]: GG0170A1, GG0170B1, GG0170C1, GG0170D1, GG0170E1, GG0170F1, GG0170FF1, GG0170G1, GG0170I1, GG0170M1, GG0170P1, GG0170Q1.</p> <p>(b) If A0310A=[01] OR A0310B=[01], then the following items, when active, must not be equal to [^]: GG0170A1, GG0170B1, GG0170C1, GG0170D1, GG0170E1, GG0170F1,</p> |
| | | | Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS GG0170A1 Roll left and right (Start of Stay Perf) GG0170B1 Sit to lying (Start of Stay Perf) GG0170C1 Lying to sitting on bed side (Start of Stay Perf) GG0170D1 Sit to stand (Start of Stay Perf) GG0170E1 Chair/bed-to-chair transfer (Start of Stay Perf) GG0170F1 Toilet transfer (Start of Stay Perf) GG0170FF1 Tub/Showr Transfer (Start of Stay Perf) |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: GG0170G1 Car transfer (Start of Stay Perf) GG0170I1 Walk 10 feet (Start of Stay Perf) GG0170M1 1 step (curb) (Start of Stay Perf) GG0170P1 Picking up object (Start of Stay Perf) GG0170Q1 Use wheelchair and/or scooter (Start of Stay Perf) |
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| -4053 | Skip pattern | Fatal | <p>(a) If (A0310A=[02,03,04,05,06] AND A0310B=[01]) OR (A0310A=[01,99] AND A0310B=[01,99]), then the following items, when active, must be equal to [^]: GG0130A5, GG0130B5, GG0130C5, GG0130E5, GG0130F5, GG0130G5, GG0130H5, GG0130I5.</p> <p>(b) If (A0310A=[02,03,04,05,06] AND A0310B=[99]) OR A0310B=[08], then the following items, when active, must not be equal to [^]: GG0130A5, GG0130B5, GG0130C5, GG0130E5, GG0130F5, GG0130G5, GG0130H5, GG0130I5.</p> |
| | | | Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS GG0130A5 Eating (Interim Perf) GG0130B5 Oral hygiene (Interim Perf) GG0130C5 Toileting hygiene (Interim Perf) GG0130E5 Shower/bathe self (Interim Perf) GG0130F5 Upper body dressing (Interim Perf) GG0130G5 Lower body dressing (Interim Perf) GG0130H5 Put on/take off footwear (Interim Perf) GG0130I5 Personal Hygiene (Interim Perf) |
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| -4054 | Skip pattern | Fatal | <p>(a) If (A0310A=[02,03,04,05,06] AND A0310B=[01]) OR (A0310A=[01,99] AND A0310B=[01,99]), then the following items, when active, must be equal to [^]: GG0170A5, GG0170B5, GG0170C5, GG0170D5, GG0170E5, GG0170F5, GG0170FF5, GG0170I5, GG0170Q5.</p> <p>(b) If (A0310A=[02,03,04,05,06] AND A0310B=[99]) OR A0310B=[08], then the following items, when active, must not be equal to [^]: GG0170A5, GG0170B5, GG0170C5, GG0170D5, GG0170E5, GG0170F5, GG0170FF5, GG0170I5, GG0170Q5.</p> |
| | | | Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS GG0170A5 Roll left and right (Interim Perf) GG0170B5 Sit to lying (Interim Perf) GG0170C5 Lying to sitting on bed side (Interim Perf) GG0170D5 Sit to stand (Interim Perf) GG0170E5 Chair/bed-to-chair transfer (Interim Perf) |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: GG0170F5 Toilet transfer (Interim Perf) GG0170FF5 Tub/Showr Transfer (Interim Perf) GG0170I5 Walk 10 feet (Interim Perf) GG0170Q5 Use wheelchair and/or scooter (Interim Perf) |
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| -4055 | Consistency | Fatal | <p>a) If A2300 (assessment reference date) minus A1600 (entry date) is greater than or equal to 7 days, then the following items in Column 2 must be equal to [^]: K0520A2, K0520B2, K0520Z2.</p> <p>b) If A2300 (assessment reference date) minus A1600 (entry date) is less than or equal to 6 days, then the following items in Column 2 must not equal [^]: K0520A2, K0520B2 and K0520Z2.</p> |
| | | | Items: A1600 Entry date (date of admission/reentry in facility) A2300 Assessment reference date K0520A2 Nutritional Approaches (Non-res): Parenteral K0520B2 Nutritional Approaches (Non-res): Feeding tube K0520Z2 Nutritional Approaches (Non-res): None |
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| -4056 | Skip pattern | Fatal | <p>a) If GG0170Q5=[0,^], then the following items must be equal to [^]: GG0170R5, GG0170RR5, GG0170S5, GG0170SS5.</p> <p>b) If GG0170Q5=[1], then the following items must not be equal to [^]: GG0170R5, GG0170RR5, GG0170S5, GG0170SS5.</p> <p>c) If GG0170Q5=[-], then the following items must be equal to [-]: GG0170R5, GG0170RR5, GG0170S5, GG0170SS5.</p> |
| | | | Items: GG0170Q5 Use wheelchair and/or scooter (Interim Perf) GG0170R5 Wheel 50 feet with two turns (Interim Perf) GG0170RR5 Type of wheelchair or scooter (Interim Perf) GG0170S5 Wheel 150 feet (Interim Perf) GG0170SS5 Type of wheelchair or scooter (Interim Perf) |
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| -4059 | Skip pattern | Fatal | <p>D0700 skip patterns:</p> <p>(a) If A0310A=[99] AND A0310B=[99] AND A0310F=[10,11] and A0310G=[1] and B0100=[0] then if D0700 is active, it must not equal [^].</p> <p>(b) If A0310A=[99] AND A0310B=[99] AND A0310F=[10,11] and A0310G=[2] then if D0700 is active, it must equal [^].</p> |
| | | | Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310F Entry/discharge reporting |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: A0310G Planned/unplanned discharge B0100 Comatose D0700 Social Isolation |
| -4060 | Skip pattern | Fatal | K0520 Column 1 skip patterns: (a) If A0310B=[01], then the following items, if active, must not equal [^]: K0520A1, K0520B1, K0520C1, K0520D1 and K0520Z1. (b) If A0310B=[99], then the following items, if active, must equal [^]: K0520A1, K0520B1, K0520C1, K0520D1 and K0520Z1. Items: A0310B Type of assessment: PPS K0520A1 Nutritional Approaches (Admission): Parenteral K0520B1 Nutritional Approaches (Admission): Feeding tube K0520C1 Nutritional Approaches (Admission): Mech Alt Diet K0520D1 Nutritional Approaches (Admission): Therapeutic K0520Z1 Nutritional Approaches (Admission): None |
| -4061 | Skip pattern | Fatal | K0520 Column 4 skip patterns: (a) If A0310H=[1], then the following items, if active, must not equal [^]: K0520A4, K0520B4, K0520C4, K0520D4 and K0520Z4. (b) If A0310H=[0], then the following items, if active, must equal [^]: K0520A4, K0520B4, K0520C4, K0520D4 and K0520Z4. Items: A0310H SNF PPS Part A Discharge (End of Stay) Assessment K0520A4 Nutritional Approaches (Discharge): Parenteral K0520B4 Nutritional Approaches (Discharge): Feeding tube K0520C4 Nutritional Approaches (Discharge): Mech Alt Diet K0520D4 Nutritional Approaches (Discharge): Therapeutic K0520Z4 Nutritional Approaches (Discharge): None |
| -4062 | Skip pattern | Fatal | O0110 Column 1 skip patterns: (a) If A0310B=[01], then the following items, if active, must not equal [^]: O0110A1A, O0110B1A, O0110C1A, O0110D1A, O0110E1A, O0110F1A, O0110G1A, O0110H1A, O0110I1A, O0110J1A, O0110O1A, O0110Z1A. (b) If A0310B=[99], then the following items, if active, must equal [^]: O0110A1A, O0110B1A, O0110C1A, O0110D1A, O0110E1A, O0110F1A, O0110G1A, O0110H1A, O0110I1A, O0110J1A, O0110O1A, O0110Z1A. Items: A0310B Type of assessment: PPS O0110A1A Treatment: Chemotherapy (Admission) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| | | | Items: O0110B1A Treatment: Radiation (Admission) O0110C1A Therapies: Oxygen Therapy (Admission) O0110D1A Therapies: Suctioning (Admission) O0110E1A Therapies: Tracheostomy Care (Admission) O0110F1A Therapies: Invasive Mechanical Ventilator (Admis) O0110G1A Therapies: Non-Invas Mechanical Ventilator (Admis) O0110H1A Other: IV Medications (Admission) O0110I1A Other: Transfusions (Admission) O0110J1A Other: Dialysis (Admission) O0110O1A Other: IV Access (Admission) O0110Z1A Other: None of the above (Admission) |
| -4063 | Skip pattern | Fatal | O0110 Column 3 skip patterns: (a) If A0310H=[1], then the following items, if active, must not equal [^]: O0110A1C, O0110B1C, O0110C1C, O0110D1C, O0110E1C, O0110F1C, O0110G1C, O0110H1C, O0110I1C, O0110J1C, O0110O1C, O0110Z1C. (b) If A0310H=[0], then the following items, if active, must equal [^]: O0110A1C, O0110B1C, O0110C1C, O0110D1C, O0110E1C, O0110F1C, O0110G1C, O0110H1C, O0110I1C, O0110J1C, O0110O1C, O0110Z1C. Items: A0310H SNF PPS Part A Discharge (End of Stay) Assessment O0110A1C Treatment: Chemotherapy (Discharge) O0110B1C Treatment: Radiation (Discharge) O0110C1C Therapies: Oxygen Therapy (Discharge) O0110D1C Therapies: Suctioning (Discharge) O0110E1C Therapies: Tracheostomy Care (Discharge) O0110F1C Therapies: Invasive Mechanical Ventilator (Disch) O0110G1C Therapies: Non-Invas Mechanical Ventilator (Disch) O0110H1C Other: IV Medications (Discharge) O0110I1C Other: Transfusions (Discharge) O0110J1C Other: Dialysis (Discharge) O0110O1C Other: IV Access (Discharge) O0110Z1C Other: None of the above (Discharge) |
| -4064 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** Items: A0200 Type of provider A0310A Type of assessment: OBRA |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| | | | Items: A0310B Type of assessment: PPS A0310F Entry/discharge reporting A0310G Planned/unplanned discharge A0310H SNF PPS Part A Discharge (End of Stay) Assessment |
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| -4065 | Consistency | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: A0310A Type of assessment: OBRA A0310F Entry/discharge reporting A0310G1 Interrupted Stay A0900 Birthdate A1600 Entry date (date of admission/reentry in facility) A1700 Type of entry A2000 Discharge date A2200 Previous asmt reference date for signif correction A2300 Assessment reference date A2400B Start date of most recent Medicare stay A2400C End date of most recent Medicare stay O0250B Date influenza vaccine received. V0100C Prior assessment reference date V0200B2 CAA-Assessment process signature date V0200C2 CAA-Care planning signature date X1100E Correction: attestation date Z0500B Date RN signed assessment as complete |
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| -4066 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS O0400D2 Respiratory therapy: number of days |
| | | | |
| | | | |
| -4067 | Skip pattern | Fatal | ***THIS EDIT WAS DELETED IN V3.10.0*** |
| | | | Items: A0200 Type of provider A0310A Type of assessment: OBRA A0310B Type of assessment: PPS |
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Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -4068 | Skip pattern | Fatal | <p>(a) If N0415K1=[0], then N0415K2 must equal [^].</p> <p>(b) If N0415K1=[1], then N0415K2 must not equal [^].</p> <p>(c) If N0415K1=[-], then N0415K2 must equal [-].</p> <p>Items: N0415K1 High-Risk Drug (Is Taking): Anticonvulsant N0415K2 High-Risk Drug (Indication): Anticonvulsant</p> |
| -4069 | Skip pattern | Fatal | <p>(a) If GG0170Q1=[0,^], then the following items, if active, must be equal to [^]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1.</p> <p>(b) If GG0170Q1=[1], then the following items, if active, must not be equal to [^]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1.</p> <p>(c) If GG0170Q1=[-], then the following items, if active, must be equal to [-]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1.</p> <p>Items: GG0170Q1 Use wheelchair and/or scooter (Start of Stay Perf) GG0170R1 Wheel 50 feet with two turns (Start of Stay Perf) GG0170RR1 Type of wheelchair or scooter (Start of Stay Perf) GG0170S1 Wheel 150 feet (Start of Stay Perf) GG0170SS1 Type of wheelchair or scooter (Start of Stay Perf)</p> |
| -4070 | Skip pattern | Fatal | <p>A2121, A2123 skip patterns:</p> <p>(a) If A0310H=[1] and A2105=[01,99], then A2121, if active, must equal [^] and A2123, if active, must not equal [^].</p> <p>(b) If A0310H=[1] and A2105=[02,03,04,05,06,07,08,09,10,11,12], then A2121, if active, must not equal [^] and A2123, if active, must equal [^].</p> <p>(c) If A0310H=[0], then the following items, if active, must equal [^]: A2121, A2123.</p> <p>(d) If A0310H=[1] and A2105=[^], then A2121, if active, must equal [^] and A2123, if active, must equal [^].</p> <p>Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310F Entry/discharge reporting A0310H SNF PPS Part A Discharge (End of Stay) Assessment A2105 Discharge location A2121 Current Reconciled Medication List - Provider A2123 Current Reconciled Medication List - Ptnt/Fam/Care</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | |
|---------------|--------------|---------------------------|--|---------------|--------|--------------------------|--|--------|-------------------------|--|--------|---------------------------|--|-------|------------------|--|-------|------------------|
| -4071 | Skip pattern | Fatal | <p>D0700 skip patterns:</p> <p>(b) If A0310A=[99] AND A0310B=[01] AND B0100=[0] then if D0700 is active, it must not equal [^].</p> <p>(c) If A0310A=[01,02,03,04,05,06] AND A0310B=[01,99] AND B0100=[0] then if D0700 is active, it must not equal [^].</p> <table><tr><td>Items:</td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td></td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>B0100</td><td>Comatose</td></tr><tr><td></td><td>D0700</td><td>Social Isolation</td></tr></table> | Items: | A0310A | Type of assessment: OBRA | | A0310B | Type of assessment: PPS | | A0310F | Entry/discharge reporting | | B0100 | Comatose | | D0700 | Social Isolation |
| Items: | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | |
| | A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | |
| | A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | |
| | B0100 | Comatose | | | | | | | | | | | | | | | | |
| | D0700 | Social Isolation | | | | | | | | | | | | | | | | |
| -4072 | Skip pattern | Fatal | <p>***THIS EDIT WAS DELETED IN V3.10.0***</p> <table><tr><td>Items:</td><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td></td><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td></td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>D0700</td><td>Social Isolation</td></tr></table> | Items: | A0310A | Type of assessment: OBRA | | A0310B | Type of assessment: PPS | | A0310F | Entry/discharge reporting | | D0700 | Social Isolation | | | |
| Items: | A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | | | |
| | A0310B | Type of assessment: PPS | | | | | | | | | | | | | | | | |
| | A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | |
| | D0700 | Social Isolation | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| -4073 | Skip pattern | Fatal | <p>Skips for GG0130 items:</p> <p>(a) IF A0200=[2] AND A0310A=[99] AND A0310B=[99] AND A0310F=[10,11] AND A2400C-A2400B>2 AND A2105=[01,02,03,05,06,07,08,09,10,11,12,13,99,^]), then the following items, when active, must not be equal to [^]: GG0130A3, GG0130B3, GG0130C3, GG0130E3, GG0130F3, GG0130G3, GG0130H3, GG0130I3.</p> <p>(b) IF A0200=[2] AND A0310A=[99] AND A0310B=[99] AND A0310F=[10,11] AND (A2400C-A2400B<=2 OR A2105=[04]) then the following items, when active, must be equal to [^]: GG0130A3, GG0130B3, GG0130C3, GG0130E3, GG0130F3, GG0130G3, GG0130H3, GG0130I3.</p> <p>(c) If A0310A=[99] and A0310B=[99] AND A0310F=[99] AND A0310H=[1] AND A0310G=[1,^] AND A2400C-A2400B>2, then the following items, when active, must not be equal to [^]: GG0130A3, GG0130B3, GG0130C3, GG0130E3, GG0130F3, GG0130G3, GG0130H3, GG0130I3.</p> <p>(d) If A0310A=[99] and A0310B=[99] AND A0310F=[99] AND A0310H=[1] AND (A0310G=[2] OR A2400C-A2400B<=2) then the following items, when active, must be equal to [^]: GG0130A3, GG0130B3, GG0130C3, GG0130E3, GG0130F3, GG0130G3, GG0130H3, GG0130I3.</p> |

Otherwise, if subedits a through d do not apply because the ISC is not SD or NPE, then the following edits apply:

- (e) If A0310F=[01,12,99] AND A0310H=[0], then the following items, when active, must be equal to [^]: GG0130A3, GG0130B3, GG0130C3, GG0130E3, GG0130F3, GG0130G3, GG0130H3, GG0130I3.
- (f) If A0310F=[10,11] OR A0310H=[1], then the following items, when active, must not be equal to [^]: GG0130A3, GG0130B3, GG0130C3, GG0130E3, GG0130F3, GG0130G3, GG0130H3, GG0130I3.

| | | |
|---------------|----------|---|
| Items: | A0200 | Type of provider |
| | A0310A | Type of assessment: OBRA |
| | A0310B | Type of assessment: PPS |
| | A0310F | Entry/discharge reporting |
| | A0310G | Planned/unplanned discharge |
| | A0310H | SNF PPS Part A Discharge (End of Stay) Assessment |
| | A2105 | Discharge location |
| | A2400B | Start date of most recent Medicare stay |
| | A2400C | End date of most recent Medicare stay |
| | GG0130A3 | Eating (Dischg Perf) |
| | GG0130B3 | Oral hygiene (Dschg Perf) |
| | GG0130C3 | Toileting hygiene (Dschg Perf) |
| | GG0130E3 | Shower/bathe self (Dschg Perf) |
| | GG0130F3 | Upper body dressing (Dschg Perf) |
| | GG0130G3 | Lower body dressing (Dschg Perf) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | Items: GG0130H3 Put on/take off footwear (Dschg Perf) GG0130I3 Personal Hygiene (Dschg Perf) |
| -4074 | Skip pattern | Fatal | <p>Skips for GG0170 items:</p> <p>(a) IF A0200=[2] AND A0310A=[99] AND A0310B=[99] AND A0310F=[10,11] AND (A2400C-A2400B>2 AND A2105=[01,02,03,05,06,07,08,09,10,11,12,13,99,^]), then the following items, when active, must not be equal to [^]: GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170FF3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.</p> <p>(b) IF A0200=[2] AND A0310A=[99] AND A0310B=[99] AND A0310F=[10,11] AND (A2400C-A2400B<=2 OR A2105=[04]) then the following items, when active, must be equal to [^]: GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170FF3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.</p> <p>(c) If A0310A=[99] and A0310B=[99] AND A0310F=[99] AND A0310H=[1] AND A0310G=[1,^] AND A2400C-A2400B>2, then the following items, when active, must not be equal to [^]: GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170FF3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.</p> <p>(d) If A0310A=[99] and A0310B=[99] AND A0310F=[99] AND A0310H=[1] AND (A0310G=[2] OR A2400C-A2400B<=2) then the following items, when active, must be equal to [^]: GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170FF3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.</p> <p>Otherwise, if subedits a through d do not apply because the ISC is not SD or NPE, then the following edits apply:</p> <p>(e) If A0310F=[01,12,99] AND A0310H=[0], then the following items, when active, must be equal to [^]: GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170FF3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.</p> <p>(f) If A0310F=[10,11] OR A0310H=[1], then the following items, when active, must not be equal to [^]: GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170FF3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.</p> |
| | | | Items: A0200 Type of provider A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310F Entry/discharge reporting A0310G Planned/unplanned discharge A0310H SNF PPS Part A Discharge (End of Stay) Assessment A2105 Discharge location A2400B Start date of most recent Medicare stay A2400C End date of most recent Medicare stay GG0170A3 Roll left and right (Dschg Perf) GG0170B3 Sit to lying (Dschg Perf) GG0170C3 Lying to sitting on bed side (Dschg Perf) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | Items: | GG0170D3 Sit to stand (Dschg Perf) |
| | | | GG0170E3 Chair/bed-to-chair transfer (Dschg Perf) |
| | | | GG0170F3 Toilet transfer (Dschg Perf) |
| | | | GG0170FF3 Tub/Showr Transfer (Dschg Perf) |
| | | | GG0170G3 Car transfer (Dschg Perf) |
| | | | GG0170I3 Walk 10 feet (Dschg Perf) |
| | | | GG0170M3 1 step (curb) (Dschg Perf) |
| | | | GG0170P3 Picking up object (Dschg Perf) |
| | | | GG0170Q3 Use wheelchair and/or scooter (Dschg Perf) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| -4075 | Consistency | Fatal | <p>Date Item Consistency Rules</p> <p>Date items fall into four groups, designated Group A, B, C, and D below. Each group has its own consistency rules.</p> <p>-----</p> <p>GROUP A RULES (Edit -4073a)</p> <p>Group A items are listed below. Each active item in this list that contains a valid date (not blank or dashes) must be in the specified order:</p> <p>A0900 (birthdate) <=</p> <p>A1900 (admission date) <=</p> <p>A1600 (entry date) <=</p> <p>A2300 (assessment reference date) = A2000 (discharge date) <=</p> <p>Z0500B (date RN signed assessment as complete) <=</p> <p>V0200B2 (CAT assessment process signature date) <=</p> <p>V0200C2 (CAT care planning signature date) <=</p> <p>X1100E (correction: attestation date) <=</p> <p>current date</p> <p>-----</p> <p>GROUP B (Edit -4073b)</p> <p>Group B items are listed below. Each active item in this list that contains a valid date (not blank or dashes) must obey all of the following rules:</p> <ol style="list-style-type: none">1. Each Group B date must be greater than or equal to A0900 (birthdate).2. Each Group B date must be less than or equal to A2300 (assessment reference date) if A2300 is active.3. If A0310F is equal to [10,11,12] (if A2000 discharge date is completed), then each Group B date must be less than or equal to A2000.4. For start/end date pairs shown below, the start date must be less than or equal to the end date.5. Otherwise, the Group B dates may be in any order. <p>The following is a list of Group B dates:</p> <p>A2400B <= A2400C (Medicare stay start/end)</p> <p>O0250B (date influenza vaccine received)</p> <p>V0100C (prior assessment reference date)</p> <p>-----</p> <p>GROUP C RULES</p> <p>The Group C rules only apply to records where A0310A = [05, 06] (significant correction to prior comprehensive or quarterly).</p> <p>RULE C1 (Edit -4073c1)</p> <p>If A0310A=[05,06] and A1700=[1] (admission), then Rule C1 applies:</p> <p>A1600 (entry date) <=</p> <p>A2200 (previous ARD for significant correction)<=</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| | | | A2300 (assessment reference date) |
| | | | RULE C2: (Edit -4073c2) |
| | | | If A0310A=[05,06] and A1700=[2] (reentry), then Rule C2 applies: |
| | | | A0900 (birthdate) <= |
| | | | A2200 (previous ARD for significant correction) <= |
| | | | A2300 (assessment reference date) |
| | | | Items: |
| | | | A0310A Type of assessment: OBRA |
| | | | A0310F Entry/discharge reporting |
| | | | A0310G1 Interrupted Stay |
| | | | A0900 Birthdate |
| | | | A1600 Entry date (date of admission/reentry in facility) |
| | | | A1700 Type of entry |
| | | | A2000 Discharge date |
| | | | A2200 Previous asmt reference date for signif correction |
| | | | A2300 Assessment reference date |
| | | | A2400B Start date of most recent Medicare stay |
| | | | A2400C End date of most recent Medicare stay |
| | | | O0250B Date influenza vaccine received. |
| | | | V0100C Prior assessment reference date |
| | | | V0200B2 CAA-Assessment process signature date |
| | | | V0200C2 CAA-Care planning signature date |
| | | | X1100E Correction: attestation date |
| | | | Z0500B Date RN signed assessment as complete |
| -4076 | Skip pattern | Fatal | <p>If O0390D is active, then</p> <p>(a) If O0390D=[1], then O0400D2 must not be equal to [^].</p> <p>(b) If O0390D=[0], then O0400D2 must be equal to [^].</p> <p>(c) If O0390D=[-], then O0400D2 must be equal to [-].</p> <p>Otherwise</p> <p>(d) If A0310B=[08], then O0400D2 must not be equal to [^].</p> <p>Items:</p> <p>A0310B Type of assessment: PPS</p> <p>O0390D Respiratory Therapy</p> <p>O0400D2 Respiratory therapy: number of days</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | |
|--------|--|----------|--|--------|--|--------|-------------------------|--------|---------------------------|--------|---------------------|--------|---------------------------|--------|-------------------|
| -4077 | None of above | Fatal | <p>(a) If O0390Z=[1], then O0390A through O0390E must equal [0]. (b) If O0390Z=[0], then at least one of O0390A through O0390E must equal [1]. (c) If O0390Z=[-], then at least one item from O0390A through O0390E must equal [-] and all remaining items must equal [0,-].</p> <p>Items:</p> <table><tr><td>O0390A</td><td>Speech-Language Pathology and Audiology Services</td></tr><tr><td>O0390B</td><td>Occupational Therapy</td></tr><tr><td>O0390C</td><td>Physical Therapy</td></tr><tr><td>O0390D</td><td>Respiratory Therapy</td></tr><tr><td>O0390E</td><td>Psychological Therapy</td></tr><tr><td>O0390Z</td><td>None of the above</td></tr></table> | O0390A | Speech-Language Pathology and Audiology Services | O0390B | Occupational Therapy | O0390C | Physical Therapy | O0390D | Respiratory Therapy | O0390E | Psychological Therapy | O0390Z | None of the above |
| O0390A | Speech-Language Pathology and Audiology Services | | | | | | | | | | | | | | |
| O0390B | Occupational Therapy | | | | | | | | | | | | | | |
| O0390C | Physical Therapy | | | | | | | | | | | | | | |
| O0390D | Respiratory Therapy | | | | | | | | | | | | | | |
| O0390E | Psychological Therapy | | | | | | | | | | | | | | |
| O0390Z | None of the above | | | | | | | | | | | | | | |
| -4078 | Skip pattern | Fatal | <p>If A0310A=[99] AND A0310B=[99] AND A0310F=[99] AND B0100=[0] then if D0700 is active, it must not equal [^].</p> <p>Items:</p> <table><tr><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td>B0100</td><td>Comatose</td></tr><tr><td>D0700</td><td>Social Isolation</td></tr></table> | A0310A | Type of assessment: OBRA | A0310B | Type of assessment: PPS | A0310F | Entry/discharge reporting | B0100 | Comatose | D0700 | Social Isolation | | |
| A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | |
| A0310B | Type of assessment: PPS | | | | | | | | | | | | | | |
| A0310F | Entry/discharge reporting | | | | | | | | | | | | | | |
| B0100 | Comatose | | | | | | | | | | | | | | |
| D0700 | Social Isolation | | | | | | | | | | | | | | |
| -4079 | Skip pattern | Fatal | <p>(a) If A0310A=[99] and A0310B=[01] and A2300 – A1900 >= 366 then A1255 must equal [^].</p> <p>(b) If A0310A=[99] and A0310B=[01] and A2300 – A1900 < 366 then A1255 must not equal [^].</p> <p>Items:</p> <table><tr><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td>A0310B</td><td>Type of assessment: PPS</td></tr><tr><td>A1255</td><td>Transportation</td></tr><tr><td>A1900</td><td>Admission date</td></tr><tr><td>A2300</td><td>Assessment reference date</td></tr></table> | A0310A | Type of assessment: OBRA | A0310B | Type of assessment: PPS | A1255 | Transportation | A1900 | Admission date | A2300 | Assessment reference date | | |
| A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | |
| A0310B | Type of assessment: PPS | | | | | | | | | | | | | | |
| A1255 | Transportation | | | | | | | | | | | | | | |
| A1900 | Admission date | | | | | | | | | | | | | | |
| A2300 | Assessment reference date | | | | | | | | | | | | | | |
| -4080 | Skip pattern | Fatal | <p>(a) If A0310A=[01,02,03,04,05,06] and A0310B=[01] and A2300 – A1900 >= 366 then A1255 must equal [^].</p> <p>(b) If A0310A=[01,02,03,04,05,06] and A0310B=[01] and A2300 – A1900 < 366 then A1255 must not equal [^].</p> <p>(c) If A0310A=[01,02,03,04,05,06] and A0310B=[99] then A1255 must equal [^].</p> <p>Items:</p> <table><tr><td>A0310A</td><td>Type of assessment: OBRA</td></tr><tr><td>A0310B</td><td>Type of assessment: PPS</td></tr></table> | A0310A | Type of assessment: OBRA | A0310B | Type of assessment: PPS | | | | | | | | |
| A0310A | Type of assessment: OBRA | | | | | | | | | | | | | | |
| A0310B | Type of assessment: PPS | | | | | | | | | | | | | | |

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Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| | | | Items: A1255 Transportation A1900 Admission date A2300 Assessment reference date |
| -4082 | Consistency | Fatal | <p>(a) If D0150A2 = [0,1] and D0150B2 = [0,1], then the following active items must equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(b) If D0150A1 = [-] or D0150B1 = [-], then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(c) If D0150A1 = [9] and D0150B1 = [9], then the following active items must equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(d) If (D0150A2 = [^] and D0150B2 = [0,1]) OR (D0150A2 = [0,1] and D0150B2 = [^]), then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(e) If D0150A2 = [2,3] or D0150B2 = [2,3], then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(f) If D0150A2 = [-] or D0150B2 = [-], then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> Items: D0150A1 Mood: Little interest/pleasure doing things: Pres D0150A2 Mood: Little interest/pleasure doing things: Freq D0150B1 Mood: Feeling down, depressed, or hopeless: Pres D0150B2 Mood: Feeling down, depressed, or hopeless: Freq D0150C1 Mood: Trouble falling or staying asleep: Pres D0150D1 Mood: Feeling tired or having little energy: Pres D0150E1 Mood: Poor appetite or overeating: Pres D0150F1 Mood: Feeling bad about yourself: Pres D0150G1 Mood: Trouble concentrating on things: Pres D0150H1 Mood: Moving or speaking so slowly: Pres D0150I1 Mood: Thoughts of better off dead: Pres |

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Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|--------------|---|---|---------------|---------|---|--|-------|--|--|---------|---|--|---------|---|--|---------|--|--|---------|--|--|---------|---|--|---------|---|--|---------|---|--|---------|--|--|---------|---|--|---------|--|--|---------|---|--|-------|----------------------|
| -4083 | Consistency | Fatal | <p>Total Severity Score Calculation:</p> <p>(a) If D0150A1 = [9] and D0150B1 = [9], then D0160 must equal [^].</p> <p>(b) If D0150A2 = [0,1] and D0150B2 = [0,1], then D0160 must equal the sum of the values from D0150A2 and D0150B2.</p> <p>Otherwise, the PHQ-9 must be completed, and D0160 must equal the sum of the values of the following nine items: D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2, D0150I2 and Format Integer Items to nearest integer. These are referred to as the "items in Column 2", below.</p> <p>The following rules explain how to compute the score that is placed in item D0160. These rules consider the "number of missing items in Column 2" which is the number of items in Column 2 that are skipped.</p> <p>(c) If the following items D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2, D0150I2 equal [0,1,2,3], then D0160 must equal the sum of these items.</p> <p>(d) If one of the following items: D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2, D0150I2 = [-,^], then D0160 must equal the sum of the remaining items times 9/8(1.125), rounded to the nearest integer.</p> <p>(e) If two of the following items: D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2, D0150I2 = [-,^], then D0160 must equal the sum of the remaining items times 9/7(1.286), rounded to the nearest integer.</p> <p>(f) If three or more items between D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2 and D0150I2 = [-,^] and B0100 is equal to [0] and D0100=[1], then D0160 must equal [99].</p> <table><tr><td>Items:</td><td>B0100</td><td>Comatose</td></tr><tr><td></td><td>D0100</td><td>PHQ: should resident mood interview be conducted</td></tr><tr><td></td><td>D0150A1</td><td>Mood: Little interest/pleasure doing things: Pres</td></tr><tr><td></td><td>D0150A2</td><td>Mood: Little interest/pleasure doing things: Freq</td></tr><tr><td></td><td>D0150B1</td><td>Mood: Feeling down, depressed, or hopeless: Pres</td></tr><tr><td></td><td>D0150B2</td><td>Mood: Feeling down, depressed, or hopeless: Freq</td></tr><tr><td></td><td>D0150C2</td><td>Mood: Trouble falling or staying asleep: Freq</td></tr><tr><td></td><td>D0150D2</td><td>Mood: Feeling tired or having little energy: Freq</td></tr><tr><td></td><td>D0150E2</td><td>Mood: Poor appetite or overeating: Freq</td></tr><tr><td></td><td>D0150F2</td><td>Mood: Feeling bad about yourself: Freq</td></tr><tr><td></td><td>D0150G2</td><td>Mood: Trouble concentrating on things: Freq</td></tr><tr><td></td><td>D0150H2</td><td>Mood: Moving or speaking so slowly: Freq</td></tr><tr><td></td><td>D0150I2</td><td>Mood: Thoughts of better off dead: Freq</td></tr><tr><td></td><td>D0160</td><td>Total severity score</td></tr></table> | Items: | B0100 | Comatose | | D0100 | PHQ: should resident mood interview be conducted | | D0150A1 | Mood: Little interest/pleasure doing things: Pres | | D0150A2 | Mood: Little interest/pleasure doing things: Freq | | D0150B1 | Mood: Feeling down, depressed, or hopeless: Pres | | D0150B2 | Mood: Feeling down, depressed, or hopeless: Freq | | D0150C2 | Mood: Trouble falling or staying asleep: Freq | | D0150D2 | Mood: Feeling tired or having little energy: Freq | | D0150E2 | Mood: Poor appetite or overeating: Freq | | D0150F2 | Mood: Feeling bad about yourself: Freq | | D0150G2 | Mood: Trouble concentrating on things: Freq | | D0150H2 | Mood: Moving or speaking so slowly: Freq | | D0150I2 | Mood: Thoughts of better off dead: Freq | | D0160 | Total severity score |
| Items: | B0100 | Comatose | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0100 | PHQ: should resident mood interview be conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150A1 | Mood: Little interest/pleasure doing things: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150A2 | Mood: Little interest/pleasure doing things: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150B1 | Mood: Feeling down, depressed, or hopeless: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150B2 | Mood: Feeling down, depressed, or hopeless: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150C2 | Mood: Trouble falling or staying asleep: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150D2 | Mood: Feeling tired or having little energy: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150E2 | Mood: Poor appetite or overeating: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150F2 | Mood: Feeling bad about yourself: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150G2 | Mood: Trouble concentrating on things: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150H2 | Mood: Moving or speaking so slowly: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0150I2 | Mood: Thoughts of better off dead: Freq | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | D0160 | Total severity score | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -4084 | Skip pattern | Fatal | <p>(a) If D0150A1=[0], then D0150A2 must equal [0].</p> <p>(b) If D0150A1=[1], then D0150A2 must equal [0,1,2,3,-].</p> <p>(c) If D0150A1=[9,-,^], then D0150A2 must equal [^].</p> <table><tr><td>Items:</td><td>D0150A1</td><td>Mood: Little interest/pleasure doing things: Pres</td></tr></table> | Items: | D0150A1 | Mood: Little interest/pleasure doing things: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Items: | D0150A1 | Mood: Little interest/pleasure doing things: Pres | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|--|
| -4085 | Skip pattern | Fatal | Items: D0150A2 Mood: Little interest/pleasure doing things: Freq (a) If D0150B1=[0], then D0150B2 must equal [0]. (b) If D0150B1=[1], then D0150B2 must equal [0,1,2,3,-]. (c) If D0150B1=[9,-,^], then D0150B2 must equal [^]. |
| | | | Items: D0150B1 Mood: Feeling down, depressed, or hopeless: Pres D0150B2 Mood: Feeling down, depressed, or hopeless: Freq (a) If D0150C1=[0], then D0150C2 must equal [0]. (b) If D0150C1=[1], then D0150C2 must equal [0,1,2,3,-]. (c) If D0150C1=[9,-,^], then D0150C2 must equal [^]. |
| | | | Items: D0150C1 Mood: Trouble falling or staying asleep: Pres D0150C2 Mood: Trouble falling or staying asleep: Freq (a) If D0150D1=[0], then D0150D2 must equal [0]. (b) If D0150D1=[1], then D0150D2 must equal [0,1,2,3,-]. (c) If D0150D1=[9,-,^], then D0150D2 must equal [^]. |
| -4086 | Skip pattern | Fatal | Items: D0150B1 Mood: Feeling down, depressed, or hopeless: Pres D0150B2 Mood: Feeling down, depressed, or hopeless: Freq (a) If D0150C1=[0], then D0150C2 must equal [0]. (b) If D0150C1=[1], then D0150C2 must equal [0,1,2,3,-]. (c) If D0150C1=[9,-,^], then D0150C2 must equal [^]. |
| | | | Items: D0150C1 Mood: Trouble falling or staying asleep: Pres D0150C2 Mood: Trouble falling or staying asleep: Freq (a) If D0150D1=[0], then D0150D2 must equal [0]. (b) If D0150D1=[1], then D0150D2 must equal [0,1,2,3,-]. (c) If D0150D1=[9,-,^], then D0150D2 must equal [^]. |
| | | | Items: D0150D1 Mood: Feeling tired or having little energy: Pres D0150D2 Mood: Feeling tired or having little energy: Freq (a) If D0150E1=[0], then D0150E2 must equal [0]. (b) If D0150E1=[1], then D0150E2 must equal [0,1,2,3,-]. (c) If D0150E1=[9,-,^], then D0150E2 must equal [^]. |
| -4087 | Skip pattern | Fatal | Items: D0150C1 Mood: Trouble falling or staying asleep: Pres D0150C2 Mood: Trouble falling or staying asleep: Freq (a) If D0150D1=[0], then D0150D2 must equal [0]. (b) If D0150D1=[1], then D0150D2 must equal [0,1,2,3,-]. (c) If D0150D1=[9,-,^], then D0150D2 must equal [^]. |
| | | | Items: D0150D1 Mood: Feeling tired or having little energy: Pres D0150D2 Mood: Feeling tired or having little energy: Freq (a) If D0150E1=[0], then D0150E2 must equal [0]. (b) If D0150E1=[1], then D0150E2 must equal [0,1,2,3,-]. (c) If D0150E1=[9,-,^], then D0150E2 must equal [^]. |
| | | | Items: D0150E1 Mood: Poor appetite or overeating: Pres D0150E2 Mood: Poor appetite or overeating: Freq (a) If D0150F1=[0], then D0150F2 must equal [0]. (b) If D0150F1=[1], then D0150F2 must equal [0,1,2,3,-]. (c) If D0150F1=[9,-,^], then D0150F2 must equal [^]. |
| -4088 | Skip pattern | Fatal | Items: D0150E1 Mood: Poor appetite or overeating: Pres D0150E2 Mood: Poor appetite or overeating: Freq (a) If D0150F1=[0], then D0150F2 must equal [0]. (b) If D0150F1=[1], then D0150F2 must equal [0,1,2,3,-]. (c) If D0150F1=[9,-,^], then D0150F2 must equal [^]. |
| | | | Items: D0150F1 Mood: Feeling bad about yourself: Pres D0150F2 Mood: Feeling bad about yourself: Freq (a) If D0150G1=[0], then D0150G2 must equal [0]. (b) If D0150G1=[1], then D0150G2 must equal [0,1,2,3,-]. (c) If D0150G1=[9,-,^], then D0150G2 must equal [^]. |
| | | | Items: D0150G1 Mood: Trouble concentrating on things: Pres D0150G2 Mood: Trouble concentrating on things: Freq |
| -4089 | Skip pattern | Fatal | Items: D0150F1 Mood: Feeling bad about yourself: Pres D0150F2 Mood: Feeling bad about yourself: Freq (a) If D0150G1=[0], then D0150G2 must equal [0]. (b) If D0150G1=[1], then D0150G2 must equal [0,1,2,3,-]. (c) If D0150G1=[9,-,^], then D0150G2 must equal [^]. |
| | | | Items: D0150G1 Mood: Trouble concentrating on things: Pres D0150G2 Mood: Trouble concentrating on things: Freq |
| | | | Items: D0150G1 Mood: Trouble concentrating on things: Pres D0150G2 Mood: Trouble concentrating on things: Freq |
| -4090 | Skip pattern | Fatal | Items: D0150G1 Mood: Trouble concentrating on things: Pres D0150G2 Mood: Trouble concentrating on things: Freq |
| | | | Items: D0150G1 Mood: Trouble concentrating on things: Pres D0150G2 Mood: Trouble concentrating on things: Freq |
| | | | Items: D0150G1 Mood: Trouble concentrating on things: Pres D0150G2 Mood: Trouble concentrating on things: Freq |

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Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|--------------|----------|---|
| -4091 | Skip pattern | Fatal | <p>(a) If D0150H1=[0], then D0150H2 must equal [0].</p> <p>(b) If D0150H1=[1], then D0150H2 must equal [0,1,2,3,-].</p> <p>(c) If D0150H1=[9,-,^], then D0150H2 must equal [^].</p> <p>Items: D0150H1 Mood: Moving or speaking so slowly: Pres</p> <p style="padding-left: 100px;">D0150H2 Mood: Moving or speaking so slowly: Freq</p> |
| -4092 | Skip pattern | Fatal | <p>(a) If D0150I1=[0], then D0150I2 must equal [0].</p> <p>(b) If D0150I1=[1], then D0150I2 must equal [0,1,2,3,-].</p> <p>(c) If D0150I1=[9,-,^], then D0150I2 must equal [^].</p> <p>Items: D0150I1 Mood: Thoughts of better off dead: Pres</p> <p style="padding-left: 100px;">D0150I2 Mood: Thoughts of better off dead: Freq</p> |
| -4094 | Consistency | Fatal | <p>In order to modify or inactivate a record that has previously been accepted by the submission system, the system must be able to locate the previous record. Appropriate values from the record to be corrected must therefore be submitted for the following locator items (when active):</p> <ul style="list-style-type: none"> a) X0150 (provider type) b) X0200A (resident first name) c) X0200C (resident last name) d) X0310 (sex) e) X0400 (birth date) f) X0500 (social security number) g) X0600A (OBRA reason for assessment) h) X0600B (PPS reason for assessment) i) X0600F (entry/discharge reporting) j) X0600H (SNF PPS Part A Discharge (End of Stay) Assessment) k) X0700A (assessment reference date) l) X0700B (discharge date) m) X0700C (entry date) <p>If a matching previously accepted record cannot be located, a fatal error will result and the submitted record will be rejected.</p> <p>Items: X0150 Correction: type of provider</p> <p style="padding-left: 100px;">X0200A Correction: resident first name</p> <p style="padding-left: 100px;">X0200C Correction: resident last name</p> <p style="padding-left: 100px;">X0310 Correction: resident sex</p> <p style="padding-left: 100px;">X0400 Correction: resident birth date</p> <p style="padding-left: 100px;">X0500 Correction: resident social security number</p> <p style="padding-left: 100px;">X0600A Correction: OBRA reason for assessment</p> <p style="padding-left: 100px;">X0600B Correction: PPS reason for assessment</p> <p style="padding-left: 100px;">X0600F Correction: entry/discharge reporting</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| | | | Items: X0600H Correction: SNF PPS Part A Discharge (End of Stay) X0700A Correction: assessment reference date X0700B Correction: discharge date X0700C Correction: entry date |
| | | | |
| | | | |
| | | | |
| | | | |
| -4095 | Consistency | Fatal | <p>If A0050 (formerly X0100)=[2,3] then the following items, when active, must not equal [^]: X0150, X0200A, X0200C, X0310, X0400, X0600A, X0600B, X0600F.</p> <p>Items: A0050 Type of transaction (formerly X0100) X0150 Correction: type of provider X0200A Correction: resident first name X0200C Correction: resident last name X0310 Correction: resident sex X0400 Correction: resident birth date X0600A Correction: OBRA reason for assessment X0600B Correction: PPS reason for assessment X0600F Correction: entry/discharge reporting</p> |
| -4096 | Consistency | Fatal | <p>If A0310A=[99] AND A0310B=[99] AND A0310F=[99], then if A2400A is active, it must equal [1].</p> <p>Items: A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310F Entry/discharge reporting A2400A Has resident had Medicare-covered stay</p> |
| -9001 | Information | None | <p>Vendor's version number for the software that was used to create the MDS data submission file.</p> <p>Items: SFTWR_PROD_VRS Software product version code N_CD</p> |
| -9002 | Information | None | <p>Optional item. Can be used by facility for unique identification of record and for tracking records submitted to the MDS Submission System.</p> <p>Items: FAC_DOC_ID Facility document ID</p> |
| -9003 | Information | None | <p>Valid federal tax ID (EIN) for the company that developed the software used to create the MDS data submission file.</p> <p>Items: SFTWR_VNDR_ID Software vendor federal employer tax ID</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|---|
| -9004 | Information | None | <p>Name of the software that was used to create the MDS data submission file.</p> <p>Items: SFTWR_PROD_NA ME Software product name</p> |
| -9005 | Information | None | <p>Email address of the vendor who created the software that was used to produce the MDS submission file.</p> <p>Items: SFTWR_VNDR_EM AIL_ADR Software vendor email address</p> |
| -9006 | Information | None | <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 MDS Submission System. System reports will therefore display upper case values.</p> <p>Items: FAC_ID Assigned facility/provider submission ID SFTWR_VNDR_ID Software vendor federal employer tax ID SFTWR_VNDR_NA ME Software vendor company name SFTWR_PROD_NA ME Software product name SFTWR_PROD_VRS N_CD Software product version code FAC_DOC_ID Facility document ID A0100B Facility CMS Certification Number (CCN) A0100C State provider number A0500A Resident first name A0500B Resident middle initial A0500C Resident last name A0500D Resident name suffix A0600B Medicare number A0700 Medicaid number A1110A Preferred language A1300A Medical record number A1300B Room number A1300C Name by which resident prefers to be addressed A1300D Lifetime occupation(s) I0020B Primary Medical Condition ICD I8000A Additional active ICD diagnosis 1 I8000B Additional active ICD diagnosis 2</p> |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|----|------|----------|---|
| | | | Items: I8000C Additional active ICD diagnosis 3 I8000D Additional active ICD diagnosis 4 I8000E Additional active ICD diagnosis 5 I8000F Additional active ICD diagnosis 6 I8000G Additional active ICD diagnosis 7 I8000H Additional active ICD diagnosis 8 I8000I Additional active ICD diagnosis 9 I8000J Additional active ICD diagnosis 10 X0200A Correction: resident first name X0200C Correction: resident last name X1100A Correction: attester first name X1100B Correction: attester last name Z0100A Medicare Part A: HIPPS code Z0100B Medicare Part A: Version code Z0200A State case mix: Group Z0200B State case mix: Version code Z0250A State case mix: Alternate group Z0250B State case mix: Alternate version code |
| | | | -9008 Information None Submit [+] (the plus sign) to indicate that Medicaid number is pending. |
| | | | Items: A0700 Medicaid number |
| | | | -9009 Information None Submit [N] to indicate that the resident is non-Medicaid. |
| | | | Items: A0700 Medicaid number |
| | | | -9010 Information None Put [/] (slash) between two occupations. |
| | | | Items: A1300D Lifetime occupation(s) |
| | | | -9013 Information None Rounding of Integer Items: This item should be rounded to the nearest integer. If the value in the tenths decimal place is equal to 0 through 4, round the value down to the nearest integer (i.e., discard the fractional portion of the number). If the value in the tenths decimal place is equal to 5 through 9, round the value up to the next largest integer. |
| | | | Items: D0600 PHQ staff: total mood score K0200A Height (in inches) K0200B Weight (in pounds) |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items | | | | | | | | | | | | | | | | | | | | | |
|---------------|-------------|--|--|---------------|--------|-----------------------------------|--|--------|--|--|--------|-----------------------------------|--|--------|-------------------------------------|--|-------------|---|--|--------|--|--|--------|-----------------------------------|
| -9015 | Information | None | <p>Items V0100A through V0100C are used to identify a prior OBRA or PPS assessment if one has been performed since the resident's most recent entry. If such an assessment exists, the values in V0100D, V0100E, and V0100F are used in the triggering logic for CAAs that depend upon values from a prior assessment.</p> <table><tr><td>Items:</td><td>V0100A</td><td>Prior OBRA reason for assessment</td></tr><tr><td></td><td>V0100B</td><td>Prior PPS reason for assessment</td></tr><tr><td></td><td>V0100C</td><td>Prior assessment reference date</td></tr><tr><td></td><td>V0100D</td><td>Prior assessment BIMS summary score</td></tr><tr><td></td><td>V0100E</td><td>Prior asmt PHQ res: total mood severity score</td></tr><tr><td></td><td>V0100F</td><td>Prior asmt PHQ staff: total mood score</td></tr></table> | Items: | V0100A | Prior OBRA reason for assessment | | V0100B | Prior PPS reason for assessment | | V0100C | Prior assessment reference date | | V0100D | Prior assessment BIMS summary score | | V0100E | Prior asmt PHQ res: total mood severity score | | V0100F | Prior asmt PHQ staff: total mood score | | | |
| Items: | V0100A | Prior OBRA reason for assessment | | | | | | | | | | | | | | | | | | | | | | |
| | V0100B | Prior PPS reason for assessment | | | | | | | | | | | | | | | | | | | | | | |
| | V0100C | Prior assessment reference date | | | | | | | | | | | | | | | | | | | | | | |
| | V0100D | Prior assessment BIMS summary score | | | | | | | | | | | | | | | | | | | | | | |
| | V0100E | Prior asmt PHQ res: total mood severity score | | | | | | | | | | | | | | | | | | | | | | |
| | V0100F | Prior asmt PHQ staff: total mood score | | | | | | | | | | | | | | | | | | | | | | |
| -9017 | Information | None | <p>The target date is defined as follows:</p> <p>a) If A0310F is equal to [01], then the target date is equal to A1600 (entry date). b) If A0310F is equal to [10,11,12], then the target date is equal to A2000 (discharge date). c) If A0310F is equal to [99], then the target date is equal to A2300 (assessment reference date).</p> <table><tr><td>Items:</td><td>A0310F</td><td>Entry/discharge reporting</td></tr><tr><td></td><td>A1600</td><td>Entry date (date of admission/reentry in facility)</td></tr><tr><td></td><td>A2000</td><td>Discharge date</td></tr><tr><td></td><td>A2300</td><td>Assessment reference date</td></tr><tr><td></td><td>TARGET_DATE</td><td>Target date</td></tr></table> | Items: | A0310F | Entry/discharge reporting | | A1600 | Entry date (date of admission/reentry in facility) | | A2000 | Discharge date | | A2300 | Assessment reference date | | TARGET_DATE | Target date | | | | | | |
| Items: | A0310F | Entry/discharge reporting | | | | | | | | | | | | | | | | | | | | | | |
| | A1600 | Entry date (date of admission/reentry in facility) | | | | | | | | | | | | | | | | | | | | | | |
| | A2000 | Discharge date | | | | | | | | | | | | | | | | | | | | | | |
| | A2300 | Assessment reference date | | | | | | | | | | | | | | | | | | | | | | |
| | TARGET_DATE | Target date | | | | | | | | | | | | | | | | | | | | | | |
| -9019 | Information | None | <p>For records with target dates on or after 10/1/2015, version 1.15 (or later) of the data specs applies to this item. This means that if this item is not equal to [^], it must contain an ICD-10 diagnosis code which must be formatted according to edit -3852.</p> <p>For records with target dates before 10/1/2015, previous versions of the data specs apply. This means that if this item is not equal to [^], it must contain an ICD-9 diagnosis code which must be formatted according to edit -3591 (which was discontinued in V1.15 of the data specs).</p> <table><tr><td>Items:</td><td>I8000A</td><td>Additional active ICD diagnosis 1</td></tr><tr><td></td><td>I8000B</td><td>Additional active ICD diagnosis 2</td></tr><tr><td></td><td>I8000C</td><td>Additional active ICD diagnosis 3</td></tr><tr><td></td><td>I8000D</td><td>Additional active ICD diagnosis 4</td></tr><tr><td></td><td>I8000E</td><td>Additional active ICD diagnosis 5</td></tr><tr><td></td><td>I8000F</td><td>Additional active ICD diagnosis 6</td></tr><tr><td></td><td>I8000G</td><td>Additional active ICD diagnosis 7</td></tr></table> | Items: | I8000A | Additional active ICD diagnosis 1 | | I8000B | Additional active ICD diagnosis 2 | | I8000C | Additional active ICD diagnosis 3 | | I8000D | Additional active ICD diagnosis 4 | | I8000E | Additional active ICD diagnosis 5 | | I8000F | Additional active ICD diagnosis 6 | | I8000G | Additional active ICD diagnosis 7 |
| Items: | I8000A | Additional active ICD diagnosis 1 | | | | | | | | | | | | | | | | | | | | | | |
| | I8000B | Additional active ICD diagnosis 2 | | | | | | | | | | | | | | | | | | | | | | |
| | I8000C | Additional active ICD diagnosis 3 | | | | | | | | | | | | | | | | | | | | | | |
| | I8000D | Additional active ICD diagnosis 4 | | | | | | | | | | | | | | | | | | | | | | |
| | I8000E | Additional active ICD diagnosis 5 | | | | | | | | | | | | | | | | | | | | | | |
| | I8000F | Additional active ICD diagnosis 6 | | | | | | | | | | | | | | | | | | | | | | |
| | I8000G | Additional active ICD diagnosis 7 | | | | | | | | | | | | | | | | | | | | | | |

Data Submission Specifications for the MDS 3.0 (V3.10.2)

Unduplicated Edits Report by Edit ID

| ID | Type | Severity | Text/Items |
|-------|-------------|----------|--|
| | | | Items: I8000H Additional active ICD diagnosis 8 I8000I Additional active ICD diagnosis 9 I8000J Additional active ICD diagnosis 10 |
| -9020 | Information | None | The maximum length of Z0100A is 7 characters even though the HIPPS code is currently 5 characters in length for 5-day and Interim Payment assessments, and 4 characters in length for OBRA's. The extra characters are included to allow for future |
| | | | Items: Z0100A Medicare Part A: HIPPS code |
| -9021 | Information | None | V0100A through V0100F should be completed only if there is a prior assessment (if A0310E=[0]) and if the following is true for the most recent prior assessment: A0310A is equal to [01,02,03,04,05,06] OR A0310B is equal to [01]. The purpose of V0100D through V0100F is to supply previous score values that are used for calculating some of the CATs. The purpose of V0100A through V0100C is to document the prior assessment that contained those values. |
| | | | Items: V0100A Prior OBRA reason for assessment V0100B Prior PPS reason for assessment V0100C Prior assessment reference date V0100D Prior assessment BIMS summary score V0100E Prior asmt PHQ res: total mood severity score V0100F Prior asmt PHQ staff: total mood score |