

# Data Submission Specifications for the OASIS Item Set (V3.02.0)

## Detailed Data Specifications Report

### Section: F

Item ID: M1100\_PTNT\_LVG\_STUTN

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Patient living situation	Asmt		Code	2	769-770

#### Item Subsets

Active: 01,03  
Inactive: 04,05,06,07,08,09,XX

#### Item Values

Value	LOINC Code	Value Text
01		Patient lives alone, around the clock assistance available.
02		Patient lives alone, regular daytime assistance available.
03		Patient lives alone, regular nighttime assistance available.
04		Patient lives alone, occasional / short-term assistance available.
05		Patient lives alone, no assistance available.
06		Patient lives with other person(s) in the home, around the clock assistance available.
07		Patient lives with other person(s) in the home, regular daytime assistance available.
08		Patient lives with other person(s) in the home, regular nighttime assistance available.
09		Patient lives with other person(s) in the home, occasional / short-term assistance available.
10		Patient lives with other person(s) in the home, no assistance available.
11		Patient lives in congregate situation (for example, assisted living, residential care home), around the clock assistance available.
12		Patient lives in congregate situation (for example, assisted living, residential care home), regular daytime assistance available.
13		Patient lives in congregate situation (for example, assisted living, residential care home), regular nighttime assistance available.
14		Patient lives in congregate situation (for example, assisted living, residential care home), occasional / short-term assistance available.
15		Patient lives in congregate situation (for example, assisted living, residential care home), no assistance available.

#### Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3060	Format	Fatal	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.

**Data Submission Specifications for the OASIS Item Set (V3.02.0)**  
**Detailed Data Specifications Report**  
**Section: F**

***Changes for Version***

Type	ID	Description
Format	-3060	[V3.02.0]-Removed mappings to deleted items A1250A-Y, M0069_PAT_GENDER and O0350. Added mappings to new items A0810 and A1255.

# Data Submission Specifications for the OASIS Item Set (V3.02.0)

## Detailed Data Specifications Report

### Section: F

Item ID: M2102\_CARE\_TYPE\_SRC\_ADL

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Care mgmt, types/sources: ADL	Asmt		Code	2	1537-1538

#### Item Subsets

Active: 09  
Inactive: 01,03,04,05,06,07,08,XX

#### Item Values

Value	LOINC Code	Value Text
00		No assistance needed - patient is independent or does not have needs in this area
01		Non-agency caregiver(s) currently provide assistance
02		Non-agency caregiver(s) need training/supportive services to provide assistance
03		Non-agency caregiver(s) are not likely to provide assistance OR it is unclear if they will provide assistance
04		Assistance needed, but no non-agency caregiver(s) available

#### Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3060	Format	Fatal	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.

#### Changes for Version

Type	ID	Description
Format	-3060	[V3.02.0]-Removed mappings to deleted items A1250A-Y, M0069_PAT_GENDER and O0350. Added mappings to new items A0810 and A1255.

# Data Submission Specifications for the OASIS Item Set (V3.02.0)

## Detailed Data Specifications Report

### Section: F

Item ID: M2102\_CARE\_TYPE\_SRC\_MDCTN

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Care mgmt, types/sources: med admin	Asmt		Code	2	1541-1542

#### Item Subsets

Active: 09  
Inactive: 01,03,04,05,06,07,08,XX

#### Item Values

Value	LOINC Code	Value Text
00		No assistance needed - patient is independent or does not have needs in this area
01		Non-agency caregiver(s) currently provide assistance
02		Non-agency caregiver(s) need training/supportive services to provide assistance
03		Non-agency caregiver(s) are not likely to provide assistance OR it is unclear if they will provide assistance
04		Assistance needed, but no non-agency caregiver(s) available

#### Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3060	Format	Fatal	VALUES OF CODE AND CHECKLIST ITEMS

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#### Changes for Version

Type	ID	Description
Format	-3060	[V3.02.0]-Removed mappings to deleted items A1250A-Y, M0069_PAT_GENDER and O0350. Added mappings to new items A0810 and A1255.

# Data Submission Specifications for the OASIS Item Set (V3.02.0)

## Detailed Data Specifications Report

### Section: F

Item ID: M2102\_CARE\_TYPE\_SRC\_PRCDR

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Care mgmt, types/sources: med procs tx	Asmt		Code	2	1543-1544

#### Item Subsets

Active: 09  
Inactive: 01,03,04,05,06,07,08,XX

#### Item Values

Value	LOINC Code	Value Text
00		No assistance needed - patient is independent or does not have needs in this area
01		Non-agency caregiver(s) currently provide assistance
02		Non-agency caregiver(s) need training/supportive services to provide assistance
03		Non-agency caregiver(s) are not likely to provide assistance OR it is unclear if they will provide assistance
04		Assistance needed, but no non-agency caregiver(s) available

#### Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3060	Format	Fatal	VALUES OF CODE AND CHECKLIST ITEMS

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#### Changes for Version

Type	ID	Description
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# Data Submission Specifications for the OASIS Item Set (V3.02.0)

## Detailed Data Specifications Report

### Section: F

Item ID: M2102\_CARE\_TYPE\_SRC\_SPRVSN

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Care mgmt, types/sources: supervision and safety	Asmt		Code	2	1547-1548

#### Item Subsets

Active: 01,03,09  
Inactive: 04,05,06,07,08,XX

#### Item Values

Value	LOINC Code	Value Text
00		No assistance needed - patient is independent or does not have needs in this area
01		Non-agency caregiver(s) currently provide assistance
02		Non-agency caregiver(s) need training/supportive services to provide assistance
03		Non-agency caregiver(s) are not likely to provide assistance OR it is unclear if they will provide assistance
04		Assistance needed, but no non-agency caregiver(s) available

#### Item Edits

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