

**Uniform Data Submission Specifications for the MDS 2.0 (September 2000/July 2002 Forms)
Header Record Layout For Submission From the Nursing Home to the State (Version 1.30)**

Item Identifier/Description	Len	Start	End	Specification (* Indicates FATAL Error)
REC_ID RECORD ID	2	1	2	Picture : XX Type: CODE Range : A0 Format Info : Upper case A followed by 0 (zero). Consistency : *1. Out of range value is a fatal error.
FED_ID Facility Medicare Provider Number	12	3	14	Picture : X(12) Type: CODE Range : Valid code,sp(12) Format Info : Left justified; no embedded dashes or spaces; any letters must be upper case. Allow + in first character to indicate pending. Consistency :
ST_ID Facility Medicaid Provider Number	15	15	29	Picture : X(15) Type: CODE Range : Valid code,sp(15) Format Info : Left justified; no embedded dashes or spaces; any letters must be upper case. Allow + in first character to indicate pending. Consistency :
FAC_ID State Assigned Unique Facility ID Code (Location)	16	30	45	Picture : X(16) Type: TEXT Range : Valid code Format Info : Left justified; no embedded dashes or spaces; any letters must be upper case. Consistency : *1. This facility ID code must be the ID assigned by the State. It must match both the login ID used by the facility to submit data to the State MDS system and the facility ID (FAC_ID) in each data record of the submission file.
FAC_NAME Facility Name	30	46	75	Picture : X(30) Type: TEXT Range : Text Format Info : Left justified; any letters must be upper case. Consistency :
FAC_ADDR_1 Facility Address Line 1	30	76	105	Picture : X(30) Type: TEXT Range : Text Format Info : Left justified; any letters must be upper case. Consistency :

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FAC_ADDR_2 Facility Address Line 2	30	106	135	Picture : X(30) Type: TEXT Range : Text, sp(30) Format Info : Left justified; any letters must be upper case. Consistency :
FAC_CITY Facility City	20	136	155	Picture : X(20) Type: TEXT Range : Text Format Info : Left justified; any letters must be upper case. Consistency :
FAC_ST Facility State Code	2	156	157	Picture : X(2) Type: CODE Range : Valid code Format Info : Valid 2 character state code; upper case. Consistency :
FAC_ZIP Facility Zip Code	11	158	168	Picture : X(11) Type: CODE Range : Valid numeric zip code Format Info : Left justified; no embedded dashes or spaces. Consistency :
FAC_CNTCT Facility Contact Person Name	30	169	198	Picture : X(30) Type: TEXT Range : Text Format Info : Left justified; any letters must be upper case. Consistency :
FAC_PHONE Facility Contact Person Phone Number	10	199	208	Picture : X(10) Type: TEXT Range : Valid phone number Format Info : Area code included; no embedded nonnumeric characters. Consistency :
FAC_EXTEN	5	209	213	Picture : X(5) Type: TEXT

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Facility Contact Person Phone Extension				Range : Valid extension,sp(5) Format Info : Left justified. Consistency :
AGT_ID	9	214	222	Picture : X(9) Type: TEXT Range : Valid code,sp(9) Format Info : Valid federal tax ID (EIN); no embedded dashes or spaces. Consistency : Note: The agent is a Fiscal Intermediary or service bureau that performs off-site MDS automation for the nursing home. Leave the agent fields blank if the nursing home employs in-house automation.
Agent Federal Tax ID (EIN)				
AGT_NAME	30	223	252	Picture : X(30) Type: TEXT Range : Text,sp(30) Format Info : Left justified; any letters must be upper case. Consistency :
Agent Name				
AGT_ADDR_1	30	253	282	Picture : X(30) Type: TEXT Range : Text,sp(30) Format Info : Left justified; any letters must be upper case. Consistency :
Agent Address Line 1				
AGT_ADDR_2	30	283	312	Picture : X(30) Type: TEXT Range : Text,sp(30) Format Info : Left justified; any letters must be upper case. Consistency :
Agent Address Line 2				
AGT_CITY	20	313	332	Picture : X(20) Type: TEXT Range : Text,sp(20) Format Info : Left justified; any letters must be upper case. Consistency :
Agent City				
AGT_ST	2	333	334	Picture : X(2) Type: CODE

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Agent State Code				Range : Valid code,sp(2) Format Info : Valid 2 character state code; upper case. Consistency :
AGT_ZIP	11	335	345	Picture : X(11) Type: CODE Range : Valid numeric zip code,sp(11) Format Info : Left justified; no embedded dashes or spaces. Consistency :
Agent Zip Code				
AGT_CNTCT	30	346	375	Picture : X(30) Type: TEXT Range : Text,sp(30) Format Info : Left justified; any letters must be upper case. Consistency :
Agent Contact Person Name				
AGT_PHONE	10	376	385	Picture : X(10) Type: TEXT Range : Valid phone number,sp(10) Format Info : Area code included; no embedded nonnumeric characters. Consistency :
Agent Contact Person Phone Number				
AGT_EXTEN	5	386	390	Picture : X(5) Type: TEXT Range : Valid extension,sp(5) Format Info : Left justified. Consistency :
Agent Contact Person Phone Extension				
SFW_ID	9	391	399	Picture : X(9) Type: TEXT Range : Valid code,sp(9) Format Info : Valid federal tax ID (EIN); no embedded dashes or spaces. Consistency :
MDS Software Co. Federal Tax ID (EIN)				
SFW_NAME	30	400	429	Picture : X(30) Type: TEXT Range : Text,sp(30) Format Info : Left justified; any letters must be upper case.
MDS Software Co. Name				

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SFW_PHONE MDS Software Co. Contact Person Phone Number	10	553	562	Picture : X(10) Type: TEXT Range : Valid phone number,sp(10) Format Info : Area code included; no embedded nonnumeric characters. Consistency :
SFW_EXTEN MDS Software Co. Contact Person Phone Extension	5	563	567	Picture : X(5) Type: TEXT Range : Valid extension,sp(5) Format Info : Left justified. Consistency :
FILE_DT File Creation Date	8	568	575	Picture : YYYYMMDD Type: DATE Range : Valid date Format Info : Consistency :
TEST_SW Test/Production Indicator	1	576	576	Picture : X Type: CODE Range : 0 (zero),1 Format Info : Consistency : *1. Out of range value is a fatal error. 2. Value = 0 for test submission to the State; value = 1 for production submission.
N_PROV_ID National Provider ID	10	577	586	Picture : X(10) Type: TEXT Range : Valid code, sp(10) Format Info : *1. No embedded dashes or spaces. *2. A valid, non-blank code must consist of 10 numeric digits. Consistency : 1. This item must match the National Provider ID present in item W1 in the data record. See consistency requirements for item W1 in the data record specifications.
HDR_FL Blank Filler	1225	587	1811	Picture : X(1225) Type: FILLER Range : sp(1225) Format Info : Always blank. Consistency :

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Item Identifier/Description	Len	Start	End	Specification (* Indicates FATAL Error)
DATA_END End of Data Terminator Code	1	1812	1812	Picture : X Type: CODE Range : % Format Info : Must always = %. Consistency : 1. Used to indicate end of data.
CRG_RTN Carriage Return (ASCII 013)	1	1813	1813	Picture : X Type: CODE Range : ASCII(013) Format Info : Must always be a carriage return (ASCII 013). Consistency :
LN_FD Line Feed (ASCII 010)	1	1814	1814	Picture : X Type: CODE Range : ASCII(010) Format Info : Must always be a line feed (ASCII 010). Consistency :