ID	Type	Severity	Text/Items
-3502	None of above	Fatal	If C0900A through C0900D and C0900Z are all active, then the following rules apply: a) If C0900Z=[0], then at least one item from C0900A through C0900D must equal [1]. b) If C0900Z=[1], then all items from C0900A through C0900D must equal [0]. c) If C0900Z=[-], then at least one item from C0900A through C0900D must equal [-] and all remaining items must equal [0,-]. **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	If E0100A through E0100B and E0100Z are all active, then the following rules apply: a) If E0100Z=[0], then at least one item from E0100A through E0100B must equal [1]. b) If E0100Z=[1], then all items from E0100A through E0100B must equal [0]. c) If E0100Z=[-], then at least one item from E0100A through E0100B must equal [-] and all remaining items must equal [0,-]. **Items:** E0100A Psychosis: hallucinations E0100B Psychosis: delusions E0100Z Psychosis: none of the above
-3504	None of above	Fatal	If F0800A through F0800T and F0800Z are all active, then the following rules apply: a) If F0800Z=[0], then at least one item from F0800A through F0800T must equal [1]. b) If F0800Z=[1], then all items from F0800A through F0800T must equal [0]. c) If F0800Z=[-], then at least one item from F0800A through F0800T must equal [-] and all remaining items must equal [0,-]. **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

ID	Type	Severity	Text/Items		
			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
-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
-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, Chrohn's, inflam bowel disease
				I1400	Benign prostatic hyperplasia (BPH)
				I1500	Renal insufficiency, renal failure, ESRD

ID	Type	Severity	Text/Items		
			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

ID	Type	Severity	Text/Items		
			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	If J0800A through J0800D and J0800Z are all active, then the following rules apply: a) If J0800Z=[0], then at least one item from J0800A through J0800D must equal [1]. b) If J0800Z=[1], then all items from J0800A through J0800D must equal [0]. c) If J0800Z=[-], then at least one item from J0800A through J0800D must equal [-] and all remaining items must equal [0,-].		
			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	a) If J1100Z=[0], then at least one active item from J1100A through J1100C must equal [1]. b) If J1100Z=[1], then all active items from J1100A through J1100C must equal [0]. c) If J1100Z=[-], then at least one active item from J1100A through J1100C must equal [-] and all remaining active items must equal [0,-].		
			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	a) If J1550Z=[0], then at least one active item from J1550A through J1550D must equal [1]. b) If J1550Z=[1], then all active items from J1550A through J1550D must equal [0]. c) If J1550Z=[-], then at least one active item from J1550A through J1550D must equal [-] and all remaining active items must equal [0,-].		
			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

ID	Type	Severity	Text/Items
-3511	None of above	Fatal	If K0100A through K0100D and K0100Z are all active, then the following rules apply: a) If K0100Z=[0], then at least one item from K0100A through K0100D must equal [1]. b) If K0100Z=[1], then all items from K0100A through K0100D must equal [0]. c) If K0100Z=[-], then at least one item from K0100A through K0100D must equal [-] and all remaining items must equal [0,-]. **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	If L0200Z is active, and any of L0200A through L0200G are active, then the following rules apply: a) If L0200Z=[0], then at least one active item from L0200A through L0200G must equal [1]. b) If L0200Z=[1], then all active items from L0200A through L0200G must equal [0]. c) If L0200Z=[-], then at least one active item from L0200A through L0200G must equal [-] and all remaining active items must equal [0,-]. **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	If M1200A through M1200I and M1200Z are all active, then the following rules apply: a) If M1200Z=[0], then at least one item from M1200A through M1200I must equal [1]. b) If M1200Z=[1], then all items from M1200A through M1200I must equal [0]. c) If M1200Z=[-], then at least one item from M1200A through M1200I must equal [-] **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

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
-3517	Skip pattern	Fatal	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		
			Items:	A2400A	Has resident had Medicare-covered stay
				A2400B	Start date of most recent Medicare stay
				A2400C	End date of most recent Medicare stay
-3518	Skip pattern	Fatal	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 [^].		
			Items:	A0310A	Type of assessment: OBRA
				A2200	Previous asmt reference date for signif correction
-3523	Skip pattern	Fatal	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
				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
-3524	Skip pattern	Fatal	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 [-].		
			Items:	B0100	Comatose
				E0800	Rejection of care: presence and frequency
				E0900	Wandering: presence and frequency
-3525	Skip pattern	Fatal	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

ID	Type	Severity	Text/Items
-3527	Consistency	Fatal	a) If C0100=[0,^], then all active items from C0200 through C0600 must equal [^]. b) If C0100=[1], then all active items from C0200 through C0600 must not equal [^]. c) If C0100=[-], then all active items from C0200 through C0500 must equal [-]. d) If C0100=[-], then if C0600 is active it must equal [1,-]. **Items:** 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	a) If C0600=[0], then all active items from C0700 through C1000 must equal [^]. b) If C0600=[1], then all active items from C0700 through C1000 must not equal [^]. c) If C0600=[-], then all active items from C0700 through C1000 must equal [-]. d) If C0600=[^] and C0100=[0], then all active items from C0700 through C1000 must not equal [^]. **Items:** 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	a) If E0300=[0,^], then all active items from E0500A through E0600C must equal [^]. b) If E0300=[1], then all active items from E0500A through E0600C must not equal [^]. c) If E0300=[-], then all active items from E0500A through E0600C must equal [-]. **Items:** E0300 Overall presence of behavioral symptoms E0500A Behav symptoms put res at risk for illness/injury E0500B Behav symptoms interfere with resident care

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
-3532	Skip pattern	Fatal	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
-3533	Consistency	Fatal	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

ID	Type	Severity	Text/Items
-3534	Skip pattern	Fatal	a) If F0700=[0], then all active items from F0800A through F0800Z must equal [^]. b) If F0700=[1], then all active items from F0800A through F0800Z must not equal [^]. c) If F0700=[-], then all active items from F0800A through F0800Z must equal [-]. **Items:** 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	a) If H0200A=[0,9], then if H0200B is active it must equal [^]. b) If H0200A=[1], then if H0200B is active it must not equal [^]. c) If H0200A=[-], then if H0200B is active it must equal [-]. **Items:** H0200A Urinary toileting program: has been attempted H0200B Urinary toileting program: response
-3537	Skip pattern	Fatal	a) If H0200A=[0], then if H0200C is active it must equal [^]. b) If H0200A=[1,9], then if H0200C is active it must not equal [^]. c) If H0200A=[-], then if H0200C is active it must equal [-]. **Items:** H0200A Urinary toileting program: has been attempted

ID	Type	Severity	Text/Items
			Items: H0200C Urinary toileting program: current program/trial
-3542	Skip pattern	Fatal	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
-3544	Skip pattern	Fatal	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
-3545	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
-3546	Skip pattern	Fatal	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
-3547	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
-3549	Skip pattern	Fatal	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 [-].
			Items: M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit/reentry
-3550	Skip pattern	Fatal	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 [-].

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

ID	Type	Severity	Text/Items
			Items: X0500 Correction: resident social security number
-3566	Format	Fatal	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
-3568	Format	Fatal	If A0100A is not equal to [^], then it must be 10 digits long. **Items:** A0100A Facility National Provider Identifier (NPI)
-3586	Skip pattern	Fatal	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]. **Items:** C0500 BIMS res interview: summary score C0600 Staff asmt mental status: conduct asmt

ID	Type	Severity	Text/Items
-3588	Consistency	Fatal	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. 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 [-]. 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. b) If any of the items in Column 2 are equal to [-], then count their values as zero in computing the sum. 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). 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). e) If the number of missing items in Column 2 (as defined above) is equal to three or more, then D0600 must equal [-]. 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. **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

ID	Type	Severity	Text/Items
-3590	Consistency	Fatal	If F0300 is equal to [1], then the following rules apply: 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, -]. 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, -]. c) If all items from F0400A through F0500H are equal to [-], then F0600 must 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

ID	Type	Severity	Text/Items
-3595	None of above	Fatal	If M0100A through M0100C and M0100Z are all active, then the following rules apply: a) If M0100Z=[0], then at least one item from M0100A through M0100C must equal [1]. b) If M0100Z=[1], then all items from M0100A through M0100C must equal [0]. c) If M0100Z=[-], then at least one item from M0100A through M0100C must equal [-]

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

ID	Type	Severity	Text/Items
-3605	Consistency	Fatal	a) If J1800=[0], then all active items from J1900A through J1900C must equal [^]. 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]. c) If J1800=[-], then all active items from J1900A through J1900C must equal [-].

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

ID	Type	Severity	Text/Items
-3609	Skip pattern	Fatal	If B0100=[1], then all active items from B0200 through F0800Z 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
	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

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

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

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

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

Coding of A0410 depends upon the resident's status on the target date for the assessment. The target date is defined as follows:

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).

Given the target date, the following rules apply:

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).

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).

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).

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.

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.

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	The following rules refer to the "BIMS component items" which are C0200, C0300A, C0300B, C0300C, C0400A, C0400B, and C0400C. 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. 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]. c) If some, but not all, of the BIMS component items have a value of [-], then C0500 must equal [99]. d) If all of the BIMS component items have a value of [-], then C0500 must equal [-].		
			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	If M0300B1 is equal to [1-9] and M0300B2 is active, then one of the following must be true: a) M0300B2 must be equal to [-], OR b) M0300B2 must be equal to [0-9] and must be less than or equal to M0300B1.		
			Items:	M0300B1	Stage 2 pressure ulcers: number present
				M0300B2	Stage 2 pressure ulcers: number at admit/reentry
-3663	Consistency	Fatal	If M0300C1 is equal to [1-9] and M0300C2 is active, then one of the following must be true: a) M0300C2 must be equal to [-], OR b) M0300C2 must be equal to [0-9] and must be less than or equal to M0300C1.		

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	If M0300D1 is equal to [1-9] and M0300D2 is active, then one of the following must be true: a) M0300D2 must be equal to [-], OR b) M0300D2 must be equal to [0-9] and must be less than or equal to M0300D1. **Items:** M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit/reentry
-3665	Consistency	Fatal	If M0300E1 is equal to [1-9], then one of the following must be true: a) M0300E2 must be equal to [-], OR b) M0300E2 must be equal to [0-9] and must be less than or equal to M0300E1. **Items:** M0300E1 Unstaged due to drssng/dvc: num present M0300E2 Unstaged due to drssng/dvc: num at admit/reentry
-3666	Consistency	Fatal	If M0300F1 is equal to [1-9] and M0300F2 is active, then one of the following must be true: a) M0300F2 must be equal to [-], OR b) M0300F2 must be equal to [0-9] and must be less than or equal to M0300F1. **Items:** M0300F1 Unstaged slough/eschar: number present M0300F2 Unstaged slough/eschar: number at admit/reentry
-3667	Consistency	Fatal	If M0300G1 is equal to [1-9], then one of the following must be true: a) M0300G2 must be equal to [-], OR b) M0300G2 must be equal to [0-9] and must be less than or equal to M0300G1. **Items:** M0300G1 Unstageable - deep tissue injury: # present M0300G2 Unstageable - deep tissue injury: # at adm/reent
-3669	None of above	Fatal	If A1550A through A1550E and A1550Z are all active, then the following rules apply: a) If A1550Z=[0], then at least one item from A1550A through A1550E must equal [1]. b) If A1550Z=[1], then all items from A1550A through A1550E must equal [0]. c) If A1550Z=[-], then at least one item from A1550A through A1550E must equal [-] and all remaining items must equal [0,-]. **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

ID	Type	Severity	Text/Items
-3675	Consistency	Fatal	a) If E0200A or E0200B or E0200C is equal to [1,2,3], then if E0300 is active it must be equal to [1]. b) If E0200A and E0200B and E0200C are all equal to [0], then if E0300 is active it must be equal to [0]. 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,-]. **Items:** 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	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. **Items:** 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 A0800 — Gender 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

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
				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
				A2122B	Provider Trans - Health Info Exchange

ID	Type	Severity	Text/Items		
			Items:	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
				C1000	Cognitive skills for daily decision making

ID	Type	Severity	Text/Items		
			Items:	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
				D0500G1	PHQ staff: trouble concentrating - presence

ID	Type	Severity	Text/Items		
			Items:	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
				F0500A	Res interview: have books, newspaper, mags to read

ID	Type	Severity	Text/Items		
			Items:	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
				GG0110B	Prior Device Use - Mtrzd wheelchair and/or scooter

ID	Type	Severity	Text/Items		
			Items:	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 (Dischg 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)
				GG0170A1	Roll left and right (Start of Stay Perf)

ID	Type	Severity	Text/Items		
			Items:	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)
				GG0170N1	4 steps (Start of Stay Perf)

ID	Type	Severity	Text/Items		
			Items:	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
				I0300	Atrial fibrillation and other dysrhythmias

ID	Type	Severity	Text/Items		
			Items:	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, Chrohn'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
				I5000	Paraplegia

ID	Type	Severity	Text/Items		
			Items:	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
				J1100A	Short breath/trouble breathing: with exertion

ID	Type	Severity	Text/Items		
			Items:	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 srgry - rpr frctrd shoulder/arm
				J2510	Ortho srgry - rpr frctrd pelvis/hip/leg/knee/ankle
				J2520	Ortho srgry - rpr but not replace joints
				J2530	Ortho srgry - rpr other bones
				J2599	Ortho srgry - other
				J2600	Neuro surgery - brain, surrounding tissue
				J2610	Neuro surgery - nervous system
				J2620	Neuro surgery - nsrt neural/brain neurostimulators
				J2699	Neuro surgery - other

ID	Type	Severity	Text/Items		
			Items:	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
				K0520Z3	Nutritional Approaches (7-day): None

ID	Type	Severity	Text/Items		
			Items:	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
				M1200H	Skin/ulcer/injry treat: apply ointments/meds

ID	Type	Severity	Text/Items		
			Items:	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)
				O0110A2C	Treatment: Chemo - IV (Discharge)

ID	Type	Severity	Text/Items		
			Items:	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)
				O0110G3C	Therapies: CPAP (Discharge)

ID	Type	Severity	Text/Items		
			Items:	O0110H1A	Other: IV Medications (Admission)
				O0110H1B	Other: IV Medications (14 days)
				O0110H1C	Other: IV Medications (Discharge)
				O0110H2A	Other: IV - Vasoactive medications (Admission)
				O0110H2C	Other: IV - Vasoactive medications (Discharge)
				O0110H3A	Other: IV - Antibiotics (Admission)
				O0110H3C	Other: IV - Antibiotics (Discharge)
				O0110H4A	Other: IV - Anticoagulation (Admission)
				O0110H4C	Other: IV - Anticoagulation (Discharge)
				O0110H10A	Other: IV - Other (Admission)
				O0110H10C	Other: IV - Other (Discharge)
				O0110I1A	Other: Transfusions (Admission)
				O0110I1B	Other: Transfusions (14 days)
				O0110I1C	Other: Transfusions (Discharge)
				O0110J1A	Other: Dialysis (Admission)
				O0110J1B	Other: Dialysis (14 days)
				O0110J1C	Other: Dialysis (Discharge)
				O0110J2A	Other: Hemodialysis (Admission)
				O0110J2C	Other: Hemodialysis (Discharge)
				O0110J3A	Other: Peritoneal dialysis (Admission)
				O0110J3C	Other: Peritoneal dialysis (Discharge)
				O0110K1B	Other: Hospice care (14 days)
				O0110M1B	Other: Isolation - Infectious Disease (14 days)
				O0110O1A	Other: IV Access (Admission)
				O0110O1B	Other: IV Access (14 days)
				O0110O1C	Other: IV Access (Discharge)
				O0110O2A	Other: IV Access - Peripheral (Admission)
				O0110O2C	Other: IV Access - Peripheral (Discharge)
				O0110O3A	Other: IV Access - Midline (Admission)
				O0110O3C	Other: IV Access - Midline (Discharge)
				O0110O4A	Other: IV Access - Central (Admission)
				O0110O4C	Other: IV Access - Central (Discharge)
				O0110Z1A	Other: None of the above (Admission)
				O0110Z1B	Other: None of the above (14 days)
				O0110Z1C	Other: None of the above (Discharge)
				O0250A	Was influenza vaccine received

ID	Type	Severity	Text/Items		
			Items:	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
				O0400D2	Respiratory therapy: number of days
				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

ID	Type	Severity	Text/Items		
			Items:	Q0500C	Q0500B info source
				Q0550A	Reasking resident preference
				Q0550C	Q0550A info source
				Q0610A	Referral
				Q0620	Reason referral not made
				R0310	Living Situation
				R0320A	Food run out before money to buy more
				R0320B	Food did not last and no money to buy more
				R0330	Utilities
				R0340	Transportation
				V0100A	Prior OBRA reason for assessment
				V0100B	Prior PPS reason for assessment
				V0200A01A	CAA-Delirium: triggered
				V0200A01B	CAA-Delirium: plan
				V0200A02A	CAA-Cognitive loss/dementia: triggered
				V0200A02B	CAA-Cognitive loss/dementia: plan
				V0200A03A	CAA-Visual function: triggered
				V0200A03B	CAA-Visual function: plan
				V0200A04A	CAA-Communication: triggered
				V0200A04B	CAA-Communication: plan
				V0200A05A	CAA-ADL functional/rehab potential: triggered
				V0200A05B	CAA-ADL functional/rehab potential: plan
				V0200A06A	CAA-Urinary incont/indwell catheter: triggered
				V0200A06B	CAA-Urinary incont/indwell catheter: plan
				V0200A07A	CAA-Psychosocial well-being: triggered
				V0200A07B	CAA-Psychosocial well-being: plan
				V0200A08A	CAA-Mood state: triggered
				V0200A08B	CAA-Mood state: plan
				V0200A09A	CAA-Behavioral symptoms: triggered
				V0200A09B	CAA-Behavioral symptoms: plan
				V0200A10A	CAA-Activities: triggered
				V0200A10B	CAA-Activities: plan
				V0200A11A	CAA-Falls: triggered
				V0200A11B	CAA-Falls: plan
				V0200A12A	CAA-Nutritional status: triggered
				V0200A12B	CAA-Nutritional status: plan

ID	Type	Severity	Text/Items		
			Items:	V0200A13A	CAA-Feeding tubes: triggered
				V0200A13B	CAA-Feeding tubes: plan
				V0200A14A	CAA-Dehydration/fluid maintenance: triggered
				V0200A14B	CAA-Dehydration/fluid maintenance: plan
				V0200A15A	CAA-Dental care: triggered
				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
				X0300	Correction: resident gender
				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: inact reasons - event did not occur
				X1050Z	Correction: inact reasons - other reason
				Z0200C	State case mix: Short Stay Assessment

ID	Type	Severity	Text/Items
-3677	Format	Fatal	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. 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". **Items:** A1600 Entry date (date of admission/reentry in facility) A1900 Admission date 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 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

ID	Type	Severity	Text/Items
-3678	Format	Fatal	Formatting of Birthdate: 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. Note that if a date in YYYYMMDD format is submitted, it must be 8 characters in length and each of the 8 characters must contain the digits 0 (zero) through 9. YYYY, MM, and DD must be zero filled, where necessary. For example, January 1, 1909 must be submitted as "19090101". If a date is submitted in YYYYMM format, it must be 6 characters in length and each of the 6 characters must contain the digits 0 (zero) through 9. YYYY and MM must be zero filled, where necessary. For example, January, 1909 must be submitted as "190901". If a date is submitted in YYYY format, it must be 4 characters in length and each of the 4 characters must contain the digits 0 (zero) through 9. YYYY must be zero filled, **Items:** A0900 Birthdate X0400 Correction: resident birth date
-3679	Format	Fatal	Values of Numeric Items: 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. **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

ID	Type	Severity	Text/Items		
			Items:	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
				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
				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

ID	Type	Severity	Text/Items		
			Items:	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
-3680	Format	Fatal	Formatting of Integer Numeric Items: Only integer values and the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report will be accepted for this item. Leading zeroes may be included or omitted from the submitted value as long as the resulting length of the string does not exceed the allowed maximum length for the item. A decimal point and decimal values may not be included. The following examples are allowable if the value to be submitted is equal to [1] and the maximum length is equal to 2: [1], [01]. The following values are NOT allowed and will lead to a fatal error: [1.], [1.0], [01.], [01.0], [1.1], [01.1], [1.01].		
			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

ID	Type	Severity	Text/Items		
			Items:	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
				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	a) If the SFTWR_VNDR_ID is not equal to [^], then SFTWR_VNDR_NAME and SFTWR_VNDR_EMAIL_ADR must not equal [^]. b) If the SFTWR_VNDR_ID is equal to [^], then SFTWR_VNDR_NAME and SFTWR_VNDR_EMAIL_ADR must equal [^].		
			Items:	SFTWR_VNDR_ID	Software vendor federal employer tax ID

ID	Type	Severity	Text/Items
			Items: SFTWR_VNDR_NAME Software vendor company name
			SFTWR_VNDR_EMAIL_ADR Software vendor email address
-3687	Format	Fatal	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].
			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
-3688	Format	Fatal	Formatting of Alphanumeric 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]. b) The letters [A] through [Z] and [a] through [z].
			Items: A0100B Facility CMS Certification Number (CCN) A0100C State provider number A0600B Medicare number A0700 Medicaid number
-3690	Format	Fatal	Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, and 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: a) The numeric characters: [0] through [9]. b) The letters [A] through [Z] and [a] through [z]. c) The character [-]. d) The following special characters: [@] (at sign) ['] (single quote) [/] (forward slash) [+] (plus sign) [,] (comma) [.] (period) [_] (underscore) e) Embedded spaces (spaces surrounded by any of the characters listed above). For example, [LEGAL TEXT] would be allowed.

ID	Type	Severity	Text/Items		
			Items:	SFTWR_PROD_VRSN_CD	Software product version code
				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
				X0200C	Correction: resident last name
				X1100A	Correction: attestor first name
				X1100B	Correction: attestor last name
-3691	Format	Fatal	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: a) The numeric characters: [0] through [9]. b) The letters [A] through [Z] and [a] through [z]. c) The following special characters: [@] (at sign) ['] (single quote) [/] (forward slash) [+] (plus sign) [,] (comma) [.] (period) [_] (underscore)		
			Items:	A0500B	Resident middle initial

ID	Type	Severity	Text/Items
-3692	Format	Fatal	Formatting of email address. Any valid email address will be accepted. The text string may contain any printable characters except the following: ' 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) **Items:** SFTWR_VNDR_EMAIL_ADR Software vendor email address
-3693	Format	Fatal	FAC_ID is the facility/provider ID. 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. 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. **Items:** FAC_ID Assigned facility/provider submission ID
-3695	Consistency	Warning	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. **Items:** A0100B Facility CMS Certification Number (CCN)
-3699	Consistency	Fatal	***THIS EDIT WAS DELETED IN V3.10.0*** **Items:** A0310B Type of assessment: PPS
-3702	Format	Fatal	This is a required text item. A valid non-blank value must be submitted. **Items:** FAC_ID Assigned facility/provider submission ID A0500A Resident first name A0500C Resident last name

ID	Type	Severity	Text/Items
-3706	Consistency	Fatal	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. **Items:** A0200 Type of provider
-3707	Consistency	Fatal	a) If A0200=[2] (if the provider is a swing bed provider), then A0410 (submission requirement) must equal [3] (it cannot equal [1,2]). b) If A0200=[1] (the provider is a nursing home), then A0410 must equal [2,3]. c) For both nursing homes and swing bed providers, A0410 must not be equal to [1]. **Items:** A0200 Type of provider A0410 Submission requirement
-3717	Consistency	Fatal	a) If D0500A1 is equal to [0], then D0500A2 must be equal to [0, -]. b) If D0500A1 is equal to [1], then D0500A2 must be equal to [0,1,2,3,-]. c) If D0500A1 is equal to [-], then D0500A2 must be equal to [-]. **Items:** D0500A1 PHQ staff: little interest or pleasure - presence D0500A2 PHQ staff: little interest or pleasure - frequency
-3718	Consistency	Fatal	a) If D0500B1 is equal to [0], then D0500B2 must be equal to [0, -]. b) If D0500B1 is equal to [1], then D0500B2 must be equal to [0,1,2,3,-]. c) If D0500B1 is equal to [-], then D0500B2 must be equal to [-]. **Items:** D0500B1 PHQ staff: feeling down, depressed - presence D0500B2 PHQ staff: feeling down, depressed - frequency
-3719	Consistency	Fatal	a) If D0500C1 is equal to [0], then D0500C2 must be equal to [0, -]. b) If D0500C1 is equal to [1], then D0500C2 must be equal to [0,1,2,3,-]. c) If D0500C1 is equal to [-], then D0500C2 must be equal to [-]. **Items:** D0500C1 PHQ staff: trouble with sleep - presence D0500C2 PHQ staff: trouble with sleep - frequency
-3720	Consistency	Fatal	a) If D0500D1 is equal to [0], then D0500D2 must be equal to [0, -]. b) If D0500D1 is equal to [1], then D0500D2 must be equal to [0,1,2,3,-]. c) If D0500D1 is equal to [-], then D0500D2 must be equal to [-]. **Items:** D0500D1 PHQ staff: feeling tired/little energy - presence D0500D2 PHQ staff: feeling tired/little energy - frequency

ID	Type	Severity	Text/Items
-3721	Consistency	Fatal	a) If D0500E1 is equal to [0], then D0500E2 must be equal to [0, -]. b) If D0500E1 is equal to [1], then D0500E2 must be equal to [0,1,2,3,-]. c) If D0500E1 is equal to [-], then D0500E2 must be equal to [-]. **Items:** D0500E1 PHQ staff: poor appetite or overeating - presence D0500E2 PHQ staff: poor appetite or overeating - frequency
-3722	Consistency	Fatal	a) If D0500F1 is equal to [0], then D0500F2 must be equal to [0, -]. b) If D0500F1 is equal to [1], then D0500F2 must be equal to [0,1,2,3,-]. c) If D0500F1 is equal to [-], then D0500F2 must be equal to [-]. **Items:** D0500F1 PHQ staff: feeling bad about self - presence D0500F2 PHQ staff: feeling bad about self - frequency
-3723	Consistency	Fatal	a) If D0500G1 is equal to [0], then D0500G2 must be equal to [0, -]. b) If D0500G1 is equal to [1], then D0500G2 must be equal to [0,1,2,3,-]. c) If D0500G1 is equal to [-], then D0500G2 must be equal to [-]. **Items:** D0500G1 PHQ staff: trouble concentrating - presence D0500G2 PHQ staff: trouble concentrating - frequency
-3724	Consistency	Fatal	a) If D0500H1 is equal to [0], then D0500H2 must be equal to [0, -]. b) If D0500H1 is equal to [1], then D0500H2 must be equal to [0,1,2,3,-]. c) If D0500H1 is equal to [-], then D0500H2 must be equal to [-]. **Items:** D0500H1 PHQ staff: slow, fidgety, restless - presence D0500H2 PHQ staff: slow, fidgety, restless - frequency
-3725	Consistency	Fatal	a) If D0500I1 is equal to [0], then D0500I2 must be equal to [0, -]. b) If D0500I1 is equal to [1], then D0500I2 must be equal to [0,1,2,3,-]. c) If D0500I1 is equal to [-], then D0500I2 must be equal to [-]. **Items:** D0500I1 PHQ staff: thoughts better off dead - presence D0500I2 PHQ staff: thoughts better off dead - frequency
-3726	Consistency	Fatal	a) If D0500J1 is equal to [0], then D0500J2 must be equal to [0, -]. b) If D0500J1 is equal to [1], then D0500J2 must be equal to [0,1,2,3,-]. c) If D0500J1 is equal to [-], then D0500J2 must be equal to [-]. **Items:** D0500J1 PHQ staff: short-tempered - presence D0500J2 PHQ staff: short-tempered - frequency

ID	Type	Severity	Text/Items
-3735	Skip pattern	Fatal	a) If N0300=[0], then all active items from N0350A through N0350B must equal [^]. b) If N0300=[1-7], then all active items from N0350A through N0350B must not equal [^]. c) If N0300=[-], then all active items from N0350A through N0350B must equal [-]. **Items:** N0300 Number of days injectable medications received N0350A Insulin: insulin injections N0350B Insulin: orders for insulin
-3736	Skip pattern	Fatal	a) If O0250A=[0], then if O0250C is active it must not equal [^]. b) If O0250A=[1], then if O0250C is active it must equal [^]. c) If O0250A=[-], then if O0250C is active it must equal [-]. **Items:** O0250A Was influenza vaccine received O0250C If influenza vaccine not received, state reason
-3744	Consistency	Fatal	If A0310E=[1], then all active items from V0100A through V0100F must equal [^]. **Items:** A0310E First assessment since most recent entry 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
-3746	Consistency	Fatal	If A0050 (formerly X0100)=[1], then all active items from X0150 through X1100E must equal [^]. **Items:** A0050 Type of transaction (formerly X0100) X0150 Correction: type of provider X0200A Correction: resident first name X0200C Correction: resident last name X0300 Correction: resident gender 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)

ID	Type	Severity	Text/Items		
			Items:	X0700A	Correction: assessment reference date
				X0700B	Correction: discharge date
				X0700C	Correction: entry date
				X0800	Correction: correction number
				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: inact reasons - event did not occur
				X1050Z	Correction: inact reasons - other reason
				X1100A	Correction: attestor first name
				X1100B	Correction: attestor last name
				X1100E	Correction: attestation date
-3748	Consistency	Fatal	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: inact reasons - event did not occur
				X1050Z	Correction: inact 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)

ID	Type	Severity	Text/Items		
			Items:	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
				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
-3753	Consistency	Fatal	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.		

ID	Type	Severity	Text/Items
			Items: N0300 Number of days injectable medications received
			N0350A Insulin: insulin injections
-3775	Consistency	Fatal	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 [^]. **Items:** X0600F Correction: entry/discharge reporting X0700A Correction: assessment reference date X0700B Correction: discharge date X0700C Correction: entry date
-3778	Consistency	Fatal	Completion of A1550A through A1550Z, when active. a) If A0310A is equal to [02,06,99], then A1550A through A1550Z must equal [^]. 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 [^]. 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 [^]. 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 [^]. For the rules above, age should be computed in the following way using A0900 (birth date) and A2300 (assessment reference date): 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. 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. c) Provisionally compute age (in years) by subtracting the year in A0900 (as modified above, if necessary) from the year in A2300. d) If the month in A2300 is less than the month in A0900, then subtract 1 from the provisional age computed in (c) above. 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. **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

ID	Type	Severity	Text/Items		
			Items:	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	a) If A0050 (formerly X0100)=[2], then all active items from X0900A through X0900Z must not equal [^]. b) If A0050 (formerly X0100)=[3], then all active items from X0900A through X0900Z must equal [^].		
			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
-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: inact reasons - event did not occur
				X1050Z	Correction: inact 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

ID	Type	Severity	Text/Items
-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 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
-3786	Consistency	Fatal	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

ID	Type	Severity	Text/Items		
			Items:	J0800Z	Staff pain asmt: none of these signs observed
				J0850	Staff pain asmt: frequency of pain
-3787	Skip pattern	Fatal	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
-3792	Consistency	Fatal	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
-3793	Format	Fatal	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
				SFTWR_VNDR_NAME	Software vendor company name
				SFTWR_VNDR_EMAIL_ADR	Software vendor email address
				SFTWR_PROD_NAME	Software product name
				SFTWR_PROD_VRSN_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

ID	Type	Severity	Text/Items		
			Items:	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
-3794	Consistency	Fatal	a) If SFTWR_PROD_NAME is equal to [^], then SFTWR_PROD_VRSN_CD must be equal to [^]. b) If SFTWR_PROD_NAME is not equal to [^], then SFTWR_PROD_VRSN_CD must not be equal to [^].		
			Items:	SFTWR_PROD_NAME	Software product name
				SFTWR_PROD_VRSN_CD	Software product version code
-3795	Consistency	Fatal	If A0050 (formerly X0100) is equal to [2], then at least one item from X0900A through X0900Z must equal [1].		
			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
-3796	Consistency	Fatal	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.		

ID	Type	Severity	Text/Items

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

-3797 Consistency Fatal

a) If A0310A is equal to [01] OR A0310E is equal to [1], then all active items J1700A through J1700C must not equal [^].

b) If A0310A is not equal to [01] AND A0310E is not equal to [1], then all active items J1700A through J1700C must equal [^].

Items:

A0310A	Type of assessment: OBRA
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

-3802 Format Fatal

Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, Ampersands, and Other 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:
a) The numeric characters: [0] through [9].
b) The letters [A] through [Z] and [a] through [z].
c) The character [-].
d) The following special characters:
[&] (ampersand)
[@] (at sign)
['] (single quote)
[/] (forward slash)
[+] (plus sign)
[,] (comma)
[.] (period)
[_] (underscore)
e) Embedded spaces (spaces surrounded by any of the characters listed above). For example, [LEGAL TEXT] would be allowed.

Items:

SFTWR_VNDR_NAME	Software vendor company name
SFTWR_PROD_NAME	Software product name
Z0100A	Medicare Part A: HIPPS code

ID	Type	Severity	Text/Items		
			Items:	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
-3805	Consistency	Fatal	If F0300 is equal to [0], then all active items from F0800A through F0800Z must not equal [^].		
			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
				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
-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

ID	Type	Severity	Text/Items
-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
	S0125	Prior Residence Town Code
	S0130	Highest Education Completed
	S0140	Physician License Number
	S0141	Physician Name
	S0150	State Resident ID
	S0153	Resident Identifier
	S0160	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
	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

ID	Type	Severity	Text/Items		
			Items:	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
				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 Agncy Rfrrl Dcsn - Active disch in prcss
				S0195B	Lcl Cntct Agncy Rfrrl Dcsn - Legal reasons
				S0195C	Lcl Cntct Agncy Rfrrl Dcsn - Clinical reasons
				S0195D	Lcl Cntct Agncy Rfrrl Dcsn - Behavioral reasons
				S0195Y	Lcl Cntct Agncy Rfrrl Dcsn - Other reasons
				S0195Z	Lcl Cntct Agncy Rfrrl 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

ID	Type	Severity	Text/Items		
			Items:	S0513	PASRR Screening Outcome
				S0514	Was a PASRR Level I determination completed?
				S0515	Mst rcnt PASRR Lvl I or II determination cmpltn 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
				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
				S1150	Active TBI Diagnosis
				S1200A	Primary/secondary SMI dx: schizophrenia

ID	Type	Severity	Text/Items		
			Items:	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
				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
				S3100A	Contractures: Hand
				S3100B	Contractures: Wrist
				S3100C	Contractures: Elbow
				S3100D	Contractures: Shoulder

ID	Type	Severity	Text/Items		
			Items:	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
				S4000A	Harm: Self Injury/Self-injurious attempt
				S4000B	Harm: Attempt was to kill self
				S4000C	Harm: Considered injuring self
				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

ID	Type	Severity	Text/Items		
			Items:	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
				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

ID	Type	Severity	Text/Items		
			Items:	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
				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

ID	Type	Severity	Text/Items		
			Items:	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
				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

ID	Type	Severity	Text/Items		
			Items:	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
				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

ID	Type	Severity	Text/Items		
			Items:	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
				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

ID	Type	Severity	Text/Items		
			Items:	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
				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

ID	Type	Severity	Text/Items		
			Items:	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	NY Medicaid add-on eligibility
				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
				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

ID	Type	Severity	Text/Items
-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

ID	Type	Severity	Text/Items
-3810	Consistency	Warning	RECORD SUBMISSION TIMING RULES 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]). RULES FOR NEW RECORDS (WHERE A0050=[1]): The following rules apply to new records, where A0050=[1]. a) If A0310F is equal to [01] (entry record), then submission date - A1600 (entry date) should be less than or equal to 14 days. 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. 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. 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. RULES FOR MODIFICATIONS/INACTIVATIONS (WHERE A0050=[2,3]): 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. **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	a) If A1500=[1], then all active items from A1510A through A1510C must not equal [^]. b) If A1500=[0,9,^], then all active items from A1510A through A1510C must equal [^]. **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

ID	Type	Severity	Text/Items
-3826	Consistency	Fatal	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 [^].

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	a) If M1040Z=[0], then at least one active item from M1040A through M1040H must equal [1]. b) If M1040Z=[1], then all active items from M1040A through M1040H must equal [0]. c) If M1040Z=[-], then at least one active item from M1040A through M1040H must equal [-] and all remaining active items must equal [0,-].

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)

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

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	FORMATTING OF ICD-10 DIAGNOSIS CODES ICD-10 diagnosis codes must conform with the following formatting rules: a) Character 1 must be alphabetic [A-Z,a-z]. b) Character 2 must be numeric [0-9]. c) Character 3 must be numeric [0-9] or alphabetic [A-Z,a-z]. d) Character 4 must be a decimal point. e) Characters 5 through 8 must be numeric [0-9], alphabetic [A-Z,a-z], or caret [^]. f) If any character 5 through 8 is equal to [^], all subsequent characters must equal [^].		
			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

ID	Type	Severity	Text/Items		
			Items:	I8000J	Additional active ICD diagnosis 10
-3853	Consistency	Fatal	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.		
			Items:	A0100B	Facility CMS Certification Number (CCN)
-3860	Consistency	Fatal	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
-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)

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

ID	Type	Severity	Text/Items
-3882	None of above	Fatal	If GG0110A through GG0110E and GG0110Z are all active, then the following rules apply: a) If GG0110Z=[0], then at least one of the items GG0110A through GG0110E must equal [1]. b) If GG0110Z=[1], then all items from GG0110A through GG0110E must equal [0]. c) If GG0110Z=[-], then at least one item from GG0110A through GG0110E must **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	a) If M0300B1=[1-9], then if M0300B2 is active, it must not equal [^]. b) If M0300B1=[0,^], then if M0300B2 is active, it must equal [^]. c) If M0300B1=[-], then if M0300B2 is active, it must equal [-]. **Items:** M0300B1 — Stage 2 pressure ulcers: number present M0300B2 — Stage 2 pressure ulcers: number at admit/reentry
-3887	Consistency	Fatal	a) If M0210=[0], then all active items from M0300A through M0300G2 must equal [^]. b) If M0210=[-], then all active items from M0300A through M0300G2 must equal [-]. **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

ID	Type	Severity	Text/Items
-3892	Skip pattern	Fatal	(a) If GG0170I1=[07,09,10,88,^], then GG0170J1, GG0170K1, and GG0170L1 must equal [^]. (b) If GG0170I1=[06,05,04,03,02,01], then GG0170J1, GG0170K1, and GG0170L1 must not equal [^]. (c) If GG0170I1=[-], then GG0170J1, GG0170K1, and GG0170L1 must equal [-]. **Items:** 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	(a) If GG0170I3=[07,09,10,88,^], then GG0170J3, GG0170K3, and GG0170L3 must equal [^]. (b) If GG0170I3=[06,05,04,03,02,01], then GG0170J3, GG0170K3, and GG0170L3 must not equal [^]. (c) If GG0170I3=[-], then GG0170J3, GG0170K3, and GG0170L3 must equal [-]. **Items:** 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	a) If N2001=[0,9], then N2003 must be equal to [^]. b) If N2001=[1], then N2003 must not be equal to [^]. (c) If N2001=[-], then N2003 must equal [-]. **Items:** N2001 Drug Regimen Review N2003 Medication Follow-up
-3897	Consistency	Warning	If A0310B=[01], then the following warning message will apply if a dash is submitted for this item: 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. **Items:** A0310B Type of assessment: PPS A1110A Preferred language A1110B Does the patient need or want an interpreter

ID	Type	Severity	Text/Items		
			Items:	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)
				GG0130C1	Toileting hygiene (Start of Stay Perf)

ID	Type	Severity	Text/Items		
			Items:	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
				K0520C1	Nutritional Approaches (Admission): Mech Alt Diet

ID	Type	Severity	Text/Items		
			Items:	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)
				O0110E1A	Therapies: Tracheostomy Care (Admission)

ID	Type	Severity	Text/Items		
			Items:	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
				R0310	Living Situation
				R0320A	Food run out before money to buy more
				R0320B	Food did not last and no money to buy more
				R0330	Utilities
				R0340	Transportation
-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 [-].		

ID	Type	Severity	Text/Items
			Items: GG0170N1 — 4 steps (Start of Stay Perf)
			GG0170O1 — 12 steps (Start of Stay Perf)
-3900	Skip pattern	Fatal	(a) If GG0170M3=[07,09,10,88,^], then GG0170N3 must equal [^]. (b) If GG0170M3=[06,05,04,03,02,01], then GG0170N3 must not equal [^]. (c) If GG0170M3=[-], then GG0170N3 must equal [-]. **Items:** GG0170M3 — 1 step (curb) (Dschg Perf) GG0170N3 — 4 steps (Dschg Perf)
-3901	Skip pattern	Fatal	(a) If GG0170N3=[07,09,10,88,^], then GG0170O3 must equal [^]. (b) If GG0170N3=[06,05,04,03,02,01], then GG0170O3 must not equal [^]. (c) If GG0170N3=[-], then GG0170O3 must equal [-]. **Items:** GG0170N3 — 4 steps (Dschg Perf) GG0170O3 — 12 steps (Dschg Perf)
-3906	Consistency	Fatal	a) If A0310H=[1], then if N2005 is active it must not equal [^]. b) If A0310H=[0], then if N2005 is active it must equal [^]. **Items:** A0310H — SNF PPS Part A Discharge (End of Stay) Assessment N2005 — Medication Intervention
-3908	Consistency	Warning	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. **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

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
				D0700	Social Isolation
				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)
				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)

ID	Type	Severity	Text/Items		
			Items:	GG0170K3	Walk 150 feet (Dschg Perf)
				GG0170L3	Walking 10 feet uneven surf (Dschg Perf)
				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

ID	Type	Severity	Text/Items		
			Items:	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
				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)

ID	Type	Severity	Text/Items		
			Items:	O0110O1C	Other: IV Access (Discharge)
				O0110O2C	Other: IV Access - Peripheral (Discharge)
				O0110O3C	Other: IV Access - Midline (Discharge)
				O0110O4C	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

ID	Type	Severity	Text/Items
-3914	Consistency	Fatal	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: Character 1 indicates the type of provider and is based upon the value of A0200, as follows: a) If A0200 is equal to [1] (nursing home record), then character 1 of the ISC is equal to [N]. b) If A0200 is equal to [2] (swing bed record), then character 1 of the ISC is equal to [S]. 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. 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. **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	a) If B0100=[0] and A0310G=[1,^], then if C0100 is active it must not equal [^]. b) If B0100=[-] and A0310G=[1,^], then if C0100 is active it must equal [-]. 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 [^]. 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 [-]. **Items:** A0310A — Type of assessment: OBRA A0310B — Type of assessment: PPS A0310G — Planned/unplanned discharge B0100 — Comatose C0100 — BIMS: should resident interview be conducted

ID	Type	Severity	Text/Items
-3916	Consistency	Fatal	a) If B0100=[0] and A0310G=[1,^], then if D0100 is active it must not equal [^]. b) If B0100=[-] and A0310G=[1,^], then if D0100 is active it must equal [-]. 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 [^]. 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 [-]. **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
-3917	Consistency	Fatal	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 [^]. **Items:** A0310B — Type of assessment: PPS A0600B — Medicare number
-3918	Consistency	Fatal	a) If B0100=[0] and A0310G=[1,^], then if J0200 is active it must not equal [^]. b) If B0100=[-] and A0310G=[1,^], then if J0200 is active it must equal [-]. 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 [^]. 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 [-]. **Items:** A0310A — Type of assessment: OBRA A0310B — Type of assessment: PPS A0310G — Planned/unplanned discharge B0100 — Comatose J0200 — Should pain assessment interview be conducted
-3919	Skip pattern	Fatal	If A0310B=[01,08], then I0020 and I0020B must not equal [^]. **Items:** A0310B — Type of assessment: PPS I0020 — Primary Medical Condition Category I0020B — Primary Medical Condition ICD

ID	Type	Severity	Text/Items
-3920	Consistency	Fatal	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]. 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]. **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	Date restrictions when combining SNF PPS Part A Discharge assessments with other assessment types: (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. (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. (c) If A0310F=[10,11] and A0310H=[1], then if A2000 and A2400C are active, ((A2400C **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	a) If A0310B=[01], then if J2000 is active, it must not be equal to [^]. b) If A0310B=[99], then if J2000 is active, it must be equal to [^]. **Items:** A0310B Type of assessment: PPS J2000 Prior Surgery (100 days)

ID	Type	Severity	Text/Items
-3926	Skip pattern	Fatal	a) If A0310B=[01], then if N2001 is active, it must not be equal to [^]. b) If A0310B=[99], then if N2001 and N2003 are active, they must be equal to [^]. **Items:** A0310B — Type of assessment: PPS N2001 — Drug Regimen Review N2003 — Medication Follow-up
-3928	Skip pattern	Fatal	a) If A0310B=[01], then all active items from GG0100A through GG0100D must not be equal to [^]. b) If A0310B=[99], then all active items from GG0100A through GG0100D must be equal to [^]. **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
-3929	Skip pattern	Fatal	a) If A0310B=[01], then all active items from GG0110A through GG0110Z must not be equal to [^]. b) If A0310B=[99], then all active items from GG0110A through GG0110Z must be equal to [^]. **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
-3930	Skip pattern	Fatal	If B0100=[0,-] and A0310G=[2] and A0310A=[99] and A0310B=[99], then all active items from D0100 through D0600 must equal [^]. **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

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

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

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).

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.

The following instructions only apply to OSA assessments OR assessments with a target date earlier than 10/01/2023 (i.e., corrections):

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

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

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 [^].

Items:	A0310F	Entry/discharge reporting
	A0310G1	Interrupted Stay

-3940 Consistency Fatal

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,^].

Items:	A0310G1	Interrupted Stay
	A0310H	SNF PPS Part A Discharge (End of Stay) Assessment

ID	Type	Severity	Text/Items
-3942	Skip pattern	Fatal	a) If A0310B=[01,08], then if J2100 is active, it must not be equal to [^]. b) If A0310B=[99], then --b1) If STATE_PDPM_OBRA_CD is active and STATE_PDPM_OBRA_CD=[0], then if J2100 is active, it must be equal to [^]. --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 [^]. --b3) If STATE_PDPM_OBRA_CD is not active, then if J2100 is active, it must be equal to [^]. 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 **Items:** STATE_PDPM_OBRA_CD — State calculation of PDPM for OBRA A0310B — Type of assessment: PPS J2100 — Recent Surgery Requiring Active SNF Care
-3943	Consistency	Fatal	a) If J2100=[0,8,^], then all active items from J2300 through J5000 must equal [^]. b) If J2100=[1], then at least one of all active items from J2300 through J5000 must equal [1]. **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 srgry - rpr frctrd shoulder/arm J2510 — Ortho srgry - rpr frctrd pelvis/hip/leg/knee/ankle J2520 — Ortho srgry - rpr but not replace joints J2530 — Ortho srgry - rpr other bones J2599 — Ortho srgry - other J2600 — Neuro surgery - brain, surrounding tissue J2610 — Neuro surgery - nervous system J2620 — Neuro surgery - nsrt neural/brain neurostimulators

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	a) If A0310H=[0], then all active items from O0425A1 through O0430 must be equal to [^]. b) If A0310H=[1], then the following active items must not be equal to [^]: O0425A1, O0425A2, O0425A3, O0425B1, O0425B2, O0425B3, O0425C1, O0425C2, O0425C3, O0430.		
			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

ID	Type	Severity	Text/Items
-3945	Consistency	Fatal	If A0310B=[01,08], then this ICD code must be one of the codes in the data spec dictionary 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. **Items:** A0310B Type of assessment: PPS I0020B Primary Medical Condition ICD
-3946	Skip pattern	Fatal	(a) If GG0170I5=[07,09,10,88,^], then GG0170J5 and GG0170K5 must equal [^]. (b) If GG0170I5=[06,05,04,03,02,01], then GG0170J5 and GG0170K5 must not equal [^]. **Items:** GG0170I5 Walk 10 feet (Interim Perf) GG0170J5 Walk 50 feet with two turns (Interim Perf) GG0170K5 Walk 150 feet (Interim Perf)
-3947	Consistency	Fatal	Prevent Interrupted Stay on SD ISC. If A0200=[2] and A0310A=[99] and A0310B=[99] and A0310F=[10,11], then A0310G1 must not be equal to [1]. **Items:** A0200 Type of provider A0310A Type of assessment: OBRA A0310B Type of assessment: PPS A0310F Entry/discharge reporting A0310G1 Interrupted Stay
-3948	Consistency	Fatal	Skip pattern for O0425A4, O0425A5. 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: 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 [^]. b) If the sum is greater than zero, then O0425A4 and O0425A5 must not equal [^]. c) If O0425A1, O0425A2, and O0425A3 are all equal to [-], then O0425A4 and O0425A5 must equal [-]. **Items:** O0425A1 SLP and Audiology Services: Individual Minutes O0425A2 SLP and Audiology Services: Concurrent Minutes

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].		

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
-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

ID	Type	Severity	Text/Items
-3961	Consistency	Warning	Occupational Therapy Concurrent and Group Therapy Minutes compliance: a) Calculate the Total Therapy Minutes using O0425B1+O0425B2+O0425B3. b) Calculate the Total Concurrent and Group Minutes using O0425B2+O0425B3. 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 O0425B1 — Occupational Therapy: Individual Minutes O0425B2 — Occupational Therapy: Concurrent Minutes O0425B3 — Occupational Therapy: Group Minutes
-3962	Consistency	Warning	Physical Therapy Concurrent and Group Therapy Minutes compliance a) Calculate the Total Therapy Minutes using O0425C1+O0425C2+O0425C3. b) Calculate the Total Concurrent and Group Minutes using O0425C2+O0425C3. 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 O0425C1 — Physical Therapy: Individual Minutes O0425C2 — Physical Therapy: Concurrent Minutes O0425C3 — Physical Therapy: Group Minutes
-3965	Consistency	Fatal	If A0310G1=[1], then A2400C must equal [--------]. **Items:** A0310G1 — Interrupted Stay A2400C — End date of most recent Medicare stay
-3966	Consistency	Warning	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.

ID	Type	Severity	Text/Items

Items:

STATE_PDPM_OBRA_CD	State calculation of PDPM for OBRA
A0310A	Type of assessment: OBRA
A0310B	Type of assessment: PPS

-3967 Consistency Warning

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.

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.

Items:

STATE_PDPM_OBRA_CD	State calculation of PDPM for OBRA
A0310B	Type of assessment: PPS
I0020B	Primary Medical Condition ICD

-3970 Consistency Fatal

Skip patterns based on J0300:
a) If J0300=[0], then all active items from J0410 through J0850 must equal [^].
b) If J0300=[1], then the following rules apply:
---b1) All active items from J0410 through J0530 must not equal [^].
---b2) If J0600A and/or J0600B are active items, then at least one of these items must equal a valid value other than [^].
---b3) If J0700 is an active item, it must not equal [^].
c) If J0300=[9], then the following rules apply:
---c1) All active items from J0410 through J0700 must equal [^].
---c2) All active items from J0800A through J0800Z must not equal [^].
d) If J0300=[-], then the following rules apply:
---d1) All active items from J0410 through J0600B must equal [-].
---d2) If J0700 is an active item, it must not equal [^].

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

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

ID	Type	Severity	Text/Items
-3977	Consistency	Fatal	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): a) X0150 (provider type) b) X0200A (resident first name) c) X0200C (resident last name) d) X0300 (gender) 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) If a matching previously accepted record cannot be located, a fatal error will result and the submitted record will be rejected. **Items:** X0150 Correction: type of provider X0200A Correction: resident first name X0200C Correction: resident last name X0300 Correction: resident gender 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	If A0050 (formerly X0100)=[2,3] then the following items, when active, must not equal [^]: X0150, X0200A, X0200C, X0300, X0400, X0600A, X0600B, X0600F. **Items:** A0050 Type of transaction (formerly X0100) X0150 Correction: type of provider X0200A Correction: resident first name X0200C Correction: resident last name X0300 Correction: resident gender

ID	Type	Severity	Text/Items		
			Items:	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	a) If A0050 (formerly X0100)=[2] and A0310B=[01,99], then the following items, when active, must not equal [^]: X0600A, X0600B, X0600F, X0600H. b) If A0050 (formerly X0100)=[2] and A0310B=[08], then the following items, when active, must not equal [^]: X0600A, X0600B, X0600F.		
			Items:	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)
-3982	Consistency	Fatal	(a) At least one active item from A1005A to A1005Y must equal [1]. (b) If A1005A=[1], then all active items from A1005B through A1005E must equal [0], and A1005Y must equal [0]. (c) If A1005B=[1] or A1005C=[1] or A1005D=[1] or A1005E=[1], then A1005A must equal [0] and A1005Y must equal [0]. (d) If A1005X=[1], then A1005Y must equal [0]. (e) If A1005Y=[1], then all active items from A1005A to A1005X must equal [0].		
			Items:	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	(a) At least one active item from A1010A through A1010Z must equal [1]. (b) If any item from A1010A through A1010N=[1], then A1010Y must equal [0] and A1010Z must equal [0]. (c) If A1010X=[1], then A1010Y must equal [0]. (d) If A1010Y=[1], then all active items from A1010A to A1010X must equal [0], and A1010Z must equal [0]. (e) If A1010Z=[1], then all active items from A1010A to A1010N must equal [0], and A1010Y must equal [0].		
			Items:	A1010A	Race: White

ID	Type	Severity	Text/Items		
			Items:	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
-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

ID	Type	Severity	Text/Items		
			Items:	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
				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
-3993	Skip pattern	Fatal	(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

ID	Type	Severity	Text/Items
-3994	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
-3995	Consistency	Fatal	(a) If N0415Z1=[1], then the following items, when active, must equal [0]: N0415A1, N0415B1, N0415C1, N0415D1, N0415E1, N0415F1, N0415G1, N0415H1, N0415I1, N0415J1, N0415K1. (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. 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. **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

ID	Type	Severity	Text/Items
			Items: N0415Z1 High-Risk Drug (Is taking): None of the Above
-3996	Skip pattern	Fatal	(a) If N0415A1=[0], then N0415A2 must equal [^]. (b) If N0415A1=[1], then N0415A2 must not equal [^]. (c) If N0415A1=[-], then N0415A2 must equal [-]. **Items:** N0415A1 High-Risk Drug (Is Taking): Antipsychotic N0415A2 High-Risk Drug (Indication): Antipsychotic
-3997	Skip pattern	Fatal	(a) If N0415B1=[0], then N0415B2 must equal [^]. (b) If N0415B1=[1], then N0415B2 must not equal [^]. (c) If N0415B1=[-], then N0415B2 must equal [-]. **Items:** N0415B1 High-Risk Drug (Is Taking): Antianxiety N0415B2 High-Risk Drug (Indication): Antianxiety
-3998	Skip pattern	Fatal	(a) If N0415C1=[0], then N0415C2 must equal [^]. (b) If N0415C1=[1], then N0415C2 must not equal [^]. (c) If N0415C1=[-], then N0415C2 must equal [-]. **Items:** N0415C1 High-Risk Drug (Is Taking): Antidepressant N0415C2 High-Risk Drug (Indication): Antidepressant
-3999	Skip pattern	Fatal	(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
-4001	Skip pattern	Fatal	(a) If N0415F1=[0], then N0415F2 must equal [^]. (b) If N0415F1=[1], then N0415F2 must not equal [^]. (c) If N0415F1=[-], then N0415F2 must equal [-]. **Items:** N0415F1 High-Risk Drug (Is Taking): Antibiotic N0415F2 High-Risk Drug (Indication): Antibiotic

ID	Type	Severity	Text/Items
-4002	Skip pattern	Fatal	(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
-4003	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
-4004	Skip pattern	Fatal	(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
-4005	Skip pattern	Fatal	(a) If N0415J1=[0], then N0415J2 must equal [^]. (b) If N0415J1=[1], then N0415J2 must not equal [^]. (c) If N0415J1=[-], then N0415J2 must equal [-]. **Items:** N0415J1 High-Risk Drug (Is Taking): Hypoglycemic N0415J2 High-Risk Drug (Indication): Hypoglycemic
-4006	Consistency	Fatal	(a) If O0110A1A=[0], then all active items from O0110A2A through O0110A10A must equal [0]. (b) If O0110A1A=[1], then at least one active item from O0110A2A through O0110A10A must equal [1], and remaining items must equal [0,1]. (c) If O0110A1A=[-], then all active items from O0110A2A through O0110A10A must equal [-]. (d) If O0110A1A=[^], then all active items from O0110A2A through O0110A10A must equal [^]. **Items:** O0110A1A Treatment: Chemotherapy (Admission) O0110A2A Treatment: Chemo - IV (Admission) O0110A3A Treatment: Chemo - Oral (Admission) O0110A10A Treatment: Chemo - Other (Admission)

ID	Type	Severity	Text/Items
-4007	Consistency	Fatal	(a) If O0110C1A=[0], then all active items from O0110C2A through O0110C4A must equal [0]. (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]. (c) If O0110C1A=[-], then all active items from O0110C2A through O0110C4A must equal [-]. (d) If O0110C1A=[^], then all active items from O0110C2A through O0110C4A must equal [^]. **Items:** O0110C1A Therapies: Oxygen Therapy (Admission) O0110C2A Therapies: Oxygen - Continuous (Admission) O0110C3A Therapies: Oxygen - Intermittent (Admission) O0110C4A Therapies: Oxygen - High-concentration (Admission)
-4008	Consistency	Fatal	(a) If O0110D1A=[0], then the following items O0110D2A and O0110D3A must equal [0]. (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]. (c) If O0110D1A=[-], then the following items O0110D2A and O0110D3A must equal [-]. **Items:** O0110D1A Therapies: Suctioning (Admission) O0110D2A Therapies: Suctioning - Scheduled (Admission) O0110D3A Therapies: Suctioning - As Needed (Admission)
-4009	Consistency	Fatal	(a) If O0110G1A=[0], then O0110G2A and O0110G3A must equal [0]. (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. (c) If O0110G1A=[-], then O0110G2A and O0110G3A must equal [-]. (d) If O0110G1A=[^], then O0110G2A and O0110G3A must equal [^]. **Items:** O0110G1A Therapies: Non-Invas Mechanical Ventilator (Admis) O0110G2A Therapies: BiPAP (Admission) O0110G3A Therapies: CPAP (Admission)

ID	Type	Severity	Text/Items
-4010	Consistency	Fatal	(a) If O0110H1A=[0], then all active items from O0110H2A through O0110H10A must equal [0]. (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]. (c) If O0110H1A=[-], then all active items from O0110H2A through O0110H10A must equal [-]. (d) If O0110H1A=[^], then all active items from O0110H2A through O0110H10A must equal [^]. **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)
-4011	Consistency	Fatal	(a) if O0110J1A=[0], then O0110J2A and O0110J3A must equal [0]. (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. (c) If O0110J1A=[-], then O0110J2A and O0110J3A must equal [-]. (d) If O0110J1A=[^], then O0110J2A and O0110J3A must equal [^]. **Items:** O0110J1A Other: Dialysis (Admission) O0110J2A Other: Hemodialysis (Admission) O0110J3A Other: Peritoneal dialysis (Admission)
-4012	Consistency	Fatal	(a) If O0110O1A=[0], then all active items from O0110O2A through O0110O4A must equal [0]. (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]. (c) If O0110O1A=[-], then all active items from O0110O2A through O0110O4A must equal [-]. (d) If O0110O1A=[^], then all active items from O0110O2A through O0110O4A must equal [^]. **Items:** O0110O1A Other: IV Access (Admission) O0110O2A Other: IV Access - Peripheral (Admission)

ID	Type	Severity	Text/Items
			Items: O0110O3A Other: IV Access - Midline (Admission) O0110O4A Other: IV Access - Central (Admission)
-4013	Consistency	Fatal	(a) If O0110A1C=[0], then all active items from O0110A2C through O0110A10C must equal [0]. (b) If O0110A1C=[1], then at least one active item from O0110A2C through O0110A10C must equal [1], and remaining items must equal [0,1]. (c) If O0110A1C=[-], then all active items from O0110A2C through O0110A10C must equal [-]. (d) If O0110A1C=[^], then all active items from O0110A2C through O0110A10C must equal [^]. **Items:** O0110A1C Treatment: Chemotherapy (Discharge) O0110A2C Treatment: Chemo - IV (Discharge) O0110A3C Treatment: Chemo - Oral (Discharge) O0110A10C Treatment: Chemo - Other (Discharge)
-4014	Consistency	Fatal	(a) If O0110C1C=[0], then all active items from O0110C2C through O0110C4C must equal [0]. (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]. (c) If O0110C1C=[-], then all active items from O0110C2C through O0110C4C must equal [-]. (d) If O0110C1C=[^], then all active items from O0110C2C through O0110C4C must equal [^]. **Items:** O0110C1C Therapies: Oxygen Therapy (Discharge) O0110C2C Therapies: Oxygen - Continuous (Discharge) O0110C3C Therapies: Oxygen - Intermittent (Discharge) O0110C4C Therapies: Oxygen - High-concentration (Discharge)
-4015	Consistency	Fatal	(a) If O0110D1C=[0], then the following items O0110D2C and O0110D3C must equal [0]. (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]. (c) If O0110D1C=[-], then the following items O0110D2C and O0110D3C must equal [-].

ID	Type	Severity	Text/Items
			Items: O0110D1C Therapies: Suctioning (Discharge) O0110D2C Therapies: Suctioning - Scheduled (Discharge) O0110D3C Therapies: Suctioning - As Needed (Discharge)
-4016	Consistency	Fatal	(a) If O0110G1C=[0], then O0110G2C and O0110G3C must equal [0]. (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. (c) If O0110G1C=[-], then O0110G2C and O0110G3C must equal [-]. (d) If O0110G1C=[^], then O0110G2C and O0110G3C must equal [^]. **Items:** O0110G1C Therapies: Non-Invas Mechanical Ventilator (Disch) O0110G2C Therapies: BiPAP (Discharge) O0110G3C Therapies: CPAP (Discharge)
-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 [^]. **Items:** 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)
-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 [^]. **Items:** O0110J1C Other: Dialysis (Discharge) O0110J2C Other: Hemodialysis (Discharge)

ID	Type	Severity	Text/Items
			Items: O0110J3C Other: Peritoneal dialysis (Discharge)
-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 [^]. **Items:** O0110O1C Other: IV Access (Discharge) O0110O2C Other: IV Access - Peripheral (Discharge) O0110O3C Other: IV Access - Midline (Discharge) O0110O4C Other: IV Access - Central (Discharge)
-4020	None of above	Fatal	(a) If O0110Z1A=[1], then the following items, if active, must equal [0]: O0110A1A, O0110B1A, O0110C1A, O0110D1A, O0110E1A, O0110F1A, O0110G1A, O0110H1A, O0110I1A, O0110J1A, O0110O1A. (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. (c) If O0110Z1A=[-], then the following items, if active, must equal [-]: O0110A1A, O0110B1A, O0110C1A, O0110D1A, O0110E1A, O0110F1A, O0110G1A, O0110H1A, O0110I1A, O0110J1A, O0110O1A. **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)

ID	Type	Severity	Text/Items
-4021	None of above	Fatal	(a) If O0110Z1C=[1], then the following items, if active, must equal [0]: O0110A1C, O0110B1C, O0110C1C, O0110D1C, O0110E1C, O0110F1C, O0110G1C, O0110H1C, O0110I1C, O0110J1C, O0110O1C. (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. (c) If O0110Z1C=[-], then the following items, if active, must equal [-]: O0110A1C, O0110B1C, O0110C1C, O0110D1C, O0110E1C, O0110F1C, O0110G1C, O0110H1C, O0110I1C, O0110J1C, O0110O1C. **Items:** 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)
-4022	None of above	Fatal	(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. (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. (c) If O0110Z1B=[-], then the following items, if active, must equal [-]: O0110A1B, O0110B1B, O0110C1B, O0110D1B, O0110E1B, O0110F1B, O0110G1B, O0110H1B, O0110I1B, O0110J1B, O0110K1B, O0110M1B, O0110O1B. **Items:** O0110A1B Treatment: Chemotherapy (14 days) O0110B1B Treatment: Radiation (14 days) O0110C1B Therapies: Oxygen Therapy (14 days) O0110D1B Therapies: Suctioning (14 days)

ID	Type	Severity	Text/Items		
			Items:	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)
-4023	None of above	Fatal	a) If Q0110Z=[0], then at least one active item from Q0110A through Q0110E must equal [1]. b) If Q0110Z=[1], then all active items from Q0110A through Q0110E must equal [0].		
			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	(a) If A0310E=[1], then the following items must not equal [^]: Q0310A, Q0310B. (b) If A0310E=[0], then the following items must equal [^]: Q0310A, Q0310B.		
			Items:	A0310E	First assessment since most recent entry
				Q0310A	Resident's Overall Goal
				Q0310B	Q0310A info source
-4025	Skip pattern	Fatal	(a) If Q0610A=[0], then Q0620 must not equal [^]. (b) If Q0610A=[1], then Q0620 must equal [^].		
			Items:	Q0610A	Referral
				Q0620	Reason referral not made
-4026	Skip pattern	Fatal	(a) If D0100=[1], then the following items must not be equal to [^]: D0150A1, D0150B1. (b) If D0100=[0], then the following items must be equal to [^]: D0150A1, D0150B1, D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1, D0160. (c) If D0100=[-], then the following items must be equal to [-]: D0150A1, D0150B1,		
			Items:	D0100	PHQ: should resident mood interview be conducted

ID	Type	Severity	Text/Items		
			Items:	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
-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

ID	Type	Severity	Text/Items		
			Items:	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***		
			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

ID	Type	Severity	Text/Items
-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
-4039	None of above	Fatal	(a) If K0520Z1=[1], then the following items, if active, must equal [0]: K0520A1, K0520B1, K0520C1, K0520D1.
			(b) If K0520Z1=[0], then at least one of the following items, if active, must equal [1]: K0520A1, K0520B1, K0520C1, K0520D1.
			(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,
			Items: 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	(a) If K0520Z4=[1], then the following items, if active, must equal [0]: K0520A4, K0520B4, K0520C4, K0520D4.
			(b) If K0520Z4=[0], then at least one of the following items, if active, must equal [1]: K0520A4, K0520B4, K0520C4, K0520D4.
			(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,
			Items: 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	(a) If K0520Z3=[1], then the following items, if active, must equal [0]: K0520A3, K0520B3, K0520C3, K0520D3.
			(b) If K0520Z3=[0], then at least one of the following items, if active, must equal [1]: K0520A3, K0520B3, K0520C3, K0520D3.
			(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,
			Items: K0520A3 Nutritional Approaches (7 days): Parenteral

ID	Type	Severity	Text/Items
			Items: 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
-4042	None of above	Fatal	(a) If K0520Z2=[1], then the following items, if active, must equal [0]: K0520A2, K0520B2. (b) If K0520Z2=[0], then at least one of the following items, if active, must equal [1]: K0520A2, K0520B2. (c) If K0520Z2=[-], then at least one of the following items, if active, must equal [-], **Items:** K0520A2 Nutritional Approaches (Non-res): Parenteral K0520B2 Nutritional Approaches (Non-res): Feeding tube K0520Z2 Nutritional Approaches (Non-res): None
-4043	Skip pattern	Fatal	(a) If K0520A2=[1] OR K0520B2=[1] OR K0520A3=[1] OR K0520B3=[1] then K0710A2 through K0710B3 must not equal [^]. (b) If K0520A2=[0,-,^] AND K0520B2=[0,-,^] AND K0520A3=[0,-] AND K0520B3=[0,-] then K0710A2 through K0710B3 must equal [^]. **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	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 **Items:** A0200 Type of provider A0310F Entry/discharge reporting A0310H SNF PPS Part A Discharge (End of Stay) Assessment

ID	Type	Severity	Text/Items
-4046	None of the	Fatal	If GG0120A through GG0120D and GG0110Z are all active, then the following rules apply: a) If GG0120Z=[0], then at least one of the items GG0120A through GG0120D must equal [1]. b) If GG0120Z=[1], then all items from GG0120A through GG0120D must equal [0]. c) If GG0120Z=[-], then at least one item from GG0120A through GG0120D must equal **Items:** 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
-4047	Skip pattern	Fatal	(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. (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. **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)
-4049	Skip pattern	Fatal	(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. (b) If A0310A=[01] OR A0310B=[01], then the following items, when active, must not be equal to [^]: GG0170A1, GG0170B1, GG0170C1, GG0170D1, GG0170E1, GG0170F1, **Items:** A0310A Type of assessment: OBRA A0310B Type of assessment: PPS

ID	Type	Severity	Text/Items		
			Items:	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)
				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)
-4053	Skip pattern	Fatal	(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. (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.		
			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)
-4054	Skip pattern	Fatal	(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. (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.		

ID	Type	Severity	Text/Items		
			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)
				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)
-4055	Consistency	Fatal	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. 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.		
			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
-4056	Skip pattern	Fatal	a) If GG0170Q5=[0,^], then the following items must be equal to [^]: GG0170R5, GG0170RR5, GG0170S5, GG0170SS5. b) If GG0170Q5=[1], then the following items must not be equal to [^]: GG0170R5, GG0170RR5, GG0170S5, GG0170SS5. c) If GG0170Q5=[-], then the following items must be equal to [-]: GG0170R5, GG0170RR5, GG0170S5, GG0170SS5.		
			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)

ID	Type	Severity	Text/Items
-4059	Skip pattern	Fatal	D0700 skip patterns: (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 [^]. (b) If A0310A=[99] AND A0310B=[99] AND A0310F=[10,11] and A0310G=[2] then if D0700 is active, it must equal [^]. **Items:** A0310A — Type of assessment: OBRA A0310B — Type of assessment: PPS A0310F — Entry/discharge reporting 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

ID	Type	Severity	Text/Items
-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) 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)

ID	Type	Severity	Text/Items		
			Items:	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
				A0310B	Type of assessment: PPS
				A0310F	Entry/discharge reporting
				A0310G	Planned/unplanned discharge
				A0310H	SNF PPS Part A Discharge (End of Stay) Assessment
-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
-4066	Skip pattern	Fatal	***THIS EDIT WAS DELETED IN V3.10.0***		

ID	Type	Severity	Text/Items		
			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
-4068	Skip pattern	Fatal	(a) If N0415K1=[0], then N0415K2 must equal [^]. (b) If N0415K1=[1], then N0415K2 must not equal [^]. (c) If N0415K1=[-], then N0415K2 must equal [-].		
			Items:	N0415K1	High-Risk Drug (Is Taking): Anticonvulsant
				N0415K2	High-Risk Drug (Indication): Anticonvulsant
-4069	Skip pattern	Fatal	(a) If GG0170Q1=[0,^], then the following items, if active, must be equal to [^]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1. (b) If GG0170Q1=[1], then the following items, if active, must not be equal to [^]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1. (c) If GG0170Q1=[-], then the following items, if active, must be equal to [-]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1.		
			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)
-4070	Skip pattern	Fatal	A2121, A2123 skip patterns: (a) If A0310H=[1] and A2105=[01,99], then A2121, if active, must equal [^] and A2123, if active, must not equal [^]. (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 [^]. (c) If A0310H=[0], then the following items, if active, must equal [^]: A2121, A2123. (d) If A0310H=[1] and A2105=[^], then A2121, if active, must equal [^] and A2123, if active, must equal [^].		

ID	Type	Severity	Text/Items		
			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
-4071	Skip pattern	Fatal	D0700 skip patterns: (b) If A0310A=[99] AND A0310B=[01] AND B0100=[0] then if D0700 is active, it must not equal [^]. (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 [^].		
			Items:	A0310A	Type of assessment: OBRA
				A0310B	Type of assessment: PPS
				A0310F	Entry/discharge reporting
				B0100	Comatose
				D0700	Social Isolation
-4072	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
				D0700	Social Isolation

ID	Type	Severity	Text/Items
-4073	Skip pattern	Fatal	Skips for GG0130 items:

(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.
(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.
(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.
(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.

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)

ID	Type	Severity	Text/Items		
			Items:	GG0130H3	Put on/take off footwear (Dschg Perf)
				GG0130I3	Personal Hygiene (Dschg Perf)
-4074	Skip pattern	Fatal	Skips for GG0170 items:		

(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.
(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.
(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.
(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.

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 [^]: GG0170A3, GG0170B3, GG0170C3, GG0170D3, GG0170E3, GG0170F3, GG0170FF3, GG0170G3, GG0170I3, GG0170M3, GG0170P3, GG0170Q3.
(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.

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)

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 (V3.10.0)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-4075	Consistency	Fatal	Date Item Consistency Rules Date items fall into four groups, designated Group A, B, C, and D below. Each group has its own consistency rules. ---------- GROUP A RULES (Edit -4073a) 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: A0900 (birthdate) <= A1900 (admission date) <= A1600 (entry date) <= A2300 (assessment reference date) = A2000 (discharge date) <= Z0500B (date RN signed assessment as complete) <= V0200B2 (CAT assessment process signature date) <= V0200C2 (CAT care planning signature date) <= X1100E (correction: attestation date) <= current date ---------- GROUP B (Edit -4073b) 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: 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. The following is a list of Group B dates: A2400B <= A2400C (Medicare stay start/end) O0250B (date influenza vaccine received) V0100C (prior assessment reference date) ---------- GROUP C RULES The Group C rules only apply to records where A0310A = [05, 06] (significant correction to prior comprehensive or quarterly). RULE C1 (Edit -4073c1) If A0310A=[05,06] and A1700=[1] (admission), then Rule C1 applies: A1600 (entry date) <=

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

ID	Type	Severity	Text/Items
-4076	Skip pattern	Fatal	If O0390D is active, then (a) If O0390D=[1], then O0400D2 must not be equal to [^]. (b) If O0390D=[0], then O0400D2 must be equal to [^]. Otherwise (c) If A0310B=[08], then O0400D2 must not be equal to [^].

Items:

A0310B	Type of assessment: PPS
O0390D	Respiratory Therapy
O0400D2	Respiratory therapy: number of days

ID	Type	Severity	Text/Items
-4077	None of the	Fatal	(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,-].

Items:

O0390A	Speech-Language Pathology and Audiology Services
O0390B	Occupational Therapy
O0390C	Physical Therapy
O0390D	Respiratory Therapy
O0390E	Psychological Therapy
O0390Z	None of the above

ID	Type	Severity	Text/Items
-4078	Skip pattern	Fatal	If A0310A=[99] AND A0310B=[99] AND A0310F=[99] AND B0100=[0] then if D0700 is active, it must not equal [^].

Items:

A0310A	Type of assessment: OBRA
A0310B	Type of assessment: PPS
A0310F	Entry/discharge reporting
B0100	Comatose
D0700	Social Isolation

ID	Type	Severity	Text/Items
-4079	Skip pattern	Fatal	(a) If A0310A=[99] and A0310B=[01] and A2300 – A1900 >= 366 then R0310 through R0340 must equal [^]. (b) If A0310A=[99] and A0310B=[01] and A2300 – A1900 < 366 then the following items must not equal [^]: R0310, R0320A, R0330, R0340.

Items:

A0310A	Type of assessment: OBRA
A0310B	Type of assessment: PPS
A1900	Admission date
A2300	Assessment reference date
R0310	Living Situation
R0320A	Food run out before money to buy more
R0320B	Food did not last and no money to buy more
R0330	Utilities
R0340	Transportation

ID	Type	Severity	Text/Items
-4080	Skip pattern	Fatal	(a) If A0310A=[01,02,03,04,05,06] and A0310B=[01] and A2300 – A1900 >= 366 then R0310 through R0340 must equal [^]. (b) If A0310A=[01,02,03,04,05,06] and A0310B=[01] and A2300 – A1900 < 366 then R0310 through R0340 must not equal [^]. (c) If A0310A=[01,02,03,04,05,06] and A0310B=[99] then R0310 through R0340 must equal [^]. **Items:** A0310A – Type of assessment: OBRA A0310B – Type of assessment: PPS A1900 – Admission date A2300 – Assessment reference date R0310 – Living Situation R0320A – Food run out before money to buy more R0320B – Food did not last and no money to buy more R0330 – Utilities R0340 – Transportation
-4082	Consistency	Fatal	(a) If D0150A2 = [0,1] and D0150B2 = [0,1], then the following active items must equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1. (b) If D0150A1 = [-] or D0150B1 = [-], then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1. (c) If D0150A1 = [9] and D0150B1 = [9], then the following active items must equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1. (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. (e) If D0150A2 = [2,3] or D0150B2 = [2,3], then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1. (f) If D0150A2 = [-] or D0150B2 = [-], then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1. **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

ID	Type	Severity	Text/Items

Items: D0150H1 Mood: Moving or speaking so slowly: Pres
D0150I1 Mood: Thoughts of better off dead: Pres

-4083 Consistency Fatal

Total Severity Score Calculation:
(a) If D0150A1 = [9] and D0150B1 = [9], then D0160 must equal [^].
(b) If D0150A2 = [0,1] and D0150B2 = [0,1], then D0160 must equal the sum of the values from D0150A2 and D0150B2.
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.
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.
(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.
(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.
(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.
(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].

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

ID	Type	Severity	Text/Items
-4084	Skip pattern	Fatal	(a) If D0150A1=[0], then D0150A2 must equal [0]. (b) If D0150A1=[1], then D0150A2 must equal [0,1,2,3,-]. (c) If D0150A1=[9,-,^], then D0150A2 must equal [^]. **Items:** D0150A1 Mood: Little interest/pleasure doing things: Pres D0150A2 Mood: Little interest/pleasure doing things: Freq
-4085	Skip pattern	Fatal	(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
-4086	Skip pattern	Fatal	(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
-4087	Skip pattern	Fatal	(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
-4088	Skip pattern	Fatal	(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
-4089	Skip pattern	Fatal	(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

ID	Type	Severity	Text/Items
-4090	Skip pattern	Fatal	(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
-4091	Skip pattern	Fatal	(a) If D0150H1=[0], then D0150H2 must equal [0]. (b) If D0150H1=[1], then D0150H2 must equal [0,1,2,3,-]. (c) If D0150H1=[9,-,^], then D0150H2 must equal [^]. **Items:** D0150H1 Mood: Moving or speaking so slowly: Pres D0150H2 Mood: Moving or speaking so slowly: Freq
-4092	Skip pattern	Fatal	(a) If D0150I1=[0], then D0150I2 must equal [0]. (b) If D0150I1=[1], then D0150I2 must equal [0,1,2,3,-]. (c) If D0150I1=[9,-,^], then D0150I2 must equal [^]. **Items:** D0150I1 Mood: Thoughts of better off dead: Pres D0150I2 Mood: Thoughts of better off dead: Freq
-4093	Skip pattern	Fatal	(a) If R0320A=[0,1], then R0320B must equal [^]. (b) If R0320A=[2,7,8], then R0320B must not equal [^]. **Items:** R0320A Food run out before money to buy more R0320B Food did not last and no money to buy more
-9001	Information	None	Vendor's version number for the software that was used to create the MDS data submission file. **Items:** SFTWR_PROD_VRSN_CD Software product version code
-9002	Information	None	Optional item. Can be used by facility for unique identification of record and for tracking records submitted to the MDS Submission System. **Items:** FAC_DOC_ID Facility document ID
-9003	Information	None	Valid federal tax ID (EIN) for the company that developed the software used to create the MDS data submission file. **Items:** SFTWR_VNDR_ID Software vendor federal employer tax ID
-9004	Information	None	Name of the software that was used to create the MDS data submission file.

ID	Type	Severity	Text/Items
			Items: SFTWR_PROD_NAME — Software product name
-9005	Information	None	Email address of the vendor who created the software that was used to produce the MDS submission file. **Items:** SFTWR_VNDR_EMAIL_ADR — Software vendor email address
-9006	Information	None	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. **Items:** FAC_ID — Assigned facility/provider submission ID SFTWR_VNDR_ID — Software vendor federal employer tax ID SFTWR_VNDR_NAME — Software vendor company name SFTWR_PROD_NAME — Software product name SFTWR_PROD_VRSN_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 I8000C — Additional active ICD diagnosis 3 I8000D — Additional active ICD diagnosis 4

ID	Type	Severity	Text/Items		
			Items:	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: 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
-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)

ID	Type	Severity	Text/Items
-9015	Information	None	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.

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	The target date is defined as follows: 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).

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	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. 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).

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

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 OBRAs. 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