OUTCOME AND ASSESSMENT INFORMATION SET (OASIS)

SUBMISSION USER’S GUIDE

For the
Quality Improvement and Evaluation System (QIES)
Assessment Submission And Processing (ASAP) System

January 1, 2015

Prepared for

Department of Health and Human Services
Centers for Medicare & Medicaid Services
7500 Security Boulevard
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INTRODUCTION

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ABOUT THIS GUIDE

This guide provides information and instructions pertaining to the QIES ASAP OASIS system to home health agency users who are required to submit assessment data about their patients. It is intended to be used as a reference and learning tool for the OASIS system.

HOW THIS GUIDE IS ORGANIZED

This user’s guide is organized into six sections:

- **Section 1, Introduction**, provides general information about this guide, its organization, and document conventions.
- **Section 2, Overview**, introduces the OASIS System and describes system requirements (software and hardware) in addition to applicable software training that should be obtained prior to using the system.
- **Section 3, Functionality**, describes how to establish communication and submit OASIS data.
- **Section 4, Reports**, briefly describes the OASIS Final Validation Report and other reports that are available to providers in the CASPER Reporting application.
- **Section 5, Error Messages**, lists the error messages that may be encountered during the submission and validation processes and provides troubleshooting assistance.
- **Section 6, Acronyms & Glossary**, is a list of the acronyms and terms used in the guide.
- **Appendix A, Quick Reference To OASIS Submissions, Submission Status, and Final Validation Reports** provides step-by-step instructions for submitting files, checking their processing status, and requesting and/or viewing final validation reports.
- **Appendix B, Resident Match Process**, describes the resident-matching process and the criteria used.
CONVENTIONS USED IN THIS GUIDE

This guide uses the following conventions:

<table>
<thead>
<tr>
<th>Convention</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bold</td>
<td>Identifies words, characters, buttons or commands that a user types or selects and names of web pages.</td>
</tr>
<tr>
<td>Underline</td>
<td>Identifies a link to a web page.</td>
</tr>
<tr>
<td><em>italics</em></td>
<td>Identifies directory, path, file or field names, menu options or book titles.</td>
</tr>
<tr>
<td>Point</td>
<td>Move the mouse until the tip of the mouse pointer rests on what you want to choose on the page or window.</td>
</tr>
<tr>
<td>Click</td>
<td>Press and release the left mouse button without moving the mouse to select an item or execute a desired activity.</td>
</tr>
<tr>
<td>Select</td>
<td>Point and click to highlight an option or “press” a button.</td>
</tr>
<tr>
<td>Double Click</td>
<td>Click the left mouse button twice in rapid succession to select a file or execute an activity.</td>
</tr>
<tr>
<td>Right Click</td>
<td>Press and release the right mouse button.</td>
</tr>
<tr>
<td>Icons</td>
<td>Icons for specific software functions are used where applicable and available (e.g., the Microsoft Internet Explorer icon).</td>
</tr>
</tbody>
</table>

**NOTE:** Special notes or suggestions to the user display in a bordered box, similar to this one.

SUPPORT

You may contact the QTSO Helpdesk by phone at 1-800-339-9313 or e-mail at help@qtsos.com if you have any questions about the application.
OASIS SYSTEM OVERVIEW

The Outcome and Assessment Information Set (OASIS) system is one part of the QIES Assessment Submission and Processing (ASAP) system. OASIS provides computerized storage, access, and analysis of the assessment data for patients of home health agencies (HHAs) across the United States, Puerto Rico, Virgin Islands, and Guam.

The QIES ASAP OASIS system creates a standard, nationwide system for HHAs to submit assessment data to a national repository. The OASIS system provides for the following functions:

- Receipt and storage of OASIS assessment records from HHAs at the National Submissions Database
- Authentication and validation of OASIS assessment records received from HHAs
- In conjunction with the CASPER Reporting application, the OASIS system generates feedback to providers acknowledging receipt of submitted data and the status of record validation. Providers may select from numerous reports that are available in the CASPER Reporting application to access information about their submissions and the patients for which assessment data were submitted.

Figure 2-1 provides an overview of the OASIS system architecture that illustrates the communication components and database repository.

Figure 2-1. Overview of the OASIS System Architecture

Figure 2-1 also serves to illustrate the flow of OASIS data submissions. At each HHA, a Windows PC is used to access the OASIS system on a secure, private intranet (CMSNet) and electronically send a compressed (zipped) file containing one or more OASIS assessment records to the National Submissions Database.
NOTE: The successful receipt of a submission file does not necessarily mean that all of the individual assessment records in that file validated successfully.

The submission file is unzipped and the assessment record(s) it contains are validated to ensure compliance with data specifications. Accepted assessment records are stored in the database.

An OASIS Agency Final Validation Report is generated detailing the status of the submission file and the assessment records it contained. The Reports section of this user’s guide describes the OASIS Agency Final Validation Report.

HARDWARE AND SOFTWARE REQUIREMENTS

A document specifying the minimum hardware and software configurations required to transmit OASIS records to the National Submissions Database of the QIES ASAP system is available on the QIES Technical Support Office (QTSO) Home page (https://www.qtso.com). The required hardware and software, or information on how to order it, is readily available from most computer stores.

Should you encounter difficulty in verifying your existing system hardware and software configuration, contact your facility computer support personnel, the specific hardware and software vendors, or the vendor who provided you with OASIS data encoding software, as appropriate.
RECOMMENDED TRAINING

Whether formal or informal, training in the software applications associated with the OASIS system is helpful. Training in Windows and Internet Explorer is recommended. You can usually obtain training in these applications from a software vendor, local computer store, college or university, or from your OASIS software vendor. A basic level of familiarity with these software applications, in addition to the operation of your PC and modem greatly facilitates the use of the OASIS system.

In instances where software manuals or guides are not available, you may check with your local computer store for recommended reference guides. Both Internet Explorer and Windows have online help available to assist you.

NOTE: You should receive training from your OASIS encoding software vendors in how to perform data extracts and prepare files for submission prior to using the OASIS system. This helps to ensure that your submissions are in the correct format, contain the correct information, and will be accepted by the OASIS system.
INTRODUCTION

For home health agency users, the basic functions of the QIES ASAP OASIS system include:

- Establishing the communication connection with CMSNet
- Submitting electronic OASIS files

This section of the OASIS Submission User’s Guide for the QIES ASAP system provides instructions for these functions.

ESTABLISHING THE COMMUNICATION CONNECTION

The communications component of the QIES ASAP system supports the transfer of OASIS data between agencies and the National Submissions Database. In order to connect to the National Submissions Database, you must first ensure that you have a CMSNet user ID and that communications software is correctly installed on your PC.

**NOTE:** To install software on your computer, you must have Administrative Rights. If you were not granted Administrative Rights to install software to your PC, please contact your computer support personnel.

To obtain a CMSNet user ID, complete and submit the CMSNet Access Request Form found on the QIES Technical Support Office (QTSO) web site at [https://www.qtso.com/cmsnet.html](https://www.qtso.com/cmsnet.html). A software installation guide for the CMSNet remote user is available on the same web page to assist you with the installation of the communications software. The software installation guide includes instructions for connecting to CMSNet once the software is installed.

**NOTE:** If you encounter difficulties connecting to CMSNet, contact the CMS Remote User Support Help Desk at (888) 238-2122.

When accessing a CMS web site a **U.S. Government- Authorized Use Only** pop-up window (Figure 3-1) is presented one or more times.
The **U.S. Government-Authorized Use Only** pop-up window states:

"- You are accessing a U.S. Government information system, which includes: (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.  
- Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.  
- By using this information system, you understand and consent to the following:
  * You have no reasonable expectation of privacy regarding any communication or data transiting or stored on the information system. At any time, and for any lawful Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.
  * Any communication or data transiting or stored on the information system may be disclosed or used for any lawful Government purpose."

You may select the **Cancel** button if you do not wish to access the CMS website. Otherwise, select the **OK** button to proceed. A CMS Web Bookmarks page is presented.
Select the OASIS link. A **Welcome to the CMS QIES Systems for Providers** page, similar to Figure 3-2 is presented.

**Figure 3-2. CMS Systems for Providers Welcome Page**

The **Welcome to the CMS QIES Systems for Providers** page includes links to the following features and functions:

- **OASIS User Registration** – the self-service Provider User Registration tool with which users register for a user account and User ID to access the OASIS submissions and CASPER Reporting systems.
- **OASIS Submissions** – the login page for the OASIS system to submit assessments or corrections to assessments.
- **CASPER Reporting** – the login page of the CASPER Reporting application so that you may request and view various provider reports.
- **QIES User Maintenance Application** – the login page for the QIES User Maintenance Application (QUMA) for user self-service password resetting and user account maintenance.
- **OASIS Forms** – access to a link to the CMSNet Access Request Form on the QTSO Web site.
The Welcome to the CMS QIES Systems for Providers page also includes drop-down lists so that you may select and view the following user's guides/manuals:

- OASIS Submission User's Guide
- CASPER Reporting Users Guide for OASIS Providers

Select the OASIS Submissions link to access the QIES National System Login page for the OASIS File Submission system (Figure 3-3).

**NOTE:** Persons using the JAWS screen reader must start the JAWS application prior to accessing the QIES National System Login page in order to maintain password privacy.

**Figure 3-3. QIES National System Login Page**

The QIES National System Login page presents User ID and Password fields, a Login button, and an Unable to login? Go to the QIES User Maintenance application to reset your User ID/Password link with which you may access the QIES User Maintenance Application (QUMA) for password self-service functions.

The following shortcut keys are available for you to access elements of the QIES National System Login page:

- Alt + u User ID field
- Alt + w Password field
- Alt + g Login button
- Alt + q Unable to login? link

Type your user ID and password in the appropriate fields and select the Login button.

**NOTE:** If presented, respond to the U.S. Government- Authorized Use Only (similar to Figure 3-1, above) warning once again.
The OASIS File Submission system **File Upload** page (Figure 3-4) is presented.

**Figure 3-4. OASIS File Submission System File Upload Page**

<table>
<thead>
<tr>
<th>CMS</th>
<th>OASIS File Submission</th>
</tr>
</thead>
<tbody>
<tr>
<td>File Upload</td>
<td>Submission Status</td>
</tr>
</tbody>
</table>

Locate the OASIS file to submit by selecting the Browse button and choosing a file from your computer.

**NOTE:** After 12 minutes with no interaction with the server, a pop-up dialog box warns you that your online session will timeout in 3 minutes and asks if you would like to extend it. Select the **OK** button to extend your session. After 15 minutes of inactivity you are logged out of the OASIS File Submission system and must log in with your user ID and password in order to use the OASIS File Submission system once again.

Each page of the OASIS File Submission system includes the following constants:

- The CMS logo and the title of the application, OASIS File Submission, span the top.
- A **Skip Navigation Links** link – to the far-right, under the CMS logo and the application title.

The **Skip Navigation Links** link allows users utilizing assistive readers to bypass the menu bar items, moving focus to the main body of the current page. The keyboard shortcut to quickly bring focus to the **Skip Navigation Links** link is **Alt + n**. Once in focus, press Enter to activate the link.

- The OASIS File Submission system menu bar – under the **Skip Navigation Links** link.

The OASIS File Submission system menu bar provides access to the functionality of the OASIS File Submission system.

**MENU BAR**

The OASIS File Submission system menu bar (Figure 3-5) includes the following options.

- File Upload
- Submission Status
- Help
- Logout
- Welcome Page
Figure 3-5. OASIS File Submission System Menu Bar

| File Upload | Submission Status | Help | Logout | Welcome Page |

The following shortcut keys bring focus to items on the OASIS File Submission system menu bar:

- Alt + 1       File Upload
- Alt + b       Submission Status
- Alt + p       Help
- Alt + o       Logout
- Alt + 0 (zero) Welcome Page

With focus on one of these items, press the Enter key to access the associated function.

**NOTE:** Shortcut keys utilizing numbers function only with the numeric keys along the top of the keyboard. They do not function with the numeric keys in the "10-key" pad of the keyboard.

---

**File Upload**

The File Upload item on the OASIS File Submission menu bar allows you to access the OASIS File Submission File Upload page. Refer to the Submitting OASIS Data section below for a description of the File Upload page functionality.

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**Submission Status**

The Submission Status item on the OASIS File Submission menu bar allows you to access the OASIS File Submission List of My Submissions page. Refer to the Submission Status section below for a description of the List of My Submissions page functionality.

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**Help**

The Help item on the OASIS File Submission menu bar allows you to access the OASIS File Submission Help items, which include the Accessibility Policy, Contact Us, and Privacy Policy pages. The Accessibility Policy page (Figure 3-6, below) is presented when you select the Help item on the OASIS File Submission menu bar.

The following links are available on all Help pages:

- Accessibility Policy
- Contact Us
- Privacy Policy
The following shortcut keys bring focus to the links on the OASIS File Submission Help pages:

- Alt + 7   Accessibility Policy
- Alt + 8   Contact Us
- Alt + 9   Privacy Policy

With focus on one of these items, press the Enter key to access the associated function.

**NOTE:** Shortcut keys utilizing numbers function only with the numeric keys along the top of the keyboard. They do not function with the numeric keys in the “10-key” pad of the keyboard.

**Accessibility Policy**

The **Accessibility Policy** link accesses the OASIS File Submission Accessibility Policy page (Figure 3-6).

**Figure 3-6. OASIS File Submission Accessibility Policy Page**

*Accessibility Policy*

The QIES Technical Support Office makes every effort to ensure our Web site is accessible for people with disabilities and meets current accessibility standards, including those defined by Section 508 of the U.S. Rehabilitation Act and the W3C’s Web Content Accessibility Guidelines. We are actively engaged in the ongoing process of testing our Web site for compliance with current accessibility standards.

We are committed to addressing issues that prevent people with disabilities from accessing our site and its content in a timely manner. If you should find that you are unable to or have difficulty accessing information via our Web site, please contact our help desk.

- E-mail: help@qtso.com
- Phone: 800-339-9313

The OASIS File Submission **Accessibility Policy** page displays the following message:

"The QIES Technical Support Office makes every effort to ensure our Web site is accessible for people with disabilities and meets current accessibility standards, including those defined by Section 508 of the U.S. Rehabilitation Act and the W3C’s Web Content Accessibility Guidelines. We are actively engaged in the ongoing process of testing our Web site for compliance with current accessibility standards.

We are committed to addressing issues that prevent people with disabilities from accessing our site and its content in a timely manner. If you should find that you are unable to or have difficulty accessing information via our Web site, please contact our help desk.

E-mail: help@qtso.com
Phone: 800-339-9313"
Contact Us

The Contact Us link accesses the OASIS File Submission Contact Us page (Figure 3-7).

Figure 3-7. OASIS File Submission Contact Us Page

The OASIS File Submission Contact Us page displays the following message:

“If you should find that you are unable to or have difficulty accessing information via this Web site, please contact the help desk.

QTSO Help Desk
E-Mail: help@qtso.com
Phone: 800-339-9313
Fax: 888-477-7871"

Privacy Policy

The Privacy Policy link accesses the OASIS File Submission Privacy Policy page (Figure 3-8).

Figure 3-8. OASIS File Submission Privacy Policy Page

Privacy Policy

WARNING: This is a Department of Health and Human Services computer system. Department of Health and Human Services computer systems are provided for the processing of Official U.S. Government information only. All data contained on Department of Health and Human Services computer systems is owned by the Department of Health and Human Services and may, for the purpose of protecting the rights and property of the Department of Health and Human Services, be monitored, intercepted, recorded, read, copied, or captured in any manner and disclosed in any manner by authorized personnel.

THERE IS NO RIGHT OF PRIVACY IN THIS SYSTEM.

System personnel may give to law enforcement officials any potential evidence of crime found on Department of Health and Human Services computer systems. USE OF THIS SYSTEM BY ANY USER, AUTHORIZED OR UNAUTHORIZED, CONSTITUTES CONSENT TO THIS MONITORING, INTERCEPTION, RECORDING, READING, COPYING, OR CAPTURING AND DISCLOSURE.
The OASIS File Submission Privacy Policy page displays the following message:

"WARNING: This is a Department of Health and Human Services computer system. Department of Health and Human Services computer systems are provided for the processing of Official U.S. Government information only. All data contained on Department of Health and Human Services computer systems is owned by the Department of Health and Human Services and may, for the purpose of protecting the rights and property of the Department of Health and Human Services, be monitored, intercepted, recorded, read, copied, or captured in any manner and disclosed in any manner by authorized personnel.

THERE IS NO RIGHT OF PRIVACY IN THIS SYSTEM.

System personnel may give to law enforcement officials any potential evidence of crime found on Department of Health and Human Services computer systems. USE OF THIS SYSTEM BY ANY USER, AUTHORIZED OR UNAUTHORIZED, CONSTITUTES CONSENT TO THE MONITORING, INTERCEPTION, RECORDING, READING, COPYING, OR CAPTURING AND DISCLOSURE."

Logout

The Logout item on the OASIS File Submission menu bar allows you to end your session and exit the OASIS File Submission system. When you select the Logout item, the QIES National System Login page (Figure 3-3, above) is presented.

Welcome Page

The Welcome Page item on the OASIS File Submission menu bar allows you to access the Welcome to the CMS Systems for Providers page (Figure 3-2, above) and the links found there to the CASPER Reporting system and the CASPER Reporting user's manual.

SUBMITTING OASIS DATA

1. To submit OASIS data, access the OASIS File Submission File Upload page (Figure 3-9). The OASIS File Submission File Upload page is presented by default when you successfully log into the system.

NOTE: You must use software capable of encoding OASIS assessment records and exporting data files in accordance with CMS's standard OASIS record layout specifications.
Figure 3-9. OASIS File Submission File Upload Page

The OASIS File Submission system File Upload page includes a File Name field and Browse and Upload buttons.

The following shortcut keys bring focus to elements of the OASIS File Submission system File Upload page:

Alt + 2   File Name field
Alt + 3   Upload button
Alt + 4   Top of page

**NOTE:** Shortcut keys utilizing numbers function only with the numeric keys along the top of the keyboard. They do not function with the numeric keys in the “10-key” pad of the keyboard.

The OASIS File Submission system File Upload page provides the following instructions:

“Locate the OASIS file to submit by selecting the Browse button and choosing a file from your computer.”

2. Select the **Browse** button to locate the file you wish to upload.

**NOTE:** If you use the JAWS screen reader with Form Mode turned off, you must press the Space bar twice in the File Name field to select the **Browse** button and access a **Choose File** dialog box.

Depending upon the version of Windows running on your computer, a **Choose File to Upload** (Figure 3-10) or similar dialog box is presented with which you can browse the folders and files on your computer or network.
Figure 3-10. Windows Choose File to Upload Dialog Box

Select All Files from the drop-down list in the Files of type field so that you do not limit the types of files shown in the list.

**NOTE:** The OASIS File Submission system only processes compressed (zipped) files with a "zip" extension. You may not upload a file with anything other than a "zip" extension.

Select the drive on which your submission file is stored (C: is your computer’s hard drive). The folders and/or file(s) available on the selected drive are listed in the main body of the dialog box.

3. To select a file for submission, double click on the file name or highlight the file name and then select the Open button. The Choose File to Upload dialog box is closed and a File Has Been Selected dialog box (Figure 3-11) is presented.
Figure 3-11. Proceed to Upload? Dialog Box

The File Has Been Selected dialog box indicates “The file has been selected. Do you want to proceed to upload?” and includes OK and Cancel buttons.

4. Select the OK button if you wish to proceed with the upload of the selected file.

The name of the selected file is populated into the File Name field on the OASIS File Submission File Upload page and the upload proceeds immediately. The OASIS File Submission File Upload page displays an “Upload in progress ...” message (Figure 3-12).

Figure 3-12. Upload In Progress Message

NOTE: The time it takes for the OASIS File Submission system to receive the OASIS data file you submitted depends upon the size of your file and concurrent system activity. Until you receive confirmation that your file was successfully uploaded, do not exit the OASIS File Submission system or perform any other function. You risk interrupting the file upload process if you do not wait for the confirmation message.

When the submitted file is successfully received at the National Submissions Database, an Upload Completed dialog box (Figure 3-13) is presented.
5. Select the **OK** button to continue.

The OASIS File Submission **File Upload** page now displays a message (Figure 3-14) confirming that the file you submitted was successfully received at the National Submissions Database.

![Figure 3-14. Submission Received Confirmation Message](image)

The submission received confirmation message provides the following information:

- **Submission ID** – the numeric identifier assigned to your file by the OASIS File Submission system
- **Submission Date** – the date and time that the National Submissions Database received your file in the Eastern time zone
- **File Name** – the name of the file that you submitted

The confirmation message also includes the following notation:

"Your submission file will be processed for errors within 24 hours. The Final Validation Report, which contains detailed information about your submission, may be accessed in the CASPER Reporting application. It is recommended that you print and retain the Final Validation Reports."

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NOTE: The confirmation message only indicates successful receipt of the file at the National Submissions Database. Errors that exist in the submitted file are identified only after the OASIS system subsequently validates the file.

6. Print the confirmation message for your records at this time. The confirmation message is cleared once you perform another OASIS File Submission function and is not available for printing later. A Print link [Alt + P] is provided for your convenience.

NOTE: Please print the confirmation message or otherwise note this information so that you may identify the corresponding OASIS Agency Final Validation Report in the CASPER Reporting application. The Submission ID and the Submission Date/Time are also needed if you must report a problem with the submission to the QTSO Help Desk.

7. You may now submit another file or log out of the OASIS File Submission system.

After your submitted OASIS data file is successfully received at the National Submissions Database, the OASIS system validates the file structure and data content based upon the OASIS data specifications. Within 24 hours of a successful submission, you may access an OASIS Agency Final Validation Report in the CASPER Reporting application that provides a detailed account of any errors found during the validation of the records in the submitted OASIS file.

Records in the submitted OASIS data file are sorted, processed, and presented on the OASIS Agency Final Validation Report in the following order:

- State Code
- Facility ID
- Type of Transaction/Record
- Reason for Assessment
- Correction Number

SUBMISSION SYSTEM ERRORS

During the OASIS file submission process, you may encounter one or more of the error conditions described below.
If you experience error messages or warnings from other software or hardware components used in association with the OASIS File Submission system, please refer to the appropriate vendor-provided manuals.

**NOTE:** Errors that are identified during the validation process are documented in Section 5, *Error Messages*, of this user's guide.

**OASIS File Size Error**

The **OASIS File Size Error** page (Figure 3-15) is presented when the size of your submission file is larger than is allowed.

**Figure 3-15. OASIS File Size Error Page**

The **OASIS File Size Error** page displays the following message:

"The specified file exceeded the file size limit of 5 MB. Please reduce the file size and try to upload again."

Please recreate the compressed (zipped) submission file with fewer assessments so that the size of the submission file is less than 5 MB.

**OASIS File Submission Error**

The **OASIS File Submission Error** page (Figure 3-16) is presented when the upload fails due to an exception condition or interruption.

**Figure 3-16. OASIS File Submission Error Page**

The **OASIS File Submission Error** page displays the following message:
"An error has occurred. Please try again later. If the problem persists, contact the help desk for assistance."

Please attempt to upload your submission file later. If the error continues to occur, call the QTSO Help Desk for assistance.

**SUBMISSION STATUS**

The OASIS File Submission system allows you to query and view the status of select submission files you successfully uploaded to the National Submissions Database.

To perform the default query that returns a list of the submission files you successfully uploaded today and yesterday, select the Submission Status item from the OASIS File Submission system menu bar. A **Search Completed** dialog box (Figure 3-17) is presented indicating the number of records returned by the default search criteria.

**Figure 3-17. Search Completed Dialog Box**

Select the **OK** button to continue. The **Search Completed** dialog box closes, leaving the **List of My Submissions** page (Figure 3-18) in full view.

**Figure 3-18. List of My Submissions Page**

The **List of My Submissions** page lists, by default, the submissions successfully uploaded yesterday and today that are associated with your user ID. For each submission the following information is provided in a tabular format:
• Submission ID – the numeric identifier assigned to a submission by the OASIS Submission system
• Submission Date – the date and time that the National Submissions Database received your file in the Eastern time zone
• Submission File Name – the name of the file that you submitted
• Total Record Count – the number of records in the submitted file
• Completion Date – the date and time that the OASIS Submission system completed validation of your file in the Eastern time zone
• Status – the current status of the submitted file:
  o Waiting – the submission file is waiting to be processed by the National Submissions System
  o Processing – the submission file is being processed by the National Submissions System
  o Completed – the submission file processing is complete
  o Error – a system error occurred during the processing of the file

**NOTE:** The list of submissions is presented in descending order by Submission ID. You can change the sort order of the tabular list by selecting the desired column heading.

The List of My Submissions page includes the following fields with which you can customize the query for submission files:

- **To Date** – the inclusive end date of the query in mm/dd/yyyy format; The default value is today’s date.
- **Prior Days** – the number of days prior to the To Date you wish to query; The default value is 1, which includes submission records for today and yesterday (one day prior to today) in the query. The drop-down list associated with the Prior Days field includes options 0, 1, 2, 5, 10, and 30.

If you wish to view submissions for dates other than today and yesterday, modify the To Date and/or the Prior Days values and select the Refresh button.

**NOTE:** To print the List of My Submissions page, use the print function of your browser by accessing the File menu and then selecting the Print option.

The following shortcut keys bring focus to elements of the OASIS File Submission system List of My Submissions page:

- Alt + 2  To Date field
- Alt + 3  Prior Days field
- Alt + s  Refresh button
NOTE: Shortcut keys utilizing numbers function only with the numeric keys along the top of the keyboard. They do not function with the numeric keys in the "10-key" pad of the keyboard.
REPORTS

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OASIS AGENCY FINAL VALIDATION REPORT ................................................................. 3
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REPORTS OVERVIEW

The reports for viewing, analyzing, and managing OASIS-related information are available in the CASPER Reporting application.

To access the CASPER Reporting application, select the CASPER Reporting link on the Welcome to the CMS QIES Systems for Providers page (Figure 4-1).

Figure 4-1. Welcome to the CMS QIES Systems for Providers Page

Reminder: The OASIS System may be down for maintenance the third Sunday of each month. If you experience any problems submitting or retrieving reports, please try again on Monday.

OASIS User Registration

OASIS Submissions

OASIS Submission User's Guide [Choose a Section] Select

CASPER Reporting Select this link to access the Final Validation and Provider reports.

CASPER Reporting User's Manual [Choose a Section] Select

QIES User Maintenance Application

QIES User Maintenance Application User's Guide

OASIS Forms

NOTE: Refer to the CASPER Reporting HHA Provider User's Guide for more information about requesting, viewing, printing, and saving reports in the CASPER Reporting application. To access the CASPER Reporting HHA Provider User's Guide, select the section of interest from the CASPER Reporting User's Manual drop-down list of links.
OASIS AGENCY FINAL VALIDATION REPORT

After your submitted OASIS data file is successfully received at the National Submission Database, the QIES ASAP OASIS system validates the file structure and data content based upon the OASIS data submission specifications. Within 24 hours of a successful submission, a system-generated OASIS Agency Final Validation Report is available to you in the CASPER Reporting application. It is found in a final validation reports (VR) folder, which is named:

[State Code] HHA [Facility ID] VR

NOTE: An OASIS Agency Final Validation Report is not created if the OASIS File Submission system did not successfully receive your file. Certain other fatal errors in the submitted file structure or data may also prevent the creation of an OASIS Agency Final Validation Report.

In the VR folder, the name of the system-generated OASIS Agency Final Validation Report includes the Submission ID assigned to the submitted file and the date and time the file was submitted. The report name is formatted as follows:

[Submission Date & Time].[Submission ID]

For example, the name of the system-generated OASIS Agency Final Validation Report for a file that was submitted on 10/27/2014 at 2:54:32 p.m. (14:54:32 military time) and assigned a Submission ID of 12345 is:

10272014145432.12345

NOTE: The Submission ID and the Submission Date/Time are identified in the confirmation message you received when you successfully submitted the file. Please print the confirmation message or otherwise note this information so that you may identify the corresponding OASIS Agency Final Validation Report in the CASPER Reporting application.

The Submission ID and the Submission Date/Time are also needed if you must report a problem with the submission to the QTSO Help Desk.

The OASIS Agency Final Validation Report provides a detailed account of the errors found during the validation of the records in the submitted OASIS file.

NOTE: Refer to Section 5 of the OASIS Submission User’s Guide, Error Messages, for information about the various errors and warnings that may be noted in the OASIS Agency Final Validation Report.
OASIS Agency Final Validation Reports are available for 60 days in your agency's shared validation report (VR) folder, after which time they are purged.

Refer to the CASPER Reporting HHA Provider User's Guide for more information about the OASIS final validation reports that are available to agencies in the CASPER Reporting application. The OASIS Agency Final Validation Report is detailed in Section 4. To access the CASPER Reporting HHA Provider User’s Guide, select the section of interest from the CASPER Reporting User’s Manual drop-down list of links found on the Welcome to the CMS QIES Systems for Providers page.

OTHER REPORTS

In addition to the OASIS Agency Final Validation Report, all of the other reports that provide OASIS-related information are accessed in the CASPER Reporting application. The OASIS reports that you may generate are found in the following report categories:

- HHA Provider Reports
- OASIS B1 OBQI/OBQM Reports
- OASIS C Quality Improvement Reports

NOTE: Some report categories are restricted to specific user groups. Only those report categories to which your user ID is granted access are available to you in the CASPER Reporting application.

Refer to the CASPER Reporting HHA Provider User's Guide for more information about the CASPER Reporting application and the reports that are available there. To access the CASPER Reporting HHA Provider User's Guide, select the section of interest from the CASPER Reporting User’s Manual drop-down list of links on the Welcome to the CMS QIES Systems for Providers page.
5

ERROR MESSAGES

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OASIS SUBMISSION ERROR MESSAGES................................................................. 3
OASIS FILE PROCESSING ERROR MESSAGES................................................ 3
TROUBLESHOOTING

When possible, you should attempt to determine the nature or source of the problem you are experiencing so that you can contact the appropriate person for assistance. It may be helpful to write a detailed description of the problem, regardless of whether you are sending an email or calling for assistance.

Should a problem arise, you should initially review the troubleshooting information in the following:

- This section, Error Messages, of the OASIS Submission User's Guide,
- Online Windows or Internet Explorer Help, or
- The software and hardware manuals provided by your vendors.

For hardware/equipment problems you are unable to resolve, contact either the vendor from whom the hardware component was purchased or the manufacturer.

Example(s): The computer will not boot or the modem does not respond.

For software problems, given the variety of software you are using, it may be difficult to determine the source. If you can determine the source, you should seek assistance as follows:

- For assistance with the OASIS Submission system, contact the QTSO Help Desk.
  Example: Waited over an hour after selecting the Upload button for the message confirming a successful submission.

- If the problem appears to be with Windows or Internet Explorer, contact either the vendor or manufacturer of the software.
  Example: An error message appears that doesn't have any corresponding explanation in the manual or guide for the OASIS System or your vendor encoding software.

- If the problem appears to be with the OASIS encoding software, you should contact your OASIS software vendor.
  Example: File submission is repeatedly rejected.
OASIS SUBMISSION ERROR MESSAGES

During the file submission process, the online OASIS Submission system displays a limited number of error messages. OASIS Submission system online errors are detailed in Section 3, Functionality, of this user's guide.

Additionally, you may experience error messages, warnings, or failures from other software or hardware components used in association with the OASIS Submission system. For those situations you should refer to the appropriate vendor-provided manuals.

OASIS FILE PROCESSING ERROR MESSAGES

Within 24 hours of the successful submission of a file, the OASIS Submission system processes the file and automatically produces a Final Validation Report detailing the errors, if any, that were encountered in the submitted records. This Final Validation Report is available to you in the CASPER Reporting application.

Processing errors range in severity from ones that render the file unable to be processed, to ones that prevent a specific record from being processed, to others that are simply warnings or informational. The processing of a file or record ceases immediately if any of the following errors are encountered:

- Invalid Zip file format
- Empty Zip file
- Invalid XML file format
- Agency authorization conflicts (user doesn’t have authority to submit for agency in record; Facility ID is null or an invalid value)
- Missing or invalid Reason for Assessment (M0100)
- Missing or invalid Effective Date (M0090 – Date Assessment Completed)
- Duplicate record
- No matching record – unable to locate the active record to be modified or inactivated
- Submitted modification record with a correction number that is not the next incremented number from the current record in the ASAP database
- Record submitted for a closed agency with the Effective Date (M0090) 24 months greater than the agency’s termination date
- Record submitted with an Effective Date (M0090) more than 36 months prior to the submission date

Many other conditions exist that prevent a record from being a successful submission. The Final Validation Report outlines the errors, whether fatal or simply warning, encountered in the submitted records. Each error or warning is noted on the report by its identifier.
NOTE: Corporate users and third-party vendors submitting files for multiple providers can expect one Final Validation Report for each provider for which records were submitted in a file.

Certain severe errors in the submitted file or one of its records prevent the system from creating and placing the automatically-generated Final Validation Report in the agency’s Validation Report (VR) folder. You may review these errors by requesting the Submitter Final Validation Report in the CASPER Reporting application.

NOTE: The Submitter Final Validation Report must be requested by the person (User ID) who submitted the file.

All fatal errors in a file or record must be corrected and the file or record resubmitted.

The remainder of this section of the guide lists the errors/warnings in order by identifier, providing a description of the error condition and guidance for correcting the error, if necessary.
<table>
<thead>
<tr>
<th>Error ID</th>
<th>Error Message</th>
<th>Error Description</th>
<th>Potential Causes</th>
<th>Tips</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>-901</td>
<td>Invalid Zip File: Unable to process the submitted file.</td>
<td>The contents of the file could not be extracted. The submitted file is a zip file. The submitted file is encrypted.</td>
<td>Contact your software vendor for technical assistance. Refer your vendor to the OASIS Data Specifications for details of file submission requirements. The submission file must be a properly formatted zip file. No other compression format, such as .zipx, is valid. The zip file should not contain subfolders. The name of the zip file must not exceed 260 characters, including the extension. Each XML file included in the zip file must not exceed 200 characters, including the extension. The name of an XML file must not include special characters.</td>
<td>Recreate and/or rename the zip file and resubmit.</td>
<td></td>
</tr>
<tr>
<td>-902</td>
<td>Invalid XML File: The submitted file does not have a valid XML file name extension.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-903</td>
<td>Required Item Missing or Invalid: Based on the OASIS Data Specifications in effect on the effective date of this record, this item is required.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Outcome and Assessment Information Set (OASIS)
Submission User's Guide
<table>
<thead>
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<th>Error ID</th>
<th>Sev</th>
<th>Error Message</th>
<th>Error Description</th>
</tr>
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</table>
| -904    | Fatal | Invalid XML File Format: The submitted file is not structured properly. | **Cause:**  
The submitted record is not a properly structured XML file and cannot be processed.  
**Tips:**  
Beginning and ending tags must enclose the entire assessment record.  
Beginning and ending tags must enclose each item of the assessment record.  
Tag names must not exceed 30 characters. This does not count the delimiters (< >) in which the tags must be enclosed.  
Values submitted between the beginning and ending tags for an item must not exceed 100 characters.  
**Action:**  
Contact your software vendor.  
Refer to the data specifications overview for XML file format details.  
Make appropriate corrections to the record and resubmit. |
| -905    | Fatal | Invalid Effective Date: Unable to calculate the effective date due to missing or invalid required field. | **Cause:**  
The QIES ASAP System is unable to verify the effective date of this record because the value submitted in item M0090 (Date Assessment Completed) is missing or invalid.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -907    | Fatal | Duplicate Assessment: The submitted record is a duplicate of a previously accepted record. | **Cause:**  
The submitted record is a duplicate of a previously accepted record for this patient.  
**Tips:**  
Duplicate records match on the following items:  
• M0040-First (First name)  
• M0040-Last (Last name)  
• M0064 (Social Security Number)  
• M0066 (Birth Date)  
• M0069 (Gender)  
• M0090 (Date Assessment Completed)  
• M0100 (Reason For Assessment)  
DO NOT resubmit an original after a modification. If the modification was in error, you must submit another modification to correct the error.  
**Action:**  
Determine why this record was submitted multiple times.  
DO NOT resubmit this record as it is already in the database. |
<table>
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| -909    | Warn | Inconsistent Record Sequence: Under CMS sequencing guidelines, the type of   | **Cause:** The submitted record does not satisfy CMS sequencing guidelines when compared to the record that was submitted to the QIES ASAP System prior to this one for this patient. 
- The reasons for assessment in this record indicate that it was submitted out of order. The record that should have preceded this record may not have been submitted successfully. 
- The patient's identifying information in this record may differ from the patient-identifying information submitted for this patient in a prior record. The current and prior records may have matched to different resident records causing what appears to be a failure in the sequencing order.  
**Definition:** 
**Resident Table Row:** Each person for whom an OASIS record is submitted to the QIES ASAP System is noted in a row on the resident table in the database. This row contains the person's identifying information and is used to link subsequent OASIS records for that person as they are submitted. If identifying information submitted for a patient does not match an existing row, a new row is created, identifying a "new" person in the database. The OASIS record submitted is linked to this "new" person. 
**Action:** There are a limited number of exceptions to the sequencing guidelines. If you are certain this record is correct due to an exception, no action is necessary. If this message occurred because a record was completed and not submitted, submit the missing record now. Review activity reports and/or roster reports to assure that all records are submitted timely. If after reviewing activity reports and/or roster reports you believe a new patient may have been created in error, contact your State OASIS Automation Coordinator. Refer to the OASIS-C1 Guidance Manual for additional information. |
| -914    | Fatal| Invalid Format: The value submitted for this item contains one or more non-printable or control characters. | **Cause:** The value submitted in this item is invalid; it contains non-printable or control characters. 
**Action:** Make appropriate corrections to the record and resubmit. |
<table>
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</table>
| -915     | Warn| Patient Information Mismatch: Submitted value(s) for the item(s) listed do not match the values in the QIES ASAP database. If the record was accepted, the patient information in the database was updated. Verify that the new information is correct. | **Cause:**
Based on patient-matching criteria, patient (patient) information in this OASIS record, though not identical, is similar enough to patient (patient) information in the QIES ASAP System that a match was identified. If the record was accepted, one or more fields in the QIES ASAP System were updated with the new or previously missing information. **Example:**
The patient's first name was spelled differently, the birth date was entered incorrectly, or the agency is now submitting information that was previously unknown (such as the Medicare or Medicaid number). **Definition:**
Patient-matching criteria: Criteria used to match key patient-identifying information in an assessment record with an existing patient (patient) known to the QIES ASAP System. **Tip:**
The patient-matching process may update the following patient (patient) information:
- last name
- first name
- middle initial
- birth date
- death date
- social security number
- Medicare number
- Medicaid number
- gender
- race/ethnicity
**Action:**
Verify the old and new information.
If the new information is correct, no action is required.
If the new information is not correct, make appropriate modifications to the record and resubmit.
Refer to the OASIS Correction policy as necessary. |
| -916     | Fatal| Multiple Matches Found: The submitted record matches multiple records in the database. Please contact the QTSO Help Desk. | **Cause:**
The submitted record matches multiple records in the QIES ASAP database. **Action:**
Contact the QTSO Help Desk for assistance.
DO NOT resubmit this record as it is already in the database. |
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| -921    | Fatal | Assessment Completed Late: The Effective Date of the assessment was more than 36 months prior to the submission date. | **Cause:** The submitted assessment was not completed according to CMS timing guidelines that require that an assessment to be submitted within 36 months of M0090 (Date Assessment Completed).  
**Action:** To avoid this error in the future, review the assessment schedule and verify that all assessments are completed in a timely manner. Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -922    | Fatal | Submission Period Expired: The assessment was submitted 24 months after the agency's closed date. | **Cause:** The submission date of this record is more than 24 months after the date the agency closed.  
**Action:** No action is necessary. If you believe this error is invalid, contact your State OASIS Automation Coordinator. |
| -923    | Fatal | Inconsistent Dates: M0090 is greater than the agency's termination date. | **Cause:** The value submitted for M0090 (Date Assessment Completed) is greater than (occurs after) the agency's termination date.  
**Action:** Make appropriate corrections to the record and resubmit. If you believe this error is invalid, contact your State OASIS Automation Coordinator. |
| -924    | Fatal | Test Record Processed: The submitting agency is not identified as being certified at this time; this record was processed as a test record. If you believe this is incorrect, please contact your state OASIS Automation Coordinator. | **Cause:** The agency submitting this record is not identified by the QIES ASAP system as being certified at this time. Therefore, this record was processed as a test record.  
**Action:** No action is necessary. If you believe this error is invalid, contact your State OASIS Automation Coordinator. |
| -925    | Warn | Record Timing Invalid: CMS timing guidelines require recertification follow-up records (M0100=4) at least every 60 days, but no earlier than day 56 of the follow-up cycle. | **Cause:** The submitted record does not satisfy CMS timing guidelines. Completion dates for the first and any subsequent follow-up assessments are calculated relative to the start of care date. Follow-up assessments must be completed every 60 days a patient is under care. A follow-up assessment should be completed on or after the 56th day and on or before the 60th day of the cycle.  
**Action:** There are a limited number of exceptions to the timing guidelines. If you are certain this record is correct due to an exception, no action is necessary. Refer to the OASIS-C1 Guidance Manual for additional information. |
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</table>
| -926    | Fatal| Invalid CCN: M0010 must not equal blank (^) for a CMS-certified agency.       | **Cause:**
The value submitted in M0010 (CMS Certification Number) must match the CCN on file in the QIES ASAP System for the CMS-certified provider identified by the HHA_AGENCY_ID in this record.

**Example:**
The CCN was not entered into the encoding software that created the submission file.

**Action:**
Verify that the CCN in the encoding software is not blank.

| -927    | Fatal| HIPPS Value Not Calculated: Fatal system problem in calculating HIPPS value. Please contact the QTSO Help Desk. Please resubmit this record when the system has been corrected. | **Cause:**
A fatal system error was encountered preventing the calculation of the HIPPS value for this record.

**Action:**
Please notify the QTSO Help Desk and resubmit this record when the system issue is resolved.

| -928    | Warn | HIPPS Code Not Calculated: A HIPPS code was not calculated because the assessment was submitted with a M0090 (Date Assessment Completed) date greater than 27 months from the submission date. | **Cause:**
The value submitted for M0090 (Date Assessment Completed) is older than the submission date by 27 or more months. A HIPPS code cannot be calculated.

**Actions:**
No action is required for this submission.
To avoid this in the future, verify that all assessments are submitted in a timely manner.

| -929    | Fatal| Multiple Branch ID Records Found: The Branch ID in the submitted record matches multiple Branch ID records in the database. Please contact your state OASIS Automation Coordinator. | **Cause:**
The value submitted for M0016 (Branch ID Number) matches multiple Branch ID records in the database.

**Actions:**
Notify your state OASIS Automation Coordinator of this error condition.
Once the condition is resolved, make appropriate corrections to the record, if necessary, and resubmit.

| -3010   | Fatal| Incorrect Format: If this item is not equal to one of the allowed special values (if any), then the length of the submitted value must match exactly the maximum length of the item. | **Cause:**
The value submitted for this item is not valid.
- If the submitted value of this item is not one of the allowed special values, the length must be the maximum length noted in the OASIS Data Specifications.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item.
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</thead>
</table>
| -3020   | Fatal | Incorrect Format: If the value does not equal blank (^), the first three characters must not equal 000. | **Cause:** The value submitted in M0064 (Social Security Number) is invalid.  
- IF M0064 is not blank (^), THEN the first three characters must not be 000.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3030   | Fatal | Incorrect Format: The value must not equal any of the following: 111111111, 3333333333, 123456789, or 9999999999. | **Cause:** The value submitted in M0063 (Medicare Number) or M0064 (Social Security Number) is invalid.  
- IF M0063 or M0064 is not blank (^), THEN it must not be 111111111, 3333333333, 123456789, or 9999999999.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3040   | Fatal | Incorrect Format: If the first character is numeric 0-9, then the first 9 characters must be numeric 0-9. | **Cause:** The value submitted in M0063 (Medicare Number) is invalid.  
- IF the first character of M0063 is numeric, THEN all 9 characters must be numeric.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3050   | Fatal | Incorrect Format: If the first character is alphabetic, then there must be 1, 2, or 3 alphabetic characters followed by 6 or 9 numbers, up to the length of the item. | **Cause:** The value submitted in M0063 (Medicare Number) is invalid.  
- IF the first character of M0063 is alphabetic, THEN there must be 1, 2, or 3 alphabetic characters and the remainder of the characters in the item must be numeric.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3060   | Fatal | Invalid Value: The value submitted for this item is not an acceptable value. | **Cause:** The submitted value is not one of the options allowed for this item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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</table>
| -3070   | Fatal| Invalid Date: This item must contain a valid date in YYYYMMDD format or allowable special character(s). | **Cause:**  
The date submitted in this item is invalid or formatted improperly.  
- A date must be submitted in YYYYMMDD format or must contain the appropriate allowable special character(s).  
**Tip:**  
The invalid date is displayed on the Final Validation Report in the exact format that it was submitted. |
| -3080   | Fatal| Invalid Birth Date: M0066 must contain a valid date in YYYYMMDD, YYYYMM, or YYYY format. | **Cause:**  
The value submitted in M0066 (Birth Date) is invalid or formatted improperly. M0066 must be submitted in YYYYMMDD, YYYYMM, or YYYY format or as one of the allowable special values.  
**Tip:**  
The invalid date is displayed on the Final Validation Report in the exact format that it was submitted.  
**Action:**  
Contact the vendor of your encoding software to correct the formatting of dates.  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3090   | Fatal| Invalid Value: Only unsigned numeric values that are within the range of acceptable values and specified special characters are valid for this item. | **Cause:**  
The value submitted in this item is invalid; it is not one of the numeric values or special characters allowed.  
**Tip:**  
An unsigned numeric value is a number without a leading plus or minus sign. Negative (signed) numbers are not allowed.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3100   | Fatal| Invalid Numeric Format: Only whole numbers and specified special characters are valid for this item. | **Cause:**  
The value submitted in this item is invalid; it is not one of the numeric values or special characters allowed.  
**Tip:**  
Numbers with a decimal point and one or more decimal places are not allowed for this item.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3110   | Fatal | Invalid Format: Only numeric characters 0-9 and specified special characters are valid for this item. No spaces are allowed. | **Cause:** The value submitted in this item is invalid.  
- This item may only contain numeric characters, the specified special characters, or be blank (^).  
- No spaces are allowed in this item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3120   | Fatal | Invalid Format: Only numeric characters 0-9, letters A-Z, or letters a-z are valid for this item. No spaces are allowed. | **Cause:** The value submitted in this item is invalid.  
- This item may only contain alphanumeric characters, or the special character(s) identified in the data specifications for the item, or be blank (^).  
- No spaces are allowed in this item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3130   | Fatal | Invalid Format: Only numeric characters 0-9, letters A-Z, letters a-z, dash (-), at sign (@), single quote ('), forward slash (/), plus sign (+), comma (,), period (.), underscore (_), and specified valid values are valid for this item. Embedded spaces are allowed. | **Cause:** The value submitted in this item is invalid.  
- If not blank (^), this item may only contain alphanumeric characters, a dash (-), at sign (@), single quote ('), forward slash (/), plus sign (+), comma (,), period (.), and underscore (_).  
- Embedded spaces are allowed.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3140   | Fatal | Invalid Value: Only numeric characters 0-9, letters A-Z, letters a-z, at sign (@), single quote ('), forward slash (/), plus sign (+), comma (,), period (.), underscore (_), and specified valid values are valid for this item. | **Cause:** The value submitted in this item is invalid.  
- If not blank (^), this item may only contain alphanumeric characters, at sign (@), single quote ('), forward slash (/), plus sign (+), comma (,), period (.), or underscore (_).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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</thead>
</table>
| -3150    | Fatal| Invalid E-Mail Address: The submitted e-mail address contains invalid characters. | **Cause:**  
The Software Vendor Email Address (SFW_EMAIL_ADR) in the submitted record is invalid.  
- An e-mail address may not contain the following characters:  
  - single quote (')  
  - double-quote (")  
  - comma (,)  
  - semi-colon (;)  
  - colon (;)  
  - back slash (/)  
  - right and left parentheses (() and ))  
  - right and left brackets ([ and ])  
  - right and left braces ({ and })  
  - less than (<)  
  - greater than (> )  
  - space ( )  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3160    | Fatal| Invalid HHA_AGENCY_ID: The HHA_AGENCY_ID submitted in this file does not identify a valid provider in the QIES ASAP System. | **Cause:**  
The Agency ID (HHA_AGENCY_ID) in the submitted record is not associated with a valid provider in the QIES ASAP system.  
- The HHA_AGENCY_ID must be a system-assigned HHA_AGENCY_ID.  
- The value of the submitted HHA_AGENCY_ID must match the HHA_AGENCY_ID in the QIES ASAP system for the provider.  
**Action:**  
Make appropriate corrections to the record and resubmit. |
| -3162    | Fatal| Unauthorized Submitter: The submitter's User ID is not authorized to submit data on behalf of the provider identified by the HHA_AGENCY_ID in this file. | **Cause:**  
The submitter's User ID does not have authority to submit for the provider identified by the HHA_AGENCY_ID submitted in this record.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Contact the QTSO Help Desk for additional assistance. |
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<th>Error ID</th>
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</table>
| -3170   | Warn  | Incorrect CCN: M0010 does not match the CMS Certification Number (CCN) in the QIES ASAP System database for the agency identified in the file. | **Cause:**
The CMS Certification Number in this record differs from the CCN that is currently in the QIES ASAP System database for this provider.
The value submitted in M0010 (CMS Certification Number) does not match the CCN on file in the QIES ASAP System for the provider identified by the HHA_AGENCY_ID in this record.

**Example:**
The CCN was entered incorrectly into the encoding software that created the submission file.

**Action:**
Verify that the CCN in the encoding software is correct. |
| -3180   | Fatal | Required Field: This is a required text item. A valid non-blank value must be submitted. | **Cause:**
The value submitted in this item must not be blank.                                                                                                  |
|         |       |                                                                                   | **Action:**
Make appropriate corrections to the record and resubmit.                                                                                               |
| -3190   | Fatal | No Match Found: This modification/inactivation record does not match a previously accepted record in the QIES ASAP System. One or more of the items of this record did not match the corresponding items of an existing record in the database. | **Cause:**
One or more of the values submitted in this modification or inactivation record do not match the values submitted in a previously accepted record in the QIES ASAP System.
- To identify the record requiring modification or inactivation, the following items must match the corresponding items of a previously accepted record:
  o M0030 (Start of Care Date)
  o M0032 (Resumption of Care Date)
  o M0032 (Resumption of Care N/A)
  o M0040-First (First name)
  o M0040-Last (Last name)
  o M0064 (Social Security Number)
  o M0064 (Social Security Number UK)
  o M0066 (Birth Date)
  o M0069 (Gender)
  o M0090 (Date Assessment Completed)
  o M0100 (Reason For Assessment)
  o M0906 (Discharge/Transfer/Death Date)

**Action:**
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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<th>Error ID</th>
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<tbody>
<tr>
<td>-3200</td>
<td>Fatal</td>
<td>Inconsistent CORRECTION_NUM Value: The Correction Number value submitted in CORRECTION_NUM is not incremented by one (1) from the previously accepted Correction Number for this record.</td>
<td>Cause: The value submitted in CORRECTION_NUM (Correction Number) is inconsistent with the value of CORRECTION_NUM submitted in the previous record. The value of CORRECTION_NUM in this record must be the value of CORRECTION_NUM submitted in the previous record plus 1. In the first modification/inactivation record, the value of CORRECTION_NUM must be 01. The value of CORRECTION_NUM in the second modification/inactivation record must be 02, and so on. • The value of CORRECTION_NUM minus 1 must equal the value of CORRECTION_NUM that was previously submitted successfully for this record. Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
</tr>
<tr>
<td>-3210</td>
<td>Fatal</td>
<td>Text Too Long: The length of the text submitted for this item exceeds the maximum length allowed.</td>
<td>Cause: The text submitted exceeds the maximum length allowed for this item. Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
</tr>
<tr>
<td>-3220</td>
<td>Fatal</td>
<td>Inconsistent Software Information: If SFW_PROD_NAME equals blank (^), then SFW_PROD_VRSN_CD must equal blank (^).</td>
<td>Cause: The value submitted in SFW_PROD_VRSN_CD (Software Product Version Code) is not consistent with the value submitted in SFW_PROD_NAME (Software Product Name). • IF SFW_PROD_NAME is blank (^), THEN SFW_PROD_VRSN_CD must be blank (^). Action: Verify that the software information in the encoding software is correct. Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
</tr>
<tr>
<td>-3230</td>
<td>Fatal</td>
<td>Inconsistent Software Vendor Information: If SFW_PROD_NAME does not equal blank (^), then SFW_PROD_VRSN_CD must not equal blank (^).</td>
<td>Cause: The value submitted in SFW_PROD_VRSN_CD (Software Product Version Code) is not consistent with the value submitted in SFW_PROD_NAME (Software Product Name). • IF SFW_PROD_NAME is not blank (^), THEN SFW_PROD_VRSN_CD must not be blank (^). Action: Verify that the software information in the encoding software is correct. Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
</tr>
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<td>Error ID</td>
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</tbody>
</table>
| -3240   | Fatal | Invalid ISC: The submitted ITM_SBST_CD does not match the ISC calculated by the QIES ASAP System. | **Cause:**  
The value submitted in ITM_SBST_CD (Item Subset Code (ISC)) does not match the ISC calculated by the QIES ASAP System.  
**Tip:**  
The values of the following items determine which subset of items (ISC) is appropriate for this record:  
- TRANS_TYPE_CD (Transaction Type Code)  
- M0100 (Reason for Assessment)  
**Action:**  
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3250   | Fatal | Invalid Format: Only numeric characters 0-9, letters A-Z, letters a-z, dash (-), at sign (@), ampersand (&), single quote ('), forward slash (/), plus sign (+), comma (,), period (.), underscore (_), and specified valid values are valid for this item. Embedded spaces are allowed. | **Cause:**  
The value submitted in this item is invalid.  
- This item may only contain alphanumeric characters, a dash (-), at sign (@), ampersand (&), single quote ('), forward slash (/), plus sign (+), comma (,), period (.), underscore (_), or the special character(s) identified in the data specifications for the item.  
- Embedded spaces are allowed.  
**Action:**  
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3260   | Fatal | Inconsistent Dates: The dates listed are out of logical order. | **Cause:** The dates submitted in the noted items are out of order or in the future.  
- IF M0032 (Resumption of Care Date) is a blank (*), these dates must occur chronologically as follows:  
  o M0066 (Birth Date) must precede M1005 (Inpatient Discharge Date)  
  o M1005 must precede or be the same as M0102 (Date of Physician-ordered SOC/ROC)  
  o M0102 must precede or be the same as M0030 (Start of Care Date)  
  o M0030 must precede or be the same as M1307 (Oldest Non-epithelialized Stage II Pressure Ulcer Identified Date)  
  o M1307 must precede or be the same as M0903 (Date of Last Home Visit)  
  o M0903 must precede or be the same as M0906 (Discharge/Transfer/Death Date)  
  o M0906 must precede or be the same as M0090 (Date Assessment Completed)  
  o M0090 must precede or be the same as the current date  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3270   | Fatal | Inconsistent Dates: The dates listed are out of logical order. | **Cause:** The dates submitted in the noted items are out of order or in the future.  
- IF M0032 (Resumption of Care Date) is not a blank (*), these dates must occur chronologically as follows:  
  o M0066 (Birth Date) must precede M0030 (Start of Care Date)  
  o M0030 must precede or be the same as M1005 (Inpatient Discharge Date)  
  o M1005 must precede or be the same as M0102 (Date of Physician-ordered SOC/ROC)  
  o M0102 must precede or be the same as M0032 (Resumption of Care Date)  
  o M0032 must precede or be the same as M1307 (Oldest Non-epithelialized Stage II Pressure Ulcer Identified Date)  
  o M1307 must precede or be the same as M0903 (Date of Last Home Visit)  
  o M0903 must precede or be the same as M0906 (Discharge/Transfer/Death Date)  
  o M0906 must precede or be the same as M0090 (Date Assessment Completed)  
  o M0090 must precede or be the same as the current date  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3280   | Warn| Inconsistent Dates: If M0100 is equal to 01, then M0030 minus M1005 should be greater than or equal to zero and less than or equal to 14 days. | **Cause:** The assessment was not completed within CMS timing guidelines.  
- IF M0100 (Reason for Assessment) is 01 and M0030 (Start of Care Date) and M1005 (Inpatient Discharge Date) are both active and are not blank (^), THEN M0030 minus M1005 should be greater than or equal zero but no more than 14 calendar days.  
**Tip:** M1005 should only be entered when the patient was discharged from an inpatient facility within the past 14 days prior to admission to a home health agency.  
**Actions:** No action is required. Make corrections, if appropriate, to the record and resubmit. To avoid this warning in the future, review the assessment timing schedule in the OASIS-C1 Guidance Manual and verify that all assessments are submitted in a timely manner. |
| -3290   | Warn| Inconsistent Dates: If M0100 is equal to 03, then M0032 minus M1005 should be greater than or equal to zero and less than or equal to 14 days. | **Cause:** The assessment was not completed within CMS timing guidelines.  
- IF M0100 (Reason for Assessment) is 03 and M0032 (Resumption of Care Date) and M1005 (Inpatient Discharge Date) are both active and are not blank (^), THEN M0032 minus M1005 should be greater than or equal to zero but no more than 14 calendar days.  
**Tip:** M1005 should only be entered when the patient was discharged from an inpatient facility within the past 14 days prior to admission to a home health agency.  
**Actions:** No action is required. Make corrections, if appropriate, to the record and resubmit. To avoid this warning in the future, review the assessment timing schedule in the OASIS-C1 Guidance Manual and verify that all assessments are submitted in a timely manner. |
| -3300   | Warn| Inconsistent Dates: If M0100 is equal to 01, then M0090 minus M0030 should be greater than or equal to zero and less than or equal to 5 days. | **Cause:** The assessment was not completed within CMS timing guidelines.  
- IF M0100 (Reason for Assessment) is 01 and M0090 (Date Assessment Completed) and M0030 (Start of Care Date) are both active and are not blank (^), THEN M0090 minus M0030 should be greater than or equal to zero but no more than 5 calendar days.  
**Actions:** No action is required. Make corrections, if appropriate, to the record and resubmit. To avoid this warning in the future, review the assessment timing schedule in the OASIS-C1 Guidance Manual and verify that all assessments are submitted in a timely manner. |
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| -3310   | Warn| Inconsistent Dates: If M0100 is equal to 03, then M0090 minus M0032 should be greater than or equal to zero and less than or equal to 2 days. | Cause: The assessment was not completed within CMS timing guidelines.  
- IF M0100 (Reason for Assessment) is 03 and M0090 (Date Assessment Completed) and M0032 (Resumption of Care Date) are both active and are not blank (^), THEN M0090 minus M0032 should be greater than or equal to zero but no more than 2 calendar days.  
Actions: No action is required. Make corrections, if appropriate, to the record and resubmit. To avoid this warning in the future, review the assessment timing schedule in the OASIS-C1 Guidance Manual and verify that all assessments are submitted in a timely manner. |
| -3320   | Warn| Inconsistent Dates: If M0100 is equal to 09, then M0090 minus M0906 should be greater than or equal to zero and less than or equal to 2 days. | Cause: The assessment was not completed within CMS timing guidelines.  
- IF M0100 (Reason for Assessment) is 09 and M0090 (Date Assessment Completed) and M0906 (Discharge/Transfer/Death Date) are both active and are not blank (^), THEN M0090 minus M0906 should be greater than or equal to zero but no more than 2 calendar days.  
Actions: No action is required. Make corrections, if appropriate, to the record and resubmit. To avoid this warning in the future, review the assessment timing schedule in the OASIS-C1 Guidance Manual and verify that all assessments are submitted in a timely manner. |
| -3330   | Warn| Record Submitted Late: The submission date is more than 30 days after M0090 on this new record. | Cause: The assessment was not submitted within the CMS timing guidelines.  
- IF this is a new record (TRANS_TYPE_CD is 1), THEN the submission date minus M0090 (Date Assessment Completed) should be no more than 30 calendar days.  
Actions: No action is required. To avoid this warning in the future, review the assessment timing schedule in the OASIS-C1 Guidance Manual and verify that all assessments are submitted in a timely manner. |
| -3340   | Fatal| Inconsistent Items: If TRANS_TYPE_CD is equal to 1, then CORRECTION_NUM must equal 00. | Cause: The value submitted in CORRECTION_NUM (Correction Number) is inconsistent with the value submitted in TRANS_TYPE_CD (Transaction Type Code).  
- IF TRANS_TYPE_CD is 1, THEN CORRECTION_NUM must be 00.  
Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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</table>
| -3350   | Fatal | Incorrect Format: Invalid ICD-9 (non-E- or V-code) diagnosis format. | **Cause:**  
The value submitted for this item is not valid. For an item where an E- or V-code is not allowed, a non-blank ICD-9 diagnosis code must conform with the following formatting rules:  
- Character 1 must be blank (^).  
- Characters 2 through 4 must each be a number 0-9.  
- Character 5 must be a decimal point.  
- Characters 6 and 7 must each be a number 0-9 or blank (^).  
- If character 6 is blank (^), then character 7 must be blank (^).  
**Tip:**  
An ICD-10 diagnosis code is not valid for this item.  
**Action:**  
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3360   | Fatal | Incorrect Format: Invalid ICD-9 procedure code format. | **Cause:**  
The value submitted in this item is not valid. ICD-9 procedure codes must conform with the following formatting rules:  
- Characters 1 and 2 must be blank (^).  
- Characters 3 and 4 must each be a number 0-9.  
- Character 5 must be a decimal point.  
- Character 6 must be a number 0-9.  
- Character 7 must be a number 0-9 or blank (^).  
**Tip:**  
An ICD-10 procedure code is not valid for this item.  
**Action:**  
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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</table>
| -3370   | Fatal | Incorrect Format: Invalid ICD-9 (V-code allowed) diagnosis format.            | **Cause:** The value submitted in this item is not valid. For an item where a V-code (but not an E-code) is allowed, a non-blank ICD-9 diagnosis code must conform with the following formatting rules:  
  - Character 1 must be blank (^).  
  - Character 2 must be a number 0-9 or V.  
  - Characters 3 through 4 must each be a number 0-9.  
  - Character 5 must be a decimal point.  
  - Characters 6 and 7 must each be a number 0-9 or blank (^).  
  - If character 6 is blank (^), then character 7 must be blank (^).  
**Tip:** An ICD-10 diagnosis code is not valid for this item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3380   | Fatal | Incorrect Format: Invalid ICD-9 (E- or V-code allowed) diagnosis format.     | **Cause:** The value submitted in this item is not valid. For an item where an E- or V-code is allowed, a non-blank ICD-9 diagnosis code must conform with one of the following formatting rules:  
  **Pattern A:**  
  - Character 1 must be E or blank (^).  
  - Characters 2 through 4 must each be a number 0-9.  
  - Character 5 must be a decimal point.  
  - Characters 6 and 7 must each be a number 0-9 or blank (^).  
  - If character 6 is blank (^), then character 7 must be blank (^).  
  **Pattern B:**  
  - Character 1 must be blank (^).  
  - Character 2 must V.  
  - Characters 3 and 4 must each be a number 0-9.  
  - Character 5 must be a decimal point.  
  - Characters 6 and 7 must each be a number 0-9 or blank (^).  
  - If character 6 is blank (^), then character 7 must be blank (^).  
**Tip:** An ICD-10 diagnosis code is not valid for this item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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</table>
| -3390   | Fatal | Invalid Patient Age: Patient age at the time the assessment was completed cannot be greater than 140 years and must not be less than 18 years. | **Cause:**  
The value submitted in item M0066 (Birth Date) is invalid.  
- IF M0090 (Date Assessment Completed) minus M0066 is less than 18 years or greater than 140 years, THEN the birth date is invalid.  
**Tip:**  
For purposes of calculating a patient’s age:  
If both the month and day of the patient’s birth date are unknown, the ASAP system uses 07 for the month and 02 for the day.  
If only the day of the patient’s birth date is unknown, the ASAP system uses 15 for the day.  
**Action:**  
If the patient’s birth date is correct, no further action is necessary.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3400   | Fatal | Invalid Numeric Format: Only whole numbers, numbers with one decimal place, and specified special characters are valid for this item. | **Cause:**  
The value submitted in this item is invalid; it is not one of the numeric values or special characters allowed.  
Numbers with two or more decimal places are not allowed for this item.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3410   | Fatal | Inconsistent Branch Items: If M0016 contains a standard branch ID (not equal to N or P), then M0014 must not equal blank (^). | **Cause:**  
The values submitted in items M0014 (Branch State) and M0016 (Branch ID Number) are inconsistent.  
- IF M0016 is a standard branch ID (i.e. not N or P), THEN M0014 must not be blank (^).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item.  
Contact your Software vendor for assistance. |
| -3420   | Fatal | Inconsistent Branch Items: If M0016 is equal to N or P, then M0014 must equal blank (^). | **Cause:**  
The values submitted items for M0014 (Branch State) and M0016 (Branch ID Number) are inconsistent.  
- IF M0016 is N or P, THEN M0014 must be blank (^).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the current data specifications to determine the valid values.  
Contact your Software vendor for assistance. |
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<tbody>
<tr>
<td>-3430</td>
<td>Fatal</td>
<td>Invalid ZIP Code Format: M0060 must be either 5 or 9 bytes in length and not include a dash if a ZIP+4 code is submitted.</td>
<td><strong>Cause:</strong> The value submitted in item M0060 (Patient ZIP Code) is invalid. A ZIP Code must be either 5 or 9 numeric digits and must not include a dash (-). <strong>Action:</strong> Make appropriate corrections to the record and resubmit.</td>
</tr>
<tr>
<td>-3440</td>
<td>Fatal</td>
<td>Invalid Skip Pattern: If M1000-NA is equal to 1, then all items M1005 through M1012-UK must equal blank (^).</td>
<td><strong>Cause:</strong> The value submitted in this item is not consistent with the value submitted in item M1000-NA (Discharged from Inpatient Facilities-NA). • IF M1000-NA is 1, THEN all active items from M1005 (Inpatient Discharge Date) through M1012-UK (Inpatient Procedure-Unknown) must be blank (^). <strong>Tip:</strong> This is a skip pattern. If M1000-NA is 1, then skip to M1016 (Diagnoses Requiring Regimen Change) or the next active item. <strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
</tr>
<tr>
<td>-3450</td>
<td>Fatal</td>
<td>Inconsistent M1005 Values: If M1005-UK is equal to 0, then M1005 date must not equal blank (^).</td>
<td><strong>Cause:</strong> The date submitted in M1005 (Inpatient Discharge Date) is not consistent with the value submitted in item M1005-UK (Inpatient Discharge Date-Unknown). • IF M1005-UK is 0, THEN M1005 date, if active, must not be blank (^). <strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
</tr>
<tr>
<td>-3460</td>
<td>Fatal</td>
<td>Inconsistent M1005 Values: If M1005-UK is equal to 1, then M1005 date must equal blank (^).</td>
<td><strong>Cause:</strong> The date submitted in M1005 (Inpatient Discharge Date) is not consistent with the value submitted in item M1005-UK (Inpatient Discharge Date-Unknown). • IF M1005-UK is 1, THEN M1005 date, if active, must be blank (^). <strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
</tr>
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</tr>
</tbody>
</table>
| -3470    | Fatal | Inconsistent M0018 Values: If M0018-UK is equal to 0, then M0018 NPI number must not equal blank (^). | **Cause:** The value submitted in M0018 (National Provider Identifier (NPI)) is not consistent with the value submitted in item M0018-UK (NPI Unknown).  
- IF M0018-UK is 0, THEN M0018 NPI number, if active, must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3480    | Fatal | Inconsistent M0018 Values: If M0018-UK is equal to 1, then M0018 NPI number must equal blank (^). | **Cause:** The value submitted in M0018 (National Provider Identifier (NPI)) is not consistent with the value submitted in item M0018-UK (NPI Unknown).  
- IF M0018-UK is 1, THEN M0018 NPI number, if active, must be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3490    | Fatal | Inconsistent M0032 Values: If M0032-NA is equal to 0, then M0032 date must not equal blank (^). | **Cause:** The date submitted in M0032 (Resumption of Care Date) is not consistent with the value submitted in item M0032-NA (ROC Date Not Applicable).  
- IF M0032-NA is 0, THEN M0032 ROC date, if active, must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3500    | Fatal | Inconsistent M0032 Values: If M0032-NA is equal to 1, then M0032 date must equal blank (^). | **Cause:** The date submitted in M0032 (Resumption of Care Date) is not consistent with the value submitted in item M0032-NA (ROC Date Not Applicable).  
- IF M0032-NA is 1, THEN M0032 ROC date, if active, must be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3510   | Fatal | Inconsistent M0063 Values: If M0063-NA is equal to 0, then M0063 Medicare Number must not equal blank (^). | **Cause:**  
The value submitted in M0063 (Medicare Number) is not consistent with the value submitted in item M0063-NA (No Medicare).  
- IF M0063-NA is 0, THEN M0063 Medicare number, if active, must not be blank (^).  

**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3520   | Fatal | Inconsistent M0063 Values: If M0063-NA is equal to 1, then M0063 Medicare Number must equal blank (^). | **Cause:**  
The value submitted in M0063 (Medicare Number) is not consistent with the value submitted in item M0063-NA (No Medicare).  
- IF M0063-NA is 1, THEN M0063 Medicare number, if active, must be blank (^).  

**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3530   | Fatal | Inconsistent M0064 Values: If M0064-UK is equal to 0, then M0064 Social Security Number must not equal blank (^). | **Cause:**  
The value submitted in M0064 (Social Security Number) is not consistent with the value submitted in item M0064-UK (SSN Unknown).  
- IF M0064-UK is 0, THEN M0064 SSN, if active, must not be blank (^).  

**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3540   | Fatal | Inconsistent M0064 Values: If M0064-UK is equal to 1, then M0064 Social Security Number must equal blank (^). | **Cause:**  
The value submitted in M0064 (Social Security Number) is not consistent with the value submitted in item M0064-UK (SSN Unknown).  
- IF M0064-UK is 1, THEN M0064 SSN, if active, must be blank (^).  

**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3550   | Fatal | Inconsistent M0065 Values: If M0065-NA is equal to 0, then M0065 Medicaid Number must not equal blank (^). | **Cause:** The value submitted in M0065 (Medicaid Number) is not consistent with the value submitted in item M0065-NA (No Medicaid).  
- IF M0065-NA is 0, THEN M0065 Medicaid number, if active, must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3560   | Fatal | Inconsistent M0065 Values: If M0065-NA is equal to 1, then M0065 Medicaid Number must equal blank (^). | **Cause:** The value submitted in M0065 (Medicaid Number) is not consistent with the value submitted in item M0065-NA (No Medicaid).  
- IF M0065-NA is 1, THEN M0065 Medicaid number, if active, must be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3570   | Fatal | Inconsistent M0102 Values: If M0102 date is not equal to blank (^), then M0102-NA must equal 0 or blank (^). | **Cause:** The date submitted in M0102 (Physician-ordered SOC/ROC Date) is not consistent with the value submitted in item M0102-NA (No specific physician-ordered SOC/ROC).  
- IF M0102 date is not blank (^), THEN M0102-NA, if active, must be 0 or blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3580   | Fatal | Inconsistent M0102 Values: If M0102 date is equal to blank (^), then M0102-NA must equal 1. | **Cause:** The value submitted in M0102 (Physician-ordered SOC/ROC Date) is not consistent with the value submitted in item M0102-NA (No specific physician-ordered SOC/ROC).  
- IF M0102 date is blank (^), THEN M0102-NA, if active, must be 1.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3590   | Fatal | Inconsistent M0102/M0104 Values: If M0102 date is not equal to blank (^), then M0104 must equal blank (^).                                                                                                       | **Cause:** The date submitted in M0102 (Physician-ordered SOC/ROC Date) is not consistent with the value submitted in item M0104 (Date of Referral).  
  - IF M0102 date is not blank (^), THEN M0104, if active, must be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.                                                                                           |
| -3600   | Fatal | Inconsistent M0102/M0104 Values: If M0102 date is equal to blank (^), then M0104 must not equal blank (^).                                                                                                      | **Cause:** The value submitted in M0102 (Physician-ordered SOC/ROC Date) is not consistent with the value submitted in item M0104 (Date of Referral).  
  - IF M0102 date is blank (^), THEN M0104, if active, must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.                                                                                           |
| -3610   | Fatal | Inconsistent M0110/SUBM_HIPPS_CODE Values: If SUBM_HIPPS_CODE is not equal to blank (^), then M0110 must equal 01, 02, or UK.                                                                                   | **Cause:** The value submitted in SUBM_HIPPS_CODE is not consistent with the value submitted in item M0110 (Episode Timing).  
  - IF SUBM_HIPPS_CODE is not blank (^), THEN M0110 must be 01, 02, or UK.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.                                                                                           |
| -3620   | Fatal | Inconsistent M0140 Items: At least one item M0140-1 through M0140-6 must equal 1.                                                                                                                           | **Cause:** The value submitted in M0140 (Race/Ethnicity) is invalid.  
  - IF M0140 is active, THEN at least one item M0140-1 (American Indian or Alaska Native) through M0140-6 (White) must be checked.  
**Tip:** A checked response displays as a “1” on the validation report. An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.                                                                                           |
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| -3630   | Fatal | Inconsistent M0150 Values: At least one of the items M0150-1 through M0150-4 must equal 1 or the patient's care is not paid by Medicare or Medicaid. | **Cause:**  
The value submitted in at least one of the items M0150-1 (Current Payment Source-Medicare FFS) through M0150-4 (Current Payment Source-Medicaid-HMO) must be 1.  
- IF at least one of the items M0150-1 through M0150-4 is not checked, THEN the patient's care is not paid by Medicare or Medicaid and the record is rejected.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3640   | Fatal | Inconsistent M0150 Values: Both items M0150-0 and M0150-UK must equal 0. | **Cause:**  
The value submitted in items M0150-0 (Current Payment Source-None) and M0150-UK (Current Payment Source-Unknown) must be 0.  
- IF M0150-0 or M0150-UK is checked, THEN the patient's care is not paid by Medicare or Medicaid and the record is rejected.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3650   | Fatal | Inconsistent M1000 Values: If M1000-NA is equal to 0, then at least one item M1000-1 through M1000-7 must equal 1. | **Cause:**  
The value submitted in item M1000-NA (Discharged from Inpatient Facilities-NA) is not consistent with one or more values submitted in related items M1000-1 through M1000-7.  
- IF M1000-NA is unchecked, THEN one or more active items M1000-1 through M1000-7 must be checked.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3660   | Fatal| Inconsistent M1000 Values: If M1000-NA is equal to 1, then all items M1000-1 through M1000-7 must equal 0. | **Cause:**  
The value submitted in item M1000-NA (Discharged from Inpatient Facilities-NA) is not consistent with one or more values submitted in related items M1000-1 through M1000-7.  
- IF M1000-NA is checked, THEN all items M1000-1 through M1000-7 must be unchecked.  
**Tip:**  
A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3670   | Fatal| Inconsistent M1010 Values: If a value submitted in items M1010-a through M1010-f is not equal to blank (^), it must not equal any value submitted in the remaining items in this list. | **Cause:**  
One or more duplicate non-blank (^) values were submitted in Inpatient Diagnosis items M1010a through M1010-f.  
- If an item M1010-a through M1010-f is not blank (^), it must not equal a value submitted in any other item M1010-a through M1010-f.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3680   | Fatal| Inconsistent M1012 Values: If M1012-NA is equal to 1, then M1012-UK must equal 0. | **Cause:**  
The values submitted in items M1012-NA (Inpatient Procedure-Not Applicable and M1012-UK (Inpatient Procedure-Unknown) are inconsistent.  
- IF M1012-NA is checked, THEN M1012-UK must be unchecked.  
**Tip:**  
A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3690    | Fatal | Inconsistent M1012 Values: If M1012-UK is equal to 1, then M1012-NA must equal 0. | **Cause:**  
The values submitted in items M1012-NA (Inpatient Procedure-Not Applicable and M1012-UK (Inpatient Procedure-Unknown) are inconsistent.  
- IF M1012-UK is checked, THEN M1012-NA must be unchecked.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3700    | Fatal | Inconsistent M1012 Values: If M1012-NA is equal to 0 and M1012-UK is equal to 0, then at least one item M1012-a through M1012-d must not equal blank (^). | **Cause:**  
The values submitted in items M1012-NA (Inpatient Procedure-Not Applicable and M1012-UK (Inpatient Procedure-Unknown) are not consistent with the values submitted in Inpatient Procedure items M1012-a through M1012-d.  
- IF M1012-UK and M1012-NA are unchecked, THEN at least one item M1012-a through M1012-d must not be blank (^).  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3710    | Fatal | Inconsistent M1012 Values: If M1012-NA is equal to 1 or M1012-UK is equal to 1, then M1012-a through M1012-d must equal blank (^). | **Cause:**  
The values submitted in items Inpatient Procedure items M1012-a through M1012-d are not consistent with the values submitted in M1012-NA (Inpatient Procedure-Not Applicable) and M1012-UK (Inpatient Procedure-Unknown).  
- IF M1012-UK or M1012-NA is checked, THEN all items M1012-a through M1012-d must be blank (^).  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3720   | Fatal | Inconsistent M1012 Values: If any item M1012-a through M1012-d is not equal to blank (^), then M1012-NA must equal 0 and M1012-UK must equal 0. | **Cause:** The values submitted in items M1012-NA (Inpatient Procedure-Not Applicable and M1012-UK (Inpatient Procedure-Unknown) are not consistent with the values submitted in Inpatient Procedure items M1012-a through M1012-d.  
- IF any item M1012-a through M1012-d is not blank (^), THEN M1012-UK and M1012-NA must be unchecked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3730   | Fatal | Inconsistent M1012 Values: If a value submitted in items M1012-a through M1012-d is not equal to blank (^), it must not equal any value submitted in the remaining items in this list. | **Cause:** One or more duplicate non-blank (^) values were submitted in the Inpatient Procedure items M1012-a through M1012-d.  
- IF an item M1012-a through M1012-d is not blank (^), THEN it must not be the same as a value submitted in the other M1012-a through M1012-d items.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3740   | Fatal | Inconsistent M1016 Values: If M1016-NA is equal to 0, then at least one item M1016-a through M1016-f must not equal blank (^). | **Cause:** The value submitted in at least one Diagnoses Requiring Regimen Change item M1016-a through M1016-f is not consistent with the value submitted in M1016-NA.  
- IF M1016-NA is unchecked, THEN at least one item M1016-a through M1016-f must not be blank (^).  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3750   | Fatal| Inconsistent M1016 Values: If M1016-NA is equal to 1, then M1016-a through M1016-f must equal blank (^). | **Cause:** The values submitted in Diagnoses Requiring Regimen Change items M1016-a through M1016-f are not consistent with the value submitted in M1016-NA.  
  - IF M1016-NA is checked, THEN all items M1016-a through M1016-f must be blank (^).  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3760   | Fatal| Inconsistent M1016 Values: If a value submitted in items M1016-a through M1016-f is not equal to blank (^), it must not equal any value submitted in the remaining items in this list. | **Cause:** One or more duplicate non-blank (^) values were submitted in the Diagnoses Requiring Regimen Change items M1016-a through M1016-f.  
  - IF an item M1016-a through M1016-f is not blank (^), THEN it must not be the same as a value submitted in the other M1016-a through M1016-f items.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3770   | Fatal| Inconsistent M1018 Values: If any one of the items M1018-7, M1018-NA, or M1018-UK is equal to 1, then the remaining two items must equal 0. | **Cause:** The values submitted in Conditions Prior to Regimen Change items M1018-7 (None of the Above), M1018-NA (No inpatient discharge and no change), and M1018-UK (Unknown) are inconsistent.  
  - IF M1018-7, M1018-NA, or M1018-UK is checked, THEN the remaining two of these items must be unchecked.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3780    | Fatal | Inconsistent M1018 Values: If any one of the items M1018-7, M1018-NA, or M1018-UK is equal to 1, then all items M1018-1 through M1018-6 must equal 0. | **Cause:**  
The value submitted in a Conditions Prior to Regimen Change item M1018-7 (None of the Above), M1018-NA (No inpatient discharge and no change), or M1018-UK (Unknown) item is inconsistent with the values submitted in Conditions Prior to Regimen Change items M1018-1 through M1018-6.  
- IF M1018-7, M1018-NA, or M1018-UK is checked, THEN all other Conditions Prior to Regimen Change items must be unchecked.  
**Tip:**  
A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3790    | Fatal | Inconsistent M1018 Values: If any item M1018-1 through M1018-6 is equal to 1, then all items M1018-7 through M1018-UK must equal 0. | **Cause:**  
The values submitted in one or more Conditions Prior to Regimen items M1018-7 (None of the Above), M1018-NA (No inpatient discharge and no change), or M1018-UK (Unknown) is inconsistent with the values submitted in Conditions Prior to Regimen items M1018-1 (Urinary incontinence) through M1018-6 (Memory loss requiring supervision).  
- IF any item M1018-1 through M1018-6 is checked, THEN items M1018-7 through M1018-UK must be unchecked.  
**Tip:**  
A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3800   | Fatal| Inconsistent M1000/M1016/M1018 Values: If any item M1000-1 through M1000-7 is equal to 1 or M1016-NA is equal to 0, then M1018-NA must equal 0. | **Cause:** One or more values submitted in Discharged from Inpatient Facilities items M1000-1 through M1000-7 or M1016-NA (Diagnoses Requiring Regimen Change-NA) is not consistent with the value submitted in item M1018-NA (Conditions Prior to Regimen-NA).  
• IF any item M1000-1 through M1000-7 is checked OR M1016-NA is unchecked, THEN M1018-NA must be unchecked.  
**Tip:** A checked response displays as a “1” on the validation report. An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3810   | Fatal| Inconsistent M1000/M1016/M1018 Values: If M1000-NA is equal to 1 and M1016-NA is equal to 1, then M1018-NA must equal 1. | **Cause:** The value submitted in item M1018-NA (Conditions Prior to Regimen-NA) is inconsistent with the values submitted in M1000-NA (Discharged from Inpatient Facilities-NA) and M1016-NA (Diagnoses Requiring Regimen Change-NA).  
• IF M1000-NA is checked and M1016-NA is checked, THEN M1018-NA must be checked.  
**Tip:** A checked response displays as a “1” on the validation report. An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3820   | Warn | Inconsistent M1020 Value: The M1020 Severity Rating should not equal 00.        | **Cause:** The value submitted in item M1020-Severity (Primary Diagnosis-Severity Rating) should be 01, 02, 03, or 04.  
**Actions:** No action is required. Make corrections, if appropriate, to the record and resubmit. |
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| -3830   | Fatal| Inconsistent M1020/M1022 Values: If a value submitted in items M1020-a2, M1022-b2, M1022-c2, M1022-d2, M1022-e2, or M1022-f2 is not equal to blank (^), it must not equal the value submitted in any other item in this list. | **Cause:**
One or more duplicate non-blank (^) diagnosis code values were submitted in Primary and Other Diagnoses items M1020-a2 through M1022-f2 in Column 2.

- IF an item M1020-a2 through M1022-f2 is not blank (^), THEN it must not be the same as a value submitted in the other M1020-a2 through M1022-f2 items.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3840   | Fatal| Inconsistent M1024 Values: If a value submitted in items M1024-a3, M1024-b3, M1024-c3, M1024-d3, M1024-e3, or M1024-f3 is not equal to blank (^), it must not equal the value submitted in any other item in this list. | **Cause:**
One or more duplicate non-blank (^) diagnosis code values were submitted in Payment Diagnoses items M1024-3a through M1024-3f in Column 3.

- IF an item M1024-a3 through M1024-f3 is not blank (^), THEN it must not be the same as a value submitted in the other M1024-a3 through M1024-f3 items.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3850   | Fatal| Inconsistent M1024 Values: If a value submitted in items M1024-a4, M1024-b4, M1024-c4, M1024-d4, M1024-e4, or M1024-f4 is not equal to blank (^), it must not equal the value submitted in any other item in this list. | **Cause:**
One or more duplicate non-blank (^) diagnosis code values were submitted in Payment Diagnoses items M1024-a4 through M1024-f4 in Column 4.

- IF an item M1024-a4 through M1024-f4 is not blank (^), THEN it must not be the same as a value submitted in the other M1024-a4 through M1024-f4 items.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3860   | Fatal| Inconsistent M1020/M1022/M1024 Values: If the ICD code in M1020/M1022 Column 2 is equal to blank (^), then the corresponding ICD code in M1024 Column 3 must equal blank (^). | **Cause:**
One or more M1024 Payment Diagnoses values submitted in Column 3 are inconsistent with the corresponding Primary/Other Diagnoses values submitted in M1020/M1022 Column 2.

- IF the Primary/Other ICD code in M1020/M1022 Column 2 is blank (^), THEN the corresponding M1024 Payment Diagnoses code in Column 3 must be blank (^).

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3870   | Fatal | Inconsistent M1024 Values: If the ICD code in M1024 Column 3 is equal to blank (^), then the corresponding ICD code in M1024 Column 4 must equal blank (^). | **Cause:**
One or more M1024 Payment Diagnoses values submitted in Column 4 are inconsistent with the corresponding Payment Diagnoses values submitted in M1024 Column 3.
- If the Payment ICD code in M1024 Column 3 is blank (^), THEN the corresponding M1024 Payment Diagnoses code in Column 4 must be blank (^).

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3880   | Fatal | Inconsistent M1030 Values: If M1030-4 is equal to 0, then at least one item M1030-1 through M1030-3 must equal 1. | **Cause:**
The value submitted in item M1030-4 (Therapies received at home: None of the above) is not consistent with one or more values submitted in related items M1030-1 through M1030-3.
- IF M1030-4 is unchecked, THEN one or more active items M1030-1 through M1030-3 must be checked.

**Tip:**
A checked response displays as a “1” on the validation report.
An unchecked response displays as a “0” on the validation report.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3890   | Fatal | Inconsistent M1030 Values: If M1030-4 is equal to 1, then all items M1030-1 through M1030-3 must equal 0. | **Cause:**
The value submitted in item M1030-4 (Therapies received at home: None of the above) is not consistent with one or more values submitted in related items M1030-1 through M1030-3.
- IF M1030-4 is checked, THEN all active items M1030-1 through M1030-3 must be unchecked.

**Tip:**
A checked response displays as a “1” on the validation report.
An unchecked response displays as a “0” on the validation report.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3900   | Fatal | Inconsistent M1032 Values: If M1032-7 is equal to 0, then at least one item M1032-1 through M1032-6 must equal 1. | **Cause:** The value submitted in item M1032-7 (Risk for Hospitalization: None of the above) is not consistent with one or more values submitted in related items M1032-1 through M1032-6.  
- IF M1032-7 is unchecked, THEN one or more active items M1032-1 through M1032-6 must be checked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3910   | Fatal | Inconsistent M1032 Values: If M1032-7 is equal to 1, then all items M1032-1 through M1032-6 must equal 0. | **Cause:** The value submitted in item M1032-7 (Risk for Hospitalization: None of the above) is not consistent with one or more values submitted in related items M1032-1 through M1032-6.  
- IF M1032-7 is checked, THEN all active items M1032-1 through M1032-6 must be unchecked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3920   | Fatal | Inconsistent M1036 Values: If M1036-5 is equal to 0 and M1036-UK is equal to 0, then at least one item M1036-1 through M1036-4 must equal 1. | **Cause:** The values submitted in item M1036-5 (Risk Factors: None of the above) and M1036-UK (Risk Factors: Unknown) are not consistent with one or more values submitted in related items M1036-1 through M1036-4.  
- IF M1036-5 and M1036-UK are unchecked, THEN one or more active items M1036-1 through M1036-4 must be checked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3930   | Fatal | Inconsistent M1036 Values: If M1036-5 is equal to 1, then all items M1036-1 through M1036-4 and M1036-UK must equal 0. | **Cause:** The value submitted in item M1036-5 (Risk Factors: None of the above) is not consistent with one or more values submitted in related items M1036-1 through M1036-4 and M1036-UK.  
- IF M1036-5 is checked, THEN all active items M1036-1 through M1036-4 and M1036-UK must be unchecked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3940   | Fatal | Inconsistent M1036 Values: If M1036-UK is equal to 1, then all items M1036-1 through M1036-5 must equal 0. | **Cause:** The value submitted in item M1036-UK (Risk Factors: Unknown) is not consistent with one or more values submitted in related items M1036-1 through M1036-5.  
- IF M1036-UK is checked, THEN all active items M1036-1 through M1036-5 must be unchecked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3950   | Fatal | Inconsistent M1040/M1045 Values: If M1040 is equal to 00, then M1045 must not equal blank (*). | **Cause:** The value submitted in item M1040 (Influenza Vaccine) is not consistent with the value submitted in item M1045 (Reason Influenza Vaccine not received).  
- IF M1040 is 0, THEN M1045, if active, must not be blank (*).  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3960    | Fatal | Invalid Skip Pattern: If M1040 is equal to 01 or NA, then M1045 must equal blank (^). | **Cause:** The value submitted in item M1040 (Influenza Vaccine) is not consistent with the value submitted in item M1045 (Reason Influenza Vaccine not received).  
• IF M1040 is 01 or NA, THEN M1045, if active, must be blank (^).  
**Tip:** This is a skip pattern. If M1040 is 01, then skip to M1050 (Pneumococcal Vaccine) or the next active item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3970    | Fatal | Inconsistent M1050/M1055 Values: If M1050 is equal to 0, then M1055 must not equal blank (^). | **Cause:** The value submitted in item M1050 (Pneumococcal Vaccine) is not consistent with the value submitted in item M1055 (Reason PPV not received).  
• IF M1050 is 0, THEN M1055, if active, must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -3980    | Fatal | Invalid Skip Pattern: If M1050 is equal to 1, then M1055 must equal blank (^). | **Cause:** The value submitted in item M1050 (Pneumococcal Vaccine) is not consistent with the value submitted in item M1055 (Reason PPV not received).  
• IF M1050 is 1, THEN M1055, if active, must be blank (^).  
**Tip:** This is a skip pattern. If M1050 is 1, then skip to M1100 (Patient Living Situation) or the next active item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -3990   | Fatal | Invalid Skip Pattern: If M1300 is equal to 0, then M1302 must equal blank (^). | **Cause:** The value submitted in item M1302 (Risk of Developing Pressure Ulcers) is not consistent with the value submitted in item M1300 (Pressure Ulcer Risk Assessment).  
  - IF M1300 is 0, THEN M1302, if active, must be blank (^).  
**Tip:** This is a skip pattern. If M1300 is 0, then skip to M1306 (Unhealed PU at Stage II or Higher) or the next active item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4000   | Fatal | Inconsistent M1300/M1302 Values: If M1300 is equal to 01 or 02, then M1302 must not equal blank (^). | **Cause:** The value submitted in item M1302 (Risk of Developing Pressure Ulcers) is not consistent with the value submitted in item M1300 (Pressure Ulcer Risk Assessment).  
  - IF M1300 is 01 or 02, THEN M1302, if active, must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4010   | Fatal | Invalid Skip Pattern: If M1306 is equal to 0, then all items M1307 through M1320 must equal blank (^). | **Cause:** The value submitted in this item is not consistent with the value submitted in item M1306 (Unhealed PU Stage II or Higher).  
  - IF M1306 is 0, THEN all active items from M1307 (Oldest Non-epithelialized Stage II PU) through M1320 (Status of Most Problematic Observable PU) must be blank (^).  
**Tip:** This is a skip pattern. If M1306 is 0, then skip to M1322 (Current Number of Stage I PUs) or the next active item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4020   | Fatal | Inconsistent M1306/M1307 Values: If M1306 is equal to 1, then M1307 must not equal blank (^). | **Cause:** The value submitted in item M1307 (Oldest Non-epithelialized Stage II PU) is not consistent with the value submitted in item M1306 (Unhealed PU Stage II or Higher).  
  - IF M1306 is 1, THEN M1307, if active, must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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<td>-4030</td>
<td>Fatal</td>
<td>Inconsistent M1307 Values: If M1307 is equal to 01 or NA, then M1307 date must equal blank (^).</td>
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<td></td>
<td></td>
<td><strong>Cause:</strong> The value submitted in item M1307 (Oldest Non-epithelialized Stage II PU) is not consistent with the value submitted in item M1307 date.</td>
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<td>- IF M1307 is 01 or NA, THEN M1307 date, if active, must be blank (^).</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit.</td>
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<td>Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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<td>-4040</td>
<td>Fatal</td>
<td>Inconsistent M1307 Values: If M1307 is equal to 02, then M1307 date must not equal blank (^).</td>
<td><strong>Cause:</strong> The value submitted in item M1307 (Oldest Non-epithelialized Stage II PU) is not consistent with the value submitted in item M1307 date.</td>
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<td>- IF M1307 is 02, THEN M1307 date, if active, must not be blank (^).</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit.</td>
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<td>Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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<td>-4050</td>
<td>Fatal</td>
<td>Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then all M1308 items must not equal blank (^).</td>
<td><strong>Cause:</strong> The values submitted in these items are not consistent with value submitted in M1306 (Unhealed PU Stage II or Higher).</td>
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<td>- IF M1306 is 1, THEN all Current Number of Unhealed PU at Each Stage items M1308a through M1308-d.3 must not be blank (^).</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit.</td>
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<td>Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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<td>-4060</td>
<td>Fatal</td>
<td>Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then at least one M1308 item must be greater than 00.</td>
<td><strong>Cause:</strong> The values submitted in these items are not consistent with value submitted in M1306 (Unhealed PU Stage II or Higher).</td>
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<td>- IF M1306 is 1, THEN at least one Current Number of Unhealed PU at Each Stage items M1308a through M1308-d.3 must be greater than 00.</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit.</td>
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<td>Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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| -4070    | Fatal | Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then M1308-a Column 2 must be less than or equal to M1308-a Column 1. | **Cause:** The value submitted in Column 2 of item M1308-a (Current Number of Unhealed PU at Each Stage-Stage II) is not consistent with values submitted in items M1306 (Unhealed PU Stage II or Higher) and Column 1 of M1308-a.  
  - IF M1306 is 1, THEN M1308-a Column 2 must be less than or the same as M1308-a Column 1.  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4080    | Fatal | Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then M1308-b Column 2 must be less than or equal to M1308-b Column 1. | **Cause:** The value submitted in Column 2 of item M1308-b (Current Number of Unhealed PU at Each Stage-Stage III) is not consistent with values submitted in items M1306 (Unhealed PU Stage II or Higher) and Column 1 of M1308-b.  
  - IF M1306 is 1, THEN M1308-b Column 2 must be less than or the same as M1308-b Column 1.  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4090    | Fatal | Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then M1308-c Column 2 must be less than or equal to M1308-c Column 1. | **Cause:** The value submitted in Column 2 of item M1308-c (Current Number of Unhealed PU at Each Stage-Stage IV) is not consistent with values submitted in items M1306 (Unhealed PU Stage II or Higher) and Column 1 of M1308-c.  
  - IF M1306 is 1, THEN M1308-c Column 2 must be less than or the same as M1308-c Column 1.  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4100   | Fatal | Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then M1308-d.1 Column 2 must be less than or equal to M1308-d.1 Column 1. | **Cause:** The value submitted in Column 2 of item M1308-d.1 (Current Number of Unhealed PU at Each Stage-Unstageable due to non-removable dressing/device) is not consistent with values submitted in items M1306 (Unhealed PU Stage II or Higher) and Column 1 of M1308-d.1.  
  - IF M1306 is 1, THEN M1308-d.1 Column 2 must be less than or the same as M1308-d.1 Column 1.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4110   | Fatal | Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then M1308-d.2 Column 2 must be less than or equal to M1308-d.2 Column 1. | **Cause:** The value submitted in Column 2 of item M1308-d.2 (Current Number of Unhealed PU at Each Stage-Unstageable due to slough/eschar) is not consistent with values submitted in items M1306 (Unhealed PU Stage II or Higher) and Column 1 of M1308-d.2.  
  - IF M1306 is 1, THEN M1308-d.2 Column 2 must be less than or the same as M1308-d.2 Column 1.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4120   | Fatal | Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then M1308-d.3 Column 2 must be less than or equal to M1308-d.3 Column 1. | **Cause:** The value submitted in Column 2 of item M1308-d.3 (Current Number of Unhealed PU at Each Stage-Unstageable due to suspected DTI) is not consistent with values submitted in items M1306 (Unhealed PU Stage II or Higher) and Column 1 of M1308-d.3.  
  - IF M1306 is 1, THEN M1308-d.3 Column 2 must be less than or the same as M1308-d.3 Column 1.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4130    | Fatal | Inconsistent M1308/M1320 Values: If Column 1 (Current Number) of M1308-a, M1308-b, M1308-c, M1308-d.2, and M1308-d.3 are all equal to 00, then M1320 must equal NA. | **Cause:** The value submitted in item M1320 (Status of Most Problematic Observable PU) is not consistent with the values submitted in one or more M1308 (Current Number of Unhealed PU at Each Stage) Column 1 items.  
- IF M1308-a, M1308-b, M1308-c, M1308-d.2, and M1308-d.3 Column 1 values are all 00, THEN M1320 must be NA.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4140    | Fatal | Inconsistent M1308/M1320 Values: If Column 1 (Current Number) of M1308-a or M1308-d.3 is greater than 00, and Column 1 (Current Number) of M1308-b, M1308-c, and M1308-d.2 are all equal to 00, then M1320 must equal 03. | **Cause:** The value submitted in item M1320 (Status of Most Problematic Observable PU) is not consistent with the values submitted in one or more M1308 (Current Number of Unhealed PU at Each Stage) Column 1 items.  
- IF M1308-a or M1308-d.3 in Column 1 is greater than 00 AND M1308-b, M1308-c, and M1308-d.2 in Column 1 are all 00, THEN M1320 must be 03.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4150    | Fatal | Inconsistent M1308/M1320 Values: If Column 1 (Current Number) of M1308-b or M1308-c is greater than 00, then M1320 must equal 00, 01, 02, or 03. | **Cause:** The value submitted in item M1320 (Status of Most Problematic Observable PU) is not consistent with the values submitted in one or more M1308 (Current Number of Unhealed PU at Each Stage) Column 1 items.  
- IF M1308-b or M1308-c in Column 1 is greater than 00, THEN M1320 must be 00, 01, 02, or 03.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4160   | Fatal | Inconsistent M1308/M1320 Values: If Column 1 (Current Number) of M1308-d.2 is greater than 00 and Column 1 (Current Number) of M1308-a, M1308-b, M1308-c, and M1308-d.3 are all equal to 00, then M1320 must equal 02 or 03. | **Cause:**  
The value submitted in item M1320 (Status of Most Problematic Observable PU) is not consistent with the values submitted in one or more M1308 (Current Number of Unhealed PU at Each Stage) Column 1 items.  
- IF M1308-d.2 is greater than 00 AND M1308-b, M1308-c, and M1308-d.3 in Column 1 are all 00, THEN M1320 must be 02 or 03.  

**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| -4170   | Fatal | Inconsistent M1324/M1322 Values: If M1324 is equal to 01, then M1322 must be greater than 00. | **Cause:**  
The value submitted in item M1322 (Current Number of Stage I PUs) is not consistent with the value submitted in item M1324 (Stage of Most Problematic Unhealed Observable PU).  
- IF M1324 is 01, THEN M1322 must be greater than 00.  

**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| -4180   | Fatal | Inconsistent M1324/M1308 Values: If M1324 is equal to 02, then M1308-a Column 1 (Current Number) must not equal blank (*) and must be greater than 00. | **Cause:**  
The value submitted in Column 1 of item M1308-a (Current Number of Unhealed PU at Each Stage-Stage II) is not consistent with the value submitted in item M1324 (Stage of Most Problematic Unhealed Observable PU).  
- IF M1324 is 02, THEN M1308-a Column 1 must not be blank (*) and must be greater than 00.  

**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| -4190   | Fatal | Inconsistent M1324/M1308 Values: If M1324 is equal to 03, then Column 1 (Current Number) of M1308-b must not equal blank (*) and must be greater than 00. | **Cause:**  
The value submitted in Column 1 of item M1308-b (Current Number of Unhealed PU at Each Stage-Stage III) is not consistent with the value submitted in item M1324 (Stage of Most Problematic Unhealed Observable PU).  
- IF M1324 is 03, THEN M1308-b Column 1 must not be blank (*) and must be greater than 00.  

**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| -4200   | Fatal | Inconsistent M1324/M1308 Values: If M1324 is equal to 04, then Column 1 (Current Number) of M1308-c must not equal blank (^) and must be greater than 00. | **Cause:** The value submitted in Column 1 of item M1308-c (Current Number of Unhealed PU at Each Stage-Stage IV) is not consistent with the value submitted in item M1324 (Stage of Most Problematic Unhealed Observable PU).  
  - IF M1324 is 04, THEN M1308-c Column 1 must not be blank (^) and must be greater than 00.  
  
  **Action:** Make appropriate corrections to the record and resubmit.  
  Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4210   | Fatal | Inconsistent M1322/M1308/M1324 Values: If M1322 and Column 1 (Current Number) of M1308-a, M1308-b, and M1308-c are all equal to 00 or blank (^), then M1324 must equal NA. | **Cause:** The value submitted in item M1324 (Stage of Most Problematic Unhealed Observable PU) is not consistent with the values submitted in item M1322 (Current Number of Stage I PU) and Column 1 of M1308 (Current Number of Unhealed PU at Each Stage) items.  
  - IF M1322 and Column 1 of M1308-a, M1308-b, and M1308-c are all 00 or blank (^), THEN M1324 must be NA.  
  
  **Action:** Make appropriate corrections to the record and resubmit.  
  Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4220   | Fatal | Invalid Skip Pattern: If M1330 is equal to 00 or 03, then all items M1332 through M1334 must equal blank (^). | **Cause:** The value submitted in this item is not consistent with the value submitted in item M1330 (Does patient have a Stasis Ulcer).  
  - IF M1330 is 00 or 03, THEN all active items from M1332 (Current Number of Observable Stasis Ulcers) through M1334 (Status of Most Problematic Observable Stasis Ulcer) must be blank (^).  
  
  **Tip:** This is a skip pattern. If M1330 is 00 or 03, then skip to M1340 (Does this patient have a Surgical Wound) or the next active item.  
  
  **Action:** Make appropriate corrections to the record and resubmit.  
  Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4230   | Fatal | Inconsistent M1330/M1332/M1334 Values: If M1330 is equal to 01 or 02, then all items M1332 through M1334 must not equal blank (^). | Cause: The value submitted in this item is not consistent with the value submitted in item M1330 (Does patient have a Stasis Ulcer).  
  - IF M1330 is 01 or 02, THEN all active items from M1332 (Current Number of Observable Stasis Ulcers) through M1334 (Status of Most Problematic Observable Stasis Ulcer) must not be blank (^).  
Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4240   | Fatal | Invalid Skip Pattern: If M1340 is equal to 00 or 02, then M1342 must equal blank (^). | Cause: The value submitted in item M1342 (Status of Most Problematic Observable Surgical Wound) is not consistent with value submitted in item M1340 (Does this patient have a Surgical Wound).  
  - IF M1340 is 00 or 02, THEN M1342 must be blank (^).  
Tip: This is a skip pattern. If M1340 is 00 or 02, then skip to M1350 (Does this patient have a Skin Lesion or Open Wound) or the next active item.  
Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4250   | Fatal | Inconsistent M1340/M1342 Values: If M1340 is equal to 01, then M1342 must not equal blank (^). | Cause: The value submitted in item M1342 (Status of Most Problematic Observable Surgical Wound) is not consistent with value submitted in item M1340 (Does this patient have a Surgical Wound).  
  - IF M1340 is 01, THEN M1342 must not be blank (^).  
Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4260   | Fatal | Inconsistent M1410 Values: If M1410-4 is equal to 0, then at least one item M1410-1 through M1410-3 must equal 1. | Cause: The values submitted in the M1410 (Respiratory Treatments) items are not consistent.  
  - IF M1410-4 is 0, THEN at least one item M1410-1, M1410-2, or M1410-3 must be 1.  
Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4270   | Fatal | Inconsistent M1410 Values: If M1410-4 is equal to 1, then all items M1410-1 through M1410-3 must equal 0. | Cause: The values submitted in the M1410 (Respiratory Treatments) items are not consistent.  
  • IF M1410-4 is 1, THEN all items M1410-1, M1410-2, and M1410-3 must be 0.  
  Action:  
  Make appropriate corrections to the record and resubmit.  
  Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4280   | Fatal | Invalid Skip Pattern: If M1500 is equal to 00, 02, or NA, then all items M1510-0 through M1510-5 must equal blank (^). | Cause: The value submitted in this item is not consistent with the value submitted in item M1500 (Symptoms in Heart Failure Patients).  
  • IF M1500 is 00, 02, or NA THEN all Heart Failure Follow-up items M1510-0 through M1510-5 must be blank (^).  
  Tip:  
  This is a skip pattern. If M1500 is 00, 02, or NA, then skip to M1600 (Urinary Tract Infection) or the next active item.  
  Action:  
  Make appropriate corrections to the record and resubmit.  
  Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4290   | Fatal | Inconsistent M1500/M1510 Values: If M1500 is equal to 01, then all items M1510-0 through M1510-5 must not equal blank (^). | Cause: The values submitted in items M1510 (Heart Failure Follow-up) are not consistent with the value submitted in item M1500 (Symptoms in Heart Failure Patients).  
  • IF M1500 is 01, THEN all items M1510-0 through M1510-5 must not be blank (^).  
  Action:  
  Make appropriate corrections to the record and resubmit.  
  Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4300   | Fatal | Inconsistent M1500/M1510 Values: If M1500 is equal to 01, then at least one item M1510-0 through M1510-5 must equal 1. | Cause: The values submitted in items M1510 (Heart Failure Follow-up) are not consistent with the value submitted in item M1500 (Symptoms in Heart Failure Patients).  
  • IF M1500 is 01, THEN at least one item M1510-0 through M1510-5 must be checked.  
  Tip:  
  A checked response displays as a “1” on the validation report.  
  An unchecked response displays as a “0” on the validation report.  
  Action:  
  Make appropriate corrections to the record and resubmit.  
  Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4310   | Fatal | Inconsistent M1510 Values: If M1510-0 is equal to 1, then all items M1510-1 through M1510-5 must equal 0. | **Cause:** The values submitted in the M1510 (Heart Failure Follow-up) items are not consistent.  
  - IF M1510-0 is 1, THEN all items M1510-1 through M1510-5 must be unchecked.  
  **Tip:** A checked response displays as a "1" on the validation report. An unchecked response displays as a "0" on the validation report.  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4320   | Fatal | Inconsistent M0100/M1600 Values: If M0100 is equal to 09, then M1600 must not equal UK. | **Cause:** The value submitted in item M1600 (Patient treated for UTI) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
  - IF M0100 is 09, THEN M1600 must not be UK.  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4330   | Fatal | Invalid Skip Pattern: If M1610 is equal to 00 or 02, then M1615 must equal blank (*). | **Cause:** The value submitted in item M1615 (When does Urinary Incontinence occur) is not consistent with the value submitted in item M1610 (Urinary Incontinence or Catheter).  
  - IF M1610 is 00 or 02, THEN M1615 must be blank (*).  
  **Tip:** This is a skip pattern. If M1610 is 00 or 02, then skip to M1620 (Bowel Incontinence Frequency) or the next active item.  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4340   | Fatal | Inconsistent M1610/M1615 Values: If M1610 is equal to 01, then M1615 must not equal blank (*). | **Cause:** The value submitted in item M1615 (When does Urinary Incontinence occur) is not consistent with the value submitted in item M1610 (Urinary Incontinence or Catheter).  
  - IF M1610 is 01, THEN M1615 must not be blank (*).  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4350    | Fatal | Inconsistent M0100/M1620  
Values: If M0100 is equal to 04, 05, or 09, then M1620 must not equal UK. | **Cause:**  
The value submitted in item M1620 (Bowel Incontinence Frequency) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
- IF M0100 is 04, 05, or 09, THEN M1620 must not be UK.  
**Action:**  
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4360    | Fatal | Inconsistent M1620/M1630  
Values: If M1620 is equal to 00, 01, 02, 03, 04, 05, or UK, then M1630 must equal 00. | **Cause:**  
The value submitted in item M1630 (Ostomy for Bowel Elimination) is not consistent with the value submitted in item M1620 (Bowel Incontinence Frequency).  
- IF M1620 is 00, 01, 02, 03, 04, 05, or UK, THEN M1630 must be 00.  
**Action:**  
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4370    | Fatal | Inconsistent M1620/M1630  
Values: If M1620 is equal to NA, then M1630 must equal 01 or 02. | **Cause:**  
The value submitted in item M1630 (Ostomy for Bowel Elimination) is not consistent with the value submitted in item M1620 (Bowel Incontinence Frequency).  
- IF M1620 is NA, THEN M1630 must be 01 or 02.  
**Action:**  
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4380    | Fatal | Inconsistent M1730  
Values: If M1730 is equal to 00, 02, or 03, then PHQ-2 items M1730-1a and M1730-1b must equal blank (^). | **Cause:**  
The values submitted in PHQ-2 items M17300-1a and M1730-1b are not consistent with the value submitted in item M1730 (Depression Screening).  
- IF M1730 is 00, 02, or 03, THEN M1730-1a and M1730-1b must be blank (^).  
**Action:**  
Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4390    | Fatal | Inconsistent M1730 Values: If M1730 is equal to 01, then PHQ-2 items M1730-1a and M1730-1b must not equal blank (^). | **Cause:** The values submitted in PHQ-2 items M17300-1a and M1730-1b are not consistent with the value submitted in item M1730 (Depression Screening).  
  - IF M1730 is 01, THEN M1730-1a and M1730-1b must not be blank (^).  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4400    | Fatal | Inconsistent M1740 Items: If M1740-7 is equal to 0, then at least one item M1740-1 through M1740-6 must equal 1. | **Cause:** The values submitted in the M1740 (Cognitive, behavioral, and psychiatric symptoms) items are not consistent.  
  - IF M1740-7 is 0, THEN at least one item M1740-1 through M1740-6 must be checked.  
  **Tip:** A checked response displays as a "1" on the validation report. An unchecked response displays as a "0" on the validation report.  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4410    | Fatal | Inconsistent M1740 Items: If M1740-7 is equal to 1, then all items M1740-1 through M1740-6 must equal 0. | **Cause:** The values submitted in the M1740 (Cognitive, behavioral, and psychiatric symptoms) items are not consistent.  
  - IF M1740-7 is 1, THEN at all items M1740-1 through M1740-6 must be unchecked.  
  **Tip:** A checked response displays as a "1" on the validation report. An unchecked response displays as a "0" on the validation report.  
  **Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4420   | Fatal| Invalid Skip Pattern: If M2000 is equal to 00, 01, or NA, then all items M2002 through M2004 must equal blank (*)                        | **Cause:**
The value submitted in this item is not consistent with the value submitted in item M2000 (Drug Regimen Review).
- IF M2000 is 00, 01, or NA, THEN all items M2002 (Medication Follow-up) through M2004 (Medication Intervention) must be blank (*)

**Tip:**
This is a skip pattern. If M2000 is 00 or 01, then skip to M2010 (Patient/Caregiver High Risk Drug Education) or the next active item.
If M2000 is NA, then skip to M2040 (Prior Medication Management)

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4430   | Fatal| Inconsistent M2000/M2002/M2004 Values: If M2000 is equal to 02, then all items M2002 through M2004 must not equal blank (*)              | **Cause:**
The values submitted in items M2002 (Medication Follow-up) and M2004 (Medication Intervention) are not consistent with the value submitted in item M2000 (Drug Regimen Review).
- IF M2000 is 02, THEN M2002 and M2004 must not be blank (*).

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4440   | Fatal| Invalid Skip Pattern: If M2000 is equal to NA, then all items M2010 through M2030 must equal blank (*)                             | **Cause:**
The value submitted in this item is not consistent with the value submitted in item M2000 (Drug Regimen Review).
- IF M2000 is NA, THEN all items M2010 (Patient/Caregiver High Risk Drug Education) through M2030 (Management of Injectable Medications) must be blank (*).

**Tip:**
This is a skip pattern. If M2000 is NA, then skip to M2040 (Prior Medication Management) or the next active item.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4450    | Fatal | Inconsistent M2000/M2010- M2030 Values: If M2000 is equal to 00, 01, or 02, then all items M2010 through M2030 must not equal blank (^). | **Cause:** The values submitted in items M2010 through M2030 are not consistent with the value submitted in item M2000 (Drug Regimen Review).  
• IF M2000 is 00, 01, or 02, THEN all items M2010 through M2030 must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4480    | Fatal | Inconsistent M0100/M2020 Values: If M0100 is equal to 09 then M2020 must not equal blank (^). | **Cause:** The value submitted in item M2020 (Management of Oral Medications) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
• IF M0100 is 09, THEN M2020 must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4490    | Fatal | Inconsistent M0100/M2030 Values: If M0100 is equal to 04, 05, or 09, then M2030 must not equal blank (^). | **Cause:** The value submitted in item M2030 (Management of Injectable Medications) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
• IF M0100 is 04, 05, or 09, THEN M2030 must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4500    | Fatal | Inconsistent M0100/M2110 Values: If M0100 is equal to 09, then M2110 must not equal UK. | **Cause:** The value submitted in item M2110 (ADL or IADL assistance frequency) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
• IF M0100 is 09, THEN M2110 must not be UK.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4510   | Fatal| Inconsistent M2200 Values: If M2200-NA is equal to 0, then M2200 Number of Therapy Visits must not equal blank (^). | **Cause:**
The values submitted in the M2200 (Therapy Need) items are not consistent.
- IF M2200-NA is unchecked, THEN M2200 Number of Therapy Visits must not be blank (^).

**Tip:**
A checked response displays as a "1" on the validation report.
An unchecked response displays as a "0" on the validation report.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4520   | Fatal| Inconsistent M2200 Values: If M2200-NA is equal to 1, then M2200 Number of Therapy Visits must equal blank (^). | **Cause:**
The values submitted in the M2200 (Therapy Need) items are not consistent.
- IF M2200-NA is checked, THEN M2200 Number of Therapy Visits must be blank (^).

**Tip:**
A checked response displays as a "1" on the validation report.
An unchecked response displays as a "0" on the validation report.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4530   | Fatal| Invalid Skip Pattern: If M2300 is equal to 00 or UK, then all items M2310-1 through M2310-UK must equal blank (^). | **Cause:**
The value submitted in this item is not consistent with the value submitted in item M2300 (Emergent Care).
- IF M2300 is 00 or UK, THEN all Reason for Emergent Care items M2310-1 through M2310-UK must be blank (^).

**Tip:**
This is a skip pattern. If M2300 is 00 or UK, then skip to M2400 (Intervention Synopsis) or the next active item.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4540   | Fatal| Inconsistent M2300/M2310 Values: If M2300 is equal to 01 or 02, then all items M2310-1 through M2310-UK must not equal blank (*). | Cause: The values submitted in items M2310 (Reason for Emergent Care) are not consistent with the value submitted in item M2300 (Emergent Care).  
- IF M2300 is 01 or 02, THEN all items M2310-1 through M2310-UK must be blank (*).  
Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4550   | Fatal| Inconsistent M2310 Values: If M2310-UK is equal to 0, then at least one item M2310-1 through M2310-19 must equal 1.               | Cause: The values submitted in Reason for Emergent Care items M2310-1 through M2310-19 are not consistent with the value submitted in item M2310-UK.  
- IF M2310-UK is unchecked, THEN at least one item M2310-1 through M2310-19 must be checked.  
Tip: A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4560   | Fatal| Inconsistent M2310 Values: If M2310-UK is equal to 1, then all items M2310-1 through M2310-19 must equal 0.                        | Cause: The values submitted in Reason for Emergent Care items M2310-1 through M2310-19 are not consistent with the value submitted in item M2310-UK.  
- IF M2310-UK is checked, THEN all items M2310-1 through M2310-19 must be unchecked.  
Tip: A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
Action: Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4570    | Fatal | Inconsistent M0100/M2410 Values: If M0100 is equal to 09, then M2410 must equal NA. | **Cause:** The value submitted in item M2410 (Inpatient Facility) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
  - IF M0100 is 09, THEN M2410 must be NA.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4580    | Fatal | Inconsistent M0100/M2410 Values: If M0100 is equal to 06 or 07, then M2410 must not equal NA. | **Cause:** The value submitted in item M2410 (Inpatient Facility) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
  - IF M0100 is 06 or 07, THEN M2410 must not be NA.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4590    | Fatal | Inconsistent M2410/M2430 Values: If M2410 is equal to 01, then all items M2430-1 through M2430-UK must not equal blank (^). | **Cause:** The value submitted in this item is not consistent with the value submitted in item M2410 (Inpatient Facility).  
  - IF M2410 is 01, THEN all Reason for Hospitalization items M2430-1 through M2430-UK must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4600    | Fatal | Invalid Skip Pattern: If M2410 is equal to 02, 03, 04, or NA, then all items M2430-1 through M2430-UK must equal blank (^). | **Cause:** The value submitted in this item is not consistent with the value submitted in item M2410 (Inpatient Facility).  
  - IF M2410 is 02, 03, 04, or NA, THEN all Reason for Hospitalization items M2430-1 through M2430-UK must be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4610   | Fatal | Invalid Skip Pattern: If M2410 is equal to 01, 02, 04, or NA, then all items M2440-1 through M2440-UK must equal blank (^). | **Cause:**  
The value submitted in this item is not consistent with the value submitted in item M2410 (Inpatient Facility).  
- IF M2410 is 01, 02, 04, or NA, THEN all Reason for Nursing Home Admission items M2440-1 through M2440-UK must be blank (^).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4620   | Fatal | Inconsistent M2410/M2440 Values: If M2410 is equal to 03, then all items M2440-1 through M2440-UK must not equal blank (^). | **Cause:**  
The value submitted in this item is not consistent with the value submitted in item M2410 (Inpatient Facility).  
- IF M2410 is 03, THEN all Reason for Nursing Home Admission items M2440-1 through M2440-UK must not be blank (^).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4630   | Fatal | Inconsistent M2430 Values: If M2430-UK is equal to 0, then at least one item M2430-1 through M2430-20 must equal 1. | **Cause:**  
The value submitted in this item is not consistent with the value submitted in item M2430-UK (Reason for Hospitalization-Unknown).  
- IF M2430-UK is unchecked, THEN at least one Reason for Hospitalization item M2430-1 through M2430-20 must be checked.  
**Tip:**  
A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4640   | Fatal | Inconsistent M2430 Values: If M2430-UK is equal to 1, then all items M2430-1 through M2430-20 must equal 0. | **Cause:**  
The value submitted in this item is not consistent with the value submitted in item M2430-UK (Reason for Hospitalization-Unknown).  
- IF M2430-UK is checked, THEN all Reason for Hospitalization items M2430-1 through M2430-20 must be unchecked.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4650   | Fatal | Inconsistent M2440 Values: If M2440-UK is equal to 0, then at least one item M2440-1 through M2440-6 must equal 1. | **Cause:**  
The value submitted in this item is not consistent with the value submitted in item M2440-UK (Reason Admitted to a Nursing Home-Unknown).  
- IF M2440-UK is unchecked, THEN at least one Reason Admitted to a Nursing Home item M2440-1 through M2440-6 must be checked.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4660   | Fatal | Inconsistent M2440 Values: If M2440-UK is equal to 1, then all items M2440-1 through M2440-6 must equal 0. | **Cause:**  
The value submitted in this item is not consistent with the value submitted in item M2440-UK (Reason Admitted to a Nursing Home-Unknown).  
- IF M2440-UK is checked, THEN all Reason Admitted to a Nursing Home items M2440-1 through M2440-6 must be checked.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4670   | Fatal | Inconsistent M1308/M1310-M1314 Values: If Column 1 (Number Currently Present) of M1308-b or M1308-c or M1308-d.2 is greater than 00, then all items M1310 through M1314 must not equal blank (^). | **Cause:** The value submitted in this item is not consistent with the values submitted in Column 1 (Number Currently Present) of Current Number of Unhealed PU at Each Stage items M1308-b, M1308-c, or M1308-d.2.  
- IF Column 1 of M1308-b, M1308-c, or M1308-d.2 is greater than 00, THEN all PU Dimensions items M1310 through M1314 must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4680   | Fatal | Inconsistent M1308/M1310/M1314 Values: If Column 1 (Current Number) of M1308-b, M1308-c, and M1308-d.2 are all equal to 00, then all items M1310 through M1314 must equal blank (^). | **Cause:** The value submitted in this item is not consistent with the values submitted in Column 1 (Number Currently Present) of Current Number of Unhealed PU at Each Stage items M1308-b, M1308-c, and M1308-d.2.  
- IF Column 1 of M1308-b, M1308-c, and M1308-d.2 are all 00, THEN all PU Dimensions items M1310 through M1314 must be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4690   | Fatal | Invalid Branch: If the assessment was performed by an HHA with no branches or by a subunit with no branches, then M0016 must contain N. | **Cause:** The value submitted in M0016 (Branch ID Number) is inconsistent with the known organization of the agency or subunit submitting this record as identified by the value submitted in HHAAgency_ID.  
IF the agency or subunit submitting this record has no branches, THEN M0016 must be N.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4700   | Fatal | Invalid Branch: If the assessment was performed by the home office of an HHA with branches or by the home office of a subunit with branches, then M0016 must contain P. | **Cause:** The value submitted in M0016 (Branch ID Number) is inconsistent with the known organization of the agency or subunit submitting this record as identified by the value submitted in HHAAgency_ID.  
IF the home office of the agency or subunit completed this record, THEN M0016 must be P.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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<th>Error ID</th>
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<tbody>
<tr>
<td>-4710</td>
<td>Fatal</td>
<td>Invalid Branch: M0016 must contain a standard branch ID, N, or P.</td>
<td><strong>Cause:</strong> The value submitted in M0016 (Branch ID Number) is invalid. M0016 must contain either a standard branch ID, N, or P.</td>
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<td></td>
<td><strong>Definition:</strong> N = Agency or subunit has no branches P = Agency is a parent ###Q#### = a standard branch ID assigned by the State Agency</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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<tr>
<td>4720</td>
<td>Warn</td>
<td>Invalid Branch: The standard branch ID submitted in M0016 is not currently a branch ID associated with this agency.</td>
<td><strong>Cause:</strong> The Branch ID submitted in M0016 (Branch ID Number) is not currently associated with the agency or subunit submitting this record as identified by the value submitted in HHA_AGENCY_ID; however, the Branch ID matches a past Branch ID.</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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</tbody>
</table>
| -4730   | Fatal | Inconsistent M0100/M0032 Values: If M0100 is equal to 01, then M0032-NA must equal 1. | **Cause:** The value submitted in item M0032-NA (Resumption of Care Date-NA) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
  - IF M0100 is 01, THEN M0032-NA must be checked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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</table>
| -4740   | Fatal| Inconsistent M0100/M0032 Items: If M0100 is equal to 03, then M0032-NA must equal 0. | **Cause:**
The value submitted in item M0032-NA (Resumption of Care Date-NA) is not consistent with the value submitted in item M0100 (Reason for Assessment).  
- IF M0100 is 03, THEN M0032-NA must be unchecked.  
**Tip:**  
A checked response displays as a "1" on the validation report.  
An unchecked response displays as a "0" on the validation report.  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4750   | Fatal| Inconsistent M1020/M1022 Values: If the Primary/Other ICD code in Column 2 is an E- or V-code, then the corresponding severity code must equal blank (^). | **Cause:**
One or more severity codes submitted in Column 2 of items M1020 (Primary Diagnosis) and M1022 (Other Diagnoses) are not consistent with the corresponding ICD code submitted.  
- IF an ICD code in Column 2 of M1020 or M1022 is an E- or V-code, THEN the corresponding severity code must be blank (^).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4760   | Fatal| Inconsistent M1020/M1022 Values: If the Primary/Other ICD code in Column 2 is NOT equal to blank (^) and is NOT an E- or V-code, then the corresponding severity code must not equal blank (^). | **Cause:**
One or more severity codes submitted in Column 2 of items M1020 (Primary Diagnosis) and M1022 (Other Diagnoses) are not consistent with the corresponding ICD code submitted.  
- IF an ICD code in Column 2 of M1020 or M1022 is not blank (^) and is not an E- or V-code, THEN the corresponding severity code must not be blank (^).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4770   | Fatal| Inconsistent M1020/M1022 Values: If the Primary/Other ICD code in Column 2 is equal to blank (^), then the corresponding severity code must equal blank (^). | **Cause:**
One or more severity codes submitted in Column 2 of items M1020 (Primary Diagnosis) and M1022 (Other Diagnoses) are not consistent with the corresponding ICD code submitted.  
- IF an ICD code in Column 2 of M1020 or M1022 is blank (^), THEN the corresponding severity code must be blank (^).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -4780   | Warn| Inconsistent M1020/M1022/M1024 Values: If the Column 3 diagnosis code is not equal to blank (*), then the corresponding Column 2 Primary/Other code should be a V-code. | Cause: One or more payment diagnosis codes submitted in Column 3 of item M1024 (Payment Diagnoses) are not consistent with the corresponding Primary/Other diagnosis codes submitted in Column 2 of items M1020 (Primary Diagnosis) and M1022 (Other Diagnoses).  
- IF a payment diagnosis code in Column 3 of M1024 is not blank (*), THEN the corresponding M1020/M1022 Primary/Other diagnosis code in Column 2 should be a V-code.  
Action: No action is required. |
| -4790   | Warn| Inconsistent M1020/M1022/M1024 Values: If the Column 4 diagnosis code is not equal to blank (*), then the corresponding Column 2 Primary/Other code should be a V-code. | Cause: One or more payment diagnosis codes submitted in Column 4 of item M1024 (Payment Diagnoses) are not consistent with the corresponding Primary/Other diagnosis codes submitted in Column 2 of items M1020 (Primary Diagnosis) and M1022 (Other Diagnoses).  
- IF a payment diagnosis code in Column 4 of M1024 is not blank (*), THEN the corresponding M1020/M1022 Primary/Other diagnosis code in Column 2 should be a V-code.  
Action: No action is required. |
| -4800   | Fatal| Inconsistent M2410/M2420 Values: If M2410 is equal to NA, then M2420 must not equal blank (*). | Cause: The value submitted in item M2420 (Discharge Disposition) is not consistent with the value submitted in item M2410 (Inpatient Facility).  
- IF M2410 is NA, THEN M2420 must not be blank (*).  
Action: Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4810   | Fatal| Inconsistent HIPPS Values: If SUBM_HIPPS_CODE is not equal to blank (*), then SUBM_HIPPS_VERSION must not equal blank (*) and must match the appropriate HIPPS version code. | Cause: The value submitted in SUBM_HIPPS_VERSION (HIPPS Version Code) is not consistent with the value submitted SUBM_HIPPS_CODE (HIPPS Code).  
- IF SUBM_HIPPS_CODE is not blank (*), THEN SUBM_HIPPS_VERSION must not be blank (*) and must match the HIPPS Version Code calculated by the ASAP system.  
Action: Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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<tbody>
<tr>
<td>-4820</td>
<td>Warn</td>
<td>Invalid HIPPS Values: SUBM_HIPPS_CODE and SUBM_HIPPS_VERSION values should match the system-calculated values.</td>
<td><strong>Cause:</strong> The values submitted in SUBM_HIPPS_CODE (HIPPS Code) and SUBM_HIPPS_VERSION (HIPPS Version Code) do not match the HIPPS values calculated by the ASAP system. *<em>Definition:** HIPPS Version – The HIPPS version of the Grouper used for the assessment. *</em>Action:** No action is required.</td>
</tr>
<tr>
<td>-4830</td>
<td>Fatal</td>
<td>Inconsistent M1000/M1012 Values: If any item M1000-1 through M1000-7 is equal to 1, then at least one item M1012-a through M1012-d must not equal blank (^) or M1012-NA must equal 1 or M1012-UK must equal 1.</td>
<td><strong>Cause:</strong> The values submitted in M1012 (Inpatient Procedure) items are not consistent with the values submitted in Discharged from Inpatient Facilities items M1000-1 through M1000-7. *<em>Tip:** A checked response displays as a “1” on the validation report. An unchecked response displays as a “0” on the validation report. *</em>Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
</tr>
<tr>
<td>-4840</td>
<td>Fatal</td>
<td>Inconsistent M1000/M1010 Values: If any item M1000-1 through M1000-7 is equal to 1, then M1010-a must not equal blank (^).</td>
<td><strong>Cause:</strong> The value submitted in item M1010-a (Inpatient Diagnosis) is not consistent with one or more values submitted in Discharged from Inpatient Facilities items M1000-1 through M1000-7. *<em>Tip:** A checked response displays as a “1” on the validation report. An unchecked response displays as a “0” on the validation report. *</em>Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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| -4850   | Fatal | Inconsistent M0150/M0063 Values: If M0150-1 is equal to 1, then M0063 Medicare Number must not equal blank (^). | **Cause:**
The value submitted in item M0063 (Medicare Number) is not consistent with the value submitted item M0150-1 (Current Payment Sources-Medicare FFS).
- IF M0150-1 is checked, THEN M0063 must not be blank (^).
**Tip:**
A checked response displays as a "1" on the validation report.
An unchecked response displays as a "0" on the validation report.
**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4860   | Fatal | Inconsistent M0150/M0065 Values: If M0150-3 is equal to 1, then M0065 Medicaid Number must not equal blank (^). | **Cause:**
The value submitted in item M0065 (Medicaid Number) is not consistent with the value submitted item M0150-3 (Current Payment Sources-Medicaid FFS).
- IF M0150-3 is checked, THEN M0065 must not be blank (^).
**Tip:**
A checked response displays as a "1" on the validation report.
An unchecked response displays as a "0" on the validation report.
**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4870   | Fatal | Inconsistent Software Vendor Information: If the SFW_ID is not equal blank (^), then SFW_NAME and SFW_EMAIL_ADR must not equal blank (^). | **Cause:**
The values submitted in items SFW_NAME and SFW_EMAIL_ADR are not consistent with the value submitted item SFW_ID.
- IF SFW_ID is not blank (^), THEN SFW_NAME and SFW_EMAIL_ADR must not be blank (^).
**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -4880   | Fatal | Inconsistent Software Vendor Information: If the SFW_ID is equal to blank (^), then SFW_NAME and SFW_EMAIL_ADR must equal blank (^). | **Cause:**
The values submitted in items SFW_NAME and SFW_EMAIL_ADR are not consistent with the value submitted item SFW_ID.
- IF SFW_ID is blank (^), THEN SFW_NAME and SFW_EMAIL_ADR must be blank (^).
**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -5050   | Fatal | Inconsistent M1033 Values: If M1033-10 is equal to 0, then at least one item M1033-1 through M1033-9 must equal 1. | **Cause:** The value submitted in item M1033-10 (Risk for Hospitalization: None of the above) is not consistent with one or more values submitted in related items M1033-1 through M1033-9.  
  - IF M1033-10 is unchecked, THEN one or more active items M1033-1 through M1033-9 must be checked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -5060   | Fatal | Inconsistent M1033 Values: If M1033-10 is equal to 1, then all items M1033-1 through M1033-9 must equal 0. | **Cause:** The value submitted in item M1033-10 (Risk for Hospitalization: None of the above) is not consistent with one or more values submitted in related items M1033-1 through M1033-9.  
  - IF M1033-10 is checked, THEN all active items M1033-1 through M1033-9 must be unchecked.  
**Tip:** A checked response displays as a “1” on the validation report.  
An unchecked response displays as a “0” on the validation report.  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -5070   | Fatal | Inconsistent M1041/M1046 Values: If M1041 is equal to 1, then M1046 must not equal blank (*). | **Cause:** The value submitted in item M1041 (Influenza Vaccine Data Collection Period) is not consistent with the value submitted in item M1046 (Influenza Vaccine Received).  
  - IF M1041 is 1, THEN M1046, if active, must not be blank (*).  
**Action:** Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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</table>
| -5080   | Fatal| Invalid Skip Pattern: If M1041 is equal to 0, then M1046 must equal blank (^). | **Cause:** The value submitted in item M1046 (Influenza Vaccine Received) is not consistent with the value submitted in item M1041 (Influenza Vaccine Data Collection Period).  
  - IF M1041 is 0, THEN M1046 must be blank (^).  
**Tip:** This is a skip pattern. If M1041 is 0 then skip to M1051 (Pneumococcal Vaccine) or the next active item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -5090   | Fatal| Inconsistent M1051/M1056 Values: If M1051 is equal to 0, then M1056 must not equal blank (^). | **Cause:** The value submitted in item M1056 (Reason Pneumococcal Vaccine not received) is not consistent with the value submitted in item M1051 (Pneumococcal Vaccine).  
  - IF M1051 is 0, THEN M1056 must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -5100   | Fatal| Invalid Skip Pattern: If M1051 is equal to 1, then M1056 must equal blank (^).   | **Cause:** The value submitted in item M1056 (Reason Pneumococcal Vaccine not received) is not consistent with the value submitted in item M1051 (Pneumococcal Vaccine).  
  - IF M1051 is 1, THEN M1056 must be blank (^).  
**Tip:** This is a skip pattern. If M1051 is 1 then skip to M1100 (Patient Living Situation) or the next active item.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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<tbody>
<tr>
<td>-5110</td>
<td>Fatal</td>
<td>Invalid Skip Pattern: If M1306 is equal to 0, then all items M1307 through M1320 must equal blank (^).</td>
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<td><strong>Cause:</strong> The value submitted in this item is not consistent with the value submitted in item M1306 (Unhealed PU Stage II or Higher).</td>
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<td>• IF M1306 is 0, THEN all items M1307 (Oldest Non-epithelialized Stage II PU) through M1320 (Status of Most Problematic PU) must be blank (^).</td>
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<td></td>
<td><strong>Tip:</strong> This is a skip pattern. If M1306 is 0, then skip to M1322 (Current Number of Stage I PU) or the next active item.</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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<tr>
<td>-5120</td>
<td>Fatal</td>
<td>Inconsistent M1306/M1308/M1309 Values: If M1306 is equal to 1, then all items M1308-a through M1309-d must not equal blank (^).</td>
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<td><strong>Cause:</strong> The values submitted in these items are not consistent with the value submitted in item M1306 (Unhealed PU Stage II or Higher).</td>
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<td>• IF M1306 is 1, THEN all items M1308 (Current Number of Unhealed PU at Each Stage) through M1309 (Worsening in PU Status) must not be blank (^).</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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<tr>
<td>-5130</td>
<td>Fatal</td>
<td>Inconsistent M1306/M1308 Values: If M1306 is equal to 1, then at least one item M1308-a through M1308-d.3 must be greater than 0.</td>
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<td><strong>Cause:</strong> The values submitted in these items are not consistent with the value submitted in item M1306 (Unhealed PU Stage II or Higher).</td>
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<td>• IF M1306 is 1, THEN at least one Current Number of Unhealed PU at Each Stage item M1308-a through M1308-d.3 must be greater than 0.</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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<tr>
<td>-5140</td>
<td>Fatal</td>
<td>Inconsistent M1306/M1308/M1309 Values: If M1306 is equal to 1, then M1309-a must be less than or equal to M1308-a.</td>
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<td><strong>Cause:</strong> The value submitted in item M1309-a (Worsening in PU Status-Stage II) is not consistent with the value submitted in items M1306 (Unhealed PU Stage II or Higher) and M1308-a (Current Number of Unhealed PU at Each Stage-Stage II).</td>
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<td>• IF M1306 is 1, THEN M1309-a must be less than or the same as M1308-a.</td>
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<td><strong>Action:</strong> Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item.</td>
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| -5150   | Fatal| Inconsistent M1306/M1308/M1309 Values: If M1306 is equal to 1, then M1309-b must be less than or equal to M1308-b. | **Cause:** The value submitted in item M1309-b (Worsening in PU Status-Stage III) is not consistent with the value submitted in items M1306 (Unhealed PU Stage II or Higher) and M1308-b (Current Number of Unhealed PU at Each Stage-Stage III).  
• IF M1306 is 1, THEN M1309-b must be less than or the same as M1308-b.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -5160   | Fatal| Inconsistent M1306/M1308/M1309 Values: If M1306 is equal to 1, then M1309-c must be less than or equal to M1308-c. | **Cause:** The value submitted in item M1309-c (Worsening in PU Status-Stage IV) is not consistent with the value submitted in items M1306 (Unhealed PU Stage II or Higher) and M1308-c (Current Number of Unhealed PU at Each Stage-Stage IV).  
• IF M1306 is 1, THEN M1309-c must be less than or the same as M1308-c.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -5280   | Fatal| Incorrect Format: The value submitted in M0010 must either equal blank (^) or be exactly 6 characters in length. | **Cause:** The value submitted in M0010 (CMS Certification Number) must either be blank (^) or exactly 6 characters in length.  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -5290   | Fatal| Inconsistent M0100/M0906 Values: If M0100 is equal to 06, 07, 08, or 09, then M0906 must not equal blank (^). | **Cause:** The value submitted in item M0906 (Discharge/Transfer/Death Date) is not consistent the value submitted in M0100 (Reason For Assessment).  
• IF M0100 is 06, 07, 08, or 09, THEN M0906 must not be blank (^).  
**Action:** Make appropriate corrections to the record and resubmit. Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
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| -5300   | Fatal | Inconsistent M0100/M0906 Values: If M0100 is equal to 01, 03, 04, or 05, then M0906 must equal blank (^) for an inactivation record. | **Cause:**
The value submitted in item M0906 (Discharge/Transfer/Death Date) is not consistent the value submitted in M0100 (Reason For Assessment) for this inactivation record.
  - IF this is an inactivation record AND M0100 is 01, 03, 04, or 05, THEN M0906 must be blank (^).

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item.

| -5310   | Fatal | Inconsistent M1306/M1308/M1309 Values: If M1306 is equal to 1, then M1309-d must be less than or equal to M1308-d.2. | **Cause:**
The value submitted in item M1309-d (Worsening in PU Status-Unstageable due to slough/eschar) is not consistent with the value submitted in items M1306 (Unhealed PU Stage II or Higher) and M1308-d.2 (Current Number of Unhealed PU at Each Stage-Unstageable due to slough/eschar).
  - IF M1306 is 1, THEN M1309-d must be less than or the same as M1308-d.2.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item.

| -5320   | Fatal | Inconsistent M1000/M1005 Values: If M1000-NA is equal to 0, then M1005-UK must not equal blank (^). | **Cause:**
The value submitted in item M1005 (Inpatient Discharge Date) is not consistent with the value submitted in item M1000-NA (Discharged from Inpatient Facilities-NA).
  - IF M1000-NA is 0, THEN item M1005, if active, must not be blank (^).

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item.

| -5330   | Fatal | Invalid Skip Pattern: If M1000-NA is equal to 1, then all items M1005 through M1010-f must equal blank (^). | **Cause:**
The value submitted in this item is not consistent with the value submitted in item M1000-NA (Discharged from Inpatient Facilities-NA).
  - IF M1000-NA is 1, THEN all active items from M1005 (Inpatient Discharge Date) through M1010-f (Inpatient Diagnosis) must be blank (^).

**Tip:**
This is a skip pattern. If M1000-NA is 1, then skip to M1016 (Diagnoses Requiring Regimen Change) or the next active item.

**Action:**
Make appropriate corrections to the record and resubmit.
Refer to the data specifications in effect for this record to identify the acceptable values for this item.
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<th>Sev</th>
<th>Error Message</th>
<th>Error Description</th>
</tr>
</thead>
</table>
| -5340   | Fatal| Inconsistent Dates: The dates listed are out of logical order. | **Cause:**  
The dates submitted in the noted items are inconsistent.  
- IF M0104 (Date of Referral) is not a blank (^), THEN M0104 must follow M0066 (Birth Date) AND  
- IF M0100 (Reason For Assessment) is 01, THEN M0104 must be the same as or precede M0030 (Start of Care Date).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
| -5350   | Fatal| Inconsistent Dates: The dates listed are out of logical order. | **Cause:**  
The dates submitted in the noted items are inconsistent.  
- IF M0104 (Date of Referral) is not a blank (^), THEN M0104 must follow M0066 (Birth Date) AND  
- IF M0100 (Reason For Assessment) is 03, M0104 must be the same as or precede M0032 (Resumption of Care Date).  
**Action:**  
Make appropriate corrections to the record and resubmit.  
Refer to the data specifications in effect for this record to identify the acceptable values for this item. |
# ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADL</td>
<td>Activities of Daily Living</td>
</tr>
<tr>
<td>ASAP</td>
<td>Assessment Submission And Processing</td>
</tr>
<tr>
<td>CASPER</td>
<td>Certification And Survey Provider Enhanced Reporting</td>
</tr>
<tr>
<td>CBSA</td>
<td>Core Base Statistical Area</td>
</tr>
<tr>
<td>CMS</td>
<td>Centers For Medicare &amp; Medicaid Services</td>
</tr>
<tr>
<td>CMSNet</td>
<td>CMS Network</td>
</tr>
<tr>
<td>FACID, FAC_ID</td>
<td>Facility Identifier</td>
</tr>
<tr>
<td>FAQ</td>
<td>Frequently Asked Questions</td>
</tr>
<tr>
<td>FVR</td>
<td>Final Validation Report</td>
</tr>
<tr>
<td>GB</td>
<td>Gigabyte</td>
</tr>
<tr>
<td>GHz</td>
<td>Gigahertz</td>
</tr>
<tr>
<td>HHA</td>
<td>Home Health Agency</td>
</tr>
<tr>
<td>HHRG</td>
<td>Home Health Resource Group</td>
</tr>
<tr>
<td>HIPPS</td>
<td>Health Insurance Prospective Payment System</td>
</tr>
<tr>
<td>ICD</td>
<td>International Classification of Diseases</td>
</tr>
<tr>
<td>ID</td>
<td>Identifier, Identification</td>
</tr>
<tr>
<td>MB</td>
<td>Megabyte</td>
</tr>
<tr>
<td>OASIS</td>
<td>Outcome and Assessment Information Set</td>
</tr>
<tr>
<td>OBQI</td>
<td>Outcome Based Quality Improvement</td>
</tr>
<tr>
<td>OBQM</td>
<td>Outcome Based Quality Monitoring</td>
</tr>
<tr>
<td>PC</td>
<td>Personal Computer</td>
</tr>
<tr>
<td>PPS</td>
<td>Prospective Payment System</td>
</tr>
<tr>
<td>QIES</td>
<td>Quality Improvement and Evaluation System</td>
</tr>
<tr>
<td>QTESO</td>
<td>QIES Technical Support Office</td>
</tr>
<tr>
<td>QUMA</td>
<td>QIES User Maintenance Application</td>
</tr>
<tr>
<td>RAM</td>
<td>Random Access Memory</td>
</tr>
<tr>
<td>RFA</td>
<td>Reason for Assessment</td>
</tr>
<tr>
<td>SSN</td>
<td>Social Security Number</td>
</tr>
<tr>
<td>VR</td>
<td>Validation Report</td>
</tr>
</tbody>
</table>

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ACRONYMS 6-2
GLOSSARY

Assessment ID ....................... Unique identifier assigned to an assessment by the OASIS submission system.

Completion Date .................... Date the OASIS submission system completed processing the last XML file in a submission.

Duplicate Record Count .......... Total number of records included in a submission that were not loaded into the database because they were determined to be duplicate records.

Effective Date ..................... The assessment effective date is based on the value of M0100 as follows:
  • Start of Care Date (M0030) when M0100 = 01
  • Resumption of Care Date (M0032) when M0100 = 03
  • Date Assessment Completed (M0090) when M0100 = 04 or 05
  • Discharge, Transfer, Death Date (M0906) when M0100 = 06, 07, 08, or 09

Facility Internal Number ........... Unique internal database ID assigned to a home health agency.

# Records Processed ............... Total number of records in a submission file. This count includes the number of accepted records, rejected records, test records passed and test records failed. On the OASIS Submitter Final Validation Report this count also includes the number of invalid records.

Submission File Status ............ Status of a submission: Waiting, Processing, Completed or Failed.

Submission Date .................... System date and time that a submission file was received by the national database server.

Submission ID ...................... Unique identifier assigned to a submission.
QUICK REFERENCE TO OASIS SUBMISSIONS, SUBMISSION STATUS, AND FINAL VALIDATION REPORTS

FILE SUBMISSION ........................................................................................................... 2
FILE SUBMISSION STATUS ............................................................................................ 4
SYSTEM-GENERATED OASIS AGENCY FINAL VALIDATION REPORT .................. 6
OASIS SUBMITTER FINAL VALIDATION REPORT ..................................................... 9
FILE SUBMISSION

1. From the Welcome to the CMS QIES Systems for Providers page, select the OASIS Submissions link and log in to the OASIS File Submission System using your individual user ID. Upon successful log in to the OASIS File Submission system, the File Upload page (Figure A-1) is presented.

Figure A-1. OASIS File Submission File Upload Page

2. Select the Browse button to locate the OASIS file you wish to submit. Select (highlight) the zipped submission file and then select the Upload button to upload the file.

3. Once the QIES ASAP OASIS system successfully receives the submission file, a pop-up dialog box (Figure A-2) opens notifying you that the upload was completed.

Figure A-2. Upload Completed Pop-Up Dialog Box

NOTE: The “Upload Completed” message merely indicates the QIES ASAP OASIS system received the uploaded file. It does NOT indicate the file was processed or the records were edited and accepted by the QIES ASAP OASIS system. Select the Submission Status link to determine if the file processing completed.
4. Select the OK button. The pop-up dialog box closes. You are returned to the File Upload page (Figure A-3) that now displays a “Your submission has been received” message and identifies the system-assigned Submission ID, the date and time of the submission, and the name of the file you submitted. Select the Print link from the right-hand side of the page to print and retain this information for future reference.

**NOTE:** It is important that you know the Submission ID and Submission Date/Time associated with the file you just submitted. You must use this information in subsequent steps of the submission file validation process.

**Figure A-3. Your Submission Has Been Received Message**

<table>
<thead>
<tr>
<th>OASIS File Submission</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submission ID: 890059</td>
</tr>
<tr>
<td>Submission Date: 10/31/2014 12:04:52</td>
</tr>
<tr>
<td>File Name: 0420141001.zip</td>
</tr>
</tbody>
</table>

Print

Your submission file will be processed for errors within 24 hours. The Final Validation Report, which contains detailed information about your submission, may be accessed in the CASPER Reporting application. It is recommended that you print and retain the Final Validation Reports.

Locate the OASIS file to submit by selecting the Browse button and choosing a file from your computer.

**NOTE:** Once a file is successfully submitted, please note that it may take up to 24-hours for processing to complete. When processing is complete, return to the OASIS File Submission system to verify the status of the file and then proceed with locating the system-generated OASIS Agency Final Validation Report in the CASPER Reporting application.

Records in the submitted assessment file are sorted, processed, and presented on the system-generated OASIS Agency Final Validation Report in the following order:

- Submission ID
- Agency ID
- Patient Last Name
- Patient First Name
- Record Processing Order
- Assessment ID
- Error Type Description
- Item in Error Text
- Value in Error Text
FILE SUBMISSION STATUS

To determine if your submission file was processed successfully, query the status of your submission in the following manner:

1. Log in to the OASIS File Submission System using your individual user ID. Upon successful log in to the OASIS File Submission system, the File Upload page (Figure A-1, above) is presented.

2. Select the Submission Status link located on the menu bar on the OASIS File Submission File Upload page. The List of My Submissions page (Figure A-4) is presented.

Figure A-4. List of My Submissions Page

The List of My Submissions page provides the following information:

- Submission ID – the unique ID assigned to the submitted file
- Submission Date – the date and time that the submitted file was received by the system.
- Submission File Name – the name of the submitted file
- Total Record Count – the count of records contained in the submitted file.
- Completion Date – the date and time that the file processing was complete.
- Status – the status of the file processing. The following status values may display:
  - Waiting - the submitted file is waiting to be processed
  - Processing - the submitted file is processing
  - Error - an error occurred during processing of the submitted file
  - Completed – submitted file processing is complete
3. Locate your submission file by the Submission ID assigned to it and verify that the Status is “Completed”.

4. For submission files with a Completed status, note the number in the Total Record Count column.
   - When the Status is “Completed” and the Total Record Count is zero (0), a system-generated OASIS Agency Final Validation report is NOT generated. The QIES ASAP OASIS system cannot produce a system-generated OASIS Agency Final Validation report. No OASIS Agency Final Validation report is available in your agency’s CASPER validation reports (VR) folder for this submission. Request the OASIS Submitter Final Validation Report to identify the severe error(s) encountered.

   **NOTE:** Subsequent sections of this document provide instructions for locating and/or running validation reports in the CASPER Reporting application.

   When the Total Record Count is zero (0) the system was unable to unzip and extract records from the submitted file.

   **NOTE:** If your facility uses vendor software to create its submission files, you must notify the software vendor of these errors.

   - When the Status is “Completed” and the Total Record Count is greater than zero (0), the QIES ASAP OASIS system successfully unzipped and extracted one or more records from the file. You must review the system-generated OASIS Agency Final Validation report to verify that all records processed without error. The OASIS Agency Final Validation report is placed in your agency’s VR folder.

     If you cannot locate the OASIS Agency Final Validation report in your agency’s VR folder, the user who originally submitted the file can run an OASIS Submitter Validation Report with which you may verify the records of the submission file.

     Likewise, if one or more records of the submission file are missing from the OASIS Agency Final Validation Report, the user who originally submitted the file can run an OASIS Submitter Validation Report with which you may identify the errors that were encountered with those records. When records are missing from the system-generated OASIS Agency Final Validation Report it is because the QIES ASAP OASIS system was unable determine to which agency the records belong and could not include them on the OASIS Agency Final Validation Report.
SYSTEM-GENERATED OASIS AGENCY FINAL VALIDATION REPORT

The following steps detail how to view the system-generated OASIS Agency Final Validation report in the CASPER Reporting application:

NOTE: When the Submission Status is "Completed" and the Total Record Count is greater than zero (0), review the system-generated OASIS Agency Final Validation report to verify that all records processed without error.

1. From the Welcome to the CMS QIES Systems for Providers page, select the CASPER Reporting link and log in to the CASPER Reporting application (Figure A-5) with your QIES user ID/password. This is the same user ID/password with which you access the OASIS Submission system.

Figure A-5. CASPER Reporting Login Page

2. Select the Folders button located on the tool bar at the top of the page. The CASPER Folders page (Figure A-6) is presented. The folders available to you are along the left-hand side of the page.

Figure A-6. CASPER Folders Page – Validation Report Folder
3. Locate and select the agency folder with the naming structure of:

[State Code] HHA [Facility ID] VR

Where:
State Code = your 2-character state code
HHA = Home Health Agency
Facility ID = State-assigned facility ID used for submitting OASIS records
VR = Validation Report

4. With the VR folder selected, the main body of the CASPER Folders page lists the system-generated OASIS Agency Final Validation reports that are available for you to view. The report names are formatted as follows:

[Submission Date & Time].[Submission ID]

NOTE: OASIS reports are automatically purged after 60 days.

5. Select the report that corresponds to the submission file you wish to verify. Figure A-7 depicts a fictional system-generated OASIS Agency Final Validation report.

NOTE: When a submitted file cannot be unzipped or contains no records, the QIES ASAP OASIS system cannot generate an OASIS Agency Final Validation Report and place it in your agency’s shared VR folder. If an OASIS Agency Final Validation Report was created but the number of records displayed is less than the number of records you submitted in the file, there were one or more records that could not be processed by the QIES ASAP OASIS system. In either case, you must request the OASIS Submitter Final Validation report in order to identify the issues with the records that were not processed.

Records in the submitted assessment file are sorted, processed, and presented on the system-generated OASIS Agency Final Validation Report in the following order:

- Submission ID
- Agency ID
- Patient Last Name
- Patient First Name
- Record Processing Order
- Assessment ID
- Error Type Description
- Item in Error Text
- Value in Error Text
Figure A-7. OASIS Agency Final Validation Report - Excerpt

CMS Submission Report
OASIS Agency Final Validation Report

Submission Date/Time: 09/03/2015 12:34:56
Submission ID: 200000220
Submitter User ID: 
Submission File Name: OASIS_20141001.zip
Submission File Status: Completed
Processing Completion Date/Time: 09/03/2015 12:35:25

Agency ID (FAC_ID): IAHHA145
Agency Name: MERCY HOME CARE - DUBUQUE
State Code: IA

# Records Processed: 15
# Production Records Accepted: 0
# Production Records Rejected: 15
# Production Duplicate Records: 0
# Production Records Submitted Without Agency Authority: 0
# Test Records Passed: 0
# Test Records Failed: 0
Total # of Messages: 670

Record: 1
Rejected
Asmnt_ID: 460800276
Res_Int_ID: 0
Type of Transaction: NEW RECORD
RFA, BRANCH ID: D1, 16Q7145003
Correction Num: 0
XML File Name: Oct2014_ASMT_SYS_CD.1.45_POS_initials_1.xml

OASIS Item(s): M1025_OPT_DIAG_ICD_A3
Data Submitted: 
Message Number/Severity: -903 FATAL
Message: Required Item Missing or Invalid: Based on the OASIS Data Specifications in effect on the effective date of this record, this item is required.

This report may contain privacy protected data and should not be released to the public.

NOTE: For more information about the OASIS final validation reports that are available to home health agencies, refer to the HHA Provider Reports (Section 4) of the CASPER Reporting HHA Provider User's Guide. This guide is available on the Welcome to the CMS QIES Systems for Providers page.
OASIS SUBMITTER FINAL VALIDATION REPORT

For the instances when the QIES ASAP OASIS system cannot produce the system-generated OASIS Agency Final Validation report or process all of the records submitted, you can request an OASIS Submitter Final Validation Report in order to determine why the system could not process these records.

The following steps identify how to request and view the OASIS Submitter Final Validation report:

1. Log into the CASPER Reporting application with your QIES user ID/password (Figure A-5, above). This is the same user ID/password you use for OASIS Submissions.

2. Select the Reports button. The CASPER Reports page (Figure A-8) is presented.

Figure A-8. CASPER Reports Page

3. Select the HHA Provider report category link from the Report Categories frame on the left. Links to the reports in this category display in the right-hand frame.

NOTE: Only those report categories to which you specifically have access are listed in the Report Categories frame.
4. In the right-hand frame, navigate as necessary to the page displaying the OASIS Submitter Final Validation link and select the link. The CASPER Reports Submit page (Figure A-9) is presented.

**NOTE:** The list of reports in the HHA Provider report category is lengthy. You may need to navigate to the second or subsequent page of the list to locate the OASIS Submitter Final Validation report link.

![Figure A-9. CASPER Reports Submit Page – OASIS Submitter Final Validation Report](image)

5. Enter the desired submission ID in the Submission ID field and select the Submit button.

**NOTE:** You may only request the OASIS Submitter Validation report for files submitted with your QIES user ID. You cannot request the OASIS Submitter Final Validation report if you did not submit the file. If you request a file you did not originally submit the system responds with an “Invalid User ID” message and the request is not processed.

6. When completed, the OASIS Submitter Validation report is placed in your My Inbox folder in the CASPER Reporting Application. To access this folder, select the Folders button. The CASPER Folders page (Figure A-6, above) is presented. The folders available to you, including the My Inbox folder, are listed along the left-hand side of the page.

7. Select the My Inbox link. The main body of the CASPER Folders page (Figure A-10) lists the reports that are available in your My Inbox folder.
Each report name is a link with which you may open and view the contents of that report. The *Date Requested* listed for each report is the date and time that you submitted the report request.

**Figure A-10. CASPER Folders Page – My Inbox Folder**

---

8. Find and select the OASIS Submitter Final Validation report you wish to view. Open the desired report by selecting the report name.

**NOTE:** When you hover your mouse pointer over the icon to the left of a report name, the submission ID for which that report was run displays briefly.

Listed below are some of the severe errors for which the QIES ASAP OASIS system either cannot produce a system-generated OASIS Agency Final Validation report for the submitted file or include a specific record on the report. These errors are reported only on the OASIS Submitter Validation report:

- -901 Invalid Zip File (no system-generated FVR created)
- -902 Invalid XML File (record not on system-generated FVR)
- -904 Invalid XML File Format (record not on system-generated FVR)
- -3162 Unauthorized Submitter (no system-generated FVR created)

**NOTE:** While the severe errors listed above are common, it is not a comprehensive listing. To view a complete listing of errors, please refer to Section 4 of the OASIS Submission User’s Guide available on the Welcome to the CMS QIES Systems for Providers page.
B

RESIDENT MATCH PROCESS

GLOSSARY ............................................................................................................. 2
THE RESIDENT MATCHING PROCESS ................................................................. 3
RECORD MODIFICATION CONSIDERATIONS .................................................. 7
GLOSSARY

The following important terms are used in this document:

<table>
<thead>
<tr>
<th>Term</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submitted Record</td>
<td>Information that is submitted to the QIES ASAP system, whether it is a new, inactivated, or modified (corrected) assessment, entry/death tracking record, or HIS abstraction record, it is referred to generically in this document as a submitted record.</td>
</tr>
<tr>
<td>Facility Internal ID</td>
<td>An internal identifier assigned to a provider by the QIES ASAP system. Depending on the system, this may be the provider's Facility Internal ID or the Provider Internal ID. Facility Internal ID is based upon the provider's FAC_ID (for HHA, HHA_AGENCY_ID).</td>
</tr>
<tr>
<td>Resident</td>
<td>A resident of a long-term care facility or a patient of an LTCH, IRF, hospice, or a home health agency is referred to generically in this document as a resident.</td>
</tr>
<tr>
<td>Resident Record</td>
<td>Information that uniquely identifies a resident. A resident record is created initially from the resident-identifying information included in the first record submitted for that resident. Ideally, only one resident record exists for each resident. Subsequent submitted records for the resident are then associated with that resident record by means of the Resident Match process. Each resident should have one resident record to which one or more submitted records are associated. Resident records comprise the Resident table in the National database. Resident records are used to organize submitted records.</td>
</tr>
<tr>
<td>Resident Match</td>
<td>The process by which the resident-identifying information contained in a submitted record is compared to existing resident records in the Resident table so that, if appropriate, the submitted record may be associated with an existing resident record rather than creating a new resident record.</td>
</tr>
</tbody>
</table>
THE RESIDENT MATCHING PROCESS

When a submitted record is accepted into the National database, the system compares the resident-identifying information contained in the submitted record to corresponding information in the existing resident records in the Resident table. Based upon specific criteria listed below, this process determines if the resident is a new resident or one for whom a resident record already exists. If the resident-identifying information in the submitted record is sufficiently similar to the resident information in an existing resident record, a match occurs and the submitted record is associated with the existing resident record. If the resident-identifying information in the submitted record is not sufficiently similar to an existing resident record, a new resident record is created in the Resident table and the submitted record is associated with that new resident record.

The following fields, in various combinations, are the criteria used to determine if the resident identified in the submitted record matches an existing resident record in the Resident table:

- State ID
- Facility Internal ID
- Social Security Number (SSN)
- Last Name
- First Name
- Date of Birth
- Gender

**NOTE:** Only fields with a non-blank value are used as criteria in the Resident Match process.

**NOTE:** Each resident record in the Resident table is associated with a state. Only those resident records associated with the state identified in the submitted record are considered in the Resident Match process.

The criteria used for the Resident Match process are grouped into sets. Using these criteria sets, the Resident Match process compares the resident information in each submitted record to the existing information in the resident records in the Resident table in the order shown in the table below. When a match occurs, the Criteria Set ID of the criteria set that determined the match is stored in the resident_match_criteria column of the accepted submitted record for future reference.
## Resident Match Criteria Set

<table>
<thead>
<tr>
<th>Comparison Order</th>
<th>Criteria Set ID</th>
<th>State ID</th>
<th>Facility Internal ID</th>
<th>SSN</th>
<th>Last Name</th>
<th>First Name</th>
<th>Birth Date</th>
<th>Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>2</td>
<td>9</td>
<td>Y</td>
<td>n</td>
<td>Y</td>
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<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
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<td>3</td>
<td>11</td>
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<td>n</td>
<td>Y</td>
<td>Y</td>
<td>C</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>10</td>
<td>Y</td>
<td>n</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>n</td>
</tr>
</tbody>
</table>

Notes:  
- Y = an exact match is required  
- n = field is not used as match criteria  
- C = a match of the month and year is required  
- Last Name and First Name are converted to upper case letters prior to comparison

**NOTE:** The middle name is not used in the Resident Match process. When two residents with *unknown SSNs* have the same:

- First Name,
- Last Name, and
- Date of Birth (MM/DD/YYYY or MM/YYYY),

(such as twins with the same first name, but different middle names), enter at least one of the resident's middle name into the **First Name** field (along with the first name) to make the first names unique. This ensures that unique records for both residents exist in the Resident table. If identical names are entered in the **First Name** field for both residents and SSN are not entered, the system considers them the same resident and associates all of the submitted records for both residents with that one resident record. This may cause some submitted records to receive warnings or be rejected.

Using the resident match criteria sets defined above, the following flowchart depicts the Resident Matching process:
Determining if New/Changed Resident Identifiers Update an Existing Resident Record or Create a New Resident Record

- Are the following identifiers the same in the assessment record and an existing resident record? 
  State, Facility, SSN, Last Name, First Name, Birth Date, Gender
  Yes → Resident matches on Criteria Set 1
  No → Are the following identifiers the same in the assessment record and an existing resident record?
  State, SSN, Last Name, First Name, Birth Date, Gender
  Yes → Resident matches on Criteria Set 9
  No → Are the following identifiers the same in the assessment record and an existing resident record?
  State, Facility, SSN, Last Name, Gender
  Yes → Resident matches on Criteria Set 11
  No → Are the following identifiers the same in the assessment record and an existing resident record?
  State, Last Name, First Name, Birth Date, Gender
  Yes → Resident matches on Criteria Set 3
  No → Are the following identifiers the same in the assessment record and an existing resident record?
  State, SSN, Birth Date, Gender
  Yes → Resident matches on Criteria Set 4
  No → Are the following identifiers the same in the assessment record and an existing resident record?
  State, SSN, Last Name, First Name, Gender
  Yes → Resident matches on Criteria Set 5
  No → Are the following identifiers the same in the assessment record and an existing resident record?
  State, Facility, Last Name, First Name, Birth Date (MM/YYYY), Gender
  Yes → Resident matches on Criteria Set 6
  No → Are the following identifiers the same in the assessment record and an existing resident record?
  State, SSN, Last Name, First Name, Birth Date
  Yes → Resident matches on Criteria Set 10
  No → A NEW resident is created

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When a match occurs, if the resident information in the accepted submitted record is more recent and differs from the resident information in the resident record in the Resident table, the resident record is updated with the newly submitted information. The following fields may be updated in this manner:

- Current Facility Internal ID
- Social Security Number
- Last Name
- First Name
- Middle Initial
- Date of Birth
- Gender
- Ethnicity
- Death Date
- Medicare Number
- Medicaid Number

Examples of when a resident record is updated (after a match occurs) with more recent resident-identifying information from an accepted submitted record include, but are not limited to:

- Different/corrected spelling of last name – if SSN, birth date, and gender match
- Different/corrected spelling of first name – if SSN, last name, and gender match
- Different/corrected/previous missing birth date – if SSN, last name, first name, and gender match
- Different/corrected/previous missing SSN – if last name, first name, birth date, and gender match
- Different Facility Internal ID – if last name, first name, birth date, and gender match

(The resident table is based upon the state, not the provider. When a resident receives care from more than one provider within the same state, the resident record is automatically updated with the most recent Fac ID)
RECORD MODIFICATION CONSIDERATIONS

If more than one of the resident-identifying criteria fields differ in a submitted modification record and its corresponding resident record, the action taken may vary depending on the system to which the record was submitted.

For OASIS, LTCH, IRF, and Hospice, the original record may not be found and the modification may be rejected with a “record not found” fatal error message. Due to this possibility, OASIS, LTCH, and Hospice policy instructs the provider to submit an inactivation record when the first name, last name, SSN, gender and/or birth date is to be corrected. A new record with the correct information is then submitted.

For MDS if a new resident record is determined to be needed, it will be added to the resident table and the replacement record associated with the new resident. Depending upon the situation, this may or may not be the desired outcome.

For MDS and IRF:

When you must modify multiple resident-identifying fields in a previously accepted record, refer to the flowchart above. It will assist you in determining if you can submit all of the necessary resident identifier changes in one modification. Compare the values of the resident-identifying fields (First Name, Last Name, SSN, Birth Date and Gender) in the modification record to those in the previously accepted record it is correcting. You may need to complete and submit multiple modifications to a record to ensure that a new resident record is not created. If the flow chart states that “A NEW resident is created”, the changes require multiple modifications to the record – if you do not wish to create a new resident record. For each modification, check the flowchart to determine the outcome of the change you are planning to make.

Based upon the flowchart above and assuming that you are not changing the State or Facility Internal ID, the following rules govern whether or not a new resident record is created when you submit a record modification with differing resident identifiers.

- You may update one of the following fields or combinations of fields without creating a new resident record if all other resident-identifying fields are present and matching:
  - SSN (requires a match of the birth month and year minimally; day of month is optional)
  - First Name and Last Name
  - First Name and Birth Date
  - Gender

- If Gender is not available, you may not update any other resident-identifying field without creating a new resident record.
• If SSN is not available, you may only update the Birth Date Day without creating a new resident record only if all other resident-identifying fields, including birth month and birth year, are present and matching.

• If Birth Date (month, day and year) is not available, you may only update the First Name without creating a new resident record only if all other resident-identifying fields are present and matching.

• If Birth Date - day of month only - is not available (birth month and year must be present and matching), you may only update the SSN without creating a new resident record only if all other resident-identifying fields are present and matching.

• If First Name is not available, you may only update either the Birth Date or Last Name without creating a new resident record only if all other resident-identifying fields are present and matching. If you update both the Birth Date and Last name, a new resident will be created.