

Data Submission Specifications for the LTCH - CARE Data Set (V3.00.0 - DRAFT)
Unduplicated Edits Report by Edit ID

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Data Submission Specifications for the LTCH - CARE Data Set (V3.00.0 - DRAFT)
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ID	Type	Severity	Text/Items
-1000	Format	Fatal	<p>If the value is not equal to [^], it must be 9 characters long.</p> <p>Items: A0600A Social Security Number</p>
-1001	Format	Fatal	<p>If the value is not equal to [^], the first three characters must not be equal to [000].</p> <p>Items: A0600A Social Security Number</p>
-1002	Format	Fatal	<p>The value must not be equal to any of the following: [111111111, 333333333, 123456789, 999999999].</p> <p>Items: A0600A Social Security Number</p>
-1003	Format	Fatal	<p>If A0100A is not equal to [^], then it must be 10 digits long.</p> <p>Items: A0100A Facility National Provider Identifier (NPI)</p>
-1007	Consistency	Fatal	<p>The Item Subset Code (ISC) is a two- or three-character code that indicates the type of record that is being submitted. The set of active items is controlled by the ISC. The characters of the ISC are defined as follows:</p> <p>Characters 1 and 2 indicate the type of record and are based upon the values of the Type of Provider (A0200) and Reason For Assessment (RFA) (A0250). The "Item Subset Code (ISC) Report" that accompanies the data specifications lists all possible combinations of the RFA items and their associated ISCs.</p> <p>Note: A special ISC is used for inactivations. When the record is an inactivation (A0050=[3]), then the ISC is equal to [XX].</p> <p>Items: A0200 Type of provider A0250 Reason for Assessment</p>
-1008	Consistency	Fatal	<p>A0900 (Birth Date) cannot be more than 140 years earlier than the current date.</p> <p>Items: A0900 Birth Date</p>
-1009	Format	Fatal	<p>Only the code values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.</p> <p>Items: ASMT_SYS_CD Assessment system code ITM_SBST_CD Item subset code STATE_CD Facility's state postal code A0050 Type of record A0200 Type of provider A0250 Reason for Assessment A0800 Gender A1000A Ethnicity: American Indian or Alaska Native A1000B Ethnicity: Asian A1000C Ethnicity: Black or African American A1000D Ethnicity: Hispanic or Latino A1000E Ethnicity: Native Hawaiian/Pacific Islander A1000F Ethnicity: White A1100A Does the patient need or want an interpreter A1200 Marital status A1400A Payer: Medicare (FFS) A1400B Payer: Medicare (managed care/Part C/Mcr Advant.) A1400C Payer: Medicaid (FFS) A1400D Payer: Medicaid (managed care) A1400E Payer: Workers' compensation A1400F Payer: Title programs</p>

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ID	Type	Severity	Text/Items
			Items:
			A1400G Payer: Other Government
			A1400H Payer: Private insurance/Medigap
			A1400I Payer: Private managed care
			A1400J Payer: Self-pay
			A1400K Payer: No payer source
			A1400X Payer: Unknown
			A1400Y Payer: Other
			A1802 Admitted from
			A2110 Discharge location
			B0100 Comatose
			BB0700 Expression of Ideas and Wants (3-day asmt period)
			BB0800 Understand Verbal/Non-Verbal Content (3-day asmt)
			C1610A Acute onset
			C1610B Fluctuating Course
			C1610C Inattention
			C1610D Disorganized Thinking
			C1610E1 Altered Consc Lvl - Alert
			C1610E2 Altered Consc Lvl - Vigilant/Lethargic/Stupor/Coma
			GG0100B Indoor Mobility (Ambulation)
			GG0110A Manual wheelchair
			GG0110B Motorized wheelchair and/or scooter
			GG0110C Mechanical lift
			GG0110Z None of the above
			GG0130A1 Self-Care (Adm Perf) - Eating
			GG0130A2 Self-Care (Dschg Goal) - Eating
			GG0130A3 Self-Care (Dschg Perf) - Eating
			GG0130B1 Self-Care (Adm Perf) - Oral hygiene
			GG0130B2 Self-Care (Dschg Goal) - Oral hygiene
			GG0130B3 Self-Care (Dschg Perf) - Oral hygiene
			GG0130C1 Self-Care (Adm Perf) - Toileting hygiene
			GG0130C2 Self-Care (Dschg Goal) - Toileting hygiene
			GG0130C3 Self-Care (Dschg Perf) - Toileting hygiene
			GG0130D1 Self-Care (Adm Perf) - Wash upper body
			GG0130D2 Self-Care (Dschg Goal) - Wash upper body
			GG0130D3 Self-Care (Dschg Perf) - Wash upper body
			GG0170A1 Func Mobil (Adm Perf) - Roll left and right
			GG0170A2 Func Mobil (Dschg Goal) - Roll left and right
			GG0170A3 Func Mobil (Dschg Perf) - Roll left and right
			GG0170B1 Func Mobil (Adm Perf) - Sit to lying
			GG0170B2 Func Mobil (Dschg Goal) - Sit to lying
			GG0170B3 Func Mobil (Dschg Perf) - Sit to lying
			GG0170C1 Func Mobil (Adm Perf) - Lying to sit on side
			GG0170C2 Func Mobil (Dschg Goal) - Lying to sitting on side
			GG0170C3 Func Mobil (Dschg Perf) - Lying to sitting on side
			GG0170D1 Func Mobil (Adm Perf) - Sit to stand
			GG0170D2 Func Mobil (Dschg Goal) - Sit to stand
			GG0170D3 Func Mobil (Dschg Perf) - Sit to stand
			GG0170E1 Func Mobil (Adm Perf) - Chair/bed-to-chair trans
			GG0170E2 Func Mobil (Dschg Goal) - Chair/bed-to-chair trans
			GG0170E3 Func Mobil (Dschg Perf) - Chair/bed-to-chair trans
			GG0170F1 Func Mobil (Adm Perf) - Toilet transfer
			GG0170F2 Func Mobil (Dschg Goal) - Toilet transfer
			GG0170F3 Func Mobil (Dschg Perf) - Toilet transfer
			GG0170I1 Func Mobil (Adm Perf) - Walk 10 feet
			GG0170I2 Func Mobil (Dschg Goal) - Walk 10 feet
			GG0170I3 Func Mobil (Dschg Perf) - Walk 10 feet
			GG0170J1 Func Mobil (Adm Perf) - Walk 50 feet w/2 turns

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ID	Type	Severity	Text/Items
			Items:
			GG0170J2 Func Mobil (Dschg Goal) - Walk 50 feet w/2 turns
			GG0170J3 Func Mobil (Dschg Perf) - Walk 50 feet w/2 turns
			GG0170K1 Func Mobil (Adm Perf) - Walk 150 feet
			GG0170K2 Func Mobil (Dschg Goal) - Walk 150 feet
			GG0170K3 Func Mobil (Dschg Perf) - Walk 150 feet
			GG0170Q1 Does the patient use a wheelchair and/or scooter
			GG0170Q3 Does the patient use a wheelchair and/or scooter
			GG0170R1 Func Mobil (Adm Perf) - Wheel 50 feet w/2 turns
			GG0170R2 Func Mobil (Dschg Goal) - Wheel 50 feet w/2 turns
			GG0170R3 Func Mobil (Dschg Perf) - Wheel 50 feet w/2 turns
			GG0170RR1 Indicate the type of wheelchair or scooter used
			GG0170RR3 Indicate the type of wheelchair or scooter used
			GG0170S1 Func Mobil (Adm Perf) - Wheel 150 feet
			GG0170S2 Func Mobil (Dschg Goal) - Wheel 150 feet
			GG0170S3 Func Mobil (Dschg Perf) - Wheel 150 feet
			GG0170SS1 Indicate the type of wheelchair or scooter used
			GG0170SS3 Indicate the type of wheelchair or scooter used.
			H0350 Bladder continence
			H0400 Bowel continence
			I0050 Patient primary medical condition
			I0103 Metastatic Cancer
			I0104 Severe Cancer
			I0605 Severe Left Systolic/Ventricular Dysfunction
			I0900 Peripheral vascular disease (PVD) or PAD
			I1501 Chronic Kidney Disease, Stage 5
			I1502 Acute Renal Failure
			I2101 Septicemia, Sepsis, Systemic Inflammatory Response
			I2600 CNS Infect, Oppor Infect, Bone/Joint/Muscle Infect
			I2900 Diabetes mellitus (DM)
			I4100 Major Lower Limb Amputation
			I4501 Stroke
			I4801 Dementia
			I4900 Hemiplegia or Hemiparesis
			I5000 Paraplegia
			I5101 Complete Tetraplegia
			I5102 Incomplete Tetraplegia
			I5110 Other Spinal Cord Disorder/Injury
			I5200 Multiple Sclerosis (MS)
			I5250 Huntington's Disease
			I5300 Parkinson's Disease
			I5450 Amyotrophic Lateral Sclerosis
			I5455 Other Progressive Neuromuscular Disease
			I5460 Locked-In State
			I5470 Severe Anoxic Brain Damage, Cerebral Edema
			I5480 Other Severe Neurological Injury-Disease-Dysfunc
			I5601 Malnutrition
			I5602 At Risk for Malnutrition
			I7100 Lung Transplant
			I7101 Heart Transplant
			I7102 Liver Transplant
			I7103 Kidney Transplant
			I7104 Bone Marrow Transplant
			I7900 None of the Above
			J1800 Any Falls Since Admission
			J1900A Num Falls Since Admission - No injury
			J1900B Num Falls Since Admission - Injury (except major)
			J1900C Num Falls Since Admission - Major injury

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ID	Type	Severity	Text/Items
			Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries N2001 Drug Regimen Review N2003 Medication Follow-up N2005 Medication Intervention O0100G Non-invasive ventilator (BIPAP, CPAP) O0100H IV Medications O0100H2A Vasoactive medications O0100J Dialysis O0100N Total Parenteral Nutrition O0100Z None of the above O0150A SBT: Invasive Mechanical Ventilation Support O0150B SBT: Assessed for readiness by day 2 O0150C SBT: Deemed medically ready by day 2 O0150D SBT: Documentation of reason(s) - patient unready O0150E SBT: Performed by day 2 O0200A Invasive Mechanical Ventilator - Liberation Status O0250A Was influenza vaccine received O0250C If influenza vaccine not received, state reason
-1010	Format	Fatal	<p>This item must contain either (a) a valid date in YYYYMMDD format, or (b) one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report. Note that if a date in YYYYMMDD format is submitted, it must be 8 characters in length and each of the 8 characters must contain the digits 0 (zero) through 9. YYYY, MM, and DD must be zero filled, where necessary. For example, January 1, 2011 must be submitted as "20110101".</p> Items: A0210 Assessment reference date A0220 Admission date A0270 Discharge date O0250B Date influenza vaccine received Z0500B Date assessment signed as complete
-1011	Format	Fatal	<p>This item must contain a valid date in YYYYMMDD, YYYYMM, or YYYY format. Note that if a date in YYYYMMDD format is submitted, it must be 8 characters in length and each of the 8 characters must contain the digits 0 (zero) through 9. YYYY, MM, and DD must be zero filled, where necessary. For example, January 1, 1909 must be submitted as "19090101". If a date is submitted in YYYYMM format, it must be 6 characters in length and each of the 6 characters must contain the digits 0 (zero) through 9. YYYY and MM must be zero filled, where necessary. For example, January, 1909 must be submitted as "190901". If a date is submitted in YYYY format, it must be 4 characters in length and each of the 4 characters must contain the digits 0 (zero) through 9. YYYY must be zero filled, where necessary. For example, 1909 must be submitted as "1909".</p> Items: A0900 Birth Date
-1012	Format	Fatal	<p>Only the values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item. The submitted value must be greater than or equal to the minimum value listed in the table and less than or equal to the maximum value listed in the table, or it must match one of the remaining special values (if any) that are listed in the table. The length of the submitted value must not exceed the allowed maximum length for the item. Signed numbers (with a leading plus or minus sign) are not accepted.</p> Items: A0055 Correction number K0200A Height (in inches) K0200B Weight (in pounds) M0300A Stage 1 pressure injuries: number present M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit M0300C1 Stage 3 pressure ulcers: number present

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ID	Type	Severity	Text/Items																																
			M0300C2 Stage 3 pressure ulcers: number at admit M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm																																
-1013	Format	Fatal	<p>Formatting of Integer Numeric Items:</p> <p>Only integer values and the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report are accepted for this item. Leading zeroes may be included or omitted from the submitted value as long as the resulting length of the string does not exceed the allowed maximum length for the item. A decimal point and decimal values are not allowed. The following examples are allowable if the value to be submitted is equal to [1] and the maximum length is equal to 2: [1], [01].</p> <p>The following values are NOT allowed and will lead to a fatal error: [1.], [1.0], [01.], [01.0], [1.1], [01.1], [1.01].</p> <p>Items:</p> <table><tr><td>A0055</td><td>Correction number</td></tr><tr><td>K0200A</td><td>Height (in inches)</td></tr><tr><td>K0200B</td><td>Weight (in pounds)</td></tr><tr><td>M0300A</td><td>Stage 1 pressure injuries: number present</td></tr><tr><td>M0300B1</td><td>Stage 2 pressure ulcers: number present</td></tr><tr><td>M0300B2</td><td>Stage 2 pressure ulcers: number at admit</td></tr><tr><td>M0300C1</td><td>Stage 3 pressure ulcers: number present</td></tr><tr><td>M0300C2</td><td>Stage 3 pressure ulcers: number at admit</td></tr><tr><td>M0300D1</td><td>Stage 4 pressure ulcers: number present</td></tr><tr><td>M0300D2</td><td>Stage 4 pressure ulcers: number at admit</td></tr><tr><td>M0300E1</td><td>Unstageable due to dressing/device: number present</td></tr><tr><td>M0300E2</td><td>Unstageable due to dressing/device: number at adm</td></tr><tr><td>M0300F1</td><td>Unstageable slough/eschar: number present</td></tr><tr><td>M0300F2</td><td>Unstageable slough/eschar: number at admit</td></tr><tr><td>M0300G1</td><td>Unstageable as deep tissue: num present</td></tr><tr><td>M0300G2</td><td>Unstageable as deep tissue: num at adm</td></tr></table>	A0055	Correction number	K0200A	Height (in inches)	K0200B	Weight (in pounds)	M0300A	Stage 1 pressure injuries: number present	M0300B1	Stage 2 pressure ulcers: number present	M0300B2	Stage 2 pressure ulcers: number at admit	M0300C1	Stage 3 pressure ulcers: number present	M0300C2	Stage 3 pressure ulcers: number at admit	M0300D1	Stage 4 pressure ulcers: number present	M0300D2	Stage 4 pressure ulcers: number at admit	M0300E1	Unstageable due to dressing/device: number present	M0300E2	Unstageable due to dressing/device: number at adm	M0300F1	Unstageable slough/eschar: number present	M0300F2	Unstageable slough/eschar: number at admit	M0300G1	Unstageable as deep tissue: num present	M0300G2	Unstageable as deep tissue: num at adm
A0055	Correction number																																		
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M0300G1	Unstageable as deep tissue: num present																																		
M0300G2	Unstageable as deep tissue: num at adm																																		
-1014	Consistency	Fatal	<p>If the SFTWR_VNDR_ID=[^], then SFTWR_VNDR_NAME and SFTWR_VNDR_EMAIL_ADR must equal [^].</p> <p>Items:</p> <table><tr><td>SFTWR_VNDR_ID</td><td>Software vendor federal employer tax ID</td></tr><tr><td>SFTWR_VNDR_NAME</td><td>Software vendor company name</td></tr><tr><td>SFTWR_VNDR_EMAIL_ADR</td><td>Software vendor email address</td></tr></table>	SFTWR_VNDR_ID	Software vendor federal employer tax ID	SFTWR_VNDR_NAME	Software vendor company name	SFTWR_VNDR_EMAIL_ADR	Software vendor email address																										
SFTWR_VNDR_ID	Software vendor federal employer tax ID																																		
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SFTWR_VNDR_EMAIL_ADR	Software vendor email address																																		
-1015	Consistency	Fatal	<p>If the SFTWR_VNDR_ID is not equal to [^], then SFTWR_VNDR_NAME and SFTWR_VNDR_EMAIL_ADR must not equal [^].</p> <p>Items:</p> <table><tr><td>SFTWR_VNDR_ID</td><td>Software vendor federal employer tax ID</td></tr><tr><td>SFTWR_VNDR_NAME</td><td>Software vendor company name</td></tr><tr><td>SFTWR_VNDR_EMAIL_ADR</td><td>Software vendor email address</td></tr></table>	SFTWR_VNDR_ID	Software vendor federal employer tax ID	SFTWR_VNDR_NAME	Software vendor company name	SFTWR_VNDR_EMAIL_ADR	Software vendor email address																										
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SFTWR_VNDR_EMAIL_ADR	Software vendor email address																																		
-1016	Format	Fatal	<p>Formatting of Numeric Text Items:</p> <p>If this item is not equal to one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <p>a) The numeric characters: [0] through [9].</p>																																

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ID	Type	Severity	Text/Items
			Items: SFTWR_VNDR_ID Software vendor federal employer tax ID A0100A Facility National Provider Identifier (NPI) A0600A Social Security Number
-1017	Format	Fatal	<p>Formatting of Alphanumeric Text Items:</p> <p>If this item is not equal to one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <p>a) The numeric characters: [0] through [9].</p> <p>b) The letters [A] through [Z] and [a] through [z].</p> Items: A0100B Facility CMS Certification Number (CCN) A0100C State Medicaid provider number A0600B Medicare/railroad insurance number A0700 Medicaid number
-1018	Format	Fatal	<p>Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, and Special Characters:</p> <p>If this item is not equal to one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <p>a) The numeric characters: [0] through [9].</p> <p>b) The letters [A] through [Z] and [a] through [z].</p> <p>c) The character [-].</p> <p>d) The following special characters:</p> <p>[@] (at sign)</p> <p>['] (single quote)</p> <p>[/] (forward slash)</p> <p>[+] (plus sign)</p> <p>[,] (comma)</p> <p>[.] (period)</p> <p>[_] (underscore)</p> <p>e) Embedded spaces (spaces surrounded by any of the characters listed above). For example, [LEGAL TEXT] is allowed.</p> Items: SFTWR_PROD_VRSN_CD Software product version code A0500A Patient first name A0500C Patient last name A0500D Patient name suffix A1100B Preferred language
-1019	Format	Fatal	<p>Formatting of Alphanumeric Text Items That Can Contain Special Characters:</p> <p>If this item is not equal to one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <p>a) The numeric characters: [0] through [9].</p> <p>b) The letters [A] through [Z] and [a] through [z].</p> <p>c) The following special characters:</p> <p>[@] (at sign)</p> <p>['] (single quote)</p> <p>[/] (forward slash)</p> <p>[+] (plus sign)</p> <p>[,] (comma)</p> <p>[.] (period)</p> <p>[_] (underscore)</p> Items: A0500B Patient middle initial

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ID	Type	Severity	Text/Items
-1020	Format	Fatal	<p>Formatting of email address.</p> <p>Any valid email address is accepted. The text string may contain any printable characters except single-quotes or double-quotes.</p> <p>Items: SFTWR_VNDR_EMAIL_ADR Software vendor email address</p>
-1021	Consistency	Fatal	<p>The value submitted for FAC_ID is inconsistent with the information stored in QIES ASAP system. It must match the FAC_ID in the QIES ASAP System for the provider. The FAC_ID is the provider's submission ID.</p> <p>Items: FAC_ID Assigned facility/provider submission ID</p>
-1022	Consistency	Warning	<p>The value submitted for A0100B (provider's CMS Certification Number -- CCN) will be compared with the value that is currently in the ASAP database. If the values do not match, a warning will be issued.</p> <p>Items: A0100B Facility CMS Certification Number (CCN)</p>
-1025	Consistency	Fatal	<p>For the first record that is submitted to correct or inactivate an existing record, A0055 (correction number) must equal "01". If that correction/inactivation is accepted and if a subsequent correction/inactivation is required A0055 must equal "02", and so on.</p> <p>If the value submitted in A0055 is incorrect, a fatal error will result and the submitted record will be rejected.</p> <p>Items: A0055 Correction number</p>
-1026	Consistency	Fatal	<p>If A0050=[1], then A0055 (correction number) must equal [0].</p> <p>Items: A0055 Correction number A0050 Type of record</p>
-1027	Format	Fatal	<p>The length of the text submitted for a free-form text item must not exceed the maximum length specified for this item.</p> <p>Items: SFTWR_VNDR_ID Software vendor federal employer tax ID SFTWR_VNDR_NAME Software vendor company name SFTWR_VNDR_EMAIL_ADR Software vendor email address SFTWR_PROD_NAME Software product name SFTWR_PROD_VRSN_CD Software product version code A0100A Facility National Provider Identifier (NPI) A0100C State Medicaid provider number A0500A Patient first name A0500B Patient middle initial A0500C Patient last name A0500D Patient name suffix A0600A Social Security Number A0600B Medicare/railroad insurance number A0700 Medicaid number A1100B Preferred language</p>
-1028	Consistency	Fatal	<p>If SFTWR_PROD_NAME=[^], then SFTWR_PROD_VRSN_CD must be equal to [^].</p> <p>Items: SFTWR_PROD_NAME Software product name SFTWR_PROD_VRSN_CD Software product version code</p>
-1029	Consistency	Fatal	<p>If SFTWR_PROD_NAME is not equal to [^], then SFTWR_PROD_VRSN_CD must not be equal to [^].</p> <p>Items: SFTWR_PROD_NAME Software product name SFTWR_PROD_VRSN_CD Software product version code</p>

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ID	Type	Severity	Text/Items
-1030	Format	Fatal	<p>Formatting of Alphanumeric Text Items That Can Contain Dashes, Spaces, Ampersands, and Other Special Characters:</p> <p>If this item is not equal to one of the special values (if any) that are listed in the Item Values table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <p>a) The numeric characters: [0] through [9].</p> <p>b) The letters [A] through [Z] and [a] through [z].</p> <p>c) The character [-].</p> <p>d) The following special characters:</p> <p> [&] (ampersand)</p> <p> [@] (at sign)</p> <p> ['] (single quote)</p> <p> [/] (forward slash)</p> <p> [+] (plus sign)</p> <p> [,] (comma)</p> <p> [.] (period)</p> <p> [_] (underscore)</p> <p>e) Embedded spaces (spaces surrounded by any of the characters listed above). For example, [LEGAL TEXT] is allowed.</p> <p>Items: SFTWR_VNDR_NAME Software vendor company name</p> <p> SFTWR_PROD_NAME Software product name</p>
-1031	Format	Warning	<p>The version code submitted should match one of the values listed in the "Item Values" table of the Detailed Data Specifications Report. For example, do not submit [1.00.], [1.00.0], [1.00.1], or [1.00.2]. A value of [1.00] should be submitted instead.</p> <p>Items: ITM_SET_VRSN_C Item set version code</p> <p> SPEC_VRSN_CD Specifications version code</p>
-1033	Consistency	Fatal	<p>A user submitting a file for a provider must be authorized to submit for the provider identified by the FAC_ID item in the file.</p> <p>Items: FAC_ID Assigned facility/provider submission ID</p>
-1034	Consistency	Fatal	<p>The ASAP system will recalculate the ISC and compare the recalculated value with the value that is submitted in ITM_SBST_CD. If the recalculated value does not match the value submitted in ITM_SBST_CD, a fatal error will result.</p> <p>Items: ITM_SBST_CD Item subset code</p>
-1036	Consistency	Fatal	<p>If A0050 = [2,3], then A0055 must not be equal to [0].</p> <p>Items: A0055 Correction number</p> <p> A0050 Type of record</p>
-1037	Format	Fatal	<p>Incorrect Medicare Number or Medicare Beneficiary Identifier (MBI): This item must conform to one of two possible formats, as defined below:</p> <p>a) MBI format:</p> <p> The MBI shall be eleven characters in length. The first character must be numeric, excluding zero (0).</p> <p> The second, fifth, eighth and ninth characters must be alphabetic, excluding the following letters: S, L, O, I, B, and Z. The fourth, seventh, tenth and eleventh characters must be numeric. The third and sixth characters must be alphabetic (excluding S, L, O, I, B, and Z) or numeric.</p>

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ID	Type	Severity	Text/Items
			b) Medicare Number format: If the first character is numeric [0 through 9] (SSN), then the first 9 characters must be digits [0 through 9]. If the first character is alphabetic (RR insurance number), then there must be 1, 2, or 3 alphabetic characters followed by 6 or 9 numbers. Items: A0600B Medicare/railroad insurance number
-3010	Consistency	Fatal	If A0250=[10,11] and M0300B1=[0,^], then M0300B2 must equal [^]. Items: A0250 Reason for Assessment M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit
-3011	Consistency	Fatal	If A0250=[10,11] and M0300B1=[-], then M0300B2 must equal [-]. Items: A0250 Reason for Assessment M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit
-3012	Consistency	Fatal	If A0250=[10,11] and M0300C1=[0,^], then M0300C2 must equal [^]. Items: A0250 Reason for Assessment M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit
-3013	Consistency	Fatal	If A0250=[10,11] and M0300C1=[-], then M0300C2 must equal [-]. Items: A0250 Reason for Assessment M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit
-3014	Consistency	Fatal	If A0250=[10,11] and M0300D1=[0,^], then M0300D2 must equal [^]. Items: A0250 Reason for Assessment M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit
-3015	Consistency	Fatal	If A0250=[10,11] and M0300D1=[-], then M0300D2 must equal [-]. Items: A0250 Reason for Assessment M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit
-3016	Consistency	Fatal	If A0250=[10,11] and M0300E1=[0,^], then M0300E2 must equal [^]. Items: A0250 Reason for Assessment M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm
-3017	Consistency	Fatal	(a) If A0250=[10,11] and M0300E1=[-], then M0300E2 must equal [-]. Items: A0250 Reason for Assessment M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm
-3018	Consistency	Fatal	If A0250=[10,11] and M0300F1=[0,^], then M0300F2 must equal [^]. Items: A0250 Reason for Assessment M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit

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ID	Type	Severity	Text/Items
-3019	Consistency	Fatal	<p>(a) If A0250=[10,11] and M0300F1=[-], then M0300F2 must equal [-].</p> <p>Items: A0250 Reason for Assessment M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit</p>
-3020	Consistency	Fatal	<p>If A0250=[10,11] and M0300G1=[0,^], then M0300G2 must equal [^].</p> <p>Items: A0250 Reason for Assessment M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm</p>
-3021	Consistency	Fatal	<p>(a) If A0250=[10,11] and M0300G1=[-], then M0300G2 must equal [-].</p> <p>Items: A0250 Reason for Assessment M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm</p>
-3022	Consistency	Fatal	<p>If A1100A=[1], then A1100B must not equal [^].</p> <p>Items: A1100A Does the patient need or want an interpreter A1100B Preferred language</p>
-3023	Consistency	Fatal	<p>If A1100A=[-], then A1100B must equal [-].</p> <p>Items: A1100A Does the patient need or want an interpreter A1100B Preferred language</p>
-3025	Consistency	Fatal	<p>If A0250=[01], then A0270 must equal [^].</p> <p>Items: A0250 Reason for Assessment A0270 Discharge date</p>
-3034	Consistency	Fatal	<p>If M0210=[-], then all active items from M0300A through M0300G2 must equal [-].</p> <p>Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300A Stage 1 pressure injuries: number present M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm</p>
-3036	Consistency	Fatal	<p>a) If B0100=[1], then all active items from BB0700 through C1610E2 must equal [^]. b) If B0100=[0], then all active items from BB0700 through C1610E2 must not equal [^]. c) If B0100=[-], then all active items from BB0700 through C1610E2 must equal [-].</p> <p>Items: B0100 Comatose BB0700 Expression of Ideas and Wants (3-day asmt period) BB0800 Understand Verbal/Non-Verbal Content (3-day asmt) C1610A Acute onset C1610B Fluctuating Course</p>

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ID	Type	Severity	Text/Items
			Items: C1610C Inattention C1610D Disorganized Thinking C1610E1 Altered Consc Lvl - Alert C1610E2 Altered Consc Lvl - Vigilant/Lethargic/Stupor/Coma
-3039	Consistency	Fatal	<p>a) If GG0110Z=[1], then all active items from GG0110A through GG0110C must equal [0]. b) If GG0110Z=[0], then at least one active item from GG0110A through GG0110C must not be equal to [0]. c) If GG0110Z=[-], then all active items from GG0110A through GG0110C must equal [0,-].</p> Items: GG0110A Manual wheelchair GG0110B Motorized wheelchair and/or scooter GG0110C Mechanical lift GG0110Z None of the above
-3042	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> Items: GG0170I1 Func Mobil (Adm Perf) - Walk 10 feet GG0170I2 Func Mobil (Dschg Goal) - Walk 10 feet GG0170J1 Func Mobil (Adm Perf) - Walk 50 feet w/2 turns GG0170J2 Func Mobil (Dschg Goal) - Walk 50 feet w/2 turns GG0170K1 Func Mobil (Adm Perf) - Walk 150 feet GG0170K2 Func Mobil (Dschg Goal) - Walk 150 feet
-3043	Consistency	Fatal	<p>a) If GG0170Q1=[0], then all active items from GG0170R1 through GG0170SS1 must be equal to [^]. b) If GG0170Q1=[1], then all active items from GG0170R1 through GG0170SS1 must not be equal to [^].</p> Items: GG0170Q1 Does the patient use a wheelchair and/or scooter GG0170R1 Func Mobil (Adm Perf) - Wheel 50 feet w/2 turns GG0170R2 Func Mobil (Dschg Goal) - Wheel 50 feet w/2 turns GG0170RR1 Indicate the type of wheelchair or scooter used GG0170S1 Func Mobil (Adm Perf) - Wheel 150 feet GG0170S2 Func Mobil (Dschg Goal) - Wheel 150 feet GG0170SS1 Indicate the type of wheelchair or scooter used
-3044	Consistency	Fatal	<p>a) If I0050=[5], then I0050A must not be equal to [^]. b) If I0050=[1,2,3,4,-], then I0050A must be equal to [^].</p> Items: I0050 Patient primary medical condition I0050A Other medical condition - ICD code
-3046	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> Items: I0900 Peripheral vascular disease (PVD) or PAD I1501 Chronic Kidney Disease, Stage 5 I1502 Acute Renal Failure I2101 Septicemia, Sepsis, Systemic Inflammatory Response I2600 CNS Infect, Oppor Infect, Bone/Joint/Muscle Infect I2900 Diabetes mellitus (DM) I4100 Major Lower Limb Amputation I4501 Stroke I4801 Dementia I4900 Hemiplegia or Hemiparesis I5000 Paraplegia I5101 Complete Tetraplegia I5102 Incomplete Tetraplegia I5110 Other Spinal Cord Disorder/Injury

Data Submission Specifications for the LTCH - CARE Data Set (V3.00.0 - DRAFT)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
			Items: I5200 Multiple Sclerosis (MS) I5250 Huntington's Disease I5300 Parkinson's Disease I5450 Amyotrophic Lateral Sclerosis I5460 Locked-In State I5470 Severe Anoxic Brain Damage, Cerebral Edema I5601 Malnutrition I5602 At Risk for Malnutrition I7900 None of the Above
-3049	Consistency	Fatal	<p>a) If J1800=[0], then all active items from J1900A through J1900C must be equal to [^]. b) If J1800=[1], then all active items from J1900A through J1900C must not equal [^], and at least one of these items must equal [-,1,2]. c) If J1800=[-], then all active items from J1900A through J1900C must be equal to [-].</p> Items: J1800 Any Falls Since Admission J1900A Num Falls Since Admission - No injury J1900B Num Falls Since Admission - Injury (except major) J1900C Num Falls Since Admission - Major injury
-3050	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> Items: O0100G Non-invasive ventilator (BIPAP, CPAP) O0100J Dialysis O0100N Total Parenteral Nutrition O0100Z None of the above
-3052	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> Items: GG0170I3 Func Mobil (Dschg Perf) - Walk 10 feet GG0170J3 Func Mobil (Dschg Perf) - Walk 50 feet w/2 turns GG0170K3 Func Mobil (Dschg Perf) - Walk 150 feet
-3542	Consistency	Fatal	<p>If M0210=[1], then all active items from M0300A through M0300B1 must not equal [^].</p> Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300A Stage 1 pressure injuries: number present M0300B1 Stage 2 pressure ulcers: number present
-3543	Consistency	Fatal	<p>If M0210=[1], then M0300C1 must not equal [^].</p> Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300C1 Stage 3 pressure ulcers: number present
-3544	Consistency	Fatal	<p>If M0210=[1], then M0300D1 must not equal [^].</p> Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300D1 Stage 4 pressure ulcers: number present
-3545	Consistency	Fatal	<p>If M0210=[1], then M0300E1 must not equal [^].</p> Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300E1 Unstageable due to dressing/device: number present
-3546	Consistency	Fatal	<p>If M0210=[1], then M0300F1 must not equal [^].</p> Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300F1 Unstageable slough/eschar: number present

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ID	Type	Severity	Text/Items
-3547	Consistency	Fatal	<p>If M0210=[1], then M0300G1 must not equal [^].</p> <p>Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300G1 Unstageable as deep tissue: num present</p>
-3548	Consistency	Fatal	<p>If A0250=[10,11] and M0300B1=[1-9], then M0300B2 must not equal [^].</p> <p>Items: A0250 Reason for Assessment M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit</p>
-3549	Consistency	Fatal	<p>If A0250=[10,11] and M0300C1=[1-9], then M0300C2 must not equal [^].</p> <p>Items: A0250 Reason for Assessment M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit</p>
-3550	Consistency	Fatal	<p>If A0250=[10,11] and M0300D1=[1-9], then M0300D2 must not equal [^].</p> <p>Items: A0250 Reason for Assessment M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit</p>
-3551	Consistency	Fatal	<p>If A0250=[10,11] and M0300E1=[1-9], then M0300E2 must not equal [^].</p> <p>Items: A0250 Reason for Assessment M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm</p>
-3552	Consistency	Fatal	<p>If A0250=[10,11] and M0300F1=[1-9], then M0300F2 must not equal [^].</p> <p>Items: A0250 Reason for Assessment M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit</p>
-3553	Consistency	Fatal	<p>If A0250=[10,11] and M0300G1=[1-9], then M0300G2 must not equal [^].</p> <p>Items: A0250 Reason for Assessment M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm</p>
-3572	Consistency	Fatal	<p>If A1100A=[0,9], then A1100B must equal [^].</p> <p>Items: A1100A Does the patient need or want an interpreter A1100B Preferred language</p>
-3573	Consistency	Fatal	<p>Each active date item in the following list that contains a valid date (not blank or dashes) must be in the specified order: A0900 (birth date) <= A0220 (admission date) <= A0210 (assessment reference date) = A0270 (discharge date) <= Z0500B (date assessment signed as complete) <= current date</p> <p>Items: A0210 Assessment reference date A0220 Admission date A0270 Discharge date A0900 Birth Date Z0500B Date assessment signed as complete</p>

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ID	Type	Severity	Text/Items
-3612	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> <p>Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300A Stage 1 pressure injuries: number present M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm</p>
-3662	Consistency	Fatal	<p>If M0300B1=[1-9], then one of the following must be true: a) M0300B2 must be equal to [-] OR b) M0300B2 must be equal to [0-9] and must be less than or equal to M0300B1.</p> <p>Items: M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit</p>
-3663	Consistency	Fatal	<p>If M0300C1=[1-9], then one of the following must be true: a) M0300C2 must be equal to [-] OR b) M0300C2 must be equal to [0-9] and must be less than or equal to M0300C1.</p> <p>Items: M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit</p>
-3664	Consistency	Fatal	<p>If M0300D1=[1-9], then one of the following must be true: a) M0300D2 must be equal to [-] OR b) M0300D2 must be equal to [0-9] and must be less than or equal to M0300D1.</p> <p>Items: M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit</p>
-3665	Consistency	Fatal	<p>If M0300E1=[1-9], then one of the following must be true: a) M0300E2 must be equal to [-] OR b) M0300E2 must be equal to [0-9] and must be less than or equal to M0300E1.</p> <p>Items: M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm</p>
-3666	Consistency	Fatal	<p>If M0300F1=[1-9], then one of the following must be true: a) M0300F2 must be equal to [-] OR b) M0300F2 must be equal to [0-9] and must be less than or equal to M0300F1.</p> <p>Items: M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit</p>
-3667	Consistency	Fatal	<p>If M0300G1=[1-9], then one of the following must be true: a) M0300G2 must be equal to [-] OR b) M0300G2 must be equal to [0-9] and must be less than or equal to M0300G1.</p> <p>Items: M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm</p>

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Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items																								
-3745	Consistency	Fatal	<p>Unable to Match a Previously Accepted Record</p> <p>In order to modify or inactivate a record that was previously accepted by the QIES ASAP system, the system must be able to locate the previous record. The following locator items submitted on the record to be corrected must therefore also be submitted on the modification or inactivation record to allow for record matching:</p> <p>a) A0270 (discharge date) when A0250 = 10, 11, 12</p> <p>b) A0220 (admission date) when A0250 = 01</p> <p>c) A0250 (reason for assessment)</p> <p>d) A0500A (patient first name)</p> <p>e) A0500C (patient last name)</p> <p>f) A0600A (social security number)</p> <p>g) A0800 (gender)</p> <p>h) A0900 (birth date)</p> <table><tr><td>Items:</td><td>A0220</td><td>Admission date</td></tr><tr><td></td><td>A0250</td><td>Reason for Assessment</td></tr><tr><td></td><td>A0270</td><td>Discharge date</td></tr><tr><td></td><td>A0500A</td><td>Patient first name</td></tr><tr><td></td><td>A0500C</td><td>Patient last name</td></tr><tr><td></td><td>A0600A</td><td>Social Security Number</td></tr><tr><td></td><td>A0800</td><td>Gender</td></tr><tr><td></td><td>A0900</td><td>Birth Date</td></tr></table>	Items:	A0220	Admission date		A0250	Reason for Assessment		A0270	Discharge date		A0500A	Patient first name		A0500C	Patient last name		A0600A	Social Security Number		A0800	Gender		A0900	Birth Date
Items:	A0220	Admission date																									
	A0250	Reason for Assessment																									
	A0270	Discharge date																									
	A0500A	Patient first name																									
	A0500C	Patient last name																									
	A0600A	Social Security Number																									
	A0800	Gender																									
	A0900	Birth Date																									
-3749	Consistency	Warning	<p>Record Completion Timing Rule</p> <p>The following rule describes allowable spans between pairs of dates. The rule applies if both date items in the pair are active and contain valid dates (not dashes or other special values).</p> <p>Z0500B (completion date) - A0210 (assessment reference date) <= 5 days.</p> <table><tr><td>Items:</td><td>A0210</td><td>Assessment reference date</td></tr><tr><td></td><td>Z0500B</td><td>Date assessment signed as complete</td></tr></table>	Items:	A0210	Assessment reference date		Z0500B	Date assessment signed as complete																		
Items:	A0210	Assessment reference date																									
	Z0500B	Date assessment signed as complete																									
-3761	Consistency	Fatal	<p>(a) If any item A1000A through A1000F is equal to [-], then all active items from A1000A through A1000F must equal [-].</p> <table><tr><td>Items:</td><td>A1000A</td><td>Ethnicity: American Indian or Alaska Native</td></tr><tr><td></td><td>A1000B</td><td>Ethnicity: Asian</td></tr><tr><td></td><td>A1000C</td><td>Ethnicity: Black or African American</td></tr><tr><td></td><td>A1000D</td><td>Ethnicity: Hispanic or Latino</td></tr><tr><td></td><td>A1000E</td><td>Ethnicity: Native Hawaiian/Pacific Islander</td></tr><tr><td></td><td>A1000F</td><td>Ethnicity: White</td></tr></table>	Items:	A1000A	Ethnicity: American Indian or Alaska Native		A1000B	Ethnicity: Asian		A1000C	Ethnicity: Black or African American		A1000D	Ethnicity: Hispanic or Latino		A1000E	Ethnicity: Native Hawaiian/Pacific Islander		A1000F	Ethnicity: White						
Items:	A1000A	Ethnicity: American Indian or Alaska Native																									
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	A1000D	Ethnicity: Hispanic or Latino																									
	A1000E	Ethnicity: Native Hawaiian/Pacific Islander																									
	A1000F	Ethnicity: White																									
-3790	Consistency	Fatal	<p>If A0250=[10, 11, 12], then A0270 must not equal [^].</p> <table><tr><td>Items:</td><td>A0250</td><td>Reason for Assessment</td></tr><tr><td></td><td>A0270</td><td>Discharge date</td></tr></table>	Items:	A0250	Reason for Assessment		A0270	Discharge date																		
Items:	A0250	Reason for Assessment																									
	A0270	Discharge date																									
-3810	Consistency	Warning	<p>The record was submitted Late. The submission date is more than 7 days after Z0500B for this new (A0050 equals 1) record.</p> <table><tr><td>Items:</td><td>A0050</td><td>Type of record</td></tr><tr><td></td><td>Z0500B</td><td>Date assessment signed as complete</td></tr></table>	Items:	A0050	Type of record		Z0500B	Date assessment signed as complete																		
Items:	A0050	Type of record																									
	Z0500B	Date assessment signed as complete																									

Data Submission Specifications for the LTCH - CARE Data Set (V3.00.0 - DRAFT)
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ID	Type	Severity	Text/Items
-3852	Format	Fatal	<p>FORMATTING OF ICD-10 DIAGNOSIS CODES</p> <p>ICD-10 diagnosis codes must conform with the following formatting rules:</p> <p>a) Character 1 must be alphabetic [A-Z,a-z].</p> <p>b) Character 2 must be numeric [0-9].</p> <p>c) Character 3 must be numeric [0-9] or alphabetic [A-Z,a-z].</p> <p>d) Character 4 must be a decimal point.</p> <p>e) Characters 5 through 8 must be numeric [0-9], alphabetic [A-Z,a-z], or caret [^].</p> <p>f) If any character 5 through 8 is equal to [^], all subsequent characters must equal [^].</p> <p>Note that an entirely blank ICD code must be submitted as a single caret: [^].</p> <p>Items: I0050A Other medical condition - ICD code</p>
-3863	Consistency	Warning	<p>If A1400K=[1], then A1400A through A1400J and A1400X and A1400Y must = [0]</p> <p>Items: A1400A Payer: Medicare (FFS)</p> <p>A1400B Payer: Medicare (managed care/Part C/Mcr Advant.)</p> <p>A1400C Payer: Medicaid (FFS)</p> <p>A1400D Payer: Medicaid (managed care)</p> <p>A1400E Payer: Workers' compensation</p> <p>A1400F Payer: Title programs</p> <p>A1400G Payer: Other Government</p> <p>A1400H Payer: Private insurance/Medigap</p> <p>A1400I Payer: Private managed care</p> <p>A1400J Payer: Self-pay</p> <p>A1400K Payer: No payer source</p> <p>A1400X Payer: Unknown</p> <p>A1400Y Payer: Other</p>
-3900	Consistency	Warning	<p>A dash (-) submitted in this quality measure item may result in a payment reduction for your facility of two percentage points for the affected payment determination.</p> <p>Items: B0100 Comatose</p> <p>BB0700 Expression of Ideas and Wants (3-day asmt period)</p> <p>BB0800 Understand Verbal/Non-Verbal Content (3-day asmt)</p> <p>C1610A Acute onset</p> <p>C1610B Fluctuating Course</p> <p>C1610C Inattention</p> <p>C1610D Disorganized Thinking</p> <p>C1610E1 Altered Consc Lvl - Alert</p> <p>C1610E2 Altered Consc Lvl - Vigilant/Lethargic/Stupor/Coma</p> <p>GG0130A1 Self-Care (Adm Perf) - Eating</p> <p>GG0130A3 Self-Care (Dschg Perf) - Eating</p> <p>GG0130B1 Self-Care (Adm Perf) - Oral hygiene</p> <p>GG0130B3 Self-Care (Dschg Perf) - Oral hygiene</p> <p>GG0130C1 Self-Care (Adm Perf) - Toileting hygiene</p> <p>GG0130C3 Self-Care (Dschg Perf) - Toileting hygiene</p> <p>GG0130D1 Self-Care (Adm Perf) - Wash upper body</p> <p>GG0130D3 Self-Care (Dschg Perf) - Wash upper body</p> <p>GG0170A1 Func Mobil (Adm Perf) - Roll left and right</p> <p>GG0170A3 Func Mobil (Dschg Perf) - Roll left and right</p> <p>GG0170B1 Func Mobil (Adm Perf) - Sit to lying</p> <p>GG0170B3 Func Mobil (Dschg Perf) - Sit to lying</p> <p>GG0170C1 Func Mobil (Adm Perf) - Lying to sit on side</p> <p>GG0170C3 Func Mobil (Dschg Perf) - Lying to sitting on side</p> <p>GG0170D1 Func Mobil (Adm Perf) - Sit to stand</p> <p>GG0170D3 Func Mobil (Dschg Perf) - Sit to stand</p> <p>GG0170E1 Func Mobil (Adm Perf) - Chair/bed-to-chair trans</p>

Data Submission Specifications for the LTCH - CARE Data Set (V3.00.0 - DRAFT)
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ID	Type	Severity	Text/Items
			Items: GG0170E3 Func Mobil (Dschg Perf) - Chair/bed-to-chair trans GG0170F1 Func Mobil (Adm Perf) - Toilet transfer GG0170F3 Func Mobil (Dschg Perf) - Toilet transfer GG0170I1 Func Mobil (Adm Perf) - Walk 10 feet GG0170I3 Func Mobil (Dschg Perf) - Walk 10 feet GG0170J1 Func Mobil (Adm Perf) - Walk 50 feet w/2 turns GG0170J3 Func Mobil (Dschg Perf) - Walk 50 feet w/2 turns GG0170K1 Func Mobil (Adm Perf) - Walk 150 feet GG0170K3 Func Mobil (Dschg Perf) - Walk 150 feet GG0170Q1 Does the patient use a wheelchair and/or scooter GG0170Q3 Does the patient use a wheelchair and/or scooter GG0170R1 Func Mobil (Adm Perf) - Wheel 50 feet w/2 turns GG0170R3 Func Mobil (Dschg Perf) - Wheel 50 feet w/2 turns GG0170RR1 Indicate the type of wheelchair or scooter used GG0170RR3 Indicate the type of wheelchair or scooter used GG0170S1 Func Mobil (Adm Perf) - Wheel 150 feet GG0170S3 Func Mobil (Dschg Perf) - Wheel 150 feet GG0170SS1 Indicate the type of wheelchair or scooter used GG0170SS3 Indicate the type of wheelchair or scooter used. H0350 Bladder continence I5101 Complete Tetraplegia I5200 Multiple Sclerosis (MS) I5250 Huntington's Disease I5300 Parkinson's Disease I5450 Amyotrophic Lateral Sclerosis I5460 Locked-In State I5470 Severe Anoxic Brain Damage, Cerebral Edema J1900C Num Falls Since Admission - Major injury M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm N2001 Drug Regimen Review N2003 Medication Follow-up N2005 Medication Intervention O0150A SBT: Invasive Mechanical Ventilation Support O0150B SBT: Assessed for readiness by day 2 O0150C SBT: Deemed medically ready by day 2 O0150D SBT: Documentation of reason(s) - patient unready O0150E SBT: Performed by day 2 O0200A Invasive Mechanical Ventilator - Liberation Status O0250A Was influenza vaccine received O0250C If influenza vaccine not received, state reason

-3910 Consistency Fatal

THIS EDIT WAS DELETED IN V3.00.0

Items: M0300B1 Stage 2 pressure ulcers: number present

Data Submission Specifications for the LTCH - CARE Data Set (V3.00.0 - DRAFT)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-3911	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> <p>Items: M0300C1 Stage 3 pressure ulcers: number present</p>
-3912	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> <p>Items: M0300D1 Stage 4 pressure ulcers: number present</p>
-3922	Consistency	Fatal	<p>a) If O0250A=[1], then O0250B must not equal [^]. b) If O0250A=[0], then O0250B must equal [^]. c) If O0250A=[-], then O0250B must equal [-].</p> <p>Items: O0250A Was influenza vaccine received O0250B Date influenza vaccine received</p>
-3923	Consistency	Fatal	<p>a) If O0250A=[0], then O0250C must not equal [^]. b) If O0250A=[1], then O0250C must equal [^]. c) If O0250A=[-], then O0250C must equal [-]</p> <p>Items: O0250A Was influenza vaccine received O0250C If influenza vaccine not received, state reason</p>
-3924	Format	Fatal	<p>The CMS Certification Number (CCN) must be exactly 6 characters in length.</p> <p>Items: A0100B Facility CMS Certification Number (CCN)</p>
-3928	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> <p>Items: A0220 Admission date A0270 Discharge date</p>
-3929	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> <p>Items: M0300E1 Unstageable due to dressing/device: number present</p>
-3930	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> <p>Items: M0300F1 Unstageable slough/eschar: number present</p>
-3931	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> <p>Items: M0300G1 Unstageable as deep tissue: num present</p>
-3932	Consistency	Fatal	<p>a) If C1610E1=[1], then C1610E2 must equal [0]. b) If B0100=[0], then C1610E1 and C1610E2 cannot BOTH be equal to [-].</p> <p>Items: B0100 Comatose C1610E1 Altered Consc Lvl - Alert C1610E2 Altered Consc Lvl - Vigilant/Lethargic/Stupor/Coma</p>
-3933	Consistency	Warning	<p>Self-Care and Mobility Discharge Goals: At least one of the Discharge Goal items (GG0130A2, GG0130B2, GG0130C2, GG0130D2, GG0170A2, GG0170B2, GG0170C2, GG0170D2, GG0170E2, GG0170F2, GG0170I2, GG0170J2, GG0170K2, GG0170R2, GG0170S2) should be equal to [01,02,03,04,05,06]. Entering the dash [-] as the response to all of the Discharge Goal items may result in a payment reduction for your facility of two percentage points for the affected payment determination.</p> <p>Items: GG0130A2 Self-Care (Dschg Goal) - Eating GG0130B2 Self-Care (Dschg Goal) - Oral hygiene GG0130C2 Self-Care (Dschg Goal) - Toileting hygiene</p>

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ID	Type	Severity	Text/Items
			Items: GG0130D2 Self-Care (Dschg Goal) - Wash upper body GG0170A2 Func Mobil (Dschg Goal) - Roll left and right GG0170B2 Func Mobil (Dschg Goal) - Sit to lying GG0170C2 Func Mobil (Dschg Goal) - Lying to sitting on side GG0170D2 Func Mobil (Dschg Goal) - Sit to stand GG0170E2 Func Mobil (Dschg Goal) - Chair/bed-to-chair trans GG0170F2 Func Mobil (Dschg Goal) - Toilet transfer GG0170I2 Func Mobil (Dschg Goal) - Walk 10 feet GG0170J2 Func Mobil (Dschg Goal) - Walk 50 feet w/2 turns GG0170K2 Func Mobil (Dschg Goal) - Walk 150 feet GG0170R2 Func Mobil (Dschg Goal) - Wheel 50 feet w/2 turns GG0170S2 Func Mobil (Dschg Goal) - Wheel 150 feet
-3934	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> Items: GG0170I1 Func Mobil (Adm Perf) - Walk 10 feet GG0170I2 Func Mobil (Dschg Goal) - Walk 10 feet GG0170J1 Func Mobil (Adm Perf) - Walk 50 feet w/2 turns GG0170J2 Func Mobil (Dschg Goal) - Walk 50 feet w/2 turns GG0170K1 Func Mobil (Adm Perf) - Walk 150 feet GG0170K2 Func Mobil (Dschg Goal) - Walk 150 feet
-3935	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V3.00.0***</p> Items: GG0170I3 Func Mobil (Dschg Perf) - Walk 10 feet GG0170J3 Func Mobil (Dschg Perf) - Walk 50 feet w/2 turns GG0170K3 Func Mobil (Dschg Perf) - Walk 150 feet
-3936	Consistency	Fatal	<p>If GG0170Q1=[-], then all active items from GG0170R1 through GG0170SS1 must be equal to [-].</p> Items: GG0170Q1 Does the patient use a wheelchair and/or scooter GG0170R1 Func Mobil (Adm Perf) - Wheel 50 feet w/2 turns GG0170RR1 Indicate the type of wheelchair or scooter used GG0170S1 Func Mobil (Adm Perf) - Wheel 150 feet GG0170SS1 Indicate the type of wheelchair or scooter used
-3937	Consistency	Fatal	<p>a) If GG0170Q3=[0], then all active items from GG0170R3 through GG0170SS3 must be equal to [^]. b) If GG0170Q3=[1], then all active items from GG0170R3 through GG0170SS3 must not be equal to [^]. c) If GG0170Q3=[-], then all active items from GG0170R3 through GG0170SS3 must be equal to [-].</p> Items: GG0170Q3 Does the patient use a wheelchair and/or scooter GG0170R3 Func Mobil (Dschg Perf) - Wheel 50 feet w/2 turns GG0170RR3 Indicate the type of wheelchair or scooter used GG0170S3 Func Mobil (Dschg Perf) - Wheel 150 feet GG0170SS3 Indicate the type of wheelchair or scooter used.
-3938	Consistency	Fatal	<p>If A0250=[11], then all active items from C1610A through C1610E2 must not be equal to [^].</p> Items: A0250 Reason for Assessment C1610A Acute onset C1610B Fluctuating Course C1610C Inattention C1610D Disorganized Thinking C1610E1 Altered Consc Lvl - Alert C1610E2 Altered Consc Lvl - Vigilant/Lethargic/Stupor/Coma

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-3940	Consistency	Fatal	<p>a) If GG0170I1=[07,09,10,88], then all active items from GG0170I2 through GG0170K2 must be equal to [^].</p> <p>b) If GG0170I1=[01,02,03,04,05,06], then all active items from GG0170I2 through GG0170K2 must not be equal to [^].</p> <p>c) If GG0170I1=[-], then all active items from GG0170I2 through GG0170K2 must be equal to [-].</p> <table><tr><td>Items:</td><td>GG0170I1</td><td>Func Mobil (Adm Perf) - Walk 10 feet</td></tr><tr><td></td><td>GG0170I2</td><td>Func Mobil (Dschg Goal) - Walk 10 feet</td></tr><tr><td></td><td>GG0170J1</td><td>Func Mobil (Adm Perf) - Walk 50 feet w/2 turns</td></tr><tr><td></td><td>GG0170J2</td><td>Func Mobil (Dschg Goal) - Walk 50 feet w/2 turns</td></tr><tr><td></td><td>GG0170K1</td><td>Func Mobil (Adm Perf) - Walk 150 feet</td></tr><tr><td></td><td>GG0170K2</td><td>Func Mobil (Dschg Goal) - Walk 150 feet</td></tr></table>	Items:	GG0170I1	Func Mobil (Adm Perf) - Walk 10 feet		GG0170I2	Func Mobil (Dschg Goal) - Walk 10 feet		GG0170J1	Func Mobil (Adm Perf) - Walk 50 feet w/2 turns		GG0170J2	Func Mobil (Dschg Goal) - Walk 50 feet w/2 turns		GG0170K1	Func Mobil (Adm Perf) - Walk 150 feet		GG0170K2	Func Mobil (Dschg Goal) - Walk 150 feet																																																																								
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-3941	Consistency	Fatal	<p>a) If GG0170I3=[07,09,10,88], then all active items from GG0170J3 through GG0170K3 must be equal to [^].</p> <p>b) If GG0170I3=[01,02,03,04,05,06], then all active items from GG0170J3 through GG0170K3 must not be equal to [^].</p> <p>c) If GG0170I3=[-], then all active items from GG0170J3 through GG0170K3 must be equal to [-].</p> <table><tr><td>Items:</td><td>GG0170I3</td><td>Func Mobil (Dschg Perf) - Walk 10 feet</td></tr><tr><td></td><td>GG0170J3</td><td>Func Mobil (Dschg Perf) - Walk 50 feet w/2 turns</td></tr><tr><td></td><td>GG0170K3</td><td>Func Mobil (Dschg Perf) - Walk 150 feet</td></tr></table>	Items:	GG0170I3	Func Mobil (Dschg Perf) - Walk 10 feet		GG0170J3	Func Mobil (Dschg Perf) - Walk 50 feet w/2 turns		GG0170K3	Func Mobil (Dschg Perf) - Walk 150 feet																																																																																	
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	GG0170J3	Func Mobil (Dschg Perf) - Walk 50 feet w/2 turns																																																																																											
	GG0170K3	Func Mobil (Dschg Perf) - Walk 150 feet																																																																																											
-3942	Consistency	Fatal	<p>a) If I7900=[1], then all active items from I0103 through I7104 must be equal to [0].</p> <p>b) If I7900=[0], then at least one active item from I0103 through I7104 must not be equal to [0].</p> <p>c) If I7900=[-], then all active items from I0103 through I7104 must be equal to [0,-].</p> <table><tr><td>Items:</td><td>I0103</td><td>Metastatic Cancer</td></tr><tr><td></td><td>I0104</td><td>Severe Cancer</td></tr><tr><td></td><td>I0605</td><td>Severe Left Systolic/Ventricular Dysfunction</td></tr><tr><td></td><td>I0900</td><td>Peripheral vascular disease (PVD) or PAD</td></tr><tr><td></td><td>I1501</td><td>Chronic Kidney Disease, Stage 5</td></tr><tr><td></td><td>I1502</td><td>Acute Renal Failure</td></tr><tr><td></td><td>I2101</td><td>Septicemia, Sepsis, Systemic Inflammatory Response</td></tr><tr><td></td><td>I2600</td><td>CNS Infect, Oppor Infect, Bone/Joint/Muscle Infect</td></tr><tr><td></td><td>I2900</td><td>Diabetes mellitus (DM)</td></tr><tr><td></td><td>I4100</td><td>Major Lower Limb Amputation</td></tr><tr><td></td><td>I4501</td><td>Stroke</td></tr><tr><td></td><td>I4801</td><td>Dementia</td></tr><tr><td></td><td>I4900</td><td>Hemiplegia or Hemiparesis</td></tr><tr><td></td><td>I5000</td><td>Paraplegia</td></tr><tr><td></td><td>I5101</td><td>Complete Tetraplegia</td></tr><tr><td></td><td>I5102</td><td>Incomplete Tetraplegia</td></tr><tr><td></td><td>I5110</td><td>Other Spinal Cord Disorder/Injury</td></tr><tr><td></td><td>I5200</td><td>Multiple Sclerosis (MS)</td></tr><tr><td></td><td>I5250</td><td>Huntington's Disease</td></tr><tr><td></td><td>I5300</td><td>Parkinson's Disease</td></tr><tr><td></td><td>I5450</td><td>Amyotrophic Lateral Sclerosis</td></tr><tr><td></td><td>I5455</td><td>Other Progressive Neuromuscular Disease</td></tr><tr><td></td><td>I5460</td><td>Locked-In State</td></tr><tr><td></td><td>I5470</td><td>Severe Anoxic Brain Damage, Cerebral Edema</td></tr><tr><td></td><td>I5480</td><td>Other Severe Neurological Injury-Disease-Dysfunc</td></tr><tr><td></td><td>I5601</td><td>Malnutrition</td></tr><tr><td></td><td>I5602</td><td>At Risk for Malnutrition</td></tr><tr><td></td><td>I7100</td><td>Lung Transplant</td></tr><tr><td></td><td>I7101</td><td>Heart Transplant</td></tr><tr><td></td><td>I7102</td><td>Liver Transplant</td></tr></table>	Items:	I0103	Metastatic Cancer		I0104	Severe Cancer		I0605	Severe Left Systolic/Ventricular Dysfunction		I0900	Peripheral vascular disease (PVD) or PAD		I1501	Chronic Kidney Disease, Stage 5		I1502	Acute Renal Failure		I2101	Septicemia, Sepsis, Systemic Inflammatory Response		I2600	CNS Infect, Oppor Infect, Bone/Joint/Muscle Infect		I2900	Diabetes mellitus (DM)		I4100	Major Lower Limb Amputation		I4501	Stroke		I4801	Dementia		I4900	Hemiplegia or Hemiparesis		I5000	Paraplegia		I5101	Complete Tetraplegia		I5102	Incomplete Tetraplegia		I5110	Other Spinal Cord Disorder/Injury		I5200	Multiple Sclerosis (MS)		I5250	Huntington's Disease		I5300	Parkinson's Disease		I5450	Amyotrophic Lateral Sclerosis		I5455	Other Progressive Neuromuscular Disease		I5460	Locked-In State		I5470	Severe Anoxic Brain Damage, Cerebral Edema		I5480	Other Severe Neurological Injury-Disease-Dysfunc		I5601	Malnutrition		I5602	At Risk for Malnutrition		I7100	Lung Transplant		I7101	Heart Transplant		I7102	Liver Transplant
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Data Submission Specifications for the LTCH - CARE Data Set (V3.00.0 - DRAFT)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
			Items: I7103 Kidney Transplant I7104 Bone Marrow Transplant I7900 None of the Above
-3943	Consistency	Fatal	<p>If M0210=[0], then all active items from M0300A through M0300G2 must equal [^].</p> Items: M0210 Patient has 1+ unhealed pressure ulcers/injuries M0300A Stage 1 pressure injuries: number present M0300B1 Stage 2 pressure ulcers: number present M0300B2 Stage 2 pressure ulcers: number at admit M0300C1 Stage 3 pressure ulcers: number present M0300C2 Stage 3 pressure ulcers: number at admit M0300D1 Stage 4 pressure ulcers: number present M0300D2 Stage 4 pressure ulcers: number at admit M0300E1 Unstageable due to dressing/device: number present M0300E2 Unstageable due to dressing/device: number at adm M0300F1 Unstageable slough/eschar: number present M0300F2 Unstageable slough/eschar: number at admit M0300G1 Unstageable as deep tissue: num present M0300G2 Unstageable as deep tissue: num at adm
-3944	Consistency	Fatal	<p>a) If N2001=[0,9], then N2003 must be equal to [^]. b) If N2001=[1], then N2003 must not be equal to [^].</p> Items: N2001 Drug Regimen Review N2003 Medication Follow-up
-3945	Consistency	Fatal	<p>a) If O0100Z=[1], then items O0100G, O0100H, O0100J and O0100N must be equal to [0]. b) If O0100Z=[0], then at least one of items O0100G, O0100H, O0100J and O0100N must not be equal to [0]. c) If O0100Z=[-], then items O0100G, O0100H, O0100J and O0100N must be equal to [0,-].</p> Items: O0100G Non-invasive ventilator (BIPAP, CPAP) O0100H IV Medications O0100J Dialysis O0100N Total Parenteral Nutrition O0100Z None of the above
-3946	Consistency	Fatal	<p>a) If O0100H=[0,^], then O0100H2A must be equal to [^]. b) If O0100H=[1], then O0100H2A must not be equal to [^]. c) If O0100H=[-], then O0100H2A must be equal to [-].</p> Items: O0100H IV Medications O0100H2A Vasoactive medications
-3947	Consistency	Fatal	<p>(a) If O0150A=[0,2], then all active items from O0150B through O0150E must equal [^]. (b) If O0150A=[1], then O0150B must not equal [^]. (c) If O0150A=[-], then all active items from O0150B through O0150E must equal [-].</p> Items: O0150A SBT: Invasive Mechanical Ventilation Support O0150B SBT: Assessed for readiness by day 2 O0150C SBT: Deemed medically ready by day 2 O0150D SBT: Documentation of reason(s) - patient unready O0150E SBT: Performed by day 2
-3948	Consistency	Fatal	<p>(a) If O0150B=[0], then all active items from O0150C through O0150E must equal [^]. (b) If O0150B=[1], then O0150C must not equal [^]. (c) If O0150B=[-], then all active items from O0150C through O0150E must equal [-].</p>

Data Submission Specifications for the LTCH - CARE Data Set (V3.00.0 - DRAFT)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
			Items: O0150B SBT: Assessed for readiness by day 2 O0150C SBT: Deemed medically ready by day 2 O0150D SBT: Documentation of reason(s) - patient unready O0150E SBT: Performed by day 2
-3949	Consistency	Fatal	(a) If O0150C=[0], then O0150D must not equal [^]. (b) If O0150C=[1], then O0150D must equal [^]. (c) If O0150C=[-], then O0150D must equal [-]. Items: O0150C SBT: Deemed medically ready by day 2 O0150D SBT: Documentation of reason(s) - patient unready
-3950	Consistency	Fatal	(a) If O0150D=[0,1], then O0150E must equal [^]. (b) If O0150D=[-], then O0150E must equal [-]. Items: O0150D SBT: Documentation of reason(s) - patient unready O0150E SBT: Performed by day 2
-9001	Information	None	The target date is defined as follows: a) If A0250=[01], then the target date is equal to A0220 (admission date) b) If A0250=[10,11,12], then the target date is equal to A0270 (discharge date) Items: TARGET_DATE Target date
-9002	Information	None	The Item Subset Code (ISC) is a two-character code that indicates the type of record that is being submitted. The set of active items is controlled by the ISC. The ISC is defined as follows: If A0050 = [1,2] and A0250 = [01] then ITM_SBST_CD = [LA] If A0050 = [1,2] and A0250 = [10] then ITM_SBST_CD = [LP] If A0050 = [1,2] and A0250 = [11] then ITM_SBST_CD = [LU] If A0050 = [1,2] and A0250 = [12] then ITM_SBST_CD = [LE] If A0050 = [3] and A0250 = [01,10,11,12] then ITM_SBST_CD = [XX] For a more complete explanation of the meaning and use of the ISC codes, please refer to the documentation that accompanies these data specifications. Items: ITM_SBST_CD Item subset code A0050 Type of record A0250 Reason for Assessment