

## Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)

### Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-1000	Format	Fatal	If the value is not equal to [^], it must be 9 characters long. <b>Items:</b> A0600A Social Security Number
-1001	Format	Fatal	If the value is not equal to [^], the first three characters must not be equal to [000]. <b>Items:</b> A0600A Social Security Number
-1002	Format	Fatal	The value must not be equal to any of the following: [111111111, 333333333, 123456789, 999999999]. <b>Items:</b> A0600A Social Security Number
-1003	Format	Fatal	If A0100A is not equal to [^], then it must be 10 digits long. <b>Items:</b> A0100A Facility National Provider Identifier (NPI)
-1004	Format	Fatal	If the first character is numeric [0 through 9], then the first 9 characters must be digits [0 through 9]. <b>Items:</b> A0600B Medicare/railroad insurance number
-1005	Format	Fatal	If the first character is alphabetic, then there must be 1, 2, or 3 alphabetic characters followed by 6 or 9 numbers. <b>Items:</b> A0600B Medicare/railroad insurance number
-1006	Format	Fatal	If the ICD-9 item is active, it must be submitted as an 8 character, fixed-format string with all blanks replaced with ^, and with a decimal point as the 6th character. NOTE: If a blank is allowed in the "Item Values" table of the Detailed Data Specifications Report then the ICD-9 item must be submitted as a single ^.

For example:

- The ICD-9 code "123.4" would be submitted as [^^123.4^].
- The ICD-9 code "123." would be submitted as [^^123.^^].
- The ICD-9 code "E123.4" would be submitted as [^E123.4^].
- The ICD-9 code "V12.3" would be submitted as [^^V12.3^]
- An entirely blank ICD-9 code would be submitted as [^].

Other formatting rules are as follows:

- a) Character 1 must be [^].
- b) Character 2 must be [E,^].
- c) If character 2 is [^], then character 3 can be [V,0-9]. If character 2 is [E], then character 3 must be [0-9].
- d) Characters 4 through 5 must be [0-9].
- e) Character 6 must be a decimal point.
- f) Characters 7 and 8 must be [0-9,^].
- g) If character 7 is a [^], then character 8 must be a [^].

Note that ICD-10 codes are formatted differently from ICD-9 codes and are not accepted at this time.

**Items:** A1820 Previous medical setting primary diagnosis

## Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)

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ID	Type	Severity	Text/Items
-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><b>Items:</b>   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><b>Items:</b>   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><b>Items:</b>   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                    A1050           Highest education completed                    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                    A1400G          Payer: Other Government                    A1400H          Payer: Private insurance/Medigap                    A1400I          Payer: Private managed care                    A1400J          Payer: Self-pay                    A1400K          Payer: No payor source</p>

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			<b>Items:</b> A1400X Payer: Unknown A1400Y Payer: Other A1800 Admitted from A1810A Last 2 mo: Short-stay acute hospital (IPPS) A1810B Last 2 mo: Community residential setting A1810C Last 2 mo: Long-term care facility (LTC) A1810D Last 2 mo: Skilled nursing facility (SNF) A1810E Last 2 mo: Hospital emergency department A1810F Last 2 mo: Long-term care hospital (LTCH) A1810G Last 2 mo: Inpatient rehabilitation fac/unit(IRF) A1810H Last 2 mo: Home health agency (HHA) A1810I Last 2 mo: Hospice A1810J Last 2 mo: Outpatient services A1810K Last 2 mo: Psychiatric hospital or unit A1810L Last 2 mo: ID/DD facility A1810Z Last 2 mo: None of the above A1955 Discharge delay A1960 Reason for discharge delay A1970 Discharge return status A2100 Discharge location B0100 Comatose GG0160A Functional Mobil: Roll left and right GG0160B Functional Mobil: Sit to lying GG0160C Functional Mobil: Lying to sitting on side of bed H0400 Bowel continence I0900 Peripheral vascular disease (PVD) or PAD I2900 Diabetes mellitus (DM) I5600 Malnutrition (protein, calorie), risk of malnutrit M0210 Patient has Stage 1 or higher pressure ulcers M0700 Most severe tissue type for any pressure ulcer
-1010	Format	Fatal	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".  <b>Items:</b> A0210 Assessment reference date A0220 Admission date A0270 Discharge date M0300B3 Stage 2 pressure ulcers: date of oldest Z0500B Date assessment signed as complete

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-1011	Format	Fatal	<p>This item must contain a valid date in YYYYMMDD, YYYYMM, or YYYY format.</p> <p>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".</p> <p>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".</p> <p>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>																																												
-1012	Format	Fatal	<p><b>Items:</b>   A0900                      Birth Date</p> <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> <p><b>Items:</b></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 ulcers: 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 dressing: number present</td></tr><tr><td>M0300E2</td><td>Unstageable dressing: number at admit</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 deep tissue: number present</td></tr><tr><td>M0300G2</td><td>Unstageable deep tissue: number at admit</td></tr><tr><td>M0610A</td><td>Stage 3 or 4 pressure ulcer length</td></tr><tr><td>M0610B</td><td>Stage 3 or 4 pressure ulcer width</td></tr><tr><td>M0610C</td><td>Stage 3 or 4 pressure ulcer depth</td></tr><tr><td>M0800A</td><td>Worsened since prior asmt: Stage 2 pressure ulcers</td></tr><tr><td>M0800B</td><td>Worsened since prior asmt: Stage 3 pressure ulcers</td></tr><tr><td>M0800C</td><td>Worsened since prior asmt: Stage 4 pressure ulcers</td></tr></table>	A0055	Correction number	K0200A	Height (in inches)	K0200B	Weight (in pounds)	M0300A	Stage 1 pressure ulcers: 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 dressing: number present	M0300E2	Unstageable dressing: number at admit	M0300F1	Unstageable slough/eschar: number present	M0300F2	Unstageable slough/eschar: number at admit	M0300G1	Unstageable deep tissue: number present	M0300G2	Unstageable deep tissue: number at admit	M0610A	Stage 3 or 4 pressure ulcer length	M0610B	Stage 3 or 4 pressure ulcer width	M0610C	Stage 3 or 4 pressure ulcer depth	M0800A	Worsened since prior asmt: Stage 2 pressure ulcers	M0800B	Worsened since prior asmt: Stage 3 pressure ulcers	M0800C	Worsened since prior asmt: Stage 4 pressure ulcers
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-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.</p> <p>The following examples are allowable if the value to be submitted is equal to [1] and the maximum length is equal to 2: [1], [01]. The following values are NOT allowed and will lead to a fatal error: [1.], [1.0], [01.], [01.0], [1.1], [01.1], [1.01].</p> <table><tr><td><b>Items:</b></td><td>A0055</td><td>Correction number</td></tr><tr><td></td><td>K0200A</td><td>Height (in inches)</td></tr><tr><td></td><td>K0200B</td><td>Weight (in pounds)</td></tr><tr><td></td><td>M0300A</td><td>Stage 1 pressure ulcers: number present</td></tr><tr><td></td><td>M0300B1</td><td>Stage 2 pressure ulcers: number present</td></tr><tr><td></td><td>M0300B2</td><td>Stage 2 pressure ulcers: number at admit</td></tr><tr><td></td><td>M0300C1</td><td>Stage 3 pressure ulcers: number present</td></tr><tr><td></td><td>M0300C2</td><td>Stage 3 pressure ulcers: number at admit</td></tr><tr><td></td><td>M0300D1</td><td>Stage 4 pressure ulcers: number present</td></tr><tr><td></td><td>M0300D2</td><td>Stage 4 pressure ulcers: number at admit</td></tr><tr><td></td><td>M0300E1</td><td>Unstageable dressing: number present</td></tr><tr><td></td><td>M0300E2</td><td>Unstageable dressing: number at admit</td></tr><tr><td></td><td>M0300F1</td><td>Unstageable slough/eschar: number present</td></tr><tr><td></td><td>M0300F2</td><td>Unstageable slough/eschar: number at admit</td></tr><tr><td></td><td>M0300G1</td><td>Unstageable deep tissue: number present</td></tr><tr><td></td><td>M0300G2</td><td>Unstageable deep tissue: number at admit</td></tr><tr><td></td><td>M0800A</td><td>Worsened since prior asmt: Stage 2 pressure ulcers</td></tr><tr><td></td><td>M0800B</td><td>Worsened since prior asmt: Stage 3 pressure ulcers</td></tr><tr><td></td><td>M0800C</td><td>Worsened since prior asmt: Stage 4 pressure ulcers</td></tr></table>	<b>Items:</b>	A0055	Correction number		K0200A	Height (in inches)		K0200B	Weight (in pounds)		M0300A	Stage 1 pressure ulcers: 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 dressing: number present		M0300E2	Unstageable dressing: number at admit		M0300F1	Unstageable slough/eschar: number present		M0300F2	Unstageable slough/eschar: number at admit		M0300G1	Unstageable deep tissue: number present		M0300G2	Unstageable deep tissue: number at admit		M0800A	Worsened since prior asmt: Stage 2 pressure ulcers		M0800B	Worsened since prior asmt: Stage 3 pressure ulcers		M0800C	Worsened since prior asmt: Stage 4 pressure ulcers
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-1014	Consistency	Fatal	<p>If the SFTWR_VNDR_ID=[^], then SFTWR_VNDR_NAME and SFTWR_VNDR_EMAIL_ADR must equal [^].</p> <table><tr><td><b>Items:</b></td><td>SFTWR_VNDR_ID</td><td>Software vendor federal employer tax ID</td></tr><tr><td></td><td>SFTWR_VNDR_NA</td><td>Software vendor company name</td></tr><tr><td></td><td>ME</td><td></td></tr><tr><td></td><td>SFTWR_VNDR_EM</td><td>Software vendor email address</td></tr><tr><td></td><td>AIL_ADR</td><td></td></tr></table>	<b>Items:</b>	SFTWR_VNDR_ID	Software vendor federal employer tax ID		SFTWR_VNDR_NA	Software vendor company name		ME			SFTWR_VNDR_EM	Software vendor email address		AIL_ADR																																											
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-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> <table><tr><td><b>Items:</b></td><td>SFTWR_VNDR_ID</td><td>Software vendor federal employer tax ID</td></tr><tr><td></td><td>SFTWR_VNDR_NA</td><td>Software vendor company name</td></tr><tr><td></td><td>ME</td><td></td></tr><tr><td></td><td>SFTWR_VNDR_EM</td><td>Software vendor email address</td></tr><tr><td></td><td>AIL_ADR</td><td></td></tr></table>	<b>Items:</b>	SFTWR_VNDR_ID	Software vendor federal employer tax ID		SFTWR_VNDR_NA	Software vendor company name		ME			SFTWR_VNDR_EM	Software vendor email address		AIL_ADR																																											
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### Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items														
-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> <p><b>Items:</b></p> <table><tr><td>SFTWR_VNDR_ID</td><td>Software vendor federal employer tax ID</td></tr><tr><td>A0100A</td><td>Facility National Provider Identifier (NPI)</td></tr><tr><td>A0600A</td><td>Social Security Number</td></tr></table>	SFTWR_VNDR_ID	Software vendor federal employer tax ID	A0100A	Facility National Provider Identifier (NPI)	A0600A	Social Security Number								
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A0100A	Facility National Provider Identifier (NPI)																
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-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> <p><b>Items:</b></p> <table><tr><td>A0100C</td><td>State provider number</td></tr><tr><td>A0600B</td><td>Medicare/railroad insurance number</td></tr><tr><td>A0700</td><td>Medicaid number</td></tr></table>	A0100C	State provider number	A0600B	Medicare/railroad insurance number	A0700	Medicaid number								
A0100C	State provider number																
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-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> <p><b>Items:</b></p> <table><tr><td>SFTWR_PROD_VRS</td><td>Software product version code</td></tr><tr><td>N_CD</td><td></td></tr><tr><td>A0500A</td><td>Patient first name</td></tr><tr><td>A0500C</td><td>Patient last name</td></tr><tr><td>A0500D</td><td>Patient name suffix</td></tr><tr><td>A1100B</td><td>Preferred language</td></tr><tr><td>A1300D</td><td>Lifetime occupation(s)</td></tr></table>	SFTWR_PROD_VRS	Software product version code	N_CD		A0500A	Patient first name	A0500C	Patient last name	A0500D	Patient name suffix	A1100B	Preferred language	A1300D	Lifetime occupation(s)
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ID	Type	Severity	Text/Items
-1019	Format	Fatal	<p>Formatting of Alphanumeric Text Items That Can Contain Special Characters:            If this item is not equal to one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <ul style="list-style-type: none"> <li>a) The numeric characters: [0] through [9].</li> <li>b) The letters [A] through [Z] and [a] through [z].</li> <li>c) The following special characters:               <ul style="list-style-type: none"> <li>[@] (at sign)</li> <li>['] (single quote)</li> <li>[/] (forward slash)</li> <li>[+] (plus sign)</li> <li>[,] (comma)</li> <li>[.] (period)</li> <li>[_] (underscore)</li> </ul> </li> </ul> <p><b>Items:</b> A0500B Patient middle initial</p>
-1020	Format	Fatal	<p>Formatting of email address.            Any valid email address is accepted. The text string may contain any printable characters except single-quotes or double-quotes.</p> <p><b>Items:</b> SFTWR_VNDR_EM Software vendor email address            AIL_ADR</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><b>Items:</b> FAC_ID Assigned facility/provider submission ID</p>
-1022	Consistency	Warning	<p>A0100B does not match the CMS Certification Number (CCN) in the QIES ASAP System database for the provider identified by the FAC ID in the file.</p> <p><b>Items:</b> A0100B Facility CMS Certification Number (CCN)</p>
-1025	Consistency	Fatal	<p>The value submitted in A0055 is incorrect. 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><b>Items:</b> A0055 Correction number</p>
-1026	Consistency	Fatal	<p>If A0050=[1], then A0055 must equal [0].</p> <p><b>Items:</b> A0050 Type of record            A0055 Correction number</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><b>Items:</b> SFTWR_VNDR_ID Software vendor federal employer tax ID            SFTWR_VNDR_NA Software vendor company name            ME            SFTWR_VNDR_EM Software vendor email address            AIL_ADR            SFTWR_PROD_NA Software product name            ME            SFTWR_PROD_VRS Software product version code            N_CD</p>

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			<b>Items:</b> A0100A Facility National Provider Identifier (NPI) A0100B Facility CMS Certification Number (CCN) A0100C State 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 A1300D Lifetime occupation(s)
-1028	Consistency	Fatal	<p>If SFTWR_PROD_NAME=[^], then SFTWR_PROD_VRSN_CD must be equal to [^].</p> <b>Items:</b> SFTWR_PROD_NA Software product name ME SFTWR_PROD_VRSN_CD Software product version code
-1029	Consistency	Fatal	<p>If SFTWR_PROD_NAME is not equal to [^], then SFTWR_PROD_VRSN_CD must not be equal to [^].</p> <b>Items:</b> SFTWR_PROD_NA Software product name ME SFTWR_PROD_VRSN_CD Software product version code
-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>[&amp;] (ampersand)  [@] (at sign)  ['] (single quote)  [/] (forward slash)  [+] (plus sign)  [,] (comma)  [.] (period)  [_] (underscore)</p> <p>e) Embedded spaces (spaces surrounded by any of the characters listed above). For example, [LEGAL TEXT] is allowed.</p> <b>Items:</b> SFTWR_VNDR_NA Software vendor company name ME SFTWR_PROD_NA Software product name ME

## Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)

### Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-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><b>Items:</b> ITM_SET_VRSN_C    Item set version code  SPEC_VRSN_CD    Specifications version code</p>
-1032	Format	Fatal	<p>Formatting of Numeric Items with Tenths Decimal Values:</p> <p>Only integer values, values with tenths decimals, 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 and trailing 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 tenth value may be included; however the fractional portion beyond the tenths decimal place is not allowed.</p> <p>The following examples are allowable if the value to be submitted is equal to [1.2] and the maximum length is equal to 4: [1.2], [01.2]. The following values are NOT allowed and lead to a fatal error: [1.21], [1.20].</p> <p>The following examples are allowable if the value to be submitted is an integer equal to [1] and the maximum length is equal to 4: [1], [01], [1.], [01.], [1.0], [01.0]. The following values are NOT allowed and lead to a fatal error: [1.00], [01.00].</p> <p><b>Items:</b> M0610A    Stage 3 or 4 pressure ulcer length  M0610B    Stage 3 or 4 pressure ulcer width  M0610C    Stage 3 or 4 pressure ulcer depth</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><b>Items:</b> FAC_ID    Assigned facility/provider submission ID</p>
-1034	Consistency	Fatal	<p>The ISC calculated by the QIES ASAP system does not match the value submitted in ITM_SBST_CD.</p> <p><b>Items:</b> ITM_SBST_CD    Item subset code  A0200    Type of provider  A0250    Reason for Assessment</p>
-1035	Consistency	Fatal	<p>***THIS EDIT WAS DELETED IN V1.00.3 OF THE DATA SPECS.</p> <p><b>Items:</b> A0250    Reason for Assessment  A2100    Discharge location</p>
-3010	Consistency	Fatal	<p>If M0300B1=[0,^], then items from M0300B2 through M0300B3 must equal [^].</p> <p><b>Items:</b> M0300B1    Stage 2 pressure ulcers: number present  M0300B2    Stage 2 pressure ulcers: number at admit  M0300B3    Stage 2 pressure ulcers: date of oldest</p>
-3011	Consistency	Fatal	<p>If M0300B1=[-], then items from M0300B2 through M0300B3 must equal [-].</p> <p><b>Items:</b> M0300B1    Stage 2 pressure ulcers: number present  M0300B2    Stage 2 pressure ulcers: number at admit  M0300B3    Stage 2 pressure ulcers: date of oldest</p>
-3012	Consistency	Fatal	<p>If M0300C1=[0,^], then M0300C2 must equal [^].</p>

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**Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			<b>Items:</b> M0300C1      Stage 3 pressure ulcers: number present
			M0300C2      Stage 3 pressure ulcers: number at admit
-3013	Consistency	Fatal	If M0300C1=[-], then M0300C2 must equal [-].
			<b>Items:</b> M0300C1      Stage 3 pressure ulcers: number present
			M0300C2      Stage 3 pressure ulcers: number at admit
-3014	Consistency	Fatal	If M0300D1=[0,^], then M0300D2 must equal [^].
			<b>Items:</b> M0300D1      Stage 4 pressure ulcers: number present
			M0300D2      Stage 4 pressure ulcers: number at admit
-3015	Consistency	Fatal	If M0300D1=[-], then M0300D2 must equal [-].
			<b>Items:</b> M0300D1      Stage 4 pressure ulcers: number present
			M0300D2      Stage 4 pressure ulcers: number at admit
-3016	Consistency	Fatal	If M0300E1=[0,^], then M0300E2 must equal [^].
			<b>Items:</b> M0300E1      Unstageable dressing: number present
			M0300E2      Unstageable dressing: number at admit
-3017	Consistency	Fatal	If M0300E1=[-], then M0300E2 must equal [-].
			<b>Items:</b> M0300E1      Unstageable dressing: number present
			M0300E2      Unstageable dressing: number at admit
-3018	Consistency	Fatal	If M0300F1=[0,^], then M0300F2 must equal [^].
			<b>Items:</b> M0300F1      Unstageable slough/eschar: number present
			M0300F2      Unstageable slough/eschar: number at admit
-3019	Consistency	Fatal	If M0300F1=[-], then M0300F2 must equal [-].
			<b>Items:</b> M0300F1      Unstageable slough/eschar: number present
			M0300F2      Unstageable slough/eschar: number at admit
-3020	Consistency	Fatal	If M0300G1=[0,^], then M0300G2 must equal [^].
			<b>Items:</b> M0300G1      Unstageable deep tissue: number present
			M0300G2      Unstageable deep tissue: number at admit
-3021	Consistency	Fatal	If M0300G1=[-], then M0300G2 must equal [-].
			<b>Items:</b> M0300G1      Unstageable deep tissue: number present
			M0300G2      Unstageable deep tissue: number at admit
-3022	Consistency	Fatal	If A1100A=[1], then A1100B must not equal [^].
			<b>Items:</b> A1100A      Does the patient need or want an interpreter
			A1100B      Preferred language
-3023	Consistency	Fatal	If A1100A=[-], then A1100B must equal [-].
			<b>Items:</b> A1100A      Does the patient need or want an interpreter
			A1100B      Preferred language
-3025	Consistency	Fatal	If A0250=[01], then A0270 must equal [^].
			<b>Items:</b> A0250      Reason for Assessment
			A0270      Discharge date

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

<b>ID</b>	<b>Type</b>	<b>Severity</b>	<b>Text/Items</b>
-3033	Consistency	Fatal	<p>If M0300C1, M0300D1, and M0300F1 are all equal to [0,-,^], then M0610A, M0610B, and M0610C must equal [^].</p> <p><b>Items:</b> M0300C1      Stage 3 pressure ulcers: number present  M0300D1      Stage 4 pressure ulcers: number present  M0300F1      Unstageable slough/eschar: number present  M0610A      Stage 3 or 4 pressure ulcer length  M0610B      Stage 3 or 4 pressure ulcer width  M0610C      Stage 3 or 4 pressure ulcer depth</p>
-3034	Consistency	Fatal	<p>If M0210=[-], then all items from M0300A through M0300G2 must equal [-].</p> <p><b>Items:</b> M0210      Patient has Stage 1 or higher pressure ulcers  M0300A      Stage 1 pressure ulcers: number present  M0300B1      Stage 2 pressure ulcers: number present  M0300B2      Stage 2 pressure ulcers: number at admit  M0300B3      Stage 2 pressure ulcers: date of oldest  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 dressing: number present  M0300E2      Unstageable dressing: number at admit  M0300F1      Unstageable slough/eschar: number present  M0300F2      Unstageable slough/eschar: number at admit  M0300G1      Unstageable deep tissue: number present  M0300G2      Unstageable deep tissue: number at admit</p>
-3035	Consistency	Fatal	<p>If M0210=[-], then M0700 must equal [-].</p> <p><b>Items:</b> M0210      Patient has Stage 1 or higher pressure ulcers  M0700      Most severe tissue type for any pressure ulcer</p>
-3542	Consistency	Fatal	<p>If M0210=[1], then all items from M0300A through M0300B1 must not equal [^].</p> <p><b>Items:</b> M0210      Patient has Stage 1 or higher pressure ulcers  M0300A      Stage 1 pressure ulcers: number present  M0300B1      Stage 2 pressure ulcers: number present</p>
-3543	Consistency	Fatal	<p>If M0210=[1], then M0300C1 must not equal [^].</p> <p><b>Items:</b> M0210      Patient has Stage 1 or higher pressure ulcers  M0300C1      Stage 3 pressure ulcers: number present</p>
-3544	Consistency	Fatal	<p>If M0210=[1], then M0300D1 must not equal [^].</p> <p><b>Items:</b> M0210      Patient has Stage 1 or higher pressure ulcers  M0300D1      Stage 4 pressure ulcers: number present</p>
-3545	Consistency	Fatal	<p>If M0210=[1], then M0300E1 must not equal [^].</p> <p><b>Items:</b> M0210      Patient has Stage 1 or higher pressure ulcers  M0300E1      Unstageable dressing: number present</p>

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
-3546	Consistency	Fatal	<p>If M0210=[1], then M0300F1 must not equal [^].</p> <p><b>Items:</b> M0210 Patient has Stage 1 or higher pressure ulcers  M0300F1 Unstageable slough/eschar: number present</p>
-3547	Consistency	Fatal	<p>If M0210=[1], then M0300G1 must not equal [^].</p> <p><b>Items:</b> M0210 Patient has Stage 1 or higher pressure ulcers  M0300G1 Unstageable deep tissue: number present</p>
-3548	Consistency	Fatal	<p>If M0300B1=[1-9], then items from M0300B2 through M0300B3 must not equal [^].</p> <p><b>Items:</b> M0300B1 Stage 2 pressure ulcers: number present  M0300B2 Stage 2 pressure ulcers: number at admit  M0300B3 Stage 2 pressure ulcers: date of oldest</p>
-3549	Consistency	Fatal	<p>If M0300C1=[1-9], then M0300C2 must not equal [^].</p> <p><b>Items:</b> M0300C1 Stage 3 pressure ulcers: number present  M0300C2 Stage 3 pressure ulcers: number at admit</p>
-3550	Consistency	Fatal	<p>If M0300D1=[1-9], then M0300D2 must not equal [^].</p> <p><b>Items:</b> M0300D1 Stage 4 pressure ulcers: number present  M0300D2 Stage 4 pressure ulcers: number at admit</p>
-3551	Consistency	Fatal	<p>If M0300E1=[1-9], then M0300E2 must not equal [^].</p> <p><b>Items:</b> M0300E1 Unstageable dressing: number present  M0300E2 Unstageable dressing: number at admit</p>
-3552	Consistency	Fatal	<p>If M0300F1=[1-9], then M0300F2 must not equal [^].</p> <p><b>Items:</b> M0300F1 Unstageable slough/eschar: number present  M0300F2 Unstageable slough/eschar: number at admit</p>
-3553	Consistency	Fatal	<p>If M0300G1=[1-9], then M0300G2 must not equal [^].</p> <p><b>Items:</b> M0300G1 Unstageable deep tissue: number present  M0300G2 Unstageable deep tissue: number at admit</p>
-3572	Consistency	Fatal	<p>If A1100A=[0,9], then A1100B must equal [^].</p> <p><b>Items:</b> 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:</p> <p>A0900 (birth date) &lt;=  A0220 (admission date) &lt;=  A0210 (assessment reference date) = A0270 (discharge date) &lt;=  Z0500B (date RN signed assessment as complete) &lt;=  current date</p> <p>Additionally:</p> <ol style="list-style-type: none"> <li>1. M0300B3 must be greater than or equal to A0900 (birth date).</li> <li>2. M0300B3 must be less than or equal to A0210 (assessment reference date).</li> <li>3. If A0250 is equal to [10,11,12] then M0300B3 must be less than or equal to A0270.</li> </ol>

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			<b>Items:</b> A0210      Assessment reference date A0220      Admission date A0250      Reason for Assessment A0270      Discharge date A0900      Birth Date M0300B3      Stage 2 pressure ulcers: date of oldest Z0500B      Date assessment signed as complete
-3593	Consistency	Fatal	If M0300C1, M0300D1, or M0300F1 are equal to [1-9], then M0610A, M0610B, and M0610C must contain values that are not equal to [^].  <b>Items:</b> M0300C1      Stage 3 pressure ulcers: number present M0300D1      Stage 4 pressure ulcers: number present M0300F1      Unstageable slough/eschar: number present M0610A      Stage 3 or 4 pressure ulcer length M0610B      Stage 3 or 4 pressure ulcer width M0610C      Stage 3 or 4 pressure ulcer depth
-3612	Consistency	Fatal	If M0210=[0], then all active items from M0300A through M0800C must equal [^].  <b>Items:</b> M0210      Patient has Stage 1 or higher pressure ulcers M0300A      Stage 1 pressure ulcers: number present M0300B1      Stage 2 pressure ulcers: number present M0300B2      Stage 2 pressure ulcers: number at admit M0300B3      Stage 2 pressure ulcers: date of oldest 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 dressing: number present M0300E2      Unstageable dressing: number at admit M0300F1      Unstageable slough/eschar: number present M0300F2      Unstageable slough/eschar: number at admit M0300G1      Unstageable deep tissue: number present M0300G2      Unstageable deep tissue: number at admit M0610A      Stage 3 or 4 pressure ulcer length M0610B      Stage 3 or 4 pressure ulcer width M0610C      Stage 3 or 4 pressure ulcer depth M0700      Most severe tissue type for any pressure ulcer M0800A      Worsened since prior asmt: Stage 2 pressure ulcers M0800B      Worsened since prior asmt: Stage 3 pressure ulcers M0800C      Worsened since prior asmt: Stage 4 pressure ulcers
-3662	Consistency	Fatal	If M0300B1=[1-9], then M0300B2 must be equal to [-] OR must be equal to [0-9] and must be less than or equal to M0300B1.  <b>Items:</b> M0300B1      Stage 2 pressure ulcers: number present M0300B2      Stage 2 pressure ulcers: number at admit

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### Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-3663	Consistency	Fatal	<p>If M0300C1=[1-9], then M0300C2 must be equal to [-], OR must be equal to [0-9] and must be less than or equal to M0300C1.</p> <p><b>Items:</b> 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 M0300D2 must be equal to [-], OR must be equal to [0-9] and must be less than or equal to M0300D1.</p> <p><b>Items:</b> 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 M0300E2 must be equal to [-], OR must be equal to [0-9] and must be less than or equal to M0300E1.</p> <p><b>Items:</b> M0300E1                      Unstageable dressing: number present M0300E2                      Unstageable dressing: number at admit</p>
-3666	Consistency	Fatal	<p>If M0300F1=[1-9], then M0300F2 must be equal to [-], OR must be equal to [0-9] and must be less than or equal to M0300F1.</p> <p><b>Items:</b> M0300F1                      Unstageable slough/eschar: number present M0300F2                      Unstageable slough/eschar: number at admit</p>
-3667	Consistency	Fatal	<p>If M0300G1=[1-9], then M0300G2 must be equal to [-], OR must be equal to [0-9] and must be less than or equal to M0300G1.</p> <p><b>Items:</b> M0300G1                      Unstageable deep tissue: number present M0300G2                      Unstageable deep tissue: number at admit</p>
-3705	Consistency	Fatal	<p>If M0210=[1], then M0700 must not equal [^].</p> <p><b>Items:</b> M0210                      Patient has Stage 1 or higher pressure ulcers M0700                      Most severe tissue type for any pressure ulcer</p>
-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 record to allow for record matching:</p> <p>a) A0270 (discharge date) when A0250 = 10, 11, 12 b) A0220 (admission date) when A0250 = 01 c) A0250 (reason for assessment) d) A0500A (patient first name) e) A0500C (patient last name) f) A0600A (social security number) g) A0800 (gender) h) A0900 (birth date)</p> <p><b>Items:</b> A0220                      Admission date A0250                      Reason for Assessment A0270                      Discharge date A0500A                      Patient first name A0500C                      Patient last name A0600A                      Social Security Number A0800                      Gender</p>

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
-3749	Consistency	Warning	<p><b>Items:</b> A0900 Birth Date</p> <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) &lt;= 5 days.</p>
			<p><b>Items:</b> A0210 Assessment reference date</p> <p>Z0500B Date assessment signed as complete</p>
			<p>If any item A1000A through A1000F is equal to [-], then all items from A1000A through A1000F must equal [-].</p>
-3761	Consistency	Fatal	<p><b>Items:</b> A1000A Ethnicity: American Indian or Alaska Native</p> <p>A1000B Ethnicity: Asian</p> <p>A1000C Ethnicity: Black or African American</p> <p>A1000D Ethnicity: Hispanic or Latino</p> <p>A1000E Ethnicity: Native Hawaiian/Pacific Islander</p> <p>A1000F Ethnicity: White</p>
-3790	Consistency	Fatal	<p>If A0250=[10, 11, 12], then A0270 must not equal [^].</p> <p><b>Items:</b> A0250 Reason for Assessment</p> <p>A0270 Discharge date</p>
-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> <p><b>Items:</b> A0050 Type of record</p> <p>Z0500B Date assessment signed as complete</p>
-3820	Consistency	Fatal	<p>If A1955=[1], then A1960 must not equal [^].</p> <p><b>Items:</b> A1955 Discharge delay</p> <p>A1960 Reason for discharge delay</p>
-3830	Consistency	Fatal	<p>If A1955=[0], then A1960 must equal [^].</p> <p><b>Items:</b> A1955 Discharge delay</p> <p>A1960 Reason for discharge delay</p>
-3840	Consistency	Warning	<p>If A1800=[01], then A1810B must not equal [1].</p> <p><b>Items:</b> A1800 Admitted from</p> <p>A1810B Last 2 mo: Community residential setting</p>
-3841	Consistency	Warning	<p>If A1800=[02], then A1810C must not equal [1].</p> <p><b>Items:</b> A1800 Admitted from</p> <p>A1810C Last 2 mo: Long-term care facility (LTC)</p>
-3842	Consistency	Warning	<p>If A1800=[03], then A1810D must not equal [1].</p> <p><b>Items:</b> A1800 Admitted from</p> <p>A1810D Last 2 mo: Skilled nursing facility (SNF)</p>
-3843	Consistency	Warning	<p>If A1800=[04], then A1810E must not equal [1].</p>

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			<b>Items:</b> A1800 Admitted from A1810E Last 2 mo: Hospital emergency department
-3844	Consistency	Warning	If A1800=[05], then A1810A must not equal [1].
			<b>Items:</b> A1800 Admitted from A1810A Last 2 mo: Short-stay acute hospital (IPPS)
-3845	Consistency	Warning	If A1800=[06], then A1810F must not equal [1].
			<b>Items:</b> A1800 Admitted from A1810F Last 2 mo: Long-term care hospital (LTCH)
-3846	Consistency	Warning	If A1800=[07], then A1810G must not equal [1].
			<b>Items:</b> A1800 Admitted from A1810G Last 2 mo: Inpatient rehabilitation fac/unit(IRF)
-3847	Consistency	Warning	If A1800=[08], then A1810K must not equal [1].
			<b>Items:</b> A1800 Admitted from A1810K Last 2 mo: Psychiatric hospital or unit
-3848	Consistency	Warning	If A1800=[09], then A1810L must not equal [1].
			<b>Items:</b> A1800 Admitted from A1810L Last 2 mo: ID/DD facility
-3849	Consistency	Warning	If A1800=[10], then A1810I must not equal [1].
			<b>Items:</b> A1800 Admitted from A1810I Last 2 mo: Hospice
-3860	Consistency	Fatal	If A1810Z=[0], then at least one item from A1810A through A1810L must equal [1].
			<b>Items:</b> A1810A Last 2 mo: Short-stay acute hospital (IPPS)
			A1810B Last 2 mo: Community residential setting
			A1810C Last 2 mo: Long-term care facility (LTC)
			A1810D Last 2 mo: Skilled nursing facility (SNF)
			A1810E Last 2 mo: Hospital emergency department
			A1810F Last 2 mo: Long-term care hospital (LTCH)
			A1810G Last 2 mo: Inpatient rehabilitation fac/unit(IRF)
			A1810H Last 2 mo: Home health agency (HHA)
			A1810I Last 2 mo: Hospice
			A1810J Last 2 mo: Outpatient services
			A1810K Last 2 mo: Psychiatric hospital or unit
			A1810L Last 2 mo: ID/DD facility
			A1810Z Last 2 mo: None of the above
-3861	Consistency	Fatal	If A1810Z=[1], then all items from A1810A through A1810L must equal [0].
			<b>Items:</b> A1810A Last 2 mo: Short-stay acute hospital (IPPS)
			A1810B Last 2 mo: Community residential setting
			A1810C Last 2 mo: Long-term care facility (LTC)
			A1810D Last 2 mo: Skilled nursing facility (SNF)

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			<b>Items:</b> A1810E Last 2 mo: Hospital emergency department A1810F Last 2 mo: Long-term care hospital (LTCH) A1810G Last 2 mo: Inpatient rehabilitation fac/unit(IRF) A1810H Last 2 mo: Home health agency (HHA) A1810I Last 2 mo: Hospice A1810J Last 2 mo: Outpatient services A1810K Last 2 mo: Psychiatric hospital or unit A1810L Last 2 mo: ID/DD facility A1810Z Last 2 mo: None of the above
-3862	Consistency	Fatal	If A1810Z=[-], then at least one item from A1810A through A1810L must equal [-] and all remaining items must equal [0,-].  <b>Items:</b> A1810A Last 2 mo: Short-stay acute hospital (IPPS) A1810B Last 2 mo: Community residential setting A1810C Last 2 mo: Long-term care facility (LTC) A1810D Last 2 mo: Skilled nursing facility (SNF) A1810E Last 2 mo: Hospital emergency department A1810F Last 2 mo: Long-term care hospital (LTCH) A1810G Last 2 mo: Inpatient rehabilitation fac/unit(IRF) A1810H Last 2 mo: Home health agency (HHA) A1810I Last 2 mo: Hospice A1810J Last 2 mo: Outpatient services A1810K Last 2 mo: Psychiatric hospital or unit A1810L Last 2 mo: ID/DD facility A1810Z Last 2 mo: None of the above
-3863	Consistency	Warning	If A1400K=[1], then A1400A through A1400J and A1400X and A1400Y must = [0]
			<b>Items:</b> 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 A1400G Payer: Other Government A1400H Payer: Private insurance/Medigap A1400I Payer: Private managed care A1400J Payer: Self-pay A1400K Payer: No payor source A1400X Payer: Unknown A1400Y Payer: Other
-3900	Consistency	Warning	A dash (-) submitted in this quality measure item may result in a payment reduction for your facility of two percentage points for the FY 2014 payment determination.  <b>Items:</b> GG0160C Functional Mobil: Lying to sitting on side of bed H0400 Bowel continence

**Data Submission Specifications for the LTCH - CARE Data Set (V1.00.3)**  
**Unduplicated Edits Report by Edit ID**

<b>ID</b>	<b>Type</b>	<b>Severity</b>	<b>Text/Items</b>
			<b>Items:</b> I0900                      Peripheral vascular disease (PVD) or PAD I2900                      Diabetes mellitus (DM) K0200A                    Height (in inches) K0200B                    Weight (in pounds) M0800A                    Worsened since prior asmt: Stage 2 pressure ulcers M0800B                    Worsened since prior asmt: Stage 3 pressure ulcers M0800C                    Worsened since prior asmt: Stage 4 pressure ulcers
-3910	Consistency	Fatal	a) If M0300B1=[0-9], then if M0800A is active it must equal [0,1,2,3,4,5,6,7,8,9,-]. b) If M0300B1=[-], then if M0800A is active it must equal [-]. c) If M0300B1=[0-9] and M0800A=[0-9], then the value of M0800A must be less than or equal to the value of M0300B1.  <b>Items:</b> M0300B1                      Stage 2 pressure ulcers: number present M0800A                      Worsened since prior asmt: Stage 2 pressure ulcers
-3911	Consistency	Fatal	a) If M0300C1=[0-9], then if M0800B is active it must equal [0,1,2,3,4,5,6,7,8,9,-]. b) If M0300C1=[-], then if M0800B is active it must equal [-]. c) If M0300C1=[0-9] and M0800B=[0-9], then the value of M0800B must be less than or equal to the value of M0300C1.  <b>Items:</b> M0300C1                      Stage 3 pressure ulcers: number present M0800B                      Worsened since prior asmt: Stage 3 pressure ulcers
-3912	Consistency	Fatal	a) If M0300D1=[0-9], then if M0800C is active it must equal [0,1,2,3,4,5,6,7,8,9,-]. b) If M0300D1=[-], then if M0800C is active it must equal [-]. c) If M0300D1=[0-9] and M0800C=[0-9], then the value of M0800C must be less than or equal to the value of M0300D1.  <b>Items:</b> M0300D1                      Stage 4 pressure ulcers: number present M0800C                      Worsened since prior asmt: Stage 4 pressure ulcers
-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)  <b>Items:</b> TARGET_DATE              Target date