

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0101	15
Item ID: S0102	16
Item ID: S0111	17
Item ID: S0115	18
Item ID: S0120	19
Item ID: S0122	20
Item ID: S0123	22
Item ID: S0125	23
Item ID: S0130	24
Item ID: S0140	25
Item ID: S0141	26
Item ID: S0150	27
Item ID: S0160	28
Item ID: S0161A	29
Item ID: S0161B	30
Item ID: S0161C	31
Item ID: S0161D	32
Item ID: S0161Z	33
Item ID: S0165A	34
Item ID: S0165B	35
Item ID: S0165C	36
Item ID: S0165D	37
Item ID: S0165E	38
Item ID: S0165Z	39
Item ID: S0170A	40
Item ID: S0170B	41

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170C	42
Item ID: S0170D	43
Item ID: S0170E	44
Item ID: S0170F	45
Item ID: S0170G	46
Item ID: S0170H	47
Item ID: S0170Z	48
Item ID: S0171A	49
Item ID: S0171B	50
Item ID: S0172A	51
Item ID: S0172B	52
Item ID: S0172C	53
Item ID: S0172D	54
Item ID: S0172E	55
Item ID: S0172F	56
Item ID: S0172G	57
Item ID: S0172H	58
Item ID: S0173	59
Item ID: S0174	60
Item ID: S0175	61
Item ID: S0180	62
Item ID: S0183	63
Item ID: S0500	64
Item ID: S0501	65
Item ID: S0509	66
Item ID: S0510	67

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0511	68
Item ID: S0512	69
Item ID: S0513	70
Item ID: S0520	71
Item ID: S0600A	72
Item ID: S0600B	73
Item ID: S0600C	74
Item ID: S0600D	75
Item ID: S0600E	76
Item ID: S0600Z	77
Item ID: S1000	78
Item ID: S1001	79
Item ID: S1002	80
Item ID: S1003	81
Item ID: S1004	82
Item ID: S1100A	83
Item ID: S1100B	84
Item ID: S1100C	85
Item ID: S1100D	86
Item ID: S1100E	87
Item ID: S1100F	88
Item ID: S1100F1	89
Item ID: S1100F2	90
Item ID: S1100G	91
Item ID: S1100H	92
Item ID: S1100I	93

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100J	94
Item ID: S1100Z	95
Item ID: S1150	96
Item ID: S1200A	97
Item ID: S1200B	98
Item ID: S1200C	99
Item ID: S1200D	100
Item ID: S1200E	101
Item ID: S1200F	102
Item ID: S1200G	103
Item ID: S1200H	104
Item ID: S1200I	105
Item ID: S2000	106
Item ID: S2001	107
Item ID: S2010	108
Item ID: S2011	109
Item ID: S2015	110
Item ID: S2016	111
Item ID: S2040	112
Item ID: S2050	113
Item ID: S2060A	114
Item ID: S2060B	115
Item ID: S2060C	116
Item ID: S2060D	117
Item ID: S2060E	118
Item ID: S2060Z	119

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100A.....	120
Item ID: S3100B.....	121
Item ID: S3100C.....	122
Item ID: S3100D.....	123
Item ID: S3100E.....	124
Item ID: S3100F.....	125
Item ID: S3100G.....	126
Item ID: S3100H.....	127
Item ID: S3100Z.....	128
Item ID: S3200A.....	129
Item ID: S3200B.....	130
Item ID: S3300.....	131
Item ID: S3305A.....	132
Item ID: S3305B.....	133
Item ID: S3305C.....	134
Item ID: S3305D.....	135
Item ID: S3305E.....	136
Item ID: S3305Y.....	137
Item ID: S3310A.....	138
Item ID: S3310B.....	139
Item ID: S3310C.....	140
Item ID: S3310D.....	141
Item ID: S3310Y.....	142
Item ID: S3310Z.....	143
Item ID: S3315A.....	144
Item ID: S3315B.....	145

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3315C	146
Item ID: S3315D	147
Item ID: S3315Y	148
Item ID: S3315Z	149
Item ID: S4000A	150
Item ID: S4000B	151
Item ID: S4000C	152
Item ID: S4000D	153
Item ID: S4010A	154
Item ID: S4010B	155
Item ID: S4010C	156
Item ID: S4010D	157
Item ID: S4010E	158
Item ID: S4500	159
Item ID: S4510A	160
Item ID: S4510B	161
Item ID: S4510C	162
Item ID: S4510D	163
Item ID: S4510E	164
Item ID: S4510F	165
Item ID: S5000	166
Item ID: S5005	167
Item ID: S5010A1	168
Item ID: S5010A2	170
Item ID: S5010B1	171
Item ID: S5010B2	173

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010C1	174
Item ID: S5010C2	176
Item ID: S5010D1.....	177
Item ID: S5010D2.....	179
Item ID: S5010E1	180
Item ID: S5010E2	182
Item ID: S5010F1	183
Item ID: S5010F2	185
Item ID: S5010G1.....	186
Item ID: S5010G2.....	188
Item ID: S5010H1.....	189
Item ID: S5010H2.....	191
Item ID: S5010I1	192
Item ID: S5010I2	194
Item ID: S6000	195
Item ID: S6005	196
Item ID: S6010	197
Item ID: S6020A.....	198
Item ID: S6020B	199
Item ID: S6020C	200
Item ID: S6020D.....	201
Item ID: S6020Y	202
Item ID: S6020Z	203
Item ID: S6022A.....	204
Item ID: S6022B	205
Item ID: S6022C	206

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6023A.....	207
Item ID: S6023B	208
Item ID: S6023C	209
Item ID: S6024A.....	210
Item ID: S6024B	211
Item ID: S6024C	212
Item ID: S6050	213
Item ID: S6051A.....	214
Item ID: S6051B	215
Item ID: S6051C	216
Item ID: S6051D.....	217
Item ID: S6052	218
Item ID: S6053A.....	219
Item ID: S6053B	220
Item ID: S6100A.....	221
Item ID: S6100B	222
Item ID: S6100C	223
Item ID: S6100D	224
Item ID: S6100E	225
Item ID: S6100F1	226
Item ID: S6100F2	227
Item ID: S6100F3	228
Item ID: S6100Z	229
Item ID: S6200	230
Item ID: S6201	231
Item ID: S6205	232

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6210	233
Item ID: S6211	234
Item ID: S6220	235
Item ID: S6230	236
Item ID: S6232	237
Item ID: S6234	238
Item ID: S6236	239
Item ID: S7000	240
Item ID: S8000A1	241
Item ID: S8000A2	242
Item ID: S8000A3	243
Item ID: S8000B1	244
Item ID: S8000B2	245
Item ID: S8000B3	246
Item ID: S8000C1	247
Item ID: S8000C2	248
Item ID: S8000C3	249
Item ID: S8000D1	250
Item ID: S8000D2	251
Item ID: S8000D3	252
Item ID: S8000E1	253
Item ID: S8000E2	254
Item ID: S8000E3	255
Item ID: S8000Z	256
Item ID: S8010A1	257
Item ID: S8010A2	258

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010A3	259
Item ID: S8010B1	260
Item ID: S8010B2	261
Item ID: S8010B3	262
Item ID: S8010C1	263
Item ID: S8010C2	264
Item ID: S8010C3	265
Item ID: S8010D1.....	266
Item ID: S8010D2.....	267
Item ID: S8010D3.....	268
Item ID: S8010E1	269
Item ID: S8010E2	270
Item ID: S8010E3	271
Item ID: S8010F	272
Item ID: S8010F1	273
Item ID: S8010F2	274
Item ID: S8010F3	275
Item ID: S8010G.....	276
Item ID: S8010G1.....	277
Item ID: S8010G2.....	278
Item ID: S8010G3.....	279
Item ID: S8010H1.....	280
Item ID: S8010H2.....	281
Item ID: S8010H3.....	282
Item ID: S8010I1	283
Item ID: S8010I2	284

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010I3	285
Item ID: S8010Z	286
Item ID: S8020A1	287
Item ID: S8020A2	288
Item ID: S8020A3	289
Item ID: S8020B1	290
Item ID: S8020B2	291
Item ID: S8020B3	292
Item ID: S8020C1	293
Item ID: S8020C2	294
Item ID: S8020C3	295
Item ID: S8020Z	296
Item ID: S8030A1	297
Item ID: S8030A2	298
Item ID: S8030A3	299
Item ID: S8030B1	300
Item ID: S8030B2	301
Item ID: S8030B3	302
Item ID: S8030C	303
Item ID: S8030Z	304
Item ID: S8040A1	305
Item ID: S8040A2	306
Item ID: S8040A3	307
Item ID: S8040B1	308
Item ID: S8040B2	309
Item ID: S8040B3	310

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040C1	311
Item ID: S8040C2	312
Item ID: S8040C3	313
Item ID: S8040D1.....	314
Item ID: S8040D2.....	315
Item ID: S8040D3.....	316
Item ID: S8040Z	317
Item ID: S8050A1.....	318
Item ID: S8050A2	319
Item ID: S8050A3	320
Item ID: S8050B	321
Item ID: S8050C	322
Item ID: S8050D	323
Item ID: S8055	324
Item ID: S8099	325
Item ID: S8500	326
Item ID: S8510A.....	327
Item ID: S8510B	328
Item ID: S8512A.....	329
Item ID: S8512B	330
Item ID: S8520A.....	331
Item ID: S8520B	332
Item ID: S8520C	333
Item ID: S8521A.....	334
Item ID: S8521B	335
Item ID: S8521C	336

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9000	337
Item ID: S9001	338
Item ID: S9002A	339
Item ID: S9002B	340
Item ID: S9002C	341
Item ID: S9002D	342
Item ID: S9002E	343
Item ID: S9002F	344
Item ID: S9002G	345
Item ID: S9002H	346
Item ID: S9002I	347
Item ID: S9003	348
Item ID: S9020	349
Item ID: S9040A	350
Item ID: S9040B	351
Item ID: S9040C	352
Item ID: S9040C1	353
Item ID: S9040D	354
Item ID: S9040D1	355
Item ID: S9040E	356
Item ID: S9040F	357
Item ID: S9040G	358
Item ID: S9040H	359
Item ID: S9060	360
Item ID: S9080A	361
Item ID: S9080B	362

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9080C	363
Item ID: S9080D	364
Item ID: S9080E	365
Item ID: S9100A	366
Item ID: S9100B	367
Item ID: S9100C	368
Item ID: S9120	369
Item ID: S9140	370

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0101

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Admitted from Community Admitted from at entry (if A1800 = 01 Community)	Asmt		Code	1	1927-1927

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Community with no home care
2		Community with Medicare certified home health agency care
3		Community with other home care
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0102

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Admitted from NH or SB Admitted from at entry (if A1800 = 02 nursing home or swing bed)	Asmt		Code	1	1928-1928

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Chronic and Convalescent Nursing Home (CCNH)
2		Rest Home with Nursing Supervision (RHNS)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0111

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Lived Alone	Asmt		Code	1	1929-1929
Lived alone (prior to entry)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
2		In other facility

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0115

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Spouse Location Location of Spouse: If the resident has a spouse, code the spouse's residence	Asmt		Code	1	1930-1930

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
2		In a dwelling the resident and/or spouse owns (i.e., homestead property)
3		Other / Unknown living arrangement
5		In the same nursing home
6		In another nursing home
7		With family or friends

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0120

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Prior Residence ZIP Code	Asmt		Text	5	1931-1935
Residence prior to admission: ZIP code					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Prior Residence ZIP Code
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0122

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Prior Residence State	Asmt		Code	2	1936-1937
Prior Primary Residence: State code of prior primary residence					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
AL		Alabama
AK		Alaska
AZ		Arizona
AR		Arkansas
CA		California
CO		Colorado
CT		Connecticut
DE		Delaware
DC		District of Columbia
FL		Florida
GA		Georgia
HI		Hawaii
ID		Idaho
IL		Illinois
IN		Indiana
IA		Iowa
KS		Kansas
KY		Kentucky
LA		Louisiana
ME		Maine
MD		Maryland
MA		Massachusetts
MI		Michigan
MN		Minnesota
MS		Mississippi
MO		Missouri
MT		Montana

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

NE	Nebraska
NV	Nevada
NH	New Hampshire
NJ	New Jersey
NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
PR	Puerto Rico
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VT	Vermont
VA	Virginia
VI	Virgin Islands
WA	Washington
WV	West Virginia
WI	Wisconsin
WY	Wyoming

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0123

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Prior Residence County	Asmt		Text	3	1938-1940
Prior Primary Residence : County code of prior primary residence (code 999 if out-of-State)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Prior Residence County
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0125

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Prior Residence Town Code	Asmt		Text	5	1941-1945
Prior Primary Residence : Town/city code of prior primary residence (code 99999 if out-of-State)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Prior Residence Town Code

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0130

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Highest Education Completed Education (Highest level completed)	Asmt		Code	1	1946-1946

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		No Schooling
2		8th grade/less
3		Some high school
4		High school graduate/GED
5		Technical or trade school
6		Some college/Associate's degree
7		Bachelor's degree
8		Graduate degree
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0140

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Physician License Number Physician license number	Asmt		Text	11	1947-1957

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Physician License Number

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0141

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Physician Name	Asmt		Text	18	1958-1975
Physician last name					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Physician Last Name

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0150

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
State Resident ID Resident Identifier (if resident does not have a social security number, contact DHHS Division of Medicaid and Long-Term Care for an identification number to be assigned and enter in this section)	Asmt		Text	9	1976-1984

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		State Resident Identifier
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0160

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Specialty unit Specialty Unit	Asmt		Code	2	2509-2510

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Discrete AIDS Unit
02		Ventilator Dependent Unit
03		Traumatic Brain Injury (TBI) Unit
04		Behavioral Intervention Unit
05		Behavioral Intervention Step-Down Unit
06		Pediatric Specialty Unit / Facility
07		AIDS Scatter Beds
08		Traumatic Brain Injury (TBI) Extended Care
99		None of the Above

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0161A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Requires specialized unit: dementia/Alzheimer Resident required the services and resided on a specialized unit during the last 14 days. Check all that apply: Dementia/Alzheimer Unit	Asmt		Checklist	1	2536-2536

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0161B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Requires specialized unit: behavioral health Resident required the services and resided on a specialized unit during the last 14 days. Check all that apply: Behavioral Health Unit	Asmt		Checklist	1	2537-2537

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0161C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Requires specialized unit: TBI Resident required the services and resided on a specialized unit during the last 14 days. Check all that apply: TBI unit	Asmt		Checklist	1	2538-2538

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0161D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Requires specialized unit: ventilator Resident required the services and resided on a specialized unit during the last 14 days. Check all that apply: Ventilator Unit	Asmt		Checklist	1	2539-2539

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0161Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Requires specialized unit: none of the above Resident required the services and resided on a specialized unit during the last 14 days. Check all that apply: None of the above	Asmt		Checklist	1	2540-2540

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0165A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Specialty services: Dementia/Alzheimers Specialty services: Dementia/Alzheimers	Asmt		Checklist	1	2565-2565

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0165B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Specialty services: Behavioral Health Specialty services: Behavioral Health	Asmt		Checklist	1	2566-2566

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0165C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Specialty services: Traumatic Brain Injury	Asmt		Checklist	1	2567-2567
Specialty services: Traumatic Brain Injury					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0165D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Specialty services: Ventilator Specialty services: Ventilator	Asmt		Checklist	1	2568-2568

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0165E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Specialty services: On-Site Dialysis Specialty services: On-Site Dialysis	Asmt		Checklist	1	2569-2569

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0165Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Specialty services: None of the Above Specialty services: None of the Above	Asmt		Checklist	1	2570-2570

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: Guardian Advanced Directive: Guardian	Asmt		Code	1	2511-2511

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: DPOA-HC Advanced Directive: DPOA-HC	Asmt		Code	1	2512-2512

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: Living will Advanced Directive: Living Will	Asmt		Code	1	2513-2513

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: Do not resuscitate Advanced Directive: Do Not Resuscitate	Asmt		Code	1	2514-2514

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: Do not hospitalize Advanced Directive: Do Not Hospitalize	Asmt		Code	1	2515-2515

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: Do not intubate Advanced Directive: Do Not Intubate	Asmt		Code	1	2516-2516

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170G

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: Feeding restrictions Advanced Directive: Feeding Restrictions	Asmt		Code	1	2517-2517

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170H

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: Other treatment restrictions Advanced Directive: Other Treatment Restrictions	Asmt		Code	1	2518-2518

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0170Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Advanced directive: None of the above Advanced Directive: None of the Above	Asmt		Code	1	2519-2519

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0171A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident healthcare proxy exists Does the resident have a healthcare proxy?	Asmt		Code	1	2520-2520

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0171B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident healthcare proxy invoked Has healthcare proxy been invoked?	Asmt		Code	1	2521-2521

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0172A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Goal discussion: documentation received Did you receive documentation of a discussion on goals of care from the referring provider?	Asmt		Code	1	2522-2522

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
9		Not applicable

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0172B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Goal discussion: hospital If you answered 'yes' to question S0172A, in which setting(s) did the discussion take place? (check all that apply): Hospital	Asmt		Code	1	2523-2523

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0172C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Goal discussion: previous NH If you answered 'yes' to question S0172A, in which setting(s) did the discussion take place? (check all that apply): Previous nursing home	Asmt		Code	1	2524-2524

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0172D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Goal discussion: Home without home health services If you answered 'yes' to question S0172A, in which setting(s) did the discussion take place? (check all that apply): Home Without Home Health Services	Asmt		Code	1	2525-2525

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0172E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Goal discussion: Home with home health services If you answered 'yes' to question S0172A, in which setting(s) did the discussion take place? (check all that apply): Home With Home Health Services	Asmt		Code	1	2526-2526

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0172F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Goal discussion: PCP office If you answered 'yes' to question S0172A, in which setting(s) did the discussion take place? (check all that apply): PCP Office	Asmt		Code	1	2527-2527

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0172G

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Goal discussion: Other If you answered 'yes' to question S0172A, in which setting(s) did the discussion take place? (check all that apply): Other	Asmt		Code	1	2528-2528

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0172H

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Goal discussion: Not occur reason If you answered 'no' to question S0172A, did the referring provider indicate why the discussion did not occur?	Asmt		Code	1	2529-2529

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0173

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Documentation of goals of care discussion Is there documentation in the medical record that a discussion of goals of care with the resident or legal healthcare representative occurred since the last comprehensive OBRA assessment was completed?	Asmt		Code	1	2535-2535

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
9		Not applicable

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0174

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident has Advanced Directive Does the resident have an Advance Directive (Living Will)?	Asmt		Code	1	2571-2571

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0175

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident has POA for Health Care Does the resident have a Power of Attorney for Health Care?	Asmt		Code	1	2572-2572

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0180

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Discharged to Community Discharge Status (if recorded community (01) in item A2100)	Asmt		Code	1	1985-1985

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Community with no home care
2		Community with Medicare certified home health agency care
3		Community with other home care
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0183

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Discharged prior to admission assessment Did this discharge occur prior to completion of the comprehensive admission assessment?	Asmt		Code	1	2530-2530

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0500

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Level of Care Code a level of care for this resident (this may be a provisional judgment for initial admissions, private pay residents or residents with a pending determination for a change in level of care).	Asmt		Code	2	1986-1987

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		ISN
02		SNF
03		ICF-1
04		ICF-2
05		ICF-3
06		ICF-4
07		DD 1A
08		DD 1B
09		DD 2
10		DD 3
11		Traumatic Brain Injury
12		Ventilator Dependent

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0501

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CCNH RHNS Level of Care Code level of care.	Asmt		Code	1	1988-1988

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Chronic and Convalescent Nursing Home (CCNH)
2		Rest Home with Nursing Supervision (RHNS)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0509

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PASRR Level 1 completed prior to admission Was a PASRR Level 1 completed prior to resident's admission to facility?	Asmt		Code	1	2602-2602

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
9		N/A - PASRR not indicated

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S0509	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0510

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PASRR Screening Complete Was a PASRR screening completed?	Asmt		Code	1	1989-1989

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
9		N/A PASRR not indicated

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0511

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PASRR Level 1 Complete Date	Asmt		Date	8	1990-1997
Record PASRR Level I Completion Date					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		PASRR Complete Date
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S0511	[V2.00.0]-Revised item label.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0512

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PASRR Level 1 In response to item S0510 PASRR, was a referral for Level I Determination made?	Asmt		Code	1	1998-1998

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
9		N/A

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0513

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PASRR Screening Outcome What was the outcome of the PASRR screen?	Asmt		Code	1	2573-2573

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Screen was sent to the NF; no diagnosis, suspected diagnosis or need for specialized services
1		Screen was sent for determination of need for Level II screen due to diagnosis, suspected diagnosis or need for specialized services related to mental illness, intellectual disability, or other related condition.
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0520

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Reason for Admission Code the primary reason for admission.	Asmt		Code	2	1999-2000

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Significant change in functional status
02		Deterioration in cognitive status
03		Change in the availability/status of primary caregivers
04		Difficulty arranging or paying for needed in-home care or support
05		Failed to succeed in residential care home
06		Short term rehabilitation or skilled care
99		None of the Above

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0600A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Meets criteria: requires ventilator 10+ hours Resident has met the criteria identified and is eligible for enhanced Medicaid Reimbursement. Check all that apply: Resident requires the use of a ventilator for a minimum of 10 hours in a 24 hour period.	Asmt		Checklist	1	2541-2541

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0600B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Meets criteria: requires ventilator 16+ hours Resident has met the criteria identified and is eligible for enhanced Medicaid Reimbursement. Check all that apply: Resident requires the use of a ventilator for a minimum of 16 hours in a 24 hour period.	Asmt		Checklist	1	2542-2542

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0600C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Meets criteria: Traumatic Brain Injury-Tier I Resident has met the criteria identified and is eligible for enhanced Medicaid Reimbursement. Check all that apply: Resident meets the criteria and is receiving services under Traumatic Brain Injury-Tier I.	Asmt		Checklist	1	2543-2543

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0600D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Meets criteria: Traumatic Brain Injury-Tier II Resident has met the criteria identified and is eligible for enhanced Medicaid Reimbursement. Check all that apply: Resident meets the criteria and is receiving services under Traumatic Brain Injury- Tier II.	Asmt		Checklist	1	2544-2544

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0600E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Meets criteria: Traumatic Brain Injury-Tier III Resident has met the criteria identified and is eligible for enhanced Medicaid Reimbursement. Check all that apply: Resident meets the criteria and is receiving services under Traumatic Brain Injury-Tier III.	Asmt		Checklist	1	2545-2545

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S0600Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Meets criteria: none of the above Resident has met the criteria identified and is eligible for enhanced Medicaid Reimbursement. Check all that apply: None of the above	Asmt		Checklist	1	2546-2546

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1000

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Local Health Department Reporting Has resident had any disease process or condition that has been reported to the local health department since last assessment?	Asmt		Code	1	2001-2001

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1001

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
State Health Department Reporting Has resident had any disease process or condition that has been reported to the appropriate state health department since the last assessment?	Asmt		Code	1	2002-2002

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1002

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Local Health Department Reporting Has resident had any disease process or condition that has been reported to the local health department since the most recent comprehensive or quarterly OBRA assessment?	Asmt		Code	1	2603-2603

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S1002	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1003

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
State Health Department Reporting Has resident had any disease process or condition that has been reported to the appropriate state health department since the most recent comprehensive or quarterly OBRA assessment?	Asmt		Code	1	2604-2604

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S1003	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1004

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Local/State Health Department Reporting Resident had a disease process or condition that has been reported to the appropriate local/state health department since the last assessment	Asmt		Code	1	2605-2605

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S1004	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: Clostridium Difficile Disease Diagnoses: Check all that apply since last assessment: a. Clostridium difficile	Asmt		Checklist	1	2003-2003

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: MRSA	Asmt		Checklist	1	2004-2004
Disease: MRSA Disease Diagnoses: Check all that apply since last assessment: b. MRSA (Methicillin-Resistant Staphylococcus Aureus)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: VRE	Asmt		Checklist	1	2005-2005
Disease: VRE Disease Diagnoses: Check all that apply since last assessment: c. VRE (Vancomycin-Resistant Enterococci)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: VISA	Asmt		Checklist	1	2006-2006
Disease: VISA Disease Diagnoses: Check all that apply since last assessment: d. VISA (Vancomycin-Intermediate Staphylococcus Aureus)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: VRSA Disease: VRSA Disease Diagnoses: Check all that apply since last assessment: e.VRSA (Vancomycin-Resistant Staphylococcus Aureus)	Asmt		Checklist	1	2007-2007

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: Other MDRO Disease: Other MDRO Disease Diagnoses: Check all that apply since last assessment: f. Other MDRO (Multi-Drug Resistant Organism)	Asmt		Checklist	1	2008-2008

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100F1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: MDRO Name1 Enter name of first MDRO (If S1100F is checked, please specify)	Asmt		Text	30	2009-2038

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Name of first MDRO
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100F2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: MDRO Name2 Enter name of second MDRO (If S1100F is checked, please specify)	Asmt		Text	30	2039-2068

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Name of second MDRO
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100G

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: Tuberculosis Disease Diagnoses: Check all that apply since last assessment: g. Tuberculosis	Asmt		Checklist	1	2069-2069

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100H

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: Herpes Zoster Disease Diagnoses: Check all that apply since last assessment: h. Herpes Zoster	Asmt		Checklist	1	2070-2070

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100I

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: Scabies	Asmt		Checklist	1	2071-2071
Disease Diagnoses: Check all that apply since last assessment: i. Scabies					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100J

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: CRE	Asmt		Checklist	1	2574-2574
Disease: CRE Disease Diagnoses: Check all that apply since last assessment: j. CRE (Carbapenem-Resistant Enterobacteriaceae)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1100Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Disease: None of the Above Disease Diagnoses: Check all that apply since last assessment: z. None of the Above	Asmt		Checklist	1	2072-2072

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1150

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Active TBI Diagnosis Resident has active diagnosis of TBI and meets the care and service requirements (defined in II Adm Code 147.335 b) and is eligible for the TBI add on	Asmt		Code	1	2606-2606

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S1150	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: schizophrenia	Asmt		Code	1	2073-2073
Primary and secondary SMI diagnosis: Schizophrenia					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: delusional disorder	Asmt		Code	1	2074-2074
Primary and secondary SMI diagnosis: Delusional disorder					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: schizoaffective disorder	Asmt		Code	1	2075-2075
Primary and secondary SMI diagnosis: Schizoaffective disorder					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: psychotic disorder NOS Primary and secondary SMI diagnosis: Psychotic disorder not otherwise specified	Asmt		Code	1	2076-2076

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: bipolar disorder I	Asmt		Code	1	2077-2077
Primary and secondary SMI diagnosis: Bipolar disorder I mixed, manic, and depressed					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: bipolar disorder II	Asmt		Code	1	2078-2078
Primary and secondary SMI diagnosis: Bipolar disorder II					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200G

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: cyclothymic disorder	Asmt		Code	1	2079-2079
Primary and secondary SMI diagnosis: Cyclothymic disorder					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200H

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: bipolar disorder NOS Primary and secondary SMI diagnosis: Bipolar disorder not otherwise specified	Asmt		Code	1	2080-2080

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S1200I

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary/secondary SMI dx: major depress recurrent Primary and secondary SMI diagnosis: Major depression, recurrent	Asmt		Code	1	2081-2081

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Primary
2		Secondary
3		Neither primary or secondary

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2000

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Capable of self-administration of medications Self-Medication Administration: Resident is capable of self-administration of medications	Asmt		Code	1	2083-2083

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
2		Limited

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2001

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Wishes to self-medicate Self-Medication Administration: Resident wishes to self-medicate	Asmt		Code	1	2084-2084

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
2		Limited

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2010

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Refused meds 3 days Medication Refusal: Resident refused to take some or all of prescribed medication in the last 3 days	Asmt		Code	1	2085-2085

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2011

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Staff support for meds 3 days Medication Refusal: Resident required staff supporting/prompting 3 or more times to take medication in the last 3 days	Asmt		Code	1	2086-2086

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2015

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Refused meds occasionally 30 days Resident refused to take all or some of prescribed medication on occasion (no more than 2 days a week most weeks). (Code for the 30 days preceding the assessment)	Asmt		Code	1	2087-2087

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2016

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Refused meds frequently 30 days Resident refused to take all or some of prescribed medication frequently (more than 2 days a week most weeks). (Code for the 30 days preceding the assessment)	Asmt		Code	1	2088-2088

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2040

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Behavior Management Program Resident is provided a Behavior Management Program	Asmt		Code	1	2089-2089

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Program not provided in last 7 days
1		Program provided 1 - 3 days in last 7 days
2		Program provided 4 - 6 days in last 7 days
3		Program provided daily in last 7 days

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2050

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resists grooming/hygiene Resident resists staff attempts to assist/provide grooming/hygiene. (Code for an average number of days a week the resident has refused care in the 30 days preceding the assessment).	Asmt		Code	1	2090-2090

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		At least one day a week
2		At least two days a week
3		At least three days a week
4		At least four days a week
5		Five or more days a week

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2060A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident centered care: Oasis For this resident are any of the non-pharmacological resident centered care techniques supported by the programs listed below included in the individualized resident centered care approach? Check all items that apply: Oasis	Asmt		Code	1	2547-2547

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2060B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident centered care: habilitation therapy For this resident are any of the non-pharmacological resident centered care techniques supported by the programs listed below included in the individualized resident centered care approach? Check all items that apply: Habilitation therapy	Asmt		Code	1	2548-2548

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2060C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident centered care: hand in hand For this resident are any of the non-pharmacological resident centered care techniques supported by the programs listed below included in the individualized resident centered care approach? Check all items that apply: Hand in Hand	Asmt		Code	1	2549-2549

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2060D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident centered care: consistent assignment For this resident are any of the non-pharmacological resident centered care techniques supported by the programs listed below included in the individualized resident centered care approach? Check all items that apply: Consistent Assignment	Asmt		Code	1	2550-2550

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2060E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident centered care: other For this resident are any of the non-pharmacological resident centered care techniques supported by the programs listed below included in the individualized resident centered care approach? Check all items that apply: Other	Asmt		Code	1	2551-2551

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S2060Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Resident centered care: none of the above For this resident are any of the non-pharmacological resident centered care techniques supported by the programs listed below included in the individualized resident centered care approach? Check all items that apply: None of the above	Asmt		Code	1	2552-2552

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Hand Contractures: a. Hand	Asmt		Code	1	2091-2091

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Wrist Contractures: b. Wrist	Asmt		Code	1	2092-2092

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Elbow Contractures: c. Elbow	Asmt		Code	1	2093-2093

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Shoulder Contractures: d. Shoulder	Asmt		Code	1	2094-2094

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Neck Contractures: e. Neck	Asmt		Code	1	2095-2095

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Ankle Contractures: f. Ankle	Asmt		Code	1	2096-2096

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100G

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Knee Contractures: g. Knee	Asmt		Code	1	2097-2097

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100H

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Hip Contractures: h. Hip	Asmt		Code	1	2098-2098

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3100Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Contractures: Other Contractures: z. Other	Asmt		Code	1	2099-2099

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Right
2		Left
3		Both sides

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3200A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Dominant Side	Asmt		Code	1	2100-2100
Dominant Side: Indicate resident's dominant side					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Right
2		Left
3		Ambidextrous
9		Unable to determine

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3200B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Use of dominant hand/arm Dominant Side: To what extent does the resident have use of his/her dominant hand/arm?	Asmt		Code	1	2101-2101

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Full
2		Limited
3		None

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3300

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Weight-based Equipment Need Did this resident require specialized equipment based on weight since last assessment?	Asmt		Code	1	2575-2575

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3305A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Lifting device for weight Lifting device required since last assessment	Asmt		Checklist	1	2576-2576

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3305B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Wheelchair or mobility device for weight Wheelchair or other mobility device required since last assessment	Asmt		Checklist	1	2577-2577

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3305C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Bed for weight Bed required since last assessment	Asmt		Checklist	1	2578-2578

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3305D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Seating for weight Seating required since last assessment	Asmt		Checklist	1	2579-2579

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3305E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
More than 2 staff for weight More than 2 staff required since last assessment	Asmt		Checklist	1	2580-2580

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3305Y

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other for weight Other equipment required since last assessment	Asmt		Checklist	1	2581-2581

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3310A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Therapy Services Billed - Medicare Part A Resident received therapy services (i.e., PT, OT, ST) during the 7 day look back and these services were billed to the following (check all that apply)	Asmt		Checklist	1	2607-2607

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3310A	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3310B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Therapy Services Billed - Medicare Part B Resident received therapy services (i.e., PT, OT, ST) during the 7 day look back and these services were billed to the following (check all that apply)	Asmt		Checklist	1	2608-2608

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3310B	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3310C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Therapy Services Billed - Managed Care Entity Resident received therapy services (i.e., PT, OT, ST) during the 7 day look back and these services were billed to the following (check all that apply)	Asmt		Checklist	1	2609-2609

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3310C	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3310D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Therapy Services Billed - Medicaid Resident received therapy services (i.e., PT, OT, ST) during the 7 day look back and these services were billed to the following (check all that apply)	Asmt		Checklist	1	2610-2610

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3310D	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3310Y

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Therapy Services Billed - Other Resident received therapy services (i.e., PT, OT, ST) during the 7 day look back and these services were billed to the following (check all that apply)	Asmt		Checklist	1	2611-2611

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3310Y	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3310Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Therapy Services Billed - None Of The Above Resident received therapy services (i.e., PT, OT, ST) during the 7 day look back and these services were billed to the following (check all that apply)	Asmt		Checklist	1	2612-2612

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3310Z	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3315A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
COPD Treatment - Oxygen Resident has an active diagnosis of COPD and received one or more of the following during the 7 day look back. (Check all that apply.)	Asmt		Checklist	1	2613-2613

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3315A	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3315B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
COPD Treatment - Inhaler/Nebulizer Resident has an active diagnosis of COPD and received one or more of the following during the 7 day look back. (Check all that apply.)	Asmt		Checklist	1	2614-2614

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3315B	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3315C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
COPD Treatment - Acute Monitoring Of Respiratory Resident has an active diagnosis of COPD and received one or more of the following during the 7 day look back. (Check all that apply.)	Asmt		Checklist	1	2615-2615

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3315C	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3315D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
COPD Treatment - Medications Resident has an active diagnosis of COPD and received one or more of the following during the 7 day look back. (Check all that apply.)	Asmt		Checklist	1	2616-2616

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3315D	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3315Y

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
COPD Treatment - Other Resident has an active diagnosis of COPD and received one or more of the following during the 7 day look back. (Check all that apply.)	Asmt		Checklist	1	2617-2617

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3315Y	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S3315Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
COPD Treatment - None Of The Above Resident has an active diagnosis of COPD and received one or more of the following during the 7 day look back. (Check all that apply.)	Asmt		Checklist	1	2618-2618

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S3315Z	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4000A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Harm: Self Injury/Self-injurious attempt Harm to Self or Others: Self Injury Self-injurious attempt (Code for most recent instance)	Asmt		Code	1	2102-2102

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Never
1		Attempt more than 1 year ago
2		Attempt in the last year
3		Attempt in the last 7 days
4		Attempt within last 3 days

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4000B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Harm: Attempt was to kill self	Asmt		Code	1	2103-2103
Harm to Self or Others: Self Injury Intent of any self-injurious attempt was to kill him/herself					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4000C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Harm: Considered injuring self	Asmt		Code	1	2104-2104
Harm to Self or Others: Self Injury Considered performing a self-injurious act in the last 30 days					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4000D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Harm: Self-injury caregiver concern	Asmt		Code	1	2105-2105
Harm to Self or Others: Self Injury					
Family/caregiver/friend/staff expresses concern that resident is at risk for self injury					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4010A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Hourly Interval Observation	Asmt		Number	1	2106-2106
Close or Constant Observation: Number of days of the following type of supervision in the last 3 days. If none, code "0". A. Checked at hourly intervals					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
3		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4010B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
15- Min. Interval Observation Close or Constant Observation: Number of days of the following type of supervision in the last 3 days. If none, code "0". B. Checked at 15-minute intervals	Asmt		Number	1	2107-2107

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
3		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4010C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
5- Min. Interval Observation Close or Constant Observation: Number of days of the following type of supervision in the last 3 days. If none, code "0". C. Checked at 5-minute intervals	Asmt		Number	1	2108-2108

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
3		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4010D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Constant Observation for < 1 hr Close or Constant Observation: Number of days of the following type of supervision in the last 3 days. If none, code "0". D. Constant Observation for less than or equal to 1 hour	Asmt		Number	1	2109-2109

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
3		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4010E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Constant Observation for > 1 hr Close or Constant Observation: Number of days of the following type of supervision in the last 3 days. If none, code "0". E. Constant Observation for more than 1 hour	Asmt		Number	1	2110-2110

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
3		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4500

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Substance Abuse: Alcoholic Drinks Substance Abuse & Excessive Behaviors: Alcohol - code for the highest number of drinks in any single sitting episode in the last 14 days	Asmt		Code	1	2111-2111

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		One
2		Two to four
3		Five or more

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4510A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Substance Abuse: Inhalants	Asmt		Code	1	2112-2112
Substance Abuse & Excessive Behaviors: Substance abuse time since any use of the following substance: a. Inhalants					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Never or more than one year ago
1		Within the last year
2		Within the last 3 months
3		Within the last month
4		Within the last 7 days
5		Within the last 3 days

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4510B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Substance Abuse: Hallucinogens	Asmt		Code	1	2113-2113
Substance Abuse & Excessive Behaviors: Substance abuse time since any use of the following substance: b. Hallucinogens					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Never or more than one year ago
1		Within the last year
2		Within the last 3 months
3		Within the last month
4		Within the last 7 days
5		Within the last 3 days

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4510C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Substance Abuse: Cocaine and Crack	Asmt		Code	1	2114-2114
Substance Abuse & Excessive Behaviors: Substance abuse time since any use of the following substance: c. Cocaine and crack					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Never or more than one year ago
1		Within the last year
2		Within the last 3 months
3		Within the last month
4		Within the last 7 days
5		Within the last 3 days

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4510D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Substance Abuse: Stimulants	Asmt		Code	1	2115-2115
Substance Abuse & Excessive Behaviors: Substance abuse time since any use of the following substance: d. Stimulants					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Never or more than one year ago
1		Within the last year
2		Within the last 3 months
3		Within the last month
4		Within the last 7 days
5		Within the last 3 days

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4510E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Substance Abuse: Opiates	Asmt		Code	1	2116-2116
Substance Abuse & Excessive Behaviors: Substance abuse time since any use of the following substance: e. Opiates					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Never or more than one year ago
1		Within the last year
2		Within the last 3 months
3		Within the last month
4		Within the last 7 days
5		Within the last 3 days

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S4510F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Substance Abuse: Cannabis	Asmt		Code	1	2117-2117
Substance Abuse & Excessive Behaviors: Substance abuse time since any use of the following substance: f. Cannabis					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Never or more than one year ago
1		Within the last year
2		Within the last 3 months
3		Within the last month
4		Within the last 7 days
5		Within the last 3 days

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5000

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Number of New Pressure Ulcers	Asmt		Number	1	2118-2118
Pressure Ulcers: Number of new or reoccurring pressure ulcers during last quarter (if 9 or more, enter 9)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
9		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5005

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
New Pressure Ulcer setting Pressure Ulcers: In what setting did the pressure ulcers in S5000 develop?	Asmt		Code	1	2119-2119

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		None
1		Inhouse
2		Other
3		Both

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010A1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 1 location	Asmt		Code	2	2120-2121
Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): A1. Location of pressure ulcer 1					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010A2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 1 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): A2. Status of pressure ulcer 1	Asmt		Code	1	2122-2122

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increased depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010B1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 2 location	Asmt		Code	2	2123-2124
Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): B1. Location of pressure ulcer 2					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010B2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 2 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): B2. Status of pressure ulcer 2	Asmt		Code	1	2125-2125

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increased depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010C1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 3 location	Asmt		Code	2	2126-2127
Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): C1. Location of pressure ulcer 3					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010C2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 3 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): C2. Status of pressure ulcer 3	Asmt		Code	1	2128-2128

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increased depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010D1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 4 location Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): D1. Location of pressure ulcer 4	Asmt		Code	2	2129-2130

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010D2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 4 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): D2. Status of pressure ulcer 4	Asmt		Code	1	2131-2131

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increase depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010E1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 5 location Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): E1. Location of pressure ulcer 5	Asmt		Code	2	2132-2133

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010E2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 5 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): E2. Status of pressure ulcer 5	Asmt		Code	1	2134-2134

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increased depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010F1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 6 location	Asmt		Code	2	2135-2136
Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): F1. Location of pressure ulcer 6					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010F2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 6 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): F2. Status of pressure ulcer 6	Asmt		Code	1	2137-2137

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increased depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010G1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 7 location Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): G1. Location of pressure ulcer 7	Asmt		Code	2	2138-2139

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010G2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 7 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): G2. Status of pressure ulcer 7	Asmt		Code	1	2140-2140

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increased depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010H1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 8 location Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): H1. Location of pressure ulcer 8	Asmt		Code	2	2141-2142

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010H2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 8 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): H2. Status of pressure ulcer 8	Asmt		Code	1	2143-2143

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increased depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010I1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 9 location	Asmt		Code	2	2144-2145
Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): I1. Location of pressure ulcer 9					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
01		Spine - Left
02		Spine - Right
03		Spine - Center
04		Coccyx - Left
05		Coccyx - Right
06		Coccyx - Center
07		Sacrum - Left
08		Sacrum - Right
09		Sacrum - Center
10		Buttock - Left
11		Buttock - Right
12		Buttock - Center
13		Trochanter - Left
14		Trochanter - Right
15		Trochanter - Center
16		Ischium - Left
17		Ischium - Right
18		Ischium - Center
19		Knee - Left
20		Knee - Right
21		Knee - Center
22		Ankle - Left
23		Ankle - Right
24		Ankle - Center
25		Heel - Left

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

26	Heel - Right
27	Heel - Center
28	Foot - Left
29	Foot - Right
30	Foot - Center
99	Other
^	Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S5010I2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Pressure ulcer 9 status Pressure Ulcers: Location and Status of existing pressure ulcers (if more than 9 ulcers, record the 9 largest): I2. Status of pressure ulcer 9	Asmt		Code	1	2146-2146

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No change
1		Decreased depth
2		Decreased area
3		Decreased depth and area
4		Increased depth
5		Increased area
6		Increased depth and area
7		Decreased depth, increased area
8		Increased depth, decreased area
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6000

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Parenteral/IV feeding in NH Within the last 7 days, Parenteral/IV feeding was provided and administered in and by the nursing home	Asmt		Code	1	2147-2147

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6005

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IV meds in NH Within the last 14 days, IV medication was provided, administered, and instilled exclusively in and by the nursing home	Asmt		Code	1	2148-2148

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6010

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Oxygen Therapy in NH Within the last 14 days, oxygen therapy was provided within the facility continuously for a period of 2 hours or more, or intermittently with starting and stopping at intervals	Asmt		Code	1	2149-2149

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6020A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp specialized RN expertise	Asmt		Checklist	1	2582-2582
Ventilator/respirator resident needs specialized RN expertise					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6020B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp specialized CNA training needed	Asmt		Checklist	1	2583-2583
Ventilator/respirator resident needs specialized CNA training					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6020C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp specialized therapy (PT,OT,RT) expertise Ventilator/respirator resident needs specialized therapy (PT, OT, RT) expertise	Asmt		Checklist	1	2584-2584

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6020D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp specialized equipment	Asmt		Checklist	1	2585-2585
Ventilator/respirator resident needs specialized equipment					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6020Y

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp Other Ventilator/respirator resident needs other	Asmt		Checklist	1	2586-2586

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6020Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp None of the Above	Asmt		Checklist	1	2587-2587
Ventilator/respirator resident needs none of the above					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6022A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days licensed nurse: hourly intervals Number of days the resident required hourly intervals of direct care by a licensed nurse.	Asmt		Number	1	2588-2588

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6022B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days licensed nurse: 15-minute intervals Number of days the resident required 15-minute intervals of direct care by a licensed nurse.	Asmt		Number	1	2589-2589

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6022C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days licensed nurse: 5-minute intervals Number of days the resident required 5-minute intervals of direct care by a licensed nurse.	Asmt		Number	1	2590-2590

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6023A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days CNA: hourly intervals Number of days the resident required hourly intervals of direct care by a CNA.	Asmt		Number	1	2591-2591

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6023B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days CNA: 15-minute intervals Number of days the resident required 15-minute intervals of direct care by a CNA.	Asmt		Number	1	2592-2592

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6023C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days CNA: 5-minute intervals Number of days the resident required 5-minute intervals of direct care by a CNA.	Asmt		Number	1	2593-2593

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6024A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days RT: hourly intervals Number of days the resident required hourly intervals of direct care by a respiratory therapist.	Asmt		Number	1	2594-2594

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6024B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days RT: 15-minute intervals Number of days the resident required 15-minute intervals of direct care by a respiratory therapist.	Asmt		Number	1	2595-2595

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6024C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vent/resp days RT: 5-minute intervals Number of days the resident required 5-minute intervals of direct care by a respiratory therapist.	Asmt		Number	1	2596-2596

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
7		Maximum value
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6050

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Isolation precautions needed Has resident required any type of isolation precautions since admission or the previous assessment other than standard/universal precautions?	Asmt		Code	1	2150-2150

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6051A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Isolation Precaution: Airborne If yes to item S6050, type of isolation precautions employed: a. Airborne	Asmt		Checklist	1	2151-2151

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6051B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Isolation Precaution: Contact If yes to item S6050, type of isolation precautions employed: b. Contact	Asmt		Checklist	1	2152-2152

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6051C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Isolation Precaution: Droplet If yes to item S6050, type of isolation precautions employed: c. Droplet	Asmt		Checklist	1	2153-2153

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6051D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Isolation Precaution: Protective If yes to item S6050, type of isolation precautions employed: d. Protective	Asmt		Checklist	1	2154-2154

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6052

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Isolation Required Resident required isolation procedures and was assigned a private room and did not leave the room except for medical treatments/procedures. If "Yes", then entry below must contain Start/End Dates.	Asmt		Code	1	2619-2619

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S6052	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6053A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Met Isolation Requirements Start Date	Asmt		Date	8	2620-2627
Resident met the isolation requirements Start Date					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		Valid date
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S6053A	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6053B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Met Isolation Requirements End Date	Asmt		Date	8	2628-2635
Resident met the isolation requirements End Date					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		Valid date
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S6053B	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: Varicella	Asmt		Checklist	1	2155-2155
Vaccinations : Indicate if the following vaccination is current:					
a. Varicella (Herpes Zoster or shingles)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: Tetanus, diphtheria (Td) Vaccinations: Indicate if the following the vaccination is current: b. Tetanus, diphtheria (Td)	Asmt		Checklist	1	2156-2156

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: Tetanus, diphtheria, pertussis (Tdap) Vaccinations: Indicate if the following vaccination is current: c. Tetanus, diphtheria, pertussis (Tdap)	Asmt		Checklist	1	2157-2157

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: Measles, Mumps, Rubella (MMR) Vaccinations: Indicate if the following vaccination is current: d. Measles, mumps, rubella (MMR)	Asmt		Checklist	1	2158-2158

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: Other	Asmt		Checklist	1	2159-2159
Vaccinations: Indicate vaccinations that are current, excluding pneumococcal, seasonal influenza, and S6100A - S6100D. e. Other					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100F1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: Other Name 1	Asmt		Text	20	2160-2179
Vaccinations: If other vaccination is checked, please specify name					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Other Vaccination 1 Name

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100F2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: Other Name 2	Asmt		Text	20	2180-2199
Vaccinations: If other vaccination is checked, please specify name					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Other Vaccination 2 Name

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100F3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: Other Name 3 Vaccinations: If other vaccination is checked, please specify name	Asmt		Text	20	2200-2219

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Other Vaccination 3 Name

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6100Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Vaccination: None of the above Vaccinations: Indicate the vaccinations that are current z. None of the above	Asmt		Checklist	1	2220-2220

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6200

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Number of Hospital Stays Hospital Stay(s): Record number of times resident was admitted to hospital with an overnight stay in the last 90 days (or since last assessment if less than 90 days). Enter 0 if no hospital admissions.	Asmt		Number	2	2221-2222

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
90		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6201

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Number of Unreported Hospital Stays Record previously unreported number of times resident was admitted to hospital with an overnight stay in the last 92 days. Enter '0' if no hospital admissions.	Asmt		Number	2	2636-2637

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
00		Minimum value
99		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S6201	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6205

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Number of Observation Stays Observation Stays: Record number of times resident had at least one overnight stay without being admitted to the hospital since the last assessment.	Asmt		Number	1	2597-2597

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
9		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6210

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Number of ER visits Emergency Room (ER) visit(s): Record number of times resident visited ER without an overnight stay in last 90 days (or since last assessment if less than 90 days). Enter 0 if no ER visits.	Asmt		Number	3	2223-2225

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Minimum value
999		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6211

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Number of Unreported ER Visits Record previously unreported number of times resident visited ER without an overnight stay in the last 92 days. Enter '0' if no ER visits.	Asmt		Number	3	2638-2640

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
000		Minimum value
999		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S6211	[V2.00.0]-New item.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6220

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Alzheimer's/Dementia Special Care Unit Alzheimer's/Dementia Special Care Unit-Program provided while a resident of this facility within the last 14 days	Asmt		Code	1	2226-2226

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6230

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Has resident received antipsychotic Has this resident received an antipsychotic medication since the ARD of the last OBRA assessment, or, if this is an admission assessment, since the Entry Date (A1600)?	Asmt		Code	1	2553-2553

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6232

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Is resident currently receiving antipsychotic Is the resident currently receiving an antipsychotic medication?	Asmt		Code	1	2554-2554

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6234

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Attempt to reduce amount of antipsychotic Has an attempt been made to reduce the total amount of antipsychotic medication the resident receives since the ARD of the last OBRA assessment, or, if this is an admission assessment, since the Entry Date (A1600)?	Asmt		Code	1	2555-2555

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S6236

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Was reduction in antipsychotic maintained Was the reduction in the total amount of antipsychotic medication that the resident receives maintained?	Asmt		Code	1	2556-2556

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S7000

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Dental Care	Asmt		Code	1	2598-2598
Dental care					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Routine dental care since last assessment
2		Emergent dental care since last assessment
9		None of the above

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000A1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare - Primary Payor Medicare - Primary Payor	Asmt		Checklist	1	2227-2227

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000A2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare - Secondary Payor Medicare - Secondary Payor	Asmt		Checklist	1	2228-2228

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000A3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Payor Medicare	Asmt		Checklist	1	2229-2229

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000B1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part A - Primary Payor Medicare Part A - Primary Payor	Asmt		Checklist	1	2230-2230

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000B2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part A - Secondary Payor Medicare Part A - Secondary Payor	Asmt		Checklist	1	2231-2231

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000B3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part A Payor Medicare Part A	Asmt		Checklist	1	2232-2232

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000C1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part B - Primary Payor Medicare Part B - Primary Payor	Asmt		Checklist	1	2233-2233

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000C2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part B - Secondary Payor Medicare Part B - Secondary Payor	Asmt		Checklist	1	2234-2234

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000C3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part B Payor Medicare Part B	Asmt		Checklist	1	2235-2235

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000D1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part C - Primary Payor	Asmt		Checklist	1	2236-2236
Medicare Part C (Medicare Advantage) - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000D2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part C - Secondary Payor	Asmt		Checklist	1	2237-2237
Medicare Part C (Medicare Advantage) - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000D3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Part C Payor Medicare Part C (Medicare Advantage)	Asmt		Checklist	1	2238-2238

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000E1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare per diem - Primary Payor Medicare per diem - Primary Payor	Asmt		Checklist	1	2239-2239

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000E2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare per diem - Secondary Payor Medicare per diem - Secondary Payor	Asmt		Checklist	1	2240-2240

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000E3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare per diem Payor Medicare per diem	Asmt		Checklist	1	2241-2241

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8000Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare not a payment source	Asmt		Checklist	1	2242-2242
Medicare not a payment source					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010A1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
In-state Medicaid - Primary Payor In-state Medicaid - Primary Payor	Asmt		Checklist	1	2243-2243

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010A2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
In-state Medicaid - Secondary Payor	Asmt		Checklist	1	2244-2244
In-state Medicaid - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010A3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
In-state Medicaid payor In-state Medicaid	Asmt		Checklist	1	2245-2245

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010B1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Out-of-state Medicaid - Primary Payor	Asmt		Checklist	1	2246-2246
Out-of-state Medicaid - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010B2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Out-of-state Medicaid - Secondary Payor	Asmt		Checklist	1	2247-2247
Out-of-state Medicaid - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010B3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Out-of-state Medicaid Payor Out-of-state Medicaid	Asmt		Checklist	1	2248-2248

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010C1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid per diem - Primary Payor Medicaid per diem - Primary Payor	Asmt		Checklist	1	2249-2249

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010C2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid per diem - Secondary Payor Medicaid per diem - Secondary Payor	Asmt		Checklist	1	2250-2250

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010C3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid per diem Payor Medicaid per diem	Asmt		Checklist	1	2251-2251

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010D1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid managed care per diem - Primary Payor	Asmt		Checklist	1	2252-2252
Medicaid managed care per diem - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010D2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid managed care per diem - Secondary Payor Medicaid managed care per diem - Secondary Payor	Asmt		Checklist	1	2253-2253

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010D3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid managed care per diem Payor Medicaid managed care per diem	Asmt		Checklist	1	2254-2254

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010E1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid per diem (not MC) - Primary Payor	Asmt		Checklist	1	2255-2255
Medicaid per diem (not managed care) - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010E2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid per diem (not MC) - Secondary Payor	Asmt		Checklist	1	2256-2256
Medicaid per diem (not managed care) - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010E3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid per diem (not MC) Payor Medicaid per diem (not managed care)	Asmt		Checklist	1	2257-2257

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid per diem type Type of Medicaid per Diem	Asmt		Code	1	2531-2531

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Medicaid managed care per diem
2		Medicaid per diem (not managed care)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010F1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Resident Liability - Primary Payor	Asmt		Checklist	1	2258-2258
Medicaid Resident Liability - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010F2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Resident Liability - Secondary Payor	Asmt		Checklist	1	2259-2259
Medicaid Resident Liability - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010F3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Resident Liability Payor Medicaid Resident Liability	Asmt		Checklist	1	2260-2260

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010G

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid state source Medicaid State Source	Asmt		Code	1	2532-2532

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		In-state Medicaid
2		Out-of-state Medicaid
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010G1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Co-Pay - Primary Payor	Asmt		Checklist	1	2261-2261
Medicare Co-pay - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010G2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Co-pay - Secondary Payor	Asmt		Checklist	1	2262-2262
Medicare Co-pay - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010G3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicare Co-pay Payor Medicare Co-pay	Asmt		Checklist	1	2263-2263

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010H1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Picture Date reporting Check this item if the assessment is a Discharge Return Anticipated assessment AND is to be used as a Discharge Return Not Anticipated for Picture Date reporting requirements	Asmt		Checklist	1	2264-2264

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010H2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Other - Secondary Payor Medicaid Other - Secondary Payor	Asmt		Checklist	1	2265-2265

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010H3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Other Payor Medicaid Other	Asmt		Checklist	1	2266-2266

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010I1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Pending - Primary Payor	Asmt		Checklist	1	2267-2267
Medicaid Pending - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010I2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Pending - Secondary Payor	Asmt		Checklist	1	2268-2268
Medicaid Pending - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010I3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Pending Payor Medicaid Pending	Asmt		Checklist	1	2269-2269

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8010Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid not a payment source	Asmt		Checklist	1	2270-2270
Medicaid not a payment source					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020A1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private - Primary Payor	Asmt		Checklist	1	2271-2271
Private - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020A2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private - Secondary Payor Private - Secondary Payor	Asmt		Checklist	1	2272-2272

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020A3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private Payor Private	Asmt		Checklist	1	2273-2273

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020B1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private per diem - Primary Payor	Asmt		Checklist	1	2274-2274
Private per diem (including co-pay) - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020B2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private per diem - Secondary Payor	Asmt		Checklist	1	2275-2275
Private per diem (including co-pay) - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020B3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private per diem Payor Private per diem (including co-pay)	Asmt		Checklist	1	2276-2276

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020C1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private LTC insurance policy - Primary Payor	Asmt		Checklist	1	2277-2277
Private LTC insurance policy - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020C2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private LTC insurance policy - Secondary Payor Private LTC insurance policy - Secondary Payor	Asmt		Checklist	1	2278-2278

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020C3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private LTC insurance policy Private LTC insurance policy	Asmt		Checklist	1	2279-2279

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8020Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Private insurance not a payment source	Asmt		Checklist	1	2280-2280
Private insurance not a payment source					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8030A1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Self-pay - Primary Payor Self-pay - Primary Payor	Asmt		Checklist	1	2281-2281

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8030A2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Self-pay - Secondary Payor Self-pay - Secondary Payor	Asmt		Checklist	1	2282-2282

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8030A3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Self-pay Payor Self-pay	Asmt		Checklist	1	2283-2283

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8030B1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Family pay - Primary Payor Family pay - Primary Payor	Asmt		Checklist	1	2284-2284

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8030B2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Family pay - Secondary Payor Family pay - Secondary Payor	Asmt		Checklist	1	2285-2285

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8030B3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Family pay Payor Family pay	Asmt		Checklist	1	2286-2286

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8030C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Self or Family pay for full per diem	Asmt		Checklist	1	2287-2287
Self or family pay for full per diem					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8030Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Self or Family not a payment source	Asmt		Checklist	1	2288-2288
Self or family not a payment source					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040A1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
State Run Medical Assistance - Primary Payor	Asmt		Checklist	1	2289-2289
State Run Medical Assistance - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040A2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
State Run Medical Assistance - Secondary Payor State Run Medical Assistance - Secondary Payor	Asmt		Checklist	1	2290-2290

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040A3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
State Run Medical Assistance Payor State Run Medical Assistance	Asmt		Checklist	1	2291-2291

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040B1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Tricare per diem - Primary Payor	Asmt		Checklist	1	2292-2292
Tricare per diem - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040B2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Tricare per diem - Secondary Payor	Asmt		Checklist	1	2293-2293
Tricare per diem - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040B3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Tricare per diem Payor Tricare per diem	Asmt		Checklist	1	2294-2294

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040C1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
VA per diem - Primary Payor	Asmt		Checklist	1	2295-2295
VA per diem - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040C2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
VA per diem - Secondary Payor	Asmt		Checklist	1	2296-2296
VA per diem - Secondary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040C3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
VA per diem Payor VA per diem	Asmt		Checklist	1	2297-2297

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040D1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other Public - Primary Payor Other public - Primary Payor	Asmt		Checklist	1	2298-2298

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040D2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other Public - Secondary Payor Other public - Secondary Payor	Asmt		Checklist	1	2299-2299

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040D3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other Public Payor Other public	Asmt		Checklist	1	2300-2300

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8040Z

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other government not a payment source	Asmt		Checklist	1	2301-2301
Other government not a payment source					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8050A1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other - Primary Payor	Asmt		Checklist	1	2302-2302
Other - Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8050A2

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other - Secondary Payor Other - Secondary Payor	Asmt		Checklist	1	2303-2303

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8050A3

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other Payor Other	Asmt		Checklist	1	2304-2304

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8050B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other Payor Name 1 Other Name 1	Asmt		Text	30	2305-2334

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Other Payor Name 1

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8050C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other Payor Name 2 Other Name 2	Asmt		Text	30	2335-2364

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Other Payor Name 2

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8050D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Other Payor Name 3 Other Name 3	Asmt		Text	30	2365-2394

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		Other Payor Name 3

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8055

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Primary payor	Asmt		Code	1	2533-2533
Primary Payor					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Medicare
2		Medicaid
3		Medicaid Pending
4		Medicaid Managed Care
5		Managed Long Term Care
9		None of the above

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8099

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Payor: None of the Above None of the Above	Asmt		Checklist	1	2395-2395

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8500

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid begin date	Asmt		Date	8	2396-2403
Date Medicaid Coverage Began - If applicable, enter date					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		Medicaid Coverage Begin Date
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8510A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Therapeutic bed-hold days since last asmt Number of therapeutic bed-hold days paid by Medicaid since the last assessment	Asmt		Number	2	2557-2558

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
00		Minimum value
99		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8510B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Therapeutic bed-hold days - YTD Number of therapeutic bed-hold days paid by Medicaid year-to-date	Asmt		Number	2	2559-2560

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
00		Minimum value
99		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8512A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid hospital bed-hold days since last asmt	Asmt		Number	2	2561-2562
Number of hospital bed-hold days paid by Medicaid since last assessment					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
00		Minimum value
99		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8512B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid hospital bed-hold days - YTD Number of hospital bed-hold days paid by Medicaid year-to-date	Asmt		Number	2	2563-2564

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
00		Minimum value
99		Maximum value

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8520A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Leave Days Type 1	Asmt		Code	1	2408-2408
Leave Days for Medicaid (Bed-Hold days) Type 1					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
H		Hospital
T		Therapeutic
D		Deletion Request

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8520B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Leave Days for Medicaid begin date 1	Asmt		Date	8	2409-2416
Leave Days for Medicaid (Bed-Hold days) Leave Period Begin Date 1					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		Leave Days for Medicaid Begin Date Type 1

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8520C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Leave Days for Medicaid end date 1	Asmt		Date	8	2417-2424
Leave Days for Medicaid (Bed-Hold days) Leave Period End Date 1					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		Leave Days for Medicaid End Date Type 1
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8521A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Medicaid Leave Days Type 2	Asmt		Code	1	2425-2425
Leave Days for Medicaid (Bed-Hold days) Type 2					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
H		Hospital
T		Therapeutic
D		Deletion Request

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8521B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Leave Days for Medicaid begin date 2	Asmt		Date	8	2426-2433
Leave Days for Medicaid (Bed-Hold days) Leave Period Begin Date 2					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		Leave Days for Medicaid Begin Date Type 2

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S8521C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Leave Days for Medicaid end date 2	Asmt		Date	8	2434-2441
Leave Days for Medicaid (Bed-Hold days) Leave Period End Date 2					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		Leave Days for Medicaid End Date Type 2

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9000

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL Skills Training IL - Skills Training. Skills Training was provided in accordance with Illinois DPH Section 300.4050 a) 1) A - D and 300.4050 a) 3) and Illinois DPA Section 147, Table A	Asmt		Code	1	2442-2442

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9001

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S criteria	Asmt		Code	1	2443-2443
IL - Does resident meet Illinois IDPH Subpart S criteria					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Schizophrenia IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: a. Schizophrenia	Asmt		Checklist	1	2444-2444

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Delusional disorder IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: b. Delusional disorder	Asmt		Checklist	1	2445-2445

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Schizoaffective disorder IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: c. Schizoaffective disorder	Asmt		Checklist	1	2446-2446

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S:Psychotic disorder not specified IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: d. Psychotic disorder not otherwise specified	Asmt		Checklist	1	2447-2447

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Bipolar I mixed, manic, & depr IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: e. Bipolar I mixed, manic, and depressed	Asmt		Checklist	1	2448-2448

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Bipolar disorder II IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: f. Bipolar disorder II	Asmt		Checklist	1	2449-2449

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002G

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Cyclothymic disorder IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: g. Cyclothymic disorder	Asmt		Checklist	1	2450-2450

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002H

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Bipolar disorder not specified IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: h. Bipolar disorder not otherwise specified	Asmt		Checklist	1	2451-2451

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9002I

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Major depression, recurrent IL - If answered Yes to S9001, proceed with psychiatric service items below. If answered No, do not proceed. Check all that apply: i. Major depression, recurrent	Asmt		Checklist	1	2452-2452

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9003

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
IL IDPH Subpart S: Ancillary IL - Ancillary Provider Services. Does resident receive direct services delivered by non-facility providers to meet requirements of Illinois Subpart S? (exclude only medical/psychiatric management by primary psychiatrist/physician)	Asmt		Code	1	2453-2453

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9020

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
FL FRAES number	Asmt		Text	8	2454-2461
FL -Florida Facility FRAES number					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		FL FRAES Number

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST Does resident have a California POLST form in chart?	Asmt		Code	1	2462-2462

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST Section A	Asmt		Code	1	2463-2463
CA - Item selected in California POLST Section A					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Attempt resuscitation/CPR
2		Do not attempt resuscitation/DNR
9		Not completed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST Section B	Asmt		Code	1	2464-2464
CA - Item selected in California POLST Section B					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Comfort measures only is checked
2		Limited additional interventions is the only box checked
3		Limited additional interventions AND "Transfer to hospital only if comfort needs cannot be met in current location" are BOTH checked
4		Full Treatment is checked
9		Not completed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040C1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST Section B (revised)	Asmt		Code	1	2599-2599
CA - item selected in California POLST Section B (revised)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		"Full Treatment" is the only box checked.
2		"Full Treatment" AND "Trial Period of Full Treatment" are both checked.
3		"Selective Treatment" or "Limited Additional Interventions" is the only box checked.
4		"Selective Treatment" or "Limited Additional Interventions" AND "Transfer to hospital only if comfort needs cannot be met in current location" are checked.
5		"Comfort-Focused Treatment" or "Comfort Measures Only"
9		Not completed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST Section C	Asmt		Code	1	2465-2465
CA - item selected in California POLST Section C					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		No artificial means of nutrition, including feeding tubes
2		Trial period of artificial nutrition including feeding tubes
3		Long term artificial nutrition including feeding tubes
9		Not completed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040D1

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST Section C (revised)	Asmt		Code	1	2600-2600
CA - item selected in California POLST Section C (revised)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Long-term artificial nutrition, including feeding tubes
2		Trial period of artificial nutrition, including feeding tubes
3		No artificial means of nutrition, including feeding
9		Not completed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST D physician signature CA - POLST Section D - Signature of Physician	Asmt		Code	1	2466-2466

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040F

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST D resident signature	Asmt		Code	1	2467-2467
CA - POLST Section D - Signature by Patient or Decisionmaker					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040G

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST D discussed with patient or decisionmaker Discussed with in California POLST Section D	Asmt		Code	1	2468-2468

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Patient
2		Legally Recognized Decisionmaker
9		Not completed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9040H

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CA POLST advanced directive California POLST Section D- Advance Directive:	Asmt		Code	1	2534-2534

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Advance directive available and reviewed
2		Advance directive not available
3		No advance directive
9		Not completed

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9060

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
NY Medicaid add-on eligibility NY - Resident Eligible for enhanced Medicaid Reimbursement (Add-on) for the following condition(s). Record the appropriate approved specialty unit/facility for the resident	Asmt		Code	1	2469-2469

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		AIDS Scatter Beds
2		Traumatic Brain Injury (TBI) Extended Care
9		None of the Above

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9080A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PA MA CASE-MIX PA - Source of Payment: a. Is the resident Medical Assistance for MA CASE-MIX (see instructions)	Asmt		Code	1	2470-2470

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9080B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PA MA CASE-MIX Date PA - Source of Payment: b. Date of change to/from Medical Assistance for MA CASE-MIX	Asmt		Date	8	2471-2478

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		PA Medical Assistance Case Mix Date

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9080C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PA MA CASE-MIX Access Card Number	Asmt		Text	10	2479-2488
PA - Source of Payment: c. Recipient Number from PA ACCESS Card (must be completed if item S9080A =1)					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
Text		PA Medical Assistance Case Mix ACCESS Card Number
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9080D

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PA MA CASE-MIX MA NF Effective Date	Asmt		Date	8	2489-2496
PA - Source of Payment: d. MA NF Effective date from PA/FS					
162					

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		PA Medical Assistance Case Mix NF Effective Date
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9080E

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
PA MA CASE-MIX Day One MA PA - Source of Payment: e. Is the resident DAY ONE MA eligible	Asmt		Code	1	2497-2497

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9100A

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
VA Room & Board Payment Assessment Reference Date VA - Per Diem Reimbursement (Code for the primary source of per diem room and board reimbursement for the resident on the date indicated) Assessment Reference Date (A2300)	Asmt		Code	1	2498-2498

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Virginia Medicaid per diem
2		Virginia Medicaid Specialized Care per diem
3		Managed Care Organization reimbursement
4		Other reimbursement source

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9100B

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
VA Room & Board Payment Entry Date VA - Per Diem Reimbursement (Code for the primary source of per diem room and board reimbursement for the resident on the date indicated) Date of Entry (A1600)	Asmt		Code	1	2499-2499

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
1		Virginia Medicaid per diem
2		Virginia Medicaid Specialized Care per diem
3		Managed Care Organization reimbursement
4		Other reimbursement source

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9100C

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
VA Medicaid Room & Board initial date VA - Initial Date Medicaid Per Diem: Initial date for primary source of per diem room and board reimbursement to be Virginia Medicaid for this stay.	Asmt		Date	8	2500-2507

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
YYYYMMDD		Valid date
^		Blank (not available or unknown)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Item	S9100C	[V2.00.0]-Added [^] as a valid item value.
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9120

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
CT Approved LTC CT - If S8020C3 is checked, is the insurance a Connecticut Partnership for Long-Term Care approved policy?	Asmt		Code	1	2508-2508

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.

Data Submission Specifications for the MDS Item Set (V2.00.1)

Detailed Data Specifications Report

Section: S

Item ID: S9140

Item Label/Item Text	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Completed LAPOST Does the resident have a completed LaPOST document	Asmt		Code	1	2601-2601

Item Subsets

Active:

Inactive: SP,SS,SSD,SO,SOD,SD,ST,XX

State optional: NC,NQ,NP,NS,NSD,NO,NOD,ND,NT,NPE

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3808	Format	Warning	When this Section S item is required by a State, it should equal one of the valid values indicated in the data specifications for that item. Note that for numeric items, signed numbers (with a leading plus or minus sign) should not be submitted.

Version Changes

Type	ID	Description
Format	-3808	[V2.00.0]-Added mappings to new items S0509, S1002-S1004, S1150, S3310A-S3310D, S3310Y, S3310Z, S3315A-S3315D, S3315Y, S3315Z, S6052, S6053A, S6053B, S6201, S6211.