MDS Monthly Conference Call, 5/26/2015, 10-10:30a

Topic: *Understanding Validation Reports; Warnings & Errors; Correction Issues*

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Validation Reports

Validation reports confirm the acceptance or rejection of the data file and the acceptance or rejection of individual MDS assessments.

Refer to the CASPER Reporting Provider User's Guide for more information about the Final Validation reports that are available to nursing homes (NH) The NH Final Validation Report is covered in Section 20. To access the CASPER Reporting Provider User's Guide, select the section of interest from the *CASPER Reporting User's Manual* drop-down list of links found on the **CMS MDS System Welcome** page or the **CMS MDS 3.0 System Welcome** page.

When your submission status is completed, review the system generated MDS 3.0 NH Final Validation Report to verify that all records processed without error.

The Final Validation report provides a detailed account of the errors found during the validation of the records in the submitted MDS file.

Final Validation Reports are available for 60 days in your facility's shared validation report (VR) folder, after which time they are purged.

MDS 3.0 Errors and Warnings

After you successfully submit your data file, a validation report will be created and placed in CASPER. Your logon information (username and password) are the same for CASPER as they are for the CMS MDS website. Instructions for how to log into CASPER and read your MDS 3.0 validation report can be found in the MDS 3.0 Provider User's Guide, Section 4 on the QTSO MDS 3.0 page.

If your data file is accepted, use the Validation Report to review errors and warnings in your MDS assessments. A description of error and warning messages, along with tips for correcting them, can be found in the MDS 3.0 Provider User's Guide, Section 5 on the QTSO MDS 3.0 page. Fix incorrect data in MDS assessments that receive errors or warnings on the Validation Report and resend them, if necessary. We will review how to correct your data later in the call.

If your data file is rejected, contact your MDS software vendor.

MDS 3.0 FILE PROCESSING ERROR MESSAGES:

Within 24 hours of the successful submission of a file, the MDS 3.0 Submission system processes the file and automatically produces a Final Validation Report detailing the errors, if any, that were encountered in the submitted records. This Final Validation Report is available to you in the CASPER Reporting application.

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

Invalid Zip file format
- Empty Zip file
- Invalid XML file format
- Provider authorization conflicts (user doesn't have authority to submit for facility in record; Facility ID is null or an invalid value)
- Missing or invalid Provider Type Code
- Missing or invalid State Code
- Missing or invalid Transaction Type Code
- Missing or invalid A0310A, A0310B, A0310C, A0310D, A0310F values
- Missing or Invalid A0410 value
- Missing or invalid ISC
- Missing or invalid Production/Test Indicator
- Missing or invalid Discharge Date if it is used to determine the target date for the record
- Missing or invalid Entry Date if it is used to determine the target date for the record
- Missing or invalid Assessment Reference Date if it is used to determine the target date for the record
- Missing or invalid Attestation Date for modification and inactivation records
- Duplicate record

No matching record – unable to locate the active record to be corrected or inactivated
- Record submitted with a target date prior to the implementation date of MDS 3.0, 10/01/2010
- Submitted correction or inactivation record with a correction number that is not the next incremented number from the current record in the ASAP database

• Submitted correction or inactivation record with a modified target date and/or RFA value (A0310A, A0310B, A0310C, A0310D, or A0310F)

Many other conditions exist that prevent a record from being a successful submission. The Final Validation Report outlines the errors, whether fatal or simply warning, encountered in the submitted records. Each error or warning is noted on the report by its identifier.

Correct Your Data

Related topics: Validation reports | Missing assessment reports | Provider and assessment reports

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

We will talk now about issues related to MDS corrections, modifications and in-activations.

It is the responsibility of MDS coordinators and other MDS personnel to read, understand, and implement the correction policy described in the RAI Manual, Chapter 5. Please contact the state MDS Automation contact, Mark Kilburn (501-320-6260) or the State RAI Coordinator, Cecilia Vinson, cecilia.vinson@dhs.arkansas.gov if you have any questions about what you have read. Below is a list of issues that nursing facilities encounter when correcting assessments and how to address them.

Definitions

Edit: To change MDS item values without completing Section X
Modify: To complete Section X and change MDS item values in other sections
Correct with a modification: Refer to definition of Modify

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Examples of MDS 3.0 Correction Issues

How far back can facilities go to make corrections?

Currently, facilities can make corrections to MDS 3.0 records up to 36 months (3 years) back. Missing tracking records should be submitted up to 36 months back if they are discovered. The only exception to this is that Entry tracking records for entries that occurred between October and November of 2010, but were not submitted, do not have to be submitted now (according to CMS). However, all Entry tracking records for entry dates on or after December 2010 must be submitted.

What dates do I change when correcting an MDS?

- Except for item Z0400, dates do not change unless a data entry error caused them to not match the information in the clinical record. Do not update (or change) the ARD from the original date set when the RN Assessment Coordinator signed the MDS as complete, unless the original date entered into the MDS record was incorrect due to a data entry error.
- The signatures and dates in item Z0400 should be updated to reflect the most recent corrections.
- The date the RN Assessment Coordinator signed the MDS at Z0500B should not be modified, unless the date listed is not the original date that the RN signed the MDS as complete.

Does the current MDS staff really have to correct old assessments that were done by someone else?

- Yes.
- "Facilities should correct any errors necessary to insure that the information in the QIES ASAP system accurately reflects the resident's identification, location, overall clinical status, or payment status. A correction can be submitted for any accepted record, regardless of the age of the original record. A record may be corrected even if subsequent records have been accepted for the resident. Errors identified in QIES ASAP system records must be corrected within 14 days after identifying the errors." (RAI Manual page 5-10)
- It is important to correct old assessments that have incorrect data because MDS records are not only used for payment but also for quality measures, nursing facility rating, and research that uses nursing facility data.

Did you get a validation report error -3745 "No match found"?

- The first possible reason for this error is that the original MDS record was rejected, or not yet submitted, and a correction for that MDS was submitted. The solution is to delete the correction, edit the original MDS, ensure that the original MDS has the correct data, and submit it as if for the first time. Contact your software vendor if you need help with any of these steps.
- The second possible reason for this error is that the original MDS record was accepted and then the MDS record was fixed BEFORE a correction was completed. The solution is to delete the correction, change the MDS data back to the old incorrect data, complete a new correction, and THEN fix the data in the MDS. Always remember to complete the correction first (Section X) before fixing the data in the MDS assessment. Contact your software vendor if you need help with any of these steps.

Did you get a validation report error -3783 "Inconsistent X0800"?

- Each correction to an individual MDS record is assigned an incremental number, starting with 1. Your first correction for a particular MDS record will have X0800=1 and the second correction of the same MDS record will have X0800=2. Solution: Assuming the issue discussed in the second bullet is not the problem, edit the existing rejected correction, change X0800 to the appropriate number, and resend the correction as if for the first time. Do NOT start another correction until all previous corrections have been accepted.

- A mistake that some facilities make is submitting a second correction after the first correction was rejected or not properly submitted. If the first correction is not yet accepted by CMS (check the validation reports) then do not send another correction with X0800=2. Solution: Delete the second correction, edit the first correction (X0800=1) with correct information, and resubmit it.

Contact your software vendor if you need help with any of these steps.

Did you get a validation report error -1007 "Duplicate Assessment"?

- Double-check your final validation reports. Someone definitely submitted the record and it was accepted.
- If you get this error after correcting an MDS that was submitted and accepted then it is likely that you edited the MDS instead of modifying it.
- To fix this issue: edit the MDS, change the data back to the original incorrect data, and then modify the MDS. Always remember to complete the correction first (Section X) before fixing the data in the MDS assessment. Contact your software vendor if you need help with any of these steps.

Resource: Texas Department of Aging and Disability (DADS)

http://www.dads.state.tx.us/providers/mds/introduction/step6.html

In closing one of the questions I get asked frequently: "Is there a rule for how long we have to keep the validation reports that we get when submitting MDS' to the state?"

There is no official rule, However, there are a few auditing entities out there and they have access to the MDS repository, but have been known to claim the MDS' are not in the repository. If you have the validation reports to show they were submitted, they will allow you to print them and scan them.

Personally, I like to print them out, review them, and make notes on them when there are error messages recording if modifications were required, and if modifications were required and when they were completed.