Maine Department of Human Services

Minimum Data Set (MDS)
Assisted Living Services (ALS)
Electronic Data Submission Requirements
(Version 120103)

Prepare For:
Bureau of Medical Services
Maine Department of Human Services

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Minimum Data Set (MDS)
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INTRODUCTION

The following specifications detail the requirements for submission of Minimum Data Set (MDS) Assisted Living Services (ALS) (Version 120103) via electronic media to the State of Maine, Department of Human Services (DHS), Bureau of Medical Services (BMS). Working on behalf of BMS, the Muskie School of Public Service, Institute for Health Policy (IHP) at the University of Southern Maine accepts and processes the MDS-ALS data.

The MDS-ALS (Version 120103) set of forms includes the Face Sheet (Background information), the Full Assessment form, and the Discharge Tracking form. The set of forms and these specifications are available on the Muskie School Website at:

http://muskie.usm.maine.edu/mds

As of July 2004 providers of housing with assisted living services and Adult Family Care Homes, now referred to as Level III Residential Care Facilities (RCF-III) are required to collect and submit MDS-ALS information on all clients for use in quality monitoring and MaineCare reimbursement.

DATA SUBMISSION AND CERTIFICATION PROCESS

All data must be formatted according to the attached *MDS-ALS Data Submission Specifications*; in particular, Assessment, Discharge Tracking, Header and Trailer Record Specifications. These specifications are available on the Muskie School Website at:

http://muskie.usm.maine.edu/mds

Upon submission to IHP, data will be checked for adherence to these specifications. All assessment verifications and exceptions to these specifications are reported back to the facility. IHP will not format, re-code, or in any way transform data submitted electronically.

To obtain technical assistance regarding electronic testing and transmission of MDS-ALS forms, please contact:

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The data submission certification process requires that **both the vendor and the facility** be tested. The **vendor test** assures that the printed form and the Submission File meet specifications. The **facility test** verifies that the printed form and Submission File specifications are maintained once the software has been installed at the facility. In both tests, specifications for the MDS-ALS Assessment (including Face Sheet), and Discharge Tracking form are validated.

Vendor Certification

To test for electronic submission of MDS-ALS data, vendors must submit requests in writing to IHP. Each vendor must complete the electronic data submission testing process before the vendor's facilities can be tested and approved for electronic data submission. IHP will provide the vendor with a copy of the procedure, the Submission File specifications, and a sample of completed MDS-ALS Assessment and Discharge Tracking forms.

To perform the test, the vendor will be required to key in the sample data, create a Submission File from these forms, and return the Submission File to IHP, along with a copy of their computer-generated forms (both Assessment and Discharge Tracking forms) for the samples provided.

The computer-generated forms will be reviewed for compliance with the following criteria:

1. All items must be worded and punctuated exactly as they appear on the State of Maine MDS-ALS designated form.
2. All items must be in the **exact order** they appear on the State of Maine MDS-ALS designated form.

If discrepancies are found between the computer-generated forms and the MDS-ALS forms, the annotated computer-generated form will be returned to the vendor for correction. The vendor will be required to re-submit copies of the forms until they are found to be free of errors. ***Verification of the form will be performed three times without cost to the vendor. After the third review, the vendor will be assessed a $300 fee for each subsequent review.***

The sample Submission File must be submitted to IHP in accordance with Electronic Media Standards described below. Data must be accurate with respect to the original forms and corresponds to each

section of the sample forms. IHP staff will review the transmitted data for compliance with the data specifications. The review will:

1. verify file compliance with all record format specifications and edits;
2. compare the data entered and the sample form data; and
3. verify correct external labeling of media (diskettes).

The test will validate the content and accuracy of the data relative to the sample provided and will confirm adherence to the transmission specifications.

Should discrepancies be found between the submitted file and the specifications or sample assessment contents, the vendor will be notified of the errors in writing. The vendor will be required to re-submit the file once the discrepancies have been addressed. ***IHP will verify the specifications three times without cost to the vendor. After the third review, the vendor will be assessed a $300 fee for each subsequent review.***

Once the form and the electronic data transmission have been certified, the vendor will be notified in writing that the form and the electronic submission media have been accepted. The facilities serviced by the vendor may then begin testing.

Facility Certification

Each facility will be required to complete a modified certification process. The facility will submit original MDS-ALS forms completed with resident(s) in their facility, as well as the corresponding Submission File for these forms. IHP will review the form and check the Submission File for accuracy against the data specifications and against the contents of the paper forms submitted. The testing facility will be notified in writing about the results of review. When both the form and the electronic test are successful, the facility will receive written notification of certification for electronic transmission. Once certified, the facility will no longer be required to send paper forms to IHP; however, ***paper copies of the MDS-ALS form must be retained in the resident's record at the facility.***

Achieving Certification

The term "certified" applies only to electronic data submission and not to the clinical content or validity of the data contained therein. ***The clinical validity of data is the responsibility of the facility.*** Certification of a vendor or a facility may be revoked by IHP staff for identified problems with electronic data transmitted from a facility. If a facility's certification is revoked, that facility must submit paper versions of all MDS-ALS forms to IHP for processing until certification is restored. If a vendor's certification is revoked, the vendor will notify its facilities that all MDS-ALS submissions must be in paper form until the certification process is completed. The process to restore certification will depend on the severity of the error and will be determined by IHP staff.

Once certified, facilities will submit all MDS-ALS assessments via electronic transmission but need not submit paper copies of assessments. IHP staff will check records for format and content against MDS-ALS file specifications and MDS-ALS (Version 120103) edits. The facility will receive a report of the assessments received and the results of the format and edit checks. Once data are submitted from a certified facility, they will be entered into IHP databases for further processing. Facilities must submit assessments within one month of completion but may submit MDS-ALS forms electronically at any time.

FUTURE CHANGES TO MDS-ALS FORMS OR VENDOR SYSTEMS

Changes to the MDS-ALS forms and specifications or changes to the vendor's system may warrant the need to re-test a vendor. The vendor must advise IHP regarding any software changes that affect production of the MDS-ALS forms or electronic Submission File. When specification changes initiated by BMS occur, IHP will notify vendors of the date new specifications will be implemented, and IHP will provide a timetable for re-certification.

The record formats correspond to the current version of the MDS-ALS (Version 120103). The MDS-ALS form and transmission record specifications are expected to change. In the event of a change, BMS/IHP will notify facilities and vendors of alterations to the specifications. Although the MDS-ALS form and transmission record specifications are integrally linked, changes in one may not necessarily constitute a change in the other. For instance, wording changes on the MDS-ALS form may not require that changes be made to the transmission specifications. Conversely, changes in the specifications could occur without corresponding changes to the form. For this reason, form versions and dates will appear in the footer of all pages of the specifications.

ELECTRONIC SUBMISSION SPECIFICATIONS

Electronic File Requirements

The electronic data file must adhere to the following naming and formatting conventions. The file name must begin with the letters MDSALS and may contain any subsequent alphanumeric combination. The file extension must reflect the file type—i.e., as a text file, the extension must be ".txt". The data file begins with the header (A1) record and ends with the trailer (Z1) record. Any mixture of data records (Assessment and Discharge Tracking forms) can follow the header record. The trailer record is the last record in the file and must count the number of records in the Submission File including the header and trailer records (e.g., the total number of data records plus two).

Record Submission Format

All MDS-ALS data will be submitted in 1500 byte long ASCII records followed by an end of line character ("%"), carriage return (ASCII Decimal Character 13), and line feed (ASCII Decimal Character 10), for a total record length of 1503.

The transmission record layout consists of five types of records:

1. (A1) The Header record signals the start of the file as well as its location and occurs once in the file;
2. (B1) The Assessment record contains a complete assessment and occurs multiple times in the file;
3. (D1) The Discharge Tracking record contains discharge information; and
4. (Z1) The Trailing record signals the end of the file, the number of records contained in the file, and occurs once in the file. The record count should include the number of data records (both assessment and discharge) plus 2 (one for the header and one for the trailer).

Assessment (B1) and Discharge (D1) records may be submitted in any order within the file. However, the Header (A1) and Footer (Z1) records must always be the first and last records, respectively.

CONTENTS OF THE DATA SPECIFICATIONS DOCUMENTS

In these data specifications, a separate entry is made for each field in the MDS-ALS data record layout. A line delineates the field descriptions. The types of information contained in each description include:

1. **Order** – The field placement order in the record layout.
2. **Field** – The standard label for the field (e.g., rec_id).
3. **Picture** – The basic formatting information for the field. A picture of "A1" indicates a single alphanumeric character, while "A2" indicates two alphanumeric characters. A picture of YYYYMMDD is used for date fields indicating year (including century), month, and day format.
4. **Description** – Briefly describes the referenced item.
5. **Length** – The length of the fields in characters (bytes).
6. **Start** – The starting position for the field in the data record.
7. **End** – The ending position for the field in the data record.
8. **Values** – If applicable, lists the permissible values for the field. If the field does not contain a value listed, a warning message is generated. The "-" is used when the answer is unknown and will usually correspond to a circled dash appearing on a hand written copy of the MDS-ALS form.
9. **Notes** – The notes field contains other information pertaining to the record in accordance with the following formatting requirements:

- Date fields must be formatted YYYYMMDD.
- Alphanumeric data must be left-justified and upper case. All numeric data must be right-justified and zero filled.
- Items on the forms that require a check mark--for example, Section AB, question 5, items AB5a though AB5f--are each coded "0" or "1". A "1" (one) is used to indicate that the item has been *checked*, whereas a "0" (zero) is used if the item is *not checked*. If the form instruction were to check "a numbered box"--for example, Section AA., question 4--the response in this case would be the number checked on the form.
- Items that contain identifying numbers (e.g. SSN, Medicaid) must *not* contain embedded hyphens or spaces. These are considered alphanumeric fields; however, trailing blanks *are* allowed in these fields.
- Diagnosis codes listed in Section I, question 2, must be entered in accordance with proper ICD-9 coding practices[1] where trailing zeros are significant.
- Incomplete, missing, or unknown data must be filled with dashes or hyphens (-). The only exceptions are the drug information or where items are skipped on the assessment as part of the logical flow of the instrument. For example, if a resident exhibited no conditions related to MR/DD status (Section AB10, block "a" has been checked), the assessor is instructed to "skip to AB11." When this action occurs the skipped items will be blank filled. See *MDS-ALS Data Submission Specifications* (Assessment, Discharge Tracking, Header and Trailer Record) for more specific instructions. Data left blank in fields other than designated skip fields will result in an error and will trigger an error report, which will be sent to the facility.

10. **Edits** – List form edit and consistency checks required for specification. Failure to comply with edit and consistency checks results in a warning message to the facility, which appears on the submission report.

[1] See *Physician ICD-9-CC 2004: International Classification of Diseases, Clinical Modification*, American Medical Association (October 2003).

Electronic Media Standards

Diskettes used for submission of the MDS-ALS data must meet the following criteria:

1. The media must be IBM compatible.
2. The media must be formatted in accordance with one of the following two options:
    a. Basic storage capacity:
       Seven hundred twenty kilobytes (720K)
       Type of diskette:
       Double-sided, Double-Density, 3½"
    b. Basic storage capacity:
       One thousand four hundred kilobytes (1,400K)
       Type of diskette:
       Double-sided, High-Density, 3½"

MDS-ALS Electronic Media External Labeling Requirements

All diskettes that contain MDS-ALS data submitted to IHP via electronic media must be labeled with the following information, i.e., physically affixed to the external portion of the diskette:

"**Media Contains MDS-ALS Data**"
Facility Name
Facility State Provider Number
Facility Address (including street, city, state, and zip code)
Facility Contact Person
Facility Phone Number
"Mailed:" *Date mailed to IHP*
"File name – MDSALS<……>" (…….*may be replaced with alphanumeric characters used internally in the facility to track the file*)

Testing Submission Indicator

For submissions to be tested, the external label must clearly indicate that the data on the media is to be used as a test submission by printing "**TEST**" in bold letters on the external label. **Be sure to include paper copies of the forms included on the TEST submission. Please mark "TEST" in the forms' headers.**

Once the testing has been completed and the facility has been certified to submit data, the "**TEST**" indicator must be dropped from the external label.

Example:

Media Contains ALS Data

Community Nursing Facility
State Provider # 00000000000
1 Maine St.
Cantgetthere, Me. 04000
Jane Doe, RN
555-1234
Mailed: 1/10/91
File name – MDSALS<file010104>

TEST TEST TEST TEST TEST