

## Tables Report - LTCH

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_ALL_VW	ADDTNL_ST_ADR	VARCHAR2 (50)	N	2nd Street Address Line	This column contains the provider's additional street address.	
CSP_PRVDR_ALL_VW	CITY_NAME	VARCHAR2 (28)	N	City	City in which the provider is physically located.	
CSP_PRVDR_ALL_VW	FAC_NAME	VARCHAR2 (50)	N	Facility Name	The name of a provider certified to participate in the Medicare and/or Medicaid programs.	
CSP_PRVDR_ALL_VW	FAX_PHNE_NUM	VARCHAR2 (10)	N	Fax Phone Number	The 10-digit fax phone number of the primary contact or the operator of the provider.	
CSP_PRVDR_ALL_VW	HHA_ASMT_SBMT_CD	VARCHAR2 (1)	N	HHA Assessment Submit Code	Indicates if the HHA submits assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_ALL_VW	HOSPC_ASMT_SBMT_CD	VARCHAR2 (1)	N	Hospice Assessment Submit Code	Indicates if the hospice submits assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_ALL_VW	IRF_ASMT_SBMT_CD	VARCHAR2 (1)	N	IRF-PAI Assessment Submit Code	IRF-PAI assessment submit indicator. Set to 'R' if the facility is allowed to submit IRF-PAI	CSP_ASMT_SBMT_CD
CSP_PRVDR_ALL_VW	IRF_FAC_ID	VARCHAR2 (40)	N	IRF Facility ID	This is an artificial column created to enable users to link the Inpatient Rehab Facility (when	
CSP_PRVDR_ALL_VW	LTCH_ASMT_SBMT_CD	VARCHAR2 (1)	N	LTCH Assessment Submit Code	LTCH assessment submit indicator. Set to 'L' if the facility is allowed to submit LTCH	CSP_ASMT_SBMT_CD
CSP_PRVDR_ALL_VW	MAIL_ADDTNL_ST_ADR	VARCHAR2 (50)	N	Mailing Address-Street Line 2	The second line of a provider's mailing street address, if different from its location address.	
CSP_PRVDR_ALL_VW	MAIL_CITY_NAME	VARCHAR2 (28)	N	Mailing Address-City	The city of a provider's mailing address, if the address is different than the location address.	
CSP_PRVDR_ALL_VW	MAIL_STATE_CD	VARCHAR2 (2)	N	Mailing Address-State	The two-letter state abbreviation for a provider's mailing address, if different than its location	STATES
CSP_PRVDR_ALL_VW	MAIL_ST_ADR	VARCHAR2 (50)	N	Mailing Address-Street Line 1	The first line of a provider's mailing street address, if different than its location address.	
CSP_PRVDR_ALL_VW	MAIL_ZIP4_CD	VARCHAR2 (4)	N	Mailing Address-ZIP Four	The four-digit additional postal code which indicates a provider's mailing address, if	
CSP_PRVDR_ALL_VW	MAIL_ZIP_CD	VARCHAR2 (5)	N	Mailing Address-ZIP Code	The 5-digit postal code for a provider's mailing address, if different than its location address.	
CSP_PRVDR_ALL_VW	MDCD_VNDR_NUM	VARCHAR2 (15)	N	Medicaid Vendor Number	A number which may be assigned to a facility by the state Medicaid agency for external	
CSP_PRVDR_ALL_VW	MDS_ASMT_SBMT_CD	VARCHAR2 (1)	N	MDS Assessment Submit Code	Indicates if the nursing home submits assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_ALL_VW	ORGNL_PRTCPTN_DT	DATE (8)	N	Participation Date	The date a facility is first approved to provide Medicare and/or Medicaid services.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_ALL_VW	PGM_TRMNTN_CD	VARCHAR2 (2)	N	Termination Code 1	Termination code number one: the reason a facility has been terminated from the CLIA,	CSP_TRMNTN_CD
CSP_PRVDR_ALL_VW	PGM_TRMNTN_DESC	VARCHAR2 (65)	N	Termination Description	Indicates the current termination status for the provider.	CSP_TRMNTN_CD
CSP_PRVDR_ALL_VW	PHNE_NUM	VARCHAR2 (10)	N	Telephone Number	The 10-digit telephone number of the primary contact or the operator of a provider.	
CSP_PRVDR_ALL_VW	PRVDR_CTGRY_CD	VARCHAR2 (2)	N	Provider Category Code	This code identifies the category which is most descriptive of the facility identified on the	CSP_PRVDR_CTGRY_CD
CSP_PRVDR_ALL_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	Key to uniquely identify a provider, internally within the CASPER applications. Not available	
CSP_PRVDR_ALL_VW	PRVDR_NUM	VARCHAR2 (10)	N	CCN	CMS Certification Number (CCN), formerly known as Provider Number, of the facility	
CSP_PRVDR_ALL_VW	SB_ASMT_SBMT_CD	VARCHAR2 (1)	N	Swing Bed Assessment Submit Code	Swing Bed assessment submit indicator. Set to 'S' if the facility is allowed to submit Swing Bed	CSP_ASMT_SBMT_CD
CSP_PRVDR_ALL_VW	SSA_CNTY_CD	VARCHAR2 (3)	N	SSA County Code	SSA (Social Security Administration) geographic code indicating the county where the	CSP_CNTY_CD
CSP_PRVDR_ALL_VW	SSA_CNTY_CD_DESC	VARCHAR2 (24)	N	SSA County Description	SSA (Social Security Administration) geographic description indicating the county	CSP_CNTY_CD
CSP_PRVDR_ALL_VW	STATE_CD	VARCHAR2 (2)	N	State Abbreviation	Two-character state abbreviation.	STATES
CSP_PRVDR_ALL_VW	ST_ADR	VARCHAR2 (50)	N	Street Address	Street address of a provider that is certified to provide Medicare and/or Medicaid services.	
CSP_PRVDR_ALL_VW	TRMNTN_EXPRTN_DT	DATE (8)	N	Termination Date / Expiration Date 1	The date the laboratory's certificate terminated or the expiration date of the current CLIA	
CSP_PRVDR_ALL_VW	ZIP4_CD	VARCHAR2 (4)	N	ZIP Code + 4 Extra Digits	This field contains the additional four ZIP code digits.	
CSP_PRVDR_ALL_VW	ZIP_CD	VARCHAR2 (5)	N	ZIP Code	The five-digit postal code for the provider.	
CSP_PRVDR_AUX_FAC	ADD_DT	DATE (8)	N	Auxiliary Add Date	Date the auxiliary entity was added to the provider in ASPEN.	
CSP_PRVDR_AUX_FAC	AUX_ENT_NUM	VARCHAR2 (10)	N	ASPEN Auxiliary ID	Unique ASPEN identifier assigned to the auxiliary entity. For certified auxiliary entities	
CSP_PRVDR_AUX_FAC	AUX_FAC_TYPE_CD	NUMBER (2.0)	Y	Auxiliary Type Code	Identifies the type of the auxiliary entity that is associated with the provider.	CSP_AUX_FAC_TYPE_CD
CSP_PRVDR_AUX_FAC	AUX_FAC_TYPE_DESC	VARCHAR2 (58)	N	Auxiliary Type Description	Identifies the type of the auxiliary entity that is associated with the provider.	CSP_AUX_FAC_TYPE_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_AUX_FAC	AUX_ID	VARCHAR2 (3)	Y	Auxiliary ID	Sequential number assigned to the auxiliary entity for the purpose of uniquely identifying	
CSP_PRVDR_AUX_FAC	AUX_PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Auxiliary Provider Internal Number	Unique CASPER identifier of a certified provider that is an auxiliary entity.	
CSP_PRVDR_AUX_FAC	AUX_PRVDR_NUM	VARCHAR2 (10)	N	Auxiliary CCN	Six or ten position identification number that is assigned to a certified provider. This is the	CSP_PRVDR_CMN
CSP_PRVDR_AUX_FAC	AUX_TRMNTN_CD	VARCHAR2 (2)	N	Auxiliary Termination Code	Indicates the termination status for the auxiliary entity.	CSP_TRMNTN_CD
CSP_PRVDR_AUX_FAC	AUX_TRMNTN_DESC	VARCHAR2 (65)	N	Auxiliary Termination Description	Indicates the termination status for the auxiliary entity.	CSP_TRMNTN_CD
CSP_PRVDR_AUX_FAC	AUX_TRMNTN_DT	DATE (8)	N	Auxiliary Termination Date	Date the auxiliary entity was terminated.	
CSP_PRVDR_AUX_FAC	CITY_NAME	VARCHAR2 (28)	N	Auxiliary Address: City	City in which the auxiliary entity is physically located.	
CSP_PRVDR_AUX_FAC	CLOSED_DT	DATE (8)	N	Date Closed	Date the auxiliary entity was closed.	
CSP_PRVDR_AUX_FAC	CNTCT_EMER_PHNE_NUM	VARCHAR2 (13)	N	Auxiliary Contact: Emergency Phone Number	Emergency phone number of the primary contact for the auxiliary entity.	
CSP_PRVDR_AUX_FAC	CNTCT_FAX_NUM	VARCHAR2 (13)	N	Auxiliary Contact: Fax Number	Fax number for the auxiliary entity.	
CSP_PRVDR_AUX_FAC	CNTCT_NAME	VARCHAR2 (30)	N	Auxiliary Contact: Name	Name of the primary contact for the auxiliary entity.	
CSP_PRVDR_AUX_FAC	CNTCT_PHNE_NUM	VARCHAR2 (13)	N	Auxiliary Contact: Phone Number	Phone number of the primary contact for the auxiliary entity.	
CSP_PRVDR_AUX_FAC	CRTFCTN_DT	DATE (8)	Y	Certification Date	Equal to the exit date of the initial visit of the Health survey for certifications completed after	
CSP_PRVDR_AUX_FAC	FAC_NAME	VARCHAR2 (50)	N	Auxiliary Facility Name	Name of the auxiliary entity.	
CSP_PRVDR_AUX_FAC	LCTN_TYPE_CD	VARCHAR2 (2)	Y	Auxiliary Secondary Type Code	Identifies the secondary type of the auxiliary entity.	CSP_LCTN_TYPE_CD
CSP_PRVDR_AUX_FAC	LCTN_TYPE_DESC	VARCHAR2 (58)	N	Auxiliary Secondary Type Description	Identifies the secondary type of the auxiliary entity.	CSP_LCTN_TYPE_CD
CSP_PRVDR_AUX_FAC	OPEN_DT	DATE (8)	N	Auxiliary Open Date	Date the auxiliary entity became associated with the provider. Applies to ambulance services	
CSP_PRVDR_AUX_FAC	OPRTG_BED_CNT	NUMBER (4.0)	N	Auxiliary Bed Count: Operating	Number of operating beds in the auxiliary entity.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_AUX_FAC	PRVDR_INTRNL_NUM	NUMBER (10.0)	Y	Provider Internal Number	Key to uniquely identify a provider, internally within the CASPER applications. Not available	
CSP_PRVDR_AUX_FAC	PRVDR_NUM	VARCHAR2 (10)	N	CCN	Six or ten position identification number that is assigned to a certified provider. This is the	
CSP_PRVDR_AUX_FAC	RO_APRVD_DT	DATE (8)	N	Auxiliary RO Approved Date	Date the Regional Office approved the auxiliary entity .	
CSP_PRVDR_AUX_FAC	SPRNKLR_STUS_CD	VARCHAR2 (2)	N	Auxiliary Sprinkler Status Code	Indicates the sprinkler status of the auxiliary entity.	CSP_OFST_SPRNKLR_STUS_CD
CSP_PRVDR_AUX_FAC	SPRNKLR_STUS_DESC	VARCHAR2 (59)	N	Auxiliary Sprinkler Status Description	Indicates the sprinkler status of the auxiliary entity.	CSP_SRVY_SPRNKLR_STUS_CD
CSP_PRVDR_AUX_FAC	SSA_CNTY_CD	VARCHAR2 (3)	N	Auxiliary SSA County Code	Social Security Administration geographic code indicating the county where the auxiliary entity	CSP_CNTY_CD
CSP_PRVDR_AUX_FAC	SSA_CNTY_DESC	VARCHAR2 (33)	N	Auxiliary SSA County Description	Social Security Administration geographic code indicating the county where the auxiliary entity	CSP_CNTY_CD
CSP_PRVDR_AUX_FAC	STATE_CD	VARCHAR2 (2)	N	Auxiliary State Abbreviation	Two-character state abbreviation of the auxiliary entity.	CSP_STATE_CD
CSP_PRVDR_AUX_FAC	STATE_DESC	VARCHAR2 (30)	N	Auxiliary State Description	Two-character state abbreviation of the auxiliary entity.	CSP_STATE_CD
CSP_PRVDR_AUX_FAC	ST_ADR	VARCHAR2 (50)	N	Auxiliary Address: Street	Street address of the auxiliary entity.	
CSP_PRVDR_AUX_FAC	TOT_BED_CNT	NUMBER (4.0)	N	Auxiliary Bed Count: Total	Total number of beds in the auxiliary entity.	
CSP_PRVDR_AUX_FAC	UPDT_DT	DATE (8)	N	Auxiliary Update Date	Date the auxiliary entity was last updated in ASPEN.	
CSP_PRVDR_AUX_FAC	ZIP_CD	VARCHAR2 (5)	N	Auxiliary Address: ZIP Code	Five-digit ZIP code for the auxiliary entity's physical address.	
CSP_PRVDR_AUX_FAC_V W	ADD_DT	DATE (8)	N	Auxiliary Add Date	Date the auxiliary entity was added to the provider in ASPEN.	
CSP_PRVDR_AUX_FAC_V W	AUX_ENT_NUM	VARCHAR2 (10)	N	ASPEN Auxiliary ID	Unique ASPEN identifier assigned to the auxiliary entity. For certified auxiliary entities	
CSP_PRVDR_AUX_FAC_V W	AUX_FAC_TYPE_CD	NUMBER (2.0)	N	Auxiliary Type Code	Identifies the type of the auxiliary entity that is associated with the provider.	CSP_AUX_FAC_TYPE_CD
CSP_PRVDR_AUX_FAC_V W	AUX_FAC_TYPE_DESC	VARCHAR2 (58)	N	Auxiliary Type Description	Identifies the type of the auxiliary entity that is associated with the provider.	CSP_AUX_FAC_TYPE_CD
CSP_PRVDR_AUX_FAC_V W	AUX_ID	VARCHAR2 (3)	N	Auxiliary ID	Sequential number assigned to the auxiliary entity for the purpose of uniquely identifying	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_AUX_FAC_V W	AUX_PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Auxiliary Provider Internal Number	Unique CASPER identifier of a certified provider that is an auxiliary entity.	
CSP_PRVDR_AUX_FAC_V W	AUX_PRVDR_NUM	VARCHAR2 (10)	N	Auxiliary CCN	Six or ten position identification number that is assigned to a certified provider. This is the	CSP_PRVDR_CMN
CSP_PRVDR_AUX_FAC_V W	AUX_TRMNTN_CD	VARCHAR2 (2)	N	Auxiliary Termination Code	Indicates the termination status for the auxiliary entity.	CSP_TRMNTN_CD
CSP_PRVDR_AUX_FAC_V W	AUX_TRMNTN_DESC	VARCHAR2 (65)	N	Auxiliary Termination Description	Indicates the termination status for the auxiliary entity.	CSP_TRMNTN_CD
CSP_PRVDR_AUX_FAC_V W	AUX_TRMNTN_DT	DATE (8)	N	Auxiliary Termination Date	Date the auxiliary entity was terminated.	
CSP_PRVDR_AUX_FAC_V W	CITY_NAME	VARCHAR2 (28)	N	Auxiliary Address: City	City in which the auxiliary entity is physically located.	
CSP_PRVDR_AUX_FAC_V W	CLOSED_DT	DATE (8)	N	Date Closed	Date the auxiliary entity was closed.	
CSP_PRVDR_AUX_FAC_V W	CNTCT_EMER_PHNE_NUM	VARCHAR2 (13)	N	Auxiliary Contact: Emergency Phone Number	Emergency phone number of the primary contact for the auxiliary entity.	
CSP_PRVDR_AUX_FAC_V W	CNTCT_FAX_NUM	VARCHAR2 (13)	N	Auxiliary Contact: Fax Number	Fax number for the auxiliary entity.	
CSP_PRVDR_AUX_FAC_V W	CNTCT_NAME	VARCHAR2 (30)	N	Auxiliary Contact: Name	Name of the primary contact for the auxiliary entity.	
CSP_PRVDR_AUX_FAC_V W	CNTCT_PHNE_NUM	VARCHAR2 (13)	N	Auxiliary Contact: Phone Number	Phone number of the primary contact for the auxiliary entity.	
CSP_PRVDR_AUX_FAC_V W	CRTFCTN_DT	DATE (8)	N	Certification Date	Equal to the exit date of the initial visit of the Health survey for certifications completed after	
CSP_PRVDR_AUX_FAC_V W	FAC_NAME	VARCHAR2 (50)	N	Auxiliary Facility Name	Name of the auxiliary entity.	
CSP_PRVDR_AUX_FAC_V W	LCTN_TYPE_CD	VARCHAR2 (2)	N	Auxiliary Secondary Type Code	Identifies the secondary type of the auxiliary entity.	CSP_LCTN_TYPE_CD
CSP_PRVDR_AUX_FAC_V W	LCTN_TYPE_DESC	VARCHAR2 (58)	N	Auxiliary Secondary Type Description	Identifies the secondary type of the auxiliary entity.	CSP_LCTN_TYPE_CD
CSP_PRVDR_AUX_FAC_V W	OPEN_DT	DATE (8)	N	Auxiliary Open Date	Date the auxiliary entity became associated with the provider. Applies to ambulance services	
CSP_PRVDR_AUX_FAC_V W	OPRTG_BED_CNT	NUMBER (4.0)	N	Auxiliary Bed Count: Operating	Number of operating beds in the auxiliary entity.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_AUX_FAC_V W	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	Key to uniquely identify a provider, internally within the CASPER applications. Not available	
CSP_PRVDR_AUX_FAC_V W	PRVDR_NUM	VARCHAR2 (10)	N	CCN	Six or ten position identification number that is assigned to a certified provider. This is the	CSP_PRVDR_CMN
CSP_PRVDR_AUX_FAC_V W	RO_APRVD_DT	DATE (8)	N	Auxiliary RO Approved Date	Date the Regional Office approved the auxiliary entity .	
CSP_PRVDR_AUX_FAC_V W	SPRNKLR_STUS_CD	VARCHAR2 (2)	N	Auxiliary Sprinkler Status Code	Indicates the sprinkler status of the auxiliary entity.	CSP_OFST_SPRNKLR_STUS_CD
CSP_PRVDR_AUX_FAC_V W	SPRNKLR_STUS_DESC	VARCHAR2 (59)	N	Auxiliary Sprinkler Status Description	Indicates the sprinkler status of the auxiliary entity.	CSP_SRVY_SPRNKLR_STUS_CD
CSP_PRVDR_AUX_FAC_V W	SSA_CNTY_CD	VARCHAR2 (3)	N	Auxiliary SSA County Code	Social Security Administration geographic code indicating the county where the auxiliary entity	CSP_CNTY_CD
CSP_PRVDR_AUX_FAC_V W	SSA_CNTY_DESC	VARCHAR2 (33)	N	Auxiliary SSA County Description	Social Security Administration geographic code indicating the county where the auxiliary entity	CSP_CNTY_CD
CSP_PRVDR_AUX_FAC_V W	STATE_CD	VARCHAR2 (2)	N	Auxiliary State Abbreviation	Two-character state abbreviation of the auxiliary entity.	CSP_STATE_CD
CSP_PRVDR_AUX_FAC_V W	STATE_DESC	VARCHAR2 (30)	N	Auxiliary State Description	Two-character state abbreviation of the auxiliary entity.	CSP_STATE_CD
CSP_PRVDR_AUX_FAC_V W	ST_ADR	VARCHAR2 (50)	N	Auxiliary Address: Street	Street address of the auxiliary entity.	
CSP_PRVDR_AUX_FAC_V W	TOT_BED_CNT	NUMBER (4.0)	N	Auxiliary Bed Count: Total	Total number of beds in the auxiliary entity.	
CSP_PRVDR_AUX_FAC_V W	UPDT_DT	DATE (8)	N	Auxiliary Update Date	Date the auxiliary entity was last updated in ASPEN.	
CSP_PRVDR_AUX_FAC_V W	ZIP_CD	VARCHAR2 (5)	N	Auxiliary Address: ZIP Code	Five-digit ZIP code for the auxiliary entity's physical address.	
CSP_PRVDR_CMN	ACRDTN_TYPE_CD	VARCHAR2 (1)	N	Accreditation Type Code	Indicates an accrediting organization deeming the provider. If a provider is deemed by	CSP_ACRDTN_DEMD_CD
CSP_PRVDR_CMN	ACRDTN_TYPE_DESC	VARCHAR2 (24)	N	Accreditation Type Description	Indicates an accrediting organization deeming the provider. If a provider is deemed by	CSP_ACRDTN_DEMD_CD
CSP_PRVDR_CMN	ADDTNL_FAC_NAME	VARCHAR2 (50)	N	Provider Name 2nd Line	Second line of a laboratory name.	
CSP_PRVDR_CMN	ADDTNL_ST_ADR	VARCHAR2 (50)	N	Address: Street 2nd Line	Second line of a laboratory's street address.	
CSP_PRVDR_CMN	AFFLTD_PRVDR_NUM_1	VARCHAR2 (10)	N	Affiliated provider number 1	Affiliated provider number 1	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_CMN	AFFLTD_PRVDR_NUM_2	VARCHAR2 (10)	N	Affiliated provider number 2	Affiliated provider number 2	
CSP_PRVDR_CMN	AFFLTD_PRVDR_NUM_3	VARCHAR2 (10)	N	Affiliated provider number 3	Affiliated provider number 3	
CSP_PRVDR_CMN	AFFLTD_PRVDR_NUM_4	VARCHAR2 (10)	N	Affiliated provider number 4	Affiliated provider number 4	
CSP_PRVDR_CMN	AFFLTD_PRVDR_NUM_5	VARCHAR2 (10)	N	Affiliated provider number 5	Affiliated provider number 5	
CSP_PRVDR_CMN	AFFLTD_PRVDR_NUM_6	VARCHAR2 (10)	N	Affiliated provider number 6	Affiliated provider number 6	
CSP_PRVDR_CMN	AFFLTD_PRVDR_NUM_7	VARCHAR2 (10)	N	Affiliated provider number 7	Affiliated provider number 7	
CSP_PRVDR_CMN	AFFLTD_PRVDR_NUM_8	VARCHAR2 (10)	N	Affiliated provider number 8	Affiliated provider number 8	
CSP_PRVDR_CMN	CHOW_CNT	NUMBER (2,0)	N	CHOW Count	Number of times this provider has undergone a change of ownership.	
CSP_PRVDR_CMN	CHOW_DT	DATE (8)	N	CHOW Date	Effective date of the most recent change of ownership for this provider.	
CSP_PRVDR_CMN	CHOW_PRIOR_DT	DATE (8)	N	Prior CHOW Date	Effective date of the previous change of ownership for this provider.	
CSP_PRVDR_CMN	CITY_NAME	VARCHAR2 (28)	N	Address: City	City in which the provider is physically located.	
CSP_PRVDR_CMN	CLIA_ID_NUMBER_1	VARCHAR2 (10)	N	CLIA ID number 1	CLIA ID number 1	
CSP_PRVDR_CMN	CLIA_ID_NUMBER_2	VARCHAR2 (10)	N	CLIA ID number 2	CLIA ID number 2	
CSP_PRVDR_CMN	CLIA_ID_NUMBER_3	VARCHAR2 (10)	N	CLIA ID number 3	CLIA ID number 3	
CSP_PRVDR_CMN	CLIA_ID_NUMBER_4	VARCHAR2 (10)	N	CLIA ID number 4	CLIA ID number 4	
CSP_PRVDR_CMN	CLIA_ID_NUMBER_5	VARCHAR2 (10)	N	CLIA ID number 5	CLIA ID number 5	
CSP_PRVDR_CMN	CMPTS_SW	VARCHAR2 (1)	N	CMPTS Indicator	Indicates if the provider has at least one Civil Money Penalty Tracking System record.	
CSP_PRVDR_CMN	CRNT_ENFRCMT_CASE_STU S_CD	VARCHAR2 (2)	N	Enforcement Case Status Code: Current	Status of the enforcement case with the most recent enforcement cycle start date.	AEM_CASE_STUS_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_CMN	CRNT_ENFRCMT_CASE_STU S_DESC	VARCHAR2 (27)	N	Enforcement Case Status Description: Current	Status of the enforcement case with the most recent enforcement cycle start date.	AEM_CASE_STUS_CD
CSP_PRVDR_CMN	CRNT_ENFRCMT_CYC_STRT _DT	DATE (8)	N	Enforcement Cycle Start Date: Current	Date the most recent enforcement case started.	
CSP_PRVDR_CMN	CSP_PRVDR_ADD_DT	DATE (8)	N	Provider Accepted Date	Date the provider record was first successfully uploaded to the national database. This field	
CSP_PRVDR_CMN	CSP_UPDT_DT	DATE (8)	N	CASPER Data Update Date	Date of the most recent update of any data for this provider on the national database.	
CSP_PRVDR_CMN	DEMD_STUS_SW	VARCHAR2 (1)	N	Deemed Status Indicator	Indicates if the provider is deemed to meet Medicare requirements by an accrediting	
CSP_PRVDR_CMN	ENFRCMT_SW	VARCHAR2 (1)	N	Enforcement Case Indicator	Indicates if the provider has at least one enforcement case.	
CSP_PRVDR_CMN	FAC_ID	VARCHAR2 (16)	N	Facility ID	Facility identifier assigned by the state.	
CSP_PRVDR_CMN	FAC_INTRNL_ID	NUMBER (10.0)	N	Facility Internal ID	Unique sequential number assigned to a provider facility internal identifier that is unique within a	
CSP_PRVDR_CMN	FAC_NAME	VARCHAR2 (50)	N	Facility Name	Name of the provider certified to participate in the Medicare and/or Medicaid programs.	
CSP_PRVDR_CMN	FAX_PHNE_NUM	VARCHAR2 (10)	N	Fax Phone Number	10-digit fax phone number of the primary contact or the operator of the provider.	
CSP_PRVDR_CMN	FED_TAX_ID_NUM	VARCHAR2 (10)	N	EIN	Nine-digit number the IRS assigns to organizations. The IRS uses the number to	
CSP_PRVDR_CMN	FQHC_APRVD_RHC_PRVDR_ NUM	VARCHAR2 (10)	N	FQHC approved RHC provider number	FQHC approved RHC provider number	
CSP_PRVDR_CMN	FY_END_MO_DAY_CD	VARCHAR2 (4)	N	Fiscal Year End Date (MMDD)	End date, consisting of the month and day, of the provider's fiscal year.	
CSP_PRVDR_CMN	GNRL_CNTL_TYPE_CD	VARCHAR2 (2)	N	Ownership Type Code	Indicates the ownership type of the provider.	CSP_GNRL_CNTL_TYPE_CD
CSP_PRVDR_CMN	GNRL_CNTL_TYPE_DESC	VARCHAR2 (54)	N	Ownership Type Description	Indicates the ownership type of the provider.	CSP_GNRL_CNTL_TYPE_CD
CSP_PRVDR_CMN	GNRL_FAC_TYPE_CD	VARCHAR2 (2)	N	Category-specific Facility Type Code	Indicates the category-specific facility type code, for certain provider categories only.	CSP_GNRL_FAC_TYPE_CD
CSP_PRVDR_CMN	GNRL_FAC_TYPE_DESC	VARCHAR2 (54)	N	Category-specific Facility Type Description	Indicates the category-specific facility type code, for certain provider categories only.	CSP_GNRL_FAC_TYPE_CD
CSP_PRVDR_CMN	HHA_ASMT_SBMT_CD	VARCHAR2 (1)	N	HHA Assessment Submit Code	Indicates if the HHA submits assessments.	CSP_ASMT_SBMT_CD



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_CMN	HHA_ASMT_SBMT_DESC	VARCHAR2 (10)	N	HHA Assessment Submit Description	Indicates if the HHA submits assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	HOSPC_ASMT_SBMT_CD	VARCHAR2 (1)	N	Hospice Assessment Submit Code	Indicates if the hospice submits assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	HOSPC_ASMT_SBMT_DESC	VARCHAR2 (10)	N	Hospice Assessment Submit Description	Indicates if the hospice submits assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	HOSP_PRTCPTG_PRVDR_SW	VARCHAR2 (1)	N	Medicare or Medicaid Participating Provider Indicator	Indicates if a provider is participating in the Medicaid or Medicare or both programs.	
CSP_PRVDR_CMN	INTRMDRY_CARR_CD	VARCHAR2 (5)	N	Medicare Administrative Contractor (MAC) or Intermediary or Carrier Code	Number assigned to the Medicare Administrative Contractor, intermediary or	CSP_INTRMDRY_CARR_CD
CSP_PRVDR_CMN	INTRMDRY_CARR_DESC	VARCHAR2 (55)	N	Medicare Administrative Contractor (MAC) or Intermediary or Carrier Description	Number assigned to the Medicare Administrative Contractor, intermediary or	CSP_INTRMDRY_CARR_CD
CSP_PRVDR_CMN	INTRMDRY_CARR_PRIOR_CD	VARCHAR2 (5)	N	Prior Medicare Administrative Contractor (MAC) or Intermediary or Carrier Code	Number assigned to the previous Medicare Administrative Contractor, intermediary or	CSP_INTRMDRY_CARR_CD
CSP_PRVDR_CMN	INTRMDRY_CARR_PRIOR_DESC	VARCHAR2 (55)	N	Prior Medicare Administrative Contractor (MAC) or Intermediary or Carrier Description	Number assigned to the previous Medicare Administrative Contractor, intermediary or	CSP_INTRMDRY_CARR_CD
CSP_PRVDR_CMN	IRF_ASMT_SBMT_CD	VARCHAR2 (1)	N	IRF-PAI Assessment Submit Code	IRF-PAI assessment submit indicator. Set to 'R' if the facility is allowed to submit IRF-PAI	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	IRF_ASMT_SBMT_DESC	VARCHAR2 (10)	N	IRF-PAI Assessment Submit Description	IRF-PAI assessment submit indicator. Set to 'R' if the facility is allowed to submit IRF-PAI	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	LTCH_ASMT_SBMT_CD	VARCHAR2 (1)	N	LTCH Assessment Submit Code	LTCH assessment submit indicator. Set to 'L' if the facility is allowed to submit LTCH	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	LTCH_ASMT_SBMT_DESC	VARCHAR2 (10)	N	LTCH Assessment Submit Description	LTCH assessment submit indicator. Set to 'L' if the facility is allowed to submit LTCH	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	LTC_CRS_RFRNC_PRVDR_NUM	VARCHAR2 (10)	N	LTC cross reference provider number	LTC cross reference provider number	
CSP_PRVDR_CMN	MAIL_ADDTNL_ST_ADR	VARCHAR2 (50)	N	Mailing Address: Line 2	Second line of a provider's mailing address.	
CSP_PRVDR_CMN	MAIL_CITY_NAME	VARCHAR2 (28)	N	Mailing Address: City	City of a provider's mailing address.	
CSP_PRVDR_CMN	MAIL_STATE_CD	VARCHAR2 (2)	N	Mailing Address: State Abbreviation	Two-letter state abbreviation for a provider's mailing address.	CSP_STATE_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_CMN	MAIL_STATE_DESC	VARCHAR2 (30)	N	Mailing Address: State Description	Two-letter state abbreviation for a provider's mailing address.	CSP_STATE_CD
CSP_PRVDR_CMN	MAIL_ST_ADR	VARCHAR2 (50)	N	Mailing Address: Line 1	First line of a provider's mailing address.	
CSP_PRVDR_CMN	MAIL_ZIP4_CD	VARCHAR2 (4)	N	Mailing Address: + 4 of ZIP Code	Four-digit extension of the ZIP code for a provider's mailing address.	
CSP_PRVDR_CMN	MAIL_ZIP_CD	VARCHAR2 (5)	N	Mailing Address: ZIP Code	Five-digit ZIP code for a provider's mailing address.	
CSP_PRVDR_CMN	MDCD_VNDR_NUM	VARCHAR2 (15)	N	Medicaid Vendor Number	Number which may be assigned to a provider by the state Medicaid agency for external control or	
CSP_PRVDR_CMN	MDCR_HSPC_PRVDR_NUM	VARCHAR2 (10)	N	Medicare hospice provider number	Medicare hospice provider number	
CSP_PRVDR_CMN	MDS_ASMT_SBMT_CD	VARCHAR2 (1)	N	MDS Assessment Submit Code	Indicates if the nursing home submits assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	MDS_ASMT_SBMT_DESC	VARCHAR2 (10)	N	MDS Assessment Submit Description	Indicates if the nursing home submits assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	MEDICAID_CARE_VEND_NUM	VARCHAR2 (10)	N	Medicaid medicare vendor number	Medicaid medicare vendor number	
CSP_PRVDR_CMN	ORGNL_PRTCPTN_DT	DATE (8)	N	Original Participation Date	Date a provider is first approved to provide Medicare and/or Medicaid services.	
CSP_PRVDR_CMN	PGM_TRMNTN_CD	VARCHAR2 (2)	N	Termination Code	Indicates the current termination status for the provider.	CSP_TRMNTN_CD
CSP_PRVDR_CMN	PGM_TRMNTN_DESC	VARCHAR2 (65)	N	Termination Description	Indicates the current termination status for the provider.	CSP_TRMNTN_CD
CSP_PRVDR_CMN	PHNE_NUM	VARCHAR2 (10)	N	Telephone Number	Telephone number of the provider.	
CSP_PRVDR_CMN	PRNT_PRVDR_NUM	VARCHAR2 (10)	N	Parent provider number	Parent provider number	
CSP_PRVDR_CMN	PRVDR_CTGRY_CD	VARCHAR2 (2)	N	Provider Category Code	Identifies the type of provider participating in the Medicare/Medicaid program.	CSP_PRVDR_CTGRY_CD
CSP_PRVDR_CMN	PRVDR_CTGRY_DESC	VARCHAR2 (70)	N	Provider Category Description	Identifies the type of provider participating in the Medicare/Medicaid program.	CSP_PRVDR_CTGRY_CD
CSP_PRVDR_CMN	PRVDR_CTGRY_SBTYP_CD	VARCHAR2 (2)	N	Provider Category Subtype Code	Identifies the subtype of the provider, within the primary category. Used in reporting to show the	CSP_PRVDR_CTGRY_SBTYP_CD
CSP_PRVDR_CMN	PRVDR_CTGRY_SBTYP_DESC	VARCHAR2 (56)	N	Provider Category Subtype Description	Identifies the subtype of the provider, within the primary category. Used in reporting to show the	CSP_PRVDR_CTGRY_SBTYP_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_CMN	PRVDR_INTRNL_NUM	NUMBER (10.0)	Y	Provider Internal Number	Key to uniquely identify a provider, internally within the CASPER applications. Not available	
CSP_PRVDR_CMN	PRVDR_NUM	VARCHAR2 (10)	N	CCN	Six or ten position identification number that is assigned to a certified provider. This is the	
CSP_PRVDR_CMN	PRVNC_CD	VARCHAR2 (2)	N	Province Code	Canadian province where a non-participating emergency hospital is located.	CSP_PRVNC_CD
CSP_PRVDR_CMN	PRVNC_DESC	VARCHAR2 (31)	N	Province Description	Canadian province where a non-participating emergency hospital is located.	CSP_PRVNC_CD
CSP_PRVDR_CMN	PSYCH_UNIT_BED_CNT	NUMBER (3.0)	N	Psychiatric Unit Bed Count	Number of beds in a Prospective Payment System (PPS) -exempt psychiatric unit of a	
CSP_PRVDR_CMN	PSYCH_UNIT_EFCTV_DT	DATE (8)	N	Psychiatric Unit Effective Date	Date a psychiatric unit of a hospital became exempt from the Prospective Payment System	
CSP_PRVDR_CMN	PSYCH_UNIT_SW	VARCHAR2 (1)	N	Psychiatric Unit Indicator	Indicates if a hospital has a Prospective Payment System (PPS) -exempt psychiatric unit.	
CSP_PRVDR_CMN	PSYCH_UNIT_TRMNTN_CD	VARCHAR2 (1)	N	Psychiatric Unit Termination Code	Indicates the reason that a psychiatric unit of a hospital is no longer exempt from Prospective	CSP_PSYCH_UNIT_TRMNTN_CD
CSP_PRVDR_CMN	PSYCH_UNIT_TRMNTN_DESC	VARCHAR2 (51)	N	Psychiatric Unit Termination Description	Indicates the reason that a psychiatric unit of a hospital is no longer exempt from Prospective	CSP_PSYCH_UNIT_TRMNTN_CD
CSP_PRVDR_CMN	PSYCH_UNIT_TRMNTN_DT	DATE (8)	N	Psychiatric Unit Termination Date	Date a psychiatric unit of a hospital is no longer exempt from the Prospective Payment System	
CSP_PRVDR_CMN	REHAB_UNIT_BED_CNT	NUMBER (3.0)	N	Rehabilitation Unit Bed Count	Number of beds in a Prospective Payment System (PPS) -exempt rehabilitation unit of a	
CSP_PRVDR_CMN	REHAB_UNIT_EFCTV_DT	DATE (8)	N	Rehabilitation Unit Effective Date	Date a rehabilitation unit of a hospital became exempt from the Prospective Payment System	
CSP_PRVDR_CMN	REHAB_UNIT_SW	VARCHAR2 (1)	N	Rehabilitation Unit Indicator	Indicates if a hospital has a Prospective Payment System (PPS) -exempt rehabilitation unit.	
CSP_PRVDR_CMN	REHAB_UNIT_TRMNTN_CD	VARCHAR2 (1)	N	Rehabilitation Unit Termination Code	Indicates the reason that a rehabilitation unit hospital is no longer exempt from Prospective	CSP_REHAB_UNIT_TRMNTN_CD
CSP_PRVDR_CMN	REHAB_UNIT_TRMNTN_DESC	VARCHAR2 (51)	N	Rehabilitation Unit Termination Description	Indicates the reason that a rehabilitation unit hospital is no longer exempt from Prospective	CSP_REHAB_UNIT_TRMNTN_CD
CSP_PRVDR_CMN	REHAB_UNIT_TRMNTN_DT	DATE (8)	N	Rehabilitation Unit Termination Date	Date a rehabilitation unit of a hospital is no longer exempt from the Prospective Payment	
CSP_PRVDR_CMN	RGN_CD	VARCHAR2 (2)	N	Region Code	Indicates the CMS Regional Office responsible for the certification of the provider.	CSP_CMS_RGN_CD
CSP_PRVDR_CMN	RGN_DESC	VARCHAR2 (23)	N	Region Description	Indicates the CMS Regional Office responsible for the certification of the provider.	CSP_CMS_RGN_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_CMN	SB_ASMT_SBMT_CD	VARCHAR2 (1)	N	Swing Bed Assessment Submit Code	Indicates that a hospital is allowed to submit swing bed assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	SB_ASMT_SBMT_DESC	VARCHAR2 (10)	N	Swing Bed Assessment Submit Description	Indicates that a hospital is allowed to submit swing bed assessments.	CSP_ASMT_SBMT_CD
CSP_PRVDR_CMN	SB_SW	VARCHAR2 (1)	N	Swing Bed Indicator	Indicates if a hospital provides swing bed services - beds can be used for either hospital or	
CSP_PRVDR_CMN	SHRD_LAB_XRFRNC_NUM	VARCHAR2 (10)	N	Shared lab cross reference number	Shared lab cross reference number	
CSP_PRVDR_CMN	SKLTN_REC_SW	VARCHAR2 (1)	N	Skeleton Record Indicator	Indicates if the record is a skeleton record. Only a limited set of data is available for this	
CSP_PRVDR_CMN	SSA_CNTY_CD	VARCHAR2 (3)	N	SSA County Code	Social Security Administration geographic code indicating the county where the provider is	CSP_CNTY_CD
CSP_PRVDR_CMN	SSA_CNTY_DESC	VARCHAR2 (33)	N	SSA County Description	Social Security Administration geographic code indicating the county where the provider is	CSP_CNTY_CD
CSP_PRVDR_CMN	SSA_STATE_CD	VARCHAR2 (2)	N	SSA State Code	Social Security Administration geographic code indicating the state where the provider is	CSP_SSA_STATE_CD
CSP_PRVDR_CMN	SSA_STATE_DESC	VARCHAR2 (35)	N	SSA State Description	Social Security Administration geographic code indicating the state where the provider is	CSP_SSA_STATE_CD
CSP_PRVDR_CMN	STATE_CD	VARCHAR2 (2)	N	State Abbreviation	Two-character state abbreviation.	CSP_STATE_CD
CSP_PRVDR_CMN	STATE_DESC	VARCHAR2 (30)	N	State Description	State Description	CSP_STATE_CD
CSP_PRVDR_CMN	STATE_MNTRG_CNT	NUMBER (22)	N	State Survey Jurisdiction Count	Number of times the provider has been under State Survey Jurisdiction.	
CSP_PRVDR_CMN	STATE_RGN_CD	VARCHAR2 (3)	N	State Region Code	Identifies the region within a state where the provider is located.	CSP_STATE_RGN_CD
CSP_PRVDR_CMN	STATE_RGN_DESC	VARCHAR2 (35)	N	State Region Description	Identifies the region within a state where the provider is located.	CSP_STATE_RGN_CD
CSP_PRVDR_CMN	ST_ADR	VARCHAR2 (50)	N	Address: Street	Street address where the provider is located.	
CSP_PRVDR_CMN	TRMNTN_APL_CD	VARCHAR2 (1)	N	Termination Appeal Code	Indicates the appeal status of the current termination of the provider. Used for purposes	CSP_TRMNTN_APL_CD
CSP_PRVDR_CMN	TRMNTN_APL_DESC	VARCHAR2 (50)	N	Termination Appeal Description	Indicates the appeal status of the current termination of the provider. Used for purposes	CSP_TRMNTN_APL_CD
CSP_PRVDR_CMN	TRMNTN_EXPRTN_DT	DATE (8)	N	Termination or Expiration Date	Date the provider was terminated. For CLIA providers, date the laboratory's certificate was	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
CSP_PRVDR_CMN	UPDT_116_DT	DATE (8)	N	CLIA 116 Update Date	Date the CLIA 116 data for the provider was last updated. This field includes a timestamp that	
CSP_PRVDR_CMN	UPDT_DT	DATE (8)	N	Last Update Date for Provider	Date the provider record was last updated. This field includes a timestamp that includes the	
CSP_PRVDR_CMN	VLDTN_SRVY_DT	DATE (8)	N	Validation Survey Date	Date of the most recent validation survey of a deemed provider, performed by the state agency.	
CSP_PRVDR_CMN	ZIP4_CD	VARCHAR2 (4)	N	Address: + 4 of ZIP Code	Four-digit extension of the ZIP code for a provider's physical address.	
CSP_PRVDR_CMN	ZIP_CD	VARCHAR2 (5)	N	Address: ZIP Code	Five-digit ZIP code for a provider's physical address.	
CSP_USER_EMAIL_SHR_VW	CCN	VARCHAR2 (10)	N	Provider CCN	Six or ten position identification number that is assigned to a certified provider. This is the CMS	
CSP_USER_EMAIL_SHR_VW	EMAIL_ADR	VARCHAR2 (50)	N	Email Address	Email address associated with user's account	
CSP_USER_EMAIL_SHR_VW	FAC_ID	VARCHAR2 (16)	N	Facility ID	Facility identifier assigned by the state	
CSP_USER_EMAIL_SHR_VW	FAC_NAME	VARCHAR2 (50)	N	Facility Name	Name of the provider certified to participate in the Medicare and/or Medicaid program	
CSP_USER_EMAIL_SHR_VW	USER_1ST_NAME	VARCHAR2 (25)	N	First Name	First name of user	
CSP_USER_EMAIL_SHR_VW	USER_ID	VARCHAR2 (20)	N	QIES User ID	User's QIES Login ID	
CSP_USER_EMAIL_SHR_VW	USER_LAST_NAME	VARCHAR2 (25)	N	Last Name	Last name of user	
LQRP_AGRGTN	AGRGTN_RUN_SQNC_NUM	NUMBER (10.0)	Y	Aggregation Calculation Run Sequence Number	Aggregation Calculation Run Sequence Number	
LQRP_AGRGTN	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_AGRGTN	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_AGRGTN	MSR_101_ADJSTD_PCT	NUMBER (13.10)	N	Pressure Ulcer Adjusted Percentage	The data in this column indicates the adjusted percentage value of patients with pressure ulcers	
LQRP_AGRGTN	MSR_101_DNMNTR_NUM	NUMBER (7.0)	N	Pressure Ulcer Denominator	The data in this column indicates the denominator total for the percent of patients	
LQRP_AGRGTN	MSR_101_EXPCTD_PCT	NUMBER (13.10)	N	Pressure Ulcer Expected Percentage	The data in this column indicates the expected percentage value for the percent of patients with	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN	MSR_101_NMRTR_NUM	NUMBER (7.0)	N	Pressure Ulcer Numerator	The data in this column indicates the numerator total for the percent of patients with pressure	
LQRP_AGRGTN	MSR_101_OBSRVD_PCT	NUMBER (7.4)	N	Pressure Ulcer Observed Percentage	The data in this column indicates the observed percentage value of patients with pressure ulcers	
LQRP_AGRGTN	MSR_102_DNMNTR_NUM	NUMBER (7.0)	N	Denominator Number	The data in this column indicates the denominator total pertaining to	
LQRP_AGRGTN	MSR_102_NMRTR_NUM	NUMBER (7.0)	N	Numerator Number	The data in this column indicates the numerator total pertaining to supervision/touching	
LQRP_AGRGTN	MSR_102_OBSRVD_PCT	NUMBER (7.4)	N	Observed Percentage	The data in this column indicates the observed percentage value pertaining to	
LQRP_AGRGTN	MSR_103_DNMNTR_NUM	NUMBER (7.0)	N	Bowel incontinence Denominator	The data in this column indicates the denominator total pertaining to bowel	
LQRP_AGRGTN	MSR_103_NMRTR_NUM	NUMBER (7.0)	N	Bowel incontinence Numerator	The data in this column indicates the numerator total pertaining to bowel incontinence (at least	
LQRP_AGRGTN	MSR_103_OBSRVD_PCT	NUMBER (7.4)	N	Bowel incontinence Observed Percentage	The data in this column indicates the observed percentage value pertaining to bowel	
LQRP_AGRGTN	MSR_104_DNMNTR_NUM	NUMBER (7.0)	N	DM, PVD or PAD Denominator	The data in this column indicates the denominator total for diabetes mellitus (DM),	
LQRP_AGRGTN	MSR_104_NMRTR_NUM	NUMBER (7.0)	N	DM, PVD or PAD Numerator	The data in this column indicates the numerator total for diabetes mellitus (DM), peripheral	
LQRP_AGRGTN	MSR_104_OBSRVD_PCT	NUMBER (7.4)	N	DM, PVD or PAD Observed Percentage	The data in this column indicates the observed percentage value for diabetes mellitus (DM),	
LQRP_AGRGTN	MSR_105_DNMNTR_NUM	NUMBER (7.0)	N	Low BMI Denominator	The data in this column indicates the denominator total pertaining to low body mass	
LQRP_AGRGTN	MSR_105_NMRTR_NUM	NUMBER (7.0)	N	Low BMI Numerator	The data in this column indicates the numerator total pertaining to low body mass index (BMI),	
LQRP_AGRGTN	MSR_105_OBSRVD_PCT	NUMBER (7.4)	N	Low BMI Observed Percentage	The data in this column indicates the observed percentage value pertaining to low body mass	
LQRP_AGRGTN	MSR_106_DNMNTR_NUM	NUMBER (7.0)	N	Denominator value pertaining to the percent of patients who were assessed and appropriately given the seasonal flu vaccine	Indicates the denominator total pertaining to the percent of residents who were assessed and	
LQRP_AGRGTN	MSR_106_NMRTR_NUM	NUMBER (7.0)	N	Numerator value pertaining to the percent of patients who were assessed and appropriately given the seasonal flu vaccine	Indicates the numerator total pertaining to the percent of residents who were assessed and	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN	MSR_106_OBSRVD_PCT	NUMBER (7.4)	N	Percent of Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine	Indicates the observed percentage value pertaining to the percent of residents who were	
LQRP_AGRGTN	MSR_107_DNMNTR_NUM	NUMBER (7.0)	N	Denominator value pertaining to the percent of Patients Who Received the Seasonal Flu Vaccine	Indicates the denominator total pertaining to the Residents or Patients Who Received the	
LQRP_AGRGTN	MSR_107_NMRTR_NUM	NUMBER (7.0)	N	Numerator value pertaining to the percent of Patients Who Received the Seasonal Flu Vaccine	Indicates the numerator total pertaining to the Residents or Patients Who Received the	
LQRP_AGRGTN	MSR_107_OBSRVD_PCT	NUMBER (7.4)	N	Observed Percentage of Patients Who Received the Seasonal Flu Vaccine	The data in this column indicates the observed percent of Residents or Patients Who Received	
LQRP_AGRGTN	MSR_108_DNMNTR_NUM	NUMBER (7.0)	N	Denominator Value Pertaining to Patients Who Were Offered and Declined the Seasonal Flu Vaccine	Indicates the denominator total pertaining to patients who were offered and declined the	
LQRP_AGRGTN	MSR_108_NMRTR_NUM	NUMBER (7.0)	N	Numerator Value Pertaining to Patients Who Were Offered and Declined the Seasonal Flu Vaccine	Indicates the numerator total pertaining to patients who were offered and declined the	
LQRP_AGRGTN	MSR_108_OBSRVD_PCT	NUMBER (7.4)	N	Observed Percentage of Patients Who Were Offered and Declined the Seasonal Flu Vaccine	Indicates the observed percentage pertaining to patients who were offered and declined the	
LQRP_AGRGTN	MSR_109_DNMNTR_NUM	NUMBER (7.0)	N	Denominator Value Pertaining to Patients Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine	Indicates the denominator total pertaining to patients who did not receive, due to medical	
LQRP_AGRGTN	MSR_109_NMRTR_NUM	NUMBER (7.0)	N	Percent of Patients Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine	Indicates the numerator total pertaining to patients who did not receive, due to medical	
LQRP_AGRGTN	MSR_109_OBSRVD_PCT	NUMBER (7.4)	N	Percent of Patients Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine	Indicates the observed percentage pertaining to patients who did not receive, due to medical	
LQRP_AGRGTN	MSR_113_DNMNTR_NUM	NUMBER (7.0)	N	Patients With an Admission and Discharge Functional Assessment did not meet the exclusion criteria during the and a Care Plan Denominator	Contains the total number of qualified stays that	

## Tables Report - LTCH

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN	MSR_113_NMRTR_NUM	NUMBER (7.0)	N	Patients With an Admission and Discharge Functional Assessment and a Care Plan Numerator	Contains the number of stays that triggered the Percent of Long-Term Care Hospital (LTCH)	
LQRP_AGRGTN	MSR_113_OBSRVD_PCT	NUMBER (7.4)	N	Patients With an Admission and Discharge Functional Assessment and a Care Plan Observed Percentage	Contains the data in this column indicates the provider's observed percentage value of patients	
LQRP_AGRGTN	MSR_114_DNMNTR_NUM	NUMBER (7.0)	N	Application of Patients With an Admission and Discharge Functional Assessment and a Care Plan Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_AGRGTN	MSR_114_NMRTR_NUM	NUMBER (7.0)	N	Application of Patients With an Admission and Discharge Functional Assessment and a Care Plan Numerator	Contains the number of stays that triggered the Application of Percent of Long-Term Care	
LQRP_AGRGTN	MSR_114_OBSRVD_PCT	NUMBER (7.4)	N	Application of Patients With an Admission and Discharge Functional Assessment and a Care Plan Observed Percentage	Contains the data in this column indicates the provider's observed percentage value of patients	
LQRP_AGRGTN	MSR_115_ADJSTD_AVG	NUMBER (13.10)	N	Change in Mobility Among Patients Requiring Ventilator Support Adjusted Average	Contains the provider's expected average score for the LTCH Functional Outcome Measure:	
LQRP_AGRGTN	MSR_115_ADMSN_SCRE_TO T	NUMBER (9.0)	N	Change in Mobility Among Patients Requiring Ventilator Support Admission Score	Contains the average admission score for the LTCH Functional Outcome Measure: Change in	
LQRP_AGRGTN	MSR_115_DNMNTR_NUM	NUMBER (7.0)	N	Change in Mobility Among Patients Requiring Ventilator Support Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_AGRGTN	MSR_115_DSCHRG_SCRE_TO T	NUMBER (9.0)	N	Change in Mobility Among Patients Requiring Ventilator Support Discharge Score	Contains the average discharge score for the LTCH Functional Outcome Measure: Change in	
LQRP_AGRGTN	MSR_115_EXPCTD_AVG	NUMBER (13.10)	N	Change in Mobility Among Patients Requiring Ventilator Support Expected Average	Contains the provider's expected average score for the LTCH Functional Outcome Measure:	
LQRP_AGRGTN	MSR_115_EXPCTD_SCRE_CH G_TOT	NUMBER (13.4)	N	Change in Mobility Among Patients Requiring Ventilator Support Expected Change Score	Contains the expected score change for the LTCH Functional Outcome Measure: Change in	
LQRP_AGRGTN	MSR_115_OBSRVD_AVG	NUMBER (13.10)	N	Change in Mobility Among Patients Requiring Ventilator Support Observed Average	Contains the provider's observed average for the LTCH Functional Outcome Measure: Change in	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN	MSR_115_OBSRVD_SCRE_CH G_TOT	NUMBER (9.0)	N	Change in Mobility Among Patients Requiring Ventilator Support Observed Change Score	Contains the observed average change score for the LTCH Functional Outcome Measure:	
LQRP_AGRGTN	MSR_116_DNMNTR_NUM	NUMBER (7.0)	N	Residents Experiencing One or More Falls with Major Injury Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_AGRGTN	MSR_116_NMRTR_NUM	NUMBER (7.0)	N	Residents Experiencing One or More Falls with Major Injury Numerator	Contains the total number of stays that triggered the Application of Percent of Residents	
LQRP_AGRGTN	MSR_116_OBSRVD_PCT	NUMBER (7.4)	N	Residents Experiencing One or More Falls with Major Injury Observed Percentage	Contains the provider's observed for the Application of Percent of Residents	
LQRP_AGRGTN	PRVDR_INTRNL_NUM	NUMBER (10.0)	Y	Provider Internal Number	Uniquely identifies a provider internally within the CASPER applications.	
LQRP_AGRGTN	STATE_CD	VARCHAR2 (2)	Y	State Code	The data in this column indicates the state code.	STATES
LQRP_AGRGTN	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	Indicates the date and time that the record was updated in the database.	
LQRP_AGRGTN	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	Indicates the user who updated the record.	
LQRP_AGRGTN	WTD_SW	VARCHAR2 (1)	Y	Weighted Switch	This switch is used to determine how the state and national QM rollup totals are calculated.	
LQRP_AGRGTN_CALC_R UN	AGRGTN_RUN_SQNC_NUM	NUMBER (10.0)	Y	Aggregation Calculation Run Sequence Number	Aggregation Calculation Run Sequence Number	
LQRP_AGRGTN_CALC_R UN	ALTRNT_RFRNC_BGN_DT_1	DATE (8)	N	Alternate Reference Begin Date	The Report Period Begin Date and Comparison Group Period Begin Date for the LTCH	
LQRP_AGRGTN_CALC_R UN	FLU_VCNTN_SEASN_BGN_DT	DATE (7)	N	Influenza Vaccination Season Begin Date	This column contains the begin date of the influenza vaccination season in effect for the	
LQRP_AGRGTN_CALC_R UN	FLU_VCNTN_SEASN_END_DT	DATE (7)	N	Influenza Vaccination Season End Date	This column contains the end date of the influenza vaccination season in effect for the	
LQRP_AGRGTN_CALC_R UN	MSR_CALC_RUN_TYPE_CD	VARCHAR2 (5)	N	Measure Calculation Run Type Code	Measure calculation run type code.	LQRP_MSR_CALC_RUN_TYPE_CD
LQRP_AGRGTN_CALC_R UN	RFRNC_BGN_DT	DATE (7)	N	Reference Begin Date	Begin date for readmission measure calculations.	
LQRP_AGRGTN_CALC_R UN	RFRNC_END_DT	DATE (7)	N	Reference End Date	End date for readmission measure calculations.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN_CALC_RUN	RUN_BGN_TS	TIMESTAMP(6) (11.6)	N	Begin Timestamp	Indicates the begin date and time for measure calculation runs.	
LQRP_AGRGTN_CALC_RUN	RUN_END_TS	TIMESTAMP(6) (11.6)	N	End Timestamp	Indicates the end date and time for measure calculation runs.	
LQRP_AGRGTN_CALC_RUN	RUN_STUS_CD	NUMBER (2.0)	N	Run Status Code	Indicates the status of a calculation run.	LQRP_RUN_STUS_CD
LQRP_AGRGTN_PBLC_RTG	AGRGTN_RUN_SEQNC_NUM	NUMBER (10.0)	Y	Aggregation Calculation Run Sequence Number	Aggregation Calculation Run Sequence Number	
LQRP_AGRGTN_PBLC_RTG	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_AGRGTN_PBLC_RTG	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_AGRGTN_PBLC_RTG	MSR_101_ADJSTD_PCT	NUMBER (13.10)	N	Pressure Ulcer Adjusted Percentage	The data in this column indicates the adjusted percentage value of patients with pressure ulcers	
LQRP_AGRGTN_PBLC_RTG	MSR_101_DNMNTR_NUM	NUMBER (7.0)	N	Pressure Ulcer Denominator	The data in this column indicates the denominator total for the percent of patients	
LQRP_AGRGTN_PBLC_RTG	MSR_101_EXPCTD_PCT	NUMBER (13.10)	N	Pressure Ulcer Expected Percentage	The data in this column indicates the expected percentage value for the percent of patients with	
LQRP_AGRGTN_PBLC_RTG	MSR_101_NMRTR_NUM	NUMBER (7.0)	N	Pressure Ulcer Numerator	The data in this column indicates the numerator total for the percent of patients with pressure	
LQRP_AGRGTN_PBLC_RTG	MSR_101_OBSRVD_PCT	NUMBER (7.4)	N	Pressure Ulcer Observed Percentage	The data in this column indicates the observed percentage value of patients with pressure ulcers	
LQRP_AGRGTN_PBLC_RTG	MSR_102_DNMNTR_NUM	NUMBER (7.0)	N	Denominator Number	The data in this column indicates the denominator total pertaining to	
LQRP_AGRGTN_PBLC_RTG	MSR_102_NMRTR_NUM	NUMBER (7.0)	N	Numerator Number	The data in this column indicates the numerator total pertaining to supervision/touching	
LQRP_AGRGTN_PBLC_RTG	MSR_102_OBSRVD_PCT	NUMBER (7.4)	N	Observed Percentage	The data in this column indicates the observed percentage value pertaining to	
LQRP_AGRGTN_PBLC_RTG	MSR_103_DNMNTR_NUM	NUMBER (7.0)	N	Bowel incontinence Denominator	The data in this column indicates the denominator total pertaining to bowel	
LQRP_AGRGTN_PBLC_RTG	MSR_103_NMRTR_NUM	NUMBER (7.0)	N	Bowel incontinence Numerator	The data in this column indicates the numerator total pertaining to bowel incontinence (at least	
LQRP_AGRGTN_PBLC_RTG	MSR_103_OBSRVD_PCT	NUMBER (7.4)	N	Bowel incontinence Observed Percentage	The data in this column indicates the observed percentage value pertaining to bowel	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN_PBLC_RP TG	MSR_104_DNMNTR_NUM	NUMBER (7.0)	N	DM, PVD or PAD Denominator	The data in this column indicates the denominator total for diabetes mellitus (DM),	
LQRP_AGRGTN_PBLC_RP TG	MSR_104_NMRTR_NUM	NUMBER (7.0)	N	DM, PVD or PAD Numerator	The data in this column indicates the numerator total for diabetes mellitus (DM), peripheral	
LQRP_AGRGTN_PBLC_RP TG	MSR_104_OBSRVD_PCT	NUMBER (7.4)	N	DM, PVD or PAD Observed Percentage	The data in this column indicates the observed percentage value for diabetes mellitus (DM),	
LQRP_AGRGTN_PBLC_RP TG	MSR_105_DNMNTR_NUM	NUMBER (7.0)	N	Low BMI Denominator	The data in this column indicates the denominator total pertaining to low body mass	
LQRP_AGRGTN_PBLC_RP TG	MSR_105_NMRTR_NUM	NUMBER (7.0)	N	Low BMI Numerator	The data in this column indicates the numerator total pertaining to low body mass index (BMI),	
LQRP_AGRGTN_PBLC_RP TG	MSR_105_OBSRVD_PCT	NUMBER (7.4)	N	Low BMI Observed Percentage	The data in this column indicates the observed percentage value pertaining to low body mass	
LQRP_AGRGTN_PBLC_RP TG	MSR_106_DNMNTR_NUM	NUMBER (7.0)	N	Denominator value pertaining to the percent of patients who were assessed and appropriately given the seasonal flu vaccine	Indicates the denominator total pertaining to the percent of residents who were assessed and	
LQRP_AGRGTN_PBLC_RP TG	MSR_106_NMRTR_NUM	NUMBER (7.0)	N	Numerator value pertaining to the percent of patients who were assessed and appropriately given the seasonal flu vaccine	Indicates the numerator total pertaining to the percent of residents who were assessed and	
LQRP_AGRGTN_PBLC_RP TG	MSR_106_OBSRVD_PCT	NUMBER (7.4)	N	Percent of Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine	Indicates the observed percentage value pertaining to the percent of residents who were	
LQRP_AGRGTN_PBLC_RP TG	MSR_107_DNMNTR_NUM	NUMBER (7.0)	N	Denominator value pertaining to the percent of Residents or Patients Who Received the Seasonal Flu Vaccine	Indicates the denominator total pertaining to the Residents or Patients Who Received the	
LQRP_AGRGTN_PBLC_RP TG	MSR_107_NMRTR_NUM	NUMBER (7.0)	N	Numerator value pertaining to the percent of Patients Who Received the Seasonal Flu Vaccine	Indicates the numerator total pertaining to the Residents or Patients Who Received the	
LQRP_AGRGTN_PBLC_RP TG	MSR_107_OBSRVD_PCT	NUMBER (7.4)	N	Observed Percentage of Patients Who Received the Seasonal Flu Vaccine	The data in this column indicates the observed percent of Residents or Patients Who Received	
LQRP_AGRGTN_PBLC_RP TG	MSR_108_DNMNTR_NUM	NUMBER (7.0)	N	Denominator Value Pertaining to Patients Who Were Offered and Declined the Seasonal Flu Vaccine	Indicates the denominator total pertaining to patients who were offered and declined the	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN_PBLC_RP TG	MSR_108_NMRTR_NUM	NUMBER (7.0)	N	Numerator Value Pertaining to Patients Who Were Offered and Declined the Seasonal Flu Vaccine	Indicates the numerator total pertaining to patients who were offered and declined the	
LQRP_AGRGTN_PBLC_RP TG	MSR_108_OBSRVD_PCT	NUMBER (7.4)	N	Observed Percentage of Patients Who Were Offered and Declined the Seasonal Flu Vaccine	Indicates the observed percentage pertaining to patients who were offered and declined the	
LQRP_AGRGTN_PBLC_RP TG	MSR_109_DNMNTR_NUM	NUMBER (7.0)	N	Denominator Value Pertaining to Patients Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine	Indicates the denominator total pertaining to patients who did not receive, due to medical	
LQRP_AGRGTN_PBLC_RP TG	MSR_109_NMRTR_NUM	NUMBER (7.0)	N	Percent of Patients Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine	Indicates the numerator total pertaining to patients who did not receive, due to medical	
LQRP_AGRGTN_PBLC_RP TG	MSR_109_OBSRVD_PCT	NUMBER (7.4)	N	Percent of Patients Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine	Indicates the observed percentage pertaining to patients who did not receive, due to medical	
LQRP_AGRGTN_PBLC_RP TG	MSR_113_DNMNTR_NUM	NUMBER (7.0)	N	Percent of Patients With an Admission and Discharge Functional Assessment and a Care Plan Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_AGRGTN_PBLC_RP TG	MSR_113_NMRTR_NUM	NUMBER (7.0)	N	Percent of Patients With an Admission and Discharge Functional Assessment and a Care Plan Numerator	Contains the number of stays that triggered the Percent of Long-Term Care Hospital (LTCH)	
LQRP_AGRGTN_PBLC_RP TG	MSR_113_OBSRVD_PCT	NUMBER (7.4)	N	Percent of Patients With an Admission and Discharge Functional Assessment and a Care Plan Observed Percentage	Contains the provider's observed percentage value for the Percent of Long-Term Care	
LQRP_AGRGTN_PBLC_RP TG	MSR_114_DNMNTR_NUM	NUMBER (7.0)	N	Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Denominator	Contains the total number of qualified stays in the facility which did not meet the exclusion	
LQRP_AGRGTN_PBLC_RP TG	MSR_114_NMRTR_NUM	NUMBER (7.0)	N	Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Numerator	Contains the number of stays in the facility that triggered the Application of Percent of Long-	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN_PBLCTG	MSR_114_OBSRVD_PCT	NUMBER (7.4)	N	Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Observed Percentage	Contains the unadjusted (crude) rate based on the numerator and denominator for the	
LQRP_AGRGTN_PBLCTG	MSR_116_DNMNTR_NUM	NUMBER (7.0)	N	Falls with Major Injury Denominator	Contains the number of total number of qualified stays in the facility which did not meet	
LQRP_AGRGTN_PBLCTG	MSR_116_NMRTR_NUM	NUMBER (7.0)	N	Falls with Major Injury Numerator	Contains the number of stays in the facility that triggered the Application of Percent of Residents	
LQRP_AGRGTN_PBLCTG	MSR_116_OBSRVD_PCT	NUMBER (7.4)	N	Falls with Major Injury Observed percentage	Contains the unadjusted (crude) rate based on the numerator and denominator for the	
LQRP_AGRGTN_PBLCTG	PRVDR_INTRNL_NUM	NUMBER (10.0)	Y	Provider Internal Number	Uniquely identifies a provider internally within the CASPER applications.	
LQRP_AGRGTN_PBLCTG	STATE_CD	VARCHAR2 (2)	Y	State Code	The data in this column indicates the state code.	STATES
LQRP_AGRGTN_PBLCTG	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	Indicates the date and time that the record was updated in the database.	
LQRP_AGRGTN_PBLCTG	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	Indicates the user who updated the record.	
LQRP_AGRGTN_PBLCTG	WTD_SW	VARCHAR2 (1)	Y	Weighted Switch	This switch is used to determine how the state and national QM rollup totals are calculated.	
LQRP_AGRGTN_RVWCT	AGRGTN_RUN_SQNC_NUM	NUMBER (10.0)	Y	Aggregation Calculation Run Sequence Number	Aggregation Calculation Run Sequence Number.	
LQRP_AGRGTN_RVWCT	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_AGRGTN_RVWCT	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_AGRGTN_RVWCT	MSR_101_DNMNTR_NUM	NUMBER (7.0)	N	Pressure Ulcer Denominator	Indicates the denominator total for the Percent of Patients with Pressure Ulcers That Are New	
LQRP_AGRGTN_RVWCT	MSR_101_NMRTR_NUM	NUMBER (7.0)	N	Pressure Ulcer Numerator	Indicates the numerator total for the Percent of Patients with Pressure Ulcers That Are New or	
LQRP_AGRGTN_RVWCT	MSR_101_OBSRVD_PCT	NUMBER (7.4)	N	Pressure Ulcer Observed Percentage	Indicates the Percent of Patients With Pressure Ulcers That Are New or Worsened (Short Stay)	
LQRP_AGRGTN_RVWCT	MSR_106_DNMNTR_NUM	NUMBER (7.0)	N	Percent of Patients Who Were Assessed and Appropriately Given the Seasonal Flu vaccine (S) Denominator	Indicates the denominator total pertaining to the Percent of Residents or Patients Who Were	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN_RVW_CR CT	MSR_106_NMRTR_NUM	NUMBER (7.0)	N	Percent of Patients Who Were Assessed and Appropriately Given the Seasonal Flu Vaccine (S) Numerator	Indicates the numerator total pertaining to the Percent of Residents or Patients Who Were	
LQRP_AGRGTN_RVW_CR CT	MSR_106_OBSRVD_PCT	NUMBER (7.4)	N	Percent of Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (S) Observed Percent	Indicates the observed percentage value pertaining to the Percent of Residents or Patients	
LQRP_AGRGTN_RVW_CR CT	MSR_113_DNMNTR_NUM	NUMBER (7.0)	N	Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Denominator	Indicates the denominator value for the Percent of Long-Term Care Hospital (LTCH) Patients	
LQRP_AGRGTN_RVW_CR CT	MSR_113_NMRTR_NUM	NUMBER (7.0)	N	Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Numerator	Indicates the numerator value for the Percent of Long-Term Care Hospital (LTCH) Patients With	
LQRP_AGRGTN_RVW_CR CT	MSR_113_OBSRVD_PCT	NUMBER (7.4)	N	Admission and Discharge Functional Assessment and a Care Plan That Addresses Functional Observed Percent	Indicates the observed percentage value for the Percent of Long-Term Care Hospital (LTCH)	
LQRP_AGRGTN_RVW_CR CT	MSR_114_DNMNTR_NUM	NUMBER (7.0)	N	Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Denominator	Indicates the denominator value for the Application of Percent of Long-Term Care	
LQRP_AGRGTN_RVW_CR CT	MSR_114_NMRTR_NUM	NUMBER (7.0)	N	Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Numerator	Indicates the numerator value for the Application of Percent of Long-Term Care	
LQRP_AGRGTN_RVW_CR CT	MSR_114_OBSRVD_PCT	NUMBER (7.4)	N	Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Observed Percentage	Indicates the observed percentage value for the Application of Percent of Long-Term Care	
LQRP_AGRGTN_RVW_CR CT	MSR_115_DNMNTR_NUM	NUMBER (7.0)	N	LTCH Functional Outcome Measure: Change in Mobility Among Patients Requiring Ventilator Support Denominator	Indicates the denominator value for the LTCH Functional Outcome Measure: Change in	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_AGRGTN_RVW_CR CT	MSR_115_OBSRVD_AVG	NUMBER (3.1)	N	LTCH Functional Outcome Measure: Change in Mobility Among Patients Requiring Ventilator Support Observed Average	Indicates the observed average value for the LTCH Functional Outcome Measure: Change in	
LQRP_AGRGTN_RVW_CR CT	MSR_116_DNMNTR_NUM	NUMBER (7.0)	N	Application of Percent of Residents Experiencing One or More Falls with Major Injury Denominator	Indicates the denominator value for the Application of Percent of Residents	
LQRP_AGRGTN_RVW_CR CT	MSR_116_NMRTR_NUM	NUMBER (7.0)	N	Application of Percent of Residents Experiencing One or More Falls with Major Injury Numerator	Indicates the numerator value for the Application of Percent of Residents	
LQRP_AGRGTN_RVW_CR CT	MSR_116_OBSRVD_PCT	NUMBER (7.4)	N	Application of Percent of Residents Experiencing One or More Falls with Major Injury Observed Percentage	Indicates the observed percentage value for the Application of Percent of Residents	
LQRP_AGRGTN_RVW_CR CT	PRVDR_INTRNL_NUM	NUMBER (10.0)	Y	Provider Internal Number	This number uniquely identifies an LTCH facility in the QIES national database.	
LQRP_AGRGTN_RVW_CR CT	STATE_CD	VARCHAR2 (2)	Y	State Code	The data in this column indicates the two-character state code of the state where the	STATES
LQRP_AGRGTN_RVW_CR CT	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LQRP_AGRGTN_RVW_CR CT	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LQRP_AGRGTN_RVW_CR CT	WTD_SW	VARCHAR2 (1)	Y	Weighted Switch	This switch is used to determine how the state and national QM rollup totals are calculated.	
LQRP_CLMS_DTC_MSR_V AL	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_CLMS_DTC_MSR_V AL	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_CLMS_DTC_MSR_V AL	DTC_CI_LWR_PCT	NUMBER (5.2)	N	Discharge To Community Confidence Interval Lower Percentile	Contains the value for the lower percentile of the Discharge to Community measure for LTCHs	
LQRP_CLMS_DTC_MSR_V AL	DTC_CI_UPR_PCT	NUMBER (5.2)	N	Discharge To Community Confidence Interval Upper Percentile	Contains the value for upper percentile of the Discharge to Community measure for LTCHs	
LQRP_CLMS_DTC_MSR_V AL	DTC_CNT	NUMBER (5.0)	N	Discharge to Community Numerator	Contains the number of patients who were discharged to the community for the Discharge	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_CLMS_DTC_MSR_VAL	DTC_DSCHRG_CNT	NUMBER (5.0)	N	Discharge to Community Eligible Stays	Contains a count for the number of eligible stays for the provider during the reporting period for	
LQRP_CLMS_DTC_MSR_VAL	DTC_END_DT	DATE (8)	Y	Discharge to Community End Date	Contains the reporting period end date for the Discharge to Community measure.	
LQRP_CLMS_DTC_MSR_VAL	DTC_FAC_BTR_NATL_CNT	NUMBER (5.0)	N	Discharge to Community Count of LTCHs with Better Than National Rate	Indicates the number of LTCHs in the nation that performed better than the national	
LQRP_CLMS_DTC_MSR_VAL	DTC_FAC_LOW_DNMNTR_CNT	NUMBER (5.0)	N	Discharge to Community With Low Denominators	Indicates the number of LTCHs for which the denominator was too low to calculate the	
LQRP_CLMS_DTC_MSR_VAL	DTC_FAC_SAME_NATL_CNT	NUMBER (5.0)	N	Discharge to Community With Same as National Rate	Indicates the number of LTCHs in the nation that performed the same as the national	
LQRP_CLMS_DTC_MSR_VAL	DTC_FAC_WRS_NATL_CNT	NUMBER (5.0)	N	Discharge to Community With Worse Than National Rate	Indicates the number of LTCHs in the nation that performed worse than the national	
LQRP_CLMS_DTC_MSR_VAL	DTC_LOW_DNMNTR_SW	NUMBER (1.0)	N	Discharge to Community Low Denominator Switch	Identifies whether the provider's number of cases was to small for public reporting of the	
LQRP_CLMS_DTC_MSR_VAL	DTC_NATL_PCT	NUMBER (5.2)	N	Discharge to Community National Percent	Contains the national percent for the Discharge to Community-Post Acute Care (PAC) Long-	
LQRP_CLMS_DTC_MSR_VAL	DTC_PCT	NUMBER (5.2)	N	Discharge to Community Percent	Contains the number of discharges to the community divided by the number of eligible	
LQRP_CLMS_DTC_MSR_VAL	DTC_PRFMNC_CTGRY_CD	NUMBER (1.0)	N	Discharge to Community Performance Category Code	Contains the code indicating the provider's performance on the Discharge to Community-	
LQRP_CLMS_DTC_MSR_VAL	DTC_RSK_ADJSTD_PCT	NUMBER (5.2)	N	Discharge to Community Risk-Adjusted Percent	Contains the risk adjustment of the observed discharge to community rate which accounts for	
LQRP_CLMS_DTC_MSR_VAL	DTC_STRT_DT	DATE (8)	N	Discharge to Community Start Date	Contains the reporting period start date for the Discharge to Community measure.	
LQRP_CLMS_DTC_MSR_VAL	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LQRP_CLMS_DTC_MSR_VAL	PRVDR_NUM	VARCHAR2 (6)	Y	CCN	This is the CMS Certification Number (CCN), formerly known as Medicare Provider Number,	
LQRP_CLMS_DTC_MSR_VAL	STATE_CD	VARCHAR2 (2)	N	State Code	The state abbreviation of the state where the facility is located.	STATES
LQRP_CLMS_MSPB_MSR_VAL	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_CLMS_MSPB_MSR_VAL	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_CLMS_MSPB_MSR_VAL	MSPB_AVG_SPND_ADJSTD	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Average Risk-Adjusted Spending	Contains the average risk-adjusted Medicare spending across all episodes for the attributed	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_AVG_SPND_ADJSTD_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Average Risk-Adjusted Spending	Contains the national average risk-adjusted Medicare spending across all episodes for the	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_AVG_SPND_ASCTD_PD	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Average Spending During Associated Services Period	Contains the average spending per episode during associated services period - non-risk-	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_AVG_SPND_ASCTD_PD_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Spending During Associated Services Period	Contains the national average spending per episode during associated services period - non-	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_AVG_SPND_TOT	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Average Total Spending During Episode	Contains the average spending per episode during the treatment period plus average	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_AVG_SPND_TOT_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Total Spending During Episode	Contains the national average spending per episode during the treatment period plus national	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_AVG_SPND_TX	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Average Spending During Treatment Period	Contains the average spending per episode during the treatment period - non-risk-adjusted.	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_AVG_SPND_TX_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Spending During Treatment Period	Contains the national average spending per episode during the treatment period - non-risk-	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_END_DT	DATE (8)	Y	Medicare Spending Per Beneficiary End Date	Contains the reporting period end date for the Medicare Spending Per Beneficiary measure.	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_MEDN_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Median	Contains the national average risk-adjusted episode spending across all episodes for all	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_NUM	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Number	Contains the total number of episodes which did not meet the exclusion criteria in the facility for	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_NUM_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Number	Contains the total number of episodes which did not meet the exclusion criteria in the nation for	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_SCRE	NUMBER (4.2)	N	Medicare Spending Per Beneficiary Score	Contains the ratio of the provider's MSPB Amount to the episode-weighted median MSPB	
LQRP_CLMS_MSPB_MSR_VAL	MSPB_SCRE_NATL	NUMBER (4.2)	N	Medicare Spending Per Beneficiary National Score	Contains the national ratio of the MSPB Amount to the episode-weighted median MSPB Amount	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_CLMS_MSPB_MSR_VAL	MSPB_STRT_DT	DATE (8)	N	Medicare Spending Per Beneficiary Start Date	Contains the reporting period start date for the Medicare Spending Per Beneficiary measure.	
LQRP_CLMS_MSPB_MSR_VAL	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LQRP_CLMS_MSPB_MSR_VAL	PRVDR_NUM	VARCHAR2 (6)	Y	CCN	This is the CMS Certification Number (CCN), formerly known as Medicare Provider Number,	
LQRP_CLMS_MSPB_MSR_VAL	STATE_CD	VARCHAR2 (2)	N	State Code	The state abbreviation of the state where the facility is located.	STATES
LQRP_CLMS_MSR_VAL	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_CLMS_MSR_VAL	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_CLMS_MSR_VAL	DSCHRG_CNT	NUMBER (5.0)	N	Discharge Count	This field contains a count for the number of patients discharged from the provider during the	
LQRP_CLMS_MSR_VAL	END_DT	DATE (7)	Y	End Date	The date in this column identifies the end date of the claims measure totals for the provider.	
LQRP_CLMS_MSR_VAL	HOSP_BTR_NATL_CNT	NUMBER (5.0)	N	Count of Hospitals With Better Than National Rate	Indicates the number of LTCHs in the nation that performed better than the national	
LQRP_CLMS_MSR_VAL	HOSP_LOW_DNMNTR_CNT	NUMBER (5.0)	N	Count of Hospitals With Low Denominators	Indicates the number of LTCHs for which the denominator was too low to calculate the	
LQRP_CLMS_MSR_VAL	HOSP_SAME_NATL_CNT	NUMBER (5.0)	N	Count of Hospitals With Same as National Rate	Indicates the number of LTCHs in the nation that performed the same as the national	
LQRP_CLMS_MSR_VAL	HOSP_WRS_NATL_CNT	NUMBER (5.0)	N	Count of Hospitals With Worse Than National Rate	Indicates the number of LTCHs in the nation that performed worse than the national	
LQRP_CLMS_MSR_VAL	LOW_DNMNTR_SW	NUMBER (1.0)	N			
LQRP_CLMS_MSR_VAL	NATL_READM_PCT	NUMBER (5.2)	N	National Readmission Percentage	The national rate for the claims-based readmission rate.	
LQRP_CLMS_MSR_VAL	PRFMNC_CTGRY_CD	NUMBER (1.0)	N	Performance Category Code	Indicates the performance category code.	LQRP_CLMS_PRFMNC_CTGRY_CD
LQRP_CLMS_MSR_VAL	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	Uniquely identifies a provider internally within the CASPER applications.	
LQRP_CLMS_MSR_VAL	PRVDR_NUM	VARCHAR2 (6)	Y	Provider Number	Six or ten position identification number that is assigned to a certified provider. This is the CMS	
LQRP_CLMS_MSR_VAL	READM_CI_LWR_PCT	NUMBER (5.2)	N	Readmission Confidence Interval Lower Limit	Lower limit of the 95 percent confidence interval for the risk-adjusted readmission rate	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_CLMS_MSR_VAL	READM_CI_UPR_PCT	NUMBER (5.2)	N	Readmission Confidence Interval Upper Limit	Upper limit of the 95 percent confidence interval for the risk-adjusted readmission rate	
LQRP_CLMS_MSR_VAL	READM_CNT	NUMBER (5.0)	N	Readmission Count	Indicates the readmission measure count.	
LQRP_CLMS_MSR_VAL	READM_PCT	NUMBER (5.2)	N	Readmission Percent	Indicates the observed readmission percent. (Not currently reported.)	
LQRP_CLMS_MSR_VAL	RISK_ADJSTD_READM_PCT	NUMBER (5.2)	N	Risk Adjusted Readmission Percent	Indicates the risk adjusted percentage for the readmission measure.	
LQRP_CLMS_MSR_VAL	STATE_CD	VARCHAR2 (2)	N	State Code	The data in this column indicates the state code.	STATES
LQRP_CLMS_MSR_VAL	STRT_DT	DATE (7)	N	Readmission Measure Start Date	The date in this column identifies the start date of the claims measure totals for the provider.	
LQRP_CLMS_PPR_MSR_VAL	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_CLMS_PPR_MSR_VAL	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_CLMS_PPR_MSR_VAL	PPR_CI_LWR_PCT	NUMBER (5.2)	N	Potentially Preventable Lower Limit Percent Confidence Interval	Lower limit of 95% Confidence Interval for the Potentially Preventable 30-Day Post Discharge Interval	
LQRP_CLMS_PPR_MSR_VAL	PPR_CI_UPR_PCT	NUMBER (5.2)	N	Potentially Preventable Upper Limit Percent Confidence Interval	Upper limit of the 95% confidence interval for the Potentially Preventable 30-Day Post Discharge Interval	
LQRP_CLMS_PPR_MSR_VAL	PPR_CNT	NUMBER (5.0)	N	Potentially Preventable Count	Contains the number of patients who have the event of an unplanned or potentially preventable	
LQRP_CLMS_PPR_MSR_VAL	PPR_DSCHRG_CNT	NUMBER (5.0)	N	Potentially Preventable Discharge Count	Contains a count for the number of patients discharged from the facility during the reporting	
LQRP_CLMS_PPR_MSR_VAL	PPR_END_DT	DATE (8)	Y	Potentially Preventable End Date	Contains the end date for the Potentially Preventable 30-Day Post Discharge	
LQRP_CLMS_PPR_MSR_VAL	PPR_FAC_BTR_NATL_CNT	NUMBER (5.0)	N	Potentially Preventable Count of LTCHs With Better Than National Rate	Indicates the number of LTCHs in the nation that performed better than the national	
LQRP_CLMS_PPR_MSR_VAL	PPR_FAC_LOW_DNMNTR_CNT	NUMBER (5.0)	N	Potentially Preventable Count of LTCHs With Low Denominators	Indicates the number of LTCHs for which the denominator was too low to calculate the	
LQRP_CLMS_PPR_MSR_VAL	PPR_FAC_SAME_NATL_CNT	NUMBER (5.0)	N	Potentially Preventable Count of LTCHs With Same as National Rate	Indicates the number of LTCHs in the nation that performed the same as the national	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_CLMS_PPR_MSR_V AL	PPR_FAC_WRS_NATL_CNT	NUMBER (5.0)	N	Potentially Preventable Count of LTCHs With Worse Than National Rate	Indicates the number of LTCHs in the nation that performed worse than the national	
LQRP_CLMS_PPR_MSR_V AL	PPR_LOW_DNMNTR_SW	NUMBER (1.0)	N	Potentially Preventable Low Denominator Switch	Identifies providers whose number of cases is too small for public reporting of the readmission	
LQRP_CLMS_PPR_MSR_V AL	PPR_NATL_PCT	NUMBER (5.2)	N	Potentially Preventable National Percent	National percent for the Potentially Preventable 30-Day Post Discharge Readmission Measure	
LQRP_CLMS_PPR_MSR_V AL	PPR_PCT	NUMBER (5.2)	N	Potentially Preventable Percent	Contains the number of unplanned or potentially preventable readmissions following discharge	
LQRP_CLMS_PPR_MSR_V AL	PPR_PRFMNC_CTGRY_CD	NUMBER (1.0)	N	Potentially Preventable Performance Category Code	Indicates the performance category code for the Potentially Preventable 30-Day Post Discharge	
LQRP_CLMS_PPR_MSR_V AL	PPR_RSK_ADJSTD_PCT	NUMBER (5.2)	N	Potentially Preventable Risk-Adjusted Percent	Contains the risk adjustment of the crude readmission rate which accounts for patient	
LQRP_CLMS_PPR_MSR_V AL	PPR_STRT_DT	DATE (8)	N	Potentially Preventable Start Date	Contains the start date for the Potentially Preventable 30-Day Post Discharge	
LQRP_CLMS_PPR_MSR_V AL	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LQRP_CLMS_PPR_MSR_V AL	PRVDR_NUM	VARCHAR2 (6)	Y	CCN	This is the CMS Certification Number (CCN), formerly known as Medicare Provider Number,	
LQRP_CLMS_PPR_MSR_V AL	STATE_CD	VARCHAR2 (2)	N	State Code	The state abbreviation of the state where the facility is located.	STATES
LQRP_FAC_XREF	ADDR_1_TXT	VARCHAR2 (50)	N	Provider Address	This is the address of the provider	
LQRP_FAC_XREF	ADDR_2_TXT	VARCHAR2 (50)	N	Provider Address Line 2	This is the second line of the address of the provider	
LQRP_FAC_XREF	BED_CNT	NUMBER (4.0)	N	LTCH Total Bed Count	This is the total bed count for the LTCH.	
LQRP_FAC_XREF	CITY_TXT	VARCHAR2 (28)	N	City Provider is Located	The city in which the LTCH is located.	
LQRP_FAC_XREF	FIPS_CNTY_CD	VARCHAR2 (3)	N	FIPS County Code	Federal Information Processing Standards (FIPS) County Code	
LQRP_FAC_XREF	GNRL_CNTL_TYPE_CD	VARCHAR2 (2)	N	Ownership Type Code	Indicates the ownership type of the provider	LQRP_CNTL_TYPE_CD
LQRP_FAC_XREF	HAS_ASMT_SW	VARCHAR2 (1)	N	Has Assessment Switch	This column indicates whether the provider had been open for less than 6 months as of the end of	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_FAC_XREF	HAS_FLU_ASMT_SW	VARCHAR2 (1)	N	Has Flu Assessment Switch	This column indicates whether the provider has any assessments with a target date during the	
LQRP_FAC_XREF	INCMPLT_DATA_SW	VARCHAR2 (1)	N	Incomplete Data Switch	This is an incomplete data switch. If the earliest assessment discharge date for the LTCH was	
LQRP_FAC_XREF	JOB_SEQNC_NUM	NUMBER (6.0)	Y	Sequence Number	This value indicates the job sequence number	
LQRP_FAC_XREF	NAME_TXT	VARCHAR2 (50)	N	Facility Name	The LTCHs facility name	
LQRP_FAC_XREF	OPEN_LT_6_MOS_SW	VARCHAR2 (1)	N	Open Less Than 6 Month Switch	This column indicates whether the provider had been open for less than 6 months as of the end of	
LQRP_FAC_XREF	ORGNL_PRTCPTN_DT	DATE (7)	N	Original Participation Date	The original participation date of the Long Term Care Hospital.	
LQRP_FAC_XREF	PHNE_NUM_TXT	VARCHAR2 (10)	N	Phone Number Text	The LTCHs phone number	
LQRP_FAC_XREF	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	Uniquely identifies a provider internally within the CASPER applications.	
LQRP_FAC_XREF	PRVDR_NUM	VARCHAR2 (10)	Y	Provider Number	Six or ten position identification number that is assigned to a certified provider. This is the CMS	
LQRP_FAC_XREF	RGN_CD	VARCHAR2 (2)	N	Region Code	The CMS Regional Office responsible for the certification of the LTCH.	
LQRP_FAC_XREF	STATE_CD	VARCHAR2 (2)	N	State Code	The data in this column indicates the state code.	STATES
LQRP_FAC_XREF	ZIP_TXT	VARCHAR2 (5)	N	Zip Code Text	The LTCHs zip code.	
LQRP_FLAT_FIL_JOB	ASMT_NON_PU_MSR_END_DT	DATE (7)	N	Care plan and falls assessment measures end date	Care plan and falls assessment measures end date	
LQRP_FLAT_FIL_JOB	ASMT_NON_PU_MSR_STRT_DT	DATE (7)	N	Care plan and falls assessment measures start date	Care plan and falls assessment measures start date	
LQRP_FLAT_FIL_JOB	ASMT_PU_MSR_END_DT	DATE (7)	N	Pressure ulcer measure end date	Pressure ulcer measure end date	
LQRP_FLAT_FIL_JOB	ASMT_PU_MSR_STRT_DT	DATE (7)	N	Pressure ulcer measure start date	Pressure ulcer measure start date	
LQRP_FLAT_FIL_JOB	CDC_MSR_END_DT	DATE (7)	N	CDC Measure End Date	This is the end date for the time period of the CDC measure data included on the files	
LQRP_FLAT_FIL_JOB	CDC_MSR_STRT_DT	DATE (7)	N	CDC Measure Start Date	This is the start date for the time period of the CDC measure data included on the files	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_FLAT_FIL_JOB	CLMS_MSR_END_DT	DATE (7)	N	Claims Measure End Date	This is the end date for the time period of the claims measure data included on the files	
LQRP_FLAT_FIL_JOB	CLMS_MSR_STRT_DT	DATE (7)	N	Claims Measure Start Date	This is the start date for the time period of the claims measure data included on the flat files	
LQRP_FLAT_FIL_JOB	CLMS_PPR_DTC_MSPB_MSR_END_DT	DATE (7)	N	Claims PPR/DTC/MSPB measures end date	Claims PPR/DTC/MSPB measures end date	
LQRP_FLAT_FIL_JOB	CLMS_PPR_DTC_MSPB_MSR_STRT_DT	DATE (7)	N	Claims PPR/DTC/MSPB measures start date	Claims PPR/DTC/MSPB measures start date	
LQRP_FLAT_FIL_JOB	INFLNZ_MSR_END_DT	DATE (7)	N	Influenza Measure End Date	This is the end date for the time period of the influenza measure data included on the files	
LQRP_FLAT_FIL_JOB	INFLNZ_MSR_STRT_DT	DATE (7)	N	Influenza Measure Start Date	This is the start date for the time period of the influenza measure data included on the files	
LQRP_FLAT_FIL_JOB	JOB_SQNC_NUM	NUMBER (6.0)	Y	Job Sequence Number	This value indicates the job sequence number	
LQRP_FLAT_FIL_JOB	RUN_DT	DATE (7)	N	Run Date	Indicates the run date and time for a job that created public reporting files.	
LQRP_MSR_VAL	ADMSN_ASMT_ID	NUMBER (22)	N	Admission Assessment ID	This column contains the records admission assessment ID.	
LQRP_MSR_VAL	ADMSN_ASMT_SUBMSN_DT	DATE (7)	N	Admission Assessment Submission Date	This column contains the submission date of the admission record.	
LQRP_MSR_VAL	ADMSN_DT	DATE (7)	N	Admission Date	This column contains the admission date for the LTCH stay.	
LQRP_MSR_VAL	APLCBL_FLU_VCNTN_SEAS_N_BGN_DT	DATE (7)	N	Begin Date of Flu Vaccination Season	This is the begin date of the influenza vaccination season that pertains to the residents	
LQRP_MSR_VAL	APLCBL_FLU_VCNTN_SEAS_N_END_DT	DATE (7)	N	End Date of Flu Vaccination Season	This is the end date of the influenza vaccination season that pertains to the residents LTCH stay.	
LQRP_MSR_VAL	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_MSR_VAL	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_MSR_VAL	DSCHRG_ASMT_ID	NUMBER (22)	N	Discharge Assessment ID	This column contains the discharge assessment ID.	
LQRP_MSR_VAL	DSCHRG_ASMT_SUBMSN_DT	DATE (7)	N	Discharge Assessment Submission Date	This column contains the submission date of the discharge record	
LQRP_MSR_VAL	DSCHRG_DT	DATE (7)	N	Discharge Date	This column contains the discharge date for the LTCH stay.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_MSR_VAL	DSCHRG_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	Reason for Assessment Discharge	This column contains the discharge reason for assessment code	LTCH_RSN_ASMT_CD
LQRP_MSR_VAL	LNGTH_OF_STAY	NUMBER (22)	N	Length of Stay	This value indicates the length of stay in the LTCH.	
LQRP_MSR_VAL	MSR_101_VAL_NUM	NUMBER (1.0)	N	Pressure Ulcer New or Worsened Value	Indicates the measure result pertaining to the Pressure Ulcer New or Worsened quality	
LQRP_MSR_VAL	MSR_102_VAL_NUM	NUMBER (1.0)	N	Value Number	Indicates the measure result pertaining to supervision/touching assistance, or more, when	
LQRP_MSR_VAL	MSR_103_VAL_NUM	NUMBER (1.0)	N	Bowel Incontinence Value Number	Indicates the measure result pertaining to bowel incontinence (null = excluded, 0 = denominator	
LQRP_MSR_VAL	MSR_104_VAL_NUM	NUMBER (1.0)	N	DM, PVD or PAD Measure Value	Indicates the measure result pertaining to diabetes mellitus (DM), peripheral vascular	
LQRP_MSR_VAL	MSR_105_VAL_NUM	NUMBER (1.0)	N	Low BMI Measure Value	Indicates the measure result pertaining to low body mass index (BMI), based on height and	
LQRP_MSR_VAL	MSR_106_VAL_NUM	NUMBER (1.0)	N	Patients Assessed and Given the Flu Vaccine Value	Indicates the measure result pertaining to the Patients Assessed and Given the Flu Vaccine	
LQRP_MSR_VAL	MSR_107_VAL_NUM	NUMBER (1.0)	N	Patients Who Received the Flu Vaccine Value	Indicates the measure result pertaining to the Patients Who Received the Flu Vaccine quality	
LQRP_MSR_VAL	MSR_108_VAL_NUM	NUMBER (1.0)	N	Patients Who Were Offered and Declined the Flu Vaccine Value	Indicates the measure result pertaining to the Patients Who Were Offered and Declined the	
LQRP_MSR_VAL	MSR_109_VAL_NUM	NUMBER (1.0)	N	Patients Who Did Not Receive, Due to Medical Contraindication, the Flu Vaccine Value	Indicates the measure result pertaining to the Patients Who Did Not Receive, Due to Medical	
LQRP_MSR_VAL	MSR_113_VAL_NUM	NUMBER (1.0)	N	Percent of Patients With an Admission and Discharge Assessment and a Care Plan That Addresses Function Value	Indicates the measure result pertaining to the Patients With an Admission and Discharge	
LQRP_MSR_VAL	MSR_114_VAL_NUM	NUMBER (1.0)	N	Application of Percent of Patients With an Admission and Discharge Assessment and a Care Plan That Addresses Function Value	Indicates the measure result pertaining to the Application of Patients With an Admission and	
LQRP_MSR_VAL	MSR_115_ADMSN_SCRE	NUMBER (2.0)	N	Change in Mobility Admission Score	Contains the average admission score for the LTCH Functional Outcome Measure: Change in	
LQRP_MSR_VAL	MSR_115_DSCHRG_SCRE	NUMBER (2.0)	N	Change in Mobility Discharge Score	Contains the average discharge score for the LTCH Functional Outcome Measure: Change in	
LQRP_MSR_VAL	MSR_115_VAL_NUM	NUMBER (2.0)	N	Change in Mobility Among Patients Requiring Ventilator	Indicates the measure result pertaining to the Change in Mobility Admission Score quality	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
				Support Value		
LQRP_MSR_VAL	MSR_115_VAL_NUM_EXPCTD	NUMBER (6.4)	N	Change in Mobility Expected Value Number	Contains a resident's expected discharge mobility score for the LTCH Functional	
LQRP_MSR_VAL	MSR_116_VAL_NUM	NUMBER (1.0)	N	Application of Percent of Residents Experiencing One or More Falls with Major Injury Value	Indicates the measure result pertaining to the Residents Experiencing One or More Falls with	
LQRP_MSR_VAL	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	Uniquely identifies a provider internally within the CASPER applications.	
LQRP_MSR_VAL	PRVDR_NUM	VARCHAR2 (10)	N	CCN	CCN	
LQRP_MSR_VAL	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Patient ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
LQRP_MSR_VAL	RSDNT_NAME	VARCHAR2 (32)	N	Patient Name	The patient's name in last name, first name format.	
LQRP_MSR_VAL	STATE_CD	VARCHAR2 (2)	N	State Code	The data in this column indicates the state code.	STATES
LQRP_MSR_VAL	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	Indicates the date and time that the record was updated in the database.	
LQRP_MSR_VAL	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	Indicates the user who updated the record.	
LQRP_MSR_VAL_PBLC_RPTG	ADMSN_ASMT_ID	NUMBER (22)	N	Admission Assessment ID	This column contains the records admission assessment ID.	
LQRP_MSR_VAL_PBLC_RPTG	ADMSN_ASMT_SUBMSN_DT	DATE (7)	N	Admission Assessment Submission Date	This column contains the submission date of the admission record.	
LQRP_MSR_VAL_PBLC_RPTG	ADMSN_DT	DATE (7)	N	Admission Date	This column contains the admission date for the LTCH stay.	
LQRP_MSR_VAL_PBLC_RPTG	APLCBL_FLU_VCNTN_SEASN_BGN_DT	DATE (7)	N	Begin Date of Flu Vaccination Season	This is the begin date of the influenza vaccination season that pertains to the residents	
LQRP_MSR_VAL_PBLC_RPTG	APLCBL_FLU_VCNTN_SEASN_END_DT	DATE (7)	N	End Date of Flu Vaccination Season	This is the end date of the influenza vaccination season that pertains to the residents LTCH stay.	
LQRP_MSR_VAL_PBLC_RPTG	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_MSR_VAL_PBLC_RPTG	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	



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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_MSR_VAL_PBLC_R PTG	DSCHRG_ASMT_ID	NUMBER (22)	N	Discharge Assessment ID	This column contains the discharge assessment ID.	
LQRP_MSR_VAL_PBLC_R PTG	DSCHRG_ASMT_SUBMSN_D T	DATE (7)	N	Discharge Assessment Submission Date	This column contains the submission date of the discharge record.	
LQRP_MSR_VAL_PBLC_R PTG	DSCHRG_DT	DATE (7)	N	Discharge Date	This column contains the discharge date for the LTCH stay.	
LQRP_MSR_VAL_PBLC_R PTG	DSCHRG_RSN_FOR_ASMT_C D	VARCHAR2 (2)	N	Reason for Assessment Discharge	This column contains the discharge reason for assessment code	LTCH_RSN_ASMT_CD
LQRP_MSR_VAL_PBLC_R PTG	LNTH_OF_STAY	NUMBER (22)	N	Length of Stay	This value indicates the length of stay in the LTCH.	
LQRP_MSR_VAL_PBLC_R PTG	MSR_101_VAL_NUM	NUMBER (1.0)	N	Pressure Ulcer New or Worsened Value	Indicates the measure result pertaining to the Pressure Ulcer New or Worsened quality	
LQRP_MSR_VAL_PBLC_R PTG	MSR_102_VAL_NUM	NUMBER (1.0)	N	Value Number	Indicates the measure result pertaining to supervision/touching assistance, or more, when	
LQRP_MSR_VAL_PBLC_R PTG	MSR_103_VAL_NUM	NUMBER (1.0)	N	Bowel Incontinence Value Number	Indicates the measure result pertaining to bowel incontinence (null = excluded, 0 = denominator)	
LQRP_MSR_VAL_PBLC_R PTG	MSR_104_VAL_NUM	NUMBER (1.0)	N	DM, PVD or PAD Measure Value	Indicates the measure result pertaining to diabetes mellitus (DM), peripheral vascular	
LQRP_MSR_VAL_PBLC_R PTG	MSR_105_VAL_NUM	NUMBER (1.0)	N	Low BMI Measure Value	Indicates the measure result pertaining to low body mass index (BMI), based on height and	
LQRP_MSR_VAL_PBLC_R PTG	MSR_106_VAL_NUM	NUMBER (1.0)	N	Patients Assessed and Given Flu Vaccine Value	Indicates the measure result pertaining to the Patients Assessed and Given the Flu Vaccine	
LQRP_MSR_VAL_PBLC_R PTG	MSR_107_VAL_NUM	NUMBER (1.0)	N	Number of patients who received the seasonal flu vaccine	Indicates the measure result pertaining to whether patient received the seasonal influenza	
LQRP_MSR_VAL_PBLC_R PTG	MSR_108_VAL_NUM	NUMBER (1.0)	N	Number of patients who were offered and declined the seasonal flu vaccine	Indicates the measure result pertaining to whether patient was offered and declined the flu vaccine	
LQRP_MSR_VAL_PBLC_R PTG	MSR_109_VAL_NUM	NUMBER (1.0)	N	Number of patients who did not receive, due to medical contraindication, the seasonal flu vaccine	Indicates the measure result pertaining to whether patient did not receive, due to medical	
LQRP_MSR_VAL_PBLC_R PTG	MSR_113_VAL_NUM	NUMBER (1.0)	N	Admission and Discharge Assessment and a Care Plan That Addresses Function Value	Contains the measure result pertaining to the Patients With an Admission and Discharge	
LQRP_MSR_VAL_PBLC_R PTG	MSR_114_VAL_NUM	NUMBER (1.0)	N	Application of Percent of Patients With an Assessment and a Care Plan Value	Contains the measure result pertaining to the Application of Patients With an Admission and Plan Value	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_MSR_VAL_PBLC_R PTG	MSR_116_VAL_NUM	NUMBER (1.0)	N	Residents Experiencing One or More Falls with Major Injury Value	Contains the measure result pertaining to the Application of Percent of Residents	
LQRP_MSR_VAL_PBLC_R PTG	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	Uniquely identifies a provider internally within the CASPER applications.	
LQRP_MSR_VAL_PBLC_R PTG	PRVDR_NUM	VARCHAR2 (10)	N	CCN	CCN	
LQRP_MSR_VAL_PBLC_R PTG	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Patient ID	A unique number assigned by the submission system which identifies a resident. The	
LQRP_MSR_VAL_PBLC_R PTG	RSDNT_NAME	VARCHAR2 (32)	N	Patient Name	The patient's name in last name, first name format.	
LQRP_MSR_VAL_PBLC_R PTG	STATE_CD	VARCHAR2 (2)	N	State Code	The data in this column indicates the state code.	STATES
LQRP_MSR_VAL_PBLC_R PTG	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	Indicates the date and time that the record was updated in the database.	
LQRP_MSR_VAL_PBLC_R PTG	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	Indicates the user who updated the record.	
LQRP_MSR_VAL_RVW_C RCT	ADMSN_ASMT_ID	NUMBER (22)	N	Admission Assessment ID	This column contains the assessment ID of the admission assessment.	
LQRP_MSR_VAL_RVW_C RCT	ADMSN_ASMT_SUBMSN_DT	DATE (8)	N	Admission Assessment Submission Date	This column contains the submission date of the admission record.	
LQRP_MSR_VAL_RVW_C RCT	ADMSN_DT	DATE (8)	N	Admission Date	This column contains the admission date for the LTCH stay.	
LQRP_MSR_VAL_RVW_C RCT	APLCBL_FLU_VCNTN_SEAS N_BGN_DT	DATE (8)	N	Begin Date of Flu Vaccination Season	This is the begin date of the influenza vaccination season that pertains to the patients	
LQRP_MSR_VAL_RVW_C RCT	APLCBL_FLU_VCNTN_SEAS N_END_DT	DATE (8)	N	End Date of Flu Vaccination Season	This is the end date of the influenza vaccination season that pertains to the patients LTCH stay.	
LQRP_MSR_VAL_RVW_C RCT	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_MSR_VAL_RVW_C RCT	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_MSR_VAL_RVW_C RCT	DSCHRG_ASMT_ID	NUMBER (22)	N	Discharge Assessment ID	This column contains the assessment id of the discharge assessment.	
LQRP_MSR_VAL_RVW_C RCT	DSCHRG_ASMT_SUBMSN_D T	DATE (8)	N	Discharge Assessment Submission Date	This column contains the submission date of the discharge record.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_MSR_VAL_RVW_C RCT	DSCHRG_DT	DATE (8)	N	Discharge Date	This column contains the discharge date for the LTCH stay.	
LQRP_MSR_VAL_RVW_C RCT	DSCHRG_RSN_FOR_ASMT_C D	VARCHAR2 (2)	N	Discharge Reason for Assessment Code	This column contains the discharge reason for assessment code.	
LQRP_MSR_VAL_RVW_C RCT	LNGTH_OF_STAY	NUMBER (22)	N	Length of Stay	This value indicates the length of stay in the LTCH.	
LQRP_MSR_VAL_RVW_C RCT	MSR_101_VAL_NUM	NUMBER (1.0)	N	Pressure Ulcer New or Worsened Value Number	Indicates the measure result pertaining to the Pressure Ulcer New or Worsened quality	
LQRP_MSR_VAL_RVW_C RCT	MSR_106_VAL_NUM	NUMBER (1.0)	N	Percent of Residents Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) Value Number	Indicates the measure result pertaining to the Percent of Residents Who Were Assessed and	
LQRP_MSR_VAL_RVW_C RCT	MSR_113_VAL_NUM	NUMBER (1.0)	N	Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Value Number	Indicates the value for the Percent of Long-Term Care Hospital (LTCH) Patients With an	
LQRP_MSR_VAL_RVW_C RCT	MSR_114_VAL_NUM	NUMBER (1.0)	N	Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Value Number	Indicates the value for the Application of Percent of Long-Term Care Hospital (LTCH)	
LQRP_MSR_VAL_RVW_C RCT	MSR_115_VAL_NUM	NUMBER (2.0)	N	LTCH Functional Outcome Measure: Change in Mobility Among Patients Requiring Ventilator Support Value Number	Indicates the value for the LTCH Functional Outcome Measure: Change in Mobility Among	
LQRP_MSR_VAL_RVW_C RCT	MSR_116_VAL_NUM	NUMBER (1.0)	N	Application of Percent of Residents Experiencing One or More Falls with Major Injury Value Number	The value for the Application of Percent of Residents Experiencing One or More Falls with	
LQRP_MSR_VAL_RVW_C RCT	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility in the QIES national database.	
LQRP_MSR_VAL_RVW_C RCT	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by a system that uniquely identifies the patient. The combination	
LQRP_MSR_VAL_RVW_C RCT	RSDNT_NAME	VARCHAR2 (32)	N	Patient Name	The patient's name in last name, first name format.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_MSR_VAL_RVW_C RCT	STATE_CD	VARCHAR2 (2)	N	State Code	The data in this column indicates the two-character state code of the state where the	STATES
LQRP_MSR_VAL_RVW_C RCT	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LQRP_MSR_VAL_RVW_C RCT	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LQRP_PBLC_RPTG_MSR_ LAG	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_PBLC_RPTG_MSR_ LAG	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_PBLC_RPTG_MSR_ LAG	DATE_RNG_MO_CNT	NUMBER (2.0)	N	Date range month count	Number of months in the reporting period for this type of measure.	
LQRP_PBLC_RPTG_MSR_ LAG	LAG_MO_CNT	NUMBER (2.0)	N	Lag month count	Number of months of lag between the end date of this measure types report period and the	
LQRP_PBLC_RPTG_MSR_ LAG	LAG_TYPE_CD	NUMBER (2.0)	Y	Lag Type Code	ID number for the types of lag. Used in LQRP_PBLC_RPTG_MSR_MSTR to join to	
LQRP_PBLC_RPTG_MSR_ LAG	LAG_TYPE_DESC	VARCHAR2 (200)	N	Lag Type Description	Allows informational text about which types of data correspond to each lag type.	
LQRP_PBLC_RPTG_MSR_ LAG	UPDT_FREQ	VARCHAR2 (1)	N	Update frequency	Frequency with which this type of data is updated. Q= quarterly, Y = yearly	
LQRP_PBLC_RPTG_MSR_ LAG	UPDT_MO_NUM	NUMBER (2.0)	N	Update month number	For measure types with yearly update, number of the month in which the update occurs	
LQRP_PBLC_RPTG_MSR_ MSTR	LAG_TYPE_CD	NUMBER (2.0)	N	Lag Type Code	Indicates the lag type for the measure, contained in LQRP_PBLC_RPTG_MSR_LAG.	
LQRP_PBLC_RPTG_MSR_ MSTR	MSR_DESC_TXT	VARCHAR2 (100)	N	Measure Description Text	Description of the measure	
LQRP_PBLC_RPTG_MSR_ MSTR	MSR_ID	NUMBER (3.0)	Y	Measure ID	The unique measure ID.	
LQRP_PBLC_RPTG_MSR_ MSTR	MSR_SRC_CD	NUMBER (2.0)	N			
LQRP_PBLC_RPTG_MSR_ MSTR	MSR_TAG_TXT	VARCHAR2 (40)	Y	Measure Tag Text	Contains the identifier for all measure results in the MeasureDates.XML and QualityData.XML	
LQRP_PBLC_RPTG_MSR_ MSTR	NATL_MSR_SW	VARCHAR2 (1)	Y	National Measure Switch	Indicates whether or not the measure is a national-level measure.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_PBLC_RPTG_MSR_MSTR	SRT_NUM	NUMBER (3.0)	N	Sort Number	Sort order for the measure in the QualityData XML file.	
LQRP_PBLC_RPTG_MSR_MSTR	TYPE_TXT	VARCHAR2 (20)	N	Type Text	Indicates the data format of the data stored in the measure XML tag.	
LQRP_PRVDR_RPT_DTL	AVG_ADMSN_SCRE	NUMBER (3.1)	N	Average Admission Score	Contains the average score on admission of the quality measure for the facility.	
LQRP_PRVDR_RPT_DTL	AVG_DSCHRG_SCRE	NUMBER (3.1)	N	Average Discharge Score	Contains the average score on discharge of the quality measure for the facility.	
LQRP_PRVDR_RPT_DTL	AVG_RSK_ADJSTD_CHG	NUMBER (4.1)	N	Average Risk-Adjusted Change	The data in this column is computed using a mathematical model that accounts for resident	
LQRP_PRVDR_RPT_DTL	AVG_SCRE_CHG	NUMBER (3.1)	N	Average Score Change	Contains the average observed change (discharge - admission) in score for the facility.	
LQRP_PRVDR_RPT_DTL	CMPRSN_GRP_BGN_DT	DATE (8)	N	Comparison Group Begin Date	This is the begin date for the Comparison Group Period, which is the same as the Begin Date	
LQRP_PRVDR_RPT_DTL	CMPRSN_GRP_END_DT	DATE (8)	N	Comparison Group End Date	This is the end date for the Comparison Group Period, which is the same as the End Date	
LQRP_PRVDR_RPT_DTL	CMPRSN_GRP_NATL_AVG	NUMBER (4.1)	N	Comparison Group National Average	This is the average for the incidence of the quality measure occurrence for all LTCHs in the	
LQRP_PRVDR_RPT_DTL	CREAT_TS	TIMESTAMP(6) (8.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_PRVDR_RPT_DTL	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_PRVDR_RPT_DTL	DATA_CALC_DT	DATE (8)	N	Data Calculation Date	This is the date of the last calculation of the LTCH quality measure data.	
LQRP_PRVDR_RPT_DTL	DNMNTR_NUM	NUMBER (6.0)	N	Denominator	This is the denominator for the quality measure. The denominator indicates the number of	
LQRP_PRVDR_RPT_DTL	DSCHRG_CNT	NUMBER (5.0)	N	Discharge Count	Number of Eligible Medicare Stays	
LQRP_PRVDR_RPT_DTL	DTC_DNMNTR	NUMBER (3.0)	N	Discharge To Community Denominator	Contains the total number of stays in the facility which did not meet the exclusion criteria for the	
LQRP_PRVDR_RPT_DTL	DTC_NATL_OBSRVD_MEAN	NUMBER (8.2)	N	Discharge To Community National Observed Mean	Contains the number of discharges to the community in the nation divided by number of	
LQRP_PRVDR_RPT_DTL	DTC_NMRTR	NUMBER (3.0)	N	Discharge To Community Numerator	Contains the number of patients who were discharged to the community for the Discharge	
LQRP_PRVDR_RPT_DTL	DTC_PCT	NUMBER (8.2)	N	Discharge To Community Percent	Contains the number of discharges to the community divided by the number of eligible	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_PRVDR_RPT_DTL	DTC_RS_PCT	NUMBER (8.2)	N	Discharge To Community Risk-Standardized Percent	Contains the risk adjustment of the observed discharge to community rate which accounts for	
LQRP_PRVDR_RPT_DTL	GRP_ADHR_DNMNTR	NUMBER (12.0)	N	Group Adherence Denominator	Contains the number of healthcare workers available to receive the influenza vaccination.	
LQRP_PRVDR_RPT_DTL	GRP_ADHR_NATL	NUMBER (4.1)	N	Group Adherence National	Contains the national average of healthcare worker vaccination adherence percentage of	
LQRP_PRVDR_RPT_DTL	GRP_ADHR_NMRTR	NUMBER (12.0)	N	Group Adherence Numerator	Contains the number of healthcare workers contributing towards successful vaccination	
LQRP_PRVDR_RPT_DTL	GRP_ADHR_PCT	NUMBER (4.1)	N	Group Adherence Percent	Contains the healthcare worker vaccination adherence percentage of the facility for the	
LQRP_PRVDR_RPT_DTL	GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	Group Device Patient Count	The number of device days or patient days for the measure in locations in scope for quality	
LQRP_PRVDR_RPT_DTL	GRP_SIR	NUMBER (12.3)	N	Group SIR	The measure Standardized Infection Ratio (calculated as: GRP_SIR_NMRTR /	
LQRP_PRVDR_RPT_DTL	GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	Group SIR Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_SIR. Indication of precision and	
LQRP_PRVDR_RPT_DTL	GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	Group SIR Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_SIR. Indication of precision and	
LQRP_PRVDR_RPT_DTL	GRP_SIR_DNMNTR	NUMBER (13.3)	N	Group SIR Denominator	The predicted number of measure occurrences in locations in scope for quality reporting as the	
LQRP_PRVDR_RPT_DTL	GRP_SIR_NATL	NUMBER (12.3)	N	Group SIR National	The reported number of infections in the nation divided by predicted number of infections in the	
LQRP_PRVDR_RPT_DTL	GRP_SIR_NMRTR	NUMBER (9.0)	N	Group SIR Numerator	The observed number of measure occurrence in locations in scope for quality reporting as the	
LQRP_PRVDR_RPT_DTL	MSPB_AVG_SPND_ADJSTD	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Average Risk-Adjusted Spending	Contains the average risk-adjusted Medicare spending across all episodes for the attributed	
LQRP_PRVDR_RPT_DTL	MSPB_AVG_SPND_ADJSTD_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Average Risk-Adjusted Spending	Contains the national average risk-adjusted Medicare spending across all episodes for the	
LQRP_PRVDR_RPT_DTL	MSPB_AVG_SPND_ASCTD_PD	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Average Spending During Associated Services Period	Contains the average spending per episode during associated services period - non-risk-	
LQRP_PRVDR_RPT_DTL	MSPB_AVG_SPND_ASCTD_PD_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Spending During Associated Services Period	Contains the national average spending per episode during associated services period - non-	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_PRVDR_RPT_DTL	MSPB_AVG_SPND_TOT	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Average Total Spending During Episode	Contains the average spending per episode during the treatment period plus average	
LQRP_PRVDR_RPT_DTL	MSPB_AVG_SPND_TOT_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Total Spending During Episode	Contains the national average spending per episode during the treatment period plus national	
LQRP_PRVDR_RPT_DTL	MSPB_AVG_SPND_TX	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Average Spending During Treatment Period	Contains the average spending per episode during the treatment period - non-risk-adjusted.	
LQRP_PRVDR_RPT_DTL	MSPB_AVG_SPND_TX_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Spending During Treatment Period	Contains the national average spending per episode during the treatment period - non-risk-	
LQRP_PRVDR_RPT_DTL	MSPB_MEDN_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Median	Contains the national average risk-adjusted episode spending across all episodes for all	
LQRP_PRVDR_RPT_DTL	MSPB_NUM	NUMBER (8.0)	N	Medicare Spending Per Beneficiary Number	Contains the total number of episodes which did not meet the exclusion criteria in the facility for	
LQRP_PRVDR_RPT_DTL	MSPB_NUM_NATL	NUMBER (8.0)	N	Medicare Spending Per Beneficiary National Number	Contains the total number of episodes which did not meet the exclusion criteria in the nation for	
LQRP_PRVDR_RPT_DTL	MSPB_SCRE	NUMBER (3.2)	N	Medicare Spending Per Beneficiary Score	Contains the ratio of the provider's MSPB Amount to the episode-weighted median MSPB	
LQRP_PRVDR_RPT_DTL	MSPB_SCRE_NATL	NUMBER (3.2)	N	Medicare Spending Per Beneficiary National Score	Contains the national ratio of the MSPB Amount to the episode-weighted median MSPB Amount	
LQRP_PRVDR_RPT_DTL	MSR_CD	NUMBER (3.0)	N	Measure Code	This is the unique identifier for the quality measure.	LQRP_MSR_VAL_CD
LQRP_PRVDR_RPT_DTL	MSR_SRC_CD	NUMBER (2.0)	N	Measure Source Code	This is the unique identifier for the source of the data for quality measure (i.e., assessments, CDC	LQRP_MSR_SRC_CD
LQRP_PRVDR_RPT_DTL	NATL_OBSRVD_MEAN	NUMBER (7.4)	N	National Observed Mean	The observed mean is calculated by dividing the numerator count by its denominator count. The	
LQRP_PRVDR_RPT_DTL	NATL_READM_PCT	NUMBER (5.2)	N	National Crude Readmission Rate	The number of unplanned readmissions following discharge in the nation divided by	
LQRP_PRVDR_RPT_DTL	NMRTR_NUM	NUMBER (6.0)	N	Numerator	This is the numerator for the quality measure. The denominator indicates the number of	
LQRP_PRVDR_RPT_DTL	NOT_AVLBL_BGN_DT	DATE (8)	N	Not Available Begin Date	Contains the begin date when data will not be available for the Influenza Vaccination	
LQRP_PRVDR_RPT_DTL	NOT_AVLBL_END_DT	DATE (8)	N	Not Available End Date	Contains the end date when data will not be available for the Influenza Vaccination	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_PRIVDR_RPT_DTL	NOT_AVLBL_SW	VARCHAR2 (1)	N	Not Available Switch	This indicates whether the HCWFLU measure data is available when the report is ran.	
LQRP_PRIVDR_RPT_DTL	NOT_AVLBL_UNTL_DT	DATE (8)	N	Not Available Until Date	Contains the date that data will become available for the Influenza Vaccination	
LQRP_PRIVDR_RPT_DTL	PERIOD_BGN_DT	DATE (8)	N	Report Period Begin Date	This is the Begin Date of the report period that corresponds with the End Date selected by the	
LQRP_PRIVDR_RPT_DTL	PERIOD_END_DT	DATE (8)	N	Report Period End Date	This is the End Date of the report period selected by the user in the CASPER Reporting	
LQRP_PRIVDR_RPT_DTL	PRVDR_ADJSTD_PCT	NUMBER (4.1)	N	Provider Adjusted Percent	A computed rate whereby patient characteristics and the national average observed rate are	
LQRP_PRIVDR_RPT_DTL	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LQRP_PRIVDR_RPT_DTL	PRVDR_OBSRVD_PCT	NUMBER (4.1)	N	Provider Observed Percent	This is the percentage of patient stays in the LTCH that triggered the measure, derived by	
LQRP_PRIVDR_RPT_DTL	RATIO_PRFMNC_CTGRY	VARCHAR2 (100)	N	Ratio Performance Category	Contains the ratio performance category text for the provider for the reporting period, indicating	
LQRP_PRIVDR_RPT_DTL	READM_CNT	NUMBER (5.0)	N	Readmission Count	Number of Unplanned Readmissions Following Discharge	
LQRP_PRIVDR_RPT_DTL	READM_PCT	NUMBER (5.2)	N	Readmission Percent	The number of unplanned readmissions following discharge in the LTCH divided by	
LQRP_PRIVDR_RPT_DTL	RISK_ADJSTD_READM_PCT	NUMBER (5.2)	N	Risk Adjusted Readmission Percent	A risk adjustment of the Crude Readmission Rate that accounts for patient characteristics and	
LQRP_PRIVDR_RPT_DTL	RPT_SCTN_NUM	NUMBER (22)	N	Report Section Number	This is the number that identifies the section (type of page layout) based on the source of the	
LQRP_PRIVDR_RPT_DTL	RPT_SQNC_NUM	NUMBER (10.0)	N	Report Sequence Number	Sequence number for this report request.	
LQRP_PRIVDR_RPT_DTL	STATE_CD	VARCHAR2 (2)	N	State Code	The state abbreviation of the state where the provider is located.	STATES
LQRP_PRIVDR_RPT_DTL	UPDT_TS	TIMESTAMP(6) (8.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LQRP_PRIVDR_RPT_DTL	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LQRP_PRIVDR_RPT_DTL_ RVW_CRCT	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_PRIVDR_RPT_DTL_ RVW_CRCT	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_PRVDR_RPT_DTL_RVW_CRCT	DNMNTR_NUM	NUMBER (6.0)	N	Denominator	This is the denominator for the quality measure. The denominator indicates the number of	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	MSR_CD	NUMBER (3.0)	N	Measure Code	This is the unique identifier for the quality measure.	LQRP_MSR_VAL_CD
LQRP_PRVDR_RPT_DTL_RVW_CRCT	NMRTR_NUM	NUMBER (6.0)	N	Numerator	This is the numerator for the quality measure. The numerator indicates the number of patients	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility in the QIES national database.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	PRVDR_OBSRVD_AVG	NUMBER (4.1)	N	Provider Observed Average	This is the average observed change based on the admission and discharge mobility score.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	PRVDR_OBSRVD_PCT	NUMBER (4.1)	N	Provider Observed Percent	This is the percentage of patient stays in the LTCH that triggered the measure, derived by	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	RPTG_QTR_DATA_CRCTN_D DLN_DT	DATE (8)	N	Reporting Quarter Data Correction Deadline Date	This indicates the last date that a data correction can be submitted for the QM calculations for the	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	RPTG_QTR_DATA_CRCTN_S TUS	VARCHAR2 (10)	N	Reporting Quarter Data Correction Status	This indicates whether the data correction period is open or closed.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	RPTG_QTR_END_DT	DATE (8)	N	Reporting Quarter End Date	This indicates the calendar quarter end date for the Reporting Quarter.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	RPTG_QTR_STRT_DT	DATE (8)	N	Reporting Quarter Start Date	This indicates the calendar quarter start date for the Reporting Quarter.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	RPTG_QTR_TXT	VARCHAR2 (20)	N	Reporting Quarter Text	This indicates which quarters and year are defined for the quality measure.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	RPT_SEQNC_NUM	NUMBER (10.0)	N	Report Sequence Number	Sequence number for this report request.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	STATE_CD	VARCHAR2 (2)	N	State Code	The data in this column indicates the two-character state code of the state where the	STATES
LQRP_PRVDR_RPT_DTL_RVW_CRCT	TITLE_RPT_NUM	NUMBER (1.0)	N	Title Report Number	This indicates the number of the report being pulled.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	TITLE_RPT_YR	NUMBER (4.0)	N	Title Report Year	This indicates the year that the report is being pulled.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LQRP_PRVDR_RPT_DTL_RVW_CRCT	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_CSP_V W	ASMT_MSR_END_DT	DATE (8)	N	Assessment Measure End Date	Assessment Measure End Date	
LQRP_QW_PRVDR_CSP_V W	ASMT_MSR_STRT_DT	DATE (8)	N	Assessment Measure Start Date	Assessment Measure Start Date	
LQRP_QW_PRVDR_CSP_V W	CAUTI_GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	CAUTI Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_CSP_V W	CAUTI_GRP_SIR	NUMBER (12.3)	N	CAUTI Standardized Infection Ratio (SIR)	CAUTI Standardized Infection Ratio (SIR)	
LQRP_QW_PRVDR_CSP_V W	CAUTI_GRP_SIR_CI_LWR_L MT	NUMBER (12.3)	N	CAUTI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	CAUTI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_CSP_V W	CAUTI_GRP_SIR_CI_UPR_LM T	NUMBER (12.3)	N	CAUTI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	CAUTI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_CSP_V W	CAUTI_GRP_SIR_DNMNTR	NUMBER (13.3)	N	CAUTI Predicted Number of Infections or Events	Indicates device days or patient days times the national rate (based on aggregated national data)	
LQRP_QW_PRVDR_CSP_V W	CAUTI_GRP_SIR_NMRTR	NUMBER (9.0)	N	CAUTI Reported Number of Infections or Events	Indicates the number of reported infections in the facility for the National Healthcare Safety	
LQRP_QW_PRVDR_CSP_V W	CAUTI_PRFMNC_CTGRY_DE SC	VARCHAR2 (50)	N	CAUTI Performance Category	CAUTI Comparative Performance Category	
LQRP_QW_PRVDR_CSP_V W	CDC_MSR_END_DT	DATE (8)	N	CDC Measure End Date	CDC Measure End Date	
LQRP_QW_PRVDR_CSP_V W	CDC_MSR_STRT_DT	DATE (8)	N	CDC Measure Start Date	CDC Measure Start Date	
LQRP_QW_PRVDR_CSP_V W	CDI_GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	CDI Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_CSP_V W	CDI_GRP_SIR	NUMBER (12.3)	N	CDI Standardized Infection Ratio (SIR)	Indicates the reported number of infections or events in the facility divided by the predicted	
LQRP_QW_PRVDR_CSP_V W	CDI_GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	CDI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	Lower limit of 95% Confidence Interval for the National Healthcare Safety Network (NHSN)	
LQRP_QW_PRVDR_CSP_V W	CDI_GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	CDI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	Upper limit of the 95% Confidence Interval for the National Healthcare Safety Network	
LQRP_QW_PRVDR_CSP_V W	CDI_GRP_SIR_DNMNTR	NUMBER (13.3)	N	CDI Predicted Number of Infections or Events	Indicates device days or patient days times the national rate (based on aggregated national data)	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_CSP_V W	CDI_GRP_SIR_NMRTR	NUMBER (9.0)	N	CDI Reported Number of Infections or Events	Indicates the number of reported infections in the facility for the National Healthcare Safety	
LQRP_QW_PRVDR_CSP_V W	CDI_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	CDI Comparative Performance Category	Compares the performance of the facility to the national benchmark for the National Healthcare	
LQRP_QW_PRVDR_CSP_V W	CLABSI_GRP_DVC_PTNT_CN T	NUMBER (9.0)	N	CLABSI Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_CSP_V W	CLABSI_GRP_SIR	NUMBER (12.3)	N	CLABSI Standardized Infection Ratio (SIR)	CLABSI Standardized Infection Ratio (SIR)	
LQRP_QW_PRVDR_CSP_V W	CLABSI_GRP_SIR_CI_LWR_L MT	NUMBER (12.3)	N	CLABSI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	CLABSI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_CSP_V W	CLABSI_GRP_SIR_CI_UPR_L MT	NUMBER (12.3)	N	CLABSI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	CLABSI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_CSP_V W	CLABSI_GRP_SIR_DNMNTR	NUMBER (13.3)	N	CLABSI Predicted Number of Infections or Events	Indicates device days or patient days times the national rate (based on aggregated national data)	
LQRP_QW_PRVDR_CSP_V W	CLABSI_GRP_SIR_NMRTR	NUMBER (9.0)	N	CLABSI Reported Number of Infections or Events	Indicates the number of reported infections in the facility for the National Healthcare Safety	
LQRP_QW_PRVDR_CSP_V W	CLABSI_PRFMNC_CTGRY_D ESC	VARCHAR2 (50)	N	CLABSI Performance Category	CLABSI Comparative Performance Category	
LQRP_QW_PRVDR_CSP_V W	CLMS_MSR_END_DT	DATE (8)	N	Claims-based Measure End Date	Claims-based Measure End Date	
LQRP_QW_PRVDR_CSP_V W	CLMS_MSR_STRT_DT	DATE (8)	N	Claims-based Measure Start Date	Claims-based Measure Start Date	
LQRP_QW_PRVDR_CSP_V W	CLMS_PRFMNC_CTGRY_DES C	VARCHAR2 (50)	N	Readmission Comparative Performance Category	Readmission Comparative Performance Category	
LQRP_QW_PRVDR_CSP_V W	DSCHRG_CNT	NUMBER (5.0)	N	Number of Eligible Medicare Stays for Readmission Measure	Number of Eligible Medicare Stays for Readmission Measure. Denominator for	
LQRP_QW_PRVDR_CSP_V W	DTC_CNT	NUMBER (5.0)	N	DTC Number of Discharges to the Community	Indicates the number of patients who were discharged to the community for the Discharge	
LQRP_QW_PRVDR_CSP_V W	DTC_DSCHRG_CNT	NUMBER (5.0)	N	DTC Number of Eligible Stays	Indicates the total number of stays in the facility which did not meet the exclusion criteria for the	
LQRP_QW_PRVDR_CSP_V W	DTC_NATL_PCT	NUMBER (5.2)	N	DTC National Observed Discharge to Community Rate	Indicates the number of discharges to the community in the nation divided by number of	
LQRP_QW_PRVDR_CSP_V W	DTC_PCT	NUMBER (5.2)	N	DTC Observed Discharge to Community Rate	Indicates the number of discharges to the community divided by number of eligible stays	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_CSP_V W	DTC_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	DTC Comparative Performance Category	Compares the performance of the facility to the national benchmark for the Discharge to	
LQRP_QW_PRVDR_CSP_V W	DTC_RSK_ADJSTD_PCT	NUMBER (5.2)	N	DTC Risk-Standardized Discharge to Community Rate	Indicates the risk adjustment of the observed discharge to community rate which accounts for	
LQRP_QW_PRVDR_CSP_V W	FLU_VCNTN_SEASN_BGN_DT	DATE (8)	N	Flu Season Measure Start Date	This column contains the begin date of the influenza vaccination season in effect for the	
LQRP_QW_PRVDR_CSP_V W	FLU_VCNTN_SEASN_END_DT	DATE (8)	N	Flu Season Measure End Date	This column contains the end date of the influenza vaccination season in effect for the	
LQRP_QW_PRVDR_CSP_V W	MRSA_GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	MRSA Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_CSP_V W	MRSA_GRP_SIR	NUMBER (12.3)	N	MRSA Standardized Infection Ratio (SIR)	Indicates the reported number of infections or events in the facility divided by the predicted	
LQRP_QW_PRVDR_CSP_V W	MRSA_GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	MRSA Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	Lower limit of 95% Confidence Interval for the National Healthcare Safety Network (NHSN)	
LQRP_QW_PRVDR_CSP_V W	MRSA_GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	MRSA Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	Upper limit of the 95% Confidence Interval for the National Healthcare Safety Network	
LQRP_QW_PRVDR_CSP_V W	MRSA_GRP_SIR_DNMNTR	NUMBER (13.3)	N	MRSA Predicted Number of Infections or Events	Indicates device days or patient days times the national rate (based on aggregated national data)	
LQRP_QW_PRVDR_CSP_V W	MRSA_GRP_SIR_NMRTR	NUMBER (9.0)	N	MRSA Reported Number of Infections or Events	Indicates the number of reported infections in the facility for the National Healthcare Safety	
LQRP_QW_PRVDR_CSP_V W	MRSA_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	MRSA Comparative Performance Category	Compares the performance of the facility to the national benchmark for the National Healthcare	
LQRP_QW_PRVDR_CSP_V W	MSPB_AVG_SPND_ADJSTD	NUMBER (8.0)	N	MSPB Average Risk-Adjusted Spending - Your Hospital	Indicates the average risk-adjusted Medicare spending across all episodes for the attributed	
LQRP_QW_PRVDR_CSP_V W	MSPB_AVG_SPND_ADJSTD_NATL	NUMBER (8.0)	N	MSPB Average Risk-Adjusted Spending - National	Indicates the nationwide average risk-adjusted Medicare spending across all episodes in the	
LQRP_QW_PRVDR_CSP_V W	MSPB_AVG_SPND_ASCTD_PD	NUMBER (8.0)	N	MSPB Spending During Associated Services Period - Your Hospital	Indicates the average spending per episode during associated services period - non-risk-	
LQRP_QW_PRVDR_CSP_V W	MSPB_AVG_SPND_ASCTD_PD_NATL	NUMBER (8.0)	N	MSPB Spending During Associated Services Period - National	Indicates the nationwide average spending per episode during associated services period - non-	
LQRP_QW_PRVDR_CSP_V W	MSPB_AVG_SPND_TOT	NUMBER (8.0)	N	MSPB Total Spending During Episode - Your Hospital	Indicates the average spending per episode during the treatment period plus average	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_CSP_V W	MSPB_AVG_SPND_TOT_NAT L	NUMBER (8.0)	N	MSPB Total Spending During Episode - National	Indicates the nationwide average spending per episode during the treatment period plus average	
LQRP_QW_PRVDR_CSP_V W	MSPB_AVG_SPND_TX	NUMBER (8.0)	N	MSPB Spending During Treatment Period - Your Hospital	Indicates the average spending per episode during the treatment period - non-risk-adjusted.	
LQRP_QW_PRVDR_CSP_V W	MSPB_AVG_SPND_TX_NATL	NUMBER (8.0)	N	MSPB Spending During Treatment Period - National	Indicates the nationwide average spending per episode during the treatment period - non-risk-	
LQRP_QW_PRVDR_CSP_V W	MSPB_MEDN_NATL	NUMBER (8.0)	N	MSPB National Median - National	Indicates the average risk-adjusted episode spending across all episodes for all LTCHs for	
LQRP_QW_PRVDR_CSP_V W	MSPB_NUM	NUMBER (8.0)	N	MSPB Number of Eligible Episodes - Your Hospital	Indicates the total number of episodes which did not meet the exclusion criteria in your facility	
LQRP_QW_PRVDR_CSP_V W	MSPB_NUM_NATL	NUMBER (8.0)	N	MSPB Number of Eligible Episodes - National	Indicates the total number of episodes which did not meet the exclusion criteria in the nation for	
LQRP_QW_PRVDR_CSP_V W	MSPB_SCRE	NUMBER (4.2)	N	MSPB Score - Your Hospital	Indicates the ratio of the provider's MSPB Amount to the episode-weighted median MSPB	
LQRP_QW_PRVDR_CSP_V W	MSPB_SCRE_NATL	NUMBER (4.2)	N	MSPB Score - National	Contains the national ratio of the MSPB Amount to the episode-weighted median MSPB Amount	
LQRP_QW_PRVDR_CSP_V W	MSR_101_ADJSTD_PCT	NUMBER (13.10)	N	Pressure Ulcer New or Worsened Adjusted Percent	The data in this column indicates the provider's adjusted percentage value of patients for the	
LQRP_QW_PRVDR_CSP_V W	MSR_101_DNMNTR_NUM	NUMBER (7.0)	N	Pressure Ulcer New or Worsened Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_QW_PRVDR_CSP_V W	MSR_101_NMRTR_NUM	NUMBER (7.0)	N	Pressure Ulcer New or Worsened Numerator	Contains the number of stays that triggered the Percent of Residents or Patients with Pressure	
LQRP_QW_PRVDR_CSP_V W	MSR_101_OBSRVD_PCT	NUMBER (7.4)	N	Pressure Ulcer New or Worsened Observed Percent	The data in this column indicates the provider's observed percentage value of patients for the	
LQRP_QW_PRVDR_CSP_V W	MSR_106_DNMNTR_NUM	NUMBER (7.0)	N	Patients Assessed and Given Flu Vaccine Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_QW_PRVDR_CSP_V W	MSR_106_NMRTR_NUM	NUMBER (7.0)	N	Patients Assessed and Given Flu Vaccine Numerator	Contains the number of stays that triggered the Percent of Residents or Patients Who Were	
LQRP_QW_PRVDR_CSP_V W	MSR_106_OBSRVD_PCT	NUMBER (7.4)	N	Patients Assessed and Given Flu Vaccine Facility Observed Percent	The data in this column indicates the provider's observed percentage value of patients for the	
LQRP_QW_PRVDR_CSP_V W	MSR_107_DNMNTR_NUM	NUMBER (7.0)	N	Patients Received Flu Vaccine Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_QW_PRVDR_CSP_V W	MSR_107_NMRTR_NUM	NUMBER (7.0)	N	Patients Received Flu Vaccine Numerator	Contains the number of stays that triggered the Residents or Patients Who Received the	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_CSP_V W	MSR_107_OBSRVD_PCT	NUMBER (7.4)	N	Patients Received Flu Vaccine Facility Observed Percent	The data in this column indicates the provider's observed percentage value of patients for the	
LQRP_QW_PRVDR_CSP_V W	MSR_108_DNMNTR_NUM	NUMBER (7.0)	N	Patients Who Were Offered and Declined Flu Vaccine Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_QW_PRVDR_CSP_V W	MSR_108_NMRTR_NUM	NUMBER (7.0)	N	Patients Who Were Offered and Declined Flu Vaccine Numerator	Contains the number of stays that triggered the Residents or Patients Who Were Offered and	
LQRP_QW_PRVDR_CSP_V W	MSR_108_OBSRVD_PCT	NUMBER (7.4)	N	Patients Who Were Offered and Declined Flu Vaccine Facility Observed Percent	The data in this column indicates the provider's observed percentage value of patients for the	
LQRP_QW_PRVDR_CSP_V W	MSR_109_DNMNTR_NUM	NUMBER (7.0)	N	Patients Who Did Not Receive, Due to Medical Contraindication, Flu Vaccine Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_QW_PRVDR_CSP_V W	MSR_109_NMRTR_NUM	NUMBER (7.0)	N	Patients Who Did Not Receive, Due to Medical Contraindication, Flu Vaccine Numerator	Contains the number of stays that triggered the Residents or Patients Who Did Not Receive,	
LQRP_QW_PRVDR_CSP_V W	MSR_109_OBSRVD_PCT	NUMBER (7.4)	N	Patients Who Did Not Receive, Due to Medical Contraindication, Flu Vaccine Facility Observed Percent	The data in this column indicates the provider's observed percentage value of patients for the	
LQRP_QW_PRVDR_CSP_V W	MSR_113_DNMNTR_NUM	NUMBER (7.0)	N	Percent of Patients With an Assessment and a Care Plan Denominator	Indicates the total number of qualified stays in the facility which did not meet the exclusion	
LQRP_QW_PRVDR_CSP_V W	MSR_113_NMRTR_NUM	NUMBER (7.0)	N	Percent of Patients With an Assessment and a Care Plan Numerator	Indicates the number of stays in the facility that triggered the indicated quality measure during	
LQRP_QW_PRVDR_CSP_V W	MSR_113_OBSRVD_PCT	NUMBER (7.4)	N	Percent of Patients With an Assessment and a Care Plan Facility Percent	Indicates the unadjusted (crude) rate based on the numerator and denominator for the Percent	
LQRP_QW_PRVDR_CSP_V W	MSR_114_DNMNTR_NUM	NUMBER (7.0)	N	Application of Percent of Patients With an Assessment and a Care Plan Denominator	Indicates the total number of qualified stays in the facility which did not meet the exclusion	
LQRP_QW_PRVDR_CSP_V W	MSR_114_NMRTR_NUM	NUMBER (7.0)	N	Application of Percent of Patients With an Assessment and a Care Plan Numerator	Indicates the number of stays in the facility that triggered the indicated quality measure during	
LQRP_QW_PRVDR_CSP_V W	MSR_114_OBSRVD_PCT	NUMBER (7.4)	N	Application of Percent of Patients With an Assessment and a Care Plan Facility Percent	Indicates the unadjusted (crude) rate based on the numerator and denominator for the	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_CSP_V W	MSR_115_ADJSTD_AVG	NUMBER (13.10)	N	Change in Mobility Average Risk-Adjusted Change	Indicates the computed mathematical model that accounts for patient or resident characteristics	
LQRP_QW_PRVDR_CSP_V W	MSR_115_ADMSN_SCRE_TO T	NUMBER (9.0)	N	Change in Mobility Average Admission Score	Indicates the average score on admission of the quality measure for the facility for the LTCH	
LQRP_QW_PRVDR_CSP_V W	MSR_115_DNMNTR_NUM	NUMBER (7.0)	N	Change in Mobility Denominator	Indicates the total number of qualified stays in the facility which did not meet the exclusion	
LQRP_QW_PRVDR_CSP_V W	MSR_115_DSCHRG_SCRE_TO T	NUMBER (9.0)	N	Change in Mobility Average Discharge Score	Indicates the average score on discharge of the quality measure for the facility for the LTCH	
LQRP_QW_PRVDR_CSP_V W	MSR_115_OBSRVD_SCRE_CH G_TOT	NUMBER (9.0)	N	Change in Mobility Average Observed Change	Indicates the average observed change (discharge - admission) in score for the facility	
LQRP_QW_PRVDR_CSP_V W	MSR_116_DNMNTR_NUM	NUMBER (7.0)	N	Falls with Major Injury Denominator	Indicates the total number of qualified stays in the facility which did not meet the exclusion	
LQRP_QW_PRVDR_CSP_V W	MSR_116_NMRTR_NUM	NUMBER (7.0)	N	Falls with Major Injury Numerator	Indicates the number of stays in the facility that triggered the indicated quality measure during	
LQRP_QW_PRVDR_CSP_V W	MSR_116_OBSRVD_PCT	NUMBER (7.4)	N	Falls with Major Injury Facility Percent	Indicates the unadjusted (crude) rate based on the numerator and denominator for the	
LQRP_QW_PRVDR_CSP_V W	NATL_CAUTI_GRP_SIR	NUMBER (12.3)	N	CAUTI National SIR	CAUTI National SIR	
LQRP_QW_PRVDR_CSP_V W	NATL_CDI_GRP_SIR	NUMBER (12.3)	N	CDI National SIR	Indicates the reported number of infections in the nation divided by the predicted number of	
LQRP_QW_PRVDR_CSP_V W	NATL_CLABSI_GRP_SIR	NUMBER (12.3)	N	CLABSI National SIR	CLABSI National SIR	
LQRP_QW_PRVDR_CSP_V W	NATL_MRSA_GRP_SIR	NUMBER (12.3)	N	MRSA National SIR	Indicates the reported number of infections in the nation divided by predicted number of	
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_101_ADJSTD_PC T	NUMBER (13.10)	N	Pressure Ulcer New or Worsened National Average	The national adjusted percent for the Percent of Residents or Patients with Pressure Ulcers That	
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_106_OBSRVD_PC T	NUMBER (7.4)	N	Patients Assessed and Given Flu Vaccine National Average	The national observed percent for the Percent of Residents or Patients Who Were Assessed and	
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_107_OBSRVD_PC T	NUMBER (7.4)	N	Patients Received Flu Vaccine National Average	The national observed percent for the Residents or Patients Who Received the Seasonal	
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_108_OBSRVD_PC T	NUMBER (7.4)	N	Patients Who Were Offered and Declined Flu Vaccine National Average	The national observed percent for the Residents or Patients Who Were Offered and Declined the	
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_109_OBSRVD_PC T	NUMBER (7.4)	N	Patients Who Did Not Receive, Due to Medical Contraindication, Flu Vaccine National Average	The national observed percent for the Residents or Patients Who Did Not Receive, Due to	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_113_OBSRVD_PC T	NUMBER (7.4)	N	Percent of Patients With an Assessment and a Care Plan National Average	Indicates the national unadjusted (crude) rate based on the numerator and denominator for the National Average	
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_114_OBSRVD_PC T	NUMBER (7.4)	N	Application of Percent of Patients With an Assessment and a Care Plan National Average	Indicates the national unadjusted (crude) rate based on the numerator and denominator for the Plan National Average	
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_115_ADJSTD_AV G	NUMBER (13.10)	N	Change in Mobility National Average	Indicates the national computed mathematical model that accounts for patient or resident	
LQRP_QW_PRVDR_CSP_V W	NATL_MSR_116_OBSRVD_PC T	NUMBER (7.4)	N	Falls with Major Injury National Average	Indicates the national unadjusted (crude) rate based on the numerator and denominator for the	
LQRP_QW_PRVDR_CSP_V W	NATL_READM_PCT	NUMBER (5.2)	N	National Readmission Rate	The national rate for the claims-based readmission measure.	
LQRP_QW_PRVDR_CSP_V W	NATL_VAE_GRP_SIR	NUMBER (12.3)	N	VAE National SIR	Indicates the reported number of infections in the nation divided by the predicted number of	
LQRP_QW_PRVDR_CSP_V W	NATL_VCCN_PCT	NUMBER (12.0)	N	Healthcare Personnel Influenza Vaccination National Average	Indicates the nationwide percent average of the Influenza Vaccination Coverage Among	
LQRP_QW_PRVDR_CSP_V W	PPR_CNT	NUMBER (5.0)	N	PPR Number of Readmissions Following Discharge	Indicates the number of patients who have the event of an unplanned or potentially preventable	
LQRP_QW_PRVDR_CSP_V W	PPR_DSCHRG_CNT	NUMBER (5.0)	N	PPR Number of Eligible Stays	Indicates the total number of stays which did not meet the exclusion criteria in the facility for the	
LQRP_QW_PRVDR_CSP_V W	PPR_NATL_PCT	NUMBER (5.2)	N	PPR National Crude Readmission Rate	Indicates the number of unplanned or potentially preventable readmissions following discharge in	
LQRP_QW_PRVDR_CSP_V W	PPR_PCT	NUMBER (5.2)	N	PPR Crude Readmission Rate	Indicates the number of unplanned or potentially preventable readmissions following discharge	
LQRP_QW_PRVDR_CSP_V W	PPR_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	PPR Comparative Performance Category	Compares the performance of the facility to the national benchmark for the Potentially	
LQRP_QW_PRVDR_CSP_V W	PPR_RSK_ADJSTD_PCT	NUMBER (5.2)	N	PPR Risk-Standardized Readmission Rate (RSRR)	Indicates the risk adjustment of the crude readmission rate which accounts for patient	
LQRP_QW_PRVDR_CSP_V W	PRVDR_NUM	VARCHAR2 (10)	N	CCN	This is the CMS Certification Number (CCN), formerly known as Medicare Provider Number,	
LQRP_QW_PRVDR_CSP_V W	READM_CNT	NUMBER (5.0)	N	Number of Unplanned Readmissions Following Discharge	Indicates the unplanned readmission measure count.	
LQRP_QW_PRVDR_CSP_V W	READM_PCT	NUMBER (5.2)	N	Provider Readmission Rate	Crude Readmission Rate	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_CSP_V W	RISK_ADJSTD_READM_PCT	NUMBER (5.2)	N	Risk Standardized Readmission Rate (RSRR)	Indicates the risk adjusted percentage for the unplanned readmission measure.	
LQRP_QW_PRVDR_CSP_V W	STATE_CD	VARCHAR2 (2)	N	State Code	The state abbreviation of the state where the provider is located.	STATES
LQRP_QW_PRVDR_CSP_V W	VAE_GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	VAE Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_CSP_V W	VAE_GRP_SIR	NUMBER (12.3)	N	VAE Standardized Infection Ratio (SIR)	Indicates the reported number of infections or events in the facility divided by the predicted	
LQRP_QW_PRVDR_CSP_V W	VAE_GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	VAE Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	Lower limit of 95% Confidence Interval for the National Healthcare Safety Network (NHSN)	
LQRP_QW_PRVDR_CSP_V W	VAE_GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	VAE Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	Upper limit of the 95% Confidence Interval for the National Healthcare Safety Network	
LQRP_QW_PRVDR_CSP_V W	VAE_GRP_SIR_DNMNTR	NUMBER (13.3)	N	VAE Predicted Number of Infections or Events	Indicates device days or patient days times the national rate (based on aggregated national data)	
LQRP_QW_PRVDR_CSP_V W	VAE_GRP_SIR_NMRTR	NUMBER (9.0)	N	VAE Reported Number of Infections or Events	Indicates the number of reported infections in the facility for the National Healthcare Safety	
LQRP_QW_PRVDR_CSP_V W	VAE_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	VAE Comparative Performance Category	Compares the performance of the facility to the national benchmark for the National Healthcare	
LQRP_QW_PRVDR_CSP_V W	VCCN_DNMNTR_NUM	NUMBER (13.0)	N	Healthcare Personnel Influenza Vaccination Denominator	Indicates the total number of qualified stays in the facility for the Influenza Vaccination	
LQRP_QW_PRVDR_CSP_V W	VCCN_NMRTR_NUM	NUMBER (9.0)	N	Healthcare Personnel Influenza Vaccination Numerator	Indicates the number of stays in the facility that triggered the indicated quality measure during	
LQRP_QW_PRVDR_CSP_V W	VCCN_PCT	NUMBER (12.0)	N	Healthcare Personnel Influenza Vaccination Facility Percent	Indicates the unadjusted (crude) rate based on the numerator and denominator for the Influenza	
LQRP_QW_PRVDR_PBLC_RPTG_VW	ASMT_NON_PU_MSR_END_DT	DATE (7)	N	Care Plan and Falls with Major Injury Assessment Measures End Date	Care Plan and Falls with Major Injury Assessment Measures End Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	ASMT_NON_PU_MSR_START_DT	DATE (7)	N	Care Plan and Falls with Major Injury Assessment Measures Start Date	Care Plan and Falls with Major Injury Assessment Measures Start Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	ASMT_PU_MSR_END_DT	DATE (7)	N	Pressure Ulcer Assessment Measure End Date	Pressure Ulcer Assessment Measure End Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	ASMT_PU_MSR_START_DT	DATE (7)	N	Pressure Ulcer Assessment Measure Start Date	Pressure Ulcer Assessment Measure Start Date	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_PBLC_RPTG_VW	CAUTI_GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	CAUTI Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CAUTI_GRP_SIR	NUMBER (12.3)	N	CAUTI Standardized Infection Ratio	CAUTI Standardized Infection Ratio	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CAUTI_GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	CAUTI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	CAUTI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CAUTI_GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	CAUTI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	CAUTI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CAUTI_GRP_SIR_DNMNTR	NUMBER (13.3)	N	CAUTI Predicted Number of Infections or Events	Indicates the device days or patient days times the national rate (based on aggregated national	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CAUTI_GRP_SIR_NMRTR	NUMBER (9.0)	N	CAUTI Reported Number of Infections or Events	Indicates the number of reported infections in your facility for the National Healthcare Safety	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CAUTI_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	CAUTI Performance Category	CAUTI Performance Category	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDC_MSR_END_DT	DATE (8)	N	CDC Measure End Date	CDC Measure End Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDC_MSR_STRT_DT	DATE (8)	N	CDC Measure Start Date	CDC Measure Start Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDI_GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	CDI Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDI_GRP_SIR	NUMBER (12.3)	N	CDI Standardized Infection Ratio (SIR)	Indicates the reported number of infections in the facility divided by predicted number of	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDI_GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	CDI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	Lower limit of 95% Confidence Interval for the National Healthcare Safety Network (NHSN)	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDI_GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	CDI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	Upper limit of the 95% Confidence Interval for the National Healthcare Safety Network	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDI_GRP_SIR_DNMNTR	NUMBER (13.3)	N	CDI Predicted Number of Infections or Events	Indicates the device days or patient days times the national rate (based on aggregated national	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDI_GRP_SIR_NMRTR	NUMBER (9.0)	N	CDI Reported Number of Infections or Events	Indicates the number of reported infections in your facility for the National Healthcare Safety	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CDI_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	CDI Comparative Performance Category	Compares the performance of the facility to the national benchmark for the National Healthcare	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLABSI_GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	CLABSI Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLABSI_GRP_SIR	NUMBER (12.3)	N	CLABSI Standardized Infection Ratio	CLABSI Standardized Infection Ratio	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLABSI_GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	CLABSI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	CLABSI Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLABSI_GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	CLABSI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	CLABSI Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLABSI_GRP_SIR_DNMNTR	NUMBER (13.3)	N	CLABSI Predicted Number of Infections or Events	Indicates the device days or patient days times the national rate (based on aggregated national	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLABSI_GRP_SIR_NMRTR	NUMBER (9.0)	N	CLABSI Reported Number of Infections or Events	Indicates the number of reported infections in your facility for the National Healthcare Safety	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLABSI_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	CLABSI Performance Category	CLABSI Performance Category	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLMS_MSR_END_DT	DATE (8)	N	Claims-based Measure End Date	Claims-based Measure End Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLMS_MSR_STRT_DT	DATE (8)	N	Claims-based Measure Start Date	Claims-based Measure Start Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLMS_PPR_DTC_MSPB_MSR_END_DT	DATE (7)	N	Claims PPR/DTC/MSPB Measures End Date	Claims PPR/DTC/MSPB Measures End Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLMS_PPR_DTC_MSPB_MSR_STRT_DT	DATE (7)	N	Claims PPR/DTC/MSPB Measures Start Date	Claims PPR/DTC/MSPB Measures Start Date	
LQRP_QW_PRVDR_PBLC_RPTG_VW	CLMS_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	Readmission Comparative Performance Category	Readmission Comparative Performance Category	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DSCHRG_CNT	NUMBER (5.0)	N	Number of Eligible Medicare Stays for Readmission Measure	Number of Eligible Medicare Stays for Readmission Measure. Denominator for	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_CI_LWR_PCT	NUMBER (5.2)	N	DTC Risk-Standardized Discharge to Community Rate: Lower Limit of 95% Confidence Interval	DTC Risk-Standardized Discharge to Community Rate: Lower Limit of 95% Confidence Interval	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_CI_UPR_PCT	NUMBER (5.2)	N	DTC Risk-Standardized Discharge to Community Rate: Upper Limit of 95% Confidence Interval	DTC Risk-Standardized Discharge to Community Rate: Upper Limit of 95% Confidence Interval	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_CNT	NUMBER (5.0)	N	DTC Number of Discharges to the Community	DTC Number of Discharges to the Community	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_DSCHRG_CNT	NUMBER (5.0)	N	DTC Number of Eligible Stays	DTC Number of Eligible Stays	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_FAC_BTR_NATL_CNT	NUMBER (5.0)	N	DTC Number of LTCHs That Performed Better than the National Rate	DTC Number of LTCHs That Performed Better than the National Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_FAC_LOW_DNMNTR_CNT	NUMBER (5.0)	N	DTC Number of LTCHs That Have Too Few Cases for Public Reporting	DTC Number of LTCHs That Have Too Few Cases for Public Reporting	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_FAC_SAME_NATL_CNT	NUMBER (5.0)	N	DTC Number of LTCHs That Performed No Different than the National Rate	DTC Number of LTCHs That Performed No Different than the National Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_FAC_WRS_NATL_CNT	NUMBER (5.0)	N	DTC Number of LTCHs That Performed Worse than the National Rate	DTC Number of LTCHs That Performed Worse than the National Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_NATL_PCT	NUMBER (5.2)	N	DTC National Observed Discharge to Community Rate	DTC National Observed Discharge to Community Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_PCT	NUMBER (5.2)	N	DTC Observed Discharge to Community Rate	DTC Observed Discharge to Community Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	DTC Facility Comparative Performance Category	DTC Facility Comparative Performance Category	
LQRP_QW_PRVDR_PBLC_RPTG_VW	DTC_RSK_ADJSTD_PCT	NUMBER (5.2)	N	DTC Risk-Standardized Discharge to Community Rate	DTC Risk-Standardized Discharge to Community Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	HOSP_BTR_NATL_CNT	NUMBER (5.0)	N	Number of Hospitals Better than the National Readmission Rate	Number of Hospitals Better than the National Readmission Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	HOSP_LOW_DNMNTR_CNT	NUMBER (5.0)	N	Number of Hospitals with Number of cases too small for public reporting of Readmission measure	Number of Hospitals with Number of cases too small for public reporting of Readmission measure	
LQRP_QW_PRVDR_PBLC_RPTG_VW	HOSP_SAME_NATL_CNT	NUMBER (5.0)	N	Number of Hospitals No Different than the National Readmission Rate	Number of Hospitals No Different than the National Readmission Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	HOSP_WRS_NATL_CNT	NUMBER (5.0)	N	Number of Hospitals Worse than the National Readmission Rate	Number of Hospitals Worse than the National Readmission Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	INFLNZ_MSR_END_DT	DATE (7)	N	Flu Season Measure End Date	Indicates the end date for the flu season.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_PBLC_RPTG_VW	INFLNZ_MSR_STRT_DT	DATE (7)	N	Flu Season Measure Start Date	Indicates the start date for the flu season.	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MRSA_GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	MRSA Device or Patient Days	Indicates the total number of days in the facility associated with the device or total number of	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MRSA_GRP_SIR	NUMBER (12.3)	N	MRSA Standardized Infection Ratio (SIR)	Indicates the reported number of infections in the facility divided by predicted number of	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MRSA_GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	MRSA Standardized Infection Ratio: Lower Limit of 95% Confidence Interval	Lower limit of 95% Confidence Interval for the National Healthcare Safety Network (NHSN)	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MRSA_GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	MRSA Standardized Infection Ratio: Upper Limit of 95% Confidence Interval	Upper limit of the 95% Confidence Interval for the National Healthcare Safety Network	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MRSA_GRP_SIR_DNMNTR	NUMBER (13.3)	N	MRSA Predicted Number of Infections or Events	Indicates the device days or patient days times the national rate (based on aggregated national	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MRSA_GRP_SIR_NMRTR	NUMBER (9.0)	N	MRSA Reported Number of Infections or Events	Indicates the number of reported infections in your facility for the National Healthcare Safety	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MRSA_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	MRSA Comparative Performance Category	Compares the performance of the facility to the national benchmark for the National Healthcare	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSPB_NUM	NUMBER (8.0)	N	MSPB Number of Eligible Episodes	MSPB Number of Eligible Episodes	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSPB_SCORE	NUMBER (4.2)	N	MSPB Score	MSPB Score	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSPB_SCORE_NATL	NUMBER (4.2)	N	National Average MSPB Score	National Average MSPB Score	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_101_ADJSTD_PCT	NUMBER (13.10)	N	Pressure Ulcer New or Worsened Facility Risk-Adjusted Percent	Pressure Ulcer New or Worsened Risk-Adjusted Percent	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_101_DNMNTR_NUM	NUMBER (7.0)	N	Pressure Ulcer New or Worsened Denominator	Contains the total number of qualified stays that did not meet the exclusion criteria during the	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_101_NMRTR_NUM	NUMBER (7.0)	N	Pressure Ulcer New or Worsened Numerator	Pressure Ulcer New or Worsened Numerator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_101_OBSRVD_PCT	NUMBER (7.4)	N	Pressure Ulcer New or Worsened Facility Observed Percent	Pressure Ulcer New or Worsened Facility Observed Percent	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_106_DNMNTR_NUM	NUMBER (7.0)	N	Patients Assessed and Given Flu Vaccine Denominator	Patients Assessed and Given Flu Vaccine Denominator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_106_NMRTR_NUM	NUMBER (7.0)	N	Patients Assessed and Given Flu Vaccine Numerator	Patients Assessed and Given Flu Vaccine Numerator	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_106_OBSRVD_PCT	NUMBER (7.4)	N	Patients Assessed and Given Flu Vaccine Facility Percent	Patients Assessed and Given Flu Vaccine Facility Percent	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_113_DNMNTR_NUM	NUMBER (7.0)	N	Percent of Patients With an Assessment and a Care Plan Denominator	Percent of Patients With an Assessment and a Care Plan Denominator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_113_NMRTR_NUM	NUMBER (7.0)	N	Percent of Patients With an Assessment and a Care Plan Numerator	Percent of Patients With an Assessment and a Care Plan Numerator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_113_OBSRVD_PCT	NUMBER (7.4)	N	Percent of Patients With an Assessment and a Care Plan Facility Percent	Percent of Patients With an Assessment and a Care Plan Facility Percent	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_114_DNMNTR_NUM	NUMBER (7.0)	N	Application of Percent of Patients With an Assessment and a Care Plan Denominator	Application of Percent of Patients With an Assessment and a Care Plan Denominator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_114_NMRTR_NUM	NUMBER (7.0)	N	Application of Percent of Patients With an Assessment and a Care Plan Numerator	Application of Percent of Patients With an Assessment and a Care Plan Numerator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_114_OBSRVD_PCT	NUMBER (7.4)	N	Application of Percent of Patients With an Assessment and a Care Plan Facility Percent	Application of Percent of Patients With an Assessment and a Care Plan Facility Percent	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_116_DNMNTR_NUM	NUMBER (7.0)	N	Falls with Major Injury Denominator	Falls with Major Injury Denominator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_116_NMRTR_NUM	NUMBER (7.0)	N	Falls with Major Injury Numerator	Falls with Major Injury Numerator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	MSR_116_OBSRVD_PCT	NUMBER (7.4)	N	Falls with Major Injury Facility Percent	Falls with Major Injury Facility Percent	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_CAUTI_GRP_SIR	NUMBER (12.3)	N	CAUTI National SIR	CAUTI National SIR	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_CDI_GRP_SIR	NUMBER (12.3)	N	CDI National SIR	Indicates the reported number of infections in the nation divided by predicted number of	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_CLABSI_GRP_SIR	NUMBER (12.3)	N	CLABSI National SIR	CLABSI National SIR	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_MRSA_GRP_SIR	NUMBER (12.3)	N	MRSA National SIR	Indicates the reported number of infections in the nation divided by predicted number of	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_MSR_101_ADJSTD_PCT	NUMBER (13.10)	N	Pressure Ulcer New or Worsened National Average	Pressure Ulcer New or Worsened National Average	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_MSR_106_OBSRVD_PC_T	NUMBER (7.4)	N	Patients Assessed and Given Flu Vaccine National Average	Patients Assessed and Given Flu Vaccine National Average	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_MSR_113_OBSRVD_PC_T	NUMBER (7.4)	N	Percent of Patients With an Assessment and a Care Plan National Average	Percent of Patients With an Assessment and a Care Plan National Average	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_MSR_114_OBSRVD_PC_T	NUMBER (7.4)	N	Application of Percent of Patients With an Assessment and a Care Plan National Average	Application of Percent of Patients With an Assessment and a Care Plan National Average	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_MSR_116_OBSRVD_PC_T	NUMBER (7.4)	N	Falls with Major Injury National Average	Falls with Major Injury National Average	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_READM_PCT	NUMBER (5.2)	N	National Readmission Rate	The number of unplanned readmissions following discharge in the nation divided by	
LQRP_QW_PRVDR_PBLC_RPTG_VW	NATL_VCCN_PCT	NUMBER (12.1)	N	Healthcare Personnel Influenza Vaccination National Rate	Indicates the national average observed percent for the Influenza Vaccination Coverage Among	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_CI_LWR_PCT	NUMBER (5.2)	N	PPR 30-Day Post-Discharge Risk-Standardized Readmission Rate: Lower Limit of 95% Confidence Interval	PPR 30-Day Post-Discharge Risk-Standardized Readmission Rate: Lower Limit of 95%	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_CI_UPR_PCT	NUMBER (5.2)	N	PPR 30-Day Post-Discharge Risk-Standardized Readmission Rate: Upper Limit of 95% Confidence Interval	PPR 30-Day Post-Discharge Risk-Standardized Readmission Rate: Upper Limit of 95%	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_CNT	NUMBER (5.0)	N	PPR 30-Day Post-Discharge Number of Readmissions	PPR 30-Day Post-Discharge Number of Readmissions	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_DSCHRG_CNT	NUMBER (5.0)	N	PPR 30-Day Post-Discharge Number of Eligible Stays	PPR 30-Day Post-Discharge Number of Eligible Stays	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_FAC_BTR_NATL_CNT	NUMBER (5.0)	N	PPR 30-Day Post-Discharge Number of LTCHs That Performed Better than the National Rate	PPR 30-Day Post-Discharge Number of LTCHs That Performed Better than the National Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_FAC_LOW_DNMNTR_CNT	NUMBER (5.0)	N	PPR 30-Day Post-Discharge Number of LTCHs That Have Too Few Cases for Public Reporting	PPR 30-Day Post-Discharge Number of LTCHs That Have Too Few Cases for Public Reporting	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_FAC_SAME_NATL_CNT	NUMBER (5.0)	N	PPR 30-Day Post-Discharge Number of LTCHs That Performed No Different than the National Rate	PPR 30-Day Post-Discharge Number of LTCHs That Performed No Different than the National Rate	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_FAC_WRS_NATL_CNT	NUMBER (5.0)	N	PPR 30-Day Post-Discharge Number of LTCHs That Performed Worse than the National Rate	PPR 30-Day Post-Discharge Number of LTCHs That Performed Worse than the National Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_NATL_PCT	NUMBER (5.2)	N	PPR 30-Day Post-Discharge National Observed Readmission Rate	PPR 30-Day Post-Discharge National Observed Readmission Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_PCT	NUMBER (5.2)	N	PPR 30-Day Post-Discharge Observed Readmission Rate	PPR 30-Day Post-Discharge Observed Readmission Rate	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_PRFMNC_CTGRY_DESC	VARCHAR2 (50)	N	PPR 30-Day Post-Discharge Facility Comparative Performance Category	PPR 30-Day Post-Discharge Facility Comparative Performance Category	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PPR_RSK_ADJSTD_PCT	NUMBER (5.2)	N	PPR 30-Day Post-Discharge Risk-Standardized Readmission Rate (RSRR)	PPR 30-Day Post-Discharge Risk-Standardized Readmission Rate (RSRR)	
LQRP_QW_PRVDR_PBLC_RPTG_VW	PRVDR_NUM	VARCHAR2 (10)	N	CCN	This is the CMS Certification Number (CCN), formerly known as Medicare Provider Number	
LQRP_QW_PRVDR_PBLC_RPTG_VW	READM_CI_LWR_PCT	NUMBER (5.2)	N	Risk-Standardized Readmission Rate: Lower limit of 95% Confidence Interval	Risk-Standardized Readmission Rate: Lower limit of 95% Confidence Interval	
LQRP_QW_PRVDR_PBLC_RPTG_VW	READM_CI_UPR_PCT	NUMBER (5.2)	N	Risk-Standardized Readmission Rate: Upper limit of 95% Confidence Interval	Risk-Standardized Readmission Rate: Upper limit of 95% Confidence Interval	
LQRP_QW_PRVDR_PBLC_RPTG_VW	RISK_ADJSTD_READM_PCT	NUMBER (5.2)	N	Risk Standardized Readmission Rate (RSRR)	Indicates the risk adjusted percentage for the unplanned readmission measure.	
LQRP_QW_PRVDR_PBLC_RPTG_VW	STATE_CD	VARCHAR2 (2)	N	State Code	The state abbreviation of the state where the provider is located.	STATES
LQRP_QW_PRVDR_PBLC_RPTG_VW	VCCN_DNMNTR_NUM	NUMBER (13.0)	N	Number of Healthcare Personnel in your LTCH	Indicates the total number of healthcare personnel in the facility for the Influenza	
LQRP_QW_PRVDR_PBLC_RPTG_VW	VCCN_NMRTR_NUM	NUMBER (9.0)	N	Number of Healthcare Personnel Who Were Vaccinated	Healthcare Personnel Influenza Vaccination Personnel Numerator	
LQRP_QW_PRVDR_PBLC_RPTG_VW	VCCN_PCT	NUMBER (12.1)	N	Healthcare Personnel Influenza Vaccination LTCH Performance Rate	Indicates the unadjusted (crude) rate based on the numerator and denominator for the Influenza Rate	
LQRP_RPT_BKMRK	CREAT_TS	TIMESTAMP(6) (8.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_RPT_BKMRK	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_RPT_BKMRK	RPT_BKMRK_TXT	VARCHAR2 (100)	N	Report Bookmark Text	This indicates the text that is used for the bookmarks in the PDF formatted report.	
LQRP_RPT_BKMRK	RPT_RQST_TYPE_CD	NUMBER (2.0)	Y	Report Request Type Code	This is the unique identifier for the type of report requested.	LQRP_RPT_RQST_TYPE_CD
LQRP_RPT_BKMRK	RPT_SCTN_NUM	NUMBER (22)	Y	Report Section Number	This is the number that identifies the section (type of page layout) based on the source of the	
LQRP_RPT_BKMRK	UPDT_TS	TIMESTAMP(6) (8.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LQRP_RPT_BKMRK	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LQRP_RPT_RQST	CMPLT_TS	TIMESTAMP(6) (11.6)	N	Measure 101 Value Text	This is the timestamp for report request completion.	
LQRP_RPT_RQST	PRVDR_INTRNL_NUM	NUMBER (10.0)	Y	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LQRP_RPT_RQST	RPT_BGN_DT	DATE (8)	N	Report Begin Date	This is the Begin Date of the report period selected by the user in the CASPER Reporting	
LQRP_RPT_RQST	RPT_END_DT	DATE (8)	N	Report End Date	This is the End Date of the report period selected by the user in the CASPER Reporting	
LQRP_RPT_RQST	RPT_RQST_TYPE_CD	NUMBER (2.0)	N	Report Request Type Code	This is the unique identifier for the type of report requested.	LQRP_RPT_RQST_TYPE_CD
LQRP_RPT_RQST	RPT_SQNC_NUM	NUMBER (10.0)	Y	Report Sequence Number	Sequence number for this report request.	
LQRP_RPT_RQST	RPT_STUS_CD	NUMBER (1.0)	N	Report Status Code	This is the code to identify the status of the report.	LQRP_RPT_STUS_CD
LQRP_RPT_RQST	RPT_VRSN_NUM	VARCHAR2 (10)	N	Report Version Number	This indicates the version of the report.	
LQRP_RPT_RQST	RQST_TS	TIMESTAMP(6) (11.6)	N	Report Timestamp	This is the date and time the report was requested.	
LQRP_RPT_RQST	STATE_CD	VARCHAR2 (2)	Y	State Code	The state abbreviation of the state where the provider is located.	STATES
LQRP_RSDNT_CALC_RUN	MSR_CALC_RUN_TYPE_CD	VARCHAR2 (5)	N	Measure Calculation Run Type Code	Measure calculation run type code.	LQRP_MSR_CALC_RUN_TYPE_CD
LQRP_RSDNT_CALC_RUN	RSDNT_RUN_SQNC_NUM	NUMBER (10.0)	Y	Resident Calculation Run Sequence Number	Resident Calculation Run Sequence Number	
LQRP_RSDNT_CALC_RUN	RUN_BGN_TS	TIMESTAMP(6) (11.6)	N	Begin Timestamp	Indicates the begin date and time for measure calculation runs.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_RSDNT_CALC_RUN	RUN_END_TS	TIMESTAMP(6) (11.6)	N	End Timestamp	Indicates the end date and time for measure calculation runs.	
LQRP_RSDNT_CALC_RUN	RUN_STUS_CD	NUMBER (2.0)	N	Run Status Code	Indicates the status of a calculation run.	LQRP_RUN_STUS_CD
LQRP_RSDNT_RPT_DTL	ADMSN_DT	DATE (8)	N	Admission Date	This is the date the patient was admitted to the LTCH. This date is taken from item A0220	
LQRP_RSDNT_RPT_DTL	ADMSN_DT_DSPLY	DATE (7)	N	Admission Date Display	This displays the admission date of the quality measure for the facility.	
LQRP_RSDNT_RPT_DTL	CREAT_TS	TIMESTAMP(6) (8.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_RSDNT_RPT_DTL	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_RSDNT_RPT_DTL	DSCHRG_DT	DATE (8)	N	Discharge Date	This is the date the patient was discharged from the LTCH. This date is taken from item A0270	
LQRP_RSDNT_RPT_DTL	MSR_101_VAL_TXT	VARCHAR2 (3)	N	Measure 101 Value Text	This is the value displayed on the report for the Percent of Residents or Patients with Pressure	
LQRP_RSDNT_RPT_DTL	MSR_106_VAL_TXT	VARCHAR2 (3)	N	Measure 106 Value Text	This is the value displayed on the report for the Percent of Residents or Patients Who Were	
LQRP_RSDNT_RPT_DTL	MSR_107_VAL_TXT	VARCHAR2 (3)	N	Measure 107 Value Text	This is the value displayed on the report for the Residents or Patients Who Received the	
LQRP_RSDNT_RPT_DTL	MSR_108_VAL_TXT	VARCHAR2 (3)	N	Measure 108 Value Text	This is the value displayed on the report for the Residents or Patients Who Were Offered and	
LQRP_RSDNT_RPT_DTL	MSR_109_VAL_TXT	VARCHAR2 (3)	N	Measure 109 Value Text	This is the value displayed on the report for the Residents or Patients Who Did Not Receive,	
LQRP_RSDNT_RPT_DTL	MSR_113_VAL_TXT	VARCHAR2 (3)	N	Patients With an Admission and a Discharge Functional Assessment Percent of Long-Term Care Hospital (LTCH) and a Care Plan Value Text	This is the value displayed on the report for the	
LQRP_RSDNT_RPT_DTL	MSR_114_VAL_TXT	VARCHAR2 (3)	N	Application of Patients With an Admission and Discharge Functional Assessment and a Care Plan Value Text	This is the value displayed on the report for the Application of Percent of Long-Term Care	
LQRP_RSDNT_RPT_DTL	MSR_115_VAL_TXT	VARCHAR2 (3)	N	Change in Mobility Value Text	This is the value displayed on the report for the LTCH Functional Outcome Measure: Change in	
LQRP_RSDNT_RPT_DTL	MSR_116_VAL_TXT	VARCHAR2 (3)	N	Residents Experiencing One or More Falls with Major Injury Value Text	This is the value displayed on the report for the Application of Percent of Residents	
LQRP_RSDNT_RPT_DTL	MSR_SRC_CD	NUMBER (2.0)	N	Measure Source Code	Indicates the data source for the measure.	LQRP_MSR_SRC_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_RSDNT_RPT_DTL	PERIOD_BGN_DT	DATE (8)	N	Report Period Begin Date	This is the Begin Date of the report period that corresponds with the End Date selected by the	
LQRP_RSDNT_RPT_DTL	PERIOD_END_DT	DATE (8)	N	Report Period End Date	This is the End Date of the report period selected by the user in the CASPER Reporting	
LQRP_RSDNT_RPT_DTL	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LQRP_RSDNT_RPT_DTL	RPT_SCTN_NUM	NUMBER (22)	N	Report Section Number	This is the number that identifies the section (type of page layout) based on the source of the	
LQRP_RSDNT_RPT_DTL	RPT_SQNC_NUM	NUMBER (10.0)	N	Report Sequence Number	Sequence number for this report request.	
LQRP_RSDNT_RPT_DTL	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Patient ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
LQRP_RSDNT_RPT_DTL	RSDNT_NAME	VARCHAR2 (32)	N	Patient Name	The patient's name in last name, first name format.	
LQRP_RSDNT_RPT_DTL	STATE_CD	VARCHAR2 (2)	N	State Code	The state abbreviation of the state where the provider is located.	STATES
LQRP_RSDNT_RPT_DTL	UPDT_TS	TIMESTAMP(6) (8.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LQRP_RSDNT_RPT_DTL	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LQRP_RSK_ADJSTD_COE FCNT	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_RSK_ADJSTD_COE FCNT	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_RSK_ADJSTD_COE FCNT	CVRT_MSR_CD	NUMBER (3.0)	N	Covariate Measure Code	This is the column containing the covariate measure code.	LQRP_MSR_VAL_CD
LQRP_RSK_ADJSTD_COE FCNT	CVRT_NUM	NUMBER (3.0)	Y	Covariate Number	This column contains the covariates for each risk adjusted measure. Zero (0) indicates the	
LQRP_RSK_ADJSTD_COE FCNT	CVRT_VAL	NUMBER (8.5)	N	Covariate Value	This column contains the covariate value.	
LQRP_RSK_ADJSTD_COE FCNT	EFCTV_BGN_DT	DATE (8)	Y	Effective Begin Date	This column contains the effective begin date of the LQRP Claims Measure and it's coefficient.	
LQRP_RSK_ADJSTD_COE FCNT	EFCTV_END_DT	DATE (8)	N	Effective End Date	This column contains the effective end date of the LQRP Claims Measure and it's coefficient.	
LQRP_RSK_ADJSTD_COE FCNT	INTRCPT_VAL	NUMBER (8.5)	N	Intercept Value	The intercept value from the risk-adjustment logistic regression equation.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_RSK_ADJSTD_COE FCNT	ITRTN_NUM	NUMBER (3.0)	N	Iteration Number	This value indicates the version of the risk-adjustment model.	
LQRP_RSK_ADJSTD_COE FCNT	MSR_CD	NUMBER (3.0)	Y	Measure Code	The unique code of the measure.	LQRP_MSR_VAL_CD
LQRP_RSK_ADJSTD_COE FCNT	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	Indicates the date and time that the record was updated in the database.	
LQRP_RSK_ADJSTD_COE FCNT	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	Indicates the user who updated the record.	
LQRP_SPRSN	END_DT	DATE (7)	Y	End Date	End date for assessment measure calculation time period.	
LQRP_SPRSN	MSR_001_NATL_VAL	VARCHAR2 (50)	N	Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) measure national value	Contains the value to indicate whether the National value for the Percent of Residents or	
LQRP_SPRSN	MSR_001_VAL	VARCHAR2 (50)	N	Measure 001 Value	Value of the pressure ulcer measure, loaded from the facility percent value in the file sent	
LQRP_SPRSN	MSR_002_NATL_VAL	VARCHAR2 (50)	N	Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) measure national value	Contains the National result value or suppression footnote for the Percent of	
LQRP_SPRSN	MSR_002_VAL	VARCHAR2 (50)	N	Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680) Value	Indicates the value of the residents assessed and appropriately given influenza vaccine measure,	
LQRP_SPRSN	MSR_006_NATL_VAL	VARCHAR2 (50)	N	National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection (CAUTI) Outcome measure national value	Contains the National result value or suppression footnote the National value for the	
LQRP_SPRSN	MSR_006_VAL	VARCHAR2 (50)	N	Measure 006 Value	Value of the CAUTI measure, loaded from the provider SIR value in the file sent back by	
LQRP_SPRSN	MSR_007_NATL_VAL	VARCHAR2 (50)	N	National Healthcare Safety Network (NHSN) Central line-associated Bloodstream Infection (CLABSI) Outcome measure national value	Contains the National result value or suppression footnote for the National Value for	
LQRP_SPRSN	MSR_007_VAL	VARCHAR2 (50)	N	Measure 007 Value	Value of the CLABSI measure, loaded from the provider SIR value in the file sent back by	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_SPRSN	MSR_008_VAL	VARCHAR2 (50)	N	Measure 008 Value	Value of the readmission measure, loaded from the provider readmission RSRR value in the file	
LQRP_SPRSN	MSR_009_NATL_VAL	VARCHAR2 (50)	N	National Value for the Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Measure	Contains the National result value or suppression footnote for the Percent of Long-	
LQRP_SPRSN	MSR_009_VAL	VARCHAR2 (50)	N	Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function Measure (NQF#2631) value	Contains the measure result value or applicable suppression footnote for the Percent of Long-	
LQRP_SPRSN	MSR_010_NATL_VAL	VARCHAR2 (50)	N	National value for the Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function measure	Contains the National result value or suppression footnote for the Application of	
LQRP_SPRSN	MSR_010_VAL	VARCHAR2 (50)	N	Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function measure value	Contains the measure result value or applicable suppression footnote for the Application of	
LQRP_SPRSN	MSR_012_NATL_VAL	VARCHAR2 (50)	N	National Value for the Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) measure	Contains the National result value or suppression footnote for the Application of	
LQRP_SPRSN	MSR_012_VAL	VARCHAR2 (50)	N	Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) value	Contains the measure result value or applicable suppression footnote for the Application of	
LQRP_SPRSN	MSR_013_NATL_VAL	VARCHAR2 (50)	N	National Value for the National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome measure	Contains the National result value or suppression footnote for the National Healthcare	

## Tables Report - LTCH

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_SPRSN	MSR_013_VAL	VARCHAR2 (50)	N	National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure (NQF #1716) Value	Indicates the value of the MRSA measure, loaded from the provider SIR value in the file	
LQRP_SPRSN	MSR_014_NATL_VAL	VARCHAR2 (50)	N	National Value for the National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-Onset Clostridium difficile Infection (CDI) Outcome measure	Contains the National result value or suppression footnote for the National Healthcare	
LQRP_SPRSN	MSR_014_VAL	VARCHAR2 (50)	N	National Healthcare Safety Network (NHSN) Facility-Wide Inpatient Hospital-Onset Clostridium difficile Infection (CDI) Outcome Measure (NQF #1717) Value	Indicates the value of the CDI measure, loaded from the provider SIR value in the file sent back	
LQRP_SPRSN	MSR_015_NATL_VAL	VARCHAR2 (50)	N	National Value for the Influenza Vaccination Coverage Among Healthcare Personnel measure	Contains the National result value or suppression footnote for the Influenza	
LQRP_SPRSN	MSR_015_VAL	VARCHAR2 (50)	N	Influenza Vaccination Coverage Among Healthcare Personnel (NQF #0431) Value	Indicates the value of the healthcare personnel influenza measure, loaded from the facility	
LQRP_SPRSN	MSR_017_NATL_VAL	VARCHAR2 (50)	N	Potentially Preventable 30-Day Post-Discharge Readmission Measure for Long-Term Care Hospital Quality Reporting Program measure	Contains the National result value or suppression footnote for the Potentially	
LQRP_SPRSN	MSR_017_VAL	VARCHAR2 (50)	N	Potentially Preventable 30-Day Post-Discharge Readmission Measure for Long-Term Care Hospital Quality Reporting measure value	Contains the measure result value or applicable suppression footnote for the Potentially	
LQRP_SPRSN	MSR_018_NATL_VAL	VARCHAR2 (50)	N	National Value for the Discharge to Community-Post Acute Care (PAC) Long-Term Care Hospital Quality Reporting Program measure	Contains the National result value or suppression footnote for the Discharge to	
LQRP_SPRSN	MSR_018_VAL	VARCHAR2 (50)	N	Discharge to Community-Post Acute Care (PAC) Long-Term Care Hospital Quality Reporting Program measure value	Contains the measure result value or applicable suppression footnote for the Discharge to	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_SPRSN	MSR_019_NATL_VAL	VARCHAR2 (50)	N	National Value for the Medicare Spending Per Beneficiary (MSPB) -Post-Acute Care (PAC) Long-Term Care Hospital Quality Reporting Program measure	Contains the National result value or suppression footnote for the Medicare Spending	
LQRP_SPRSN	MSR_019_VAL	VARCHAR2 (50)	N			
LQRP_SPRSN	PRVDR_NUM	VARCHAR2 (6)	Y	Provider Number	Six or ten position identification number that is assigned to a certified provider. This is the CMS	
LQRP_TRKNG	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for assessment of this record.	LTCH_RSN_ASMT_CD
LQRP_TRKNG	ADMSN_DT	DATE (7)	N			
LQRP_TRKNG	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_TRKNG	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_TRKNG	DSCHRG_DT	DATE (7)	N			
LQRP_TRKNG	LTCH_ASMT_ID	NUMBER (22)	Y	Assessment ID	The data in this column indicates the patients assessment ID.	
LQRP_TRKNG	PRVDR_INTRNL_NUM	NUMBER (10.0)	Y	Provider Internal Number	Uniquely identifies a provider internally within the CASPER applications.	
LQRP_TRKNG	ROW_EVNT_TYP	VARCHAR2 (6)	N	Row Event Type	Indicates the event type for the specific row in the tracking table.	
LQRP_TRKNG	ROW_VAL_TYP	VARCHAR2 (3)	N	Row Value Type	Indicates the event type for the specific row in the tracking table.	
LQRP_TRKNG	RSDNT_INTRNL_ID	NUMBER (10.0)	Y	Resident Internal ID	A unique number assigned by the submission system which identifies a resident. The	
LQRP_TRKNG	STATE_CD	VARCHAR2 (2)	Y	State Code	The data in this column indicates the state code.	STATES
LQRP_TRKNG	TRGT_DT	DATE (7)	N	Target Date	The data in this column indicates the target date of an assessment to be included in measure	
LQRP_TRKNG	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	Indicates the date and time that the record was updated in the database.	
LQRP_TRKNG	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	Indicates the user who updated the record.	

## Tables Report - LTCH

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LQRP_TRKNG_RVW_CRT	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for assessment of this record.	LTCH_RSN_ASMT_CD
LQRP_TRKNG_RVW_CRT	ADMSN_DT	DATE (8)	N	Admission Date	This column contains the admission date for the LTCH stay.	
LQRP_TRKNG_RVW_CRT	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LQRP_TRKNG_RVW_CRT	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LQRP_TRKNG_RVW_CRT	DSCHRG_DT	DATE (8)	N	Discharge Date	This column contains the discharge date for the LTCH stay.	
LQRP_TRKNG_RVW_CRT	LTCH_ASMT_ID	NUMBER (22)	Y	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LQRP_TRKNG_RVW_CRT	PRVDR_INTRNL_NUM	NUMBER (10.0)	Y	Provider Internal Number	This number uniquely identifies an LTCH facility in the QIES national database.	
LQRP_TRKNG_RVW_CRT	ROW_EVNT_TYP	VARCHAR2 (6)	N	Row Event Type	Indicates the event type for the specific row in the tracking table.	
LQRP_TRKNG_RVW_CRT	ROW_VAL_TYP	VARCHAR2 (3)	N	Row Value Type	Indicates the value type for the specific row in the tracking table.	
LQRP_TRKNG_RVW_CRT	RSDNT_INTRNL_ID	NUMBER (10.0)	Y	Resident Internal ID	This is a number assigned by a system that uniquely identifies the patient. The combination	
LQRP_TRKNG_RVW_CRT	STATE_CD	VARCHAR2 (2)	Y	State Code	The data in this column indicates the two-character state code of the state where the	STATES
LQRP_TRKNG_RVW_CRT	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	
LQRP_TRKNG_RVW_CRT	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LQRP_TRKNG_RVW_CRT	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_ASMT_DELETE_W	CRCTN_NUM	NUMBER (2.0)	N	Correction Number	This column contains the sequential correction number of assessment.	
LTCH_ASMT_DELETE_W	DLT_DT	DATE (8)	N	Delete Date	This column contains the date that the assessment was deleted from the system.	
LTCH_ASMT_DELETE_W	DLT_USER_ID	VARCHAR2 (30)	N	Delete User ID	This column contains the user ID that deleted the assessment from the system.	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_DELETE_V W	LTCH_ASMT_ID	NUMBER (22)	N	LTCH Assessment ID	This column is used as a key to uniquely identify an assessment and tie together all the	
LTCH_ASMT_DELETE_V W	LTCH_CRCTN_STUS_CD	VARCHAR2 (1)	N	LTCH Correction Status Code	This code indicates the version of the assessment. A value of 'C' indicates this is the	LTCH_CRCTN_STUS
LTCH_ASMT_DELETE_V W	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ASMT_DELETE_V W	STATE_CD	VARCHAR2 (2)	N	State Code	This column contains the two-character state abbreviation code.	STATES
LTCH_ASMT_FED	A0050_TRANS_TYPE_CD	VARCHAR2 (1)	N	A0050 Type of Record	The data in this column indicates the type of record that is being submitted (new,	LTCH_TRANS_TYPE_CD
LTCH_ASMT_FED	A0055_CRCTN_NUM	NUMBER (2.0)	N	A0055 Correction Number	The data in this column indicates the number of correction requests to modify/inactivate the	
LTCH_ASMT_FED	A0100A_NPI_NUM	VARCHAR2 (10)	N	A0100A National Provider Identifier	This column contains the provider's National Provider Identifier number.	
LTCH_ASMT_FED	A0100B_CMS_CRTFCTN_NUM	VARCHAR2 (12)	N	A0100B CMS Certification Number (CCN)	This is the CMS Certification Number (CCN) of the provider submitting the record.	
LTCH_ASMT_FED	A0100C_STATE_PRVDR_NUM	VARCHAR2 (15)	N	A0100C State Provider Number	This is the State Provider Number of the provider submitting the record.	
LTCH_ASMT_FED	A0200_PRVDR_TYPE_CD	VARCHAR2 (1)	N	A0200 Type of Provider	This column indicates that this record is submitted by a Long-term Care Hospital. This	LTCH_PRVDR_TYPE_CD
LTCH_ASMT_FED	A0210_ASMT_RFRNC_DT	DATE (8)	N	A0210 Assessment Reference Date	This column contains the end date of the observation period of the assessment.	
LTCH_ASMT_FED	A0220_ADMSN_DT	DATE (8)	N	A0220 Admission Date	This column indicates the patient's date of admission into the hospital.	
LTCH_ASMT_FED	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for assessment of this record.	LTCH_RSN_ASMT_CD
LTCH_ASMT_FED	A0270_DSCHRG_DT	VARCHAR2 (8)	N	A0270 Discharge Date	This column indicates the patient's discharge date from the hospital.	
LTCH_ASMT_FED	A0500A_FIRST_NAME	VARCHAR2 (12)	N	A0500A First Name	This column contains the first name of the patient.	
LTCH_ASMT_FED	A0500B_MDL_INITL_TXT	VARCHAR2 (1)	N	A0500B Middle Initial	This column contains the middle initial of the patient.	
LTCH_ASMT_FED	A0500C_LAST_NAME	VARCHAR2 (18)	N	A0500C Last Name	This column contains the last name of the patient.	
LTCH_ASMT_FED	A0500D_SFX_TXT	VARCHAR2 (3)	N	A0500D Suffix	This column contains the suffix of the patient.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	A0600A_SSN_NUM	VARCHAR2 (9)	N	A0600A Social Security Number	This column contains the Social Security Number of the patient.	
LTCH_ASMT_FED	A0600B_MDCR_NUM	VARCHAR2 (12)	N	A0600B Medicare Number	This column contains the patient's Medicare number.	
LTCH_ASMT_FED	A0700_MDCD_NUM	VARCHAR2 (14)	N	A0700 Medicaid Number	This column contains the patient's Medicaid number.	
LTCH_ASMT_FED	A0800_GNDR_CD	VARCHAR2 (1)	N	A0800 Gender	This data in this column indicates the patient's gender.	LTCH_GNDR_CD
LTCH_ASMT_FED	A0900_BIRTH_DT	DATE (8)	N	A0900 Birth Date	This column contains the patient's birth date.	
LTCH_ASMT_FED	A1000A_AMRCN_INDN_AK_NTV_CD	VARCHAR2 (1)	N	A1000A Race/Ethnicity: American Indian or Alaskan Native	The data in this column indicates if the patient's race is American Indian/Alaskan Native.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED	A1000B_ASN_CD	VARCHAR2 (1)	N	A1000B Race/Ethnicity: Asian	The data in this column indicates if the patient's race is Asian.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED	A1000C_AFRCN_AMRCN_CD	VARCHAR2 (1)	N	A1000C Race/Ethnicity: Black or African American	The data in this column indicates if the patient's race is Black or African American.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED	A1000D_HSPNC_CD	VARCHAR2 (1)	N	A1000D Race/Ethnicity: Hispanic or Latino	The data in this column indicates if the patient's ethnicity is Hispanic.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED	A1000E_NTV_HI_PCFC_ISLN_DR_CD	VARCHAR2 (1)	N	A1000E Race/Ethnicity: Native Hawaiian or Other Pacific Islander	The data in this column indicates if the patient's race is Native Hawaiian/Pacific Islander.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED	A1000F_WHT_CD	VARCHAR2 (1)	N	A1000F Race/Ethnicity: White	This column indicates if the patient's race is White.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED	A1050_HIGHEST_EDCTN_CMP_LT_CD	VARCHAR2 (1)	N	A1050 Highest Education Completed	The data in this column indicates the highest level of education achieved by the patient.	LTCH_EDCTN_CMPLT_CD
LTCH_ASMT_FED	A1100A_NEED_INTRPTR_CD	VARCHAR2 (1)	N	A1100A Language: Need Interpreter	The data in this column indicates whether the patient needs or wants an interpreter to	LTCH_YES_NO_UNABLE_DTRM
LTCH_ASMT_FED	A1100B_INTRPTR_LANG_TXT	VARCHAR2 (15)	N	A1100B Preferred Language	The data in this column indicates the patient's preferred language.	
LTCH_ASMT_FED	A1200_MRTL_STUS_CD	VARCHAR2 (1)	N	A1200 Marital Status	The data in this column indicates the patient's marital status.	LTCH_MRTL_STUS_CD
LTCH_ASMT_FED	A1300D_LFTM_OCPTN_TXT	VARCHAR2 (23)	N	A1300D Lifetime Occupation	The data in this column indicates the patient's lifetime occupation.	
LTCH_ASMT_FED	A1400A_MDCR_FFS_PYR_CD	VARCHAR2 (1)	N	A1400A Payer Information: Medicare (Traditional Fee-for-Service)	The data in this column indicates whether the payer source for the patient's stay is Medicare	LTCH_CHKLIST_VS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	A1400B_MDCR_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400B Payer Information: Medicare (Other Payer)	The data in this column indicates whether the payer source for the patient's stay is Medicare,	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400C_MDCCD_FFS_PYR_CD	VARCHAR2 (1)	N	A1400C Payer Information: Medicaid (Traditional Fee-for-Service Payer Code)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400D_MDCCD_MC_PYR_CD	VARCHAR2 (1)	N	A1400D Payer Information: Medicaid (Managed Care)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400E_WC_PYR_CD	VARCHAR2 (1)	N	A1400E Payer Information: Workers Compensation	The data in this column indicates whether the payer source for the patient's stay is Workers'	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400F_TITLE_PGM_PYR_CD	VARCHAR2 (1)	N	A1400F Payer Information: Title Program	The data in this column indicates whether the payer source for the patient's stay is a Title	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400G_OTHR_GOV'T_PYR_CD	VARCHAR2 (1)	N	A1400G Payer Information: Other Government	The data in this column indicates whether the payer source for the patient's stay is an Other	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400H_PRVT_INS_PYR_CD	VARCHAR2 (1)	N	A1400H Payer Information: Private Insurance/Medigap	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400I_PRVT_MC_PYR_CD	VARCHAR2 (1)	N	A1400I Payer Information: Private Managed Care	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400J_SELF_PYR_CD	VARCHAR2 (1)	N	A1400J Payer Information: Self-Pay	The data in this column indicates whether the payer source for the patient's stay is self-pay.	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400K_NO_PYR_CD	VARCHAR2 (1)	N	A1400K Payer Information: No Payer Source	The data in this column indicates the patient does not have a payer source.	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400X_UNK_PYR_CD	VARCHAR2 (1)	N	A1400X Payer Information: Unknown	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1400Y_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400Y Payer Information: Other	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_FED	A1800_ADMTD_FROM_CD	VARCHAR2 (2)	N	A1800 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_CD
LTCH_ASMT_FED	A1802_ADMTD_FROM_LCTN_CD	VARCHAR2 (2)	N	A1802 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_VS_CD
LTCH_ASMT_FED	A1810A_LAST_2_MO_IPPS_CD	VARCHAR2 (1)	N	A1810A Short-Stay Acute Hospital (IPPS)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	A1810B_LAST_2_MO_CMNTY_CD	VARCHAR2 (1)	N	A1810B Community Residential Setting	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	A1810C_LAST_2_MO_LTC_CD	VARCHAR2 (1)	N	A1810C Long-term Care Facility	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	A1810D_LAST_2_MO_SNF_CD	VARCHAR2 (1)	N	A1810D Skilled Nursing Facility (SNF)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810E_LAST_2_MO_HOSP_ER_CD	VARCHAR2 (1)	N	A1810E Hospital Emergency Department	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810F_LAST_2_MO_LTCH_CD	VARCHAR2 (1)	N	A1810F Long-term Care Hospital (LTCH)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810G_LAST_2_MO_IRF_CD	VARCHAR2 (1)	N	A1810G Inpatient Rehabilitation Facility or Unit (IRF)	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810H_LAST_2_MO_HHA_CD	VARCHAR2 (1)	N	A1810H Home Health Agency (HHA)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810I_LAST_2_MO_HOSPC_CD	VARCHAR2 (1)	N	A1810I Hospice	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810J_LAST_2_MO_OPS_CD	VARCHAR2 (1)	N	A1810J Outpatient Services	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810K_LAST_2_MO_PSYCH_CD	VARCHAR2 (1)	N	A1810K Psychiatric Hospital or Unit	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810L_LAST_2_MO_ID_DD_CD	VARCHAR2 (1)	N	A1810L ID/DD Facility	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1810Z_NO_LAST_2_MO_CD	VARCHAR2 (1)	N	A1810Z None of The Above	The data in this column indicates the patient received none of the medical services identified	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED	A1820_PRVS_MDCL_PRMRY_DGNS_CD	VARCHAR2 (8)	N	A1820 Previous Primary Diagnosis Code	This indicates the primary diagnosis (ICD) for the patient from the previous medical setting in	
LTCH_ASMT_FED	A1955_DSCHRG_DLAY_CD	VARCHAR2 (1)	N	A1955 Discharge Delay	The data in this column indicates if a patient's discharge was delayed for at least 24 hours.	LTCH_YES_NO
LTCH_ASMT_FED	A1960_DSCHRG_DLAY_RSN_CD	VARCHAR2 (2)	N	A1960 Reason for Discharge Delay	The data in this column indicates the reason the patient's discharge was delayed.	LTCH_DSCHRG_DLAY_CD
LTCH_ASMT_FED	A1970_DSCHRG_RTN_STUS_CD	VARCHAR2 (1)	N	A1970 Discharge Return Status	The data in this column indicates the patient's discharge return status.	LTCH_DSCHRG_RTN_CD
LTCH_ASMT_FED	A2100_DSCHRG_LCTN_CD	VARCHAR2 (2)	N	A2100 Discharge Location	The data in this column indicates the location to where patient was discharged. This field was	LTCH_DSCHRG_LCTN_CD
LTCH_ASMT_FED	A2110_DSCHRG_TO_LCTN_CD	VARCHAR2 (2)	N	A2110 Discharge Location	The data in this column indicates the location to where patient was discharged. Prior to April	LTCH_DSCHRG_LCTN_VS_CD
LTCH_ASMT_FED	A2500_PGM_INTRPTN_CD	VARCHAR2 (1)	N	A2500 Program Interruption(s)	The data in this column indicates whether the patient experienced a program interruption	LTCH_YES_NO_VS
LTCH_ASMT_FED	A2510_PGM_INTRPTN_NUM	VARCHAR2 (2)	N	A2510 Number Program Interruption(s)	The data in this column indicates the number of program interruptions during their stay.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	A2520A1_INTRPTN_RCNT_STRT_DT	VARCHAR2 (8)	N	A2520A1 Recent Interruption Start Date	The data in this column indicates the most recent interruption start date.	
LTCH_ASMT_FED	A2520A2_INTRPTN_RCNT_END_DT	VARCHAR2 (8)	N	A2520A2 Recent Interruption End Date	The data in this column indicates the most recent interruption end date.	
LTCH_ASMT_FED	A2520B1_INTRPTN_2ND_START_DT	VARCHAR2 (8)	N	A2520B1 Second Most Recent Interruption Start Date	The data in this column indicates the second most recent interruption start date.	
LTCH_ASMT_FED	A2520B2_INTRPTN_2ND_END_DT	VARCHAR2 (8)	N	A2520B2 Second Most Recent Interruption End Date	The data in this column indicates the second most recent interruption end date.	
LTCH_ASMT_FED	A2520C1_INTRPTN_3RD_START_DT	VARCHAR2 (8)	N	A2520C1 Third Most Recent Interruption Start Date	The data in this column indicates the third most recent interruption start date.	
LTCH_ASMT_FED	A2520C2_INTRPTN_3RD_END_DT	VARCHAR2 (8)	N	A2520C2 Third Most Recent Interruption End Date	The data in this column indicates the third most recent interruption end date.	
LTCH_ASMT_FED	A2525A1_PGM_INT_1ST_START_DT	VARCHAR2 (8)	N	A2525A1 Program Interruption Date - First Interruption Start Date	The data in this column represents the first program interruption start date.	
LTCH_ASMT_FED	A2525A2_PGM_INT_1ST_END_DT	VARCHAR2 (8)	N	A2525A2 Program Interruption Date - First Interruption End Date	The data in this column represents the first program interruption end date.	
LTCH_ASMT_FED	A2525B1_PGM_INT_2ND_START_DT	VARCHAR2 (8)	N	A2525B1 Program Interruption Date - Second Start Date	The data in this column represents the second program interruption start date.	
LTCH_ASMT_FED	A2525B2_PGM_INT_2ND_END_DT	VARCHAR2 (8)	N	A2525B2 Program Interruption Date - Second Interruption End Date	The data in this column represents the second program interruption end date.	
LTCH_ASMT_FED	A2525C1_PGM_INT_3RD_START_DT	VARCHAR2 (8)	N	A2525C1 Program Interruption Date - Third Start Date	The data in this column represents the third program interruption start date.	
LTCH_ASMT_FED	A2525C2_PGM_INT_3RD_END_DT	VARCHAR2 (8)	N	A2525C2 Program Interruption Date - Third End Date	The data in this column represents the third program interruption end date.	
LTCH_ASMT_FED	A2525D1_PGM_INT_4TH_START_DT	VARCHAR2 (8)	N	A2525D1 Program Interruption Date - Fourth Start Date	The data in this column represents the fourth program interruption start date.	
LTCH_ASMT_FED	A2525D2_PGM_INT_4TH_END_DT	VARCHAR2 (8)	N	A2525D2 Program Interruption Date - Fourth End Date	The data in this column represents the fourth program interruption end date.	
LTCH_ASMT_FED	A2525E1_PGM_INT_5TH_START_DT	VARCHAR2 (8)	N	A2525E1 Program Interruption Date - Fifth Start Date	The data in this column represents the fifth program interruption start date.	
LTCH_ASMT_FED	A2525E2_PGM_INT_5TH_END_DT	VARCHAR2 (8)	N	A2525E2 Program Interruption Date - Fifth End Date	The data in this column represents the fifth program interruption end date.	
LTCH_ASMT_FED	B0100_CMTS_CD	VARCHAR2 (1)	N	B0100 Comatose	The data in this column indicates whether or not the patient is comatose.	LTCH_YES_NO_NOT_ASSESS_VS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	BB0700_EXPRSN_IDEA_WANT_CD	VARCHAR2 (1)	N	BB0700 Expression of Ideas and Wants	The data in this column represents the patient's independence with expression of ideas and	LTCH_EXPRSN_WANT_CD
LTCH_ASMT_FED	BB0800_UNDRST_OTHR_CD	VARCHAR2 (1)	N	BB0800 Understanding Verbal/Non-Verbal Content	The data in this column indicates the patient's ability to understand verbal/non-verbal content,	LTCH_UNDRST_OTHR_CD
LTCH_ASMT_FED	C1610A_ACUTE_ONST_CD	VARCHAR2 (1)	N	C1610A Acute Onset	The data in this column indicates if the patient experienced an acute change in mental status	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED	C1610B_BHVR_FLCTATE_CD	VARCHAR2 (1)	N	C1610B Behavior Fluctuate	The data in this column indicates if the patient's abnormal behavior fluctuated during the day	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED	C1610C_INATTNTN_CD	VARCHAR2 (1)	N	C1610C Inattention	The data in this column indicates whether or not the patient had difficulty focusing attention	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED	C1610D_DISORGNZ_THNKG_CD	VARCHAR2 (1)	N	C1610D Disorganized Thinking	The data in this column indicates whether or not the patient experienced disorganized thinking	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED	C1610E1_ALERT_CONSCS_CD	VARCHAR2 (1)	N	C1610E1 Alert Conscious	The data in this column indicates if the patient's level of consciousness was alert (normal) during	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED	C1610E2_ALTRD_CONSCS_CD	VARCHAR2 (1)	N	C1610E2 Altered Consciousness	The data in this column indicates if the patient's level of consciousness was abnormal (Vigilant	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED	CRCTN_NUM	NUMBER (2,0)	N	Correction Number	This is the number of the assessment. New records have a correction number of '00'	
LTCH_ASMT_FED	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_ASMT_FED	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_ASMT_FED	C_BIRTH_DT_SBMT_CD	VARCHAR2 (1)	N	Calculated Birth Date Submit Code	This column indicates the type of partial birth date that was submitted (full birth date, year	LTCH_BIRTH_DT_SBMT_CD
LTCH_ASMT_FED	C_CCN_NUM	VARCHAR2 (12)	N	Calculated CMS Certification Number (CCN)	This column contains the system calculated CMS Certification Number (CCN).	
LTCH_ASMT_FED	C_HICN_MBI_IND	VARCHAR2 (1)	N	Calculated HICN/MBI Indicator	This value is populated by the ASAP system during file processing and indicates the type of	
LTCH_ASMT_FED	C_RSDNT_AGE_NUM	VARCHAR2 (3)	N	Calculated Resident Age Number	This column contains the system calculated resident age number.	
LTCH_ASMT_FED	C_SSNRI_TRNSLTN_HICN_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation HICN Text	This is the patient's Health Insurance Claim Number [HICN] or Railroad Retirement Board	
LTCH_ASMT_FED	C_SSNRI_TRNSLTN_MBI_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation MBI Text	This is the patient's Medicare Beneficiary Identifier [MBI] that is returned from the Social	
LTCH_ASMT_FED	GG0100B_INDR_MBLTY_CD	VARCHAR2 (1)	N	GG0100B Indoor Mobility	The data in this column indicates the patient's need for assistance with walking from room to	LTCH_MBLTY_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	GG0110A_MNL_WLCHR_CD	VARCHAR2 (1)	N	GG0110A Manual Wheelchair	The data in this column indicates if the patient used a manual wheelchair prior to the current	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	GG0110B_MTR_WLCHR_CD	VARCHAR2 (1)	N	GG0110B Motorized Wheelchair and/or Scooter	The data in this column indicates if the patient used a motorized wheelchair and/or scooter prior	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	GG0110C_MCHNCL_LFT_CD	VARCHAR2 (1)	N	GG0110C Mechanical Lift	The data in this column indicates if the patient used a mechanical lift prior to the current illness,	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	GG0110Z_NO_MBLTY_CD	VARCHAR2 (1)	N	GG0110Z No Mobility	The data in this column indicates the patient did not previously use any type of mobility device	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	GG0130A1_EATG_SELF_ADM SN_CD	VARCHAR2 (2)	N	GG0130A1 Eating: Admission	This indicates the level of assistance required for eating during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0130A2_EATG_SELF_GOAL_CD	VARCHAR2 (2)	N	GG0130A2 Eating: Goal	This indicates the patient's goal for eating independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0130A3_EATG_SELF_DSC HRG_CD	VARCHAR2 (2)	N	GG0130A3 Eating: Discharge	This indicates the level of assistance required for eating at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0130B1_ORAL_HYGNE_A DMSN_CD	VARCHAR2 (2)	N	GG0130B1 Oral Hygiene: Admission	This indicates the level of assistance required for oral hygiene during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0130B2_ORAL_HYGNE_GOAL_CD	VARCHAR2 (2)	N	GG0130B2 Oral Hygiene: Goal	This indicates the patient's goal for oral hygiene independence.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0130B3_ORAL_HYGNE_DS CHRГ_CD	VARCHAR2 (2)	N	GG0130B3 Oral Hygiene: Discharge	This indicates the level of assistance required with oral hygiene at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0130C1_TOILT_HYGNE_A DMSN_CD	VARCHAR2 (2)	N	GG0130C1 Toileting Hygiene: Admission	This indicates the level of assistance required for toileting during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0130C2_TOILT_HYGNE_GOAL_CD	VARCHAR2 (2)	N	GG0130C2 Toileting Hygiene: Goal	This indicates the patient's goal for toileting hygiene independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0130C3_TOILT_HYGNE_DS CHRГ_CD	VARCHAR2 (2)	N	GG0130C3 Toileting Hygiene: Discharge	This indicates the level of assistance required for toileting at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0130D1_WASH_UPR_ADM SN_CD	VARCHAR2 (2)	N	GG0130D1 Wash Upper Body: Admission	This indicates the level of assistance required to wash upper body during the admission time	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0130D2_WASH_UPR_GOAL_CD	VARCHAR2 (2)	N	GG0130D2 Wash Upper Body: Goal	This indicates the patient's goal for wash upper body independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0130D3_WASH_UPR_DSC HRG_CD	VARCHAR2 (2)	N	GG0130D3 Wash Upper Body: Discharge	This indicates the level of assistance required to wash upper body at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0160A_ROLL_LEFT_RGHT_CD	VARCHAR2 (2)	N	GG0160A Roll Left and Right	The data in this column indicates the patient's ability to roll from lying on back to the left and	LTCH_ASTNC_LVL_VS_CD
LTCH_ASMT_FED	GG0160B_SIT_LYNG_CD	VARCHAR2 (2)	N	GG0160B Sit to Lying	The data in this column indicates the patient's ability to go from a sitting position on the side of	LTCH_ASTNC_LVL_VS_CD

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	GG0160C_LYNG_STTG_BED_CD	VARCHAR2 (2)	N	GG0160C Lying to Sitting on Side of Bed	The data in this column indicates the patient's ability to safely go from lying on the bed to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170A1_ROLL_ADMSN_CD	VARCHAR2 (2)	N	GG0170A1 Roll Left and Right: Admission	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170A2_ROLL_GOAL_CD	VARCHAR2 (2)	N	GG0170A2 Roll Left and Right: Goal	The data in this column indicates the patient's level of assistance goal for roll from lying on	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0170A3_ROLL_DSCHRG_CD	VARCHAR2 (2)	N	GG0170A3 Roll Left and Right: Discharge	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170B1_SIT_ADMSN_CD	VARCHAR2 (2)	N	GG0170B1 Sit to Lying: Admission	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170B2_SIT_GOAL_CD	VARCHAR2 (2)	N	GG0170B2 Sit to Lying: Goal	The data in this column indicates the patient's level of assistance goal for going from a sitting	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0170B3_SIT_DSCHRG_CD	VARCHAR2 (2)	N	GG0170B3 Sit to Lying: Discharge	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170C1_LYNG_ADMSN_CD	VARCHAR2 (2)	N	GG0170C1 Lying to Sitting on Side of Bed: Admission	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170C2_LYNG_GOAL_CD	VARCHAR2 (2)	N	GG0170C2 Lying to Sitting on Side of Bed: Goal	The data in this column indicates the patient's level of assistance goal for going from safely	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0170C3_LYNG_DSCHRG_CD	VARCHAR2 (2)	N	GG0170C3 Lying to Sitting on Side of Bed: Discharge	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170D1_STAND_ADMSN_CD	VARCHAR2 (2)	N	GG0170D1 Sit to Stand: Admission	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170D2_STAND_GOAL_CD	VARCHAR2 (2)	N	GG0170D2 Sit to Stand: Goal	The data in this column indicates the patient's level of assistance goal to safely come to a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0170D3_STAND_DSCHRG_CD	VARCHAR2 (2)	N	GG0170D3 Sit to Stand: Discharge	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170E1_CHR_TRNSF_ADM SN_CD	VARCHAR2 (2)	N	GG0170E1 Chair/Bed Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170E2_CHR_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170E2 Chair/Bed Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely transfer to and	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0170E3_CHR_TRNSF_DSCR HRG_CD	VARCHAR2 (2)	N	GG0170E3 Chair/Bed Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170F1_TOILT_TRNSF_ADM SN_CD	VARCHAR2 (2)	N	GG0170F1 Toilet Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD



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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	GG0170F2_TOILT_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170F2 Toilet Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely get on and off a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED	GG0170F3_TOILT_TRNSF_DSCHRG_CD	VARCHAR2 (2)	N	GG0170F3 Toilet Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED	GG0170H1_WLK_ADMSN_CD	VARCHAR2 (1)	N	GG0170H1 Walk: Admission	The data in this column indicates the patient's ability to walk during the admission time period.	LTCH_WLK_CD
LTCH_ASMT_FED	GG0170H3_WLK_DSCHRG_CD	VARCHAR2 (1)	N	GG0170H3 Walk Code: Discharge	The data in this column indicates the patient's ability to walk at the time of discharge.	LTCH_WLK_YES_NO_CD
LTCH_ASMT_FED	GG0170I1_WLK_10_ADMSN_CD	VARCHAR2 (2)	N	GG0170I1 Walk 10 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk ten feet in a	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170I2_WLK_10_GOAL_CD	VARCHAR2 (2)	N	GG0170I2 Walk 10 Feet: Goal	The data in this column indicates the patient's goal for level of assistance for walking 10 feet in	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED	GG0170I3_WLK_10_DSCHRG_CD	VARCHAR2 (2)	N	GG0170I3 Walk 10 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk ten feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170J1_WLK_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170J1 Walk 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170J2_WLK_50_GOAL_CD	VARCHAR2 (2)	N	GG0170J2 Walk 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to walk 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED	GG0170J3_WLK_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170J3 Walk 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170K1_WLK_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170K1 Walk 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170K2_WLK_150_GOAL_CD	VARCHAR2 (2)	N	GG0170K2 Walk 150 Feet: Goal	The data in this column indicates the patient's level of assistance goal to walk 150 feet and	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED	GG0170K3_WLK_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170K3 Walk 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk 150 feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170Q1_WLCHR_ADMSN_CD	VARCHAR2 (1)	N	GG0170Q1 Wheelchair and/or Scooter: Admission	The data in this column indicates if the patient uses a wheelchair and/or scooter during the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	GG0170Q3_WLCHR_DSCHRG_CD	VARCHAR2 (1)	N	GG0170Q3 Wheelchair and/or Scooter: Discharge	The data in this column indicates if the patient uses a wheelchair and/or scooter at the time of	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	GG0170R1_WHL_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170R1 Wheelchair 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170R2_WHL_50_GOAL_CD	VARCHAR2 (2)	N	GG0170R2 Wheelchair 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	GG0170R3_WHL_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170R3 Wheelchair 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170RR1_WHLCHR_50_ADMSN_CD	VARCHAR2 (1)	N	GG0170RR1 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED	GG0170RR3_WHLCHR_50_DSCHRG_CD	VARCHAR2 (1)	N	GG0170RR3 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED	GG0170S1_WHL_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170S1 Wheelchair 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to wheel 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170S2_WHL_150_GOAL_CD	VARCHAR2 (2)	N	GG0170S2 Wheelchair 150 Feet: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 150	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED	GG0170S3_WHL_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170S3 Wheelchair 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 150 feet at	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED	GG0170SS1_WHLCHR_150_ADMSN_CD	VARCHAR2 (1)	N	GG0170SS1 Wheel 150 Feet: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED	GG0170SS3_WHLCHR_150_DSCHRG_CD	VARCHAR2 (1)	N	GG0170SS3 Wheel 150 Feet: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED	H0350_URNRY_CNTNC_CD	VARCHAR2 (1)	N	H0350 Urinary Continence	The data in this column indicates the patient's bladder continence over a three day assessment	LTCH_URNRY_CNTNC_CD
LTCH_ASMT_FED	H0400_BWL_CNTNC_CD	VARCHAR2 (1)	N	H0400 Bowel Continence	The data in this column indicates the patient's level of bowel continence.	LTCH_CNTNC_CD
LTCH_ASMT_FED	I0050A_OTH_MDCL_COND_CD	VARCHAR2 (8)	N	I0050A Other Medical Condition	The data in this column indicates the patient's primary medical condition ICD code.	
LTCH_ASMT_FED	I0050_PRMRY_MDCL_COND_CD	VARCHAR2 (1)	N	I0050 Primary Medical Condition	The data in this column indicates the patient's primary medical condition category.	LTCH_PRMRY_MDCL_COND_CD
LTCH_ASMT_FED	I0101_MTSTIC_CNCR_CD	VARCHAR2 (1)	N	I0101 Severe and Metastatic Cancers	This column indicates if the patient has been diagnosed with Severe and Metastatic Cancers.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I0103_METS_CNCR_CD	VARCHAR2 (1)	N	I0103 Metastatic Cancer	The data in this column indicates if the patient has been diagnosed with metastatic cancer.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I0104_SVR_CNCR_CD	VARCHAR2 (1)	N	I0104 Severe Cancer	The data in this column indicates if the patient has been diagnosed with severe cancer.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I0605_SVR_LVSD_LVEF_CD	VARCHAR2 (1)	N	I0605 Severe Left Systolic/Ventricular Dysfunction	The data in this column indicates if the patient has been diagnosed with severe left	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	I0900_PVD_CD	VARCHAR2 (1)	N	I0900 Peripheral Vascular Disease (PVD) or Peripheral Arterial Disease (PAD)	This column indicates if a patient has been diagnosed with Peripheral Vascular Disease	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I1501_KDNY_5_CD	VARCHAR2 (1)	N	I1501 Chronic Kidney Disease, State 5	This column indicates if the patient has been diagnosed with Chronic Kidney Disease, Stage	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I1502_RNL_FAILR_CD	VARCHAR2 (1)	N	I1502 Acute Renal Failure	This column indicates if the patient has been diagnosed with Acute Renal Failure.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I2101_SEPSIS_CD	VARCHAR2 (1)	N	I2101 Septicemia, Sepsis, Systemic Inflammatory Response Syndrome/Shock	This column indicates if the patient has been diagnosed with Septicemia, Sepsis or Systemic	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I2600_CNS_INFCTN_CD	VARCHAR2 (1)	N	I2600 Central Nervous System Infections, Opportunistic Infections, Bone/Joint/Muscle Infections/Necrosis	This column indicates if the patient has been diagnosed with Central Nervous System	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I2900_DM_CD	VARCHAR2 (1)	N	I2900 Diabetes Mellitus (DM)	This column indicates if a patient has been diagnosed with Diabetes Mellitus (DM).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I4100_LWR_LIMB_AMPUTTN_CD	VARCHAR2 (1)	N	I4100 Major Lower Limb Amputation	This column indicates if the patient has been diagnosed with Major Lower Limb Amputation.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I4501_STRK_CD	VARCHAR2 (1)	N	I4501 Stroke	This column indicates if a patient has been diagnosed with a stroke.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I4801_DMNT_CD	VARCHAR2 (1)	N	I4801 Dementia	This column indicates if a patient has been diagnosed with dementia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I4900_HEMIPLG_CD	VARCHAR2 (1)	N	I4900 Hemiplegia or Hemiparesis	This column indicates if a patient has been diagnosed with Hemiplegia or Hemiparesis.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5000_PARAPLG_CD	VARCHAR2 (1)	N	I5000 Paraplegia	This column indicates if a patient has been diagnosed with Paraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5101_TETRAPLG_CD	VARCHAR2 (1)	N	I5101 Complete Tetraplegia	This column indicates if a patient has been diagnosed with Complete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5102_INCMPLT_TETRAPLG_CD	VARCHAR2 (1)	N	I5102 Incomplete Tetraplegia	This column indicates if a patient has been diagnosed with Incomplete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5110_SPNL_CORD_CD	VARCHAR2 (1)	N	I5110 Other Spinal Cord Disorder/Injury	This column indicates if a patient has been diagnosed with Other Spinal Cord	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5200_MS_CD	VARCHAR2 (1)	N	I5200 Multiple Sclerosis (MS)	This column indicates if a patient has been diagnosed with Multiple Sclerosis (MS).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5250_HNTGTN_CD	VARCHAR2 (1)	N	I5250 Huntingtons Disease	This column indicates if a patient has been diagnosed with Huntington's disease.	LTCH_CHKLIST_NOT_ASSESS

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	I5300_PRKNSN_CD	VARCHAR2 (1)	N	I5300 Parkinsons Disease	This column indicates if a patient has been diagnosed with Parkinson's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5450_ALS_CD	VARCHAR2 (1)	N	I5450 Amyotrophic Lateral Sclerosis	This column indicates if a patient has been diagnosed with Amyotrophic Lateral Sclerosis	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5455_PROGRS_NRMSCLR_D EASE_CD	VARCHAR2 (1)	N	I5455 Other Progressive Neuromuscular Disease	The data in this column indicates if the patient has been diagnosed with other progressive	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5460_LKIN_STATE_CD	VARCHAR2 (1)	N	I5460 Locked-In State	This column indicates if a patient has been diagnosed with Locked-In State.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5470_SVR_BRN_DMG_CD	VARCHAR2 (1)	N	I5470 Severe Anoxic Brain Damage, Cerebral Edema, or Compression of Brain	This column indicates if a patient has been diagnosed with Severe Anoxic Brain Damage,	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5480_OTHR_SVR_NRLGCL_CD	VARCHAR2 (1)	N	I5480 Other Severe Neurological Injury, Disease or Dysfunction	The data in this column indicates if the patient has been diagnosed with other severe	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5600_MALNTRTN_CD	VARCHAR2 (1)	N	I5600 Malnutrition	This column indicates if a patient has been diagnosed with malnutrition.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED	I5601_CAL_MALNTRTN_CD	VARCHAR2 (1)	N	I5601 Malnutrition (Protein or Calorie)	This column indicates if a patient has been diagnosed with Malnutrition (protein or calorie).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I5602_RSK_MALNTRTN_CD	VARCHAR2 (1)	N	I5602 At Risk for Malnutrition	This column indicates if a patient has been diagnosed as At Risk for Malnutrition.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I7100_LUNG_TRNSPLNT_CD	VARCHAR2 (1)	N	I7100 Lung Transplant	The data in this column indicates if the patient has had a lung transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I7101_HRT_TRNSPLNT_CD	VARCHAR2 (1)	N	I7101 Heart Transplant	The data in this column indicates if the patient has had a heart transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I7102_LVR_TRNSPLNT_CD	VARCHAR2 (1)	N	I7102 Liver Transplant	The data in this column indicates if the patient has had a liver transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I7103_KDNY_TRNSPLNT_CD	VARCHAR2 (1)	N	I7103 Kidney Transplant	The data in this column indicates if the patient has had a kidney transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I7104_BONE_MRW_TRNSPLNT_CD	VARCHAR2 (1)	N	I7104 Bone Marrow Transplant	The data in this column indicates if the patient has had a bone marrow transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	I7900_NO_ACTV_DEASE_CD	VARCHAR2 (1)	N	I7900 No Active Disease	This column indicates that a patient has no other diagnoses.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED	ITM_SET_VRSN_CD	VARCHAR2 (10)	N	Item Set Version Code	This value represents the version of the item set that was completed by the facility.	
LTCH_ASMT_FED	J1800_FALL_LAST_ASMT_CD	VARCHAR2 (1)	N	J1800 Any Falls Since Admission	This column indicates if the patient has had any falls since admission.	LTCH_YES_NO_NOT_ASSESS

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	J1900A_FALL_NO_INJURY_CD	VARCHAR2 (1)	N	J1900A No Injury Fall	This column indicates the number of falls code without injury a patient has had since admission.	LTCH_NUM_FALL_CD
LTCH_ASMT_FED	J1900B_FALL_INJURY_CD	VARCHAR2 (1)	N	J1900B Injury Except Major Fall	This column indicates the number of falls code with injury (except major) a patient has had	LTCH_NUM_FALL_CD
LTCH_ASMT_FED	J1900C_FALL_MAJ_INJURY_CD	VARCHAR2 (1)	N	J1900C Major Injury Fall	This column indicates the number of falls code with major injury falls a patient has had since	LTCH_NUM_FALL_CD
LTCH_ASMT_FED	K0200A_HGT_NUM	VARCHAR2 (2)	N	K0200A Height	The data in this column contains the patient's height in inches.	
LTCH_ASMT_FED	K0200B_WT_NUM	VARCHAR2 (3)	N	K0200B Weight	The data in this column contains the patient's weight in pounds.	
LTCH_ASMT_FED	LTCH_ASMT_ID	NUMBER (22)	Y	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ASMT_FED	LTCH_CRCTN_STUS_CD	VARCHAR2 (1)	N	LTCH Correction Status Code	This code indicates the version of the assessment. A value of 'C' indicates this is the	LTCH_CRCTN_STUS
LTCH_ASMT_FED	LTCH_ITM_SBST_CD	VARCHAR2 (3)	N	LTCH Item Subset Code	This code indicates the type of assessment that was submitted.	LTCH_ITM_SBST
LTCH_ASMT_FED	LTCH_SUBMSN_DAY	DATE (8)	N	LTCH Submission Day	This is the date that the file was received by the system.	
LTCH_ASMT_FED	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_ASMT_FED	M0210_STG_1_HGHR_ULCR_CD	VARCHAR2 (1)	N	M0210 One or More Unhealed Pressure Ulcers/Injuries	The data in this column indicates if a patient has one or more unhealed pressure ulcers/injuries.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	M0300A_STG_1_ULCR_NUM	VARCHAR2 (1)	N	M0300A Number of Stage 1 Pressure Injuries	The data in this column indicates the number of Stage 1 pressure injuries present.	
LTCH_ASMT_FED	M0300B1_STG_2_ULCR_NUM	VARCHAR2 (1)	N	M0300B1 Number of Stage 2 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 2 pressure ulcers.	
LTCH_ASMT_FED	M0300B2_STG_2_ULCR_ADM_SN_NUM	VARCHAR2 (1)	N	M0300B2 Number of Stage 2 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 2 pressure ulcers that were present on	
LTCH_ASMT_FED	M0300B3_STG_2_ULCR_OLD_DT	VARCHAR2 (8)	N	M0300B3 Date of Oldest Stage 2 Pressure Ulcer	The data in this column indicates the date of the oldest Stage 2 pressure ulcer.	
LTCH_ASMT_FED	M0300C1_STG_3_ULCR_NUM	VARCHAR2 (1)	N	M0300C1 Number of Stage 3 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 3 pressure ulcers.	
LTCH_ASMT_FED	M0300C2_STG_3_ULCR_ADM_SN_NUM	VARCHAR2 (1)	N	M0300C2 Number of Stage 3 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 3 pressure ulcers that were present on	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	M0300D1_STG_4_ULCR_NUM	VARCHAR2 (1)	N	M0300D1 Number of Stage 4 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 4 pressure ulcers.	
LTCH_ASMT_FED	M0300D2_STG_4_ULCR_ADM SN_NUM	VARCHAR2 (1)	N	M0300D2 Number of Stage 4 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 4 pressure ulcers that were present on Admission	
LTCH_ASMT_FED	M0300E1_UNSTGBL_ULCR_D RSNNG_NUM	VARCHAR2 (1)	N	M0300E1 Number of Current Unstageable Pressure Ulcers/Injuries Due to Non-removable Dressing or Device	This indicates the number of pressure ulcers/injuries that are unstageable due to the	
LTCH_ASMT_FED	M0300E2_U_ULCR_DRSNNG_A DMSN_NUM	VARCHAR2 (1)	N	M0300E2 Number of Unstageable Pressure Ulcers/Injuries With a Non-removable Dressing That Were Present Upon Admission	The data in this column indicates the number of unstageable pressure ulcers/injuries with a non-	
LTCH_ASMT_FED	M0300F1_UNSTGBL_ULCR_E SC_NUM	VARCHAR2 (1)	N	M0300F1 Number of Unstageable Pressure Ulcers With Slough or Eschar	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_FED	M0300F2_U_ULCR_ESC_ADM SN_NUM	VARCHAR2 (1)	N	M0300F2 Number of Unstageable Pressure Ulcers With Slough or Eschar on Admission	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_FED	M0300G1_UNSTGBL_ULCR_D EEP_NUM	VARCHAR2 (1)	N	M0300G1 Number of Current Unstageable Pressure Injuries Presenting as Deep Tissue Injury	This indicates the current number of unstageable pressure injuries presenting as deep tissue	
LTCH_ASMT_FED	M0300G2_U_ULCR_DEEP_AD MSN_NUM	VARCHAR2 (1)	N	M0300G2 Number of Unstageable Pressure Injuries That Were Present Upon Admission	This indicates the number of the unstageable pressure injuries presenting as deep tissue injury	
LTCH_ASMT_FED	M0610A_STG_3_4_ULCR_LN GTH_NUM	VARCHAR2 (4)	N	M0610A Pressure Ulcer Length	The data in this column contains the length of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED	M0610B_STG_3_4_ULCR_WD TH_NUM	VARCHAR2 (4)	N	M0610B Pressure Ulcer Width	The data in this column contains the width of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED	M0610C_STG_3_4_ULCR_DPT H_NUM	VARCHAR2 (4)	N	M0610C Pressure Ulcer Depth	The data in this column contains the depth of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED	M0700_ULCR_TISUE_TYPE_C D	VARCHAR2 (1)	N	M0700 Most Severe Pressure Ulcer Tissue Type	The data in this column indicates the most severe type of tissue present in any pressure	LTCH_ULCR_TISUE_TYPE_CD
LTCH_ASMT_FED	M0800A_WRSNG_STG_2_ULC R_NUM	VARCHAR2 (1)	N	M0800A Worsening Pressure Ulcer Since Prior Assessment Number: Stage 2	The data in this column indicates the number of current Stage 2 pressure ulcers that were not	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	M0800B_WRSNG_STG_3_ULC R_NUM	VARCHAR2 (1)	N	M0800B Worsening Pressure Ulcer Since Prior Assessment Number: Stage 3	The data in this column indicates the number of current Stage 3 pressure ulcers that were not	
LTCH_ASMT_FED	M0800C_WRSNG_STG_4_ULC R_NUM	VARCHAR2 (1)	N	M0800C Worsening Pressure Ulcer Since Prior Assessment Number: Stage 4	The data in this column indicates the number of current Stage 4 pressure ulcers that were not	
LTCH_ASMT_FED	M0800D_WRSNG_DRNG_NU M	VARCHAR2 (1)	N	M0800D Worsening Unstageable Non-removable dressing Ulcer Number	The data in this column indicates the number of current Unstageable Non-removable dressing	
LTCH_ASMT_FED	M0800E_WRSNG_ESC_NUM	VARCHAR2 (1)	N	M0800E Worsening Unstageable-Slough an/or eschar Ulcer Number	The data in this column indicates the number of current Unstageable Slough and or eschar	
LTCH_ASMT_FED	M0800F_WRSNG_DEEP_NUM	VARCHAR2 (1)	N	M0800F Worsening Unstageable-Deep tissue injury Ulcer Number	The data in this column indicates the number of current Unstageable Deep Tissue injury pressure	
LTCH_ASMT_FED	N2001_DRUG_RGMN_RVW_C D	VARCHAR2 (1)	N	N2001 Drug Regimen Review	The data in this column indicates whether a complete drug regimen review identified	LTCH_DRUG_RGMN_RVW_CD
LTCH_ASMT_FED	N2003_PHYSN_MDCTN_FLW P_CD	VARCHAR2 (1)	N	N2003 Medication Follow-up	The data in this column indicates whether the facility contacted the physician (or physician-	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED	N2005_PHYSN_MDCTN_INTR VTN_CD	VARCHAR2 (1)	N	N2005 Medication Intervention	The data in this column indicates whether the facility contacted and completed the physician	LTCH_DRUG_YES_NO_CD
LTCH_ASMT_FED	O0100F3_VNTLTR_WNNG_C D	VARCHAR2 (1)	N	O0100F3 Special Treatments, Procedures, Programs-Respiratory: Ventilator Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: weaning at the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	O0100F4_VNTLTR_CD	VARCHAR2 (1)	N	O0100F4 Special Treatments, Procedures, Programs-Respiratory: Ventilator Non-Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: non-weaning at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	O0100G_CPAP_CD	VARCHAR2 (1)	N	O0100G Special Treatments, Procedures, Programs-Respiratory: Non-Invasive Ventilator (BIPAP, CPAP)	This column indicates that the patient was on a non-invasive ventilator (e.g., BIPAP, CPAP) at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	O0100H2A_VASOACTV_MDC TN_CD	VARCHAR2 (1)	N	O0100H2A Vasoactive Medications	The data in this column indicates whether the patient received intravenous vasoactive	LTCH_CHKLIST_NO_INFO_BLA NK
LTCH_ASMT_FED	O0100H_IV_MDCTN_CD	VARCHAR2 (1)	N	O0100H IV Medications	The data in this column indicates whether IV medication was required.	LTCH_CHKLIST_NO_INFO_BLA NK
LTCH_ASMT_FED	O0100J_DLYS_CD	VARCHAR2 (1)	N	O0100J Special Treatments, Procedures, Programs-Other Treatments: Dialysis	This column indicates that the patient's treatment plan included dialysis at the time of admission.	LTCH_YES_NO_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	O0100N_TOT_PRNTRL_CD	VARCHAR2 (1)	N	O0100N Special Treatments, Procedures, Programs-Other Treatments: Total Parenteral Nutrition	This column indicates that the patient's treatment plan included Total Parenteral Nutrition at the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	O0100Z_NO_TRTMT_CD	VARCHAR2 (1)	N	O0100Z Special Treatments, Procedures, Programs-Other Treatments: No Other Treatment	This column indicates that the patient was not receiving any special treatments, procedures or	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	O0150A_INSV_MCHNCL_SPRT_CD	VARCHAR2 (1)	N	O0150A SBT: Invasive Mechanical Ventilation Support Admission	The data in this column indicates whether the patient was receiving invasive mechanical	LTCH_INSV_MCHNCL_SPRT_CD
LTCH_ASMT_FED	O0150B_ASSESS_RDNS_SBT_CD	VARCHAR2 (1)	N	O0150B SBT: Assessed for SBT Readiness by Day 2 of LTCH Stay	The data in this column indicates whether the patient was assessed for readiness for	LTCH_YES_NO_NO_INFO_BLANK
LTCH_ASMT_FED	O0150C_MDCLY_READY_SBT_CD	VARCHAR2 (1)	N	O0150C SBT: Deemed Medically Ready by Day 2 of LTCH Stay	The data in this column indicates whether the patient was deemed medically ready for	LTCH_YES_NO_NO_INFO_BLANK
LTCH_ASMT_FED	O0150D_DCMTN_UNREADY_SBT_CD	VARCHAR2 (1)	N	O0150D SBT: Documentation of Reason(s) - Patient Unready	The data in this column indicates whether there is documentation of reason(s) in the patient's	LTCH_YES_NO_NO_INFO_BLANK
LTCH_ASMT_FED	O0150E_SBT_PRFM_CD	VARCHAR2 (1)	N	O0150E SBT Performed by Day 2	The data in this column indicates whether Spontaneous Breathing Trial (SBT) was	LTCH_YES_NO_NO_INFO_BLANK
LTCH_ASMT_FED	O0200A_LBRN_STUS_CD	VARCHAR2 (1)	N	O0200A Invasive Mechanical Ventilator: Liberation Status at Discharge	The data in this column indicates whether the patient was fully liberated from the invasive	LTCH_LBRN_STUS_CD
LTCH_ASMT_FED	O0250A_INFLNZ_RCVD_CD	VARCHAR2 (1)	N	O0250A Influenza Received Code	The data in this column indicates whether the patient received the influenza vaccination.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED	O0250B_INFLNZ_RCVD_DT	VARCHAR2 (8)	N	O0250B Influenza Received Date	The data in this column indicates the date that the influenza vaccination was received.	
LTCH_ASMT_FED	O0250C_RSN_INFLNZ_NOT_RCVD_CD	VARCHAR2 (1)	N	O0250C Reason Influenza Not Received Code	The data in this column indicates the reason that the patient did not receive the influenza vaccine.	LTCH_RSN_INFLNZ_NOT_RCVD_CD
LTCH_ASMT_FED	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ASMT_FED	PRCS_TS	TIMESTAMP(6) (11.6)	N	Processed Timestamp	This is the date/time that the submission file processing completed and when the	
LTCH_ASMT_FED	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ASMT_FED	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED	RSDNT_MATCH_CRTIA_ID	NUMBER (2.0)	N	Resident Match Criteria ID	This value indicates which of the resident match criteria was assigned based on the patient	
LTCH_ASMT_FED	SFTWR_PROD_NAME	VARCHAR2 (50)	N	Software Product Name	This is the name of the software that was used to create the LTCH data submission file.	
LTCH_ASMT_FED	SFTWR_PROD_VRSN_CD	VARCHAR2 (20)	N	Software Product Version Code	This is the version number of the software that was used to create the LTCH data submission	
LTCH_ASMT_FED	SFTWR_VNDR_ID	VARCHAR2 (9)	N	Software Vendor ID	This is the software vendor's Federal Employer Tax (EIN) ID.	
LTCH_ASMT_FED	SPEC_VRSN_CD	VARCHAR2 (10)	N	Specification Version Code	This value represents the version of the data submission specifications that were used to	
LTCH_ASMT_FED	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ASMT_FED	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_ASMT_FED	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	
LTCH_ASMT_FED	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_ASMT_FED	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_ASMT_FED	Z0500B_RN_SGN_CMPLT_DT	VARCHAR2 (8)	N	Z0500B LTCH CARE Data Set Completion Date	This column contains the LTCH CARE data set completion date.	
LTCH_ASMT_FED_HSTRY	A0050_TRANS_TYPE_CD	VARCHAR2 (1)	N	A0050 Type of Record	The data in this column indicates the type of record that is being submitted (new,	LTCH_TRANS_TYPE_CD
LTCH_ASMT_FED_HSTRY	A0055_CRCTN_NUM	NUMBER (2.0)	N	A0055 Correction Number	The data in this column indicates the number of correction requests to modify/inactivate the	
LTCH_ASMT_FED_HSTRY	A0100A_NPI_NUM	VARCHAR2 (10)	N	A0100A National Provider Identifier	This column contains the provider's National Provider Identifier number.	
LTCH_ASMT_FED_HSTRY	A0100B_CMS_CRTFCTN_NUM	VARCHAR2 (12)	N	A0100B CMS Certification Number (CCN)	This is the CMS Certification Number (CCN) of the provider submitting the record.	
LTCH_ASMT_FED_HSTRY	A0100C_STATE_PRVDR_NUM	VARCHAR2 (15)	N	A0100C State Provider Number	This is the State Provider Number of the provider submitting the record.	
LTCH_ASMT_FED_HSTRY	A0200_PRVDR_TYPE_CD	VARCHAR2 (1)	N	A0200 Type of Provider	This column indicates that this record is submitted by a Long-term Care Hospital. This	LTCH_PRVDR_TYPE_CD
LTCH_ASMT_FED_HSTRY	A0210_ASMT_RFRNC_DT	DATE (8)	N	A0210 Assessment Reference Date	This column contains the end date of the observation period of the assessment.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	A0220_ADMSN_DT	DATE (8)	N	A0220 Admission Date	This column indicates the patient's date of admission into the hospital.	
LTCH_ASMT_FED_HSTRY	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for assessment of this record.	LTCH_RSN_ASMT_CD
LTCH_ASMT_FED_HSTRY	A0270_DSCHRG_DT	VARCHAR2 (8)	N	A0270 Discharge Date	This column indicates the patient's discharge date from the hospital.	
LTCH_ASMT_FED_HSTRY	A0500A_FIRST_NAME	VARCHAR2 (12)	N	A0500A First Name	This column contains the first name of the patient.	
LTCH_ASMT_FED_HSTRY	A0500B_MDL_INITL_TXT	VARCHAR2 (1)	N	A0500B Middle Initial	This column contains the middle initial of the patient.	
LTCH_ASMT_FED_HSTRY	A0500C_LAST_NAME	VARCHAR2 (18)	N	A0500C Last Name	This column contains the last name of the patient.	
LTCH_ASMT_FED_HSTRY	A0500D_SFX_TXT	VARCHAR2 (3)	N	A0500D Suffix	This column contains the suffix of the patient.	
LTCH_ASMT_FED_HSTRY	A0600A_SSN_NUM	VARCHAR2 (9)	N	A0600A Social Security Number	This column contains the Social Security Number of the patient.	
LTCH_ASMT_FED_HSTRY	A0600B_MDCR_NUM	VARCHAR2 (12)	N	A0600B Medicare Number	This column contains the patient's Medicare number.	
LTCH_ASMT_FED_HSTRY	A0700_MDCD_NUM	VARCHAR2 (14)	N	A0700 Medicaid Number	This column contains the patient's Medicaid number.	
LTCH_ASMT_FED_HSTRY	A0800_GNDR_CD	VARCHAR2 (1)	N	A0800 Gender	This data in this column indicates the patient's gender.	LTCH_GNDR_CD
LTCH_ASMT_FED_HSTRY	A0900_BIRTH_DT	DATE (8)	N	A0900 Birth Date	This column contains the patient's birth date.	
LTCH_ASMT_FED_HSTRY	A1000A_AMRCN_INDN_AK_NTV_CD	VARCHAR2 (1)	N	A1000A Race/Ethnicity: American Indian or Alaskan Native	The data in this column indicates if the patient's race is American Indian/Alaskan Native.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY	A1000B_ASN_CD	VARCHAR2 (1)	N	A1000B Race/Ethnicity: Asian	The data in this column indicates if the patient's race is Asian.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY	A1000C_AFRCN_AMRCN_CD	VARCHAR2 (1)	N	A1000C Race/Ethnicity: Black or African American	The data in this column indicates if the patient's race is Black or African American.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY	A1000D_HSPNC_CD	VARCHAR2 (1)	N	A1000D Race/Ethnicity: Hispanic or Latino	The data in this column indicates if the patient's ethnicity is Hispanic.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY	A1000E_NTV_HI_PCFC_ISLN_DR_CD	VARCHAR2 (1)	N	A1000E Race/Ethnicity: Native Hawaiian or Other Pacific Islander	The data in this column indicates if the patient's race is Native Hawaiian/Pacific Islander.	LTCH_CHKLIST_NOT_ASSESS_VS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	A1000F_WHT_CD	VARCHAR2 (1)	N	A1000F Race/Ethnicity: White	This column indicates if the patient's race is White.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY	A1050_HIGHEST_EDCTN_CMP LT_CD	VARCHAR2 (1)	N	A1050 Highest Education Completed	The data in this column indicates the highest level of education achieved by the patient.	LTCH_EDCTN_CMPLT_CD
LTCH_ASMT_FED_HSTRY	A1100A_NEED_INTRPTR_CD	VARCHAR2 (1)	N	A1100A Language: Need Interpreter	The data in this column indicates whether the patient needs or wants an interpreter to	LTCH_YES_NO_UNABLE_DTRM
LTCH_ASMT_FED_HSTRY	A1100B_INTRPTR_LANG_TX T	VARCHAR2 (15)	N	A1100B Preferred Language	The data in this column indicates the patient's preferred language.	
LTCH_ASMT_FED_HSTRY	A1200_MRTL_STUS_CD	VARCHAR2 (1)	N	A1200 Marital Status	The data in this column indicates the patient's marital status.	LTCH_MRTL_STUS_CD
LTCH_ASMT_FED_HSTRY	A1300D_LFTM_OCPTN_TXT	VARCHAR2 (23)	N	A1300D Lifetime Occupation	The data in this column indicates the patient's lifetime occupation.	
LTCH_ASMT_FED_HSTRY	A1400A_MDCR_FFS_PYR_CD	VARCHAR2 (1)	N	A1400A Payer Information: Medicare (Traditional Fee-for-Service)	The data in this column indicates whether the payer source for the patient's stay is Medicare	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400B_MDCR_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400B Payer Information: Medicare (Other Payer)	The data in this column indicates whether the payer source for the patient's stay is Medicare,	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400C_MDCD_FFS_PYR_CD	VARCHAR2 (1)	N	A1400C Payer Information: Medicaid (Traditional Fee-for-Service Payer Code)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400D_MDCD_MC_PYR_CD	VARCHAR2 (1)	N	A1400D Payer Information: Medicaid (Managed Care)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400E_WC_PYR_CD	VARCHAR2 (1)	N	A1400E Payer Information: Workers Compensation	The data in this column indicates whether the payer source for the patient's stay is Workers'	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400F_TITLE_PGM_PYR_CD	VARCHAR2 (1)	N	A1400F Payer Information: Title Program	The data in this column indicates whether the payer source for the patient's stay is a Title	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400G_OTHR_GOV_T_PYR_C D	VARCHAR2 (1)	N	A1400G Payer Information: Other Government	The data in this column indicates whether the payer source for the patient's stay is an Other	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400H_PRVT_INS_PYR_CD	VARCHAR2 (1)	N	A1400H Payer Information: Private Insurance/Medigap	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400I_PRVT_MC_PYR_CD	VARCHAR2 (1)	N	A1400I Payer Information: Private Managed Care	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400J_SELF_PYR_CD	VARCHAR2 (1)	N	A1400J Payer Information: Self-Pay	The data in this column indicates whether the payer source for the patient's stay is self-pay.	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400K_NO_PYR_CD	VARCHAR2 (1)	N	A1400K Payer Information: No Payer Source	The data in this column indicates the patient does not have a payer source.	LTCH_CHKLIST_VS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	A1400X_UNK_PYR_CD	VARCHAR2 (1)	N	A1400X Payer Information: Unknown	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1400Y_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400Y Payer Information: Other	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY	A1800_ADMTD_FROM_CD	VARCHAR2 (2)	N	A1800 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_CD
LTCH_ASMT_FED_HSTRY	A1802_ADMTD_FROM_LCTN_CD	VARCHAR2 (2)	N	A1802 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_VS_CD
LTCH_ASMT_FED_HSTRY	A1810A_LAST_2_MO_IPPS_CD	VARCHAR2 (1)	N	A1810A Short-Stay Acute Hospital (IPPS)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810B_LAST_2_MO_CMNTY_CD	VARCHAR2 (1)	N	A1810B Community Residential Setting	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810C_LAST_2_MO_LTC_CD	VARCHAR2 (1)	N	A1810C Long-term Care Facility	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810D_LAST_2_MO_SNF_CD	VARCHAR2 (1)	N	A1810D Skilled Nursing Facility (SNF)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810E_LAST_2_MO_HOSP_ER_CD	VARCHAR2 (1)	N	A1810E Hospital Emergency Department	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810F_LAST_2_MO_LTCH_CD	VARCHAR2 (1)	N	A1810F Long-term Care Hospital (LTCH)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810G_LAST_2_MO_IRF_CD	VARCHAR2 (1)	N	A1810G Inpatient Rehabilitation Facility or Unit (IRF)	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810H_LAST_2_MO_HHA_CD	VARCHAR2 (1)	N	A1810H Home Health Agency (HHA)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810I_LAST_2_MO_HOSPC_CD	VARCHAR2 (1)	N	A1810I Hospice	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810J_LAST_2_MO_OPS_CD	VARCHAR2 (1)	N	A1810J Outpatient Services	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810K_LAST_2_MO_PSYCH_CD	VARCHAR2 (1)	N	A1810K Psychiatric Hospital or Unit	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810L_LAST_2_MO_ID_DD_CD	VARCHAR2 (1)	N	A1810L ID/DD Facility	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1810Z_NO_LAST_2_MO_CD	VARCHAR2 (1)	N	A1810Z None of The Above	The data in this column indicates the patient received none of the medical services identified	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	A1820_PRVS_MDCL_PRMRY_DGNS_CD	VARCHAR2 (8)	N	A1820 Previous Primary Diagnosis Code	This indicates the primary diagnosis (ICD) for the patient from the previous medical setting in	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	A1955_DSCHRG_DLAY_CD	VARCHAR2 (1)	N	A1955 Discharge Delay	The data in this column indicates if a patient's discharge was delayed for at least 24 hours.	LTCH_YES_NO
LTCH_ASMT_FED_HSTRY	A1960_DSCHRG_DLAY_RSN_CD	VARCHAR2 (2)	N	A1960 Reason for Discharge Delay	The data in this column indicates the reason the patient's discharge was delayed.	LTCH_DSCHRG_DLAY_CD
LTCH_ASMT_FED_HSTRY	A1970_DSCHRG_RTN_STUS_CD	VARCHAR2 (1)	N	A1970 Discharge Return Status	The data in this column indicates the patient's discharge return status.	LTCH_DSCHRG_RTN_CD
LTCH_ASMT_FED_HSTRY	A2100_DSCHRG_LCTN_CD	VARCHAR2 (2)	N	A2100 Discharge Location	The data in this column indicates the location to where patient was discharged. This field was	LTCH_DSCHRG_LCTN_CD
LTCH_ASMT_FED_HSTRY	A2110_DSCHRG_TO_LCTN_CD	VARCHAR2 (2)	N	A2110 Discharge Location	The data in this column indicates the location to where patient was discharged. Prior to April	LTCH_DSCHRG_LCTN_VS_CD
LTCH_ASMT_FED_HSTRY	A2500_PGM_INTRPTN_CD	VARCHAR2 (1)	N	A2500 Program Interruption(s)	The data in this column indicates whether the patient experienced a program interruption	LTCH_YES_NO_VS
LTCH_ASMT_FED_HSTRY	A2510_PGM_INTRPTN_NUM	VARCHAR2 (2)	N	A2510 Number Program Interruption(s)	The data in this column indicates the number of program interruptions during their stay.	
LTCH_ASMT_FED_HSTRY	A2520A1_INTRPTN_RCNT_RT_DT	VARCHAR2 (8)	N	A2520A1 Recent Interruption Start Date	The data in this column indicates the most recent interruption start date.	
LTCH_ASMT_FED_HSTRY	A2520A2_INTRPTN_RCNT_END_DT	VARCHAR2 (8)	N	A2520A2 Recent Interruption End Date	The data in this column indicates the most recent interruption end date.	
LTCH_ASMT_FED_HSTRY	A2520B1_INTRPTN_2ND_STRT_DT	VARCHAR2 (8)	N	A2520B1 Second Most Recent Interruption Start Date	The data in this column indicates the second most recent interruption start date.	
LTCH_ASMT_FED_HSTRY	A2520B2_INTRPTN_2ND_END_DT	VARCHAR2 (8)	N	A2520B2 Second Most Recent Interruption End Date	The data in this column indicates the second most recent interruption end date.	
LTCH_ASMT_FED_HSTRY	A2520C1_INTRPTN_3RD_STRT_DT	VARCHAR2 (8)	N	A2520C1 Third Most Recent Interruption Start Date	The data in this column indicates the third most recent interruption start date.	
LTCH_ASMT_FED_HSTRY	A2520C2_INTRPTN_3RD_END_DT	VARCHAR2 (8)	N	A2520C2 Third Most Recent Interruption End Date	The data in this column indicates the third most recent interruption end date.	
LTCH_ASMT_FED_HSTRY	A2525A1_PGM_INT_1ST_STRT_DT	VARCHAR2 (8)	N	A2525A1 Program Interruption Date - First Interruption Start Date	The data in this column represents the first program interruption start date.	
LTCH_ASMT_FED_HSTRY	A2525A2_PGM_INT_1ST_END_DT	VARCHAR2 (8)	N	A2525A2 Program Interruption Date - First Interruption End Date	The data in this column represents the first program interruption end date.	
LTCH_ASMT_FED_HSTRY	A2525B1_PGM_INT_2ND_STRT_DT	VARCHAR2 (8)	N	A2525B1 Program Interruption Date - Second Start Date	The data in this column represents the second program interruption start date.	
LTCH_ASMT_FED_HSTRY	A2525B2_PGM_INT_2ND_END_DT	VARCHAR2 (8)	N	A2525B2 Program Interruption Date - Second Interruption End Date	The data in this column represents the second program interruption end date.	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	A2525C1_PGM_INT_3RD_STR T_DT	VARCHAR2 (8)	N	A2525C1 Program Interruption Date - Third Start Date	The data in this column represents the third program interruption start date.	
LTCH_ASMT_FED_HSTRY	A2525C2_PGM_INT_3RD_EN D_DT	VARCHAR2 (8)	N	A2525C2 Program Interruption Date - Third End Date	The data in this column represents the third program interruption end date.	
LTCH_ASMT_FED_HSTRY	A2525D1_PGM_INT_4TH_STR T_DT	VARCHAR2 (8)	N	A2525D1 Program Interruption Date - Fourth Start Date	The data in this column represents the fourth program interruption start date.	
LTCH_ASMT_FED_HSTRY	A2525D2_PGM_INT_4TH_EN D_DT	VARCHAR2 (8)	N	A2525D2 Program Interruption Date - Fourth End Date	The data in this column represents the fourth program interruption end date.	
LTCH_ASMT_FED_HSTRY	A2525E1_PGM_INT_5TH_STR T_DT	VARCHAR2 (8)	N	A2525E1 Program Interruption Date - Fifth Start Date	The data in this column represents the fifth program interruption start date.	
LTCH_ASMT_FED_HSTRY	A2525E2_PGM_INT_5TH_END _DT	VARCHAR2 (8)	N	A2525E2 Program Interruption Date - Fifth End Date	The data in this column represents the fifth program interruption end date.	
LTCH_ASMT_FED_HSTRY	B0100_CMTS_CD	VARCHAR2 (1)	N	B0100 Comatose	The data in this column indicates whether or not the patient is comatose.	LTCH_YES_NO_NOT_ASSESS_ VS
LTCH_ASMT_FED_HSTRY	BB0700_EXPRSN_IDEA_WAN T_CD	VARCHAR2 (1)	N	BB0700 Expression of Ideas and Wants	The data in this column represents the patient's independence with expression of ideas and	LTCH_EXPRSN_WANT_CD
LTCH_ASMT_FED_HSTRY	BB0800_UNDRST_OTHR_CD	VARCHAR2 (1)	N	BB0800 Understanding Verbal/Non-Verbal Content	The data in this column indicates the patient's ability to understand verbal/non-verbal content,	LTCH_UNDRST_OTHR_CD
LTCH_ASMT_FED_HSTRY	C1610A_ACUTE_ONST_CD	VARCHAR2 (1)	N	C1610A Acute Onset	The data in this column indicates if the patient experienced an acute change in mental status	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_HSTRY	C1610B_BHVR_FLCTATE_CD	VARCHAR2 (1)	N	C1610B Behavior Fluctuate	The data in this column indicates if the patient's abnormal behavior fluctuated during the day	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_HSTRY	C1610C_INATTNTN_CD	VARCHAR2 (1)	N	C1610C Inattention	The data in this column indicates whether or not the patient had difficulty focusing attention	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_HSTRY	C1610D_DISORGNZ_THNKG_ CD	VARCHAR2 (1)	N	C1610D Disorganized Thinking	The data in this column indicates whether or not the patient experienced disorganized thinking	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_HSTRY	C1610E1_ALERT_CONSCS_C D	VARCHAR2 (1)	N	C1610E1 Alert Conscious	The data in this column indicates if the patient's level of consciousness was alert (normal) during	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_HSTRY	C1610E2_ALTRD_CONSCS_C D	VARCHAR2 (1)	N	C1610E2 Altered Consciousness	The data in this column indicates if the patient's level of consciousness was abnormal (Vigilant	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_HSTRY	CRCTN_NUM	NUMBER (2,0)	N	Correction Number	This is the number of the assessment. New records have a correction number of '00'	
LTCH_ASMT_FED_HSTRY	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_ASMT_FED_HSTRY	C_BIRTH_DT_SBMT_CD	VARCHAR2 (1)	N	Calculated Birth Date Submit Code	This column indicates the type of partial birth date that was submitted (full birth date, year	LTCH_BIRTH_DT_SBMT_CD
LTCH_ASMT_FED_HSTRY	C_CCN_NUM	VARCHAR2 (12)	N	Calculated CMS Certification Number (CCN)	This column contains the system calculated CMS Certification Number (CCN).	
LTCH_ASMT_FED_HSTRY	C_HICN_MBI_IND	VARCHAR2 (1)	N	Calculated HICN/MBI Indicator	This value is populated by the ASAP system during file processing and indicates the type of	
LTCH_ASMT_FED_HSTRY	C_RSDNT_AGE_NUM	VARCHAR2 (3)	N	Calculated Resident Age Number	This column contains the system calculated resident age number.	
LTCH_ASMT_FED_HSTRY	C_SSNRI_TRNSLTN_HICN_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation HICN Text	This is the patient's Health Insurance Claim Number [HICN] or Railroad Retirement Board	
LTCH_ASMT_FED_HSTRY	C_SSNRI_TRNSLTN_MBI_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation MBI Text	This is the patient's Medicare Beneficiary Identifier [MBI] that is returned from the Social	
LTCH_ASMT_FED_HSTRY	GG0100B_INDR_MBLTY_CD	VARCHAR2 (1)	N	GG0100B Indoor Mobility	The data in this column indicates the patient's need for assistance with walking from room to	LTCH_MBLTY_CD
LTCH_ASMT_FED_HSTRY	GG0110A_MNL_WLCHR_CD	VARCHAR2 (1)	N	GG0110A Manual Wheelchair	The data in this column indicates if the patient used a manual wheelchair prior to the current	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	GG0110B_MTR_WLCHR_CD	VARCHAR2 (1)	N	GG0110B Motorized Wheelchair and/or Scooter	The data in this column indicates if the patient used a motorized wheelchair and/or scooter prior	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	GG0110C_MCHNCL_LFT_CD	VARCHAR2 (1)	N	GG0110C Mechanical Lift	The data in this column indicates if the patient used a mechanical lift prior to the current illness,	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	GG0110Z_NO_MBLTY_CD	VARCHAR2 (1)	N	GG0110Z No Mobility	The data in this column indicates the patient did not previously use any type of mobility device	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	GG0130A1_EATG_SELF_ADM SN_CD	VARCHAR2 (2)	N	GG0130A1 Eating: Admission	This indicates the level of assistance required for eating during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0130A2_EATG_SELF_GOAL_CD	VARCHAR2 (2)	N	GG0130A2 Eating: Goal	This indicates the patient's goal for eating independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0130A3_EATG_SELF_DSCRG_CD	VARCHAR2 (2)	N	GG0130A3 Eating: Discharge	This indicates the level of assistance required for eating at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0130B1_ORAL_HYGNE_A DMSN_CD	VARCHAR2 (2)	N	GG0130B1 Oral Hygiene: Admission	This indicates the level of assistance required for oral hygiene during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0130B2_ORAL_HYGNE_GOAL_CD	VARCHAR2 (2)	N	GG0130B2 Oral Hygiene: Goal	This indicates the patient's goal for oral hygiene independence.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0130B3_ORAL_HYGNE_DS CHRCD_CD	VARCHAR2 (2)	N	GG0130B3 Oral Hygiene: Discharge	This indicates the level of assistance required with oral hygiene at the time of discharge.	LTCH_ASTNC_LVL_CD

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	GG0130C1_TOILT_HYGNE_A DMSN_CD	VARCHAR2 (2)	N	GG0130C1 Toileting Hygiene: Admission	This indicates the level of assistance required for toileting during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0130C2_TOILT_HYGNE_G OAL_CD	VARCHAR2 (2)	N	GG0130C2 Toileting Hygiene: Goal	This indicates the patient's goal for toileting hygiene independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0130C3_TOILT_HYGNE_D SCHRG_CD	VARCHAR2 (2)	N	GG0130C3 Toileting Hygiene: Discharge	This indicates the level of assistance required for toileting at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0130D1_WASH_UPR_ADM SN_CD	VARCHAR2 (2)	N	GG0130D1 Wash Upper Body: Admission	This indicates the level of assistance required to wash upper body during the admission time	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0130D2_WASH_UPR_GOAL L_CD	VARCHAR2 (2)	N	GG0130D2 Wash Upper Body: Goal	This indicates the patient's goal for wash upper body independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0130D3_WASH_UPR_DSC HRG_CD	VARCHAR2 (2)	N	GG0130D3 Wash Upper Body: Discharge	This indicates the level of assistance required to wash upper body at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0160A_ROLL_LEFT_RGHT _CD	VARCHAR2 (2)	N	GG0160A Roll Left and Right	The data in this column indicates the patient's ability to roll from lying on back to the left and	LTCH_ASTNC_LVL_VS_CD
LTCH_ASMT_FED_HSTRY	GG0160B_SIT_LYNG_CD	VARCHAR2 (2)	N	GG0160B Sit to Lying	The data in this column indicates the patient's ability to go from a sitting position on the side of	LTCH_ASTNC_LVL_VS_CD
LTCH_ASMT_FED_HSTRY	GG0160C_LYNG_STTG_BED_ CD	VARCHAR2 (2)	N	GG0160C Lying to Sitting on Side of Bed	The data in this column indicates the patient's ability to safely go from lying on the bed to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170A1_ROLL_ADMSN_C D	VARCHAR2 (2)	N	GG0170A1 Roll Left and Right: Admission	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170A2_ROLL_GOAL_CD	VARCHAR2 (2)	N	GG0170A2 Roll Left and Right: Goal	The data in this column indicates the patient's level of assistance goal for roll from lying on	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0170A3_ROLL_DSCHRG_C D	VARCHAR2 (2)	N	GG0170A3 Roll Left and Right: Discharge	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170B1_SIT_ADMSN_CD	VARCHAR2 (2)	N	GG0170B1 Sit to Lying: Admission	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170B2_SIT_GOAL_CD	VARCHAR2 (2)	N	GG0170B2 Sit to Lying: Goal	The data in this column indicates the patient's level of assistance goal for going from a sitting	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0170B3_SIT_DSCHRG_CD	VARCHAR2 (2)	N	GG0170B3 Sit to Lying: Discharge	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170C1_LYNG_ADMSN_C D	VARCHAR2 (2)	N	GG0170C1 Lying to Sitting on Side of Bed: Admission	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170C2_LYNG_GOAL_CD	VARCHAR2 (2)	N	GG0170C2 Lying to Sitting on Side of Bed: Goal	The data in this column indicates the patient's level of assistance goal for going from safely	LTCH_ASTNC_LVL_GOAL_CD



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	GG0170C3_LYNG_DSCHRG_CD	VARCHAR2 (2)	N	GG0170C3 Lying to Sitting on Side of Bed: Discharge	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170D1_STAND_ADMSN_CD	VARCHAR2 (2)	N	GG0170D1 Sit to Stand: Admission	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170D2_STAND_GOAL_CD	VARCHAR2 (2)	N	GG0170D2 Sit to Stand: Goal	The data in this column indicates the patient's level of assistance goal to safely come to a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0170D3_STAND_DSCHRG_CD	VARCHAR2 (2)	N	GG0170D3 Sit to Stand: Discharge	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170E1_CHR_TRNSF_ADM SN_CD	VARCHAR2 (2)	N	GG0170E1 Chair/Bed Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170E2_CHR_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170E2 Chair/Bed Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely transfer to and	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0170E3_CHR_TRNSF_DSC HRG_CD	VARCHAR2 (2)	N	GG0170E3 Chair/Bed Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170F1_TOILT_TRNSF_ADM SN_CD	VARCHAR2 (2)	N	GG0170F1 Toilet Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170F2_TOILT_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170F2 Toilet Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely get on and off a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY	GG0170F3_TOILT_TRNSF_DSCHRG_CD	VARCHAR2 (2)	N	GG0170F3 Toilet Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY	GG0170H1_WLK_ADMSN_CD	VARCHAR2 (1)	N	GG0170H1 Walk: Admission	The data in this column indicates the patient's ability to walk during the admission time period.	LTCH_WLK_CD
LTCH_ASMT_FED_HSTRY	GG0170H3_WLK_DSCHRG_CD	VARCHAR2 (1)	N	GG0170H3 Walk Code: Discharge	The data in this column indicates the patient's ability to walk at the time of discharge.	LTCH_WLK_YES_NO_CD
LTCH_ASMT_FED_HSTRY	GG0170I1_WLK_10_ADMSN_CD	VARCHAR2 (2)	N	GG0170I1 Walk 10 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk ten feet in a	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170I2_WLK_10_GOAL_CD	VARCHAR2 (2)	N	GG0170I2 Walk 10 Feet: Goal	The data in this column indicates the patient's goal for level of assistance for walking 10 feet in	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170I3_WLK_10_DSCHRG_CD	VARCHAR2 (2)	N	GG0170I3 Walk 10 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk ten feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170J1_WLK_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170J1 Walk 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170J2_WLK_50_GOAL_CD	VARCHAR2 (2)	N	GG0170J2 Walk 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to walk 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	GG0170J3_WLK_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170J3 Walk 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170K1_WLK_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170K1 Walk 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170K2_WLK_150_GOAL_CD	VARCHAR2 (2)	N	GG0170K2 Walk 150 Feet: Goal	The data in this column indicates the patient's level of assistance goal to walk 150 feet and	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170K3_WLK_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170K3 Walk 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk 150 feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170Q1_WLCHR_ADMSN_CD	VARCHAR2 (1)	N	GG0170Q1 Wheelchair and/or Scooter: Admission	The data in this column indicates if the patient uses a wheelchair and/or scooter during the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	GG0170Q3_WLCHR_DSCHRG_CD	VARCHAR2 (1)	N	GG0170Q3 Wheelchair and/or Scooter: Discharge	The data in this column indicates if the patient uses a wheelchair and/or scooter at the time of	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	GG0170R1_WHL_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170R1 Wheelchair 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170R2_WHL_50_GOAL_CD	VARCHAR2 (2)	N	GG0170R2 Wheelchair 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170R3_WHL_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170R3 Wheelchair 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170RR1_WHLCHR_50_ADMSN_CD	VARCHAR2 (1)	N	GG0170RR1 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_HSTRY	GG0170RR3_WHLCHR_50_DSCHRG_CD	VARCHAR2 (1)	N	GG0170RR3 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_HSTRY	GG0170S1_WHL_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170S1 Wheelchair 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to wheel 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170S2_WHL_150_GOAL_CD	VARCHAR2 (2)	N	GG0170S2 Wheelchair 150 Feet: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 150	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170S3_WHL_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170S3 Wheelchair 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 150 feet at	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY	GG0170SS1_WHLCHR_150_ADMSN_CD	VARCHAR2 (1)	N	GG0170SS1 Wheel 150 Feet: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_HSTRY	GG0170SS3_WHLCHR_150_DSCHRG_CD	VARCHAR2 (1)	N	GG0170SS3 Wheel 150 Feet: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	H0350_URNRY_CNTNC_CD	VARCHAR2 (1)	N	H0350 Urinary Continence	The data in this column indicates the patient's bladder continence over a three day assessment	LTCH_URNRY_CNTNC_CD
LTCH_ASMT_FED_HSTRY	H0400_BWL_CNTNC_CD	VARCHAR2 (1)	N	H0400 Bowel Continence	The data in this column indicates the patient's level of bowel continence.	LTCH_CNTNC_CD
LTCH_ASMT_FED_HSTRY	I0050A_OTH_MDCL_COND_CD	VARCHAR2 (8)	N	I0050A Other Medical Condition	The data in this column indicates the patient's primary medical condition ICD code.	
LTCH_ASMT_FED_HSTRY	I0050_PRMRY_MDCL_COND_CD	VARCHAR2 (1)	N	I0050 Primary Medical Condition	The data in this column indicates the patient's primary medical condition category. Valid	LTCH_PRMRY_MDCL_COND_CD
LTCH_ASMT_FED_HSTRY	I0101_MTSTIC_CNCR_CD	VARCHAR2 (1)	N	I0101 Severe and Metastatic Cancers	This column indicates if the patient has been diagnosed with Severe and Metastatic Cancers.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I0103_METS_CNCR_CD	VARCHAR2 (1)	N	I0103 Metastatic Cancer	The data in this column indicates if the patient has been diagnosed with metastatic cancer.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I0104_SVR_CNCR_CD	VARCHAR2 (1)	N	I0104 Severe Cancer	The data in this column indicates if the patient has been diagnosed with severe cancer.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I0605_SVR_LVSD_LVEF_CD	VARCHAR2 (1)	N	I0605 Severe Left Systolic/Ventricular Dysfunction	The data in this column indicates if the patient has been diagnosed with severe left	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I0900_PVD_CD	VARCHAR2 (1)	N	I0900 Peripheral Vascular Disease (PVD) or Peripheral Arterial Disease (PAD)	This column indicates if a patient has been diagnosed with Peripheral Vascular Disease	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I1501_KDNY_5_CD	VARCHAR2 (1)	N	I1501 Chronic Kidney Disease, State 5	This column indicates if the patient has been diagnosed with Chronic Kidney Disease, Stage	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I1502_RNL_FAILR_CD	VARCHAR2 (1)	N	I1502 Acute Renal Failure	This column indicates if the patient has been diagnosed with Acute Renal Failure.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I2101_SEPSIS_CD	VARCHAR2 (1)	N	I2101 Septicemia, Sepsis, Systemic Inflammatory Response Syndrome/Shock	This column indicates if the patient has been diagnosed with Septicemia, Sepsis or Systemic	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I2600_CNS_INFCTN_CD	VARCHAR2 (1)	N	I2600 Central Nervous System Infections, Opportunistic Infections, Bone/Joint/Muscle Infections/Necrosis	This column indicates if the patient has been diagnosed with Central Nervous System	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I2900_DM_CD	VARCHAR2 (1)	N	I2900 Diabetes Mellitus (DM)	This column indicates if a patient has been diagnosed with Diabetes Mellitus (DM).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I4100_LWR_LIMB_AMPUTT_CD	VARCHAR2 (1)	N	I4100 Major Lower Limb Amputation	This column indicates if the patient has been diagnosed with Major Lower Limb Amputation.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I4501_STRK_CD	VARCHAR2 (1)	N	I4501 Stroke	This column indicates if a patient has been diagnosed with a stroke.	LTCH_CHKLIST_NOT_ASSESS

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	I4801_DMNT_CD	VARCHAR2 (1)	N	I4801 Dementia	This column indicates if a patient has been diagnosed with dementia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I4900_HEMIPLG_CD	VARCHAR2 (1)	N	I4900 Hemiplegia or Hemiparesis	This column indicates if a patient has been diagnosed with Hemiplegia or Hemiparesis.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5000_PARAPLG_CD	VARCHAR2 (1)	N	I5000 Paraplegia	This column indicates if a patient has been diagnosed with Paraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5101_TETRAPLG_CD	VARCHAR2 (1)	N	I5101 Complete Tetraplegia	This column indicates if a patient has been diagnosed with Complete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5102_INCMPLT_TETRAPLG_CD	VARCHAR2 (1)	N	I5102 Incomplete Tetraplegia	This column indicates if a patient has been diagnosed with Incomplete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5110_SPNL_CORD_CD	VARCHAR2 (1)	N	I5110 Other Spinal Cord Disorder/Injury	This column indicates if a patient has been diagnosed with Other Spinal Cord	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5200_MS_CD	VARCHAR2 (1)	N	I5200 Multiple Sclerosis (MS)	This column indicates if a patient has been diagnosed with Multiple Sclerosis (MS).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5250_HNTGTN_CD	VARCHAR2 (1)	N	I5250 Huntingtons Disease	This column indicates if a patient has been diagnosed with Huntington's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5300_PRKNSN_CD	VARCHAR2 (1)	N	I5300 Parkinsons Disease	This column indicates if a patient has been diagnosed with Parkinson's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5450_ALS_CD	VARCHAR2 (1)	N	I5450 Amyotrophic Lateral Sclerosis	This column indicates if a patient has been diagnosed with Amyotrophic Lateral Sclerosis	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5455_PROGRS_NRMSCLR_D EASE_CD	VARCHAR2 (1)	N	I5455 Other Progressive Neuromuscular Disease	The data in this column indicates if the patient has been diagnosed with other progressive	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5460_LKIN_STATE_CD	VARCHAR2 (1)	N	I5460 Locked-In State	This column indicates if a patient has been diagnosed with Locked-In State.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5470_SVR_BRN_DMG_CD	VARCHAR2 (1)	N	I5470 Severe Anoxic Brain Damage, Cerebral Edema, or Compression of Brain	This column indicates if a patient has been diagnosed with Severe Anoxic Brain Damage,	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5480_OTHR_SVR_NRLGCL_CD	VARCHAR2 (1)	N	I5480 Other Severe Neurological Injury, Disease or Dysfunction	The data in this column indicates if the patient has been diagnosed with other severe	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5600_MALNTRTN_CD	VARCHAR2 (1)	N	I5600 Malnutrition	This column indicates if a patient has been diagnosed with malnutrition.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY	I5601_CAL_MALNTRTN_CD	VARCHAR2 (1)	N	I5601 Malnutrition (Protein or Calorie)	This column indicates if a patient has been diagnosed with Malnutrition (protein or calorie).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I5602_RSK_MALNTRTN_CD	VARCHAR2 (1)	N	I5602 At Risk for Malnutrition	This column indicates if a patient has been diagnosed as At Risk for Malnutrition.	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	I7100_LUNG_TRNSPLNT_CD	VARCHAR2 (1)	N	I7100 Lung Transplant	The data in this column indicates if the patient has had a lung transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I7101_HRT_TRNSPLNT_CD	VARCHAR2 (1)	N	I7101 Heart Transplant	The data in this column indicates if the patient has had a heart transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I7102_LVR_TRNSPLNT_CD	VARCHAR2 (1)	N	I7102 Liver Transplant	The data in this column indicates if the patient has had a liver transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I7103_KDNY_TRNSPLNT_CD	VARCHAR2 (1)	N	I7103 Kidney Transplant	The data in this column indicates if the patient has had a kidney transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I7104_BONE_MRW_TRNSPLNT_CD	VARCHAR2 (1)	N	I7104 Bone Marrow Transplant	The data in this column indicates if the patient has had a bone marrow transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	I7900_NO_ACTV_DEASE_CD	VARCHAR2 (1)	N	I7900 No Active Disease	This column indicates that a patient has no other diagnoses.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	ITM_SET_VRSN_CD	VARCHAR2 (10)	N	Item Set Version Code	This value represents the version of the item set that was completed by the facility.	
LTCH_ASMT_FED_HSTRY	J1800_FALL_LAST_ASMT_CD	VARCHAR2 (1)	N	J1800 Any Falls Since Admission	This column indicates if the patient has had any falls since admission.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	J1900A_FALL_NO_INJURY_CD	VARCHAR2 (1)	N	J1900A No Injury Fall	This column indicates the number of falls code without injury a patient has had since admission.	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_HSTRY	J1900B_FALL_INJURY_CD	VARCHAR2 (1)	N	J1900B Injury Except Major Fall	This column indicates the number of falls code with injury (except major) a patient has had	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_HSTRY	J1900C_FALL_MAJ_INJURY_CD	VARCHAR2 (1)	N	J1900C Major Injury Fall	This column indicates the number of falls code with major injury falls a patient has had since	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_HSTRY	K0200A_HGT_NUM	VARCHAR2 (2)	N	K0200A Height	The data in this column contains the patient's height in inches.	
LTCH_ASMT_FED_HSTRY	K0200B_WT_NUM	VARCHAR2 (3)	N	K0200B Weight	The data in this column contains the patient's weight in pounds.	
LTCH_ASMT_FED_HSTRY	LTCH_ASMT_ID	NUMBER (22)	Y	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ASMT_FED_HSTRY	LTCH_CRCTN_STUS_CD	VARCHAR2 (1)	N	LTCH Correction Status Code	This code indicates the version of the assessment. A value of 'C' indicates this is the	LTCH_CRCTN_STUS
LTCH_ASMT_FED_HSTRY	LTCH_ITM_SBST_CD	VARCHAR2 (3)	N	LTCH Item Subset Code	This code indicates the type of assessment that was submitted.	LTCH_ITM_SBST
LTCH_ASMT_FED_HSTRY	LTCH_SUBMSN_DAY	DATE (8)	N	LTCH Submission Day	This is the date that the file was received by the system.	
LTCH_ASMT_FED_HSTRY	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	M0210_STG_1_HGHR_ULCR_CD	VARCHAR2 (1)	N	M0210 One or More Unhealed Pressure Ulcers/Injuries	The data in this column indicates if a patient has one or more unhealed pressure ulcers/injuries.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	M0300A_STG_1_ULCR_NUM	VARCHAR2 (1)	N	M0300A Number of Stage 1 Pressure Injuries	The data in this column indicates the number of Stage 1 pressure injuries present.	
LTCH_ASMT_FED_HSTRY	M0300B1_STG_2_ULCR_NUM	VARCHAR2 (1)	N	M0300B1 Number of Stage 2 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 2 pressure ulcers.	
LTCH_ASMT_FED_HSTRY	M0300B2_STG_2_ULCR_ADM SN_NUM	VARCHAR2 (1)	N	M0300B2 Number of Stage 2 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 2 pressure ulcers that were present on	
LTCH_ASMT_FED_HSTRY	M0300B3_STG_2_ULCR_OLD_DT	VARCHAR2 (8)	N	M0300B3 Date of Oldest Stage 2 Pressure Ulcer	The data in this column indicates the date of the oldest Stage 2 pressure ulcer.	
LTCH_ASMT_FED_HSTRY	M0300C1_STG_3_ULCR_NUM	VARCHAR2 (1)	N	M0300C1 Number of Stage 3 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 3 pressure ulcers.	
LTCH_ASMT_FED_HSTRY	M0300C2_STG_3_ULCR_ADM SN_NUM	VARCHAR2 (1)	N	M0300C2 Number of Stage 3 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 3 pressure ulcers that were present on	
LTCH_ASMT_FED_HSTRY	M0300D1_STG_4_ULCR_NUM	VARCHAR2 (1)	N	M0300D1 Number of Stage 4 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 4 pressure ulcers.	
LTCH_ASMT_FED_HSTRY	M0300D2_STG_4_ULCR_ADM SN_NUM	VARCHAR2 (1)	N	M0300D2 Number of Stage 4 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 4 pressure ulcers that were present on	
LTCH_ASMT_FED_HSTRY	M0300E1_UNSTGBL_ULCR_D RSNG_NUM	VARCHAR2 (1)	N	M0300E1 Number of Current Unstageable Pressure Ulcers/Injuries Due to Non-removable Dressing or Device	This indicates the number of pressure ulcers/injuries that are unstageable due to the	
LTCH_ASMT_FED_HSTRY	M0300E2_U_ULCR_DRNG_A DMSN_NUM	VARCHAR2 (1)	N	M0300E2 Number of Unstageable Pressure Ulcers/Injuries With a Non-removable Dressing That Were Present Upon Admission	The data in this column indicates the number of unstageable pressure ulcers/injuries with a non-	
LTCH_ASMT_FED_HSTRY	M0300F1_UNSTGBL_ULCR_E SC_NUM	VARCHAR2 (1)	N	M0300F1 Number of Unstageable Pressure Ulcers With Slough or Eschar	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_FED_HSTRY	M0300F2_U_ULCR_ESC_ADM SN_NUM	VARCHAR2 (1)	N	M0300F2 Number of Unstageable Pressure Ulcers With Slough or Eschar on Admission	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_FED_HSTRY	M0300G1_UNSTGBL_ULCR_D EEP_NUM	VARCHAR2 (1)	N	M0300G1 Number of Current Unstageable Pressure Injuries Presenting as Deep Tissue Injury	This indicates the current number of unstageable pressure injuries presenting as deep tissue	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	M0300G2_U_ULCR_DEEP_AD MSN_NUM	VARCHAR2 (1)	N	M0300G2 Number of Unstageable Pressure Injuries That Were Present Upon Admission	This indicates the number of the unstageable pressure injuries presenting as deep tissue injury	
LTCH_ASMT_FED_HSTRY	M0610A_STG_3_4_ULCR_LN GTH_NUM	VARCHAR2 (4)	N	M0610A Pressure Ulcer Length	The data in this column contains the length of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_HSTRY	M0610B_STG_3_4_ULCR_WD TH_NUM	VARCHAR2 (4)	N	M0610B Pressure Ulcer Width	The data in this column contains the width of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_HSTRY	M0610C_STG_3_4_ULCR_DPT H_NUM	VARCHAR2 (4)	N	M0610C Pressure Ulcer Depth	The data in this column contains the depth of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_HSTRY	M0700_ULCR_TISUE_TYPE_C D	VARCHAR2 (1)	N	M0700 Most Severe Pressure Ulcer Tissue Type	The data in this column indicates the most severe type of tissue present in any pressure	LTCH_ULCR_TISUE_TYPE_CD
LTCH_ASMT_FED_HSTRY	M0800A_WRSNG_STG_2_ULC R_NUM	VARCHAR2 (1)	N	M0800A Worsening Pressure Ulcer Since Prior Assessment Number: Stage 2	The data in this column indicates the number of current Stage 2 pressure ulcers that were not	
LTCH_ASMT_FED_HSTRY	M0800B_WRSNG_STG_3_ULC R_NUM	VARCHAR2 (1)	N	M0800B Worsening Pressure Ulcer Since Prior Assessment Number: Stage 3	The data in this column indicates the number of current Stage 3 pressure ulcers that were not	
LTCH_ASMT_FED_HSTRY	M0800C_WRSNG_STG_4_ULC R_NUM	VARCHAR2 (1)	N	M0800C Worsening Pressure Ulcer Since Prior Assessment Number: Stage 4	The data in this column indicates the number of current Stage 4 pressure ulcers that were not	
LTCH_ASMT_FED_HSTRY	M0800D_WRSNG_DRNG_NU M	VARCHAR2 (1)	N	M0800D Worsening Unstageable Non-removable dressing Ulcer Number	The data in this column indicates the number of current Unstageable Non-removable dressing	
LTCH_ASMT_FED_HSTRY	M0800E_WRSNG_ESC_NUM	VARCHAR2 (1)	N	M0800E Worsening Unstageable-Slough an/or eschar Ulcer Number	The data in this column indicates the number of current Unstageable Slough and or eschar	
LTCH_ASMT_FED_HSTRY	M0800F_WRSNG_DEEP_NUM	VARCHAR2 (1)	N	M0800F Worsening Unstageable-Deep tissue injury Ulcer Number	The data in this column indicates the number of current Unstageable Deep Tissue injury pressure	
LTCH_ASMT_FED_HSTRY	N2001_DRUG_RGMN_RVW_C D	VARCHAR2 (1)	N	N2001 Drug Regimen Review	The data in this column indicates whether a complete drug regimen review identified	LTCH_DRUG_RGMN_RVW_CD
LTCH_ASMT_FED_HSTRY	N2003_PHYSN_MDCTN_FLW P_CD	VARCHAR2 (1)	N	N2003 Medication Follow-up	The data in this column indicates whether the facility contacted the physician (or physician-	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_HSTRY	N2005_PHYSN_MDCTN_INTR VTN_CD	VARCHAR2 (1)	N	N2005 Medication Intervention	The data in this column indicates whether the facility contacted and completed the physician	LTCH_DRUG_YES_NO_CD
LTCH_ASMT_FED_HSTRY	O0100F3_VNTLTR_WNNG_C D	VARCHAR2 (1)	N	O0100F3 Special Treatments, Procedures, Programs-Respiratory: Ventilator Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: weaning at the	LTCH_YES_NO_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	O0100F4_VNTLTR_CD	VARCHAR2 (1)	N	O0100F4 Special Treatments, Procedures, Programs-Respiratory: Ventilator Non-Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: non-weaning at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	O0100G_CPAP_CD	VARCHAR2 (1)	N	O0100G Special Treatments, Procedures, Programs-Respiratory: Non-Invasive Ventilator (BIPAP, CPAP)	This column indicates that the patient was on a non-invasive ventilator (e.g., BIPAP, CPAP) at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	O0100H2A_VASOACTV_MDC TN_CD	VARCHAR2 (1)	N	O0100H2A Vasoactive Medications	The data in this column indicates whether the patient received intravenous vasoactive	LTCH_CHKLIST_NO_INFO_BLA NK
LTCH_ASMT_FED_HSTRY	O0100H_IV_MDCTN_CD	VARCHAR2 (1)	N	O0100H IV Medications	The data in this column indicates whether IV medication was required.	LTCH_CHKLIST_NO_INFO_BLA NK
LTCH_ASMT_FED_HSTRY	O0100J_DLYS_CD	VARCHAR2 (1)	N	O0100J Special Treatments, Procedures, Programs-Other Treatments: Dialysis	This column indicates that the patient's treatment plan included dialysis at the time of admission.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	O0100N_TOT_PRNTRL_CD	VARCHAR2 (1)	N	O0100N Special Treatments, Procedures, Programs-Other Treatments: Total Parenteral Nutrition	This column indicates that the patient's treatment plan included Total Parenteral Nutrition at the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	O0100Z_NO_TRTMT_CD	VARCHAR2 (1)	N	O0100Z Special Treatments, Procedures, Programs-Other Treatments: No Other Treatment	This column indicates that the patient was not receiving any special treatments, procedures or	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	O0150A_INVSV_MCHNCL_SP RT_CD	VARCHAR2 (1)	N	O0150A SBT: Invasive Mechanical Ventilation Support Admission	The data in this column indicates whether the patient was receiving invasive mechanical	LTCH_INVSV_MCHNCL_SPRT_CD
LTCH_ASMT_FED_HSTRY	O0150B_ASSESS_RDNS_SBT_CD	VARCHAR2 (1)	N	O0150B SBT: Assessed for SBT Readiness by Day 2 of LTCH Stay	The data in this column indicates whether the patient was assessed for readiness for	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_HSTRY	O0150C_MDCLY_READY_SBT_CD	VARCHAR2 (1)	N	O0150C SBT: Deemed Medically Ready by Day 2 of LTCH Stay	The data in this column indicates whether the patient was deemed medically ready for	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_HSTRY	O0150D_DCMTN_UNREADY_SBT_CD	VARCHAR2 (1)	N	O0150D SBT: Documentation of Reason(s) - Patient Unready	The data in this column indicates whether there is documentation of reason(s) in the patient's	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_HSTRY	O0150E_SBT_PRFMD_CD	VARCHAR2 (1)	N	O0150E SBT Performed by Day 2	The data in this column indicates whether Spontaneous Breathing Trial (SBT) was	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_HSTRY	O0200A_LBR TN_STUS_CD	VARCHAR2 (1)	N	O0200A Invasive Mechanical Ventilator: Liberation Status at Discharge	The data in this column indicates whether the patient was fully liberated from the invasive	LTCH_LBR TN_STUS_CD



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY	O0250A_INFLNZ_RCVD_CD	VARCHAR2 (1)	N	O0250A Influenza Received Code	The data in this column indicates whether the patient received the influenza vaccination.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY	O0250B_INFLNZ_RCVD_DT	VARCHAR2 (8)	N	O0250B Influenza Received Date	The data in this column indicates the date that the influenza vaccination was received.	
LTCH_ASMT_FED_HSTRY	O0250C_RSN_INFLNZ_NOT_RCVD_CD	VARCHAR2 (1)	N	O0250C Reason Influenza Not Received Code	The data in this column indicates the reason that the patient did not receive the influenza vaccine.	LTCH_RSN_INFLNZ_NOT_RCVD_CD
LTCH_ASMT_FED_HSTRY	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ASMT_FED_HSTRY	PRCSD_TS	TIMESTAMP(6) (11.6)	N	Processed Timestamp	This is the date/time that the submission file processing completed and when the	
LTCH_ASMT_FED_HSTRY	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ASMT_FED_HSTRY	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
LTCH_ASMT_FED_HSTRY	RSDNT_MATCH_CRITIA_ID	NUMBER (2.0)	N	Resident Match Criteria ID	This value indicates which of the resident match criteria was assigned based on the patient	
LTCH_ASMT_FED_HSTRY	SFTWR_PROD_NAME	VARCHAR2 (50)	N	Software Product Name	This is the name of the software that was used to create the LTCH data submission file.	
LTCH_ASMT_FED_HSTRY	SFTWR_PROD_VRSN_CD	VARCHAR2 (20)	N	Software Product Version Code	This is the version number of the software that was used to create the LTCH data submission	
LTCH_ASMT_FED_HSTRY	SFTWR_VNDR_ID	VARCHAR2 (9)	N	Software Vendor ID	This is the software vendor's Federal Employer Tax (EIN) ID.	
LTCH_ASMT_FED_HSTRY	SPEC_VRSN_CD	VARCHAR2 (10)	N	Specification Version Code	This value represents the version of the data submission specifications that were used to	
LTCH_ASMT_FED_HSTRY	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ASMT_FED_HSTRY	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_ASMT_FED_HSTRY	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	
LTCH_ASMT_FED_HSTRY	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_ASMT_FED_HSTRY	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_ASMT_FED_HSTRY	Z0500B_RN_SGN_CMPLT_DT	VARCHAR2 (8)	N	Z0500B LTCH CARE Data Set Completion Date	This column contains the LTCH CARE data set completion date.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	A0050_TRANS_TYPE_CD	VARCHAR2 (1)	N	A0050 Type of Record	The data in this column indicates the type of record that is being submitted (new,	LTCH_TRANS_TYPE_CD
LTCH_ASMT_FED_HSTRY_VW	A0055_CRCTN_NUM	NUMBER (2,0)	N	A0055 Correction Number	The data in this column indicates the number of correction requests to modify/inactivate the	
LTCH_ASMT_FED_HSTRY_VW	A0100A_NPI_NUM	VARCHAR2 (10)	N	A0100A National Provider Identifier	This column contains the provider's National Provider Identifier number.	
LTCH_ASMT_FED_HSTRY_VW	A0100B_CMS_CRTFCTN_NUM	VARCHAR2 (12)	N	A0100B CMS Certification Number (CCN)	This is the CMS Certification Number (CCN) of the provider submitting the record.	
LTCH_ASMT_FED_HSTRY_VW	A0100C_STATE_PRVDR_NUM	VARCHAR2 (15)	N	A0100C State Provider Number	This is the State Provider Number of the provider submitting the record.	
LTCH_ASMT_FED_HSTRY_VW	A0200_PRVDR_TYPE_CD	VARCHAR2 (1)	N	A0200 Type of Provider	This column indicates that this record is submitted by a Long-term Care Hospital. This	LTCH_PRVDR_TYPE_CD
LTCH_ASMT_FED_HSTRY_VW	A0210_ASMT_RFRNC_DT	DATE (8)	N	A0210 Assessment Reference Date	This column contains the end date of the observation period of the assessment.	
LTCH_ASMT_FED_HSTRY_VW	A0220_ADMSN_DT	DATE (8)	N	A0220 Admission Date	This column indicates the patient's date of admission into the hospital.	
LTCH_ASMT_FED_HSTRY_VW	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for assessment of this record.	LTCH_RSN_ASMT_CD
LTCH_ASMT_FED_HSTRY_VW	A0270_DSCHRG_DT	VARCHAR2 (8)	N	A0270 Discharge Date	This column indicates the patient's discharge date from the hospital.	
LTCH_ASMT_FED_HSTRY_VW	A0500A_FIRST_NAME	VARCHAR2 (12)	N	A0500A First Name	This column contains the first name of the patient.	
LTCH_ASMT_FED_HSTRY_VW	A0500B_MDL_INITL_TXT	VARCHAR2 (1)	N	A0500B Middle Initial	This column contains the middle initial of the patient.	
LTCH_ASMT_FED_HSTRY_VW	A0500C_LAST_NAME	VARCHAR2 (18)	N	A0500C Last Name	This column contains the last name of the patient.	
LTCH_ASMT_FED_HSTRY_VW	A0500D_SFX_TXT	VARCHAR2 (3)	N	A0500D Suffix	This column contains the suffix of the patient.	
LTCH_ASMT_FED_HSTRY_VW	A0600A_SSN_NUM	VARCHAR2 (9)	N	A0600A Social Security Number	This column contains the Social Security Number of the patient.	
LTCH_ASMT_FED_HSTRY_VW	A0600B_MDCR_NUM	VARCHAR2 (12)	N	A0600B Medicare Number	This column contains the patient's Medicare number.	
LTCH_ASMT_FED_HSTRY_VW	A0700_MDCD_NUM	VARCHAR2 (14)	N	A0700 Medicaid Number	This column contains the patient's Medicaid number.	

## Tables Report - LTCH

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	A0800_GNDR_CD	VARCHAR2 (1)	N	A0800 Gender	This data in this column indicates the patient's gender.	LTCH_GNDR_CD
LTCH_ASMT_FED_HSTRY_VW	A0900_BIRTH_DT	DATE (8)	N	A0900 Birth Date	This column contains the patient's birth date.	
LTCH_ASMT_FED_HSTRY_VW	A1000A_AMRCN_INDN_AK_NTV_CD	VARCHAR2 (1)	N	A1000A Race/Ethnicity: American Indian or Alaskan Native	The data in this column indicates if the patient's race is American Indian/Alaskan Native.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY_VW	A1000B_ASN_CD	VARCHAR2 (1)	N	A1000B Race/Ethnicity: Asian	The data in this column indicates if the patient's race is Asian.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY_VW	A1000C_AFRCN_AMRCN_CD	VARCHAR2 (1)	N	A1000C Race/Ethnicity: Black or African American	The data in this column indicates if the patient's race is Black or African American.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY_VW	A1000D_HSPNC_CD	VARCHAR2 (1)	N	A1000D Race/Ethnicity: Hispanic or Latino	The data in this column indicates if the patient's ethnicity is Hispanic.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY_VW	A1000E_NTV_HI_PCFC_ISLN_DR_CD	VARCHAR2 (1)	N	A1000E Race/Ethnicity: Native Hawaiian or Other Pacific Islander	The data in this column indicates if the patient's race is Native Hawaiian/Pacific Islander.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY_VW	A1000F_WHT_CD	VARCHAR2 (1)	N	A1000F Race/Ethnicity: White	This column indicates if the patient's race is White.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY_VW	A1050_HIGHEST_EDCTN_CMP_LT_CD	VARCHAR2 (1)	N	A1050 Highest Education Completed	The data in this column indicates the highest level of education achieved by the patient.	LTCH_EDCTN_CMPLT_CD
LTCH_ASMT_FED_HSTRY_VW	A1100A_NEED_INTRPTR_CD	VARCHAR2 (1)	N	A1100A Language: Need Interpreter	The data in this column indicates whether the patient needs or wants an interpreter to	LTCH_YES_NO_UNABLE_DTRM
LTCH_ASMT_FED_HSTRY_VW	A1100B_INTRPTR_LANG_TX_T	VARCHAR2 (15)	N	A1100B Preferred Language	The data in this column indicates the patient's preferred language.	
LTCH_ASMT_FED_HSTRY_VW	A1200_MRTL_STUS_CD	VARCHAR2 (1)	N	A1200 Marital Status	The data in this column indicates the patient's marital status.	LTCH_MRTL_STUS_CD
LTCH_ASMT_FED_HSTRY_VW	A1300D_LFTM_OCPTN_TXT	VARCHAR2 (23)	N	A1300D Lifetime Occupation	The data in this column indicates the patient's lifetime occupation.	
LTCH_ASMT_FED_HSTRY_VW	A1400A_MDCR_FFS_PYR_CD	VARCHAR2 (1)	N	A1400A Payer Information: Medicare (Traditional Fee-for-Service)	The data in this column indicates whether the payer source for the patient's stay is Medicare	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400B_MDCR_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400B Payer Information: Medicare (Other Payer)	The data in this column indicates whether the payer source for the patient's stay is Medicare,	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400C_MDCD_FFS_PYR_CD	VARCHAR2 (1)	N	A1400C Payer Information: Medicaid (Traditional Fee-for-Service Payer Code)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	A1400D_MDCD_MC_PYR_CD	VARCHAR2 (1)	N	A1400D Payer Information: Medicaid (Managed Care)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400E_WC_PYR_CD	VARCHAR2 (1)	N	A1400E Payer Information: Workers Compensation	The data in this column indicates whether the payer source for the patient's stay is Workers'	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400F_TITLE_PGM_PYR_CD	VARCHAR2 (1)	N	A1400F Payer Information: Title Program	The data in this column indicates whether the payer source for the patient's stay is a Title	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400G_OTHR_GOV_T_PYR_CD	VARCHAR2 (1)	N	A1400G Payer Information: Other Government	The data in this column indicates whether the payer source for the patient's stay is an Other	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400H_PRVT_INS_PYR_CD	VARCHAR2 (1)	N	A1400H Payer Information: Private Insurance/Medigap	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400I_PRVT_MC_PYR_CD	VARCHAR2 (1)	N	A1400I Payer Information: Private Managed Care	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400J_SELF_PYR_CD	VARCHAR2 (1)	N	A1400J Payer Information: Self-Pay	The data in this column indicates whether the payer source for the patient's stay is self-pay.	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400K_NO_PYR_CD	VARCHAR2 (1)	N	A1400K Payer Information: No Payer Source	The data in this column indicates the patient does not have a payer source.	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400X_UNK_PYR_CD	VARCHAR2 (1)	N	A1400X Payer Information: Unknown	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1400Y_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400Y Payer Information: Other	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_FED_HSTRY_VW	A1800_ADMTD_FROM_CD	VARCHAR2 (2)	N	A1800 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_CD
LTCH_ASMT_FED_HSTRY_VW	A1802_ADMTD_FROM_LCTN_CD	VARCHAR2 (2)	N	A1802 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_VS_CD
LTCH_ASMT_FED_HSTRY_VW	A1810A_LAST_2_MO_IPPS_CD	VARCHAR2 (1)	N	A1810A Short-Stay Acute Hospital (IPPS)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810B_LAST_2_MO_CMNTY_CD	VARCHAR2 (1)	N	A1810B Community Residential Setting	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810C_LAST_2_MO_LTC_CD	VARCHAR2 (1)	N	A1810C Long-term Care Facility	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810D_LAST_2_MO_SNF_CD	VARCHAR2 (1)	N	A1810D Skilled Nursing Facility (SNF)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810E_LAST_2_MO_HOSP_ER_CD	VARCHAR2 (1)	N	A1810E Hospital Emergency Department	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	A1810F_LAST_2_MO_LTCH_CD	VARCHAR2 (1)	N	A1810F Long-term Care Hospital (LTCH)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810G_LAST_2_MO_IRF_CD	VARCHAR2 (1)	N	A1810G Inpatient Rehabilitation Facility or Unit (IRF)	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810H_LAST_2_MO_HHA_CD	VARCHAR2 (1)	N	A1810H Home Health Agency (HHA)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810I_LAST_2_MO_HOSP_CD	VARCHAR2 (1)	N	A1810I Hospice	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810J_LAST_2_MO_OPS_CD	VARCHAR2 (1)	N	A1810J Outpatient Services	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810K_LAST_2_MO_PSYCH_CD	VARCHAR2 (1)	N	A1810K Psychiatric Hospital or Unit	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810L_LAST_2_MO_ID_DD_CD	VARCHAR2 (1)	N	A1810L ID/DD Facility	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1810Z_NO_LAST_2_MO_CD	VARCHAR2 (1)	N	A1810Z None of The Above	The data in this column indicates the patient received none of the medical services identified	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	A1820_PRVS_MDCL_PRMRY_DGNS_CD	VARCHAR2 (8)	N	A1820 Previous Primary Diagnosis Code	This indicates the primary diagnosis (ICD) for the patient from the previous medical setting in	
LTCH_ASMT_FED_HSTRY_VW	A1955_DSCHRG_DLAY_CD	VARCHAR2 (1)	N	A1955 Discharge Delay	The data in this column indicates if a patient's discharge was delayed for at least 24 hours.	LTCH_YES_NO
LTCH_ASMT_FED_HSTRY_VW	A1960_DSCHRG_DLAY_RSN_CD	VARCHAR2 (2)	N	A1960 Reason for Discharge Delay	The data in this column indicates the reason the patient's discharge was delayed.	LTCH_DSCHRG_DLAY_CD
LTCH_ASMT_FED_HSTRY_VW	A1970_DSCHRG_RTN_STUS_CD	VARCHAR2 (1)	N	A1970 Discharge Return Status	The data in this column indicates the patient's discharge return status.	LTCH_DSCHRG_RTN_CD
LTCH_ASMT_FED_HSTRY_VW	A2100_DSCHRG_LCTN_CD	VARCHAR2 (2)	N	A2100 Discharge Location	The data in this column indicates the location to where patient was discharged. This field was	LTCH_DSCHRG_LCTN_CD
LTCH_ASMT_FED_HSTRY_VW	A2110_DSCHRG_TO_LCTN_CD	VARCHAR2 (2)	N	A2110 Discharge Location	The data in this column indicates the location to where patient was discharged. Prior to April	LTCH_DSCHRG_LCTN_VS_CD
LTCH_ASMT_FED_HSTRY_VW	A2500_PGM_INTRPTN_CD	VARCHAR2 (1)	N	A2500 Program Interruption(s)	The data in this column indicates whether the patient experienced a program interruption	LTCH_YES_NO_VS
LTCH_ASMT_FED_HSTRY_VW	A2510_PGM_INTRPTN_NUM	VARCHAR2 (2)	N	A2510 Number Program Interruption(s)	The data in this column indicates the number of program interruptions during their stay.	
LTCH_ASMT_FED_HSTRY_VW	A2520A1_INTRPTN_RCNT_RT_DT	VARCHAR2 (8)	N	A2520A1 Recent Interruption Start Date	The data in this column indicates the most recent interruption start date.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	A2520A2_INTRPTN_RCNT_END_DT	VARCHAR2 (8)	N	A2520A2 Recent Interruption End Date	The data in this column indicates the most recent interruption end date.	
LTCH_ASMT_FED_HSTRY_VW	A2520B1_INTRPTN_2ND_STRT_DT	VARCHAR2 (8)	N	A2520B1 Second Most Recent Interruption Start Date	The data in this column indicates the second most recent interruption start date.	
LTCH_ASMT_FED_HSTRY_VW	A2520B2_INTRPTN_2ND_END_DT	VARCHAR2 (8)	N	A2520B2 Second Most Recent Interruption End Date	The data in this column indicates the second most recent interruption end date.	
LTCH_ASMT_FED_HSTRY_VW	A2520C1_INTRPTN_3RD_STRT_DT	VARCHAR2 (8)	N	A2520C1 Third Most Recent Interruption Start Date	The data in this column indicates the third most recent interruption start date.	
LTCH_ASMT_FED_HSTRY_VW	A2520C2_INTRPTN_3RD_END_DT	VARCHAR2 (8)	N	A2520C2 Third Most Recent Interruption End Date	The data in this column indicates the third most recent interruption end date.	
LTCH_ASMT_FED_HSTRY_VW	A2525A1_PGM_INT_1ST_STRT_DT	VARCHAR2 (8)	N	A2525A1 Program Interruption Date - First Interruption Start Date	The data in this column represents the first program interruption start date.	
LTCH_ASMT_FED_HSTRY_VW	A2525A2_PGM_INT_1ST_END_DT	VARCHAR2 (8)	N	A2525A2 Program Interruption Date - First Interruption End Date	The data in this column represents the first program interruption end date.	
LTCH_ASMT_FED_HSTRY_VW	A2525B1_PGM_INT_2ND_STRT_DT	VARCHAR2 (8)	N	A2525B1 Program Interruption Date - Second Start Date	The data in this column represents the second program interruption start date.	
LTCH_ASMT_FED_HSTRY_VW	A2525B2_PGM_INT_2ND_END_DT	VARCHAR2 (8)	N	A2525B2 Program Interruption Date - Second Interruption End Date	The data in this column represents the second program interruption end date.	
LTCH_ASMT_FED_HSTRY_VW	A2525C1_PGM_INT_3RD_STRT_DT	VARCHAR2 (8)	N	A2525C1 Program Interruption Date - Third Start Date	The data in this column represents the third program interruption start date.	
LTCH_ASMT_FED_HSTRY_VW	A2525C2_PGM_INT_3RD_END_DT	VARCHAR2 (8)	N	A2525C2 Program Interruption Date - Third End Date	The data in this column represents the third program interruption end date.	
LTCH_ASMT_FED_HSTRY_VW	A2525D1_PGM_INT_4TH_STRT_DT	VARCHAR2 (8)	N	A2525D1 Program Interruption Date - Fourth Start Date	The data in this column represents the fourth program interruption start date.	
LTCH_ASMT_FED_HSTRY_VW	A2525D2_PGM_INT_4TH_END_DT	VARCHAR2 (8)	N	A2525D2 Program Interruption Date - Fourth End Date	The data in this column represents the fourth program interruption end date.	
LTCH_ASMT_FED_HSTRY_VW	A2525E1_PGM_INT_5TH_STRT_DT	VARCHAR2 (8)	N	A2525E1 Program Interruption Date - Fifth Start Date	The data in this column represents the fifth program interruption start date.	
LTCH_ASMT_FED_HSTRY_VW	A2525E2_PGM_INT_5TH_END_DT	VARCHAR2 (8)	N	A2525E2 Program Interruption Date - Fifth End Date	The data in this column represents the fifth program interruption end date.	
LTCH_ASMT_FED_HSTRY_VW	B0100_CMETS_CD	VARCHAR2 (1)	N	B0100 Comatose	The data in this column indicates whether or not the patient is comatose.	LTCH_YES_NO_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY_VW	BB0700_EXPRSN_IDEA_WANT_CD	VARCHAR2 (1)	N	BB0700 Expression of Ideas and Wants	The data in this column represents the patient's independence with expression of ideas and	LTCH_EXPRSN_WANT_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	BB0800_UNDRST_OTHR_CD	VARCHAR2 (1)	N	BB0800 Understanding Verbal/Non-Verbal Content	The data in this column indicates the patient's ability to understand verbal/non-verbal content,	LTCH_UNDRST_OTHR_CD
LTCH_ASMT_FED_HSTRY_VW	C1610A_ACUTE_ONST_CD	VARCHAR2 (1)	N	C1610A Acute Onset	The data in this column indicates if the patient experienced an acute change in mental status	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED_HSTRY_VW	C1610B_BHVR_FLCTATE_CD	VARCHAR2 (1)	N	C1610B Behavior Fluctuate	The data in this column indicates if the patient's abnormal behavior fluctuated during the day	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED_HSTRY_VW	C1610C_INATTNTN_CD	VARCHAR2 (1)	N	C1610C Inattention	The data in this column indicates whether or not the patient had difficulty focusing attention	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED_HSTRY_VW	C1610D_DISORGNZ_THNGK_CD	VARCHAR2 (1)	N	C1610D Disorganized Thinking	The data in this column indicates whether or not the patient experienced disorganized thinking	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED_HSTRY_VW	C1610E1_ALERT_CONSCS_CD	VARCHAR2 (1)	N	C1610E1 Alert Conscious	The data in this column indicates if the patient's level of consciousness was alert (normal) during	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED_HSTRY_VW	C1610E2_ALTRD_CONSCS_CD	VARCHAR2 (1)	N	C1610E2 Altered Consciousness	The data in this column indicates if the patient's level of consciousness was abnormal (Vigilant	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_FED_HSTRY_VW	CRCTN_NUM	NUMBER (2,0)	N	Correction Number	This is the number of the assessment. New records have a correction number of '00'	
LTCH_ASMT_FED_HSTRY_VW	CREAT_TS	DATE (8)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_ASMT_FED_HSTRY_VW	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_ASMT_FED_HSTRY_VW	C_BIRTH_DT_SBMT_CD	VARCHAR2 (1)	N	Calculated Birth Date Submit Code	This column indicates the type of partial birth date that was submitted (year only or month and	LTCH_BIRTH_DT_SBMT_CD
LTCH_ASMT_FED_HSTRY_VW	C_CCN_NUM	VARCHAR2 (12)	N	Calculated CMS Certification Number (CCN)	This column contains the system calculated CMS Certification Number (CCN).	
LTCH_ASMT_FED_HSTRY_VW	C_HICN_MBI_IND	VARCHAR2 (1)	N	Calculated HICN/MBI Indicator	This value is populated by the ASAP system during file processing and indicates the type of	
LTCH_ASMT_FED_HSTRY_VW	C_RSDNT_AGE_NUM	NUMBER (3)	N	Calculated Resident Age Number	This column contains the system calculated resident age number.	
LTCH_ASMT_FED_HSTRY_VW	C_SSNRI_TRNSLTN_HICN_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation HICN Text	This is the patient's Health Insurance Claim Number [HICN] or Railroad Retirement Board	
LTCH_ASMT_FED_HSTRY_VW	C_SSNRI_TRNSLTN_MBI_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation MBI Text	This is the patient's Medicare Beneficiary Identifier [MBI] that is returned from the Social	
LTCH_ASMT_FED_HSTRY_VW	GG0100B_INDR_MBLTY_CD	VARCHAR2 (1)	N	GG0100B Indoor Mobility	The data in this column indicates the patient's need for assistance with walking from room to	LTCH_MBLTY_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	GG0110A_MNL_WLCHR_CD	VARCHAR2 (1)	N	GG0110A Manual Wheelchair	The data in this column indicates if the patient used a manual wheelchair prior to the current	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	GG0110B_MTR_WLCHR_CD	VARCHAR2 (1)	N	GG0110B Motorized Wheelchair and/or Scooter	The data in this column indicates if the patient used a motorized wheelchair and/or scooter prior	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	GG0110C_MCHNCL_LFT_CD	VARCHAR2 (1)	N	GG0110C Mechanical Lift	The data in this column indicates if the patient used a mechanical lift prior to the current illness,	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	GG0110Z_NO_MBLTY_CD	VARCHAR2 (1)	N	GG0110Z No Mobility	The data in this column indicates the patient did not previously use any type of mobility device	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	GG0130A1_EATG_SELF_ADM_SN_CD	VARCHAR2 (2)	N	GG0130A1 Eating: Admission	This indicates the level of assistance required for eating during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130A2_EATG_SELF_GOAL_CD	VARCHAR2 (2)	N	GG0130A2 Eating: Goal	This indicates the patient's goal for eating independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130A3_EATG_SELF_DSC_HRG_CD	VARCHAR2 (2)	N	GG0130A3 Eating: Discharge	This indicates the level of assistance required for eating at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130B1_ORAL_HYGNE_A_DMSN_CD	VARCHAR2 (2)	N	GG0130B1 Oral Hygiene: Admission	This indicates the level of assistance required for oral hygiene during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130B2_ORAL_HYGNE_GOAL_CD	VARCHAR2 (2)	N	GG0130B2 Oral Hygiene: Goal	This indicates the patient's goal for oral hygiene independence.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130B3_ORAL_HYGNE_DS_CHRG_CD	VARCHAR2 (2)	N	GG0130B3 Oral Hygiene: Discharge	This indicates the level of assistance required with oral hygiene at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130C1_TOILT_HYGNE_A_DMSN_CD	VARCHAR2 (2)	N	GG0130C1 Toileting Hygiene: Admission	This indicates the level of assistance required for toileting during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130C2_TOILT_HYGNE_GOAL_CD	VARCHAR2 (2)	N	GG0130C2 Toileting Hygiene: Goal	This indicates the patient's goal for toileting hygiene independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130C3_TOILT_HYGNE_DS_SCHRG_CD	VARCHAR2 (2)	N	GG0130C3 Toileting Hygiene: Discharge	This indicates the level of assistance required for toileting at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130D1_WASH_UPR_ADM_SN_CD	VARCHAR2 (2)	N	GG0130D1 Wash Upper Body: Admission	This indicates the level of assistance required to wash upper body during the admission time	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130D2_WASH_UPR_GOAL_CD	VARCHAR2 (2)	N	GG0130D2 Wash Upper Body: Goal	This indicates the patient's goal for wash upper body independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0130D3_WASH_UPR_DSC_HRG_CD	VARCHAR2 (2)	N	GG0130D3 Wash Upper Body: Discharge	This indicates the level of assistance required to wash upper body at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0160A_ROLL_LEFT_RGHT_CD	VARCHAR2 (2)	N	GG0160A Roll Left and Right	The data in this column indicates the patient's ability to roll from lying on back to the left and	LTCH_ASTNC_LVL_VS_CD



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	GG0160B_SIT_LYNG_CD	VARCHAR2 (2)	N	GG0160B Sit to Lying	The data in this column indicates the patient's ability to go from a sitting position on the side of	LTCH_ASTNC_LVL_VS_CD
LTCH_ASMT_FED_HSTRY_VW	GG0160C_LYNG_STTG_BED_CD	VARCHAR2 (2)	N	GG0160C Lying to Sitting on Side of Bed	The data in this column indicates the patient's ability to safely go from lying on the bed to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170A1_ROLL_ADMSN_CD	VARCHAR2 (2)	N	GG0170A1 Roll Left and Right: Admission	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170A2_ROLL_GOAL_CD	VARCHAR2 (2)	N	GG0170A2 Roll Left and Right: Goal	The data in this column indicates the patient's level of assistance goal for roll from lying on	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170A3_ROLL_DSCHRG_CD	VARCHAR2 (2)	N	GG0170A3 Roll Left and Right: Discharge	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170B1_SIT_ADMSN_CD	VARCHAR2 (2)	N	GG0170B1 Sit to Lying: Admission	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170B2_SIT_GOAL_CD	VARCHAR2 (2)	N	GG0170B2 Sit to Lying: Goal	The data in this column indicates the patient's level of assistance goal for going from a sitting	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170B3_SIT_DSCHRG_CD	VARCHAR2 (2)	N	GG0170B3 Sit to Lying: Discharge	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170C1_LYNG_ADMSN_CD	VARCHAR2 (2)	N	GG0170C1 Lying to Sitting on Side of Bed: Admission	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170C2_LYNG_GOAL_CD	VARCHAR2 (2)	N	GG0170C2 Lying to Sitting on Side of Bed: Goal	The data in this column indicates the patient's level of assistance goal for going from safely	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170C3_LYNG_DSCHRG_CD	VARCHAR2 (2)	N	GG0170C3 Lying to Sitting on Side of Bed: Discharge	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170D1_STAND_ADMSN_CD	VARCHAR2 (2)	N	GG0170D1 Sit to Stand: Admission	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170D2_STAND_GOAL_CD	VARCHAR2 (2)	N	GG0170D2 Sit to Stand: Goal	The data in this column indicates the patient's level of assistance goal to safely come to a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170D3_STAND_DSCHRG_CD	VARCHAR2 (2)	N	GG0170D3 Sit to Stand: Discharge	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170E1_CHR_TRNSF_ADM_SN_CD	VARCHAR2 (2)	N	GG0170E1 Chair/Bed Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170E2_CHR_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170E2 Chair/Bed Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely transfer to and	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170E3_CHR_TRNSF_DSC_HRG_CD	VARCHAR2 (2)	N	GG0170E3 Chair/Bed Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	GG0170F1_TOILT_TRNSF_AD_MSN_CD	VARCHAR2 (2)	N	GG0170F1 Toilet Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170F2_TOILT_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170F2 Toilet Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely get on and off a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170F3_TOILT_TRNSF_DS_CHRG_CD	VARCHAR2 (2)	N	GG0170F3 Toilet Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170H1_WLK_ADMSN_CD	VARCHAR2 (1)	N	GG0170H1 Walk: Admission	The data in this column indicates the patient's ability to walk during the admission time period.	LTCH_WLK_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170H3_WLK_DSCHRG_CD	VARCHAR2 (1)	N	GG0170H3 Walk Code: Discharge	The data in this column indicates the patient's ability to walk at the time of discharge.	LTCH_WLK_YES_NO_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170I1_WLK_10_ADMSN_CD	VARCHAR2 (2)	N	GG0170I1 Walk 10 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk ten feet in a	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170I2_WLK_10_GOAL_CD	VARCHAR2 (2)	N	GG0170I2 Walk 10 Feet: Goal	The data in this column indicates the patient's goal for level of assistance for walking 10 feet in	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170I3_WLK_10_DSCHRG_CD	VARCHAR2 (2)	N	GG0170I3 Walk 10 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk ten feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170J1_WLK_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170J1 Walk 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170J2_WLK_50_GOAL_CD	VARCHAR2 (2)	N	GG0170J2 Walk 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to walk 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170J3_WLK_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170J3 Walk 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170K1_WLK_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170K1 Walk 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170K2_WLK_150_GOAL_CD	VARCHAR2 (2)	N	GG0170K2 Walk 150 Feet: Goal	The data in this column indicates the patient's level of assistance goal to walk 150 feet and	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170K3_WLK_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170K3 Walk 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk 150 feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170Q1_WLCHR_ADMSN_CD	VARCHAR2 (1)	N	GG0170Q1 Wheelchair and/or Scooter: Admission	The data in this column indicates if the patient uses a wheelchair and/or scooter during the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	GG0170Q3_WLCHR_DSCHRG_CD	VARCHAR2 (1)	N	GG0170Q3 Wheelchair and/or Scooter: Discharge	The data in this column indicates if the patient uses a wheelchair and/or scooter at the time of	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	GG0170R1_WHL_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170R1 Wheelchair 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	GG0170R2_WHL_50_GOAL_CD	VARCHAR2 (2)	N	GG0170R2 Wheelchair 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170R3_WHL_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170R3 Wheelchair 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170RR1_WHLCHR_50_ADMSN_CD	VARCHAR2 (1)	N	GG0170RR1 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170RR3_WHLCHR_50_DSCHRG_CD	VARCHAR2 (1)	N	GG0170RR3 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170S1_WHL_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170S1 Wheelchair 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to wheel 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170S2_WHL_150_GOAL_CD	VARCHAR2 (2)	N	GG0170S2 Wheelchair 150 Feet: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 150	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170S3_WHL_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170S3 Wheelchair 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 150 feet at	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170SS1_WHLCHR_150_ADMSN_CD	VARCHAR2 (1)	N	GG0170SS1 Wheel 150 Feet: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_HSTRY_VW	GG0170SS3_WHLCHR_150_DSCHRG_CD	VARCHAR2 (1)	N	GG0170SS3 Wheel 150 Feet: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_HSTRY_VW	H0350_URNRY_CNTNC_CD	VARCHAR2 (1)	N	H0350 Urinary Continence	The data in this column indicates the patient's bladder continence over a three day assessment	LTCH_URNRY_CNTNC_CD
LTCH_ASMT_FED_HSTRY_VW	H0400_BWL_CNTNC_CD	VARCHAR2 (1)	N	H0400 Bowel Continence	The data in this column indicates the patient's level of bowel continence.	LTCH_CNTNC_CD
LTCH_ASMT_FED_HSTRY_VW	I0050A_OTH_MDCL_COND_CD	VARCHAR2 (8)	N	I0050A Other Medical Condition	The data in this column indicates the patient's primary medical condition ICD code.	
LTCH_ASMT_FED_HSTRY_VW	I0050_PRMRY_MDCL_COND_CD	VARCHAR2 (1)	N	I0050 Primary Medical Condition	The data in this column indicates the patient's primary medical condition category. Valid	LTCH_PRMRY_MDCL_COND_CD
LTCH_ASMT_FED_HSTRY_VW	I0101_MTSTIC_CNCR_CD	VARCHAR2 (1)	N	I0101 Severe and Metastatic Cancers	This column indicates if the patient has been diagnosed with Severe and Metastatic Cancers.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I0103_METS_CNCR_CD	VARCHAR2 (1)	N	I0103 Metastatic Cancer	The data in this column indicates if the patient has been diagnosed with metastatic cancer.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I0104_SVR_CNCR_CD	VARCHAR2 (1)	N	I0104 Severe Cancer	The data in this column indicates if the patient has been diagnosed with severe cancer.	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	I0605_SVR_LVSD_LVEF_CD	VARCHAR2 (1)	N	I0605 Severe Left Systolic/Ventricular Dysfunction	The data in this column indicates if the patient has been diagnosed with severe left	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I0900_PVD_CD	VARCHAR2 (1)	N	I0900 Peripheral Vascular Disease (PVD) or Peripheral Arterial Disease (PAD)	This column indicates if a patient has been diagnosed with Peripheral Vascular Disease	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I1501_KDNY_5_CD	VARCHAR2 (1)	N	I1501 Chronic Kidney Disease, State 5	This column indicates if the patient has been diagnosed with Chronic Kidney Disease, Stage	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I1502_RNL_FAILR_CD	VARCHAR2 (1)	N	I1502 Acute Renal Failure	This column indicates if the patient has been diagnosed with Acute Renal Failure.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I2101_SEPSIS_CD	VARCHAR2 (1)	N	I2101 Septicemia, Sepsis, Systemic Inflammatory Response Syndrome/Shock	This column indicates if the patient has been diagnosed with Septicemia, Sepsis or Systemic	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I2600_CNS_INFCTN_CD	VARCHAR2 (1)	N	I2600 Central Nervous System Infections, Opportunistic Infections, Bone/Joint/Muscle Infections/Necrosis	This column indicates if the patient has been diagnosed with Central Nervous System	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I2900_DM_CD	VARCHAR2 (1)	N	I2900 Diabetes Mellitus (DM)	This column indicates if a patient has been diagnosed with Diabetes Mellitus (DM).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I4100_LWR_LIMB_AMPUTTN_CD	VARCHAR2 (1)	N	I4100 Major Lower Limb Amputation	This column indicates if the patient has been diagnosed with Major Lower Limb Amputation.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I4501_STRK_CD	VARCHAR2 (1)	N	I4501 Stroke	This column indicates if a patient has been diagnosed with a stroke.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I4801_DMNT_CD	VARCHAR2 (1)	N	I4801 Dementia	This column indicates if a patient has been diagnosed with dementia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I4900_HEMIPLG_CD	VARCHAR2 (1)	N	I4900 Hemiplegia or Hemiparesis	This column indicates if a patient has been diagnosed with Hemiplegia or Hemiparesis.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5000_PARAPLG_CD	VARCHAR2 (1)	N	I5000 Paraplegia	This column indicates if a patient has been diagnosed with Paraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5101_TETRAPLG_CD	VARCHAR2 (1)	N	I5101 Complete Tetraplegia	This column indicates if a patient has been diagnosed with Complete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5102_INCMPLT_TETRAPLG_CD	VARCHAR2 (1)	N	I5102 Incomplete Tetraplegia	This column indicates if a patient has been diagnosed with Incomplete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5110_SPNL_CORD_CD	VARCHAR2 (1)	N	I5110 Other Spinal Cord Disorder/Injury	This column indicates if a patient has been diagnosed with Other Spinal Cord	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5200_MS_CD	VARCHAR2 (1)	N	I5200 Multiple Sclerosis (MS)	This column indicates if a patient has been diagnosed with Multiple Sclerosis (MS).	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	I5250_HNTGTN_CD	VARCHAR2 (1)	N	I5250 Huntingtons Disease	This column indicates if a patient has been diagnosed with Huntington's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5300_PRKNSN_CD	VARCHAR2 (1)	N	I5300 Parkinsons Disease	This column indicates if a patient has been diagnosed with Parkinson's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5450_ALS_CD	VARCHAR2 (1)	N	I5450 Amyotrophic Lateral Sclerosis	This column indicates if a patient has been diagnosed with Amyotrophic Lateral Sclerosis	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5455_PROGRS_NRMSCLR_DEASE_CD	VARCHAR2 (1)	N	I5455 Other Progressive Neuromuscular Disease	The data in this column indicates if the patient has been diagnosed with other progressive	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5460_LKIN_STATE_CD	VARCHAR2 (1)	N	I5460 Locked-In State	This column indicates if a patient has been diagnosed with Locked-In State.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5470_SVR_BRN_DMG_CD	VARCHAR2 (1)	N	I5470 Severe Anoxic Brain Damage, Cerebral Edema, or Compression of Brain	This column indicates if a patient has been diagnosed with Severe Anoxic Brain Damage,	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5480_OTHR_SVR_NRLGCL_CD	VARCHAR2 (1)	N	I5480 Other Severe Neurological Injury, Disease or Dysfunction	The data in this column indicates if the patient has been diagnosed with other severe	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5600_MALNTRTN_CD	VARCHAR2 (1)	N	I5600 Malnutrition	This column indicates if a patient has been diagnosed with malnutrition.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_HSTRY_VW	I5601_CAL_MALNTRTN_CD	VARCHAR2 (1)	N	I5601 Malnutrition (Protein or Calorie)	This column indicates if a patient has been diagnosed with Malnutrition (protein or calorie).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I5602_RSK_MALNTRTN_CD	VARCHAR2 (1)	N	I5602 At Risk for Malnutrition	This column indicates if a patient has been diagnosed as At Risk for Malnutrition.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I7100_LUNG_TRNSPLNT_CD	VARCHAR2 (1)	N	I7100 Lung Transplant	The data in this column indicates if the patient has had a lung transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I7101_HRT_TRNSPLNT_CD	VARCHAR2 (1)	N	I7101 Heart Transplant	The data in this column indicates if the patient has had a heart transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I7102_LVR_TRNSPLNT_CD	VARCHAR2 (1)	N	I7102 Liver Transplant	The data in this column indicates if the patient has had a liver transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I7103_KDNY_TRNSPLNT_CD	VARCHAR2 (1)	N	I7103 Kidney Transplant	The data in this column indicates if the patient has had a kidney transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I7104_BONE_MRW_TRNSPLNT_CD	VARCHAR2 (1)	N	I7104 Bone Marrow Transplant	The data in this column indicates if the patient has had a bone marrow transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	I7900_NO_ACTV_DEASE_CD	VARCHAR2 (1)	N	I7900 No Active Disease	This column indicates that a patient has no other diagnoses.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	ITM_SET_VRSN_CD	VARCHAR2 (10)	N	Item Set Version Code	This value represents the version of the item set that was completed by the facility.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	J1800_FALL_LAST_ASMT_CD	VARCHAR2 (1)	N	J1800 Any Falls Since Admission	This column indicates if the patient has had any falls since admission.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	J1900A_FALL_NO_INJURY_CD	VARCHAR2 (1)	N	J1900A No Injury Fall	This column indicates the number of falls code without injury a patient has had since admission.	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_HSTRY_VW	J1900B_FALL_INJURY_CD	VARCHAR2 (1)	N	J1900B Injury Except Major Fall	This column indicates the number of falls code with injury (except major) a patient has had	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_HSTRY_VW	J1900C_FALL_MAJ_INJURY_CD	VARCHAR2 (1)	N	J1900C Major Injury Fall	This column indicates the number of falls code with major injury falls a patient has had since	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_HSTRY_VW	K0200A_HGT_NUM	VARCHAR2 (2)	N	K0200A Height	The data in this column contains the patient's height in inches.	
LTCH_ASMT_FED_HSTRY_VW	K0200B_WT_NUM	VARCHAR2 (3)	N	K0200B Weight	The data in this column contains the patient's weight in pounds.	
LTCH_ASMT_FED_HSTRY_VW	LTCH_ASMT_ID	NUMBER (22)	N	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ASMT_FED_HSTRY_VW	LTCH_CRCTN_STUS_CD	VARCHAR2 (1)	N	LTCH Correction Status Code	This code indicates the version of the assessment. A value of 'C' indicates this is the	LTCH_CRCTN_STUS
LTCH_ASMT_FED_HSTRY_VW	LTCH_ITM_SBST_CD	VARCHAR2 (3)	N	LTCH Item Subset Code	This code indicates the type of assessment that was submitted.	LTCH_ITM_SBST
LTCH_ASMT_FED_HSTRY_VW	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_ASMT_FED_HSTRY_VW	M0210_STG_1_HGHR_ULCR_CD	VARCHAR2 (1)	N	M0210 One or More Unhealed Pressure Ulcers/Injuries	The data in this column indicates if a patient has one or more unhealed pressure ulcers/injuries.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	M0300A_STG_1_ULCR_NUM	VARCHAR2 (1)	N	M0300A Number of Stage 1 Pressure Injuries	The data in this column indicates the number of Stage 1 pressure injuries present.	
LTCH_ASMT_FED_HSTRY_VW	M0300B1_STG_2_ULCR_NUM	VARCHAR2 (1)	N	M0300B1 Number of Stage 2 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 2 pressure ulcers.	
LTCH_ASMT_FED_HSTRY_VW	M0300B2_STG_2_ULCR_ADM_SN_NUM	VARCHAR2 (1)	N	M0300B2 Number of Stage 2 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 2 pressure ulcers that were present on	
LTCH_ASMT_FED_HSTRY_VW	M0300B3_STG_2_ULCR_OLD_DT	VARCHAR2 (8)	N	M0300B3 Date of Oldest Stage 2 Pressure Ulcer	The data in this column indicates the date of the oldest Stage 2 pressure ulcer.	
LTCH_ASMT_FED_HSTRY_VW	M0300C1_STG_3_ULCR_NUM	VARCHAR2 (1)	N	M0300C1 Number of Stage 3 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 3 pressure ulcers.	
LTCH_ASMT_FED_HSTRY_VW	M0300C2_STG_3_ULCR_ADM_SN_NUM	VARCHAR2 (1)	N	M0300C2 Number of Stage 3 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 3 pressure ulcers that were present on	

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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	M0300D1_STG_4_ULCR_NUM	VARCHAR2 (1)	N	M0300D1 Number of Stage 4 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 4 pressure ulcers.	
LTCH_ASMT_FED_HSTRY_VW	M0300D2_STG_4_ULCR_ADM_SN_NUM	VARCHAR2 (1)	N	M0300D2 Number of Stage 4 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 4 pressure ulcers that were present on Admission	
LTCH_ASMT_FED_HSTRY_VW	M0300E1_UNSTGBL_ULCR_D_RSNG_NUM	VARCHAR2 (1)	N	M0300E1 Number of Current Unstageable Pressure Ulcers/Injuries Due to Non-removable Dressing or Device	This indicates the number of pressure ulcers/injuries that are unstageable due to the	
LTCH_ASMT_FED_HSTRY_VW	M0300E2_U_ULCR_DRNG_A_DMSN_NUM	VARCHAR2 (1)	N	M0300E2 Number of Unstageable Pressure Ulcers/Injuries With a Non-removable Dressing That Were Present Upon Admission	The data in this column indicates the number of unstageable pressure ulcers/injuries with a non-	
LTCH_ASMT_FED_HSTRY_VW	M0300F1_UNSTGBL_ULCR_E_SC_NUM	VARCHAR2 (1)	N	M0300F1 Number of Unstageable Pressure Ulcers With Slough or Eschar	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_FED_HSTRY_VW	M0300F2_U_ULCR_ESC_ADM_SN_NUM	VARCHAR2 (1)	N	M0300F2 Number of Unstageable Pressure Ulcers With Slough or Eschar on Admission	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_FED_HSTRY_VW	M0300G1_UNSTGBL_ULCR_D_EEP_NUM	VARCHAR2 (1)	N	M0300G1 Number of Current Unstageable Pressure Injuries Presenting as Deep Tissue Injury	This indicates the current number of unstageable pressure injuries presenting as deep tissue	
LTCH_ASMT_FED_HSTRY_VW	M0300G2_U_ULCR_DEEP_AD_MSN_NUM	VARCHAR2 (1)	N	M0300G2 Number of Unstageable Pressure Injuries That Were Present Upon Admission	This indicates the number of the unstageable pressure injuries presenting as deep tissue injury	
LTCH_ASMT_FED_HSTRY_VW	M0610A_STG_3_4_ULCR_LN_GTH_NUM	VARCHAR2 (4)	N	M0610A Pressure Ulcer Length	The data in this column contains the length of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_HSTRY_VW	M0610B_STG_3_4_ULCR_WD_TH_NUM	VARCHAR2 (4)	N	M0610B Pressure Ulcer Width	The data in this column contains the width of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_HSTRY_VW	M0610C_STG_3_4_ULCR_DPT_H_NUM	VARCHAR2 (4)	N	M0610C Pressure Ulcer Depth	The data in this column contains the depth of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_HSTRY_VW	M0700_ULCR_TISUE_TYPE_CD	VARCHAR2 (1)	N	M0700 Most Severe Pressure Ulcer Tissue Type	The data in this column indicates the most severe type of tissue present in any pressure	LTCH_ULCR_TISUE_TYPE_CD
LTCH_ASMT_FED_HSTRY_VW	M0800A_WRSNG_STG_2_ULCR_NUM	VARCHAR2 (1)	N	M0800A Worsening Pressure Ulcer Since Prior Assessment Number: Stage 2	The data in this column indicates the number of current Stage 2 pressure ulcers that were not	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	M0800B_WRSNG_STG_3_ULC_R_NUM	VARCHAR2 (1)	N	M0800B Worsening Pressure Ulcer Since Prior Assessment Number: Stage 3	The data in this column indicates the number of current Stage 3 pressure ulcers that were not	
LTCH_ASMT_FED_HSTRY_VW	M0800C_WRSNG_STG_4_ULC_R_NUM	VARCHAR2 (1)	N	M0800C Worsening Pressure Ulcer Since Prior Assessment Number: Stage 4	The data in this column indicates the number of current Stage 4 pressure ulcers that were not	
LTCH_ASMT_FED_HSTRY_VW	M0800D_WRSNG_DRNG_NU_M	VARCHAR2 (1)	N	M0800D Worsening Unstageable Non-removable dressing Ulcer Number	The data in this column indicates the number of current Unstageable Non-removable dressing	
LTCH_ASMT_FED_HSTRY_VW	M0800E_WRSNG_ESC_NUM	VARCHAR2 (1)	N	M0800E Worsening Unstageable-Slough an/or eschar Ulcer Number	The data in this column indicates the number of current Unstageable Slough and or eschar	
LTCH_ASMT_FED_HSTRY_VW	M0800F_WRSNG_DEEP_NUM	VARCHAR2 (1)	N	M0800F Worsening Unstageable-Deep tissue injury Ulcer Number	The data in this column indicates the number of current Unstageable Deep Tissue injury pressure	
LTCH_ASMT_FED_HSTRY_VW	N2001_DRUG_RGMN_RVW_CD	VARCHAR2 (1)	N	N2001 Drug Regimen Review	The data in this column indicates whether a complete drug regimen review identified	LTCH_DRUG_RGMN_RVW_CD
LTCH_ASMT_FED_HSTRY_VW	N2003_PHYSN_MDCTN_FLW_P_CD	VARCHAR2 (1)	N	N2003 Medication Follow-up	The data in this column indicates whether the facility contacted the physician (or physician-	LTCH_YES_NO_NO_INFO_BLA_NK
LTCH_ASMT_FED_HSTRY_VW	N2005_PHYSN_MDCTN_INTR_VTN_CD	VARCHAR2 (1)	N	N2005 Medication Intervention	The data in this column indicates whether the facility contacted and completed the physician	LTCH_DRUG_YES_NO_CD
LTCH_ASMT_FED_HSTRY_VW	O0100F3_VNTLTR_WNNG_CD	VARCHAR2 (1)	N	O0100F3 Special Treatments, Procedures, Programs-Respiratory: Ventilator Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: weaning at the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	O0100F4_VNTLTR_CD	VARCHAR2 (1)	N	O0100F4 Special Treatments, Procedures, Programs-Respiratory: Ventilator Non-Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: non-weaning at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	O0100G_CPAP_CD	VARCHAR2 (1)	N	O0100G Special Treatments, Procedures, Programs-Respiratory: Non-Invasive Ventilator (BIPAP, CPAP)	This column indicates that the patient was on a non-invasive ventilator (e.g., BIPAP, CPAP) at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	O0100H2A_VASOACTV_MDC_TN_CD	VARCHAR2 (1)	N	O0100H2A Vasoactive Medications	The data in this column indicates whether the patient received intravenous vasoactive	LTCH_CHKLIST_NO_INFO_BLA_NK
LTCH_ASMT_FED_HSTRY_VW	O0100H_IV_MDCTN_CD	VARCHAR2 (1)	N	O0100H IV Medications	The data in this column indicates whether IV medication was required.	LTCH_CHKLIST_NO_INFO_BLA_NK
LTCH_ASMT_FED_HSTRY_VW	O0100J_DLYS_CD	VARCHAR2 (1)	N	O0100J Special Treatments, Procedures, Programs-Other Treatments: Dialysis	This column indicates that the patient's treatment plan included dialysis at the time of admission.	LTCH_YES_NO_NOT_ASSESS



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	O0100N_TOT_PRNTRL_CD	VARCHAR2 (1)	N	O0100N Special Treatments, Procedures, Programs-Other Treatments: Total Parenteral Nutrition	This column indicates that the patient's treatment plan included Total Parenteral Nutrition at the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	O0100Z_NO_TRTMT_CD	VARCHAR2 (1)	N	O0100Z Special Treatments, Procedures, Programs-Other Treatments: No Other Treatment	This column indicates that the patient was not receiving any special treatments, procedures or	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	O0150A_INSVV_MCHNCL_SPRT_CD	VARCHAR2 (1)	N	O0150A SBT: Invasive Mechanical Ventilation Support Admission	The data in this column indicates whether the patient was receiving invasive mechanical	LTCH_INSVV_MCHNCL_SPRT_CD
LTCH_ASMT_FED_HSTRY_VW	O0150B_ASSESS_RDNS_SBT_CD	VARCHAR2 (1)	N	O0150B SBT: Assessed for SBT Readiness by Day 2 of LTCH Stay	The data in this column indicates whether the patient was assessed for readiness for	LTCH_YES_NO_NO_INFO_BLA_NK
LTCH_ASMT_FED_HSTRY_VW	O0150C_MDCLY_READY_SBT_CD	VARCHAR2 (1)	N	O0150C SBT: Deemed Medically Ready by Day 2 of LTCH Stay	The data in this column indicates whether the patient was deemed medically ready for	LTCH_YES_NO_NO_INFO_BLA_NK
LTCH_ASMT_FED_HSTRY_VW	O0150D_DCMTN_UNREADY_SBT_CD	VARCHAR2 (1)	N	O0150D SBT: Documentation of Reason(s) - Patient Unready	The data in this column indicates whether there is documentation of reason(s) in the patient's	LTCH_YES_NO_NO_INFO_BLA_NK
LTCH_ASMT_FED_HSTRY_VW	O0150E_SBT_PRFMD_CD	VARCHAR2 (1)	N	O0150E SBT Performed by Day 2	The data in this column indicates whether Spontaneous Breathing Trial (SBT) was	LTCH_YES_NO_NO_INFO_BLA_NK
LTCH_ASMT_FED_HSTRY_VW	O0200A_LBRTN_STUS_CD	VARCHAR2 (1)	N	O0200A Invasive Mechanical Ventilator: Liberation Status at Discharge	The data in this column indicates whether the patient was fully liberated from the invasive	LTCH_LBRTN_STUS_CD
LTCH_ASMT_FED_HSTRY_VW	O0250A_INFLNZ_RCVD_CD	VARCHAR2 (1)	N	O0250A Influenza Received Code	The data in this column indicates whether the patient received the influenza vaccination.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_HSTRY_VW	O0250B_INFLNZ_RCVD_DT	VARCHAR2 (8)	N	O0250B Influenza Received Date	The data in this column indicates the date that the influenza vaccination was received.	
LTCH_ASMT_FED_HSTRY_VW	O0250C_RSN_INFLNZ_NOT_RCVD_CD	VARCHAR2 (1)	N	O0250C Reason Influenza Not Received Code	The data in this column indicates the reason that the patient did not receive the influenza vaccine.	LTCH_RSN_INFLNZ_NOT_RCVD_CD
LTCH_ASMT_FED_HSTRY_VW	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ASMT_FED_HSTRY_VW	PRCS_D_TS	DATE (8)	N	Processed Timestamp	This is the date/time that the submission file processing completed and when the	
LTCH_ASMT_FED_HSTRY_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ASMT_FED_HSTRY_VW	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely identifies the patient. The combination	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_HSTRY_VW	RSDNT_MATCH_CRTIA_ID	NUMBER (2.0)	N	Resident Match Criteria ID	This value indicates which of the resident match criteria was assigned based on the patient	
LTCH_ASMT_FED_HSTRY_VW	SFTWR_PROD_NAME	VARCHAR2 (50)	N	Software Product Name	This is the name of the software that was used to create the LTCH data submission file.	
LTCH_ASMT_FED_HSTRY_VW	SFTWR_PROD_VRSN_CD	VARCHAR2 (20)	N	Software Product Version Code	This is the version number of the software that was used to create the LTCH data submission	
LTCH_ASMT_FED_HSTRY_VW	SFTWR_VNDR_ID	VARCHAR2 (9)	N	Software Vendor ID	This is the software vendor's Federal Employer Tax (EIN) ID.	
LTCH_ASMT_FED_HSTRY_VW	SPEC_VRSN_CD	VARCHAR2 (10)	N	Specification Version Code	This value represents the version of the data submission specifications that were used to	
LTCH_ASMT_FED_HSTRY_VW	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ASMT_FED_HSTRY_VW	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date that the file was received by the system.	
LTCH_ASMT_FED_HSTRY_VW	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	
LTCH_ASMT_FED_HSTRY_VW	UPDT_TS	DATE (8)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_ASMT_FED_HSTRY_VW	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_ASMT_FED_HSTRY_VW	Z0500B_RN_SGN_CMPLT_DT	VARCHAR2 (8)	N	Z0500B LTCH CARE Data Set Completion Date	This column contains the LTCH CARE data set completion date.	
LTCH_ASMT_FED_VW	A0050_TRANS_TYPE_CD	VARCHAR2 (1)	N	A0050 Type of Record	The data in this column indicates the type of record that is being submitted (new,	LTCH_TRANS_TYPE_CD
LTCH_ASMT_FED_VW	A0055_CRCTN_NUM	NUMBER (2.0)	N	A0055 Correction Number	The data in this column indicates the number of correction requests to modify/inactivate the	
LTCH_ASMT_FED_VW	A0100A_NPI_NUM	VARCHAR2 (10)	N	A0100A National Provider Identifier	This column contains the provider's National Provider Identifier number.	
LTCH_ASMT_FED_VW	A0100B_CMS_CRTFCTN_NUM	VARCHAR2 (12)	N	A0100B CMS Certification Number (CCN)	This is the CMS Certification Number (CCN) of the provider submitting the record.	
LTCH_ASMT_FED_VW	A0100C_STATE_PRVDR_NUM	VARCHAR2 (15)	N	A0100C State Provider Number	This is the State Provider Number of the provider submitting the record.	
LTCH_ASMT_FED_VW	A0200_PRVDR_TYPE_CD	VARCHAR2 (1)	N	A0200 Type of Provider	This column indicates that this record is submitted by a Long-term Care Hospital. This	LTCH_PRVDR_TYPE_CD
LTCH_ASMT_FED_VW	A0210_ASMT_RFRNC_DT	DATE (8)	N	A0210 Assessment Reference Date	This column contains the end date of the observation period of the assessment.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	A0220_ADMSN_DT	DATE (8)	N	A0220 Admission Date	This column indicates the patient's date of admission into the hospital.	
LTCH_ASMT_FED_VW	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for assessment of this record.	LTCH_RSN_ASMT_CD
LTCH_ASMT_FED_VW	A0270_DSCHRG_DT	VARCHAR2 (8)	N	A0270 Discharge Date	This column indicates the patient's discharge date from the hospital.	
LTCH_ASMT_FED_VW	A0500A_FIRST_NAME	VARCHAR2 (12)	N	A0500A First Name	This column contains the first name of the patient.	
LTCH_ASMT_FED_VW	A0500B_MDL_INITL_TXT	VARCHAR2 (1)	N	A0500B Middle Initial	This column contains the middle initial of the patient.	
LTCH_ASMT_FED_VW	A0500C_LAST_NAME	VARCHAR2 (18)	N	A0500C Last Name	This column contains the last name of the patient.	
LTCH_ASMT_FED_VW	A0500D_SFX_TXT	VARCHAR2 (3)	N	A0500D Suffix	This column contains the suffix of the patient.	
LTCH_ASMT_FED_VW	A0600A_SSN_NUM	VARCHAR2 (9)	N	A0600A Social Security Number	This column contains the Social Security Number of the patient.	
LTCH_ASMT_FED_VW	A0600B_MDCR_NUM	VARCHAR2 (12)	N	A0600B Medicare Number	This column contains the patient's Medicare number.	
LTCH_ASMT_FED_VW	A0700_MDCD_NUM	VARCHAR2 (14)	N	A0700 Medicaid Number	This column contains the patient's Medicaid number.	
LTCH_ASMT_FED_VW	A0800_GNDR_CD	VARCHAR2 (1)	N	A0800 Gender	This data in this column indicates the patient's gender.	LTCH_GNDR_CD
LTCH_ASMT_FED_VW	A0900_BIRTH_DT	DATE (8)	N	A0900 Birth Date	This column contains the patient's birth date.	
LTCH_ASMT_FED_VW	A1000A_AMRCN_INDN_AK_NTV_CD	VARCHAR2 (1)	N	A1000A Race/Ethnicity: American Indian or Alaskan Native	The data in this column indicates if the patient's race is American Indian/Alaskan Native.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_VW	A1000B_ASN_CD	VARCHAR2 (1)	N	A1000B Race/Ethnicity: Asian	The data in this column indicates if the patient's race is Asian.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_VW	A1000C_AFRCN_AMRCN_CD	VARCHAR2 (1)	N	A1000C Race/Ethnicity: Black or African American	The data in this column indicates if the patient's race is Black or African American.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_VW	A1000D_HSPNC_CD	VARCHAR2 (1)	N	A1000D Race/Ethnicity: Hispanic or Latino	The data in this column indicates if the patient's ethnicity is Hispanic.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_VW	A1000E_NTV_HI_PCFC_ISLN_DR_CD	VARCHAR2 (1)	N	A1000E Race/Ethnicity: Native Hawaiian or Other Pacific Islander	The data in this column indicates if the patient's race is Native Hawaiian/Pacific Islander.	LTCH_CHKLIST_NOT_ASSESS_VS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	A1000F_WHT_CD	VARCHAR2 (1)	N	A1000F Race/Ethnicity: White	This column indicates if the patient's race is White.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_VW	A1050_HIGHEST_EDCTN_CMP LT_CD	VARCHAR2 (1)	N	A1050 Highest Education Completed	The data in this column indicates the highest level of education achieved by the patient.	LTCH_EDCTN_CMPLT_CD
LTCH_ASMT_FED_VW	A1100A_NEED_INTRPTR_CD	VARCHAR2 (1)	N	A1100A Language: Need Interpreter	The data in this column indicates whether the patient needs or wants an interpreter to	LTCH_YES_NO_UNABLE_DTRM
LTCH_ASMT_FED_VW	A1100B_INTRPTR_LANG_TX T	VARCHAR2 (15)	N	A1100B Preferred Language	The data in this column indicates the patient's preferred language.	
LTCH_ASMT_FED_VW	A1200_MRTL_STUS_CD	VARCHAR2 (1)	N	A1200 Marital Status	The data in this column indicates the patient's marital status.	LTCH_MRTL_STUS_CD
LTCH_ASMT_FED_VW	A1300D_LFTM_OCPTN_TXT	VARCHAR2 (23)	N	A1300D Lifetime Occupation	The data in this column indicates the patient's lifetime occupation.	
LTCH_ASMT_FED_VW	A1400A_MDCR_FFS_PYR_CD	VARCHAR2 (1)	N	A1400A Payer Information: Medicare (Traditional Fee-for-Service)	The data in this column indicates whether the payer source for the patient's stay is Medicare	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400B_MDCR_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400B Payer Information: Medicare (Other Payer)	The data in this column indicates whether the payer source for the patient's stay is Medicare,	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400C_MDCD_FFS_PYR_CD	VARCHAR2 (1)	N	A1400C Payer Information: Medicaid (Traditional Fee-for-Service Payer Code)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400D_MDCD_MC_PYR_CD	VARCHAR2 (1)	N	A1400D Payer Information: Medicaid (Managed Care)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400E_WC_PYR_CD	VARCHAR2 (1)	N	A1400E Payer Information: Workers Compensation	The data in this column indicates whether the payer source for the patient's stay is Workers'	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400F_TITLE_PGM_PYR_CD	VARCHAR2 (1)	N	A1400F Payer Information: Title Program	The data in this column indicates whether the payer source for the patient's stay is a Title	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400G_OTHR_GOV_T_PYR_CD	VARCHAR2 (1)	N	A1400G Payer Information: Other Government	The data in this column indicates whether the payer source for the patient's stay is an Other	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400H_PRVT_INS_PYR_CD	VARCHAR2 (1)	N	A1400H Payer Information: Private Insurance/Medigap	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400I_PRVT_MC_PYR_CD	VARCHAR2 (1)	N	A1400I Payer Information: Private Managed Care	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400J_SELF_PYR_CD	VARCHAR2 (1)	N	A1400J Payer Information: Self-Pay	The data in this column indicates whether the payer source for the patient's stay is self-pay.	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400K_NO_PYR_CD	VARCHAR2 (1)	N	A1400K Payer Information: No Payer Source	The data in this column indicates the patient does not have a payer source.	LTCH_CHKLIST_VS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	A1400X_UNK_PYR_CD	VARCHAR2 (1)	N	A1400X Payer Information: Unknown	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1400Y_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400Y Payer Information: Other	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_FED_VW	A1800_ADMTD_FROM_CD	VARCHAR2 (2)	N	A1800 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_CD
LTCH_ASMT_FED_VW	A1802_ADMTD_FROM_LCTN_CD	VARCHAR2 (2)	N	A1802 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_VS_CD
LTCH_ASMT_FED_VW	A1810A_LAST_2_MO_IPPS_CD	VARCHAR2 (1)	N	A1810A Short-Stay Acute Hospital (IPPS)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810B_LAST_2_MO_CMNTY_CD	VARCHAR2 (1)	N	A1810B Community Residential Setting	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810C_LAST_2_MO_LTC_CD	VARCHAR2 (1)	N	A1810C Long-term Care Facility	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810D_LAST_2_MO_SNF_CD	VARCHAR2 (1)	N	A1810D Skilled Nursing Facility (SNF)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810E_LAST_2_MO_HOSP_ER_CD	VARCHAR2 (1)	N	A1810E Hospital Emergency Department	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810F_LAST_2_MO_LTCH_CD	VARCHAR2 (1)	N	A1810F Long-term Care Hospital (LTCH)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810G_LAST_2_MO_IRF_CD	VARCHAR2 (1)	N	A1810G Inpatient Rehabilitation Facility or Unit (IRF)	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810H_LAST_2_MO_HHA_CD	VARCHAR2 (1)	N	A1810H Home Health Agency (HHA)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810I_LAST_2_MO_HOSPC_CD	VARCHAR2 (1)	N	A1810I Hospice	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810J_LAST_2_MO_OPS_CD	VARCHAR2 (1)	N	A1810J Outpatient Services	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810K_LAST_2_MO_PSYCH_CD	VARCHAR2 (1)	N	A1810K Psychiatric Hospital or Unit	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810L_LAST_2_MO_ID_DD_CD	VARCHAR2 (1)	N	A1810L ID/DD Facility	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1810Z_NO_LAST_2_MO_CD	VARCHAR2 (1)	N	A1810Z None of The Above	The data in this column indicates the patient received none of the medical services identified	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	A1820_PRVS_MDCL_PRMRY_DGNS_CD	VARCHAR2 (8)	N	A1820 Previous Primary Diagnosis Code	This indicates the primary diagnosis (ICD) for the patient from the previous medical setting in	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	A1955_DSCHRG_DLAY_CD	VARCHAR2 (1)	N	A1955 Discharge Delay	The data in this column indicates if a patient's discharge was delayed for at least 24 hours.	LTCH_YES_NO
LTCH_ASMT_FED_VW	A1960_DSCHRG_DLAY_RSN_CD	VARCHAR2 (2)	N	A1960 Reason for Discharge Delay	The data in this column indicates the reason the patient's discharge was delayed.	LTCH_DSCHRG_DLAY_CD
LTCH_ASMT_FED_VW	A1970_DSCHRG_RTN_STUS_CD	VARCHAR2 (1)	N	A1970 Discharge Return Status	The data in this column indicates the patient's discharge return status.	LTCH_DSCHRG_RTN_CD
LTCH_ASMT_FED_VW	A2100_DSCHRG_LCTN_CD	VARCHAR2 (2)	N	A2100 Discharge Location	The data in this column indicates the location to where patient was discharged. This field was	LTCH_DSCHRG_LCTN_CD
LTCH_ASMT_FED_VW	A2110_DSCHRG_TO_LCTN_CD	VARCHAR2 (2)	N	A2110 Discharge Location	The data in this column indicates the location to where patient was discharged. Prior to April	LTCH_DSCHRG_LCTN_VS_CD
LTCH_ASMT_FED_VW	A2500_PGM_INTRPTN_CD	VARCHAR2 (1)	N	A2500 Program Interruption(s)	The data in this column indicates whether the patient experienced a program interruption	LTCH_YES_NO_VS
LTCH_ASMT_FED_VW	A2510_PGM_INTRPTN_NUM	VARCHAR2 (2)	N	A2510 Number Program Interruption(s)	The data in this column indicates the number of program interruptions during their stay.	
LTCH_ASMT_FED_VW	A2520A1_INTRPTN_RCNT_RT_DT	VARCHAR2 (8)	N	A2520A1 Recent Interruption Start Date	The data in this column indicates the most recent interruption start date.	
LTCH_ASMT_FED_VW	A2520A2_INTRPTN_RCNT_END_DT	VARCHAR2 (8)	N	A2520A2 Recent Interruption End Date	The data in this column indicates the most recent interruption end date.	
LTCH_ASMT_FED_VW	A2520B1_INTRPTN_2ND_STRT_DT	VARCHAR2 (8)	N	A2520B1 Second Most Recent Interruption Start Date	The data in this column indicates the second most recent interruption start date.	
LTCH_ASMT_FED_VW	A2520B2_INTRPTN_2ND_END_DT	VARCHAR2 (8)	N	A2520B2 Second Most Recent Interruption End Date	The data in this column indicates the second most recent interruption end date.	
LTCH_ASMT_FED_VW	A2520C1_INTRPTN_3RD_STRT_DT	VARCHAR2 (8)	N	A2520C1 Third Most Recent Interruption Start Date	The data in this column indicates the third most recent interruption start date.	
LTCH_ASMT_FED_VW	A2520C2_INTRPTN_3RD_END_DT	VARCHAR2 (8)	N	A2520C2 Third Most Recent Interruption End Date	The data in this column indicates the third most recent interruption end date.	
LTCH_ASMT_FED_VW	A2525A1_PGM_INT_1ST_STRT_DT	VARCHAR2 (8)	N	A2525A1 Program Interruption Date - First Interruption Start Date	The data in this column represents the first program interruption start date.	
LTCH_ASMT_FED_VW	A2525A2_PGM_INT_1ST_END_DT	VARCHAR2 (8)	N	A2525A2 Program Interruption Date - First Interruption End Date	The data in this column represents the first program interruption end date.	
LTCH_ASMT_FED_VW	A2525B1_PGM_INT_2ND_STRT_DT	VARCHAR2 (8)	N	A2525B1 Program Interruption Date - Second Start Date	The data in this column represents the second program interruption start date.	
LTCH_ASMT_FED_VW	A2525B2_PGM_INT_2ND_END_DT	VARCHAR2 (8)	N	A2525B2 Program Interruption Date - Second Interruption End Date	The data in this column represents the second program interruption end date.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	A2525C1_PGM_INT_3RD_STR T_DT	VARCHAR2 (8)	N	A2525C1 Program Interruption Date - Third Start Date	The data in this column represents the third program interruption start date.	
LTCH_ASMT_FED_VW	A2525C2_PGM_INT_3RD_EN D_DT	VARCHAR2 (8)	N	A2525C2 Program Interruption Date - Third End Date	The data in this column represents the third program interruption end date.	
LTCH_ASMT_FED_VW	A2525D1_PGM_INT_4TH_STR T_DT	VARCHAR2 (8)	N	A2525D1 Program Interruption Date - Fourth Start Date	The data in this column represents the fourth program interruption start date.	
LTCH_ASMT_FED_VW	A2525D2_PGM_INT_4TH_EN D_DT	VARCHAR2 (8)	N	A2525D2 Program Interruption Date - Fourth End Date	The data in this column represents the fourth program interruption end date.	
LTCH_ASMT_FED_VW	A2525E1_PGM_INT_5TH_STR T_DT	VARCHAR2 (8)	N	A2525E1 Program Interruption Date - Fifth Start Date	The data in this column represents the fifth program interruption start date.	
LTCH_ASMT_FED_VW	A2525E2_PGM_INT_5TH_END _DT	VARCHAR2 (8)	N	A2525E2 Program Interruption Date - Fifth End Date	The data in this column represents the fifth program interruption end date.	
LTCH_ASMT_FED_VW	B0100_CMTS_CD	VARCHAR2 (1)	N	B0100 Comatose	The data in this column indicates whether or not the patient is comatose.	LTCH_YES_NO_NOT_ASSESS_ VS
LTCH_ASMT_FED_VW	BB0700_EXPRSN_IDEA_WAN T_CD	VARCHAR2 (1)	N	BB0700 Expression of Ideas and Wants	The data in this column represents the patient's independence with expression of ideas and	LTCH_EXPRSN_WANT_CD
LTCH_ASMT_FED_VW	BB0800_UNDRST_OTHR_CD	VARCHAR2 (1)	N	BB0800 Understanding Verbal/Non-Verbal Content	The data in this column indicates the patient's ability to understand verbal/non-verbal content,	LTCH_UNDRST_OTHR_CD
LTCH_ASMT_FED_VW	C1610A_ACUTE_ONST_CD	VARCHAR2 (1)	N	C1610A Acute Onset	The data in this column indicates if the patient experienced an acute change in mental status	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_VW	C1610B_BHVR_FLCTATE_CD	VARCHAR2 (1)	N	C1610B Behavior Fluctuate	The data in this column indicates if the patient's abnormal behavior fluctuated during the day	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_VW	C1610C_INATTNTN_CD	VARCHAR2 (1)	N	C1610C Inattention	The data in this column indicates whether or not the patient had difficulty focusing attention	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_VW	C1610D_DISORGNZ_THNKG_ CD	VARCHAR2 (1)	N	C1610D Disorganized Thinking	The data in this column indicates whether or not the patient experienced disorganized thinking	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_VW	C1610E1_ALERT_CONSCS_C D	VARCHAR2 (1)	N	C1610E1 Alert Conscious	The data in this column indicates if the patient's level of consciousness was alert (normal) during	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_VW	C1610E2_ALTRD_CONSCS_C D	VARCHAR2 (1)	N	C1610E2 Altered Consciousness	The data in this column indicates if the patient's level of consciousness was abnormal (Vigilant	LTCH_YES_NO_NOT_ASSESS_ BLANK
LTCH_ASMT_FED_VW	CRCTN_NUM	NUMBER (2,0)	N	Correction Number	This is the number of the assessment. New records have a correction number of '00'	
LTCH_ASMT_FED_VW	CREAT_TS	DATE (8)	N	Create Timestamp	This is the date and time that the record was added to the database.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_ASMT_FED_VW	C_BIRTH_DT_SBMT_CD	VARCHAR2 (1)	N	Calculated Birth Date Submit Code	This column indicates the type of partial birth date that was submitted (year only or month and	LTCH_BIRTH_DT_SBMT_CD
LTCH_ASMT_FED_VW	C_CCN_NUM	VARCHAR2 (12)	N	Calculated CMS Certification Number (CCN)	This column contains the system calculated CMS Certification Number (CCN).	
LTCH_ASMT_FED_VW	C_HICN_MBI_IND	VARCHAR2 (1)	N	Calculated HICN/MBI Indicator	This value is populated by the ASAP system during file processing and indicates the type of	
LTCH_ASMT_FED_VW	C_RSDNT_AGE_NUM	NUMBER (3)	N	Calculated Resident Age Number	This column contains the system calculated resident age number.	
LTCH_ASMT_FED_VW	C_SSNRI_TRNSLTN_HICN_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation HICN Text	This is the patient's Health Insurance Claim Number [HICN] or Railroad Retirement Board	
LTCH_ASMT_FED_VW	C_SSNRI_TRNSLTN_MBI_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation MBI Text	This is the patient's Medicare Beneficiary Identifier [MBI] that is returned from the Social	
LTCH_ASMT_FED_VW	GG0100B_INDR_MBLTY_CD	VARCHAR2 (1)	N	GG0100B Indoor Mobility	The data in this column indicates the patient's need for assistance with walking from room to	LTCH_MBLTY_CD
LTCH_ASMT_FED_VW	GG0110A_MNL_WLCHR_CD	VARCHAR2 (1)	N	GG0110A Manual Wheelchair	The data in this column indicates if the patient used a manual wheelchair prior to the current	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	GG0110B_MTR_WLCHR_CD	VARCHAR2 (1)	N	GG0110B Motorized Wheelchair and/or Scooter	The data in this column indicates if the patient used a motorized wheelchair and/or scooter prior	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	GG0110C_MCHNCL_LFT_CD	VARCHAR2 (1)	N	GG0110C Mechanical Lift	The data in this column indicates if the patient used a mechanical lift prior to the current illness,	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	GG0110Z_NO_MBLTY_CD	VARCHAR2 (1)	N	GG0110Z No Mobility	The data in this column indicates the patient did not previously use any type of mobility device	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	GG0130A1_EATG_SELF_ADM SN_CD	VARCHAR2 (2)	N	GG0130A1 Eating: Admission	This indicates the level of assistance required for eating during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0130A2_EATG_SELF_GOAL_CD	VARCHAR2 (2)	N	GG0130A2 Eating: Goal	This indicates the patient's goal for eating independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0130A3_EATG_SELF_DSCRG_CD	VARCHAR2 (2)	N	GG0130A3 Eating: Discharge	This indicates the level of assistance required for eating at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0130B1_ORAL_HYGNE_ADM SN_CD	VARCHAR2 (2)	N	GG0130B1 Oral Hygiene: Admission	This indicates the level of assistance required for oral hygiene during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0130B2_ORAL_HYGNE_GOAL_CD	VARCHAR2 (2)	N	GG0130B2 Oral Hygiene: Goal	This indicates the patient's goal for oral hygiene independence.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0130B3_ORAL_HYGNE_DSCHR CD	VARCHAR2 (2)	N	GG0130B3 Oral Hygiene: Discharge	This indicates the level of assistance required with oral hygiene at the time of discharge.	LTCH_ASTNC_LVL_CD



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Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	GG0130C1_TOILT_HYGNE_A DMSN_CD	VARCHAR2 (2)	N	GG0130C1 Toileting Hygiene: Admission	This indicates the level of assistance required for toileting during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0130C2_TOILT_HYGNE_G OAL_CD	VARCHAR2 (2)	N	GG0130C2 Toileting Hygiene: Goal	This indicates the patient's goal for toileting hygiene independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0130C3_TOILT_HYGNE_D SCHRG_CD	VARCHAR2 (2)	N	GG0130C3 Toileting Hygiene: Discharge	This indicates the level of assistance required for toileting at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0130D1_WASH_UPR_ADM SN_CD	VARCHAR2 (2)	N	GG0130D1 Wash Upper Body: Admission	This indicates the level of assistance required to wash upper body during the admission time	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0130D2_WASH_UPR_GOAL L_CD	VARCHAR2 (2)	N	GG0130D2 Wash Upper Body: Goal	This indicates the patient's goal for wash upper body independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0130D3_WASH_UPR_DSC HRG_CD	VARCHAR2 (2)	N	GG0130D3 Wash Upper Body: Discharge	This indicates the level of assistance required to wash upper body at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0160A_ROLL_LEFT_RGHT _CD	VARCHAR2 (2)	N	GG0160A Roll Left and Right	The data in this column indicates the patient's ability to roll from lying on back to the left and	LTCH_ASTNC_LVL_VS_CD
LTCH_ASMT_FED_VW	GG0160B_SIT_LYNG_CD	VARCHAR2 (2)	N	GG0160B Sit to Lying	The data in this column indicates the patient's ability to go from a sitting position on the side of	LTCH_ASTNC_LVL_VS_CD
LTCH_ASMT_FED_VW	GG0160C_LYNG_STTG_BED CD	VARCHAR2 (2)	N	GG0160C Lying to Sitting on Side of Bed	The data in this column indicates the patient's ability to safely go from lying on the bed to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170A1_ROLL_ADMSN_C D	VARCHAR2 (2)	N	GG0170A1 Roll Left and Right: Admission	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170A2_ROLL_GOAL_CD	VARCHAR2 (2)	N	GG0170A2 Roll Left and Right: Goal	The data in this column indicates the patient's level of assistance goal for roll from lying on	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0170A3_ROLL_DSCHRG_C D	VARCHAR2 (2)	N	GG0170A3 Roll Left and Right: Discharge	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170B1_SIT_ADMSN_CD	VARCHAR2 (2)	N	GG0170B1 Sit to Lying: Admission	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170B2_SIT_GOAL_CD	VARCHAR2 (2)	N	GG0170B2 Sit to Lying: Goal	The data in this column indicates the patient's level of assistance goal for going from a sitting	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0170B3_SIT_DSCHRG_CD	VARCHAR2 (2)	N	GG0170B3 Sit to Lying: Discharge	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170C1_LYNG_ADMSN_C D	VARCHAR2 (2)	N	GG0170C1 Lying to Sitting on Side of Bed: Admission	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170C2_LYNG_GOAL_CD	VARCHAR2 (2)	N	GG0170C2 Lying to Sitting on Side of Bed: Goal	The data in this column indicates the patient's level of assistance goal for going from safely	LTCH_ASTNC_LVL_GOAL_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	GG0170C3_LYNG_DSCHRG_CD	VARCHAR2 (2)	N	GG0170C3 Lying to Sitting on Side of Bed: Discharge	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170D1_STAND_ADMSN_CD	VARCHAR2 (2)	N	GG0170D1 Sit to Stand: Admission	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170D2_STAND_GOAL_CD	VARCHAR2 (2)	N	GG0170D2 Sit to Stand: Goal	The data in this column indicates the patient's level of assistance goal to safely come to a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0170D3_STAND_DSCHRG_CD	VARCHAR2 (2)	N	GG0170D3 Sit to Stand: Discharge	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170E1_CHR_TRNSF_ADM_SN_CD	VARCHAR2 (2)	N	GG0170E1 Chair/Bed Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170E2_CHR_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170E2 Chair/Bed Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely transfer to and	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0170E3_CHR_TRNSF_DSCRG_CD	VARCHAR2 (2)	N	GG0170E3 Chair/Bed Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170F1_TOILT_TRNSF_ADM_SN_CD	VARCHAR2 (2)	N	GG0170F1 Toilet Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170F2_TOILT_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170F2 Toilet Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely get on and off a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_FED_VW	GG0170F3_TOILT_TRNSF_DSCRG_CD	VARCHAR2 (2)	N	GG0170F3 Toilet Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_FED_VW	GG0170H1_WLK_ADMSN_CD	VARCHAR2 (1)	N	GG0170H1 Walk: Admission	The data in this column indicates the patient's ability to walk during the admission time period.	LTCH_WLK_CD
LTCH_ASMT_FED_VW	GG0170H3_WLK_DSCHRG_CD	VARCHAR2 (1)	N	GG0170H3 Walk Code: Discharge	The data in this column indicates the patient's ability to walk at the time of discharge.	LTCH_WLK_YES_NO_CD
LTCH_ASMT_FED_VW	GG0170I1_WLK_10_ADMSN_CD	VARCHAR2 (2)	N	GG0170I1 Walk 10 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk ten feet in a	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170I2_WLK_10_GOAL_CD	VARCHAR2 (2)	N	GG0170I2 Walk 10 Feet: Goal	The data in this column indicates the patient's goal for level of assistance for walking 10 feet in	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170I3_WLK_10_DSCHRG_CD	VARCHAR2 (2)	N	GG0170I3 Walk 10 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk ten feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170J1_WLK_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170J1 Walk 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170J2_WLK_50_GOAL_CD	VARCHAR2 (2)	N	GG0170J2 Walk 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to walk 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	GG0170J3_WLK_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170J3 Walk 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170K1_WLK_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170K1 Walk 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170K2_WLK_150_GOAL_CD	VARCHAR2 (2)	N	GG0170K2 Walk 150 Feet: Goal	The data in this column indicates the patient's level of assistance goal to walk 150 feet and	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170K3_WLK_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170K3 Walk 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk 150 feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170Q1_WLCHR_ADMSN_CD	VARCHAR2 (1)	N	GG0170Q1 Wheelchair and/or Scooter: Admission	The data in this column indicates if the patient uses a wheelchair and/or scooter during the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	GG0170Q3_WLCHR_DSCHRG_CD	VARCHAR2 (1)	N	GG0170Q3 Wheelchair and/or Scooter: Discharge	The data in this column indicates if the patient uses a wheelchair and/or scooter at the time of	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	GG0170R1_WHL_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170R1 Wheelchair 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170R2_WHL_50_GOAL_CD	VARCHAR2 (2)	N	GG0170R2 Wheelchair 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170R3_WHL_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170R3 Wheelchair 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170RR1_WHLCHR_50_ADMSN_CD	VARCHAR2 (1)	N	GG0170RR1 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_VW	GG0170RR3_WHLCHR_50_DSCHRG_CD	VARCHAR2 (1)	N	GG0170RR3 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_VW	GG0170S1_WHL_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170S1 Wheelchair 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to wheel 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170S2_WHL_150_GOAL_CD	VARCHAR2 (2)	N	GG0170S2 Wheelchair 150 Feet: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 150	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170S3_WHL_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170S3 Wheelchair 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 150 feet at	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_FED_VW	GG0170SS1_WHLCHR_150_ADMSN_CD	VARCHAR2 (1)	N	GG0170SS1 Wheel 150 Feet: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_FED_VW	GG0170SS3_WHLCHR_150_DSCHRG_CD	VARCHAR2 (1)	N	GG0170SS3 Wheel 150 Feet: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	H0350_URNRY_CNTNC_CD	VARCHAR2 (1)	N	H0350 Urinary Continence	The data in this column indicates the patient's bladder continence over a three day assessment	LTCH_URNRY_CNTNC_CD
LTCH_ASMT_FED_VW	H0400_BWL_CNTNC_CD	VARCHAR2 (1)	N	H0400 Bowel Continence	The data in this column indicates the patient's level of bowel continence.	LTCH_CNTNC_CD
LTCH_ASMT_FED_VW	I0050A_OTH_MDCL_COND_CD	VARCHAR2 (8)	N	I0050A Other Medical Condition	The data in this column indicates the patient's primary medical condition ICD code.	
LTCH_ASMT_FED_VW	I0050_PRMRY_MDCL_COND_CD	VARCHAR2 (1)	N	I0050 Primary Medical Condition	The data in this column indicates the patient's primary medical condition category. Valid	LTCH_PRMRY_MDCL_COND_CD
LTCH_ASMT_FED_VW	I0101_MTSTIC_CNCR_CD	VARCHAR2 (1)	N	I0101 Severe and Metastatic Cancers	This column indicates if the patient has been diagnosed with Severe and Metastatic Cancers.	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I0103_METS_CNCR_CD	VARCHAR2 (1)	N	I0103 Metastatic Cancer	The data in this column indicates if the patient has been diagnosed with metastatic cancer.	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I0104_SVR_CNCR_CD	VARCHAR2 (1)	N	I0104 Severe Cancer	The data in this column indicates if the patient has been diagnosed with severe cancer.	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I0605_SVR_LVSD_LVEF_CD	VARCHAR2 (1)	N	I0605 Severe Left Systolic/Ventricular Dysfunction	The data in this column indicates if the patient has been diagnosed with severe left	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I0900_PVD_CD	VARCHAR2 (1)	N	I0900 Peripheral Vascular Disease (PVD) or Peripheral Arterial Disease (PAD)	This column indicates if a patient has been diagnosed with Peripheral Vascular Disease	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I1501_KDNY_5_CD	VARCHAR2 (1)	N	I1501 Chronic Kidney Disease, State 5	This column indicates if the patient has been diagnosed with Chronic Kidney Disease, Stage	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I1502_RNL_FAILR_CD	VARCHAR2 (1)	N	I1502 Acute Renal Failure	This column indicates if the patient has been diagnosed with Acute Renal Failure.	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I2101_SEPSIS_CD	VARCHAR2 (1)	N	I2101 Septicemia, Sepsis, Systemic Inflammatory Response Syndrome/Shock	This column indicates if the patient has been diagnosed with Septicemia, Sepsis or Systemic	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I2600_CNS_INFCTN_CD	VARCHAR2 (1)	N	I2600 Central Nervous System Infections, Opportunistic Infections, Bone/Joint/Muscle Infections/Necrosis	This column indicates if the patient has been diagnosed with Central Nervous System	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I2900_DM_CD	VARCHAR2 (1)	N	I2900 Diabetes Mellitus (DM)	This column indicates if a patient has been diagnosed with Diabetes Mellitus (DM).	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I4100_LWR_LIMB_AMPUTT_CD	VARCHAR2 (1)	N	I4100 Major Lower Limb Amputation	This column indicates if the patient has been diagnosed with Major Lower Limb Amputation.	LTCH_CHKLST_NOT_ASSESS
LTCH_ASMT_FED_VW	I4501_STRK_CD	VARCHAR2 (1)	N	I4501 Stroke	This column indicates if a patient has been diagnosed with a stroke.	LTCH_CHKLST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	I4801_DMNT_CD	VARCHAR2 (1)	N	I4801 Dementia	This column indicates if a patient has been diagnosed with dementia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I4900_HEMIPLG_CD	VARCHAR2 (1)	N	I4900 Hemiplegia or Hemiparesis	This column indicates if a patient has been diagnosed with Hemiplegia or Hemiparesis.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5000_PARAPLG_CD	VARCHAR2 (1)	N	I5000 Paraplegia	This column indicates if a patient has been diagnosed with Paraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5101_TETRAPLG_CD	VARCHAR2 (1)	N	I5101 Complete Tetraplegia	This column indicates if a patient has been diagnosed with Complete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5102_INCMPLT_TETRAPLG_CD	VARCHAR2 (1)	N	I5102 Incomplete Tetraplegia	This column indicates if a patient has been diagnosed with Incomplete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5110_SPNL_CORD_CD	VARCHAR2 (1)	N	I5110 Other Spinal Cord Disorder/Injury	This column indicates if a patient has been diagnosed with Other Spinal Cord	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5200_MS_CD	VARCHAR2 (1)	N	I5200 Multiple Sclerosis (MS)	This column indicates if a patient has been diagnosed with Multiple Sclerosis (MS).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5250_HNTGTN_CD	VARCHAR2 (1)	N	I5250 Huntingtons Disease	This column indicates if a patient has been diagnosed with Huntington's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5300_PRKNSN_CD	VARCHAR2 (1)	N	I5300 Parkinsons Disease	This column indicates if a patient has been diagnosed with Parkinson's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5450_ALS_CD	VARCHAR2 (1)	N	I5450 Amyotrophic Lateral Sclerosis	This column indicates if a patient has been diagnosed with Amyotrophic Lateral Sclerosis	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5455_PROGRS_NRMSCLR_D EASE_CD	VARCHAR2 (1)	N	I5455 Other Progressive Neuromuscular Disease	The data in this column indicates if the patient has been diagnosed with other progressive	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5460_LKIN_STATE_CD	VARCHAR2 (1)	N	I5460 Locked-In State	This column indicates if a patient has been diagnosed with Locked-In State.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5470_SVR_BRN_DMG_CD	VARCHAR2 (1)	N	I5470 Severe Anoxic Brain Damage, Cerebral Edema, or Compression of Brain	This column indicates if a patient has been diagnosed with Severe Anoxic Brain Damage,	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5480_OTHR_SVR_NRLGCL_CD	VARCHAR2 (1)	N	I5480 Other Severe Neurological Injury, Disease or Dysfunction	The data in this column indicates if the patient has been diagnosed with other severe	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5600_MALNTRTN_CD	VARCHAR2 (1)	N	I5600 Malnutrition	This column indicates if a patient has been diagnosed with malnutrition.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_FED_VW	I5601_CAL_MALNTRTN_CD	VARCHAR2 (1)	N	I5601 Malnutrition (Protein or Calorie)	This column indicates if a patient has been diagnosed with Malnutrition (protein or calorie).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I5602_RSK_MALNTRTN_CD	VARCHAR2 (1)	N	I5602 At Risk for Malnutrition	This column indicates if a patient has been diagnosed as At Risk for Malnutrition.	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	I7100_LUNG_TRNSPLNT_CD	VARCHAR2 (1)	N	I7100 Lung Transplant	The data in this column indicates if the patient has had a lung transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I7101_HRT_TRNSPLNT_CD	VARCHAR2 (1)	N	I7101 Heart Transplant	The data in this column indicates if the patient has had a heart transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I7102_LVR_TRNSPLNT_CD	VARCHAR2 (1)	N	I7102 Liver Transplant	The data in this column indicates if the patient has had a liver transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I7103_KDNY_TRNSPLNT_CD	VARCHAR2 (1)	N	I7103 Kidney Transplant	The data in this column indicates if the patient has had a kidney transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I7104_BONE_MRW_TRNSPLNT_CD	VARCHAR2 (1)	N	I7104 Bone Marrow Transplant	The data in this column indicates if the patient has had a bone marrow transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	I7900_NO_ACTV_DEASE_CD	VARCHAR2 (1)	N	I7900 No Active Disease	This column indicates that a patient has no other diagnoses.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_FED_VW	ITM_SET_VRSN_CD	VARCHAR2 (10)	N	Item Set Version Code	This value represents the version of the item set that was completed by the facility.	
LTCH_ASMT_FED_VW	J1800_FALL_LAST_ASMT_CD	VARCHAR2 (1)	N	J1800 Any Falls Since Admission	This column indicates if the patient has had any falls since admission.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	J1900A_FALL_NO_INJURY_CD	VARCHAR2 (1)	N	J1900A No Injury Fall	This column indicates the number of falls code without injury a patient has had since admission.	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_VW	J1900B_FALL_INJURY_CD	VARCHAR2 (1)	N	J1900B Injury Except Major Fall	This column indicates the number of falls code with injury (except major) a patient has had	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_VW	J1900C_FALL_MAJ_INJURY_CD	VARCHAR2 (1)	N	J1900C Major Injury Fall	This column indicates the number of falls code with major injury falls a patient has had since	LTCH_NUM_FALL_CD
LTCH_ASMT_FED_VW	K0200A_HGT_NUM	VARCHAR2 (2)	N	K0200A Height	The data in this column contains the patient's height in inches.	
LTCH_ASMT_FED_VW	K0200B_WT_NUM	VARCHAR2 (3)	N	K0200B Weight	The data in this column contains the patient's weight in pounds.	
LTCH_ASMT_FED_VW	LTCH_ASMT_ID	NUMBER (22)	N	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ASMT_FED_VW	LTCH_CRCTN_STUS_CD	VARCHAR2 (1)	N	LTCH Correction Status Code	This code indicates the version of the assessment. A value of 'C' indicates this is the	LTCH_CRCTN_STUS
LTCH_ASMT_FED_VW	LTCH_ITM_SBST_CD	VARCHAR2 (3)	N	LTCH Item Subset Code	This code indicates the type of assessment that was submitted.	LTCH_ITM_SBST
LTCH_ASMT_FED_VW	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_ASMT_FED_VW	M0210_STG_1_HGHR_ULCR_CD	VARCHAR2 (1)	N	M0210 One or More Unhealed Pressure Ulcers/Injuries	The data in this column indicates if a patient has one or more unhealed pressure ulcers/injuries.	LTCH_YES_NO_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	M0300A_STG_1_ULCR_NUM	VARCHAR2 (1)	N	M0300A Number of Stage 1 Pressure Injuries	The data in this column indicates the number of Stage 1 pressure injuries present.	
LTCH_ASMT_FED_VW	M0300B1_STG_2_ULCR_NUM	VARCHAR2 (1)	N	M0300B1 Number of Stage 2 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 2 pressure ulcers.	
LTCH_ASMT_FED_VW	M0300B2_STG_2_ULCR_ADM SN_NUM	VARCHAR2 (1)	N	M0300B2 Number of Stage 2 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 2 pressure ulcers that were present on admission	
LTCH_ASMT_FED_VW	M0300B3_STG_2_ULCR_OLD_DT	VARCHAR2 (8)	N	M0300B3 Date of Oldest Stage 2 Pressure Ulcer	The data in this column indicates the date of the oldest Stage 2 pressure ulcer.	
LTCH_ASMT_FED_VW	M0300C1_STG_3_ULCR_NUM	VARCHAR2 (1)	N	M0300C1 Number of Stage 3 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 3 pressure ulcers.	
LTCH_ASMT_FED_VW	M0300C2_STG_3_ULCR_ADM SN_NUM	VARCHAR2 (1)	N	M0300C2 Number of Stage 3 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 3 pressure ulcers that were present on admission	
LTCH_ASMT_FED_VW	M0300D1_STG_4_ULCR_NUM	VARCHAR2 (1)	N	M0300D1 Number of Stage 4 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 4 pressure ulcers.	
LTCH_ASMT_FED_VW	M0300D2_STG_4_ULCR_ADM SN_NUM	VARCHAR2 (1)	N	M0300D2 Number of Stage 4 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 4 pressure ulcers that were present on admission	
LTCH_ASMT_FED_VW	M0300E1_UNSTGBL_ULCR_D RSNNG_NUM	VARCHAR2 (1)	N	M0300E1 Number of Current Unstageable Pressure Ulcers/Injuries Due to Non-removable Dressing or Device	This indicates the number of pressure ulcers/injuries that are unstageable due to the	
LTCH_ASMT_FED_VW	M0300E2_U_ULCR_DRNSNG_A DMSN_NUM	VARCHAR2 (1)	N	M0300E2 Number of Unstageable Pressure Ulcers/Injuries With a Non-removable Dressing That Were Present Upon Admission	The data in this column indicates the number of unstageable pressure ulcers/injuries with a non-	
LTCH_ASMT_FED_VW	M0300F1_UNSTGBL_ULCR_E SC_NUM	VARCHAR2 (1)	N	M0300F1 Number of Unstageable Pressure Ulcers With Slough or Eschar	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_FED_VW	M0300F2_U_ULCR_ESC_ADM SN_NUM	VARCHAR2 (1)	N	M0300F2 Number of Unstageable Pressure Ulcers With Slough or Eschar on Admission	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_FED_VW	M0300G1_UNSTGBL_ULCR_D EEP_NUM	VARCHAR2 (1)	N	M0300G1 Number of Current Unstageable Pressure Injuries Presenting as Deep Tissue Injury	This indicates the current number of unstageable pressure injuries presenting as deep tissue	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	M0300G2_U_ULCR_DEEP_AD MSN_NUM	VARCHAR2 (1)	N	M0300G2 Number of Unstageable Pressure Injuries That Were Present Upon Admission	This indicates the number of the unstageable pressure injuries presenting as deep tissue injury	
LTCH_ASMT_FED_VW	M0610A_STG_3_4_ULCR_LN GTH_NUM	VARCHAR2 (4)	N	M0610A Pressure Ulcer Length	The data in this column contains the length of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_VW	M0610B_STG_3_4_ULCR_WD TH_NUM	VARCHAR2 (4)	N	M0610B Pressure Ulcer Width	The data in this column contains the width of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_VW	M0610C_STG_3_4_ULCR_DPT H_NUM	VARCHAR2 (4)	N	M0610C Pressure Ulcer Depth	The data in this column contains the depth of the largest pressure ulcer in centimeters.	
LTCH_ASMT_FED_VW	M0700_ULCR_TISUE_TYPE_C D	VARCHAR2 (1)	N	M0700 Most Severe Pressure Ulcer Tissue Type	The data in this column indicates the most severe type of tissue present in any pressure	LTCH_ULCR_TISUE_TYPE_CD
LTCH_ASMT_FED_VW	M0800A_WRSNG_STG_2_ULC R_NUM	VARCHAR2 (1)	N	M0800A Worsening Pressure Ulcer Since Prior Assessment Number: Stage 2	The data in this column indicates the number of current Stage 2 pressure ulcers that were not	
LTCH_ASMT_FED_VW	M0800B_WRSNG_STG_3_ULC R_NUM	VARCHAR2 (1)	N	M0800B Worsening Pressure Ulcer Since Prior Assessment Number: Stage 3	The data in this column indicates the number of current Stage 3 pressure ulcers that were not	
LTCH_ASMT_FED_VW	M0800C_WRSNG_STG_4_ULC R_NUM	VARCHAR2 (1)	N	M0800C Worsening Pressure Ulcer Since Prior Assessment Number: Stage 4	The data in this column indicates the number of current Stage 4 pressure ulcers that were not	
LTCH_ASMT_FED_VW	M0800D_WRSNG_DRNG_NU M	VARCHAR2 (1)	N	M0800D Worsening Unstageable Non-removable dressing Ulcer Number	The data in this column indicates the number of current Unstageable Non-removable dressing	
LTCH_ASMT_FED_VW	M0800E_WRSNG_ESC_NUM	VARCHAR2 (1)	N	M0800E Worsening Unstageable-Slough an/or eschar Ulcer Number	The data in this column indicates the number of current Unstageable Slough and or eschar	
LTCH_ASMT_FED_VW	M0800F_WRSNG_DEEP_NUM	VARCHAR2 (1)	N	M0800F Worsening Unstageable-Deep tissue injury Ulcer Number	The data in this column indicates the number of current Unstageable Deep Tissue injury pressure	
LTCH_ASMT_FED_VW	N2001_DRUG_RGMN_RVW_C D	VARCHAR2 (1)	N	N2001 Drug Regimen Review	The data in this column indicates whether a complete drug regimen review identified	LTCH_DRUG_RGMN_RVW_CD
LTCH_ASMT_FED_VW	N2003_PHYSN_MDCTN_FLW P_CD	VARCHAR2 (1)	N	N2003 Medication Follow-up	The data in this column indicates whether the facility contacted the physician (or physician-	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_VW	N2005_PHYSN_MDCTN_INTR VTN_CD	VARCHAR2 (1)	N	N2005 Medication Intervention	The data in this column indicates whether the facility contacted and completed the physician	LTCH_DRUG_YES_NO_CD
LTCH_ASMT_FED_VW	O0100F3_VNTLTR_WNNG_C D	VARCHAR2 (1)	N	O0100F3 Special Treatments, Procedures, Programs-Respiratory: Ventilator Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: weaning at the	LTCH_YES_NO_NOT_ASSESS



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	O0100F4_VNTLTR_CD	VARCHAR2 (1)	N	O0100F4 Special Treatments, Procedures, Programs-Respiratory: Ventilator Non-Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: non-weaning at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	O0100G_CPAP_CD	VARCHAR2 (1)	N	O0100G Special Treatments, Procedures, Programs-Respiratory: Non-Invasive Ventilator (BIPAP, CPAP)	This column indicates that the patient was on a non-invasive ventilator (e.g., BIPAP, CPAP) at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	O0100H2A_VASOACTV_MDC TN_CD	VARCHAR2 (1)	N	O0100H2A Vasoactive Medications	The data in this column indicates whether the patient received intravenous vasoactive	LTCH_CHKLIST_NO_INFO_BLA NK
LTCH_ASMT_FED_VW	O0100H_IV_MDCTN_CD	VARCHAR2 (1)	N	O0100H IV Medications	The data in this column indicates whether IV medication was required.	LTCH_CHKLIST_NO_INFO_BLA NK
LTCH_ASMT_FED_VW	O0100J_DLYS_CD	VARCHAR2 (1)	N	O0100J Special Treatments, Procedures, Programs-Other Treatments: Dialysis	This column indicates that the patient's treatment plan included dialysis at the time of admission.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	O0100N_TOT_PRNTRL_CD	VARCHAR2 (1)	N	O0100N Special Treatments, Procedures, Programs-Other Treatments: Total Parenteral Nutrition	This column indicates that the patient's treatment plan included Total Parenteral Nutrition at the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	O0100Z_NO_TRTMT_CD	VARCHAR2 (1)	N	O0100Z Special Treatments, Procedures, Programs-Other Treatments: No Other Treatment	This column indicates that the patient was not receiving any special treatments, procedures or	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	O0150A_INSV_MCHNCL_SP RT_CD	VARCHAR2 (1)	N	O0150A SBT: Invasive Mechanical Ventilation Support Admission	The data in this column indicates whether the patient was receiving invasive mechanical	LTCH_INSV_MCHNCL_SPRT_CD
LTCH_ASMT_FED_VW	O0150B_ASSESS_RDNS_SBT_CD	VARCHAR2 (1)	N	O0150B SBT: Assessed for SBT Readiness by Day 2 of LTCH Stay	The data in this column indicates whether the patient was assessed for readiness for	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_VW	O0150C_MDCLY_READY_SBT_CD	VARCHAR2 (1)	N	O0150C SBT: Deemed Medically Ready by Day 2 of LTCH Stay	The data in this column indicates whether the patient was deemed medically ready for	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_VW	O0150D_DCMTN_UNREADY_SBT_CD	VARCHAR2 (1)	N	O0150D SBT: Documentation of Reason(s) - Patient Unready	The data in this column indicates whether there is documentation of reason(s) in the patient's	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_VW	O0150E_SBT_PRFMD_CD	VARCHAR2 (1)	N	O0150E SBT Performed by Day 2	The data in this column indicates whether Spontaneous Breathing Trial (SBT) was	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_FED_VW	O0200A_LBR TN_STUS_CD	VARCHAR2 (1)	N	O0200A Invasive Mechanical Ventilator: Liberation Status at Discharge	The data in this column indicates whether the patient was fully liberated from the invasive	LTCH_LBR TN_STUS_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_FED_VW	O0250A_INFLNZ_RCVD_CD	VARCHAR2 (1)	N	O0250A Influenza Received Code	The data in this column indicates whether the patient received the influenza vaccination.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_FED_VW	O0250B_INFLNZ_RCVD_DT	VARCHAR2 (8)	N	O0250B Influenza Received Date	The data in this column indicates the date that the influenza vaccination was received.	
LTCH_ASMT_FED_VW	O0250C_RSN_INFLNZ_NOT_RCVD_CD	VARCHAR2 (1)	N	O0250C Reason Influenza Not Received Code	The data in this column indicates the reason that the patient did not receive the influenza vaccine.	LTCH_RSN_INFLNZ_NOT_RCVD_CD
LTCH_ASMT_FED_VW	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ASMT_FED_VW	PRCSO_TS	DATE (8)	N	Processed Timestamp	This is the date/time that the submission file processing completed and when the	
LTCH_ASMT_FED_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ASMT_FED_VW	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
LTCH_ASMT_FED_VW	RSDNT_MATCH_CRITIA_ID	NUMBER (2.0)	N	Resident Match Criteria ID	This value indicates which of the resident match criteria was assigned based on the patient	
LTCH_ASMT_FED_VW	SFTWR_PROD_NAME	VARCHAR2 (50)	N	Software Product Name	This is the name of the software that was used to create the LTCH data submission file.	
LTCH_ASMT_FED_VW	SFTWR_PROD_VRSN_CD	VARCHAR2 (20)	N	Software Product Version Code	This is the version number of the software that was used to create the LTCH data submission	
LTCH_ASMT_FED_VW	SFTWR_VNDR_ID	VARCHAR2 (9)	N	Software Vendor ID	This is the software vendor's Federal Employer Tax (EIN) ID.	
LTCH_ASMT_FED_VW	SPEC_VRSN_CD	VARCHAR2 (10)	N	Specification Version Code	This value represents the version of the data submission specifications that were used to	
LTCH_ASMT_FED_VW	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ASMT_FED_VW	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date that the file was received by the system.	
LTCH_ASMT_FED_VW	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	
LTCH_ASMT_FED_VW	UPDT_TS	DATE (8)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_ASMT_FED_VW	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_ASMT_FED_VW	Z0500B_RN_SGN_CMPLT_DT	VARCHAR2 (8)	N	Z0500B LTCH CARE Data Set Completion Date	This column contains the LTCH CARE data set completion date.	

## Tables Report - LTCH

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_HSTRY_SM RY_VW	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for the assessment	LTCH_RSN_ASMT_CD
LTCH_ASMT_HSTRY_SM RY_VW	A0500A_FIRST_NAME	VARCHAR2 (12)	N	A0500A First Name	This column contains the first name of the patient.	
LTCH_ASMT_HSTRY_SM RY_VW	A0500C_LAST_NAME	VARCHAR2 (18)	N	A0500C Last Name	This column contains the last name of the patient.	
LTCH_ASMT_HSTRY_SM RY_VW	A0600A_SSN_NUM	VARCHAR2 (9)	N	A0600A Social Security Number	This column contains the Social Security Number of the patient.	
LTCH_ASMT_HSTRY_SM RY_VW	CRCTN_NUM	NUMBER (2.0)	N	Correction Number	This is the number of the assessment. New records have a correction number of '00'	
LTCH_ASMT_HSTRY_SM RY_VW	HIC_NUM	VARCHAR2 (12)	N	Health Insurance Claim Number	This is the patient's Medicare number.	
LTCH_ASMT_HSTRY_SM RY_VW	LTCH_ASMT_ID	NUMBER (22)	N	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ASMT_HSTRY_SM RY_VW	LTCH_CRCTN_STUS_CD	VARCHAR2 (1)	N	LTCH Correction Status Code	This code indicates the version of the assessment. A value of 'C' indicates this is the	LTCH_CRCTN_STUS
LTCH_ASMT_HSTRY_SM RY_VW	LTCH_ITM_SBST_CD	VARCHAR2 (3)	N	LTCH Item Subset Code	This code indicates the type of assessment that was submitted.	LTCH_ITM_SBST
LTCH_ASMT_HSTRY_SM RY_VW	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_ASMT_HSTRY_SM RY_VW	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ASMT_HSTRY_SM RY_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ASMT_HSTRY_SM RY_VW	PRVDR_NUM	VARCHAR2 (10)	N	CMS Certification Number	This is the CMS Certification Number (CCN), formerly known as Provider Number, of the	
LTCH_ASMT_HSTRY_SM RY_VW	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
LTCH_ASMT_HSTRY_SM RY_VW	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ASMT_HSTRY_SM RY_VW	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_ASMT_HSTRY_SM RY_VW	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_SMRY_VW	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for the assessment	LTCH_RSN_ASMT_CD
LTCH_ASMT_SMRY_VW	A0500A_FIRST_NAME	VARCHAR2 (12)	N	A0500A First Name	This column contains the first name of the patient.	
LTCH_ASMT_SMRY_VW	A0500C_LAST_NAME	VARCHAR2 (18)	N	A0500C Last Name	This column contains the last name of the patient.	
LTCH_ASMT_SMRY_VW	A0600A_SSN_NUM	VARCHAR2 (9)	N	A0600A Social Security Number	This column contains the Social Security Number of the patient.	
LTCH_ASMT_SMRY_VW	CRCTN_NUM	NUMBER (2.0)	N	Correction Number	This is the number of the assessment. New records have a correction number of '00'	
LTCH_ASMT_SMRY_VW	HIC_NUM	VARCHAR2 (12)	N	Health Insurance Claim Number	This is the patient's Medicare number.	
LTCH_ASMT_SMRY_VW	LTCH_ASMT_ID	NUMBER (22)	N	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ASMT_SMRY_VW	LTCH_CRCTN_STUS_CD	VARCHAR2 (1)	N	LTCH Correction Status Code	This code indicates the version of the assessment. A value of 'C' indicates this is the	LTCH_CRCTN_STUS
LTCH_ASMT_SMRY_VW	LTCH_ITM_SBST_CD	VARCHAR2 (3)	N	LTCH Item Subset Code	This code indicates the type of assessment that was submitted.	LTCH_ITM_SBST
LTCH_ASMT_SMRY_VW	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_ASMT_SMRY_VW	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ASMT_SMRY_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ASMT_SMRY_VW	PRVDR_NUM	VARCHAR2 (10)	N	CMS Certification Number	This is the CMS Certification Number (CCN), formerly known as Provider Number, of the	
LTCH_ASMT_SMRY_VW	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
LTCH_ASMT_SMRY_VW	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ASMT_SMRY_VW	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_ASMT_SMRY_VW	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	
LTCH_ASMT_STUS_VW	ASMT_STUS_DESC	VARCHAR2 (50)	N	Assessment Status Description	This column represents the assessment status description.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_STUS_VW	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_ASMT_STUS_VW	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_ASMT_STUS_VW	LTCH_ASMT_STUS_CD	VARCHAR2 (2)	N	LTCH Assessment Status Code	This column contains the code identifying the status of the assessment processing (accepted,	
LTCH_ASMT_STUS_VW	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_ASMT_STUS_VW	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_ASMT_TMPLT_VW	A0050_TRANS_TYPE_CD	VARCHAR2 (1)	N	A0050 Type of Record	The data in this column indicates the type of record that is being submitted (new,	LTCH_TRANS_TYPE_CD
LTCH_ASMT_TMPLT_VW	A0055_CRCTN_NUM	NUMBER (2.0)	N	A0055 Correction Number	The data in this column indicates the number of correction requests to modify/inactivate the	
LTCH_ASMT_TMPLT_VW	A0100A_NPI_NUM	VARCHAR2 (10)	N	A0100A National Provider Identifier	This column contains the provider's National Provider Identifier number.	
LTCH_ASMT_TMPLT_VW	A0100B_CMS_CRTFCTN_NUM	VARCHAR2 (12)	N	A0100B CMS Certification Number (CCN)	This is the CMS Certification Number (CCN) of the provider submitting the record.	
LTCH_ASMT_TMPLT_VW	A0100C_STATE_PRVDR_NUM	VARCHAR2 (15)	N	A0100C State Provider Number	This is the State Provider Number of the provider submitting the record.	
LTCH_ASMT_TMPLT_VW	A0200_PRVDR_TYPE_CD	VARCHAR2 (1)	N	A0200 Type of Provider	This column indicates that this record is submitted by a Long-term Care Hospital. This	LTCH_PRVDR_TYPE_CD
LTCH_ASMT_TMPLT_VW	A0210_ASMT_RFRNC_DT	DATE (8)	N	A0210 Assessment Reference Date	This column contains the end date of the observation period of the assessment.	
LTCH_ASMT_TMPLT_VW	A0220_ADMSN_DT	DATE (8)	N	A0220 Admission Date	This column indicates the patient's date of admission into the hospital.	
LTCH_ASMT_TMPLT_VW	A0250_RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	A0250 Reason for Assessment	This column indicates the reason for the assessment	LTCH_RSN_ASMT_CD
LTCH_ASMT_TMPLT_VW	A0270_DSCHRG_DT	VARCHAR2 (8)	N	A0270 Discharge Date	This column indicates the patient's discharge date from the hospital.	
LTCH_ASMT_TMPLT_VW	A0500A_FIRST_NAME	VARCHAR2 (12)	N	A0500A First Name	This column contains the first name of the patient.	
LTCH_ASMT_TMPLT_VW	A0500B_MDL_INITL_TXT	VARCHAR2 (1)	N	A0500B Middle Initial	This column contains the middle initial of the patient.	
LTCH_ASMT_TMPLT_VW	A0500C_LAST_NAME	VARCHAR2 (18)	N	A0500C Last Name	This column contains the last name of the patient.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	A0500D_SFX_TXT	VARCHAR2 (3)	N	A0500D Suffix	This column contains the suffix of the patient.	
LTCH_ASMT_TMPLT_VW	A0600A_SSN_NUM	VARCHAR2 (9)	N	A0600A Social Security Number	This column contains the Social Security Number of the patient.	
LTCH_ASMT_TMPLT_VW	A0600B_MDCR_NUM	VARCHAR2 (12)	N	A0600B Medicare Number	This column contains the patient's Medicare number.	
LTCH_ASMT_TMPLT_VW	A0700_MDCD_NUM	VARCHAR2 (14)	N	A0700 Medicaid Number	This column contains the patient's Medicaid number.	
LTCH_ASMT_TMPLT_VW	A0800_GNDR_CD	VARCHAR2 (1)	N	A0800 Gender	This data in this column indicates the patient's gender.	LTCH_GNDR_CD
LTCH_ASMT_TMPLT_VW	A0900_BIRTH_DT	DATE (8)	N	A0900 Birth Date	This column contains the patient's birth date.	
LTCH_ASMT_TMPLT_VW	A1000A_AMRCN_INDN_AK_NTV_CD	VARCHAR2 (1)	N	A1000A Race/Ethnicity: American Indian or Alaskan Native	The data in this column indicates if the patient's race is American Indian/Alaskan Native.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_TMPLT_VW	A1000B_ASN_CD	VARCHAR2 (1)	N	A1000B Race/Ethnicity: Asian	The data in this column indicates if the patient's race is Asian.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_TMPLT_VW	A1000C_AFRCN_AMRCN_CD	VARCHAR2 (1)	N	A1000C Race/Ethnicity: Black or African American	The data in this column indicates if the patient's race is Black or African American.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_TMPLT_VW	A1000D_HSPNC_CD	VARCHAR2 (1)	N	A1000D Race/Ethnicity: Hispanic or Latino	The data in this column indicates if the patient's ethnicity is Hispanic.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_TMPLT_VW	A1000E_NTV_HI_PCFC_ISLN_DR_CD	VARCHAR2 (1)	N	A1000E Race/Ethnicity: Native Hawaiian or Other Pacific Islander	The data in this column indicates if the patient's race is Native Hawaiian/Pacific Islander.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_TMPLT_VW	A1000F_WHT_CD	VARCHAR2 (1)	N	A1000F Race/Ethnicity: White	This column indicates if the patient's race is White.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_TMPLT_VW	A1050_HIGHEST_EDCTN_CMP_LT_CD	VARCHAR2 (1)	N	A1050 Highest Education Completed	The data in this column indicates the highest level of education achieved by the patient.	LTCH_EDCTN_CMPLT_CD
LTCH_ASMT_TMPLT_VW	A1100A_NEED_INTRPTR_CD	VARCHAR2 (1)	N	A1100A Language: Need Interpreter	The data in this column indicates whether the patient needs or wants an interpreter to	LTCH_YES_NO_UNABLE_DTRM
LTCH_ASMT_TMPLT_VW	A1100B_INTRPTR_LANG_TXT	VARCHAR2 (15)	N	A1100B Preferred Language	The data in this column indicates the patient's preferred language.	
LTCH_ASMT_TMPLT_VW	A1200_MRTL_STUS_CD	VARCHAR2 (1)	N	A1200 Marital Status	The data in this column indicates the patient's marital status.	LTCH_MRTL_STUS_CD
LTCH_ASMT_TMPLT_VW	A1300D_LFTM_OCPTN_TXT	VARCHAR2 (23)	N	A1300D Lifetime Occupation	The data in this column indicates the patient's lifetime occupation.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	A1400A_MDCR_FFS_PYR_CD	VARCHAR2 (1)	N	A1400A Payer Information: Medicare (Traditional Fee-for-Service)	The data in this column indicates whether the payer source for the patient's stay is Medicare	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400B_MDCR_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400B Payer Information: Medicare (Other Payer)	The data in this column indicates whether the payer source for the patient's stay is Medicare,	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400C_MD CD_FFS_PYR_CD	VARCHAR2 (1)	N	A1400C Payer Information: Medicaid (Traditional Fee-for-Service Payer Code)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400D_MD CD_MC_PYR_CD	VARCHAR2 (1)	N	A1400D Payer Information: Medicaid (Managed Care)	The data in this column indicates whether the payer source for the patient's stay is Medicaid	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400E_WC_PYR_CD	VARCHAR2 (1)	N	A1400E Payer Information: Workers Compensation	The data in this column indicates whether the payer source for the patient's stay is Workers'	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400F_TITLE_PGM_PYR_CD	VARCHAR2 (1)	N	A1400F Payer Information: Title Program	The data in this column indicates whether the payer source for the patient's stay is a Title	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400G_OTHR_GOV T_PYR_CD	VARCHAR2 (1)	N	A1400G Payer Information: Other Government	The data in this column indicates whether the payer source for the patient's stay is an Other	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400H_PRVT_INS_PYR_CD	VARCHAR2 (1)	N	A1400H Payer Information: Private Insurance/Medigap	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400I_PRVT_MC_PYR_CD	VARCHAR2 (1)	N	A1400I Payer Information: Private Managed Care	The data in this column indicates whether the payer source for the patient's stay is Private	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400J_SELF_PYR_CD	VARCHAR2 (1)	N	A1400J Payer Information: Self-Pay	The data in this column indicates whether the payer source for the patient's stay is self-pay.	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400K_NO_PYR_CD	VARCHAR2 (1)	N	A1400K Payer Information: No Payer Source	The data in this column indicates the patient does not have a payer source.	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400X_UNK_PYR_CD	VARCHAR2 (1)	N	A1400X Payer Information: Unknown	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1400Y_OTHR_PYR_CD	VARCHAR2 (1)	N	A1400Y Payer Information: Other	The data in this column indicates whether the payer source for the patient's stay is from an	LTCH_CHKLIST_VS
LTCH_ASMT_TMPLT_VW	A1800_ADMTD_FROM_CD	VARCHAR2 (2)	N	A1800 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_CD
LTCH_ASMT_TMPLT_VW	A1802_ADMTD_FROM_LCTN_CD	VARCHAR2 (2)	N	A1802 Admitted From	The data in this column indicates where the patient was prior to being admitted to the LTCH.	LTCH_ADMT_FROM_VS_CD
LTCH_ASMT_TMPLT_VW	A1810A_LAST_2_MO_IPPS_CD	VARCHAR2 (1)	N	A1810A Short-Stay Acute Hospital (IPPS)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810B_LAST_2_MO_CMNTY_CD	VARCHAR2 (1)	N	A1810B Community Residential Setting	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	A1810C_LAST_2_MO_LTC_CD	VARCHAR2 (1)	N	A1810C Long-term Care Facility	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810D_LAST_2_MO_SNF_CD	VARCHAR2 (1)	N	A1810D Skilled Nursing Facility (SNF)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810E_LAST_2_MO_HOSP_ER_CD	VARCHAR2 (1)	N	A1810E Hospital Emergency Department	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810F_LAST_2_MO_LTCH_CD	VARCHAR2 (1)	N	A1810F Long-term Care Hospital (LTCH)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810G_LAST_2_MO_IRF_CD	VARCHAR2 (1)	N	A1810G Inpatient Rehabilitation Facility or Unit (IRF)	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810H_LAST_2_MO_HHA_CD	VARCHAR2 (1)	N	A1810H Home Health Agency (HHA)	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810I_LAST_2_MO_HOSPC_CD	VARCHAR2 (1)	N	A1810I Hospice	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810J_LAST_2_MO_OPS_CD	VARCHAR2 (1)	N	A1810J Outpatient Services	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810K_LAST_2_MO_PSYCH_CD	VARCHAR2 (1)	N	A1810K Psychiatric Hospital or Unit	The data in this column indicates whether the patient received other medical services from a	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810L_LAST_2_MO_ID_DD_CD	VARCHAR2 (1)	N	A1810L ID/DD Facility	The data in this column indicates whether the patient received other medical services from an	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1810Z_NO_LAST_2_MO_CD	VARCHAR2 (1)	N	A1810Z None of The Above	The data in this column indicates the patient received none of the medical services identified	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	A1820_PRVS_MDCL_PRMRY_DGNS_CD	VARCHAR2 (8)	N	A1820 Previous Primary Diagnosis Code	This indicates the primary diagnosis (ICD) for the patient from the previous medical setting in	
LTCH_ASMT_TMPLT_VW	A1955_DSCHRG_DLAY_CD	VARCHAR2 (1)	N	A1955 Discharge Delay	The data in this column indicates if a patient's discharge was delayed for at least 24 hours.	LTCH_YES_NO
LTCH_ASMT_TMPLT_VW	A1960_DSCHRG_DLAY_RSN_CD	VARCHAR2 (2)	N	A1960 Reason for Discharge Delay	The data in this column indicates the reason the patient's discharge was delayed.	LTCH_DSCHRG_DLAY_CD
LTCH_ASMT_TMPLT_VW	A1970_DSCHRG_RTN_STUS_CD	VARCHAR2 (1)	N	A1970 Discharge Return Status	The data in this column indicates the patient's discharge return status.	LTCH_DSCHRG_RTN_CD
LTCH_ASMT_TMPLT_VW	A2100_DSCHRG_LCTN_CD	VARCHAR2 (2)	N	A2100 Discharge Location	The data in this column indicates the location to where patient was discharged. This field was	LTCH_DSCHRG_LCTN_CD
LTCH_ASMT_TMPLT_VW	A2110_DSCHRG_TO_LCTN_CD	VARCHAR2 (2)	N	A2110 Discharge Location	The data in this column indicates the location to where patient was discharged. Prior to April	LTCH_DSCHRG_LCTN_VS_CD
LTCH_ASMT_TMPLT_VW	A2500_PGM_INTRPTN_CD	VARCHAR2 (1)	N	A2500 Program Interruption(s)	The data in this column indicates whether the patient experienced a program interruption	LTCH_YES_NO_VS



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	A2510_PGM_INTRPTN_NUM	VARCHAR2 (2)	N	A2510 Number Program Interruption(s)	The data in this column indicates the number of program interruptions during their stay.	
LTCH_ASMT_TMPLT_VW	A2520A1_INTRPTN_RCNT_STRT_DT	VARCHAR2 (8)	N	A2520A1 Recent Interruption Start Date	The data in this column indicates the most recent interruption start date.	
LTCH_ASMT_TMPLT_VW	A2520A2_INTRPTN_RCNT_END_DT	VARCHAR2 (8)	N	A2520A2 Recent Interruption End Date	The data in this column indicates the most recent interruption end date.	
LTCH_ASMT_TMPLT_VW	A2520B1_INTRPTN_2ND_STRT_DT	VARCHAR2 (8)	N	A2520B1 Second Most Recent Interruption Start Date	The data in this column indicates the second most recent interruption start date.	
LTCH_ASMT_TMPLT_VW	A2520B2_INTRPTN_2ND_END_DT	VARCHAR2 (8)	N	A2520B2 Second Most Recent Interruption End Date	The data in this column indicates the second most recent interruption end date.	
LTCH_ASMT_TMPLT_VW	A2520C1_INTRPTN_3RD_STRT_DT	VARCHAR2 (8)	N	A2520C1 Third Most Recent Interruption Start Date	The data in this column indicates the third most recent interruption start date.	
LTCH_ASMT_TMPLT_VW	A2520C2_INTRPTN_3RD_END_DT	VARCHAR2 (8)	N	A2520C2 Third Most Recent Interruption End Date	The data in this column indicates the third most recent interruption end date.	
LTCH_ASMT_TMPLT_VW	A2525A1_PGM_INT_1ST_STRT_DT	VARCHAR2 (8)	N	A2525A1 Program Interruption Date - First Interruption Start Date	The data in this column represents the first program interruption start date.	
LTCH_ASMT_TMPLT_VW	A2525A2_PGM_INT_1ST_END_DT	VARCHAR2 (8)	N	A2525A2 Program Interruption Date - First Interruption End Date	The data in this column represents the first program interruption end date.	
LTCH_ASMT_TMPLT_VW	A2525B1_PGM_INT_2ND_STRT_DT	VARCHAR2 (8)	N	A2525B1 Program Interruption Date - Second Start Date	The data in this column represents the second program interruption start date.	
LTCH_ASMT_TMPLT_VW	A2525B2_PGM_INT_2ND_END_DT	VARCHAR2 (8)	N	A2525B2 Program Interruption Date - Second Interruption End Date	The data in this column represents the second program interruption end date.	
LTCH_ASMT_TMPLT_VW	A2525C1_PGM_INT_3RD_STRT_DT	VARCHAR2 (8)	N	A2525C1 Program Interruption Date - Third Start Date	The data in this column represents the third program interruption start date.	
LTCH_ASMT_TMPLT_VW	A2525C2_PGM_INT_3RD_END_DT	VARCHAR2 (8)	N	A2525C2 Program Interruption Date - Third End Date	The data in this column represents the third program interruption end date.	
LTCH_ASMT_TMPLT_VW	A2525D1_PGM_INT_4TH_STRT_DT	VARCHAR2 (8)	N	A2525D1 Program Interruption Date - Fourth Start Date	The data in this column represents the fourth program interruption start date.	
LTCH_ASMT_TMPLT_VW	A2525D2_PGM_INT_4TH_END_DT	VARCHAR2 (8)	N	A2525D2 Program Interruption Date - Fourth End Date	The data in this column represents the fourth program interruption end date.	
LTCH_ASMT_TMPLT_VW	A2525E1_PGM_INT_5TH_STRT_DT	VARCHAR2 (8)	N	A2525E1 Program Interruption Date - Fifth Start Date	The data in this column represents the fifth program interruption start date.	
LTCH_ASMT_TMPLT_VW	A2525E2_PGM_INT_5TH_END_DT	VARCHAR2 (8)	N	A2525E2 Program Interruption Date - Fifth End Date	The data in this column represents the fifth program interruption end date.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	ASMT_SYS_CD	CHAR (4)	N	Assessment System Code	This indicates the assessment system to which the assessment belongs.	
LTCH_ASMT_TMPLT_VW	B0100_CMTS_CD	VARCHAR2 (1)	N	B0100 Comatose	The data in this column indicates whether or not the patient is comatose.	LTCH_YES_NO_NOT_ASSESS_VS
LTCH_ASMT_TMPLT_VW	BB0700_EXPRSN_IDEA_WANT_CD	VARCHAR2 (1)	N	BB0700 Expression of Ideas and Wants	The data in this column represents the patient's independence with expression of ideas and	LTCH_EXPRSN_WANT_CD
LTCH_ASMT_TMPLT_VW	BB0800_UNDRST_OTHR_CD	VARCHAR2 (1)	N	BB0800 Understanding Verbal/Non-Verbal Content	The data in this column indicates the patient's ability to understand verbal/non-verbal content,	LTCH_UNDRST_OTHR_CD
LTCH_ASMT_TMPLT_VW	C1610A_ACUTE_ONST_CD	VARCHAR2 (1)	N	C1610A Acute Onset	The data in this column indicates if the patient experienced an acute change in mental status	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_TMPLT_VW	C1610B_BHVR_FLCTATE_CD	VARCHAR2 (1)	N	C1610B Behavior Fluctuate	The data in this column indicates if the patient's abnormal behavior fluctuated during the day	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_TMPLT_VW	C1610C_INATTNTN_CD	VARCHAR2 (1)	N	C1610C Inattention	The data in this column indicates whether or not the patient had difficulty focusing attention	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_TMPLT_VW	C1610D_DISORGNZ_THNKG_CD	VARCHAR2 (1)	N	C1610D Disorganized Thinking	The data in this column indicates whether or not the patient experienced disorganized thinking	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_TMPLT_VW	C1610E1_ALERT_CONSCS_CD	VARCHAR2 (1)	N	C1610E1 Alert Conscious	The data in this column indicates if the patient's level of consciousness was alert (normal) during	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_TMPLT_VW	C1610E2_ALTRD_CONSCS_CD	VARCHAR2 (1)	N	C1610E2 Altered Consciousness	The data in this column indicates if the patient's level of consciousness was abnormal (Vigilant	LTCH_YES_NO_NOT_ASSESS_BLANK
LTCH_ASMT_TMPLT_VW	C_BIRTH_DT_SBMT_CD	VARCHAR2 (1)	N	Calculated Birth Date Submit	This column indicates the type of partial birth date that was submitted (year only or month and	LTCH_BIRTH_DT_SBMT_CD
LTCH_ASMT_TMPLT_VW	C_CCN_NUM	VARCHAR2 (12)	N	Calculated CMS Certification Number (CCN)	This column contains the system calculated CMS Certification Number (CCN).	
LTCH_ASMT_TMPLT_VW	C_HICN_MBI_IND	VARCHAR2 (1)	N	Calculated HICN/MBI Indicator	This value is populated by the ASAP system during file processing and indicates the type of	
LTCH_ASMT_TMPLT_VW	C_RSDNT_AGE_NUM	NUMBER (3)	N	Calculated Resident Age Number	This column contains the system calculated resident age number.	
LTCH_ASMT_TMPLT_VW	C_SSNRI_TRNSLTN_HICN_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation HICN Text	This is the patient's Health Insurance Claim Number [HICN] or Railroad Retirement Board	
LTCH_ASMT_TMPLT_VW	C_SSNRI_TRNSLTN_MBI_TXT	VARCHAR2 (12)	N	Calculated SSNRI Translation MBI Text	This is the patient's Medicare Beneficiary Identifier [MBI] that is returned from the Social	
LTCH_ASMT_TMPLT_VW	DATA_END	CHAR (1)	N	Data End	This column is used to indicate the end of the data and is always '%'	
LTCH_ASMT_TMPLT_VW	FAC_ID	VARCHAR2 (40)	N	Facility ID	This indicates the ID used by the facility for submission purposes.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	GG0100B_INDR_MBLTY_CD	VARCHAR2 (1)	N	GG0100B Indoor Mobility	The data in this column indicates the patient's need for assistance with walking from room to	LTCH_MBLTY_CD
LTCH_ASMT_TMPLT_VW	GG0110A_MNL_WLCHR_CD	VARCHAR2 (1)	N	GG0110A Manual Wheelchair	The data in this column indicates if the patient used a manual wheelchair prior to the current	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	GG0110B_MTR_WLCHR_CD	VARCHAR2 (1)	N	GG0110B Motorized Wheelchair and/or Scooter	The data in this column indicates if the patient used a motorized wheelchair and/or scooter prior	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	GG0110C_MCHNCL_LFT_CD	VARCHAR2 (1)	N	GG0110C Mechanical Lift	The data in this column indicates if the patient used a mechanical lift prior to the current illness,	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	GG0110Z_NO_MBLTY_CD	VARCHAR2 (1)	N	GG0110Z No Mobility	The data in this column indicates the patient did not previously use any type of mobility device	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	GG0130A1_EATG_SELF_ADM SN_CD	VARCHAR2 (2)	N	GG0130A1 Eating: Admission	This indicates the level of assistance required for eating during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0130A2_EATG_SELF_GOAL_CD	VARCHAR2 (2)	N	GG0130A2 Eating: Goal	This indicates the patient's goal for eating independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0130A3_EATG_SELF_DSC HRG_CD	VARCHAR2 (2)	N	GG0130A3 Eating: Discharge	This indicates the level of assistance required for eating at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0130B1_ORAL_HYGNE_A DMSN_CD	VARCHAR2 (2)	N	GG0130B1 Oral Hygiene: Admission	This indicates the level of assistance required for oral hygiene during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0130B2_ORAL_HYGNE_GOAL_CD	VARCHAR2 (2)	N	GG0130B2 Oral Hygiene: Goal	This indicates the patient's goal for oral hygiene independence.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0130B3_ORAL_HYGNE_DS CHRГ_CD	VARCHAR2 (2)	N	GG0130B3 Oral Hygiene: Discharge	This indicates the level of assistance required with oral hygiene at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0130C1_TOILT_HYGNE_A DMSN_CD	VARCHAR2 (2)	N	GG0130C1 Toileting Hygiene: Admission	This indicates the level of assistance required for toileting during the admission time period.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0130C2_TOILT_HYGNE_GOAL_CD	VARCHAR2 (2)	N	GG0130C2 Toileting Hygiene: Goal	This indicates the patient's goal for toileting hygiene independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0130C3_TOILT_HYGNE_DS CHRГ_CD	VARCHAR2 (2)	N	GG0130C3 Toileting Hygiene: Discharge	This indicates the level of assistance required for toileting at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0130D1_WASH_UPR_ADM SN_CD	VARCHAR2 (2)	N	GG0130D1 Wash Upper Body: Admission	This indicates the level of assistance required to wash upper body during the admission time	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0130D2_WASH_UPR_GOAL_CD	VARCHAR2 (2)	N	GG0130D2 Wash Upper Body: Goal	This indicates the patient's goal for wash upper body independence at the time of discharge.	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0130D3_WASH_UPR_DSC HRГ_CD	VARCHAR2 (2)	N	GG0130D3 Wash Upper Body: Discharge	This indicates the level of assistance required to wash upper body at the time of discharge.	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0160A_ROLL_LEFT_RGHT_CD	VARCHAR2 (2)	N	GG0160A Roll Left and Right	The data in this column indicates the patient's ability to roll from lying on back to the left and	LTCH_ASTNC_LVL_VS_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	GG0160B_SIT_LYNG_CD	VARCHAR2 (2)	N	GG0160B Sit to Lying	The data in this column indicates the patient's ability to go from a sitting position on the side of	LTCH_ASTNC_LVL_VS_CD
LTCH_ASMT_TMPLT_VW	GG0160C_LYNG_STTG_BED_CD	VARCHAR2 (2)	N	GG0160C Lying to Sitting on Side of Bed	The data in this column indicates the patient's ability to safely go from lying on the bed to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170A1_ROLL_ADMSN_CD	VARCHAR2 (2)	N	GG0170A1 Roll Left and Right: Admission	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170A2_ROLL_GOAL_CD	VARCHAR2 (2)	N	GG0170A2 Roll Left and Right: Goal	The data in this column indicates the patient's level of assistance goal for roll from lying on	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0170A3_ROLL_DSCHRG_CD	VARCHAR2 (2)	N	GG0170A3 Roll Left and Right: Discharge	The data in this column indicates the patient's level of assistance needed to roll from lying on	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170B1_SIT_ADMSN_CD	VARCHAR2 (2)	N	GG0170B1 Sit to Lying: Admission	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170B2_SIT_GOAL_CD	VARCHAR2 (2)	N	GG0170B2 Sit to Lying: Goal	The data in this column indicates the patient's level of assistance goal for going from a sitting	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0170B3_SIT_DSCHRG_CD	VARCHAR2 (2)	N	GG0170B3 Sit to Lying: Discharge	The data in this column indicates the patient's level of assistance needed to go from a sitting	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170C1_LYNG_ADMSN_CD	VARCHAR2 (2)	N	GG0170C1 Lying to Sitting on Side of Bed: Admission	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170C2_LYNG_GOAL_CD	VARCHAR2 (2)	N	GG0170C2 Lying to Sitting on Side of Bed: Goal	The data in this column indicates the patient's level of assistance goal for going from safely	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0170C3_LYNG_DSCHRG_CD	VARCHAR2 (2)	N	GG0170C3 Lying to Sitting on Side of Bed: Discharge	The data in this column indicates the patient's level of assistance needed to go safely from	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170D1_STAND_ADMSN_CD	VARCHAR2 (2)	N	GG0170D1 Sit to Stand: Admission	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170D2_STAND_GOAL_CD	VARCHAR2 (2)	N	GG0170D2 Sit to Stand: Goal	The data in this column indicates the patient's level of assistance goal to safely come to a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0170D3_STAND_DSCHRG_CD	VARCHAR2 (2)	N	GG0170D3 Sit to Stand: Discharge	The data in this column indicates the patient's level of assistance needed to safely come to a	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170E1_CHR_TRNSF_ADM_SN_CD	VARCHAR2 (2)	N	GG0170E1 Chair/Bed Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170E2_CHR_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170E2 Chair/Bed Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely transfer to and	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0170E3_CHR_TRNSF_DSC_HRG_CD	VARCHAR2 (2)	N	GG0170E3 Chair/Bed Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely transfer to	LTCH_ASTNC_LVL_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	GG0170F1_TOILT_TRNSF_ADMSN_CD	VARCHAR2 (2)	N	GG0170F1 Toilet Transfer: Admission	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170F2_TOILT_TRNSF_GOAL_CD	VARCHAR2 (2)	N	GG0170F2 Toilet Transfer: Goal	The data in this column indicates the patient's level of assistance goal to safely get on and off a	LTCH_ASTNC_LVL_GOAL_CD
LTCH_ASMT_TMPLT_VW	GG0170F3_TOILT_TRNSF_DSCHRG_CD	VARCHAR2 (2)	N	GG0170F3 Toilet Transfer: Discharge	The data in this column indicates the patient's level of assistance needed to safely get on and	LTCH_ASTNC_LVL_CD
LTCH_ASMT_TMPLT_VW	GG0170H1_WLK_ADMSN_CD	VARCHAR2 (1)	N	GG0170H1 Walk: Admission	The data in this column indicates the patient's ability to walk during the admission time period.	LTCH_WLK_CD
LTCH_ASMT_TMPLT_VW	GG0170H3_WLK_DSCHRG_CD	VARCHAR2 (1)	N	GG0170H3 Walk Code: Discharge	The data in this column indicates the patient's ability to walk at the time of discharge.	LTCH_WLK_YES_NO_CD
LTCH_ASMT_TMPLT_VW	GG0170I1_WLK_10_ADMSN_CD	VARCHAR2 (2)	N	GG0170I1 Walk 10 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk ten feet in a	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170I2_WLK_10_GOAL_CD	VARCHAR2 (2)	N	GG0170I2 Walk 10 Feet: Goal	The data in this column indicates the patient's goal for level of assistance for walking 10 feet in	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170I3_WLK_10_DSCHRG_CD	VARCHAR2 (2)	N	GG0170I3 Walk 10 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk ten feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170J1_WLK_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170J1 Walk 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170J2_WLK_50_GOAL_CD	VARCHAR2 (2)	N	GG0170J2 Walk 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to walk 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170J3_WLK_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170J3 Walk 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to walk 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170K1_WLK_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170K1 Walk 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to walk 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170K2_WLK_150_GOAL_CD	VARCHAR2 (2)	N	GG0170K2 Walk 150 Feet: Goal	The data in this column indicates the patient's level of assistance goal to walk 150 feet and	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170K3_WLK_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170K3 Walk 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to walk 150 feet at the	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170Q1_WLCHR_ADMSN_CD	VARCHAR2 (1)	N	GG0170Q1 Wheelchair and/or Scooter: Admission	The data in this column indicates if the patient uses a wheelchair and/or scooter during the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	GG0170Q3_WLCHR_DSCHRG_CD	VARCHAR2 (1)	N	GG0170Q3 Wheelchair and/or Scooter: Discharge	The data in this column indicates if the patient uses a wheelchair and/or scooter at the time of	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	GG0170R1_WHL_50_ADMSN_CD	VARCHAR2 (2)	N	GG0170R1 Wheelchair 50 Feet with Two Turns: Admission	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD

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LTCH_ASMT_TMPLT_VW	GG0170R2_WHL_50_GOAL_CD	VARCHAR2 (2)	N	GG0170R2 Wheelchair 50 Feet with Two Turns: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 50	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170R3_WHL_50_DSCHRG_CD	VARCHAR2 (2)	N	GG0170R3 Wheelchair 50 Feet with Two Turns: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 50 feet and	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170RR1_WHLCHR_50_ADMSN_CD	VARCHAR2 (1)	N	GG0170RR1 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_TMPLT_VW	GG0170RR3_WHLCHR_50_DSCHRG_CD	VARCHAR2 (1)	N	GG0170RR3 Wheel 50 Feet Two Turns: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_TMPLT_VW	GG0170S1_WHL_150_ADMSN_CD	VARCHAR2 (2)	N	GG0170S1 Wheelchair 150 Feet: Admission	The data in this column indicates the patient's level of assistance needed to wheel 150 feet	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170S2_WHL_150_GOAL_CD	VARCHAR2 (2)	N	GG0170S2 Wheelchair 150 Feet: Goal	The data in this column indicates the patient's goal for level of assistance needed to wheel 150	LTCH_ASTNC_LVL_GOAL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170S3_WHL_150_DSCHRG_CD	VARCHAR2 (2)	N	GG0170S3 Wheelchair 150 Feet: Discharge	The data in this column indicates the patient's level of assistance needed to wheel 150 feet at	LTCH_ASTNC_LVL_SKIP_CD
LTCH_ASMT_TMPLT_VW	GG0170SS1_WHLCHR_150_ADMSN_CD	VARCHAR2 (1)	N	GG0170SS1 Wheel 150 Feet: Type of Wheelchair or Scooter Admission	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_TMPLT_VW	GG0170SS3_WHLCHR_150_DSCHRG_CD	VARCHAR2 (1)	N	GG0170SS3 Wheel 150 Feet: Type of Wheelchair or Scooter Discharge	The data in this column indicates the type of wheelchair or scooter used, manual or	LTCH_WHLCHR_CD
LTCH_ASMT_TMPLT_VW	H0350_URNRY_CNTNC_CD	VARCHAR2 (1)	N	H0350 Urinary Continence	The data in this column indicates the patient's bladder continence over a three day assessment	LTCH_URNRY_CNTNC_CD
LTCH_ASMT_TMPLT_VW	H0400_BWL_CNTNC_CD	VARCHAR2 (1)	N	H0400 Bowel Continence	The data in this column indicates the patient's level of bowel continence.	LTCH_CNTNC_CD
LTCH_ASMT_TMPLT_VW	I0050A_OTH_MDCL_COND_CD	VARCHAR2 (8)	N	I0050A Other Medical Condition	The data in this column indicates the patient's primary medical condition ICD code.	
LTCH_ASMT_TMPLT_VW	I0050_PRMRY_MDCL_COND_CD	VARCHAR2 (1)	N	I0050 Primary Medical Condition	The data in this column indicates the patient's primary medical condition category. Valid	LTCH_PRMRY_MDCL_COND_CD
LTCH_ASMT_TMPLT_VW	I0101_MTSTIC_CNCR_CD	VARCHAR2 (1)	N	I0101 Severe and Metastatic Cancers	This column indicates if the patient has been diagnosed with Severe and Metastatic Cancers.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I0103_METS_CNCR_CD	VARCHAR2 (1)	N	I0103 Metastatic Cancer	The data in this column indicates if the patient has been diagnosed with metastatic cancer.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I0104_SVR_CNCR_CD	VARCHAR2 (1)	N	I0104 Severe Cancer	The data in this column indicates if the patient has been diagnosed with severe cancer.	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	I0605_SVR_LVSD_LVEF_CD	VARCHAR2 (1)	N	I0605 Severe Left Systolic/Ventricular Dysfunction	The data in this column indicates if the patient has been diagnosed with severe left	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I0900_PVD_CD	VARCHAR2 (1)	N	I0900 Peripheral Vascular Disease (PVD) or Peripheral Arterial Disease (PAD)	This column indicates if a patient has been diagnosed with Peripheral Vascular Disease	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I1501_KDNY_5_CD	VARCHAR2 (1)	N	I1501 Chronic Kidney Disease, State 5	This column indicates if the patient has been diagnosed with Chronic Kidney Disease, Stage	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I1502_RNL_FAILR_CD	VARCHAR2 (1)	N	I1502 Acute Renal Failure	This column indicates if the patient has been diagnosed with Acute Renal Failure.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I2101_SEPSIS_CD	VARCHAR2 (1)	N	I2101 Septicemia, Sepsis, Systemic Inflammatory Response Syndrome/Shock	This column indicates if the patient has been diagnosed with Septicemia, Sepsis or Systemic	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I2600_CNS_INFCTN_CD	VARCHAR2 (1)	N	I2600 Central Nervous System Infections, Opportunistic Infections, Bone/Joint/Muscle Infections/Necrosis	This column indicates if the patient has been diagnosed with Central Nervous System	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I2900_DM_CD	VARCHAR2 (1)	N	I2900 Diabetes Mellitus (DM)	This column indicates if a patient has been diagnosed with Diabetes Mellitus (DM).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I4100_LWR_LIMB_AMPUTT_N_CD	VARCHAR2 (1)	N	I4100 Major Lower Limb Amputation	This column indicates if the patient has been diagnosed with Major Lower Limb Amputation.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I4501_STRK_CD	VARCHAR2 (1)	N	I4501 Stroke	This column indicates if a patient has been diagnosed with a stroke.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I4801_DMNT_CD	VARCHAR2 (1)	N	I4801 Dementia	This column indicates if a patient has been diagnosed with dementia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I4900_HEMIPLG_CD	VARCHAR2 (1)	N	I4900 Hemiplegia or Hemiparesis	This column indicates if a patient has been diagnosed with Hemiplegia or Hemiparesis.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5000_PARAPLG_CD	VARCHAR2 (1)	N	I5000 Paraplegia	This column indicates if a patient has been diagnosed with Paraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5101_TETRAPLG_CD	VARCHAR2 (1)	N	I5101 Complete Tetraplegia	This column indicates if a patient has been diagnosed with Complete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5102_INCMPLT_TETRAPLG_CD	VARCHAR2 (1)	N	I5102 Incomplete Tetraplegia	This column indicates if a patient has been diagnosed with Incomplete Tetraplegia.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5110_SPNL_CORD_CD	VARCHAR2 (1)	N	I5110 Other Spinal Cord Disorder/Injury	This column indicates if a patient has been diagnosed with Other Spinal Cord	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5200_MS_CD	VARCHAR2 (1)	N	I5200 Multiple Sclerosis (MS)	This column indicates if a patient has been diagnosed with Multiple Sclerosis (MS).	LTCH_CHKLIST_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	I5250_HNTGTN_CD	VARCHAR2 (1)	N	I5250 Huntingtons Disease	This column indicates if a patient has been diagnosed with Huntington's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5300_PRKNSN_CD	VARCHAR2 (1)	N	I5300 Parkinsons Disease	This column indicates if a patient has been diagnosed with Parkinson's disease.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5450_ALS_CD	VARCHAR2 (1)	N	I5450 Amyotrophic Lateral Sclerosis	This column indicates if a patient has been diagnosed with Amyotrophic Lateral Sclerosis	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5455_PROGRS_NRMSCLR_DEASE_CD	VARCHAR2 (1)	N	I5455 Other Progressive Neuromuscular Disease	The data in this column indicates if the patient has been diagnosed with other progressive	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5460_LKIN_STATE_CD	VARCHAR2 (1)	N	I5460 Locked-In State	This column indicates if a patient has been diagnosed with Locked-In State.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5470_SVR_BRN_DMG_CD	VARCHAR2 (1)	N	I5470 Severe Anoxic Brain Damage, Cerebral Edema, or Compression of Brain	This column indicates if a patient has been diagnosed with Severe Anoxic Brain Damage,	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5480_OTHR_SVR_NRLGCL_CD	VARCHAR2 (1)	N	I5480 Other Severe Neurological Injury, Disease or Dysfunction	The data in this column indicates if the patient has been diagnosed with other severe	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5600_MALNTRTN_CD	VARCHAR2 (1)	N	I5600 Malnutrition	This column indicates if a patient has been diagnosed with malnutrition.	LTCH_CHKLIST_NOT_ASSESS_VS
LTCH_ASMT_TMPLT_VW	I5601_CAL_MALNTRTN_CD	VARCHAR2 (1)	N	I5601 Malnutrition (Protein or Calorie)	This column indicates if a patient has been diagnosed with Malnutrition (protein or calorie).	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I5602_RSK_MALNTRTN_CD	VARCHAR2 (1)	N	I5602 At Risk for Malnutrition	This column indicates if a patient has been diagnosed as At Risk for Malnutrition.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I7100_LUNG_TRNSPLNT_CD	VARCHAR2 (1)	N	I7100 Lung Transplant	The data in this column indicates if the patient has had a lung transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I7101_HRT_TRNSPLNT_CD	VARCHAR2 (1)	N	I7101 Heart Transplant	The data in this column indicates if the patient has had a heart transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I7102_LVR_TRNSPLNT_CD	VARCHAR2 (1)	N	I7102 Liver Transplant	The data in this column indicates if the patient has had a liver transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I7103_KDNY_TRNSPLNT_CD	VARCHAR2 (1)	N	I7103 Kidney Transplant	The data in this column indicates if the patient has had a kidney transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I7104_BONE_MRW_TRNSPLNT_CD	VARCHAR2 (1)	N	I7104 Bone Marrow Transplant	The data in this column indicates if the patient has had a bone marrow transplant.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	I7900_NO_ACTV_DEASE_CD	VARCHAR2 (1)	N	I7900 No Active Disease	This column indicates that a patient has no other diagnoses.	LTCH_CHKLIST_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	ITM_SET_VRSN_CD	VARCHAR2 (10)	N	Item Set Version Code	This value represents the version of the item set that was completed by the facility.	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	J1800_FALL_LAST_ASMT_CD	VARCHAR2 (1)	N	J1800 Any Falls Since Admission	This column indicates if the patient has had any falls since admission.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	J1900A_FALL_NO_INJURY_CD	VARCHAR2 (1)	N	J1900A No Injury Fall	This column indicates the number of falls code without injury a patient has had since admission.	LTCH_NUM_FALL_CD
LTCH_ASMT_TMPLT_VW	J1900B_FALL_INJURY_CD	VARCHAR2 (1)	N	J1900B Injury Except Major Fall	This column indicates the number of falls code with injury (except major) a patient has had	LTCH_NUM_FALL_CD
LTCH_ASMT_TMPLT_VW	J1900C_FALL_MAJ_INJURY_CD	VARCHAR2 (1)	N	J1900C Major Injury Fall	This column indicates the number of falls code with major injury falls a patient has had since	LTCH_NUM_FALL_CD
LTCH_ASMT_TMPLT_VW	K0200A_HGT_NUM	VARCHAR2 (2)	N	K0200A Height	The data in this column contains the patient's height in inches.	
LTCH_ASMT_TMPLT_VW	K0200B_WT_NUM	VARCHAR2 (3)	N	K0200B Weight	The data in this column contains the patient's weight in pounds.	
LTCH_ASMT_TMPLT_VW	LTCH_ASMT_ID	NUMBER (22)	N	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ASMT_TMPLT_VW	LTCH_ITM_SBST_CD	VARCHAR2 (3)	N	LTCH Item Subset Code	This code indicates the type of assessment that was submitted.	LTCH_ITM_SBST
LTCH_ASMT_TMPLT_VW	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_ASMT_TMPLT_VW	M0210_STG_1_HGHR_ULCR_CD	VARCHAR2 (1)	N	M0210 One or More Unhealed Pressure Ulcers/Injuries	The data in this column indicates if a patient has one or more unhealed pressure ulcers/injuries.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	M0300A_STG_1_ULCR_NUM	VARCHAR2 (1)	N	M0300A Number of Stage 1 Pressure Injuries	The data in this column indicates the number of Stage 1 pressure injuries present.	
LTCH_ASMT_TMPLT_VW	M0300B1_STG_2_ULCR_NUM	VARCHAR2 (1)	N	M0300B1 Number of Stage 2 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 2 pressure ulcers.	
LTCH_ASMT_TMPLT_VW	M0300B2_STG_2_ULCR_ADM_SN_NUM	VARCHAR2 (1)	N	M0300B2 Number of Stage 2 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 2 pressure ulcers that were present on Admission	
LTCH_ASMT_TMPLT_VW	M0300B3_STG_2_ULCR_OLD_DT	VARCHAR2 (8)	N	M0300B3 Date of Oldest Stage 2 Pressure Ulcer	The data in this column indicates the date of the oldest Stage 2 pressure ulcer.	
LTCH_ASMT_TMPLT_VW	M0300C1_STG_3_ULCR_NUM	VARCHAR2 (1)	N	M0300C1 Number of Stage 3 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 3 pressure ulcers.	
LTCH_ASMT_TMPLT_VW	M0300C2_STG_3_ULCR_ADM_SN_NUM	VARCHAR2 (1)	N	M0300C2 Number of Stage 3 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 3 pressure ulcers that were present on Admission	
LTCH_ASMT_TMPLT_VW	M0300D1_STG_4_ULCR_NUM	VARCHAR2 (1)	N	M0300D1 Number of Stage 4 Pressure Ulcers	The data in this column indicates the current number of unhealed Stage 4 pressure ulcers.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	M0300D2_STG_4_ULCR_ADM SN_NUM	VARCHAR2 (1)	N	M0300D2 Number of Stage 4 Pressure Ulcers Present on Admission	The data in this column indicates the number of Stage 4 pressure ulcers that were present on Admission	
LTCH_ASMT_TMPLT_VW	M0300E1_UNSTGBL_ULCR_D RSNG_NUM	VARCHAR2 (1)	N	M0300E1 Number of Current Unstageable Pressure Ulcers/Injuries Due to Non-removable Dressing or Device	This indicates the number of pressure ulcers/injuries that are unstageable due to the	
LTCH_ASMT_TMPLT_VW	M0300E2_U_ULCR_DRNG_A DMSN_NUM	VARCHAR2 (1)	N	M0300E2 Number of Unstageable Pressure Ulcers/Injuries With a Non-removable Dressing That Were Present Upon Admission	The data in this column indicates the number of unstageable pressure ulcers/injuries with a non-	
LTCH_ASMT_TMPLT_VW	M0300F1_UNSTGBL_ULCR_E SC_NUM	VARCHAR2 (1)	N	M0300F1 Number of Unstageable Pressure Ulcers With Slough or Eschar	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_TMPLT_VW	M0300F2_U_ULCR_ESC_ADM SN_NUM	VARCHAR2 (1)	N	M0300F2 Number of Unstageable Pressure Ulcers With Slough or Eschar on Admission	The data in this column indicates the current number of unstageable pressure ulcers due to	
LTCH_ASMT_TMPLT_VW	M0300G1_UNSTGBL_ULCR_D EEP_NUM	VARCHAR2 (1)	N	M0300G1 Number of Current Unstageable Pressure Injuries Presenting as Deep Tissue Injury	This indicates the current number of unstageable pressure injuries presenting as deep tissue	
LTCH_ASMT_TMPLT_VW	M0300G2_U_ULCR_DEEP_AD MSN_NUM	VARCHAR2 (1)	N	M0300G2 Number of Unstageable Pressure Injuries That Were Present Upon Admission	This indicates the number of the unstageable pressure injuries presenting as deep tissue injury	
LTCH_ASMT_TMPLT_VW	M0610A_STG_3_4_ULCR_LN GTH_NUM	VARCHAR2 (4)	N	M0610A Pressure Ulcer Length	The data in this column contains the length of the largest pressure ulcer in centimeters.	
LTCH_ASMT_TMPLT_VW	M0610B_STG_3_4_ULCR_WD TH_NUM	VARCHAR2 (4)	N	M0610B Pressure Ulcer Width	The data in this column contains the width of the largest pressure ulcer in centimeters.	
LTCH_ASMT_TMPLT_VW	M0610C_STG_3_4_ULCR_DPT H_NUM	VARCHAR2 (4)	N	M0610C Pressure Ulcer Depth	The data in this column contains the depth of the largest pressure ulcer in centimeters.	
LTCH_ASMT_TMPLT_VW	M0700_ULCR_TISUE_TYPE_C D	VARCHAR2 (1)	N	M0700 Most Severe Pressure Ulcer Tissue Type	The data in this column indicates the most severe type of tissue present in any pressure	LTCH_ULCR_TISUE_TYPE_CD
LTCH_ASMT_TMPLT_VW	M0800A_WRSNG_STG_2_ULC R_NUM	VARCHAR2 (1)	N	M0800A Worsening Pressure Ulcer Since Prior Assessment Number: Stage 2	The data in this column indicates the number of current Stage 2 pressure ulcers that were not	
LTCH_ASMT_TMPLT_VW	M0800B_WRSNG_STG_3_ULC R_NUM	VARCHAR2 (1)	N	M0800B Worsening Pressure Ulcer Since Prior Assessment Number: Stage 3	The data in this column indicates the number of current Stage 3 pressure ulcers that were not	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	M0800C_WRSNG_STG_4_ULC R_NUM	VARCHAR2 (1)	N	M0800C Worsening Pressure Ulcer Since Prior Assessment Number: Stage 4	The data in this column indicates the number of current Stage 4 pressure ulcers that were not	
LTCH_ASMT_TMPLT_VW	M0800D_WRSNG_DRNG_NU M	VARCHAR2 (1)	N	M0800D Worsening Unstageable Non-removable dressing Ulcer Number	The data in this column indicates the number of current Unstageable Non-removable dressing	
LTCH_ASMT_TMPLT_VW	M0800E_WRSNG_ESC_NUM	VARCHAR2 (1)	N	M0800E Worsening Unstageable-Slough an/or eschar Ulcer Number	The data in this column indicates the number of current Unstageable Slough and or eschar	
LTCH_ASMT_TMPLT_VW	M0800F_WRSNG_DEEP_NUM	VARCHAR2 (1)	N	M0800F Worsening Unstageable-Deep tissue injury Ulcer Number	The data in this column indicates the number of current Unstageable Deep Tissue injury pressure	
LTCH_ASMT_TMPLT_VW	N2001_DRUG_RGMN_RVW_C D	VARCHAR2 (1)	N	N2001 Drug Regimen Review	The data in this column indicates whether a complete drug regimen review identified	LTCH_DRUG_RGMN_RVW_CD
LTCH_ASMT_TMPLT_VW	N2003_PHYSN_MDCTN_FLW P_CD	VARCHAR2 (1)	N	N2003 Medication Follow-up	The data in this column indicates whether the facility contacted the physician (or physician-	LTCH_YES_NO_NO_INFO_BLA NK
LTCH_ASMT_TMPLT_VW	N2005_PHYSN_MDCTN_INTR VTN_CD	VARCHAR2 (1)	N	N2005 Medication Intervention	The data in this column indicates whether the facility contacted and completed the physician	LTCH_DRUG_YES_NO_CD
LTCH_ASMT_TMPLT_VW	O0100F3_VNTLTR_WNNG_C D	VARCHAR2 (1)	N	O0100F3 Special Treatments, Procedures, Programs-Respiratory: Ventilator Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: weaning at the	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	O0100F4_VNTLTR_CD	VARCHAR2 (1)	N	O0100F4 Special Treatments, Procedures, Programs-Respiratory: Ventilator Non-Weaning	This column indicates that the patient was on an Invasive Mechanical Ventilator: non-weaning at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	O0100G_CPAP_CD	VARCHAR2 (1)	N	O0100G Special Treatments, Procedures, Programs-Respiratory: Non-Invasive Ventilator (BIPAP, CPAP)	This column indicates that the patient was on a non-invasive ventilator (e.g., BIPAP, CPAP) at	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	O0100H2A_VASOACTV_MDC TN_CD	VARCHAR2 (1)	N	O0100H2A Vasoactive Medications	The data in this column indicates whether the patient received intravenous vasoactive	LTCH_CHKLIST_NO_INFO_BLA NK
LTCH_ASMT_TMPLT_VW	O0100H_IV_MDCTN_CD	VARCHAR2 (1)	N	O0100H IV Medications	The data in this column indicates whether IV medication was required.	LTCH_CHKLIST_NO_INFO_BLA NK
LTCH_ASMT_TMPLT_VW	O0100J_DLYS_CD	VARCHAR2 (1)	N	O0100J Special Treatments, Procedures, Programs-Other Treatments: Dialysis	This column indicates that the patient's treatment plan included dialysis at the time of admission.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	O0100N_TOT_PRNTRL_CD	VARCHAR2 (1)	N	O0100N Special Treatments, Procedures, Programs-Other Treatments: Total Parenteral Nutrition	This column indicates that the patient's treatment plan included Total Parenteral Nutrition at the	LTCH_YES_NO_NOT_ASSESS

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	O0100Z_NO_TRTMT_CD	VARCHAR2 (1)	N	O0100Z Special Treatments, Procedures, Programs-Other Treatments: No Other Treatment	This column indicates that the patient was not receiving any special treatments, procedures or	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	O0150A_INVSV_MCHNCL_SPRT_CD	VARCHAR2 (1)	N	O0150A SBT: Invasive Mechanical Ventilation Support Admission	The data in this column indicates whether the patient was receiving invasive mechanical	LTCH_INVSV_MCHNCL_SPRT_CD
LTCH_ASMT_TMPLT_VW	O0150B_ASSESS_RDNS_SBT_CD	VARCHAR2 (1)	N	O0150B SBT: Assessed for SBT Readiness by Day 2 of LTCH Stay	The data in this column indicates whether the patient was assessed for readiness for	LTCH_YES_NO_NO_INFO_BLANK
LTCH_ASMT_TMPLT_VW	O0150C_MDCLY_READY_SBT_CD	VARCHAR2 (1)	N	O0150C SBT: Deemed Medically Ready by Day 2 of LTCH Stay	The data in this column indicates whether the patient was deemed medically ready for	LTCH_YES_NO_NO_INFO_BLANK
LTCH_ASMT_TMPLT_VW	O0150D_DCMTN_UNREADY_SBT_CD	VARCHAR2 (1)	N	O0150D SBT: Documentation of Reason(s) - Patient Unready	The data in this column indicates whether there is documentation of reason(s) in the patient's	LTCH_YES_NO_NO_INFO_BLANK
LTCH_ASMT_TMPLT_VW	O0150E_SBT_PRFMCD_CD	VARCHAR2 (1)	N	O0150E SBT Performed by Day 2	The data in this column indicates whether Spontaneous Breathing Trial (SBT) was	LTCH_YES_NO_NO_INFO_BLANK
LTCH_ASMT_TMPLT_VW	O0200A_LBRTRN_STUS_CD	VARCHAR2 (1)	N	O0200A Invasive Mechanical Ventilator: Liberation Status at Discharge	The data in this column indicates whether the patient was fully liberated from the invasive	LTCH_LBRTRN_STUS_CD
LTCH_ASMT_TMPLT_VW	O0250A_INFLNZ_RCVD_CD	VARCHAR2 (1)	N	O0250A Influenza Received Code	The data in this column indicates whether the patient received the influenza vaccination.	LTCH_YES_NO_NOT_ASSESS
LTCH_ASMT_TMPLT_VW	O0250B_INFLNZ_RCVD_DT	VARCHAR2 (8)	N	O0250B Influenza Received Date	The data in this column indicates the date that the influenza vaccination was received.	
LTCH_ASMT_TMPLT_VW	O0250C_RSN_INFLNZ_NOT_RCVD_CD	VARCHAR2 (1)	N	O0250C Reason Influenza Not Received Code	The data in this column indicates the reason that the patient did not receive the influenza vaccine.	LTCH_RSN_INFLNZ_NOT_RCVD_CD
LTCH_ASMT_TMPLT_VW	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ASMT_TMPLT_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ASMT_TMPLT_VW	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
LTCH_ASMT_TMPLT_VW	RSDNT_MATCH_CRTIA_ID	NUMBER (2.0)	N	Resident Match Criteria ID	This value indicates which of the resident match criteria was assigned based on the patient	
LTCH_ASMT_TMPLT_VW	SBMTR_USER_ID	VARCHAR2 (30)	N	Submitter User ID	This column contains the User ID of the person who submitted the file.	
LTCH_ASMT_TMPLT_VW	SFTWR_PROD_NAME	VARCHAR2 (50)	N	Software Product Name	This is the name of the software that was used to create the LTCH data submission file.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ASMT_TMPLT_VW	SFTWR_PROD_VRSN_CD	VARCHAR2 (20)	N	Software Product Version Code	This is the version number of the software that was used to create the LTCH data submission	
LTCH_ASMT_TMPLT_VW	SFTWR_VNDR_ID	VARCHAR2 (9)	N	Software Vendor ID	This is the software vendor's Federal Employer Tax (EIN) ID.	
LTCH_ASMT_TMPLT_VW	SFW_EMAIL_ADR	VARCHAR2 (50)	N	Software Vendor Email Address	This column contains the software vendor's email address.	
LTCH_ASMT_TMPLT_VW	SFW_NAME	VARCHAR2 (30)	N	Software Vendor Name	This column contains the software vendor's name.	
LTCH_ASMT_TMPLT_VW	SPEC_VRSN_CD	VARCHAR2 (10)	N	Specification Version Code	This value represents the version of the data submission specifications that were used to	
LTCH_ASMT_TMPLT_VW	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ASMT_TMPLT_VW	SUBMSN_CMPLT_TS	DATE (8)	N	Submission Complete Timestamp	This column contains the date and time that the submission was complete.	
LTCH_ASMT_TMPLT_VW	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_ASMT_TMPLT_VW	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	
LTCH_ASMT_TMPLT_VW	Z0500B_RN_SGN_CMPLT_DT	VARCHAR2 (8)	N	Z0500B LTCH CARE Data Set Completion Date	This column contains the LTCH CARE data set completion date.	
LTCH_CDC_MSR	CLCTN_PRD_TXT	VARCHAR2 (8)	Y	Collection Period	The Quality Reporting Program submission period (i.e. 2011Q1, 2011M3).	
LTCH_CDC_MSR	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_CDC_MSR	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_CDC_MSR	FILE_NAME	VARCHAR2 (50)	N	File Name	Name of the file QIES received containing this data.	
LTCH_CDC_MSR	FINL_SW	VARCHAR2 (1)	N	Final Switch	Switch indicating whether data is considered final. Y indicates that yes, the data is final.	
LTCH_CDC_MSR	GRP_ADJST_SIR	NUMBER (12.3)	N	Adjusted SIR	Measure adjusted standardized infection ratio (calculated as: GRP_ADJST_SIR_NMRTR /	
LTCH_CDC_MSR	GRP_ADJST_SIR_CI_LWR_LMT	NUMBER (12.3)	N	Adjusted SIR Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_ADJST_SIR. Indication of precision	
LTCH_CDC_MSR	GRP_ADJST_SIR_CI_UPR_LMT	NUMBER (12.3)	N	Adjusted SIR Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_ADJST_SIR. Indication of precision	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_MSR	GRP_ADJST_SIR_DNMNTR	NUMBER (13.3)	N	Adjusted SIR Denominator	The adjusted number of predicted measure occurrences in locations in scope for quality	
LTCH_CDC_MSR	GRP_ADJST_SIR_NMRTR	NUMBER (9.3)	N	Adjusted SIR Numerator	The adjusted number of observed measure occurrences in locations in scope for quality	
LTCH_CDC_MSR	GRP_DVC_OR_PRCDR_CNT	NUMBER (9.0)	N	Device or Procedure Days Count	Number of device days in locations in scope for quality reporting or number of procedures	
LTCH_CDC_MSR	GRP_ICU_CNT	NUMBER (6.0)	N	ICU Count	Number of ICUs within the facility (0=No ICU locations mapped in NHSN).	
LTCH_CDC_MSR	GRP_RATE_CI_LWR_LMT	NUMBER (12.3)	N	Rate Confidence Interval Lower Limit	Lower bound of the confidence interval for GRP_RATE.	
LTCH_CDC_MSR	GRP_RATE_CI_UPR_LMT	NUMBER (12.3)	N	Rate Confidence Interval Upper Limit	Upper bound of the confidence interval for GRP_RATE.	
LTCH_CDC_MSR	GRP_RATE_DNMNTR	NUMBER (13.3)	N	Rate Denominator	Denominator of the rate of occurrence.	
LTCH_CDC_MSR	GRP_RATE_NMRTR	NUMBER (9.0)	N	Rate Numerator	Numerator of the rate of occurrence.	
LTCH_CDC_MSR	GRP_RATE_NUM	NUMBER (12.3)	N	Rate	The ratio of occurrence, which is the Numerator divided by the Denominator.	
LTCH_CDC_MSR	GRP_SCA_CNT	NUMBER (6.0)	N	Specialty Care Area Count	The number of SCAs within the facility (0=No SCA locations mapped in NHSN).	
LTCH_CDC_MSR	GRP_SIR	NUMBER (12.3)	N	SIR	The measure Standardized Infection Ratio (calculated as: GRP_SIR_NMRTR /	
LTCH_CDC_MSR	GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	SIR Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_SIR. Indication of precision and	
LTCH_CDC_MSR	GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	SIR Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_SIR. Indication of precision and	
LTCH_CDC_MSR	GRP_SIR_DNMNTR	NUMBER (13.3)	N	SIR Denominator	The predicted number of measure occurrences in locations in scope for quality reporting as the	
LTCH_CDC_MSR	GRP_SIR_NMRTR	NUMBER (9.0)	N	SIR Numerator	The observed number of measure occurrence in locations in scope for quality reporting as the	
LTCH_CDC_MSR	GRP_THRSHLD_IND	NUMBER (1.0)	N	Threshold Indicator	Threshold requirement for reporting that indicates whether or not a facility meets the	
LTCH_CDC_MSR	GRP_UNIT_RPTD_CNT	NUMBER (6.0)	N	Unit Reported Count	The number of ward or other units reported within the facility (0=No Ward/Other locations	
LTCH_CDC_MSR	LCTN_TYP_CD	VARCHAR2 (10)	Y	Location Type Code	Location type of the location reporting the data (i.e. ICU, WARD, ALL).	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_MSR	MSR_CD	VARCHAR2 (20)	Y	Measure Code	The unique name of the measure.	LTCH_CDC_MSR_CD
LTCH_CDC_MSR	RPT_GRP_CD	VARCHAR2 (60)	Y	Reporting Group Code	The reporting group code (Provider CCN Number, State Code, or US).	
LTCH_CDC_MSR	SUBMSN_CMPLT_CD	VARCHAR2 (1)	N	Submission Complete Code	The value in this column identifies whether the provider submitted monthly and quarterly CDC	
LTCH_CDC_MSR_HSTRY	CLCTN_PRD_TXT	VARCHAR2 (8)	N	Collection Period	The Quality Reporting Program submission period (i.e. 2011Q1, 2011M3).	
LTCH_CDC_MSR_HSTRY	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_CDC_MSR_HSTRY	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_CDC_MSR_HSTRY	FILE_NAME	VARCHAR2 (50)	N	File Name	Name of the file QIES received containing this data.	
LTCH_CDC_MSR_HSTRY	FINL_SW	VARCHAR2 (1)	N	Final Switch	Switch indicating whether data is considered final. Y indicates that yes, the data is final.	
LTCH_CDC_MSR_HSTRY	GRP_ADJST_SIR	NUMBER (12.3)	N	Adjusted SIR	Measure adjusted standardized infection ratio (calculated as: GRP_ADJST_SIR_NMRTR /	
LTCH_CDC_MSR_HSTRY	GRP_ADJST_SIR_CI_LWR_LMT	NUMBER (12.3)	N	Adjusted SIR Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_ADJST_SIR. Indication of precision	
LTCH_CDC_MSR_HSTRY	GRP_ADJST_SIR_CI_UPR_LMT	NUMBER (12.3)	N	Adjusted SIR Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_ADJST_SIR. Indication of precision	
LTCH_CDC_MSR_HSTRY	GRP_ADJST_SIR_DNMNTR	NUMBER (13.3)	N	Adjusted SIR Denominator	The adjusted number of predicted measure occurrences in locations in scope for quality	
LTCH_CDC_MSR_HSTRY	GRP_ADJST_SIR_NMRTR	NUMBER (9.0)	N	Adjusted SIR Numerator	The adjusted number of observed measure occurrences in locations in scope for quality	
LTCH_CDC_MSR_HSTRY	GRP_DVC_OR_PRCDR_CNT	NUMBER (9.0)	N	Device or Procedure Days Count	Number of device days in locations in scope for quality reporting or number of procedures	
LTCH_CDC_MSR_HSTRY	GRP_ICU_CNT	NUMBER (6.0)	N	ICU Count	Number of ICUs within the facility (0=No ICU locations mapped in NHSN).	
LTCH_CDC_MSR_HSTRY	GRP_RATE_CI_LWR_LMT	NUMBER (12.3)	N	Rate Confidence Interval Lower Limit	Lower bound of the confidence interval for GRP_RATE.	
LTCH_CDC_MSR_HSTRY	GRP_RATE_CI_UPR_LMT	NUMBER (12.3)	N	Rate Confidence Interval Upper Limit	Upper bound of the confidence interval for GRP_RATE.	
LTCH_CDC_MSR_HSTRY	GRP_RATE_DNMNTR	NUMBER (13.3)	N	Rate Denominator	Denominator of the rate of occurrence.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_MSR_HSTRY	GRP_RATE_NMRTR	NUMBER (9.0)	N	Rate Numerator	Numerator of the rate of occurrence.	
LTCH_CDC_MSR_HSTRY	GRP_RATE_NUM	NUMBER (12.3)	N	Rate	The ratio of occurrence, which is the Numerator divided by the Denominator.	
LTCH_CDC_MSR_HSTRY	GRP_SCA_CNT	NUMBER (6.0)	N	Specialty Care Area Count	The number of SCAs within the facility (0=No SCA locations mapped in NHSN).	
LTCH_CDC_MSR_HSTRY	GRP_SIR	NUMBER (12.3)	N	SIR	The measure Standardized Infection Ratio (calculated as: GRP_SIR_NMRTR /	
LTCH_CDC_MSR_HSTRY	GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	SIR Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_SIR. Indication of precision and	
LTCH_CDC_MSR_HSTRY	GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	SIR Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_SIR. Indication of precision and	
LTCH_CDC_MSR_HSTRY	GRP_SIR_DNMNTR	NUMBER (13.3)	N	SIR Denominator	The predicted number of measure occurrences in locations in scope for quality reporting as the	
LTCH_CDC_MSR_HSTRY	GRP_SIR_NMRTR	NUMBER (9.0)	N	SIR Numerator	The observed number of measure occurrence in locations in scope for quality reporting as the	
LTCH_CDC_MSR_HSTRY	GRP_THRSHLD_IND	NUMBER (1.0)	N	Threshold Indicator	Threshold requirement for reporting that indicates whether or not a facility meets the	
LTCH_CDC_MSR_HSTRY	GRP_UNIT_RPTD_CNT	NUMBER (6.0)	N	Unit Reported Count	The number of ward or other units reported within the facility (0=No Ward/Other locations	
LTCH_CDC_MSR_HSTRY	LCTN_TYP_CD	VARCHAR2 (10)	N	Location Type Code	Location type of the location reporting the data (i.e. ICU, WARD, ALL).	
LTCH_CDC_MSR_HSTRY	MSR_CD	VARCHAR2 (20)	N	Measure Code	The unique name of the measure.	LTCH_CDC_MSR_CD
LTCH_CDC_MSR_HSTRY	REC_CREAT_TS	TIMESTAMP(6) (11.6)	N	Record Create Timestamp	This is the date and time that the record was added to the history table.	
LTCH_CDC_MSR_HSTRY	REC_CREAT_USER_ID	VARCHAR2 (30)	N	Record Create User Id	This is the user ID that populated the record in the history table.	
LTCH_CDC_MSR_HSTRY	RPT_GRP_CD	VARCHAR2 (60)	N	Reporting Group Code	The reporting group code (Provider CCN Number, State Code, or US).	
LTCH_CDC_MSR_HSTRY	SUBMSN_CMPLT_CD	VARCHAR2 (1)	N	Submission Complete Code	The value in this column identifies whether the provider submitted monthly and quarterly CDC	
LTCH_CDC_MSR_VW	CLCTN_MO_QTR_TXT	VARCHAR2 (3)	N	Collection Month or Quarter	The month or quarter portion of the collection period field.	
LTCH_CDC_MSR_VW	CLCTN_PRD_TXT	VARCHAR2 (8)	N	Collection Period	The Quality Reporting Program submission period (i.e. 2011Q1, 2011M3).	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_MSR_VW	CLCTN_YR_TXT	VARCHAR2 (4)	N	Collection Year	The year portion of the collection period field.	
LTCH_CDC_MSR_VW	GRP_ADJST_SIR	NUMBER (12.3)	N	Adjusted SIR	Measure adjusted standardized infection ratio (calculated as: GRP_ADJST_SIR_NMRTR /	
LTCH_CDC_MSR_VW	GRP_ADJST_SIR_CI_LWR_LMT	NUMBER (12.3)	N	Adjusted SIR Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_ADJST_SIR. Indication of precision	
LTCH_CDC_MSR_VW	GRP_ADJST_SIR_CI_UPR_LMT	NUMBER (12.3)	N	Adjusted SIR Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_ADJST_SIR. Indication of precision	
LTCH_CDC_MSR_VW	GRP_ADJST_SIR_DNMNTR	NUMBER (13.3)	N	Adjusted SIR Denominator	The adjusted number of predicted measure occurrences in locations in scope for quality	
LTCH_CDC_MSR_VW	GRP_ADJST_SIR_NMRTR	NUMBER (9.3)	N	Adjusted SIR Numerator	The adjusted number of observed measure occurrences in locations in scope for quality	
LTCH_CDC_MSR_VW	GRP_DVC_OR_PRCDR_CNT	NUMBER (9.0)	N	Device or Procedure Days Count	Number of device days in locations in scope for quality reporting or number of procedures	
LTCH_CDC_MSR_VW	GRP_ICU_CNT	NUMBER (6.0)	N	ICU Count	Number of ICUs within the facility (0=No ICU locations mapped in NHSN).	
LTCH_CDC_MSR_VW	GRP_RATE_CI_LWR_LMT	NUMBER (12.3)	N	Rate Confidence Interval Lower Limit	Lower bound of the confidence interval for GRP_RATE.	
LTCH_CDC_MSR_VW	GRP_RATE_CI_UPR_LMT	NUMBER (12.3)	N	Rate Confidence Interval Upper Limit	Upper bound of the confidence interval for GRP_RATE.	
LTCH_CDC_MSR_VW	GRP_RATE_DNMNTR	NUMBER (13.3)	N	Rate Denominator	Denominator of the rate of occurrence.	
LTCH_CDC_MSR_VW	GRP_RATE_NMRTR	NUMBER (9.0)	N	Rate Numerator	Numerator of the rate of occurrence.	
LTCH_CDC_MSR_VW	GRP_RATE_NUM	NUMBER (12.3)	N	Rate	The ratio of occurrence, which is the Numerator divided by the Denominator.	
LTCH_CDC_MSR_VW	GRP_SCA_CNT	NUMBER (6.0)	N	Specialty Care Area Count	the number of SCAs within the facility (0=No SCA locations mapped in NHSN).	
LTCH_CDC_MSR_VW	GRP_SIR	NUMBER (12.3)	N	SIR	The measure Standardized Infection Ratio (calculated as: GRP_SIR_NMRTR /	
LTCH_CDC_MSR_VW	GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	SIR Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_SIR. Indication of precision and	
LTCH_CDC_MSR_VW	GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	SIR Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_SIR. Indication of precision and	
LTCH_CDC_MSR_VW	GRP_SIR_DNMNTR	NUMBER (13.3)	N	SIR Denominator	The predicted number of measure occurrences in locations in scope for quality reporting as the	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_MSR_VW	GRP_SIR_NMRTR	NUMBER (9.0)	N	SIR Numerator	The observed number of measure occurrence in locations in scope for quality reporting as the	
LTCH_CDC_MSR_VW	GRP_THRSHLD_IND	NUMBER (1.0)	N	Threshold Indicator	Threshold requirement for reporting that indicates whether or not a facility meets the	
LTCH_CDC_MSR_VW	GRP_UNIT_RPTD_CNT	NUMBER (6.0)	N	Unit Reported Count	The number of ward or other units reported within the facility (0=No Ward/Other locations	
LTCH_CDC_MSR_VW	LCTN_TYP_CD	VARCHAR2 (10)	N	Location Type Code	Location type of the location reporting the data (i.e. ICU, WARD, ALL).	
LTCH_CDC_MSR_VW	MSR_CD	VARCHAR2 (20)	N	Measure Code	The unique name of the measure.	LTCH_CDC_MSR_CD
LTCH_CDC_MSR_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	The Provider Internal Number for the provider based on the CCN number in the record. This	
LTCH_CDC_MSR_VW	PRVDR_ORGNL_PRTCPTN_DT	DATE (7)	N	Provider Original Participation Date	Original participation date of the provider based on the CCN number in the record. This will be	
LTCH_CDC_MSR_VW	PRVDR_TRMNTN_EXPRTN_DT	DATE (7)	N	Provider Termination Expiration Date	Termination or expiration date of the provider based on the CCN number in the record. This	
LTCH_CDC_MSR_VW	QIES_LOAD_DT	DATE (8)	N	QIES Load Date	The date that this record was loaded into QIES.	
LTCH_CDC_MSR_VW	RPT_GRP_CD	VARCHAR2 (60)	N	Reporting Group Code	The reporting group code (Provider CCN Number, State Code, or US).	
LTCH_CDC_MSR_VW	STATE_CD	VARCHAR2 (2)	N	State Code	The state code for the provider based on the CCN number in the record. This will be blank	
LTCH_CDC_MSR_VW	SUBMSN_CMPLT_CD	VARCHAR2 (1)	N	Submission Complete Code	The value in this column identifies whether the provider submitted monthly and quarterly CDC	
LTCH_CDC_PBLC_RPTG_MSR	CDC_PRD_END_DT	DATE (8)	N	CDC Reporting Period End Date	Contains the last date of the last month the provider submitted data within the public	
LTCH_CDC_PBLC_RPTG_MSR	CDC_PRD_STRT_DT	DATE (8)	N	CDC Reporting Period Start Date	Contains the first date of the first month the provider submitted data within the public	
LTCH_CDC_PBLC_RPTG_MSR	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	Contains the date and time that the record was added to the database.	
LTCH_CDC_PBLC_RPTG_MSR	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	Contains the ID of the user who created the record in the database.	
LTCH_CDC_PBLC_RPTG_MSR	FILE_NAME	VARCHAR2 (50)	N	File Name	Contains the name of the file which contained the measure data.	
LTCH_CDC_PBLC_RPTG_MSR	GRP_ADJST_SIR	NUMBER (12.3)	N	Group Adjusted Standardized Infection Ratio	Contains the adjusted standardized infection ratio for the measure (calculated as:	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_PBLC_RPTG_MSR	GRP_ADJST_SIR_CI_LWR_LMT	NUMBER (12.3)	N	Group Adjusted Standardized Infection Ratio Confidence Interval Lower Limit	Contains the lower bound of the confidence interval (95%) for GRP_ADJSIR. Indication of	
LTCH_CDC_PBLC_RPTG_MSR	GRP_ADJST_SIR_CI_UPR_LMT	NUMBER (12.3)	N	Group Adjusted Standardized Infection Ratio Confidence Interval Upper Limit	Contains the upper bound of the confidence interval (95%) for GRP_ADJSIR. Indication of	
LTCH_CDC_PBLC_RPTG_MSR	GRP_ADJST_SIR_DNMNTR	NUMBER (13.3)	N	Group Adjusted Standardized Infection Ratio Denominator	Contains the adjusted number of predicted measure occurrences in scope for quality	
LTCH_CDC_PBLC_RPTG_MSR	GRP_ADJST_SIR_NMRTR	NUMBER (9.3)	N	Group Adjusted Standardized Infection Ratio Numerator	Contains the adjusted number of observed measure occurrences in locations in scope for	
LTCH_CDC_PBLC_RPTG_MSR	GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	Group Exposure Count	Contains the number of device days or patient days for the measure in locations in scope for	
LTCH_CDC_PBLC_RPTG_MSR	GRP_ICU_CNT	NUMBER (6.0)	N	Group Intensive Care Unit Count	Contains the number of intensive care units (ICUs) within the facility (0=No ICU locations)	
LTCH_CDC_PBLC_RPTG_MSR	GRP_MNTH_INCL_SIR_CALC_NUM	NUMBER (12.0)	N	Number of Months Included in SIR Calculation	Contains the number of months that were included in the calculation of the standardized	
LTCH_CDC_PBLC_RPTG_MSR	GRP_SCA_CNT	NUMBER (6.0)	N	Group Specialty Care Area Count	Contains the number of special care areas (SCAs) within the facility (0 = No SCA)	
LTCH_CDC_PBLC_RPTG_MSR	GRP_SIR	NUMBER (12.3)	N	Group Standardized Infection Ratio	Contains the standardized infection ratio for the measure (calculated as GRP_SIR_NMRTR /	
LTCH_CDC_PBLC_RPTG_MSR	GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	Group Standardized Infection Ratio Confidence Interval Lower Limit	Contains the lower bound of the confidence interval (95%) for the group standardized	
LTCH_CDC_PBLC_RPTG_MSR	GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	Group Standardized Infection Ratio Confidence Interval Upper Limit	Contains the upper bound of the confidence interval (95%) for the group standardized	
LTCH_CDC_PBLC_RPTG_MSR	GRP_SIR_DNMNTR	NUMBER (13.3)	N	Group Standardized Infection Ratio Denominator	Contains the expected number of measure occurrences in locations in scope for quality	
LTCH_CDC_PBLC_RPTG_MSR	GRP_SIR_NMRTR	NUMBER (9.0)	N	Group Standardized Infection Ratio Numerator	Contains the observed number of measure occurrences in locations in scope for quality	
LTCH_CDC_PBLC_RPTG_MSR	GRP_THRSHLD_IND	NUMBER (1.0)	N	Group Threshold Indicator	Contains the threshold requirement for reporting that indicates whether or not a facility meets the	
LTCH_CDC_PBLC_RPTG_MSR	GRP_UNIT_RPTD_CNT	NUMBER (6.0)	N	Group Ward/Other Unit Count	Contains the number of Ward or Other units within the facility (0=No Ward/Other locations)	
LTCH_CDC_PBLC_RPTG_MSR	MSR_CD	VARCHAR2 (20)	Y	Measure Code	Contains the unique identifier for the measure.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_PBLC_RPTG_MSR	RATIO_PRFMNC_CTGRY_TXT	VARCHAR2 (100)	N	Ratio Performance Category Text	Contains the ratio performance category text for the facility for the reporting period, indicating	LQRP_CDC_PRFMNC_CTGRY_CD
LTCH_CDC_PBLC_RPTG_MSR	RPTG_PRD_END_DT	DATE (8)	Y	Reporting Period End Date	Contains the end date of the data range reported in the file.	
LTCH_CDC_PBLC_RPTG_MSR	RPTG_PRD_STRT_DT	DATE (8)	Y	Reporting Period Start Date	Contains the start date of the data range reported in the file.	
LTCH_CDC_PBLC_RPTG_MSR	RPT_GRP_CD	VARCHAR2 (6)	Y	Reporting Group Code	Contains the code representative of the type of group data reported in the file (provider CCN,	
LTCH_CDC_PBLC_RPTG_MSR_VW	CDC_PRD_END_DT	DATE (8)	N	CDC Reporting Period End Date	Contains the last date of the last month the provider submitted data within the public	
LTCH_CDC_PBLC_RPTG_MSR_VW	CDC_PRD_STRT_DT	DATE (8)	N	CDC Reporting Period Start Date	Contains the first date of the first month the provider submitted data within the public	
LTCH_CDC_PBLC_RPTG_MSR_VW	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	Contains the date and time that the record was added to the database.	
LTCH_CDC_PBLC_RPTG_MSR_VW	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	Contains the ID of the user who created the record in the database.	
LTCH_CDC_PBLC_RPTG_MSR_VW	FILE_NAME	VARCHAR2 (50)	N	File Name	Contains the name of the file which contained the measure data.	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_ADJST_SIR	NUMBER (12.3)	N	Group Adjusted Standardized Infection Ratio	Contains the adjusted standardized infection ratio for the measure (calculated as:	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_ADJST_SIR_CI_LWR_LMT	NUMBER (12.3)	N	Group Adjusted Standardized Infection Ratio Confidence Interval Lower Limit	Contains the lower bound of the confidence interval (95%) for GRP_ADJSIR. Indication of	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_ADJST_SIR_CI_UPR_LMT	NUMBER (12.3)	N	Group Adjusted Standardized Infection Ratio Confidence Interval Upper Limit	Contains the upper bound of the confidence interval (95%) for GRP_ADJSIR. Indication of	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_ADJST_SIR_DNMNTR	NUMBER (13.3)	N	Group Adjusted Standardized Infection Ratio Denominator	Contains the adjusted number of predicted measure occurrences in scope for quality	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_ADJST_SIR_NMRTR	NUMBER (9.3)	N	Group Adjusted Standardized Infection Ratio Numerator	Contains the adjusted number of observed measure occurrences in locations in scope for	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_DVC_PTNT_CNT	NUMBER (9.0)	N	Group Exposure Count	Contains the number of device days or patient days for the measure in locations in scope for	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_ICU_CNT	NUMBER (6.0)	N	Group Intensive Care Unit Count	Contains the number of intensive care units (ICUs) within the facility (0=No ICU locations	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_MNTH_INCL_SIR_CALC_NUM	NUMBER (12.0)	N	Number of Months Included in SIR Calculation	Contains the number of months that were included in the calculation of the standardized	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_SCA_CNT	NUMBER (6.0)	N	Group Specialty Care Area Count	Contains the number of special care areas (SCAs) within the facility (0 = No SCA	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_SIR	NUMBER (12.3)	N	Group Standardized Infection Ratio	Contains the standardized infection ratio for the measure (calculated as GRP_SIR_NMRTR /	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_SIR_CI_LWR_LMT	NUMBER (12.3)	N	Group Standardized Infection Ratio Confidence Interval Lower Limit	Contains the lower bound of the confidence interval (95%) for the group standardized	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_SIR_CI_UPR_LMT	NUMBER (12.3)	N	Group Standardized Infection Ratio Confidence Interval Upper Limit	Contains the upper bound of the confidence interval (95%) for the group standardized	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_SIR_DNMNTR	NUMBER (13.3)	N	Group Standardized Infection Ratio Denominator	Contains the expected number of measure occurrences in locations in scope for quality	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_SIR_NMRTR	NUMBER (9.0)	N	Group Standardized Infection Ratio Numerator	Contains the observed number of measure occurrences in locations in scope for quality	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_THRSHLD_IND	NUMBER (1.0)	N	Group Threshold Indicator	Contains the threshold requirement for reporting that indicates whether or not a facility meets the	
LTCH_CDC_PBLC_RPTG_MSR_VW	GRP_UNIT_RPTD_CNT	NUMBER (6.0)	N	Group Ward/Other Unit Count	Contains the number of Ward or Other units within the facility (0=No Ward/Other locations	
LTCH_CDC_PBLC_RPTG_MSR_VW	MSR_CD	VARCHAR2 (20)	N	Measure Code	Contains the unique identifier for the measure.	
LTCH_CDC_PBLC_RPTG_MSR_VW	RATIO_PRFMNC_CTGRY_TXT	VARCHAR2 (100)	N	Ratio Performance Category Text	Contains the ratio performance category text for the facility for the reporting period, indicating	LQRP_CDC_PRFMNC_CTGRY_CD
LTCH_CDC_PBLC_RPTG_MSR_VW	RPTG_PRD_END_DT	DATE (8)	N	Reporting Period End Date	Contains the end date of the data range reported in the file.	
LTCH_CDC_PBLC_RPTG_MSR_VW	RPTG_PRD_STRT_DT	DATE (8)	N	Reporting Period Start Date	Contains the start date of the data range reported in the file.	
LTCH_CDC_PBLC_RPTG_MSR_VW	RPT_GRP_CD	VARCHAR2 (6)	N	Reporting Group Code	Contains the code representative of the type of group data reported in the file (provider CCN,	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	CDC_PRD_END_DT	DATE (8)	N	CDC Reporting Period End Date	Contains the last date of the last month the provider submitted data within the public	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	CDC_PRD_STRT_DT	DATE (8)	N	CDC Reporting Period Start Date	Contains the first date of the first month the provider submitted data within the public	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	CNTRINDCTN_ADHR_CNT	NUMBER (9.0)	N	Facility Contraindication Adherence Count	Contains the number of healthcare workers who had a medical contraindication to the	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	Contains the date and time that the record was added to the database.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_PBLC_RPTG_VCCN_MSR	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	Contains the ID of the user who created the record in the database.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	DCLN_ADHR_CNT	NUMBER (9.0)	N	Facility Declined Adherence Count	Contains the number of healthcare workers who declined to receive the vaccination.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	FILE_NAME	VARCHAR2 (50)	N	File Name	Contains the name of the file which contained the measure data.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	GRP_ADHR_DNMNTR	NUMBER (13.0)	N	Group Adherence Denominator	Contains the number of healthcare workers available to receive the influenza vaccination.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	GRP_ADHR_NMRTR	NUMBER (9.0)	N	Group Adherence Numerator	Contains the number of healthcare workers contributing towards successful vaccination	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	GRP_ADHR_PCT	NUMBER (12.1)	N	Group Adherence Percent	Contains the healthcare worker vaccination adherence percentage of the facility for the	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	GRP_ADHR_PCT_CI_LWR_LMT	NUMBER (12.1)	N	Group Adherence Percent Confidence Interval Lower Limit	Contains the lower bound of the confidence interval (95%) for the group adherence percent.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	GRP_ADHR_PCT_CI_UPR_LMT	NUMBER (12.1)	N	Group Adherence Percent Confidence Interval Upper Limit	Contains the upper bound of the confidence interval (95%) for the group adherence percent.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	GRP_MNTH_INCL_SIR_CALC_NUM	NUMBER (12.0)	N	Number of Months Included in SIR Calculation	Contains the number of months that were included in the calculation of the standardized	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	HC_PRSNL_GRP_CD	VARCHAR2 (15)	Y	Healthcare Personnel Group Code	This contains the Healthcare Personnel Group Code for the LTCH facility.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	MSR_CD	VARCHAR2 (20)	Y	Measure Code	Contains the unique identifier for the measure.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	OFFSITE_ADHR_CNT	NUMBER (9.0)	N	Facility Offsite Adherence Count	Contains the number of healthcare workers who received the vaccination at another site.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	ONSITE_ADHR_CNT	NUMBER (9.0)	N	Facility Onsite Adherence Count	Contains the number of healthcare workers who received the vaccination at the reporting	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	RATIO_PRFMNC_CTGRY_TXT	VARCHAR2 (100)	N	Ratio Performance Category Text	Contains the ratio performance category text for the facility for the reporting period, indicating	LQRP_CDC_PRFMNC_CTGRY_CD
LTCH_CDC_PBLC_RPTG_VCCN_MSR	RPTG_PRD_END_DT	DATE (8)	Y	Reporting Period End Date	Contains the end date of the data range reported in the file.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	RPTG_PRD_STRT_DT	DATE (8)	Y	Reporting Period Start Date	Contains the start date of the data range reported in the file.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR	RPT_GRP_CD	VARCHAR2 (6)	Y	Reporting Group Code	Contains the code representative of the type of group data reported in the file (provider CCN,	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	CDC_PRD_END_DT	DATE (8)	N	CDC Reporting Period End Date	Contains the last date of the last month the provider submitted data within the public	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	CDC_PRD_STRT_DT	DATE (8)	N	CDC Reporting Period Start Date	Contains the first date of the first month the provider submitted data within the public	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	CNTRINDCTN_ADHR_CNT	NUMBER (9.0)	N	Facility Contraindication Adherence Count	Contains the number of healthcare workers who had a medical contraindication to the	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	Contains the date and time that the record was added to the database.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	Contains the ID of the user who created the record in the database.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	DCLN_ADHR_CNT	NUMBER (9.0)	N	Facility Declined Adherence Count	Contains the number of healthcare workers who declined to receive the vaccination.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	FILE_NAME	VARCHAR2 (50)	N	File Name	Contains the name of the file which contained the measure data.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	GRP_ADHR_DNMNTR	NUMBER (13.0)	N	Group Adherence Denominator	Contains the number of healthcare workers available to receive the influenza vaccination.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	GRP_ADHR_NMRTR	NUMBER (9.0)	N	Group Adherence Numerator	Contains the number of healthcare workers contributing towards successful vaccination	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	GRP_ADHR_PCT	NUMBER (12.1)	N	Group Adherence Percent	Contains the healthcare worker vaccination adherence percentage of the facility for the	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	GRP_ADHR_PCT_CI_LWR_LMT	NUMBER (12.1)	N	Group Adherence Percent Confidence Interval Lower Limit	Contains the lower bound of the confidence interval (95%) for the group adherence percent.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	GRP_ADHR_PCT_CI_UPR_LMT	NUMBER (12.1)	N	Group Adherence Percent Confidence Interval Upper Limit	Contains the upper bound of the confidence interval (95%) for the group adherence percent.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	GRP_MNTH_INCL_SIR_CALC_NUM	NUMBER (12.0)	N	Number of Months Included in SIR Calculation	Contains the number of months that were included in the calculation of the standardized	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	HC_PRSNL_GRP_CD	VARCHAR2 (15)	N	Healthcare Personnel Group Code	Contains the code representative of the type of healthcare personnel group from which data was	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	MSR_CD	VARCHAR2 (20)	N	Measure Code	Contains the unique identifier for the measure.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	OFFSITE_ADHR_CNT	NUMBER (9.0)	N	Facility Offsite Adherence Count	Contains the number of healthcare workers who received the vaccination at another site.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	ONSITE_ADHR_CNT	NUMBER (9.0)	N	Facility Onsite Adherence Count	Contains the number of healthcare workers who received the vaccination at the reporting	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	RATIO_PRFMNC_CTGRY_TXT	VARCHAR2 (100)	N	Ratio Performance Category Text	Contains the ratio performance category text for the facility for the reporting period, indicating	LQRP_CDC_PRFMNC_CTGRY_CD
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	RPTG_PRD_END_DT	DATE (8)	N	Reporting Period End Date	Contains the end date of the data range reported in the file.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	RPTG_PRD_STRT_DT	DATE (8)	N	Reporting Period Start Date	Contains the start date of the data range reported in the file.	
LTCH_CDC_PBLC_RPTG_VCCN_MSR_VW	RPT_GRP_CD	VARCHAR2 (6)	N	Reporting Group Code	Contains the code representative of the type of group data reported in the file (provider CCN,	
LTCH_CDC_VCCN_MSR	CLCTN_PRD_TXT	VARCHAR2 (8)	Y	Collection Period	The Quality Reporting Program submission period (i.e. 2011Q1, 2011M3).	
LTCH_CDC_VCCN_MSR	CNTRINDCTN_ADHR_CNT	NUMBER (9.0)	N	Contraindication Adherence Count	The number of healthcare workers who had a medical contraindication to the vaccination.	
LTCH_CDC_VCCN_MSR	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_CDC_VCCN_MSR	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_CDC_VCCN_MSR	DCLN_ADHR_CNT	NUMBER (9.0)	N	Decline Adherence Count	The number of healthcare workers who declined to receive the vaccination.	
LTCH_CDC_VCCN_MSR	FILE_NAME	VARCHAR2 (50)	N	File Name	Name of the file QIES received containing this data.	
LTCH_CDC_VCCN_MSR	FINL_SW	VARCHAR2 (1)	N	Final Switch	Switch indicating whether data is considered final. Y indicates that yes, the data is final.	
LTCH_CDC_VCCN_MSR	GRP_ADHR_DNMNTR	NUMBER (13.0)	N	Vaccine Adherence Denominator	The number of healthcare workers available to receive the vaccination.	
LTCH_CDC_VCCN_MSR	GRP_ADHR_NMRTR	NUMBER (9.0)	N	Vaccine Adherence Numerator	The number of healthcare workers contributing towards successful vaccination adherence.	
LTCH_CDC_VCCN_MSR	GRP_ADHR_PCT	NUMBER (12.0)	N	Adherence Percentage	The healthcare worker vaccination adherence percentage of the facility for the reporting period	
LTCH_CDC_VCCN_MSR	GRP_ADHR_PCT_CI_LWR_LMT	NUMBER (12.0)	N	Adherence Percentage Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_ADHR_PCT. Indication of precision	
LTCH_CDC_VCCN_MSR	GRP_ADHR_PCT_CI_UPR_LMT	NUMBER (12.0)	N	Adherence Percentage Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_ADHR_PCT. Indication of precision	
LTCH_CDC_VCCN_MSR	HC_PRSNL_GRP_CD	VARCHAR2 (15)	Y	Healthcare Personnel Group Code	The healthcare personnel group from which data was collected. HCP Group Values: EMP,	
LTCH_CDC_VCCN_MSR	MSR_CD	VARCHAR2 (20)	Y	Measure Code	The unique name of the measure.	LTCH_CDC_MSR_CD



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_VCCN_MSR	OFFSITE_ADHR_CNT	NUMBER (9.0)	N	Offsite vaccination adherence count	The number of healthcare workers who received the vaccination at another site.	
LTCH_CDC_VCCN_MSR	ONSITE_ADHR_CNT	NUMBER (9.0)	N	Onsite vaccination adherence count	The number of healthcare workers who received the vaccination at the reporting healthcare	
LTCH_CDC_VCCN_MSR	RPT_GRP_CD	VARCHAR2 (6)	Y	Reporting Group Code	The reporting group code (Provider CCN Number, State Code, or US).	
LTCH_CDC_VCCN_MSR	SUBMSN_CMPLT_CD	VARCHAR2 (1)	N	Submission Complete Code	The value in this column identifies whether the provider submitted monthly and quarterly CDC	
LTCH_CDC_VCCN_MSR_HSTRY	CLCTN_PRD_TXT	VARCHAR2 (8)	N	Collection Period	The Quality Reporting Program submission period (i.e. 2011Q1, 2011M3).	
LTCH_CDC_VCCN_MSR_HSTRY	CNTRINDCTN_ADHR_CNT	NUMBER (9.0)	N	Contraindication Adherence Count	The number of healthcare workers who had a medical contraindication to the vaccination.	
LTCH_CDC_VCCN_MSR_HSTRY	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_CDC_VCCN_MSR_HSTRY	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_CDC_VCCN_MSR_HSTRY	DCLN_ADHR_CNT	NUMBER (9.0)	N	Decline Adherence Count	The number of healthcare workers who declined to receive the vaccination.	
LTCH_CDC_VCCN_MSR_HSTRY	FILE_NAME	VARCHAR2 (50)	N	File Name	Name of the file QIES received containing this data.	
LTCH_CDC_VCCN_MSR_HSTRY	FINL_SW	VARCHAR2 (1)	N	Final Switch	Switch indicating whether data is considered final. Y indicates that yes, the data is final.	
LTCH_CDC_VCCN_MSR_HSTRY	GRP_ADHR_DNMNTR	NUMBER (13.0)	N	Vaccine Adherence Denominator	The number of healthcare workers available to receive the vaccination.	
LTCH_CDC_VCCN_MSR_HSTRY	GRP_ADHR_NMRTR	NUMBER (9.0)	N	Vaccine Adherence Numerator	The number of healthcare workers contributing towards successful vaccination adherence.	
LTCH_CDC_VCCN_MSR_HSTRY	GRP_ADHR_PCT	NUMBER (12.0)	N	Adherence Percentage	The healthcare worker vaccination adherence percentage of the facility for the reporting period	
LTCH_CDC_VCCN_MSR_HSTRY	GRP_ADHR_PCT_CI_LWR_LMT	NUMBER (12.0)	N	Adherence Percentage Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_ADHR_PCT. Indication of precision	
LTCH_CDC_VCCN_MSR_HSTRY	GRP_ADHR_PCT_CI_UPR_LMT	NUMBER (12.0)	N	Adherence Percentage Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_ADHR_PCT. Indication of precision	
LTCH_CDC_VCCN_MSR_HSTRY	HC_PRSNL_GRP_CD	VARCHAR2 (15)	N	Healthcare Personnel Group Code	The healthcare personnel group from which data was collected. HCP Group Values: EMP,	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_VCCN_MSR_HSTRY	MSR_CD	VARCHAR2 (20)	N	Measure Code	The unique name of the measure.	LTCH_CDC_MSR_CD
LTCH_CDC_VCCN_MSR_HSTRY	OFFSITE_ADHR_CNT	NUMBER (9.0)	N	Offsite vaccination adherence count	The number of healthcare workers who received the vaccination at another site.	
LTCH_CDC_VCCN_MSR_HSTRY	ONSITE_ADHR_CNT	NUMBER (9.0)	N	Onsite vaccination adherence count	The number of healthcare workers who received the vaccination at the reporting healthcare	
LTCH_CDC_VCCN_MSR_HSTRY	REC_CREAT_TS	TIMESTAMP(6) (11.6)	N	Record Create Timestamp	This is the date and time that the record was added to the history table.	
LTCH_CDC_VCCN_MSR_HSTRY	REC_CREAT_USER_ID	VARCHAR2 (30)	N	Record Create User Id	This is the user ID that populated the record in the history table.	
LTCH_CDC_VCCN_MSR_HSTRY	RPT_GRP_CD	VARCHAR2 (6)	N	Reporting Group Code	The reporting group code (Provider CCN Number, State Code, or US).	
LTCH_CDC_VCCN_MSR_HSTRY	SUBMSN_CMPLT_CD	VARCHAR2 (1)	N	Submission Complete Code	The value in this column identifies whether the provider submitted monthly and quarterly CDC	
LTCH_CDC_VCCN_MSR_VW	CLCTN_MO_QTR_TXT	VARCHAR2 (3)	N	Collection Month or Quarter	The month or quarter portion of the collection period field.	
LTCH_CDC_VCCN_MSR_VW	CLCTN_PRD_TXT	VARCHAR2 (8)	N	Collection Period	The Quality Reporting Program submission period (i.e. 2011Q1, 2011M3).	
LTCH_CDC_VCCN_MSR_VW	CLCTN_YR_TXT	VARCHAR2 (4)	N	Collection Year	The year portion of the collection period field.	
LTCH_CDC_VCCN_MSR_VW	CNTRINDCTN_ADHR_CNT	NUMBER (9.0)	N	Contraindication Adherence Count	The number of healthcare workers who had a medical contraindication to the vaccination.	
LTCH_CDC_VCCN_MSR_VW	DCLN_ADHR_CNT	NUMBER (9.0)	N	Decline Adherence Count	The number of healthcare workers who declined to receive the vaccination.	
LTCH_CDC_VCCN_MSR_VW	GRP_ADHR_DNMNTR	NUMBER (13.0)	N	Vaccine Adherence Denominator	The number of healthcare workers available to receive the vaccination.	
LTCH_CDC_VCCN_MSR_VW	GRP_ADHR_NMRTR	NUMBER (9.0)	N	Vaccine Adherence Numerator	The number of healthcare workers contributing towards successful vaccination adherence.	
LTCH_CDC_VCCN_MSR_VW	GRP_ADHR_PCT	NUMBER (12.0)	N	Adherence Percentage	The healthcare worker vaccination adherence percentage of the facility for the reporting period	
LTCH_CDC_VCCN_MSR_VW	GRP_ADHR_PCT_CI_LWR_LMT	NUMBER (12.0)	N	Adherence Percentage Confidence Interval Lower Limit	Lower bound of the confidence interval (95%) for GRP_ADHR_PCT. Indication of precision	
LTCH_CDC_VCCN_MSR_VW	GRP_ADHR_PCT_CI_UPR_LMT	NUMBER (12.0)	N	Adherence Percentage Confidence Interval Upper Limit	Upper bound of the confidence interval (95%) for GRP_ADHR_PCT. Indication of precision	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_CDC_VCCN_MSR_VW	HC_PRSNL_GRP_CD	VARCHAR2 (15)	N	Healthcare Personnel Group Code	The healthcare personnel group from which data was collected. HCP Group Values: EMP,	
LTCH_CDC_VCCN_MSR_VW	MSR_CD	VARCHAR2 (20)	N	Measure Code	The unique name of the measure.	LTCH_CDC_MSR_CD
LTCH_CDC_VCCN_MSR_VW	OFFSITE_ADHR_CNT	NUMBER (9.0)	N	Offsite vaccination adherence count	The number of healthcare workers who received the vaccination at another site.	
LTCH_CDC_VCCN_MSR_VW	ONSITE_ADHR_CNT	NUMBER (9.0)	N	Onsite vaccination adherence count	The number of healthcare workers who received the vaccination at the reporting healthcare	
LTCH_CDC_VCCN_MSR_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	The Provider Internal Number for the provider based on the CCN number in the record. This	
LTCH_CDC_VCCN_MSR_VW	PRVDR_ORGNL_PRTCPTN_DT	DATE (7)	N	Provider Original Participation Date	Original participation date of the provider based on the CCN number in the record. This will be	
LTCH_CDC_VCCN_MSR_VW	PRVDR_TRMNTN_EXPRTN_DT	DATE (7)	N	Provider Termination Expiration Date	Termination or expiration date of the provider based on the CCN number in the record. This	
LTCH_CDC_VCCN_MSR_VW	QIES_LOAD_DT	DATE (8)	N	QIES Load Date	The date that this record was loaded into QIES.	
LTCH_CDC_VCCN_MSR_VW	RPT_GRP_CD	VARCHAR2 (6)	N	Reporting Group Code	The reporting group code (Provider CCN Number, State Code, or US).	
LTCH_CDC_VCCN_MSR_VW	STATE_CD	VARCHAR2 (2)	N	State Code	The state code for the provider based on the CCN number in the record. This will be blank	
LTCH_CDC_VCCN_MSR_VW	SUBMSN_CMPLT_CD	VARCHAR2 (1)	N	Submission Complete Code	The value in this column identifies whether the provider submitted monthly and quarterly CDC	
LTCH_ERR_DTL	ITM_IN_ERR_TXT	VARCHAR2 (1000)	N	Item In Error Text	This column contains the item(s) in error.	
LTCH_ERR_DTL	LTCH_ASMT_ID	NUMBER (22)	N	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ERR_DTL	LTCH_ERR_DTL_ID	NUMBER (22)	Y	LTCH Error Detail ID	This column contains a unique ID that is assigned to each error in the record.	
LTCH_ERR_DTL	LTCH_ERR_MSG_NUM	VARCHAR2 (10)	N	LTCH Error Message Number	This column contains the LTCH error message number.	
LTCH_ERR_DTL	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_ERR_DTL	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ERR_DTL	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ERR_DTL	SFTWR_VNDR_ID	VARCHAR2 (9)	N	Software Vendor ID	This is the software vendor's Federal Employer Tax (EIN) ID.	
LTCH_ERR_DTL	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ERR_DTL	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_ERR_DTL	VAL_IN_ERR_TXT	VARCHAR2 (1000)	N	Value In Error Text	This column contains the submitted data value(s).	
LTCH_ERR_DTL_VW	ITM_IN_ERR_TXT	VARCHAR2 (1000)	N	Item In Error Text	This column contains the item(s) in error.	
LTCH_ERR_DTL_VW	LTCH_ASMT_ID	NUMBER (22)	N	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_ERR_DTL_VW	LTCH_ERR_DTL_ID	NUMBER (22)	N	LTCH Error Detail ID	This column contains a unique ID that is assigned to each error in the record.	
LTCH_ERR_DTL_VW	LTCH_ERR_MSG_NUM	VARCHAR2 (10)	N	LTCH Error Message Number	This column contains the LTCH error message number.	
LTCH_ERR_DTL_VW	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_ERR_DTL_VW	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_ERR_DTL_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_ERR_DTL_VW	SFTWR_VNDR_ID	VARCHAR2 (9)	N	Software Vendor ID	This is the software vendor's Federal Employer Tax (EIN) ID.	
LTCH_ERR_DTL_VW	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_ERR_DTL_VW	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_ERR_DTL_VW	VAL_IN_ERR_TXT	VARCHAR2 (1000)	N	Value In Error Text	This column contains the submitted data value(s).	
LTCH_ERR_MSG_VW	CREAT_TS	DATE (8)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_ERR_MSG_VW	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_ERR_MSG_VW	EFCTV_FROM_DT	DATE (8)	N	Effective From Date	Beginning date the code is effective.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ERR_MSG_VW	EFCTV_TO_DT	DATE (8)	N	Effective To Date	End date the code is effective.	
LTCH_ERR_MSG_VW	ERR_MSG_DESC	VARCHAR2 (500)	N	LTCH Error Message Description	This column contains the LTCH error message description.	
LTCH_ERR_MSG_VW	ERR_TYPE_DESC	VARCHAR2 (7)	N	LTCH Error Type Description	This column contains the LTCH error type description.	
LTCH_ERR_MSG_VW	LTCH_EDIT_TYPE_CD	VARCHAR2 (2)	N	LTCH Edit Type Code	This column contains the LTCH edit type code, which defines whether the edit is a consistency,	
LTCH_ERR_MSG_VW	LTCH_ERR_MSG_NUM	VARCHAR2 (10)	N	LTCH Error Message Number	This column contains the LTCH error message number.	
LTCH_ERR_MSG_VW	LTCH_ERR_TYPE_CD	VARCHAR2 (2)	N	LTCH Error Type Code	This column represents the LTCH error type code.	
LTCH_ERR_MSG_VW	MSG_SRT_NUM	NUMBER (6.0)	N	Message Sort Number	Indicates the order in which the error message number is sorted.	
LTCH_ERR_MSG_VW	UPDT_TS	DATE (8)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_ERR_MSG_VW	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_HAI_CTF	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_HAI_CTF	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_HAI_CTF	CTF_DT	DATE (7)	N	Submission Cutoff Date for Yr/Qtr	Cutoff date for LTCH submissions for the specific calendar year and quarter.	
LTCH_HAI_CTF	CTF_QTR	VARCHAR2 (2)	Y	Quarter	Quarter Definition for calendar year.	
LTCH_HAI_CTF	CTF_YR	VARCHAR2 (4)	Y	Calendar Year	Calendar Year	
LTCH_HAI_CTF	EFCTV_FROM_DT	DATE (7)	Y	Effective From Date	Effective Start Date for Calendar Year, Quarter and Submission Date combination.	
LTCH_HAI_CTF	EFCTV_THRU_DT	DATE (7)	N	Effective Thru Date	Effective End Date for Calendar Year, Quarter and Submission Date combination. Field is	
LTCH_HAI_CTF	QTR_BGN_DT	DATE (7)	N	Quarter Begin Date	Start Date for specific calendar year and quarter	
LTCH_HAI_CTF	QTR_END_DT	DATE (7)	N	Quarter End Date	End Date for specific calendar year and quarter	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_HAI_CTF	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_HAI_CTF	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_HAI_RPT_DTL	ASMT_DATA_SBMTD_VAL	VARCHAR2 (1)	N	Assessment Sbmsn Indicator	Y/N indicator showing whether the facility met the standard for Assessment submission during	
LTCH_HAI_RPT_DTL	CAUTI_DATA_SBMTD_VAL	VARCHAR2 (1)	N	CAUTI Sbmsn Indicator	Y/N indicator showing whether the facility met the standard for CAUTI data submission during	
LTCH_HAI_RPT_DTL	CCN_NUM	VARCHAR2 (10)	Y	CCN	CCN of each LTCH Provider active during the timeframe requested by the user.	CSP_PRVDR_CMN
LTCH_HAI_RPT_DTL	CLABSI_DATA_SBMTD_VAL	VARCHAR2 (1)	N	CLABSI Sbmsn Indicator	Y/N indicator showing whether the facility met the standard for CLABSI data submission during	
LTCH_HAI_RPT_DTL	RPT_SQNC_NUM	NUMBER (10.0)	Y	Report Sequence Number	Report Sequence Number	
LTCH_HAI_RPT_DTL	STATE_CD	VARCHAR2 (2)	N	State Code	State Code	STATES
LTCH_HAI_RPT_RQST	RPT_SQNC_NUM	NUMBER (10.0)	Y	Report Sequence Number	Report Sequence Number	
LTCH_HAI_RPT_RQST	RQSTD_BGN_QTR	VARCHAR2 (2)	N	Requested Beginning Quarter	Beginning Quarter selected by user when requesting the IRF QRP Report	
LTCH_HAI_RPT_RQST	RQSTD_END_QTR	VARCHAR2 (2)	N	Requested Ending Quarter	Ending Quarter selected by user when requesting the IRF QRP Report	
LTCH_HAI_RPT_RQST	RQSTD_USER_ID	VARCHAR2 (30)	N	Requested By	Login ID of the user requesting the LTCH QRP Report	
LTCH_HAI_RPT_RQST	RQSTD_YEAR	NUMBER (4.0)	N	Requested Calendar Year	Calendar Year selected by user when requesting the LTCH QRP Report	
LTCH_HAI_RPT_RQST	RQST_DT	TIMESTAMP(6) (11.6)	N	Date of Report Request	Date and timestamp of user's report request	
LTCH_ITM_VW	DB_CLMN_NAME	VARCHAR2 (61)	N	Database Column Name	This column contains a combination of the item ID and database column text.	
LTCH_ITM_VW	DB_TXT	VARCHAR2 (30)	N	Database Text	This column contains the item's database name.	
LTCH_ITM_VW	ITM_ID	VARCHAR2 (30)	N	Item ID	This column contains the item identifier (ex. A0050).	
LTCH_ITM_VW	ITM_SRT_NUM	NUMBER (6.0)	N	Item Sort Number	This column contains the item sort number. This number can be used to order the items for	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_ITM_VW	ITM_TXT	VARCHAR2 (100)	N	Item Text	This column contains the item's descriptive text that is associated with the item ID.	
LTCH_ITM_VW	LTCH_ITM_ID	NUMBER (22)	N	LTCH Item ID	This column contains the LTCH item ID. Each item has a unique identifier value.	
LTCH_ITM_VW	LTCH_ITM_SRCE_CD	VARCHAR2 (1)	N	LTCH Item Source Code	The data in this column indicates whether the item is an assessment (A), control (C), a derived	
LTCH_ITM_VW	LTCH_ITM_TYPE_ID	NUMBER (22)	N	LTCH Item Type ID	This column contains the value that defines the item's type. The valid types are checklist, code,	
LTCH_ITM_VW	LTCH_SECT_CD	VARCHAR2 (2)	N	LTCH Section Code	This column defines which section to which the item belongs.	
LTCH_ITM_VW	RPTG_SW	VARCHAR2 (1)	N	Reporting Switch	This column indicates whether the column is used for reporting.	
LTCH_PRVDR_LAST_SUB MSN_DT_VW	FAC_NAME	VARCHAR2 (50)	N	Facility Name	The name of a provider certified to participate in the Medicare and/or Medicaid programs.	
LTCH_PRVDR_LAST_SUB MSN_DT_VW	MAX_SUBMSN_DT	DATE (8)	N	Maximum Submission Date	The date of the latest submission file containing accepted records for the provider during the	
LTCH_PRVDR_LAST_SUB MSN_DT_VW	ORGNL_PRTCPTN_DT	DATE (8)	N	Original Participation Date	The date a facility is first approved to provide Medicare and/or Medicaid services.	
LTCH_PRVDR_LAST_SUB MSN_DT_VW	PGM_TRMNTN_CD	VARCHAR2 (2)	N	Termination Code	Indicates the code for the reason for the termination. Also includes code for active	
LTCH_PRVDR_LAST_SUB MSN_DT_VW	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_PRVDR_LAST_SUB MSN_DT_VW	PRVDR_NUM	VARCHAR2 (10)	N	CMS Certification Number	This is the CMS Certification Number (CCN), formerly known as Provider Number, of the	
LTCH_PRVDR_LAST_SUB MSN_DT_VW	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_PRVDR_RSDNT_V W	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_PRVDR_RSDNT_V W	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
LTCH_PRVDR_RSDNT_V W	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_PRVDR_TMPLT_V W	ADDTNL_ST_ADR	VARCHAR2 (50)	N	2nd Street Address Line	This column contains the provider's additional street address.	
LTCH_PRVDR_TMPLT_V W	CITY_NAME	VARCHAR2 (28)	N	City Name	City in which the provider is physically located.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_PRVDR_TMPLT_V W	FAC_NAME	VARCHAR2 (50)	N	Facility Name	The name of a provider certified to participate in the Medicare and/or Medicaid programs.	
LTCH_PRVDR_TMPLT_V W	FAX_PHNE_NUM	VARCHAR2 (10)	N	Fax Phone Number	The 10-digit fax phone number of the primary contact or the operator of the provider.	
LTCH_PRVDR_TMPLT_V W	HHA_ASMT_SBMT_CD	VARCHAR2 (1)	N	HHA Assessment Submit Code	HHA assessment submit indicator. Set to 'H' if the facility is allowed to submit HHA	
LTCH_PRVDR_TMPLT_V W	HOSPC_ASMT_SBMT_CD	VARCHAR2 (1)	N	Hospice Assessment Submit Code	Hospice assessment submit indicator. Set to 'P' if the facility is allowed to submit Hospice	
LTCH_PRVDR_TMPLT_V W	IRF_ASMT_SBMT_CD	VARCHAR2 (1)	N	IRF-PAI Assessment Submit Code	IRF-PAI assessment submit indicator. Set to 'R' if the facility is allowed to submit IRF-PAI	
LTCH_PRVDR_TMPLT_V W	LTCH_ASMT_SBMT_CD	VARCHAR2 (1)	N	LTCH Assessment Submit Code	LTCH assessment submit indicator. Set to 'L' if the facility is allowed to submit LTCH	
LTCH_PRVDR_TMPLT_V W	MAIL_ADDTNL_ST_ADR	VARCHAR2 (50)	N	Mailing Address-Street Line 2	The second line of a provider's mailing street address, if different from its location address.	
LTCH_PRVDR_TMPLT_V W	MAIL_CITY_NAME	VARCHAR2 (28)	N	Mailing Address-City	The city of a provider's mailing address, if the address is different than the location address.	
LTCH_PRVDR_TMPLT_V W	MAIL_STATE_CD	VARCHAR2 (2)	N	Mailing Address-State	The two-letter state abbreviation for a provider's mailing address, if different than its location	STATES
LTCH_PRVDR_TMPLT_V W	MAIL_ST_ADR	VARCHAR2 (50)	N	Mailing Address-Street Line 1	The first line of a provider's mailing street address, if different than its location address.	
LTCH_PRVDR_TMPLT_V W	MAIL_ZIP4_CD	VARCHAR2 (4)	N	Mailing Address-ZIP Four	The four-digit additional postal code which indicates a provider's mailing address, if	
LTCH_PRVDR_TMPLT_V W	MAIL_ZIP_CD	VARCHAR2 (5)	N	Mailing Address-ZIP Code	The 5-digit postal code for a provider's mailing address, if different than its location address.	
LTCH_PRVDR_TMPLT_V W	MDCD_VNDR_NUM	VARCHAR2 (15)	N	Medicaid Vendor Number	A number which may be assigned to a facility by the state Medicaid agency for external	
LTCH_PRVDR_TMPLT_V W	MDS_ASMT_SBMT_CD	VARCHAR2 (1)	N	MDS Assessment Submit Code	MDS assessment submit indicator. Set to 'M' if the facility is allowed to submit MDS	
LTCH_PRVDR_TMPLT_V W	PHNE_NUM	VARCHAR2 (10)	N	Telephone Number	The 10-digit telephone number of the primary contact or the operator of a provider.	
LTCH_PRVDR_TMPLT_V W	PRVDR_CTGRY_CD	VARCHAR2 (2)	N	Provider Category Code	This code indicates the category which is most descriptive of the facility identified on the	CSP_PRVDR_CTGRY_CD
LTCH_PRVDR_TMPLT_V W	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_PRVDR_TMPLT_V W	PRVDR_NUM	VARCHAR2 (10)	N	CCN	CMS Certification Number (CCN), formerly known as Provider Number, of the facility	
LTCH_PRVDR_TMPLT_V W	SB_ASMT_SBMT_CD	VARCHAR2 (1)	N	Swing Bed Assessment Submit Code	Swing Bed assessment submit indicator. Set to 'S' if the facility is allowed to submit Swing Bed	
LTCH_PRVDR_TMPLT_V W	SSA_CNTY_CD	VARCHAR2 (3)	N	SSA County Code	SSA (Social Security Administration) geographic code indicating the county where the	CSP_CNTY_CD
LTCH_PRVDR_TMPLT_V W	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_PRVDR_TMPLT_V W	ST_ADR	VARCHAR2 (50)	N	Street Address	Street address of a provider that is certified to provide Medicare and/or Medicaid services.	
LTCH_PRVDR_TMPLT_V W	ZIP4_CD	VARCHAR2 (4)	N	ZIP Code + 4 Extra Digits	This field contains the additional four ZIP code digits.	
LTCH_PRVDR_TMPLT_V W	ZIP_CD	VARCHAR2 (5)	N	ZIP Code	The five-digit postal code for the provider.	
LTCH_QRP_ASMT_THRSH LD	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_QRP_ASMT_THRSH LD	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	ID of user who created the record.	
LTCH_QRP_ASMT_THRSH LD	FSCL_YR	VARCHAR2 (4)	Y	Fiscal Year	This is the fiscal year to which the target threshold percent applies.	
LTCH_QRP_ASMT_THRSH LD	TRGT_THRSHLD_PCT	NUMBER (5.2)	N	Target Threshold Percentage	This is the target threshold percentage for a given fiscal year.	
LTCH_QRP_ASMT_THRSH LD	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_QRP_ASMT_THRSH LD	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_QRP_CDC_THRSHL D	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_QRP_CDC_THRSHL D	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	ID of user who created the record.	
LTCH_QRP_CDC_THRSHL D	FSCL_YR	VARCHAR2 (4)	Y	Fiscal Year	This is the fiscal year to which the target threshold percent applies.	
LTCH_QRP_CDC_THRSHL D	TRGT_THRSHLD_TXT	VARCHAR2 (10)	N	Target Threshold Text	This is the target threshold for a given fiscal year.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_QRP_CDC_THRSHL D	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_QRP_CDC_THRSHL D	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_QRP_FY_OPTN	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_QRP_FY_OPTN	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	ID of user who created the record.	
LTCH_QRP_FY_OPTN	FSCL_YR	VARCHAR2 (4)	Y	Fiscal Year Options	Fiscal Year Options	
LTCH_QRP_FY_OPTN	RPT_SW	VARCHAR2 (1)	N	Fiscal Year Report Switch	Report Switch used to display Fiscal Year options in the CASPER Reports Provider	
LTCH_QRP_FY_OPTN	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_QRP_FY_OPTN	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_QRP_MSR_TITLE	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_QRP_MSR_TITLE	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	ID of user who created the record.	
LTCH_QRP_MSR_TITLE	FSCL_YR	VARCHAR2 (4)	Y	Fiscal Year	This is the fiscal year to which the target threshold percent applies.	
LTCH_QRP_MSR_TITLE	MSR_CD	VARCHAR2 (20)	Y	Measure Code	The unique code of the measure.	
LTCH_QRP_MSR_TITLE	MSR_TITLE_TXT	VARCHAR2 (200)	N	Measure Title Text	The unique title of the measure.	
LTCH_QRP_MSR_TITLE	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_QRP_MSR_TITLE	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_QRP_SUBMSN_CLC TN_DT	APU_YR	VARCHAR2 (4)	Y	APU Year	Contains the Annual Payment Update (APU) year.	
LTCH_QRP_SUBMSN_CLC TN_DT	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_QRP_SUBMSN_CLC TN_DT	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_QRP_SUBMSN_CLC_TN_DT	DDLN_DAY_TRGT_DT_NUM	NUMBER (2.0)	N	Submission Deadline Less Num of Days	The number of days after the submission deadline from the target date.	
LTCH_QRP_SUBMSN_CLC_TN_DT	MSR_CD	VARCHAR2 (20)	Y	Measure Code	Contains the unique identifier for the measure.	LTCH_CDC_MSR_CD
LTCH_QRP_SUBMSN_CLC_TN_DT	MSR_CLCTN_BGN_DT	DATE (8)	N	Measure Collection Begin Date	Contains the measure collection begin date.	
LTCH_QRP_SUBMSN_CLC_TN_DT	MSR_CLCTN_END_DT	DATE (7)	N	Measure Collection End Date	This is the date the measure collection ends.	
LTCH_QRP_SUBMSN_CLC_TN_DT	MSR_RPTG_TYP_TXT	VARCHAR2 (20)	N	Measure Reporting Type	This is the measure reporting type (i.e. ASMT, RATE, SIR, ADJSIR).	
LTCH_QRP_SUBMSN_CLC_TN_DT	MSR_TYP_CD	VARCHAR2 (10)	Y	Measure Type Code	Contains the measure type code.	
LTCH_QRP_SUBMSN_CLC_TN_DT	SUBMSN_DDLN_DT	DATE (7)	Y	Submission Deadline Date	This is the submission deadline date for the specified APU year.	
LTCH_QRP_SUBMSN_CLC_TN_DT	TIME_PRD_TXT	VARCHAR2 (20)	N	Time Period Text	This is the description of the time period for the measure.	
LTCH_QRP_SUBMSN_CLC_TN_DT	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_QRP_SUBMSN_CLC_TN_DT	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_QRP_SUBMSN_CLC_TN_DT_VW	APU_YR	VARCHAR2 (4)	N	APU Year	The Annual Payment Update year.	
LTCH_QRP_SUBMSN_CLC_TN_DT_VW	CREAT_TS	DATE (8)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_QRP_SUBMSN_CLC_TN_DT_VW	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_QRP_SUBMSN_CLC_TN_DT_VW	DDLN_DAY_TRGT_DT_NUM	NUMBER (2.0)	N	Submission Deadline Less Num of Days	The number of days after the submission deadline from the target date.	
LTCH_QRP_SUBMSN_CLC_TN_DT_VW	MSR_CD	VARCHAR2 (20)	N	Measure Code	The unique name of the measure.	LTCH_CDC_MSR_CD
LTCH_QRP_SUBMSN_CLC_TN_DT_VW	MSR_CLCTN_BGN_DT	DATE (7)	N	Measure Collection Begin Date	This is the date the measure collection begins.	
LTCH_QRP_SUBMSN_CLC_TN_DT_VW	MSR_CLCTN_END_DT	DATE (7)	N	Measure Collection End Date	This is the date the measure collection ends.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_QRP_SUBMSN_CLC TN_DT_VW	MSR_RPTG_TYP_TXT	VARCHAR2 (20)	N	Measure Reporting Type	This is the measure reporting type (i.e. ASMT, RATE, SIR, ADJSIR).	
LTCH_QRP_SUBMSN_CLC TN_DT_VW	SUBMSN_DDLN_DT	DATE (7)	N	Submission Deadline Date	This is the submission deadline date for the specified APU year.	
LTCH_QRP_SUBMSN_CLC TN_DT_VW	UPDT_TS	DATE (8)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_QRP_SUBMSN_CLC TN_DT_VW	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_SECT_VW	CREAT_TS	TIMESTAMP(6) (11.6)	N	Create Timestamp	This is the date and time that the record was added to the database.	
LTCH_SECT_VW	CREAT_USER_ID	VARCHAR2 (30)	N	Create User ID	This is the user ID that populated the record in the database.	
LTCH_SECT_VW	LTCH_SECT_CD	VARCHAR2 (2)	N	LTCH Section Code	This column defines which section to which the item belongs.	
LTCH_SECT_VW	SECT_DESC	VARCHAR2 (75)	N	Section Description	This column contains the section description, which defines the section for which the item	
LTCH_SECT_VW	UPDT_TS	TIMESTAMP(6) (11.6)	N	Update Timestamp	This is the date and time that the record was updated in the database.	
LTCH_SECT_VW	UPDT_USER_ID	VARCHAR2 (30)	N	Update User ID	This is the user ID that updated the record in the database.	
LTCH_SUBMSN_STATS	ASMT_ACPTD_CNT	NUMBER (22)	N	Assessment Accepted Count	This column contains the total number of records in the submission file that were	
LTCH_SUBMSN_STATS	ASMT_ERR_MSG_CNT	NUMBER (22)	N	Assessment Error Message Count	This column contains the total count of error messages for all records in the submission file.	
LTCH_SUBMSN_STATS	ASMT_RJCTD_CNT	NUMBER (22)	N	Assessment Rejected Count	This column contains the total number of records in the submission file that were rejected.	
LTCH_SUBMSN_STATS	DUP_ASMT_CNT	NUMBER (22)	N	Duplicate Assessment Count	This column contains the total count of duplicate assessments in the submission file.	
LTCH_SUBMSN_STATS	INVLDT_CNT	NUMBER (22)	N	Invalid File Count	This column contains the number of files from the submission file that could not be processed	
LTCH_SUBMSN_STATS	LTCH_PRCSTG_STUS_CD	VARCHAR2 (2)	N	LTCH Processing Status Code	This column indicates the processing status for the file.	LTCH_PRCSTG_STUS_VW
LTCH_SUBMSN_STATS	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_SUBMSN_STATS	LTCH_SUBMSN_STATS_ID	NUMBER (22)	Y	LTCH Submission Status ID	This column is a sequence number that's used to create an artificial primary key for the table.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_SUBMSN_STATS	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_SUBMSN_STATS	SBMTR_USER_ID	VARCHAR2 (30)	N	Submitter User ID	This column contains the User ID of the person who submitted the file.	
LTCH_SUBMSN_STATS	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_SUBMSN_STATS	SUBMSN_CMPLT_TS	TIMESTAMP(6) (11.6)	N	Submission Complete Timestamp	This column contains the date and time that the submission was complete.	
LTCH_SUBMSN_STATS	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_SUBMSN_STATS	SUBMSN_FILE_NAME	VARCHAR2 (260)	N	Submission File Name	This column contains the name of the file that was submitted to the national repository.	
LTCH_SUBMSN_STATS	TOT_CNT	NUMBER (22)	N	Total File Count	This column contains the total count of records in the submission file.	
LTCH_SUBMSN_STATS	UNAUTHRZD_CNT	NUMBER (22)	N	Unauthorized Count	This column contains the total count of records in the file that were submitted by the user who	
LTCH_SUBMSN_STATS_V W	ASMT_ACPTD_CNT	NUMBER (22)	N	Assessment Accepted Count	This column contains the total number of records in the submission file that were	
LTCH_SUBMSN_STATS_V W	ASMT_ERR_MSG_CNT	NUMBER (22)	N	Assessment Error Message Count	This column contains the total count of error messages for all records in the submission file.	
LTCH_SUBMSN_STATS_V W	ASMT_RJCTD_CNT	NUMBER (22)	N	Assessment Rejected Count	This column contains the total number of records in the submission file that were rejected.	
LTCH_SUBMSN_STATS_V W	DUP_ASMT_CNT	NUMBER (22)	N	Duplicate Assessment Count	This column contains the total count of duplicate assessments in the submission file.	
LTCH_SUBMSN_STATS_V W	INVLDT_CNT	NUMBER (22)	N	Invalid File Count	This column contains the number of files from the submission file that could not be processed	
LTCH_SUBMSN_STATS_V W	LTCH_PRCSG_STUS_CD	VARCHAR2 (2)	N	LTCH Processing Status Code	This column indicates the processing status for the file.	LTCH_PRCSG_STUS_VW
LTCH_SUBMSN_STATS_V W	LTCH_SUBMSN_ID	NUMBER (22)	N	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_SUBMSN_STATS_V W	LTCH_SUBMSN_STATS_ID	NUMBER (22)	N	LTCH Submission Status ID	This column is a sequence number that's used to create an artificial primary key for the table.	
LTCH_SUBMSN_STATS_V W	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_SUBMSN_STATS_V W	SBMTR_USER_ID	VARCHAR2 (30)	N	Submitter User ID	This column contains the User ID of the person who submitted the file.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_SUBMSN_STATS_V W	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_SUBMSN_STATS_V W	SUBMSN_CMPLT_TS	DATE (8)	N	Submission Complete Timestamp	This is the date that the submission processing was complete.	
LTCH_SUBMSN_STATS_V W	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date that the file was received by the system.	
LTCH_SUBMSN_STATS_V W	SUBMSN_FILE_NAME	VARCHAR2 (260)	N	Submission File Name	This column contains the name of the file that was submitted to the national repository.	
LTCH_SUBMSN_STATS_V W	TOT_CNT	NUMBER (22)	N	Total File Count	This column contains the total count of records in the submission file.	
LTCH_SUBMSN_STATS_V W	UNAUTHRZD_CNT	NUMBER (22)	N	Unauthorized Count	This column contains the total count of records in the file that were submitted by the user who	
LTCH_VLDTN_RPT	FILE_NAME	VARCHAR2 (260)	N	File Name	This column contains the name of the file that was submitted to the national repository.	
LTCH_VLDTN_RPT	LTCH_ASMT_ID	NUMBER (22)	Y	LTCH Assessment ID	This ID is used as a key to uniquely identify an assessment and tie together all the different	
LTCH_VLDTN_RPT	LTCH_ASMT_STUS_CD	VARCHAR2 (2)	N	LTCH Assessment Status Code	This column contains the code identifying the status of the assessment processing (accepted,	
LTCH_VLDTN_RPT	LTCH_ITM_SBST_CD	VARCHAR2 (3)	N	LTCH Item Subset Code	This code indicates the type of assessment that was submitted.	LTCH_ITM_SBST
LTCH_VLDTN_RPT	LTCH_PRCSG_STUS_CD	VARCHAR2 (2)	N	LTCH Processing Status Code	This column indicates the processing status for the file.	
LTCH_VLDTN_RPT	LTCH_SUBMSN_ID	NUMBER (22)	Y	LTCH Submission ID	This is a unique identifier of the submission file.	
LTCH_VLDTN_RPT	MDCR_NUM	VARCHAR2 (12)	N	Medicare Number	This field contains the patient's Medicare Number (A0600B) of the patient submitted in	
LTCH_VLDTN_RPT	ORGNL_ASMT_ID	NUMBER (22)	N	Original Assessment ID	This column contains the record's original assessment ID.	
LTCH_VLDTN_RPT	PRVDR_INTRNL_NUM	NUMBER (10.0)	N	Provider Internal Number	This number uniquely identifies an LTCH facility.	
LTCH_VLDTN_RPT	RSDNT_FIRST_NAME	VARCHAR2 (12)	N	Resident First Name	This column contains the patient's first name.	
LTCH_VLDTN_RPT	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely identifies the patient. The combination	
LTCH_VLDTN_RPT	RSDNT_LAST_NAME	VARCHAR2 (18)	N	Resident Last Name	This column contains the patient's last name.	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
LTCH_VLDTN_RPT	RSDNT_SSN_NUM	VARCHAR2 (9)	N	Social Security Number	This column contains the patient's Social Security Number.	
LTCH_VLDTN_RPT	RSN_FOR_ASMT_CD	VARCHAR2 (2)	N	RFA (A0250)	This column indicate the reason for the assessment.	LTCH_RSN_ASMT_CD
LTCH_VLDTN_RPT	SBMTR_USER_ID	VARCHAR2 (30)	N	Submitter User ID	This column contains the User ID of the person who submitted the file.	
LTCH_VLDTN_RPT	SFTWR_VNDR_ID	VARCHAR2 (9)	N	Software Vendor ID	This is the software vendor's Federal Employer Tax (EIN) ID.	
LTCH_VLDTN_RPT	SPEC_VRSN_CD	VARCHAR2 (10)	N	Specification Version Code	This value represents the version of the data submission specifications that were used to	
LTCH_VLDTN_RPT	STATE_CD	VARCHAR2 (2)	N	State Code	This is the state abbreviation.	STATES
LTCH_VLDTN_RPT	SUBMSN_DT	DATE (8)	N	Submission Date	This is the date and time that the file was received by the system.	
LTCH_VLDTN_RPT	SUBMSN_PROC_ORDR_NUM	NUMBER (22)	N	Submission Processing Order Number	The data in this column identifies the order number that was assigned to the record prior to	
LTCH_VLDTN_RPT	TRANS_TYPE_CD	VARCHAR2 (1)	N	Transaction Type Code	This column contains the code values that define the type of transaction (new, modify or	LTCH_TRANS_TYPE_CD
LTCH_VLDTN_RPT	TRANS_TYPE_DESC	VARCHAR2 (50)	N	Transaction Type Description	This column contains the code descriptions that define the type of transaction (new, modify or	
LTCH_VLDTN_RPT	TRGT_DT	DATE (8)	N	Target Date	The target date is used to define when the event occurred for the patient. It is used to ensure that	
LTCH_VLD_ITM_RSPNS_VW	EFCTV_FROM_DT	DATE (8)	N	Effective From Date	Beginning date the code is effective.	
LTCH_VLD_ITM_RSPNS_VW	EFCTV_TO_DT	DATE (8)	N	Effective To Date	End date the code is effective.	
LTCH_VLD_ITM_RSPNS_VW	EXTRNL_RSPNS_ID	VARCHAR2 (10)	N	External Response ID	This column contains the valid response values for the associated LTCH item.	
LTCH_VLD_ITM_RSPNS_VW	LTCH_ITM_ID	NUMBER (22)	N	LTCH Item ID	This column contains the LTCH item ID. Each item has a unique identifier value.	
LTCH_VLD_ITM_RSPNS_VW	RSPNS_DESC	VARCHAR2 (255)	N	Response Description	This column contains the valid response description for the associated LTCH item.	
NATL_RSDNT_ALL_VW	BIRTH_DT	DATE (8)	N	Birth Date	This column contains the resident's date of birth.	
NATL_RSDNT_ALL_VW	CRNT_FAC_INTRNL_ID	NUMBER (10.0)	N	Current Facility Internal ID	This column identifies the current facility for the resident identified from the most recent	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
NATL_RSDNT_ALL_VW	DEATH_DT	DATE (8)	N	Death Date	This column contains the resident's date of death.	
NATL_RSDNT_ALL_VW	EFCTV_DT	DATE (8)	N	Effective Date	This date represents the most current effective date from the assessment records. For MDS 3.0,	
NATL_RSDNT_ALL_VW	ETHNCTY_AFRCN_AMRCN_SW	VARCHAR2 (1)	N	Ethnicity African American Switch	This column indicates if the resident's ethnicity is African-American.	ETHNCTY_CD
NATL_RSDNT_ALL_VW	ETHNCTY_AMRCN_INDN_AK_NTV_SW	VARCHAR2 (1)	N	Ethnicity American Indian/Alaskan Native Switch	This column indicates if the resident's ethnicity is American Indian or Alaskan Native.	ETHNCTY_CD
NATL_RSDNT_ALL_VW	ETHNCTY_ASN_SW	VARCHAR2 (1)	N	Ethnicity Asian Switch	This column indicates if the resident's ethnicity is Asian.	ETHNCTY_CD
NATL_RSDNT_ALL_VW	ETHNCTY_HSPNC_LTN_SW	VARCHAR2 (1)	N	Ethnicity Hispanic/Latino Switch	This column indicates if the resident's ethnicity is Hispanic or Latino.	ETHNCTY_CD
NATL_RSDNT_ALL_VW	ETHNCTY_NTV_HI_PCFC_IS_LNDR_SW	VARCHAR2 (1)	N	Ethnicity Native Hawaiian/Pacific Islander Switch	This column indicates if the resident's ethnicity is native Hawaiian or Pacific Islander.	ETHNCTY_CD
NATL_RSDNT_ALL_VW	ETHNCTY_WHT_SW	VARCHAR2 (1)	N	Ethnicity White Switch	This column indicates if the resident's ethnicity is white.	ETHNCTY_CD
NATL_RSDNT_ALL_VW	FACESHEET_IND	CHAR (1)	N	Facesheet Indicator	This column indicates if a facesheet (Section AB and AC) has been received for a resident. A	
NATL_RSDNT_ALL_VW	FIRST_NAME	VARCHAR2 (12)	N	First Name	This column contains the resident's first name.	
NATL_RSDNT_ALL_VW	GNDR_ID	NUMBER (1.0)	N	Gender ID	This column contains the resident's gender code.	GNDR_CD
NATL_RSDNT_ALL_VW	HHA_IND	CHAR (1)	N	HHA Indicator	This column indicates if the resident has had an OASIS assessment from an HHA.	RSDNT_HHA_IND_CD
NATL_RSDNT_ALL_VW	HOSPC_IND	CHAR (1)	N	Hospice Indicator	This column indicates if the patient has had a Hospice assessment.	RSDNT_HOSPC_IND_CD
NATL_RSDNT_ALL_VW	IRF_IND	CHAR (1)	N	IRF Indicator	This column indicates if the resident has had an IRF-PAI assessment.	RSDNT_IRF_IND_CD
NATL_RSDNT_ALL_VW	LAST_NAME	VARCHAR2 (18)	N	Last Name	This column contains the resident's last name.	
NATL_RSDNT_ALL_VW	LTCH_IND	CHAR (1)	N	LTCH Indicator	This column indicates if the patient has had an LTCH assessment.	RSDNT_LTCH_IND_CD
NATL_RSDNT_ALL_VW	MBI_NUM	VARCHAR2 (11)	N	MBI Number	The data in this column contains the unique Medicare Beneficiary Identifier (MBI) that	
NATL_RSDNT_ALL_VW	MDL_INITL_TXT	VARCHAR2 (1)	N	Middle Initial Text	This column contains the resident's middle initial.	



Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
NATL_RSDNT_ALL_VW	MDS_IND	CHAR (1)	N	MDS Indicator	This column indicates if resident has had an MDS 2.0 SUB_REQ 3 assessment from a NH.	RSDNT_MDS_IND_CD
NATL_RSDNT_ALL_VW	NH2_SR2_IND	CHAR (1)	N	Nursing Home MDS 2 SUB_REQ 2 Indicator	This column indicates if the resident has had an MDS 2.0, SUB_REQ 2 assessment.	RSDNT_NH2_SR2_IND_CD
NATL_RSDNT_ALL_VW	NH3_SR2_IND	CHAR (1)	N	Nursing Home MDS 3 SUB_REQ 2 Indicator	This column indicates if the resident has had an MDS 3.0, SUB_REQ 2 assessment.	RSDNT_NH3_SR2_IND_CD
NATL_RSDNT_ALL_VW	NH3_SR3_IND	CHAR (1)	N	Nursing Home MDS 3 SUB_REQ 3 Indicator	This column indicates if the resident has had an MDS 3.0, SUB_REQ 3 assessment.	RSDNT_NH3_SR3_IND_CD
NATL_RSDNT_ALL_VW	RACE_ID	VARCHAR2 (2)	N	Race ID	This column contains the race indicator.	
NATL_RSDNT_ALL_VW	RSDNT_CHG_TS	DATE (7)	N	Resident Change Timestamp	This column contains a timestamp indicating when the resident identifying information was	
NATL_RSDNT_ALL_VW	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	A unique number, assigned by the submission system, which identifies a resident. The	
NATL_RSDNT_ALL_VW	RSDNT_MDCCD_NBR	VARCHAR2 (14)	N	Resident Medicaid Number	This column contains the resident's Medicaid number.	
NATL_RSDNT_ALL_VW	RSDNT_MDCR_NBR	VARCHAR2 (12)	N	Resident Medicare Number	This column contains the resident's Medicare number.	
NATL_RSDNT_ALL_VW	SB3_IND	CHAR (1)	N	Swing Bed MDS 3 Indicator	This column indicates if the resident has had an MDS 3.0 assessment from a swing bed provider.	RSDNT_SB3_IND_CD
NATL_RSDNT_ALL_VW	SB_IND	CHAR (1)	N	Swing Bed Indicator	This column indicates if the resident has had a MDS 2.0 swing bed assessment.	RSDNT_SB_IND_CD
NATL_RSDNT_ALL_VW	SSN_NUM	VARCHAR2 (9)	N	Social Security Number	This column contains the resident's Social Security Number.	
NATL_RSDNT_ALL_VW	STATE_ID	VARCHAR2 (2)	N	State ID	The two-character state abbreviation.	STATES
NATL_RSDNT_ALL_VW	ST_PREPD_DT	DATE (8)	N	State Prepared Date	This column represents the date when the state prepared the data to be pulled to the national.	
NATL_RSDNT_LTCH_VW	BIRTH_DT	DATE (8)	N	Birth Date	This is the patient's date of birth.	
NATL_RSDNT_LTCH_VW	CRNT_FAC_INTRNL_ID	NUMBER (10.0)	N	Current Facility Internal ID	This column identifies the current facility for the resident identified from the most recent	
NATL_RSDNT_LTCH_VW	DEATH_DT	DATE (8)	N	Death Date	This column contains the patient's date of death.	
NATL_RSDNT_LTCH_VW	EFCTV_DT	DATE (8)	N	Effective Date	This date represents the most current effective date from the assessment records. For MDS 3.0,	

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
NATL_RSDNT_LTCH_VW	ETHNCTY_AFRCN_AMRCN_SW	VARCHAR2 (1)	N	Ethnicity African American Switch	This column indicates if the patient's race is African-American.	ETHNCTY_CD
NATL_RSDNT_LTCH_VW	ETHNCTY_AMRCN_INDN_AK_NTV_SW	VARCHAR2 (1)	N	Ethnicity American Indian/Alaskan Native Switch	This column indicates if the patient's race is American Indian or Alaskan Native.	ETHNCTY_CD
NATL_RSDNT_LTCH_VW	ETHNCTY_ASN_SW	VARCHAR2 (1)	N	Ethnicity Asian Switch	This column indicates if the patient's race is Asian.	ETHNCTY_CD
NATL_RSDNT_LTCH_VW	ETHNCTY_HSPNC_LTN_SW	VARCHAR2 (1)	N	Ethnicity Hispanic/Latino Switch	This column indicates if the patient's ethnicity is Hispanic or Latino.	ETHNCTY_CD
NATL_RSDNT_LTCH_VW	ETHNCTY_NTV_HI_PCFC_IS_LNDR_SW	VARCHAR2 (1)	N	Ethnicity Native Hawaiian/Pacific Islander Switch	This column indicates if the patient's race is native Hawaiian or Pacific Islander.	ETHNCTY_CD
NATL_RSDNT_LTCH_VW	ETHNCTY_WHT_SW	VARCHAR2 (1)	N	Ethnicity White Switch	This column indicates if the patient's race is White.	ETHNCTY_CD
NATL_RSDNT_LTCH_VW	FACESHEET_IND	CHAR (1)	N	Facesheet Indicator	This column indicates whether an MDS 2.0 facesheet (Section AB and AC) has been	
NATL_RSDNT_LTCH_VW	FIRST_NAME	VARCHAR2 (12)	N	First Name	This column contains the patient's first name.	
NATL_RSDNT_LTCH_VW	GNDR_ID	NUMBER (1.0)	N	Gender	This column contains a code identifying the patient's gender.	LTCH_GNDR_CD
NATL_RSDNT_LTCH_VW	HHA_IND	CHAR (1)	N	HHA Indicator	This column indicates if the patient has had an OASIS assessment from an HHA.	RSDNT_HHA_IND_CD
NATL_RSDNT_LTCH_VW	HOSPC_IND	CHAR (1)	N	Hospice Indicator	This column indicates if the patient has had a Hospice assessment.	RSDNT_HOSPC_IND_CD
NATL_RSDNT_LTCH_VW	IRF_IND	CHAR (1)	N	IRF Indicator	This column indicates if the patient has an IRF assessment.	RSDNT_IRF_IND_CD
NATL_RSDNT_LTCH_VW	LAST_NAME	VARCHAR2 (18)	N	Last Name	This column contains the patient's last name.	
NATL_RSDNT_LTCH_VW	LTCH_IND	CHAR (1)	N	LTCH Indicator	This column indicates if the patient has had an LTCH assessment.	RSDNT_LTCH_IND_CD
NATL_RSDNT_LTCH_VW	MBI_NUM	VARCHAR2 (11)	N			
NATL_RSDNT_LTCH_VW	MDL_INITL_TXT	VARCHAR2 (1)	N	Middle Initial	This column contains the patient's middle initial.	
NATL_RSDNT_LTCH_VW	MDS_IND	CHAR (1)	N	MDS Indicator	This column indicates if the patient has had an MDS 2.0 SUB_REQ 3 assessment from a	RSDNT_MDS_IND_CD
NATL_RSDNT_LTCH_VW	NH3_SR3_IND	CHAR (1)	N	Nursing Home MDS 3 SUB_REQ 3 Indicator	This column indicates if the patient has had an MDS 3.0, SUB_REQ 3 assessment.	RSDNT_NH3_SR3_IND_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
NATL_RSDNT_LTCH_VW	RACE_ID	VARCHAR2 (2)	N	Race ID	This column is for the definition of the resident's race.	
NATL_RSDNT_LTCH_VW	RSDNT_CHG_TS	DATE (7)	N	Resident Change Timestamp	This column contains the date/time that the resident's row of data was last updated.	
NATL_RSDNT_LTCH_VW	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
NATL_RSDNT_LTCH_VW	RSDNT_MDCD_NBR	VARCHAR2 (14)	N	Resident Medicaid ID	This column contains the resident's Medicaid number.	
NATL_RSDNT_LTCH_VW	RSDNT_MDCR_NBR	VARCHAR2 (12)	N	Resident Medicare Number	This column contains the resident's Medicare number.	
NATL_RSDNT_LTCH_VW	SB3_IND	CHAR (1)	N	Swing Bed 3 Indicator	The data in this column indicates whether the resident had an MDS 3.0 Swing Bed assessment.	RSDNT_SB3_IND_CD
NATL_RSDNT_LTCH_VW	SB_IND	CHAR (1)	N	Swing Bed Indicator	The data in this column indicates whether the resident had a MDS 2.0 Swing Bed assessment.	RSDNT_SB_IND_CD
NATL_RSDNT_LTCH_VW	SSN_NUM	VARCHAR2 (9)	N	Social Security Number	This column contains the resident's Social Security Number.	
NATL_RSDNT_LTCH_VW	STATE_ID	VARCHAR2 (2)	N	State ID	This is the state abbreviation.	STATES
NATL_RSDNT_LTCH_VW	ST_PREPD_DT	DATE (8)	N	State Prepared Date	This column represents the date when the state prepared the data to be pulled to the national	
NATL_RSDNT_SMRY_LT CH_VW	BIRTH_DT	DATE (8)	N	Birth Date	This is the patient's date of birth.	
NATL_RSDNT_SMRY_LT CH_VW	CRNT_FAC_INTRNL_ID	NUMBER (10.0)	N	Current Facility Internal ID	This column identifies the current facility for the resident identified from the most recent	
NATL_RSDNT_SMRY_LT CH_VW	DEATH_DT	DATE (8)	N	Death Date	This column contains the patient's date of death.	
NATL_RSDNT_SMRY_LT CH_VW	EFCTV_DT	DATE (8)	N	Effective Date	This date represents the most current effective date from the assessment records. For MDS 3.0,	
NATL_RSDNT_SMRY_LT CH_VW	ETHNCTY_AFRCN_AMRCN_SW	VARCHAR2 (1)	N	Ethnicity African American Switch	This column indicates if the patient's race is African-American.	ETHNCTY_CD
NATL_RSDNT_SMRY_LT CH_VW	ETHNCTY_AMRCN_INDN_AK_NTV_SW	VARCHAR2 (1)	N	Ethnicity American Indian/Alaskan Native Switch	This column indicates if the patient's race is American Indian or Alaskan Native.	ETHNCTY_CD
NATL_RSDNT_SMRY_LT CH_VW	ETHNCTY_ASN_SW	VARCHAR2 (1)	N	Ethnicity Asian Switch	This column indicates if the patient's race is Asian.	ETHNCTY_CD
NATL_RSDNT_SMRY_LT CH_VW	ETHNCTY_HSPNC_LTN_SW	VARCHAR2 (1)	N	Ethnicity Hispanic/Latino Switch	This column indicates if the patient's ethnicity is Hispanic or Latino.	ETHNCTY_CD

Table Name	Field Name	Data Type	Primary Key	Short Description	Item Description	Code Table Name
NATL_RSDNT_SMRY_LT CH_VW	ETHNCTY_NTV_HI_PCFC_IS LNRD_SW	VARCHAR2 (1)	N	Ethnicity Native Hawaiian/Pacific Islander Switch	This column indicates if the patient's race is native Hawaiian or Pacific Islander.	ETHNCTY_CD
NATL_RSDNT_SMRY_LT CH_VW	ETHNCTY_WHT_SW	VARCHAR2 (1)	N	Ethnicity White Switch	This column indicates if the patient's race is White.	ETHNCTY_CD
NATL_RSDNT_SMRY_LT CH_VW	FACESHEET_IND	CHAR (1)	N	Facesheet Indicator	This column indicates whether an MDS 2.0 facesheet (Section AB and AC) has been	
NATL_RSDNT_SMRY_LT CH_VW	FIRST_NAME	VARCHAR2 (12)	N	First Name	This column contains the patient's first name.	
NATL_RSDNT_SMRY_LT CH_VW	GNDR_ID	NUMBER (1.0)	N	Gender	This column contains a code identifying the patient's gender.	LTCH_GNDR_CD
NATL_RSDNT_SMRY_LT CH_VW	LAST_NAME	VARCHAR2 (18)	N	Last Name	This column contains the patient's last name.	
NATL_RSDNT_SMRY_LT CH_VW	MBI_NUM	VARCHAR2 (11)	N			
NATL_RSDNT_SMRY_LT CH_VW	MDL_INITL_TXT	VARCHAR2 (1)	N	Middle Initial	This column contains the patient's middle initial.	
NATL_RSDNT_SMRY_LT CH_VW	RACE_ID	VARCHAR2 (2)	N	Race ID	This column is for the definition of the resident's race.	
NATL_RSDNT_SMRY_LT CH_VW	RSDNT_CHG_TS	DATE (7)	N	Resident Change Timestamp	This column contains the date/time that the resident's row of data was last updated.	
NATL_RSDNT_SMRY_LT CH_VW	RSDNT_INTRNL_ID	NUMBER (10.0)	N	Resident Internal ID	This is a number assigned by the system that uniquely indicates the patient. The combination	
NATL_RSDNT_SMRY_LT CH_VW	RSDNT_MDCCD_NBR	VARCHAR2 (14)	N	Resident Medicaid ID	This column contains the resident's Medicaid number.	
NATL_RSDNT_SMRY_LT CH_VW	RSDNT_MDCR_NBR	VARCHAR2 (12)	N	Resident Medicare Number	This column contains the resident's Medicare number.	
NATL_RSDNT_SMRY_LT CH_VW	SSN_NUM	VARCHAR2 (9)	N	Social Security Number	This column contains the resident's Social Security Number.	
NATL_RSDNT_SMRY_LT CH_VW	STATE_ID	VARCHAR2 (2)	N	State ID	This is the state abbreviation.	STATES
NATL_RSDNT_SMRY_LT CH_VW	ST_PREPD_DT	DATE (8)	N	State Prepared Date	This column represents the date when the state prepared the data to be pulled to the national	