

HEADER

Data Element	Edit Checks Performed	Error Type
Report Year	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Reporting year in the file header does not match with the Quarterly Submission	XSD
Report Quarter	Missing element	XSD
	Invalid format	SCHEMA
	Blank	SCHEMA
	Reporting quarter in the file header does not match with the Quarterly Submission	XSD
Data Type	Missing element	XSD
	Invalid format	SCHEMA
	Blank	SCHEMA
	Schema Type in the xml file is not valid	XSD
Submission Type	Missing element	XSD
	Invalid Code	XSD
	Blank	SCHEMA
Process Date	Missing element	SCHEMA
	Invalid date format	SCHEMA
	Blank	SCHEMA
AHCA Number	Missing element	XSD
	Invalid format	SCHEMA
	Blank	SCHEMA
	Invalid AHCA number	XSD
	Facility Number in the file header does not match with the Quarterly Submission	XSD
Medicare Number	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
Organization Name	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA

AMBULATORY

Data Element	Edit Checks Performed	Error Type
AHCA Number	Missing element	XSD
	Invalid format	SCHEMA
	Blank	SCHEMA
	AHCA_NUM in header 111111 does not matched with Record AHCA_NUM 000011111	VR-12
Patient Control Number	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	There is a duplicate key sequence 'PCN DUP' for the 'PATIENT_CONTROL_NUMBER' key or unique identity constraint	XSD
Medical Record Number	Missing	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
Patient Social Security Number	Missing element	XSD
	Invalid format	SCHEMA
	Blank	SCHEMA
	Invalid SSN as defined by SSA.	VR-18
	The Patient Social Security Number cannot equal a) 000000000, 000#####, ###00####, or #####0000 b) cannot begin with 666 (i.e., 666#####) c) cannot begin with any value in the range 900 thru 999, inclusive d) It cannot be the same digit for all nine (9) characters, excepting default SSN 77777777-Unknown	VR-19
	Identical Patient Social Security Number on one or more other records must have the same Patient Race, Patient Sex, and Patient Date of Birth.	VR-20
	Duplicate Social Security Numbers found with the same dates of service for type of Service=1. Records containing Duplicate SSN's and DOS must be combined into a single record	VR-21
	Threshold: Type of Service 1 - Percentage of Unknown SSN - 77777777 exceed 52%	VR-22

Data Element	Edit Checks Performed	Error Type
Patient Ethnicity	Missing element	XSD
	The 'PATIENT_ETHNICITY' element is invalid -The Pattern constraint failed.	SCHEMA
	Must be be the upper case 'E' character, followed by a single number character from the list: '1', '2', or '7'	VR-24
	THRESHOLD: Percentage of Unknown Ethnicity - E7 exceed 50%	VR-25
Patient Race	Missing element	
	The 'PATIENT_RACE' element is invalid-The Pattern constraint failed.	SCHEMA
	Must be one number character in the range '1' thru '7', inclusive	VR-27
	THRESHOLD: Percentage of Unknown Race - 7 exceed 50%.	VR-28
Patient Date of Birth	Missing element	XSD
	Invalid Birth Date	SCHEMA
	Invalid format	SCHEMA
	Day inconsistent with month	SCHEMA
	Month, day or year component out of valid range	SCHEMA
	DOB invalid or not default 1880-01-01.	VR-30
	Birth Date occurring after Visit Begin Date	VR-31
	Patient age > 115 yrs.	VR-32
Patient Sex	Missing element	SCHEMA
	Invalid format	SCHEMA
	The facility must verify records where Patient Sex equals 'U'	VR-34
	Inconsistent sex with Principal a Diagnosis	VR-53
	Inconsistent sex with Other Diagnosis	VR-61
	Inconsistent sex with Other CPT code	VR-71
Patient Zip Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid Patient ZIP code	VR-36
Patient Country Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid Country code	VR-38
Type of Service	Missing element	SCHEMA
	Invalid format	SCHEMA
	Type of Service = 1 and Service Location reported. Facility not authorized to provide ED services. Service Location must be NULL (i.e., is not submitted or left blank).	VR-136
	ASC cannot contain type of service 2	VR-136.1
Admit Source/Point of Origin	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid Admit Source code	VR-42
Principle Payer	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid Payer Code	VR-44
	Principle Payer = 'P' (Unknown) may only be used when Type of Service =2 and the Patient Status = '07' (AMA)	VR-45
	If the Principle Payer = 'O' (KidCare) then the Patient Age on the same record must be less than or equal to 20.	VR-46
	THRESHOLD: Percentage of Payer M exceed 10%.	VR-47
Principle Diagnosis Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid ICD-10 Principle Diganosis code based on Discharge Date	VR-49
	Principle Diagnosis Code must not be omitted (i.e., "left blank") unless the Type of Service = '2' AND Patient Status = '07'	VR-50
	The Principal Diagnosis Code can not be the same as any Other Diagnosis Code submitted on the same record	VR-51
	Principle Diagnosis Code must comply with the Medicare ICD-10 Patient Age Conflict code edit for the associated age ranges: Perinatal/Newborn Age =0; Pediatric Age 0-17 : Maternity Age 9-64; Adult Age 15-124.	VR-52
	Patient Sex must comply with the Medicare ICD-10 Sex Conflict code edit for the associated reporting period. PDX with sex specific restriction = "Male Only" or "Female Only" must have corresponding sex code M or F	VR-53
	ECMORB codes used as a in Principal Diagnosis Code. ECMORB codes must be reported ONLY in ECMORB code field.	VR-135.2

Data Element	Edit Checks Performed	Error Type
Other Diagnosis Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	Other Dx >10	SCHEMA
	Invalid ICD-10 Other Diagnosis Code based on Discharge Date	VR-56
	The Other Diagnosis Code can not be the same as any Other Diagnosis Code OR PDx code submitted on the same record	VR-57
	Other Diagnosis Code must comply with the Medicare ICD-10 Patient Age Conflict code edit for the associated age ranges: Perinatal/Newborn Age =0; Pediatric Age 0-17 : Maternity Age 9-64; Adult Age 15-124.	VR-60
	Other Dx codes must comply with the Medicare ICD-10 Sex Conflict code edit for the associated reporting period. PDx with sex specific restriction = "Male Only" or "Female Only" must have corresponding sex code M or F.	VR-61
	ECMORB codes used as a Other Diagnosis Code. ECMORB codes must be reported ONLY in ECMORB code field	VR-135.3
Evaluation and Management Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	E/M codes >5	SCHEMA
	EM code must be present only for TOS = 2 and EM code must not be present for TOS=1	VR-63
	E/M reportable range is 99281-99285, 99288, 99291-99292, G0380-G0384.	VR-64
	Use default EM 99999 only if the Type of Service = 2 and Patient Discharge Status = '07' OR ED charges=0.	VR-66
	E/M codes and type of service =1.	VR-327
Other CPT/HCPCS Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	CPT/HCPCS > 30	SCHEMA
	Invalid CPT/HCPCS code based on Discharge Date	VR-69
	E/M code in Other CPT 1-30.	VR-70
	Patient Sex must comply with the CPT Sex Conflict code edit for the associated sex restriction = "Male Only" or "Female Only"	VR-71
	The 'OTHER_CPT_HCPCS_CODE' element is invalid-The Pattern constraint failed.	VR-72
	For Hospitals (Pro-code 23), CPT/HCPCS codes AND/OR Revenue Code Charge Categories are not in the reportable ranges. CPT Code range	VR-73.1
	No CPT/HCPCS codes in the reportable range. Proc-code 14/64 (ASC,Cardiac Cath labs)	VR-73.2
Attending Practitioner ID	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid Attending Practitioner ID for type of service-1	VR-75
	Invalid Attending Practitioner ID for type of service-2	VR-76
Attending Practitioner NPI	Missing element	SCHEMA
	Invalid format	SCHEMA
Operating or Performing Practitioner ID	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid Operating or Performing Practitioner ID	VR-80
	Invalid Operating or Performing Practitioner ID. Field must contain a valid practitioner ID in format ME12345, APRN1234567, OS1234 or "US9999999999" with no zero fill or leading zeros	VR-81
	Operating or Performing Practitioner ID without Other CPT or HCPCS Procedure Code	VR-83-1
	Other CPT or HCPCS Procedure Code without Operating or Performing Practitioner ID.	VR-83-2
Operating or Performing Practitioner NPI	Missing element	SCHEMA
	Invalid format	SCHEMA
Other Practitioner ID	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid Other Practitioner ID	VR-86
	Operating or Performing Practitioner ID equals Other Operating Practitioner ID.	VR-88
Other Practitioner NPI	Missing element	SCHEMA
	Invalid format	SCHEMA
Revenue Code Charges	Missing element	SCHEMA
	Invalid format	SCHEMA
Total Charges	Missing element	SCHEMA
	Invalid format	SCHEMA
	The sum of all sub-charges reported must equal total charges, plus or minus 13 dollars.	VR-106
	Type of service=2 and Total Charge=0 and not Discharged AMA or Payer N. The total charge reported is \$0 and the patient discharge status not 07 AMA or Payer =N.	VR-107
	Total charges exceed \$1,000,000 and must be verified by the reporting entity.	VR-108

Data Element	Edit Checks Performed	Error Type
Total Charges	Total charges exceed \$300,000 and must be verified by the reporting entity.	VR-109
	Total charges exceed \$300,000 and must be verified by the reporting entity.	VR-110
	ED total charges exceed \$300,000 and must be verified by the reporting entity.	VR-111
Visit Begin Date	Missing element	SCHEMA
	Invalid format	SCHEMA
	Patient End Date is before Begin Date.	VR-113
	Free-standing ASC (Proc-code=14) cannot have a LOS greater than 1 day.	VR-114
	Sunday Visits (Freestanding ASC). Sunday visits at a freestanding Ambulatory Surgical Center must be verified.	VR-115
Visit End Date	Missing element	SCHEMA
	Invalid format	SCHEMA
	Patient End date is not in the reporting period.	VR-118
	ED Length of stay is greater than 8 days.	VR-119
	AS Visit End Date > 32 days	VR-120
Hour of Arrival	Missing element	SCHEMA
	Invalid format	SCHEMA
	ED Hour of Arrival and ED Discharge Hour = 99. Both ED hour of Arrival and Discharge Time cannot = 99	VR-123
	Unknown	
ED Hour of Discharge	Missing element	SCHEMA
	Invalid format	SCHEMA
	ED Hour of Discharge invalid	VR-125
	ED Hour of Discharge Time is not 99 for ASC. Type of service 1 must use default code 99 for the ED hour of discharge	VR-127
Patient Reason Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid ICD-10 diagnosis code based on Discharge Date	VR-130
ECMORB Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	External Cause of Morbidity Codes must be space filled (blank) for Type of Service=1.	VR-131
	Invalid ICD-10 ECMORB diagnosis code based on Discharge Date, Range V00-Y99	VR-133
	ECMORB code is Repeated.	VR-135.1
	ECMORB codes used as a in Principal Diagnosis Code.	VR-135.2
	ECMORB codes used as a Other Diagnosis Code.	VR-135.3
	ECMORB codes used as a Patient Reason for Visit (Admitting Diagnosis).	VR-135.4
Service Location Code	Invalid format	SCHEMA
	Facility unlicensed for Service Location code.	VR-138
		VR-138.1
Patient Status	Missing element	SCHEMA
	Invalid format	SCHEMA
	Invalid Patient status code.	VR-140
	Status 20- Ambulatory Surgery Death. An ambulatory visit with discharge status 20 must be verified	VR-141

INPATIENT

Data Element	Edit Checks Performed	Error Type
AHCA Number	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	AHCA_NUM in header 111111 does not matched with Record AHCA_NUM 000011111	SCHEMA
Patient Control Number	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	There is a duplicate key sequence 'PCN DUP' for the 'PATIENT_CONTROL_NUMBER' key or unique identity constraint	XSD
Medical Record Number	Missing	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
Patient Social Security Number	Missing element	XSD
	Invalid format	SCHEMA
	Blank	SCHEMA
	Invalid SSN as defined by SSA.	VR-149

Data Element	Edit Checks Performed	Error Type
Patient Social Security Number	The Patient Social Security Number cannot equal a) 000000000, 000#####, ###00####, or #####0000 b) cannot begin with 666 (i.e., 666#####) c) cannot begin with any value in the range 900 thru 999, inclusive d) It cannot be the same digit for all nine (9) characters, excepting default SSN 77777777-Unknown	VR-150
	Identical Patient Social Security Number on one or more other records must have the same Patient Race, Patient Sex, and Patient Date of Birth.	VR-151
	Duplicate Social Security Numbers found with the same dates of service for type of Service=1. Records containing Duplicate SSN's and DOS must be combined into a single record	VR-152
Patient Ethnicity	Missing	XSD
	Invalid format	SCHEMA
	Blank	SCHEMA
	Must be be the upper case 'E' character, followed by a single number character from the list: '1', '2', or '7'	VR-155
	THRESHOLD: Percentage of Unknown Ethnicity - E7 exceed 50%	VR-156
Patient Race	Missing	
	Invalid format	SCHEMA
	Blank	SCHEMA
	Must be one number character in the range '1' thru '7', inclusive	VR-158
	THRESHOLD: Percentage of Unknown Race - 7 exceed 50%.	VR-159
Patient Date of Birth	Missing element	XSD
	Invalid format	SCHEMA
	Blank	SCHEMA
	Invalid Birth Date	SCHEMA
	Day inconsistent with month	SCHEMA
	Month, day or year component out of valid range	SCHEMA
	DOB invalid or not default 1880-01-01.	VR-161
	The patient's Date of Birth is after the admit date or discharge date of service.	VR-162
	Patient age > 115 yrs.	VR-163
	Patient age must be <1 day. Newborn priority of admission without newborn source.	VR-164
	Principal Diagnosis Code conflicts with Patient Age.	VR-213
	Other Diagnosis Codes 1-30 conflicts with Patient Age	VR-223
	Admit Diagnosis Code conflicts with Patient Age.	VR-302
Patient Sex	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	The facility must verify records where Patient Sex equals 'U'	VR-166
	Inconsistent sex with Principal Diagnosis	VR-214
	Inconsistent sex with Other Diagnosis	VR-224
	Inconsistent sex with Admit Diagnosis	VR-303
Patient Zip Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Invalid Patient ZIP code	VR-168
Patient Country Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
Type of Service	Invalid Country code	VR-170
	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	CR Facility with Inpatient Type of Service = 1.	VR-173
	Type of Service Code = '2' then Comp Rehab charges must be greater than \$0	VR-174
	Acute care hospital not licensed for CR and Type of Service = 2.	VR-175
Admit Priority	Missing	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Patient Priority of admission is invalid. Must contain a one digit code (1, 2, 3, 4, 5).	VR-178
	Priority of Admission = '5' and the facility not a Licensed Trauma Facility.	VR-179
	Trauma Charge>0 and Priority of Admission not "5".	VR-180
	THRESHOLD: More deliveries than Newborns exceed 52%. Ratio of Newborn Priority=4 to Principle Procedure ICD-10 code 10D-10E. Excludes 10D00Z1, 10D17ZZ and 10D0728.	VR-182

Data Element	Edit Checks Performed	Error Type
Admit Source/Point of Origin	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Invalid Admit Source code	VR-184
	Newborn priority of admission without newborn source. Use of newborn priority of admission is only permissible with use of source of admission codes 10 or 13	VR-164
Admit Date	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Admission Date must be less than or equal to the CURRENT_SYSTEM_DATE.YEAR	VR-187
	Admission date must equal or precede the discharge date.	VR-188
Admit Time	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Hour of Arrival Time is invalid. Must be in the range '00' thru '24' inclusive, or '99'	VR-192
Discharge date	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Discharge Date is Invalid.	VR-194
	Discharge date=admit date (potential outpatient) unless discharge status = 02,04, 07, 20,70.	VR-195
	Discharge Date is not within the Reporting Quarter.	VR-196
	Length of Stay >365 days.	VR-197
Discharge Time	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Admission Time and Discharge Time = '99'.	VR-200
Discharge Status	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Patient Discharge Status code is invalid.	VR-202
Principle Payer	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Principle Payer code invalid. Must equal A-E or H-Q.	VR-204
	Principle Payer = 'O' (KidCare) and Patient Age greater than 20yrs.	VR-205
	THRESHOLD: Percentage of Payer M exceed 10%.	VR-206
Principle Diagnosis	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Must be a valid ICD-10-CM code for the associated reporting period.	VR-208
	The Principal Diagnosis Code can not be the same as any Other Diagnosis Code.	VR-210
	Principal diagnosis code cannot be an ECMORB code.	VR-211
	Principal Diagnosis Code must not equal 'DRG 998' (Not Groupable) or 'DRG 999' (Invalid Principal Diagnosis).	VR-212
	Principal Diagnosis Code conflicts with Patient Age.	VR-213
Principal Diagnosis Code conflicts with Patient Sex.	VR-214	
POA-Present on Admission Principle Diagnosis	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	POA code must equal Y, N, U, W or 1	VR-216
	POA for Principal Diagnosis Code invalid for the DX code	VR-217
Other Diagnosis codes 1-30	Invalid format	SCHEMA
	Other Diagnosis Codes greater than 30.	SCHEMA
	Must be a valid ICD-10-CM code for the associated reporting period.	VR-220
	Other diagnosis 1-30 repeated in Other Diagnosis codes.	VR-221
	Other Diagnosis Code conflicts with Patient Age.	VR-223
	Other Diagnosis Code conflicts with Patient Sex.	VR-224
POA-Present on Admission Other Diagnosis	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	POA code must equal Y, N, U, W or 1	VR-226
	POA for Other Diagnosis Code invalid for the DX code	VR-227

Data Element	Edit Checks Performed	Error Type
Revenue Charges PHYS_THERAPY OCCUPATIONAL_THERAPY SPEECH_THERAPY COMP_REHAB OTHER NURSERY_LEVEL_1 NURSERY_LEVEL_2 NURSERY_LEVEL_3		
Trauma Charge	Trauma charges at an unlicensed Trauma facility.	VR-276
Comprehensive Rehab Charge	Comp Rehab charge is greater than zero and facility not CR licensed.	VR-283.1
Total Gross Charges	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	The sum of all sub-charges reported must equal total charges, plus or minus 13 dollars.	VR-289
	Total Gross Charges greater than \$ 3 million	VR-290
	Total Charges = \$0 and Admit Priority not 4.	VR-291
	LOS > 2 days and Per Diem not \$200-200,000	VR-292
	Records has no room, ICU, CCU, Nursery or Comp Rehab Charges.	VR-294
Infant Linkage	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Infant Linkage SSN Invalid	VR-296
	Infant Linkage SSN format Invalid.	VR-297
	Infant Linkage Identifier is not equal to the Mother's SSN.	VR-298
Admitting Diagnosis	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Admitting Diagnosis must be a valid ICD-10-CM code	VR-300
	Admitting Diagnosis conflicts with patient age	VR-301
	Admitting Diagnosis conflicts with patient sex	VR-302
External Cause of Morbidity Code -ECMORB	Invalid format	SCHEMA
	ECMORB is not a valid ECMORB Code.	VR-307
	ECMORB is repeated.	VR-308.1
	ECMORB as Admitting or Principle DiagnosisCode.	VR-308.2
	ECMORB in Other Diagnosis.	VR-308.3
Emergency Department (ED) Date of Arrival	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Emergency Department (ED) Date of Arrival format is invalid	VR-309
	Emergency Department (ED) Date of Arrival is invalid	VR-310
	Admit Date greater than 6 days after ED Date of Arrival.	VR-311
	ED Date of Arrival after Admit Date.	VR-313
	Emergency Department (ED) Hour of Arrival	Missing element
Invalid format		SCHEMA
Blank		SCHEMA
ED Hour of Arrival equal Discharge Time		VR-317
Condition Code	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Condition Code must be 00 or P7.	VR-318
	Emergency Room Charges must be greater than \$0.00 when the Inpatient Condition Code is P7 and the Principal Payer is not A, B, or I.	VR-321
	A valid ED Date of Arrival and ED Hour of Arrival must be present if Condition Code is P7.	VR-322
	Condition Code is 00 and ED Data elements are present.	VR-323
Trailer	Missing element	SCHEMA
	Invalid format	SCHEMA
	Blank	SCHEMA
	Number of Patient Records must equal the total records in the file submitted.	XSD
	Number of Patient Records must be at least '1'	VR-325