

# A

## QUICK REFERENCE TO VALIDATION REPORTS

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## FINAL VALIDATION REPORTS

Two types of Final Validation Reports are available in the CASPER Reporting application:

- **LTCH Provider Final Validation Reports**

Unless certain severe errors occur during the processing of a submitted file, the QIES Assessment Submission and Processing (ASAP) system automatically generates an *LTCH Provider Final Validation Report*. The system-generated LTCH Provider Final Validation Report is created in two formats: Text and XML. Both report formats are delivered automatically to your facility's CASPER validation report folder.

**NOTE:** The XML-formatted report is intended for software vendors. LTCHs may ignore the XML-formatted report and access the user-friendly plain text version of the LTCH Provider Final Validation Report.

- **LTCH Submitter Final Validation Reports**

For submission files that contain severe errors, the QIES ASAP system is unable to generate an LTCH Provider Final Validation Report. You may identify these errors by requesting the *LTCH Submitter Final Validation Report*. The QIES ASAP system does not automatically generate this report.

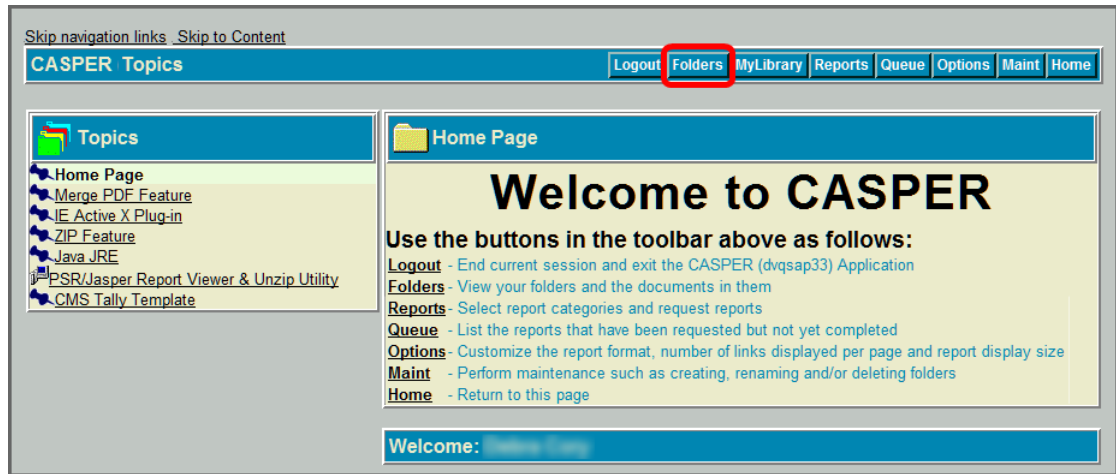
### **System-Generated LTCH Provider Final Validation Report**

The following steps detail how to access and view the system-generated LTCH Provider Final Validation report in the CASPER Reporting application so that you may verify that all records of your submission file processed without error.

**NOTE:** A system-generated LTCH Provider Final Validation Report is available only if the *Submission Status* is "Completed" and the *Total Record Count* is greater than zero (0). This information is available to you on the **List of My Submissions** (Submission Status) page of the LTCH File Submission system.

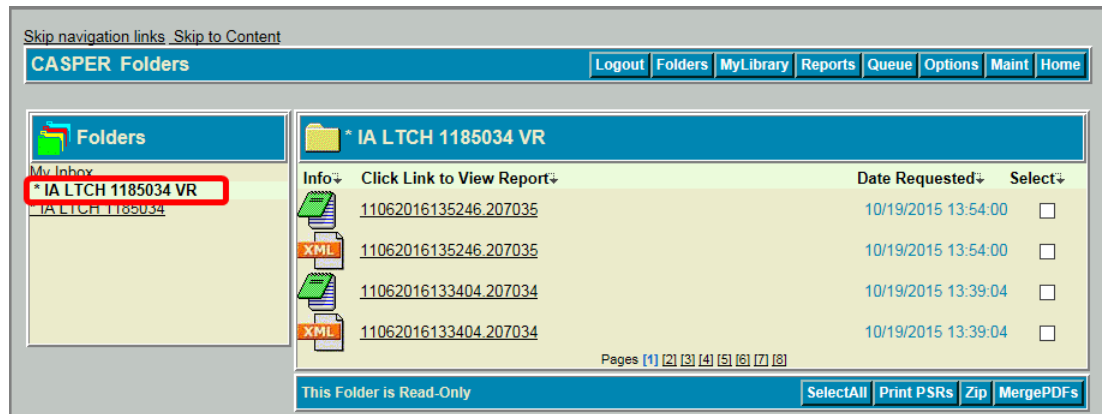
1. From the **Welcome to the CMS QIES Systems for Providers** page, select the CASPER Reporting link and log in to the CASPER Reporting application with your individual QIES user ID and password. This is the same user ID/password with which you access the LTCH File Submission system. The **CASPER Topics/Home** page (Figure A-1) is presented.

**Figure A-1. CASPER Topics/Home Page**



2. Select the **Folders** button located on the tool bar at the top of the page. The **CASPER Folders** page (Figure A-2) is presented. The folders available to you are along the left-hand side of the page.

**Figure A-2. CASPER Folders Page – Validation Report Folder**



3. Locate and select the folder with the naming structure of:

**[State Code] LTCH [Facility ID] VR**

Where:

**State Code** = your 2-character state code

**LTCH** = Long Term Care Hospital

**Facility ID** = CMS-assigned facility ID used for submitting LTCH CARE records

**VR** = Validation Report

4. With the VR folder selected, the main body of the **CASPER Folders** page lists the LTCH Provider Final Validation reports that were system-generated and are available for you to view. The report links are formatted as follows:

**[Submission Date & Time].[Submission ID]**

**NOTE:** LTCH CARE reports are automatically purged after 60 days.

5. Select the report that corresponds to the submission file you wish to verify. Figure A-3 depicts a fictional system-generated LTCH Provider Final Validation report in text format and Figure A-4 depicts a fictional system-generated LTCH Provider Final Validation Report in XML format.

**NOTE:** When a submitted file cannot be unzipped or contains no records, the QIES ASAP system cannot generate an LTCH Provider Final Validation report and place it in your VR folder.  
If an LTCH Provider Final Validation report was created but the number of records displayed is less than the number of records you submitted in the file, there were one or more records that could not be processed by the QIES ASAP system.  
In either case, you must request the **LTCH Submitter Final Validation** report in order to identify the issues with the records that were not processed.

Facility-identifiable records from the submitted LTCH CARE file are presented on the system-generated LTCH Provider Final Validation Report in the following order:

- State Code
- Facility ID
- Patient Last Name
- Patient First Name
- Record Processing Order
- Assessment ID
- Error Type Code
- Item in Error Text
- Value in Error Text

**Figure A-3. LTCH Provider Final Validation Report – Text Format\***

```

                                CMS Submission Report
                                LTCH Provider Final Validation Report

Submission Date/Time:           04/06/2016 13:52:46
Submission ID:                  207035
Submitter User ID:              ██████████
Submission File Name:           20151106.zip
Submission File Status:         Completed
Processing Completion Date/Time: 04/06/2016 13:53:59

Facility ID (FAC_ID):          1185034
Provider Name:                  SELECT SPECIALTY HOSPITAL - QUAD CITIES
Provider CCN:                   162001
State Code:                     IA

# Records Processed:            1
# Records Accepted:             0
# Records Rejected:             1
# Duplicate Records:            1
# Records Submitted Without
  Provider Authority:           0
Total # of Messages:            1

-----
Record: 1                       Rejected

Name (A0500C, A): ██████████
SSN (A0600A): ██████████
Medicare Number (A0600B): ██████████
Res_Int_ID: 17849322

Target Date: 04/05/2015         Type of Record (A0050): NEW RECORD
Asmt_ID: 1050494                RFA (A0250): 12
XML File Name:                  SL_TC63467_LE.xml

LTCH Item(s):                   A0050, Existing record LTCH_ASMT_ID,
                                LTCH_SUBMSN_ID
Data Submitted:                 1, 1050491, 207034
Message Number/Severity:        -907 FATAL
Message:                        Duplicate Assessment: The submitted
                                record is a duplicate of a previously
                                accepted record.

-----

This report may contain privacy protected data and should not be released to
the public.
-----

```

\* Fictitious, sample data are depicted.

**Figure A-4. LTCH Provider Final Validation Report – XML Format\***

```

- <report name="CMS Submission Report" type="LTCH Provider Final Validation Report">
- <header>
- <submission>
  <property name="Submission Date/Time" value="04/06/2016 13:52:46" />
  <property name="Submission ID" value="207035" />
  <property name="Submitter User ID" value=" " />
  <property name="Submission File Name" value="20161106.zip" />
  <property name="Submission File Status" value="Completed" />
  <property name="Processing Completion Date/Time" value="04/06/2016 13:53:59" />
</submission>
- <provider>
  <property name="Facility ID (FAC_ID)" value="1185034" />
  <property name="Provider Name" value="SELECT SPECIALTY HOSPITAL - QUAD CITIES" />
  <property name="Provider CCN" value="162001" />
  <property name="State Code" value="IA" />
</provider>
- <processing>
  <property name="# Records Processed" value="1" />
  <property name="# Records Accepted" value="0" />
  <property name="# Records Rejected" value="1" />
  <property name="# Duplicate Records" value="1" />
  <property name="# Records Submitted Without Provider Authority" value="0" />
  <property name="Total # of Messages" value="1" />
</processing>
</header>
- <records>
- <record number="1">
  <property name="Record Status" value="Rejected" />
  <property name="Name (A0500C, A)" value=" " />
  <property name="SSN (A0600A)" value=" " />
  <property name="Medicare Number (A0600B)" value=" " />
  <property name="Res_Int_ID" value="17849322" />
  <property name="Target Date" value="04/05/2016" />
  <property name="Type of Record (A0050)" value="NEW RECORD" />
  <property name="Asmt_ID" value="1050494" />
  <property name="RFA (A0250)" value="12" />
  <property name="XML File Name" value="SL_TC63467_LE.xml" />
- <errors>
- <error number="1">
  <property name="LTCH Item(s)" value="A0050, Existing record LTCH_ASMT_ID, LTCH_SUBMSN_ID" />
  <property name="Data Submitted" value="1, 1050491, 207034" />
  <property name="Message Number/Severity" value="-907 FATAL" />
  <property name="Message" value="Duplicate Assessment: The submitted record is a duplicate of a previously
accepted record." />
  </error>
</errors>
</record>
</records>
- <privacy>
  <property name="message" value="This report may contain privacy protected data and should not be released to the
public." />
</privacy>
</report>

```

\* Fictitious, sample data are depicted.

**NOTE:** For more information about the LTCH Provider Final Validation reports, refer to the *LTCH CARE Provider Reports* (Section 3) of the CASPER Reporting User's Manual for LTCH Providers. This manual is available on the **Welcome to the CMS QIES Systems for Providers** page.

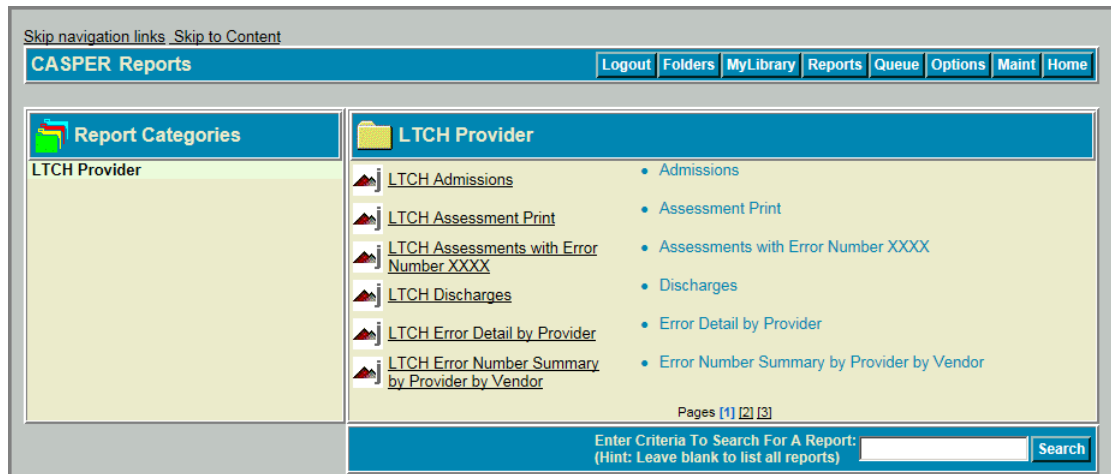
### **LTCH Submitter Final Validation Report**

For the occasions when the QIES ASAP system cannot produce the system-generated LTCH Provider Final Validation report or include all records on the system-generated LTCH Provider Final Validation report, you can request an LTCH Submitter Final Validation Report in order to determine why the QIES ASAP system could not process these records.

The following steps identify how to request and view the LTCH Submitter Final Validation report:

1. Log into the CASPER Reporting application with your user ID and password. This is the same user ID and password that you use for LTCH CARE File Submissions.
2. Select the **Reports** button. The **CASPER Reports** page (Figure A-5) is presented.

**Figure A-5. CASPER Reports Page**



The LTCH Provider report category is displayed by default. Links to the LTCH Provider reports available to you are listed in the right-hand frame.

**NOTE:** Only those report categories to which you specifically have access are listed in the *Report Categories* frame.

3. Select the LTCH Submitter Final Validation link from the right-hand frame. The **CASPER Reports Submit** page (Figure A-6) is presented.

**Figure A-6. CASPER Reports Submit Page – LTCH Submitter Final Validation Report**

The screenshot shows a web interface for submitting reports. At the top, there is a blue navigation bar with the text "CASPER Reports Submit" and several menu items: "Logout", "Folders", "MyLibrary", "Reports", "Queue", "Options", "Maint", and "Home". Below this, a yellow header area displays "Report: LTCH Submitter Final Validation". Underneath, there is a text input field labeled "Submission ID:". At the bottom, there are two dropdown menus: "Template Folder:" with "My Favorite Reports" selected, and "Template Name:" with "LTCH Submitter Final Validation" selected. To the right of these dropdowns are four buttons: "Submit", "Back", "Save & Submit", and "Save".

4. Enter the desired submission ID in the *Submission ID* field and select the **Submit** button.

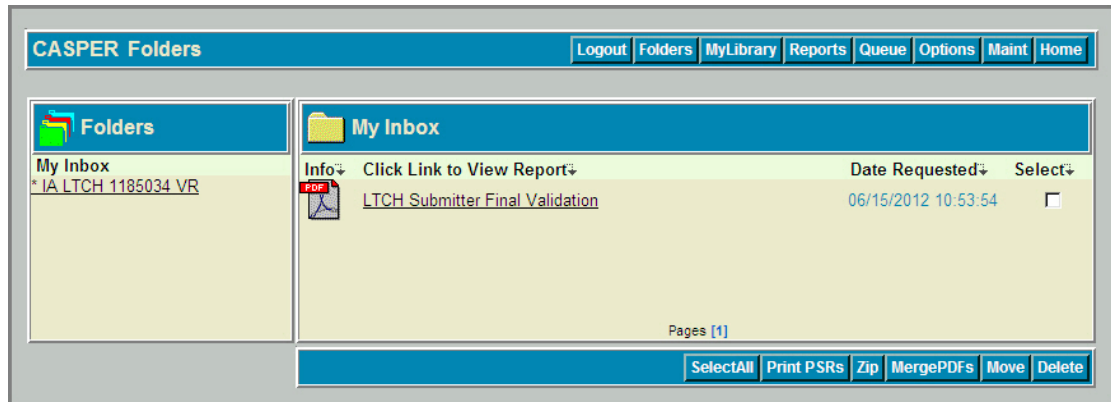
**NOTE:** You may only request the LTCH Submitter Final Validation report for files submitted with your user ID. You cannot request the LTCH Submitter Final Validation report for a file you did not submit. If you request a report for a file you did not submit you receive a “User must enter a valid Submission ID” message and the request is not processed.

5. When completed, the LTCH Submitter Final Validation report is placed in your *My Inbox* folder in the CASPER Reporting Application. To access this folder, select the **Folders** button. The **CASPER Folders** page (Figure A-2, above) is presented. The folders available to you, including the *My Inbox* folder, are listed along the left-hand side of the page.
6. Select the My Inbox link. The main body of the **CASPER Folders** page (Figure A-7) lists the reports that are available in your *My Inbox* folder.

Each report name is a link with which you may open and view the contents of that report. The *Date Requested* listed for each report is the date and time that you submitted the report request.



Figure A-7. CASPER Folders Page – My Inbox Folder



7. Find and select the LTCH Submitter Final Validation report you wish to view. Open the desired report by selecting the report name link.

**NOTE:** When you hover your mouse pointer over the icon to the left of a report name, the submission ID for which that report was run displays briefly.

Listed below are several of the severe errors for which the QIES ASAP system **cannot** produce a system-generated LTCH Provider Final Validation report. These errors are reported only on the LTCH Submitter Final Validation report:

- -901 Invalid Zip File
- -902 Invalid XML File
- -904 Invalid XML File Format
- -1021 Invalid Fac\_ID

**NOTE:** While the severe errors listed above are common, it is not a comprehensive listing. To view a complete listing of errors, please refer to Section 5 of the LTCH CARE Submission User's Guide available on the **CMS QIES Systems for Providers** page.