

Wlpop Error Validation Codes and Descriptions – by data field

Primary Record Validation (RECTYPE = A)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
FNUM	Exception	Facility Number does not correspond to accepted values.
PCONTROL	Exception	Patient Control Number must be unique.
BDAT	1010	Date of Birth is a required field.
BDAT	2010	Date of Birth does not correspond to a valid date (mmddyyyy).
BDAT	4040	Date of Birth exceeds human lifespan of 124 years.
BDAT	5070	Date of Birth must be less than or equal to the Admission Date.
ZIP	1030	ZIP Code is a required field.
ZIP	3020	ZIP Code does not correspond to accepted values.
ZIP	5005	Condition Code 1 must be '17' if ZIP Code is not reported.
ZIP	5015	Condition Code 1 must not be reported if ZIP Code is reported.
SEX	1040	Sex is a required field.
SEX	3030	Sex does not correspond to accepted values.
RACE	1050	Race is a required field for this type of patient record.
RACE	3040	Race does not correspond to accepted values.
ETHN	1350	Ethnicity is a required field for this type of patient record.
ETHN	3250	Ethnicity does not correspond to accepted values.
ADMS	1060	Source of Admission is a required field for this type of patient record.
ADMS	3050	Source of Admission does not correspond to accepted values.
ADMS	5190	Source of Admission must be '1', '2', '3', '4', or '9' if the Type of Admission equals '4' (Newborn).
ADMT	1070	Type of Admission is a required field for this type of patient record.
ADMT	3060	Type of Admission does not correspond to accepted values.
ADMT	5200	Principal Diagnosis of 'V3' with a fourth digit of '0' requires Type of Admission to be '4' (Newborn).
ADMT	5255	Admit Type must equal '4' when Age in Days is calculated as less than one day (certain exceptions apply).
ADMT	5256	Admit Type cannot equal '4' (newborn) for this type of patient record.
ADMT	5257	Admit Type cannot equal '4' (newborn) if Age in Days is calculated as greater than '0'.
ADAT	1080	Admission Date is a required field for this type of patient record.
ADAT	2020	Admission Date does not correspond to a valid date (mmddyyyy).
ADAT	5010	Admission Date must be equal to Birth Date when Principal Diagnosis is 'V30' – 'V37' with a fourth digit of '0'.
ADAT	5020	Admission Date can be no more than two days after Birth Date when Principal Diagnosis is 'V30' – 'V37' with a fourth digit of '1'.
DXP	1090	Principal Diagnosis is a required field.
DXP	3070	Principal Diagnosis does not correspond to accepted values, or code was deleted.
DXP	4060	Principal Diagnosis contains a valid diagnosis code, but not a valid primary diagnosis code.
DXP	5090	Principal Diagnosis is age specific and does not match Date of Birth specified.
DXP	5240	Principal Diagnosis is sex specific and does not match Sex specified.
DXP_POA		Present on Admission indicator is a required field for this type of patient record. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXP_POA		Present on Admission indicator does not correspond to accepted values.
DXRV1		Reason for Visit is a required field for this type of patient record.
DXRV1		Reason for Visit does not correspond to accepted values, or code was deleted.
DXRV2		2 nd Reason for Visit cannot be submitted if DXRV1 not submitted.
DXRV2		2 nd Reason for Visit does not correspond to accepted values, or code was deleted.

Primary Record Validation (RECTYPE = A)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
DXRV3		3 rd Reason for Visit cannot be submitted if DXRV1 and DXRV2 not submitted.
DXRV3		3 rd Reason for Visit does not correspond to accepted values, or code was deleted.
DXA	1100	Admitting Diagnosis is a required field for this type of patient record.
DXA	3080	Admitting Diagnosis does not correspond to accepted values, or code was deleted.
DXA	4070	Admitting Diagnosis contains a valid diagnosis code, but not a valid admitting diagnosis code.
DXA	5100	Admitting Diagnosis is age specific and does not match Date of Birth specified.
DXA	5250	Admitting Diagnosis is sex specific and does not match Sex specified.
DXE1	3090	External Cause of Injury (E-Code) does not correspond to accepted values.
DXE1	5370	E-Code must be specified when a diagnosis exists between '800' and '995.89' (with some exceptions for '995' codes).
DXE1_POA		Present on Admission indicator is a required field for this type of patient record if DXE1 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE1_POA		Present on Admission indicator does not correspond to accepted values.
DXE1_POA		Present on Admission indicator cannot be submitted if DXE1 not submitted
DXE2		2 nd External Cause of Injury (E-Code) does not correspond to accepted values.
DXE2		2 nd External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE2		2 nd External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE2_POA		Present on Admission indicator is a required field for this type of patient record if DXE2 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE2_POA		Present on Admission indicator does not correspond to accepted values.
DXE2_POA		Present on Admission indicator cannot be submitted if DXE2 not submitted
DXE3		3 rd External Cause of Injury (E-Code) does not correspond to accepted values.
DXE3		3 rd External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE3		3 rd External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE3_POA		Present on Admission indicator is a required field for this type of patient record if DXE3 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE3_POA		Present on Admission indicator does not correspond to accepted values.
DXE3_POA		Present on Admission indicator cannot be submitted if DXE3 not submitted
DXE4		4 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE4		4 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE4		4 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE4_POA		Present on Admission indicator is a required field for this type of patient record if DXE4 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE4_POA		Present on Admission indicator does not correspond to accepted values.
DXE4_POA		Present on Admission indicator cannot be submitted if DXE4 not submitted
DXE5		5 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE5		5 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE5		5 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE5_POA		Present on Admission indicator is a required field for this type of patient record if DXE5 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)

Primary Record Validation (RECTYPE = A)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
DXE5_POA		Present on Admission indicator does not correspond to accepted values.
DXE5_POA		Present on Admission indicator cannot be submitted if DXE5 not submitted
DXE6		6 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE6		6 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE6		6 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE6_POA		Present on Admission indicator is a required field for this type of patient record if DXE6 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE6_POA		Present on Admission indicator does not correspond to accepted values.
DXE6_POA		Present on Admission indicator cannot be submitted if DXE6 not submitted
DXE7		7 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE7		7 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE7		7 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE7_POA		Present on Admission indicator is a required field for this type of patient record if DXE7 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE7_POA		Present on Admission indicator does not correspond to accepted values.
DXE7_POA		Present on Admission indicator cannot be submitted if DXE7 not submitted
DXE8		8 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE8		8 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE8		8 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE8_POA		Present on Admission indicator is a required field for this type of patient record if DXE8 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE8_POA		Present on Admission indicator does not correspond to accepted values.
DXE8_POA		Present on Admission indicator cannot be submitted if DXE8 not submitted
DXE9		9 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE9		9 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE9		9 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE9_POA		Present on Admission indicator is a required field for this type of patient record if DXE9 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE9_POA		Present on Admission indicator does not correspond to accepted values.
DXE9_POA		Present on Admission indicator cannot be submitted if DXE9 not submitted
DXE10		10 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE10		10 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE10		10 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE10_POA		Present on Admission indicator is a required field for this type of patient record if DXE10 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE10_POA		Present on Admission indicator does not correspond to accepted values.
DXE10_POA		Present on Admission indicator cannot be submitted if DXE10 not submitted
DXE11		11 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE11		11 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE11		11 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code

Primary Record Validation (RECTYPE = A)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
		submitted (DXE1 – DXE12).
DXE11_POA		Present on Admission indicator is a required field for this type of patient record if DXE11 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE11_POA		Present on Admission indicator does not correspond to accepted values.
DXE11_POA		Present on Admission indicator cannot be submitted if DXE11 not submitted
DXE12		12 th External Cause of Injury (E-Code) does not correspond to accepted values.
DXE12		12 th External Cause of Injury (E-Code) cannot contain E-Code unless DXE1 already contains an E-Code.
DXE12		12 th External Cause of Injury (E-Code) cannot be a duplicate of another E-Code submitted (DXE1 – DXE12).
DXE12_POA		Present on Admission indicator is a required field for this type of patient record if DXE12 submitted. <i>(This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.]</i>)
DXE12_POA		Present on Admission indicator does not correspond to accepted values.
DXE12_POA		Present on Admission indicator cannot be submitted if DXE12 not submitted
PINA	1110	Attending Physician ID is a required field for this type of patient record.
PINA	3110	Attending Physician ID does not correspond to accepted values.
PINA	3115	Attending Physician ID cannot be Non-Physician Provider for this type of patient record.
PINB	1340	Other Physician ID 1 is required when a Principal Procedure has been specified.
PINB	1600	Other Physician ID 1 cannot be specified if Principal Procedure is not reported.
PINB	3120	Other Physician ID 1 does not correspond to accepted values.
PINB	3125	Other Physician ID 1 cannot be Non-Physician Provider for this type of patient record.
PINC	1605	Other Physician ID 2 cannot be specified if Principal Procedure is not reported.
PINC	1610	Other Physician ID 2 cannot be specified if Other Physician ID 1 is not reported.
PINC	3130	Other Physician ID 2 does not correspond to accepted values.
PINC	3135	Other Physician ID 2 cannot be Non-Physician Provider for this type of patient record.
PRP	1365	Principal Procedure is a required field for this type of patient record.
PRP	1375	Principal Procedure must be specified if Other Physician ID 1 is reported.
PRP	1380	Principal Procedure must be specified when Principal Procedure Date is reported.
PRP	1385	Principal Procedure must be specified if Other Physician ID 2 is reported.
PRP	1390	Principal Procedure must be specified when Additional Procedures are reported.
PRP	1391	Primary procedure must be a CPT-4 code for this type of patient record.
PRP	1392	Primary procedure must be an ICD-9-CM code for this type of patient record.
PRP	3140	Principal Procedure does not correspond to accepted values, or code was deleted.
PRP	5030	Principal Procedure is sex specific and does not match Sex specified.
PRP	5330	Principal Procedure is age specific and does not match Date of Birth specified.
PRPMOD1	3805	Principal Procedure Modifier 1 does not correspond to accepted values.
PRPMOD2	3806	Principal Procedure Modifier 2 does not correspond to accepted values.
PRPMOD3		Principal Procedure Modifier 3 does not correspond to accepted values.
PRPMOD4		Principal Procedure Modifier 4 does not correspond to accepted values.
PRPD	1400	Principal Procedure Date must be specified if Principal Procedure is reported.
PRPD	2030	Principal Procedure Date does not correspond to a valid date (mmddyyyy).
PRPD	4030	Principal Procedure Date outside boundaries of the admission and discharge dates (72 hours prior to admission date is allowed).
PRPD	4400	Principal Procedure Date outside boundaries for selected quarter.
PRPD	4405	Principal Procedure does not fall in Statement Period.
PRPD	4410	Principal Procedure Date cannot be before Birth Date.
DDAT	1120	Discharge Date is a required field for this type of patient record.
DDAT	2040	Discharge Date does not correspond to a valid date (mmddyyyy).
DDAT	4010	Discharge Date outside boundaries for selected quarter.

Primary Record Validation (RECTYPE = A)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
DDAT	4480	Discharge Date cannot be before Birth Date.
DDAT	5050	Discharge Date cannot occur before Admission Date.
PTSTATUS	1130	Patient Status is a required field for this type of patient record.
PTSTATUS	3150	Patient Status does not correspond to accepted values.
SOPID	1310	Expected Source of Payment ID is a required field.
SOPID	3705	Expected Source of Payment ID does not correspond to accepted values.
SOPID	3775	Must be accepted Source of Payment ID and Type combination.
SOPTYPE	1140	Expected Source of Payment Type is a required field.
SOPTYPE	3715	Expected Source of Payment Type does not correspond to accepted values.
SOPID2	1420	Secondary Source of Payment ID is required when Secondary Source of Payment Type is specified.
SOPID2	3725	Secondary Source of Payment ID does not correspond to accepted values.
SOPID2	3745	Secondary Source of Payment ID cannot be specified if Expected Source of Payment is not reported.
SOPID2	3785	Must be accepted Secondary Source of Payment ID and Type combination.
SOPTYPE2	1410	Secondary Source of Payment Type is required when Secondary Source of Payment ID is specified.
SOPTYPE2	3735	Secondary Source of Payment Type does not correspond to accepted values.
SOPTYPE2	3755	Secondary Source of Payment Type cannot be specified if Expected Source of Payment is not reported.
PROVID		National Provider ID is a required field (w NPI Implementation).
PROVID		National Provider ID does not correspond to accepted values (w NPI Implementation).
TC	1150	Total Charges is a required field.
TC	2090	Total Charges does not correspond to a valid data format (nnnnnnnnn.nn).
TC	5180	The sum of all Revenue Charges must equal the Total Charge.
LVDAYS	1590	Leave Days cannot be a value greater than zero for this type of patient record.
LVDAYS	2310	Leave Days must be an integer value (nnn).
BILLTYPE	1160	Type of Bill is a required field.
BILLTYPE	3180	Type of Bill does not correspond to accepted values.
PTTYPE	1000	Type of Encounter is missing or does not correspond to accepted values.
SERVCODE	1005	Place of Service does not correspond to accepted values.
SERVCODE	1170	Place of Service is a required field.
SERVCODE	5300	At least one revenue record with a valid HCPCS code must exist when Place of Service is equal to '1'.
SERVCODE	5305	At least one revenue record is required.
SERVCODE	6040	Place of Service cannot be specified for this type of patient record.
MRN	1180	Medical Record Number is a required field.
STPERIODF	1190	Statement Covers Period From is a required field for this type of patient record.
STPERIODF	2050	Statement Covers Period From does not correspond to a valid date (mmddyyyy).
STPERIODF	2066	Statement Covers Period From must match the minimum service date in submitted revenue records.
STPERIODT	1200	Statement Covers Period Through is a required field for this type of patient record.
STPERIODT	2060	Statement Covers Period Through does not correspond to a valid date (mmddyyyy).
STPERIODT	2065	The date specified does not fall within the boundary of the working quarter.
STPERIODT	2067	Statement Covers Period To must match the maximum service date in submitted revenue records.
CCODE1	3310	Is patient homeless? If so, Condition Code 1 must be '17'.
CCODE1	3315	Condition Code 1 cannot be reported if ZIP Code is reported.
CCODE2	3320	Is LOS an outlier? If so, Condition Code 2 must be '60'.
CCODE3	3330	Are Total Charges an Outlier? If so, Condition Code 3 must be '61'.
CERTNUM	1555	Certificate Number is a required field.
ECID	1360	Encrypted Case ID is a required field.

Primary Record Validation (RECTYPE = A)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
ECID	2320	Encrypted Case ID is not a properly formatted value (letter-number-number-number-letter).
ECID	2325	Encrypted Case ID cannot have numeric digits greater than '6'.
ECID	2330	Encrypted Case ID cannot have non-zeroes following a zero.
ECID	2335	Encrypted Case ID cannot have consecutive identical non-zeroes.
BLANK	6020	Patient record is blank.

Revenue Record Validation (RECTYPE = R)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
REVCODE	1220	Revenue Code is a required field for this type of patient record.
REVCODE	3210	Revenue Code does not correspond to accepted values.
REVCODE	3215	Revenue Code cannot include professional charges.
HCPCSRATE	3220	HCPCS/Rate Code must be accepted value or valid rate.
HCPCSMOD1	3225	HCPCS Modifier 1 does not correspond to accepted values.
HCPCSMOD2	3226	HCPCS Modifier 2 does not correspond to accepted values.
HCPCSMOD3		HCPCS Modifier 3 does not correspond to accepted values.
HCPCSMOD4		HCPCS Modifier 4 does not correspond to accepted values.
SERVDATE	2070	Service Date does not correspond to a valid date (mmddyyyy).
SERVDATE	2075	Service Date is a required field for this type of patient record.
SERVDATE	4020	Service Date outside boundaries of the admission and discharge dates (72 hours prior to admission date is allowed).
SERVDATE	4025	Service Date outside boundaries of Statement Period.
SERVDATE	4035	Service Date outside accepted date range.
UNITSERV	1240	Units of Service is a required field.
UNITSERV	1245	Units of service must be greater than zero when Revenue Charge is greater than zero.
UNITSERV	2100	Units of Service do not correspond to a valid non-zero data format (nnnnnnn).
REVCHG	1250	Revenue Charge is a required field.
REVCHG	2110	Revenue Charge does not correspond to a valid data format ((-)nnnnnnnn.nn).

Diagnosis Record Validation (if Additional Diagnosis Record(s) (RECTYPE = D) Submitted)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
DX	1260	Additional Diagnosis is a required field.
DX	3230	Additional Diagnosis does not correspond to accepted values, or code was deleted.
DX	5110	Additional Diagnosis is age specific and does not match Date of Birth specified.
DX	5120	Additional Diagnosis is a duplicate of Principal Diagnosis.
DX	5130	Additional Diagnosis of 'V27' must have a corresponding Principal Diagnosis of '650', or '640' – '676' with a fifth digit of '1' or '2'.
DX	5140	Principal Diagnosis of '650' should not appear with Additional Diagnosis codes '640' – '676'.
DX	5170	OBSOLETE
DX	5260	Additional Diagnosis is sex specific and does not match Sex specified.
DX	5280	Additional Diagnosis of '640' – '676' with Principal Diagnosis of '640' – '676' requires 5 th digit of both to be paired as '0:0', '3:3', '4:4' or a combination of '1' and '2'.
DX	5310	Duplicate Additional Diagnosis codes are not allowed.
DX	5380	Additional Diagnosis cannot contain an E-Code.
DX	5390	OBSOLETE
DX_POA		Present on Admission indicator is a required field for this type of patient record. (This edit will not be implemented until 10/01/2007 dates of service [Q3 2007.])
DX_POA		Present on Admission indicator does not correspond to accepted values.

Procedure Record Validation (if Additional Procedure Record(s) (RECTYPE = P) Submitted)		
FIELD	CODE	EDIT CHECKS/ERROR VALIDATIONS
PR	1270	Additional Procedure is a required field.
PR	1393	Additional procedure must be a CPT-4 code for this type of patient record.
PR	1394	Additional procedure must be an ICD-9-CM code for this type of patient record.
PR	2225	The coding system used for additional procedures must be consistent with the principal procedure.
PR	3240	Additional Procedure does not correspond to accepted values.
PR	5340	Additional Procedure is age specific and does not match Date of Birth specified.
PR	5360	Additional Procedure is sex specific and does not match Sex specified.
PRMOD1	3245	Additional Procedure Modifier 1 does not correspond to accepted values.
PRMOD2	3246	Additional Procedure Modifier 2 does not correspond to accepted values.
PRMOD3		Additional Procedure Modifier 3 does not correspond to accepted values.
PRMOD4		Additional Procedure Modifier 4 does not correspond to accepted values.