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MDI Achieve provides MDS 3.0 ready software solutions including Matrix, a fully integrated, web-based solution with EHR capabilities designed to improve quality of care, documentation and administration of eldercare organizations.

Which MDS 3.0 Forms Do I Use When?

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Objectives

The participant will be able to:

• Describe the MDS 3.0 Item Sets available for use in completing the assessments
• Understand which assessments to use for each assessment type
• Discuss possible combinations for combining items sets
**MDS Available Item Sets**

**Nursing Home**

**OBRA Item Sets**
1. Comprehensive Item Set (38 pp)
2. Discharge Item Set (27 pp)
3. Quarterly Item Set (33 pp)
4. Tracking Item Set (8 pp)*

**Medicare PPS Item Sets**
1. OMRA Item Set (20 pp)*
2. OMRA/Discharge Item Set (29 pp)
3. PPS Item Set (33 pp)
4. OMRA Start of Therapy (SOT) Item Set (12 pp)*
5. OMRA SOT/Discharge Item Set (29 pp)

**Swing Bed**

1. OMRA Item Set (20 pp)*
2. OMRA SOT Item Set (12 pp)*
3. Tracking Item Set (8 pp)*
4. Discharge Item Set (27 pp)
5. OMRA Discharge Item Set (32 pp)
6. PPS Item Set (33 pp)
7. OMRA SOT and Discharge Item Set (29 pp)

*Note: Discharge Assessment coded later

**MDS Item Set Coding**

**OBRA Reason for Assessment: (A0310.A)**

01 = Admission
02 = Quarterly
03 = Annual
04 = Significant change in status
05 = Significant correction to prior comprehensive
06 = Significant correction to prior quarterly
99 = Not OBRA required

**Federal PPS Reason for Assessment: (A0310.B)**

01 = 5-day
02 = 14-day
03 = 30-day
04 = 60-day
05 = 90-day
06 = Readmission/return

*Note: Discharge Assessment coded later

**PPS Other Medicare Required Assessment: (A0310.C)**

0 = No
1 = Start of Therapy Assessment
2 = End of Therapy Assessment
3 = Both Start and End of Therapy Assessment

**Entry/Discharge Reporting: (A0310.F)**

01 = Entry Record
10 = Discharge assessment – return not anticipated
11 = Discharge assessment – return anticipated
99 = Not entry/discharge record
OBRA Comprehensive: Admission

- ARD (A2300) = No later than 14th day of admission ARD
- RN Signature (Z0500B) = No later than 14th day MDS
- CAA Completion (V0200B) = No later than 14th day CAA’s
- Care Plan (V0200C) = No later than 7 days after CAA’s
- Submission to QIES ASAP = VO200C (Care Plan) completion + 14 days

Item Set = Nursing Home Comprehensive

OBRA Non-Comprehensive: Quarterly

- ARD (A2300) = No later than ARD of previous OBRA assessment + 92 days
- RN Signature (Z0500B) = MDS Completion = ARD + 14 days
- Submission = Z0500.B (MDS completion) + 14 days

Item Set = Quarterly or State approved

OBRA Comprehensive: Annual

- ARD (A2300) = No later than (ARD):
  - ARD of previous comprehensive + 366 days
  - ARD of previous quarterly + 92 days
- RN Signature (Z0500B) = ARD +14 days
- CAA Completion (V0200B) = ARD +14 days
- Care Plan (V0200C) = CAA’s completion + 7 days
- Submission = VO200C (Care Plan) completion + 14 days

Item Set = Nursing Home Comprehensive
**OBRA Comprehensive: SCSA**
- ARD (A2300) = No later than 14th day after determination
- RN Signature (Z0500.B) = ARD + 14 days MDS
- CAA Completion (V0200.B) = ARD + 14 days CAA’s
- Care Plan (V0200.C) = CAA’s completion + 7 days
- Submission = V0200.C (Care plan) completion + 14 days
- **Item Set = Nursing Home Comprehensive Item Set**

**OBRA Comprehensive: SCPA**
- ARD (A2300) = No later than 14th day after determination
- RN Signature (Z0500.B) = ARD + 14 days MDS
- CAA Completion (V0200.B) = ARD + 14 days CAA’s
- Care Plan (V0200.C) = CAA’s completion + 7 days
- Submission = V0200.C (Care plan) completion + 14 days
- **Item Set = Nursing Home Comprehensive Item Set**

**OBRA Non-Comprehensive: SCQA**
- ARD (A2300) = No later than 14th day after determination of a major error that misrepresented the resident’s clinical status
- RN Signature (Z0500.B) = MDS completion - No later than 14th day after determination
- Submission = Z0500.B (MDS completion) + 14 days
- **Item Set = Quarterly or State approved**
OBRA
Non-Comprehensive: Entry Record

• Completed any time a resident admits for the first time to the facility or re-enters after discharge return anticipated or return not anticipated
• RN Signature (Z0500.B) = MDS completion – no later than entry/re-entry date + 7 days
• Submission = Z0500.B (Completion) + 14 days

Item Set = NH/SB Tracking

OBRA
Non-Comprehensive: Entry Record

Admission
– For residents that have never been admitted before or
– Were in the facility and discharged prior to completion of the OBRA assessment or
– Were discharged return not anticipated or
– Were out more than 30 days

Reentry
– For residents who were admitted to the nursing home (i.e. OBRA admission assessment was completed) and
– Were discharged return anticipated and
– Returned within 30 days

Item Set = NH/SB Tracking

OBRA
Non-Comprehensive: D/C Not Anticipated

• Completed when the resident is discharged from the facility to home, assisted living, or other setting and is not expected to return within 30 days
• RN Signature (Z0500.B) = Discharge date + 14 days
• Submission = Z0500.B (MDS completion) + 14 days

Item Set = NH/SB Discharge
### OBRA
**Non-Comprehensive: D/C Return Anticipated**

- Completed when the resident discharges to the hospital or other setting and is expected to return within 30 days
- RN Signature (Z0500.B) = Discharge date + 14 days
- Submission = Z0500.B (MDS completion) + 14 days

**Item Set = NH/SB Discharge**

### OBRA
**Non-Comprehensive: Death Reporting**

- Completed when a resident expires in the facility
- RN Signature (Z0500.B) = Date of Death + 7 days
- Submission = Z0500.B Date + 14 days

*Note: If the resident expires at the hospital complete the Discharge Assessment return – not anticipated.

**Item Set = NH/SB Tracking**

### PPS Assessments

- Required for reimbursement under Medicare Part A
  - *Grouper software will always provide a RUG. Does not determine Medicare eligibility.*
- For Nursing Homes, OBRA assessment requirements must be met along with PPS assessment requirements during a Medicare A stay
SNF PPS Assessment

Two Types

**Scheduled**
- Standard, predetermined time period for ARD
- Grace days allowed (to allow flexibility)

**Unscheduled**
- Applicable when certain situations occur

Types of PPS Assessments

<table>
<thead>
<tr>
<th>Medicare Assessments (A0310.B)</th>
<th>ARD</th>
<th># days authorized for change and payment</th>
<th>Days covered</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Scheduled</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Day*</td>
<td>Day 1-5 (3)</td>
<td>14</td>
<td>1-14</td>
</tr>
<tr>
<td>14 Day *</td>
<td>Day 11-14 (5)</td>
<td>16</td>
<td>15-30</td>
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<tr>
<td>30 Day</td>
<td>Day 21-29 (5)</td>
<td>30</td>
<td>31-60</td>
</tr>
<tr>
<td>60 Day</td>
<td>Day 50-59 (5)</td>
<td>30</td>
<td>61-90</td>
</tr>
<tr>
<td>90 Day **</td>
<td>Day 80-89 (5)</td>
<td>10</td>
<td>91-100</td>
</tr>
</tbody>
</table>

*If combined with an OBRA admission assessment (Comprehensive Item Set).
**Typically is combined with an OBRA quarterly (Quarterly or PPS Item Set where states allow)

Type of PPS Assessment

**PPS Unscheduled Assessments (A0310.B)**
- OMRA’s – (More on next slide)
- Significant change of Status Assessment – criteria is the same as the OBRA definitions
- Significant correction of a prior assessment: an corrected OBRA assessment could change the PPS RUG
### Types of PPS Assessments

<table>
<thead>
<tr>
<th>Types of Assessments</th>
<th>Description</th>
</tr>
</thead>
</table>
| PPS Other Medicare Required Assessment (OMRA) A0310.C | 0 = No, not an OMRA  
1 = Start of therapy assessment: with an ARD 5-7 days after 1st day therapy services are provided (Optional Assessment to establish a therapy RUG) (ITEM SET: NH/SB START OF THERAPY OMRA)  
2 = End of therapy assessment: with an ARD that is 1-3 days after the last day therapy services were provided (Day one is the first day that therapy would have been provided if not discontinued) (ITEM SET: NH/SB OMRA)  
3 = Both the start & end of therapy assessment: with ARD both 5-7 days after the 1st day therapy services were provided and that is 1-3 days after last day therapy services were provided (ITEM SET: NH/SB OMRA) |

| Payment | Day 1 – 14 (14 days of pay)  
Submission | 14 days from Z0500.B  
Day 15 – 30 of stay (16 days of pay)  
Submission | 14 days from Z0500.B  
ARD | Day 11 – 14  
Grace days | 6-8  
Can be combined with OBRA assessments  
Submission | 14 days from Z0500.B  
Item Set = NH PPS |

### PPS 5 Day Assessment
- First Medicare Part A -required assessment
- Scheduled Assessment:
  - ARD = day 1 – 5
  - Grace days 6-8
  - Can be combined with OBRA assessments
- Submission = 14 days from Z0500.B
- Item Set = NH PPS

### PPS 14 Day Assessment
- Must have a 5 day PPS assessment prior
- Schedule Assessment:
  - ARD = Day 11-14
  - Grace days = 15-19
  - Can be combined with OBRA assessments
- Submission = 14 days from Z0500.B
- Item Set = NH PPS
**PPS 30 Day Assessment**
- Must have a 14 day PPS assessment prior
- Schedule Assessment:
  - ARD = Day 21 – 29
  - Grace Days = 30- 34
  - Can be combined with OBRA assessments
- Submission = 14 days from Z0500.B
- Payment = day 31- 60 of stay (30 days of pay)

**Schedule Assessment**
- Can be combined with OBRA assessments
- Grace Days = 30- 34
- ARD = Day 21 – 29

**Item Set = NH PPS**

**PPS 60 Day Assessment**
- Must have a 30 day PPS assessment prior
- Schedule Assessment:
  - ARD = Day 50-59
  - Grace Days = 60-64
  - Can be combined with OBRA assessments
- Submission = 14 days from Z0500.B
- Payment = day 61-90 of stay (30 days of pay)

**Schedule Assessment**
- Can be combined with OBRA assessments
- Grace Days = 60-64
- ARD = Day 50-59

**Item Set = NH PPS**

**PPS 90 Day Assessment**
- Must have a 60 day PPS assessment prior
- Schedule Assessment:
  - ARD = Day 80-89
  - Grace Days = 90-94
  - Can be combined with OBRA assessments
- Submission = 14 days from Z0500.B
- Payment = day 91-100 of stay (10 days of pay)

**Schedule Assessment**
- Can be combined with OBRA assessments
- Grace Days = 90-94
- ARD = Day 80-89

**Item Set = NH PPS**
PPS Readmission/Return Assessment

- During Medicare Part A stay hospitalized
- Discharge return anticipated
- Readmitted
- Requires/receives Part A SNF-level of care service
- Scheduled Assessment
  - ARD = day 1 – 5
  - Grace days 6-8
- Can be combined with OBRA assessments
- Submission = 14 days from Z0500.B
- Payment = Day 1 – 14

Item Set = NH PPS

Unscheduled Medicare PPS Assessment

07 = A0310.8 Unscheduled Assessment

- There are several unscheduled assessment types that may be required to be completed during a residents Part A SNF covered day.
- Meets criteria for a Significant Change Status Assessment (SCSA) (Comprehensive Item Set)
- Meets criteria for Significant Correction to prior Comprehensive Assessment (SCPA) (Comprehensive Item Set)

Unscheduled Medicare PPS Assessment

- SCSA and SCPA* (Use Comprehensive Item Set)
- OBRA required assessments*
  *Above may establish a new RUG
- Other Medicare Required Assessment –
  - When Therapy starts
  - When Therapy ends & Skilled Nursing Continues
  - When Therapy both starts and ends within the Observation period
Unscheduled Medicare PPS Assessments: SOT

Start of Therapy
- Optional
- Completed only to classify into RUG-IV Rehabilitation group
- Be attentive to Case Mix Indexes (CMIs)
- ARD must be set 5-7 days after start of therapy
- Rejected if non-therapy RUG

**Item Set = Start of Therapy**

CMS Short Stay Criteria

*There is NO SPECIFIC Short Stay Item Set*
- Item Set be a Start of therapy OMRA (A0310C = 1 or 3)
- May be completed alone or combined with OBRA Item Sets or PPS 5-day or readmission/return Item Set
- Cannot be combined with 14, 30, 60, or 90 day MDS
- Can be combined with PPS 5-day or return/readmission if they have not been completed

CMS Short Stay Criteria

*There is NO SPECIFIC Short Stay Item Set*
- The ARD must be on or before the 8th day of the Part A Medicare covered stay
- The ARD of the SOT OMRA must be the last covered day of Medicare A
- Rehab started during the last 4 days of Part A stay (including weekends)
- At least one therapy discipline continued through the last day of the Medicare A stay
**Unscheduled Medicare PPS Assessments: EOT**

**End of Therapy**
- Required when all therapies are discontinued and skilled nursing services continue
- Establishes new non-therapy RUG -20150.A
- ARD must be set 1-3 days after all therapy ends
- First non-therapy day counts as day 1

**Item Set = NH/SB OMRA**

**Combining with Ease**
- Any OBRA with any Medicare Item Sets
- Any Discharge with any OBRA or Medicare Item Sets
- Any Scheduled Medicare with any non-scheduled Medicare Item Sets
- Tracking Item Sets stand alone
- Scheduled Medicare Item Sets can’t be combined
- Use the Item Set that meets the requirement for the most comprehensive assessment that is being combined. (e.g. Admission with 5-Day = Comprehensive Item Set)

**Combining Examples**

Mr. J admitted on 9/25 for the first time on Medicare for daily wound care with no therapy orders. On 9/27 therapy orders were obtained and Mr. J was evaluated and began treatment. On 10/1 Mr. J was re-hospitalized.

**Example Item Sets:**
1. Entry Tracking
2. Complete Medicare 5-Day, SOT, EOT, Discharge Return Anticipated – Use PPS Item Set
**Combining Examples**

Mr. J was re-admitted on 10/3 for continued daily wound care and therapy. He continued Medicare for 19 more days.

**Example Item Sets:**
1. Entry Tracking
2. Complete Medicare Readmission/return assessment using the PPS Item Set or combine with Admission Assessment using Comprehensive Item Set
3. Complete Medicare 14-Day using PPS Item set or combine with Admission Assessment using Comprehensive Item Set

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**Operational Strategies**

- Combine as many assessment types as you can meeting the OBRA and/or Medicare Requirements for each
- Use the Chapter 2-53 Chart as a guide to pick the best Item Set
- Let your software select the most appropriate Item Set if they have programmed for this
- Find out what specific Item Sets are approved by your State
- Use the tracking, discharge, and re-entry algorithm to determine which assessment to complete for these events (CMS 2-37, 38)

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**References**

- [www.cms.hhs.gov/medlearn/refsnf.asp](http://www.cms.hhs.gov/medlearn/refsnf.asp)
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