

Eli's Rehab Report

SNFs: Final SNF PPS Rule Provides Leeway for Capturing Rehab for Short-Stay Patients

You can't project therapy minutes under RUG-IV, but you can do this.

If you're still reeling from the SNF PPS final rule's RUG-IV system's potential payment impact, take heart from a bright spot in the rehab arena. The final rule held steadfast about no longer allowing skilled nursing facilities to project rehab therapy on the 5-day MDS to classify a resident into a resource utilization group (RUG), as the RUG-III system currently allows.

Luckily, CMS softened its approach to scenarios where a rehab resident who is discharged or dies on or before day eight receives less than five days of rehab therapy. The proposed rule only allowed the person in that scenario to go in rehab low or medium based on the average number of therapy minutes received, notes **Rena Shephard, MHA, RN, RAC-MT, C-NE**, president of RRS Healthcare Consulting Services in San Diego, and founding chair and executive editor for the American Association of Nurse Assessment Coordinators.

The final rule, however, allows the resident who dies or is discharged on or before day eight who receives less than five days of therapy to go into a RUG based on the average daily number of therapy minutes actually provided, Shephard says.

Thus, "if the average daily therapy minutes are 144 or greater," the person would go into a rehab ultra-high category, according to the SNF PPS final rule. **Editor's note:** Read the final rule at <http://edocket.access.gpo.gov/2009/pdf/E9-18662.pdf>. For examples, see page 4039 of the rule.