

## Long-Term Care Survey Alert

### News Briefs: Survey & Clinical News To Use

**CMS may be taking more time to get the MDS 3.0 right.** CMS official **Mary Pratt** has confirmed that the agency is rethinking the 2004-2005 timeframe for MDS 3.0 implementation so it can better coordinate the new instrument with other "emerging activities." The latter include a RUGs refinement report expected out in January 2005, and the **Department of Health & Human Services'** Consolidated Health Informatics initiative to adopt government-wide standards for clinical health data.

As part of that initiative, CMS plans to incorporate SNOMED, a uniform terminology system, into the MDS. "CMS doesn't want to implement the MDS 3.0 and then turn around and change it due to other changes that will impact it," Pratt told participants at the **American Association of Nurse Assessment Coordinators (AANAC)** on Sept. 11 in Las Vegas.

CMS is also in the early stages of looking very carefully at the impact of the draft MDS 3.0 on RUGs payment, Pratt reported. "The agency is looking at the possibility of doing another time study to look at the effects of items on payment," Pratt told AANAC participants.

**If you thought OSCAR was tough ... wait until you see the government's new ACTS.** That's the acronym for CMS' ASPEN Complaints/Incidents Tracking System, which will track and process complaints against skilled nursing facilities and other Medicare and Medicaid providers and suppliers.

While the OSCAR Complaint System collects a minimal amount of data resulting from an onsite survey, the ACTS data will be able to do much more, explains CMS in an Aug. 22 Federal Register notice of the new system. As a national tracking system used by all states, ACTS will manage a complaint/incident all the way from the initial intake through the final disposition. CMS will use ACTS to assist in its survey and certification efforts. The agency declined to give a timeframe for when the ACTS system will be mandated nationwide.

**Post-acute providers have a new antibiotic in their arsenal to battle serious skin infections.** The **Food and Drug Administration** recently approved Cubicin (daptomycin for injection), the first drug in a class of new antibiotics for the treatment of complicated skin and skin structure infections. These serious infections, which often affect hospitalized patients, include major abscesses, post-surgical skin wound infections and infected skin ulcers.

**Clinical Tip:** Monitor patients receiving Cubicin for the development of muscle pain or weakness, and obtain and review their blood levels of creatine phosphokinase (CPK) levels weekly, the FDA advises. Patients who develop unexplained CPK elevations while taking the drug should be monitored more frequently.