

Long-Term Care Survey Alert

SURVEY NEWS

If you're expecting surveyors to give you a break on how well you're managing resident's pharmacy needs under Part D, dream on. Officials speaking at a recent **Centers for Medicare & Medicaid Services'** Skilled Nursing Facility/Long-Term Care Open Door made it clear that providers should not expect special allowances. "We are expecting facilities to do the fine job they have always been doing in making sure residents get the right treatments," said one official.

Reports of problems are still mounting since Part D coverage kicked in for dual-eligible nursing home residents on Jan. 1, relays **Susan Pettey** of the **American Medical Directors Association**. "CMS is trying to address the problems that are coming to light, but there are serious conflicts between Part D and nursing home survey regulations," she notes. "Nursing homes are expected to provide all of the care and services that residents need, regardless of whether or not they are paid for it."

(For more information on survey issues under Part D, see "Be Survey Savvy: Master The Intricacies Of Managing Part D," and "Don't Let Drug Formulary Changes Become A Formula For F Tags," in the February 2006 Long-Term Care Survey Alert.)

Ready for more F tag revisions? The **Centers for Medicare & Medicaid Services** plans to revise the survey interpretive guidelines for abuse and neglect "similar to what the agency did with F314 (pressure ulcers) and F315 (urinary incontinence and catheters)," says **Janet Feldkamp**, a nurse attorney in Columbus, OH. Feldkamp is on the expert panel assisting CMS to make the changes. CMS will first develop an internal draft of changes and ultimately a draft to solicit stakeholders' comments, she says.

Make sure you download the January 2006 RAI manual update. While the changes are mostly minor, the update does take note of the changes to the triggers for the dehydration resident assessment protocol (RAP).

A CMS official announced that as of Jan. 1, the following ICD-9 diagnosis codes will join the list of triggers for the dehydration RAP when reported on the MDS in Section 13:

- 276.50 (volume depletion, unspecified)
- 276.51 (dehydration)
- 276.52 (hypovolemia)

Previously, 276.5 (volume depletion) was the only ICD-9 code for dehydration, and, thus, the only one that triggered the dehydration RAP.

Although 276.5 will still trigger the dehydration RAP, it is no longer a valid code without an added fifth digit.

Download the update at www.cms.hhs.gov/NursingHomeQualityInits/downloads/MDS20Update200601.pdf.