

MDS Alert

CE OFFERING: Ready To Earn 4.5 Nursing Continuing Education Contact Hours?

Read these objectives and take the online test.

If you're interested in obtaining 4.5 continuing education contact hours in nursing, please see the learning objectives to the right and take the test posted with this newsletter issue on Eli Research's online subscription service (OSS).

The objectives and test cover the October, November and December 2006 issues. Access MDS Alert online by logging onto www.elihealthcare.com/login/. The login is your e-mail address and customer number. If you haven't already set up your OSS option, please contact customer service at 1-800-508-2582. When you sign up for the OSS, you will continue to receive paper copies of the newsletter.

Subscribers can obtain the contact hours for a \$30 processing fee. If you have any questions about the CE program, please contact editor Karen Lusky, MSN, RN, at 615-370-5042 or at EditorMON@aol.com.

Measurable Learning Objectives

October 2006 MDS Alert

- Name and describe three MDS myths that can take a toll on Medicare revenues.
- Discuss the implications of signing the attestation statement on the MDS.
- Describe a key preliminary finding of DAVE 2 onsite reviewers.
- Identify two RUG patterns that could trigger an audit by the fiscal intermediary.
- Name and explain three reasons why over relying on the facility's restraint QM/QI isn't a good idea from a patient care and survey perspective.

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- Identify two reasons why "the heat is on" for documenting the rationale for your MDS coding decisions.
- Explain the key difference between delirium and dementia.
- Describe the criteria that a wheelchair positioning program must meet to code it in Section M.
- Name the MDS items that trigger the delirium quality measure/indicator and the exclusions for the measure/indicator.
- Outline the five steps that can help a facility respond to an additional development request quickly and appropriately.

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• Explain three ways to capture payment drivers in Section P1a in a way that ensures reimbursement and compliance success.



- Define what "resident voice" means in the draft MDS 3.0.
- Name two things you can do to get involved with the draft MDS 3.0 instrument.
- Describe three reasons for a resident's discharge that you can code on the discharge tracking form.
- Explain how to assess a cognitively impaired resident's resistance to care.