

MDS Alert

CMS Update: Get Ahead Of The Curve Of DAVE 2, The MDS 3.0 And Quality-Based Purchasing

CMS official provides a road map to the near future.

You're going to have your plate full keeping up with the **Centers for Medicare & Medicaid Services'** slate of changes in the MDS and payment arenas.

Here's what to expect in the coming months, according to CMS' **Sheila Lambowitz** speaking at the **American Association of Nurse Assessment Coordinators** conference in Las Vegas in March.

- **MDS 3.0.** CMS and its contractors are cross-walking MDS items to standardized electronic health record vocabularies, which will allow nursing homes to populate the MDS 3.0 form with information from a resident's e-record. As a next step, CMS plans to test the MDS in 90 nursing homes in eight yet-unselected states to ensure the new MDS items are "valid for use in operational form," Lambowitz explained. CMS will also validate the MDS items driving payment. The agency expects final recommendations for the MDS 3.0 will be ready in December 2007.

- **Quality-based purchasing.** Under the guidance of the Long-Term Care Task Force, CMS is working on a design for a three-year SNF demonstration to vet quality-based purchasing (formerly known as pay-for-performance). CMS and its contractor for the demo, **Abt Associates**, have identified measures to identify quality in nursing homes: staffing, rehospitalization, MDS-based quality measures and survey outcomes. CMS expects to unveil the demo design at a public meeting later this spring. Once CMS nails down how to score the measures, the agency can determine how to pay top-performing facilities in the top 10 percentile, said Lambowitz. "There may be an incentive for those in the next 10 percentile and possibly" for facilities that improve.

Don't Look for the FBI Behind DAVE 2

The new DAVE will conduct targeted surveys focused on MDS accuracy. Reviewers will do on-site reviews starting in April, visiting 30 nursing facilities quarterly around the country.

The purpose of the initiative is to figure out which parts of the MDS are causing the most confusion. It's "not to come arrest you" but rather to develop training programs to make the instrument "as accurate and reliable as possible," said Lambowitz. CMS believes training is the best way to improve MDS accuracy--rather than conducting "raids by CSI Baltimore," Lambowitz reassured. Under the initial DAVE project, which ended last year, "people seemed to believe that if they were subject to a DAVE record review, the FBI would be right behind," Lambowitz noted.

Good question: Will the new DAVE reviewers report their findings to the fiscal intermediary or survey agency? DAVE will report indication of fraud or "very severe quality problems," said Lambowitz. "But in general, the DAVE on-site reviews aren't intended to be punitive."