

MDS Alert

Coding and Compliance: Give Your Flu Immunization Compliance, Coding a Booster

2 tips will sharpen your compliance in this vital area.

Managing flu immunizations includes knowing how to comply with consent requirements and code the vaccinations correctly at W2. Here's what you need to consider on both counts, experts say.

• State requirements for consent trump less strict federal ones. Thus, even though federal regulations don't require obtaining signed consent before administering the flu vaccination, some states may, according to **Teresa Mota, RN, RAC-CT, CALA**, project coordinator for Quality Partners of Rhode Island. And federal rules do require the facility to obtain informed consent where staff informs the resident or his responsible party about the risks and benefits of the vaccination and contraindications, she adds.

Key tips: If the resident or his responsible party declines to receive the immunization, educate them about the risks and benefits of the vaccination -- and document your efforts. "Even though the flu vaccination may not prevent pneumonia or even the flu, it has been shown to reduce death and morbidity," says **James Marx, RN, MS, CIC**, principal of Broad Street Solutions in San Diego. And it can decrease the severity of illness if a resident does come down with flu, he adds. Plus, "there's no real downside to giving the vaccination," Marx points out.

Tip: Also focus on vaccinating staff, too. "The staff are generally the ones who transmit flu to residents," Marx cautions.

•Consider seeking clarification about the RAI user manual's updated definition of the current flu season. The July 2008 update says "the current influenza (flu) season begins when this season's flu vaccine is made available to the public." Yet the October 1 through March 31 dates are still in the manual as the timeframe for coding flu vaccination, notes Rena Shephard, MHA, RN, RAC-MT, C-NE, president and CEO of RRS Healthcare Consulting Services in San Diego, and founding chair and executive editor for the American Association of Nurse Assessment Coordinators.

In the light of the potentially conflicting information, Shephard advises facilities to discuss how to code W2 with their state RAI coordinator. "There's already an answer at W2b for documenting that the vaccination wasn't given due to unavailability of the vaccine," Shephard points out.

"Hopefully, if enough facilities ask their state RAI coordinators about this, CMS will issue some sort of written clarification," she adds.

Earlier vaccination may not be better: Mota notes that some medical directors expressed concern that the CMS clarification of the current flu season in the July RAI manual update seems to support early flu vaccination. Yet it takes about one to two weeks for a flu vaccination to confer protection, Mota notes. And because the protection only lasts for about six months, vaccinating too early -- that is, in September -- can put the vulnerable elderly at risk for being unprotected in late winter and early spring, she cautions.