

## MDS Alert

### Compliance Tip: Rehab Low May Be a Good Clinical Fit In This Scenario

#### Meet residents' needs and sidestep potential medical review woes.

Medicare has always had a tendency to scrutinize rehab therapy for patients who are debilitated due to medical conditions treated in the hospital, such as pneumonia. And **Pauline Franko, PT, MCSP**, has been hearing about some recent MAC probe reviews looking at therapy for what she calls the "old chestnut" (classic) diagnoses of pneumonia, UTI, and dehydration, which she notes are nursing issues.

"The SNFs are either coding those diagnoses as a reason for the SNF stay or using a V code for therapy, but essentially they are treating patients who have been debilitated by those conditions in the hospital," relays Franko, president of Encompass Consulting & Education LLC in Tamarac, Fla.

Advice: Franko recommends that SNFs consider Rehab Low for those types of patients, if therapy is indicated -- "as long as the person has an ADL score of 11 or more and you can get restorative nursing in there straight away and get three days of therapy a week. Then if the person isn't improving [in functional status] after 10 days or so, you can up your therapy time because obviously the person has something else going on," she adds.