

MDS Alert

J0100: Follow 5 Expert Tips To Simplify Your Pain Management Coding

J0100C encompasses more methods than you might think.

Coding J0100 ☐ Pain Management is no picnic, especially when you're trying to figure out if a medication is actually prescribed for pain. Here are crucial tips from MDS experts that will make your coding of this section a bit easier.

Tip #1: Don't Let 'Pain Medication Regimen' Definition Fool You

According to the RAI Manual, the definition of a pain medication regimen is:

"Pharmacological agent(s) prescribed to relieve or prevent the recurrence of pain. Include all medications used for pain management by any route and any frequency during the look-back period. Include oral, transcutaneous, subcutaneous, intramuscular, rectal, intravenous injections or intraspinal delivery. This item does not include medications that primarily target treatment of the underlying condition, such as chemotherapy or steroids, although such treatment may lead to pain reduction."

Problem: "Many MDS coders see this definition as troubling and contradictory," lamented MDS expert consultant **Judy Wilhide-Brandt, RN, BA, RAC-MT, C-NE** in a recent analysis for Washington, DC-based **Leading Age**. "There are a host of medications approved for and widely used for pain in long-term care that primarily target treatment of the underlying condition."

Example: The medication gabapentin is approved for post-herpetic pain only, but providers use it successfully for many other types of pain in the elderly population, Brandt stated. Some **Centers for Medicare & Medicaid Services (CMS)** or State officials "have said to code gabapentin (and others not specifically classified as analgesics) as pain medication because of the first sentence in the definition above," but others have said not to code it because of the last sentence in the definition.

Brandt points to the much clearer guidance in Appendix PP of the State Operations Manual for a pain management program, which provides guidance to surveyors who are investigating pain management under F-309:

"'Adjuvant Analgesics' describes any medication with a primary indication other than pain management but with analgesic properties in some painful conditions."

Tip #2: Understand Pain's Underlying Causes

An important step in properly coding J0100 is to determine the underlying causes of the resident's pain. You must always keep in mind that physical pain or discomfort can be localized to one area of the body or may be more generalized, pointed out **Sandy Biggi, BSN, SNT, RAC-CT, CNE**, director of nursing facility policy at Leading Age New York, in a recent presentation.

Pain is subjective and "is whatever the experiencing person says it is and exists whenever he or she says it does," Biggi said. Pain "may be acute or chronic, continuous or intermittent, or occur at rest or with movement."

And many of your residents "may have more than one active medical condition and may experience pain from several different causes simultaneously," Brandt stated. In addition to medical conditions that can cause pain, "common procedures, such as moving a resident or performing physical or occupational therapies or changing a wound dressing, may be painful."

The cause of the pain directly influences the choice of treatment approaches, according to Brandt. For example, you

might administer lower doses of pain medication initially and increase the dose slowly upward as needed. You might administer medications "around the clock" rather than "on-demand" (PRN), or you might combine longer-acting medications with PRN medications for breakthrough pain.

All these choices will impact your coding of J0100.

Tip #3: Code 'Yes' for J0100A Even if 1 Dose Only

The first section to code is J0100A ☐ Been on a scheduled pain medication regimen? This section focuses on a pain medication order with dosage and a specific time interval for administration, Biggi noted. After reviewing the medication administration record and talking with staff, you will need to code either "Yes" (1) or "No" (0).

So even if the resident received just one dose of the scheduled pain medication, you would code "Yes" (1), Biggi instructed. But if staff ordered the scheduled pain medication but the resident refused to take it, you would code "No" (0) because the resident ultimately received no scheduled pain medication.

This can be confusing, because for J0100B ☐ Received PRN pain medication, you would still code "Yes" (1) if the resident received OR was offered a PRN medication, Brandt related.

Tip #4: Get a Handle on Non-Medication Pain Management

Then, you will move on to code J0100C ☐ Received non-medication intervention for pain? The documentation in the medical record must indicate that staff scheduled non-pharmacological interventions as part of the care plan, Biggi noted. The documentation must also show that the resident received such interventions and that the staff assessed the interventions for effectiveness.

Non-pharmacological approaches to pain management typically include Complementary and Alternative Medicine (CAM), which includes deep breathing, guided imagery, acupuncture/acupressure, and meditation, Biggi illustrated. But to code J0100C, interventions may also include altering the resident's environment for comfort ☐ adjusting room temperature, tightening or smoothing linens, comfortable seating, pressure redistributing mattresses, assistive devices, etc.

Non-medication pain management can even include ice packs and cold compresses, mild heat, repositioning, baths, transcutaneous electrical nerve stimulation (TENS), massage, chiropractic therapy, rehabilitation therapy, and cognitive/behavioral techniques.

Tip #5: Still Baffled? Do This

If the resident is receiving pain management services but you are still not sure how to code J0100, ask the prescribing physician or licensed staff member. "Ask the physician if the medication is prescribed primarily to treat pain or to treat the underlying condition, document the response, and code accordingly," Brandt advised. "Another option is to ask your State RAI manager for written guidance".

