

# **MDS Alert**

## Learn From 4 Falls Scenarios To Navigate J1800/J1900 Coding

The new "Falls with Major Injury" quality measure (QM) relies on only one MDS item, so your coding of that item is more important than ever before. That's why you need to make sure that you're coding falls accurately every single time.

Presenter **Roberta Constantine**, **PhD** illustrated the following crucial coding examples during a recent Skilled Nursing Facility Quality Reporting Program (SNF QRP) Provider Training hosted by the **Centers for Medicare & Medicaid Services** (CMS):

#### **Understand When the Review Period Begins**

**Scenario 1:** Mrs. Smith's 30-day PPS assessment was completed with an Assessment Reference Date (ARD) of June 2. She required a Change of Therapy Other Medicare Required Assessment (COT OMRA), and the ARD of that assessment was June 9.

What is the beginning of the review period for J1800 [] Any Falls Since Admission/Entry or Reentry or Prior Assessment (OBRA or Scheduled PPS), whichever is more recent when completing Mrs. Smith's next assessment, the 60-day scheduled PPS assessment?

**Answer 1:** The review period would begin on June 3, because this date is the next day following the June 2 ARD for the 30-day PPS assessment, Constantine said.

#### Why a Near-Fall is Still a Fall

**Scenario 2:** An incident report describes an event in which Mrs. Smith was walking down the hall and appeared to slip on a wet spot on the floor. She lost her balance and bumped into the wall, but she was able to grab onto the hand rail and steady herself.

How should you code this situation for item J1800? The choices are 0 [] No or 1 [] Yes.

**Answer 2:** You should code  $1 \square$  Yes, because this is a fall, Constantine stated. Although this scenario is an intercepted fall because Mrs. Smith was able to grab onto that handrail and steady herself, she would have otherwise fallen down  $\square$  so it's still considered a fall.

#### **Know When to Code Major Injury**

**Scenario 3:** Mr. Jones fell on his right hip in your facility on the ARD of his Quarterly MDS and complained of mild pain. The initial x-ray of his hip did not show any injury. Three days later, Mr. Jones complained of increasing pain and had difficulty ambulating, so a follow-up x-ray was performed.

The follow-up x-ray showed a hairline fracture of his right hip. This injury is attributed to the recent fall that occurred during the look-back period of the Quarterly assessment. The MDS was not completed until five days after the ARD.

When completing Mr. Jones' MDS, how should you code J1900 [] Number of Falls Since Admission/Entry or Reentry or Prior Assessment (OBRA or Scheduled PPS), whichever is more recent?

**Answer 3:** You should code this scenario as 1 ☐ One for J1900C ☐ Major injury, because Mr. Jones had a fall resulting in a hip fracture and that's a major injury, Constantine noted. You would also code both J1900A ☐ No injury and J1900B ☐ Injury (except major) as 0 ☐ None.

### **Modify When Injuries Show Up Later**



**Scenario 4:** Consider the previous scenario, but Mr. Jones' MDS was completed on the ARD and coded as J1900A = 1, J1900B = 0, and J1900C = 0. You submitted this MDS to the Quality Improvement and Evaluation System (QIES) Assessment Submission and Processing (ASAP) system prior to the diagnosis of a right hip fracture. What should you do?

**Answer 4:** In this case, you would need to modify the MDS in the QIES ASAP system to reflect the fall with major injury (J1900C = 1), Constantine noted.