

MDS Alert

LOAs: Brush Up On Your LOA Know-How To Track Residents' Holiday Festivities

Plan your therapy schedule carefully to avoid decreased reimbursement.

Did any of your residents enjoy a temporary home visit over the holidays? Surely, some did. A short leave of absence (LOA) from your facility is certainly a resident's right according to the Medicare Benefit Policy Manual, but you still need to ensure that you're reporting LOAs correctly in the MDS.

Documenting LOAs incorrectly in the MDS can lead to erroneously reduced reimbursement. Prevent unnecessary decreases in Medicare pay by adhering to these expert tips on properly handling LOA situations.

What Your Documentation Must Include

Thorough documentation in the medical record is especially important when it comes to LOAs. According to Kris Mastrangelo of Harmony Healthcare International in Topsfield, MA, your documentation should include:

- **The time of departure from the facility and the actual return time.** Documenting these specific times is important because your facility won't receive reimbursement for any days in which the patient is not in the facility at midnight.
- **Information related to the resident's condition at the time of departure and return.** Your documentation should also outline any interventions that the facility staff employed to increase the outing's success.
- **Teaching and training to the resident and/or caregiver.** If facility staff provide teaching and training to the resident and/or caregiver related to the resident's complicated medication regimen or transfer training to include car transfers, you should include this in the nursing documentation.

Plan Carefully for the Therapy Schedule

You must also communicate any planned outings to the therapy department as soon as you become aware of the plan, Mastrangelo advised. "This will enable the therapy staff to adjust the therapy schedule, if possible, to minimize the risk of missed treatments and prevent unnecessary End of Therapy (EOT) or Change of Therapy (COT) OMRAs that may result from a decrease in clinically appropriate care."

Example: In 2013, both Christmas Day and New Year's day fell on a Wednesday. "Knowing in advance about an outing on Christmas Eve (on a Tuesday) will allow the facility to reschedule Tuesday's planned therapy treatments to the previous weekend and allow the patient to continue to receive clinically appropriate therapy around the LOA date," Mastrangelo noted.

What this means: "By adjusting the therapy schedule in this manner, the facility staff will avoid potential unexpected changes in therapy intensity that may result in a decrease in reimbursement," Mastrangelo pointed out.

Pay Attention to 3 Other Situations

According to Judy Wilhide Brandt of **Judy Wilhide Consulting, Inc.** in an article for Washington, DC-based Leading Age, an LOA that does not require completion of a discharge assessment or an entry tracking record occurs when a resident has a:

1. Temporary home visit of at least one night.

2. Therapeutic leave of at least one night.
3. Hospital observation stay less than 24 hours and the hospital does not admit the resident.

Remember: "In these situations, the adjustment of the Medicare assessment schedule depends on whether the assessment being completed is a scheduled or unscheduled Medicare assessment," Mastrangelo noted. "For scheduled PPS assessments, the Medicare assessment schedule is adjusted to exclude the LOA day when determining the appropriate ARD for a given assessment."