

MDS Alert

MDS Best Practices: Who's On Deck?

Implement contingency plans to make sure staff can always access crucial MDS information.

You know about the need for secure passwords in your personal life, but what about work? The MDS coordinator is responsible for signing off on the completeness of the MDS — the foundation for your facility's proof of providing quality care and receiving deserved reimbursement.

With the MDS being the key to a facility's ratings and reputation, as well as financial solvency, the MDS coordinator's fluency with the document and ability to follow and meet deadlines is crucial. Learn these tips to reduce the risk of an unplanned absence or accident putting a wrench in your facility's assessments and payments.

First and Foremost: Your staff needs to have more than one team member who knows how to use, code, compile, and access the MDS. "The days of having only one qualified MDS nurse for a facility is too risky," says Sally Fecto, Vice President of Field Operations at Harmony Healthcare International, in Topsfield, Massachusetts. "Facilities must have a **trained backup** to the MDS Coordinator."

Having only one person who understands the MDS already sounds risky when thinking about the sheer volume of work that needs to be completed accurately on a deadline — what happens if your solo MDS coordinator takes a vacation or falls ill? Having more than one person familiar with the MDS and able to access it within your facility's system can prevent some major problems. "An unplanned absence due to illness, a vacation, or resignation may place the facility at high risk for noncompliance from a regulatory, quality reporting, and fiscal perspective," Fecto says.

Who Can Fit That Role?

Think about having more than one team member as backup. Consider team members in these roles for the extra training and responsibility: corporate nurse, director of nursing services, or the assistant director of nursing services, Fecto says. And remember that access is key: You can have the appropriate policies, procedures, training, and access instructions in place, but all of that preparation could be useless if the backup staff member can't get into CMS. Make sure the backup staff has any necessary usernames or passwords!

Don't forget: "CMS access is granted via application and a personal secure user account and log on is required. This **access must remain confidential and not shared**," Fecto advises. "CMS requires two facility staff members have access to the CMS ASAP system, for this very reason."

Failure to Comply

There are significant risks in failing to adequately prepare for an MDS coordinator's absence, both immediate and long term, Fecto adds. Keep in mind these three specific situations you want completed in a timely manner because the consequences are severe:

- Reimbursement may suffer. "Assessment Reference Dates (ARD) for Medicare PPS MDS must be set in very specific time periods. A missed assessment may result in provider-liable days for which there is no payment. An early or late assessment will result in default payment, or the lowest Medicare rate," she says.
- Care may suffer. OBRA MDS assessments must be completed in a timely fashion, and they drive the care-planning process, Fecto says. "Noncompliance in completing OBRA assessments may have negative resident impact in a delay of maintaining an accurate, relevant care plan."
- Lateness could even affect your reputation, down the line. "Late MDS assessments will impact the accuracy in quality reporting," she adds.

Facilities must have **policies and procedures with clear delegation of tasks** to address the risks, Fecto says.

How to Prepare

Prioritize security when you're establishing or reassessing your MDS policies and procedures. Because the MDS must be accessible to clinicians at all times and is therefore available to staff across most disciplines, there are a lot of places where security, facility risk, and patient privacy could be compromised. Make sure your facility has policies and procedures in place to deactivate immediately an individual MDS coordinator or MDS nurse's electronic access to all facility EHR/MDS and CMS programs if that individual resigns or is terminated, Fecto advises.

And don't forget that some of that access might be remote, due to the nature and demands of the MDS coordinator's role, she adds. Swiftly eliminating access is crucial to safeguarding resident information and the facility from a disgruntled or otherwise unethical former employee.