

## **MDS Alert**

## **MDS & Billing News**

It's here ...Medicare Part D drug coverage for all Medicare beneficiaries goes into effect on Jan 1. But what the federal payer giveth on the Medicare side, state Medicaid programs will be taking away. On Jan. 1, the Medicaid program will no longer offer drug coverage for full benefit dual eligibles (aka FBDEs) who qualify for both Medicare and Medicaid.

Two-thirds of residents in nursing homes fall into this category, according to information posted by the **Centers for Medicare & Medicaid Services** on the QIES technical support page.

Since Part D will have a major impact on nursing homes, CMS will use the MDS distribution system to keep nursing homes informed about the program.

Read "Message to Nursing Home Administrators on Medicare Prescription Drug Coverage" at <a href="https://www.qtso.com/download/LTC%20MDS1%20-%20060905.pdf">www.qtso.com/download/LTC%20MDS1%20-%20060905.pdf</a>.

**Look for a new and improved Section W (flu and pneumococcal vaccinations) next year.** Section W2 and W3 have created some confusion and controversy in the nursing home community. The questions in both sections currently have no option for a facility to explain that staff offered a resident the respective vaccinations but didn't have time to give them before the MDS assessment reference date. The **Centers for Medicare & Medicaid Services** plans to revisit and change the section in the spring when the flu season is over, according to a recent SNF Open Door Forum.

**Watch for new ICD-9 triggers to the dehydration RAP, effective January 2006.** Effective in January, CMS is adding newly available detailed dehydration or volume depletion ICD-9 diagnosis subcodes of 276.50, 276.51, or 276.52 to the ICD-9 trigger for the dehydration resident assessment protocol. Until CMS completes the conversion to its new website, the new dehydration RAP specs are posted on <a href="https://www.qtso.com/mdsdownload.html">www.qtso.com/mdsdownload.html</a>.

**CMS** has taken its first step toward the next prospective payment system refinements. The key to future changes will be the newly implemented national nursing home staff-time measurement study, which the agency has dubbed the STRIVE project, short for Staff Time and Resource Intensity Verification. The project aims to collect staffing and resident clinical data for updating the current Resource Utilization Group III payment system used by Medicare and some state Medicaid programs.