

MDS Alert

MDS & BILLING NEWS TO USE

Better make your MDS and care planning process a hot compliance priority in 2005. It's going to be one for the **HHS Office of Inspector General,** according to the agency's work plan for the coming year. The OIG plans to target the "type, frequency and severity" of deficiencies related to assessment and care planning in nursing homes.

In previous studies, OIG has found an increasing number of survey deficiencies related to comprehensive assessment, care planning and provision of care in accordance with the care plan. The OIG also plans to examine "compliance issues and methods state survey agencies use to identify and deal with MDS assessments and care plans that do not meet residents' needs."

Need a refresher on how to bill for rehab group therapy sessions that include Part A and Part B patients? Check out CMS' new Web site dedicated to provider education of Part B billing for therapy: www.cms.hhs.gov/medlearn/therapy/billing.asp.

For example, say a therapist is working with two or more residents - at least one each from Part A and Part B - providing the same or different activities. In such a case, the facility must follow the regulations for each payer source. Consider these examples:

- 1. A therapist treats one Part A resident and one Part B resident during the same 30-minute session, providing different activities to each, and does not track identifiable one-on-one episodes of direct care with either patient. The therapist would bill one unit of 97150 (group) for the Part B resident, and code the total time, 30 minutes, toward the MDS as individual treatment time for the Part A resident.
- 2. A therapist treats one Part A resident and one Part B resident during the same 30-minute session, providing the same or similar activities to each, and not tracking identifiable one-on-one episodes of care with either patient. The therapist would bill one unit of 97150 (group) for the Part B resident and code the total time, 30 minutes, toward the MDS as group treatment time for the Part A resident.

Note: To be considered group therapy under Part A, the SNF residents perform similar activities, whereas, under Part B, the therapeutic interventions can be similar or different, according to CMS.