

## **MDS Alert**

## MDS & BILLING NEWS TO USE

**The Pressure Is On With Revised F314 Tag.** The **Centers for Medicare & Medicaid Services** has released the long-awaited revised survey guidance for pressure ulcers - 40 pages of it, including a new survey investigative protocol and new language at F309 (quality of care) defining several types of non-pressure skin ulcers.

The guidance went into effect Nov. 12, according to the CMS transmittal at <a href="https://www.cms.hhs/gov/manuals/pm\_trans/R4SOM.pdf">www.cms.hhs/gov/manuals/pm\_trans/R4SOM.pdf</a>. (For details, see the next MDS Alert.)

Facilities are out of luck when residents qualify for both RHC and SE3. In such a scenario, the RUG group will automatically place the resident in RHC, rather than the more lucrative SE3 clinical category. The Centers for Medicare & Medicaid Services told providers that its hands are tied in fixing the glitch in the payment algorithm, which arose out of congressionally enacted RUG add-ons. The agency will look at the issue as part of RUG refinements, according to information provided at a recent CMS-hosted SNF/LTC Open Door Forum.

CMS has released draft revised survey interpretive guidelines for tags F329-F331 (unnecessary drugs) and F425-432 (the entire pharmacy services section) for public comments. The draft includes language citing use of two antipsychotic drugs at the same time as a potential example of unnecessary drugs. That language was actually included previously in the now deleted Section N of the State Operations Manual, says Tom Clark, RPh, MHS, a member of the expert panel that developed the new guidelines. The draft also includes suggested behavioral monitoring tools for evaluating residents taking antipsychotic medications, which facilities could choose to use now, says Clark. These tools include the Cohen-Mansfield Agitation Inventory and The Behavioral Pathology in Alzheimer's Disease Rating Scale (Behave-AD).