

MDS Alert

MDS News To Use

Just when you thought you'd nailed down the December 2002 revisions to the RAI User's manual.... The **Centers for Medicare & Medicaid Services** has posted on its Web site more than 50 changes to the December 2002 revision of the Long-Term Care Facility Resident Assessment Instrument User's Manual. The update includes various coding scenarios for Section G (activities of daily living). It also adds a statement clarifying that skin tears/shears are coded in Item M4 unless pressure is a contributing factor. To download a copy of the changes, go to <http://cms.hhs.gov/medicaid/mds20/rai1202-0803chg.pdf>. (For more details about what's new, see the October MDS Alert.)

Will the familiar ICD-9-CM coding system soon become obsolete? The diagnosis codes may go by the wayside sooner rather than later if the **American Health Information Management Association** gets its way. In a recent letter to Health and Human Services Secretary **Tommy Thompson**, AHIMA called for a fast-track adoption of International Classification of Diseases 10th edition in the U.S. health care system. AHIMA Chief Executive Officer **Linda Kloss** maintains in the letter that the decades-old ICD-9 is long out of date. She adds that all other major developed countries are using ICD-10.

While this has been a long-running battle, AHIMA does have some interesting news for coders who worry that ICD-10-CM (clinical modifications) and ICD-10-PCS (procedure coding system) are too complex. The group maintains that field tests conducted by AHIMA and CMS have shown that not only is ICD-10 not too complex for coders, but also that the improved specificity of the systems actually helps coders and results in more accurate data.

Here's a bit of trivia that underscores just how busy MDS nurses are nationwide In 2001, facilities completed MDS assessments for more than 3 million residents. That tidbit and a clinical snapshot of residents are included in the second edition of the CMS annual Nursing Home Data Compendium. CMS intends the data to serve as a useful resource for policy makers, researchers and consumers. Some of the findings: More than one-third of nursing home residents required extensive assistance with at least four of the five activities of daily living (bed mobility, transferring, dressing, eating or toileting). More than one-third of residents were coded as incontinent of bowel or bladder all or most of the time. Involuntary weight loss declined from 11.4 percent to 9.3 percent from 1999 to 2001. Fewer nursing homes reported high proportions of residents who were dehydrated, as represented by the 90th percentile of facility-reported prevalence measures.