

## MDS Alert

### Medicare Compliance: Differences Between Therapy Minutes In P1b And The Medical Record Can Lead To Payment Disputes

**A quick audit in time can save you trouble down the line.**

Performing simple Part A rehab therapy minute audits can catch problems before your FI or the **HHS Office of Inspector General** beats you to the punch.

In fact, you can preempt many problems by simply making sure the therapy documented in the resident's chart matches what you record in P1b of the MDS and on the UB-04 before submitting the MDS or claim. Audits often uncover many errors in that regard, noted **Rena Shephard, RN, RAC-MT, MHA, FACDONA**, in a presentation on MDS compliance at the September 2007 meeting of the **American Association of Nurse Assessment Coordinators** in Las Vegas.

Consultant **Marilyn Mines, RN, RAC-C, BC**, reports recently being "knee deep" in completing audits where in some cases, the therapy log didn't match either the therapy progress notes or the MDS.

She notes that some therapy providers only track the minutes of therapy delivered using therapy logs rather than both logs and therapy progress notes. And while there's no requirement to record minutes in both, "it's good clinical practice" to do so, advises Mines, manager of clinical services for **FR&R Healthcare Consulting** in Deerfield, IL.

#### Look for These 2 Problems

Common reasons for inconsistencies in minutes recorded by therapy and on the MDS include the following, says Mines:

- Therapy is using a different assessment reference date than nursing.
- The rehab therapy department has frequent changes in therapists and "a lack of understanding" about the importance of accurate record-keeping.

**Advice from DAVE:** A DAVE tip sheet recommends using a calculator to total the therapy minutes and double checking the addition. "Conversion from units to minutes is not appropriate," the tip sheet states. Do not round up or down.

**Smart move:** Assign one person in your facility to become an expert in rehab minutes to conduct focused audits, Shephard suggested in her AANAC presentation. You can do the same for auditing ADLs, she added.