

MDS Alert

Medicare Payment: Coding For Dollars: Make Sure Your SNF Gets The Extra Payment For Residents With AIDS

A \$100 RUG will net \$228 with the RUG Add-On.

What's in a diagnosis code? A hefty RUG add-on for residents who have AIDS, effective Oct. 1, that's what.

Your SNF will receive payment for whatever RUG the resident with AIDS qualifies for based on his MDS assessment - plus an additional 128 percent. That would come to a total of \$228 for a RUG that, for example, pays \$100, a **Centers for Medicare & Medicaid Services** technical expert confirms for **Eli**.

What to do: To take advantage of the additional payment, code human immunodeficiency virus (HIV)-related disease (042) on the UB-92 for a Part A resident with AIDS. AIDS does not have to be the primary diagnosis, notes **Andrew Cutler**, principal, **FR&R Healthcare Consulting** in Deerfield, IL. And if it is a secondary diagnosis, list it anywhere in fields 68 to 75 on the UB-92.

Code 042 excludes V08 (asymptomatic HIV infection status) and 795.71 (nonspecific serologic evidence of HIV), so those diagnoses will not qualify for the add-on.

"You have to make certain that AIDS is something that you're actually treating and documenting," advises Cutler, who predicts that facilities that bill the add-on may end up being audited by their fiscal intermediary at some point.

Check State Confidentiality Requirements

Recording the diagnosis on the Medicare claim (UB-92) gets you the add-on. But watch out for state confidentiality laws prohibiting facilities from putting a diagnosis of HIV-related illness on the MDS. For example, providers in Illinois cannot include that diagnosis on the MDS, confirms the RAI coordinator for that state.

A current listing of RAI coordinators and their phone numbers and e-mail addresses can be found on the MDS 2.0 Website: www.cms.hhs.gov/medicaid/mds20/raicoord.pdf.

Legal tip: "Facilities would be prudent to get an analysis of what the state allows in terms of HIV confidentiality provisions," suggests attorney **John Lessner** with **Ober/Kaler** in Baltimore.

Make Sure Diagnosis Makes It to Billing

If your state prohibits coding HIV on the MDS, make certain you're coding HIV-related illness on the UB-92. Cutler recommends having nursing staff review hospital charts on transfer to look for AIDS diagnoses. Then flag that information in the record without putting it on a face sheet, Cutler advises. That way your billers will know to review the file to find the AIDS reference.

With a 128 percent boost to reimbursement at stake, the extra effort is worth it.