

## MDS Alert

### Reader Questions: Pay Attention to Resident Status, Not Payer Source

**Question:** One of our residents was Medicaid but went to the hospital and came back as a skilled resident on Medicare Part A. Do I have to do a significant change assessment since the resident is on Medicare now?

New Mexico Subscriber

**Answer:** Pay attention to the activities of daily living (ADLs) instead of payer source for significant change assessments, except for when a resident goes on hospice. However, you will need to do a 5-day assessment since the resident is beginning Medicare Part A.



**To review:** "The SCSA is a comprehensive assessment for a resident that must be completed when the [interdisciplinary team] IDT has determined that a resident meets the significant change guidelines for either major improvement or decline," says the Resident Assessment Instrument (RAI) Manual, page 2-22. The RAI Manual does not mention resident payer source; the determination should be made by evaluating the resident's condition.

The hospice exception makes sense, as hospice reflects both a change in status and a different program for payment. "An SCSA is required to be performed when a terminally ill resident enrolls in a hospice program (Medicare-certified or State-licensed hospice provider) or changes hospice providers and remains a resident at the nursing home. The ARD must be within 14 days from the effective date of the hospice election (which can be the same or later than the date of the hospice election statement, but not earlier than). An SCSA must be performed regardless of whether an assessment was recently conducted on the resident. This is to ensure a coordinated plan of care between the hospice and nursing home is in place," the RAI Manual says, page 2-23.