

MDS Alert

Subscriber Q&A

Question: If a Medicare Part A resident is admitted to my facility for fewer than five days and receives therapy for the duration of her stay, could she be assessed and qualify for a RH RUG rate? - Pennsylvania subscriber

Answer: "To qualify for the RH, residents need five separate days by the same discipline and at least 325 minutes to qualify. If the resident is admitted for exactly five days, it's possible, because Medicare will allow you to use the minutes captured on day of discharge.

"You can use the minutes if the ARD is also set on this date, however, the facility won't be able to collect reimbursement for this final day because the resident was discharged. The benefit of using these minutes is that it allows you to capture a higher payment for the previous days (in this case, days 1-4).

"The other option is to use the short stay, however, there are many requirements to use the short stay, but stars have to align nearly perfectly to capture any of the rehab RUGs. Because of this, short stays are often overlooked and underutilized, but is definitely still an option for very short admission stays."

- shelly stangl, Ms, otR/L, president at AMSConsulting Group

Question: I'm confused about the recent changes to Section I (Active Diagnoses) about what criteria is required to code a urinary tract infection on the MDS. Any tips? - Kansas subscriber

The UTI is coded on the MDS only if **both** the following criteria are met in the last 30 days:

- It is determined that the resident has a UTI using evidence-based criteria such as McGeer, NHSN, or Loeb in the last 30 days, and
- A physician-documented UTI diagnosis in the last 30 days.
- Kris Mastrangelo, president and CEO of **HarmonyHealthcare international**. You can find additional information about what constitutes McGreer criteria and the differences catheters may make in your coding, on a blog post Mastrangelo published on thesubject, which you can find here:

http://www.harmony-healthcare.com/blog/mds-coding-revision-effective-urinary-tract-infection-uti-without-an-indwelling-catheter.