

MDS Alert

What Do You Think?

Question 1: I live in the Midwest and my facility needed to be evacuated secondary to recent flooding. The facility that accepted most of our residents told us that we need to discharge all of the residents and they would restart the Medicare stay in their facility. This does not seem right. Can you tell me what the process is?

Answer 1: Per the RA I manual, chapter 2.3, how you manage the MDS situation is dependent on whether the resident will be returning to the discharging facility. If the resident is anticipated to return to the original facility, there is no assessment that is required by the discharging facility. However if the resident has a return not anticipated situation, the discharging facility has the responsibility of completing a discharge returned not anticipated assessment. In any situation the Regional office, State agency and Medicare contractors should be notified and give the discharging facility further guidance.

Question 2: I have a new unit in my facility that has not yet been certified for either Medicaid or Medicare reimbursement. We are completing the MDS assessments, however there is confusion as to whether or not these MDS assessments should be submitted to the repository. Can you tell me how to handle these situations?

Answer 2: There are prerequisites that must be met prior to submitting any MDS to the repository. Normally, if the resident occupies the bed that is not certified for Medicare or Medicaid, MDS assessments should not be transmitted. However it is best to check with your state RAI coordinator to determine whether or not the state has the authority to collect MDS information when the bed is neither Medicare nor Medicaid certified.

Question 3: I have several residents who have dementia and are not consistent with their responses to the interviews. I was told that if I don't think a resident can respond to the interview questions I can complete the staff assessment instead. I'm not sure I agree with this direction.

Answer 3: The only time that his staff assessment can be completed without first attempting to do the interview is when the resident's MDS indicates the resident is rarely or never understood. If section B0700 "makes self understood" is coded anything but a three, all interviews must be started. If the interview cannot be completed, which is defined in each interview section, a staff assessment is completed.

- For the BIMS©: The resident's inability to respond or the giving of nonsensical responses would result in a summary score of 99, indicating the interview was not completed and a staff assessment must be conducted.
- For the PHQ-09©: If the resident is unable to complete this interview as indicated by the frequency of identified symptoms not being coded for three or more items, a staff assessment must be completed.

The assessment for daily and activity preferences can be conducted with family members or significant others. The only time a staff assessment would be needed is when neither the resident nor family/significant other was available to answer the questions in the interview. The guidance directing a staff assessment is that three or more of the items in the interview for daily and activity preferences were not completed.



• For the pain assessment: A staff interview is required when J0400, pain frequency is coded 9, unable to answer.

Question 4: I'm having a difficulty understanding what a nonsensical response is. Can you give an example of a nonsensical response that differs from an incorrect answer?

Answer 4: If you ask the resident, "What year is it now?" and the resident responds "1935," the answer is obviously wrong, but the response is a year. If the resident responded "you look like my daughter," the response would be considered nonsensical since the response does not relate at all to the question. It is important to note that coding incorrect versus nonsensical has to do with whether or not the resident tried to respond in a logical manner based on the resident' sability. If the response does not correlate to the question asked, it would be considered nonsensical.

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