

Health Information Compliance Alert

Long Term Care: Find Out How This Facility Stays on Top of MDS Assessments

The director of clinical compliance gives you the inside scoop.

"With all the different MDSs -- OBRA, discharge, and now the many PPS assessments -- it is a challenge" to set and complete them "within the regulatory deadlines," observes **Yaffa Ungar, PT**, director of clinical compliance for Isabella Geriatric Center in Brooklyn, N.Y.

To ensure compliance, Isabella staff strictly adhere to "established internal processes via our electronic spreadsheets and reports and daily interdisciplinary communication," Ungar adds. "We are a large facility and careful tracking is an absolute must."

"We track our Medicare Part A PPS MDS schedule on a master Excel worksheet," says Ungar, adding that the facility revised the worksheet to "include columns for any COT OMRAs that may be required between scheduled PPS assessments. We also color code the worksheet to allow us to readily see which PPS assessments are still outstanding."

Also: The facility's rehab department uses HealthPRO Rehabilitation's software, which provides Change of Therapy/End of Therapy alert reporting, Ungar says. "MDS coordinators and rehab communicate frequently throughout each workday via email, phone calls, and at the daily morning report," adds Ungar. "This is our longstanding process that now serves us well for the new changes that began October 1."

Isabella staff members conduct two case management rounds meeting each week -- "one for the dedicated short stay rehab neighborhood and one for all remaining neighborhoods," Ungar explains. "The meeting serves not only as a Medicare Part A and HMO management meeting but also ... as a meeting to review our many faceted approaches to ensuring quality care," she adds. During the meetings, the MDS and rehab departments also "closely communicate on ARD management," Ungar relays.

The team also relies "heavily on e-mails ... to distribute weekly MDS schedules and to give daily alerts as MDS changes occur," Ungar says. "All clinical team members access their e-mails several times daily to ensure they have the latest MDS information for correct and timely coding. We also send hard copies of all changes up to the nursing neighborhoods."

"Our software allows us to run checks on any incomplete MDS assessments," Ungar continues. "The MDS department runs these reports weekly to ensure all MDS assessments are completed and locked. We then cross check our submission reports against our schedules and rosters to make sure" they have all been submitted. The facility also submits MDS batches twice each week to ensure they are on time, she adds. "We maintain separate electronic weekly discharge MDS logs that we update daily and color code when completed."