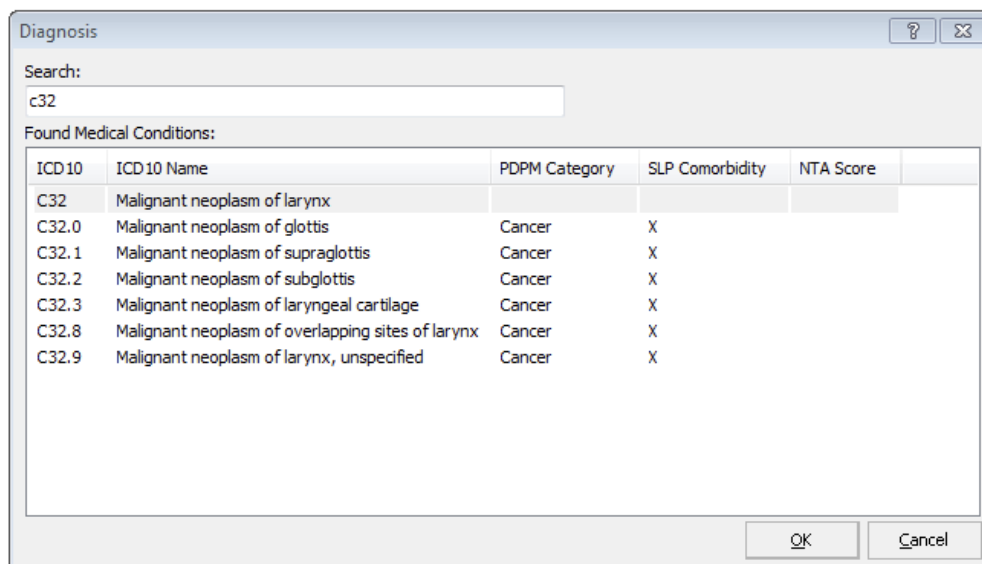


ICD-10 Coding

Entering Codes

- Only one *Admission* diagnosis, one *Primary*, and no more than 12 *Secondary* diagnoses should be entered on each resident's chart. Use the *Other* or *Historical* options for any additional diagnoses beyond *Admission*, *Primary*, or *Secondary*.
- If a facility does not differentiate between Admission and Primary diagnoses, these can be the exact same.
- ECS is not making any changes related to the ordering of diagnosis codes.
- The Diagnosis documentation screen will display the diagnosis code, ICD-10 name, PDPM Category, SLP Comorbidity, and NTA Score.



Editing Options

Example 1: A part of diagnosis entry/entries is charted incorrectly
(e.g., incorrect effective date, incorrect heading, incorrect resident, incorrect code)

1. Click the incorrect entry to turn it red. Multiple entries may be selected if all are incorrect.
2. Click the **Edit** button. A menu of option will appear.
3. Select **Archive**. A box will appear and ask: Are you sure you want to archive all selected entries? Click Yes.
4. The entry or entries will turn gray to show the edit is complete.
5. Click **Go** to refresh the view screen and see the changes.

Example 2: A diagnosis is resolved, or multiple diagnoses are resolved (e.g., urinary tract infection or skin ulcer is healed)

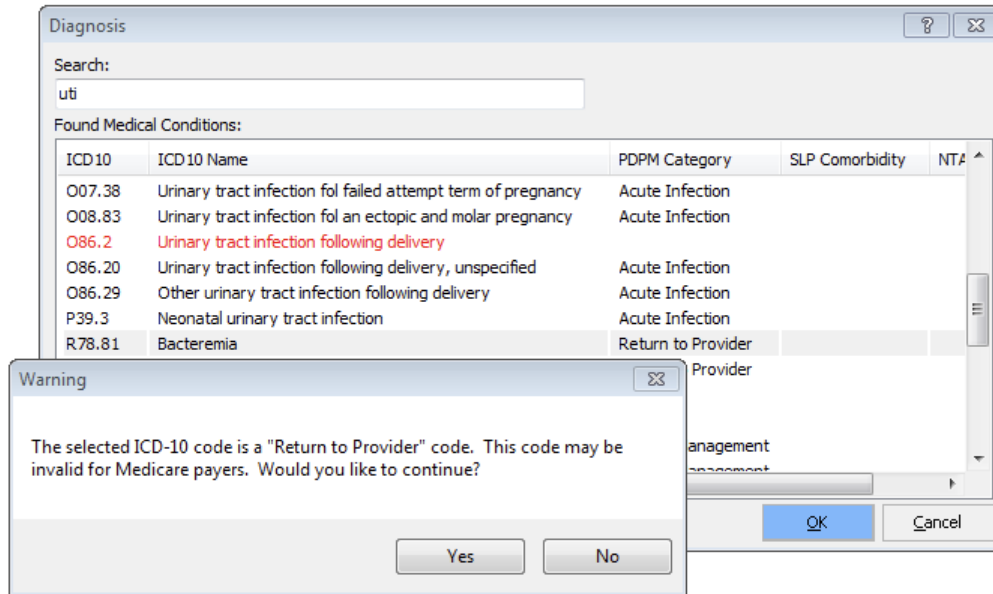
1. Click the incorrect entry to turn it read. Multiple entries may be selected if all are incorrect.
 - a. You may only select multiple entries if they all have the exact same discontinue date.
2. Click the **Edit** button. A menu of options will appear.
3. Select **Discontinue and Append** to resolve a single diagnosis or **Discontinue All and Append All** to resolve multiple diagnoses at one time. A box will appear and ask: *Are you sure you want to DC selected entry[ies]?* Click **Yes**.
4. A write screen will appear with the '(discontinued)' in the text box. Click **DISCONTINUE DATE** and select the date the diagnosis is considered no longer current. Then, specify whether the diagnosis is **Resolved** or **Inactive**.
5. Click **Next** to save the Discontinue Date and return to the view screen.
6. The entry or entries will turn gray to show the edit is complete.
7. Click **Go** to refresh the view screen and see the changes.

Utilizing the Discontinue Date will assure that the diagnosis does not inappropriately appear on the financial forms during a time frame that was not actually relevant.

Return to Provider Warning

Documenting Screen

With the transition to PDPM, this new warning message alerts users if an Admission or Primary diagnosis code is charter that is within the 'Return to Provider PDPM' category. Medicare and Medicare type payers will not accept 'Return to Provider' diagnosis codes. This warning message is intended to warn users that they have chosen a 'Return to Provider code. If this option is chosen to be utilized within ECS, it is recommended that the warning message be set up on the Admission Diagnosis and Primary Diagnosis words within the ICD-10 Diagnosis topic. If a therapy department charts in ECS, it is also recommended that these setups be applied to the Medical Diagnoses words in the PT Initial Eval, OT Initial Eval, and SLP Initial Eval topics as well.



Setup Steps:

1. Go to the **Setup** icon.
2. Click into the Diagnosis tab.
3. Double click the Medi-Span ICD-10 Diagnosis topic.
4. Double click the ADMISSION DIAGNOSIS word.
5. Navigate to the **Formulary** tab.
6. Place a checkmark in the **Return to Provider** checkbox.
7. Click **OK** to save changes.
8. Repeat steps above for all words that should be present this warning message.

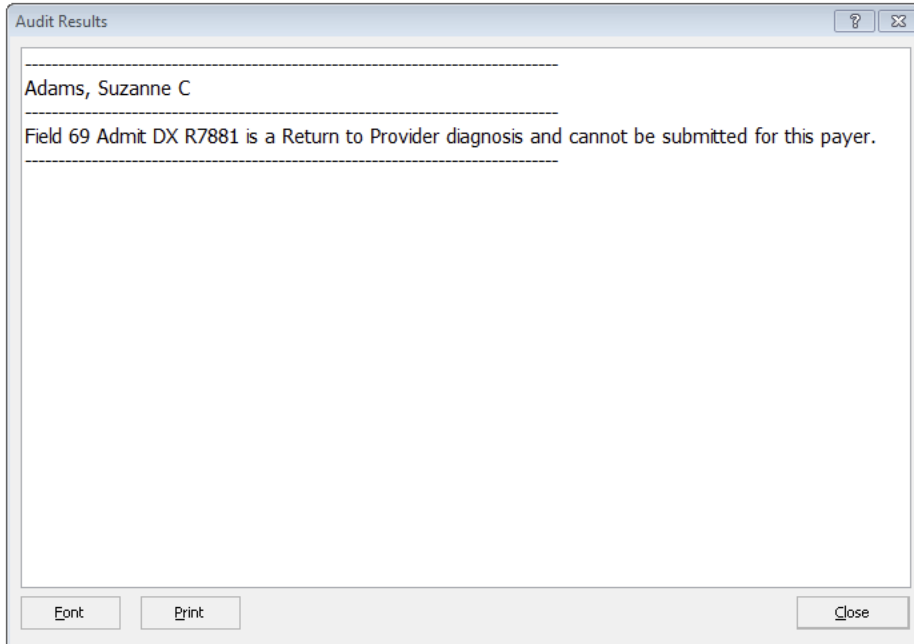
*American Data recommends this setup, at a minimum, on Admission and Primary Diagnosis words. Facilities may also choose to set this up on the Medical Diagnosis words in Therapy > PT/OT/SLP Initial Evaluation topics.

*Note: once set up, this warning message will trigger regardless of the resident's payer source.

Financial Forms

In the setups of the UB04 and HCFA 1500 (2014), American Data has added functionality that will check is a diagnosis code is a 'Return to Provider' code. If the diagnosis code is a 'Return to Provider' code, the form will provide an error message and will not allow the user to complete or submit the form. This checkmark can be turned on specific setup types and specific fields within the financial forms.

This setting may be checked at any time, but the functionality is based on dates of service on/after October 1, 2019. 'Return to Provider' errors will only appear on/after this date of service.



Audit Results

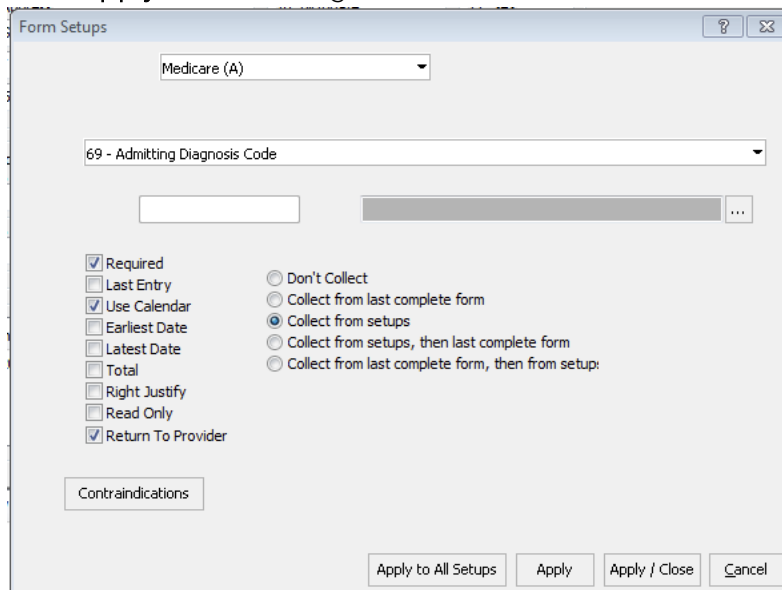
Adams, Suzanne C

Field 69 Admit DX R7881 is a Return to Provider diagnosis and cannot be submitted for this payer.

Font Print Close

Setups Steps for UB04

1. Open a Medicare (A) or Medicare (B) UB04 form.
2. Click the **Setup** button.
3. Click the Field drop down and scroll to the appropriate field (e.g. field 67 Primary Diagnosis Code and 69 on the UB04).
4. Place a checkmark in the **Return to Provider** checkbox on the bottom left side of the screen.
5. Click **Apply** to save changes.



Form Setups

Medicare (A)

69 - Admitting Diagnosis Code

Required
 Last Entry
 Use Calendar
 Earliest Date
 Latest Date
 Total
 Right Justify
 Read Only
 Return To Provider

Don't Collect
 Collect from last complete form
 Collect from setups
 Collect from setups, then last complete form
 Collect from last complete form, then from setup

Contraindications

Apply to All Setups Apply Apply / Close Cancel

Setup Steps for 1500

1. Open a 1500 form
2. Click the **Setup** button.
3. Click the Field drop down and scroll to the appropriate field (e.g. field 21a Diagnosis of Nature of Illness or Injury).
4. Place a checkmark in the **Return to Provider** checkbox on the bottom left side of the screen.
5. Click **Apply/Close** to save changes.

Show PDPM Tag in View Screens

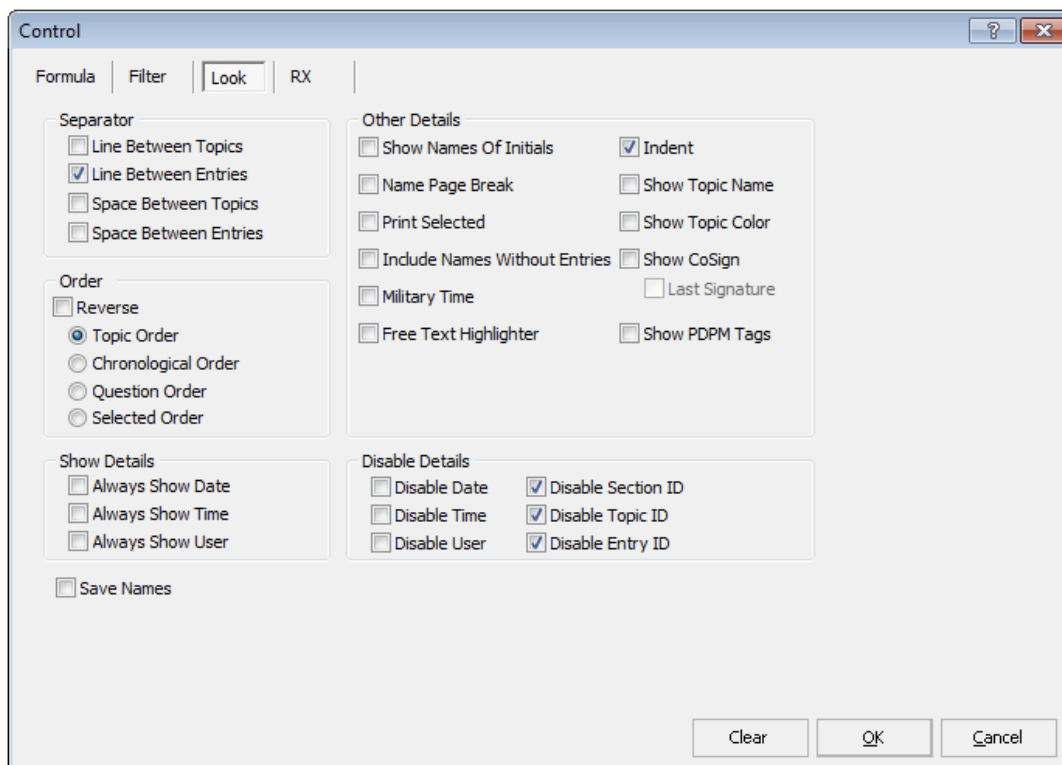
This option allows users to view existing diagnosis codes and determine any diagnosis codes that are a 'Return to Provider' code. This setup can be added to an existing view task or used anytime a user loads a view screen with diagnosis codes. In the MDS, in Section I, when clicking the question buttons to display the resident's diagnosis codes, the PDPM tags will automatically display. In the UB04 and 1500 (ECS10 only), when viewing the diagnoses via Show Source, the PDPM tags will also automatically display.

This property cannot be defaulted system wide, however, can be saved with the appropriate view tasks. In addition, PDPM tags cannot be seen in the CAA screen. To view the PDPM tags within a defines review screen, the user can click on **Control > Look > Show PDPM Tags**.

Name(s)	Topic	Tasks	Date From	Date To	Control	Go	Edit	Next	Split	More...
American Data - ECS										
Adams, John	11/25/1948	70 Yrs	M	Site 1	East	213-2				
12/07/2018 03:59PM KMM	ADMISSION Viral pharyngoconjunctivitis DIAGNOSIS: ADMISSION ICD-10 B30.2 CODE: ADM. EFFECTIVE DATE: 09/01/2018 [PDPM Category: Medical Management]									
PRIMARY DIAGNOSIS: Toxic effect of oth insecticides, undetermined, init encntr PRIMARY ICD-10 CODE: T60.2X4A PRIM. EFFECTIVE 09/01/2018 DATE: [PDPM Category: Medical Management]										
Adams, Suzanne C	03/26/1923	96 Yrs	F	Site 1	West	212-1				
02/19/2014 09:47AM	ADMISSION Heartburn (Heartburn) DIAGNOSIS: ADMISSION ICD-10 R12 CODE: ADM. EFFECTIVE DATE: 01/01/2014 [PDPM Category: Return to Provider]									
07/29/2015 08:14AM	ADMISSION Malignant neoplasm of base of tongue (Malignant Neoplasm of Tongue) DIAGNOSIS: ADMISSION ICD-10 C01 CODE: ADM. EFFECTIVE DATE: 07/29/2015 [PDPM Category: Cancer; SLP Comorbidity: True]									
07/03/2015 11:12AM SJCL	PRIMARY DIAGNOSIS: Problems in relationship with in-laws (Family Disruption, Other) PRIMARY ICD-10 CODE: Z63.1 PRIM. EFFECTIVE 07/03/2015 DATE: [PDPM Category: Return to Provider]									
11/12/2015 02:17PM SJCL	SECONDARY Anemia, unspecified DIAGNOSIS: SECONDARY ICD-10 D64.9 CODE: SEC. EFFECTIVE DATE: 11/12/2015 [PDPM Category: Medical Management]									

Setup Instructions

1. Open a View screen view a View Chart access button or the green View icon.
2. Click onto **Tasks**.
3. Select an appropriate task and click onto **Edit**.
4. Navigate to the Look tab and place a checkmark in Show **PDPM tags**.
5. Click **OK** to save changes.



The screenshot shows the 'Control' dialog box with the 'Look' tab selected. The 'Show PDPM Tags' checkbox is checked. Other settings include 'Line Between Entries' checked, 'Topic Order' selected, and 'Disable Section ID', 'Disable Topic ID', and 'Disable Entry ID' checked.

Category	Option	Status
Separator	Line Between Topics	<input type="checkbox"/>
	Line Between Entries	<input checked="" type="checkbox"/>
	Space Between Topics	<input type="checkbox"/>
	Space Between Entries	<input type="checkbox"/>
Order	Reverse	<input type="checkbox"/>
	Topic Order	<input checked="" type="radio"/>
	Chronological Order	<input type="radio"/>
	Question Order	<input type="radio"/>
Selected Order	Selected Order	<input type="radio"/>
	Always Show Date	<input type="checkbox"/>
	Always Show Time	<input type="checkbox"/>
Always Show User	Always Show User	<input type="checkbox"/>
	Save Names	<input type="checkbox"/>
	Other Details	Show Names Of Initials
Indent		<input checked="" type="checkbox"/>
Name Page Break	Name Page Break	<input type="checkbox"/>
	Show Topic Name	<input type="checkbox"/>
Print Selected	Print Selected	<input type="checkbox"/>
	Show Topic Color	<input type="checkbox"/>
Include Names Without Entries	Include Names Without Entries	<input type="checkbox"/>
	Show CoSign	<input type="checkbox"/>
Military Time	Military Time	<input type="checkbox"/>
	Last Signature	<input type="checkbox"/>
Free Text Highlighter	Free Text Highlighter	<input type="checkbox"/>
	Show PDPM Tags	<input checked="" type="checkbox"/>
Disable Details	Disable Date	<input type="checkbox"/>
	Disable Section ID	<input checked="" type="checkbox"/>
	Disable Time	<input type="checkbox"/>
Disable Topic ID	Disable Topic ID	<input checked="" type="checkbox"/>
	Disable User	<input type="checkbox"/>
Disable Entry ID	Disable Entry ID	<input checked="" type="checkbox"/>