

October MDS Changes

CMS Changes to Documents

CMS typically updates the MDS version each year, however this year, they decided to simply increment the existing Item Sets to an updated version and keep everything else the same.

This means that they have not updated the RAI Manual, so the October 2019 one remains the most up to date version. But they have updated all item sets with a new version number (1.17.2). These item sets did not change, but rather just the version number, effective date, and some instructional language was adjusted.

To see the updated item sets, click onto the link below

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/NHQIMDS30TechnicalInformation>

Scroll to the bottom and there is a zip file available titled **MDS3.0_Final_Item_Sets_v1.17.2 for October 1 2020.zip**. This will have the updated forms located within it.

PDPM on OBRA Assessments

- If your facility is in a state where stand-alone OBRA assessments now require PDPM HIPPS codes to be calculated, you will want to check to be sure that this feature is enabled. To do this:
 - Navigate to **American Data – ECS > Setup > Settings > Site**.
 - Switch the drop-down in the upper left-hand corner for your site.
 - Click into the **MDS** tab.
 - Place a checkmark in **Calculate PDPM for OBRA**.
 - Click **OK** to save the changes.
- Some states have determined that they will not enact this change until 11/1, 12/1 or even 1/1/2021. If that is the case, you will want to check this box as of that effective date.
- Once you have enabled this feature, ALL MDS assessments will need to be reset. This will ensure that they pull in the new STATE_CD line on the transmission file.
- If your state is not moving forward with this change, you will still need to reset any assessments that were created with an ARD of 10/1 PRIOR to the update. This is because every MDS sent to CMS now must include the new STATE_CD line whether your state is moving forward with the changes.

Known Issues in Current Versions

MDS Issues:

- On an OSA assessment, where A0300B = 1, 2, 3, or 4, questions A2400A-C are not skipping/opening correctly. *This affects both versions 9 and 10.*
- On the MDS, if a user answers B0100 as “No,” it is automatically signing Sections C-F. This is only supposed to occur if the user answers B0100 as “Yes.” *This affects only version 10.*
- Users will receive a warning regarding I0020B being left blank on assessments where this question is closed. This warning is [edit -3967](#). This can be ignored and the MDS may be transmitted to CMS. *This affects both versions 9 and 10.*
- Unable to answer option 8 (unknown) on question J2100. *This affects both versions 9 and 10.*
- Section GG (Discharge Performance) and question N2005 are not opening on a stand-alone PPS Discharge (for purpose of Medicare Replacement) if A2100 is answered as “3.” *This affects both versions 9 and 10.*
- Marking GG0170Q1 as “0” will not skip R2/S2 if the target date of the assessment is post 10/1/2020. *This affects both versions 9 and 10.*

Other Issues:

- Medication orders that have a first date in the future, but are discontinued prior to that first date, the order will appear with an open cell in the incorrect date (the date it was entered rather than an open cell in the future date). *This affects only version 10.*
- Common tasks which are attached to a general report (and therefore run prior to the report loading) are not loading appropriately if there are no dates set on the report. *This affects only version 10.*

Charting Options Available

If your state requires PDPM to be calculated on a stand-alone OBRA, the following questions will now be open on all OBRA assessments:

- GG0130A-GG0130H (Admission Performance)
- GG0170A-GG0170S (Admission Performance)
- I0020
- I0020B
- J2100
- J2300-J5000 (dependent on how J2100 is answered)

Section GG

In 2016, we merged out new GG charting topics. These topics were all intended to either populate blue highlights on the MDS via the Collect feature or were meant to populate into CNA - GG view tasks. As GG has not yet been programmed to calculate the “most usual”

performance, there is not a way that the CNA charting can auto-populate the blue highlights. The new topics merged out were sent for Nurses, Therapists, and CNA's. Below we describe all three disciplines in more detail as well as the topics which you have available in your system now or can get merged in if you so choose to.

Nurses

A topic titled "Func. Abilities & Goals (GG)" was merged into your database in 2016. This may have created a brand-new section in your system or may have merged directly into your Nurse Charting section. If you have received a new icon within the past two years or have transitioned to the new nursing module, this topic is in your Assessments section.

When this topic was initially merged, it had the questions that had been released as of 2016. In 2018 and 2019, CMS added questions to Section GG. These questions must be manually added into your existing topics. If you notice any GG questions missing in the Nurse Charting topic and would like them added, please contact clinical@american-data.com and they will be added in free of charge.

CNA's

Eleven new topics, several reports, and view tasks were all merged into your database in 2016. This may have created a brand-new section in your system or may have merged directly into your CNA or CNA Access section.

The topics are titled: AM Self Care (GG), PM Self Care (GG), Night Self Care (GG), AM Mobility (GG), PM Mobility (GG), Night Mobility (GG), AM Transfers (GG), PM Transfers (GG), Night Transfers (GG), GG Access (merge), and GG Setup (merge).

Although all above mentioned items were automatically merged out to all clients, they may not have been linked up to be utilized. If you are interested in getting these linked up so that they are in "production" for CNA users to begin charting in, anyone in the clinical department may assist in completing that task.

PM TRANSFERS	SAVE	START OVER	LATE ENTRY	EXIT		
	ROLL LEFT AND RIGHT	SIT TO LYING	LYING TO SIT ON SIDE OF BED	SIT TO STAND	CHAIR/BED TO CHAIR	TOILET TRANSFER
	The ability to roll from lying on back to left and right side and return to lying on back on the bed.	The ability to move from sitting on side of bed to lying flat on bed.	The ability to safely move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.	The ability to safely come to a standing position from sitting in a chair or on the side of the bed.	The ability to safely transfer to and from a bed to a chair.	The ability to safely get on and off a toilet or commode.

Screen shot of the PM Transfers (GG) topic

An alternate option available was made available in September of this year. It is our combined ADL charting for CNA's. This combines the charting requirements from G and GG into one ADL topic per shift. The charting completed in this topic populates the blue highlights in Section G of the MDS as well as the GG view tasks.

If you are interested in learning more about these new combined ADL topics, you can watch the video on our Client Sign On or we can set you up in the sandbox so that you can play around in the module and determine if you would like to move forward with it. The cost of this module is a 30 minute to 1-hour merge (billed at \$130/hour) as well as 2-4 hours of clinical setup time (billed at \$90/hour). If your facility would like the charting to be completed every day, every shift, this will decrease the amount of clinical setup time needed. However, if your facility would like to assign ADL/Section GG charting, then this will be closer to the 4-hour time range.

Sit to Stand Transfer								
	Independent	Setup or Clean-Up Assistance	Supervision	Touching Assist of 1 Staff	Moderate Assist of 1 Staff	Maximal Assist of 1 Staff	Dependent or 2+ Assist	Did Not Occur
Definition(?)	Independent(?)	Setup or Clean-up(?)	Supervision(?)	Touching Assist(?)	Moderate Assist(?)	Maximal Assist(?)	Dependent or 2+ (?)	GO BACK / DONE

Screen shot of the PM Sit to Stand section of the combined ADL topic

Therapists

Two topics titled "Mobility Ability/Goals (GG)" and "Self Care Ability/Goals (GG)" were merged into your database in 2016. This may have created a brand-new section in your system or may have merged directly into your Therapy or Therapy/Restorative section. If you have received a new icon within the past two years or have transitioned to the new nursing module, this topic is in your Assessments section.

When this topic was initially merged, it had the questions that had been released as of 2016. In 2018 and 2019, CMS added questions to Section GG. These questions must be manually added into your existing topics. If you notice any GG questions missing in the Nurse Charting topic and would like them added, please contact clinical@american-data.com and they will be added in free of charge.

If your facility received the updated language as of 2018, then you will also have language in your Therapy Initial Evaluation topics to address the following: prior level of functioning: cognition, prior device use, prior level of functioning: self-care, prior indoor mobility (ambulation), and prior function: stairs.

Section I

Question I0020B can be clicked onto within the MDS. This will take the user to a view screen listing all the resident's active diagnosis that were charted prior to the target date. Highlight the diagnosis code you would like to fill in onto the MDS and click **Send**.

This will send the code onto the MDS.

Once this is populated, the PDPM

Category will display to the right of the code. On a stand-alone OBRA, the MDS will search through two ICD tables. One is the original table utilized for PPS assessments. The second table lists all Return to Provider codes on it. If the code falls into one of these categories (so basically if this field is not left blank), then it will be accepted by CMS. Just keep in mind that on a PPS assessment, a Return to Provider is not valid.

ICD Code	
I0020B	J44.9 Clinical Category: Pulmonary

Section J

We can transfer in "Prior Surgical Procedure" words into any topic that you would like these located. This will depend on which user you would like to document this. In our default system, we have these words located in the Nurse Admit Note. However, we can transfer these words into any location your facility would prefer.

Surgical Procedures			
PRIOR SURGERY(IES):			
Major Joint Replacement:	Other Orthopedic Surgery:	Cardiopulmonary Surgery:	Other Major Surgery:
knee replacement:	fx of shoulder/arm	involving heart/major vessels	tendons/ligaments/muscles
hip replacement:	fx of pelvis/hip/leg/ankle	involving the respiratory sys.	GI/gall bladder/liver/pancreas
ankle replacement:	repair but not replace joints	other major cardiopulmonary	endocrine organs
shoulder replacement:	repair other bones (hand/foot)		involving the breast
	other major orthopedic surgery	Genitourinary Surgery:	repair deep ulcers/bone marrow
Spinal Surgery:		involving male/female organs	other major surgery
involving spinal cord/nerves	Neurological Surgery:	kidneys, uterus, adrenal, blad	
involving fusion spinal bones	involving the brain	other major genitourinary surg	
involving lamina, discs, facet	involving the nervous system		
other major spinal surgery	insertion/removal spinal/brain		
	other major neurological		