



**WHAT'S NEW FALL
2023
CLINICAL & FINANCIAL**

INTRODUCTION

HOUSEKEEPING

Watch for Email on 10.2.0.0 Update

MDS Changes Form

- <https://app.smartsheet.com/b/form/6ad22f73dbcb4bc897d6985b278afc26>

Update PDPM Rates 10/01/23

MDS

MDS HAS BEEN UPDATED BASED ON THE LATEST CMS REVISIONS.

- **VERSION 3.01**
- **ITEMS ADDED TO SECTIONS**
- **ITEMS REMOVED FROM SECTIONS**
- **LANGUAGE AND EDIT UPDATES**
- **MDS FORMS UPDATED**
- **NEW TOPIC FOR MDS WRITEBACKS**
- **SECTION C AND D**

MDS

MDS RAI HELP POPUPS UPDATED.

The screenshot shows the MDS Manager software interface. The main window displays the 'Hearing, Speech, and Vision' section with several items listed, including '80100 Comatose', '80200 Hearing', '80300 Hearing Aid', '80400 Speech Clarity', '80700 Makes Self Understood', '80800 Ability To Understand Others', and '81000 Vision'. A popup window titled '80200-Hearing (Hearing, MDS Assessment)' is open, showing the following content:

Excerpt from RAI Manual:

Item Rationale

Health-related Quality of Life

- Problems with hearing can contribute to sensory deprivation, social isolation, and mood and behavior disorders.
- Unaddressed communication problems related to hearing

Buttons at the bottom of the popup include 'Spell Check', 'See Also', 'View Tree', and 'Close'.

CFM VALUES UPDATED.

MDS

SECTION V – PICKLIST BUTTONS UPDATED TO DISPLAY THE CAA NUMBER.

A. CAA Results				
	Care Area	A. Care Area Triggered	B. Care Planning Decision	Location and Date of CAA documentation
...	01. Delirium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

A. CAA Results				
	Care Area	A. Care Area Triggered	B. Care Planning Decision	Location and Date of CAA documentation
01	01. Delirium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>



IPA PREDICTOR UPDATED – CHANGES TO SECTIONS D, O, AND K.

American Data - ECS | Toolbar | IPA Predictor - IPA

Participation in Assessment, Goal Setting - Q | CAA Summary - V | Correction Request - X | Administration - Z

ID - A | Hearing, Speech, Vision - B | Cognitive - C | Mood - D | Behavior - E | Routine, Activities - F | Functional Abilities and Goals - GG | Bladder, Bowel - H | Diagnosis - I | Health - J | Swallowing/Nutritional - K | Oral/Dental - L | Skin - M | Medications - N | Treatments, Procedures - O | Restraints/Alarms - P

Special Treatments and Procedures

00110 **Special Treatments, Procedures, and Programs**
 Check all of the following treatments, procedures, and programs that were performed

a. On Admission
 Assessment period is days 1 through 3 of the SNF PPS Stay starting with A2400B

b. While a Resident
 Performed while a resident of this facility and within the last 14 days

c. At Discharge
 Assessment period is the last 3 days of the SNF PPS Stay ending on A2400C

a. b. c.
On While a At
Admission Resident Discharge

Check all that apply

	a	b	c	Cancer Treatments
00110A1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A1. Chemotherapy
00110A2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A2. IV
00110A3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A3. Oral
00110A10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A10. Other
00110B1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B1. Radiation

	Previous Assessment	Predicted IPA	Difference PPD
PDPM Score	OEGD0	OEGC	
Target Date	12/01/2023	12/15/2023	
Day of Stay		45	
Base Rate		\$100.02	
Total Rate on target date	\$615.11	\$630.33	\$15.22

Detail	Adj. Fac.	CMI	Code	Rate	CMI	Code	Rate	Difference
PT	0.92	1.51	TO	\$94.82	1.51	TO	\$94.82	\$0.00
OT	0.92	1.51	TO	\$83.50	1.51	TO	\$83.50	\$0.00
SLP	1.00	2.28	SE	\$70.00	2.28	SE	\$70.00	\$0.00
Nursing	1.00	1.81	HBC1	\$173.29	1.81	HBC1	\$173.29	\$0.00
NTA	1.00	1.29	ND	\$93.48	1.49	NC	\$108.70	\$15.22

MDS

RED TEXT AND GREEN DOTS HAVE BEEN REMOVED FROM THE MDS FORMS.

H0100

Appliances

↓ Check all that apply

- A. Indwelling catheter (including suprapubic catheter and nephrostomy tube)
- B. External catheter
- C. Ostomy (including urostomy, ileostomy, and colostomy)
- D. Intermittent catheterization
- Z. None of the above

H0100

Appliances

↓ Check all that apply

- A. Indwelling catheter (including suprapubic catheter and nephrostomy tube)
- B. External catheter
- C. Ostomy (including urostomy, ileostomy, and colostomy)
- D. Intermittent catheterization
- Z. None of the above

MDS

MDS SECTION S FOR SOUTH DAKOTA'S FORM HAS BEEN UPDATED WITH THE NEW QUESTIONS S7500A – H.

State - S

S7500A Resident requires a room without a roommate because of challenging behaviors related to an organic or psychiatric disorder of thought, mood, perception, orientation, memory, or social history (i.e., criminal background).

0. No
 1. Yes

S7500B Date resident was placed in a room without a roommate due to challenging behaviors.

__/__/__ ... //

S7500C Resident has demonstrated behaviors that place a roommate's safety at risk (e.g., documented evidence in the medical record of behaviors such as physical or verbal aggression towards a roommate or other residents, repetitive placement of belongings or other items on the floor that could cause a roommate to fall or be injured, or a criminal background causing a safety concern for a roommate).

0. No
 1. Yes

S7500D Resident has demonstrated behaviors that infringe upon a roommate's rights and/or quality of life (e.g., documented evidence in the medical record of paranoid and territorial behaviors over room and/or belongings, routine urinating/defecating in inappropriate places, inconsolable yelling or calling out, continuous rummaging in roommate's private space/belongings, etc.).

0. No
 1. Yes

State - S

S7500E Resident's current care plan documents the need for a room without a roommate related to challenging behaviors.

0. No
 1. Yes

S7500F Resident requires a room without a roommate because of the need for bariatric equipment resulting in insufficient space for a roommate (e.g., documented evidence in the medical record of obesity diagnosis and need for bariatric equipment that makes it too crowded for the resident to share a room).

0. No
 1. Yes

S7500G Date resident was placed in a room without a roommate due to bariatric equipment and no space for roommate.

__/__/__ ... //

S7500H Resident's current care plan documents the need for a room without a roommate related to bariatric equipment and no space for a roommate.

0. No
 1. Yes

MDS

MDS SECTION S FOR MINNESOTA'S FORM HAS BEEN UPDATED WITH THE NEW QUESTIONS S6060A – C.

State - S

S6060A **Strict Isolation for active infectious disease since admission, reentry, or the prior OBRA assessment whichever is more recent. Has the resident been in strict isolation for active infectious disease since admission, reentry, or the prior OBRA assessment whichever is more recent?**

0. No
 1. Yes

S6060B **Enter the Start Date of strict isolation.**

__/__/__ ...

S6060C **Enter the End Date of strict isolation. Enter dashes if isolation is ongoing.**

__/__/__ ... --/--/----

MDS

FOR STATES REQUIRING AN OSA, SECTION G WILL STILL BE USED.

the entire 7-day period.		2. ADL Support Provided		
1. ADL Self-Performance				
	1	0	1	2
G0110A	0 1 2 3 4 7 8	0 1 2 3 8	0 1 2 3 8	A. Bed mobility how resident moves to and from lying position, turns side to side, and positions body while in bed or alternate sleep furniture
<input type="checkbox"/>	○ ○ ○ ○ ○ ○ ○ ○	○ ○ ○ ○ ○ ○	○ ○ ○ ○ ○ ○	
G0110B	0 1 2 3 4 7 8	0 1 2 3 8	0 1 2 3 8	B. Transfer how resident moves between surfaces including to or from: bed, chair, wheelchair, standing position (excludes to/from bath/toilet)
<input type="checkbox"/>	○ ○ ○ ○ ○ ○ ○ ○	○ ○ ○ ○ ○ ○	○ ○ ○ ○ ○ ○	
G0110H	0 1 2 3 4 7 8	0 1 2 3 8	0 1 2 3 8	H. Eating how resident eats and drinks, regardless of skill. Do not include eating/drinking during medication pass. Includes intake of nourishment by other means (e.g., tube feeding, total parenteral nutrition, IV fluids administered for nutrition/hydration)
<input type="checkbox"/>	○ ○ ○ ○ ○ ○ ○ ○	○ ○ ○ ○ ○ ○	○ ○ ○ ○ ○ ○	
G0110I	0 1 2 3 4 7 8	0 1 2 3 8	0 1 2 3 8	I. Toilet use how resident uses the toilet room, commode, bedpan, or urinal; transfers on/off toilet; cleanses self after elimination; changes pad; manages ostomy or catheter; and adjusts clothes. Do not include emptying of bed pan, urinal, bedside commode, catheter bag or ostomy bag
<input type="checkbox"/>	○ ○ ○ ○ ○ ○ ○ ○	○ ○ ○ ○ ○ ○	○ ○ ○ ○ ○ ○	

MDS

SITE SETTING CHANGES WILL NEED TO BE MADE AFTER OCTOBER 1, 2023, TO ALL ITEM SETS EXCEPT OSA TO REMOVE SECTION G.

Section to Sign

	NC	NQ	ND	NT	NPE	NP	OSA	IPA	SP	SD	ST	XX	NS	NSD
A	x	x	x	x	x	x	x	x	x	x	x	x	x	x
B	x	x	x			x	x	x	x	x				x
C	x	x	x			x	x	x	x	x				x
D	x	x	x			x	x	x	x	x				x
E	x	x	x			x	x	x	x	x				x
F	x													
G	x	x	x			x	x		x	x			x	x
GG	x	x	x		x	x		x	x	x				x
H	x	x	x			x	x	x	x	x			x	x
I	x	x	x			x	x	x	x	x				x
J	x	x	x		x	x	x	x	x	x				x
K	x	x	x			x	x	x	x	x				x
L	x	x				x								
M	x	x	x		x	x	x	x	x	x				x
N	x	x	x			x	x	x	x	x				x

OK Cancel

MDS MANAGER

REMINDER: OSA ASSESSMENTS WILL NOT BE INCLUDED IN THE MDS SCHEDULING TOOL BECAUSE SOME STATES REQUIRE AN OSA ASSESSMENT SCHEDULE THAT DEVIATES FROM THE FEDERAL OBRA SCHEDULE, WHICH WOULD MAKE ANY PREDICTIONS INACCURATE FOR USERS IN THOSE STATES.

OTHER

MERGE OF NEW TOPIC AND WORD SETUPS.

D0700

Social Isolation

How often do you feel lonely or isolated from those around you?

- 0. Never
- 1. Rarely
- 2. Sometimes
- 3. Often
- 4. Always
- 7. Resident declines to respond
- 8. Resident unable to respond

Social Isolation

SOCIAL ISOLATION

Never

Rarely

Sometimes

Often

Always

Resident declines to respond

Resident unable to respond

PDPM ICD-10 MAPPING HAS BEEN UPDATED.

Word Properties [Physician Orders / Lab/Imaging / q 4 Weeks] ? X

Options | Text Control | Word Control | Values | **Calendar** | Sign | Send | Compare | Auto DC | Bar Code | Scheduler | Formulary

Auto Set | Write Action | Accounts |

Ending Words

Section/Topic/Word | Ignore Site / Service

Face Sheet / NH Status / DISCHARGED TO:

Use

Word
 What Follows Word

Effective Date For Event

Date In Entry
 Date Of Entry

Control

Recurring Event
 DC'd By Past Event
 Stop Date
 Remove D/C

Recurring Control

Use Next Word Pattern
 Use Pattern
 Pattern Control

Single Occurrence

Word Pattern Cycle ? X

One week cycle Sunday January
 Two week cycle Monday February
 Monthly Tuesday March
 Last Day of Month Wednesday April
 1st (of month if no day) Thursday May
 2nd Friday June
 3rd Saturday July
 4th Sunday August
 30 days Monday September
 60 days Tuesday October
 90 days Wednesday November
 q.o.d Thursday December
 Even Days Friday
 Odd Days Saturday
 q. 0 days
 q. 4 weeks
 Annual

Ignore

Refresh OK Cancel

OK Cancel

CALENDAR

WEEKLY PATTERN OPTION

DESIGN

BUTTON ENLARGEMENT – RECEIPTS/ADJUSTMENTS AND BANK RECONCILIATION SCREENS.

American Data - ECS

Receipts

Exit Control Name(s) Post All Refresh Apply Credits Reverse Print View Write Export Search: []

Reference [] Fixed Reference Auto Account Display All Summary Greater Than/Equal To [] Clear

Date Paid 08/21/2023 ... **Equal Amount** **Unequal Amount** Target Amount [] Amount [] Remainder [] Less Than/Equal To []

Adams, John	6116.00	Control No.	Date(s) of Service	Description	\$Transportation Base Fee	Receipt	Receivable Account	Cash
	10.00	26572	10/11/2022	Base Rate	10.00		1-1-1100	
	10.00	26618	05/31/2023	Base Rate	10.00		1-1-1100	

American Data - ECS

Bank Reconciliation

Exit Control Print View Write Save Export Statement Date 07/31/2023 Account Description 1-1-0110 Cash in Bank PRIMARY

Previous Balance 5,700,459.95 Withdrawals - Deposits + New Balance = Target Balance

Select All Withdrawals Select All Deposits

Withdrawals				
--	Other: Additional Premium	765.40	02/22/2021	54362
--	Other: Utensils	100.00	02/22/2021	54363

QUESTIONS?

THANK YOU

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