

February 2013: Important Changes

QUICK TRACKER:

1. SET UP Quick Tracker
 - a. Make sure to set up the new G Codes under Maintain HCPCS/CPT-4 Codes under Resident Scheduling → Utilities menu. The facility amount and the fee schedule amount should both be .01. One cent is required by Medicare on an Institution 837I claim.
2. New screens allow for the input of the new G Code Severity Modifiers as well as the KX and 59 modifiers.

MDS 3.0

1. Assessments for residents on Medicare Replacement (Medicare C) plans:

The tracking of MDS's for Medicare replacement residents has been changed. The new tracking can be found before the very first official MDS question in Section A which is A0500 . The field will default to a "1" meaning that the assessment will be submitted. For "PPS" type assessments for Medicare replacement residents, the field should contain a "2". This can be inputted by the MDS Coordinator when coding Section A. A0410 should be filled in with a "3".

Section A		Identification Information								Save	Quit	Exit
0050-0200	0310-A-C	0310-0410	0500-0900	1000-1100	1200-1500	1510-1550	1600-2000	2100-2300	2400			
Submission Status of Assessment												
Enter Code	1. Submission of this assessment is required by state and/or federal guidelines 2. Assessment is being completed for reasons NOT COVERED by state/federal guidelines (e.g. Medicare Advantage or other private insurance)											
1												
A0050. Type of Record												
Enter Code	1. Add new record → Continue to A0100, Facility Provider Numbers 2. Modify existing record → Continue to A0100, Facility Provider Numbers 3. Inactivate existing record → Continue to X0150, Type of Provider											
1												
A0100. Facility Provider Numbers												
A. National Provider Identifier (NPI): 1234567890												
B. CMS Certification Number (CCN): 335311												
C. State Provider Number: 00309068												
A0200. Type of Provider												
Enter Code	Type of provider 1. Nursing home (SNF/NF) 2. Swing Bed											
1												

These assessments will behave exactly like the assessments wherein you had marked a "1" in A0410. The new field will NOT print out on the form.

2. MDS Link for Height (K0200A), Weight(K0200B) and Weight Loss (K0300) to Vital Signs Tracking (either in Resident Observations or Charting and Clinician Notes Modules.

K0200. Height and Weight				
While measuring, if the number is X.1 - X.4 round down; X.5 or greater round up				
<table border="1"> <tr> <td style="width: 100px; text-align: center;">100 inches</td> <td>A. Height (in inches). Record most recent height measure since admission</td> </tr> <tr> <td style="text-align: center;">-</td> <td>B. Weight (in pounds). Base weight on most recent measure in last 30 days; measure weight consistently, according to standard facility practice (e.g., in a.m. after voiding, before meal, with shoes off, etc.)</td> </tr> </table>	100 inches	A. Height (in inches). Record most recent height measure since admission	-	B. Weight (in pounds). Base weight on most recent measure in last 30 days; measure weight consistently, according to standard facility practice (e.g., in a.m. after voiding, before meal, with shoes off, etc.)
100 inches	A. Height (in inches). Record most recent height measure since admission			
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K0300. Weight Loss				
Loss of 5% or more in the last month or loss of 10% or more in last 6 months				
<table border="1"> <tr> <td style="width: 100px;">Enter Code</td> <td> <ul style="list-style-type: none"> 0. No or unknown 1. Yes, on physician-prescribed weight-loss regimen 2. Yes, not on physician-prescribed weight-loss regimen </td> </tr> <tr> <td style="text-align: center;">0</td> <td></td> </tr> </table>	Enter Code	<ul style="list-style-type: none"> 0. No or unknown 1. Yes, on physician-prescribed weight-loss regimen 2. Yes, not on physician-prescribed weight-loss regimen 	0	
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0				

3. K0200A, K0200B -- If height and weight are regularly recorded in the Resident Observations or Charting and Clinician Notes Modules, the data can be viewed and brought into the MDS. The fields in the MDS will be outlined in red.

Hit the F9 (function key) on the field. A screen appears with the information from the latest height and weight entry in the system. If the information is correct and you wish to use it, hit the Accept Button. PLEASE carefully note the date of the information.



4. K0300 (See screen below) Hit F9 and the system looks back for weights from approximately 30 days (20-40 days) from the ARD or approximately 180 days (165 to 180). It analyzes data from Vital Numbers only. If there is a current weight and not a past weight for calculation, the system was unable to find data it could use or unable to find data supporting a weight loss. If you select the Accept button in that circumstance, the answer will be zero filled.

If there has been a weight loss you must indicate a "1" or a "2". If you hit "accept" the answer will be zero filled as the system cannot make the decision between "1" and "2."

The data contained in the charting module (vital numbers) suggests the following calculation:

30-day comparison (answer 1 or 2 ONLY IF \geq 5% change, otherwise 0)

<u>192.0</u>	Observation made on: 01/16/2013
<u>173.0</u>	Observation made on: 02/14/2013
10.983% change in weight	

180-day comparison (answer 1 or 2 ONLY IF \geq 10% change, otherwise 0)

<u>228.0</u>	Observation made on: 08/14/2012
<u>173.0</u>	Observation made on: 02/14/2013
31.792% change in weight	

IMPORTANT: The clinician responsible to complete these questions for the facility must verify that these responses are correct.

 