

Diagnoses for PDPM

MDS 3.0 – Analytics/Reports – Diagnoses for PDPM

The primary diagnosis (why the resident is in your home and receiving Medicare services) will play a significant role in the new PDPM classifications beginning in October 2019. Comorbidities for the speech and non-therapy components will also impact your rates. The purpose of this report is to show you how the diagnoses set on your residents will be read by the PDPM calculations.

The report –

The report is composed of four columns

- Medical record number
- Name
- ICD-10 code
- ICD-10 Description followed by comment

The report is based upon the diagnoses listed in the census module. In theory, you should not be entering a diagnosis on the MDS that is not active in the census module so this should be a good start for you. The report will give you an indication of how the diagnoses will be used in the final MDS calculation. However, this will not give you the complete PDPM score as more goes into the classification than simply the diagnoses.

If no ICD-10 code exists for a resident, you will see the name appear in red italics and a yellow highlight along with a message indicating *No diagnoses located for this resident*. You will want to remedy this prior to completing an MDS for PDPM Medicare A stays.

If the primary diagnosis (A-1 until we receive final clarification) that you have set on the resident is not allowable per PDPM specifications, you will see a message highlighted in green, **Cannot be used as a primary reason for admission**.

The A-1 diagnosis (until we receive final clarification) will be listed first along with the default category and any other PT/OT, SLP, or NTA categories. If any of the other assigned diagnoses assigned to this resident are a comorbidity, that diagnosis will be listed with a comment showing you the category and reason for flagging. For example, an obesity diagnosis may show the comment **NTA Comorbidity: Flagged as Morbid Obesity**.

Examples:

Diagnoses Effecting PDPM Decisions

| Med Rec # | Name | ICD-10 | Description | Comments |
|-----------|------|--------|----------------------|--|
| | | G89.29 | - Other chronic pain | Cannot be used as a primary reason for admission |
| | | | | <i>No diagnoses located for this resident</i> |

Z47.89 - Encounter for other orthopedic aftercare

Default Category: Orthopedic Surgery (Except Major Joint Replacement or Spinal Surgery)

Major Procedure: May be Eligible for One of the Two Orthopedic Surgery Categories

PT/OT Category: Other Orthopedic

SLP Category: Non-Neurologic

J96.10 - Chronic respiratory failure, unsp w hypoxia or hypercapnia

NTA Comorbidity: Flagged as Cardio-Respiratory Failure and Shock

Z68.43 - Body mass index (BMI) 50-59.9 , adult

NTA Comorbidity: Flagged as Morbid Obesity
