September 24, 1998

TO: Medicare and/or Medicaid participating nursing facilities
Software Vendors

FROM: Lynn Carter, RRA
Information Technology Manager/State RAI Coordinator
Long Term Care and Acute Care

RE: State Operations Manual (SOM)

SUCCESSFUL TRANSMISSION

First of all, I would like to congratulate you for successfully transmitting the Minimum Data Set (MDS) following the most recent data specification changes from Health Care Financing Administration (HCFA.) These changes were implemented due to the recent publication in the Federal Register regarding MDS transmission. I realize it was difficult for both you and the vendors, to make these modifications in the short time frame specified. On August 6, 1998, HCFA required all states to run a report listing the nursing facilities that did not successfully transmit using the new data specs. They also required that the state issue a paper deficiency "F287" with a scope and severity of "C" for any facility on that list. There were zero (0) facilities on that report when we ran it. Job well done!

SNF/PPS

Beginning July 1, 1998 nursing facilities participating in Medicare are required to begin a Prospective Payment System (PPS) using the MDS on their cost reporting period beginning date. The regulation requires the completion of more frequently completed MDS assessments. The Provider Reimbursement Manual – July 1998 includes guidelines concerning PPS and can be obtained through the Internet, http:www.hcfa.gov/medicare/hsqb/mds20. The most current PPS information from HCFA can also be obtained from the Internet as well.

STATE OPERATIONS MANUAL

The State Operations Manual (SOM) concerning MDS automation continues to exist in draft format. HFCA indicated that the states should implement the manual's content now, even though it is in draft format. A copy of this can be obtained from the Internet

http:www.hcfa.gov/medicare/hsqb/mds20. The changes noted in the draft manual are as follows:

- New F Tag (F 287) for encoding and transmitting the MDS to the state.

- Currently, we are completing the Discharge Tracking Sheet on residents if they were out of the building at midnight (the Midnight Rule.) I just received word from HCFA that we can no longer follow this policy. We must implement exactly what is stated in the SOM. Effective immediately, a discharge tracking sheet must be completed when the resident dies or leaves the facility and is actually admitted to another facility. **The discharge tracking sheet is not completed on observational stays of less than 24 hours when the resident is not admitted to the hospital.** Remember a discharge tracking sheet is not completed on a resident that is on a temporary visit home or another type of therapeutic or social leave.

- We are currently completing the RAP Summary Sheet by checking the care plan column if we have addressed the RAP on the care plan **and** it was triggered. HCFA indicated that we must follow the SOM. So, effective immediately, when completing a comprehensive assessment, if a RAP is addressed on the care plan, the care plan column should be checked, regardless of whether the RAP was triggered or not.

- The Notification Form included in the SOM must be given to all residents that are currently in-house and to residents upon admission. This form notifies the resident that their medical record information (the MDS) will be electronically transmitted to the state. This form should be implemented now. I have enclosed a copy of it.

SECTION T

As stated in the September 16, 1998 memo, Subsection T1b, c & d will no longer be required to be completed on Initial Admission Assessments (A8a1.) In other words, there is a part of Section T, Subsection T1b, c & d that does not need to be completed on initial admission assessment. The entire form, Section T, must continue to be completed on all full and comprehensive assessments.

PREVIOUS MDS MEMOS FROM THE STATE

As promised, I am listing all the MDS memos that have been mailed to your facility in the past 6 months. Please check to make sure you have received all of them. If you are missing any, call the ISDH MDS help desk 317-233-7537 and we can mail you a copy.

- May 21, 1998 RE: Minimum Data Set (MDS) Automation

- June 4, 1998 RE: Minimum Data Set (MDS) Issues

- June 4, 1998 RE: Supporting Documentation

- August 6, 1998 RE: MDS Section T
- September 16, 1998 RE: Correction Section T

HELP DESK NUMBERS

MDS Completion Questions	ISDH MDS Help Desk	317-233-7537
MDS Transmission and Medicaid Reimbursement Questions	Myers and Stauffer Help Desk	317-816-4122
Medicare Reimbursement Questions-	AdminaStar Federal Help Desk	317-841-4551

FAREWELL

I have recently submitted my resignation as Information Technology Manager/State RAI Coordinator for Long Term Care and Acute Care, effective September 30, 1998. I have accepted another position in the private sector.

It certainly has been a pleasure to have had the opportunity to work with you. I wish all of you the best of luck with your MDS endeavors.