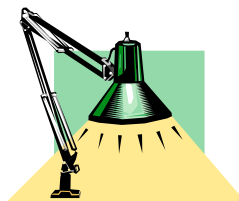


RAI Spotlight



Job Aids Available –

GG0130A. Eating, GG0130B. Oral Hygiene, GG0130C. Toileting Hygiene, GG0130E. Shower/Bathe Self, GG0130F. Upper Body Dressing, GG0130G. Lower Body Dressing, and GG0130H. Putting On/Taking Off Footwear

Kiera Price
RAI Coordinator
1-717-787-1816
qa-mds@pa.gov

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The Centers for Medicare & Medicaid Services (CMS) is offering companion job aids to assist providers in the assessment and coding of **GG0130A. Eating, GG0130B. Oral Hygiene, GG0130C. Toileting Hygiene, GG0130E. Shower/Bathe Self, GG0130F. Upper Body Dressing, GG0130G. Lower Body Dressing, and GG0130H. Putting On/Taking Off Footwear.** The job aids provide clinically relevant information to assist providers in understanding specific guidelines and clinical considerations that should be applied to coding GG0130. Self-Care items. These training assets are intended for the following post-acute care (PAC) settings: Home Health Agencies (HHAs), Inpatient Rehabilitation Facilities (IRFs), Long-Term Care Facilities (LTCHs), and Skilled Nursing Facilities (SNFs). The training materials are available in multiple formats in the file below.

[2021_November.10_SNF_GG0130 Job Aids \(ZIP\)](#)

Teleconference: PA-Resident Data Reporting Manual

Date: January 13, 2022
Time: 1:30 – 2:30 pm EDT (Dial-in 10 minutes earlier)
Topic: PA-Resident Data Reporting Manual Overview
Handouts: Power Point slides will be available on or about January 11th on the DOH Message Board at <https://sais.health.pa.gov/commonpoc/Login/Login.aspx>
Call in number: 1-844-833-3230 or 1-442-275-1811
Conference ID Number: 2379798

Company Name: Myers and Stauffer

Presenter: Kerry Weaver

A recording of this conference will be available following the presentation at <https://nfrp.panfsubmit.com/>

Additional questions: qa-mds@pa.gov

Questions about the RAI?

Please submit them to
qa-mds@pa.gov

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Teleconference Q&A

On October 14, 2021 a training teleconference was provided on *The Importance of Accurate MDS Diagnosis Coding*. The following questions were received:



Q. How should this be coded on the MDS? Is Monoclonal Antibody infusion an IV medication? I'm hearing conflicting answers, some say it's a blood product transfusion while others say it's an IV medication.

A. Section O, item O0100H has the following coding instructions on page O-4: "Code any drug or biological given by intravenous push, epidural pump, or drip through a central or peripheral port in this item... Do not include IV medications of any kind that were administered during dialysis or chemotherapy." To determine what products are considered medications or for more information consult the FDA website.

Q. Does the diagnosis that we enter in I0020B need to be repeated in I0100-I8000?

A. The code you enter at I0020B should be repeated in I0100-I8000. If you notice neither the payment nor quality reporting programs use data from I20B, so in order for the diagnosis to be included it would need to be entered in the appropriate place in I0100-I8000 as well as I0020B.

Q. If someone is receiving an anticoagulant for a history of DVT – Do we continue to use the "chronic DVT" ICD10 or do we use a prophylactic code?

A. If the resident does not have a current DVT, the prophylaxis code would be appropriate.

Q. Would you be able to direct me to a list of dx codes that were made inactive as of 10/1/21? I want to make sure I have a correct listing.

A. The following is a link from CMS with some resources for 2022 ICD-10 diagnosis coding guidelines and updates. <https://www.cms.gov/files/document/fy-2022-icd-10-cm-coding-guidelines.pdf>

Q. If a speech therapist writes in an evaluation that the resident has either a cognitive impairment and/or dysphagia and it is cosigned by the provider is that enough to code the diagnosis in section "I"?

A. Yes, An evaluation note based on their documented assessment within the last 30 days would be sufficient to code cognitive impairment and/or dysphagia, so long as the additional criteria of active treatment within the 7 days was also met.

Q. If the resident was treated in acute care for a UTI but the diagnosis is documented as "resolved" on admission since they are no longer on antibiotics but they are receiving PT/OT for a functional decline are we still allowed to code it as the primary diagnosis in section I0020B?

*A. Section I, item I2300 has the following instructions on page I-13: "If the diagnosis of UTI was made prior to the resident's admission, entry, or reentry into the facility, it is **not** necessary to obtain or evaluate the evidence-based criteria used to make the diagnosis in the prior setting. A documented physician diagnosis of UTI prior to admission is acceptable. This information may be included in the hospital transfer summary or other paperwork."*

Manuals with Recent Updates

Five-Star Technical User's Guide Plus Claims-Based Measures Appendix (10/21)

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Downloads/usersguide.pdf>

State RAI Coordinators Contact List / Appendix B Update (10/21)

[RAI Manual Appendix B 09302021 \(cms.gov\)](https://www.cms.gov/RAI/Manual/AppendixB/09302021)

jRAVEN Updates

The Resident Assessment Validation and Entry System (jRAVEN) was developed by the Centers for Medicare & Medicaid Services (CMS). jRAVEN is a free Java based software application which provides an option for facilities to collect and maintain MDS Assessment data for subsequent submission to the appropriate state and/or national data repository. jRAVEN displays the MDS Item Sets similar to the paper version of the forms. Please consult the jRAVEN

Installation and User Guides for additional information.

jRAVEN v1.7.9 is now available for download below. Users do not need a previous version of jRAVEN to download, install or use jRAVEN v1.7.9.

<https://qtso.cms.gov/software/jraven-179>



MDS Training Opportunities and Resources

CMS: Pocket Guides (11/21) The Centers for Medicare & Medicaid Services (CMS) is offering **Pocket Guides** to assist providers in assessing and coding self-care and mobility, falls, and pressure ulcers/injuries. The pocket guides provide a quick reference for important terms and definitions that promote coding accuracy.

The pocket guides are approximately 2 X 3.5 inches in size and are designed to be worn behind a provider identification badge.

The pocket guides cover the following topics:

- Pocket Guide #1: Coding for Self-Care and Mobility Items.
- Pocket Guide #2: Definitions for Coding Section J Fall Items.
- Pocket Guide #3: Pressure Ulcers/Injuries Stages and Definitions.

The Guides are available for download at the following links:

[Pocket Guide Coding for Self Care and Mobility Items \(PDF\)](#)

[Pocket Guide Definitions for Coding Section J - Fall Items \(PDF\)](#)

[Pocket Guide Pressure Ulcers and Injuries - Stages and Definitions \(PDF\)](#)



CMS MDS Item O0100 Web-Based Training (10/21) Section O: O0100. Special Procedures, Treatments, and Programs Web-Based Training for SNFs

This 30-minute course is intended for providers in Skilled Nursing Facilities (SNFs) and is designed to be used on demand anywhere you can access a browser. The course includes interactive exercises to test your knowledge related to the assessment and coding of O0100.

[CLICK HERE](#) to access the training.