

# Resident Data Reporting Manual Change Document

## Posted October 1, 2022

This revision to the Resident Data Reporting Manual (RDRM) has an effective date of October 1, 2022. It is being released at the current time to reflect updates as noted below:

### Changes Effective October 1, 2022:

**The entire document was reformatted all materials remain unchanged except as noted below:**

- 1 Hyperlinks were added to chapter headings in the *Table of Contents*.
- 2 All URLs were updated to hyperlinks throughout the document.
- 3 Dates, web sites, definitions, version numbers and page numbers were updated to reflect current status.
- 4 Supportive Documentation Guidelines were updated to reflect the language note below:

**K0300-Weight Loss:** Documentation in the clinical record of the resident's weight loss of 5% or more in last month OR 10% or more in last 6 months. May be planned or unplanned. If planned, goal of weight loss or expected weight loss through use of diuretics must be documented.

- This item compares the resident's weight in the current observation period with his or her weight at two snapshots in time:
  - At a point closest to 30-days preceding the current weight
  - At a point closest to 180-days preceding the current weight
- Perform weight loss calculations as detailed in Section K of the RAI Manual
- Does require:
  - Percentage based on the actual weight
  - Mathematical rounding

**O0400-Respiratory Therapy:** Evidence of the total number of respiratory therapy minutes provided. Only minutes that the respiratory therapist or respiratory nurse spends with the resident shall be recorded on the MDS. This time includes resident evaluation/assessment, treatment administration and monitoring, and setup and removal of treatment equipment.

#### **Does require:**

- Based on an initial assessment performed by qualified clinician (respiratory therapist, respiratory nurse)
- Only medically necessary therapies that occurred after admission/readmission to the facility that were:
  - 1) Ordered by a physician (or other licensed professional as allowed by state law) based on a qualified therapist's assessment and treatment plan. The physician's order includes a statement of frequency, duration, and scope of treatment;
  - 2) Documented in the resident's medical record
  - 3) Care planned and periodically evaluated to ensure the resident receives needed therapies and that treatment plans are effective
- Therapy services may occur inside or outside the facility, while a resident

- Documentation of minutes that the respiratory therapist or respiratory nurse spends with the resident conducting the actual respiratory therapy treatment including the set-up and removal of treatment equipment.
- A respiratory nurse must be proficient in the modalities provided either through formal nursing or specific training and may deliver these modalities as allowed under the state Nurse Practice Act and under applicable state laws.
- The services must be directly and specifically related to an active written treatment plan that is based on an initial evaluation performed by qualified personnel;
  - the services are required and provided by qualified personnel;
  - the services must be reasonable and necessary for treatment of the resident's condition.
- Documentation of respiratory assessment post treatment to determine efficacy of treatment. A weekly summary assessment is not sufficient.

**Does include:**

- Coughing, deep breathing, heated nebulizers, aerosol treatments, assessing breath sounds and mechanical ventilation, etc.
- Subsequent reevaluation time
- Set-up time

**Does NOT include:**

- Time that a resident self-administers a nebulizer treatment without supervision of the respiratory therapist or respiratory nurse is not included in the minutes recorded on the MDS
- Do not include administration of metered-dose and/or dry powder inhalers in respiratory minutes
- Hand held medication dispensers
- Therapy provided prior to admission
- Time spent on documentation or initial evaluation
- Conversion of units to minutes
- Rounding to the nearest 5th minute
- Therapy services that are not medically necessary

Current RAI User's Manual (v1.17.1) effective October 1, 2019

(<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html>).