





PPS SCHEDULING

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OBJECTIVES

- Define ARD and look back period
- List assessments for PPS purposes
- Effectively schedule MDS assessments
- Outline requirements for short stay assessment





GG AND PPS DISCHARGE ASSESSMENTS

- See QIPMO website: www.nursinghomehelp.org for webinar information related to section GG and PPS discharge assessments



A FEW DEFINING MOMENTS



- **ARD = Assessment reference date** is the last date of observation. Time begins at midnight of day one of the look-back period and through 23:59 of the ARD
- **Observation (aka look back period)** is the time period over which the resident's condition or status is captured by the MDS assessment. Most often this is 7 days; however, certain MDS items may be 7, 14 or even 30 days



ASSESSMENTS



OBRA, PPS, and Tracking Records

- SNFs
 - All OBRA requirements
 - PPS requirements
 - Tracking records
- Swing Beds
 - Discharge assessments
 - PPS requirements
 - Tracking records




SNF PPS ASSESSMENTS



- Provide a baseline assessment to guide care-planning and care
- Required for reimbursement under Medicare Part A
- Must meet OBRA requirements also
- When combining Medicare and OBRA assessments:
 - *****All requirements for both are met*****



SNF PPS ASSESSMENTS



- Two types of PPS assessment
- Scheduled "Day Assessments": 5, 14, 30, 60, 90
 - Standard, predetermined time period for ARD
 - Grace days allowed
- Unscheduled "T Assessments": SOT, EOT, EOT-R, COT assessments
 - Applicable when certain situations occur with therapy



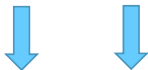



ASSESSMENT WINDOWS


- Defined days within which the ARD must be set
- Timelines of the PPS assessment is defined by selecting an ARD within the prescribed ARD window (chart pg 2-43)
- The facility is required to set the ARD on the MDS form itself or in the facility software within the appropriate time frame of the assessment type being completed- (paper A forms)


SCHEDULED MEDICARE PPS ASSESSMENTS



ASSESSMENT TYPE	REASON FOR ASSESSMENT (A0310B)	ASSESSMENT REFERENCE DATE WINDOW	ASSESSMENT REFERENCE DATE GRACE DAYS	APPLICABLE MEDICARE PAYMENT DAYS
5-day	01	1-5	6-8	1 through 14
14-day	02	13-14	15-18	15 through 30
30-day	03	27-29	30-33	31 through 60
60-day	04	57-59	60-63	61 through 90
90-day	05	87-89	90-93	91 through 100





RAI manual: Pg 2-43





GRACE DAYS FYI

- There is no difference between regular ARD windows and grace days and we encourage the use of grace days if their use will allow a facility more clinical flexibility or will more accurately capture therapy and other treatments. Thus, we do not intend to penalize any facility that chooses to use the grace days for assessment scheduling or to audit facilities based solely on their regular use of grace days.
 - SNF PPS Final Rule p 48519





REGULATIONS



- 483.20(j) Penalty for Falsification
- (1) Under Medicare and Medicaid, an individual who willfully and knowingly--**
 - (i) Certifies a material and false statement in a resident assessment is subject to a civil money penalty of not more than \$1,000 for each assessment; or
 - (ii) Causes another individual to certify a material and false statement in a resident assessment is subject to a civil money penalty of not more than \$5,000 for each assessment.
- (2) Clinical disagreement does not constitute a material and false statement.**







CAN I MOVE AN ARD?

- The ARD can be changed only during the "window"
- If a resident is discharged prior to the ARD it can be "moved" to the day of discharge if done prior to the 14th day after discharge, otherwise it is considered a missed MDS
- If no ARD was "set" prior to discharge then there is no MDS that can be adjusted





	<h3>NOT IN THE BUILDING AT MIDNIGHT (ER)</h3>
	<ul style="list-style-type: none">■ NOT out of building over 24 hours■ Do NOT discharge■ Do NOT restart the PPS schedule■ Adjust the Medicare schedule by the one day■ For example resident left on day 20 to ER and when he returns it will be day 20 again (do-over day)■ COT/ROLLING 7 days continue until next scheduled assessment completed
	 

	<h3>OTHER SITUATIONS</h3>	<i>OTHER</i>
	<ul style="list-style-type: none">■ Admitted to the hospital in ER/Observation OVER 24 hours■ New orders, certifications, and new therapy evaluations■ PPS schedule starts over	
	 	

	<h3>SPECIAL SITUATIONS</h3>	
	<ul style="list-style-type: none">■ Day of admission■ Dies or discharges on day of admission: Do an entry and death in facility■ Enters building and leaves before midnight: Entry tracking and a discharge <p>*We can not bill Medicare if they were not in the building at midnight</p> <ul style="list-style-type: none">■ Leaves prior to day 8<ul style="list-style-type: none">- Complete the 5 day for payment ** NOTE** A five day assessment is required for reimbursement for Medicare A stays. Even if they are NOT in the home 5 days, do the assessment- If no ARD had been set prior to leaving then you must bill default rate- Check to be sure if a Short Stay would work (do the stars align?)<ul style="list-style-type: none">■ To be discussed later	
	 	



CASE MIX INDEX MAXIMIZATION

- Each RUG is assigned a CMI Score
 - 1-66
 - Higher the CMI, higher the payment
 - RUX=66 to PA1=1
- Residents can qualify for multiple RUGs but CMS will assign the highest paying RUG
- Many nursing RUGs have a higher CMI than some of the Rehab RUGs





RUG RATES

- Synertx Rehabilitation
- <http://www.synertx.com/pps-calculator/>
- Shows RUG rates per county not specifically for your facility
- Choose: 2017 RUG IV





A0310B SCHEDULED PPS ASSESSMENTS

- (01) 5-day
- ARD – 1-5
 - Grace days – 6-8
 - Can not change the ARD after day 8
 - Payment – days 1-14
- If was in your home prior to skilled stay the admission assessment stand and is not required again. (unless was discharged for over 30 days)






A0310 B
SCHEDULED PPS ASSESSMENTS

- (02) 14-day
 - ARD - 13-14
 - Grace days - 15-18
 - Can not change the ARD after day 18
 - Payment - days 15-30
 - Admission assessment must have ARD prior to day 14 to meet that regulation (can combine if ARD day 13.)
- (03) 30-day
 - ARD - 27-29
 - Grace days - 30-33
 - Can not change the ARD after day 33
 - Payment - days 31-60





A0310 B
SCHEDULED PPS ASSESSMENTS

- (04) 60-day
 - ARD - 57-59
 - Grace days - 60-63
 - Cannot change the ARD after day 63
 - Payment - days 61-90
- (05) 90-day
 - ARD - 87-89
 - Grace days - 90-93
 - Cannot change the ARD after day 93
 - Payment - days 91-100
 - May combine with LTC quarterly assessment



A0310 B
UNSCHEDULED PPS ASSESSMENTS



- (07) OMRA, Significant Clinical Change, or Significant Correction Assessment
 - Meets criteria for a Sig Change or Sig correction
 - May occur any time during the stay
 - OBRA required assessment
 - May be combined with a PPS scheduled assessment
 - May establish a new RUG
 - New RUG begins on ARD



PPS ASSESSMENTS "T" ASSESSMENTS



Other Medicare Required Assessment (OMRA)

- Type
 - Start of Therapy (SOT)
 - End of Therapy (EOT)
 - End of Therapy - Resumed (EOT-R)
 - Change of therapy (COT)
- Shortened assessments
- May not replace a scheduled PPS assessment, but may CHOOSE to combine if COT date falls in window; requires completion of most inclusive item set





SETTING THE "T" ASSESSMENTS ARD

- Stand alone COT, EOT or SOT must set the ARD for the assessment within the allowable ARD window for the type but may do so no more than TWO days after the window has passed
- This is NOT the same as grace days in the "Day" assessments



A 0310C: OTHER MEDICARE REQUIRED ASSESSMENT (THE T'S)

- (01) Start of Therapy Assessment (SOT)
 - **OPTIONAL** - You don't have to do it
 - Purpose is to obtain therapy RUG any time during the stay
 - ARD is 5-7 days after start of first therapy
 - Payment begins first day therapy is provided
 - Only complete if therapy RUG or if nursing RUG pays LESS otherwise MDS is rejected
 - Be attentive when combining
 - **** No need to combine with the 5 day assessment except for short stay**





SOT OMRA-EXAMPLE 1

- Resident on Part A for skilled nursing
 - OT eval Tuesday
 - PT eval Wednesday
 - SLP eval Friday

SUN	MON	TUES	WED	THUR	FRI	SAT
(6)	(7)	OT(1)	PT(2)	(3)	ST(4)	(5)



- What are the possible ARDs for SOT OMRA?
 - Saturday, Sunday, Monday
 - ARD for SOT OMRA must be day 5, 6, or 7, with day 1 being earliest therapy start date (therapy start date = therapy eval date)

SOT OMRA EXAMPLE 2

10/30 1	10/31 2	11/1 3	11/2 4	11/3 5	11/4 6	11/5 7
Admit						Therapy starts
11/6 8	11/7 9	11/8 10	11/9 11	11/10 12	11/11 13	11/12 14
ARD of 5 day			ARD of SOT	ARD of SOT	ARD of SOT (14 day/ SOT)	



Bill 5 day assessment for days 1-6
Bill 14 Day/SOT OMRA with ARD of 11/11 for days 7-14

SOT OMRA EXAMPLE 3

Fri	Sat	Sun	Mon	Tue	Wed	Thur
10/28	10/29	10/30	10/31	11/1	11/2	11/3
Therapy starts 22 min	No tx	No tx	Tx 63 min	Tx 67 min	Tx 72 min	Tx 70 min
SOT OMRA ARD				Day 5	Day 6	Day 7



Resident in HD2 (CMI 46 Rural)

SOT OMRA EXAMPLE 3



- 3 therapy days 152 minutes
- 4 therapy days, 224 minutes
- 5 therapy days, 294 minutes

- RMB (CMI 36 - Rural)
- Resident in HD2 (CMI 46)



SOT OMRA EXAMPLE 3



- Outcome
 - Do not complete SOT
 - SOT is optional
 - Therapy RUG will pay less than Nursing RUG



SOT OMRA EXAMPLE 4



- 3 therapy days 152 minutes
- 4 therapy days, 224 minutes
- 5 therapy days, 294 minutes

- RMB (CMI 36 - Rural)
- HD1 (CMI 35)





SOT OMRA EXAMPLE 4 *Outcome*

- Outcome
 - Complete SOT
 - Therapy RUG higher than current Nursing RUG
 - Therapy RUG begins payment on the first day therapy saw the resident





SOT OMRA AFTER AN EOT

- Resident covered under Medicare for rehab services x 34 days; resident remains receiving skilled level of care and an EOT OMRA completed
- Day 42, resident having difficulty ambulating and therapy re-initiates PT services
- Schedule SOT OMRA for days 46, 47, or 48
- Payment begins on day 42 until day 60 pending COT reviews beginning on day 49



DON'T FORGET WITH THE SOT



- A standalone SOT does not case mix index maximize
 - Only contains information to obtain appropriate Rehab RUG
 - Does not contain information to calculate a nursing RUG
- Would not want to complete a stand alone SOT if nursing RUG is higher than Rehab RUG
- Usually will not combine a SOT with a 5day unless you are trying for a short-stay



"T" ASSESSMENTS



EOT OMRA

- Not optional if skilled care continues
- ARD 1-3 days after last day of therapy provided ***days a week***
- Payment changes day after last day of therapy (Z0150A)
- Be aware when in a Rehab Low and no therapy for 3 consecutive days





EOT OMRA REQUIREMENTS

- Resident currently receiving rehab services AND is classified in a Rehab RUG; all therapies discontinue and Medicare coverage continues under *nursing skilled services*
- A day of therapy is defined as the resident receiving a minimum of 15 minutes of therapy by one discipline
- 3 consecutive calendar days without therapy
 - Reason doesn't matter
 - Therapy provider status doesn't matter



EOT SCHEDULING



- Resident is discharged from the SNF on or prior to the third consecutive day of missed therapy services then no EOT is required
- When resident comes off ALL Medicare Part A services an EOT is not required; billing will show the last covered day on the claim (part A PPS Discharge if staying in building)



EOT OMRA EXAMPLE 1

- Resident is classified in RHX
 - Therapy ends Monday
 - Skilled Nursing continues



- Do we need to do an EOT



EOT OMRA EXAMPLE 1

- Answer:



- Yes an EOT OMRA is required
- ARD must be Tuesday, Wednesday or Thursday
- Payment changes on Tuesday



EOT OMRA EXAMPLE 2



- Resident misses therapy on Thursday and Friday due to illness
- Therapy not available on weekend

- Is an EOT OMRA necessary?



EOT OMRA EXAMPLE 2



- ARD would have to be no later than Saturday
- 3 consecutive days without therapy regardless of the reason, weekends, holidays, illness



EOT OMRA EXAMPLE 3



Thurs	Fri	Sat	Sun	Mon	Tues	Wed
Therapy	Therapy Ends			Discharge To home		



Do we need to do an EOT ??







EOT OMRA EXAMPLE 3

- NO!
- It is not required until the resident missed three consecutive calendar days of therapy. Bill the same therapy RUG currently in effect till day of discharge
- ** PPS Discharge will be required**




	EOT-R
	<ul style="list-style-type: none">■ End of Therapy with Resumption<ul style="list-style-type: none">- Therapy services MUST resume within 5 consecutive calendar days after last treatment day- EOT R: therapy services have resumed at the same RUG level AND with the same therapy plan of care that had been in effect prior to the EOT OMRA; no clinical change in resident- Eliminates need for new evaluation- Eliminates need for SOT OMRA
	



	EOT-R
	<ul style="list-style-type: none">■ If the EOT OMRA has not been accepted into the data base code the date of therapy resumption at 00450 A and 00450B■ If the EOT OMRA has been accepted into the database; complete the Modification Process and indicate the reason for modification is the addition of the Resumption date
	

	EOT R EXAMPLE
	<ul style="list-style-type: none">■ Resident receiving therapy services■ Misses therapy treatment days 36-39■ Complete EOT OMRA (ARD days 36-38)■ Therapy resumes on Day 40 at same level of intensity■ Complete EOT-R to resume therapy RUG■ Payment at Rehab RUG begins on resumption of therapy at same RUG level as Rehab RUG prior to EOT
	

WHAT IF??????????

- Therapy resumes and doesn't make the minutes as scheduled
- COT will reset the payment 7 days later with the "R" of the EOT R being day 1 of the count





NOVEMBER 2016						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
		1 Day 25 RVB	2 Day 26 RVB	3 Day 27 RVB	4 Day 28 30 day Assessment RHC	5 Day 29 RVB
6 Day 30 RVB	7 Day 31 RHC	8 Day 32 RHC	9 Day 33 RHC	10 Day 34 RHC	11 Day 35 RHC	12 Day 36 No therapy CC1
13 Day 37 No therapy CC1	14 Day 38 EOT Done No therapy CC1	15 Day 39 No Therapy CC1	16 Day 40 Therapy resumes EOT-R RHC	17 Day 41 RHC	18 Day 42 RHC	19 Day 43 RHC
20 Day 44 RHC	21 Day 45 RHC	22 Day 46 RHC	23 Day 47	24	25	26



BOTH SOT AND EOT

- May combine an SOT & EOT
- Requires ARD rules for both the SOT & EOT to be adhered to
 - ARD must be within 5-7 days from start of therapy date
 - ARD must be within 1-3 days from end of therapy date
- RUG payment effective from start of therapy date through end of therapy date (Z0100A)
- Non-therapy RUG begins on first non-therapy date after therapy ends (Z0150)



SOT/EOT EXAMPLE

- Resident currently covered under Medicare Part A for a Stage IV pressure ulcer, currently in a non rehab RUG
- PT initiates therapy services for a limited number of days only to address some positioning and wheelchair management issues
- May complete SOT/EOT to obtain Rehab RUG, if they meet rehab criteria, to pay for days of therapy services





CHAPTER 2

- Bullet 4 on page 2-53 and 2-54 (top of page 2-54); there is discussion on EOT-R, regular scheduled MDS and billing. Example:
 - A resident misses therapy on day 11, 12, 13 and resumes therapy on day 15; in this case the facility should bill the non therapy RUG for days 11, 12, 13, and 14 and on day 15 the facility should bill the RUG that was in effect prior to the EOT
- 14/EOT/EOT-R




CHANGE OF THERAPY OMRA (COT)

- Is required when the intensity of therapy services change to such a degree that the RUG from the most recent assessment is no longer an accurate reflection of the intensity of therapy being provided
- The decision to combine the COT with a scheduled PPS assessment is our choice; this is in the manual on page 2-55 (Chapter 2)
- CHANGE as of 10/1/16 (next slide)





CHAPTER 2




PPS Discharge



- Page 2-55 Clarification: If the date listed in A2400 C (End date of most recent Medicare stay) is on Day 7 of the COT observation period and staying in facility, the SNF **must** complete BOTH the COT OMRA **and** the Part A PPS Discharge Assessment; these assessments must be completed **separately**



CHAPTER 2







- OBRA Discharge
- If it is a discharge from Medicare Part A and discharge from the facility, and day 7 of the COT the facility **may** choose to combine the COT OMRA with the discharge assessment







COT OMRA

- Review of the therapy intensity is done every 7 days (rolling 7) beginning with the day after the ARD of most recent PPS assessment
- ARD of COT OMRA is **always** day 7 of COT observation period (once a Tuesday, always a Tuesday, until day assessment restarts the rolling 7)





	<h2 style="margin: 0;">COT OMRA</h2>
	<p>The following should be considered:</p> <ul style="list-style-type: none">■ Total Reimbursable Therapy Minutes (RTM)■ Number of therapy days■ Number of therapy disciplines■ Restorative Nursing criteria if in a Rehab Low
	 

	<h2 style="margin: 0;">COT OMRA</h2>
	<ul style="list-style-type: none">■ A COT OMRA is required in cases where the therapy received during the COT observation period would cause the resident to be classified into a different RUG category■ A COT will be required if in a therapy RUG group or is receiving therapy services but is classified in a Nursing RUG due to Case Mix Index maximization
	 

	<h2 style="margin: 0;">CHAPTER 2</h2>
	<ul style="list-style-type: none">■ Pg 2-54 COT: Required when the resident was receiving a sufficient level of rehabilitation therapy to qualify for an Ultra High, Very High, High, Medium, or Low Rehabilitation category and when the intensity of therapy (as indicated by the total reimbursable therapy minutes (RTM) delivered, and other therapy qualifiers such as number of therapy days and disciplines providing therapy) changes to such a degree that it would no longer reflect the RUG-IV classification and payment assigned for a given SNF resident based on the most recent assessment used for Medicare payment.
	 

CHAPTER 2



- 2-57: *When the most recent assessment used for PPS (excluding an End of Therapy OMRA) has a sufficient level of rehabilitation therapy to qualify for an Ultra High, Very High, High, Medium, or Low Rehabilitation category (even if the final classification index maximizes to a group below Rehabilitation), then a change in the provision of therapy services is evaluated in successive 7-day Change of Therapy observation periods (rolling 7) until a new (Day) assessment used for PPS occurs.*



COT OMRA



- Reimbursable Therapy Minutes (RTM) would need to be evaluated on consecutive 7 day periods
- COT Observation Period
 - Days 1-7 following ARD of any Medicare assessment (scheduled or unscheduled)
 - Days 1-7 starting with resumption of therapy date (00450B) when EOT-R completed

The COT OMRA retroactively establishes a new RUG beginning the day following the ARD or last COT review date of the residents scheduled or unscheduled Medicare PPS assessment





CHAPTER 2 COT

- Must have a RUG before a COT can be done
- Except with the next slide a COT may only be completed when a resident is currently classified into a Rehab therapy RUG regardless of whether or not resident is classified into this group for payment based on the most recent assessment



CHAPTER 2 COT



- COT OMRA may be completed when a resident is not currently classified into a therapy RUG **IF Both** of the following conditions are met
 1. Was classified into a therapy RUG on a prior assessment during the current Med A stay
 2. No discontinuation of therapy services (planned or unplanned occurred between Day 1 of COT that classified resident into non therapy RUG



COT EXAMPLE



- Day 30: RUA
- Day 37 RUA minutes but only **4 distinct days** so does not qualify
- Nursing RUG then for the next 7 days based on what was obtained with the COT
- Day 44 MAY complete a COT OMRA on this date to get back to therapy RUG

*NOTE: Under these circumstances, completing the COT OMRA may be considered optional





COT OMRA EXAMPLE

- ARD of 14 day assessment was day 14, RUG = RVB
- Day 1 for the COT observation period would be day 15
- Provider would be required to review therapy minutes for days 15-21 (7-day COT observation period)
 - If therapy providing RV level, no COT required
 - If higher or lower RUG then COT is required



COT OBSERVATION PERIOD



- If a scheduled or unscheduled PPS assessment is due during the COT observation period, then the COT observation period is reset based on the new ARD

NOVEMBER 2016						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2 Day 1 Resident Admitted	3 Day 2	4 Day 3	5 Day 4
6 Day 5	7 Day 6	8 Day 7	9 Day 8 5-Day Assessment ARD	10 Day 9 Day 1 of COT Observation	11 Day 10 Day 2 COT	12 Day 11 Day 3 COT
13 Day 12 Day 4 COT	14 Day 13 14 day Assessment	15 Day 14 Cot (COT day 1) Observation Period Resets	16 Day 15 Day 2 of COT Observation	17 Day 16 Day 3	18 Day 17 Day 4	19 Day 18 Day 5
20 Day 19 Day 6	21 Day 20 Day 7 (Double check minutes for required COT)	22 Day 21 Day 1-Rolling 7 restarts	23 Day 22	24	25	26

COT OMRA


- If an unscheduled PPS assessment is required during the ARD window of a scheduled PPS assessment and the ARD for the scheduled assessment has not yet been set then they must be combined
- A scheduled PPS assessment cannot occur after an unscheduled assessment in the assessment window; they must be combined with the ARD appropriate to the unscheduled assessment

NOVEMBER 2016						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2 Day 1 Resident Admitted	3 Day 2	4 Day 3	5 Day 4
6 Day 5	7 Day 6	8 Day 7	9 Day 8 5-Day Assessment ARD	10 Day 9 Day 1 of COT Observation	11 Day 10 Day 2 COT	12 Day 11 Day 3 COT
13 Day 12 Day 4 COT	14 Day 13 Day 5 COT	15 Day 14 Day 6 COT	16 Day 15 Day 7 ARD not set so combined on this date	17 Day 16	18 Day 17	19 Day 18
20 Day 19	21 Day 20	22 Day 21	23 Day 22	24	25	26
27	28	29	30			


CHAPTER 2

- Page 2-79 and 2-80: resident takes a Leave of Absence from the SNF
 - For scheduled PPS assessments the Medicare assessment schedule is adjusted to exclude the LOA (Do over day)
 - For unscheduled PPS assessments, the clock keeps on ticking





CHAPTER 2

- 2-80 Scheduling T assessments and LOA's
 - a SNF may use a date outside the SNF Part A Medicare Benefit (i.e., 100 days) as the ARD for an unscheduled PPS assessment, but only in the case where the ARD for the unscheduled assessment falls on a day that is not counted among the beneficiary's 100 days due to a leave of absence (LOA), as defined above, and the resident returns to the facility from the LOA on Medicare Part A.
 - A SNF must use a day that will be reimbursed for the scheduled MDS (Day assessments)
 - Example: The 14 day assessment can not be on a Friday when the resident is not in building at midnight



CHAPTER 2

- 2-80 Scheduling T assessments and LOA's
 - there may be cases in which a SNF plans to combine a scheduled and unscheduled assessment on a given day, but then that day becomes an LOA day for the resident. In such cases, while that day may still be used as the ARD of the unscheduled assessment, this day cannot be used as the ARD of the scheduled assessment.






NOVEMBER 2016						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2 Day 1 Resident Admitted	3 Day 2	4 Day 3	5 Day 4
6 Day 5	7 Day 6	8 Day 7	9 Day 8 5-Day Assessment ARD	10 Day 9 Day 1 of COT Left 8 pm to ER	11 Day 9 (do-over) Day 2 COT Returned at 6pm from OBS	12 Day 10 Day 3 COT
13 Day 11 Day 4 COT	14 Day 12 Day 5 COT	15 Day 13 Day 6 COT	16 Day 14 Day 7 COT 14 Day ARD (may combine)	17 Day 15 Day 1 COT	18 Day 16 Day 2 COT	19 LOA Day 3 COT
20 LOA Day 4 COT	21 Day 17 Day 5 COT	22 Day 18 Day 6 COT	23 Day 19 Day 7 COT	24 Day 20	25 Day 21	26 Day 22
27 Day 23	28 Day 24	29 Day 25	30 Day 26			

NOVEMBER 2016						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2 Day 1 Resident Admitted	3 Day 2	4 Day 3	5 Day 4
6 Day 5	7 Day 6	8 Day 7	9 Day 8 5-Day Assessment ARD	10 Day 9 Day 1 of COT Left 8 pm to ER	11 Day 9 Day 2 COT Returned at 6pm from OBS	12 Day 10 Day 3 COT
13 Day 11 Day 4 COT	14 Day 12 Day 5 COT	15 Day 13 Day 6 COT	16 Day 14 Day 7 COT 14 Day ARD (may combine)	17 Day 15 Day 1 COT	18 Day 16 Day 2 COT	19 Left 6 PM to ER Day 3 COT Discharge...
20 Day 1 Returned 8 PM (Over 24 hours to hosp) Re Entry (MDS schedule restarts)	21 Day 2	22 Day 3	23 Day 4	24 Day 5	25 Day 6	26 Day 7 5 Day MDS ARD
27 Day 8	28 Day 9	29 Day 10	30 Day 11			



CHANGES RESULTING IN A COT

- An increase or decrease in
 - Therapy minutes
 - Days of therapy
 - Number of disciplines
- ADL score changes does not result in a COT
- Must be done if therapy is working with the resident even if not in a therapy RUG





REMEMBER

- If therapy has DECREASED to a lower paying RUG, **substitute the scheduled assessment for the COT** by setting the ARD of the scheduled assessment for a date on or before Day 7 of the COT checkpoint
- Also **open that COT ARD** in the software in case it is required! (More about this later)
- Lower payment postponed until later!





REMEMBER

- If therapy has INCREASED to a higher paying RUG, **combine the COT with the scheduled assessment** in order to obtain the higher paying RUG retroactively to Day 1 of the COT observation period. (Must use day 7 of COT window as ARD!)
- Higher Therapy RUG = More Money sooner!





REMEMBER

- If a new PPS assessment **used for payment** occurs with an ARD set for **on or prior** to the last day of a COT observation period, then a Change of Therapy OMRA is not required for that observation period.
- Remember that COT we opened “just in case”





BE CAREFUL

- If an assessment has an ARD set for on or prior to Day 7 of the COT observation period, **but this assessment is not used for payment**, then completing this assessment does not impact the COT ARD calendar.
- In other words you must go back and complete the COT that you opened.





DOCUMENTATION OF A COT REVIEW

- Each home should determine for itself an appropriate COT evaluation process that may be used to determine if a COT OMRA is necessary
- Some Fiscal Intermediary request written documentation that the COT has been done






COT AND NURSING RUGS

- A COT evaluation is required anytime a resident is receiving therapy services but qualifies for Nursing RUG due to case mix index maximization
- Several Nursing RUGs pay higher than Rehab RUGs. MDS may result in nursing RUG vs. a therapy RUG



COT AND NURSING RUGS EXAMPLE



- 14-day assessment completed w/ ARD of day 13. Resident receiving therapy services at an RMC level. Resident also qualifies for HE1 RUG:
 - RMC CMI = 38
 - HE 1 CMI = 41







COT AND NURSING RUGS EXAMPLE




- COT observation period would be days 14-20
- If on day 20, resident still receiving RM level of therapy. No COT required, since no change in therapy level
- If on day 20, resident now receiving RH level of therapy, COT required since therapy eval changed

- RHC CMI = 48
- HE1 CMI = 41





	<h3>COT/EOT OMRA EXAMPLE 1</h3>
	<ul style="list-style-type: none">■ Scenario■ 30 day Assessment ARD = Day 30 RVB■ Therapy provided days 31-36■ No therapy days 37-39■ Therapy resumes on day 40 at same level of intensity
	

	<h3>COT/EOT ACTION</h3>
	<ul style="list-style-type: none">■ 30 day assessment completed with ARD Day 30■ COT evaluation to be completed on Day 37 (7 days after 30 day ARD)■ COT reviewed, no COT required■ EOT assessment required (ARD Days 37-39)■ Therapy resumed within 5 days, complete EOT-R■ COT observation period resumes on Day 40 (Day therapy resumed)
	


	<h3>ADDITIONAL INFORMATION </h3>
	<ul style="list-style-type: none">■ Part A PPS Discharge cannot be combined with unscheduled PPS assessments (OMRA'S) [Statistics show it is a rare occurrence]■ PPS Discharge may be combined with OBRA and scheduled PPS assessments following the combination rules in Chapter 2. (Combined not substituted, reason won't know if you don't tell it.)
	

MEDICARE SHORT STAY

- Pg 6-21
- Part A stay
- Payment policy only
- To obtain a therapy RUG
- Therapy is prorated based on **average** daily therapy minutes
 - RLx - 15-29 minutes
 - RMx - 30-64 minutes
 - RHx - 65-99 minutes
 - RVx - 100-143 minutes
 - RUx - 144 or > minutes

SHORT STAY LOCATION ON MDS



- Z0100

Z0100: Medicare Part A Billing

A. Medicare Part A HPPS code (RUG group followed by assessment type indicator):



B. RUG version code:

C. Is this a Medicare Short Stay assessment?
 0. No
 1. Yes

Z0150: Medicare Part A Non-Therapy Billing

A. Medicare Part A non-therapy HPPS code (RUG group followed by assessment type indicator):



B. RUG version code:

SHORT STAY REQUIREMENTS

IF THE STARS, MOON AND PLANETS ALIGN... (ALL 8 OF THE BELOW)

1. SOT OMRA (A0310C = **1** or **3**)
2. PPS 5-day assessment (A01310B = **01**)
3. ARD (A2300) SOT OMRA must be day 8 or earlier (A2400B)
4. ARD must be last day of Medicare stay (A2400C)
5. ARD may not be more than 3 days after start of therapy (O0400A5,B5,C5)
6. OT/PT/SLP started during last 4 days
7. At least one therapy (O0400A6, O0400B6, O0400C6) continued through last day of Part A stay (dash or ARD = EOT date)
8. RUG must be Rehab + ES or Rehab group (Z0100A)

SHORT STAY EXAMPLE 1

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Medicare Start date						Medicare End Date
			Therapy Eval	Therapy Tx 40 minutes	Therapy Tx 45 minutes	Therapy Tx 40 minutes

Does this resident meet short stay policy requirements??

SHORT STAY EXAMPLE 1

1. SOT OMRA **Yes**
2. PPS 5-day assessment **Yes**
3. ARD SOT OMRA must be day 8 or earlier **Yes**
4. ARD must be last day of Medicare stay **Yes**
5. ARD may not be more than 3 days after start of therapy **Yes**
6. OT/PT/SLP started during last 4 days **Yes**
7. At least one therapy continued through last day of Part A stay (dash or ARD = EOT date) **Yes**
8. RUG must be Rehab + ES or Rehab group **Yes**
RUG for days 4-7 RM



SHORT STAY EXAMPLE 2

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Medicare Start date						Medicare End Date
		Therapy Eval	No Therapy	Therapy Tx 40 minutes	Therapy Tx 45 minutes	Therapy Tx 40 minutes

Does this resident meet short stay policy requirements??

SHORT STAY EXAMPLE 2



1. SOT OMRA **Yes**
2. PPS 5-day assessment **Yes**
3. ARD may not be more than 3 days after start of therapy **NO**
4. ARD SOT OMRA must be day 8 or earlier **Yes**
5. ARD must be last day of Medicare stay **Yes**
6. OT/PT/SLP started during last 4 days **NO**
7. At least one therapy continued through last day of Part A stay (dash or ARD = EOT date)
8. RUG must be Rehab + ES or Rehab group

SHORT STAY EXAMPLE 3



Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Medicare Start date						Medicare End Date
			Therapy Eval 20 min	No Therapy	Therapy Tx 30 minutes	Therapy Tx 30 minutes

Diagnosis: COPD, SOB while lying flat, sitting at rest and upon exertion. Daily treatments, daily O2, PHQ 9 score of 18, ADL score 15



SHORT STAY EXAMPLE 3

- Qualifies for a short stay **BUT**
- What RUG assignments does he qualify for?

SHORT STAY EXAMPLE 3




- Therapy RLB (37)
 - 20+30+30/4=20 minutes prorated
- Nursing HE 2 CE2
 - COPD with SOB lying flat special care high (50)
 - Respiratory therapy special care high (50)
 - Daily O2 clinically complex (38)
- In this case, the Nursing Rug pays the higher RUG. Do 5 day assessment without short stay



QUESTIONS?

- Thank you for your time!
- Feel free to contact with any questions:

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REFERENCES

<https://downloads.cms.gov/files/MDS-30-RAI-Manual-V114-October-2016.pdf>

