Common Acronyms

Acronym	Definition
ADLs	Activities of Daily Living
ADR	Adverse Drug Reaction
AHEs	Average Hourly Earnings
ARD	Assessment Reference Date
ASAP	Assessment Submission and Processing System
BBA-97	Balanced Budget Act of 1997
BBRA	Medicare, Medicaid, and SCHIP Balanced Budget Refinement Act of 1999
BEA	(U.S) Bureau of Economic Analysis
BIMS	Brief Interview for Mental Status
BIPA	Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act (BIPA) of 2000
BLS	(U.S.) Bureau of Labor Statistics
BMI	Body mass index
CAA	Care Area Assessment
CAH	Critical Access Hospital
CAM	Confusion Assessment Method
CAT	Care Area Trigger
CBSA	Core-Based Statistical Area
CFR	Code of Federal Regulations
CLIA	Clinical Laboratory Improvements Amendments (1998)
CMI	Case Mix Index
CMS	Centers for Medicare and Medicaid Services
CNN	CMS Certification Number
COTA	Certified Occupational Therapist Assistant
CPI	Consumer Price Index
CPI-U	Consumer Price Index for All Urban Consumers
CPS	Cognitive Performance Scale (MDS)
CPT	(Physicians) Current Procedural Terminology
CR	Change Request
CWF	Common Working File
DME	Durable Medical Equipment
DMERC	Durable Medical Equipment Regional Carrier
DOS	Dates of Service
ECI	Employment Cost Index
ESRD	End Stage Renal Disease

Acronym	Definition
FAC_ID	Facility ID (for MDS submission)
FI	Fiscal Intermediary
FMR	Focused Medical Review
FR	Final Rule
FVR	Final Validation Report (MDS submission)
FY	Fiscal Year
HCPCS	Healthcare Common Procedure Coding System
HIPAA	Health Insurance Portability and Accountability Act of 1996
HIPPS	Health Insurance PPS (Rate Codes)
ICD	International Classification of Diseases
ICD-CM	International Classification of Diseases, Clinical Modification
IFC	Interim Final Rule with Comment
IOM	Internet-Only Manual
IPA	*Interim Payment Assessment*
ISC	Item Set Code
jRAVEN	Java-Based Resident Assessment Validation and Entry System
LOA	Leave of Absence
MAC	Medicare Administrative Contractor
MDCN	Medicare Data Communications Network
MDS	Minimum Data Set
MEDPAR	Medicare Provider Analysis and Review (File)
MIM	Medicare Intermediary Manual
MRI	Magnetic Resonance Imaging
NCS	National Supplier Clearinghouse
NDC	National Drug Code
NDM	Network Data Mover
NF	Nursing Facility
NPI	National Provider Identifier
NSC	National Supplier Clearinghouse
NTA	*Non-Therapy Ancillary*
OBRA	Omnibus Budget Reconciliation Act of 1987
OMB	Office of Management and Budget
OMRA	Other Medicare-required Assessment
OSA	*Optional State Assessment*
OT	Occupational Therapy/Therapist
PCE	Personal Care Expenditures

Acronym	Definition
PDPM	*Patient Driven Payment Model*
PHQ-9©	Patient Health Questionnaire 9-Item
PHQ-9-OV©	*PHQ-9© Observational Version*
PIM	Program Integrity Manual
POS	Point of Service
PPI	Producer Price Index
PPS	Prospective Payment System
PRM	Provider Reimbursement Manual
PT	Physical Therapy/Therapist
PTA	Physical Therapist Assistant
Pub.100-1	Medicare General Information, Eligibility, and Entitlement IOM
Pub.100-2	Medicare Benefit IOM
Pub.100-4	Medicare Claims Processing IOM
Pub.100-7	Medicare State Operation IOM
Pub.100-8	Medicare Program Integrity IOM
Pub.100-12	State Medicaid IOM
PVS	Persistent Vegetative State
QI	Quality Indicator
QM	Quality Measure
QIES	Quality Improvement and Evaluation System
QIO	Quality Improvement Organization
RAI	Resident Assessment Instrument
RNAC	Registered Nurse Assessment Coordinator
RUG	Resource Utilization Group
SB-PPS	Swing Bed Prospective Payment System
SCSA	Significant Change in Status Assessment
SNF	Skilled Nursing Facility
SNF PPS	Skilled Nursing Facility Prospective Payment System
SNF QRP	*Skilled Nursing Facility Quality Reporting Program*
SLP (or ST)	Speech Language Pathology Services
SOM	State Operations Manual
SOR	Systems of Records
SSN	*Social Security Number*
STM	Staff Time Measure
SUB_REQ	Submission Requirement
TPN	*Total Parenteral Nutrition*

RAI OBRA-required Assessment Summary

Assessment Type/Item Set	MDS Assessment Code (A0310A or A0310F)	Assessment Reference Date (ARD) (Item A2300) No Later Than	7-day Observation Period (Look Back) Consists Of	14-day Observation Period (Look Back) Consists Of	MDS Completion Date (Item Z0500B) No Later Than	CAA(s) Completion Date (Item V0200B2) No Later Than	Care Plan Completion Date (Item V0200C2) No Later Than	Transmission Date No Later Than	Regulatory Requirement	Assessment Combination
Admission (Comprehensive)	A0310A = 01	14th calendar day of the resident's admission (admission date + 13 calendar days)	ARD + 6 previous calendar days	ARD + 13 previous calendar days	14th calendar day of the resident's admission (admission date + 13 calendar days)	14th calendar day of the resident's admission (admission date + 13 calendar days)	CAA(s) Completion Date + 7 calendar days	Care Plan Completion Date + 14 calendar days	42 CFR 483.20 (Initial) 42 CFR 483.20 (b)(2)(i) (by the 14th day)	May be combined with any OBRA assessment; 5-Day or Part A PPS Discharge Assessment
Annual (Comprehensive)	A0310A = 03	ARD of previous OBRA comprehensive assessment + 366 calendar days **AND** ARD of previous OBRA Quarterly assessment + 92 calendar days	ARD + 6 previous calendar days	ARD +13 previous calendar days	ARD + 14 calendar days	ARD + 14 calendar days	CAA(s) Completion Date + 7 calendar days	Care Plan Completion Date + 14 calendar days	42 CFR 483.20 (b)(2)(iii) (every 12 months)	May be combined with any OBRA or 5-Day or Part A PPS Discharge Assessment
Significant Change in Status (SCSA) (Comprehensive)	A0310A = 04	14th calendar day after determination that significant change in resident's status occurred (determination date + 14 calendar days)	ARD + 6 previous calendar days	ARD + 13 previous calendar days	14th calendar day after determination that significant change in resident's status occurred (determination date + 14 calendar days)	14th calendar day after determination that significant change in resident's status occurred (determination date + 14 calendar days)	CAA(s) Completion Date + 7 calendar days	Care Plan Completion Date + 14 calendar days	42 CFR 483.20 (b)(2)(ii) (within 14 days)	May be combined with any OBRA or 5-Day or Part A PPS Discharge Assessment

(continued)

RAI OBRA-required Assessment Summary (cont.)

Assessment Type/Item Set	MDS Assessment Code (A0310A or A0310F)	Assessment Reference Date (ARD) (Item A2300) No Later Than	7-day Observation Period (Look Back) Consists Of	14-day Observation Period (Look Back) Consists Of	MDS Completion Date (Item Z0500B) No Later Than	CAA(s) Completion Date (Item V0200B2) No Later Than	Care Plan Completion Date (Item V0200C2) No Later Than	Transmission Date No Later Than	Regulatory Requirement	Assessment Combination
Significant Correction to Prior Comprehensive (SCPA) (Comprehensive)	A0310A = 05	14th calendar day after determination that significant error in prior comprehensive assessment occurred (determination date + 14 calendar days)	ARD + 6 previous calendar days	ARD + 13 previous calendar days	14th calendar day after determination that significant error in prior comprehensive assessment occurred (determination date + 14 calendar days)	14th calendar day after determination that significant error in prior comprehensive assessment occurred (determination date + 14 calendar days)	CAA(s) Completion Date + 7 calendar days	Care Plan Completion Date + 14 calendar days	42 CFR 483.20(f) (3)(iv)	May be combined with any OBRA or 5-Day or Part A PPS Discharge Assessment
Quarterly (Non-Comprehensive)	A0310A = 02	ARD of previous OBRA assessment of any type + 92 calendar days	ARD + 6 previous calendar days	ARD + 13 previous calendar days	ARD + 14 calendar days	N/A	N/A	MDS Completion Date + 14 calendar days	42 CFR 483.20(c) (every 3 months)	May be combined with any OBRA or 5-Day or Part A PPS Discharge Assessment
Significant Correction to Prior Quarterly (SCQA) (Non-Comprehensive)	A0310A = 06	14th day after determination that significant error in prior quarterly assessment occurred (determination date + 14 calendar days)	ARD + 6 previous calendar days	ARD + 13 previous calendar days	14th day after determination that significant error in prior quarterly assessment occurred (determination date + 14 calendar days)	N/A	N/A	MDS Completion Date + 14 calendar days	42 CFR 483.20(f) (3)(v)	May be combined with any OBRA or 5-Day or Part A PPS Discharge Assessment
Discharge Assessment – return not anticipated (Non-Comprehensive)	A0310F = 10	N/A	N/A	N/A	Discharge Date + 14 calendar days	N/A	N/A	MDS Completion Date + 14 calendar days		May be combined with any OBRA or 5-Day or Part A PPS Discharge Assessment

(continued)

RAI OBRA-required Assessment Summary (cont.)

Assessment Type/Item Set	MDS Assessment Code (A0310A or A0310F)	Assessment Reference Date (ARD) (Item A2300) No Later Than	7-day Observation Period (Look Back) Consists Of	14-day Observation Period (Look Back) Consists Of	MDS Completion Date (Item Z0500B) No Later Than	CAA(s) Completion Date (Item V0200B2) No Later Than	Care Plan Completion Date (Item V0200C2) No Later Than	Transmission Date No Later Than	Regulatory Requirement	Assessment Combination
Discharge Assessment – return anticipated (Non-Comprehensive)	A0310F = 11	N/A	N/A	N/A	Discharge Date + 14 calendar days	N/A	N/A	MDS Completion Date + 14 calendar days		May be combined with any OBRA or 5-Day or Part A PPS Discharge Assessment
Entry tracking record	A0310F = 01	N/A	N/A	N/A	Entry Date + 7 calendar days			Entry Date + 14 calendar days		May not be combined with another assessment
Death in facility tracking record	A0310F = 12	N/A	N/A	N/A	Discharge (death) Date + 7 calendar days	N/A	N/A	Discharge (death) Date +14 calendar days		May not be combined with another assessment

PPS Assessments, Tracking Records, and Discharge Assessment Reporting Schedule for SNFs and Swing Bed Facilities

Assessment Type/ Item Set for PPS	Assessment Reference Date (ARD) Can be Set on Any of Following Days	Billing Cycle Used by the Business Office	Special Comment
5-Day A0310B = 01	Days 1-8	Sets payment rate for the entire stay (unless an IPA is completed. See below.)	• See Section 2.12 for instructions involving beneficiaries who transfer or expire day 8 or earlier. • CAAs must be completed only if the 5-Day assessment is dually coded as an OBRA Admission, Annual, SCSA or SCPA.
Interim Payment Assessment (IPA) A0310B = 08	Optional	Sets payment for remainder of the stay beginning on the ARD.	• Optional assessment. • Does not reset variable per diem adjustment schedule. • May not be combined with another assessment.
Part A PPS Discharge Assessment A0310H = 1	End date of most recent Medicare Stay (A2400C)	N/A	• Completed when the resident's Medicare Part A stay ends, but the resident remains in the facility, or can be combined with an OBRA Discharge assessment if the Part A stay ends on the same day or the day before the resident's Discharge Date (A2000).

MDS 3.0 RESOURCES

QTSO MDS 3.0 – https://qtso.cms.gov/index.php

- Click on MDS 3.0 on left side of this page for:
  - MDS 3.0 RAI Manual
  - MDS 3.0 Quality Measures and User's Manual MDS
  - 3.0 Training Materials

The MDS 3.0 Provider User's Guide –

Section Five: Interpret error messages from the CMS Final Validation Report.
https://qtso.cms.gov/mdstrain.html

CMS Skilled Nursing Facility PPS:

FY 2012 RUG-IV Education & Training (http://www.cms.gov/Medicare/Medicare-Fee-for- Service-Payment/SNFPPS/RUGIVEdu12.html)

The Skilled Nursing Facilities / Long-Term Care Open Door Forum (ODF)

Addresses concerns and issues of the nursing home industry.
Skilled Nursing Facilities/Long-Term Care Open Door Forum (http://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/ODF_SNFLTC.html)

Medicare Learning Network (MLN):

https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/Index.html

CMS Email Updates

https://public.govdelivery.com/accounts/USCMS/subscriber/new?pop=t&topic_id=USCMS_515

CMS YouTube Videos

Section O (http://www.youtube.com/watch?v=J6lR7Y3M0yM&feature=youtu.be)
Section G (http://www.youtube.com/watch?v=t-6e5NV4j6k&feature=youtu.be)
Section M (http://www.youtube.com/watch?v=Ix6qoV0If0Y&feature=youtu.be)
Section I (http://www.youtube.com/watch?v=sZLjJMntcPQ&feature=youtu.be)

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MDS Resources Continued

Oklahoma State Department of Health
Quality Improvement and Evaluation Service (QIES) Help Desk: 405-426-8160
http://mds.health.ok.gov

State RAI & Automation Coordinator for training and questions related to:
MDS, Quality Measures & Initiatives, Submission/Corrections, CASPER Reports

Long-Term Care Survey Division: 405-426-8200

Regulatory and Survey questions

MDS 3.0 Section GG, Functional Abilities and Goals: GG0130 Self Care and GG0170 Mobility

Part One: https://www.youtube.com/watch?v=pNgQ3OSaxYg

Part Two: https://www.youtube.com/watch?v=M1JdQxjNOqE

Part Three: https://www.youtube.com/watch?v=ok3U2-mQymk

Part Four: https://www.youtube.com/watch?v=oRmMT_uYS8Y

CMS SNF Quality Reporting Program Training Page

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/
NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-
Quality-Reporting-Program-Training

CMS YouTube Training Videos- SNF QRP and MDS related trainings

https://www.bing.com/videos/search?q=SNF+QRP+PRogram+and+Training&&view=detail&mid

CMS Video- Review and Correct Reports Provider Training

https://www.youtube.com/watch?v=hG_Ks0pX3ao

CMS Video- SNF Review and Correct Reports Refresher Webinar
https://www.youtube.com/watch?v=kgs6Ho0CVkg

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