PROVIDER BULLETIN NO. 10-09

Date: March 18, 2010

TO: Medicaid Providers of Nursing Facility Services

FROM: Vivianne M. Chaumont, Director
Division of Medicaid & Long-Term Care

BY: Joette Novak, Program Specialist

RE: Nebraska Medicaid Casemix MDS RUG-III Grouper Upgrade

A copy of this Provider Bulletin and the attachments will also be e-mailed to your Minimum Data Set (MDS) software vendor.

Effective July 1, 2010, the Department of Health and Human Services (DHHS) will be upgrading to the current version of the RUG-III grouper, as it will be the only version supported by the Centers for Medicare and Medicaid Services (CMS) following the conversion from MDS 2.0 to MDS 3.0 on October 1, 2010.

The MDS RUG-III grouper is used by casemix states, like Nebraska, to determine a nursing facility resident's level of care. These levels are then weighted based on acuity, for the purposes of determining Medicaid reimbursement rates.

Nebraska Medicaid will be converting to the RUG-III 5.20 34 grouper, which will consist of 34 levels of care, with an additional default level of care for short-term stays. This grouper will be used to process the current MDS 2.0 assessments and the new MDS 3.0 assessments, using the Index Maximizing method of calculation.

The attached documents provide additional information on specific MDS 2.0-related items.

Once CMS has finalized the pending MDS 3.0 items, including the fields to be included in Section S, Nebraska Medicaid will issue a MDS 3.0-related Provider Bulletin.

For questions about this Provider Bulletin or the RUG-III 5.20 grouper, please contact Joette Novak at joette.novak@nebraska.gov or (402) 471-9279.

Nebraska Medicaid Casemix Upgrade to RUG-III 5.20 34-Grouper with Index Maximizing

For additional information on the RUG-III 5.20 grouper, including the technical specifications, visit the Center for Medicare and Medicaid Services (CMS) website:
http://www.cms.hhs.gov/MDS20SWSpecs

Minimum Data Set (MDS) 2.0 Assessment
Effective July 1, 2010

Section S (state-specific items):

- Item S6 (foot soaks) and Item S7 (physician orders) will not be included in Nebraska Medicaid casemix calculations.
- Item S2 (resident identifier) is a required field for any individual who does not have a social security number.

Sections T and U:

- Not required by Nebraska Medicaid.

Required for Nebraska Medicaid Acceptance of MDS Record:

- Section S must be completed for all MDS assessments and tracking forms.
- Only one admission assessment will be processed. Duplicate admission assessments with the same or different admission dates will receive a "repeat admissions assessment" warning on the validation report and will not be accepted.
- The Date of Entry (AB1) must be on or before the Date Background Information Completed (AB11).
- The only MDS records that will be processed are for individuals residing in certified beds (the SUB_REQ = '3'). Nebraska Medicaid does not have authority to collect data on individuals in non-certified beds.
- Only the following MDS Quarterly Assessment Forms will be accepted:
  1. *MDS Full Assessment Form*, indicated as a 'quarterly' on the *Basic Assessment Tracking Form*, Section AA Question 8 (*Reasons for Assessment*) choose 'quarterly review assessment' (a 5) and 'other state-required assessment' (b 6); or
  2. *MDS Quarterly Assessment Form (Optional Version for RUG-III **1997 Update**)*; or
  3. *MDS Quarterly Assessment Form (Optional Version for RUG III **1997 Update**)* combined with a *MDS Medicare PPS Assessment Form* (MPAF).
- Earlier versions [i.e. *MDS Quarterly Assessment Form (Optional Version for RUG III)* or *MDS Quarterly Assessment Form*] will not be accepted.

Nebraska Medicaid RUG-III 5.20 34 Grouper Levels of Care and Index Values

Level of Care	Case Mix Index Code	Case Mix Index Value
Rehabilitation		
163	RAD	1.66
162	RAC	1.31
161	RAB	1.24
160	RAA	1.07
Extensive Services		
172	SE3	2.10
171	SE2	1.79
170	SE1	1.54
Special Care		
152	SSC	1.44
151	SSB	1.33
150	SSA	1.28
Clinically Complex		
145	CC2	1.42
144	CC1	1.25
143	CB2	1.15
142	CB1	1.07
141	CA2	1.06
140	CA1	0.95
Impaired Cognition		
133	IB2	0.88
132	IB1	0.85
131	IA2	0.72
130	IA1	0.67
Behavior Problems		
123	BB2	0.86
122	BB1	0.82
121	BA2	0.71
120	BA1	0.60
Reduced Physical Function		
115	PE2	1.00
114	PE1	0.97
113	PD2	0.91
112	PD1	0.89
111	PC2	0.83
110	PC1	0.81
104	PB2	0.65
103	PB1	0.63
102	PA2	0.62
101	PA1	0.59
Discharge prior to initial assessment		
180	STS	0.59