



SNF Virtual Training Program – Part 2

Social Determinants of Health and New Data Elements in Section A Workshop

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Overview

For this coding workshop, we will focus on the new Social Determinants of Health (SDOH) and new Section A non-SDOH data elements in the MDS 3.0 v1.18.11:

- A1005. Ethnicity.
- A1010. Race.
- A1250. Transportation.
- B1300. Health Literacy.
- D0700. Social Isolation.
- A2121–A2124: Provision and Route of Reconciled Medication List to Subsequent Provider and to Resident at Discharge.



SDOH Data Elements

A1005

Ethnicity

A1005. Ethnicity

A1005. Ethnicity

Are you of Hispanic, Latino/a, or Spanish origin?

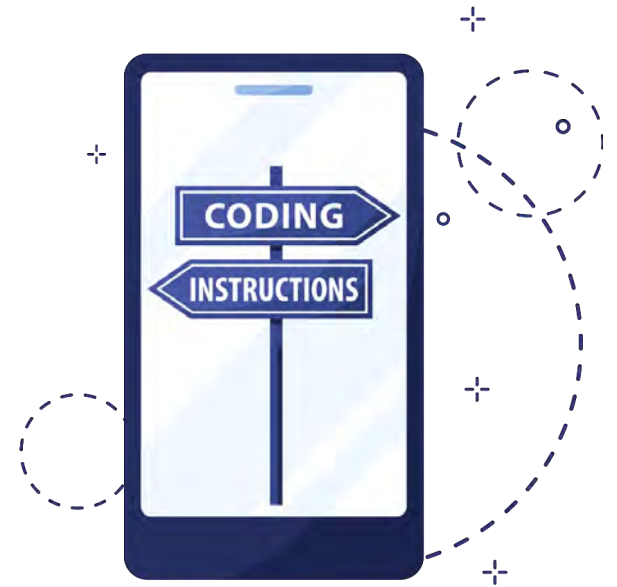
↓ Check all that apply

- | | |
|--------------------------|-------------------------------------------------------|
| <input type="checkbox"/> | A. No, not of Hispanic, Latino/a, or Spanish origin |
| <input type="checkbox"/> | B. Yes, Mexican, Mexican American, Chicano/a |
| <input type="checkbox"/> | C. Yes, Puerto Rican |
| <input type="checkbox"/> | D. Yes, Cuban |
| <input type="checkbox"/> | E. Yes, another Hispanic, Latino/a, or Spanish origin |
| <input type="checkbox"/> | X. Resident unable to respond |
| <input type="checkbox"/> | Y. Resident declines to respond |

A1005: Coding Instructions

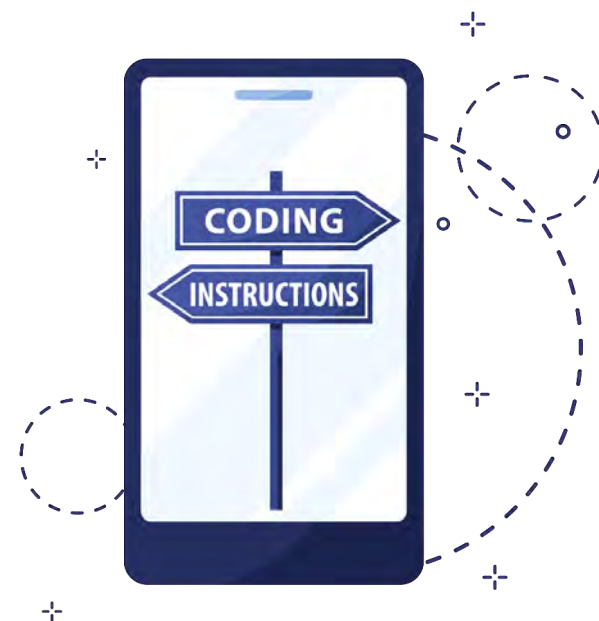
If the resident provides a response, check the box(es) indicating the ethnic category or categories identified by the resident.

- **Code X, Resident unable to respond:** if the resident is unable to respond.
 - In the cases where the resident is unable to respond and the response is determined via family, significant other, or legally authorized representative input, or medical records, check all boxes that apply, including **X. Resident unable to respond**.
 - If the resident is unable to respond and no other resources (family, significant other, or legally authorized representative or medical records) provided the necessary information, code as **X. Resident unable to respond**.



A1005: Coding Instructions (cont.)

- **Code Y, Resident declines to respond:** if the resident declines to respond.
 - When the resident declines to respond, code only **Y. Resident declines to respond.**
 - When the resident declines to respond do not code based on other resources (family, significant other, or legally authorized representative or medical records).



A1005: Practice Scenario 1

A resident was confused and unable to answer the question related to whether they are of Hispanic, Latino, or Spanish origin.

The resident's daughter stated that the resident was born in Brazil and has never considered themselves as of Hispanic, Latino, or Spanish origin.



How would you code A1005. Ethnicity?

A1005. Ethnicity	
Are you of Hispanic, Latino/a, or Spanish origin?	
↓	Check all that apply
<input type="checkbox"/>	A. No, not of Hispanic, Latino/a, or Spanish origin
<input type="checkbox"/>	B. Yes, Mexican, Mexican American, Chicano/a
<input type="checkbox"/>	C. Yes, Puerto Rican
<input type="checkbox"/>	D. Yes, Cuban
<input type="checkbox"/>	E. Yes, another Hispanic, Latino/a, or Spanish origin
<input type="checkbox"/>	X. Resident unable to respond
<input type="checkbox"/>	Y. Resident declines to respond



How would you code A1005. Ethnicity?

A1005. Ethnicity
Are you of Hispanic, Latino/a, or Spanish origin?

↓

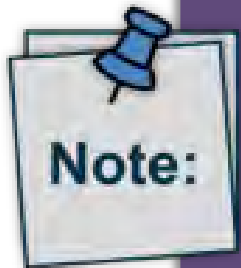
Check all that apply

<input checked="" type="checkbox"/>	A. No, not of Hispanic, Latino/a, or Spanish origin
<input type="checkbox"/>	B. Yes, Mexican, Mexican American, Chicano/a
<input type="checkbox"/>	C. Yes, Puerto Rican
<input type="checkbox"/>	D. Yes, Cuban
<input type="checkbox"/>	E. Yes, another Hispanic, Latino/a, or Spanish origin
<input checked="" type="checkbox"/>	X. Resident unable to respond
<input type="checkbox"/>	Y. Resident declines to respond



A1005: Practice Scenario 1 – Rationale

Rationale: The resident was confused and unable to answer this question. The resident's daughter was available and provided information about the resident's ethnic origin as their proxy. The assessor was able to document that the resident was not of Hispanic, Latino/a, or Spanish origin.



In the cases where the resident is unable to respond and the response is determined via family, significant other, or legally authorized representative input, or medical record documentation, check all boxes that apply, including **X. Resident unable to respond.**

A1005: Practice Scenario 2

A resident was just admitted to the facility, and during their Admission assessment, when asked if they were of Hispanic, Latino/a or Spanish origin, they declined to respond to the question of ethnic origin.

To reassure the resident, the assessor stated that they asked this question so that the treatment the resident receives is of the highest quality of care regardless of their ethnic background.

The resident still declined to answer the question.



How would you code A1005. Ethnicity?

A1005. Ethnicity	
Are you of Hispanic, Latino/a, or Spanish origin?	
↓	Check all that apply
<input type="checkbox"/>	A. No, not of Hispanic, Latino/a, or Spanish origin
<input type="checkbox"/>	B. Yes, Mexican, Mexican American, Chicano/a
<input type="checkbox"/>	C. Yes, Puerto Rican
<input type="checkbox"/>	D. Yes, Cuban
<input type="checkbox"/>	E. Yes, another Hispanic, Latino/a, or Spanish origin
<input type="checkbox"/>	X. Resident unable to respond
<input type="checkbox"/>	Y. Resident declines to respond



How would you code A1005. Ethnicity?

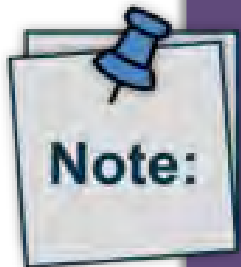
A1005. Ethnicity
Are you of Hispanic, Latino/a, or Spanish origin?
↓ **Check all that apply**

<input type="checkbox"/>	A. No, not of Hispanic, Latino/a, or Spanish origin
<input type="checkbox"/>	B. Yes, Mexican, Mexican American, Chicano/a
<input type="checkbox"/>	C. Yes, Puerto Rican
<input type="checkbox"/>	D. Yes, Cuban
<input type="checkbox"/>	E. Yes, another Hispanic, Latino/a, or Spanish origin
<input type="checkbox"/>	X. Resident unable to respond
<input checked="" type="checkbox"/>	Y. Resident declines to respond



A1005: Practice Scenario 2 – Rationale

Rationale: The resident declined to answer this question despite reassurance from the assessor that the question was being asked to ensure that the resident receives the highest quality of care regardless of their ethnic background.



When the resident declines to respond, code only **Y. Resident declines to respond**. When the resident declines to respond do not code based on other resources (family, significant other, or legally authorized representative, or medical records).

A1010

Race

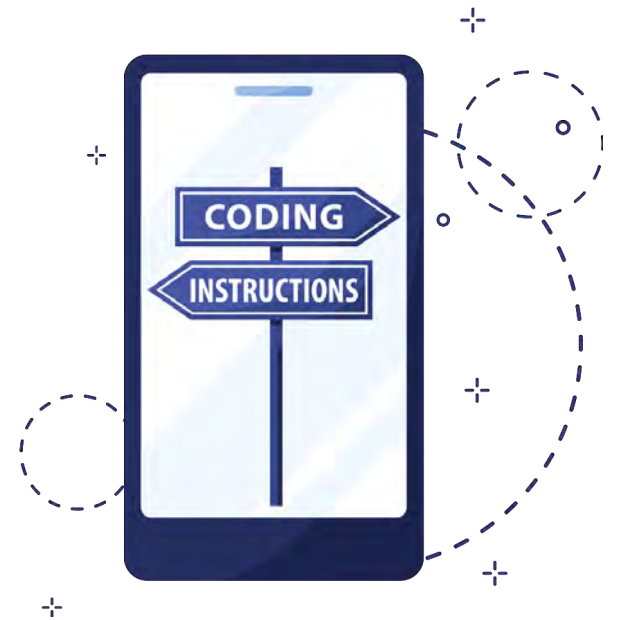
A1010. Race

A1010. Race	
What is your race?	
↓	Check all that apply
<input type="checkbox"/>	A. White
<input type="checkbox"/>	B. Black or African American
<input type="checkbox"/>	C. American Indian or Alaska Native
<input type="checkbox"/>	D. Asian Indian
<input type="checkbox"/>	E. Chinese
<input type="checkbox"/>	F. Filipino
<input type="checkbox"/>	G. Japanese
<input type="checkbox"/>	H. Korean
<input type="checkbox"/>	I. Vietnamese
<input type="checkbox"/>	J. Other Asian
<input type="checkbox"/>	K. Native Hawaiian
<input type="checkbox"/>	L. Guamanian or Chamorro
<input type="checkbox"/>	M. Samoan
<input type="checkbox"/>	N. Other Pacific Islander
<input type="checkbox"/>	X. Resident unable to respond
<input type="checkbox"/>	Y. Resident declines to respond
<input type="checkbox"/>	Z. None of the above

A1010: Coding Instructions

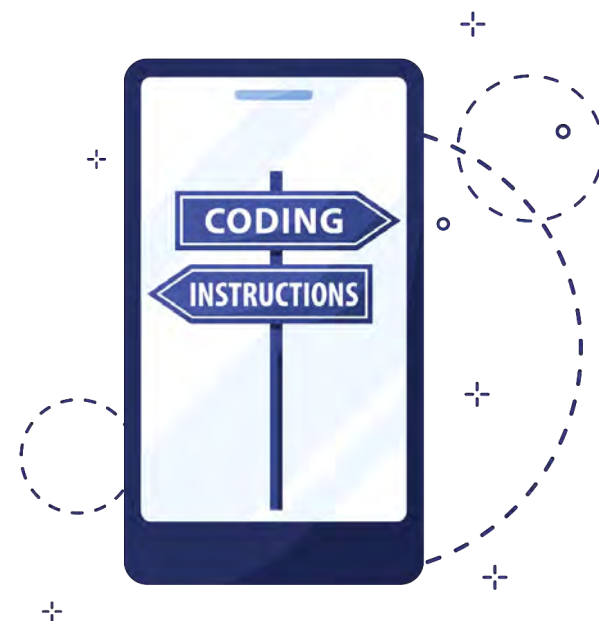
If the resident provides a response, check the box(es) indicating the race category or categories identified by the resident.

- **Code X, Resident unable to respond:** if the resident is unable to respond.
 - In the cases where the resident is unable to respond and the response is determined via family, significant other, or legally authorized representative input, or medical records, check all boxes that apply, including **X. Resident unable to respond**.
 - If the resident is unable to respond and no other resources (family, significant other, or legally authorized representative or medical records) provided the necessary information, code as **X. Resident unable to respond**.



A1010: Coding Instructions (cont.)

- **Code Y, Resident declines to respond:** if the resident declines to respond.
 - When the resident declines to respond, code only **Y. Resident declines to respond.**
 - When the resident declines to respond do not code based on other resources (family, significant other, or legally authorized representative or medical records).
- **Code Z, None of the above:** if the resident reports or it is determined from other resources (family, significant other, or legally authorized representative or medical records) that none of the listed races apply.



A1010: Practice Scenario 3



A resident was just admitted to the facility. Because they are in the late stages of dementia, their daughter assisted with answering some of the assessment information. The resident's daughter stated that their father is African American.

Q₃

How
would you
code
A1010.
Race?

A1010. Race	
What is your race?	
↓	Check all that apply
<input type="checkbox"/>	A. White
<input type="checkbox"/>	B. Black or African American
<input type="checkbox"/>	C. American Indian or Alaska Native
<input type="checkbox"/>	D. Asian Indian
<input type="checkbox"/>	E. Chinese
<input type="checkbox"/>	F. Filipino
<input type="checkbox"/>	G. Japanese
<input type="checkbox"/>	H. Korean
<input type="checkbox"/>	I. Vietnamese
<input type="checkbox"/>	J. Other Asian
<input type="checkbox"/>	K. Native Hawaiian
<input type="checkbox"/>	L. Guamanian or Chamorro
<input type="checkbox"/>	M. Samoan
<input type="checkbox"/>	N. Other Pacific Islander
<input type="checkbox"/>	X. Resident unable to respond
<input type="checkbox"/>	Y. Resident declines to respond
<input type="checkbox"/>	Z. None of the above

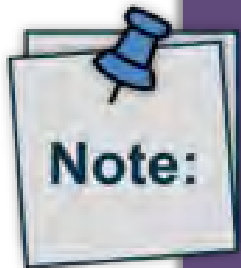
Q₃

How
would you
code
A1010.
Race?

A1010. Race	
What is your race?	
↓	Check all that apply
<input type="checkbox"/>	A. White
<input checked="" type="checkbox"/>	B. Black or African American
<input type="checkbox"/>	C. American Indian or Alaska Native
<input type="checkbox"/>	D. Asian Indian
<input type="checkbox"/>	E. Chinese
<input type="checkbox"/>	F. Filipino
<input type="checkbox"/>	G. Japanese
<input type="checkbox"/>	H. Korean
<input type="checkbox"/>	I. Vietnamese
<input type="checkbox"/>	J. Other Asian
<input type="checkbox"/>	K. Native Hawaiian
<input type="checkbox"/>	L. Guamanian or Chamorro
<input type="checkbox"/>	M. Samoan
<input type="checkbox"/>	N. Other Pacific Islander
<input checked="" type="checkbox"/>	X. Resident unable to respond
<input type="checkbox"/>	Y. Resident declines to respond
<input type="checkbox"/>	Z. None of the above

A1010: Practice Scenario 3 – Rationale

Rationale: The resident was unable to respond accurately due to late-stage dementia, but the resident's daughter was able to provide the information that their father is African American.



If the resident is unable to respond and the response is determined via family, significant other, or legally authorized representative input, or medical records, check all boxes that apply, including **X**.
Resident unable to respond.

A1250

Transportation

A1250. Transportation

A1250. Transportation (from NACHC®)

Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?

Complete only if A0310B = 01 **or** A0310G = 1 and A0310H = 1

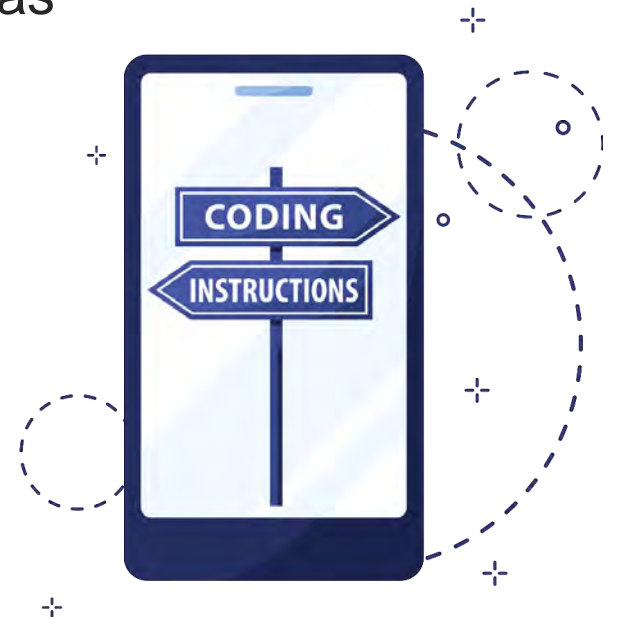
↓ Check all that apply

- | | |
|--------------------------|----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | A. Yes, it has kept me from medical appointments or from getting my medications |
| <input type="checkbox"/> | B. Yes, it has kept me from non-medical meetings, appointments, work, or from getting things that I need |
| <input type="checkbox"/> | C. No |
| <input type="checkbox"/> | X. Resident unable to respond |
| <input type="checkbox"/> | Y. Resident declines to respond |

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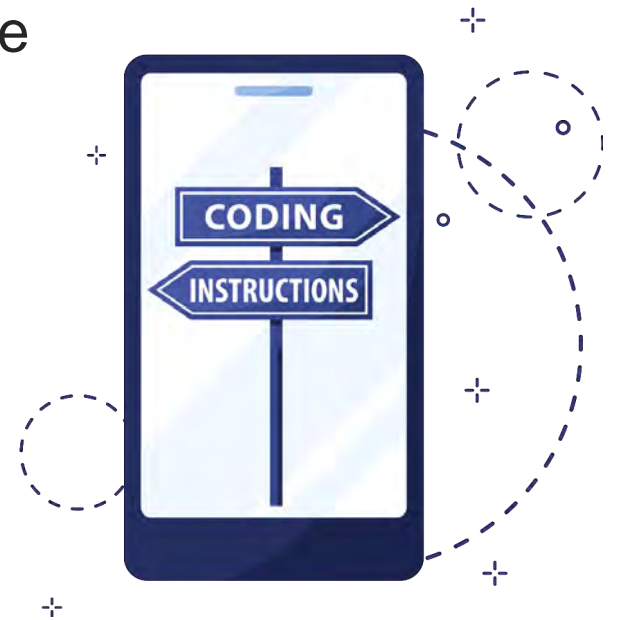
A1250: Coding Instructions

- **Code A, Yes, it has kept me from medical appointments or from getting my medications:** if the resident indicates that lack of transportation has kept the resident from medical appointments or from getting medications.
- **Code B, Yes, it has kept me from non-medical meetings, appointments, work, or from getting things that I need:** if the resident indicates that lack of transportation has kept the resident from non-medical meetings, appointments, work, or from getting things that the resident needs.
- **Code C, No:** if the resident indicates that a lack of transportation has not kept the resident from medical appointments, getting medications, non-medical meetings, appointments, work, or getting things that the resident needs.



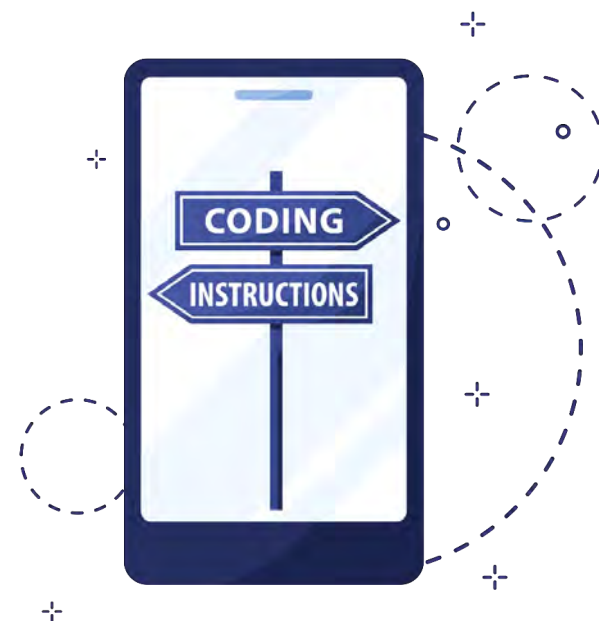
A1250: Coding Instructions (cont. 1)

- **Code X, Resident unable to respond:** If the resident is unable to respond.
 - In the cases where the resident is unable to respond and the response is determined via family, significant other, or legally authorized representative input, or medical records, check all boxes that apply, including **X. Resident unable to respond**.
 - If the resident is unable to respond and no other resources (family, significant other, or legally authorized representative or medical records) provided the necessary information, code A1250 as only **X. Resident unable to respond**.



A1250: Coding Instructions (cont. 2)

- **Code Y, Resident declines to respond:** if the resident declines to respond.
 - When the resident declines to respond, code only **Y. Resident declines to respond.**
 - When the resident declines to respond do not code based on other resources (family, significant other, or legally authorized representative or medical records).



A1250: Practice Scenario 4

The nurse asked a resident upon admission if, in the past 6 months to a year, lack of transportation kept them from medical appointments, meetings, work, or getting things needed for daily living.

The resident stated that over the last 6 months, they did not have difficulty getting things needed for daily living, but they did have difficulty getting to and from their medical appointments because they were living alone and did not have a way to get to appointments.

The resident reports that after discharge, they will not have difficulty getting to their doctor's appointments because their sister will be living with them.



Q₄ How would you code A1250. Transportation?

A1250. Transportation (from NACHC®)	
Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?	
Complete only if A0310B = 01 or A0310G = 1 and A0310H = 1	
↓	Check all that apply
<input type="checkbox"/>	A. Yes, it has kept me from medical appointments or from getting my medications
<input type="checkbox"/>	B. Yes, it has kept me from non-medical meetings, appointments, work, or from getting things that I need
<input type="checkbox"/>	C. No
<input type="checkbox"/>	X. Resident unable to respond
<input type="checkbox"/>	Y. Resident declines to respond

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Q₄ How would you code A1250. Transportation?

A1250. Transportation (from NACHC®)

Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?

Complete only if A0310B = 01 **or** A0310G = 1 and A0310H = 1



Check all that apply



A. Yes, it has kept me from medical appointments or from getting my medications



B. Yes, it has kept me from non-medical meetings, appointments, work, or from getting things that I need



C. No



X. Resident unable to respond



Y. Resident declines to respond

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A1250: Practice Scenario 4 – Rationale

Rationale: The resident identified that prior to admission, over the past 6 months to a year, they had difficulty getting to medical appointments.

The resident reports that after discharge, their sister will be moving in with them and they will have help getting to their appointments. This information does not inform the coding of A1250, however, as the time period under consideration is 6 months to a year prior.



A1250: Practice Scenario 5

A resident was asked about whether they had any lack of transportation per the questions provided.

The resident declined to answer any more questions and asked to be left alone. Even though the resident has a daughter who could respond to these questions, the resident asked that their daughter not be bothered.



Q₅ How would you code A1250. Transportation?

A1250. Transportation (from NACHC®)	
Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?	
Complete only if A0310B = 01 or A0310G = 1 and A0310H = 1	
↓	Check all that apply
<input type="checkbox"/>	A. Yes, it has kept me from medical appointments or from getting my medications
<input type="checkbox"/>	B. Yes, it has kept me from non-medical meetings, appointments, work, or from getting things that I need
<input type="checkbox"/>	C. No
<input type="checkbox"/>	X. Resident unable to respond
<input type="checkbox"/>	Y. Resident declines to respond

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Q₅

How would you code A1250. Transportation?

A1250. Transportation (from NACHC®)
Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?
Complete only if A0310B = 01 **or** A0310G = 1 and A0310H = 1

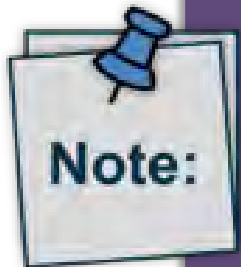
↓	Check all that apply
<input type="checkbox"/>	A. Yes, it has kept me from medical appointments or from getting my medications
<input type="checkbox"/>	B. Yes, it has kept me from non-medical meetings, appointments, work, or from getting things that I need
<input type="checkbox"/>	C. No
<input type="checkbox"/>	X. Resident unable to respond
<input checked="" type="checkbox"/>	Y. Resident declines to respond

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A1250: Practice Scenario 5 – Rationale

Rationale: The resident declined to answer this question and tells the facility not to contact their daughter.



When the resident declines to respond, code only **Y. Resident declines to respond**. When the resident declines to respond do not code based on other resources (family, significant other, or legally authorized representative, or medical records).

B1300

Health Literacy

B1300. Health Literacy

B1300. Health Literacy

Complete only if A0310B = 01 or A0310G = 1 and A0310H = 1

Enter Code

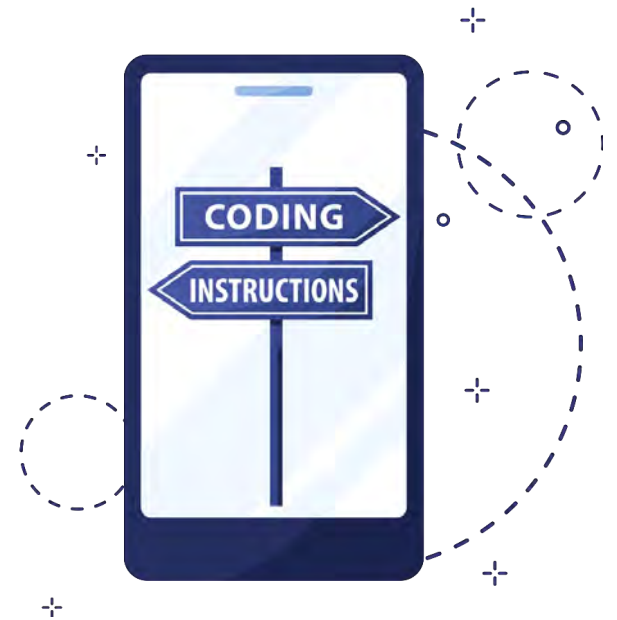
How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your doctor or pharmacy?

- 0. **Never**
- 1. **Rarely**
- 2. **Sometimes**
- 3. **Often**
- 4. **Always**
- 7. **Resident declines to respond**
- 8. **Resident unable to respond**

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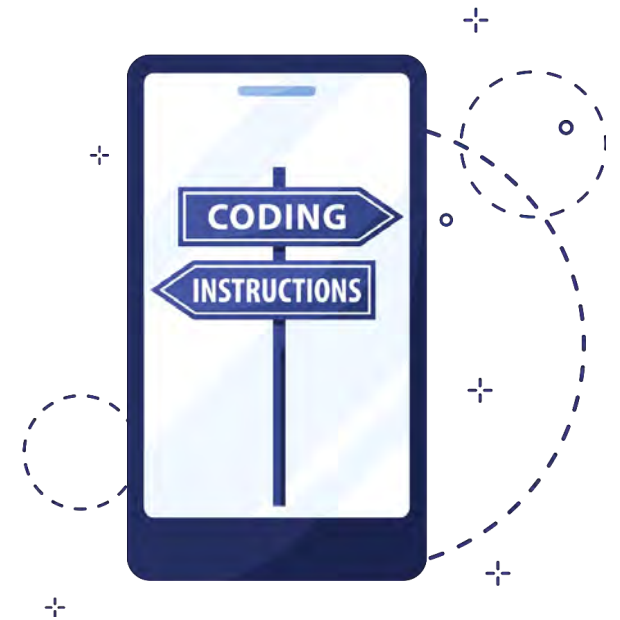
B1300: Coding Instructions

- **Code 0, Never:** if the resident indicates never needing help reading instructions, pamphlets, or other written materials from doctors or pharmacies.
- **Code 1, Rarely:** if the resident indicates rarely needing help reading instructions, pamphlets, or other written materials from doctors or pharmacies.
- **Code 2, Sometimes:** if the resident indicates sometimes needing help reading instructions, pamphlets, or other written materials from doctors or pharmacies.



B1300: Coding Instructions (cont.)

- **Code 3, Often:** if the resident indicates often needing help reading instructions, pamphlets, or other written materials from doctors or pharmacies.
- **Code 4, Always:** if the resident indicates always needing help reading instructions, pamphlets, or other written materials from doctors or pharmacies.
- **Code 7, Resident declines to respond:** if the resident declines to respond.
- **Code 8, Resident unable to respond:** if the resident is unable to respond.



B1300: Practice Scenario 6

A resident was recently hospitalized after a heart attack with a subsequent diagnosis of atrial fibrillation and was admitted to your facility. During the 5-Day PPS assessment, you ask the resident:

“How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your doctor or pharmacy?”

The resident states:

“It was very difficult to comprehend the instructions that were given to me regarding my new warfarin medication. All the other discharge instructions, I understood without a problem. I rarely have a problem with medication instructions, pamphlets, or other written materials from doctors or pharmacies, but this medication requires testing and adjustments that I just don’t understand, so I need help with that.”

How would you code B1300. Health Literacy?

B1300. Health Literacy
Complete only if A0310B = 01 or A0310G = 1 and A0310H = 1

Enter Code

How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your doctor or pharmacy?
0. **Never**
1. **Rarely**
2. **Sometimes**
3. **Often**
4. **Always**
7. **Resident declines to respond**
8. **Resident unable to respond**

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Q₆

How would you code B1300. Health Literacy?

B1300. Health Literacy

Complete only if A0310B = 01 or A0310G = 1 and A0310H = 1

Enter Code

1

How often do you need to have someone help you when you read instructions, pamphlets, or other written material from your doctor or pharmacy?

0.

Never

1.

Rarely

2.

Sometimes

3.

Often

4.

Always

7.

Resident declines to respond

8.

Resident unable to respond

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B1300: Practice Scenario 6 – Rationale

Rationale: The resident stated that when discharged from the hospital, they were given instructions regarding a new medication that they did not understand. The resident reported understanding all other discharge instructions. The resident added that they rarely need help when reading instructions, pamphlets, or other written materials from doctors or pharmacies.



D0700

Social Isolation

D0700. Social Isolation

D0700. Social Isolation

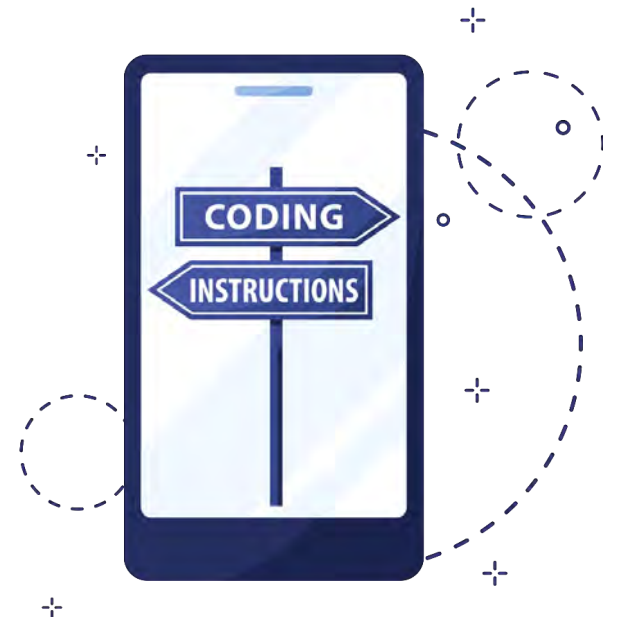
Enter Code

How often do you feel lonely or isolated from those around you?

- 0. **Never**
- 1. **Rarely**
- 2. **Sometimes**
- 3. **Often**
- 4. **Always**
- 7. **Resident declines to respond**
- 8. **Resident unable to respond**

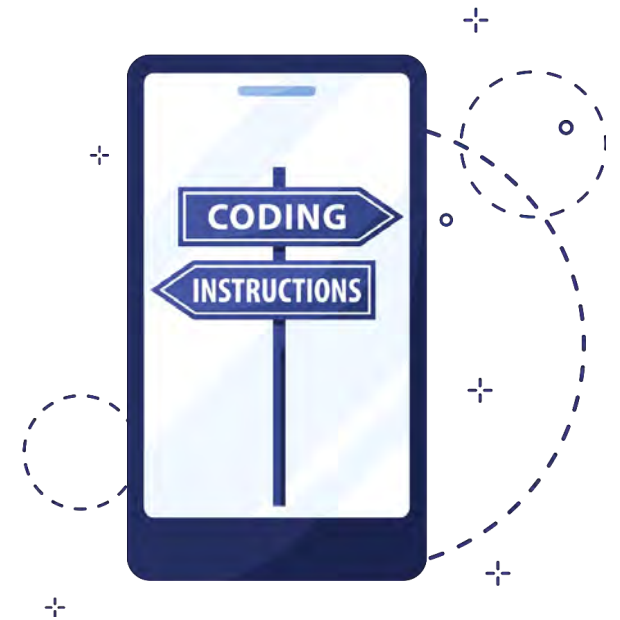
D0700: Coding Instructions

- **Code 0, Never:** if the resident indicates never feeling lonely or isolated from others.
- **Code 1, Rarely:** if the resident indicates rarely feeling lonely or isolated from others.
- **Code 2, Sometimes:** if the resident indicates sometimes feeling lonely or isolated from others.



D0700: Coding Instructions (cont.)

- **Code 3, Often:** if the resident indicates often feeling lonely or isolated from others.
- **Code 4, Always:** if the resident indicates always feeling lonely or isolated from others.
- **Code 7, Resident declines to respond:** if the resident declines to respond.
- **Code 8, Resident unable to respond:** if the resident was unable to respond.



D0700: Practice Scenario 7

A resident with early-stage dementia who has been in the facility for a year was asked during the observation period of their Annual assessment about how often they have felt lonely or isolated from those around them.

The resident stated that they did not want to answer any more questions. The resident's spouse, who happened to be in the room, offered that they have noticed that the resident rarely seems lonely since they have started to participate in more activities and have some new friends.



Q7 How would you code D0700. Social Isolation?

D0700. Social Isolation

Enter Code

How often do you feel lonely or isolated from those around you?
0. **Never**
1. **Rarely**
2. **Sometimes**
3. **Often**
4. **Always**
7. **Resident declines to respond**
8. **Resident unable to respond**



Q7 How would you code D0700. Social Isolation?

D0700. Social Isolation

Enter Code How often do you feel lonely or isolated from those around you?

7

- 0. Never
- 1. Rarely
- 2. Sometimes
- 3. Often
- 4. Always
- 7. Resident declines to respond
- 8. Resident unable to respond

D0700: Practice Scenario 7 – Rationale

Rationale: The resident declined to respond to the question about how lonely or isolated they feel from those around them.

Even though the resident's spouse offered that the resident rarely seems lonely, this data element is intended to be self-report, so no other source should be used to identify the response.



Non-SDOH Data Elements

A2121 and A2122

Provision of Current Reconciled Medication List to
Subsequent Provider at Discharge and
Route of Current Reconciled Medication List
Transmission to Subsequent Provider

A2121. Provision of Current Reconciled Medication List to Subsequent Provider at Discharge

A2121. Provision of Current Reconciled Medication List to Subsequent Provider at Discharge

Complete only if A0310H = 1 and A2105 = 02-12

Enter Code

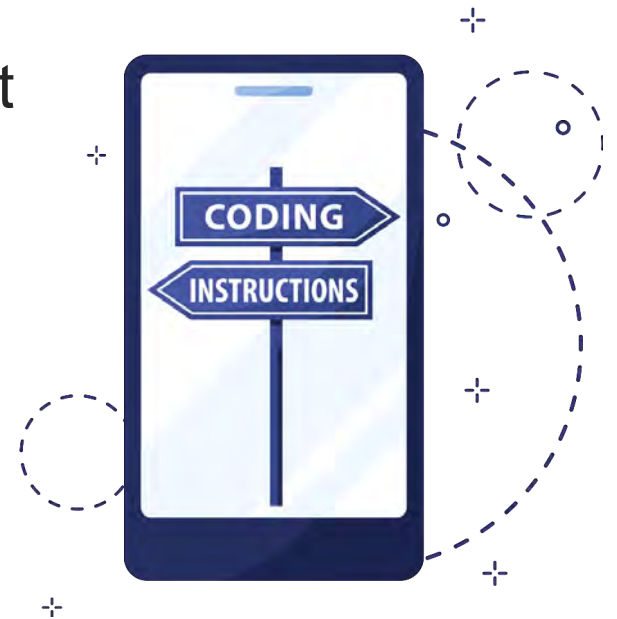
☐

At the time of discharge to another provider, did your facility provide the resident's current reconciled medication list to the subsequent provider?

0. **No** - Current reconciled medication list not provided to the subsequent provider → Skip to A2200, Previous Assessment Reference
Date for Significant Correction
1. **Yes** - Current reconciled medication list provided to the subsequent provider

A2121: Coding Instructions

- **Code 0, No:** if at discharge to a subsequent provider, your facility did not provide the resident's current reconciled medication list to the subsequent provider, or the resident was not discharged to a subsequent provider.
- **Code 1, Yes:** if at discharge to a subsequent provider, your facility did provide the resident's current reconciled medication list to the subsequent provider.



A2121: Coding Tip



CODING TIP

For the purposes of coding this item, a subsequent provider is based on the discharge locations in A2105 and defined as any of the following:

02. Nursing Home (long-term care facility).
03. Skilled Nursing Facility (SNF, swing beds).
04. Short-term General Hospital (acute hospital, IPPS).
05. Long-Term Care Hospital (LTCH).
06. Inpatient Rehabilitation Facility (IRF, free standing facility or unit).
07. Inpatient Psychiatric Facility (psychiatric hospital or unit).
08. Intermediate Care Facility (ID/DD facility).
09. Hospice (home/non-institutional).
10. Hospice (institutional facility).
11. Critical Access Hospital (CAH).
12. Home under care of organized home health service organization.

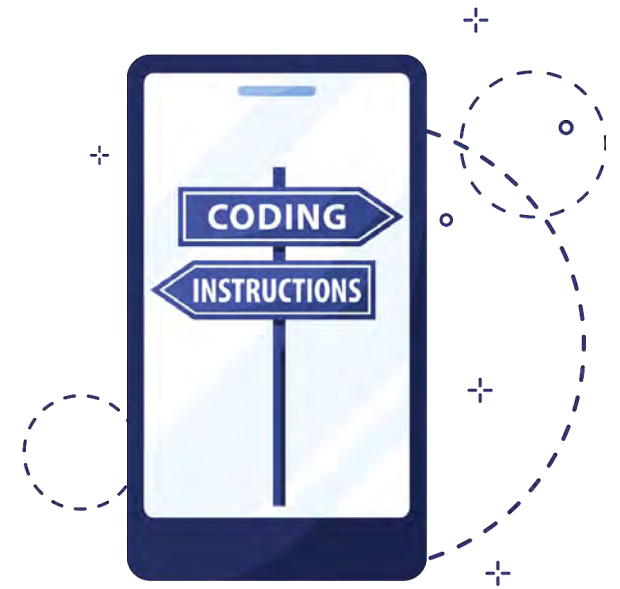
A2122. Route of Current Reconciled Medication List Transmission to Subsequent Provider

A2122. Route of Current Reconciled Medication List Transmission to Subsequent Provider	
Indicate the route(s) of transmission of the current reconciled medication list to the subsequent provider.	
Complete only if A2121 = 1	
↓	Check all that apply
	Route of Transmission
<input type="checkbox"/>	A. Electronic Health Record
<input type="checkbox"/>	B. Health Information Exchange
<input type="checkbox"/>	C. Verbal (e.g., in-person, telephone, video conferencing)
<input type="checkbox"/>	D. Paper-based (e.g., fax, copies, printouts)
<input type="checkbox"/>	E. Other methods (e.g., texting, email, CDs)

A2122: Coding Instructions

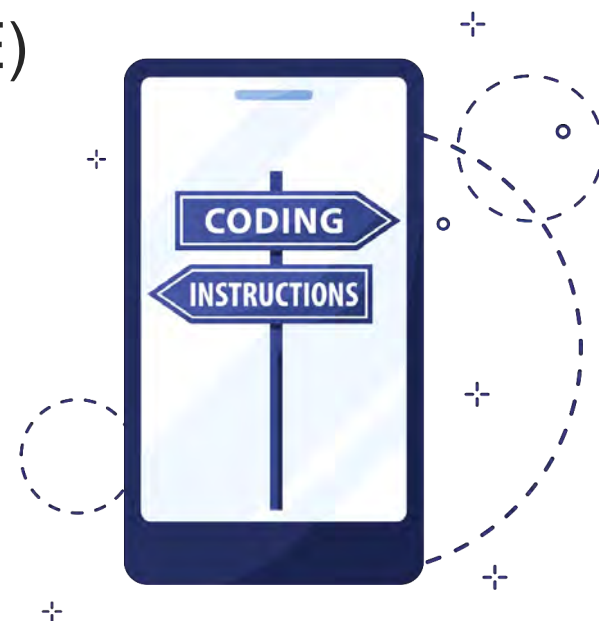
Select the codes that correspond to the routes of transmission used to provide the medication list to the subsequent provider.

- **Check A2122A, Electronic Health Record:** if your facility has an EHR, sometimes referred to as an electronic medical record (EMR), and used it to transmit or provide access to the reconciled medication list to the subsequent provider.
 - This would include situations in which both the discharging and receiving provider have direct access to a common EHR system.
 - Checking this route does not require confirmation that the subsequent provider has accessed the common EHR system for the medication list.



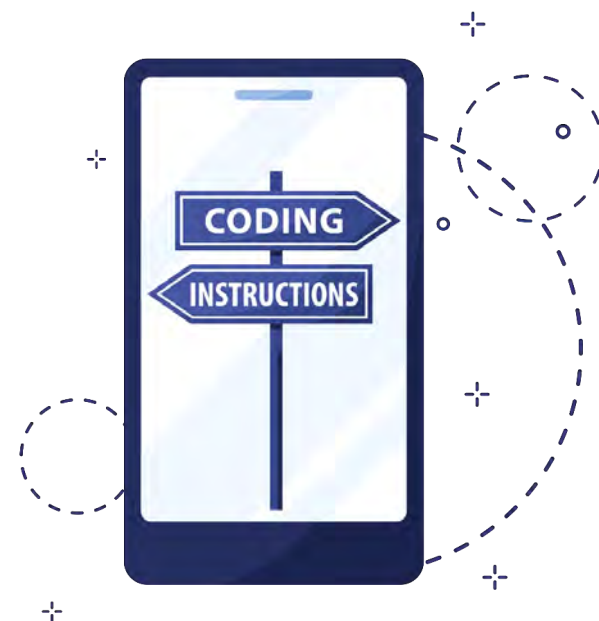
A2122: Coding Instructions (cont. 1)

- **Check A2122B, Health Information Exchange**, if your facility participates in a Health Information Exchange (HIE) and used the HIE to electronically exchange the current reconciled medication list with the subsequent provider.
- **Check A2122C, Verbal**, if the current reconciled medication list information was verbally communicated (e.g., in-person, telephone, video conferencing) to the subsequent provider.



A2122: Coding Instructions (cont. 2)

- **Check A2122D, Paper-Based**, if the current reconciled medication list was transmitted to the subsequent provider using a paper-based method, such as a printout, fax, or eFax.
- **Check A2122E, Other Methods**, if the current reconciled medication list was transmitted to the subsequent provider using another method not listed above (e.g., texting, email, CDs).



A2121 and A2122: Practice Scenario 8

A resident is being sent to an acute care hospital in a healthcare system that uses the same EHR as your facility. This means that the acute care hospital staff admitting the resident will be able to access this information as soon as it is transmitted.

The resident's reconciled medication list, progress notes, and transfer information are uploaded into the EHR by your facility at the time of discharge.

While the discharge nurse received a system message of successful transmission upon sending this information, there has been no confirmation that the acute care hospital staff have accessed the information.





How would you code A2121. Provision of Current Reconciled Medication List to Subsequent Provider at Discharge?

A2121. Provision of Current Reconciled Medication List to Subsequent Provider at Discharge

Complete only if A0310H = 1 and A2105 = 02-12

Enter Code

☐

At the time of discharge to another provider, did your facility provide the resident's current reconciled medication list to the subsequent provider?

- 0. **No** - Current reconciled medication list not provided to the subsequent provider → Skip to A2200, Previous Assessment Reference
Date for Significant Correction
- 1. **Yes** - Current reconciled medication list provided to the subsequent provider





How would you code A2121. Provision of Current Reconciled Medication List to Subsequent Provider at Discharge?

A2121. Provision of Current Reconciled Medication List to Subsequent Provider at Discharge

Complete only if A0310H = 1 and A2105 = 02-12

Enter Code

1

At the time of discharge to another provider, did your facility provide the resident's current reconciled medication list to the subsequent provider?

- 0. **No** - Current reconciled medication list not provided to the subsequent provider → Skip to A2200, Previous Assessment Reference
Date for Significant Correction
- 1. **Yes** - Current reconciled medication list provided to the subsequent provider



A2121: Practice Scenario 8 – Rationale

Rationale: The nurse uploaded the resident's reconciled medication list and other documentation from the facility to the receiving acute care hospital using their shared EHR system.

- **Code 1, Yes**, is used when the discharging and receiving provider have direct access to a common EHR system.

Confirmation that the subsequent provider has accessed the common EHR system for the reconciled medication list is not required in order to code **1, Yes**.



How would you code A2122. Route of Current Reconciled Medication List Transmission to Subsequent Provider?

A2122. Route of Current Reconciled Medication List Transmission to Subsequent Provider

Indicate the route(s) of transmission of the current reconciled medication list to the subsequent provider.

Complete only if A2121 = 1

↓

Check all that apply

Route of Transmission

☐ A. Electronic Health Record

☐ B. Health Information Exchange

☐ C. Verbal (e.g., in-person, telephone, video conferencing)

☐ D. Paper-based (e.g., fax, copies, printouts)

☐ E. Other methods (e.g., texting, email, CDs)

How would you code A2122. Route of Current Reconciled Medication List Transmission to Subsequent Provider?

A2122. Route of Current Reconciled Medication List Transmission to Subsequent Provider

Indicate the route(s) of transmission of the current reconciled medication list to the subsequent provider.

Complete only if A2121 = 1

↓

Check all that apply

Route of Transmission

<input checked="" type="checkbox"/>	A. Electronic Health Record
<input type="checkbox"/>	B. Health Information Exchange
<input type="checkbox"/>	C. Verbal (e.g., in-person, telephone, video conferencing)
<input type="checkbox"/>	D. Paper-based (e.g., fax, copies, printouts)
<input type="checkbox"/>	E. Other methods (e.g., texting, email, CDs)

A2122: Practice Scenario 8 – Rationale

Rationale: The facility and the acute care hospital share the same EHR system, and each provider can access this information directly.



A2123 and A2124

Provision of Current Reconciled Medication
List to Resident at Discharge and
Route of Current Reconciled Medication
List Transmission to Resident

A2123. Provision of Current Reconciled Medication List to Resident at Discharge

A2123. Provision of Current Reconciled Medication List to Resident at Discharge

Complete only if A0310H = 1 and A2105 = 01, 99

Enter Code

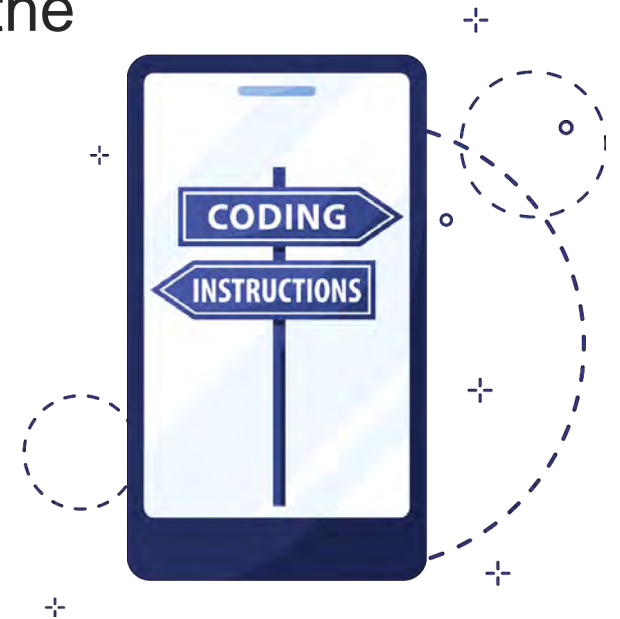
☐

At the time of discharge, did your facility provide the resident's current reconciled medication list to the resident, family and/or caregiver?

0. **No** - Current reconciled medication list not provided to the resident, family and/or caregiver → Skip to A2200, Previous Assessment
Reference Date for Significant Correction
1. **Yes** - Current reconciled medication list provided to the resident, family and/or caregiver

A2123: Coding Instructions

- **Code 0, No:** if at discharge to a home setting (A2105 = 01) or a not listed location (A2105 = 99), your facility did not provide the resident's current reconciled medication list to the resident, family, guardian/legally authorized representative, and/or caregiver.
- **Code 1, Yes:** if at discharge to a home setting (A2105 = 01) or a not listed location (A2105 = 99), your facility did provide the resident's current reconciled medication list to the resident, family, guardian/legally authorized representative, and/or caregiver.



A2124. Route of Current Reconciled Medication List Transmission to Resident

A2124. Route of Current Reconciled Medication List Transmission to Resident

Indicate the route(s) of transmission of the current reconciled medication list to the resident/family/caregiver.

Complete only if A2123 = 1

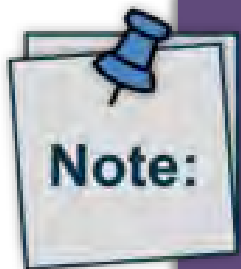
↓ Check all that apply

Route of Transmission

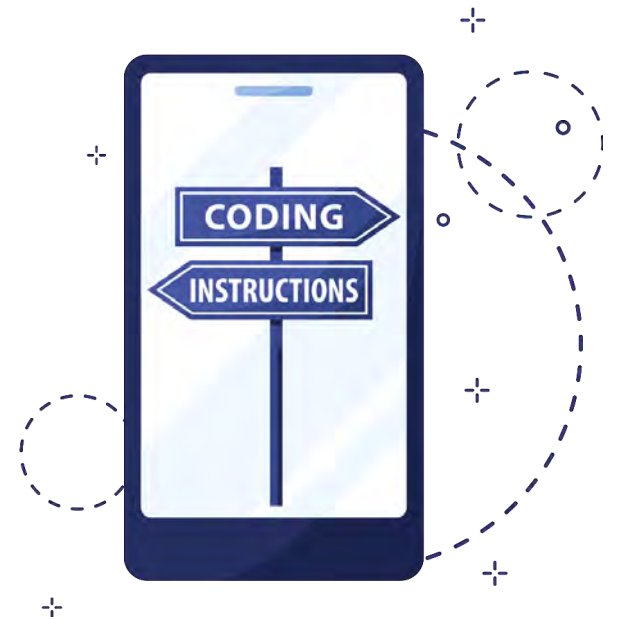
- | | |
|--------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> | A. Electronic Health Record (e.g., electronic access to patient portal) |
| <input type="checkbox"/> | B. Health Information Exchange |
| <input type="checkbox"/> | C. Verbal (e.g., in-person, telephone, video conferencing) |
| <input type="checkbox"/> | D. Paper-based (e.g., fax, copies, printouts) |
| <input type="checkbox"/> | E. Other methods (e.g., texting, email, CDs) |

A2124: Coding Instructions

Select the codes that correspond to the routes of transmission used to provide the medication list to the family member, significant other, guardian/legally authorized representative, and/or caregiver.



The response choices for A2124 are the same as in A2122. Route of Current Reconciled Medication List to Subsequent Provider.



A2123 and A2124: Practice Scenario 9

A resident had several medications discontinued during their PPS stay at the facility. At the time of discharge home, the resident still had an over-the-counter heartburn relief medication as well as numerous prescription medications.

The nurse verbally reviewed all medications and the resident confirmed understanding of each medication, how to take them, what dosage to take, and when.

The nurse handed a printed copy of the current reconciled medication list to the resident at the time of discharge. The resident also asked for a copy to give to their daughter.



How would you code A2123. Provision of Current Reconciled Medication List to Resident at Discharge?

A2123. Provision of Current Reconciled Medication List to Resident at Discharge

Complete only if A0310H = 1 and A2105 = 01, 99

Enter Code

☐

At the time of discharge, did your facility provide the resident’s current reconciled medication list to the resident, family and/or caregiver?

0.

No - Current reconciled medication list not provided to the resident, family and/or caregiver → Skip to A2200, Previous Assessment
Reference Date for Significant Correction

1.

Yes - Current reconciled medication list provided to the resident, family and/or caregiver



How would you code A2123. Provision of Current Reconciled Medication List to Resident at Discharge?

A2123. Provision of Current Reconciled Medication List to Resident at Discharge

Complete only if A0310H = 1 and A2105 = 01, 99

Enter Code At the time of discharge, did your facility provide the resident’s current reconciled medication list to the resident, family and/or caregiver?

- 1
- 0. **No** - Current reconciled medication list not provided to the resident, family and/or caregiver → Skip to A2200, Previous Assessment
Reference Date for Significant Correction
 - 1. **Yes** - Current reconciled medication list provided to the resident, family and/or caregiver



A2123: Practice Scenario 12 – Rationale

Rationale: The resident was provided with a paper copy of the reconciled medication list at discharge.

The resident also asked that a copy be provided to their daughter.

While the recipient of the current reconciled medication list can be the resident, family member, significant other, guardian/legally authorized representative, and/or caregiver, it is not necessary to provide the current reconciled medication list to all of these recipients in order to code **1, Yes**.



How would you code A2124. Route of Current Reconciled Medication List Transmission to Resident?

A2124. Route of Current Reconciled Medication List Transmission to Resident
 Indicate the route(s) of transmission of the current reconciled medication list to the resident/family/caregiver.
 Complete only if A2123 = 1

↓ Check all that apply

Route of Transmission	
<input type="checkbox"/>	A. Electronic Health Record (e.g., electronic access to patient portal)
<input type="checkbox"/>	B. Health Information Exchange
<input type="checkbox"/>	C. Verbal (e.g., in-person, telephone, video conferencing)
<input type="checkbox"/>	D. Paper-based (e.g., fax, copies, printouts)
<input type="checkbox"/>	E. Other methods (e.g., texting, email, CDs)



How would you code A2124. Route of Current Reconciled Medication List Transmission to Resident?

A2124. Route of Current Reconciled Medication List Transmission to Resident

Indicate the route(s) of transmission of the current reconciled medication list to the resident/family/caregiver.

Complete only if A2123 = 1

↓ Check all that apply

Route of Transmission	
<input type="checkbox"/>	A. Electronic Health Record (e.g., electronic access to patient portal)
<input type="checkbox"/>	B. Health Information Exchange
<input checked="" type="checkbox"/>	C. Verbal (e.g., in-person, telephone, video conferencing)
<input checked="" type="checkbox"/>	D. Paper-based (e.g., fax, copies, printouts)
<input type="checkbox"/>	E. Other methods (e.g., texting, email, CDs)



A2124: Practice Scenario 12 – Rationale

Rationale: The nurse verbally reviewed the reconciled medication list with the resident and provided the resident with a paper-based copy of the reconciled medication list at discharge.



Key Insights

- SDOH affect a wide range of health risks and outcomes and are important factors to consider when collecting resident data. Collection of these data is an important step in improving quality of care and health outcomes.
- Access to transportation is essential to effective care management and can facilitate the resident's connection within the community.
- Poor health literacy interferes with communication between provider and resident and is linked to poor outcomes, higher medical costs, decrease in preventive service visits, and increase in Emergency Department use.



Key Insights

- Social isolation increases with age, is a risk factor for physical and mental illness, and is a predictor of mortality.
- Ensuring that a current reconciled medication list is provided to a subsequent provider and/or a resident at time of discharge is critical to ensure safe and effective transitions of care.

