

## SNF PPS Clarifications Memo V1.0, September 2014

This memo provides clarification for certain Skilled Nursing Facility (SNF) Prospective Payment System (PPS) payment and assessment completion policies. Specifically, this memo addresses questions and scenarios related to the new completion standards for the Change-of-Therapy (COT) Other Medicare Required Assessment (OMRA), as finalized in the FY 2015 SNF PPS Final Rule (79 FR 45647 through 45649).

The clarifications contained in this memo will be incorporated into Version 1.12 of the Minimum Data Set, Version 3.0 (MDS 3.0) manual. However, all of the scenarios may not be included in the manual revisions, so readers are encouraged to refer to this document as needed in the future.

### 1. Basic rules related to new COT OMRA completion standards

Question: Under what general circumstances can I complete a COT OMRA for a resident who is not currently classified into a RUG-IV therapy group?

Answer: The COT OMRA may be completed when a resident is not currently classified into a RUG-IV therapy group, but only if both of the following conditions are met:

1. Resident has been classified into a RUG-IV therapy group on a prior assessment during the resident's current Medicare Part A stay, and
2. No discontinuation of therapy services (planned or unplanned) occurred between Day 1 of the COT observation period for the COT OMRA that classified the resident into his/her current non-therapy RUG-IV group and the ARD of the COT OMRA that reclassified the resident into a RUG-IV therapy group.

Under these circumstances, completing the COT OMRA to reclassify the resident into a therapy group may be considered optional. Additionally, the COT OMRA which classifies a resident into a non-therapy group or the COT OMRA which reclassifies the resident into a therapy group may be combined with another assessment, per the rules for combining assessments discussed in Sections 2.10 through 2.12 of the MDS 3.0 manual.

Scenario: Mr. T classified into the RUG group RUA on his 30-day assessment with an ARD set for Day 30 of his stay. On Day 37, the facility checked the amount of therapy provided to Mr. T during the previous 7 days and found that while he did receive the requisite number of therapy minutes to qualify for this RUG category, he only received therapy on 4 distinct calendar days, which would make it impossible for him to qualify for an Ultra-High Rehabilitation RUG group. Moreover, due to lack of 5 distinct calendar days of therapy and a lack of restorative nursing services, Mr. T. did not qualify for any RUG-IV therapy group. The facility completes a COT OMRA for Mr. T, with an ARD set for Day 37, on which he qualifies for LB1. Mr. T's rehabilitation regimen continues from that point, without any discontinuation of therapy or three consecutive days of missed therapy. On Day 44, the facility checks the amount of therapy provided to Mr. T during the previous 7 days and finds that Mr. T again qualifies for the RUG-IV therapy group RUA.

In this scenario, because Mr. T had qualified into a RUG-IV therapy group on a prior assessment during his current Medicare Part A stay (i.e., the 30-day assessment) and no discontinuation of therapy services (planned or unplanned) occurred between Day 1 of the COT observation period for the COT OMRA that classified the resident into his/her current non-therapy RUG-IV group (Day 31, in this scenario) and the ARD of the COT OMRA that reclassified the resident into a RUG-IV therapy group (Day 44, in this scenario), the facility may complete a COT OMRA with an ARD of Day 44 to reclassify Mr. T. back into the RUG-IV therapy group RUA.

2. Discontinuation of therapy between classification to non-therapy RUG and potential reclassification into therapy RUG.

Question: What would constitute a discontinuation of therapy sufficient that, as noted in the second rule above, the resident experienced a discontinuation of therapy services (planned or unplanned) between Day 1 of the COT observation period for the COT OMRA that classified the resident into his/her current non-therapy RUG-IV group and the ARD of the COT OMRA that reclassified the resident into a RUG-IV therapy group?

Answer: For purposes of understanding this second rule, a discontinuation of therapy services is such that if the resident were classified into a RUG-IV therapy group, an EOT OMRA would be required for that resident. In other words, just as in the case of an EOT-OMRA, a discontinuation of therapy for the purposes of this second rule consists of the planned or unplanned discontinuation of all rehabilitation therapies for three or more consecutive days. If such a circumstance should occur before the resident may be appropriately reclassified into a RUG-IV therapy group, then no such reclassification using a COT OMRA would be possible.

Scenario: Mr. A classified into the RUG group RVA on his 30-day assessment with an ARD set for Day 30 of his stay. On Day 37, the facility checked the amount of therapy provided to Mr. A during the previous 7 days and found that while he did receive the requisite number of therapy minutes to qualify for this RUG category, he only received therapy on 4 distinct calendar days, which would make it impossible for him to qualify for a Very-High Rehabilitation RUG group. Moreover, due to lack of 5 distinct calendar days of therapy and a lack of restorative nursing services, Mr. A did not qualify for any RUG-IV therapy group. The facility completes a COT OMRA for Mr. A, with an ARD set for Day 37, on which he qualifies for LB1. Mr. A's rehabilitation regimen is intended to continue from that point, but Mr. A does not receive therapy on Days 36, 37 and 38. On Day 44, the facility checks the amount of therapy provided to Mr. A during the previous 7 days and finds that Mr. A again qualifies for the RUG-IV therapy group RVA.

In this scenario, while Mr. A had qualified into a RUG-IV therapy group on a prior assessment during his current Medicare Part A stay (i.e., the 30-day assessment), a discontinuation of therapy services occurred between Day 1 of the COT observation period for the COT OMRA that classified the resident into his/her current non-therapy RUG-IV group and the ARD of the COT OMRA that reclassified the resident into a RUG-IV therapy group (i.e., the discontinuation due to Mr. A missing therapy on Days 36-38). Therefore, the facility may not complete a COT OMRA with an ARD of Day 44 to reclassify Mr. A back into the RUG-IV therapy group RVA.

### 3. EOT requirements for resident classified into a RUG-IV non-therapy group

Question: If a resident is classified into a non-therapy RUG on a COT OMRA and then the facility subsequently decides to discontinue therapy services for that resident, is an EOT OMRA required?

Answer: Per the manual instructions in Section 2.9 of the MDS 3.0 manual, an EOT OMRA is only required for a resident who experiences a discontinuation of therapy services while classified into a RUG-IV therapy group. Therefore, if a resident is classified into a non-therapy RUG on a COT OMRA and then the facility subsequently decides to discontinue therapy services for that resident, an EOT OMRA is not required for this resident.

### 4. Non-COT OMRA assessment classifying resident into a RUG-IV non-therapy group

Question: If an assessment other than a COT OMRA (e.g., a scheduled PPS assessment) classifies the resident into a RUG-IV non-therapy group from a RUG-IV therapy group, can a COT OMRA be used to reclassify the resident into a RUG-IV therapy group?

Answer: Per the policy finalized in the FY 2015 SNF PPS final rule and as illustrated by the second rule of clarification 1 above, a COT OMRA may be used to reclassify a resident into a RUG-IV therapy group only when the resident was classified into a RUG-IV non-therapy by a previous COT OMRA (which may have been combined with another assessment).

Scenario: Mr. E classified into the RUG group RUA on his 14-day assessment with an ARD set for Day 15 of his stay. No unscheduled assessments were required or completed between Mr. E's 14-day assessment and his 30-day assessment. On Day 29, the facility checked the amount of therapy provided to Mr. E during the previous 7 days and found that while he did receive the requisite number of therapy minutes to qualify for this RUG category, he only received therapy on 4 distinct calendar days, which would make it impossible for him to qualify for an Ultra-High Rehabilitation RUG group. Moreover, due to lack of 5 distinct calendar days of therapy and a lack of restorative nursing services, Mr. E did not qualify for any RUG-IV therapy group. The facility completes a 30-day assessment for Mr. E, with an ARD set for Day 29, on which he qualifies for LB1, but opts not to combine this 30-day assessment with a COT OMRA (as permitted under the COT rules outlines in Section 2.9 of the MDS 3.0 manual) Mr. E's rehabilitation regimen continues from that point, without any discontinuation of therapy or three consecutive days of missed therapy. On Day 36, the facility checks the amount of therapy provided to Mr. E during the previous 7 days and finds that Mr. E again qualifies for the RUG-IV therapy group RUA.

In this scenario, although Mr. E had qualified into a RUG-IV therapy group on a prior assessment during his current Medicare Part A stay (e.g., the 14-day assessment), the assessment which classified Mr. E into a RUG-IV non-therapy group was not a COT OMRA. Therefore, the facility may not complete a COT OMRA with an ARD of Day 36 to reclassify Mr. E back into the RUG-IV therapy group RUA.