



Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Provider Training



Section B: Hearing, Speech, and Vision

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Section B: Objectives

- Define Section B: Hearing, Speech, and Vision.
- Explain new items to the LTCH CARE Data Set v3.00.
- Explain the intent of Section B.
- Discuss coding instructions and needed information for items.
- Accurately code scenario(s).

Section B: New Items and Changes

NEW:

- B0100
 - Planned Discharge Assessment.
 - Currently, B0100 is an item on the LTCH CARE Data Set v2.01 Admission Assessment.
- BB0700
 - Admission and Planned Discharge Assessments.
- BB0800
 - Admission and Planned Discharge Assessments.

Section B: Intent

Document the patient's ability to understand and communicate with others.

Section B: Definitions

COMATOSE: A pathological state in which neither arousal nor awareness exists.

PERSISTENT VEGETATIVE STATE: Patient may regain wakefulness but no evidence of any purposeful behavior or cognition with extensive damage to both cerebral hemispheres.

EXPRESSION OF IDEAS AND WANTS: Both verbal and non-verbal expression, excluding language barriers.

UNDERSTANDING VERBAL CONTENT: With hearing aid or device, excluding language barriers.

Section B: B0100. Comatose

B0100. Comatose	
Enter Code <input type="checkbox"/>	Persistent vegetative state/no discernible consciousness 0. No → Continue to BB0700. Expression of Ideas and Wants 1. Yes → Skip to GG0100. Prior Functioning: Everyday Activities

Applies to Admission and Planned Discharge Assessments

CODING INSTRUCTIONS:

- **Code 0, No**, if a diagnosis of coma or persistent vegetative state is not present at the time of admission or discharge.
- **Code 1, Yes**, if the record indicates that a physician, physician assistant, nurse practitioner, or clinical nurse specialist has documented a diagnosis of coma or persistent vegetative state that is applicable at admission or discharge.

Section B: BB0700. Expression of Ideas and Wants

BB0700. Expression of Ideas and Wants (3-day assessment period)

Enter Code

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Expression of ideas and wants (consider both verbal and non-verbal expression and excluding language barriers)

4. Expresses complex messages **without difficulty** and with speech that is clear and easy to understand
3. Exhibits some **difficulty** with expressing needs and ideas (e.g., some words or finishing thoughts) or speech is not clear
2. **Frequently** exhibits difficulty with expressing needs and ideas
1. **Rarely/Never** expresses self or speech is very difficult to understand

Applies to Admission and Planned Discharge Assessments

CODING INSTRUCTIONS:

- **Code 4**, Expresses **without difficulty**, if the patient expresses complex messages without difficulty and with speech that is clear and easy to understand.
- **Code 3**, Expresses with some **difficulty**, if the patient exhibits some difficulty with expressing needs and ideas (e.g., difficulty with some words or finishing thoughts) or speech is not clear.
- **Code 2**, **Frequently** exhibits difficulty with expression, if the patient frequently exhibits difficulty with expressing needs and ideas.
- **Code 1**, **Rarely/Never** expresses self, if the patient rarely/never expresses himself/herself, or if speech is very difficult to understand.

Section B: BB0800. Understanding Verbal Content

BB0800. Understanding Verbal Content (3-day assessment period)

Enter Code

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Understanding Verbal Content (with hearing aid or device, if used and excluding language barriers)

4. **Understands:** Clear comprehension without cues or repetitions

3. **Usually Understands:** Understands most conversations, but misses some part/intent of message. Requires cues at times to understand

2. **Sometimes Understands:** Understands only basic conversations or simple, direct phrases. Frequently requires cues to understand

1. **Rarely/Never Understands**

Applies to Admission and Planned Discharge Assessments

CODING INSTRUCTIONS:

- **Code 4, Understands**, if the patient has clear comprehension without cues or repetitions.
- **Code 3, Usually Understands**, if the patient understands most conversations, but misses some part/intent of message or requires cues at times to understand.
- **Code 2, Sometimes Understands**, if the patient understands only basic conversations or simple, direct phrases or if the patient frequently requires cues to understand.
- **Code 1, Rarely/Never Understands**, if the patient rarely/never understands conversations.

Section B: B0100 Coding Scenario

Mrs. F arrived at the LTCH comatose due to a traumatic brain injury. Mrs. F's medical record includes the diagnosis of persistent vegetative state.

How would you code B0100?
What is your rationale?

Section B: B0100 Coding Scenario

CODING: B0100 would be coded **1, Yes.**

RATIONALE: It was documented in the medical record that Mrs. F was in a persistent vegetative state since admission.

Section B: BB0700 Coding Scenario (1)

Ms. T underwent surgery for a glioblastoma and is now admitted to the LTCH for further treatments. When she needs to go to the bathroom, she uses the call light. When the certified nursing assistant arrives, Ms. T points to the bathroom and with garbled speech says, “Go.” The certified nursing assistant reports to the nurse that she often has difficulty understanding Ms. T.

How would you code BB0700?

What is your rationale?

Section B: BB0700 Coding Scenario (1)

CODING: BB0700 would be coded **2, Frequently** exhibits difficulty with expressing needs and ideas.

RATIONALE: Ms. T gets her point across regarding the need to go to the bathroom, but staff often have difficulty understanding Ms. T.

Section B: BB0700 Coding Scenario (2)

Mr. B had a stroke several weeks ago and has a diagnosis of expressive aphasia. The certified nursing assistant asks Mr. B if he needs help with bathing. He looks at the certified nursing assistant and smiles, but does not respond verbally. The certified nursing assistant reports to the nurse that she has not been able to determine Mr. B's preferences and needs with any of his activities of daily living since he was admitted the day before. The nurse interacts with Mr. B and determines he rarely expresses himself. The nurse plans to collaborate with the speech language pathologist, other care team members, and Mr. B to increase Mr. B's ability to express himself.

How would you code BB0700?

What is your rationale?

Section B: BB0700 Coding Scenario (2)

CODING: BB0700 would be coded **1**,
Rarely/Never expresses self or speech is very
difficult to understand.

RATIONALE: Due to Mr. B's expressive aphasia,
he is unable to verbally express his needs.

Section B: BB0800 Coding Scenario (1)

Mr. K has been participating in physical therapy to improve his bed mobility skills. The physical therapist reports that Mr. K occasionally requires repetition of simple instructions during therapy. The nurse also reports that she had to repeat information once yesterday to reinforce her verbal communication with Mr. K.

How would you code BB0800?

What is your rationale?

Section B: BB0800 Coding Scenario (1)

CODING: BB0800 would be coded **3, Usually Understands:** Understands most conversations, but misses some part/intent of message. Requires cues at times to understand.

RATIONALE: Mr. K requires cues at times to understand instructions from the physical therapist and nurse.

Section B: BB0800 Coding Scenario (2)

Ms. H recently had a cancerous brain tumor removed, and it affected her ability to comprehend others. The certified nursing assistant asks Ms. H if she is ready to bathe. Ms. H nods and reaches for the wash cloth. When the certified nursing assistant tells Ms. H to be careful not to get her head bandages wet, Ms. H continues to bring the wash cloth toward her head, and she looks puzzled and asks why. The certified nursing assistant explains to Ms. H that she had surgery but Ms. H doesn't understand until the certified nursing assistant shows her a reflection of her head in the mirror. The nurse notes that cues or repetition are frequently required for Ms. H to understand.

How would you code BB0800?

What is your rationale?

Section B: BB0800 Coding Scenario (2)

CODING: BB0800 would be coded **2**,
Sometimes Understands: Understands only basic conversations or simple, direct phrases. Frequently requires cues to understand.

RATIONALE: Ms. H understands only basic conversation and needs repetition or cues to understand.

Section B: Summary

- Section B documents the patient's ability to understand and communicate with others.
- Patients who are in a coma or persistent vegetative state are at risk for the complications of immobility, including skin breakdown and joint contractures.
- B0100 is a new item on the Planned Discharge Assessment.
- BB0700 and BB0800 are new items on the Admission and Planned Discharge Assessments.
- Unaddressed communication problems can:
 - Be inappropriately mistaken for confusion or cognitive impairment.
 - Lead to patient frustration, social isolation, mood and behavior disorders.
- Inability to understand direct person-to-person communication can:
 - Severely limit association with other people.
 - Inhibit the individual's ability to follow instructions that can affect health and safety.

Section B: Coding Tips

- Look for documentation of a neurological diagnosis of comatose or persistent vegetative state.
- Be sure patient can hear you or has access to his or her preferred method for communication, including preferred language.
- If the patient seems unable to communicate, offer alternatives such as an electronic device (smart phone, tablet, laptop, etc.), writing, pointing, nodding, or using cue cards.
- Observe his or her interactions with others in different locations and circumstances.
- Consult with the direct care staff (over all shifts) and, if available, the patient's family and speech-language pathologist.

Section B: Action Plan

- Evaluate current documentation to ensure terminology aligns with items in the LTCH CARE Data Set v3.00.
- Practice coding a variety of scenarios with staff.