

Harmony Healthcare

Case Mix #3 Medicaid

RUG-III 34-Grouper, V.5.20

Effective **.**.**

	ADL		
RUG Level	Score	Requirements	MDS 3.0 Section
		Rehabilitation Rehabilitation	
RAD RAC RAB RAA	17-18 14-16 10-13 4-9	Received one of the following services with ADL = 4-18 Criteria #1 • 150 minutes or more (total) of therapy • At least 5 days of any combination OR Criteria #2 • 45 minutes or more (total) of therapy • At least 3 days of any combination • At least 2 Restorative Nursing Programs, each administered for at least 15 minutes, each for 6 or more days	O0400A,B,C O0400A,B,C O0500A-J
	ADL		
RUG Level	Score	Requirements	MDS 3.0 Section
		Extensive Services	
SE3 SE2 SE1	4-5 2-3 0-1	Received one of the following services with ADL sum ≥ 7: 1. Parental/IV 2. Suctioning 3. Tracheostomy Care 4. Ventilator or Respirator 5. IV Medication • Evaluate for Special Care, Clinically Complex, Impaired cognition for the total Extensive Services count	K0510A, 1 or 2 O0100D, 1 or 2 O0100E, 1 or 2 O0100F, 1 or 2 O0100H, 1 or 2



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	ADL		
RUG Level	Score	Requirements	MDS 3.0 Section
		SPECIAL CARE	
SSC	17-18	Any one of the following services received with	
SSB	15-16	ADL sum ≥ 7:	
SSA	7-14	1. Cerebral Palsy, ADL sum > 10	14400
		2. Quadriplegic, ADL sum <u>></u> 10	I5100
		3. Multiple Sclerosis, ADL sum <u>></u> 10	15200
		4. Fever and 1 of the following:	J1550A
		- Pneumonia	12000
		- Vomiting	JI550B
		- Dehydration	JI550C
		- Weight Loss	K0300
		- Feeding Tube*	K0510B
		5. Feeding Tube* and aphasia	K0510B, 1 or 2, I4300
		Feeding Tube classification must include:	A
		1. 51% or more calories OR	K0710A3 or
		2. 26-50% calories and 501 cc or more per	K0710A3 and K0710B3
		day enteral/parenteral intake	
		6. Ulcers (2+ sites over all stages) with 2 or	M0300A, B1 and
		more skin treatments	M1030
		7. Any stage 3 or 4 pressure ulcer with 2 or	M0300C1, D1, and F1
		more skin treatments	M1200A D
		- Pressure relieving device chair/bed*	M1200A, B
		*Count as 1 even if both provided	M1200C
		 Turning/repositioning program Nutrition or hydration intervention to 	M1200C M1200D
		manage skin problems	IVI1200D
		- Pressure ulcer care	M1200E
		- Application of non-surgical dressings	M1200C
		other than to feet	W11200G
		- Application of ointment/medication	M1200H
		other than to feet	101120011
		8. Open lesions with 1 or more treatments	M104D
		9. Surgical wounds including 1 or more	M1040E
		treatments	11120 102
		Surgical wound care	M1200F
		Application of non-surgical dressings	M1200G
		other than to feet	
		3. Application of non-surgical dressings	M1200H
		other than to feet	
		10. Radiation Treatments	O0100B
		11. Respiratory therapy = 7 days	O0400D



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		ADL		
RUG Level	Sad Mood	Score	Requirements	MDS 3.0 Section
NOG EEVE	Saa Wood	30010	CLINICALLY COMPLEX	14100 5:0 50000
			Any one of the following:	
CC2	Yes	17-18	1. Coma and ADL performance = 4 or 8	B0100
CC1	No	17-18	OR	
CB2	Yes	12-16	2. Pneumonia	12000
CB1	No	12-16	3. Septicemia	12000
CA2	Yes	4-11	4. Diabetes and Injections=7 days and	12900 and N0300 and
CA1	No	4-11	Physician Order Changes	00700
			5. Hemiplegia/Hemiparesis with ADLS	
			<u>≥</u> 10	14900
			6. Dehydration	
			7. Internal Bleeding	J1550C
			8. Feeding Tube	J1550D
			9. Infection of the foot with application	K0510B
			of dressing	M1040A and M1200I
			10. Diabetic foot ulcer/open lesions on	N44040D C
			the foot with application of dressing 11. Burns	M1040B, C and M1200I
			11. Burns 12. Chemotherapy	IVI1200I
			13. Oxygen therapy	M1040F
			14. Transfusions	00100C
			15. Dialysis	00100C
			16. Number of days in last 14, Physician	001000
			visit or physician order changes:	O0100J
			- Visits > 1 day and order changes ≥ 4	00600, 00700
			days or	,
			- Visits > 2 days and order changes <u>></u> 2	
			days	
			PHQ-9 score of 10 or greater is	
			considered depressed OR	
			PH-9-OV score of 10 or greater is	D0300 or
			considered depressed	D0600
		ADL		
RUG Level	RN	Score	Requirements	MDS 3.0 Section
			IMPAIRED COGNITION (BIMS)	
			Cognitive Performance Scale score ≥ 3, ADL	
			index < 10. CPS considered 5 MDS items:	
			 Repetition of three words 	C0200
1B2	2+	6-10	2. Temporal Orientation	C0300A, B, C
1B1	0-1	6-10	3. Recall	C0400A, B, C
1A2	2+	4-5	BIMs score range 0-15	C0500
1A1	0-1	4-5	• Score of 9 or less = cognitively	
			impaired	
			• Score of 10 or higher =	
			cognitively intact	
			Two or more Restorative	
			Nursing Programs	



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	IMPAIRED COGNITION				
		ADL			
RUG Level	RN	Score	Requirements	MDS 3.0 Section	
			Cognitive Performance Scale score > 3, ADL		
1B2	2+	6-10	index < 10. CPS considered 5 MDS items:		
1B2	0-1	6-10	1. Coma and ADL self-performance 4	B0100	
1A2	2+	4-5	or 8 OR		
1A1	0-1	4-5	2. Severely impaired decision making	C1000	
			skills		
			3. Two or more of the following		
			indicators are present		
			>0 problem making self	B0700	
			understood	C0700	
			= 1 short term memory problem> 0 impaired decision-making	C1000	
			skills and	C1000	
			One or more of the following		
			severe impairment indicators are		
			present		
			• >=2	B0700	
			• >=2	C1000	
			 Two or more Restorative Nursing 		
			Programs		
			BEHAVIOR PROBLEMS		
		ADL			
RUG Level	RN	Score	Requirements	MDS 3.0 Section	
			Any of the following behaviors occurred on 4		
			or more of the last 7 days, ADL index < 10:		
			1. Hallucinations	E0100A	
BB2	2+	6-10	2. Delusions	E0100B	
BB1 BA2	0-1 2+	6-10 4-5	 Physical behavior symptoms 4 or more days 	E0200A	
BA2 BA1	0-1	4-5 4-5	4. Verbal behavior symptoms 4 or	E0200B	
DAI	0-1	4-5	more	L0200D	
			5. Other behavior symptoms	E0200C	
			6. Rejection of Care 4 or more days	E0800	
			7. Wandering 4 or more days	E0900	
			Two or more Restorative Nursing		
			Programs		



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REDUCED PHYSICAL FUNCTIONING				
ADL			REDUCED FITTSICAL TONCHONING	
RUG Level	RN	Score	Requirements	MDS 3.0 Section
PE2 PE1 PD2 PD1 PC2 PC1 PB2 PB1 PA2 PA1	2+ 0-1 2+ 0-1 2+ 0-1 2+ 0-1	16-18 16-18 11-15 11-15 9-10 9-10 6-8 6-8 4-5 4-5	Any assessment that does not meet any of the prior criteria or had a match in Impaired Cognition or Behavior Problems with an ADL score of 11 or more will classify in Reduced Physical Function. Two or more Restorative Nursing Programs Restorative Nursing Programs Current urinary toileting program**** Range of motion (passive)**** Range of motion (active)**** Splint or brace assistance Bed mobility**** Transfer Walking**** Dressing and/or grooming Eating and/or swallowing Amputation/prostheses care Communication ****Count as one service (H0200C and H0500; O0500A and B; O0500D and F) even if both are provided Restorative Nursing Program Criteria: Measurable objectives and interventions must be documented in the care plan and in the clinical record Evidence of periodic evaluation by licensed nurse during observation period must be present in the clinical record Nurse assistant/aides must be trained in the techniques that promote resident involvement in the activity These activities are carried out or supervised by members of the nursing staff This category does not include exercise groups with more than four residents per supervising helper or caregiver	H0200C**** H0500**** O0500A*** O0500C O0500D*** O0500E O0500F*** O0500G O0500H O0500I O0500J