



COMMISSIONER
Jon Weizenbaum

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To: Nursing Facilities

Subject: Information Letter No. 13-48
Nursing Facility Assessments and Minimum Data Set Assessment Data Accuracy

In 2012, the Texas Department of Aging and Disability Services (DADS) conducted a review of medical necessity (MN) determinations approved by the Texas Medicaid Health Partnership (TMHP) based upon Minimum Data Set (MDS) assessment data. This review revealed errors in the determination of MN for a variety of reasons. One of the reasons identified as causing errors in MN determinations was the accuracy of assessment data drawn from the MDS assessment and clinical record. This letter provides guidance to nursing facilities regarding development of the assessment, entry of MDS data and their development of policies and procedures that will ensure the accuracy of assessment and MDS data.

Title 42, Section 483.20 of the Code of Federal Regulations (CFR) and Title 40, Section 19.801 of the Texas Administrative Code state:

The assessment must accurately reflect the resident's status [42 CFR §483.20 (g) – 40 TAC §19.801 (7)]

A registered nurse must conduct or coordinate each assessment with the appropriate participation of health professionals. A registered nurse must sign and certify that the assessment is completed. Each individual who completes a portion of the assessment must sign and certify the accuracy of that portion of the assessment. [42 CFR §483.20 (h) – 40 TAC §19.801 (8-9)]

The Centers for Medicare and Medicaid Services (CMS) State Operations Manual (SOM) (CMS Publication #100-07 Appendix PP) provides guidance regarding the intent of these federal regulations. According to the SOM the intent of 42 CFR Section 483.20 (items g and h) is to ensure that each resident receives an accurate assessment (i.e., the assessment correctly documents the resident's needs and strengths) by qualified staff (i.e., qualified in care areas appropriate to the resident's needs and knowledgeable about the resident's status, strengths and areas of decline).

Simply put the assessment must be conducted and correctly documented by individuals qualified to address the needs of the resident who are familiar with his/her physical, mental, and psychosocial well-being.

CMS allows the facility to utilize a team approach to conduct the resident assessment. The make-up of the team is based upon the resident's needs, some of which may be discovered during the assessment process. The identified needs of each resident are used to determine the appropriate level of involvement of physicians, nurses, rehabilitation therapists, activities professionals, medical social workers, dietitians, developmental disabilities specialists, and other professionals towards completing an accurate resident assessment.

In accordance with 40 TAC §19.1901, qualifications of team members are subject to applicable federal, state and local laws and professional standards:

The facility must operate and provide services in compliance with all applicable federal, state, and local laws, regulations, and codes, and with accepted professional standards and principles that apply to professionals providing services in such a facility.

Accepted professional standards and principles include the various practice acts and scope of practice regulations in each state, and current, commonly accepted health standards established by national organizations, boards and councils (CMS publication # 100-07, Appendix PP. This includes but is not limited to the requirements of the Texas Board of Nursing regarding the scope of practice for registered nurses (RNs) and licensed vocational nurses (LVNs).

The RN, who may be the facility's Director or Assistant Director of Nursing or a regular or contract employee, must either conduct the assessment or coordinate the team of qualified staff who conduct the assessment. Each individual responsible for a portion of the assessment must sign and certify that their portion of the assessment is complete (to include all necessary parts, elements, or steps). After those individuals complete their portion, the RN must sign and certify that the assessment includes all necessary parts, elements, or steps. By approving and signing the assessment, the RN is certifying that each section was completed by the appropriate person and that the individual is qualified to determine the accuracy of the portion of the resident's assessment he/she completed.

Certification of the accuracy of assessment data and the qualification of staff completing portions of the assessment impacts the accuracy of MN decisions.

Federal regulation and state rule do not address who may or may not enter MDS data. For staff designated by the facility to enter MDS data, it is acceptable to enter assessment data directly, then print and sign a copy. However, it is also acceptable to record the assessment findings manually and transfer them to electronic format. To ensure accurate data entry the facility should develop procedures to check the accuracy of data encoded on the MDS.

Nursing facility policies and procedures should cover the steps involved in developing an assessment whether it is conducted by an RN or by a team coordinated by the RN. This will ensure compliance with federal regulations and state rules. A nursing facility may consider the following questions when developing policies and procedures on conducting a resident assessment:

- What are the qualifications and background of the individual transferring assessment data from a manually completed document to an electronic format for submission to DADS?
- How is it determined which health professionals are appropriate to assess resident needs?
- Are the responsibilities of the RN (and the other individuals involved in the assessment) described completely and accurately?
- Does the policy clearly prohibit the back-dating of assessments?

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Accurate assessment and MDS data impact the facility's ability to appropriately plan an individual's care, as well as insure the accuracy of MN determinations, establish correct payment rate setting and conduct effective quality monitoring. It is critical that the process adheres to federal regulations and state rules and accurately reflects the needs and situation of the nursing facility resident.

If you have questions regarding this letter, please contact DADS at: NF.Policy@dads.state.tx.us.

Sincerely,

[Signature on file]

Lynn W. Blackmore
Director
Center for Policy and Innovation