

# Patient Driven Payment Method

# COMPARE & CONTRAST

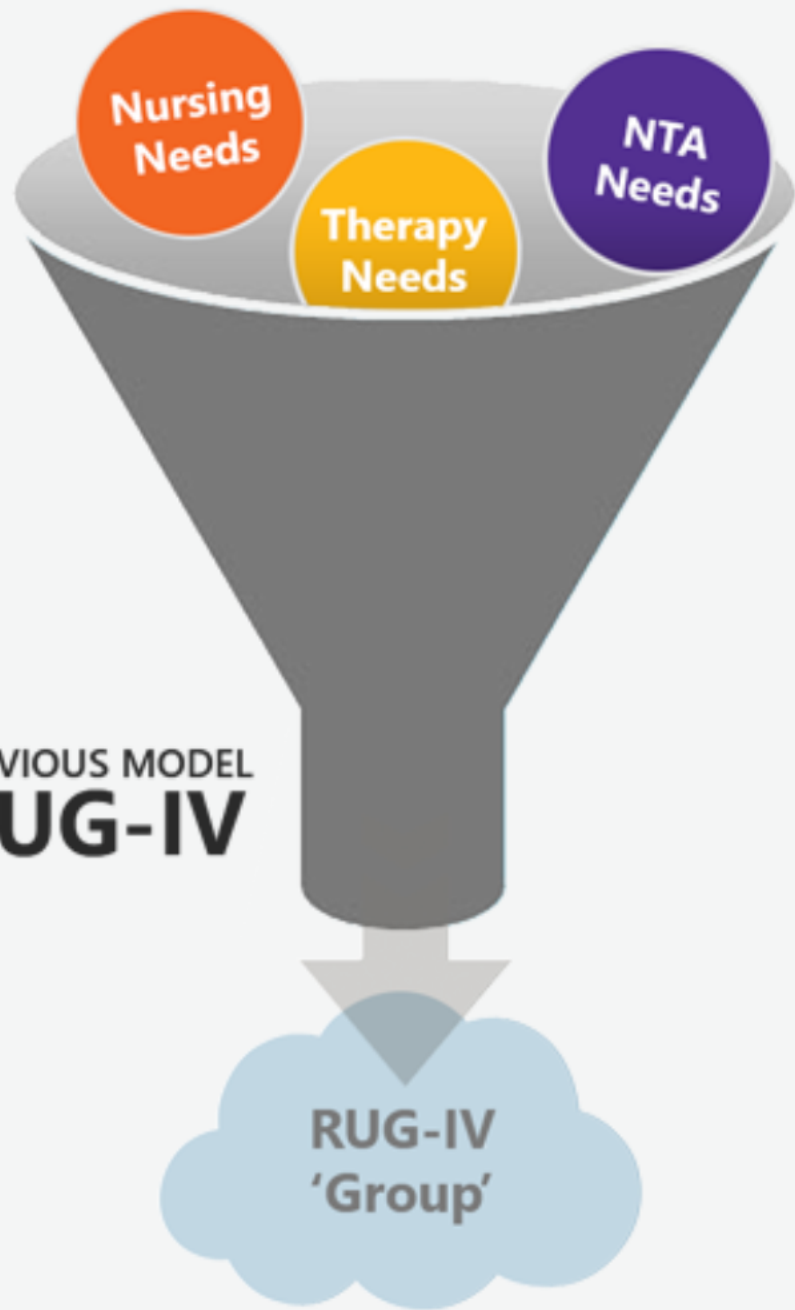
## RUG IV

- Therapy Minutes
- 66 Groups
- Section G for Function Score
- Multiple Assessments (5, 14, 30, 60, 90-day, COT, EOT, SOT etc.)
- 3 Components/2 Case Mix Index
- Constant Rate

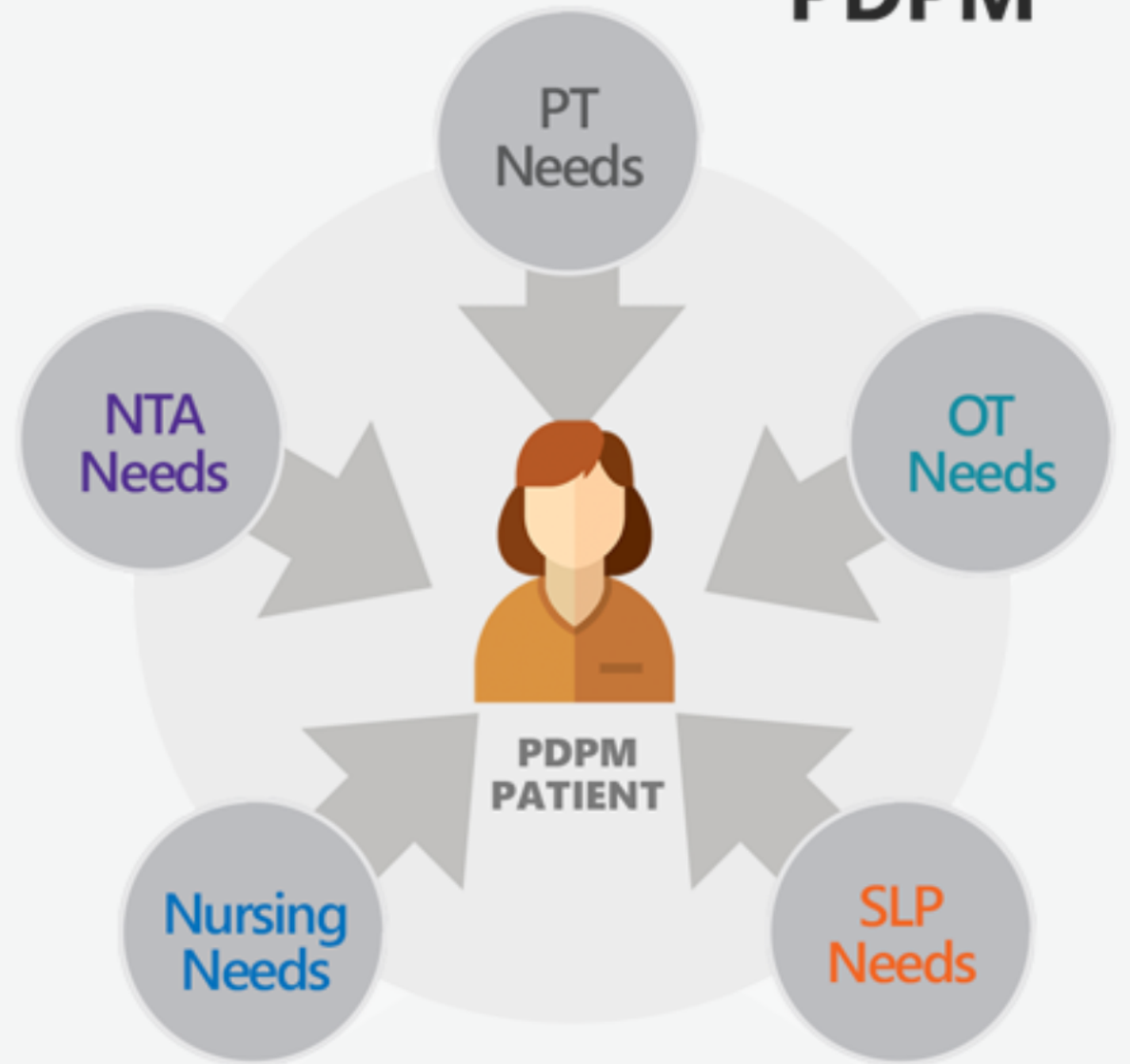
## PDPM

- Patient Characteristics
- 28,000+ Groups
- Section GG for Function Score
- Initial Medicare Assessment, Optional IPA, Discharge Assessment
- 6 components/5 Case Mix Index
- Variable Per Diem Rate

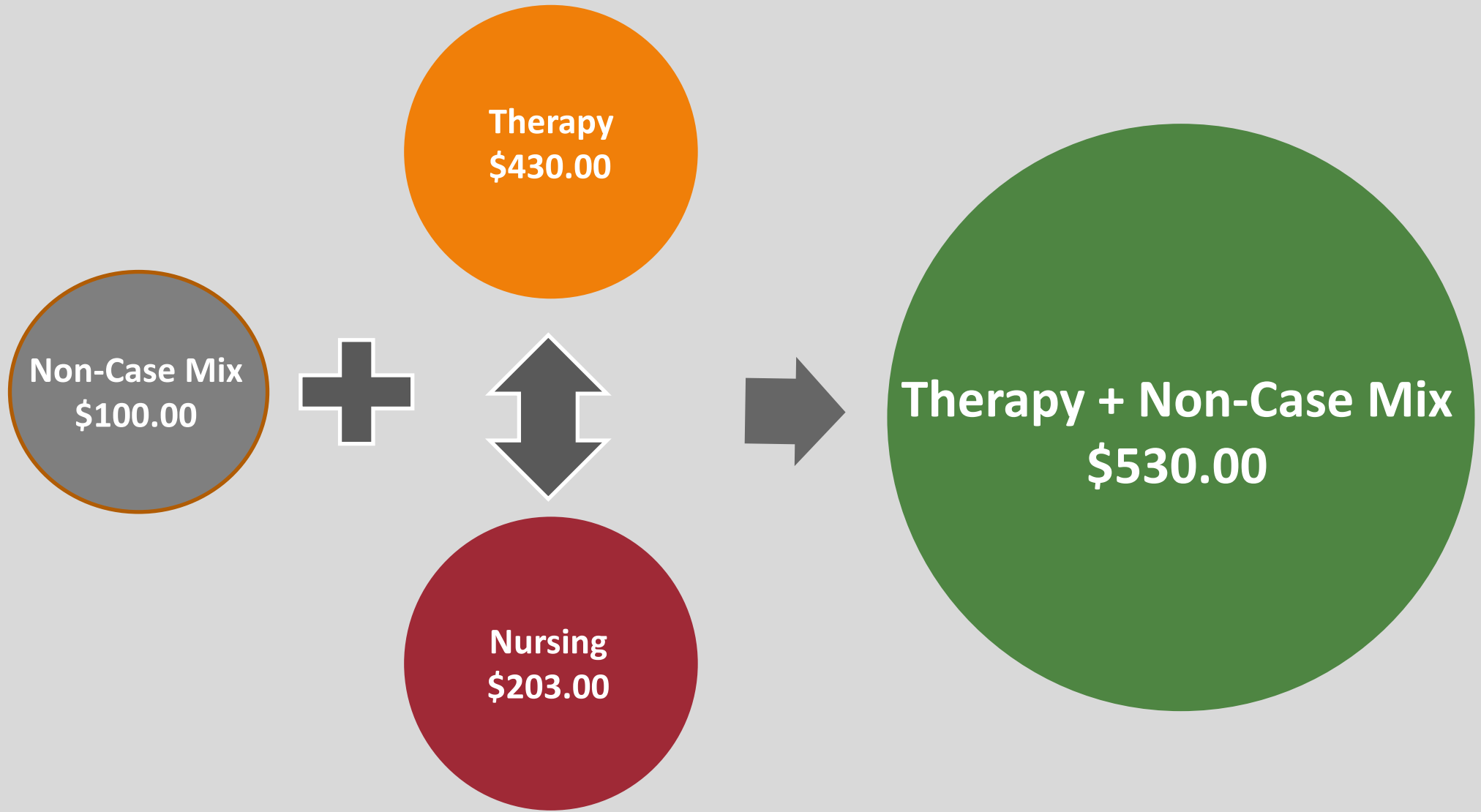
PREVIOUS MODEL  
**RUG-IV**



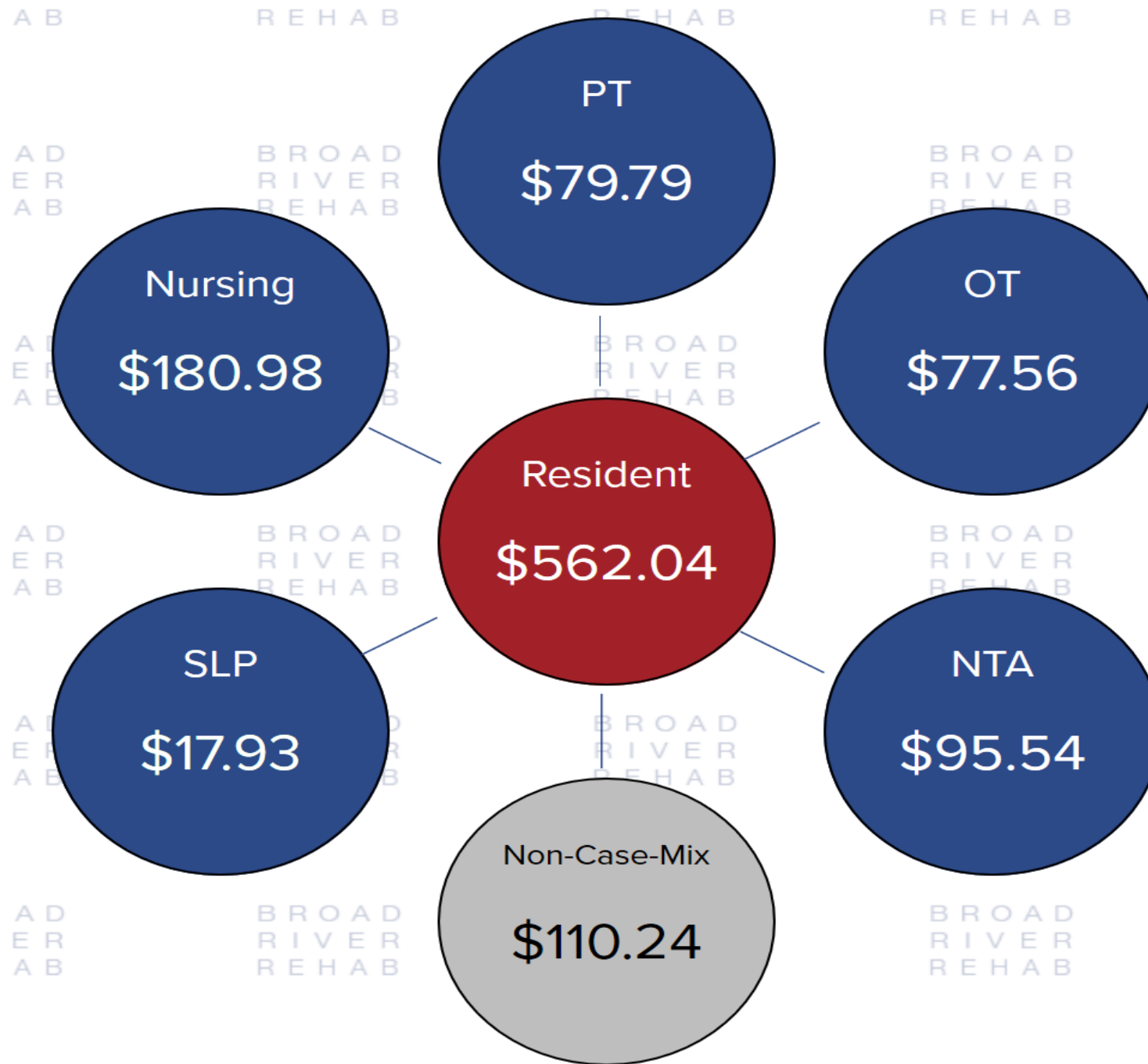
NEW MODEL  
**PDPM**



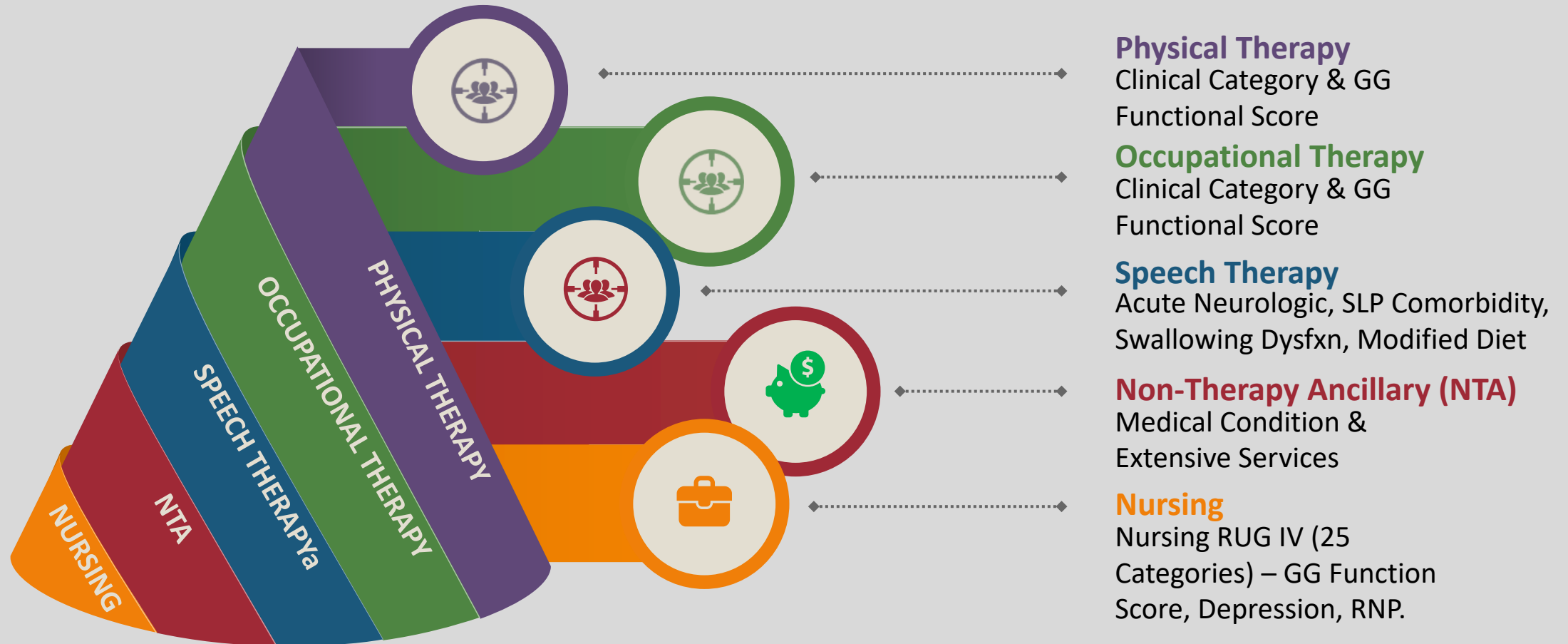
# RUG IV



# PDPM



# Five Case Mix Scores



# Patient Driven Payment Method (PDPM)



**Baseline Rate**

**Medical Diagnosis**

**ICD-10**  
Major Joint Replacement  
Other Orthopedic  
Non-Orthopedic Surgery  
Acute Neurologic  
Medical Management

**Functional Score**

**Section GG**  
Eating, Hygiene,  
Toileting, Bed Mobility,  
Transfers, Walking

**SLP**

Comorbidities, Cognition,  
Mechanical Diet &  
Dysphagia

**NTA**

Capturing Medical  
Complexities and  
services  
Point System 0-12+

**Skilled Nursing Services**

Capturing Skilled  
Services Provided  
Based on 25 nursing  
RUG categories

**Medicare Rate**

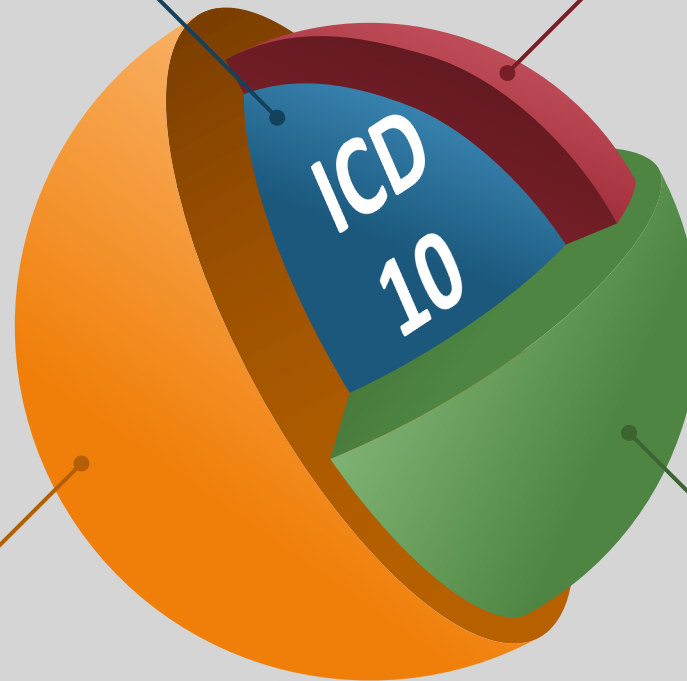
Rate is Determined by  
Day 7 or 8  
ONE Assessment (most  
common)  
NTA Variable Rate  
PT & OT Variable Rate

# Peeling the Layers of a Diagnosis Code

The Primary Reason  
for Skilled Nursing  
Home Services



Active Diagnosis



Specific & Distinct



PDPM Acceptable



MDS CODING FOR ADL	DESCRIPTION	FUNCTIONAL SCORE RANGE
GG 0130A1	Self Care: Eating	0 - 4
GG 0130B1	Self Care: Oral Hygiene	0 - 4
GG 0130C1	Self Care: Toileting Hygiene	0 - 4
GG 0170B1	Mobility: Sit to Lying	0 – 4 (Average of 2 Items)
GG 0170C1	Mobility: Lying to Sitting on Side of Bed	
GG 0170D1	Mobility: Sit to Stand	0 – 4 (Average of 3 Items)
GG 0170E1	Mobility: Chair/ Bed-to-Chair Transfer	
GG 0170F1	Mobility: Toilet Transfer	
GG 0170J1	Mobility: Walk 50 feet with 2 Turns	0 – 4 (Average of 2 Items)
GG 0170K1	Mobility: Walk 150 Feet	

MDS CODING FOR ADL	DESCRIPTION	FUNCTIONAL SCORE
05, 06	Set Up Assist, Independent	4
04	Supervision or Touching Assist	3
03	Partial/Moderate Assist	2
02	Substantial/Maximal Assist	1
01, 07, 09, 10, 88, “-” (missing)	Dependent, Refused, N/A, Not attempted d/t environmental conditions, Not attempted d/t safety/medical conditions <b>Resident CANNOT walk (based on coding for: Walk 10 ft)</b>	0

## PT/OT Component: Case Mix Index Breakdown

Therapy Category	Therapy Functional Score	Case Mix Group	PT Case Mix Index	OT Case Mix Index
Major Joint Replacement/ Spinal Surgery	0 - 5	TA	1.53	1.49
Major Joint Replacement/ Spinal Surgery	6 - 9	TB	1.70	1.63
Major Joint Replacement/ Spinal Surgery	10 - 23	TC	1.88	1.69
Major Joint Replacement/ Spinal Surgery	24	TD	1.92	1.53
Other Orthopedic	0 - 5	TE	1.42	1.41
Other Orthopedic	6 - 9	TF	1.61	1.60
Other Orthopedic	10 - 23	TG	1.67	1.64
Other Orthopedic	24	TH	1.16	1.15
Medical Management	0 - 5	TI	1.13	1.18
Medical Management	6 - 9	TJ	1.42	1.45
Medical Management	10 - 23	TK	1.52	1.54
Medical Management	24	TL	1.09	1.11
Non-Orthopedic Surgery/ Musculoskeletal	0 - 5	TM	1.27	1.30
Non-Orthopedic Surgery/ Musculoskeletal	6 - 9	TN	1.48	1.50
Non-Orthopedic Surgery/ Musculoskeletal	10 - 23	TO	1.55	1.55
Non-Orthopedic Surgery/ Musculoskeletal	24	TP	1.08	1.09

EXTENSIVE SERVICES	<b>EXTENSIVE SERVICE</b>	<b>NFS</b>	<b>CMG</b>	<b>CMI</b>
	Tracheostomy AND Ventilator	0-14	ES3	4.06
	Tracheostomy OR Ventilator	0-14	ES2	3.07
	Isolation/Infection	0-14	ES1	2.93
SPECIAL CARE HIGH	<b>DEPRESSED?</b>	<b>NFS</b>	<b>CMG</b>	<b>CMI</b>
	YES	0-5	HDE2	2.40
	YES	6-14	HBC2	2.24
	NO	0-5	HDE1	1.99
	NO	6-14	HBC1	1.86
SPECIAL CARE LOW	YES	0-5	LDE2	2.08
	YES	6-14	LBC2	1.72
	NO	0-5	LDE1	1.73
	NO	6-14	LBC1	1.43
CLINICALLY COMPLEX	YES	0-5	CDE2	1.87
	YES	6-14	CBC2	1.55
	YES	15-16	CA2	1.09
	NO	0-5	CDE1	1.62
	NO	6-14	CBC1	1.34
	NO	15-16	CA1	0.94
BEHAVIOR SX/ COGNITION	<b># of Restorative Nursing Programs</b>	<b>NFS</b>	<b>CMG</b>	<b>CMI</b>
	2+	11-16	BAB2	1.04
	0-1	11-16	BAB1	0.99
REDUCED PHYSICAL FUNCTION	2+	0-5	PDE2	1.57
	2+	6-14	PBC2	1.22
	2+	15-16	PA2	0.71
	0-1	0-5	PDE1	1.47
	0-1	6-14	PBC1	1.13
	0-1	15-16	PA1	0.66

## SLP Component: Case Mix Index Breakdown

Presence of Acute Neurologic Category, Speech Related Co-Morbidities, Cognitive Impairment	Mechanically Altered Diet/ Swallowing Disorder	Case Mix Group	SLP Case Mix Index
None	Neither	SA	0.68
None	Either	SB	1.82
None	Both	SC	2.67
Any One	Neither	SD	1.46
Any One	Either	SE	2.34
Any One	Both	SF	2.98
Any Two	Neither	SG	2.04
Any Two	Either	SH	2.86
Any Two	Both	SI	3.53
All Three	Neither	SJ	2.99
All Three	Either	SK	3.70
All Three	Both	SL	4.21

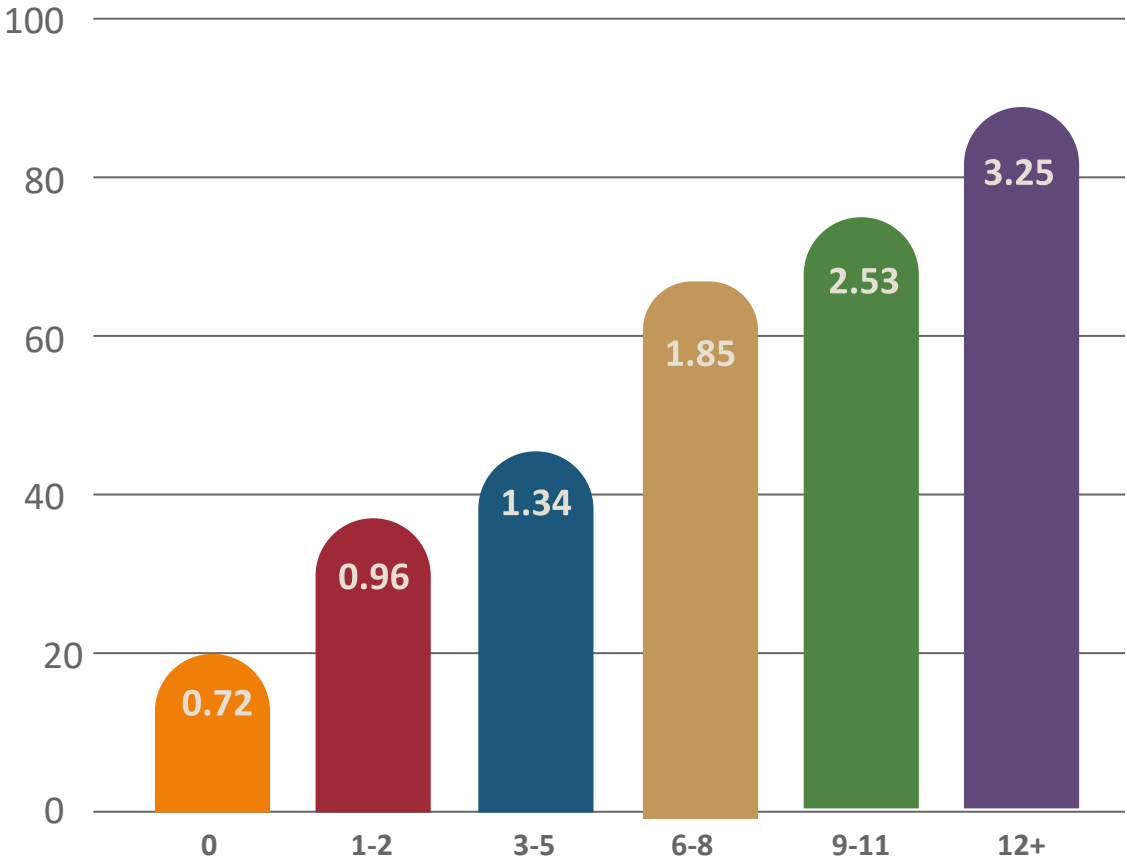
Condition/Extensive Service	MDS Item	Points
HIV/AIDs	N/A (SNF Claim)	8
<b>Section H</b>		
Ostomy	H0100C	1
Intermittent Catheterization	H0100D	1
<b>Section I</b>		
Diabetes Mellitus	I2900	2
Asthma, COPD, Chronic Lung Disease DX	I6200	2
Wound Infection Coded	I2500	2
Multi-Drug Resistant Organism (MDRO) Coded	I1700	1
Morbid Obesity	I8000	1
Malnutrition Coded	I5600	1
Bone/Joint/Muscle Infections/ Necrosis (except Aseptic Necrosis of Bone)	I8000	2
Multiple Sclerosis	I5200	2
Cardio-Respiratory Failure and Shock	I8000	1
Cirrhosis of Liver	I8000	1
Diabetic Retinopathy (Except for Proliferative Diabetic Retinopathy and Vitreous Hemorrhage)	I8000	1
Inflammatory Bowel Disease	I8000	1
Chronic Pancreatitis	I8000	1
End-Stage Liver Disease	I8000	1
Intractable Epilepsy	I8000	1
Respiratory Arrest	I8000	1
Pulmonary Fibrosis and Other Lung Disorders	I8000	1
Complications of Specified Implanted Device or Graft	I8000	1
Lung Transplant Status	I8000	3
Major Organ Transplant Status (except Lung)	I8000	2
Chronic Myeloid Leukemia	I8000	2
Myelodysplastic Syndromes and Myelofibrosis	I8000	1
Endocarditis	I8000	1
Opportunistic Infections	I8000	2
Immune Disorders	I8000	1
Specified Hereditary Metabolic/ Immune Disorders	I8000	1
Disorders of Immunity (Except RxCC97)	I8000	1
Psoriatic Arthropathy and Systemic Sclerosis	I8000	1
Systemic Lupus Erythematosus, Other Connective Tissue Disorders, Inflammatory Spondylopathies	I8000	1

Condition/Extensive Service	MDS Item	Points
Proliferative Diabetic Retinopathy and Vitreous Hemorrhage	I8000	1
Aseptic Necrosis of Bone	I8000	1
Severe Skin Burn or Condition	I8000	1
Narcolepsy & Cataplexy	I8000	1
Cystic Fibrosis	I8000	1
<b>Section K</b>		
Feeding Tube (while a resident)	K0510B2	1
Parenteral IV Feeding: Level High	K0510A2 K0710A2	7
Parenteral IV Feeding: Level Low	K0510A2 K0710A2 K0170B2	3
<b>Section M</b>		
Highest Stage of Unhealed Pressure Ulcer- Stage 4	M0300X1	1
Diabetic Foot Ulcer Coded	M1040B	1
Foot Infection Coded or Other Open Lesion to Foot Coded	M1040A M1040B M1040C	1
<b>Section O</b>		
IV Medication (Post Admit)	O0100H2	5
Isolation (Post Admit)	O0100M2	1
Tracheostomy Care (Post Admit)	O0100E2	1
Suctioning (Post Admit)	O0100D2	1
Transfusions (Post Admit)	O0100I2	2
Radiation (Post Admit)	O0100B2	1
Ventilator/Respirator (Post Admit)	O0100F2	4

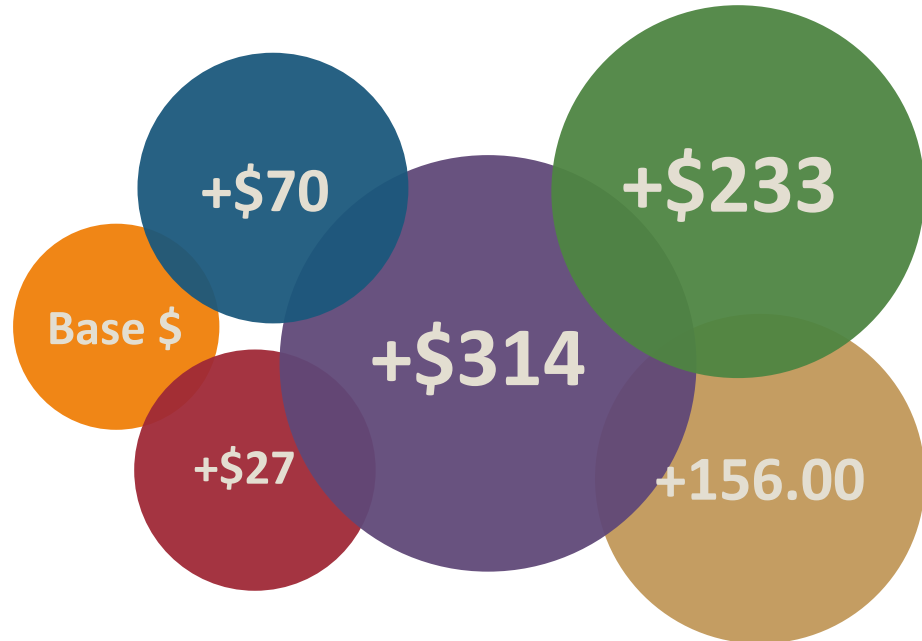
Calculate NTA Score and Use Table Below to Determine NTA Case Mix

NTA Score Range	NTA Case Mix Group	NTA Case Mix Index
12+	NA	3.24
9-11	NB	2.53
6-8	NC	1.84
3-5	ND	1.33
1-2	NE	0.96
0	NF	0.72

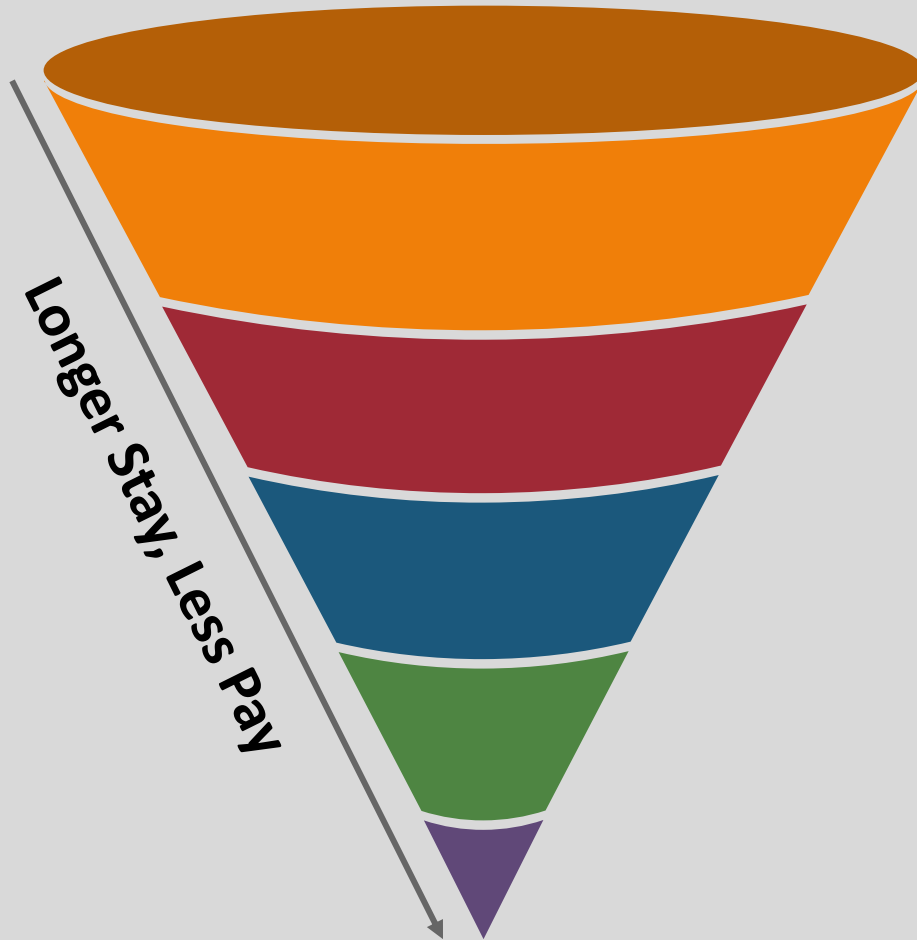
# NTA Case Mix



**Medical complexities, + co-morbidities + skilled services = higher case mix scores.**

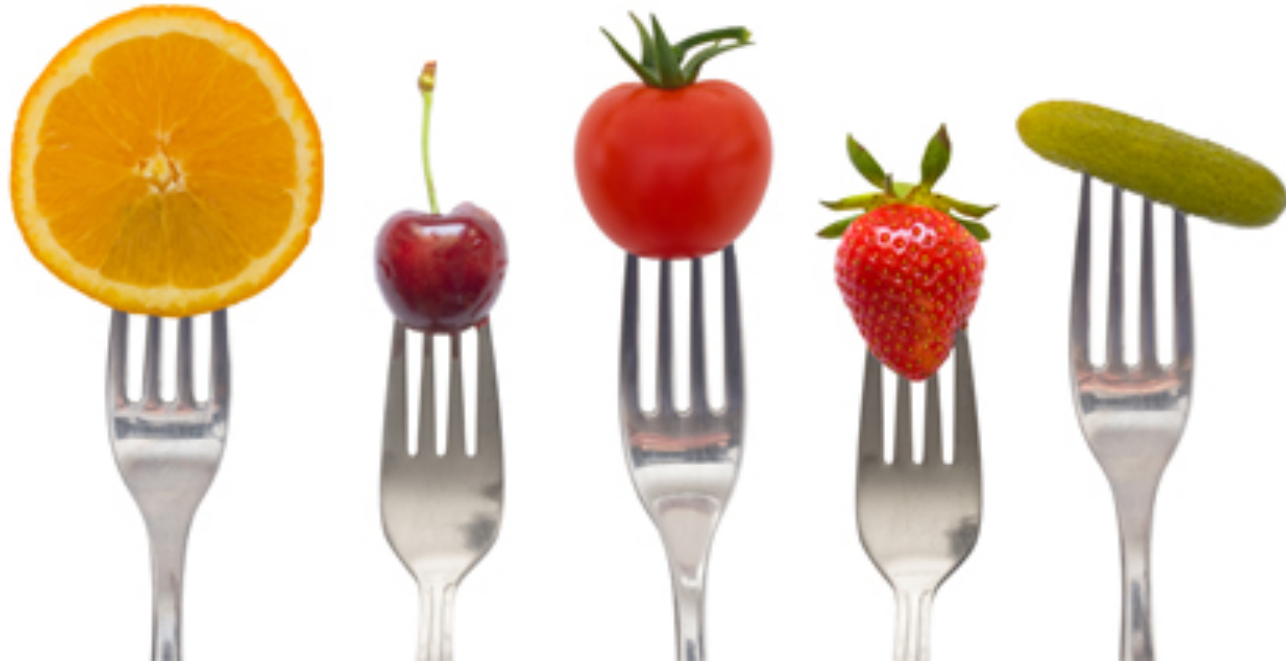


# Variable Per Diem Rate



Day in Stay	NTA Adjustment Factor
1-3	3.00
4-100	1.00

Day in Stay	PT/OT Adjustment Factor
1-20	1.00
21-27	0.98
28-34	0.96
35-41	0.94
42-48	0.92
49-55	0.90
56-62	0.88
63-69	0.86
70-76	0.84
77-83	0.82
84-90	0.80
91-97	0.78
98-100	0.76



# ASK

The Dietitian





## Swallowing Disorder



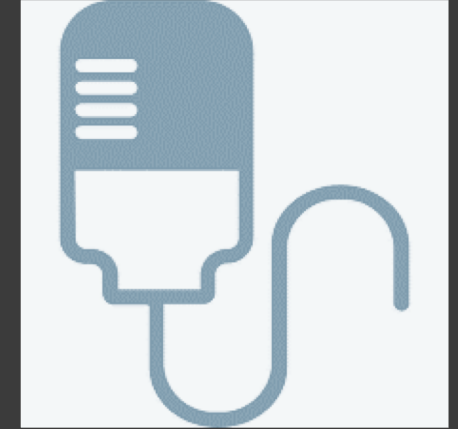
Assessing for signs and symptoms of swallowing disorders



## Diet



Supporting documentation of mechanically altered diets



## Parenteral Feeding



Accurate calculations of percent by artificial route



# Swallowing Disorder

## Section K0100: Swallow Impairment Checklist *(check all that apply)*

\_\_\_ **K0100A:** \_\_\_ **NA**

### Loss of liquids / solids from mouth when eating or drinking

- \_\_\_ Food or liquids spilling from the lips
- \_\_\_ Spitting out food or liquids
- \_\_\_ Food or liquid residue on lips, cheeks, or chin
- \_\_\_ Food or liquids on clothing from oral spillage
- \_\_\_ Drooling food, liquids, saliva during meals
- \_\_\_ Loss of medications from mouth

\_\_\_ **K0100B:** \_\_\_ **NA**

### Holding Food in mouth / cheeks or residual food in mouth after meals

- \_\_\_ Food or liquid residue on or under tongue
- \_\_\_ Food or liquid residue between cheeks and gums
- \_\_\_ Food residue on roof of mouth
- \_\_\_ Patient stops chewing and holds food in mouth
- \_\_\_ Requires oral care to remove food/liquid from mouth
- \_\_\_ Holding medication in mouth

\_\_\_ **K0100C:** \_\_\_ **NA**

### Coughing or choking during meals or when swallowing medications

- \_\_\_ Coughed, gagged, or choked
- \_\_\_ Turned red or changed color during / after swallow
- \_\_\_ Difficulty breathing/shortness of breath at mealtime
- \_\_\_ Change in vocal quality/difficulty talking at mealtime

\_\_\_ **K0100D:** \_\_\_ **NA**

### Complaints of difficulty or pain with swallowing

- \_\_\_ Complaint of food getting stuck
- \_\_\_ Complaint of chewing or swallowing pain
- \_\_\_ Complaint of food being too hard to chew
- \_\_\_ Excessive time to complete meal/poor activity tolerance
- \_\_\_ Swallow difficulty due to ill-fit dentures /mouth sores
- \_\_\_ Complaint of discomfort or esophageal symptoms
- \_\_\_ High EAT-10 score



# Swallowing Disorder

## EAT-10

**0** = No problem    **1** = Mild problem    **2** = Mild to moderate problem    **3** = Moderate problem    **4** = Severe problem

	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
My swallowing problem has caused me to lose weight.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
My swallowing problem interferes with my ability to go out for meals.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Swallowing liquids takes extra effort.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Swallowing solids takes extra effort.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Swallowing pills takes extra effort.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Swallowing is painful.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
The pleasure of eating is affected by my swallowing.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
When I swallow food sticks in my throat.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
I cough when I eat.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Swallowing is stressful.	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
<b>TOTAL</b>	_____				

**Note:** Persons with an EAT-10 score of 3 or higher may have problems swallowing efficiently and safely.  
Persons with an EAT-10 score of 15 or higher are 2.2 times more likely to aspirate.



# Mechanically Altered Diet

## C. Mechanically Altered Diet

Check if Present	MECHANICAL DIET	MDS Item
	MECHANICALLY ALTERED DIET	K0510C2
	NA	

- Identify solids or liquids that “alter the texture or consistency of food to facilitate oral intake”
- Includes thickened liquids
- Includes PO even if not primary method of intake (e.g. “Tube feed plus 4 oz pureed 2x/day”)

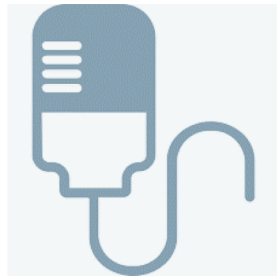
## D. Swallowing Disorder *(check all that apply)*

Check	K0100 : SWALLOW DISORDER	MDS Item
	A. Loss of liquids from the mouth	K0100A
	B. Holding food in mouth/cheeks or residual food in mouth after meals	K0100B
	C. Coughing or choking during meals or swallowing meds	K0100C
	D. Complaints of difficulty or pain w/ swallowing	K0100D
	Z. NONE of the Above	K0100Z

- Document any of A-D if they occurred even once in 7-day lookback
- Interview nursing staff
- SLP may perform swallow eval to ID
- Pain from dentures while eating may be applicable for item D.
- Use Swallowing Impairment checklist and EAT10 as applicable

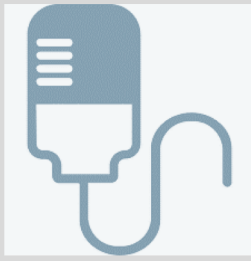
## SUMMARY *(check all that apply)*

Neuro Dx   
  SLP Co-morbidity   
  Mechanically Altered Diet   
  Swallow Disorder   
  NONE



# Parenteral Feeding

<b>K0710. Percent Intake by Artificial Route - Complete K0710 only if Column 1 and/or Column 2 are checked for K0510A and/or K0510B</b>			
<b>1. While NOT a Resident</b> Performed <i>while NOT a resident</i> of this facility and within the <i>last 7 days</i> . Only enter a code in column 1 if resident entered (admission or reentry) <b>IN THE LAST 7 DAYS</b> . If resident last entered 7 or more days ago, leave column 1 blank <b>2. While a Resident</b> Performed <i>while a resident</i> of this facility and within the <i>last 7 days</i> <b>3. During Entire 7 Days</b> Performed during the entire <i>last 7 days</i>	1. While NOT a Resident	2. While a Resident	3. During Entire 7 Days
	↓ Enter Codes ↓		
<b>A. Proportion of total calories the resident received through parenteral or tube feeding</b> 1. 25% or less 2. 26-50% 3. 51% or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>B. Average fluid intake per day by IV or tube feeding</b> 1. 500 cc/day or less 2. 501 cc/day or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# Parenteral Feeding

- Presence of parenteral/IV feedings at K0510A while a resident % of artificial intake at K0710A while a resident.
- HIGH: In order to qualify, the resident must receive 51% or more of total calories by artificial route. (7 NTA Points)
- LOW: If the resident receives 26–50% and 501cc/day at K0710A and K0710B, then the resident would qualify for low-intensity parenteral/IV feedings for three points. (3 NTA Points)
- Accurate calculation by the dietitian during the seven-day look-back period is required.
  1. Review the intake records to determine actual intake through parenteral/IV or tube-feeding routes
  2. Calculate the portion of total calories received through artificial routes, requiring a calculation of total calories by mouth and artificial route.

# Mechanically Altered Diet & Swallowing Disorder



## Downside

- Increase cost for mechanically altered diets.
- This is a focus item during state surveys.
- It increases the risk of malnutrition.
- Increase risk for medical deterioration e.g. choking, pneumonia, etc.
- Conflict between resident right and resident safety.

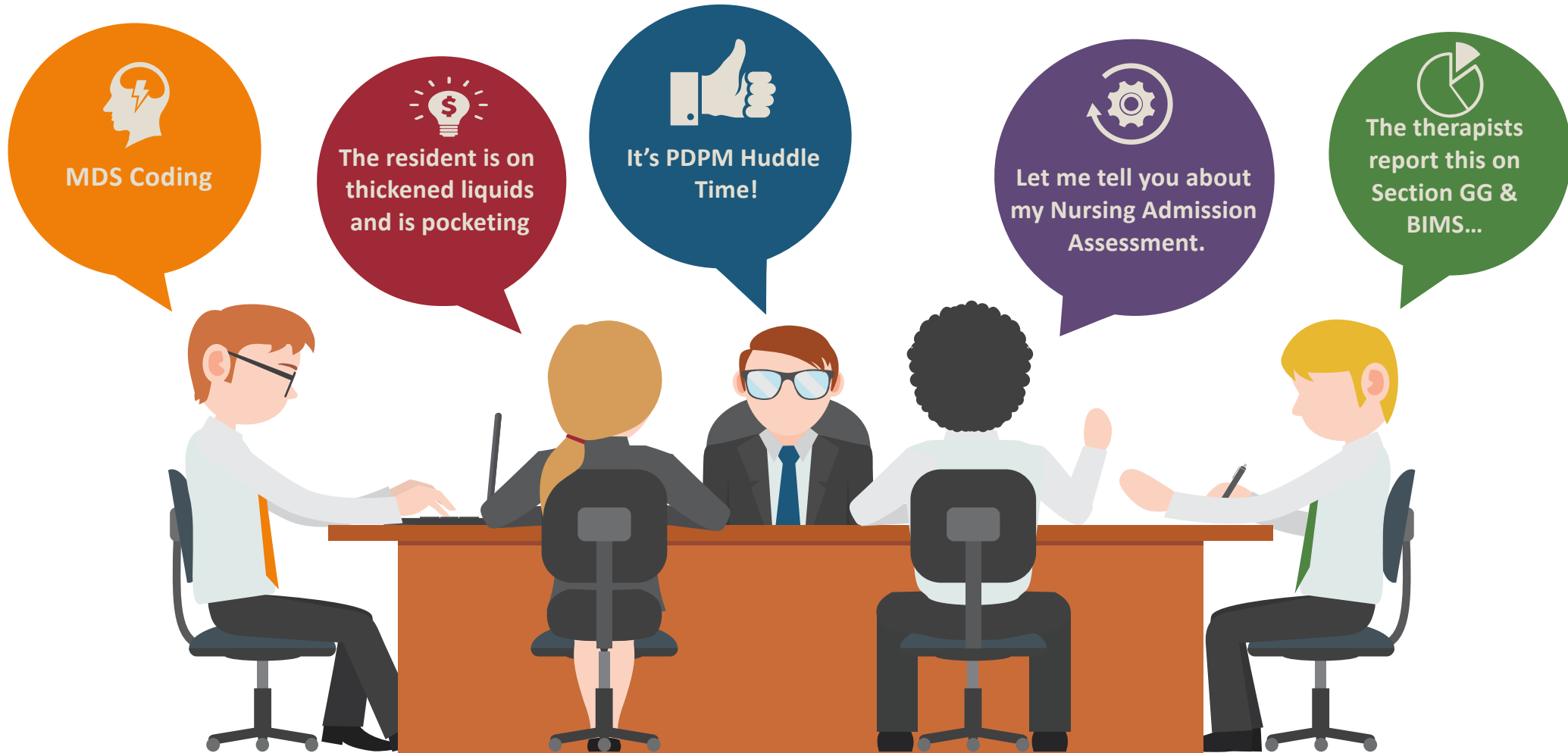
## Risks

- Risk of compliance and errors resulting in harm and F-tags.
- Failure to properly code in the MDS. (Average: **Less than 5%** coded with swallow issues).

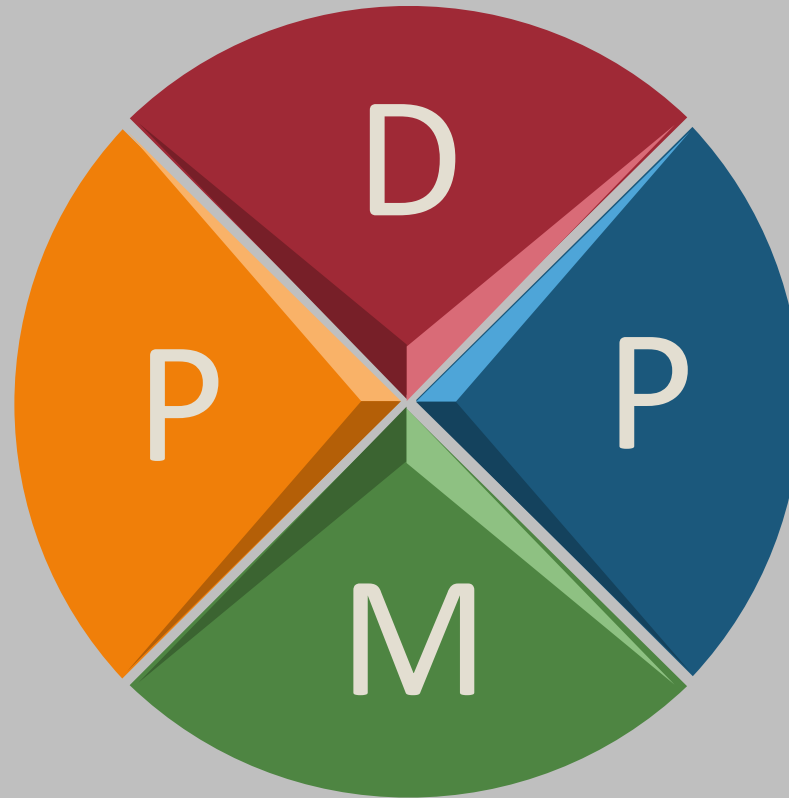
## Upside

- Mechanically altered diet may affect the case mix group in the SLP component and affect rates up to **+\$28 PPD**.
- Swallow Disorder may affect the case mix group and affect rates in the SLP component up **+\$20 PPD**.
- Providing the proper care for the resident and establishing an individualized care plan improves quality of life.

# Collaboration = Accuracy







# Patient Driven Payment Method