

MDS 3.0 RAI MANUAL CHANGES

EFFECTIVE 5/2013

The Centers for Medicare & Medicaid Services (CMS) recently released a revised version of the *MDS 3.0 Resident Assessment Instrument (RAI) User's Manual*.

The changes were mostly clarifications and include:

- **Chapter 2**

- **ADDED:** If a resident goes from Medicare Advantage to Medicare Part A, the Medicare PPS schedule must start over with a 5-day PPS assessment as the resident is now beginning a Medicare Part A stay. The 1st day of Medicare A becomes day 1 for the SNF PPS assessment. **(Pg. 2-45)**

- **Chapter 3**

- Hyperlinks updated

- **Coding Conventions:**

REVISED: There are four date items (A2400C, O0400A6, O0400B6, and O0400C6) that use a dash-filled value to indicate that the event has not yet occurred. For example, if there is an ongoing Medicare stay, then the end date for that Medicare stay (A2400C) has not occurred, therefore, this item would be dash-filled. **(Pg. 3-4)**

- **C0100** Should the BIMS be conducted? **Coding Tips:**

NEW: Includes residents who use American Sign Language (ASL). **(Pg. C-2)**

- **M0210** Unhealed Pressure Ulcers, **Planning for Care:**

REVISED: Pressure ulcer staging is an assessment system that provides a description and classification based on of anatomic depth of soft the extent of visible tissue damage. This tissue damage can be visible or palpable in the ulcer bed. Pressure ulcer staging and also informs expectations for healing times

(Pg. M-4)

- **M0210** Unhealed Pressure Ulcers, **Coding Tips:**

NEW: Oral Mucosal ulcers caused by pressure should not be coded in Section M. These ulcers are captured in item L0200C, Abnormal mouth

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tissue. Mucosal ulcers are not staged using the skin pressure ulcer staging system because anatomical tissue comparisons cannot be made. (Pg. M-5).

REVISED: If a pressure ulcer is surgically **closed** (*replaces “repaired”*) (Pg. M-5).

- **M0300D** Stage 4 Pressure Ulcers **Coding Tips:**

NEW: Cartilage serves the same anatomical function as bone. Therefore, pressure ulcers that have exposed cartilage should be classified as a Stage 4. (Pg. M-15)

- **M0800** Worsening in Pressure Ulcer Status Since Prior Assessment **Coding Tips:**

NOTE: Term ‘numerical staging’ is substituted for worsened, current, and was, as appropriate. (Pg. M-26)

- **M1040H** Moisture associated skin damage MASD:

REVISED: Moisture associated skin damage (**MASD**) is a result of skin damage caused by moisture rather than pressure. It is caused by sustained exposure to moisture which can be caused, for example, by incontinence, wound exudate and perspiration. It is characterized by inflammation of the skin, and occurs with or without skin erosion and/or infection. MASD is also referred to as incontinence-associated dermatitis and can cause other conditions such as intertriginous dermatitis, peri-wound moisture-associated dermatitis, and peri-stomal moisture-associated dermatitis. Provision of optimal skin care and early identification and treatment of minor cases of MASD can help avoid progression and skin breakdown. (pg. M-35)

- **O0100M**

Hyperlinks updated (Pg. O-5)

- **Chapter 5**

5.7 Correcting Errors in MDS Records That Have Been Accepted Into the QIES ASAP System.

- **Modification Request**

REVISED: Effective May 19, a modification may now be used for typographical errors in the following items:

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- A0310: Type of Assessment; where there is no Item Set Code (ISC) change.
- A1600: Entry Date
- A2000: Discharge Date
- **A2300: Assessment Reference Date (ARD)**
- Clinical Items (B0100–V0200C)

NOTE: *The ARD (Item A2300) can be modified when the ARD on the assessment represents a data entry/typographical error. However, the ARD cannot be altered if it results in a change in the look back period and alters the actual assessment timeframe.*

An inactivation request is still required for errors in the following items:

- A0200: Type of Provider
- A0310: Type of Assessment; where there is an ISC change.

(Pg.5-10 &5-11)

[Click here to access the updated manual.](#)