

MN CASE MIX CLASSIFICATION (RUGS-III) SUMMARY SHEET

Domain (Description)	ADL Index	End Splits or Special Requirements	MN RUGS-III Group
<p><b>Extensive Services</b> (ADL Score of 7 or more and at least one of the following ♦.)</p> <ul style="list-style-type: none"> <li>♦ Parenteral/IV – last 7 days [K5a]</li> <li>♦ IV Medication – last 14 days [P1ac]</li> <li>♦ Suctioning – last 14 days [P1ai]</li> <li>♦ Tracheostomy care – last 14 days [P1aj]</li> <li>♦ Ventilator or Respirator – last 14 days [P1al]</li> </ul> <p>(If a resident qualifies for extensive services, but ADL score is 6 or less then resident classifies in Special Care, SSA)</p>	<p>7-18</p> <p>7-18</p> <p>7-18</p>	<p>Has 4 or 5 of the following: qualifies for special care , qualifies for clinically complex, CPS score = 3 or more, IV meds, parenteral/IV</p> <p>Has 2 or 3 of the following: qualifies for special care, qualifies for clinically complex, CPS score = 3 or more, IV meds, parenteral/IV</p> <p>Has 0 or 1 of the following: qualifies for special care, qualifies for clinically complex, CPS score = 3 or more, IV meds, parenteral/IV</p>	<p>SE3</p> <p>SE2</p> <p>SE1</p>
<p><b>Rehabilitation</b></p> <ul style="list-style-type: none"> <li>♦ 5 days or more (15 min per day minimum) in any combination of Speech, Occupational or Physical Therapy in last 7 days . [P1baa, P1bba, P1bca] AND 150 minutes or greater in ) in any combination of Speech, Occupational or Physical Therapy in last 7 days . [P1bab, P1bbb, P1bcb]</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>♦ At least 3 days (15 min per day minimum) in any combination of Speech, Occupational or Physical Therapy in last 7 days . [P1baa, P1bba, P1bca] AND 45 minutes or greater in ) in any combination of Speech, Occupational or Physical Therapy in last 7 days . [P1bab, P1bbb, P1bcb] AND at least 2 nursing rehab services (See page 6 for nursing rehab qualification.)</li> </ul>	<p>17-18</p> <p>14-16</p> <p>10-13</p> <p>4-9</p>	<p>None</p> <p>None</p> <p>None</p> <p>None</p>	<p>RAD</p> <p>RAC</p> <p>RAB</p> <p>RAA</p>
<p><b>Special Care</b> (ADL Score of 7 or more and least one of the following ♦.)</p> <ul style="list-style-type: none"> <li>♦ 2 or more ulcers of any type [Total of M1a, M1b, M1c, M1d &gt;= 2] OR stage 3 or 4 pressure ulcer [M2a]</li> </ul> <p><b>AND</b></p> <p>2 or more skin treatments [M5a or M5b, M5c, M5d, M5e, M5g, M5h]</p>	<p>17-18</p> <p>15-16</p> <p>7-14</p>	<p>None</p> <p>None</p> <p>None</p> <p>(Extensive Service Domain qualifiers with ADL sum of 6 or less are classified as SSA)</p>	<p>SSC</p> <p>SSB</p> <p>SSA</p>

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<p>(Special Care Con't.)</p> <ul style="list-style-type: none"> <li>◆ Feeding Tube [K5b] with at least 51% of total calories [K6a = 3 or 4] OR 26% to 50% through parenteral/enteral intake [K6a = 2] and fluid intake is 501cc or more per day [K6b &gt;= 2]</li> <li><b>AND</b></li> <li>aphasia [I1r]</li> <li>◆ Surgical wounds [M4g] OR open lesions other than ulcers, rashes, cuts [M4c]</li> <li><b>AND</b></li> <li>surgical wound care [M5f] OR application of dressings [M5g] OR application of ointments [M5h]</li> <li>◆ Respiratory therapy for 7 days [P1bda = 7]</li> <li>◆ Cerebral Palsy [I1s] AND ADL score of 10 or more</li> <li>◆ Fever [J1h]</li> <li><b>AND</b></li> <li>vomiting [J1o] OR weight loss [K3a] OR Feeding Tube [K5b] with at least 51% of total calories [K6a = 3 or 4] or 26% to 50% through parenteral/enteral intake [k6a = 2] and fluid intake is 501 cc or more per day [K6b &gt;= 2] OR pneumonia [I2e] OR dehydrated [J1c]</li> <li>◆ Multiple sclerosis [I1w] AND ADL score of 10 or more</li> <li>◆ Quadriplegia [I1z] AND ADL score of 10 or more</li> <li>◆ Radiation therapy [P1ah]</li> <li>◆ Extensive Services Qualifiers with ADL score of 6 or less</li> <li>◆ If a resident qualifies for Special Care, but the ADL score is 6 or less then resident classifies in Clinically Complex, CA1 or CA2</li> </ul>			

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<p><b>Clinically Complex</b> (At least one of the following ♦.)</p> <ul style="list-style-type: none"> <li>♦ Feeding Tube [K5b] with at least 51% of total calories [K6a = 3 or 4] OR 26% to 50% through parenteral/enteral intake [K6a = 2] and fluid intake is 501 cc or more per day [K6b &gt;= 2]</li> <li>♦ Comatose [B1 = 1] AND not awake [N1a, N1b and N1c all = 0] AND ADL dependent [G1aa, G1ba, G1ha and G1ia all = 4 or 8]</li> <li>♦ Septicemia [I2g]</li> <li>♦ Burns – second or third degree [M4b]</li> <li>♦ Dehydration [J1c]</li> <li>♦ Hemiplegia/hemiparesis [I1v] AND ADL score of 10 or more</li> <li>♦ Internal Bleeding [J1j]</li> <li>♦ Pneumonia [I2e]</li> <li>♦ Chemotherapy [P1aa]</li> <li>♦ Dialysis [P1ab]</li> <li>♦ Physician order changes on 4 or more days [P8 &gt;= 4] in last 14 days AND physician visits on one or more days [P7 &gt;= 1] in last 14 days</li> <li>♦ Physician order changes on 2 or more days [P8 &gt;= 2] in last 14 days AND physician visits on two or more days [P7 &gt;= 2] in last 14 days</li> <li>♦ Diabetes [I1a] AND injections on 7 days [O3 = 7] AND physician order changes on 2 or more days [P8 &gt;= 2] in last 14 days</li> <li>♦ Transfusions [P1ak]</li> <li>♦ Oxygen therapy [P1ag]</li> <li>♦ Infection on foot [M6b] OR open lesion on foot [M6c] and application of dressings to foot [M6f]</li> <li>♦ Special Care qualifiers with ADL score of 6 or less, CA1 or CA2</li> </ul>	17-18	Signs of Depression (See page 6 for Depression definition)	CC2
	17-18	No Depression	CC1
	12-16	Signs of Depression (See page 6 for Depression definition)	CB2
	12-16	No Depression	CB1
	4-11	Signs of Depression (See page 6 Depression definition)	CA2
4-11	No Depression	CA1	
<p><b>Impaired Cognition</b></p> <ul style="list-style-type: none"> <li>♦ Cognitive Performance Scale score of 3 or greater AND ADL score of 10 or less. (See pages 7 and 8 for definition of Cognitive Performance Scale)</li> </ul>	6-10	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	IB2
	6-10	No Nursing Rehabilitation services	IB1
	4-5	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	IA2
	4-5	No Nursing Rehabilitation	IA1

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<p><b>Behavior Only</b> (Resident must have an ADL score of 10 or less.)</p> <ul style="list-style-type: none"> <li>◆ Wandering Occurred on 4 or more days [E4aa = 2 or more]</li> <li>◆ Verbal abusive behavior occurred on 4 or more days [E4ba = 2 or more]</li> <li>◆ Physically abusive behavior occurred on 4 or more days [E4ca = 2 or more]</li> <li>◆ Socially inappropriate/disruptive behavior occurred on 4 or more days [E4da = 2 or more]</li> <li>◆ Resident resisted care on 4 or more days [E4ea = 2 or more]</li> <li>◆ Hallucinations [J1i]</li> <li>◆ Delusions [J1e]</li> </ul>	6-10	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	BB2
	6-10	No Nursing Rehabilitation services	BB1
	4-5	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	BA2
	4-5	No Nursing Rehabilitation services	BA1
<p><b>Physical Functioning</b></p> <p>No clinical conditions used</p>	16-18	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	PE2
	16-18	No Nursing Rehabilitation services	PE1
	11-15	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	PD2
	11-15	No Nursing Rehabilitation services	PD1
	9-10	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	PC2
	9-10	No Nursing Rehabilitation services	PC1
	6-8	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	PB2
	6-8	No Nursing Rehabilitation services	PB1
	4-5	2 or more Nursing Rehabilitation Services (See page 6 for list of nursing rehab services)	PA2
4-5	No Nursing Rehabilitation services	PA1	
<p><b>Other Classifications</b></p> <p>Default for New Admissions with a stay of less than 14 days</p>	N/A	Facility makes an annual election for all residents with less than 14 day stay	DDF

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(Other Classifications Con't)			
Penalty for an assessment that is completed and/or submitted more than 7 days late.	N/A	Penalty is effective from the date assessment was due until the first on the month following submission to the state.	BC1

<b>ACTIVITIES OF DAILY LIVING (ADL) Scoring</b>			
ADL	Column A Self-Performance	Column B Staff Support	ADL Score
Bed Mobility (G1a), Transfer (G1b), and Toilet Use (G1i)	0 - Independent or 1 - Supervision	Any Score	1
	2 - Limited Assistance	Any Score	3
	3 - Extensive Assistance or 4 - Total Dependence or 8 - Activity Did Not Occur	2 - One person physical Assist	4
	3 - Extensive Assistance or 4 - Total Dependence or 8 - Activity Did Not Occur	3 - Two person physical Assist	5
	Parenteral/IV (K5a) is checked	N/A	3
Eating (G1h)	Tube Feeding (K5b) is checked AND 51% + total calories (K6a = 3 or 4) or 26% to 50% of total calories (K6a = 2) and fluid intake is 501+cc per day (K6b = 2,3,4 or 5	N/A	3
	0 - Independent or 1 - Supervision	N/A	1
	2 - Limited Assistance	N/A	2
	3 - Extensive Assistance or 4 - Total Dependence or 8 - Activity Did Not Occur	N/A	3

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### Depression Definition

If three or more of the following are checked a resident is considered depressed:

Coded either: 1 (Indicator of this type exhibited up to five days a week OR  
2 (Indicator of this type exhibited daily or almost daily (6, 7 days a week))

- a. [E1a] Resident made negative statements – e.g. *“Nothing matters, Would rather be dead; What’s the use; Regrets having lived so long; Let me die”*
- b. [E1b] Repetitive questions – e.g. *“Where do I go?; What do I do?”*
- c. [E1c] Repetitive verbalizations – e.g. calling out for help, *(God help me”)*
- d. [E1d] Persistent anger with self or others – e.g. easily annoyed, anger at placement in nursing home, anger at care received.
- e. [E1e] Self deprecation – e.g. *‘I am nothing; I am no use to anyone”*.
- f. [E1f] Expressions of what appear to be unrealistic fears – e.g. fear of being abandoned, left alone, being with others.
- g. [E1g] Recurrent statements that some thing terrible is about to happen – e.g. believes he or she is about to die, have a heart attack.
- h. [E1h] Repetitive health complaints – e.g. persistently seeks medical attention, obsessive concern with body functions.
- i. [E1i] Repetitive anxious complaints/concerns (non-health related) e.g. persistently seeks attention/reassurance regarding schedules, meals, laundry, clothing, relationship issues
- j. [E1j] Unpleasant mood in morning
- k. [E1k] Insomnia/change in usual sleep pattern
- l. [E1l] Sad, pained, worried facial expressions – e.g. furrowed brows
- m. [E1m] Crying, tearfulness
- n. [E1n] Repetitive physical movements – e.g. pacing, hand wringing, restlessness, fidgeting, picking
- o. [E1o] Withdrawal from activities of interest – e.g. no interest in long standing activities or being with family/friends
- p. [E1p] Reduced social interaction

### Nursing Rehabilitation Services

2 or more Nursing Rehabilitation Services for at least 6 days per week

- a. Passive range of motion [P3a] OR active range of motion [P3b]
- b. Bed mobility training [P3d] OR walking training [P3f]
- c. Splint or brace assistance [P3c]
- d. Transfer training [P3e]
- e. Dressing or grooming training [P3g]
- f. Eating or swallowing training [P3h]
- g. Amputation/prosthesis care [P3i]
- h. Communication training [P3j]

Note: No count of days required for:

- i. Any scheduled toileting plan [H3a] OR bladder retraining program [H3b]

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### Cognitive Performance Scale (CPS)

Step 1 - Determine the extent of *impairment*:

Short term memory coded 1 [B2a = '1'] count 1 point

Cognitive skills for daily decision making coded 1 or 2 [B4 = '1' or '2'] count 1 point

Making self understood coded 1, 2, or 3 [C4 = '1', '2', or '3'] count 1 point

Step 2 - Total *impairment* points

Step 3 - Determine the extent of *severe impairment*:

Cognitive skills for daily decision making coded 2 [B4 = '2'] count 1 point

Making self understood coded 2, or 3 [C4 = '2', or '3'] count 1 point

Step 4 - Total *severe impairment* points

Step 5 - Determine if resident meets the definition of being in a coma:

If Comatose [B1 = '1']

**AND**

Not awake Morning [N1a], Afternoon [N1b], Evening [N1c] all not checked;

**AND**

Totally ADL dependent Bed Mobility [G1aa], Transfer [G1ba], Eating [G1ha], Toilet use [G1ia] all scored '4' or '8'

Then resident is defined as being in a coma.

Step 6 - Compute Cognitive Performance Scale Scores as follows:

CPS = 6	Resident is in a coma AND [B4 = blank or unknown (value "--)]. <b>OR</b> Cognitive skills are severely impaired [B4 = '3'] AND the resident is totally dependent in Eating [G1hA = '4' or '8']
CPS = 5	Cognitive skills are severely impaired [B4 = '3'] AND Eating less than totally dependent [G1hA = '0', '1', '2' or '3']
CPS = 4	Total <i>impairment</i> points of at least 2 AND total <i>severe impairment</i> points of 2.
CPS = 3	Total <i>impairment</i> points of at least 2 AND total <i>severe impairment</i> points of 1.
CPS = 2	Total <i>impairment</i> points of at least two.
CPS = 1	Total <i>impairment</i> points of one.
CPS = 0	No impairment count.