

Summary of March 31, 2010 Minnesota MDS 3.0 Vendor Call

1. **Section S** – Minnesota will not have a Section S in the MDS 3.0.

2. **RUG-III and MDS 3.0** – Minnesota will compute the current RUG-III, 34 group case mix classification using the MDS 3.0 assessment item sets. Minnesota will use the logic provided by CMS in the RUG-III MDS 3.0 mapping specifications. CMS has published a RUG-III 3.0 Version converter DLL on the CMS MDS 3.0 technical specifications web page. The logic version for the RUG-III, 34 Grouper is 5.20. Current Minnesota RUG-III CMI's will be used.

Minnesota will continue to use the RUG-III, 34 group RUG's for case mix payment for medical assistance and private pay nursing home residents until at least October 1, 2011.

3. **RUG-IV** - Minnesota will also compute a RUG-IV, 48 group version (set F01), with index maximization, effective 10/1/2010. The logic version used will be Version 1.00 or the most current version available on 10/1/2010. The CMI's to be used are to be determined.

In addition to the 48 groups, Minnesota will continue with the two Minnesota specific groups, the short stay rate group for facilities that elect the short stay option for new admissions and the penalty rate group for assessment that are either completed or submitted more than seven days past the CMS established due date. These groups are calculated by Minnesota Department of Health after an assessment has been submitted to the MDS system.

MDS 3.0 fields Z0200A (State Medicaid Billing) and Z0200B (RUG Version Code) and Z0250A (Alternative State Medicaid Billing) and Z0250B (RUG Version Code) will be populated. Exactly which of above fields that will be used for RUG-III will determined later this spring. The CMS and state edits will check these fields.

MDH will compute both the RUG-III and RUG-IV groups and provide that information on Minnesota Case Mix Validation report.

4. **Item Sets (Assessment forms)** – Minnesota will require the use of the standard CMS published item sets for OBRA and PPS (Medicare) purposes. For case mix the following item sets will be used:

Comprehensive - Admission, Annual, Significant Change in Status, Significant Correction to prior full assessment

Non-comprehensive – Quarterly, Significant correction to prior quarterly assessment (No additional items will be added to the quarterly item set).

Discharge Assessment – Separately or may be combined with another OBRA or PPS assessment

Tracking – Entry (re-entry) and death in facility records

5. Validation Reports and Case Mix Classification Notices – The Minnesota Case Mix Validation report and Case Mix classification notices will continue to be posted on the state reports page, accessed thru the MDS submission web page. It is critical that nursing homes are able to access both the federal validation report, to be in CASPER, and the state validation report. The validation reports contain important information concerning the status of assessment that has been submitted at the federal and state level. Facilities may need to take corrective action on certain assessments used for case mix before payment can be made.

Nursing homes have three days from the time the classification notices are posted to print and distribute the classification notices. Nursing homes may sign up for an e-mail alert that tells them that classification notices have been posted.