

Bulletin Number: MSA 20-70

Distribution: Nursing Facilities, County Medical Care Facilities, Hospital Long-Term Care Units, State Veterans' Homes, Ventilator-Dependent Care Units

Issued: December 1, 2020

Subject: Nursing Facility Minimum Data Set (MDS) Submission

Effective: January 1, 2021

Programs Affected: Medicaid

This bulletin is necessitated by Finding 1 in the Office of the Auditor General (OAG) performance audit of the Michigan Department of Health and Human Services (MDHHS) administration of Medicaid nursing facility rate setting, cost reporting and cost settlement processes, titled "Administration of Medicaid Payments to Nursing Facilities for Long-Term Care (LTC)." A copy of the OAG performance audit is located at audgen.michigan.gov >> Completed Projects >> 2020.

In response to the OAG performance audit, beginning January 1, 2021, MDHHS will require Medicaid-certified nursing facilities to complete and submit specific MDS item set fields associated with Patient Driven Payment Model (PDPM) on all Omnibus Budget Reconciliation Act (OBRA) nursing home comprehensive (NC) and quarterly (NQ) MDS assessment submissions for each resident regardless of payer sources. This includes sections GG0130, GG0170, I0020, J2100 and Z0200A and any other MDS items necessary to determine a PDPM score.

Michigan nursing facilities should follow the Resident Assessment Instrument (RAI) User's Manual guidance for coding these items. The RAI manual can be accessed at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual>.

For additional assistance or questions on how to complete the MDS, please contact Haideh Najafi at the Michigan Department of Licensing and Regulatory Affairs at NajafiH@michigan.gov.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments to Michael Daeschlein via e-mail at DaeschleinM@michigan.gov.

Please include "Nursing Facility Minimum Data Set (MDS) Submission" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

Manual Maintenance

Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit questions, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Providers may phone toll-free 800-292-2550.

Approved

A handwritten signature in black ink, appearing to read "K. Massey", followed by a horizontal line extending to the right.

Kate Massey, Director
Medical Services Administration