Reimbursement and Regulatory

MDS
ARD (Assessment Reference Date) Selection,
MDS Completion,
MDS Transmission (Submission)
Timeframes

We are 3 days into **PDPM (Patient Driven Payment Model)** and we are still here! As discussed on the Freaky Friday Webinar last week, just breathe and create a process for you and your staff to complete MDS assessments and related evaluations that is conducive to optimal MDS accuracy and MDS compliance.

The **Harmony Healthcare International (HHI)** strategy (process) for our monthly clients is to wait to transmit until the **Regional Harmony Healthcare International (HHI) Specialist** reviews the MDS Assessments. This system provides a safeguard against submitting inaccurate MDS Assessments.

The most common response from SNFs across the country is "we do not want to be late" so, the team transmits the MDS assessments sans an outsider reviewing. Typically, this is a product of a misunderstanding of the MDS Time frames. It can be confusing because when one references a late MDs assessment, there are multiple components to being late.

Globally speaking, MDS components and timeframes:

MDS	Timeframe
ARD Selection	Within Assessment Window
MDS Completion	14 Days form the ARD
MDS Transmission	14 Days from the MDS Completion

Let's dig a little deeper into each component.

1.) ARD (Assessment Reference Date) Selection

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Per the RAI User's Manual, each Medicare Assessment requires the selection of the ARD **within the ARD Window**. This applies to both scheduled and unscheduled assessments. The facility is required **to set the ARD on the MDS form itself** or in the **facility software** within the appropriate timeframe of the assessment. Timeliness is defined by selecting an ARD within the prescribed ARD Window.

Defined days within which the ARD must be set.

- Timeliness of the PPS assessment is defined by **selecting an ARD within the prescribed ARD window.**
- The facility is required to set the ARD **on the MDS form itself or in the facility software within the appropriate timeframe** of the assessment type being completed.

2.) MDS Completion

The timelines for **OBRA Assessment** completion include the following highlights:

- The requirement for **Quarterly Assessments** is that they be completed **within 92 days** of the ARD of the previous OBRA assessment.

- **Annual Assessments** must be **completed within 92 days** of the previous assessment and **within 366 days of the last comprehensive assessment**, either an annual assessment or a significant change in status assessment.

3.) MDS Transmission (Submission)

Transmitting Data: Per the RAI User's Manual, submission files are transmitted to the QIES ASAP system using the CMS wide area network. Providers must transmit all sections of the MDS 3.0 required for their State-specific instrument, including the Care Area Assessment (CAA) Summary (Section V) and all tracking or correction information.

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Transmission requirements apply to all MDS 3.0 records used to meet both federal and state requirements.

Care plans are not required to be transmitted.

- **Assessment Transmission:** Comprehensive assessments must be **transmitted** electronically within **14 days of the Care Plan Completion Date** (V0200C2 + 14 days). All other MDS assessments must be submitted within 14 days of the MDS Completion Date (Z0500B + 14 days).

- **Tracking Information Transmission:** For Entry and Death in Facility tracking records, information must be transmitted within **14 days of the Event Date** (A1600 + 14 days for Entry records and A2000 + 14 days for Death in Facility records).

Submission Time Frame for MDS Records Type of Assessment/Tracking	Primary Reason (A0310A)	Secondary Reason (A0310B)	Entry/Discharge Reporting (A0310F)	Final Completion or Event Date	Submit By
Admission Assessment	01	All values	10, 11, 99	V0200C2	V0200C2 + 14
Annual Assessment	03	All values	10, 11, 99	V0200C2	V0200C2 + 14
Significant Change in Status Assessment	04	All values	10, 11, 99	V0200C2	V0200C2 + 14
Significant Correction to Prior Comprehensive Assessment	05	All values	10, 11, 99	V0200C2	V0200C2 + 14

Submission Time Frame for MDS Records (continued) Type of Assessment/Tracking	Primary Reason (A0310A)	Secondary Reason (A0310B)	Entry/Discharge Reporting (A0310F)	Final Completion or Event Date	Submit By
Quarterly Review Assessment	02	All values	10, 11, 99	Z0500B	Z0500B +14
Significant Correction Prior Quarterly Assessment	06	All values	10, 11, 99	Z0500B	Z0500B + 14
PPS Assessment	99	01 or 08	10, 11, 99	Z0500B	Z0500B + 14
Discharge Assessment	All values	All values	10 or 11	Z0500B	Z0500B + 14
Death in Facility Tracking	99	99	12	A2000	A2000 + 14
Entry Tracking	99	99	01	A1600	A1600 + 14
Correction Request (Modification or Inactivation)	N/A	N/A	N/A	X1100E	X1100E + 14

For a final perspective on this subject matter:

A patient admitted on October 1, 2019 allows you up to October 28th to transmit the MDS.

The Harmony Healthcare International (HHI) team is working around the clock to meet your needs. We are supremely grateful for your business and loyalty during this time of change. We hope to see you at our annual symposium November 7th and 8th at the Encore Boston Harbor.

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