## MDS 3.0 Software Vendor Conference Call Notes
### October 2015 Release
Thursday, February 5, 2014
2:00 p.m. - 3:00 p.m. ET

**Welcome.............................................................................................. Karen Edrington, DQSAS, Host**

- Welcome to the CMS MDS Software Developer / Vendor call. The purpose of this call is to provide information to MDS Software Developers and Vendors who are creating or have created software for MDS providers. The purpose of this call is to provide information on MDS updates that will be effective October 1, 2015.

- If you do not have the agenda for this call, it may be found at https://www.qtso.com under the Vendors link on the left navigation bar then the MDS link in the navigation bar at the top of the page.

**ICD-10 Update ........................................................................................ Karen Edrington, DQSAS**

- The transition to ICD-10 is scheduled for October 1, 2015. If you need more information please refer to the information on the CMS Website: http://www.cms.gov/Medicare/Coding/ICD10/index.html.

**Item Set Update....................................................................................... Karen Edrington, DQSAS**

- Version 1.13.0 of the MDS item set with an effective date of October 1, 2015, was posted to the MDS 3.0 Technical Information page of the CMS website. A footnote was changed on this item set for C1300 Signs and Symptoms of Delirium. The new footnote reads: "Adapted from Confusion Assessment Method. © 1988, 2003, Hospital Elder Life Program, LLC. Not to be reproduced without permission. All rights reserved."

- This item set can be considered final.

**Data Submission Specification Updates – October 2015 ........... John Jackson, General Dynamics**
- A new version (V1.15.0) of the MDS Data Specifications was posted on the MDS 3.0 Technical Information page in November 2014. These specifications go into effect on October 1, 2015. Therefore, the item SPEC_VRSN_CD will begin accepting the value of 1.15 on 10/01/2015.
  - The MDS Data Specifications may be accessed via this link: http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/NHQIMDS30TechnicalInformation.html
- All items identified in the Errata version 1.14.1 have been implemented in this version of the data specifications.
- The new version accommodates the introduction of ICD-10 codes. The I8000 items that previously accepted ICD-9 codes will begin accepting ICD-10 codes on October 1, 2015.
- There are several Section S item changes. Items S1100B-F items have revisions to their item text, as do S1100J and S6050. Items S6051A-D have the caret [^] as an allowed value. Items S1100F1 and S1100F2 add both the caret [^] and the dash [-] as allowed values.
- Edit -3591 was deleted and there is a new edit, -3852: This is the ICD-10 formatting edit, applies to the I8000 items.
- New edit -9019 is an Information edit for ICD-10/ICD-9, so it will also apply to the I8000 items. It reads as follows: For records with target dates on or after 10/1/2015, version 1.15 (or later) of the data specs applies to this item. This means that if this item is not equal to [^], it must contain an ICD-10 diagnosis code, which must be formatted according to edit -3852.

- For records with target dates before 10/1/2015, previous versions of the data specs apply. This means that if this item is not equal to [^], it must contain an ICD-9 diagnosis code, which must be formatted according to edit -3591 (which was discontinued in V1.15 of the data specs).
- Please check the MDS 3.0 Technical Information page regularly in case there are updates to the specifications.

**State Required Section S and Additional NQ and NP Items ...................................Jean Eby, Telligen**

- Language changes, such as writing out acronyms, were made to some Section S items.  Valid values were added to a couple of items.  However, states are collecting the same items as last year; none were dropped nor any added.  The states did not make any changes to the state-specified NQ and NP items.
- A document containing the items collected in each state is available on the MDS Vendor webpage at: https://www.qtso.com/vendormds.html.

**Validation Utility Tool (VUT).........................................................John Jackson, General Dynamics**

- The VUT will be enhanced to accommodate the changes in the data specifications.
- The VUT is scheduled to be posted mid-August 2015.
- A new feature will be added to the VUT that allows the user interface screen in listener mode to be bypassed.  Launch the VUT with parameter NOSETUP, and the VUT will begin polling the input directory in VUT.XML without the user needing to press the 'Go' button on the user interface.

**ASAP System Enhancements....................................................................................Jean Eby, Telligen**

- The ASAP system will be enhanced to accommodate the changes in the data specifications.
- The text of the duplicate record error message -907 will be revised to say 'previously accepted record' rather than 'previously submitted record.'
- The Health Insurance Claim Number (HICN) item will be added to the Final Validation Reports.  It will be populated when included in the assessment and the assessment file could be read.
- The ASAP system-generated final validation report will be available in an XML format in addition to the current text format.
- Section S updates.  The following Section S items have revised label text: S1100C, S1100D, S1100E, S1100F, S1100J, S6050.   The following items have additional value values: S1100F1, S1100F2, S6051A, S6051B, S6051C, S6051D.  These items are only collected by Florida.  The items collected by each state have not changed.
- For the RUGs grouper error 5 (ASAP fatal error -3804), the grouper will return the calculated RUG value (non-therapy) rather than the default value of AAA as it does now.  ASAP will then display this calculated RUG value.  This change will aid in research.
- The MDS 3.0 Assessments with Error Number xxxx report shall be enhanced to add the patient's last and first name to the report.  The sort will be revised to include patient's name.
- The resident's Health Insurance Claim Number (HICN) will be displayed on the MDS 3.0 Activity Report.

**Discussion of Submitted Q & A's ................................................................. Karen Edrington, DQSAS**

All questions submitted prior to this software developer/vendor call are about the IMPACT Act.

Q. We understand that CMS is working to implement the IMPACT Act, which was signed into law last October. The law requires reporting of standardized patient assessment data for post-acute care settings. Since the MDS is one of the patient assessment instruments that would be affected by this requirement, what kind of changes to the MDS 3.0 can we expect?

A. The IMPACT Act specifies the minimum assessment and quality measurement domains that must be satisfied.

Q. Have any of the standardized elements been implemented yet?

A. In recent history, some standardization across assessments has occurred, e.g., pressure ulcer items in the MDS and the LTCH CARE Data Set, but not in response to the IMPACT Act.

Q. If no standardization for compliance to the IMPACT Act has yet occurred, is there an estimated timeline for doing so?

A. No changes have been implemented yet. We must meet the statutory timelines provided.

Q. Do we know what data elements CMS wants to collect across care settings? If so, where are those data elements within the MDS 3.0?

A. This has not yet been determined.

Q. How will CMS prioritize changes to the MDS 3.0 for 2015?

A. We defer to others at CMS, we don't have changes in 2015 related to the provisions covered under the IMPACT Act.

Q. Have CMS staff identified ways in which MDS vendors might help to facilitate implementation of the IMPACT Act?

A. CMS envisions that it would engage providers, vendors, and software developers as it has in the past.

**Open Q and A Session ....................................................................... Karen Edrington, DQSAS**

Q. Would it be possible to get a sample of the validation report layout? We parse the CMS validation report that is returned to us and we learned earlier in this call that you are adding fields.

A. The layout for the validation report is not in the data specs and we typically don't publish it. CMS will discuss what information can be provided about the layout.

Q. Will there be changes to the 672 and 802 forms?

A. We don't have anyone present from S&C, but Karen has not heard of changes. She will verify that information and if there are changes, we will include that information in the meeting minutes.

Post Meeting Note: Karen Edrington confirmed there are no changes planned for the 672 and 802 forms.

Q. When can we expect the VUT to be posted?

A. It will be posted the middle of August 2015.

**Closing Comments ................................................................................ Karen Edrington, DQSAS**

Thank you for attending the call and keeping updated on future changes to MDS.

If vendors have additional questions, please send them to the CMS technical issues mailbox at MDStechissues@cms.hhs.gov.