Centers for Medicare & Medicaid Services
Questions and Answers
Open Door Forum: SNF/LTC Open Door Forum
Thursday, April 13, 2023

1. Question: A quick question about the iQIES migration. On the document that was posted, the what to expect document, there was a blurb on there, a small portion on there about the patient identification numbers that will be changed. Once the migration occurs residents will be assigned a new number. What impact will that have on future MDS submissions? So, will that have to be changed manually on new MDS submissions or is there some way that that will be done electronically? And then the other question I had was as far as the MDS RAI Manual updates, is there a website that we can communicate with in relationship to suggestions for edits for the final version of that manual?
   a. Answer: The resident ID is usually mostly an internal ID that we use. But if you use it in your system, it's not something that the provider submits. So, yes, if you're using it in your system, you might want to update to the new ID.
      i. Question: So future MDS submissions won't be affected by that?
         1. Answer: No.
            a. Question: Then the other question was on the MDS. Is there an email that we could update suggestions for the edits for final version that will come out in August?
               i. Question back to participant: Are you a member of the AAPACN?
                  1. Answer: Yes
                     a. Answer: Usually someone from AAPACN does send us some questions and comments.
2. Question: When you were giving the updates for MDS 3.0, you gave all the different dates of when you released information. I didn't hear you mention anything about the OSA. I know that you're going to release it as a standalone with the guidance, but do you have a time frame for that? Has that changed at all?
   a. Answer: No. The information we gave on the last open door forum still stands. For providers that will need to use the optional state assessment, we plan to release that item set and the associated guidance as a standalone package at the end of April or early May.
      i. Question: Who was talking about the things that won't transition to iQIES?
         1. Answer: Sure. The current reports in your folder and the April and June. So, provider preview report, the SNF value-based purchasing

files, five-star reports and the QIES generated final validation report.

3. Question: I have a question about the MDS V 1.18.11 update. So, the final IM sets were released recently. I've seen some potential issues with some of the final IM sets. And I did send them in. But I was wondering if there are going to be like further updates to those or are these the final ones?

   a. Answer and question: We expect that these are the final item sets. So, have you sent those in?

      i. Answer: Yes. I believe we sent a list of issues to - I believe it's iqies@cms.hhs.gov. And I think they said that tickets were created, but I was wondering if there's going be like any - when would we be able to get like updates on that.

         1. Answer: I don't think we're planning to make any updates to the items sets. These are the final items sets. Obviously, if an error is identified, we'll have to address it then. I wonder if you had maybe sent these questions in as part of the recent vendor call, and any questions sent in on that vendor call, will have responses; will be released in the near future. I'll contact the iQIES help desk and see if they have anything. And we'll take a look at it.

4. Question: My question is in reference to the report numbers that were given that should be reviewed and run by the skilled nursing facility before the deadline. I believe the first report number started with 177. It was regarding CASPER report.

   a. Answer and question: So, the first one was 1700D, which is the employee report. Is that what you were asking about?

      i. Answer and question: Yes. Is it B as in boy? Because some of the alphabets aren't coming over on the telephone conference.

         1. Answer: It's D as in dog.

            a. Question: Okay. Let's do the next 17002, perhaps?

               i. Answer: No. 1702D as in dog. And that's the individual daily staffing. And the last one is 1702S as in star. And that's the Staffing Summary Report.

5. Question: My question specifically was for the last speaker, who was the gentleman addressing the nursing home behavioral excellence. I didn't quite catch the name of his website. I'm very interested in the resources he has to offer. And I was just wondering if I could get the website again so I could be able to access his resources. I think maybe the speaker's name was Ron or Rod. I could be wrong.

   a. Answer: The website is nursinghomebehavioralhealth.org. And it's also listed on the agenda for this call.

6. Question: My question is about training. Is CMS planning to do any national training related to the new version of the MDS 3.0?

a. Answer: In terms of training, we plan to provide a virtual training program that will review the updates for Version 1.18.11. Part one of the virtual training program will consist of recorded training session videos that will deliver foundational knowledge necessary to understand the new items and guidance. These videos are designed to be reviewed before Part 2, which will consist of live virtual workshop sessions that will provide coding practice on the items covered in the part one videos. We expect to release the part one recorded training session videos in May followed by the Part 2 live virtual workshop sessions in late June or early July. When registration opens, the training announcements will be posted on both the nursing home quality initiative and the SNF QRP spotlight and announcement pages. So, you can look for those in the near future.

7. Question: So, I I've been looking at the RAI Manual and I appreciate you releasing it as quickly as you could. But my question is on Page N6, it states in this in the steps for assessment, Number 1, review the resident's medical record for documentation that any of these medications were received by the resident and for the indication for their use during the seven-day look back period. There are many definitions that have been written in the RAI manual, but you did not define the indication for use. Do you plan on doing that or can you tell us where, you know, created or found that indication for use so that we can ensure that we are educating properly?

   a. Answer: I believe in the back of the manual, there's an appendix that gives some options of where you might look for indications for use. I think we would also encourage you to consult with the pharmacist in terms of identifying why the medication is being prescribed for your resident.

8. Question: I saw on the news that President Biden was declaring an end to the public health emergency. And I am wondering if that is going to impact the May 11 date for the waivers that we've been using during the public health emergency.

   a. Answer: May 11 date is the date that we're looking at as the end of the public health emergency. So, the waivers would end as of that date.

9. Question: I just had a question for clarity on the reports. There were three reports that were mentioned about running. What was the frequency of running this report? Starting what day? And is there an end date?

   a. Question back to participant: Are you talking about the CASPER reports

      i. Answer: I'm referring to the 1700D, 1702D, 1702S. What's the frequency for those reports to run? What's a recommended start or stop date? I missed that piece please.

         1. Answer back to participant: So, we just recommend that facilities run those reports after they have made their final submission in PBJ to verify the accuracy and completeness of the data that they've submitted.

10. Question: Regarding the CASPER report and the validation report, are they going to be in the new system, that iQIES system?
    a. Answer: Those reports are located in your CASPER folder. The PBJ is still within the old system. It's not moving to iQIES at this moment. So, you will continue to locate those reports and run them in CASPER until CMS moves the nursing home survey process into iQIES.
        i. Question: Okay. So, we are transmitting in the iQIES, but we're getting our validation report at the O system?
            1. Answer: You're submitting MDS records as of Monday morning to iQIES. The payroll based journal data will still be submitted as you submit it today, which is to the old system to QIES.
                a. Comment from participant: Okay. So that means validation reports will be in iQIES because payroll based journal is not validation report unless I'm confused.
                    i. Comment from CMS: Correct. Your final validation report when you upload MDS records to iQIES will be in iQIES, correct.
                        1. Question: And I have one more question about the reports, the timing of the reports. I didn't get that part. What reports have a specific time on them?
                            a. Answer and question: Are you talking about the CASPER reports that you just run to review the accuracy and completeness of the data?
                                i. Answer and question back: Yes. Are they going to have a certain time right now?
                                ii. Answer: They're just going to reflect the data that was included in the last submission that you made in PBJ.
11. Question: My question has to do with report 1704S in the CASPER. Will that still be current when we're transmitting through iQIES? Because that's the MDS summary report, but the MDS data will be in iQIES, not in CASPER. Somehow the data is going to have to go one to the other so that it's current in there for the PBJ reports.
    a. Answer: Please visit, https://qtso.cms.gov/ for any updates.

12. Question: I just wondered if you have any time frame for updating the CMS COVID requirements related to masking, community transmission rates, et cetera. We're with a system and the system is moving forward. And yet we're held back because of our requirements not being changed yet. So, I wondered if you have any time frame for that.
    a. Question back to participant: Are you asking about guidance for infection prevention control?
        i. Answer: Correct. So right now, we have to mask because of community transmission. I heard we are going to be getting a change in that, but have not seen anything.
            1. Answer back to participant: For any changes, we'll communicate that broadly through official CMS memoranda or any changes on the CDC website. So, no updates for you at this time. So, continue to follow the current guidelines that everyone should be following. But if there are any changes, we'll make sure that that's widely available publicly.
13. Question: My question is regarding the updated MDS 3.0 and the RAI guidelines, do you have a timeline on when you'll be releasing more guidance on the quality measures for the five star?
    a. Answer: CMS is planning for the transition and re-specifying some of our measures since Section G will be going away. They said at that time they indicated we would be releasing guidance about quality measures at that point and any potential new training. But I think that work is still in the works right now.