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Simple and Easy: Winning in PDPM Payment and Regulatory Strategies

# Building a Team Approach to Data Formulation

PDPM Preadmission Screening				
Name:	Physician:	Referral Source:	Assessment Date:	Projected Admission Date:
Hospital Admission Date:		Eligibility Verification:	# of Medicare Part A Days Available:	
Hospital Primary DX:				
CURRENT DIAGNOSES (By Priority)	ICD-10 CODES	PROJECTED CLINICAL CATEGORY (Circle One)		
		Stroke		
		Non-Traumatic Brain Dysfunction		
		Traumatic Brain Dysfunction		
		Non-Traumatic Spinal Cord Dysfunction		
		Traumatic Spinal Cord Dysfunction		
		Progressive Neurological Conditions		
		Other Neurological Conditions		
		Amputation		
		Hip and Knee Replacement		
		Fractures and Other Multiple Trauma		
		Other Orthopedic Conditions		
		Debility, Cardiorespiratory Conditions		
		Medically Complex Conditions		
PT/OT	SLP	NURSING		
Does the resident have a physician's order for PT or OT? Yes or No	Does the resident have a physician's order for speech therapy? Yes or No	Does the resident require skilled nursing care services? Yes or No		
PROJECTED CLINICAL CATEGORY (Circle One)	PROJECTED CLINICAL CATEGORY (Circle One)	CLINICAL CHARACTERISTICS (Circle All That Apply)		
Major Joint Replacement or Spinal Surgery	Acute Neurologic	Refer to NTA Conditions/Services		
Non-Orthopedic Surgery and Acute Neurologic	Non-Neurologic	SOB when lying flat		
Other Orthopedic (non-surgical orthopedic/ musculoskeletal and orthopedic surgery except major joint and spinal)	Comorbidities: (#) _____ (Need 1 to qualify)	Insulin injections, order changes		
Medical Management (all others)	Aphasia; CVA, TIA, or Stroke; Hemiplegia or Hemiparesis; TBI; Trach Care; Ventilator or Respirator; Laryngeal Cancer; Apraxia; Dysphagia; ALS; Oral Cancers: Speech and Language Deficits	Respiratory treatments, oxygen therapy		
Surgical Procedures & Dates	Is cognition impaired? Yes or No (BIMS 12 points or less)	Weight loss, vomiting, fever, dehydration		
	Possible Swallowing problem? Yes or No	Indicators of depression		
	Mechanically altered diet? Yes or No	Behaviors		
Describe any special conditions, circumstances, or resident-specific justification for skilled services:		Multiple pressure injuries		
		Projected Case Mix: (Circle) Extensive Services, Special Care High, Special Care Low, Clinically Complex		
Completed by:			Date:	

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Non-Therapy Ancillary Condition/Extensive Service	Source	Points
HIV/AIDS	SNF Claim	8
<b>Parenteral IV Feeding: Level High</b>	K0710A2, K0510A2	7
<b>Special Treatments/Programs: Intravenous Medication Post-admit Code</b>	O0100H2	5
<b>Special Treatments/Programs: Ventilator or Respirator Post-admit Code</b>	O0100F2	4
<b>Parenteral IV feeding: Level Low</b>	K051 0A2, K071 0A2, K0710B2	3
Lung Transplant Status	18000	3
<b>Special Treatments/Programs: Transfusion Post-admit Code</b>	0010012	2
Major Organ Transplant Status, Except Lung	18000	2
<b>Active Diagnoses: Multiple Sclerosis Code</b>	15200	2
Opportunistic Infections	18000	2
<b>Active Diagnoses: Asthma COPD Chronic Lung Disease Code</b>	16200	2
Bone/Joint/Muscle Infections/Necrosis - Except Aseptic Necrosis of Bone	18000	2
Chronic Myeloid Leukemia	18000	2
Wound Infection Code	12500	2
<b>Active Diagnoses: Diabetes Mellitus (DM) Code</b>	12900	2
Endocarditis	18000	1
Immune Disorders	18000	1
End-Stage Liver Disease	18000	1
<b>Other Foot Skin Problems: Diabetic Foot Ulcer Code</b>	M1040B	1
Narcolepsy and Cataplexy	18000	1
Cystic Fibrosis	18000	1
<b>Special Treatments/Programs: Tracheostomy Care Post-admit Code</b>	O0100E2	1
Active Diagnoses: Multi-Drug Resistant Organism (MDRO) Code	11700	1
<b>Special Treatments/Programs: Isolation Post-admit Code</b>	O0100M2	1
Specified Hereditary Metabolic/Immune Disorders	18000	1
Morbid Obesity	18000	1
<b>Special Treatments/Programs: Radiation Post-admit Code</b>	O0100B2	1
<b>Highest Stage of Unhealed Pressure Ulcer - Stage 4</b>	M0300D1	1
Psoriatic Arthropathy and Systemic Sclerosis	18000	1
Chronic Pancreatitis	18000	1
Proliferative Diabetic Retinopathy and Vitreous Hemorrhage	18000	1
<b>Other Foot Skin Problems: Foot Infection Code, Other Open Lesion on Foot Code, Except Diabetic Foot Ulcer Code</b>	M1040A, M1040B, M1040C	1
Complications of Specified Implanted Device or Graft	18000	1
Bladder and Bowel Appliances: Intermittent Catheterization	H0100D	1
Inflammatory Bowel Disease	11300	1
Aseptic Necrosis of Bone	18000	1
<b>Special Treatments/Programs: Suctioning Post-admit Code</b>	O0100D2	1
Cardio-Respiratory Failure and Shock	18000	1
Myelodysplastic Syndromes and Myelofibrosis	18000	1
Systemic Lupus Erythematosus, Other Connective Tissue Disorders, and Inflammatory Spondylopathies	18000	1
Diabetic Retinopathy - Except Proliferative Diabetic Retinopathy and Vitreous Hemorrhage	18000	1
<b>Nutritional Approaches While a Resident: Feeding Tube</b>	K0510B2	1
<b>Severe Skin Burn or Condition</b>	18000	1
Intractable Epilepsy	18000	1
Active Diagnoses: Malnutrition Code	15600	1
Disorders of Immunity - Except : RxCC97: Immune Disorders	18000	1
Cirrhosis of Liver	18000	1
Bladder and Bowel Appliances: Ostomy	H0100C	1
<b>Respiratory Arrest</b>	18000	1
Pulmonary Fibrosis and Other Chronic Lung Disorders	18000	1
Projected Case Mix: NA (12+), NB (9-11), NC (6-8), ND (3-5), NE (1-2), NF (0)		
Total:		