



# CMS's New Schizophrenia MDS Audits

*What You Need to  
Know NOW*



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TUE, APR 4 | 12 PM CT

# Your experts



**Steven Littlehale**  
Chief Innovation Officer  
*Zimmet Healthcare*



**Alicia Cantinieri**  
VP of MDS Policy and Education  
*Zimmet Healthcare*



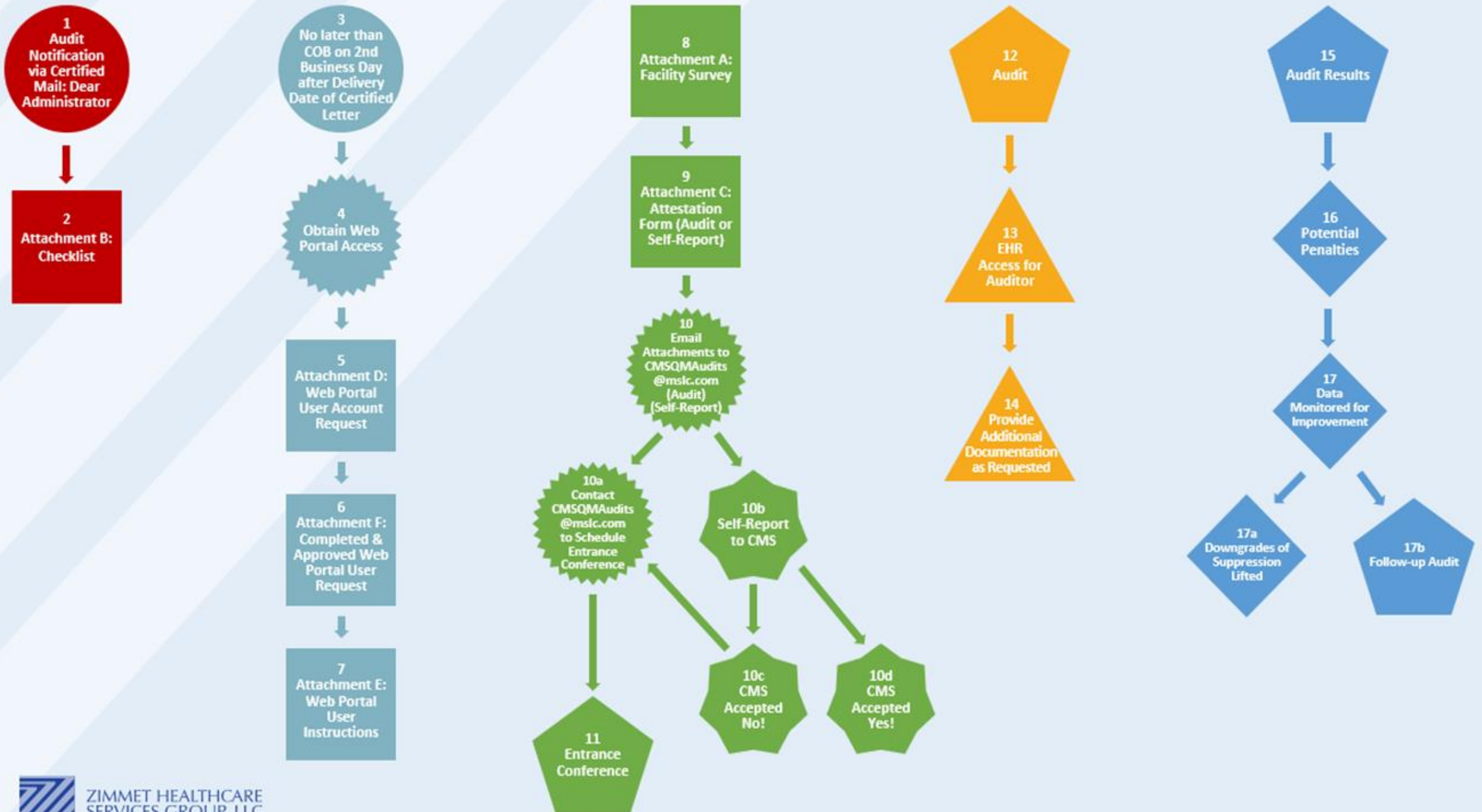
**Melanie Tribe-Scott**  
Director of Quality Initiatives  
*Zimmet Healthcare*

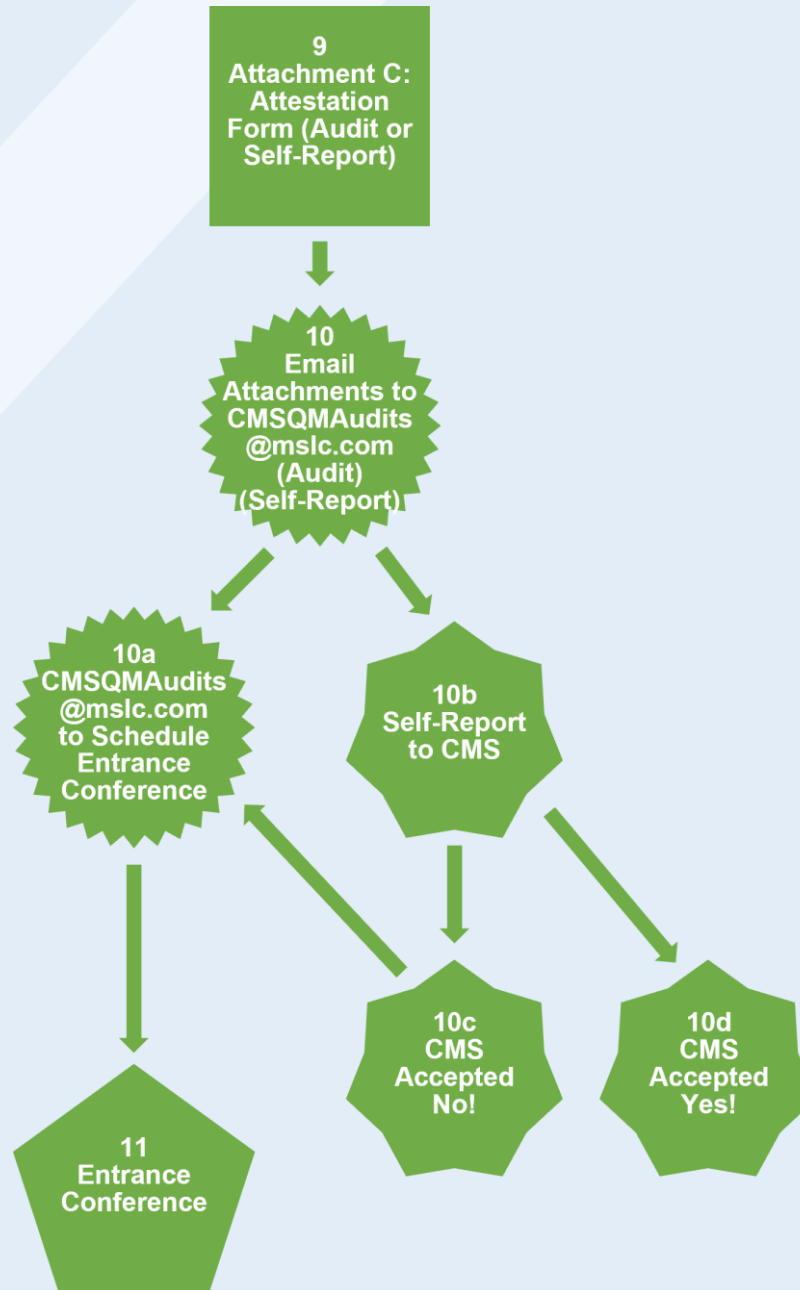


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# Poll #1

*How would you rank your current risk for a CMS schizophrenia diagnosis audit?*



# Audit Notification Letter

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop C2 21 16  
Baltimore, Maryland 21244-1850



Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

[REDACTED]  
[REDACTED]

ADMINISTRATOR

[REDACTED]  
[REDACTED]  
[REDACTED]

SUBJECT: Schizophrenia Minimum Data Set (MDS) Audit

Dear Administrator,

The Centers for Medicare and Medicaid Services (CMS) and their audit contractor (Myers and Stauffer LC) are conducting an audit to assess the accuracy of MDS data. Specifically, this audit will examine the process for appropriately assessing and coding a diagnosis of schizophrenia in the MDS for residents of your long-term care facility.

Enclosed are instructions to obtain web portal access (Attachments D, E and F) which **must** be completed no later than the close of business on the **second business day after the delivery date of this certified letter, as indicated by the United States Postal Service (USPS) delivery tracking service. The facility's certified mail tracking number is [REDACTED]** Please note that Attachment B is a checklist to ensure that all requested documentation and information is submitted appropriately and Attachment C details instructions for validation of submission. Attachments A and C can be emailed to [CMSQMAudits@mslc.com](mailto:CMSQMAudits@mslc.com) prior to scheduling the entrance conference.

After review of all documents and timely submission of the requested information, please contact Christy Caines at [CMSQMAudits@mslc.com](mailto:CMSQMAudits@mslc.com) to schedule an entrance conference. For this audit, the auditor will need access to your electronic health record (EHR) system to review supporting documentation. In the event your facility does not use an EHR system, a paper-based health record system upload to a secure webportal will be utilized.

**If MDS coding inaccuracies are identified during the audit, your facility's QM Ratings will be adjusted as follows:**

- Your Overall QM and Long-stay (LS) QM ratings will be downgraded to one star for six months. (Note: This will reduce your overall star rating by one star.)
- Your Short-stay QM rating will be suppressed for six months.
- Your LS Antipsychotic QM will be suppressed for 12 months.

You may opt to forego this audit by admitting that you have errors. If your facility attests to MDS coding inaccuracies and commits to correct the issues immediately, you can forego the audit and CMS will consider a lesser action related to your star ratings.

Your facility's data will be monitored to identify if the information indicates that you have addressed the identified issues, and determine if any downgrades and suppressions that are applied will be lifted. Also, a follow-up audit may be conducted at the discretion of CMS.

For further questions regarding the audit or requested supporting documentation, please contact Christy Caines at [CMSQMAudits@mslc.com](mailto:CMSQMAudits@mslc.com).

Sincerely,

Evan Shulman  
Director, Division of Nursing Homes





### MDS Antipsychotic Audit Recommendations:

- Evaluate your facility's risk – review your reports to determine which residents receive antipsychotic medication(s) and are diagnosed with schizophrenia.
- Review your MDS coding report for item I6000 Schizophrenia (e.g., schizoaffective disorder and schizophreniform disorders).
- Review your documentation for the diagnosis as per the RAI Manual instructions under section I and State Operations Manual guidance. This includes history, documentation of behaviors, non-pharmacological interventions with the response, monitoring for potential side effects, and documentation by providers such as the psychiatrist, physician, and physician-extenders.
- Ensure an appropriate care plan for non-pharmacological interventions, use of antipsychotic medications, and potential side effects.
- Educate staff on the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR) diagnostic criteria for schizophrenia.
- Appendix PP in the State Operations Manual includes revised surveyor guidance (implemented on Oct. 24, 2022) under three behavioral health F-tags and F-tags related to antipsychotic medications and MDS coding. Provide training on related F-tags:
  - F641 Accuracy of Assessments
  - F658 Services Provided Meet Professional Standards
  - F758 Free from Unnecessary Psychotropic Meds/PRN Use
  - F740 Behavioral Health Services
  - F741 Sufficient/Competent Staff—Behavioral Health
  - F949 Behavioral Health Training
- Involve consulting pharmacists in medication and diagnosis reviews.
- Ensure your policy on Gradual Dose Reduction (GDR) meets the requirements:
  - Within the first year in which a resident is admitted on or increased on antipsychotic medication, the facility must attempt GDR in writing and annually -OR-
  - Is GDR clinically contraindicated for this resident, and is this documented in the physician's documentation?



- Know your state's requirements for Abnormal Involuntary Movement Scale (AIMS) testing.
- Involve consulting pharmacists in medication and diagnosis reviews.
- If you do not already have one, engage a consulting psychiatry service.
- MDS modifications are permitted; however, the guidelines for Significant Correction of Prior Comprehensive or Quarterly Assessments should be reviewed. A significant correction assessment may be required if the resident's clinical status is not accurately represented, and the error has not been corrected via a more recent assessment submission.

### Resources & References:

- <https://www.cms.gov/files/document/gso-23-05-nh.pdf>
- <https://www.cms.gov/files/document/gso-22-19-nh-revised-long-term-care-surveyor-guidance.pdf>
- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Downloads/Appendix-PP-State-Operations-Manual.pdf>
- <https://www.cms.gov/files/document/mds30raimanualv1171rerratav2july152022.pdf>
- [https://www.theravive.com/therapedia/schizophrenia-disorder-dsm-5-295.90-\(f20.9\)](https://www.theravive.com/therapedia/schizophrenia-disorder-dsm-5-295.90-(f20.9))
- [https://downloads.cms.gov/files/mds-3.0-rai-manual-v1.17.1 october 2019.pdf](https://downloads.cms.gov/files/mds-3.0-rai-manual-v1.17.1%20october%202019.pdf)
- <https://www.cms.gov/files/document/mds30raimanualv1171rerratav2july152022.pdf>





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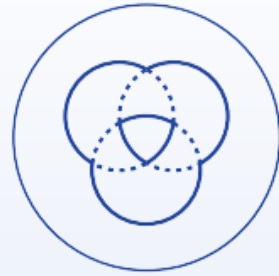
[www.zhealthcare.com](http://www.zhealthcare.com)

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[info@zhealthcare.com](mailto:info@zhealthcare.com)



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# Questions & Answers



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# Thank you for joining us!

Recording and handouts available here:

<https://www.simpleitc.com/webinar-registration-new-cms-schizophrenia-audits/>



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