Comagine Health
Formerly Qualis Health and HealthInsight

Quality Measure Tip Sheet:

Need Help with Activities of Daily Living Has Increased — Long Stay

Quality Measure Overview

This measure reports the percent of long-stay residents whose need for help with late-loss Activities of Daily Living (ADLs) has increased when compared to the prior assessment.

Numerator: Long-stay residents with selected target and prior assessments that indicate the need for help with late-loss Activities of Daily Living (ADLs) has increased when the selected assessments are compared. The four late-loss ADL items are self-performance bed mobility (G0110A1), self-performance transfer (G0110B1), self-performance eating (G0110H1), and self-performance toileting (G0110I1).

An increase is defined as an increase in two or more coding points in one late-loss ADL item ***or*** one point increase in coding points in two or more late-loss ADL items. Note that for each of these four ADL items, if the value is equal to [7, 8] on either the target or prior assessment, then recode the item to equal [4] to allow appropriate comparison.

Residents meet the definition of increased need of help with late-loss ADLs if ***either*** of the following are true

1. ***At least two*** of the following are true (note that in the notation below, [t] refers to the target assessment, and [t-1] refers to the prior assessment):
   1.1 Bed mobility: ([Level at the target assessment (G0110A1[t])] – [Level at prior assessment (G0110A1[t-1])]) > [0], ***or***
   1.2 Transfer: ([Level at target assessment (G0110B1 [t])] – [Level at prior assessment (G0110B1 [t-1])]) > [0], ***or***
   1.3 Eating: ([Level at target assessment (G0110H1 [t])] – [Level at prior assessment (G0110H1 [t-1])]) > [0], ***or***
   1.4 Toileting: ([Level at target assessment (G0110I1 [t])] – [Level at prior assessment (G0110I1 [t-1])]) > [0].
2. ***At least one*** of the following is true:
   2.1 Bed mobility: ([Level at target assessment (G0110A1 [t])] – [Level at prior assessment (G0110A1 [t-1])]) > [1], ***or***
   2.2 Transfer: ([Level at target assessment (G0110B1 [t])] – [Level at prior assessment (G0110B1 [t-1])]) > [1], ***or***
   2.3 Eating: ([Level at target assessment (G0110H1 [t])] – [Level at prior assessment (G0110H1 [t-1])]) > [1], ***or***
   2.4Toileting: ([Level at target assessment (G0110I1 [t])] – [Level at prior assessment (G0110I1 [t-1])]) > [1].

Denominator: All long-satay residents with a selected target and prior assessment, except those with exclusions.

Exclusions:

1. All four of the late-loss ADL items indicate total dependence on the prior assessment, as indicated by:
   1.1. Bed Mobility (G0110A1) = [4, 7, 8] ***and***
   1.2. Transferring (G0110B1) = [4, 7, 8] ***and***
   1.3. Eating (G0110H1) = [4, 7, 8], ***and***
   1.4. Toileting (G0110I1) = [4, 7, 8].

Adapted by Comagine Health, the Medicare Quality Innovation Network - Quality Improvement Organization (QIN-QIO) for Idaho, Nevada, New Mexico, Oregon, Utah and Washington, from materials provided by HealthInsight, and prepared under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy.

2. Three of the late-loss ADLs indicate total dependence on the prior assessment, as in #1 AND the fourth late-loss ADL indicates extensive assistance (value 3) on the prior assessment.
3. If resident is comatose (B0100 = [1, -]) on the target assessment.
4. Prognosis of life expectancy is less than 6 months (J1400 = [1, -]) on the target assessment.
5. Hospice care (O0100K2 = [1, -]) on the target assessment.
6. The resident is not in the numerator *and*
   6.1. Bed Mobility (G0110A1 = [-]) on the prior or target assessment, ***or***
   6.2. Transferring (G0110B1 = [-]) on the prior or target assessment, ***or***
   6.3. Eating (G0110H1) = [-]) on the prior or target assessment, ***or***
   6.4. Toileting (G0110I1 = [-]) on the prior or target assessment.

MDS Coding Requirements

In the Minimum Data Set (MDS):

- Include a look-back period of seven days.
- Code based on resident's level of assistance when using adaptive devices such as a walker, a device to assist with donning socks, a dressing stick, a reacher or adaptive eating utensils.
- Capture the total picture of the resident's ADL performance 24 hours a day for the entire seven-day period.
- Indicate whether the activity occurred three or more times within the seven-day period, using the ADL Self-Performance Algorithm (see the Resident Assessment Instrument [RAI], page G-8).

Resource: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursinghomeQualityInits/MDS30RAIManual.html

Ask These Questions

- Was the MDS coded per RAI requirements?
- Is the staff member's coding documentation accurate?
- Is the MDS designee completing self-observation of care and staff member interviews to determine accuracy of documentation?
- Has baseline function been determined?
- Has the root cause for the decline been determined and treated?
- Has the resident been referred to therapy for treatment?
- Are underlying health conditions that may be affecting ADL performance being treated?
- Have restorative programs been initiated to rehabilitate or maintain the resident's ADL performance?
- Does evidence exist of the delivery of services for residents on a restorative program?
- Is pain/depression managed?
- Is the resident receiving appropriate assistance from staff members?
- Are activity pursuits appropriate?
- Is adaptive equipment available, as needed, to assist the resident??