



Office of the
Medicaid Inspector
General

ANDREW M. CUOMO
Governor

DENNIS ROSEN
Medicaid Inspector General

September 27, 2016

[REDACTED]
Grace Plaza Nursing and Rehabilitation Center
15 St. Paul's Place
Great Neck, New York 11021

Re: MDS Final Audit Report
Audit #: 13-4380
Provider ID#: [REDACTED]

Dear [REDACTED]

This is the final audit report of findings with regard to the Office of the Medicaid Inspector General's (OMIG) Minimum Data Set (MDS) audit of Grace Plaza Nursing and Rehabilitation Center for the census period ending January 25, 2012. In accordance with 18 NYCRR §517.6, this final audit report represents the OMIG's final determination on issues found during OMIG's review.

In your response to the draft audit report dated September 23, 2015, you identified specific audit findings with which you disagreed. Your comments have been considered (see Attachment D) and the report has been either revised accordingly and/or amended to address your comments (see Attachment D).

The Medicaid overpayment of \$186,875.60 was calculated using the number of Medicaid days paid for the rate period July 1, 2012 through December 31, 2012 and the change in the direct component of your Medicaid rate as calculated by the Department of Health's Bureau of Long Term Care Reimbursement (BLTCR). The calculation of this overpayment is detailed in Attachment A. BLTCR will adjust your Medicaid rates for the relevant rate period to reflect the change in the direct component. The findings explanation, regulatory references, and applicable adjustment can be found in the attachments following Attachment A.

The Provider has the right to challenge this action and determination by requesting an administrative hearing within 60 days of the date of this notice. If the Provider wishes to request a hearing, the request must be submitted in writing to:

General Counsel
Office of Counsel
New York State Office of the Medicaid Inspector General
800 North Pearl Street
Albany, NY 12204

Questions regarding the request for a hearing should be directed to Office of Counsel, at ([REDACTED])

[REDACTED]

In accordance with 18 NYCRR 519.18(a), "The issues and documentation considered at the hearing are limited to issues directly relating to the final determination. An appellant may not raise issues regarding the methodology used to determine any rate of payment or fee, nor raise any new matter not considered by the department upon submission of objections to a draft audit or notice of proposed agency action."

If a hearing is held, you may have a person represent you or you may represent yourself. If you choose to be represented by someone other than an attorney, you must supply along with your hearing request a signed authorization permitting that person to represent you at the hearing; you may call witnesses and present documentary evidence on your behalf.

For a full listing of hearing rights please see 18 NYCRR Part 519.

Should you have any questions regarding the above, please contact [REDACTED]
[REDACTED]

[REDACTED]

DIVISION OF MEDICAID AUDIT
Office of the Medicaid Inspector General

[REDACTED]

OFFICE OF THE MEDICAID INSPECTOR GENERAL
GRACE PLAZA NURSING AND REHABILITATION CENTER
AUDIT # 13-4380
CALCULATION OF AUDIT IMPACT

RATE TYPE	DECREASE IN DIRECT COMPONENT OF RATE*	MEDICAID DAYS	IMPACT
Part B Eligible/Part B D Eligible	\$7.50	23,264	\$174,480.00
Non-Medicare/Part D Eligible	\$7.60	1,631	\$12,395.60
Total			<u>\$186,875.60</u>

*Rounded to nearest 1/100th New York State Department of Health Bureau of Managed Long Term Care Rate Setting / FFS

**OFFICE OF THE MEDICAID INSPECTOR GENERAL
GRACE PLAZA NURSING AND REHABILITATION CENTER
AUDIT #13-4380
MDS DETAILED FINDINGS**

MDS FINDINGS**SAMPLE SELECTION****Functional Status-ADL Self-Performance and Support**

If the provider is unable to produce the supporting documentation for the patient, the service will be disallowed and the Case Mix will be adjusted. A repayment schedule will be developed.

Documentation must indicate an assessment was done to evaluate the need for assistance with activities of daily living (ADL's), altered gait and balance, and decreased range of motion (ROM). MDS 3.0 manual guidelines will be followed when examining the medical records.

*42 CFR §483.20 (b) (xvii)
MDS Manual 3.0 G0100-0900*

Bed Mobility Self-Performance

In 9 instances, documentation did not support resident required total assist every time.	12, 13, 14, 17, 27, 28, 30, 32, 38
In 11 instances, documentation did not support resident required weight bearing assist three or more times.	4, 9, 11, 15, 16, 18, 19, 24, 26, 34, 35
In 3 instances, documentation did not support resident required non weight bearing assist three or more times.	2, 8, 25
In 2 instances, documentation did not support resident required supervision one or more times.	21, 22

Bed Mobility Support Provided

In 2 instances, documentation did not support resident was a 2+ person physical help at least once.	9, 15
In 4 instances, documentation did not support resident was a one person physical help at least once.	8, 19, 30, 34

Transfer Self-Performance

In 14 instances, documentation did not support resident required total assist every time.	5, 10, 12, 15, 16, 17, 27, 28, 30, 32, 33, 35, 37, 38
In 11 instances, documentation did not support resident required weight bearing assist three or more times.	4, 9, 11, 14, 18, 21, 22, 23, 26, 34, 36
In 4 instances, documentation did not support resident required non weight bearing assist three or more times.	2, 8, 24, 25

Transfer Support Provided

In 1 instance, documentation did not support resident was a one (1) person physical help at least once.	34
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Eating Self-Performance

In 8 instances, documentation did not support resident required total assist every time.	14, 17, 20, 27, 30, 33, 37, 38
In 4 instances, documentation did not support resident required weight bearing assist three or more times.	12, 25, 32, 34
In 3 instances, documentation did not support resident required supervision one or more times.	21, 22, 24

Toilet Use Self-Performance

In 16 instances, documentation did not support resident required total assist every time.	5, 10, 12, 13, 14, 15, 16, 17, 27, 28, 30, 32, 33, 35, 37, 38
In 13 instances, documentation did not support resident required weight bearing assist three or more times.	4, 9, 11, 18, 19, 21, 22, 23, 24, 25, 26, 34, 36
In 2 instances, documentation did not support resident required non weight bearing assist three or more times.	2, 8

Toilet Use Support Provided

In 8 instances, documentation did not support resident was a 2+ person physical help at least once.	5, 10, 12, 16, 17, 28, 30, 35
In 17 instances, documentation did not support resident was a one person physical help at least once.	2, 4, 8, 9, 11, 13, 14, 15, 18, 19, 21, 22, 25, 32, 33, 34, 36

Special Treatments, Procedures, and Programs

If the provider is unable to produce the supporting documentation for the patient, the service will be disallowed and the Case Mix will be adjusted. A repayment schedule will be developed.

The intent of the items in this section is to identify any special treatments, procedures, and programs that the resident received during the specific time periods. MDS 3.0 manual guidelines will be followed when examining the medical records.

42 CFR §483.20 (b) (xv)
MDS 3.0 Manual O0100-0300, O0600-0700

In 1 instance, documentation did not support chemotherapy during the look back period. 10

Skilled Therapy

If the provider is unable to produce the supporting documentation for the patient, the service will be disallowed and the Case Mix will be adjusted. A repayment schedule will be developed.

The qualified therapist, in conjunction with the physician and nursing staff, is responsible for determining the necessity for and the frequency and duration of the therapy provided to residents. Rehabilitation (i.e., via Speech-Language Services, and Occupational and Physical Therapies) and respiratory, psychological, and recreational therapy helps the residents to attain or maintain their highest level of well-being and improve their quality of life. MDS 3.0 manual guidelines will be followed when reviewing the documentation provided by the facility.

42 CFR §483.20 (b) (xvii)
MDS 3.0 Manual O0400-0500

Occupational Therapy

In 1 instance, documentation did not support medical necessity for therapy and/or therapy was not reasonable for resident condition. 34

Physical Therapy

In 1 instance, documentation did not support medical necessity for therapy and/or therapy was not reasonable for resident condition. 1

Restorative Nursing Programs

In 3 instances, documentation did not support measurable goals and/or periodic evaluation of the nursing rehabilitation program. 2, 20, 21

RUGS-II Classifications Overturned

In 32 instances, the RUG classifications were overturned. 1, 2, 4, 5, 8, 9, 10, 11, 12, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 30, 32, 33, 34, 35, 36, 37, 38

10 NYCRR §86-2.10, Volume A-2

**OFFICE OF THE MEDICAID INSPECTOR GENERAL
GRACE PLAZA NURSING AND REHABILITATION CENTER
AUDIT #13-4380
ANALYSIS OF PROVIDER RESPONSE**

Sample #	Finding	Provider Response	Accepted/Denied	Explanation
#31	E0200A Physically Abusive	Progress Notes Behavior Symptom sheets	Accepted	
#31	E0800 Resists Care	Progress Notes Behavior Symptom sheets	Accepted	
#1	BO0400C Physical Therapy	<ul style="list-style-type: none"> • Written facility response • F 323-Clinical Implications of Falls • NYC and DOH Memos on Fall Preventions in Nursing Homes • Falls in the Nursing Home-article Annals of Internal Medicine • Best Practice for Fall Reduction-article American Nurse Today • RAI manual instructions • Grace Plaza policy and procedures on 	Denied	MDS with ARD 1/17/12 documentation does not support medical necessity or that therapy is reasonable and necessary for the resident's condition. See section O MDS manual.

		cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets.		
#2	Self-Performance G 0110A bed mobility G0110B transfer G0110I toilet use	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Rehab program instructions • Restorative Nursing Program • Grace Plaza Progress notes from 12/25/11-1/12/12 • RAI manual 	Denied	MDS with ARD 1/18/12 documentation does not support the levels claimed. See Section G MDS manual.

		<p>instructions</p> <p>Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets</p>		
#4	<p>Self-Performance G 0110A bed mobility G0110B transfer G0110I toilet use</p>	<ul style="list-style-type: none"> • Resident Face sheet • Cognitive /ADL Flow sheet • CNA Accountability record • Nurses notes 10/18/11-12/17/11 • Rehabilitation screen form • OT evaluation and treatment plan • PT Evaluation and treatment plan • Rehab program 	<p>Denied</p>	<p>MDS with ARD 11/5/11 documentation does not support the levels claimed. See Section G MDS manual.</p>

		<p>instructions</p> <ul style="list-style-type: none"> • Restorative Nursing Program • Admitting H&P Physician's plan of care • RAI manual instructions <p>Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets</p>		
#5	<p>Self-Performance G0110B transfer G0110lb Toilet use G0110l toilet use Support Provided</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Cognitive flow sheet • Rehabilitation 	Denied	<p>MDS with ARD 12/24/11 documentation does not support the levels claimed self-performance for transfer and toilet use and support provided toilet use . See Section G MDS manual.</p>

		<p>screen sheet</p> <ul style="list-style-type: none"> • Resident specific evaluation • Care plan-bladder, falls • RAI manual instructions <p>Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets</p>		
#8	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110I toilet use</p> <p>Support provided G0110Ab Bed mobility, G0110Ib Toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Cognitive flow sheet • Meal Accountability record 	Denied	MDS with ARD 11/23/11 documentation does not support the levels claimed for self-performance bed mobility and transfer and support provided bed mobility toilet use. See Section G MDS manual.

		<ul style="list-style-type: none"> • Skin sheet • Restorative Nursing • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding 		
#9	<p>Self-Performance G 0110A bed mobility G0110B transfer G0110I toilet use</p> <p>Support provided G0110Ab Bed mobility, G0110Ib Toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Meal Accountability record • Restorative Nursing 	Denied	MDS with ARD 1/16/12 documentation does not support the levels claimed self-performance bed mobility and transfer, toilet use and support provided bed mobility toilet use. See Section G MDS manual.

		<ul style="list-style-type: none"> • Skin sheet • Care plan-falls, bladder • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		
#10	Self -Performance G0110B transfer G0110I toilet use	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • Cognitive /ADL Flow sheet • CNA Accountability record • Meal plan 	Denied	MDS with ARD 1/1/12 documentation does not support the levels claimed. See Section G MDS manual.

	00100F2 Chemotherapy	<p>accountability</p> <ul style="list-style-type: none"> • Rehabilitation screening form • Care plan-bladder issues • Restorative Nursing • Skin sheet • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 	Denied	MDS with ARD 1/1/12 does not have documentation to support chemotherapy
#11	Self- Performance G0110I toilet use	<ul style="list-style-type: none"> • RAI regulatory requirements 	Denied	MDS with ARD 1/17/12 documentation does not support the levels claimed self-performance toilet use bedmobility and transfer and support provided toilet use. See Section G MDS manual.

	<p>G 0110A bed mobility G0110B transfer</p> <p>Support provided G0110lb Toilet use</p>	<ul style="list-style-type: none"> • Resident Face sheet • CNA Accountability record • Restorative Nursing • Skin sheet • MDS dated 1/17/12 • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets. 		
#12	Self-Performance	<ul style="list-style-type: none"> • RAI regulatory requirements 	Denied	MDS with ARD 1/20/12 documentation does not support the levels claimed self-performance bed mobility, transfer and toilet use and support

	<p>G 0110A bed mobility G0110B transfer G0110I toilet use</p> <p>Support provided G0110Ib Toilet use</p>	<ul style="list-style-type: none"> • Resident Face sheet • Cognitive /ADL Flow Sheet • CNA Accountability record • Skin sheet • Rehabilitation Screening Form • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		<p>provided toilet use. See Section G MDS manual.</p>
<p>#13</p>	<p>Self-Performance</p>	<ul style="list-style-type: none"> • RAI regulatory requirements 	<p>Denied</p>	<p>MDS with ARD 12/9/11 documentation does not support the levels claimed self-performance toilet use bed mobility and transfer and support provided toilet use. See Section G MDS manual.</p>

	<p>G 0110A bed mobility G0110B transfer G0110I toilet use</p> <p>Support provided G0110Ib Toilet use</p>	<ul style="list-style-type: none"> • Resident Face sheet • CNA Accountability record • Meal Accountability record • Restorative Nursing program • Skin sheet • Rehabilitation Screening Form • Care Plan-communication, H/O falls, ADL function, contractures, cognition, Mood, wandering, will not harm others, weight loss, dehydration, advanced directives, influenza, Loss of family, fragile skin, discharge plans • RAI manual instructions • Grace Plaza policy and procedures on 		
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		<p>cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets.</p>		
#14	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating G0110I toilet use</p> <p>Support provided G0110lb toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Meal Accountability record • Restorative Nursing program • Rehabilitation Screening Form • Care Plan- 	Denied	<p>MDS with ARD 12/29/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.</p>

		<p>communication, H/O falls, ADL function, contractures, cognition, Mood, wandering, will not harm others, weight loss, dehydration, advanced directives, influenza, Grief, fragile skin, discharge plans</p> <ul style="list-style-type: none"> • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets. 		
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#15	<p>Self -Performance</p> <p>G 0110A bed mobility G0110B transfer G0110I toilet use</p> <p>Support provided G0110Ib toilet use G0010Ab Bed Mobility</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Rehabilitation Screening Form • Care Plan-ADL functions • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 	Denied	MDS with ARD 1/11/12 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.
#16	Self-Performance	<ul style="list-style-type: none"> • RAI regulatory requirements 	Denied	MDS with ARD 11/15/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

	<p>G 0110A bed mobility G0110B transfer G0110I toilet use</p> <p>Support provided G0110Ib toilet use G0010Ab bed mobility</p>	<ul style="list-style-type: none"> • Resident Face sheet • CNA Accountability record • Rehabilitation Screening Form • Care Plan-Bladder functions • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		
#17	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • Cognitive /ADL Flow 	Denied	MDS with ARD 11/15/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

	<p>G0110H eating G0110I toilet use</p> <p>Support provided G0110lb toilet use G0010Ab Bed Mobility</p>	<p>Sheet</p> <ul style="list-style-type: none"> • CNA Accountability record • Rehabilitation Screening Form • Care Plan-ADL functions, Fragile skin, dysphagia. Weight loss • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets. 		
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<p>#18</p>	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110I toilet use</p> <p>Support provided G0110lb toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Care Plan-ADL falls • Rehabilitation Screening Form • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets. 	<p>Denied</p>	<p>MDS with ARD 1/13/12 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.</p>
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<p>#19</p>	<p>Self-Performance</p> <p>G 0110A bed mobility G0110I toilet use</p> <p>Support provided G0110Ib toilet use G0010Ab Bed Mobility</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Care Plan-ADL fragile skin • Rehabilitation Screening Form • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 	<p>Denied</p>	<p>MDS with ARD 1/20/12 documentation does not support the levels claimed. See Section G MDS manual.</p>
<p>#20</p>	<p>Self-Performance</p>	<ul style="list-style-type: none"> • RAI regulatory requirements 	<p>Denied</p>	<p>MDS with ARD 11/18/11 documentation does not support the levels claimed self-performance eating and walking /training practice. See Section G</p>

	<p>G 0110H eating</p> <p>O 000G walking/training practice</p>	<ul style="list-style-type: none"> • Resident Face sheet • Cognitive/ADL Flow Sheet • Meal Accountability Record • Restorative Nursing • Toileting schedule • Skin sheet • Nutritional Assessment • CNA Accountability record • Care Plan-weight, • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation 		<p>MDS manual and section O MDS Manual Restorative nursing.</p>
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		screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets.		
#21	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating G0110I toilet use</p> <p>Support provided G0110Ib toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Meal Accountability Record • Restorative Nursing • Skin sheet • MD orders • Medication administration record • Treatment record • Rehabilitation screen 	Denied	MDS with ARD 1/4/12 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

		<ul style="list-style-type: none"> • Nutritional assessment • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets. 		
#22	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating</p> <p>G1101 toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Meal Accountability 	Denied	MDS with ARD 12/18/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

	<p>Support provided G0110lb toilet use</p>	<p>Record</p> <ul style="list-style-type: none"> • Skin sheet • Restorative nursing sheet • Cognitive/ADL flow sheet • Rehabilitation screening form • Care plan-therapeutic diet • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor 		
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		finding sheet		
#23	Self-Performance G0110B transfer G0110I toilet use	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Restorative nursing sheet • Meal Accountability record • Skin record • Rehabilitation screening form • Care plan- incontinence and rehab potential • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer 	Denied	MDS with ARD 1/20/12 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

		Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets		
#24	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating</p> <p>G0110I toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Restorative nursing sheet • Meal Accountability Record • Skin sheet • Rehabilitation screening form • Care plan- incontinence, weight and nutritional status • RAI manual instructions • Grace Plaza policy 	Denied	MDS with ARD 11/21/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

		<p>and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets.</p>		
#25	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating G0110I toilet use</p> <p>Support provided G0110Ib toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Meal Accountability Record • Toileting schedule • Skin sheet • Restorative nursing sheet 	Denied	<p>MDS with ARD 1/25/12 documentation does not support the levels claimed. Self-performance and support provided. See Section G MDS manual.</p>

		<ul style="list-style-type: none"> • Rehabilitation screening form • Care plan-ADL function • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		
#26	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110I toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • CNA assignment sheet 	Denied	MDS with ARD 11/29/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

		<ul style="list-style-type: none"> • Nursing rehabilitative sheet • Meal accountability sheet • Skin sheet • Rehabilitation Screening Form • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		
#27	Self-Performance	<ul style="list-style-type: none"> • RAI regulatory requirements 	Denied	MDS with ARD 1/25/12 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

	<p>G 0110A bed mobility G0110B transfer G0110H eating G0110I toilet use</p>	<ul style="list-style-type: none"> • Resident Face sheet • CNA Accountability record • Cognitive/ADL flow sheet • Meal accountability sheet • Skin sheet • Restorative nursing sheet • Rehabilitation Screening Form • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline 		<p>claimed. See Section G MDS manual.</p>
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		and course completion history and OMIG auditor finding sheets		
28	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G01101toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Nursing Rehabilitative sheet • Cognitive/ADL flow sheet • Care plan ADL function • MD progress notes • Meal accountability sheet • Skin sheet • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL 	Denied	MDS with ARD 1/13/12 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

		<p>flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets</p>		
#30	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating G0110I toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Care plan-weight loss and nutritional status • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly 	<p>Denied</p>	<p>MDS with ARD 1/14/12 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.</p>

		<p>accountability record, The Hoyer Lift, Resident/Patient screens/evaluations, Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets</p>		
#32	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating G0110I toilet use</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • Cognitive /ADL sheet • CNA Accountability record • Nursing rehabilitative sheet • Meal accountability sheet • Skin sheet • RAI manual instructions • Care plan-nutritional 	Denied	<p>MDS with ARD 12/4/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.</p>

		<p>status,skin,weight loss and nutrition</p> <ul style="list-style-type: none"> • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets . 		
#33	<p>Self-Performance</p> <p>G0110B transfer G0110H eating</p> <p>G0110Itoilet use self-performance and support provided</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • Cognitive /ADL sheet • CNA Accountability record • Care plan-rehab • Rehabilitation 	Denied	MDS with ARD 1/25/12 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

		<p>screening form</p> <ul style="list-style-type: none"> • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets . 		
#34	<p>Self-Performance</p> <p>G0110B transfer G0110H eating</p> <p>G0110Itoilet use self-performance and support provided</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Professional Practice and Clinical Standards • Resident Face sheet • Cognitive /ADL sheet 	Denied	MDS with ARD 10/26/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

		<ul style="list-style-type: none"> • CNA Accountability record • Meal accountability sheet • Care plan ADL function, weight loss nutrition, bladder and bowel function • RAI manual instructions • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		
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	00400B Occupational Therapy	<ul style="list-style-type: none"> • RAI regulatory requirements • Professional Practice and Clinical Standards • Seating Procedure Rev. Oct 15th, 2004 • Therapy order • Clarification memo • OT Note 10/28/11 • Resident Face sheet • CNA Accountability record • Care plan ADL function, weight loss nutrition, bladder and bowel function • RAI manual instructions for coding therapies • Rehabilitation screening form 	Denied	MDS with ARD 10/26/11 has no interdisciplinary documentation to support for medical necessity for OT. See Section MDS manual.
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		<ul style="list-style-type: none"> • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		
#35	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating</p> <p>G0110I toilet use self-performance and support provided</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Nursing rehabilitative sheet • Meal accountability sheet 	Denied	MDS with ARD 10/30/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

		<ul style="list-style-type: none"> • Skin sheet • RAI manual instructions for coding therapies • Care plan-ADL function • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		
#36	<p>Self-Performance</p> <p>G0110B transfer</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability 	Denied	MDS with ARD 11/1/11 documentation does not support the levels claimed self-performance and support provided. See Section G MDS manual.

	<p>G01101toilet use self-performance and support provided</p>	<p>record</p> <ul style="list-style-type: none"> • Nursing rehabilitative sheet • Meal accountability sheet • Skin sheet • MD Progress notes • RAI manual instructions for coding therapies • Care plan-ADL function • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor 		
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		finding sheets		
#37	<p>Self-Performance</p> <p>G0110B transfer G01101toilet use G0110H eating</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Nursing rehabilitative sheet • Meal accountability sheet • Skin sheet • MD Progress notes • RAI manual instructions for coding therapies • Care plan-ADL function • Grace Plaza policy and procedures on cognitive and ADL 	Denied	MDS with ARD 12/4/11 documentation does not support the levels claimed. See Section G MDS manual.

		<p>flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets</p>		
#38	<p>Self-Performance</p> <p>G 0110A bed mobility G0110B transfer G0110H eating</p> <p>G01101 toilet use self-performance</p>	<ul style="list-style-type: none"> • RAI regulatory requirements • Resident Face sheet • CNA Accountability record • Meal accountability sheet • Skin sheet • MD orders • Medication administration record 	Denied	MDS with ARD 12/29/11 documentation does not support the levels claimed. See Section G MDS manual.

		<ul style="list-style-type: none"> • Treatment records • Rehabilitation screen form • Nutritional assessment • RAI manual instructions for coding therapies • Grace Plaza policy and procedures on cognitive and ADL flow sheet, CNA monthly accountability record, The Hoyer Lift, Resident/Patient screens/evaluations Rehabilitation screen, 3.0 MDS Section by Discipline and course completion history and OMIG auditor finding sheets 		
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