



Office of the
Medicaid Inspector
General

ANDREW M. CUOMO
Governor

DENNIS ROSEN
Medicaid Inspector General

September 30, 2016

██████████
Queens Boulevard Extended Care Facility, Inc.
61-11 Queens Boulevard
Woodside, New York 11377

Re: MDS Final Audit Report
Audit #: 13-4656
Provider ID#: ██████████

Dear ██████████

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 Queens Boulevard Extended Care Facility, Inc. for the census period ending July 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 May 3, 2016, 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 \$112,097.89 was calculated using the number of Medicaid days paid for the rate period January 1, 2013 through June 30, 2013 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 ██████████

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

Division of Medicaid Audit
Office of the Medicaid Inspector General

OFFICE OF THE MEDICAID INSPECTOR GENERAL
QUEENS BOULEVARED EXTENDED CARE FACILITY
AUDIT 13-4656
CALCULATION OF AUDIT IMPACT

RATE TYPE	DECREASED IN DIRECT COMPONENT OF RATE*	MEDICAID DAY	IMPACT
Part B Eligible/Part B D Eligible	\$4.80	22,677	\$108,849.60
Non-Medicare/Part D Eligible	\$4.87	667	\$3,248.29
Total			<u>\$112,097.89</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
 QUEENS BOULEVARD EXTENDED CARE FACILITY
 AUDIT #13-4656
 FINDINGS BY SAMPLE NUMBER

Sample #	Reported RUG	Derived RUG	Reported RUG Weight	Derived RUG Weight	DETAILED FINDINGS				
					DISALLOW BED MOBILITY SELF PERFORMANCE	DISALLOW TRANSFER SELF PERFORMANCE	DISALLOW TOILET USE SELF PERFORMANCE	DISALLOW SPECIAL TREATMENTS, PROCEDURES	DISALLOW RESTORATIVE NURSING PROGRAMS
1	RHB	RMA	1.27	1.17	1	1	1		
2	CC1	IA1	0.98	0.61	1	1	1		
3	RMC	RMA	1.27	1.17	1	1	1		
4	CA2	CA2	0.84	0.84	1	1	1		
5	PC2	PA1	0.67	0.46	1	1	1	1	
6	CC1	CA1	0.98	0.77	1	1	1		
7	PD2	PA1	0.73	0.46	1	1	1		1
8	CC1	IA2	0.98	0.65	1	1	1		
9	PE2	PA1	0.80	0.46	1	1	1		1
10	CA1	CA1	0.77	0.77	1	1	1		
11	CC1	CA1	0.98	0.77	1	1	1	1	
12	RUX	RUA	2.38	1.37	1	1	1		
13	CC2	IA1	1.12	0.61	1	1	1	1	
14	RMC	RMA	1.27	1.17	1	1	1		
15	SSC	CA1	1.12	0.77	1	1	1		
16	PE2	PA2	0.80	0.48	1	1	1		
17	CB1	CA1	0.86	0.77	1	1	1		

OFFICE OF THE MEDICAID INSPECTOR GENERAL
 QUEENS BOULEVARD EXTENDED CARE FACILITY
 AUDIT #13-4656
 FINDINGS BY SAMPLE NUMBER

Sample #	Reported RUG	Derived RUG	Reported RUG Weight	Derived RUG Weight	DETAILED FINDINGS				
					DISALLOW BED MOBILITY SELF PERFORMANCE	DISALLOW TRANSFER SELF PERFORMANCE	DISALLOW TOILET USE SELF PERFORMANCE	DISALLOW SPECIAL TREATMENTS, PROCEDURES	DISALLOW RESTORATIVE NURSING PROGRAMS
18	RVC	RMA	1.53	1.17	1	1	1		
19	CC1	PA1	0.98	0.46	1	1	1		
20	SSB	CA1	1.06	0.77	1	1	1		
21	CB2	CA2	0.91	0.84	1	1	1		
22	CB2	CA2	0.91	0.84	1	1	1		
23	CC1	IA2	0.98	0.77		1	1		
24	CC2	CA2	1.12	0.84	1	1	1		
25	PC2	PA1	0.67	0.46	1	1	1		1
26	PE2	IA1	0.80	0.61	1	1	1		1
TOTALS					<u>25</u>	<u>26</u>	<u>26</u>	<u>2</u>	<u>5</u>

**OFFICE OF THE MEDICAID INSPECTOR GENERAL
QUEENS BOULEVARD EXTENDED CARE FACILITY
AUDIT #13-4656
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 8 instances, documentation did not support resident required total assist every time.	2, 6, 8, 11, 13, 15, 19, 24
In 8 instances, documentation did not support resident required weight bearing assist three or more times.	3, 9, 12, 14, 16, 18, 20, 26
In 9 instances, documentation did not support resident required non weight bearing assist three or more times.	1, 4, 5, 7, 10, 17, 21, 22, 25

Transfer Self-Performance

In 9 instances, documentation did not support resident required total assist every time.	2, 6, 8, 11, 13, 15, 19, 23, 24
In 11 instances, documentation did not support resident required weight bearing assist three or more times.	3, 9, 12, 14, 16, 17, 18, 20, 21, 22, 26
In 6 instances, documentation did not support resident required non weight bearing assist three or more times.	1, 4, 5, 7, 10, 25

Toilet Use Self-Performance

In 9 instances, documentation did not support resident required total assist every time.	2, 6, 8, 11, 13, 15, 19, 23, 24
In 12 instances, documentation did not support resident required weight bearing assist three or more times.	3, 7, 9, 12, 14, 16, 17, 18, 20, 21, 22, 26
In 5 instances, documentation did not support resident required non weight bearing assist three or more times.	1, 4, 5, 10, 25

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 the number of days with MD exams during the look back period.	13
In 2 instances, documentation did not support the number of days with MD orders during the look back period.	11, 13

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

Restorative Nursing Programs

In 5 instances, documentation did not support measurable goals and/or periodic evaluation of the nursing rehabilitation program.

5, 7, 9, 25, 26

RUGS-II Classifications Overturned

In 24 instances, the RUG classifications were overturned.

1, 2, 3, 5, 6, 7, 8, 9, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26

10 NYCRR §86-2.10, Volume A-2

**OFFICE OF THE MEDICAID INSPECTOR GENERAL
QUEENS BOULEVARD EXTENDED CARE FACILITY
AUDIT #13-4656
ANALYSIS OF PROVIDER RESPONSE**

Sample #	Finding	Provider Response	Accepted/Denied	Explanation
1	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability July 2012 • ADL Tracking Sheet with ARD 07/22/12 	Denied	The MDS Assessment Reference Date (ARD) is 07/22/12. Documentation does not support the MDS Manual Guidelines, Section G.
2	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May 2012 • ADL Tracking Sheet with ARD 05/24/12 • ADL Tracking Sheet with ARD 12/05/11 (two pages) 	Denied	The MDS Assessment Reference Date (ARD) is 05/24/12. Documentation does not support the MDS Manual Guidelines, Section G.
2	G0110Ha Self-Performance Eating		Accepted	Disallowance was reversed and will not be included in the Final Report.
3	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability July 2012 • ADL Tracking Sheet with ARD 07/09/12 	Denied	The MDS Assessment Reference Date (ARD) is 07/09/12. Documentation does not support the MDS Manual Guidelines, Section G.

	Performance Toilet Use			
	G0110Bb Support provided Transfer		Accepted	Disallowance was reversed and will not be included in the Final Report.
4	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability June 2012 • ADL Tracking Sheet with ARD 06/18/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 06/18/12.</p> <p>Documentation does not support the MDS Manual Guidelines, Section G.</p>
5	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May 2012 • ADL Tracking Sheet with ARD 05/18/12 • Restorative Nursing Rehabilitation-Floor Ambulation • Nursing Rehabilitation Note • Restorative Nursing Rehabilitation-ROM • Nursing Rehabilitation Note 	Denied	<p>The MDS Assessment Reference Date (ARD) is 05/18/12.</p> <p>Documentation does not support the MDS Manual Guidelines, Section G.</p>

	O0500B Restorative Nursing Active Range of Motion (AROM) O0500F Restorative Nursing Active Walking Training/ Practice	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May 2012 • ADL Tracking Sheet with ARD 05/18/12 • Restorative Nursing Rehabilitation-Floor Ambulation • Nursing Rehabilitation Note • Restorative Nursing Rehabilitation-ROM • Nursing Rehabilitation Note 	Denied	Documentation did not support Section O0500 of the MDS Manual's coding instructions for Restorative Nursing Programs.
6	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability Month May 2012 • ADL Tracking Sheet with ARD 5/31/12 • Physician Order Form (two pages) 	Denied	The MDS Assessment Reference Date (ARD) is 05/31/12. Documentation does not support Section G of the MDS Manual's ADL coding criteria.
6	O0700 Physician Orders		Accepted	Disallowance was reversed and will not be included in the Final Report.
7	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability June 2012 • ADL Tracking Sheet with ARD 06/15/12 • Restorative Nursing Rehabilitation-Floor Ambulation and ROM June 2012 • Rehabilitation Note • Physician's Order Form 	Denied	The MDS Assessment Reference Date (ARD) is 06/15/12. Documentation does not support Section G of the MDS Manual's ADL coding criteria.

7	O0500B Restorative Nursing Active Range of Motion (AROM) O0500F Restorative Nursing Active Walking Training/ Practice	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability June 2012 • ADL Tracking Sheet with ARD 06/15/12 • Restorative Nursing Rehabilitation-Floor Ambulation and ROM June 2012 • Rehabilitation Note • Physician's Order 	Denied	<p>The MDS Assessment Reference Date (ARD) is 06/15/12.</p> <p>Documentation did not support Section O0500 of the MDS Manual's coding instructions for Restorative Nursing Programs.</p>
8	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability July 2012 • ADL Tracking Sheet with ARD 07/18/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 07/18/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
	G0110Ha Self-Performance Eating		Accepted	Disallowance was reversed and will not be included in the Final Report.
9	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May 2012 • ADL Tracking Sheet with ARD 05/07/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 05/07/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
9	O0500B Restorative Nursing Active	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May 2012 	Denied	The MDS Assessment Reference Date (ARD) is 05/07/12.

	Range of Motion (AROM) O0500F Restorative Nursing Active Walking Training/ Practice	<ul style="list-style-type: none"> ADL Tracking Sheet with ARD 05/07/12 		Documentation does not support Section O0500 of the MDS Manual's coding instructions for Restorative Nursing Programs.
10	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> C.N.A. Assignment/ Accountability April and May 2012 ADL Tracking Sheet with ARD 05/03/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 05/03/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
11	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> ADL Tracking Sheets (two pages) C.N.A. Assignment/ Accountability April 2012 and May 2012 Physician Order Forms Medical Progress Notes Report of Consultation dated 4/19/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 05/04/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
	O0700 Physician Orders	<ul style="list-style-type: none"> ADL Tracking Sheets (two pages) C.N.A. Assignment/ Accountability April 2012 and May 2012 Physician Order Forms Medical Progress Notes Report of Consultation dated 04/19/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 05/04/12.</p> <p>Documentation does not support section O0700 of the MDS Manual's coding instructions for Physician Orders.</p>

12	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability July 2012 • ADL Tracking Sheet with ARD 07/17/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 07/17/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
13	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • ADL Tracking Sheet with ARD 06/01/12 • C.N.A. Assignment/ Accountability May and June 2012 	Denied	<p>The MDS Assessment Reference Date (ARD) is 06/01/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
14	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/Accountability June and July 2012 • ADL Tracking Sheet with ARD 07/02/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 07/02/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
15	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability July 2012 • ADL Tracking Sheet with ARD 07/11/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 07/11/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria,</p>

	Performance Toilet Use			
16	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/Accountability June and July 2012 • ADL Tracking Sheet with ARD 07/06/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 07/06/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
17	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/Accountability June and July 2012 • ADL Tracking Sheet with ARD 07/03/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 07/03/12.</p> <p>The Facility documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
18	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/Accountability May and June 2012 • ADL Tracking Sheet with ARD 06/05/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 06/05/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>

19	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May 2012 • ADL Tracking Sheet with ARD 05/23/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 05/23/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
20	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • No additional documentation submitted. 	Denied	<p>The MDS Assessment Reference Date (ARD) is 07/25/12.</p> <p>The draft report finding is unchanged and will be included in the final report.</p>
21	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/Accountability Page 2, 3, and 4 (missing page one with date) • C.N.A. Assignment/Accountability June 2012 • ADL Tracking Sheet with ARD 12/27/11 • ADL Tracking Sheet with ARD 06/19/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 06/19/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
22	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer	<ul style="list-style-type: none"> • C.N.A. Assignment/Accountability January 2012 • C.N.A. Assignment/Accountability June 2012 • ADL Tracking Sheet with ARD 01/01/12 	Denied	<p>The MDS Assessment Reference Date (ARD) is 06/04/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does</p>

	G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • ADL Tracking Sheet with ARD 06/04/12 • Medical Progress Notes 		not support Section G of the MDS Manual's ADL coding criteria.
	O0700 Physician Orders	<ul style="list-style-type: none"> • Physician's Order Form 	Accepted	Disallowance was reversed and will not be included in the Final Report.
23	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May and June 2012 • ADL Tracking Sheet with ARD 06/05/12 	Denied	The MDS Assessment Reference Date (ARD) is 06/05/12. Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.
23	G0110Ab Support Provided Bed Mobility		Accepted	Disallowance was reversed and will not be included in the Final Report.
24	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • MDS Section D • Progress Note dated 06/25/12 • C.N.A. Assignment/ Accountability June 2012 (three pages) and January 2012 (page one of four) • ADL Tracking Sheet with ARD 06/11/12 • Nourish Form • Physician Order Form (four pages) 	Denied	The MDS Assessment Reference Date (ARD) is 06/11/12. Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria:

24	G0110Ha Self-Performance Eating		Accepted	Disallowance was reversed and will not be included in the Final Report.
24	O0700 Physician Orders		Accepted	Disallowance was reversed and will not be included in the Final Report.
25	G0110Aa Self-Performance Bed Mobility G0110Ba Self-Performance Transfer G0110Ia Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May 2012 ▪ ADL Tracking Sheet with ARD 05/17/12 ▪ Nursing Notes • Restorative Nursing Rehabilitation May 2012 AROM • Nursing Rehabilitation Note • Restorative Nursing Rehabilitation November 2011 • C.N.A. Assignment/ Accountability November 2011 ▪ ADL Tracking Sheet with ARD 11/24/11 • Comprehensive Care Plan – Altered Mood • Comprehensive Care Plan –Self Care Deficit 	Denied	<p>The MDS Assessment Reference Date (ARD) is 05/17/12.</p> <p>Documentation for Self-Performance Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>

25	O0500B Restorative Nursing Active Range of Motion (AROM) O0500F Restorative Nursing Active Walking Training/ Practice	<ul style="list-style-type: none"> • C.N.A. Assignment/ Accountability May 2012 • ADL Tracking Sheet with ARD 05/17/12 • Nursing Notes • Restorative Nursing Rehabilitation May 2012 AROM • Nursing Rehabilitation Note • Restorative Nursing Rehabilitation November 2011 • C.N.A. Assignment/ Accountability November 2011 • ADL Tracking Sheet with ARD 11/24/11 • Comprehensive Care Plan – Altered Mood • Comprehensive Care Plan –Self Care Deficit 	Denied	<p>The MDS Assessment Reference Date (ARD) is 05/17/12.</p> <p>Documentation does not support Section O0500 of the MDS Manual's coding instructions for Restorative Nursing Programs.</p>
26	G0110Aa Self-Performance Bed Mobility, G0110Ba Self-Performance Transfer, G0110la Self-Performance Toilet Use	<ul style="list-style-type: none"> • C.N.A. Assignment/Accountability May and June 2012 • ADL Tracking Sheet with ARD 06/06/12 • Comprehensive Care Plan ADLS • Comprehensive Care Plan Falls and Injury 	Denied	<p>The MDS Assessment Reference Date (ARD) is 06/06/12.</p> <p>Documentation for Self-Performance of Bed Mobility, Transfer, and Toilet Use does not support Section G of the MDS Manual's ADL coding criteria.</p>
26	O0500B Restorative Nursing Active Range of Motion (AROM) O0500F Restorative Nursing Active Walking Training/ Practice	<ul style="list-style-type: none"> • C.N.A. Assignment/Accountability May and June 2012 • ADL Tracking Sheet with ARD 06/06/12 • Comprehensive Care Plan ADLS • Comprehensive Care Plan Falls and Injury 	Denied	<p>The MDS Assessment Reference Date (ARD) is 06/06/12.</p> <p>Documentation does not support Section O0500 of the MDS Manual's coding instructions for Restorative Nursing Programs.</p>