



**Center for Clinical Standards and Quality/Survey & Certification Group**

**Ref: S&C: 14-43-NH**

**DATE:** August 25, 2014

**TO:** State Survey Agency Directors

**FROM:** Director  
Survey and Certification Group

**SUBJECT:** Completion of Minimum Data Set (MDS) 3.0 Discharge Assessments for Resident Transfers from a Medicare- and/or Medicaid-Certified Bed to a Non-Certified Bed

**Memorandum Summary**

**Completion of Minimum Data Set (MDS) 3.0 Discharge Assessments for Transfer from Medicare- and/or Medicaid-Certified Beds to Non-Certified Beds:** The Centers for Medicare & Medicaid Services (CMS) is reinforcing the requirement for MDS 3.0 Discharge assessments to be completed when a resident transfers from a Medicare- and/or Medicaid-certified bed to a non-certified bed. Discharge assessments are required assessments and are critical to ensuring the accuracy of Quality Measures (QMs) and in aiding in resident care planning for discharge from the certified facility.

**Background**

The CMS is reinforcing the requirement for and the importance of completing MDS 3.0 Discharge assessments when a resident is transferred from a Medicare- and/or Medicaid-certified bed (i.e., a bed located within a Skilled Nursing Facility (SNF) or a Nursing Facility (NF) to a non-certified bed. CMS previously communicated the importance of Discharge assessments with the issuance of S&C Memorandum 13-56-NH: Minimum Data Set (MDS) 3.0 Discharge Assessments that Have Not Been Completed and/or Submitted in August 2013.

**Regulatory Requirements**

Federal Regulation 42 CFR §483.12(a) Transfer and Discharge defines transfer and discharge as “movement of a resident to a bed outside of the certified facility whether that bed is in the same physical plant or not. Transfer and discharge does not refer to movement of a resident to a bed

within the same certified facility.” Federal Regulation 42 CFR §483.20(f) Automated Data Processing Requirement includes the requirement for facilities to “electronically transmit encoded, accurate, and complete MDS data to the CMS System, including ... a subset of items upon a resident’s transfer, reentry, discharge, and death.” State requirements for MDS 3.0 completion for residents residing in licensed but not certified beds have no bearing on federal requirements for MDS 3.0 completion and submission.

### **Importance and CMS Policy**

The CMS recognizes that certified facilities have both certified and non-certified beds housed in the same physical structure or certified facility. Discharge assessments are required for residents that are transferred to non-certified beds housed under the same certified facility. The *Long-Term Care Facility Resident Assessment Instrument User’s Manual, Version 3.0 (RAI User’s Manual)* reinforces that requirements noted in the *RAI User’s Manual* apply to all certified beds including on page 2-2 where it states, “the requirements for the RAI are found at 42 CFR 483.20 and are applicable to all residents in Medicare and/or Medicaid certified long-term care facilities.” All Omnibus Budget Reconciliation Act (OBRA)-required assessments, including Discharge assessments, are required assessments that NFs and SNFs must complete and submit to the Quality Improvement and Evaluation System (QIES) Assessment Submission and Processing (ASAP) system in accordance with the requirements outlined in the *RAI User’s Manual*. Failure to submit required assessments may result in inaccurate QMs and survey citations as well as negative impacts on discharge planning activities.

The RAI User’s Manual Version 1.12 is scheduled to be posted to CMS’ Nursing Home Quality Initiatives website: <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html> on or about September 5, 2014.

**Contact:** Please direct any questions or concerns related to this memorandum to [MDSforSandC@cms.hhs.gov](mailto:MDSforSandC@cms.hhs.gov).

**Effective Date:** Immediately. This information should be communicated with all survey and certification staff, their managers, and the State/Regional Office training coordinators within 14 days of this memorandum.

/s/

Thomas E. Hamilton

cc: Survey and Certification Regional Office Management