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## CMS Changes Helpful to LTC Community

*–Modifications reduce complexity, burden for health care providers–*

**Washington, DC**– This week, the Centers for Medicare & Medicaid Services (CMS) announced it will incorporate several changes aimed at easing the complexity of MDS 3.0, including reduced frequency of the interview components of assessments and less frequent RAI manual updates. The announcement was made to an audience of administrators, MDS consultants, MDS nurses, and health care professionals at the 2012 MDS 3.0 National Conference occurring this week in St. Louis.

“We are pleased that CMS has taken these steps to reduce the burden of MDS on patients and care providers,” said Dr. David Gifford, Senior Vice President of Quality, Regulatory Affairs, and Research at the American Health Care Association (AHCA). “Time saved by these modifications can be directed to the most important priority - improving quality care and the lives of residents.”

CMS announced multiple changes at this week’s conference, including several that will directly impact long term and post-acute care providers, such as:

- **Reduce the frequency of RAI manual and tool changes:** CMS plans to release errata documents on only those pages where changes and modifications are made, making it easier for providers to maintain the RAI manual. After the next release in October 2012, future updates will occur only once per year, making it easier for providers to remain current on changes in policy and instructions.
- **Allow providers to carry forward patient interview coding** for unscheduled PPS assessments (COT, SOT, and EOT), provided that the most recent interviews were performed no more than 14 days prior. This change does not apply to scheduled assessments or for assessments on patients that experience condition changes.

“AHCA highly values our working relationship with CMS,” continued Dr. Gifford. “We will continue to work with CMS to implement best practices for high quality care.”

For more information about CMS and MDS 3.0, visit [www.CMS.gov](http://www.CMS.gov).