Track Changes
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Chapter	Section	Page	Change
1	—	1-1	**Experts in Long Term Care** • Tracy Burger Montag, RN, BSN, RAC-CT • ~~Teresa M. Mota, BSN, RN, CALA, WCC, CPEHR~~ • John Morris, PhD, MSW
1	—	1-1–1-4	Page length changed due to revised content.
1	—	1-3–1-4	**CMS** • Brandy Barnette, MBA, RN, CCM • Ellen M. Berry, PT • CMS Regional Office RAI Coordinators • Lori Grocholski, MSW, LCSW • Christine Grose, MS, RN • Renee Henry, MSN, RN • Sheila Lambowitz, Director (Retired)—Division of Institutional Post-Acute Care • Sharon Lash, MPH, MA, RN • Alan Levitt, MD, Medical Officer—Division of Chronic and Post-Acute Care • Shari Ling, MD • Stella Mandl, BSW, BSN, PHN, RN, Deputy Director—Division of Chronic and Post-Acute Care • Tara McMullen, PhD, MPH • Teresa M. Mota, BSN, RN, CALA, WCC • Mary Pratt, MSN, RN, Director—Division of Chronic and Post-Acute Care • Michael Stoltz • Jennifer Sutcliffe, RN, BSN, RAC-CT • Christine Teague, RN-BC, BS, RAC-CT

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Chapter	Section	Page	Change
1	1.2	1-6	• **Minimum Data Set (MDS).** A core set of screening, clinical, and functional status elements, including common definitions and coding categories, which forms the foundation of a comprehensive assessment for all residents of nursing homes certified to participate in Medicare or Medicaid. The items in the MDS standardize communication about resident problems and conditions within nursing homes, between nursing homes, and between nursing homes and outside agencies. The required subsets of data items for each MDS assessment and tracking document (e.g., Comprehensive, Quarterly, OBRA Discharge, Entry Tracking, PPS item sets) can be found in Appendix H.
1	1.3	1-7	• **Medicare and Medicaid Payment Systems.** The MDS contains items that reflect the acuity level of the resident, including diagnoses, treatments, and an evaluation of the resident's functional status. The MDS is used as a data collection tool to classify Medicare residents into RUGs (Resource Utilization Groups). The RUG classification system is used in SNF PPS for skilled nursing facilities, non-critical access hospital swing bed programs, and in many State Medicaid case mix payment systems to group residents into similar resource usage categories for the purposes of reimbursement. More detailed information on the SNF PPS is provided in Chapters 2 and 6. Please refer to the Medicare Internet-Only Manuals, including the Medicare Benefit Policy Manual, located at ~~http://www.cms.gov/Manuals/IOM/list.asp~~ https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/index.html for comprehensive information on SNF PPS, including but not limited to SNF coverage, SNF policies, and claims processing.
1	1.7	1-14	G — Functional Status — Assess the need for assistance with activities of daily living (ADLs), altered gait and balance, and decreased range of motion. GG — Functional Abilities and Goals — Assess the need for assistance with self-care and mobility activities.