

# **NORTH DAKOTA NURSING FACILITY PAYMENT SYSTEM**

North Dakota Department of Human Services  
Medical Services  
600 E Boulevard Ave Dept 325  
Bismarck ND 58505



## **BACKGROUND**

State law requires all nursing facilities to charge both private pay and Medicaid residents the same rate for services based on a case mix system. Additional charges may be made by a facility for private room or services which are not required to be provided. Nursing facilities have been operating with case mix and equalization of rates since January 1, 1990.

## **WHAT IS A CASE MIX PAYMENT SYSTEM?**

Case Mix is a means of payment for a resident's cost of care that is based on documented evidence of the intensity of care and services provided to the resident.

Each nursing facility has thirty-four case mix classifications with a corresponding payment rate. The payment rate for a resident who needs more care will be higher than for a resident who needs less care. Equalization of rates requires all residents be charged the same rate for comparable care and services.

## **DO ALL NURSING FACILITIES HAVE THE SAME RATES?**

No. Each facility will have its own set of rates. A facility's rates are based on costs incurred by the facility for property, administration, chaplain, medical records, plant operations, housekeeping, dietary, pharmacy consultant, food, laundry, social services, activities, therapies, and nursing. Only the portion of the rates related to nursing and therapy costs varies by classification.

Each facility's rates change on January 1. Rate changes may also occur during the year to adjust costs due to audits, property changes, or one-time adjustments.

## **HOW IS MY RATE DETERMINED?**

Your rate is determined by your classification. Your classification is generated by a form called the Minimum Data Set (MDS). The MDS is completed by an interdisciplinary team at the facility. The information used to support the MDS is documentation in your medical record. Once completed, the MDS is sent to the North Dakota Department of Human Services and a classification is assigned, based on the information in the Minimum Data Set.

## **WILL MY RATE REMAIN THE SAME ONCE I HAVE BEEN CLASSIFIED?**

Your rate will change if your classification changes. Classification changes can only occur at specific assessments. MDS assessments are completed within fourteen days after admission to a nursing facility or upon return from the hospital. In addition, you will be assessed every three months.

You remain in the same classification until the next assessment or at the start or stop of therapies, even though your condition may change. The daily rate associated with your classification will also remain the same unless a rate adjustment creates a change in the facility's rates.

## **WHAT TYPES OF THINGS DETERMINE A CLASSIFICATION?**

The North Dakota Case Mix System consists of thirty-four resident classifications. There are seven major clinical groups. Each clinical group is divided in to subgroups based on the resident's Activities of Daily Living (ADL) score, nursing rehabilitation, and signs of depression.

The ADL score reflects the degree of assistance needed in four specific areas: eating, toileting, transferring, and bed mobility. The ADL score ranges from four to eighteen. A score of four represents independence or minimal supervision with these ADLs. A score of eighteen means a resident is completely dependent in these ADLs.

Nursing rehabilitation services are being provided if a resident receives two or more of the following for at least fifteen minutes per day for at least six of the seven days preceding the assessment:

1. Passive or active range of motion;
2. Amputation or prosthesis care;
3. Splint or brace assistance;
4. Dressing or grooming training;
5. Eating or swallowing training;
6. Bed mobility or walking training;
7. Transfer training;
8. Communication training; or
9. Any scheduled toileting or bladder retraining program.

A resident has signs of depression if the resident exhibits the following:

1. Little interest or please in doing things;
2. Feeling down, depressed or hopeless;
3. Trouble falling or staying asleep, or sleeping too much;
4. Feeling tired or having little energy;
5. Poor appetite or overeating;
6. Feeling bad about yourself, that you are a failure or have let yourself or your family down;
7. Trouble concentrating on things, such as reading the newspaper or watching television;
8. Moving or speaking so slowly that other people could have noticed;
9. Being so fidgety or restless that you have been moving around a lot more than usual; or
10. Thoughts that you would be better off dead, or hurting yourself in some way.

Special characteristics in each major clinical group are:

**A. REHABILITATION CATEGORY.**

A resident must receive rehabilitation therapy to qualify for this group. A subgroup is assigned based on the resident's Activities of Daily Living score. A rehabilitation category may be assigned within a classification period based on the start date if therapies are begun on any date not within an assessment reference period. A rehabilitation category may be discontinued within a classification period based on the stop date if therapies are stopped on any date not within an assessment reference period.

<b>SUBGROUPS</b>	<b>ADL SCORE</b>
Rehabilitation D	17 - 18
Rehabilitation C	14 - 16
Rehabilitation B	9 - 13
Rehabilitation A	4 - 8

**B. EXTENSIVE SERVICE CATEGORY.**

A resident must have:

1. Within the fourteen days preceding the assessment, received intravenous medication or tracheostomy care or required a ventilator, respirator, or suctioning; or
2. Within the seven days preceding the assessment, received intravenous medications or intravenous feeding provided and administered by staff within the facility.

A resident who qualifies for the extensive services category will be assigned a qualifier score of zero to five based on:

1. The presence of a clinical criteria that qualifies the resident for the special care, clinically complex, or impaired cognition categories;

2. Whether the resident received intravenous medications or intravenous feeding provided and administered by staff within the facility; and
3. Whether the resident required a ventilator or suctioning.

A resident will be assigned to a subgroup based on the resident's Activities of Daily Living and the Qualifier score. A resident who qualifies for the extensive services category but has an Activities of Daily Living score of four, five, or six will be classified as Special Care A.

<b>SUBGROUPS</b>	<b>ADL SCORE</b>	<b>QUALIFIER SCORE</b>
Extensive Services 3	7 - 18	4 - 5
Extensive Services 2	7 - 18	2 - 3
Extensive Services 1	7 - 18	0 - 1

#### **C. SPECIAL CARE CATEGORY.**

A resident must have at least one of the following conditions or treatments:

1. Multiple sclerosis, cerebral palsy, or quadriplegia with an Activities of Daily Living score of at least ten;
2. Respiratory therapy seven days a week;
3. Treatment for pressure or stasis ulcers on two or more body sites;
4. Surgical wound or open lesion with treatment;
5. Tube feedings that comprise at least 26% of daily calorie requirements and at least 501 milliliters of fluid through the tube per day, and be aphasic;
6. Radiation therapy; or
7. A fever in combination with dehydration, pneumonia, vomiting, weight loss, or tube feeding.

A resident who qualifies for the special care category is assigned a subgroup based on the resident's Activities of Daily Living score.

<b>SUBGROUPS</b>	<b>ADL SCORE</b>
Special Care C	17 - 18
Special Care B	15 - 16
Special Care A	7 - 14

#### **D. CLINICALLY COMPLEX CATEGORY.**

A resident must have a least one of the following conditions, treatments, or circumstances:

1. Comatose;
2. Burns;
3. Septicemia;
4. Pneumonia;
5. Internal Bleeding;
6. Dehydration;
7. Dialysis;
8. Hemiplegia with an Activities of Daily Living score of at least ten;
9. Chemotherapy
10. Tube feedings that comprise at least 26% of daily caloric requirements and at least 501 milliliters of fluid through the tube per day;
11. Transfusions;
12. Foot wound with treatment;
13. Diabetes mellitus, with injections seven days per week and two or more physician order changes in the fourteen days preceding the assessment;



14. Oxygen therapy administered for at least two hours or intermittently with at least two application of at least 30 minutes each in the facility in the fourteen days preceding the assessment; or
15. Within the fourteen days preceding the assessment, at least one physician visit with at least four order changes or at least two physician visits with at least two order changes.

A resident who qualifies for the clinically complex category is assigned a subgroup based on the resident's Activities of Daily Living score and whether the resident has signs of depression.

<b>SUBGROUPS</b>	<b>ADL SCORE</b>	<b>SIGNS OF DEPRESSION</b>
Clinically Complex C2	17 - 18	Yes
Clinically Complex C1	17 - 18	No
Clinically Complex B2	12 - 16	Yes
Clinically Complex B1	12 - 16	No
Clinically Complex A2	4 - 11	Yes
Clinically Complex A1	4 - 11	No

#### **E. IMPAIRED COGNITION CATEGORY.**

A resident must have a cognition performance scale score of three, four, or five and an Activities of Daily Living score of less than eleven. A resident who qualifies for the impaired cognition category is assigned a subgroup based on the resident's Activities of Daily Living score and the resident's need for nursing rehabilitation services.

<b>SUBGROUPS</b>	<b>ADL SCORE</b>	<b>NURSING REHABILITATION</b>
Impaired Cognition B2	6 - 10	Yes
Impaired Cognition B1	6 - 10	No
Impaired Cognition A2	4 - 5	Yes
Impaired Cognition A1	4 - 5	No

## **F. BEHAVIOR ONLY CATEGORY**

A resident must have exhibited, in four of the seven days preceding the assessment, any of the following behaviors and have an Activities of Daily Living score of less than eleven:

1. Wandering;
2. Verbal abuse;
3. Physical abuse;
4. Inappropriate behavior;
5. Resisted care; or
6. Hallucinating or having delusions.

A resident who qualifies for the behavior only category is assigned a subgroup based on the resident's Activities of Daily Living score and the resident's need for nursing rehabilitation services.

<b>SUBGROUPS</b>	<b>ADL SCORE</b>	<b>NURSING REHABILITATION</b>
Behavior Only B2	6 - 10	Yes
Behavior Only B1	6 - 10	No
Behavior Only A2	4 - 5	Yes
Behavior Only A1	4 - 5	No

## **G. REDUCED PHYSICAL FUNCTIONING CATEGORY.**

A resident who does not qualify for any other group is assigned a subgroup based on the resident's Activities of Daily Living score and the resident's need for nursing rehabilitation services.

<b>SUBGROUPS</b>	<b>ADL SCORE</b>	<b>NURSING REHABILITATION</b>
Reduced Physical Functioning E2	16 - 18	Yes
Reduced Physical Functioning E1	16 - 18	No
Reduced Physical Functioning D2	11 - 15	Yes
Reduced Physical Functioning D1	11 - 15	No
Reduced Physical Functioning C2	9 - 10	Yes
Reduced Physical Functioning C1	9 - 10	No
Reduced Physical Functioning B2	6 - 8	Yes
Reduced Physical Functioning B1	6 - 8	No
Reduced Physical Functioning A2	4 - 5	Yes
Reduced Physical Functioning A1	4 - 5	No

## **WHAT IF I DISAGREE WITH MY CLASSIFICATION?**

You have the right to review the documentation supporting your classification. You also have the right to appeal your classification. If requested, the nursing facility will assist you in this process.

## **WHAT IF I NEED MORE INFORMATION?**

If you need more information you may contact your local nursing facility or the Medical Services Division, North Dakota Department of Human Services, 600 E Boulevard Ave – Dept 325, Bismarck, ND 58505-0260. Telephone 701-328-2321 or 800-755-2604 or FAX 701-328-1544.

The Department of Human Services makes available all services and assistance without regard to race, color, religion, national origin, age, sex, political beliefs, disability, or status with respect to marriage or public assistance, in accordance with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, and the North Dakota Human Rights Act of 1983. Persons who contract with or receive funds to provided services for the North Dakota Department of Human Services are obligated to abide by the provisions of these laws. The Department of Human Services makes its program accessible to persons with disabilities.

