# STEP BY STEP GUIDE TO ASSIGNING A CLASSIFICATION FOR RUG IV



# **Published By:**

Medical Services Division

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Bismarck, ND 58505-0250

**July 2020** 

### INTRODUCTION

The following worksheet is a step by step walk through to manually determine the appropriate classification based on the information from an MDS 3.0 assessment.

There are two basic approaches used in a classification system. One is index maximizing in which the classification with the highest rate is used. The other is hierarchical. In this approach, you start at the top, work down and the classification is the first group for which the resident qualifies.

North Dakota uses index maximizing to ensure payment for a resident will be at the highest appropriate level. If a resident qualifies for more than one classification, the classification with the highest case mix index is used.

In the index maximizing approach you start at the top of the model. You would work through all of the 48 classification groups, noting each classification for which the resident qualifies. When finished, you select the classification with the highest case mix index. This group is the index-maximized classification for the resident.

This manual is effective October 1, 2019.

July 2020 Updates: removed K0510B1, updated values to K0710A3 and K0710B3

### **CALCULATION OF TOTAL "ADL" SCORE**

The ADL score is a component of the calculation for placement in all RUG-IV groups. The ADL score is based upon the four "late loss" ADLs (bed mobility, transfer, toilet use, and eating), and this score indicates the level of functional assistance or support required by the resident. It is a very important component of the classification process.

### STEP#1

To calculate the ADL score use the following chart for bed mobility (G0110A), transfer (G0110B), and toilet use (G0110I). **Enter the ADL score for each item.** 

Self-Performand Column 1 =	ce	Support Column 2 =	ADL Score =	SCORE
-, 0, 1, 7, or 8	and	(any number)	0	G0110A =
2	and	(any number)	1	G0110B =
3	and	-, 0, 1, or 2	2	G0110I =
4	and	-, 0, 1, or 2	3	
3 or 4	and	3	4	

### **STEP # 2**

To calculate the ADL score for eating (G0110H), use the following chart. Enter ADL score.

Self-Performanc Column 1 =	е	Support Column 2 =	ADL Score =	SCORE
-, 0, 1, 2, 7, or 8	and	-, 0, 1, or 8	0	G0110H =
-, 0, 1, 2, 7, or 8	and	2 or 3	2	
3 or 4	and	-, 0, or 1	2	
3	and	2 or 3	3	
4	and	2 or 3	4	

### STEP#3

Add the four scores for the total ADL score. This is the **RUG-IV TOTAL ADL SCORE**. The total ADL score ranges from 0 through 16.

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Other ADLs are also very important, but the research indicates that the late loss ADLs predict resource use most accurately. The early loss ADLs do not significantly change the classification hierarchy or add to the prediction of resource use.

### CATEGORY I: REHABILITATION

Rehabilitation therapy is any combination of the disciplines of physical therapy, occupational therapy, or speech-language pathology services, and is located in Section O (Items at O0400A, B, C). Nursing rehabilitation is also considered for the low intensity classification level. It consists of urinary or bowel toileting program, providing active or passive range of motion, providing splint/brace assistance, training in bed mobility or walking, training in transfer, training in dressing/grooming, training in eating/swallowing, training in amputation/prosthesis care, and training in communication. This information is found in Sections H0200C, H0500, and O0500.

### STEP#1

Sum the therapy minutes in section O0400. ST, OT, PT (using the total of individual, concurrent, and group). If the total number of therapy minutes is less than 45 minutes, the resident does not classify in the Rehabilitation Category. Skip to Category II now.

### **STEP # 2**

If the total number of therapy minutes is equal to or greater than 45 minutes, use the following to complete the Rehabilitation Classification.

Rehabilitation Criteria (section O0400 [a.ST b. OT c. PT] and O0420) In the last 7 days:

Received 150 or more minutes AND

At least 5 distinct calendar days of therapy **OR** 

Alternative Rehabilitation Criteria (section O0400 [a.ST b. OT c. PT], O0420, and H0200C, H0500 and/or O0500)

In the last 7 days:

Received 45 or more minutes AND

At least 3 distinct calendar days of therapy AND

2 or more nursing rehabilitation services\* received for at least 15 minutes each with each administered for 6 or more days

### **Nursing Rehabilitation Services**

Urinary toileting / bladder training program or H0200C

bowel training program or H0500 \*O0500A or Passive or active ROM

O0500B

\*O0500C Splint or brace assistance \*O0500D or Bed mobility or walking training

O0500F

O0500E Transfer training

O0500G Dressing or grooming training Amputation / prosthesis care O0500I

Communication training O0500J

\*Count as one service even if both provided.

RUG-IV ADL Score	RUG-IV Class
15-16	RAE
11-14	RAD
6-10	RAC
2-5	RAB
0-1	RAA

<b>RUG-IV</b>	Classification	

If the resident does not classify in the Rehabilitation Category, go to Category II.

### **CATEGORY II: EXTENSIVE SERVICES**

The classification groups in this category are based on various services provided. Use the following instructions to begin the calculation:

### STEP#1

Determine whether the resident is coded for **one** of the following treatments or services:

O0100F2 Ventilator or respirator while a resident
O0100E2, Tracheostomy care and Suctioning while a resident
O0100D2

If the resident does not receive one of these treatments or services, skip to Category III now.

### STEP#2

If at least one of these treatments or services is coded and the resident has a total RUG-IV ADL score of 2 or more, he/she classifies as Extensive Services. Move to Step #3. If the resident's ADL score is 0 or 1, s/he classifies as Clinically Complex. Skip to Category V, Step #2.

### **STEP # 3**

The resident classifies in the Extensive Services category according to the following chart:

Extensive Service Conditions	RUG-IV Class
Ventilator/respirator*	ES3
Tracheostomy care and Suctioning*	ES2

<sup>\*</sup>while a resident

**RUG-IV Classification** 

If the resident does not classify into the Extensive Services Category, proceed to Category III.

### **CATEGORY III: SPECIAL CARE HIGH**

The classification groups in this category are based on certain resident conditions or services. Use the following instructions:

### STEP#1

Determine whether the resident is coded for one of the following conditions or services:

B0100, ADLs Comatose and completely ADL dependent or ADL did not occur

(G0110A1, G0110B1, G0110H1, and G0110I1 all equal 4 or 8)

I2100 Septicemia

I2900, N0350A,B Diabetes with both of the following:

Insulin injections (N0350A) for all 7 days

Insulin order changes on 2 or more days (N0350B)

15100, ADL Score Quadriplegia with ADL score >= 5

16200, J1100C Chronic obstructive pulmonary disease and shortness of breath

when lying flat

J1550A, others Fever and one of the following;

I2000 Pneumonia J1550B Vomiting

K0300 Weight loss (1 or 2) K0510B2 Feeding tube\*

K0510A2 Parenteral/IV feedings provided and administered in and by the

nursing facility

O0400D2 Respiratory therapy for all 7 days

- (1) K0710A3 is 51% or more of total calories OR
- (2) K0710A3 is 26% to 50% of total calories and K0710B3 is 501 cc or more per day fluid enteral intake in the last 7 days.

If the resident does not have one of these conditions, skip to Category IV now.

### STEP#2

If at least one of the special care conditions above is coded and the resident has a total RUG-IV ADL score of 2 or more, he or she classifies as Special Care High. **Move to Step** #3. If the resident's ADL score is 0 or 1, he or she classifies as Clinically Complex. Skip to Category V, Step #2.

### **STEP #3**

Evaluate for depression. Signs and symptoms of depression are used as a third-level split for the Special Care High category. Residents with signs and symptoms of depression are identified by the Resident Mood Interview (PHQ-9©) or the Staff Assessment of

<sup>\*</sup>Tube feeding classification requirements:

Resident Mood (PHQ-9-OV©). Instructions for completing the PHQ-9© are in Chapter 3, Section D. The following items comprise the PHQ-9©:

Resident	Staff	Description
D0200A	D0500A	Little interest or pleasure in doing things
D0200B	D0500B	Feeling down, depressed, or hopeless
D0200C	D0500C	Trouble falling or staying asleep, sleeping too much
D0200D	D0500D	Feeling tired or having little energy
D0200E	D0500E	Poor appetite or overeating
D0200F	D0500F	Feeling bad or failure or let self or others down
D0200G	D0500G	Trouble concentrating on things
D0200H	D0500H	Moving or speaking slowly or being fidgety or restless
D0200I	D0500I	Thoughts better off dead or hurting self
-	D0500J	Short-tempered, easily annoyed

These items are used to calculate a Total Severity Score for the resident interview at Item D0300 and for the staff assessment at Item D0600. The resident qualifies as depressed for RUG-IV classification in either of the two following cases:

The D0300 Total Severity Score is greater than or equal to 10 but not 99,

Resident Qualifies as Depressed

### Or

The D0600 Total Severity Score is greater than or equal to 10.

RUG-IV ADL Score	Depressed	RUG-IV Class
15-16	Yes	HE2
15-16	No	HE1
11-14	Yes	HD2
11-14	No	HD1
6-10	Yes	HC2
6-10	No	HC1
2-5	Yes	HB2
2-5	No	HB1

Yes

No

### **CATEGORY IV: SPECIAL CARE LOW**

The classification groups in this category are based on certain resident conditions or services. Use the following instructions:

### **STEP # 1**

Determine whether the resident is coded for one of the following conditions or services:

Cerebral palsy, with ADL score >=5
Multiple sclerosis, with ADL score >=5
Parkinson's disease, with ADL score >=5
Respiratory failure and oxygen therapy provided within the facility while a resident
Feeding tube*
Two or more stage 2 pressure ulcers with two or more selected skin treatments**
Any stage 3 or 4 pressure ulcer with two or more selected skin treatments $\ensuremath{^{**}}$
Two or more venous/arterial ulcers with two or more selected skin treatments $\ensuremath{^{**}}$
1 stage 2 pressure ulcer and 1 venous/arterial ulcer with 2 or more selected skin treatments**
Foot infection, diabetic foot ulcer or other open lesion of foot with application of dressings to the feet
Radiation treatment while a resident
Dialysis treatment while a resident

<sup>\*</sup>Tube feeding classification requirements:

- (1) K0710A3 is 51% or more of total calories OR
- (2) K0710A3 is 26% to 50% of total calories and K0710B3 is 501 cc or more per day fluid enteral intake in the last 7 days.

### \*\*Selected skin treatments:

M1200A,B#	Pressure relieving chair and/or bed
M1200C	Turning/repositioning
M1200D	Nutrition or hydration intervention
M1200E	Pressure ulcer care
M1200G	Application of dressings (not to feet)
M1200H	Application of ointments (not to feet)
#Count as or	ne treatment even if both provided

If the resident does not have one of these conditions, skip to Category V now.

### **STEP # 2**

If at least one of the special care conditions above is coded and the resident has a total RUG-IV ADL score of 2 or more, he or she classifies as Special Care Low. **Move to Step #3.** If the resident's ADL score is 0 or 1, he or she classifies as Clinically Complex. Skip to Category V, Step #2.

### STEP#3

Evaluate for depression. Signs and symptoms of depression are used as a third-level split for the Special Care Low category. Residents with signs and symptoms of depression are indentified by the Resident Mood Interview (PHQ-9©) or the Staff Assessment of Resident Mood (PHQ-9-OV©). Instructions for completing the PHQ-9© are in Chapter 3, Section D. The following items comprise the PHQ-9©:

Resident	Staff	Description
D0200A	D0500A	Little interest or pleasure in doing things
D0200B	D0500B	Feeling down, depressed, or hopeless
D0200C	D0500C	Trouble falling or staying asleep, sleeping too much
D0200D	D0500D	Feeling tired or having little energy
D0200E	D0500E	Poor appetite or overeating
D0200F	D0500F	Feeling bad or failure or let self or others down
D0200G	D0500G	Trouble concentrating on things
D0200H	D0500H	Moving or speaking slowly or being fidgety or restless
D0200I	D0500I	Thoughts better off dead or hurting self
-	D0500J	Short-tempered, easily annoyed

These items are used to calculate a Total Severity Score for the resident interview at Item D0300 and for the staff assessment at Item D0600. The resident qualifies as depressed for RUG-IV classification in either of the two following cases:

The D0300 Total Severity Score is greater than or equal to 10 but not 99,

### Or

The D0600 Total Severity Score is greater than or equal to 10.

Resident Qualifies as Depressed Yes\_\_\_\_ No\_\_\_\_

RUG-IV ADL Score Depressed RUG-IV Class
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15-16	Yes	LE2
15-16	No	LE1
11-14	Yes	LD2
11-14	No	LD1
6-10	Yes	LC2
6-10	No	LC1
2-5	Yes	LB2
2-5	No	LB1

RUG-IV Classification \_\_\_\_\_

### **CATEGORY V: CLINICALLY COMPLEX**

The classification groups in this category are based on certain resident conditions or services. Use the following instructions:

### STEP#1

Determine whether the resident is coded for one of the following conditions or services:

12000	Pneumonia
14900, ADL	Score Hemiplegia/hemiparesis with ADL score >=5
M1040D, E	Surgical wounds or open lesions with any selected skin treatment*
M1040F	Burns
O0100A2	Chemotherapy while a resident
O0100C2	Oxygen therapy provided within the facility while a resident
O0100H2	IV medications provided, instilled and administered exclusively by the facility while a resident
O0100I2	Transfusions while a resident

<sup>\*</sup>Selected Skin Treatments

M1200F Surgical wound care

M1200G Application of dressing (not to feet)
M1200H Application of ointments (not to feet)

If the resident does not have one of these conditions, skip to Category VI now.

### STEP#2

Evaluate for depression. Signs and symptoms of depression are used as a third-level split for the Clinically Complex category. Residents with signs and symptoms of depression are indentified by the Resident Mood Interview (PHQ-9©) or the Staff Assessment of Resident Mood (PHQ-9-OV©). Instructions for completing the PHQ-9© are in Chapter 3, section D. The following items comprise the PHQ-9©:

Resident	Staff	Description
D0200A	D0500A	Little interest or pleasure in doing things
D0200B	D0500B	Feeling down, depressed, or hopeless
D0200C	D0500C	Trouble falling or staying asleep, sleeping too much
D0200D	D0500D	Feeling tired or having little energy
D0200E	D0500E	Poor appetite or overeating
D0200F	D0500F	Feeling bad or failure or let self or others down
D0200G	D0500G	Trouble concentrating on things
D0200H	D0500H	Moving or speaking slowly or being fidgety or restless
D0200I	D0500I	Thoughts better off dead or hurting self
-	D0500J	Short-tempered, easily annoyed

These items are used to calculate a Total Severity Score for the resident interview at Item D0300 and for the staff assessment at Item D0600. The resident qualifies as depressed for RUG-IV classification in either of the two following cases:

The D0300 Total Severity Score is greater than or equal to 10 but not 99,

**Resident Qualifies as Depressed** 

### Or

The D0600 Total Severity Score is greater than or equal to 10.

0-1

	-	<del></del>
RUG-IV ADL Score	Depressed	RUG-IV Class
15-16	Yes	CE2
15-16	No	CE1
11-14	Yes	CD2
11-14	No	CD1
6-10	Yes	CC2
6-10	No	CC1
2-5	Yes	CB2
2-5	No	CB1
0-1	Yes	CA2

No

<b>RUG-IV</b>	Classification	

CA1

Yes

No

# CATEGORY VI: BEHAVIORAL SYMPTOMS AND COGNITIVE PERFORMANCE

Classification in this category is based on the presence of certain behavioral symptoms or the resident's cognitive performance. Use the following instructions:

### STEP#1

Determine the resident's ADL score. If the resident's ADL score is 5 or less, go to Step #2.

If the ADL score is greater than 5, skip to Category VII now.

### STEP#2

If the resident interview using the Brief Interview for Mental Status (BIMS) was not conducted (indicated by a value of "0" for Item C0100), skip the remainder of this step and proceed to Step #3 to check staff assessment for cognitive impairment.

Determine the resident's cognitive status based on resident interview using the BIMS. Instructions for completing the BIMS are in Chapter 3, Section C. The BIMS items involve the following:

C0200 Repetition of three words

C0300 Temporal orientation

C0400 Recall

Item C0500 provides a BIMS Summary Score for these items and indicates the resident's cognitive performance, with a score of 15 indicating the best cognitive performance and 0 indicating the worst performance. If the resident interview is not successful, then the BIMS Summary Score will equal 99.

Determine whether the resident is cognitively impaired. If the resident's Summary Score is less than or equal to 9, he or she is cognitively impaired and classifies in the Behavioral Symptoms and Cognitive Performance category. Skip to Step #5.

If the resident's summary score is greater than 9 but not 99, proceed to Step #4 to check behavioral symptoms.

If the resident's Summary Score is 99 (resident interview not successful) or the Summary Score is blank (resident interview not attempted and skipped) or the Summary Score has a dash value (not assessed), proceed to Step #3 to check staff assessment for cognitive impairment.

### STEP#3

Determine whether the resident is cognitively impaired based on the staff assessment rather than on resident interview. The RUG-IV Cognitive Performance Scale (CPS) is used to determine cognitive impairment.

The resident is cognitively impaired if one of the three following conditions exists:

- 1. B0100 Coma (B0100 = 1) and completely ADL dependent or ADL did not occur (G0110A1, G0110B1, G0110H1, G0100I1 all = 4 or 8)
- 2. C1000 Severely impaired cognitive skills (C1000 = 3)
- 3. B0700, C0700, C1000 Two or more of the following impairment indicators are present:

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B0700 > 0 Problem being understood
C0700 = 1 Short-term memory problem
C1000 > 0 Cognitive skills problem
and
```

One or more of the following severe impairment indicators are present:

B0700 >= 2 Severe problem being understood C1000 >= 2 Severe cognitive skills problem

If the resident meets the criteria for being cognitively impaired, then he or she classifies in Behavioral Symptoms and Cognitive Performance. Skip to Step #5. If he or she does not present with a cognitive impairment as defined here, proceed to Step #4.

### STEP#4

Determine whether the resident presents with one of the following behavioral symptoms:

E0100A	Hallucinations
E0100B	Delusions
E0200A	Physical behavioral symptoms directed toward others (2 or 3)
E0200B	Verbal behavioral symptoms directed toward others (2 or 3)
E0200C	Other behavioral symptoms not directed toward others (2 or 3)
E0800	Rejection of care (2 or 3)
E0900	Wandering (2 or 3)

If the resident presents with one of the symptoms above, then he or she classifies in Behavioral Symptoms and Cognitive Performance. Proceed to Step #5. If he or she does not present with behavioral symptoms or a cognitive impairment, skip to Category VII.

### **STEP # 5**

### **Determine Restorative Nursing Count**

Count the number of the following services provided for 15 or more minutes a day for 6 or more of the last 7 days:

H0200C, H0500\*\* Urinary toileting program and/or bowel toileting program

O0500A, B\*\* Passive and/or active ROM
O0500C Splint or brace assistance

O0500D, F\*\* Bed mobility and/or walking training

O0500E Transfer training

O0500G Dressing and/or grooming training
O0500H Eating and/or swallowing training

O0500I Amputation/prostheses care

O0500J Communication training

Restorative Nursing Count \_\_\_\_\_

### STEP#6

Select the final RUG-IV Classification by using the total RUG-IV ADL score and the Restorative Nursing Count.

RUG-IV ADL Score	Restorative Nursing	RUG-IV Class
2-5	2 or more	BB2
2-5	0 or 1	BB1
0-1	2 or more	BA2
0-1	0 or 1	BA1

RUG-IV Classification \_\_\_\_\_

<sup>\*\*</sup>Count as one service even if both provided

### **CATEGORY VII: REDUCED PHYSICAL FUNCTION**

### STEP#1

Residents who do not meet the conditions of any of the previous categories, including those who would meet the criteria for the Behavioral Symptoms and Cognitive Performance category but have a RUG-IV ADL score greater than 5, are placed in this category.

### **STEP # 2**

### **Determine Restorative Nursing Count**

Count the number of the following services provided for 15 or more minutes a day for 6 or more of the last 7 days:

H0200C, H0500\*\* Urinary toileting program and/or bowel toileting program

O0500A, O0500B\*\* Passive and/or active ROM

O0500C Splint or brace assistance

O0500D, O0500F\*\* Bed mobility and/or walking training

O0500E Transfer training

O0500G Dressing and/or grooming training
O0500H Eating and/or swallowing training

O0500I Amputation/prostheses care

O0500J Communication training

<sup>\*\*</sup>Count as one service even if both provided

Restorative	Nursing	Count	

### **STEP # 3**

Select the RUG-IV Classification by using the RUG-IV ADL score and the Restorative Nursing Count.

RUG-IV ADL Score	Restorative Nursing	RUG-IV Class
15-16	2 or more	PE2
15-16	0 or 1	PE1
11-14	2 or more	PD2
11-14	0 or 1	PD1
6-10	2 or more	PC2
6-10	0 or 1	PC1
2-5	2 or more	PB2
2-5	0 or 1	PB1
0-1	2 or more	PA2
0-1	0 or 1	PA1

**RUG-IV Classification** 

# **RESIDENT CLASSIFICATION**

Enter all the classifications previously determined. Using each classification the resident qualifies for assign the classification with the highest case mix index using the chart below:

Classification	Case Mix Index
ES3	3.00
ES2	2.23
ES1	2.22
RAE	1.65
RAD	1.58
RAC	1.36
RAB	1.10
RAA	0.82
HE2	1.88
HE1	1.47
HD2	1.69
HD1	1.33
HC2	1.57
HC1	1.23
HB2	1.55
HB1	1.22
LE2	1.61
LE1	1.26
LD2	1.54
LD1	1.21
LC2	1.30
LC1	1.02
LB2	1.21
LB1	0.95

	0 11:
Classification	Case Mix Index
CE2	1.39
CE1	
	1.25
CD2	1.29
CD1	1.15
CC2	1.08
CC1	0.96
CB2	0.95
CB1	0.85
CA2	0.73
CA1	0.65
BB2	0.81
BB1	0.75
BA2	0.58
BA1	0.53
PE2	1.25
PE1	1.17
PD2	1.15
PD1	1.06
PC2	0.91
PC1	0.85
PB2	0.70
PB1	0.65
PA2	0.49
PA1	0.45