

**Maine MDS RUG III Codes  
Model Version 5.20 ME for MDS 3.0**

Category	ADL Index	End Splits	RUG-III Codes	Maine Weight
<b>Rehabilitation</b>				
<b>Ultra High Rehabilitation</b> Rehabilitation Rx 720 minutes/week minimum (O0400A – C[1-3]) AND] At least 1 rehabilitation discipline 5 days/week (O0400A4 – C4) AND A second rehabilitation discipline 3 days/week (O0400A4 – C4)	16-18 9-15 4-8	Not Used Not Used Not Used	RUC RUB RUA	1.986 1.426 1.165
<b>Very High Rehabilitation</b> Rehabilitation Rx 500 minutes/week minimum (O0400A – C[1-3]) AND At least 1 rehabilitation discipline 5 days/week (O0400A4 – C4)	16-18 9-15 4-8	Not Used Not Used Not Used	RVC RVB RVA	1.756 1.562 1.217
<b>High Rehabilitation</b> Rehabilitation Rx 325 minutes/week minimum (O0400A – C[1-3]) AND At least 1 rehabilitation discipline 5 days/week (O0400A4 – C4)	13-18 8-12 4-7	Not Used Not Used Not Used	RHC RHB RHA	1.897 1.559 1.260
<b>Medium Rehabilitation</b> Rehabilitation Rx 150 minutes/week minimum (O0400A – C[1-3]) AND 5+ days received across all types of therapy (O0400A4 – C4)	15-18 8-14 4-7	Not Used Not Used Not Used	RMC RMB RMA	2.051 1.635 1.411
<b>Low Rehabilitation</b> Rehabilitation Rx 45 minutes/week minimum (O0400A – C[1-3]) AND 3+ days received across all types of therapy (O0400A4 – C4) AND 2+ nursing rehab activities at 6+ days each (O0500A-J, H0200C/H0500)	14-18 4-13	Not Used Not Used	RLB RLA	1.829 1.256
<b>Extensive Services</b>				
IV feeding in last 7 days (K0500A) OR IV medications (O0100H), suctioning (O0100D), tracheostomy care (O0100E) or ventilator/respirator (O0100F) in the last 14 days AND ADL score of 7 or more	7-18	Count of other categories (special care, clinically complex, impaired cognition), plus IV medications, plus IV feeding	SE3 SE2 SE1	2.484 2.057 1.910
OR Maine only: Traumatic brain injury (I5500)	15-18 10-14 7-9	Not Used Not Used Not Used	SE3 SE2 SE1	2.484 2.057 1.910
<b>Special Care</b>				
OR Extensive Services (see above) and ADL score of 6 or less Special Care qualifier (any one): • Cerebral Palsy (I4400) with ADL sum >= 10 • Multiple Sclerosis (I5200) with ADL sum >= 10 • Quadriplegia (I5100) with ADL sum >= 10 • Respiratory therapy (O0400D2) = 7 days • Aphasia (I4300) with feeding tube (K0500B) (calories >= 51%, or calories = 26%-50% (K0700A) and fluids >= 501 cc (K0700B)) • Radiation therapy (O0100B1-2) • Ulcers (2 sites, any stage (M0300A, M0300B1-D1, M1030)*; or 1 site stage 3 or 4 (M0300C1-D1, F1)*) AND 2+ skin treatments (M1200A-E, G-H) • Surgical wounds (M1040E) AND surgical wound care (M1200F) or application of dressing (M1200G) or application of ointment (M1200H) • Open lesions (M1040D) AND surgical wound care (M1200F) or application of dressing (M1200G) or application of ointment (M1200H) • Fever (J1550A) with dehydration (J1550C) • Fever (J1550A) with pneumonia (I2000) • Fever (J1550A) with vomiting (J1550B) • Fever (J1550A) with weight loss (K0300) • Fever (J1550A) with feeding tube (K0500B) (calories >= 51%, or calories = 26%-50% (K0700A) and fluid >= 501 cc (K0700B)) AND ADL score of 7 or more	17-18 15-16 4-14	Not Used Not Used Not Used	SSC SSB SSA	1.841 1.709 1.511

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<b>Clinically Complex</b>						
OR	Special Care qualifier (see above) and ADL score of 6 or less)	17-18D	***Signs of Depression	CC2	1.826	
	Clinically complex qualifier (any one):	17-18	No Signs	CC1	1.663	
<ul style="list-style-type: none"> <li>• Burns (M1040F)</li> <li>• Coma (B0100) AND not awake (no crosswalk**) AND ADL dependent (G0110A1, G0110B1, G0110H1, G0110I1)</li> <li>• Septicemia (I2100)</li> <li>• Pneumonia (I2000)</li> <li>• Foot lesion (M1040B, M1040C)/infection (M1040A) AND dressing to foot (M1200I)</li> <li>• Internal bleeding (J1550D)</li> <li>• Dehydration (J1550C)</li> <li>• Feeding tube (K0500B) (calories &gt;= 51%, or calories = 26%-51% (K0700A) AND fluids &gt;= 501 cc (K0700B = 2))</li> <li>• Oxygen therapy (O0100C1, O0100C2)</li> <li>• Transfusions (O0100I1, O0100I2)</li> <li>• Hemiplegia/hemiparesis (I4900) with ADL score &gt;= 10</li> <li>• Chemotherapy (O0100A1, O0100A2)</li> <li>• Dialysis (O0100J1, O0100J2)</li> <li>• Physician visits (O0600) 1+ days AND order changes (O0700) 4+ days (last 14 days)</li> <li>• Physician visits (O0600) 2+ days and order changes (O0700) 2+ days (last 14 days)</li> <li>• Diabetes (I2900) with injection (N0300) on 7 days AND order change O0700) 2+ days (last 14 days)</li> </ul>	12-16D	Signs of Depression	CB2	1.503		
		12-16	No Signs	CB1	1.389	
		4-11D	Signs of Depression	CA2	1.331	
		4-11	No Signs	CA1	1.149	
	<b>Impaired Cognition</b>					
	AND	****Score on MDS 3.0 Brief Interview for Mental Status (BIMS) <= 9. If BIMS is not completed, a CPS score is calculated using decision making (C1000), making self understood (B0700), short-term memory (C0700), coma (B0100) and eating self-performance (G0110H1). ADL score of 10 or less	6-10	2 or more nursing rehab services on 6+ days/week	IB2	1.199
			6-10	Less nursing rehab	IB1	1.152
			4-5	2 or more nursing rehab services on 6+ days/week	IA2	0.945
			4-5	Less nursing rehab	IA1	0.888
	NOTES:					
	<b>Behavior Problems</b>					
	OR	Wandering (E0900), physical abuse (E0200A), verbal abuse (E0200B), inappropriate behavior (E0200C) OR resisted care (E0800) on 4+ days/week	6-10	2 or more nursing rehab services on 6+ days/week	BB2	1.180
			6-10	Less nursing rehab	BB1	1.123
AND	Hallucinations (E0100A) or delusions (E0100B) ADL score of 10 or less	4-5	2 or more nursing rehab services on 6+ days/week	BA2	0.905	
		4-5	Less nursing rehab	BA1	0.759	
NOTES:						
<b>Reduced Physical Function</b>						
Nursing rehab service count of the following 6+ days/week: <ul style="list-style-type: none"> <li>• Passive (O0500A) OR active ROM (O0500B)</li> <li>• Amputation/prosthesis care training (O0500I)</li> <li>• Splint or brace assistance (O0500C)</li> <li>• Dressing or grooming training (O0500G)</li> <li>• Eating or swallowing training (O0500H)</li> <li>• Transfer training (O0500E)</li> <li>• Bed mobility (O0500D) OR walking training (O0500F)</li> <li>• Communication training (O0500J)</li> </ul> Add to count of Nursing Rehab: <ul style="list-style-type: none"> <li>• Scheduled toileting plan (H0200C, H0500) in the last 7 days</li> </ul>	16-18	2 or more nursing rehab services on 6+ days/week	PE2	1.454		
		16-18	Less nursing rehab	PE1	1.421	
		11-15	2 or more nursing rehab services on 6+ days/week	PD2	1.323	
		11-15	Less nursing rehab	PD1	1.281	
		9-10	2 or more nursing rehab services on 6+ days/week	PC2	1.219	
		9-10	Less nursing rehab	PC1	1.088	
		6-8	2 or more nursing rehab services on 6+ days/week	PB2	0.833	
		6-8	Less nursing rehab	PB1	0.854	
		4-5	2 or more nursing rehab services on 6+ days/week	PA2	0.776	
		4-5	Less nursing rehab	PA1	0.749	
NOTES:						
Default – Not Classified			BC1	0.749		

## Maine MDS RUG III Codes Model Version 5.20 ME for MDS 3.0

### \* Pressure ulcer conversion from MDS 2.0 to MDS 3.0:

On the MDS 2.0, items M1a-d refers to ulcers due to any cause (including venous and arterial ulcers). On the MDS 3.0, items M0300A, M0300B1, M0300C1 and M0300D1 only refer to unhealed pressure ulcers. RUG-III considers the count of ulcers (pressure ulcers, arterial, and stasis ulcers) regardless of stage. For the purpose of crosswalking the MDS 2.0 RUG-III logic to MDS 3.0, the number of venous or arterial ulcers (M1030) is added to the number of stage 1 ulcers (M0300A). To crosswalk M1d on the MDS 2.0, the number of unstageable ulcers due to slough and/or eschar (M0300F1) is added to the number of stage 4 ulcers (M0300D1).

### \*\* Time awake conversion from MDS 2.0 to MDS 3.0:

There are no fields on the MDS 3.0 that are equivalent to the time awake fields on the MDS 2.0 (N1a-N1c). For use in calculating a RUG-III group, N1a-c are set to 0 to be consistent with item B0100 on the MDS 3.0.

### \*\*\* Depression calculation on MDS 3.0 using PHQ:

1. Calculate PHQ using resident interview (D0200)
  - a. Add values in column 2 (symptom frequency) for items D0200A-I column 2 that are not missing.
  - b. Calculate the PHQ score
    - i. If the number of items missing in column 2 is 3 or greater, skip to staff assessment (D0500)
    - ii. If the number of items missing in column 2 is 2 then PHQ Score = multiply the sum by 9/7 or (1.286)
    - iii. If the number of items missing in column 2 is 1 then PHQ Score = multiply the sum by 9/8 or (1.125)
    - iv. If the number of items missing in column 2 is 0 then PHQ Score = sum of items
2. Calculate PHQ using staff assessment (D0500)
  - a. Add values in column 2 (symptom frequency) for items D0500A-J that are not missing.
  - b. Calculate the PHQ score
    - i. If the number of items missing in column 2 is 3 or greater, PHQ Score = '-'
    - ii. If the number of items missing in column 2 is 2 then PHQ Score = multiply the sum by 9/7 or (1.286)
    - iii. If the number of items missing in column 2 is 1 then PHQ Score = multiply the sum by 9/8 or (1.125)
    - iv. If the number of items missing in column 2 is 0 then PHQ Score = sum of items
3. Determine whether resident is depressed
  - a. If there are 2 or fewer missing values on the PHQ resident interview, if the adjusted PHQ scale score  $\geq 10$ , the resident is depressed. Otherwise, the resident is not depressed.
  - b. If depression cannot be calculated using a: If there are 2 or fewer missing values on the PHQ staff assessment, if the adjusted PHQ scale score  $\geq 10$ , the resident is depressed. Otherwise the resident is not depressed.
  - c. If there are 3 or more missing values in both a and b, the resident is not depressed.

### \*\*\*\* Cognitive Impairment Score (CPS) on MDS 3.0 using BIMS:

1. Calculate BIMS using items C0200, C0300A-C, C0400A-C. If any of the interview items are missing (value = "-"), then skip to item 2. Add the value from each of the fields. If total is less than or equal to 9, the resident is cognitively impaired.
2. If unable to calculate cognitive impairment using BIMS, then use the following logic:
  - a. Count the number of non-independence items: short-term memory (C0700=1); cognitive skills for daily decision making (C1000 = 1 or 2); makes self understood (B0700 = 1, 2, or 3).
  - b. Count the number of moderate to severe impairment items: cognitive skills for daily decision making (C1000 = 2); makes self understood (B0700 = 2 or 3).
  - c. Calculate CPS score
    - i. If coma (B0100 = 1) and cognitive skills for daily decision making not answered (C1000 not 0, 1 or 2) then CPS score is 6.
    - ii. If cognitive skills for daily decision making is severely impaired (C1000 = 3)
      1. if eating self-performance is 4 or 8 (G0110H1 = 4 or 8) then CPS score = 6
      2. for other eating self-performance values (G0110H1 = -, 0, 1, 2, 3, 7) then CPS score = 5
    - iii. If the count of non-independence items (see item a above) is 2 or 3
      1. if the count of moderate to severe impairment items (see item b above) is 2 then CPS score = 4
      2. if the count of moderate to severe impairment items (see item b above) is 1 then CPS score = 3
      3. if the count of moderate to severe impairment items (see item b above) is 0 then CPS score = 2
    - iv. if the count of non-independence items (see item a above) is 1 then CPS score = 1