

# MDS RAI MANUAL UPDATES 10/1/2025

## SECTION A

- The word gender in A0800 is now item A0810: Sex. The word gender was replaced throughout the section, but coding options of Male/Female are unchanged.

A0810.	Sex
Enter Code	1. Male
<input type="checkbox"/>	2. Female

- Item A1250 (Transportation) has been replaced with item A1255 (Transportation), that is only completed if the resident has been in the community for less than 366 days, and requires one interview question and one response versus two. The new question reads "In the past 12 months, has lack of reliable transportation kept you from medical appointments, meetings, work or from getting things needed for daily living?"

A1255.	Transportation
Complete only if A0310B = 01 and A2300 minus A1900 is less than 366 days	
Enter Code	In the past 12 months, has lack of reliable transportation kept you from medical appointments, meetings, work or from getting things needed for daily living?
<input type="checkbox"/>	0. Yes
	1. No
	7. Resident declines to respond
	8. Resident unable to respond

## SECTION D

- For resident interview items in D0150 PHQ-2 to 9 interviews, there is a new clarification as follows: *"In the rare situation that the resident cannot provide a frequency, following a yes response to a symptom in Column 1, enter a dash in Column 2. CMS expects a dash response to be rare."* Consider probing questions to attempt to find an answer to frequency prior to using a dash.

## SECTION GG

- For the GG0100C stair activity, "by any safe means" may include a resident scooting up and down stairs on their buttocks.
- The following clarification was given for footwear in GG0130H. "Consider an item that covers all or part of the foot as footwear, even if it extends up the leg, and do not also consider it as a lower-body dressing item.
- If the resident uses a recliner as their "bed" (preferred or necessary sleeping surface), assess the resident's need for assistance using that sleeping surface when coding all bed mobility items (roll



left and right, sit to lying, lying to sitting on the side of bed). The recliner as the bed can also be used to assess when doing chair/bed-to-chair transfer.

- The manual clarifies that if an activity occurs even once in the 3 day look back period, that this should be used for usual performance. “The assessment timeframe is up to 3 calendar days based on the target date. During the assessment timeframe, some activities may be performed by the resident multiple times, whereas other activities may only occur once.”

## SECTION J

- The definition of fall has been updated and now includes if a resident is pushed by another resident causing the fall as a result of overwhelming external force.
- Clarification for loss of balance during intentional therapeutic intervention is given which states to include as a fall if there is a loss of balance during this activity and the resident comes to rest on the ground or next lower surface despite the clinician’s effort to intercept the fall.
- Major injury definition has been updated to read as follows: “Includes, but is not limited to, traumatic bone fractures, joint dislocations/subluxations, internal organ injuries, amputations, spinal cord injuries, head injuries, and crush injuries.”

### MAJOR INJURY

Includes, *but is not limited to,* traumatic bone fractures, joint dislocations/subluxations, internal organ injuries, amputations, spinal cord injuries, head injuries, and crush injuries.

- Fractures confirmed to be pathologic (vs. traumatic) are not considered a major injury resulting from a fall.

## SECTION K

- Includes clarification when coding items K0300 (Weight Loss) and K0310 (Weight Gain). It now states “In cases in which multiple weights for the resident may exist during the time period being evaluated, select the weight on the date closest to the appropriate time point.”

## SECTION M

- Clarification given in section M for wounds that are unstageable on admission, but become unstageable for another reason later. In this case the wound would continue to be coded as present on admission.



## SECTION N

- Recommendation in the manual that the facility may wish to identify a resource for supporting coding of the medications given in N0415. It also states that the facility may use the manufacturer package insert or can work with the pharmacist to confirm the medication class.

## SECTION O

- Section O0400 has now been changed to O0390 and is a checkbox item to select any therapies that were delivered for 15 minutes per day in the last 7 days. If respiratory therapy is checked it will open item O0400C to document the number of day respiratory therapy was provided for at least 15 minutes per day in the last 7 days.

<b>O0390.</b>	<b>Therapy Services</b> Indicate therapies administered for at least 15 minutes a day on one or more days in the last 7 days
↓	Check all that apply
<input type="checkbox"/>	A. Speech-Language Pathology and Audiology Services
<input type="checkbox"/>	B. Occupational Therapy
<input type="checkbox"/>	C. Physical Therapy
<input type="checkbox"/>	D. Respiratory Therapy
<input type="checkbox"/>	E. Psychological Therapy
<input type="checkbox"/>	Z. None of the above

## SECTION X

- Clarifications are given to show what errors would require a manual deletion or move facility request be completed in IQIES vs. completing a modification or inactivation of the record. The following situations would require a manual deletion/move facility request. Additional clarification is given in chapter 5.
  - The record has the wrong unit certification or licensure designation in Item A0410.
  - The record has the wrong state code or facility ID in the control Items STATE\_CD or FAC\_ID.
  - The record submitted was not for OBRA or Medicare Part A purposes.
  - The record is a test record inadvertently submitted as production.

