

# Changes in Status

## What is the trigger?

A “change in status” is a change in two (2) or more areas on the Minimum Data Set (MDS). It can be a decline or improvement. It can be physical or mental.

## Does the nursing facility submit the forms for Change in Status on all residents to COMRU?

NO. The nursing facility should submit only changes in status on the Mentally Ill and Mentally Retarded clients.

## Who completes the Changes in Status?

These are completed by the nursing home in which the resident is residing. It is not completed by the hospital. A change in status will be completed in conjunction with the MDS. It is the responsibility of the nursing facility to identify the change in status for a mentally ill or mentally retarded client. The MDS coordinator and the person who completes the DA 124 forms should work closely together to ensure they are completed.

## What forms are completed for a Change in Status?

A DA 124 A/B and a DA 124 C form must be completed and submitted to COMRU. The nursing facility should indicate “Change in Status” on the client’s DA 124 application. **If not indicated the application will be processed as a Pre-admission Level II screening and payment could be affected.**

**The facility should attach a short summary indicating the reason for the change in status.  
(ie: What were the triggers)**

## What is the timeframe?

There is no timeframe. The facility should be assessing continuously for changes in status. If a change in status is indicated for Mentally Ill or Mentally Retarded clients a Change in Status (DA 124 A/B and C) should be sent to COMRU.

## Scenarios:

- #1: The client is admitting from the community (home, RCF, ALF). The client has never been in a nursing facility. The client has had inpatient psych in the past two years. This is not a change in status. The client would be considered an initial admission and the pre-admission screening must be completed prior to admission. If a client is out of a nursing facility greater than 60 days, it will be an initial admission and a pre-admission screening would need to be completed.
- #2: The client has had inpatient psych in the past 2 years (trigger for the Level II screening) or has mental retardation. The client has had the initial pre-admission screening and been admitted to the nursing facility. The client is then sent to the hospital for medical, physical and/or psychiatric reasons. The client is then readmitted to the original nursing facility. The nursing facility must assess the client for a change in status and submit forms if indicated.
- #3: Same scenario as #2 but the client is admitted to a different nursing facility. The facility does not complete a change in status. The facility completes the MDS – admission assessment. The nursing facility does not submit DA 124 application to COMRU. The nursing facility must contact the previous nursing facility and obtain a copy of the DA 124 application and the Level II screening. The nursing facility will then continue to assess the client for any changes in status.
- #4: The initial application does not indicate a client as a Level II, however after nursing facility admission the client has now admitted to inpatient psych and/or a Level II was never completed when one should have been completed. The trigger for a Level II MI screening is inpatient psychiatric treatment in the past 2 years. The client has now triggered the need for a Level II screening. The DA 124 application must be completed and submitted to COMRU.