**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.