

**RAPID RUG GUIDE MDS 3.0**  
**RUG-III, VERSION 5.12 44-GROUPER**

**Rehabilitation - ADLs = 4 - 18**

**Ultra High Intensity Criteria**

720 minutes or more (total) of therapy (O0400A1-3, B1-3, C1-3)	<b>16 – 18</b>	<b>RUC</b>
2 or more therapies provided (O0400A1-3, B1-3, C1-3)	<b>9 – 15</b>	<b>RUB</b>
5 days or more per week of one type of therapy (O0400A4, B4, C4)	<b>4 – 8</b>	<b>RU A</b>
3 days or more for the second therapy (O0400A4, B4, C4)		

**Very High Intensity Criteria**

500 minutes or more (total) of therapy (O0400A1-3, B1-3, C1-3))	<b>16 – 18</b>	<b>RVC</b>
5 days or more per week of one type of therapy (O0400A4, B4, C4)	<b>9 – 15</b>	<b>RVB</b>
	<b>4 – 8</b>	<b>RVA</b>

**High Intensity Criteria**

325 minutes or more (total) of therapy (O0400A1-3, B1-3, C1-3))	<b>13 – 18</b>	<b>RHC</b>
5 days or more per week of one type of therapy (O0400A4, B4, C4)	<b>8 – 12</b>	<b>RHB</b>
	<b>4 – 7</b>	<b>RHA</b>

**Medium Intensity Criteria**

150 minutes or more (total) of therapy (O0400A1-3, B1-3, C1-3))	<b>15 – 18</b>	<b>RMC</b>
At least 5 days per week of therapy of any combination (O0400A4, B4, C4)	<b>8 – 14</b>	<b>RMB</b>
	<b>4 – 7</b>	<b>RMA</b>

**Low Intensity Criteria**

45 minutes or more (total) of therapy (O0400A1-3, B1-3, C1-3)	<b>14 – 18</b>	<b>RLB</b>
At least 3 days per week of therapy of any combination (O0400A4, B4, C4)	<b>4 – 13</b>	<b>RLA</b>
At least 2 Nursing Restorative Programs, each administered for at least 15 minutes, each for 6 or more days (H0200C, H0500, O0500A-J)		

**Extensive Services - ADLs >= 7**

1. Parenteral/IV (K0500A)
2. Suctioning (O0100D1, 2)
3. Tracheostomy Care (O0100E1, 2)
4. Ventilator/Respirator (O0100F1, 2)
5. IV Medication (O0100H1, 2)
- ✓ Evaluate for Special Care, Clinically Complex, Impaired Cognition for the total Extensive Services Count

**Ext. Service Count RUG-III**

<b>4 or 5</b>	<b>SE3</b>
<b>2 or 3</b>	<b>SE2</b>
<b>0 or 1</b>	<b>SE1</b>

**Special Care - ADLs >= 7**

1. Cerebral Palsy (I4400) **with** ADLs >=10
2. Quadriplegia (I5100) **with** ADLs >= 10
3. Multiple Sclerosis (I5200) **with** ADLs >=10
4. Fever (J1550A) **and** at least **one** of the following:
  - Pneumonia (I2000)
  - Vomiting (J1550B)
  - Dehydration (J1550C)
  - Weight Loss (K0300)
  - Feeding Tube (K0500B) \*
5. Feeding tube (K0500B) \* **and** Aphasia (I4300)
  - \* Feeding tube classification must include:
    - (1) 51% or more calories (K0700A) **OR**
    - (2) 26-50% calories (K0700A) **AND** 501cc (K0700B) or more per day enteral/parenteral intake

*(Continued)*

**ADL Score RUG-III**

<b>17 – 18</b>	<b>SSC</b>
<b>15 – 16</b>	<b>SSB</b>
<b>7 – 14</b>	<b>SSA</b>

**Special Care - ADLs >= 7 (continued)**

6. 2 or more ulcers at any stage (M0300A, B1, C1, D1, F1, M1030) \*\*
7. Any stage 3 or 4 pressure ulcer (M0300C1, D1, F1) \*\*
  - \*\* 2 or more skin treatments:
    - (1) Pressure relieving device chair/ bed (M01200A, B) (Count as one even if both provided)
    - (2) Turning/repositioning program (M1200C)
    - (3) Nutrition or hydration intervention to manage skin problems (M01200D)
    - (4) Ulcer care (M01200E)
    - (5) Application of dressings other than to feet (M01200G)
    - (6) Application of oint/med other than to feet (M01200H)
8. Open lesions (M1040D) \*\*\*
9. Surgical Wounds (M1040E) \*\*\*
  - \*\*\* 1 or more skin treatment
    - (1) Surgical wound care (M1200F)
    - (2) Application of dressings other than to feet (M1200G)
    - (3) Application of oint/med other than to feet (M1200H)
10. Radiation Treatment (O0100B1, 2)
11. Respiratory Therapy (O0400D2) provided for 7 days
12. Qualified for Extensive Services with ADL <7

**Clinically Complex - ADLs = 4 - 18**

1. Coma (B0100) **AND** completely ADL dependent (G0110A1, B1, H1 and I1 all = 4 or 8)
2. Pneumonia (I2000)
3. Septicemia (I2100)
4. Diabetes (I2900) **AND** Injections (N0300) = 7 days **AND** Physician Order Changes (O0700) >= 2 days
5. Hemiplegia/Hemiparesis (I4900) **with** ADLs >= 10
6. Dehydration (J1550C)
7. Internal Bleeding (J1550D)
8. Feeding Tube (K0500B) \*
9. Infection of the foot (M1040A) **with** application of dressing (M1200I)
10. Open lesions on the foot (M1040B or C) **with** application of dressing (M1200I)
11. Burns (M1040F)
12. Chemotherapy (O0100A1, 2)
13. Oxygen therapy (O0100C1, 2)
14. Transfusions (O0100I1, 2)
15. Dialysis (O0100J1, 2)
16. Physician Examinations (O0600)/Physician Orders (O0700) in the last **14 days** Examinations >= 1 day **AND** Order Changes >= 4 days **OR** Examinations >= 2 days **AND** Order Changes >= 2 days
17. Qualified for Special Care with ADL <7
- ✓ PHQ-9 Severity Score (D0300 or D0600) >=10 considered Depressed for classification

**ADL Score Depressed RUG-III**

<b>17 – 18</b>	<b>Yes</b>	<b>CC2</b>
<b>17 – 18</b>	<b>No</b>	<b>CC1</b>
<b>12 – 16</b>	<b>Yes</b>	<b>CB2</b>
<b>12 – 16</b>	<b>No</b>	<b>CB1</b>
<b>4 – 11</b>	<b>Yes</b>	<b>CA2</b>
<b>4 – 11</b>	<b>No</b>	<b>CA1</b>

**Impaired Cognition - ADLs <=10**

1. Coma (B0100) **AND** completely ADL dependent (G0110A1, B1, H1 and I1 all = 4 or 8) **AND** Decision making (C1000) blank or ‘—’
2. BIMS Summary Score (C0500) <=9
3. Severely impaired decision making skills (C1000) = 3

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**Impaired Cognition - ADLs <=10 (continued)**

4. Two or more of the following indicators are present  
 B0700 > 0 problem making self understood  
 C0700 = 1 short term memory problem  
 C1000 > 0 impaired decision-making skills

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

- B0700 >= 2 severe problem making self understood  
 C1000 >= 2 severe decision-making impairment  
 ✓ Nursing Restorative Programs

**ADL Score NR RUG-III**

6 - 10	2+	IB2
6 - 10	0 - 1	IB1
4 - 5	2+	IA2
4 - 5	0 - 1	IA1

**Behavior Problems - ADLs <=10**

1. Hallucinations (E0100A)  
 2. Delusions (E0100B)  
 3. Physical Beh. Symptoms (E0200A coded 2 or 3) 4 or more days  
 4. Verbal Beh. Symptoms (E0200B coded 2 or 3) 4 or more days  
 5. Other Beh. Symptoms (E0200C coded 2 or 3) 4 or more days  
 6. Rejection of Care (E0800 coded 2 or 3) 4 or more days  
 7. Wandering (E0900, coded 2 or 3) 4 or more days  
 ✓ Nursing Restorative Programs

**ADL Score NR RUG-III**

6 - 10	2+	BB2
6 - 10	0 - 1	BB1
4 - 5	2+	BA2
4 - 5	0 - 1	BA1

**Reduced Physical Functions - ADLs = 4 - 18**

Any assessment that does not meet any of the prior criteria or had a match in Impaired Cognition or Behavior Problems with an ADL score of 11 or more will classify in Reduced Physical Functions.

- ✓ Nursing Restorative Programs

**ADL Score NR RUG-III**

16 - 18	2+	PE2
16 - 18	0 - 1	PE1
11 - 15	2+	PD2
11 - 15	0 - 1	PD1
9 - 10	2+	PC2
9 - 10	0 - 1	PC1
6 - 8	2+	PB2
6 - 8	0 - 1	PB1
4 - 5	2+	PA2
4 - 5	0 - 1	PA1

**Nursing Restorative Programs**

- |  |                                     |
|--|-------------------------------------|
| Current toileting plan (H0200C)****    | Transfer (O0500E)                   |
| Bowel training program (H0500)****     | Walking (O0500F)****                |
| Range of motion (passive) (O0500A)**** | Dressing or grooming (O0500G)       |
| Range of motion (active) (O0500B)****  | Eating or swallowing (O0500H)       |
| Splint or brace assistance (O0500C)    | Amputation/prosthesis care (O0500I) |
| Bed mobility (O0500D)****              | Communication (O0500J)              |
- \*\*\*\* Count as one service (H0200C and H0500; O0500A and B; O0500D and F) even if both are provided

**Nursing Restorative Criteria**

- ✓ Measurable objectives and interventions must be documented in the care plan and in the clinical record
- ✓ Evidence of periodic evaluation by licensed nurse must be present in the clinical record
- ✓ Nurse assistants/aides must be trained in the techniques that promote resident involvement in the activity
- ✓ These activities are carried out or supervised by members of the nursing staff

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**Nursing Restorative Criteria (continued)**

- ✓ This category does not include groups with more than four residents per supervising helper or caregiver

Nursing Restorative is evaluated for the following RUG-III categories: Rehabilitation Low, Impaired Cognition, Behavior Problems and Reduced Physical Functions.

Count the number of Nursing Restorative Programs in Section P3a - j received each for at least 15 minutes, each administered for 6 or more days. Include scheduled toileting plan and/or bladder retraining program in the nursing restorative count.

**ADL Calculation**

- Step 1:** To calculate the score of G0110A (Bed Mobility), G0110B (Transfer), and G0100I (Toilet Use), use the following chart. The eating ADL calculation will begin in Step #2.

Column A =		Column B =	ADL Score =
'—', 0, 1 or 7	and	any number	= 1
2	and	any number	= 3
3 or 4	and	'—', 0, 1 or 2	= 4
3, 4 or 8	and	3 or 8	= 5

- Step 2:** a) To complete the Eating ADL Score calculation use the criteria below:

K0500A = checked	<b>ADL Score = 3 OR</b>
K0500B = checked + K0700A = 3 or 4	<b>ADL Score = 3 OR</b>
K0500B = checked + K0700A = 2 <b>AND</b> K0700B = 2, 3, 4, 5	<b>ADL Score = 3</b>

- b) If no parenteral/IV (K0500A) or feeding tube (K0500B) return to G0110H1 to calculate the eating score using chart below:

Column A =	ADL Score =
'—', 0, 1 or 7	= 1
2	= 2
3, 4 or 8	= 3

- Step 3:** The total ADL Score range possibilities are 4 through 18 and include the ADL sum for G1a, G1b, G1i and the eating score. An ADL score of 4 represents the most independent resident while a score of 18 represents the most dependent resident.

Bed Mobility (G1a) =	_____
Transfer (G1b) =	_____
Toilet Use (G1i) =	_____
Eating =	_____
<b>Total ADL Score =</b>	_____