

**aanac.org**

**MDS 3.0 RAC-CT™  
CERTIFICATION  
& RECERTIFICATION**

**30  
Point**

Presented By Official Training Partner:

**KHCA**  
KANSAS HEALTH CARE ASSOCIATION

July 28-30	Lawrence
August 25-27	Wichita
September 22-24	Topeka
November 3-5	Lawrence

**AANAC**

AANAC and/or Training Partners are not responsible for any fees incurred due to cancellations or postponements. We will make every effort to abide by our schedule.

## Setting the Standard for Long-Term Care Nursing Education

Official AANAC Training Partner  
Kansas Health Care Association  
117 SW 6th Ave, Suite 200  
Topeka, KS 66603  
785-267-6003 FAX 785-267-0833

## AANAC RAC-CT® Program



### How the Certification Program Works: (3-Days)

To be eligible to become RAC-CT® Certified (Resident Assessment Coordinator - Certified®) an individual must:

1. Be a clinician/professional involved in the RAI process.
2. Complete 10 AANAC courses, of which 7 are required as the core curriculum:
  - MDS Coding for OBRA and PPS
  - RUG-IV
  - OBRA Timing and Scheduling
  - CAAs
  - PPS Timing and Scheduling
  - Introduction to Medicare Part A
  - Care Planning

The 3 electives for this workshop are:

- Accurately Assessing Activities of Daily Living (ADLs)
- Five-Star Quality Rating System
- Accurately Assessing Pain and the MDS 3.0

**\*Certifications and Recertifications are good for 2 years once all required courses are completed and passed.**

### Continuing Education Credit

**Nurses** – The Kansas Health Care Association is approved as a provider of continuing education by the Kansas State Board of Nursing. This offering is approved for 27.0 contact hours applicable for RN and LPN relicensure. (KSBN LT0030-0338)

**Administrators** - This course offering is approved for 27 continuing education clock hours for Kansas licensed adult care home administrators in the core area of administration by the Kansas Department of Health and Environment. KDHE Health Occupations Credentialing Approved Sponsorship Number: LTS-A0001.

### About the Presenter: Rebecca “Becky” LaBarge

Rebecca LaBarge, R.N., RAC-CT, Director of Clinical Reimbursement has worked in the nursing field for more than 20 years. Her work has taken her from the acute care setting where she worked in various capacities earning her Trauma Nurse Specialist certification, to Healthcare Informatics where she managed the implementation and training of healthcare software and finally to the long term care setting.

She began her long term care career in the CCRC community working as nursing supervisor in a 430 bed skilled facility and then moving into the MDS role. She has worked as MDS Nurse, Regional MDS Nurse, Corporate MDS Nurse, Corporate Director of Care Management and Clinical Reimbursement and as a Nurse Consultant.

Becky has spoken and presented educational programs on the RAI Process including MDS, PPS Case Management, Quality Indicators/Quality Measures, RUGS 53, Care Planning as well as Long Term Care Software Training. She is an active member of the Kansas City RAI Support Group, Illinois Health Care Association and is an AANAC Master Teacher.

## Program Objectives

### (Day 1) MDS 3.0 Coding for OBRA and PPS/ Accurately Assessing Activities of Daily Living (ADLs) and the MDS 3.0

Describe the relationship between the purpose of the MDS and the types of questions that appear on the MDS.

State the intent of each MDS item.

Accurately code each item of the MDS.

Discuss the effects of inaccurate MDS coding.

### (Day 2) OBRA Timing and Scheduling for MDS 3.0

Discuss requirements for scheduling and timing of OBRA required MDS assessments.

Identify appropriate use of the discharge assessments and entry records.

State the criteria for completing the Significant Change in Status Assessment.

Discuss correct use of the Significant Correction assessments.

Identify criteria and timing issues related to Section X, the Correction Request.

### (Day 2) PPS Timing and Scheduling and the MDS 3.0

Describe the process for setting the ARD for a SNF PPS assessment.

Identify the impact of unscheduled PPS assessments on payment.

State the regulatory time frames for completing PPS MDS assessments.

Describe the process for combining OBRA-required and PPS-required assessments.

### (Day 2) Resource Utilization Groups (RUGs) IV and the MDS 3.0

Understand the development of the RUG-IV 66 Group classification system used in the Medicare Prospective Payment System (PPS).

Calculate the RUG-IV 66 Group classification from the MDS 3.0 item set.

Incorporate the RUG-IV 66 Group classification component into the case mix reimbursement calculation.

Value the importance of accurate completion of the MDS in a RUG-based case mix reimbursement system.

### (Day 2) Care Area Assessments (CAAs) and the MDS 3.0

Describe the role and concept of the CAA.

List 3 sources of evidence-based tools for conducting the CAA assessments.

State the components of CAA documentation.

### (Day 3) Introduction to Medicare Part A

Identify the criteria necessary for the beneficiary to qualify for skilled nursing facility (SNF) benefits.

Discuss the facility's responsibilities when a resident is denied Part A coverage and the resident's right to a demand bill.

Explain how to make the decision about whether or not to cover a resident on Part A.

Describe the role of the Health Insurance Prospective Payment System (HIPPS) codes.

Describe the documentation that the SNF must complete to be in compliance as a Medicare provider.

Describe the medical review process.

### (Day 3) Care Planning and the MDS 3.0

Describe the relationship between the RAI process, the care plan, and quality resident care.

List 3 broad areas to be considered for care planning in addition to the RAI assessment information.

List the components of an effective care plan.

Discuss the role of critical thinking in the care planning process.

Identify the members of the Interdisciplinary Team and discuss their role in the care planning process.

List 4 occasions that trigger the need to reevaluate the care plan.

Define "interim care plan".

### (Day 3) Accurately Assessing Pain for the MDS 3.0

Describe the scope of the pain problem in long-term care facilities.

Differentiate between acute and chronic pain.

Describe the physiology of pain transmission.

Identify barriers to optimal pain management.

List five key components for effective pain assessment.

### (Day 3) Five-Star Rating System

Explain the role of health inspections in the Five-Star Quality Rating System.

Identify the effect that Quality Measures have on the number of stars a facility earns.

Discuss the details of the staffing calculation and its effect on the facility's rating.

Understand key strategies for positively affecting the facility's Five-Star Quality Rating.

### Program Information:

- Training is from 8am to 5pm
- (Registration begins at 7:30am)
- Lunch: 12pm to 1pm
- You have 90 days to pass the final exams; upon successful completion, students will receive their RAC-CT certificate by mail

**KHCA Registration Form  
AANAC MDS 3.0 RAC-CT Certification Program and Re-Certification Program**

**Certification** (new to Program or past certification expired prior to Dec 31, 2006)

**Re-Certification** (current certification expires after Dec 31, 2006)

DATE	AANAC Member	Non-AANAC Member
___ July 28-30	Lawrence ___\$450	___\$650
___ August 25-27	Wichita ___\$450	___\$650
___ Sept.22-24	Topeka ___\$450	___\$650
___ Nov 3-5	Lawrence ___\$450	___\$650

DATE	AANAC Member	Non-AANAC Member
___ July 28-29	Lawrence ___\$350	___\$550
___ August 25-26	Wichita ___\$350	___\$550
___ Sept.22-23	Topeka ___\$350	___\$550
___ Nov 3-4	Lawrence ___\$350	___\$550

**Become an AANAC Member and start saving today!**

\_\_\_ AANAC Membership \$110 (plus \$15 handling fee \$125 total)  
Total amount due \$\_\_\_\_\_

**If registering more than one person, please copy this form for each person.**

**Please Print**

Name \_\_\_\_\_ Name on nametag \_\_\_\_\_

Title \_\_\_\_\_ License Type \_\_\_\_\_ License # \_\_\_\_\_

Facility \_\_\_\_\_ Phone Number ( ) \_\_\_\_\_

Facility Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(Required for AANAC membership)

Email address \_\_\_\_\_ (For on-line testing & enrollment verification)

AANAC Number (required for discount) \_\_\_\_\_

(Or check box above for KHCA to secure a membership for you)

Payment method: \_\_\_ Check \_\_\_ MasterCard \_\_\_ Visa

Receipt Required \_\_\_ Yes \_\_\_ No \_\_\_ Bill me (KHCA members only)

*If paying by credit card, please indicate the following:*

\_\_\_\_\_  
Name on Card (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Exp. date

\_\_\_\_\_  
Amount

**Over please for important information about training locations..**

**Please copy this information before sending in registration**

### **Registration Policy**

Registrations must be received **Two Weeks** prior to the start of the class. Each class is limited to 70 individuals - "First come first served." Registrations can be made by mail or fax. Phone registrations **will not** be accepted. AANAC rate will not be honored without AANAC number unless KHCA has been authorized to secure membership on your behalf.

For registration questions, please call **785-267-6003**.

### **Cancellations/Substitutions Per Training Partner Agreement with AANAC**

Cancellations **MUST** be received in writing. Refunds minus a \$50 processing fee, will be given up to 7 business days prior to the workshop. Cancellations after that will be refunded half the registration fee.

**AANAC Membership is non-refundable.** "No-Shows" will receive **no refund**. Special dispensation will be given with proof of survey during the training dates.

For questions regarding registration, call the KHCA office at **(785) 267-6003**.

Substitutions are always welcome, however the substitute will need an AANAC membership to substitute at the AANAC member price. If the substitute is seeking continuing education credit, be prepared to provide proper licensing information at the time of registration. Registrations and/or cancellations will not be accepted by phone. Please fax any changes to 785-267-0833.

### **Suggested Attire**

Casual and comfy - remember to wear layers as it is difficult to regulate the temperature of meeting rooms. A light jacket is often appropriate.

## **AANAC Membership**

Membership in AANAC provides an instant network of peers in the MDS Process.  
Membership dues are only \$110 per year.

Registrants may become AANAC Members and immediately take advantage of the member rates. There are three easy ways to become an AANAC Member:

1. Call AANAC at 800-768-1880
2. Enroll on line at [www.aanac.org](http://www.aanac.org)
3. Check the AANAC Membership box on the class registration form and for a small fee, have KHCA obtain the membership for you.

### **July 28-30 Lawrence, KS**

Holiday Inn Holidome  
200 MacDonald Drive  
Lawrence, KS 66044  
785-841-7077

### **August 25-27 Wichita, KS**

Holiday Inn Select  
549 S Rock Road  
Wichita, KS 67207  
316-686-7131

### **September 22-24 Topeka, KS**

Holiday Inn Holidome  
605 SW Fairlawn Rd  
Topeka, KS 66606  
785-272-8040

### **November 3-5 Lawrence, KS**

Holiday Inn Holidome  
200 MacDonald Drive  
Lawrence, KS 66044  
785-841-7077