

PDPM

PATIENT DRIVEN PAYMENT MODEL

NON THERAPY ANCILLARY

(NTA)

# REQUIREMENTS FOR THIS TRAINING...

- Please ensure you are in a **quiet, uninterrupted space** — Today's material is **specific to North Dakota** reimbursement and involves **critical reimbursement changes** effective **January 1, 2026.**

- On **1/1/2026**, all **North Dakota SNFs** will transition from the **RUGs payment methodology** to the **PDPM methodology**, which includes:

- SLP (Speech Language Pathology) =20% of payment
- Nursing Component =60% of payment
- NTA (Non-Therapy Ancillary) =20% of payment

**\*Please have your RAI manual out and ready to reference throughout todays training.**



### **Understand the Role of NTAs in PDPM:**

Define what Non-Therapy Ancillaries (NTAs) are.

Explain how NTAs contribute to a resident's overall case-mix classification under PDPM & the impact NTAs will have on North Dakota's new payment methodology.



### **Identify Qualifying NTA Conditions & Services:**

Recognize the list of the 50+ NTA items that can impact reimbursement.

Understand how conditions, comorbidities, and treatments are captured and scored.



### **Explain NTA Scoring and Calculation:**

Describe the NTA point system and how it influences the NTA case-mix group.

Understand the calculation of the NTA component rate within the ND PDPM payment structure.



### **Accurately Capture NTA Information on the MDS:**

Identify key MDS sections (e.g., Section H, I, O, K & M) relevant to NTA scoring.

Discuss the importance of accurate and timely documentation to support NTA item coding.



### **Apply Coding and Clinical Documentation Best Practices:**

Provide examples of how clinical documentation supports MDS coding for NTA items.

Review common errors and how to avoid them.



### **Evaluate the Financial and Clinical Impact of NTAs:**

Illustrate how accurate NTA coding can affect facility reimbursement and care planning.

Demonstrate the relationship between NTA conditions and resident acuity.



### **Promote Interdisciplinary Collaboration:**

Emphasize the role of nursing, therapy, dietary, and other departments in identifying NTA items.

Encourage communication strategies that ensure comprehensive capture of all qualifying NTAs.

# OBJECTIVES



# UNDERSTANDING PDPM AND THE NTA COMPONENT

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What is PDPM?

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What is the PDPM classification system based off?

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What does NTA stand for?

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What impacts the classification of NTA points?

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Why do we recognize NTAs for reimbursement?

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Why are NTAs recognized by CMS under PDPM?

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# WHAT ARE NTAS?

- ▶ **NTAs (Non-Therapy Ancillaries)** are specific clinical conditions, comorbidities, and treatments that require additional resources to care for a skilled nursing facility (SNF) resident. Under the **Patient-Driven Payment Model (PDPM)** used by Medicare, NTAs are one of the five components used to calculate reimbursement for care, based on a resident's needs rather than therapy minutes.


# WHY ARE NTAS EVEN MORE IMPORTANT IN ND WITH THIS TRANSITION FROM RUGS TO PDPM?

## **PDPM Component Weighting for North Dakota (Effective 1/1/2026):**

- 1.Speech Language Pathology (SLP) – 20%**
- 2.Nursing – 60%**
- 3.Non-Therapy Ancillaries (NTA) – 20%**

*Note: North Dakota will **NOT** use a Variable Per Diem adjustment for NTAs.*

# WHY DO NTAS MATTER.....

- Reflect the clinical complexity of the resident.
  - Influence staffing needs and care planning.
  - Ensure appropriate reimbursement for high-acuity residents.
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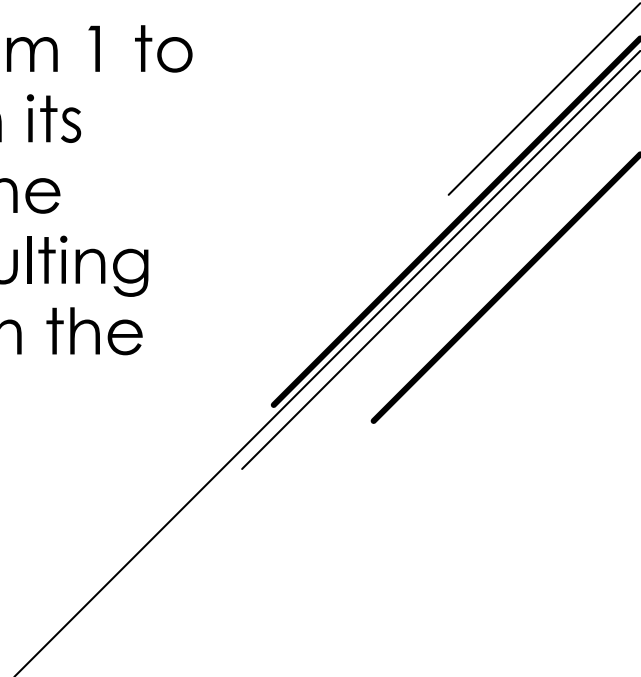


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NTA comorbidity scoring is a weighted count of certain comorbidities & treatments that a SNF patient has, which then is used to classify the patient into a NTA component payment group under PDPM.

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The individual NTA conditions have points ranging from 1 to 8. This assigned number of points per NTA is based on its relative costliness. Meaning the higher the number, the more it costs to care for the individual, most likely resulting in requiring a higher level of assistance and care from the SNF.

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Condition/Extensive Service	MDS Item	Points
HIV/AIDS <b>ND DOES NOT</b> recognize this comorbidity level N/A (SNF claim)		8
Parenteral IV Feeding: Level High	K0520A3, K0710A2	7
Special Treatments/Programs: Intravenous Medication Post-admit Code	O0110H1b	5
Special Treatments/Programs: Invasive Mechanical Ventilator or Respirator Post-admit Code	O0110F1b	4
Parenteral IV Feeding: Level Low	K0520A3, K0710A2, K0710B2	3
Lung Transplant Status	I8000	3
Special Treatments/Programs: Transfusion Post-admit Code	O0110I1b	2
Major Organ Transplant Status, Except Lung	I8000	2
Active Diagnoses: Multiple Sclerosis Code	I5200	2
Opportunistic Infections	I8000	2
Active Diagnoses: Asthma COPD Chronic Lung Disease Code	I6200	2
Bone/Joint/Muscle Infections/Necrosis - Except: Aseptic Necrosis of Bone	I8000	2
Chronic Myeloid Leukemia	I8000	2
Wound Infection Code	I2500	2
Active Diagnoses: Diabetes Mellitus (DM) Code	I2900	2
Endocarditis	I8000	1
Immune Disorders	I8000	1
End-Stage Liver Disease	I8000	1
Narcolepsy and Cataplexy	I8000	1
Cystic Fibrosis	I8000	1
Special Treatments/Programs: Tracheostomy Care Post-admit Code	O0110E1b	1
Active Diagnoses: Multi-Drug Resistant Organism (MDRO) Code	I1700	1
Special Treatments/Programs: Isolation Post-admit Code	O0110M1b	1
Specified Hereditary Metabolic/Immune Disorders	I8000	1
Morbid Obesity	I8000	1
Special Treatments/Programs: Radiation Post-admit Code	O0110B1b	1
Stage 4 Unhealed Pressure Ulcer Currently Present <sup>1</sup>	M0300D1	1
Psoriatic Arthropathy and Systemic Sclerosis	I8000	1
Chronic Pancreatitis	I8000	1
Proliferative Diabetic Retinopathy and Vitreous Hemorrhage	I8000	1

Other Foot Skin Problems: Foot Infection Code, Diabetic Foot Ulcer Code, Other Open Lesion on Foot Code	M1040A, M1040B, M1040C	1
Complications of Specified Implanted Device or Graft	I8000	1
Bladder and Bowel Appliances: Intermittent Catheterization	H0100D	1
Inflammatory Bowel Disease	I1300	1
Aseptic Necrosis of Bone	I8000	1
Special Treatments/Programs: Suctioning Post-admit Code	O0110D1b	1
Cardio-Respiratory Failure and Shock	I8000	1
Myelodysplastic Syndromes and Myelofibrosis	I8000	1
Systemic Lupus Erythematosus, Other Connective Tissue Disorders, and Inflammatory Spondylopathies	I8000	1
Diabetic Retinopathy - Except: Proliferative Diabetic Retinopathy and Vitreous Hemorrhage	I8000	1
Nutritional Approaches While a Resident: Feeding Tube	K0520B3	1
Severe Skin Burn or Condition	I8000	1
Intractable Epilepsy	I8000	1
Active Diagnoses: Malnutrition Code	I5600	1
Disorders of Immunity - Except: RxCC97: Immune Disorders	I8000	1
Cirrhosis of Liver	I8000	1
Bladder and Bowel Appliances: Ostomy	H0100C	1
Respiratory Arrest	I8000	1
Pulmonary Fibrosis and Other Chronic Lung Disorders	I8000	1

# CHAPTER 6

## PG. 6-30 & 6-31

## RAI MANUAL

#### NTA Score Ranges, Case-Mix Groups, PDPM Groups, & CMI Values

NTA Score Range	NTA Case-Mix Group	PDPM Group	CMI
12+	NA	A	3.06
9-11	NB	B	2.39
6-8	NC	C	1.74
3-5	ND	D	1.26
1-2	NE	E	0.91
0	NF	F	0.68

# NORTH DAKOTA

NTA SCORE RANGE, CASE MIX GROUPS, PDPM GROUPS AND CMI VALUES

## 1. ACTIVE DIAGNOSIS- 2 LOOKBACK PERIODS DETERMINE DIAGNOSIS CODING

-PHYSICIAN DOCUMENTED WITHIN THE LAST 60-DAYS

-DIRECT RELATIONSHIP TO ONE OR MORE OF THE FOLLOWING DURING THE 7-DAY LOOKBACK PERIOD



## 2. DIRECT RELATIONSHIPS INCLUDE THE FOLLOWING DURING THE 7-DAY LOOKBACK PERIOD

-FUNCTIONAL STATUS/LIMITATIONS-ROM, CONTRACTURES, MUSCLE WEAKNESS OR FATIGUE, DECREASED ABILITY TO PERFORM ADLS, PARESIS OR PARALYSIS

-COGNITIVE STATUS

-MOOD & BEHAVIOR

-MEDICAL TREATMENT

-NURSING MONITORING- DEFINED AS ONGOING CLINICAL OVERSIGHT PROVIDED BY A LICENSED NURSE, SUCH AS-(SERIAL BLOOD PRESSURE MONITORING & MEDICAL MANAGEMENT)

-RISK FOR DEATH

SINCE THE MAJORITY OF NTA POINTS COME FROM DIAGNOSES AND CONDITIONS CODED IN **SECTION I** OF THE MDS, IT'S CRITICAL TO UNDERSTAND EXACTLY **WHAT TO LOOK FOR AND HOW TO CODE** THESE ITEMS PROPERLY.

# HOW DO YOU DETERMINE WHAT COMORBIDITIES IN SECTION I COUNT TOWARDS YOUR NTA POINTS?

- ▶ Your software vendor may tell you how many points you get for a NTA comorbidity.
  - ▶ Example: In PCC & Matrix, diagnosis will list the number of points you get beside the diagnosis.
    - ▶ Check with your vendor to determine it's capabilities if you are unsure.






## OR

- ▶ CMS provides a link each year in the **PDPM Resources**. This (ZIP) file will include the new FY updates for PDPM ICD-10 Mapping (ZIP)
  - ▶ <https://www.cms.gov/medicare/payment/prospective-payment-systems/skilled-nursing-facility-snf/patient-driven-model>

- ▶ <https://www.cms.gov/medicare/payment/prospective-payment-systems/skilled-nursing-facility-snf/patient-driven-model>
- ▶ Scroll down to “PDPM Resources”
- ▶ Select the most current FY update PDPM ICD-10 Mapping (ZIP)

## PDPM Resources

- [FY 2025 PDPM ICD-10 Mapping \(ZIP\)](#) (effective 10-01-2024)

 PDPM-ICD10-Mappings-FY2025.xlsx	Microsoft Excel Worksheet
 PDPM-ICD10-Mappings-FY2025-Cl...	Microsoft Excel Comma S...
 PDPM-ICD10-Mappings-FY2025-N...	Microsoft Excel Comma S...
 PDPM-ICD10-Mappings-FY2025-O...	Microsoft Excel Comma S...
 PDPM-ICD10-Mappings-FY2025-S...	Microsoft Excel Comma S...

HOW TO ACCESS INFORMATION IN LINK .....



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General Number

B10 : NTA\_Comorbidty

PDPM ICD-10-CM Mappings FY2025		
Purpose		ICD-10-CM codes related mappings for the purposes of resident classification under the Patient-Driven Payment Model (PDPM) for Medicare Part A SNF stays.
Table of Contents		
ICD-10-CM to Clinical Category Mapping	<a href="#">Clinical Category</a>	Mapping of the ICD-10-CM Codes Recorded in Item I0020B of the MDS Assessment to PDPM Clinical Categories
SLP Comorbidity to ICD-10-CM Mapping	<a href="#">SLP Comorbidity</a>	Mapping of Comorbidities Included in the PDPM SLP Component to ICD-10-CM Codes
NTA Comorbidity to ICD-10-CM Mapping	<a href="#">NTA Comorbidity</a>	Mapping of Comorbidities Included in the PDPM NTA Component to ICD-10-CM Codes
Updates		
<p>July 29, 2024</p> <ol style="list-style-type: none"> <li>Updated all three mappings to include ICD-10-CM codes effective October 1, 2024.</li> <li>Reflected all changes finalized in the FY2025 SNF PPS Final Rule.</li> <li>Removed duplicate rows in the <i>SLP-Comorbidity</i> tab for codes C02.8, C03.9, C10.8 and C14.8.</li> </ol>		



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Mapping of Comorbidities Included in the PDPM NTA Component to ICD-10-CM Codes

A B C D E

## Mapping of Comorbidities Included in the PDPM NTA Component to ICD-10-CM Codes

### Overview

The following mapping of CCs and RxCCs to ICD-10-CM codes is based on the FY2024 midyear Risk Adjustment model software (using v22 for CCs and v05 for RxCCs) found at <https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk-Adjustors/2024-model-software/icd-10-mappings>. New have been added from the latest FY2025 ICD-10-CM addenda found here <https://www.cms.gov/medicare/coding-billing/icd-10-codes> and were assigned to NTA comorbidities that share the same code family (i.e. the first 3 digits) to ensure the established NTA comorbidities are up to date. The FY2025 ICD-10-CM Endocarditis comorbidity and to confirm if any existing codes become unbillable and need to be removed from the existing NTA mappings.

Sort Order	Comorbidity Description	RxCC/CC	ICD-10-CM Code	ICD-10-CM Code Description
2131	Complications of Specified Implanted Device or Graft	N/A	T85.635D	Leakage of other nervous system device, implant or graft, subsequent encounter
2132	Complications of Specified Implanted Device or Graft	N/A	T85.695D	Other mechanical complication of other nervous system device, implant or graft, subsequent encounter
2133	Complications of Specified Implanted Device or Graft	N/A	T85.72XD	Infection and inflammatory reaction due to insulin pump, subsequent encounter
2134	Complications of Specified Implanted Device or Graft	N/A	T85.730D	Infection and inflammatory reaction due to ventricular intracranial (communicating) shunt, subsequent encounter
2135	Complications of Specified Implanted Device or Graft	N/A	T85.731D	Infection and inflammatory reaction due to implanted electronic neurostimulator of brain, electrode (lead), subsequent encounter
2136	Complications of Specified Implanted Device or Graft	N/A	T85.732D	Infection and inflammatory reaction due to implanted electronic neurostimulator of peripheral nerve, electrode (lead), subsequent encounter
2137	Complications of Specified Implanted Device or Graft	N/A	T85.733D	Infection and inflammatory reaction due to implanted electronic neurostimulator of spinal cord, electrode (lead), subsequent encounter
2138	Complications of Specified Implanted Device or Graft	N/A	T85.734D	Infection and inflammatory reaction due to implanted electronic neurostimulator, generator, subsequent encounter
2139	Complications of Specified Implanted Device or Graft	N/A	T85.735D	Infection and inflammatory reaction due to cranial or spinal infusion catheter, subsequent encounter
2140	Complications of Specified Implanted Device or Graft	N/A	T85.738D	Infection and inflammatory reaction due to other nervous system device, implant or graft, subsequent encounter
2141	Complications of Specified Implanted Device or Graft	N/A	T85.79XD	Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts, subsequent encounter
2142	Complications of Specified Implanted Device or Graft	N/A	T85.810D	Embolism due to nervous system prosthetic devices, implants and grafts, subsequent encounter
2143	Complications of Specified Implanted Device or Graft	N/A	T85.820D	Fibrosis due to nervous system prosthetic devices, implants and grafts, subsequent encounter
2144	Complications of Specified Implanted Device or Graft	N/A	T85.830D	Hemorrhage due to nervous system prosthetic devices, implants and grafts, subsequent encounter
2145	Complications of Specified Implanted Device or Graft	N/A	T85.840D	Pain due to nervous system prosthetic devices, implants and grafts, subsequent encounter
2146	Complications of Specified Implanted Device or Graft	N/A	T85.850D	Stenosis due to nervous system prosthetic devices, implants and grafts, subsequent encounter
2147	Complications of Specified Implanted Device or Graft	N/A	T85.860D	Thrombosis due to nervous system prosthetic devices, implants and grafts, subsequent encounter
2148	Complications of Specified Implanted Device or Graft	N/A	T85.890D	Other specified complication of nervous system prosthetic devices, implants and grafts, subsequent encounter



LET'S LOOK AT A  
COUPLE  
EXAMPLES...



# EXAMPLE 1

1. USE CMS ZIP FILE TO DETERMINE WHAT COMORBIDITY DESCRIPTION THE ICD-10 CODE FALLS UNDER & NTA POINT VALUE

MORBID OBESITY-Z68.41

-BODY MASS INDEX (BMI)

40.0-44.9 ADULT

2. USE THE GRAPH IN CHAPTER 6, PAGE 6-30 & 6-31 TO DETERMINE WHERE ON THE MDS THIS NEEDS TO BE CODED TO CAPTURE NTA POINTS.

MORBID OBESITY-

- CODE I8000

- 1 NTA POINT

Condition/Extensive Service	MDS Item(s)	Points
<input type="checkbox"/> Morbid Obesity	I8000	1

# EXAMPLE 2

1. USE CMS ZIP FILE TO DETERMINE WHAT COMORBIDITY DESCRIPTION THE ICD-10 CODE FALLS UNDER & NTA POINT VALUE

RESPIRATORY ARREST- R09.2

2. USE THE GRAPH IN CHAPTER 6, PAGE 6-30 & 6-31 TO DETERMINE WHERE ON THE MDS THIS NEEDS TO BE CODED TO CAPTURE NTA POINTS.

RESPIRATORY ARREST-  
- CODE I8000  
- 1 NTA POINT

Condition/Extensive Service	MDS Item(s)	Points
<input type="checkbox"/> Respiratory Arrest	I8000	1

# Calculating NTAs

## KEY TIPS

USE **ICD-10 MAPPING TOOLS** OR THE **CMS PDPM GROUPER TOOL** TO ENSURE CODES QUALIFY.

CHECK THE **MDS 3.0 RAI MANUAL** TO PROPERLY CODE SERVICES LIKE IV MEDS, SUCTIONING, ETC.

DOCUMENT EVERYTHING CLEARLY IN THE MEDICAL RECORD — AUDITORS MAY REVIEW NTA JUSTIFICATIONS.

### NTA Score Ranges, Case-Mix Groups, PDPM Groups, & CMI Values

NTA Score Range	NTA Case-Mix Group	PDPM Group	CMI
12+	NA	A	3.06
9-11	NB	B	2.39
6-8	NC	C	1.74
3-5	ND	D	1.26
1-2	NE	E	0.91
0	NF	F	0.68

# ND CALCULATION=AKF

▶ (A) **SLP** =  $0.64 \text{ CMI} \times 0.20 \text{ (20\%)} = 0.128 \text{ CMI}$

▶ (K) **NSG** =  $1.35 \text{ CMI} \times 0.60 \text{ (60\%)} = 0.81 \text{ CMI}$

▶ (F) **NTA** 0 points =  $0.68 \text{ CMI} \times 0.20 \text{ (20\%)} = 0.136 \text{ CMI}$

▶  $0.128(\text{SLP}) + 0.81(\text{NSG}) + 0.136(\text{NTA}) = \underline{1.07 \text{ overall CMI}}$

# ND CALCULATION=AKC

- ▶ (A) **SLP** =  $0.64 \text{ CMI} \times 0.20 \text{ (20\%)} = 0.128 \text{ CMI}$
  - ▶ (K) **NSG** =  $1.35 \text{ CMI} \times 0.60 \text{ (60\%)} = 0.81 \text{ CMI}$
  - ▶ **(C) NTA 6 points** =  $1.74 \text{ CMI} \times 0.20 \text{ (20\%)} = 0.348 \text{ CMI}$
- ▶  $0.128(\text{SLP}) + 0.81(\text{NSG}) + 0.348(\text{NTA}) = \underline{1.29 \text{ overall CMI}}$

# ND CALCULATION=BRD

- ▶ (B) **SLP** =  $1.72 \text{ CMI} \times 0.20 \text{ (20\%)} = 0.344 \text{ CMI}$
  - ▶ (R) **NSG** =  $0.98 \text{ CMI} \times 0.60 \text{ (60\%)} = 0.588 \text{ CMI}$
  - ▶ (D) **NTA 5 points** =  $1.26 \text{ CMI} \times 0.20 \text{ (20\%)} = 0.252 \text{ CMI}$
- ▶  $0.344(\text{SLP}) + 0.588(\text{NSG}) + 0.252(\text{NTA}) = \underline{1.18 \text{ overall CMI}}$

# QUESTIONS

